

VAU.S. Department
of Veterans Affairs**Fact Sheet**Office of Public Affairs
Media RelationsWashington, DC 20420
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www.va.gov**Veterans Access, Choice, and Accountability Act of 2014**
Title I: Choice Program and Health Care Collaboration

On August 7, 2014, President Obama signed into law the Veterans Access, Choice, and Accountability Act of 2014 (Public Law 113-146) (“VACAA”). Technical revisions to VACAA were made on September 26, 2014, when the President signed into law the Department of Veterans Affairs Expiring Authorities Act of 2014 (Public Law 113-175). The Department of Veterans Affairs’ (VA) goal continues to be to provide timely, high-quality health care for Veterans.

Section 101 of VACAA requires VA to establish a temporary program (“the Choice Program”) to improve Veterans’ access to health care by allowing eligible Veterans to use eligible health care providers outside of the VA system (non-VA care). Sections 102 and 103 of VACAA are also discussed below.

Background

In order to improve VA’s ability to deliver high-quality health care to Veterans, section 101 of the VACAA requires VA to expand the options for eligible Veterans to elect to use non-VA health care for a period of up to three years, based either on the distance a Veteran lives from a VA facility, or if he or she is experiencing wait-times beyond the 30 day standard . This is referred to as the Choice Program. Veterans who meet certain eligibility requirements will be able to elect to receive care from eligible non-VA entities and providers through the Program. VA must enter into agreements with eligible non-VA health care entities and providers for them to participate in the Program. Prior to VACAA being passed, VA had mechanisms in place to purchase non-VA care, which are still available to VA. VACAA will enhance VA’s non-VA care options.

Choice Fund and Choice Program

VACAA includes a \$10 billion fund from which VA must pay for non-VA care furnished as part of the Choice Program. VA will provide a Choice Card to all Veterans who were enrolled in the VA health care system as of August 1, 2014, and to recently discharged combat Veterans. Eligibility criteria are discussed in greater detail below.

Eligibility

A Veteran must have been enrolled in VA health care on or before August 1, 2014, or be eligible to enroll as a recently discharged combat Veteran within 5 years of separation. Additionally, a Veteran must also meet at least one of the following criteria.

- a) The Veteran is told by his/her local VA medical facility that he/she will need to wait more than 30 days from his/her preferred date or the date medically determined by his/her physician.
- b) The Veteran's current residence is more than 40 miles from the closest VA health care facility.
- c) The Veteran resides in a location other than Guam, American Samoa, or the Republic of the Philippines and needs to travel by plane or boat to the VA medical facility closest to his/her home.
- d) The Veteran faces a geographic challenge, such as extensive distances around water or other geologic formations, such as mountains, that presents a significant travel hardship.

Cost Sharing

If an eligible Veteran has another health-care plan, VA will be secondarily responsible for costs associated with non-service connected care and services furnished to eligible Veterans through the Choice Program and primarily responsible for service connected care.

Medical Records

When a Veteran receives care from an eligible non-VA health care entity or provider, the entity or provider must submit to VA a copy of any medical record information related to the care and services provided. This information will be included in the Veteran's medical record maintained by the Department.

Indian Health Service and Native Hawaiian Health Care Systems

VA will work with the Indian Health Service (IHS) to ensure that certain medical facilities operated by an Indian tribe or tribal organization are aware of the opportunity to negotiate reimbursement agreements with VA. This is in accordance with section 102(a) of VACAA.

VA will enter into contracts or agreements with certain Native Hawaiian Health Care Systems (NHHCS) for reimbursement of direct care services provided to eligible Veterans. This is in accordance with section 103 of VACAA.

Implementation

- VA submitted a report to Congress the week of October 6 redefining the wait-time goals of the Veterans Health Administration (VHA). The report establishes the wait-time goal as being within 30 days from the date requested by the Veteran for the appointment, as long as that date is clinically appropriate.
- VA hosted an [Industry Day](#) at the VA's Denver, Colorado Acquisitions and Logistics Center to seek input from the private sector on how best to provide administrative support in the process of issuing Veteran Choice Cards. VA recognizes that partnership with the private sector to implement this new law will be important.
- As of October 2014, VA has streamlined how we pay for hospital care, medical services, and other health care furnished through non-VA providers. This marks a significant change in the way VA conducts business as required by VACAA.

Frequently Asked Questions

Q: How long will it take to implement the Choice Program?

A: In order to ensure Veterans receive high-quality and timely health care, VA is working to implement VACAA, including the Choice Program, as quickly as possible. VA will be staging implementation of the Choice Program, with the first round being implemented on November 5, 2014.

Q: How will Veterans get their Choice Card?

A: VA will mail the Choice Card to Veterans enrolled in VA health care as of August 1, 2014, and to recently discharged combat Veterans who enroll within the 5 year window of eligibility. Not all Veterans who receive the Card will be able to participate in the Choice Program – they must meet the criteria established under the new law. VA will implement this program in stages.

Q: When will Veterans get their Choice Card?

A: The Choice Card will be issued in three phases. The first group of Choice Cards along with a letter explaining eligibility for this program will be sent by November 5, 2014, to Veterans who may live more than 40 miles from a VA facility. The next group of Choice Cards and letters will be sent by November 17 to those Veterans who are currently waiting for an appointment longer than 30 days from their preferred date or the date determined to be medically necessary by their physician. The final group of Choice Cards and letters will be sent between December and January to the remainder of all Veterans enrolled for VA health care who may be eligible for the Choice Program in the future.

Q: Is the criteria 40 miles or 30 days?

A: Eligibility for the Choice Program is based on the Veteran's place of residence or the inability to schedule an appointment within the "wait-time goals" of VHA, which have been established as 30 days from the date preferred by the Veteran, or the date medically determined by his/her physician. A Veteran could be eligible under one or both of these criteria. Please note that Veterans who are eligible based on their place of residence may elect non-VA care for any service that is clinically necessary. Veterans who are eligible based on "wait-time" may select non-VA care only for an appointment for the service that cannot be scheduled within the "wait-time goals" of VHA.

Q: Does the 40 mile rule refer to whether the specialty need (for example, Orthopedic Surgery) is available within 40 miles, or 40 miles from any VA facility, whether or not the specialty, in this example Orthopedics, is available there.

A: The law is clear that eligibility must be based on the distance from the Veteran's residence to *any* VA medical facility, even if that facility does not offer the specific medical service the Veteran requires for that particular visit.

Q: What are the criteria used to determine the 40 mile radius? Is it similar to the Dashboard used to calculate mileage reimbursement?

A: VA will calculate the distance between a Veteran's residence and the nearest VA medical facility using a straight-line distance, rather than the driving distance. VA is developing an interactive tool that will be available on va.gov beginning in early November for Veterans to determine their potential eligibility for the Choice Program based on their place of residence. Veterans will enter their address information into the tool, and the tool will calculate their distance to the nearest site of VA care, and provide that mileage and information on their eligibility for the Choice Program to the Veteran online.

Q. How will eligibility be determined for those Veterans who receive a "Choice Card," and are there limitations on what service they qualify for outside of the VA system?

A: Once a Veteran receives a Choice Card, they will be eligible to use the Program if they meet the specific eligibility criteria discussed above and call to receive approval for use. Veterans who are eligible based upon their place of residence will be eligible to use the Choice Program for any services that are clinically necessary. Veterans who are eligible because of the "wait-time" criterion will only be able to receive a non-VA appointment for the episode of care related to the service that cannot be scheduled within 30 days from his/her preferred date or the date medically determined by his/her physician.