



CHAMPVA FACT SHEET 01-16

For Outpatient Providers and Office Managers

What is CHAMPVA?

CHAMPVA is a health benefits program in which the Department of Veterans Affairs (VA) shares the cost of certain health care services and supplies with eligible beneficiaries (see Eligibility Fact Sheet 01-3 for criteria for CHAMPVA coverage). CHAMPVA is managed by the VA's Health Administration Center (HAC) in Denver, Colorado. We process CHAMPVA applications, determine eligibility, authorize benefits, and process medical claims.

How does CHAMPVA relate to TRICARE?

Both are federal programs, however, an individual who is eligible for TRICARE is not eligible for CHAMPVA. Although similar, TRICARE (formerly CHAMPUS – which is administered by the Department of Defense) should not be confused with CHAMPVA. TRICARE provides coverage to the families of active duty service members, families of service members who died while on active duty, and retirees and their families, whether or not the veteran is disabled.

Is preauthorization required for services?

Certain types of care/services require advance approval commonly known as preauthorization. This approval or preauthorization is extremely important and the failure to obtain it may result in denial of the claim. Preauthorization is required for:

- Dental care
- Durable medical equipment with a purchase price or total rental price of \$300 or more
- Hospice services
- Mental health/substance abuse services (see Mental Health and Substance Use Disorder Benefits Fact Sheet 01-1)
- Transplants

Do I need approvals for referrals to specialists or for diagnostic tests?

No, as long as they are medically necessary.

Are case management and utilization reviews performed?

Yes, clinical claims reviews are performed for a variety of medical services including physical, occupational and speech therapy, home health, skilled nursing, rehabilitation, and utilization of controlled substances. Simply submit the medical documentation along with your claim. Utilization reviews are also performed for services requiring preauthorization.

Is there a contract or agreement that I must sign to accept/participate in CHAMPVA?

No. CHAMPVA does not have contract providers. You must be properly licensed in your state to receive payment from CHAMPVA and cannot be on the Medicare exclusion list.

Do I have to accept the CHAMPVA allowable rate?

Yes, under 38 CFR section 272(b) (3) and (4), providers must accept the CHAMPVA allowable rate and cannot balance bill the beneficiary.

How do I get a claim paid?

The HCFA-1500 should be sent to:

VA Health Administration Center
CHAMPVA
PO Box 65024
Denver, CO 80206-9024

This is the only address that should be used for CHAMPVA claim submissions.

If the beneficiary has other health insurance (OHI), they should be billed first. The explanation of benefits (EOB) from the OHI should then be submitted with the claim for reimbursement to CHAMPVA. By law, CHAMPVA is always secondary payer except to Medicaid, State Victims of Crime Compensation Programs, and supplemental CHAMPVA policies.

What does CHAMPVA pay?

In most cases, CHAMPVA pays equivalent to Medicare/TRICARE rates. CHAMPVA has an outpatient deductible (\$50 per person up to \$100 per family per calendar year) and a cost share of 25%. You should collect the 25% allowable cost share from the patient except when the patient has other health insurance.

If the patient has other health insurance, then CHAMPVA pays the lesser of either 75% of the allowable amount after \$50 calendar year deductible is satisfied, or the remainder of the charges and the beneficiary will normally have no cost share.

How fast does CHAMPVA pay?

CHAMPVA normally pays 95 percent of claims within 30 days.

Are there special considerations for Ambulatory Surgery Centers?

Yes, they must have Medicare approval to perform the specific procedure at free-standing surgical centers.

How do I know if someone is CHAMPVA eligible?

Every CHAMPVA beneficiary has a CHAMPVA Authorization Card that looks like this (not all cards have a Plan Number or Group Number):

<p>CHAMPVA Benefit Coverage/Limitations – see the CHAMPVA Handbook for information on covered benefits and limitations.</p> <p>This is also your Pharmacy Card.</p> <p>Preauthorization – required for the following services.</p> <ul style="list-style-type: none"> • Organ and bone marrow transplants • Hospice services • Most mental health/substance abuse services • All dental care • All durable medical equipment with a purchase price or rental price of \$300 or more <p>Preauthorization Requests</p> <p>Medical Services 1-800-733-8387 Mental Health/Substance Abuse 1-800-424-4018</p>	<div style="text-align: right;"> <p>Authorization Card P.O. Box 65024 Denver, CO 80206-9024</p> </div> <p>Department of Veterans Affairs Health Administration Center CHAMPVA Plan Number: _____ Group Number: _____ A-Card Number: _____</p> <p>Note: Include A-Card Number on all claims and correspondence</p> <table border="1" style="width: 100%;"> <tr> <td style="width: 33%;">Effective Date</td> <td style="width: 33%;">Expiration Date</td> <td style="width: 33%; text-align: right;">Assistance 1-800-733-8387 hac.inq@med.va.gov</td> </tr> </table>	Effective Date	Expiration Date	Assistance 1-800-733-8387 hac.inq@med.va.gov
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VA Form 10-7959, Sep 2001 (RS)

How do I get more information?

- Mail: VA Health Administration Center
CHAMPVA
PO Box 65023
Denver, CO 80206-9023
- Phone: 1-800-733-8387 Monday - Friday 8:15 AM – 6:00 PM Eastern Time
- FAX: 1-303-331-7804
- E-mail: HAC.INQ@MED.VA.GOV
- Website: www.va.gov/hac