

February 23, 2011

**IMPLEMENTATION OF SECTIONS 511, 512, AND 513 OF PUBLIC LAW 111-163,
CAREGIVER AND VETERANS OMNIBUS HEALTH SERVICES ACT OF 2010**

1. PURPOSE: This Veterans Health Administration (VHA) Directive outlines policy and procedures for the implementation of Sections 511, 512, and 513 of Public Law 111-163, Caregiver and Veterans Omnibus Health Services Act of 2010.

2. BACKGROUND

a. On May 5, 2010, the President signed into law, Public Law 111-163, the Caregivers and Veterans Omnibus Health Services Act of 2010. This law provides assistance to caregivers of Veterans and improves the provisions of health care services to Veterans. In most cases, the benefits authorized under this law were effective on the date of passage, May 5, 2010. VHA has begun the extensive work required to implement the requirements set forth in Public Law 111-163 and has determined that sections 511, 512, and 513 can be implemented immediately.

(1) Section 511 exempts catastrophically disabled Veterans from copayments for hospital care and medical services, which includes copayments for prescription drugs.

(2) Section 512, authorizes Veterans in receipt of the Medal of Honor increased priority by placement into Department of Veterans Affairs (VA) enrollment Priority Group 3, and;

(3) Section 513, with respect to Veterans who served in Vietnam and are presumed to have been exposed to herbicides, removed the expiration date (2002) thereby re-establishing this treatment authority for Vietnam-era herbicide exposed Veterans. Additionally, section 513 specified that Veterans of the Persian Gulf War are those who served in the Southwest Asia theater of operations between August 2, 1990, and November 11, 1998.

b. On Friday, June 30, 2010, instructions for issuing catastrophically disabled Veterans refunds were sent to facilities through outlook email to all Network Directors and Business Implementation Managers.

3. POLICY: It is VHA policy that the requirements set forth in sections 511, 512, and 513 of Public Law 111-163 are implemented.

4. ACTION

a. **Director of the Health Eligibility Center.** The Director of the Health Eligibility Center is responsible for ensuring:

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(1) Enrollment notification is mailed to Medal of Honor recipients and catastrophically disabled Veterans informing them of any change in their enrollment priority group or copayment status.

(2) Veterans who have been validated as receiving a Medal of Honor are enrolled into the highest priority group for which the Veteran is eligible, but never lower than Priority group 3.

(3) Veterans who served in Vietnam between January 9, 1962, and ending May 7, 1975, or Veterans who served in the Southwest Asia theater of operations between August 2, 1990, and November 11, 1998, are enrolled into the highest Priority group for which the Veteran is eligible, but never below Priority group 6.

b. **Medical Facility Director.** Medical Facility Directors are responsible for ensuring, until Veterans Health Information Systems and Technology Architecture (VistA) modifications are in place, that the following manual processes are followed:

(1) Cancellation of bills or refunding copayments for Catastrophically Disabled Veterans.

(2) Eligibility staff verify that any Veteran who served in Vietnam or who served during the Gulf War in the Southwest Asia theater of operations between August 2, 1990 and November 11, 1998 have their eligibility, military service dates, and conflict location correctly entered into VistA.

5. REFERENCES: Public Law 111-163 enacted May 5, 2010.

6. FOLLOW-UP RESPONSIBILITY: The Chief Business Officer (16) is responsible for the contents of this Directive. Questions should be referred to (202) 461-1589.

7. RECESSIONS: None. This VHA Directive expires February 29, 2016.

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