

CHAMPVA POLICY MANUAL

CHAPTER: 3
SECTION: 2.1
TITLE: COST SHARE

AUTHORITY: 38 CFR 17.270(a) and 17.274(a)

RELATED AUTHORITY: 32 CFR 199.4(f) and Public Law 100-202.

I. EFFECTIVE DATE

December 16, 1983

II. POLICY

The beneficiary cost share is twenty-five percent (25%) of the CHAMPVA-determined allowable amount in excess of the annual calendar year deductible.

III. EXCEPTIONS

A. Services subject to the diagnosis related group (DRG): For services based on the prospective payment system, the cost share is the lesser of:

1. the per diem times the number of inpatient days,
2. 25% of the billed amount, or
3. the **base** DRG amount.

Note: The cost share is never to exceed the **base** DRG amount. **In establishing the beneficiary cost share, the base DRG will not include the education factor or the cost/stay outlier adjustment as applicable.**

B. Services provided through the VA. Unlike services received from private sources, services received through VA facilities are not cost shared by the beneficiary. The following programs provide services through the VA:

1. CHAMPVA Inhouse Treatment Initiative (CITI).
2. Meds by Mail (MbM) program.
3. Durable medical equipment (DME) purchased through VA.

END OF POLICY