Women's Health Transition Training

PARTICIPANT HANDBOOK

VA | U.S. Department of Veterans Affairs

Welcome to the Women's Health Transition Training Participant Handbook

On this page, we have highlighted interactive tools you can use to navigate the digital guide.

Women's Health Transition Training Participant Handbook
Updated May 2021

Disclaimer

This handbook was created to be used in conjunction with the VA Women's Health Transition Training program. The information contained within this handbook is current as of the date of the last update and all due diligence was used in compiling and validating the information within this handbook. All information, representations, links or other messages are subject to change. Please refer to VA.gov for the most up-to-date information regarding VA care, services and health information. A number of third party links appear herein. By using a link to a third party's website you assume sole responsibility. VA does not assume any responsibility for third party website content, including any offers, information and opinions contained therein.

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Shifting from an active duty role is more than just a job change, it is a cultural change. This section focuses on the shift in mentality from the Military Health System (MHS) to the Department of Veterans Affairs (VA). We will also explore how your role in managing your health care will be different between MHS and VA.

Phase 2: Understanding the VA 11

The VA can seem like a big puzzle, let us help you put the pieces together. This section discusses VA's transformation, specifically the changes to the infrastructure, care models and VA culture so you can take charge of your health and well-being and live your life to the fullest.

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Acronym List

The list below describes frequently used acronyms throughout the Handbook.

Acronym	Description
CBOC	Community-Based Outpatient Clinic
DOD	Department of Defense
DWHP	Designated Women's Health Provider
IDES	Integrated Disability Evaluation System
IPV	Intimate partner violence
IPVAP	Intimate Partner Violence Assistance Program
LARC	Long-acting reversible contraceptives
LEEP	Loop electrosurgical excision procedure
LGBT	Lesbian, gay, bisexual and transgender
LGBT VCC	Lesbian, Gay, Bisexual and Transgender Veteran Care Coordinator
MCC	Maternity Care Coordinator
MHS	Military Health System
MST	Military sexual trauma
OEF/OIF/OND/OFS	Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn/Operation Freedom's Sentinel
OTH	Other than honorable
PACT	Patient Aligned Care Team
PCM	Primary Care Manager
PC-MHI	Primary Care-Mental Health Integration
PCP	Primary Care Provider
PFPT	Pelvic floor physical therapy
PSC	Polytrauma System of Care
PTS	Posttraumatic stress

Acronym List *(continued)*

Acronym	Description
PTSD	Posttraumatic stress disorder
SAFE	Sexual assault forensic exams
SAPRO	Sexual Assault Prevention and Response Office
TAP	Transition Assistance Program
TBI	Traumatic brain injury
TCM	Transition and Care Management
TPA	Transition Patient Advocate
VA	U.S. Department of Veterans Affairs
VAMC	VA medical center
VBA	Veterans Benefits Administration
VISN	Veterans Integrated Service Network
VHA	Veterans Health Administration
WHC	Women's Health Center
WHCC	Women's Health Clinic Champion
WHTT	Women's Health Transition Training
WHMD	Women's Health Medical Director
WH-PCP	Women's Health Primary Care Provider
WMHC	Women's Mental Health Champion
WVPM	Women Veterans Program Manager

Objectives

The Women's Health Transition Training (WHTT) course is designed to help you gain a better understanding of VA and the services that are available to you. After taking this course you will be able to:

1. Describe what it means to be an advocate for your own health care once you separate from the military
2. See a place for yourself at VA for your health care needs
3. Consider VA as a viable option for health care and know what services may be available to you
4. Know how to enroll in VA services
5. Understand some of the challenges with civilian reintegration and the services VA has to offer

What you will **LEARN**

1. VA eligibility and enrollment process
2. Scope of VA health services and Veteran-specific specialty care
3. VA's woman-specific infrastructure and health services
4. Low or no cost of VA health care
5. Ability to use TRICARE and VA simultaneously
6. Structure of the VA agency, Veterans Health Administration (VHA) versus Veterans Benefits Administration (VBA)
7. Mental health services and importance of well-being
8. Modernization of VA and changed perception of intended customers
9. General transition support and self-advocacy tools
10. How to locate VA information and resources online

“I feel like I’m on a better path for the transition process. I felt like I was floating, but now have a plan. This was an eye-opener.”

— Former Women’s Health Transition Training participant

PHASE 1

Shift from Active Duty

Why We Are Here

Women's military experiences may be different from their male counterpart's experiences. As a result, post-military service outcomes, especially those related to health and well-being, may be different as well.

As you transition out of the military, it is important that you become proactive about your health and fully understand your health care options. Because women are a distinct minority in VA, there is a widely held misperception that gender-specific care is not available through VA. Over the last two decades VA has made significant strides to become a place for women Veterans to receive high quality health care from providers that understand their unique health care needs. It is no longer your "grandfather's VA" or the VA that is often portrayed in the media. The VA health care system is here to serve you!

The transition out of the military into civilian life will encompass many areas of your life. It is not only a career change—it is also a psychological and cultural transition and it will require developing your own path for a rewarding post-military life.

This course aims to help you on your transition journey. This journey is uniquely yours and can look different for everyone. You will need to set goals for your own health and well being and work toward and manage them. You will need to be your own advocate and we are here to help you get started.

Why WHTT?
5 REASONS

Top 5 reasons former Women's Health Transition Training participants recommend this course:

1. Gained knowledge on earned health services and women-specific services that every Servicewoman needs to know
2. Women-only course design created a supportive environment and was conducive to honest conversation
3. Empowering and positive mental preparation for transition
4. VA eligibility and enrollment navigation
5. Thorough curriculum and resources

WHTT
Positive Impact

VA IS HERE TO HELP YOU.

Over the last 20 years, VA has tracked health data and supplemented findings with published research on military and Veteran women populations. Studies have shown during and after military service, women may confront or react to military experiences differently than men, potentially affecting their health. In a study on women's barriers to VA health care system use, non-VA-users had "substantial deficits and misperceptions regarding VA eligibility, benefits and [women's health] services," and cited the media, other Veterans or friends for these misperceptions. Some concerning trends have emerged from this research indicating that women Veterans are more likely than their civilian counterparts to experience negative impacts on their mental health, such as higher rates of depression and suicide, as well as on their physical health such as higher rates of chronic pain. In response to these findings, VA designed and developed the Women's Health Transition Training for Servicewomen transitioning out of the military to the civilian sector with the overall goal of increasing their enrollment and utilization of VA health care services.

VA has women-specific care designed to address the concerns of women Veterans, such as:

- Women reported they were not comfortable seeking women-specific care in a male dominated health system and often under report health issues
- When screened by their VA health care provider, about 1 in 3 women report having experienced military sexual trauma (MST)
- Women Veterans have higher rates of depression than non-Veteran women and higher rates of pain and chronic conditions than male Veterans
- More than 40% of women Veterans who use VA have been diagnosed with at least one mental health condition

LEVEL OF TRUST REACHES 90.1%

Veteran Signals

The VA routinely surveys VHA outpatient services through a customer feedback survey known as Veterans Signals. This program was launched in June of 2017. Feedback through this program has been used to drive improvements in the services and care delivered through VHA programs. Since the program's inception in 2017 they have received more than 4 million surveys from Veterans. Recently released survey results show Veteran trust in the VA has increased, with 90.1% of Veteran responses indicating they trust the VA as of April 2020.

For more information and to view this report visit: www.blogs.va.gov/VAntage/wp-content/uploads/2020/04/VHAOutpatientServices_Trust_23APR2020.pdf

Making the Change

FROM MHS TO VA

Women often experience a notable health care culture change after leaving active duty. There are a number of differences between the Military Health System (MHS) and the Department of Veterans Affairs (VA) health care systems, but understanding these differences early in your journey will ease your transition.

Topic	MHS	VA
Organization Purpose	Maintain a medically ready force to support the full range of military operations	Provide health care to improve overall health and well-being to Veterans post-military service
Health Care Ownership	Your chain of command is responsible for making sure you meet your health care requirements	Empowers and equips you to take charge of your health care. You and your care team work together on your health and well-being, from urgent care or specialty care issues to experiencing complementary integrative health
Eligibility	MHS provides virtually all health care services for your medical needs	Your eligibility for benefits may vary
Facility Options	There are limited choices for dedicated women-specific health areas or spaces at MHS facilities	Women's health care can either be delivered in a women-only clinic or in an integrated primary care setting
Health Care Providers	You may have both a Primary Care Manager (PCM) and a gynecologist to address your needs	Your Women's Health Primary Care Provider (WH-PCP) can continue to address all your primary and most of your gender-specific health care needs
Women's Health Care Navigators	MHS does not have specific women's health care navigators to help coordinate your health care	Women Veterans Program Managers (WVPM) are advocates for women Veterans' needs at every VAMC
Dependent Care	Dependents are often enrolled in TRICARE	VA rarely provides health care coverage for Veteran dependents. Talk to the Eligibility Office for more information
Making an Appointment	Call the TRICARE helpline or make online appointments through Relay Health/TRICARE	After enrolling, call your assigned VA facility to make an appointment. You can also schedule an appointment in-person, online through the My HealtheVet portal or by walking in to a VA Urgent Care Clinic
Assigned Facility	You are assigned a main Military Treatment Facility (MTF) but can receive care at any MTF or in the community if medically necessary	You designate your preferred VA Medical Center (VAMC) and VA prefers that you receive the majority of your health care at that facility
Confidentiality	Your health procedures and outcomes may sometimes be available to your chain of command due to readiness requirements (e.g., dental)	Your consent is required to share any medical information with another person, including your spouse. All information is confidential

Making the Change *(continued)*

A LIST OF WHO'S WHO

Topic	MHS	VA
Manages the MTF or VA facility	Hospital Commanding Officer (CO/CC)	Medical Center Director
Assists in managing the MTF or VA facility	Hospital Executive Officer/Deputy (XO)	Deputy Director
Oversees a specific specialty department at the MTF or VA facility	Department leaders	Department Heads or Service Line Chiefs
Manages the junior enlisted working in the MTFs	Senior Enlisted	N/A
Provides primary clinical care during medical visits	Primary Care Manager (PCM)	Women's Health Primary Care Provider (WH-PCP)
Advocates for women Veteran patients at every VAMC	N/A	Women Veterans Program Managers (WVPM)
Point of contact for women's mental health services at VA facilities	N/A	Women's Mental Health Champion (WMHC)
Coordinates care and provides case management for transitioning Service members and post-9/11 era Veterans at MHS or VA facilities	PCM	Transition and Care Management (TCM) Team
Coordinates care for LGBT individuals receiving care at MHS or VA facilities	PCM	Lesbian, Gay, Bisexual and Transgender Veteran Care Coordinator (LGBT VCC)
Coordinates care for pregnant women who are receiving maternity care benefits from MHS or VA	PCM	Maternity Care Coordinator (MCC)
Provides information about services related to military sexual harassment and assault* and assists in accessing care	DOD Sexual Assault Prevention and Response Office (SAPRO)*	Military Sexual Trauma (MST) Coordinator

** SAPRO does not address sexual harassment*

Notes

“Knowing more about what is available and the quality of services available makes me confident in transitioning.”

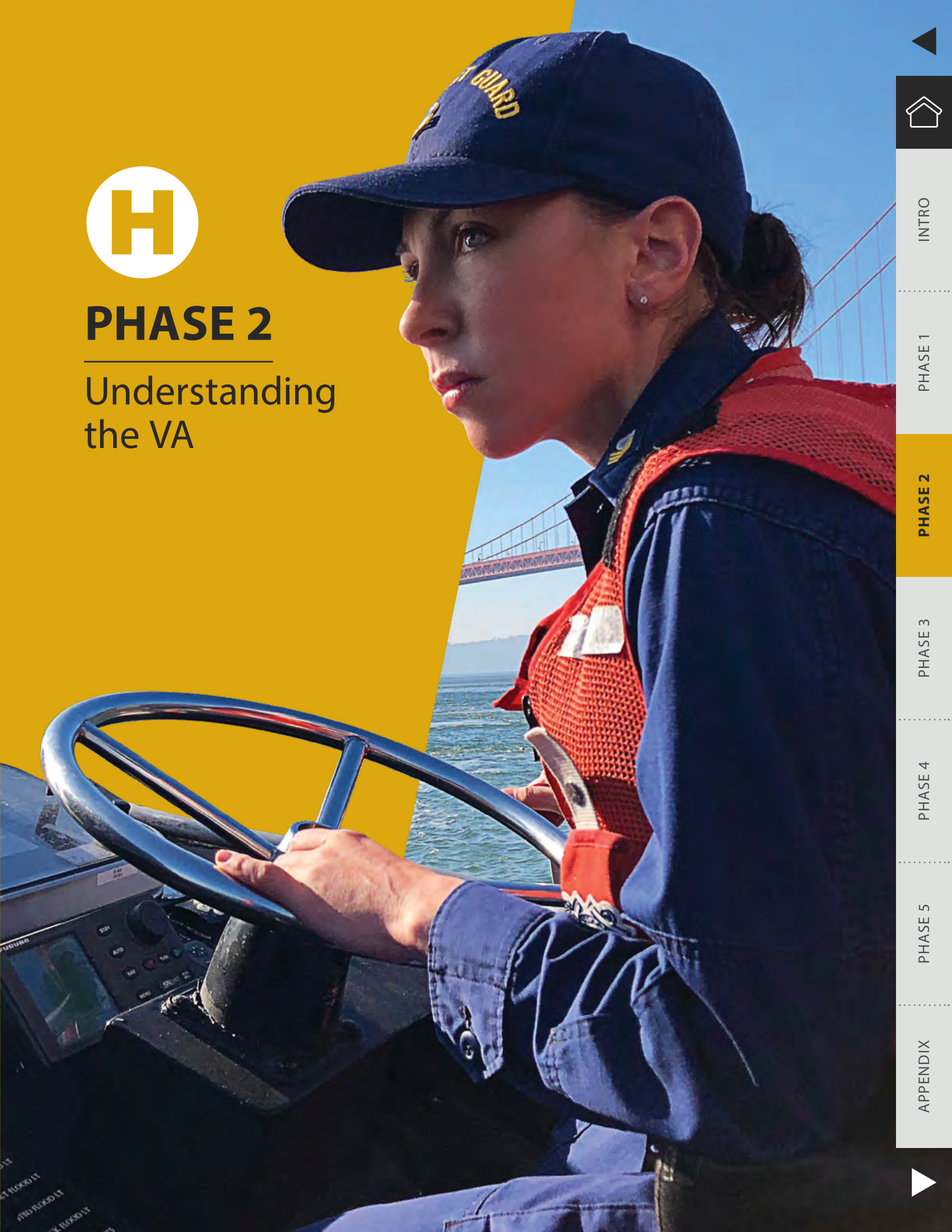
— Former Women’s Health Transition Training participant

“Being in a room and able to talk about women issues was really great...the WHTT course changed my perspective.”

— Former Women’s Health Transition Training participant

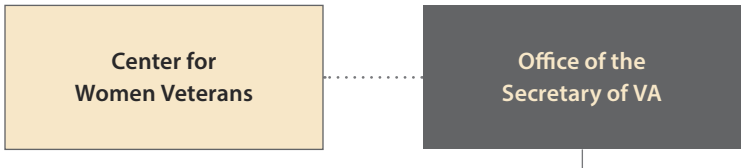
PHASE 2

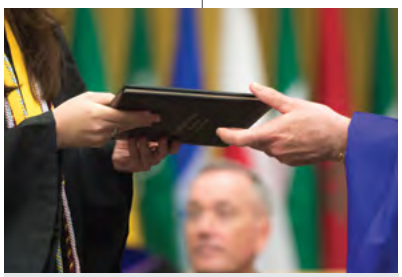
Understanding the VA



VA Organization

The U.S. Department of Veterans Affairs (VA) is made up of three administrations that work to meet different Veteran needs.





Veterans Benefits Administration (VBA)

Provides a variety of benefits and services to Service members, Veterans and their families. Some of these programs include: disability compensation, Veterans pension, dependency and indemnity compensation, insurance services, education services, home loans and employment services. VBA also runs the VA Benefits and Services course as part of the Transition Assistance Program (TAP).

Veterans Health Administration (VHA)

Is the largest integrated health care system with a patient-centered, holistic approach to care in the United States and provides care to Veterans at more than 1,200 health care facilities. VHA serves Veterans of all ages, offering services ranging from primary care, including women-specific health care, to a full continuum of gender-sensitive mental health services, as well as specialty care services such as neurology, cardiology and dermatology. VA Office of Women's Health is part of VHA.

National Cemetery Administration (NCA)

Supports burial and memorials for United States military Veterans. NCA honors Veterans and their families with final resting places. They provide the gravesites, headstones and the U.S. flag. NCA also provides funding to establish, expand, improve and maintain Veteran cemeteries across 47 states as well as tribal lands, Guam and Saipan.

You can learn more about VA, each administration and your benefits by visiting VA.gov.

VA Health Care
Facility Structure

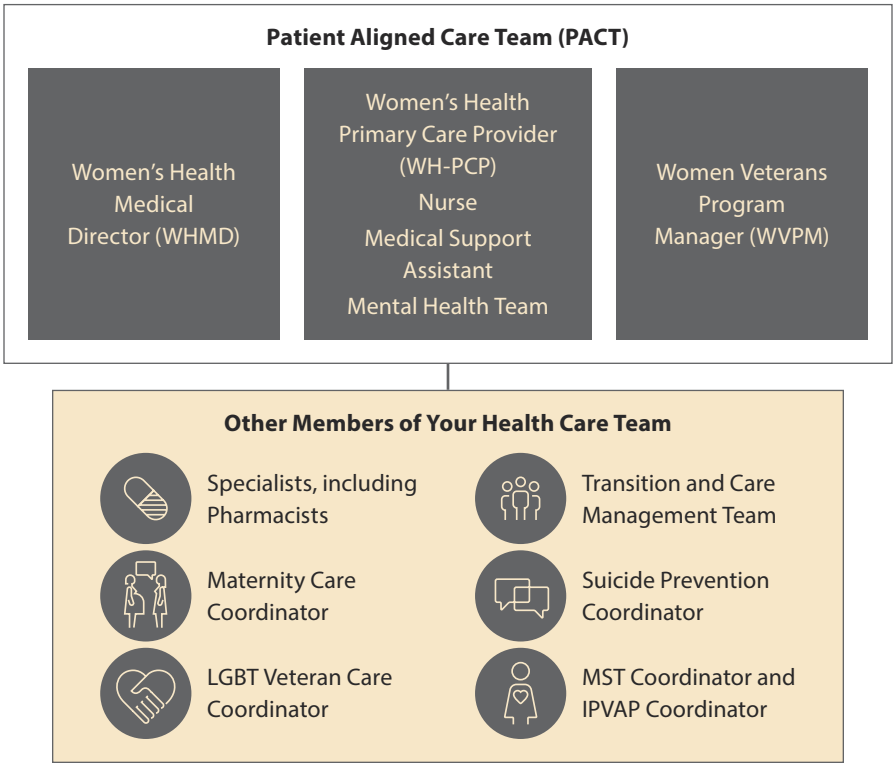
The VA health care system is America's largest integrated health care system with a patient-centered, holistic approach to care.

The VA system is divided into 18 Veterans Integrated Service Networks (VISNs). See page 16 for a map of the VISNs. Within each VISN there are three different types of health care facilities:

- **Veterans Affairs Medical Center (VAMC):** VAMCs (i.e., hospitals) are the largest facility type within the VA system and offer the most services. They provide comprehensive health care to all Veterans.
- **Community Based Outpatient Clinic (CBOC):** VA implemented CBOCs to make access to health care easier. These clinics provide the most common outpatient services—including health and wellness visits—without needing to visit a larger medical center.
- **Vet Center:** The goal of the Vet Centers is to provide a broad range of counseling, outreach and referral services to Veterans in order to help you transition to civilian life.

Within VA health care facilities, you will find roles dedicated specifically to women's health care using a Whole Health approach that is all about you and what matters most to you regarding your health and well-being.

Your VA Health Care Team



Available where **YOU ARE**

VA offers:

- **~170** VAMC sites
- **~1,050** CBOC sites
- **~300** Vet Centers

Designated Women's Health Providers

Designated Women's Health Providers are there for women Veterans every step of the way.

Women's Health Primary Care Provider (WH-PCP)

Once enrolled in VA services, you will be assigned or may request a WH-PCP with the gender of your choice, as staffing allows, at your preferred facility.

The role of the WH-PCP is to provide comprehensive primary care services, including general primary care and gender-specific care to women Veterans enrolled in VA. Your WH-PCP will:

- Provide a long-term patient-provider relationship
- Be your first point of contact with the VA health care system
- Serve as the foundation for your VA health care experience

Women Veterans Program Manager (WVPM)

All VAMCs have a designated WVPM to help women Veterans access VA benefits and health care services. The WVPM is an advocate for women Veterans by establishing, coordinating and integrating accessible high-quality health care services with multiple disciplines within VA medical facilities.

The WVPM:

- Is a health care professional
- Is the administrative leader of the Women's Health Program at the facility with at least 3 years of experience and expertise in program administration
- Has experience in Women's health care service delivery

Each VA facility has a designated WVPM you can contact with questions about health services, enrollment and general health system navigation.

Women's Health Medical Director (WHMD)

The WHMD works closely with the WVPM to form the foundation and subject matter expertise of the Women's Health Program at their VAMC. The WHMD works to develop clinical leadership (including quality improvement and educational initiatives), determine appropriate and available models of care, and ensure women Veterans are offered and assigned to a WH-PCP.

Each VAMC has a WHMD or a Women's Health Clinical Champion responsible for clinical oversight of the women's health program.

Did you KNOW?

WVPMs are there to:

- Assist with enrollment of women Veterans in need of health care
- Promote practices that enhance women Veterans' satisfaction with their care and connect Veterans with other Veteran peers
- Identify gaps in health care services
- Ensure the environment of each VA facility addresses the privacy and quality needs of women
- Support improvement activities to continually enhance Veteran experience
- Develop and provide education for staff to enhance their awareness around unique needs of women Veterans, leaving them better equipped to provide high quality care
- Develop new programs and services that align with the needs of women Veterans and empowers them to take charge of their health and well-being

Women Veterans Clinic Models

The VA system is comprised of three comprehensive primary care clinic models.

Women's primary care is provided by Women's Health Primary Care Providers in any of three following models of care at each VA site. The comprehensive primary care clinic models include the following:

Model 1: General Primary Care

Comprehensive women's primary care is **delivered to women Veterans within primary care clinics serving both men and women**. Mental health services for women are also offered in general primary care clinics through Primary Care–Mental Health Integration (PC-MHI). Efficient referral to specialty gynecology care is made available at all sites.

Model 2: Separate but Shared Space

Comprehensive women's primary care is **delivered to women Veterans in a separate space that may be located within or adjacent to primary care clinic areas**.

The clinic may be open part-time or full-time and may be used for other non-gender-specific services when women Veterans are not being seen. Gynecological care and mental health services are also available in this space and readily available.

Model 3: Comprehensive Women's Health Center (WHC)

Comprehensive women's primary care is **delivered to women Veterans in an exclusive, separate space**. When possible, a WHC should have:

- A separate entrance
- A separate waiting room

Services and sub-specialty services provided in the space often include: specialty gynecological care, mental health, social work services, breast care, neurology, nutrition and pharmacy.

Note: *Telehealth options are available in all three models.*

1. General Primary Care
2. Separate but shared space
3. Comprehensive Women's Health Center (WHC)

Women's Health Centers make sure you have access to the appropriate number of health care providers you need for primary care, as well as appropriate support staffing for specialty services.

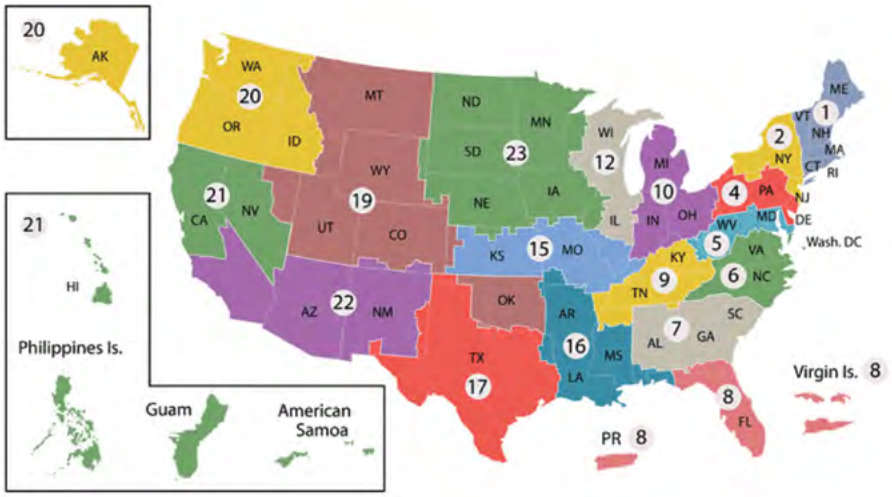
Locate Your New VA Facility

The VA Facility Locator Tool is designed for ease of use, with facility information for more than 1,900 facilities.

Designed for ease of use, you can use the VA Facility Locator tool to browse by state and administration and view an interactive map (see below) of the United States by VISN (more information on VA's VISNs is provided on page 13).

You may find several facility options in your local area and can choose which facility works best for you. To find your local facility, visit: www.va.gov/find-locations. This website will ask for your address, preferred facility type and preferred distance. After inputting this information, you will receive a list of nearby facilities. Click the hyperlink for your facility and it will direct you to that facility's webpage, where you can learn more about specific operational details and service offerings.

Interactive VISN Map



Step-By-Step

Step 1

1. Visit the website: www.va.gov/find-locations
2. Input an address or zip code
3. Filter by VA Health
4. Click the Search Button

Step 2

Browse nearby facilities

Step 3

Review facility website information including:

- Facility address
- Contact information
- Hours of operation
- General facility services and program information

Click on website hyperlink to be directed to the facility's website.

Local WVPM information can be obtained by contacting your local Womens Health Care Center directly.

MISSION Act

The MISSION Act streamlines and improves VA's community care programs, providing Veterans better customer service when receiving community care.

If you are eligible for health care through the Department of Veterans Affairs, our goal is to provide you with the care you need in a VA facility. When services are not available within a VA or other government medical facility, eligible Veterans may be referred to a community provider through the VA Community Care Program.

In June 2019, the MISSION Act replaced the Choice Program. If you are already enrolled in VA, the VA MISSION Act allows you to receive health care within the community. You may be eligible for community care if:

1. You need a service that is not available at a VA medical facility
2. You live in a U.S. state or territory without a full-service VA medical facility
3. You qualify under the "Grandfather" provision related to distance eligibility for the Veterans Choice Program
4. VA cannot furnish care within certain designated access standards—average drive time and appointment wait time
   a. Average drive time to a specific VA medical facility
      – 30-minute average drive time for primary care, mental health and non-institutional extended care services (including adult day health care)
      – 60-minutes average drive time for specialty care
      – **Note:** Average drive times are calculated by VA using geo-mapping software that uses inputs such as traffic to calculate the average driving time
   b. Appointment wait time at a specific VA medical facility
      – 20 days for primary care, mental health care and non-institutional extended care services, unless the Veteran agrees to a later date in consultation with their VA health care provider
      – 28 days for specialty care from the date of request, unless the Veteran agrees to a later date in consultation with their VA health care provider
5. It is in the Veteran's best medical interest
6. A VA medical service line does not meet certain quality standards

Through the MISSION Act, eligible Veterans can receive urgent care from an urgent care provider who is part of the VA's contracted network of community providers, without requesting prior authorization from VA.

Please note: You need to confirm whether the location will accept VA benefits before receiving services.

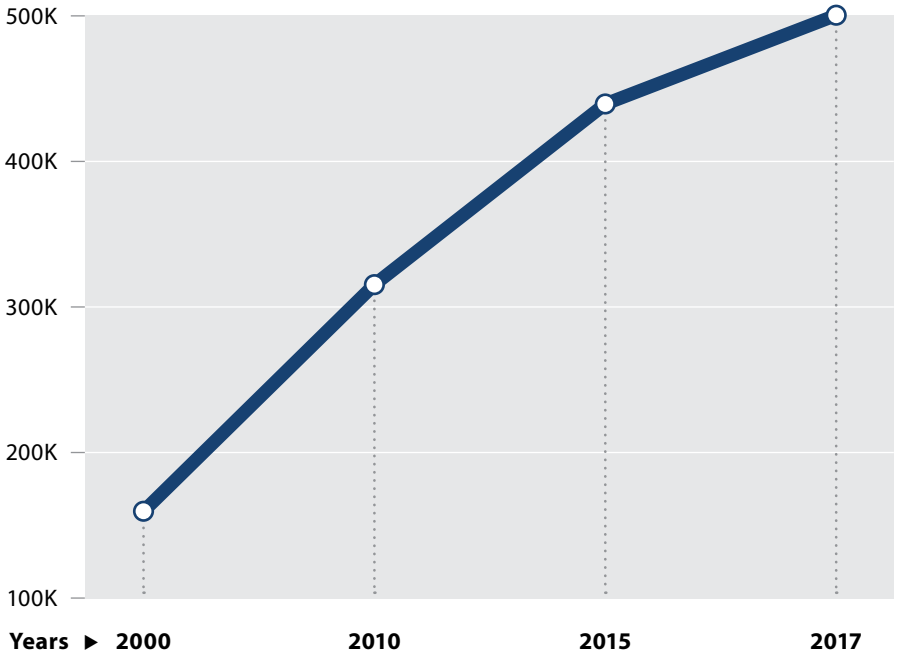
Driving VA Transformation

Women Veterans are the fastest-growing segment of the U.S. Veteran population.

The number of women Veterans is expected to increase at an average rate of about 18,000 women per year for the next 8 years. That is an average expected increase from 2 million in 2016 to 2.2 million in 2026. The growing number of women Veterans also brings with it greater diversity in race, ethnicity and sexual orientation in all age groups over time. This underscores the importance of efforts to ensure that services are sensitive to age, gender, culture and intersectionality (i.e., interactions) among gender, age and race/ethnicity.

At the end of FY19, approximately 760,000 women Veterans were enrolled in the VA health care system, of which nearly 530,000 actively used VA health care services. The current VA market penetration rate for women Veterans is 42%, compared to 49% for their male counterparts. The reasons for this disparity are unclear, but in a study on women's barriers to VA health care system use, non-VA-users had "substantial deficits and misperceptions regarding VA eligibility, benefits and [women's health] services," and cited the media, other Veterans or friends for these misperceptions.

Number of Women Veterans Using VA



Sources:

Department of Veterans Affairs. Fact Sheet; Women Veterans Health care

Sourcebook, Volume 4: Longitudinal Trends in Sociodemographics, Utilization, Health Profile, and Geographic Distribution.

Women Veterans in the Veterans Health Administration, 2018

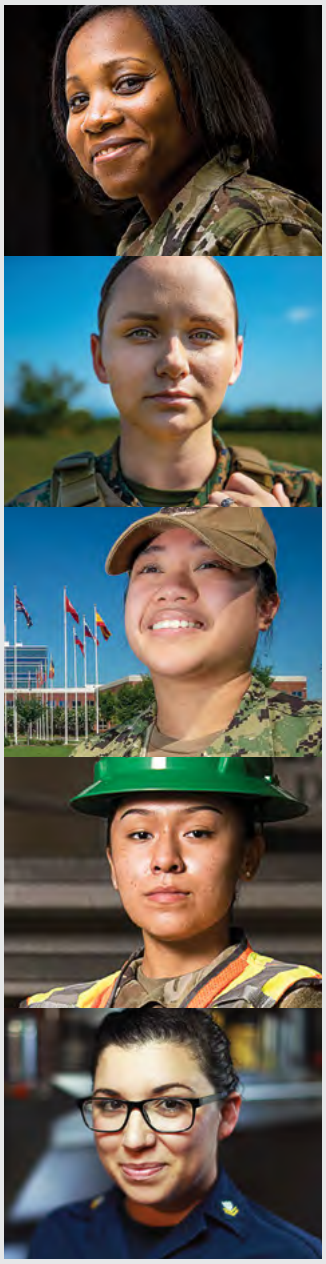
Washington DL, Farmer MM, Mor SS, Canning M, Yano EM. Assessment of the Healthcare Needs and Barriers to VA Use Experienced by Women Veterans. Journal of Medical Care, 53: S23-31, April 2015.

All Veterans are welcome at VA, including those who identify as a sexual or gender minority. Veterans enrolled in VA are treated and addressed by their gender identity.

Did you KNOW?

Women currently comprise:

- 20% of new recruits
- 14.5% of the active-duty force
- 18% of the reserve components



Programs are Evidence Based

VA actively follows and collects information on the most common medical conditions seen among women Veterans using the VA health care system.

Only within the VA health care system can you be assured that your medical provider will acknowledge military service as a part of your life, understand your past experiences and appropriately screen, diagnose and treat your needs.

VA uses research to develop evidence-based strategies to improve care and tailor programs and services to better serve Veteran women through a personalized, holistic approach to care.

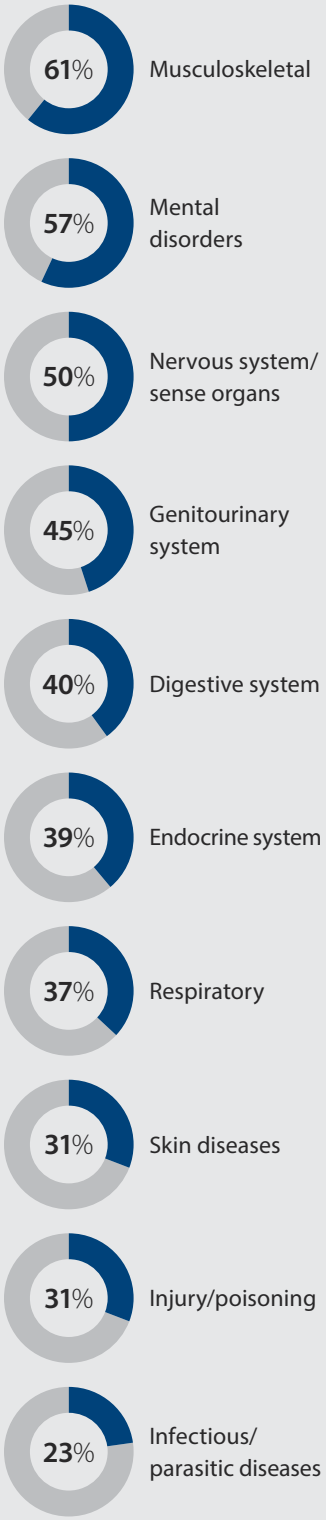
You can sign-up to receive highlights of VA research on women's health to your email. Please visit https://public.govdelivery.com/accounts/USVHA/subscriber/new to subscribe.

Research* has shown…	Leading to…
Women Veterans assigned to Designated Women's Health Providers have higher satisfaction and quality of care	Policy for Comprehensive Women's Health, as well as lower patient attrition
Pregnant women Veterans with mental health conditions can have more complications and risks during pregnancy	Policy for Maternity Care Coordination at VA Development of the National VA Women's Reproductive Mental Health Consultation Program
Women Veterans have high rates of chronic pain and musculoskeletal conditions	Development of specialized training for VA and DOD primary care providers on how to recognize and treat pain and musculoskeletal issues

* *Research is based on women Veterans utilizing VA services*

Common post-deployment medical and mental health diagnoses in Servicewomen coming to VA 2002-2015.

n = 145,644



Notes

Notes

“Definitely took out the mystery of everything … it’s good to know what options are out there and what I can expect.”

— Former Women’s Health Transition Training participant

PHASE 3

Available Women's Health Services

Patient Aligned Care Team

THE PATIENT ALIGNED CARE TEAM (PACT) PUTS YOU AT THE CENTER OF YOUR CARE.

The PACT is a patient-driven, team-based approach that uses primary care to address your medical, behavioral and psychosocial needs and collaborates with other VA health services and community resources.

- **A PACT** is a partnership between you and your health care team to ensure you receive whole-person care (Whole Health).
- **A PACT** offers many ways to access health care. The Whole Health approach to care empowers, equips and treats you so you can take charge of your health and well-being and live your life to the fullest. Whole Health encourages you to develop a Personal Health Plan, set goals based on what is important to you and work toward those goals with your health team. Many plans include well-being approaches such as yoga, aquatic therapy, mindfulness meditation, acupuncture or creative writing classes. The aim is to equip you with what you need to reach your goals.
- **A PACT** achieves coordinated care through collaboration. All of your team members have clearly defined roles. They meet often to talk with you and each other about your progress toward achieving your health goals. The focus is on building trusted, personal relationships resulting in coordination of all aspects of your health care.
- **A PACT** uses a team-based approach. You are the center of the care team that also includes your family members, caregivers and health care professionals. When additional services are needed to meet your health goals, other care team members may be called in to support your Personal Health plan.

For additional information visit the patient care website at: www.patientcare.va.gov/primarycare/PACT.asp

Your PACT will:

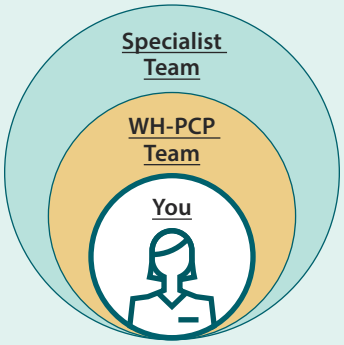
- Take collective responsibility for your care
- Engage with you to provide personalized high-quality, continuous care
- Arrange for appropriate care with other specialties

WH-PCP team:

- Provider (WH-PCP)
- Nurse
- Medical Support Assistant
- Mental Health Team

Specialist examples:

- Clinical Pharmacy Specialist
- Integrated Behavioral Health
- Nutrition
- Social Work
- Specialty Care Coordinators
- Whole Health Coach



Preparing for Your First Appointment

To schedule a VA appointment for either acute or routine health visits after enrolling, call your VA facility or use the VA Online Scheduling Tool on My HealtheVet.

What to Bring to Your First Appointment

- List of regular appointments and appointment frequency
- List of out-of-network providers/referrals
- List of current medications
- Last Pap/mammogram results
- Any recent x-rays or lab results
- Can bring CD or hard copies (ask medical facility for tabbed CD)
- Copy of your completed Personal Health Inventory (see www.va.gov/WHOLEHEALTH/phi.asp to obtain a copy)

Managing Your DOD Specialty Care Referrals at VA

- Enroll in VA health care and schedule your first appointment with your WH-PCP.
- At your first appointment, talk to your WH-PCP about your current specialty care providers. If possible, please bring a list.
- Your WH-PCP will review all of your providers and work with you to develop a care plan, potentially incorporating VA and community physicians.
- The MISSION Act is available if you need to see physicians in the community.

Your VA facility's number can be found by using the Facility Locator (page 16) or calling **1-855-VA-WOMEN**.

Innovative Post-Deployment VA Health Care

PROVIDERS UNDERSTAND HOW MILITARY SERVICE AND DEPLOYMENT CAN IMPACT YOUR HEALTH.

Standard practice includes taking military histories and administering appropriate screenings during your medical visits. In addition to medical, gynecological, mental/psychosocial and family histories, providers may also conduct a number of post-deployment evaluation screens, including:

- Gastrointestinal (GI)
- Musculoskeletal injuries
- Skin rashes
- Traumatic brain injury (TBI)
- Embedded fragments
- Posttraumatic stress disorder (PTSD)
- Depression
- MST (i.e., sexual harassment and/or assault)
- Alcohol use
- Tobacco use

Military service can result in many potential health impacts. All wars have similar post-combat health outcomes, such as:

- Physical injuries with residual pain
- Mental health conditions, such as anxiety, depression and PTSD
- Unexplained symptoms with general health decline
- Psychosocial distress resulting in disruptions in relationships, work and social life

TBI is often referred to as an invisible wound, but it can have a large impact on a Veteran. 12-20% of OEF/OIF/OND Veterans experience TBI. Women present with more severe symptoms (5% of cases are women). Symptoms for TBI include:

- Difficulty concentrating
- Problems with memory
- Headache
- Balance issues, dizziness
- Sleep issues
- Fatigue
- Irritability

Post-Deployment Medical History Checklist

Military History

- ☐ When and where did you serve?
- ☐ What were your duties?
- ☐ Were you exposed to chemicals, fumes or blasts?
- ☐ Were you deployed? If so, where?

Military Follow-Up

- ☐ Did you see combat, enemy fire or casualties?
- ☐ Were you or a colleague injured or hospitalized?
- ☐ Did you become ill during service?
- ☐ Were you a Prisoner of War?
- ☐ Ask about symptoms of PTSD, depression or experiences to MST

Available VA Services

Primary Care: Preventive Care and Wellness

- General medical care for acute and chronic illness*
- Sexual health and wellness, contraception and family planning
- Cancer screening, including mammography and Pap smears
- **Cardiovascular risk assessment, prevention and treatment**
- **Whole health/complementary and integrative therapies**
- **Musculoskeletal injury evaluation and treatment**
- **Intimate partner violence (IPV) screening and treatment**
- **Immunizations**
- Smoking cessation
- Nutrition
- Move! Weight management program
- Social support (covered in Phase 5)
- Pain management
- Medical conditions related to MST
- Gender transition support
- Post-deployment evaluation and screening (see page 26)

General Medical and Specialty Care

- **Other medical and surgical subspecialties**
  - Cardiology,* endocrinology,* gastroenterology,* rheumatology* and others*
- **Prosthetics, including gender specific items**
- Other services
  - Audiology/hearing loss
  - Physical therapy
  - **Pharmacy**
  - **Dental**
  - **Telehealth**
  - Hormone therapy for gender transitioning
  - Optometry,* podiatry* and others*
- Surgical subspecialties, including general surgery,* urology,* orthopedics* and others*

Note: *Services in* ***bold*** *have a more detailed overview.*

* *These services are also available at VA but not described in this Handbook or during the training.*

Available VA Services *(continued)*

Reproductive Health

- **Gynecology services**
- **Incontinence treatment/support**
  - Pelvic floor physical therapy
- **Family planning**
  - Sexual health and family planning, including **contraception**
  - **Pre-conception planning**
  - **Infertility**
- **Menopause management**
- Pelvic pain*
- Abnormal uterine bleeding*

Maternity Care

- **Maternity care**
- Nursing bras, breast pumps and maternity belts
- Newborn care (up to 7 days)
- Mental health and substance-use

Mental Health and Substance-Use Disorder Treatment

- **Mental health services**
  - General outpatient care
  - Specialty care and evidence-based services
  - Eating disorder treatment
  - Reproductive mental health
  - Residential and inpatient treatment options (mixed-gender and women-only options available)
- **MST-related care**
- **Suicide prevention** (see pages 58–59)
- **Additional services**
  - Outpatient and residential substance use disorder programs (see page 60)
  - Detoxification (detox) (see page 61)
  - PTSD screening and treatment (see page 62)
  - TBI screening and treatment (see page 63)
  - Women's residential programs (see page 64)
  - Depression screening and treatment*

Note: *Services in* ***bold*** *have a more detailed overview.*

* *These services are also available at VA but not described in this Handbook or during the training.*

Preventive Care and Wellness
Cancer Screening

Overview

VA uses the latest evidence-based practices for cancer screening. However, each person's screening timing is different based on your specific situation and potential risk factors. Since 2008, one of VA's major initiatives has been to enhance preventive screening services, specifically for breast and cervical cancer. All women Veterans are eligible for screening mammography either on-site or in the community. VA has expanded access to on-site mammograms by 62% since 2010. Additionally, some facilities offer mammograms to walk-in patients as well as same-day ultrasounds. Through VA you can expect services including but not limited to:

- **Cervical cancer screenings**, which include Pap smears to look for precancerous changes on the cervix that might evolve into cervical cancer if not treated appropriately, and HPV tests to detect the human papillomavirus (HPV) that can cause cancer cell changes.
  - Screening recommendation: Every 3–5 years based on age and risk factors
- **Breast cancer screening**, which looks for changes in breast tissue to detect cancer. Mammography is currently available on-site at 62 VAMCs and is also covered by VA at mammography centers in the community.
  - Screening recommendation: Annually for ages 45–54 and biannually after age 55
- **Lung cancer screenings**, which detect cell abnormalities in the lungs.
  - Screening recommendation: Adults aged 55–80 with a history of smoking
- **Colorectal cancer screenings**, which detect cancerous colon cells through colonoscopy procedures.
  - Screening recommendation: Starting at age 50–75. Frequency depends on the type of test done and the results

Please reference the Preventive Care Recommendations Chart on Pages 92–93 and talk to your WH-PCP about your individual screening risks.

Eligibility

- All Veterans who are enrolled in VA health care are eligible for cancer screenings, which includes cervical and breast cancer screenings.
- Some VA facilities have on-site mammography while others will refer your mammography into the community.

Access

- Your WH-PCP will place an order for your mammogram.
- You can talk to your WH-PCP about any screening questions and needs.

VA adopted the American Cancer Society guidelines for breast cancer screening—women should be able to start screenings as early as age 40, if desired. Talk to your WH-PCP about what is right for you.

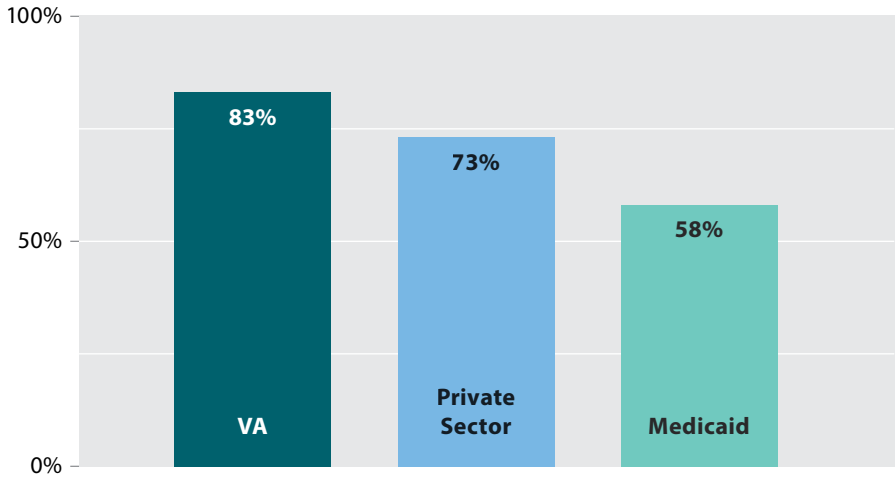
Breast and Cervical Cancer Screening Rates

DATA DRIVES QUALITY

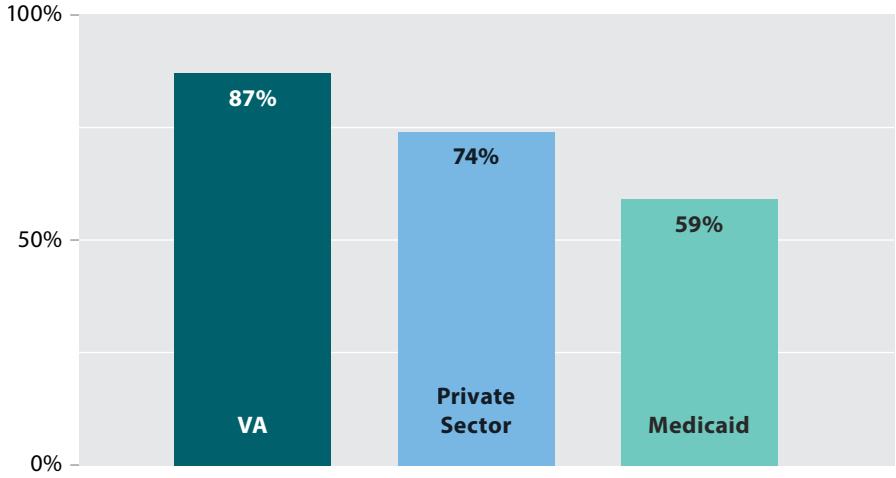
In 2017, VA analyzed data on breast and cervical cancer screening rates across three different health systems: VA, the private sector and Medicaid.*

VA ranked highest for administering two specific women's health cancer screenings, outperforming the private sector and Medicaid, in 2016 and 2017.

2017 Breast Cancer Screening Rates



2017 Cervical Cancer Screening Rates



* *VA data was collected from VA patient medical charts; measures were compiled by VA's Veterans Support Service Center. The Centers for Disease Control and Prevention (CDC) collected and published private sector data. Medicaid health screening data was collected from the Medicaid website.*

Understanding the importance of data to drive health system reform, VA has prioritized data collection and research for women's health. Professional teams at VA Headquarters in Washington, D.C. provide oversight to constantly monitor and evaluate health care quality and health disparities.

Preventive Care and Wellness
Cardiovascular

RISK ASSESSMENT, PREVENTION AND TREATMENT

Overview

The purpose of cardiac services for Veterans is to reduce life-long cardiac risk, as well as diagnose and treat cardiovascular disease (CVD). Looking at women's health over the past two decades, researchers have noticed that after being separated from the military for 2–5 years, women's risk for cardiovascular disease increases, even in the youngest age group. Women are more likely to have additional risk factors for CVD, such as depression, certain autoimmune conditions and pregnancy-related CVD diagnoses (e.g., gestational diabetes), than their male counterparts.

Your WH-PCP will assess your risks and help you get started with any needed cardiovascular prevention strategies that should be included in your Whole Health plan, which might include more exercise, changes in nutrition, weight loss, smoking cessation or medications.

The following measures are recommended to prevent cardiovascular issues:

- Maintaining a healthy, balanced diet
- Striving for a healthy weight
- Completing around 3 hours of exercise per week
- Keeping conditions like diabetes and hypertension well-controlled
- Managing your stress levels
- Aiming to get 7–8 hours of sleep every night
- Avoiding smoking and excessive alcohol intake

If you have any symptoms of cardiovascular disease, your provider may recommend further testing including: electrocardiogram (EKG or ECG), stress tests, cardiac catheterization and/or cardiac MRI. Additionally, heart attacks may present differently for women. While a man's presentation of a heart attack is more sudden, women often experience the following symptoms:

- Uncomfortable pressure, squeezing or pain in the center of your chest
- Pain or discomfort in one or both arms, the back, neck, jaw or stomach
- Shortness of breath
- Cold sweat, nausea or lightheadedness

For Veterans in need of cardiovascular treatment, appointments and services are coordinated through your WH-PCP. All medically necessary prescriptions for cardiovascular treatment are covered by VA.

Eligibility

- All Veterans who are enrolled in VA health care are eligible for cardiovascular risk assessments, prevention services and treatment.
- Specific programs may vary by facility.

Access

- Connect with your WH-PCP for questions, assessments and treatment needs.
- Cardiology consultation requires a referral from your WH-PCP.

VA providers now have access to DOD records to support a smooth transition into VA care. Veteran patients with a high cardiovascular risk category receive a closer hand-off.

Preventive Care and Wellness
Whole Health

Overview

Whole Health is focused on achieving personal health and well-being. VA empowers and equips all Veterans to take charge of their health and life. Whole Health is about maintaining a comprehensive health and well-being plan, not just attending individual appointments. You will work with your WH-PCP to create a personal health plan. Your WH-PCP will ask you questions from the Personalized Health Inventory (PHI) as the first step in the process to develop your Personal Health Plan. It can be helpful to complete the PHI prior to your first appointment, you can create your PHI online at www.va.gov/WHOLEHEALTH/phi.asp.

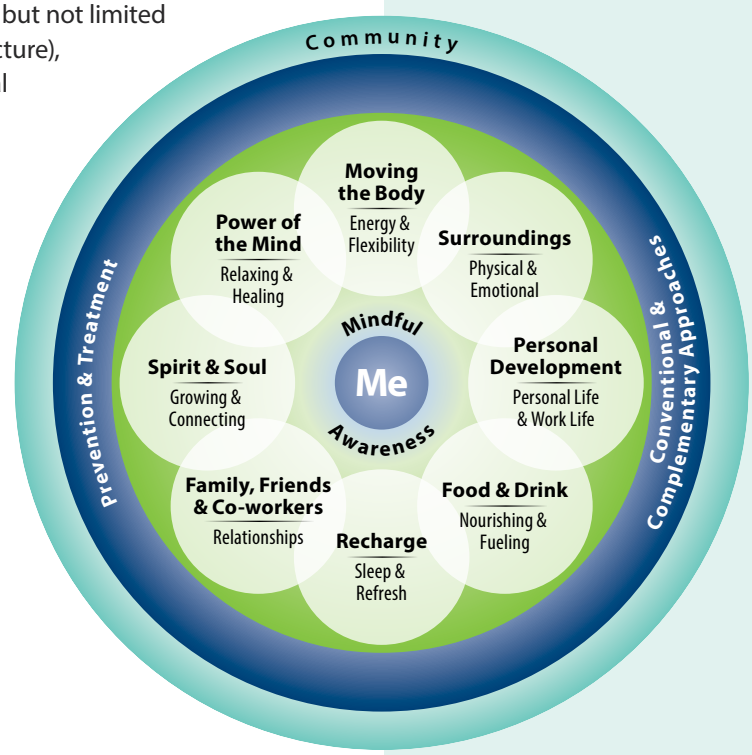
Example questions include:

- What brings you a sense of joy and happiness?
- Why is your health important to you?
- What do you live for?
- What's on your bucket list?
- What really matters to you in your life?

The Components of Proactive Health and Well-being (see sidebar) is a tool your health care team will use to help you focus on those areas of your life that impact your health and well-being. You will identify areas of strengths and opportunities where you can make healthy changes, create your own goals and your health care team will partner with you to provide education, resources or tools to help you reach those goals! Your Personalized Health Plan may have a combination of clinical care, health coaching, well-being programs and complementary and integrative health (CIH) services. CIH services available but not limited to include: acupuncture (including battlefield acupuncture), biofeedback, chiropractic care, guided imagery, clinical hypnosis, mindfulness/meditation, tai chi or qi gong, yoga and massage for treatment of certain conditions. This integrated approach to care is to help you achieve the best version of you.

Please ask your WH-PCP about the 2-hour Introduction to Whole Health groups to start you off on your health and well-being journey. More information is available:

- Online – www.va.gov/WHOLEHEALTH/index.asp
- Blogs – www.blogs.va.gov/VAntage/tag/livewholehealth
- Mobile apps – www.va.gov/WHOLEHEALTH/veteran-resources/MobileApps-OnlineTools.asp



Eligibility

- You must be enrolled in VA care. Any treatment (including medication and counseling) must be medically necessary.

Access

- Your WH-PCP should be able to answer any questions you have about available services and help you set up an appointment.
- Referrals are often required for complementary and integrative health services.
- For additional information about Whole Health, you can explore the VA Patient Centered Care Website at www.va.gov/patientcenteredcare/index.asp.

Preventive Care and Wellness
Musculoskeletal

INJURY EVALUATION AND TREATMENT

Overview

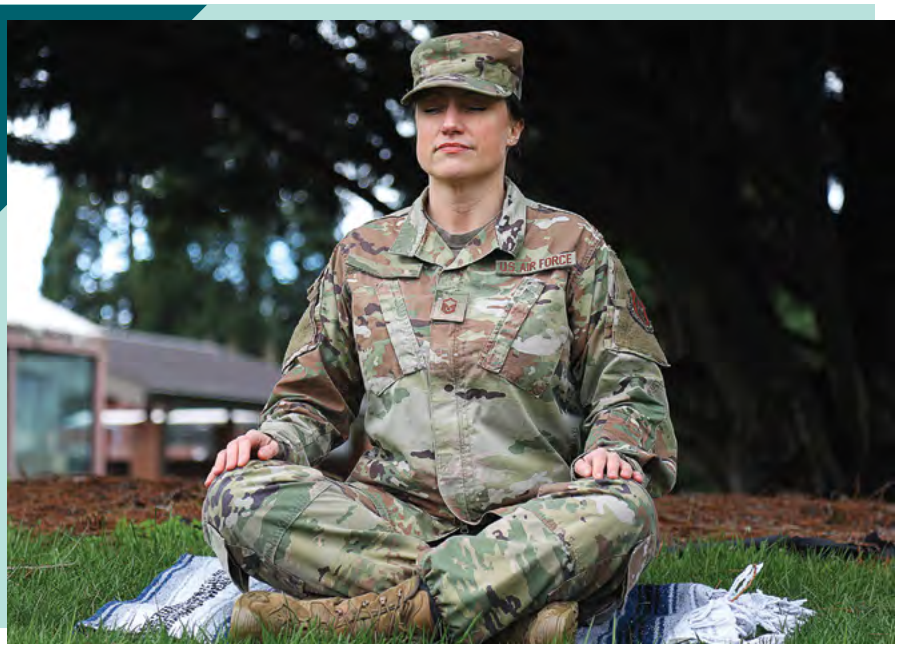
Musculoskeletal injuries are the number one reason both men and women are seen at VA. VA provides treatment for musculoskeletal conditions and injuries, which can be caused by high impact activities and/or heavy combat gear.

Musculoskeletal injuries are injuries that affect the human body's movement or musculoskeletal system (i.e., muscles, tendons, ligaments, nerves, discs, blood vessels). Early enrollment in treatment and physical therapy/rehabilitation can help prevent the development of chronic pain, additional injuries, limited muscle function and negative mood/motivation. Treatment includes primary care, rheumatology, orthopedics, physiatry referrals and surgery, if needed.

Veterans are also eligible for the following services to treat musculoskeletal injuries:

- Occupational therapy
- Physical therapy
- Recreational therapy
- Chiropractic
- Pain management
- Steroid injections
- Complementary and integrative health services
  - Including yoga and tai chi

Fundamental musculoskeletal services are available at all VAMCs. Specialists will be assigned for musculoskeletal treatment. WH-PCPs are trained to address musculoskeletal issues for women.



Eligibility

- All Veterans enrolled in VA health care are eligible to receive musculoskeletal treatment that is deemed medically necessary by your WH-PCP.

Access

- You should talk to your WH-PCP about screening and treatment for musculoskeletal injuries.
- Your WH-PCP can take care of many musculoskeletal problems and will refer you to other services as needed.

By enrolling in VA care and attending your first VA appointment, you can ensure your musculoskeletal injury treatment continues from MHS to VA.

Preventive Care and Wellness
Partner Violence

INTIMATE PARTNER VIOLENCE (IPV) SCREENING AND TREATMENT

Overview

VA provides an array of trauma-informed services such as universal education, prevention, screening, full danger assessment, intervention and safety planning for all forms of IPV, including physical, emotional, sexual, stalking or threats of violence. IPV occurs on a continuum of frequency and severity and does not require intimacy or cohabitation.

Trauma-informed care is a strengths-based approach to delivering health care rooted in understanding of the impact of trauma. It seeks to maximize physical, psychological and emotional safety in all health care encounters, not just those that are specifically trauma-focused. It fosters healing through safe and collaborative patient-clinician relationships.

The Veteran community may be more likely to experience IPV than their non-Veteran counterparts. Some of the Veteran-centric risk factors include:

- Posttraumatic stress
- Loss of trust/moral distress
- Military family life stress
- Separation and isolation
- Mental health concerns
- Alcohol and/or drug use
- TBI
- Increased anger
- Decreased frustration tolerance

Knowledge of potential risk factors for IPV as well as education of the profound impacts can aid in prevention. Did you know:

- IPV is often known to begin or increase during pregnancy.
- Women Veterans who report IPV are 3 times more likely to have housing insecurity.
- 72% of all murder-suicides involve an intimate partner.
- Lesbian and bisexual women, as well as transgender and gender diverse individuals, are at increased risk of interpersonal violence.
- Brain damage or TBI can begin in 5-10 seconds and death in only 62–152 seconds during strangulation.

VA provides many intervention and prevention resources to support those impacted by IPV. These include access to education, resources, community referrals, consultations, assessments and treatment by connecting with your local IPVAP Coordinator and/or WH-PCP.

You may access additional information on the Intimate Partner Violence Assistance Program or find your local IVPAP coordinator through the online roster at www.socialwork.va.gov/IPV/Index.asp

Eligibility

- You must be enrolled in VA care. All women enrolled in VA care should be screened for IPV. Universal education, screening, resources and referrals are available to Veterans' intimate partners, regardless of partners' Veteran status.

Access

- Most sites have an IPV Assistance Program Coordinator available to assist. If one is not available, please contact your WH-PCP or mental health provider.
- You may access the National Domestic Violence Hotline at **1.800.799.SAFE** or connect with your IPVAP Coordinator.

Preventive Care and Wellness
Immunizations

Immunizations are designed to protect you from the seasonal flu and other vaccine-preventable diseases. VA offers vaccinations against a range of infectious agents including:

- Hepatitis A and B
- Human papillomavirus (HPV)
- Pneumococcus
- Influenza

Influenza

The Centers for Disease Control and Prevention (CDC) recommends that everyone over the age of 6 months receive an annual flu shot. In the military, it is mandatory to receive an annual influenza vaccination; however, once you are a civilian it is your choice as to whether or not to be vaccinated.

Common Myths

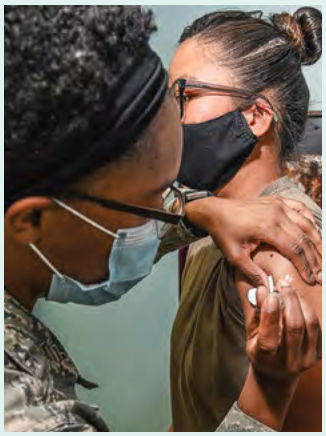
Myth ▸	The flu shot can give you the flu.
Fact ▸	The flu shot **cannot** cause flu illness. Flu vaccines that are administered with a needle (flu shots) are currently made in two ways: a) flu vaccine viruses that have been killed and are therefore not infectious **OR** b) with proteins from a flu vaccine that are not infectious.
Myth ▸	It is too late to get the flu shot after Thanksgiving.
Fact ▸	Influenza **vaccination can protect you** for as long as flu viruses are circulating. The flu is unpredictable and seasons can vary. Seasonal flu disease usually peaks between December and March most years, but the disease can occur as late as May. Getting an annual flu shot later in the flu season—December or later—can still be protective.
Myth ▸	The flu shot increases your risk of getting COVID-19.
Fact ▸	There is **no evidence** that getting a flu vaccination increases your risk of getting sick from a coronavirus, like the one that causes COVID-19.
Myth ▸	Thimerosal, present in multi-dose flu vaccines, is harmful to humans.
Fact ▸	Thimerosal use in vaccines and other medical products has a record of being **very safe**. Flu vaccines in multi-dose vials contain thimerosal to safeguard against contamination of the vial. Most single-dose vials and pre-filled syringes of flu shot flu vaccine do not contain a preservative such as thimerosal because they are intended to be used once.

Eligibility

- You must be enrolled in VA care. Any treatment (including medication and counseling) must be medically necessary.

Access

- Work with your WH-PCP to determine which vaccines and immunizations are right for you, discuss any possible side-effects and schedule an appointment.



Preventive Care and Wellness
Immunizations *(continued)*

High-Risk Populations and Influenza

- **Chronic Conditions:** A history of stroke, heart attack, kidney, liver and heart diseases put your body at risk for complications or even death if you become infected with the flu. The CDC reports people with a positive flu test are at an increased risk of heart attack that is 6 times higher than normal the week following an infection. In fact, adults living with diabetes, high blood pressure, obesity and pregnancy are hospitalized more often from the flu than adults without these conditions.
- **Over 65:** Women over 65 are encouraged to receive the vaccine to prevent flu infection. As we age our immune systems become more sensitive and are unable to fight off infections as well as younger women. Additionally, the flu is highly contagious and active seniors can share the virus with others who are at risk of complications from the virus.
  - In recent years, it's estimated between 70% and 85% of seasonal flu-related deaths have occurred in people 65 years and older.
  - Between 50% and 70% of seasonal flu-related hospitalizations have occurred among people in this age group.
  - Ask for a special "high dose" flu shot for people 65 and older for the best protection this season.
- **Pregnancy:** If you are pregnant or planning to become pregnant this flu season, consider getting your vaccine now. The shot is safe in all trimesters of pregnancy and may help prevent a trip to the hospital. A 2018 CDC study reported that a flu shot may reduce a pregnant woman's risk of hospitalization from the flu by 40%. An additional benefit of the flu shot is that it may continue to protect the baby for a few months after birth. This is very important because infants are not able to get a flu shot until they are 6 months old.
  - Changes in the immune system, heart and lungs during pregnancy make pregnant women more prone to severe illness from flu. In addition, infection with the flu, may be harmful for a pregnant women's developing baby. The flu shot reduces the risk of flu-associated acute respiratory infection in pregnant women by about one-half.
  - Flu shots have been given to millions of pregnant women over many years with a good safety record. There is a lot of evidence that flu vaccines can be given safely during pregnancy. CDC and the American College of Obstetricians and Gynecologists (ACOG) continue to recommend pregnant women get a flu vaccine during any trimester of their pregnancy because flu poses a danger to pregnant women and a flu vaccine can prevent serious illness, including hospitalization, in pregnant women.

Please see page 93 for a list of vaccines available from VA, as well as age-specific recommendations on dose and timing of vaccination. The Preventive Care Recommendations chart is also available online at www.prevention.va.gov.

High-risk populations can lower their risks for complications by getting an annual flu shot.

Preventive Care and Wellness
Additional Services

Other Preventive Screenings

VA offers many preventive screening tests such as screenings for:

- Cholesterol
- Cancer
- Blood pressure
- HPV

A full list of preventive screening services can be found on the Preventive Care Recommendations chart in the Additional Health Resources section on pages 92–93 or online at www.prevention.va.gov.

Eligibility

- You must be enrolled in VA care. Any treatment (including medication and counseling) must be medically necessary.

Access

- Work with your WH-PCP to determine which preventive screening tests are most appropriate for your care.

Preventive Care and Wellness
Additional Services *(continued)*

MOVE! Weight Management Program

The MOVE! Weight Management Program is a weight management and health promotion program designed to improve Veteran lifestyle. MOVE! encourages healthy eating behaviors, increased physical activity and weight loss. MOVE! is based on the latest research in nutrition science.

There are many other wellness programs available at VA. These programs vary by facility but may include yoga, tai chi, meditation, mindful awareness and adaptive sports. Additional program information can be found at www.va.gov/WHOLEHEALTH.

MOVE! Weight Management Program for Veterans

Eligibility

- You must be enrolled in VA care. Any treatment (including medication and counseling) must be medically necessary.

Access

- Talk to your WH-PCP or your local MOVE! Coordinator to learn how to get involved in the MOVE! Weight Management Program.

Preventive Care and Wellness
Additional Services *(continued)*

Pain Management

The pain management services offered through VA include both online resources and in-house treatment. Some of these services include non-pharmacological as well as interventional pain treatment (e.g., injections, blocks), Botox for headaches, physical therapy, occupational therapy and complementary and integrated health approaches like acupuncture, biofeedback, chiropractic care, guided imagery, clinical hypnosis, mindfulness/meditation, tai chi, yoga or/and massage for treatment.

Eligibility

- You must be enrolled in VA care. Any treatment (including medication and counseling) must be medically necessary.

Access

- Talk to your WH-PCP to explore the pain management strategies that are best for you. There is no limit to the quantity of services for eligible Veterans but referrals are usually required.

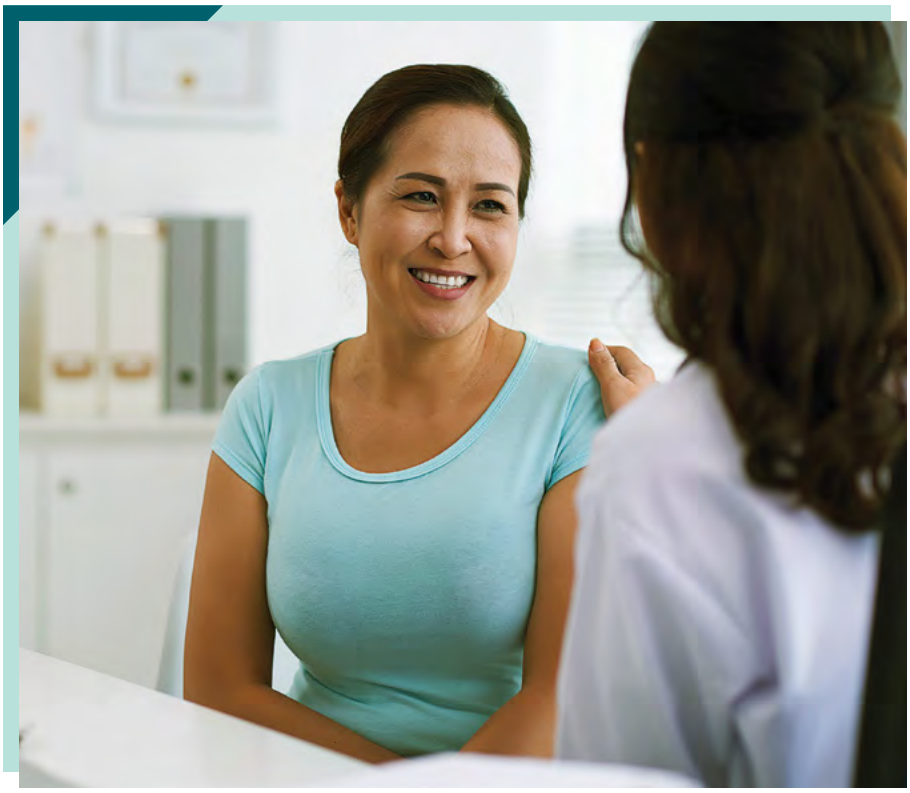
Preventive Care and Wellness
Additional Services *(continued)*

Smoking Cessation

VA provides gender-specific and research-supported services for Veterans that would like to quit smoking or tobacco use. These services include:

- Counseling and support groups
- Online resources at https://smokefree.gov/Veterans
- Smoking cessation medication (such as the patch and chewing gum)
- The **1-855-QUIT-VET** quitline
- The SmokefreeVet mobile texting program

Studies have shown that quitting smoking may be more difficult for women than men. Women may have lower quit rates, relapse more often and have more difficulty during the process. Therefore, treatment combining both FDA-approved medication and behavioral counseling is important to help ensure you have all the tools you need to quit for good.



Eligibility

- You must be enrolled in VA care. Any treatment (including medication and counseling) must be medically necessary.

Access

- Talk to your WH-PCP or call **1-855-QUIT-VET** to talk to a quitline counselor today. WH-PCPs can order smoking cessation medications and products for you. Referrals are needed for group counseling.

Preventive Care and Wellness
Additional Services *(continued)*

Nutrition

VA Nutrition and Food Services (NFS) develops and provides comprehensive evidenced-based nutritional guidance. These services include access to registered dietitian consultations, as well as cooking classes at some facilities Learn more about healthy cooking skills through the VA Healthy Teaching Kitchen at www.nutrition.va.gov/Healthy_Teaching_Kitchen.asp.

This service can also be accessed via TeleNutrition if a VA facility is not easily accessible. There is also a wide range of online resources at www.nutrition.va.gov.

Eligibility

- You must be enrolled in VA care. Any treatment (including medication and counseling) must be medically necessary.

Access

- Work with your WH-PCP to determine how NFS can best support your nutritional goals. Referrals are usually needed for nutrition services.

General Medical and Specialty Care
Prosthetics

GENDER SPECIFIC PROSTHETICS

Overview

VA's Prosthetic and Sensory Aids Service (PSAS), Center for Women Veterans and Office of Women's Health collaborate closely to address the unique needs of women Veterans and is the largest and most comprehensive provider of prosthetic devices, sensory aids and associated services in the world.

Women-specific PSAS items include but are not limited to:

- Post mastectomy items
- Wigs for alopecia, after chemotherapy or gender transition
- Long-acting reversible contraceptives (e.g., intrauterine devices)
- Vaginal dilators
- Chest binders and packers
- Mastectomy bathing suits

PSAS provides a wide range of comprehensive services including orthotic and prosthetic services, mobility aids, hearing aids and eye glasses, communication and assistive devices, home respiratory therapy, recreational/rehabilitative equipment, surgical implants and durable medical equipment.

Eligibility

- Veterans generally have eligibility for prosthetic services/items if they are:
  - Enrolled in the VA health care system, and
  - Have a medical need for a prosthetic service or item.
- Additional eligibility criteria may apply for certain programs.

Access

- You need a referral to receive any prosthetics, including gender-specific prosthetics.
- You should work with your WH-PCP to get a referral.

The term "prosthetic" includes any medical device that supports or replaces loss of a body part or function. Any specialized, medically indicated item that is commercially available may be procured based on the Veteran's individualized needs.

General Medical and Specialty Care
Subspecialties

OTHER MEDICAL AND SURGICAL SUBSPECIALTIES

Overview

VA also offers many subspecialty services Veterans may need in addition to Primary Care. The list below is not exhaustive.

Medical subspecialties to highlight include:

- **Gastroenterology:** Includes the treatment of digestive diseases such as acid reflux disease, peptic ulcers, Crohn's disease and Hepatitis C
- **Dermatology:** Includes the diagnoses and treatment of diseases of the skin, hair and nails, including growths, rashes, discolorations cysts, burns, injuries, infections and other disorders
- **Allergy:** Includes diagnostic evaluations and comprehensive treatment for asthma, allergic diseases and non-HIV immune deficiencies
- **Neurology:** Includes treatment of disorders of the peripheral and central nervous system such as neuropathies, strokes, multiple sclerosis, Parkinson's disease and epilepsy
- **Endocrinology:** Includes service for diabetes and other endocrine disorders such as thyroid, pituitary and other related illnesses
- **Hearing loss/audiology:** Includes comprehensive hearing examinations, hearing aid fittings and repairs and cochlear implant management
- **Orthopedics:** Includes, but is not limited to, the diagnosis and treatment of tendinitis, fractures, sprains, strains and tears and post operative joint replacement
- **Cardiology:** Includes consults for chest pain, electrophysiology/arrhythmias, valvular disease and heart failure; as well as diagnosis and procedures, such as exercise stress testing, Echocardiogram and cardiac catheterization
- **Optometry:** Includes comprehensive eye care, including eye exams
- **Urology:** Provides surgical care for urinary incontinence, kidney stones, kidney cancers and other urologic conditions. Includes women's urologic care and in-office procedures, such as cystoscopy

Eligibility

- You must be enrolled in VA care. Any treatment (including medication and counseling) must be medically necessary.

Access

- Coordinate with your WH-PCP for necessary assessments and referrals. Referrals are required for all specialty services.
- As a reminder, this is a great opportunity to recheck your vision and hearing when you are transitioning into the VA system.

Veterans have effective and timely access to all types of medical subspecialties. Almost all health services you can find in the general community are also offered at VA facilities. If not, you can receive the care in the community.

General Medical and Specialty Care
Additional Services

Hearing Loss and Audiology

VA audiologists provide comprehensive hearing health care services including:

- Disability audiology exams
- Assessment, evaluation, treatment and management of hearing loss
- Tinnitus
- Balance disorders
- Fitting and programming of assistive listening devices
- Post-surgical rehabilitation
- Hearing screening services

Talk to your provider about how to order accessories (such as batteries) for your hearing aid or other assistive listening devices.

Eligibility

- You must be enrolled in VA care. Any treatment (including medication and counseling) must be medically necessary.

Access

- Setting up an appointment with an audiologist differs by facility. Some facilities allow patients to self-refer while others require a referral. Talk to your WH-PCP for details.

General Medical and Specialty Care
Additional Services *(continued)*

Physical Therapy

VA offers physical therapy as part of the treatment for specific conditions and injuries. The number of sessions is dependent on the condition and initial needs assessment.

If you separate from the military based on medical orders, work with a Transition Coordinator, as well as your WH-PCP, to get physical therapy at VA.

Eligibility

- You must be enrolled in VA care. Any treatment (including medication and counseling) must be medically necessary.

Access

- Your WH-PCP will provide a referral for physical therapy if it is designated as part of your treatment plan.

General Medical and Specialty Care
Pharmacy

VA provides Veterans with reliable, evidence-based medication information so you can make informed decisions about your prescriptions. When using VA Pharmacy, keep in mind these useful facts:

- Pharmacies are located on-site at local facilities (all VAMCs and some larger CBOCs) for easy pick up
- To order your prescriptions online, visit My HealtheVet where you can register to manage your VHA prescription refills
- For convenience, you may pick up your prescriptions at your local facility or receive them via mail order service through My HealtheVet
- When ordering larger quantities of medication, you may receive either a 1- or 3- month supply
- For additional information, visit the Pharmacy Benefits Management Services website at: www.pbm.va.gov/PBM/index.asp

VA Emergency Pharmacy

Since 2007, the Department of Veterans Affairs Emergency Pharmacy Service has maintained a fleet of Mobile Pharmacy vehicles to assist during major emergencies. In the event of a disaster, these self-contained vehicles are driven to a deployment site and within a few hours can function as an outpatient pharmacy capable of delivering life-saving pharmaceuticals to Veterans.

Medication Reconciliation

Medication reconciliation is a medication review. This is a way for you and your health care team to review your medicines to make sure they are helping rather than harming you. It includes reviewing a list of medications and/or supplements that are: 1) prescribed by your VA and non-VA providers or 2) unprescribed but still being taken or recently interrupted.

Veterans with greater than 50% service disability never pay for any medications.

If you currently have prescriptions it is recommended to refill those prescriptions prior to leaving active duty.

Approximately 80% of all outpatient prescriptions to Veterans are received via the VA Mail Order Pharmacy, which has been rated among the best mail-order pharmacies in the U.S. for customer satisfaction.

Reproductive Health
Gynecology Services

Overview

VA provides women Veterans with a wide range of gynecology services, both routine and specialty, throughout their lives. Your routine women's health is **provided by your WH-PCP** and any gynecologic specialty needs will be referred to a gynecologist.

Routine women's health care includes:

- Breast health (including mammograms)
  - Your WH-PCP will refer you for your mammogram (either in-house or in the community)
- Cervical cancer screening (Pap smear)
  - Your WH-PCP can conduct your Pap smear. You will only be referred to a gynecologist if there are abnormalities
- Sexually transmitted infection (STI) prevention and treatment
- Birth control counseling and management
  - You may be referred to a gynecologist for some types of birth control, like an IUD
- Pelvic exams
- HPV vaccine
  - The HPV vaccine can be administered up to age 45; however, it is important to get this vaccine earlier in life, ideally before age 26.
  - The vaccine becomes more ineffective the older you get due to the chances you have already had exposure to HPV through sexual activity

If you are unsure when you last got these routine gynecological screenings, talk to your MHS provider and get them before you separate. Your WH-PCP will ask when you last received exams or can perform them again, if you are unsure. Visit VA annually for your well-woman exam and talk to your provider about your concerns and desired path forward.

VA's gynecology surgery services include, but are not limited to, nonsurgical and surgical treatment of abnormal uterine bleeding, pelvic pain, pelvic support problems and urinary incontinence (leakage of urine) as well as treatment of gynecologic cancers like cervical, ovarian and uterine cancer.

For women who feel especially stressed by pelvic exams and gynecologic procedures (for example, after having experienced sexual trauma), specialized mental health services are available to help you reduce and manage this stress.

Eligibility

- You must be enrolled in VA care. Any treatment (including medication an d counseling) must be medically necessary.

Access

- Coordinate with your WH-PCP for necessary assessments and referrals. Referrals are required for all specialty services

Your WH-PCP will be able to provide all of your primary care and women specific health services, including well-woman exams. All additional services can be performed by a specialist.

Reproductive Health
Incontinence

TREATMENT AND SUPPORT

Overview

Urinary incontinence is fairly common in women, but it can be embarrassing and difficult to talk about. Your providers at VA are here to help you.

Incontinence is the loss of bladder control leading to the unintentional passing of urine. You can have incontinence issues at any age. Risk factors for incontinence include repetitive heavy lifting, childbearing and chronic cough.

Symptoms for incontinence include:

- Leaking urine during activities such as coughing, laughing, jumping or running
- Leaking a small to moderate amount of urine
- Frequent and sudden uncontrollable need to urinate

VA provides a range of support services for incontinence ranging from basic primary care evaluation to referral to and treatment from a urologist or urogynecologist who specialize in the treatment of incontinence. Veterans are eligible to receive a spectrum of incontinence services as needed:

- Medications
- Referral to urology or urogynecology where available, for incontinence evaluation
- Surgery
- Pelvic floor physical therapy (PFPT)
    - Including pelvic floor strengthening, improved muscle tone and bladder control, which may include biofeedback
    - PFPT can often relieve abdominal, lower back or pelvic discomfort, as well as chronic coccyx (the bone at the base of your spine or tail bone), vaginal or rectal pain. It can also sometimes help alleviate urinary/bowel incontinence and sexual dysfunction

Talk to your WH-PCP to start the evaluation and treatment process—you do not have to silently suffer.

Eligibility

- All Veterans enrolled in VA health care are eligible to receive incontinence treatment and support services as deemed medically necessary.

Access

- You should talk to your WH-PCP about incontinence services and treatment.
- If you need specialty care such as PFPT or surgery, your WH-PCP will refer you.

Pregnancy, childbirth and menopause may contribute to urinary incontinence in women, as can weak or overactive bladder muscles and nerve damage. However, urinary incontinence is common and treatable. Let VA help support your recovery!

Reproductive Health
Family Planning

SEXUAL HEALTH AND FAMILY PLANNING

Overview

Sexual health and wellness is an important area of overall well-being. Your team will ask you about your sexual health and functioning in an open and nonjudgmental way to support your overall health. If you have any concerns in this area, there may be services available. Additional information on family planning relating to pre-conception and infertility can be found on pages 50–51.

Contraception

VA provides comprehensive contraception care services and offers a wide range of birth control options for Veterans. Once enrolled at VA, Veterans are eligible for the following contraception services after discussion with their WH-PCP:

- Contraception counseling
- Birth control prescriptions
- Insertion of long-acting reversible contraceptives (LARCs) such as IUDs and implants

After discussion with the WH-PCP, Veterans can access the following types of birth control:

- **LARCs:** implant, IUDs, depo-injection
- **Hormones:** pill, patch, ring
- **Barrier methods:** condoms, sponges, cervical cap, spermicides
- **Same-day emergency contraception:** Plan B
- **Sterilization:** tubal ligation, bilateral salpingectomy (removal of both tubes)

Some birth control options may require an order from your provider, an advanced provision may be available, if needed. Many options can be obtained at your VA pharmacy. Copays may apply.

Important to note: Your WH-PCP will provide your women's specific health care (e.g., Pap smears, contraception prescriptions). Any additional gynecology services, including invasive procedures, some LARC insertions or surgery, will be referred to a gynecologist.

Through VA's pharmacy, you can get your prescription medications, including birth control, for minimal or zero copay.

Eligibility

- All Veterans enrolled in VA health care are eligible to receive contraception care services and medications.
- Contraception is fully covered for many Veterans, but your priority rating will ultimately determine your cost of care and medication copays.
- Birth control prescriptions are available and have the same guidelines as all prescriptions.
- Veterans with greater than 50% service disability never pay for any medications.

Access

- You should schedule an appointment with your WH-PCP to talk about your contraceptive needs.
- Bring your last refill or prescription with you to VA so you can continue your MHS prescription.
- VA's Pharmacy can provide your prescribed medications on-site or by mail order.
- Most types of contraception found in the community are also available at VA.
- Abortion procedures and counseling are not covered by VA.

Reproductive Health
Family Planning *(continued)*

PRE-CONCEPTION PLANNING

Overview

Pre-conception planning is about taking action now for a healthier pregnancy in the future. VA provides a full range of pre-conception planning services. During your visit, your WH-PCP will talk to you about your pre-pregnancy health. These conversations can include the following topics:

- Reproductive history/life plan
- Smoking history
- Drugs and/or alcohol use
- Physical assessment
- Healthy weight and nutrition
- Healthy environment
- Mental health
- Safety of currently prescribed medications during pregnancy
- Genetic counseling and screening
- Infections and immunization
- Management of chronic diseases, such as hypertension and diabetes

Additional areas covered can include vitamin supplementation, psychological and behavioral risks, pregnancy complications, IPV, partner's health and family history.

A detailed overview of VA Maternity Care services is provided on page 53.

If you voluntarily separate from active duty while pregnant, you may apply for transitional medical coverage under the Continued Health Care Benefit Program within 60 days after losing MHS/TRICARE eligibility.

VA's new Teratogenic Drugs (T-Drugs) program is a medical record system for prescription drug management for pregnant women. To avoid exposure to agents that could harm the development of an embryo or fetus, the T-Drugs program at VA ensures pregnant women receive safe medications and alerts providers of unsafe medications.

Eligibility

- All enrolled women Veterans of reproductive age are eligible for pre-conception planning as it is part of routine primary care.
- You must be enrolled in VA care. Any treatment (including medication and counseling) must be medically necessary.
- If you are pregnant when you enroll at VA, ask your WH-PCP to refer you to a Maternity Care Coordinator. A maternity care consult to the community may also be required.

Access

- Schedule an appointment with your WH-PCP.
- Referrals are not required. Typically, pre-conception planning is discussed during a primary care visit.
- Pre-conception planning can often be completed in one visit.
- If you're on medication for a mental health condition, such as anxiety or depression, your WH-PCP can access a reproductive mental health consult to help you make a plan to keep you and your baby as healthy as possible during pregnancy.

Reproductive Health
Family Planning *(continued)*

INFERTILITY

Overview

Infertility is the inability to conceive after one year of regular unprotected intercourse. Older women and women with a known cause of infertility should seek care earlier. VA has a range of infertility assessment and counseling services for eligible Veterans, which largely align with the infertility services available at DOD. All enrolled Veterans may be provided with comprehensive health counseling, evaluation management and select treatment for infertility conditions regardless of service connection, sexual orientation, gender identity, gender expression or relationship/marital status.

Services include:

- Genetic counseling, screening and diagnostic testing
- Laboratory blood testing
- Pelvic and/or transvaginal ultrasound
- Surgical correction of structural pathology
- Reversal of tubal ligation
- Medication (e.g., hormonal therapy, oral, injectable)
- Mental health counseling
- Oocyte cryopreservation (egg freezing) for medical indications
- Intrauterine insemination for medically indicated conditions (maximum of 6 cycles per pregnancy)
- In vitro fertilization (IVF) for Veterans with a service-connected condition that results in infertility, who are legally married and have an intact uterus, at least one functioning ovary and a male spouse that can produce sperm or cryopreserved sperm (donor eggs, donor sperm, donor embryos and surrogacy are not covered services)
- Adoption costs, up to $2,000, for Veterans with a service-connected condition that results in infertility. For more information, visit www.blogs.va.gov/VAntage/47109/va-now-offers-adoption-reimbursement
- Other diagnostic studies, treatments or procedures

VHA Directive 1332 defines the infertility evaluation and treatment services within VA that are available for all enrolled Veterans. Learn more about VA's infertility services at www.va.gov/vhapublications/ViewPublication.asp?pub_ID =5431.

Eligibility

- All Veterans enrolled in VA health care are eligible to receive infertility treatment.
- Not all enrolled Veterans are eligible for assisted reproductive technology or in vitro fertilization (ART/IVF).
- Benefit is limited to married Veterans with a service-connected condition resulting in infertility.
- Costs of obtaining, transporting or storing sperm/oocyte samples are not covered by VA.
- VA does not cover donor eggs, donor sperm, donor embryos and surrogacy.

Access

- You should talk to your WH-PCP about infertility evaluation and treatment services.
- You need a referral from your WH-PCP to receive infertility services.
- Check with the Eligibility Office at the time of your separation for details.

Reproductive Health
Menopause

MENOPAUSE MANAGEMENT

Overview

Menopause is the normal change in a woman's life when her menstrual period stops. During menopause, a woman's body slowly produces less estrogen and progesterone hormones. Menopause is a gradual process—often taking 3–5 years. In general, menopause starts between ages 45–55, but it could range from ages 40–60 (menopause beginning prior to age 40 is considered premature and requires evaluation). Checking hormone levels in the blood can help determine if you are in menopause. Often, menopause will start for you around the same age that it started for your mother.

Menopause happens in three stages:

- **Peri-menopause**
  - Women will start to experience symptoms that indicate menopause is coming as female hormone levels begin to slowly decrease. Menstrual periods become irregular, women may experience hot flashes, night sweats, sleep problems and/or mood swings. Be careful to consistently use contraception during this stage as pregnancy can still occur.
  - Not all women will experience the same signs or symptoms of menopause; these represent examples of what you may experience.
- **Menopause**
  - Menopause is the permanent ending of menstrual periods. You have reached menopause when you have not had a menstrual period for 12 consecutive months.
- **Post-menopause**
  - This is the period of time after menopause. During this time, a woman's body makes only a very small amount of estrogen. A woman's risk of heart disease and osteoporosis (weaker bones) increases.
  - WH-PCP support services can include hormone replacement therapy, non-hormonal treatments for symptom management and medication to protect your bones.

Eligibility

- You must be enrolled in VA care. Any treatment (including medication and counseling) must be medically necessary.

Access

- Request an appointment with your WH-PCP. Routine menopause management can be delivered by your WH-PCP. If needed, they can refer you to gynecology.

Symptoms related to menopause can start as early as your 30s and can last well into your 60s. You can be evaluated and treated for these symptoms, if necessary, regardless of age.

Maternity Care

Overview

Maternity benefits have been included in the VA medical benefits package since 1999. Generally speaking, these benefits begin with the confirmation of pregnancy, preferably in the first trimester and continue through the postpartum visit, usually 6-8 weeks after delivery or when the Veteran is medically released from obstetric care. Maternity care is provided by non-VA providers in non-VA facilities. Women can continue to receive care for other conditions at VA during this period. A Maternity Care Coordinator (MCC) will be assigned to each Veteran to help her coordinate maternity care. Approved maternity services include:

- Comprehensive assessment
- Prenatal care and delivery with authorization
- Standard and special laboratory tests
- Prenatal screening for genetic disorders
- Gestational dating ultrasounds
- New specialty consultations, including access to a lactation consultant
- Coordination with other VA care
- Depression, depression screening and perinatal and postpartum depression treatment
- Postpartum care and contraception
- Newborn care (for the date of birth plus 7 calendar days after the birth of the child)
- Pharmacy prescriptions
- Pregnancy-related education, including lactation support
- Non-emergent maternity-related care
- NCA services for infant loss

If you or your spouse are pregnant at the time of transition, you may be eligible to extend your in-service health care benefits through 6 weeks post-delivery. You may also choose to enroll in VA health care. Be sure to enroll as soon as possible after separating from the military.

More information is included in VHA Handbook 1330.03. VA/DOD Clinical Practice Guidelines for the Management of Pregnancy—Patient Summary can be found at www.healthquality.va.gov/guidelines/WH/up/VADoDPregnancyCPGPatientSummary4102018.pdf.

The Purple Book is a complete guide to pregnancy in VA and DOD and can be accessed at www.qmo.amedd.army.mil/pregnancy/PurpleBook.pdf.

Eligibility

- All Veterans are eligible to receive Maternity Care Coordination. Please note when transitioning from MHS continued coverage is not automatic; arrangements with your current coverage provider may be needed.
- Maternity care is provided in community facilities but is covered by VA.

Access

- Each VAMC has a Maternity Care Coordinator that will reach out to you as soon as you are confirmed pregnant by a referral from your WH-PCP.
- You should work with your MCC and PCP team throughout your pregnancy to ensure that your health care needs are being met.
- Your MCC should be able to answer any questions you have during pregnancy around available services and coverage.

Prenatal care and deliveries occur in non-VA facilities but are covered by VA.

Maternity Care *(continued)*

Nursing Bras, Breast Pumps and Maternity Belts

Contact your MCC to obtain nursing bras, nursing pads, lanolin, breast pumps and maternity belts at least 2 weeks in advance of your estimated date of delivery.

Related supplies, such as breast pads, breast milk storage bags and nipple cream, may be obtained through the VA Pharmacy. Additional information can be found here: www.womenshealth.va.gov/WOMENSHEALTH/outreachmaterials/reproductivehealth/breastfeeding.asp.

Eligibility

- You must be enrolled in VA care. Any treatment (including medication and counseling) must be medically necessary.

Access

- Work with your MCC or WH-PCP team to get a referral.

Maternity Care *(continued)*

Newborn Care

VA provides newborn health care services for the date of birth plus 7 calendar days after the birth of the child. All appropriate post-delivery services are included in this benefit.

While VA will pay for up to 7 days of newborn care, services will be performed in the community and not at a VA health care facility. Also, sign up with the Text4baby App to get free health and safety information about your infant's development. Learn more at text4baby.org.

Eligibility

- You must be enrolled in VA care. Any treatment (including medication and counseling) must be medically necessary. You must be receiving VA maternity benefits.

Access

- Talk to your MCC at your preferred VA health care facility. The MCC, Social Work Office and Office of Community Care will work together to provide support around newborn care.

Mental Health and Substance Use

Mental Health

MENTAL HEALTH CARE SERVICES

VA mental health providers are here to help you. A number of services are available providing a full continuum of mental health services for women Veterans.

As Veterans transition into the VA health care system, it is important to know that mental health care is stigma free and there is a different understanding of what wellness means at VA.

Overview

VA policy requires that mental health services be provided in a manner that recognizes that gender-specific issues are important components of care. For this reason, VAMCs have Women's Mental Health Champions.

VA offers a full continuum of mental health services for women Veterans:

- General outpatient care (including assessment, psychiatric medications and individual, group and family therapy)
- Specialty services (including PTSD, substance use disorders, homelessness)
- Evidence-based treatments
- Reproductive mental health services
- Eating disorders treatment
- Residential (mixed-gender and women-only) and inpatient treatment options
- Telemental health and mobile application services
- Family and couple services

Mental health care is also available in Primary Care–Mental Health Integration (PC-MHI) clinics. With PC-MHI, mental health experts work directly with your WH-PCP team to develop a coordinated treatment plan that is best for you.

Mental health care is available at VAMCs, CBOCs and Vet Centers. In addition to face-to-face appointments, you may receive care from mental health specialists at other VA facilities through telemedicine technology.

Mental health treatment services offered at each facility type can be referenced on page 94.

Eligibility

- All Veterans are eligible for at least 1 year of mental health services. Any treatment (including medication and counseling) must be medically necessary.
- Former Service members with an OTH discharge may receive care for a mental health emergency for an initial period of 1 year from discharge, which can include outpatient, residential or inpatient care.

Access

- If you are enrolled in VA primary care, you can schedule an appointment with your WH-PCP to discuss your mental health concerns and treatment options.
- Check with your facility about their scope of local mental health services. Available on-site services vary depending on location.
- At some facilities, you are able to self-refer for mental health services. Talk to your WH-PCP or the WVPM at your local facility for more information.

Mental Health and Substance Use
Sexual Trauma

MILITARY SEXUAL TRAUMA-RELATED CARE

Overview

Unfortunately, sexual assault or sexual harassment can be part of military service and can impact health and well-being, even many years later. MST is the terms used by VA to refer to sexual assault or sexual harassment experienced during military service. MST can occur at any time or place during your military service, such as while you're on or off duty, or on or off base. The perpetrator(s) may or may not be someone you know and may be fellow Service members or civilians. MST includes:

- Being pressured into sexual activities, such as with threats or with implied better treatment in exchange for sex
- Sexual activities when you could not consent, such as when asleep or intoxicated
- Being overpowered or physically forced to have sex
- Being sexually touched or grabbed in a way that made you uncomfortable, including during hazing experiences
- Comments about your body or sexual activities that you found threatening
- Unwanted sexual advances that you found threatening
- Any other sexual activity where you were involved against your will or unable to say "no"

When screened by their VA provider, about 1 in 3 women report having experienced MST no matter what their sexual orientation or gender identity.

VA Services for MST

VA provides **free counseling and treatment** for mental and physical health conditions related to MST.

- MST-related care is available in every VA health care system. Services include outpatient, inpatient, and residential treatment.
- Every VA health care system has an **MST Coordinator** who can help you access VA services and programs.
- You can ask to meet with a female or male clinician if it would make you feel more comfortable.
- MST-related counseling services are also available at VA's community based Vet Centers.

Current Service members can receive these Vet Center services without Department of Defense referral. Information about any MST-related services current Service members receive at Vet Centers is confidential and **will not be released to the Department of Defense**.

Eligibility

- VA's MST-related services are available to Veterans and most former Service members with an other than honorable or uncharacterized discharge.
- Current Service members can also receive services related to MST, although for some types of services, a Defense Department referral may be required.
- You do not need to have reported the incident at the time or have other documentation that it occurred to receive care.
- Free MST-related services are separate from the disability compensation process. Service connection is not required.
- You may be able to receive free MST-related care even if you are not eligible for other care.

All VA medical facilities can assist you in obtaining a Sexual Assault Forensic Exam (SAFE) to collect evidence and provide any acute treatment needed after sexual assault.

Access

- Contact your WH-PCP, the MST Coordinator at your local VA health care system or your local Vet Center. Additional information is available at www.mentalhealth.va.gov/msthome.asp
- You can also call the DOD SAFE Helpline at **1-877-995-5247** for support and DOD-specific information.

Mental Health and Substance Use
Additional Services

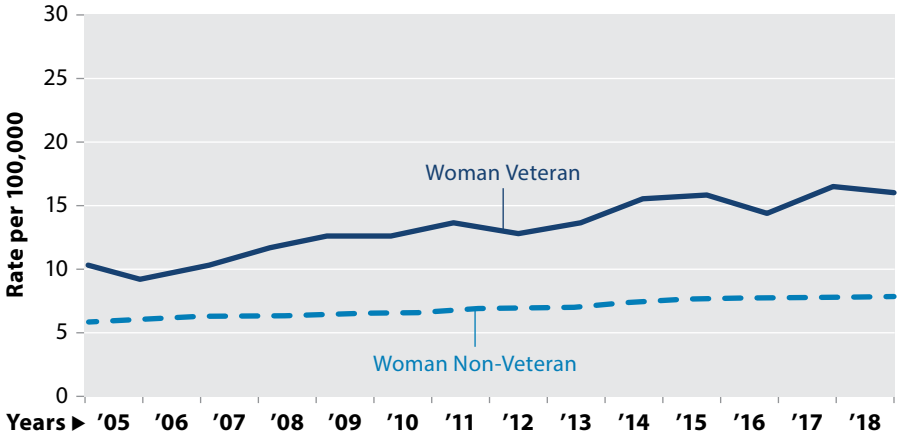
SUICIDE PREVENTION

The transition is a high-risk period for suicide for all Veterans. Multiple outlets are available to Veterans to prevent suicide: 24-hour confidential crisis lines and chat lines, mental health specialists who can develop personalized safety plans and support groups. VA is here to help you recognize warning signs and understand when emotional issues reach a crisis point.

In both 2017 and 2018, the age-adjusted suicide rate among women Veterans was 2.1 times that of non-Veteran women. In 2005, the age-adjusted suicide rate among women Veterans was 1.8 times that of non-Veteran women. Lesbian women Veterans experience double the rate of suicidal ideation relative to heterosexual women Veterans. Transgender Veterans in VA experience a 20 times greater risk of suicidal behavior than non-transgender Veterans in VA generally. Take a self-check at www.vetselfcheck.org/Welcome.cfm or hear other Veterans stories at www.maketheconnection.net. More suicide prevention resources are available on the next page.

Between 2005 and 2017, the age-adjusted rates of suicide among Veterans increased at a higher rate compared to their civilian counterparts.

Suicide Rates Among Women Veterans and Non-Veteran Women, 2005–2018



Eligibility

- Some suicide prevention services are available for all Veterans, including those who are not enrolled in VA care. Former Service members with an OTH administrative discharge may receive care for a mental health emergency for an initial period of up to 90 days, which can include outpatient, residential or inpatient care.

Access

- Go to any VAMC. Each VAMC center has a Suicide Prevention Coordinator to connect you with the counseling and services needed.
- Veterans in crisis should call the **Veterans Crisis Line (1-800-273-8255. press 1)**. You can also send a text message to 838255 to connect to a VCL responder or start a confidential online chat session at www.Veteranscrisisline.net/chat.

Source: U.S. Department of Veteran Affairs, Office of Mental Health and Suicide Prevention, 2020 National Veteran Suicide Prevention Annual report. Available: www.mentalhealth.va.gov/docs/data-sheets/2020/2020-National-Veteran-Suicide-Prevention-Annual-Report-11-2020-508.pdf.

Mental Health and Substance Use Additional Services *(continued)*

Women Veterans have a greater likelihood of using firearms, which are highly lethal, compared to non-Veteran women. This may explain some of the differences in suicide rates between Veteran and civilian women.

Data indicate that using VA health care services may have a protective effect for women Veterans. The rate of suicide among women Veterans who have recently used VA services is lower than the rate of suicide among women Veterans who have not recently used VA services. In fact, among women Veterans who were VA users, there was a slight decrease in the age-adjusted suicide rate and a decrease in the number of suicide deaths from 2017 to 2018. While women who use VA services tend to experience more known risk factors for suicide than non-VA users, they have about the same actual risk as non-VA users.

VA is a national leader in suicide prevention with advances in universal suicide risk screening, primary care mental health integration (PCHMI), same day mental health care services and Veterans Crisis Line performance. Visit www.mentalhealth.va.gov/suicide_prevention/index.asp for more information and resources.

Some available resources include:

- Make the Connection (https://MakeTheConnection.net)
- Coaching Into Care (www.mirecc.va.gov/coaching)
- Whole Health (www.va.gov/WHOLEHEALTH)
- Outpatient mental health services
- Residential treatment programs
- Inpatient mental health care
- Specialty treatment for PTSD
- Free treatment for mental and physical health conditions related to MST
- Women's Mental Health Champions
- IPV Coordinators
- VA Suicide Prevention Coordinators
- **Veterans Crisis Line** (www.VeteransCrisisLine.net/GetHelp/ResourceLocator.aspx)

Source: U.S. Department of Veteran Affairs, Office of Mental Health and Suicide Prevention, 2020 National Veteran Suicide Prevention Annual report. Available: www.mentalhealth.va.gov/docs/data-sheets/2020/2020-National-Veteran-Suicide-Prevention-Annual-Report-11-2020-508.pdf.

VA recently launched the S.A.V.E. online suicide prevention training video (https://psycharmor.org/courses/s-a-v-e) in collaboration with PsychArmor Institute, a national nonprofit providing online education and support to those who work with, live with or care for Service members, Veterans and military and Veteran families.

S.A.V.E.—which stands for "Signs," "Ask," "Validate," and "Encourage/Expedite"—offers simple steps that anyone can take when talking with Veterans who are at risk for suicide.

#BeThere

Veterans Crisis hotline
1-800-273-8255

Mental Health and Substance Use Additional Services *(continued)*

Outpatient and Residential Substance Use Disorder Programs

More than half of women Veterans in these particular VA programs are treated for alcohol use disorder and more than one-fifth for cocaine use. Women are also treated for opiates, marijuana and other drugs. Options include therapy—either individually or in a group—and prescription medications.

To help make sure that Veterans can attend VA treatment services, programs offer evening and weekend hours.

Eligibility

- If you don't qualify for VA health care, you may still be able to get certain health care services. Any treatment (including medication and counseling) must be medically necessary.*

Access

- Work with your WH-PCP or VA mental health provider to determine which program is right for you and get the help you need.

* *Former Service members with an OTH administrative discharge may receive care for a mental health emergency for an initial period of up to 90 days from discharge, which can include outpatient, residential or inpatient care.*

Mental Health and Substance Use Additional Services *(continued)*

Detoxification (Detox)

You may need detox before you start treatment if you are physically addicted to alcohol and/or certain drugs. Detox can occur in an inpatient unit or outpatient clinic depending on your medical risks and preferences.

Treatment programs may include medicine, counseling and attending support groups, such as Alcoholics Anonymous (AA). Treatment doesn't only focus on alcohol addiction; it can also help you manage problems in your daily life.

Eligibility

- If you don't qualify for VA health care, you may still be able to get certain health care services. Any treatment (including medication and counseling) must be medically necessary.*

Access

- Your WH-PCP will help you decide which treatment plan is best for you and understand how to access services.

* *Former Service members with an OTH administrative discharge may receive care for a mental health emergency for an initial period of up to 90 days from discharge, which can include outpatient, residential or inpatient care.*

Mental Health and Substance Use Additional Services *(continued)*

Posttraumatic Stress Disorder (PTSD) Screening and Treatment

VA provides comprehensive PTSD screening and treatment including outpatient psychotherapy, medications, complementary and integrative treatments, skills groups, residential treatment and inpatient groups. Additionally, same-day help is available.

Visit the National Center for PTSD at www.ptsd.va.gov for more information about VHA PTSD screening and treatment.

Eligibility

- If you don't qualify for VA health care, you may still be able to get certain health care services. Any treatment (including medication and counseling) must be medically necessary.*

Access

- Talk to your WH-PCP or VA mental health provider to get a referral for PTSD care or call the **Veterans Crisis Line at 1-800-273-8255 or 911 in emergency situations**.

* *Former Service members with an OTH administrative discharge may receive care for a mental health emergency for an initial period of up to 90 days from discharge, which can include outpatient, residential or inpatient care.*

Mental Health and Substance Use Additional Services *(continued)*

Traumatic Brain Injury (TBI) Screening and Treatment

VA's Polytrauma System of Care (PSC) provides a full range of rehabilitation services, including inpatient, transitional and outpatient care (for both Veterans and Service members covered by TRICARE authorization) who have sustained polytrauma, TBI or other acquired brain injuries.

An interdisciplinary team treats TBIs. The team includes psychiatry, psychology, occupational therapy, physical therapy and neurology.

Eligibility

- If you don't qualify for VA health care, you may still be able to get certain health care services. Any treatment (including medication and counseling) must be medically necessary.*

Access

- Talk to your WH-PCP or VA mental health provider to get a referral to neurology or other mental health specialists for TBI screening and treatment.

* *Former Service members with an OTH administrative discharge may receive care for a mental health emergency for an initial period of up to 90 days from discharge, which can include outpatient, residential or inpatient care.*

Mental Health and Substance Use Additional Services *(continued)*

Women's Residential Programs

Women-only residential treatment is available to provide time-limited, intensive treatment for PTSD, substance use disorders and other mental health concerns, as well as treatment for psychosocial needs, including homelessness and unemployment. Women are admitted to a residential unit that provides 24-hour supervision, daily professional treatment and comprehensive care.

Screening tools are easily available to self-assess mental health needs for PTSD, depression, substance use and alcohol abuse: www.myhealth.va.gov/mhv-portal-web/screening-tools.

Eligibility

- If you don't qualify for VA health care, you may still be able to get certain health care services. Any treatment (including medication and counseling) must be medically necessary.*

Access

- Speak with your WH-PCP, VA mental health provider or call **1-855-VA-WOMEN** to get access to these services.

* *Former Service members with an OTH administrative discharge may receive care for a mental health emergency for an initial period of up to 90 days from discharge, which can include outpatient, residential or inpatient care.*

Other Services
Dental Services

UNDERSTANDING YOUR DENTAL ELIGIBILITY

Eligibility for dental services is complex and is based a number of factors:

If you:	You are eligible for:
Have a service-connected compensable (10% or greater) dental disability or condition.	Any needed dental care.
Are a former prisoner of war.	Any needed dental care.
Have service-connected disabilities rated 100% disabling or are unemployable and paid at the 100% rate due to service-connected conditions.	Any needed dental care. **Note:** Veterans paid at the 100% rate on a temporary rating are not eligible.
Request dental care within 180 days of discharge or release (under conditions other than dishonorable) from a period of active duty of 90 days or more.	One-time dental care if your DD Form 214 certificate does not indicate that a complete dental examination and all appropriate dental treatment has not been rendered prior to discharge.
Have a dental condition clinically determined by VA to be associated with and aggravating a service-connected medical condition.	Dental care to treat the oral conditions that are determined by a VA dental professional to have a direct and material detrimental effect to your service- connected medical condition.
Have a service-connected non-compensable (0%) dental condition/disability resulting from combat wounds or trauma.	Any dental care necessary to provide and maintain a functioning dentition.
Are actively engaged in a Title 38 USC Chapter 31 Veteran Readiness & Employment program.	Dental care to the extent necessary as determined by a VA dental professional to make possible your entrance into a rehabilitation program and prevent interruption.
Are receiving VA care or are scheduled for inpatient care and require dental care for a condition complicating a medical condition currently under treatment.	Dental care to treat the oral conditions that are determined by a VA dental professional to complicate your medical condition currently under treatment.
Are enrolled in a qualifying VA sponsored homeless residential rehabilitation program for at least 60 days.	A one-time course of dental care that is determined medically necessary to relieve pain, assist you to gain employment or treat moderate, severe or complicated and severe gingival and periodontal conditions.

Dental benefits are provided by VA according to law. Eligibility for dental care is complex and is based on presence of certain categorized disabilities and/or conditions. Care provided may be extensive or limited based on your individual dental eligibility classification.

If you are eligible for dental services but not yet enrolled in VA health care, you can apply using the Apply for health care benefits website: www.va.gov/health-care/apply/application/introduction.

If you are not eligible, Veterans enrolled in VA health care can purchase dental insurance at a reduced cost through the VA Dental Insurance Program (VADIP): www.va.gov/healthbenefits/VADIP.

Retirees can purchase dental coverage through the Federal Employees Dental and Vision Insurance Program (FEDVIP) at: www.tricare.mil/CoveredServices/Dental.

For more information about dental services and to see a detailed eligibility fact sheet, visit: www.va.gov/dental.

Other Services
Telehealth Care Services

VA is committed to providing all enrolled women Veterans with access to appropriate services. The utilization of telehealth can enhance VA's capacity to provide the right treatment, in the right place, at the right time. Telehealth availability is facility dependent. There are three different ways VA facilities can arrange for telehealth services:

1. **Intrafacility**
   Between two facilities in the same VISN and local health care system
2. **Interfacility**
   Between two facilities in the same VISN but different local health care systems
3. **VA Video Connect (VVC)**
   Connects provider with a patient in their home via a computer or phone with a web camera

Available Telehealth Services

Tele Primary Care

Tele Pharmacy

Including chronic disease management, pregnancy and lactation medication review, teratogenic counseling and medication management

Tele Well-being

Including group exercise, nutrition counseling, stress reduction and relaxation

Tele Pain Management

Tele Mental Health

Including MST-related counseling and readjustment counseling

Tele Care Coordination

Including breast and cervical cancer screening coordination and maternity care coordination

Tele Gynecology

Including contraceptive counseling, pre- and post-OP visits, prenatal visits and reproductive endocrinology consultation

For additional information on telehealth models and available telehealth services, visit www.telehealth.va.gov, or consult with your WH-PCP. Many telehealth services will require a referral.

General Trends for Service Availability

A FEW COMMON GUIDELINES PERTAIN TO ACCESSING CLINICAL SERVICES AT VA

These high level pointers will assist with your understanding of the services you can receive.

- Comprehensive women's health is a model of care that provides primary care, gender specific care, and care coordination by one provider at one site.*
- There are 5 women's health roles available at VA: WVPM, WH-PCP, WHMD, WMHC and MCC, but you do not have to interact with all five of them.
- Primary care serves as the first point of contact for Veterans enrolled in VA. You can schedule appointments in person, via phone or online through My HealtheVet. WH-PCPs will coordinate all specialty appointments.
- When enrolling, you can state your gender preference for your WH-PCP. These will be assigned based on availability.
- You will also be given the option to be assigned a WH-PCP. These clinical providers have been trained in primary care and women-specific health care. **Note:** At some sites, you are auto-assigned to a WH-PCP.
- Once enrolled, you are eligible for most VA health services. Service eligibility and affiliated copays are dependent on your assigned Priority Group. A list of all Priority Groups is provided on pages 77–78.
- The disability claim process is separate from your VA health care enrollment.
- Medication for service-connected conditions is free and Veterans with greater than 50% service-connected disability never pay for medication.
- Many services are available on site, but if they are not, can be referred out to the community by your WH-PCP.

Even if you don't think you are eligible for VA health care, talk to your enrollment coordinator, as you might be eligible for certain services.

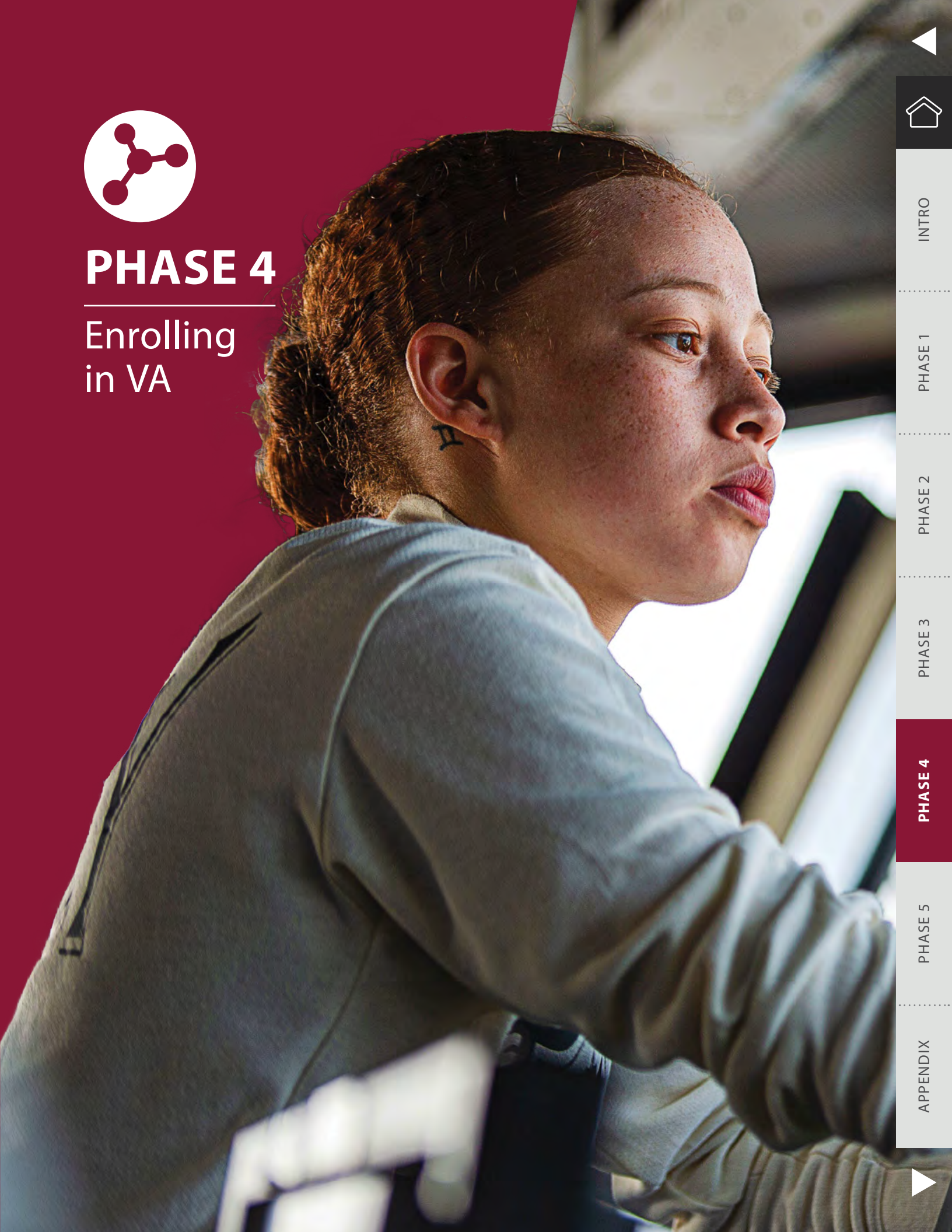
* *The services you can expect with comprehensive women's care include acute and chronic illness, gender-specific primary care, preventive services, mental health services and coordination of care.*

“Initially my intent was not necessarily to utilize the VA for my primary health care provider, but after the class and understanding services the VA offers for females, it was much more of a place that I want to start.”

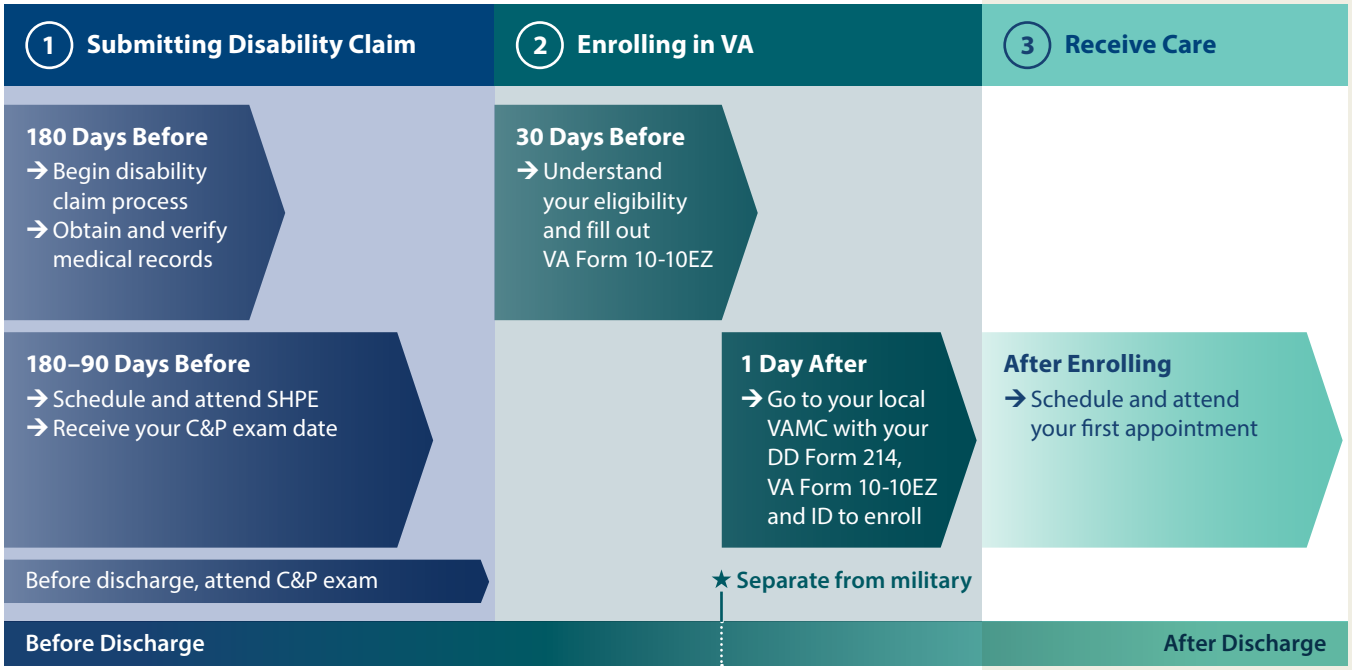
— Former Women’s Health Transition Training participant

PHASE 4

Enrolling in VA



U.S. Department of Veterans Affairs
Enrollment Timeline



The VA enrollment timeline is broken into 3 high-level steps.

1. **Submitting your disability claim (if needed)**
   Your disability claim is submitted to VBA. For active-duty Service members, you should begin this process 180 days before separating or retiring.

2. **Enroll in VA**
   Your VA enrollment will not be final until you separate or retire and receive your final DD Form 214. The DD Form 214 is your ticket into VA!

3. **Schedule your first appointment**
   Call your VA facility or use the VA Online Scheduling Tool on My HealtheVet. See page 25 for details on how to prepare for your first appointment.

The figure above illustrates the key steps transitioning Servicewomen should take to enroll in VA health care.

Each person's individual situation will likely be unique and we encourage you to talk to your Eligibility Office to discuss your specific situation.

Some individuals will need to submit a disability claim to start the enrollment process, but this may not be needed in all cases.

The Transition Assistance Program (TAP) has great resources to help you. Learn more about VA TAP: benefits.va.gov/TAP

Disability Claims and Exams

SUBMITTING YOUR DISABILITY CLAIM IS AN IMPORTANT FIRST STEP.

Why is the Disability Claims Process Important?

The disability claims process is how VBA determines your service-connected status, which ultimately affects your VA priority group and what services you receive at no cost. The recommended way to file claims for disability compensation is 180 days prior to separation or retirement. You can do this through the Benefits Delivery at Discharge (BDD) program. Claims processing times tend to be much shorter. Applying for your claim will not automatically enroll you in VA.

Pre-Transition Exams

Separation History and Physical Exam (SHPE)
Timing: at least 180–90 days before separation or starting terminal leave

- One of the eligibility requirements for receiving post-service VA disability compensation benefits and health care is that there be a record of referrals, complaints, symptoms, treatment or diagnosis of disease, injury, disorder, or disability during active military service.
- You can receive medication or treatment for any ailments at your SHPE.
- You are responsible for scheduling your exam at a military hospital/clinic or VA facility.
- Visit https://health.mil/SHPE to learn more.

Compensation and Pension Exam (C&P)
Timing: 180-90 days before separation

- This exam helps VA determine if you have a disability related to your military service or if your condition should receive an increased rating due to it worsening.
- The examiner will only perform a medical review to identify or confirm any disabilities shared in your claim application. The examiner won't prescribe any medicine or treat any ailments.
- A VAMC or VA partner is responsible for reaching out to you and scheduling your C&P exam via mail or phone.
- For more information visit: www.benefits.va.gov/COMPENSATION/docs/claimexam-faq.pdf.

How is Disability Rating Determined?

To determine a Veterans' Combined Disability Rating the VBA uses a concept called the **Whole Person Theory**. A disability rating can never be greater than 100 since a person can never be more than 100% able-bodied. VBA makes a determination about the severity of a disability based on the evidence submitted as part of a claim or that VBA obtains from military records. **All medical challenges should be documented for an accurate rating.**

Some transitioning Service-women will go through a different process to separate—**Integrated Disability Evaluation System (IDES)**: a joint DOD and VA disability evaluation process. Determinations for ill or injured Service members are made regarding fitness for continued military service. If appropriate a disability rating is given and disability benefits provided

For more information see the IDES Fact Sheet Resource: https://warriorcare.dodlive.mil/Portals/113/Documents/Reference%20Center/IDES-New-Factsheet.pdf?ver=h7rjAIMYS37CsKkiU-D_IA%3d%3d.

Transferring Medical Records

FOLLOW THESE 5 STEPS TO TRANSFER YOUR MEDICAL RECORDS TO VA.

1. Request, gather and make at least 2 digital copies of all active duty and civilian (if referred out) medical records.
2. Work with VA or a local accredited Veterans Service Organization (VSO) to review your medical records.
3. Fill out VA Form 21-526EZ: Application for Disability Compensation and Related Compensation Benefits.
4. Submit your VA Form and medical records locally or by mail to:

   Department of Veterans Affairs
   Claims Intake Center
   PO Box 4444 Janesville,
   WI 53547-4444
5. Create a VA.gov account so you can always add to your claim and receive results of your disability rating electronically. You will also receive your results by mail.

Additional Resources

VA Compensation Home Page
www.benefits.va.gov/compensation

Compensation 101: What is Disability Compensation?
www.youtube.com/watch?v=T3RodE0nGFc

Compensation 101: How Did I Get This Rating?
www.youtube.com/watch?v=oM7oYzL2DCg

Did you KNOW?

VA accredited VSOs are available to help you review your medical records?

To locate VSOs in your area: www.va.gov/ogc/apps/accreditation/index.asp.

A VSO should never charge you to review your medical records and submit the disability claim. This is a free service provided to you as part of your military service.

Eligibility 101

AM I ELIGIBLE FOR VA?

If you served on active duty, separated under any condition other than dishonorable and served for 24 consecutive months, you are eligible for VA care starting when you separate. However, there are exceptions to coverage levels as each situation is assessed individually.

- Once you enroll in VA and receive your final C&P exam results, you will be able to determine what care is provided to you at no cost and what care will require a copay.
- If you are eligible for care at VA, you are eligible to receive all medically necessary health care services.
- Once you are eligible for VA care, you are always eligible.
- If you are a combat Veteran (active duty in a theater of combat operations) with service-related health issues, you are eligible for 5 years of free comprehensive VA care for that service-related issue starting from your discharge date. During these 5 years of free care, service-related issues are presumed and all of your comprehensive care will be delivered at no cost.
- If you have TRICARE and/or private insurance, you are still eligible for VA services.

If you have any questions regarding VA eligibility, please call the Health Eligibility Center (HEC) at **1-877-222-VETS (8387)** or contact your VAMC and ask for the Eligibility Specialist.

Each Veteran's situation is different and this information should be used as a resource to help you navigate the process.

Reserve Components Eligibility

For National Guard and Reserve members, there are 2 ways to qualify for VA health care. You must have separated under any condition other than dishonorable to be eligible.

1 Veteran Status

Title 38 of the Code of Federal Regulations defines a Veteran as "a person who **served in the active military, naval or air service** and who was **discharged or released under conditions other than dishonorable**."

Once Veteran status is obtained, **you must meet one of the minimum active-duty service requirements** defined in Title 38 USC 5303A to qualify for VA health care.

- **Title 10 –** Active duty defined as full-time duty in the U.S. Armed Forces, such as unit deployment during war, including travel to and from such duty—this does not include active duty for training
- **Title 32 –** Full-time National Guard duty defined as duty performed for which you are entitled to receive pay from the federal government, such as responding to a national emergency

These orders do not have to be a certain length; the requirement is that you serve for the full timeframe in which you were called to active duty.

OR

2 VA Adjudicated Service-Connected Disability

If you have a **VA adjudicated service-connected disability**, then you would **automatically gain Veteran status**. This disability does not need to have occurred while activated.

It is possible to have served in the National Guard or Reserve and not be eligible for VA care. Please work with the Eligibility Office to determine your eligibility.

Reserve Components Eligibility *(continued)*

There are several other key points to highlight for National Guard or Reserve members enrolling in the VA.

Disability Claims

While the process is similar to that of active duty members, National Guard and Reserve members should keep in mind the following items when enrolling in VA

- Examinations:
  - You should complete a Separation physical after each deployment. It is important to keep a running list of existing issues.
  - After you submit your disability claim, the C&P exams will be the same for you as for civilian VA clients.
  - If you have been activated multiple times, you can complete multiple claims.
- Medical records:
  - You will need to request your medical records from each active duty location where you have served.
  - Unlike active duty, your medical records are not consolidated and do not travel with you.
  - Double check your medical records to ensure they are complete and accurate.

Military Drill Pay Versus Disability Compensation Pay

You are not able to receive VA compensation at the same time you are receiving military (drill) pay. You will be required to waive either your VA pay or your military compensation.

Most Veterans choose to receive drill pay instead of disability compensation or pension because drill pay is typically the greater benefit. These Veterans must waive their VA benefits for the same number of days they received drill pay.

You will need to elect which pay you would like to receive. More information can be found at www.benefits.va.gov/WARMS/docs/admin21/m21_1/mr/part3/subptv/ch04/M21-1MRIII_v_4_secC.doc. You will need to fill out VA Form 21-8951.

Remember

Bring all of your military discharge papers (such as the NGB Form 22 or other separation documents) when you enroll in VA health care.

Service-Connected Status

Type of Service	VA Copay Expectation	TRICARE Prime Copay Expectation	Private Sector Copay Average
Primary Care	**$15**	**$20**	**$15-25**
Specialty Care	**$50** **Cap of $50 per day** even for multiple appointments within the same day	**$30** Cost **per specialist visit** with no daily cap	**$30-50** Cost **per specialist visit** with no daily cap

Service-Connected Status and Copays

Service-connected status will help place you in your priority group. Then, based on your priority group, a copay might be applicable.

Service-Connected

Service-connected is an **injury or illness** that was **incurred or aggravated during active military service that is still causing issues**. You must have been separated or discharged under conditions other than dishonorable to be eligible.

A C&P exam will determine your level of service-connected disability. This service-connected status will help determine your priority group; your status and resulting priority group, can change if the conditions worsen.

Copays

Based on your priority group, you might have to pay copays to receive care at VA. Many Veterans qualify for free health care services based on a VA compensable service-connected condition or other special eligibilities. However, **most Veterans are required to complete a financial assessment** (based on IRS data) at the time of enrollment to determine if they qualify for free health care services.

Veterans whose income exceeds VA income limits, as well as those who choose not to complete the financial assessment at the time of enrollment, **must agree to pay required copays** for health care services to become eligible. A copay comparison can be found above. More information, including copay amounts, can be found at: www.va.gov/health-care/copay-rates.

Make sure to document all of your health care needs now. Even if you don't think it is an issue now, it might become one later.

VA Priority Groups

PRIORITY GROUPS DICTATE WHAT SERVICES YOU ARE ENTITLED TO RECEIVE AT VA.

Overall, you are entitled to receive more benefits if you are in a lower priority group number (ex. priority group number 1 receives the most benefits).

Priority Group Overview

- 8 VA priority groups identify which no-cost services you are entitled to receive at VA.
- The Enrollment Coordinator will work with you to review your DD Form 214 to make sure you are placed in the appropriate VA priority group. Your priority group may change over time due to evolving medical conditions or income changes.
- These services are explained in your personalized Welcome Kit, which will detail your VA health benefits and provide important information concerning your VA access.

Priority Group Definitions	
1	• Veterans with VA-rated service-connected disabilities 50% or more disabling • Veterans determined by VA to be unemployable due to service-connected conditions • Veterans awarded the Medal of Honor (MOH)
2	• Veterans with VA-rated service-connected disabilities 30% or 40% disabling
3	• Veterans who are former Prisoners of War (POWs) • Veterans awarded a Purple Heart medal • Veterans whose discharge was for a disability that was incurred or aggravated in the line of duty • Veterans with VA-rated service-connected disabilities 10% or 20% disabling • Veterans awarded special eligibility classification under Title 38, U.S.C., § 1151, "benefits for individuals disabled by treatment or vocational rehabilitation"
4	• Veterans who are receiving aid and attendance or housebound benefits from VA • Veterans who have been determined by VA to be catastrophically disabled

To view an example Welcome Packet, visit: www.va.gov/healthbenefits/vhbh/publications/vhbh_sample_handbook_2014.pdf.

VHA Priority Groups *(continued)*

Priority Group Definitions

5

- Non-service-connected Veterans and noncompensable service-connected Veterans rated 0% disabled by VA with annual income below VA and geographically adjusted income limits (based on your resident zip code)
- Veterans receiving VA pension benefits
- Veterans eligible for Medicaid programs

6

- Compensable 0% service-connected Veterans
- Veterans exposed to ionizing radiation during atmospheric testing or during the occupation of Hiroshima and Nagasaki
- Project 112/SHAD participants
- Veterans who served in the Republic of Vietnam between 1/9/1962 and 5/7/1975
- Veterans of the Persian Gulf War who served between 8/2/1990 and 11/11/1998
- Veterans who served on active duty at Camp Lejeune for at least 30 days between 8/1/1953 and 12/31/1987
- Currently enrolled Veterans and new enrollees who served in a theater of combat operations after 11/11/1998 and those who were discharged from active duty on or after 1/28/2003 are eligible for the enhanced benefits for 5 years post discharge

7

- Veterans with gross household income below the geographically-adjusted income limits for their resident location and who agree to pay copays

8

- Veterans with gross household income above the VA and the geographically-adjusted income limit for their resident location and who agree to pay copays
- Veterans eligible for enrollment who are noncompensable 0% service-connected and:
  - **Subpriority a:** Enrolled as of January 16, 2003 and who have remained enrolled since that data and/or placed in this sub priority due to changed eligibility status
  - **Subpriority b:** Enrolled on or after June 15, 2009 whose income exceeds the current VA or geographic income limits by 10% or less
- Veterans eligible for enrollment who are non-service-connected and:
  - **Subpriority c:** Enrolled as of January 16, 2003 and who have remained enrolled since that date and/or placed in this sub priority due to changed eligibility status
  - **Subpriority d:** Enrolled on or after June 15, 2009, whose income exceeds the current VA or geographic income limits by 10% or less
- Veterans not eligible for enrollment – Veterans not meeting the criteria above
  - **Subpriority e:** Non-compensable 0% service-connected (eligible for care of their service-connected condition only)
  - **Subpriority g:** Non-service-connected

Note: *At the end of the enhanced enrollment priority group placement time period for combat Veterans in priority group 6, Veterans will be assigned to the highest priority group their eligibility status at that time qualifies for.*

Eligibility for Veterans

JOINING THE RESERVE COMPONENTS

Reserve Components Eligibility

If you are leaving active duty to go into the National Guard or the Reserve, the following information will be pertinent to your enrollment:

- When in the Guard or Reserve, you are no longer qualified to stay on TRICARE
- Servicewomen can supplement their VA benefits with TRICARE Reserve Select instead
- Your VA benefits and copays will be determined by your priority rating, same as civilian VA clients
- TRICARE Reserve Select is the plan used to keep members of the Guard and Reservists medically qualified for service and deployment
- If separating from the military, you would need to stay in the Guard or Reserve to be enrolled in TRICARE Reserve Select
    - If you are a Federal employee, you do not qualify for TRICARE Reserve Select
    - If you are activated, you will be un-enrolled from VA; once you return to Reserve status, your VA eligibility will be reinstated

How to Enroll in TRICARE Reserve Select

Please visit: https://tricare.mil/trs for more information on TRICARE Reserve Select and to find your specific enrollment service portal.

- TRICARE Reserve Select is an optional separate and private service you must apply for; you do not automatically get into the system when you transition from active duty to the Guard or Reserve.
- There is a TRICARE Reserve Select service for each branch of the military.
- You must talk to your MHS provider, find your specific service application on the website and sign up online.
- There is a specific contact for each service.

If you are joining the reserve components after leaving active duty, you are still eligible for VA care. You should enroll in VA care and supplement that care with TRICARE Reserve Select, if desired.

VA Health Care
How to Apply

Returning Service Member Eligibility

If you served on active duty in a theater of combat operations after Nov. 11, 1998 (OEF/OIF/OND/OFS), you are eligible for an extended period of free VA health care benefits for service-connected conditions. Separating Service members who served in OEF/OIF/OND/OFS are eligible for 5 years of free post-separation health care benefits for any medical condition, including mental health, related to an in-theater combat deployment. Each VA Medical Center has a care management team in place dedicated to Service members with this status.

These combat Veterans are eligible for health care services and community living care for conditions possibly related to their military service and are not required to disclose their income information unless they would like to be considered for a higher priority status, beneficiary travel benefits or exemption of copays for care unrelated to their military service.

Health Benefits Application Information

To apply for your health benefits through VA, you will need the following categories of information:

Finalized DD Form 214

- Discharge or separation status
- Codes

Personal Information

- Name
- Address
- Marital status
- Phone number
- Preferred VAMC

Spouse and Dependent Information

- Names
- Social Security numbers
- Birth dates

Military Service Information

- Date of discharge
- Type of discharge
- Military history

Insurance Information

- Insurance details
- Eligibility for Medicaid or Medicare

Gross Annual Income

- Income (you, spouse, dependent children)
- Deductible expenses

Enroll and fill out the VA Form 10-10EZ Application for Health Benefits (www.va.gov/vaforms/medical/pdf/10-10EZ-fillable.pdf) as soon as possible to begin receiving your benefits at VA!

VA Health Care
How to Apply

Necessary Documents

There are 3 documents that you need to enroll in VA health care:

- **Finalized DD Form 214**
  Your finalized DD Form 214 provides details on your military experience that will help inform your eligibility and priority group at VA.
- **VA Form 10-10EZ Application for Health Benefits**
  This form can be completed online or in-person. The types of information that you need to complete this form are included on page 80.
- **Government-Issued ID**
  You will need to bring a government-issued ID with you when applying. Government-issued ID options include a state-issued drivers license, a state DMV-issued ID card and a U.S. passport. Your finalized DD Form 214 serves as a second form of ID.

Using this information, you can follow the steps below to apply for VA health care. Remember, if you apply for VA care in-person, you can also get your ID verified for a Premium My HealtheVet account.

How to Apply for VHA Health Care

1. Receive DD Form 214 when leaving the military
2. Apply for VA health care immediately either in-person, online at VA.gov or by calling **1-877-222-VETS (8387)**
3. Choose a preferred facility
   Note: If you move, you can transfer to a new preferred facility
4. Receive priority group assignment within 1–2 weeks
   Note: If you apply in person, you can receive priority group rating immediately
5. Enroll in My HealtheVet (recommended)
6. Call VA to start making appointments or schedule online through My HealtheVet
   Note: If you apply in person, you can make appointments on the same day
7. Call the Women Veterans Call Center if you have any questions or want to understand the Women's Health offerings available at your facility

You can start the enrollment process before leaving active duty; however, enrollment is not final until you submit your DD Form 214.

Patient Resources

After you enroll in VA, there are several resources to help you manage your health care and ask any outstanding questions.

My HealtheVet

Available Features:

- Secure messaging with your health care providers
- Access to your medical records
- Ability to schedule appointments online
- Lab test results
- Pharmacy access and refill requests
- Tools to help transfer your DOD medical records into the VA system

Women Veterans Call Center (WVCC)

Contact representatives can provide direct referrals for VA services and can help connect you with your Women Veterans Program Manager. They can also help answer questions around disability claims and VA eligibility; if they cannot answer your question, they can connect you to someone who can.

The call center is completely staffed by women and you do not have to be enrolled to use the Call Center. VA now offers a new text feature for the Women Veterans call center, providing women Veterans, their families and caregivers another avenue to ask questions about VA benefits, health care and available resources specific to women Veterans. You can use the WVCC text feature using the same number you would for direct calls: **1-855-829-6636**.

Your information is safe. Any VA App that connects to VA's Electronic Health Record (EHR) requires a DS Logon Level 2 (Premium) Account for your security.

Notes

“I think to know once you’re outside the military, there’s somebody still to help take care of you and can understand and translate your medical history that you had while in the military—I think that’s a huge benefit.”

— Former Women’s Health Transition Training participant

PHASE 5

Transition Assistance

Veteran Focused Non-Profits

Social support is incredibly important during the transition to Veteran status. There are countless non-profits focused on connecting and empowering Veterans. Some of the available opportunities are listed below. For more information about VA's Office of Community Engagement (OCE) and VA's community partnerships, please visit www.va.gov/healthpartnerships/vcp.asp. Additionally, there are 150 Community Veteran Engagement Boards (CVEBs) focused on providing access to local resources for Veterans and their families. Please visit www.va.gov/ve/engagement/index.asp for more information and an interactive map to find a CVEB near you.

- **The Service Women's Action Network (SWAN):** is a member-driven community network advocating for individual and collective needs of Servicewomen. More information at www.servicewomen.org.
- **Disabled American Veterans (DAV):** is a nonprofit charity that provides a lifetime of support for Veterans and their families. More information at www.dav.org.
- **Veterans of Foreign Wars (VFW):** is a VSO focused on serving our Veterans, the military and our communities, as well as advocating for Veterans. More information at www.vfw.org.
- **American Legion:** is a VSO devoted to mutual helpfulness and volunteerism for Veterans and their communities. More information at https://legion.org.
- **American Veterans (AMVETS):** is a VSO focused on enhancing and safeguarding the entitlements and quality of life of all American Veterans. More information at https://amvets.org.
- **Team Rubicon:** provides disaster relief to those affected by natural disasters and provides opportunities to volunteer at these sites. More information at https://teamrubiconusa.org.
- **The Mission Continues:** deploys Veteran volunteers to solve some of the most challenging issues facing the community. More information at https://missioncontinues.org.
- **Operation RESILIENCY**: a partnership by the Independence Fund and VHA, focuses on the mental health and well-being of Veterans. More information at https://independencefund.org/pages/operation-resiliency.
- **Team Red, White & Blue (RWB)**: connects Veterans to their community through physical and social activity. Examples of activities include running 5Ks or going to yoga classes. More information at www.teamrwb.org.

Local Women Veterans programs, support groups, and social events are available through Women's Health Programs at many VAMCs. These are just a few of the great resources available to help with your transition.

Resources and Professional Support for Women Veterans

Women Veterans programs, support groups and social events are available through Women's Health Programs at many VAMCs. The programs in this handbook are just a few of the great resources available to help with your transition. Most of the programs listed on this page are focused on professional support for women Veterans.

- **WoVeN:** is a nationwide network of peer support groups specifically for women that connects women Veterans of all eras and service branches and empowers them with information, education and resources to improve their quality of life. More information at www.wovenwomenvets.org.
- **Lean-In Women Veterans:** is a Veteran-to-Veteran peer virtual program that allows any woman Veteran to participate. Moderated and attended by women Veterans nationwide. More information at https://leanincircles.org/chapter/lean-in-women-Veterans.
- **Academy Women's eMentor Program:** is an award-winning, cutting-edge online mentoring program where protégés have the opportunity to connect with and receive guidance, career counseling and support from mentors from all over the world. More information at www.ementorprogram.org.
- **National Association of State Women Veteran Coordinators (NASWVC):** advocates for transitioning military women and women Veterans to receive the federal and state benefits they have earned. More information at www.naswvc.org.

Additional VA Transition Assistance Resources

Every VA Medical Center has a Transition and Care Management (TCM) team ready to welcome post-9/11 Veterans and help coordinate their care. VA Liaisons for health care, embedded at 21 military installations and TCM Case Managers, who are either nurses or social workers, help coordinate patient care activities and can help patients navigate their way through the VA system. To locate a VA Liaison to assist with health care transition, please visit: www.oefoif.va.gov/valiaisons.asp.

The Transition Patient Advocate (TPA) can also act as a personal support as you learn to navigate VA. To contact the TCM team, check your local VA medical center website.

LGBT Veteran Care Coordinators help ensure consistent and timely access to culturally competent care for LGBT Veterans. To locate an LGBT Veteran Care Coordinator visit: www.patientcare.va.gov/LGBT/VAFacilities.asp.

Hotlines

Veterans Crisis Line
1-800-273-8255 (Press 1)

Help for Homeless Veterans
877-4AID-VET (877-424-3838)

Women Veterans Call Center
1-855-VA-WOMEN

Caregiver Support
855-260-3274

Women Veterans Call Center Chat
www.womenshealth.va.gov

TCM Programs

These provide comprehensive care coordination and case management services to transitioning Service members and post-9/11 Veterans, their caregivers and families as they transition into the VA health care system and across the continuum of care. To locate your local VA Facility TCM team, please visit: www.oefoif.va.gov/caremanagement.asp.

More information can be found at: www.benefits.va.gov/TRANSITION/docs/VA-Benefits-Participant-Guide.pdf#.

VA Support and Resources
Homelessness

VA has a variety of resources to help Veterans who are struggling with housing insecurity or experiencing homelessness. VA's specialized programs for homeless Veterans serve hundreds of thousands of homeless and at-risk Veterans each year. Independently and in collaboration with federal and community partners. Learn more about these programs below.

Housing insecurity can impact Veterans of all backgrounds and genders. Women Veterans experiencing homelessness are found in communities across the country.

- The HUD Annual Homeless Assessment Report to Congress (AHAR) indicated 37,085 Veterans were experiencing homelessness on a single night in January 2019, of whom 61% were staying in emergency shelters or transitional housing programs.
- Women make up 10% of Veterans experiencing homelessness; however, homelessness prevalence among women Veterans is significantly underestimated.
- Women Veterans have a four-times-higher risk of experiencing homelessness than civilian women

Resources Available

Below is a list of some resources available:

- National Call Center for Homeless Veterans (877-424-3838)
- Homelessness prevention and rapid re-housing
- Transitional and permanent supportive housing
- Residential treatment
- Financial and employment support
- Veterans justice programs
- Treatment and outreach

For more information about these programs, please talk to the Homeless Coordinator at your VAMC or visit: www.va.gov/HOMELESS/for_women_veterans.asp.

National Call Center

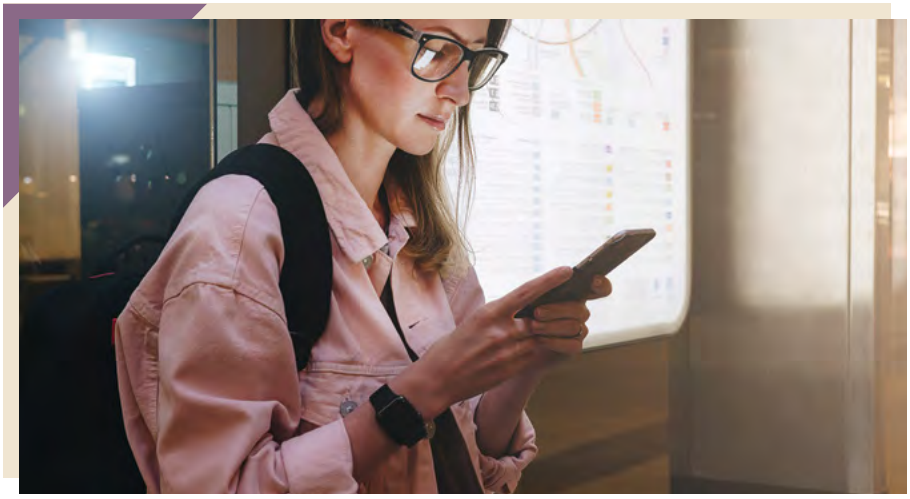
Veterans who are experiencing homelessness or at risk of homelessness—and their family members, friends and supporters—can make the call to or chat online with the National Call Center for Homeless Veterans, where trained counselors are ready to talk confidentially **24 hours a day, 7 days a week. 1-877-4AID VET** (877-424-3838).

Program eligibility varies. Work with your VA representative to determine your eligibility for specific programs.

VA-Developed Virtual Care Tools

VA has developed a suite of virtual care tools to help you be an active participant in your health, including: a patient portal and personal health record plus a number of applications (apps). All are free and many allow you to receive care and services with no need to visit a VA facility. Additionally, there's no copay for any virtual care provided using tools such as VA Video Connect. Below you will find a sampling of some of the tools other Veterans have found useful, but please browse all of them on VA's mobile app store at https://mobile.va.gov.

- **My HealtheVet** allows you to view your health information online as well as refill prescriptions, make appointments, securely message your care team and more.
- **Annie** is a text messaging service that sends automated health-related notifications, reminders or motivational messages to help Veterans with their self-care and empowers Veterans to play an active role in their care.
- **MOVE! Coach** allows Veterans to monitor, track and receive feedback on progress with exercise, diet and weight loss goals.
- **Moving Forward** helps manage challenges such as returning to civilian life, balancing school and family, financial difficulties, relationship problems, career decisions and coping with physical injuries.
- **Parenting2Go** provides parenting advice, relaxation tools to use when frustrated or stressed; tools to improve your relationship with your child(ren) through positive communication and strategies to shift gears between military life and home.
- **PTSD Coach** provides users with education about PTSD, information about professional care, self-assessment for PTSD, opportunities to find support and tools to help users manage daily stress.
- **Rx Refill** allows Veterans to request refills of their refillable VA-issued prescriptions, track VA prescription deliveries and view VA prescription history.
- **VA Video Connect** allows Veterans and their caregivers to meet with VA health care providers through live video on any computer, tablet or mobile device with an internet connection.



We strongly encourage you to sign up for a My HealtheVet Premium account. Doing so will give you access to the patient portal where you can securely message your providers, refill prescriptions and schedule and view appointments. The My HealtheVet Premium account can also be used to access any other VA applications that require a log on.

More information, including other VA Developed Apps can be found at https://mobile.va.gov. Many apps are web apps only; some are designed for iOS and/or Android.

Some applications, such as Rx refill, pull data from VA Electronic Health Record and allow you to send information back. These apps require you to log on using a VA-approved credential. Many apps, such as PTSD Coach, do not pull from or share data with VA and so no log on is required.

Ready to Enroll?

Still have questions?

VA Care offers Veterans a host of benefits including:

- **Free or low-cost care:** Accessing free or low-cost health care that you have earned as a benefit of your service. Assume you are eligible for VHA services until you confirm otherwise.
- **Integrated health care system:** Belonging to an integrated, nationwide health care system with many access points and individuals available to help you navigate VHA.
- **Veteran-centered care:** Having a Veteran-centered health care option.
- **High-quality care:** Receiving high-quality health care from providers trained in Veterans' unique health care needs.
- **Whole person care:** Receiving health care in a community that understands the health impact of military service, support you on what matters most to you and can identify with your past experiences as a woman Veteran so you can take charge of your health and well-being and live your life to the fullest.
- **Comprehensive care:** Receiving comprehensive women's health care (including primary, specialty and mental health care, prescriptions and labs) usually during one visit in one location.

If you have any questions regarding VA eligibility, please call the Health Eligibility Center (HEC) at **1-877-222-VETS (8387)** or contact your VAMC and ask for the Eligibility Specialist.

If you have questions regarding specific programs please reference the contact information provided within this guide relating to the specific program or visit VA.gov for more information.

Additionally your trainer may be available to answer questions. Use this space to write down your trainer's name and contact information.

My facility preference:

Please call the Women Veterans Call Center at **1-855-VA-WOMEN** and they can get you in touch with your assigned WVPM.

Patient Rights

Patient Rights

VA employees must respect and support your rights as a patient. If you would like more information about your rights as a patient, please talk with your VA treatment team members or, if necessary, a Patient Advocate. Patient Rights and Responsibilities are posted in outpatient and inpatient areas. If you have not received a copy of your Rights and Responsibilities, please contact the Patient Advocate who can provide you with a copy or you may download a copy from www.va.gov/health/rights.

Patient Responsibilities

You also need to take an active role in your health care. This includes communicating with your providers all current health information and making sure your records are up to date. This includes but is not limited to, health conditions, medications and over the counter supplements, personal information and emergency contacts. Prior to leaving active duty, ensure that your records are accurate and update any information as needed.

Do you need to update your records?

You can obtain instructions for changing/correcting your military service record or changing your discharge status by going to: www.archives.gov/veterans/military-service-records/correct-service-records.html.

If your military service record requires a change or correction, you will need to submit DD Form 149, Application for Correction of Military Records to the relevant service branch (branch addresses are provided on the form). To obtain this form, you will need to go to: www.esd.whs.mil/Portals/54/Documents/DD/forms/dd/dd0149.pdf.

If you need to change your discharge status you will generally need to submit DD Form 293, Application for the Review of Discharge or Dismissal from the Armed Forces of the United States to the relevant service branch (branch addresses are provided on the form). To obtain this form, you will need to go to www.esd.whs.mil/Portals/54/Documents/DD/forms/dd/dd0293.pdf.

What to expect:

Nondiscrimination and Respect

You will be treated with dignity, compassion and respect as an individual.

Privacy

Your privacy will be protected and your health record will be kept confidential. Information about you will not be released without your authorization unless permitted by law.

Partnering in Care

You and any person(s) you choose, will be involved in all decisions about your care. You will be given information you can understand about the benefits and risks of treatment.

Concerns or Complaints

You are encouraged to work with your care team or a patient advocate. Any concerns or complaints can be shared verbally or in writing, without fear of retaliation.

The full Patient Rights and Responsibilities are posted in outpatient and inpatient areas. You may request a copy from a patient advocate or download a copy from www.va.gov/health/rights.

Additional Health Resources

Staying Healthy

PREVENTIVE CARE RECOMMENDATIONS FOR WOMEN

VA aims to help you stay healthy. The table below lists the preventive health services (screening tests, medications, health counseling and vaccines) that VA recommends their patients follow. Screening tests are used to look for health conditions before there are symptoms. **These recommendations apply only to adult women of average risk.** You are a woman of average risk if you have no personal or family history or symptoms of the conditions listed below. If you are having symptoms of a condition, please talk with your provider. Review the table below for recommendations. For more information,
visit: www.prevention.va.gov/Healthy_Living/Get_Recommended_Vaccines_and_Screening_Tests_Women.asp.

Screening Tests

Health condition	18–29 years	30–39 years	40–49 years	50–59 years	60–69 years	70–79 years	80 years and older
Abdominal Aortic Aneurysm (AAA)	Not recommended (age 18–64)				Talk with your provider (age 65–75)	Not recommended (age 76 and older)	
Breast Cancer	Not recommended (age 18–39)		• Recommended annually (45–54) • Recommend biennial (55 and older or have opportunity to continue annually) • Have opportunity to begin annual screening (40–44)			Recommended for some women—talk with your provider (age 75 and older)	
Cervical Cancer	Every 3 years (age 21–29)	Recommended. Every 3 or 5 years, depending on tests chosen (age 30–65)			Not recommended (age 66 and older)		
Colon Cancer	Not recommended (age 18–49)			Recommended. Frequency varies by test chosen (age 50–75)		Talk with your provider (age 76–85)	NR (age 86 and older)
Depression	Recommended every year						
Hepatitis B Infection	Recommended for some women—talk with your provider (age 18 and older)						
Hepatitis C Infection	Recommended for some women—talk with your provider (age 18 and older)						
High Blood Pressure	Recommended every 1–2 years (age 18 and older)						
High Cholesterol	Talk with your provider (age 20 and older)						
HIV Infection	Recommended once (age 18 and older); in all pregnant Veterans; annually in Veterans with ongoing risk factor						
Lung Cancer	Not recommended (age 18–54)				Recommended for some women—talk with your provider (age 55–80)		Not recommended (age 81 and older)
Osteoporosis	Recommended for some women—talk with your provider (age 18–64)					Recommended once (age 65 and older)	
Overweight and Obesity	Recommended every year (age 18 and older)						
Sexually Transmitted Infections	Recommended. Test for gonorrhea and chlamydia every year (age 18–24). Talk with your provider about syphilis testing.	Talk with your provider about testing for gonorrhea, chlamydia, and syphilis (age 25 and older)					

Recommended
Recommended for some women—talk with your provider
Not recommended (NR)

Additional Health Resources

Staying Healthy

Health condition	18–29 years	30–39 years	40–49 years	50–59 years	60–69 years	70–79 years	80 years and older
Folic Acid for Pregnancy Planning	Recommended. Daily folic acid supplement for any woman who may become pregnant			Not recommended after child-bearing age			
Aspirin to Prevent Stroke	Not recommended (age 18–54)				Talk with your provider (age 55–79)		NR (age 80 and older)

Health Counseling

Health condition	18–29 years	30–39 years	40–49 years	50–59 years	60–69 years	70–79 years	80 years and older
Tobacco Use	Recommended every visit (if using tobacco) (age 18 and older)						
Alcohol Use	Talk with your provider about healthy alcohol use (age 18 and older)						
Healthy Diet and Physical Activity	Talk with your provider about a healthy diet and physical activity (age 18 and older)						

Vaccines

Health condition	18–29 years	30–39 years	40–49 years	50–59 years	60–69 years	70–79 years	80 years and older
Hepatitis A	Recommended for some women—talk with your provider (age 18 and older)						
Hepatitis B	Recommended for some women—talk with your provider (age 18 and older)						
Herpes Zoster (Shingles) *RZV vaccine*	Not recommended (age 18–49)			Recommended 2 doses (age 50 and older), with second dose 2–6 months after first dose			
Human Papillomavirus (HPV) *HPV9 vaccine*	2–3 doses (age 18–26) if series not completed	Talk with your provider (age 27–45)	Not recommended (age 46 and older)				
Influenza (Flu) *Injectable, Inhaled*	Recommended every year (age 18 and older)						
Measles, Mumps, and Rubella (MMR)	Recommended for some women—talk with your provider (age 18 and older)						
Meningococcal Disease	Recommended for some women—talk with your provider (age 18 and older)						
Pneumococcal Disease *PPSV23 vaccine, PCV13 vaccine,*	Recommended for some women—talk with your provider (age 18 and older)					Recommended. At least 1 dose of PPSV23 vaccine (age 65 and older) Talk with your provider about PCV13 vaccine (age 65 and older)	
Tdap (Tetanus, Diphtheria and Pertussis)	Recommended. 1 dose. Get additional dose with every pregnancy (age 18 and older)						
Td (Tetanus and Diphtheria)	Recommended. Booster every 10 years (10 years after last Tdap or Td) (age 18 and older) (Either Tdap or Td may be used)						
Varicella (Chickenpox)	Recommended for some women—talk with your provider (2 doses if born 1980 or later)						

- Recommended
- Recommended for some women—talk with your provider
- Not recommended (NR)

Additional Health Resources
Staying Healthy

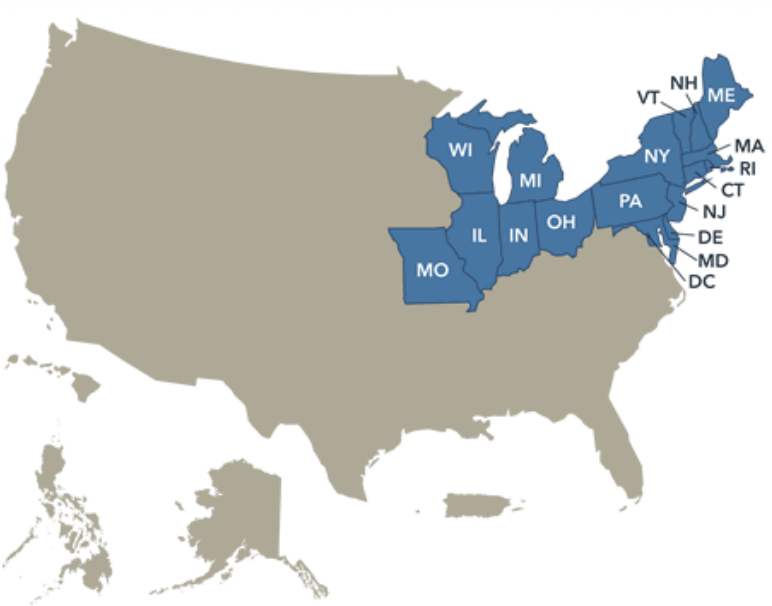
Mental Illness or Problem	Medical Center	Very Large CBOC *(more than 10,000 Veterans per year)*	Large CBOC *(1,500–5,000 Veterans per year)*	Mid-Sized CBOC *(1,500–5,000 Veterans per year)*	Small CBOC *(fewer than 1,500 Veterans per year)*
Posttraumatic stress disorder	Specialized Outpatient programs; evidence-based talk therapies: cognitive processing therapy (CPT), prolonged exposure therapy (PE); medications on-site*	Specialized Outpatient programs; evidence-based talk therapies including CPT and PE; medications on-site*	Evidence-based talk therapies including CPT and PE; medications on-site* or through telemedicine†	Evidence-based talk therapies including CPT and PE; medications on-site* or through telemedicine†	General and specialty services on-site* or via telemedicine†; referral to residential treatment program, VA medical center, or community services♦
Schizophrenia, schizoaffective disorder, bipolar disorder, depression, anxiety	General and specialty services; family services; skills training; peer support; **evidence-based** therapies [CBT, acceptance commitment therapy (ACT), IPT] for depression/anxiety; larger facilities may have Psychosocial Rehabilitation and Recovery Centers (PRRC) or Mental Health Intensive Case Management (MHICM) programs on-site*	General and specialty services; family services; skills training; peer support; **evidence-based** therapies for depression and anxiety; MHICMF, PRRC on-site*	Majority of general and specialty services on-site* or via telemedicine†; evidence-based therapies for depression and anxiety on-site* or through telemedicine†; referrals to VA medical center or community services♦	General and specialty services on-site* or via telemedicine†; referral to residential treatment program, VA medical center or community services; **evidence-based** therapies for depression and anxiety on-site* or through telemedicine†	General and specialty services on-site* or via telemedicine†; referral to residential treatment program, VA medical center or community services♦
Substance use disorders (alcohol, drugs, prescription medications, tobacco)	General and evidence-based specialty services; inpatient or outpatient detoxification; opioid treatment programs providing methadone at some medical centers	Specialized outpatient treatment programs with evidence-based therapies and medication management on-site*	Specialized outpatient programs; evidence-based therapies on-site* and through telemedicine†	Specialized outpatient programs; evidence-based therapies on-site* and through telemedicine†	General and specialty services on-site* or via telemedicine†; referral to residential treatment program, VA medical center, or community services♦

* On-site † Telemedicine ♦ Referral to VA facilities of community providers

Veterans Benefits Administration

Regional Offices

Northeast District



Hartford Regional Office
555 Willard Ave.
Newington, CT 06111

Wilmington Regional Office
1601 Kirkwood Highway
Wilmington, DE 19805

National Capital Regional Office
1722 I St. NW
Washington, DC 20421

Chicago Regional Office
2122 West Taylor St.
Chicago, IL 60612

Indianapolis Regional Office
575 North Pennsylvania St.
Indianapolis, IN 46204

Togus Regional Office
1 VA Center
Augusta, ME 04330

Baltimore Regional Office
31 Hopkins Plaza
Baltimore, MD 21201

Boston Regional Office
JFK Federal Bldg
15 New Sudbury St.
Boston, MA 02203

Detroit Regional Office
477 Michigan Ave.
Detroit, MI 48226

St. Louis Regional Office
Charles F. Prevedel Federal Bldg
9700 Page Ave.
St. Louis, MO 63132

Manchester Regional Office
Norris Cotton Federal Bldg
275 Chestnut St.
Manchester, NH 03101

Newark Regional Office
20 Washington Place
Newark, NJ 07102

Buffalo Regional Office
130 South Elmwood Ave.
Buffalo, NY 14202

New York Regional Office
245 W. Houston St.
New York, NY 10014

Cleveland Regional Office
1240 East Ninth St.
Cleveland, OH 44199

Philadelphia Regional Office
5000 Wissahickon Ave.
Philadelphia, PA 19144

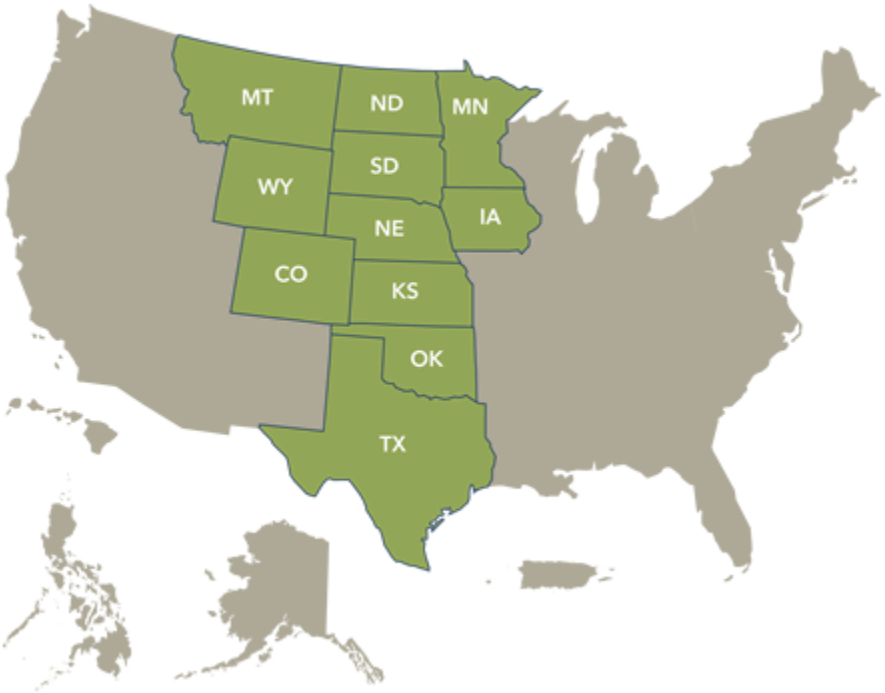
Pittsburgh Regional Office
1000 Liberty Ave.
Pittsburgh, PA 15222

Providence Regional Office
380 Westminster St.
Providence, RI 02903

White River Junction Regional Office
163 Veterans Dr.
White River Junction, VT 05009

Milwaukee Regional Office
5400 West National Ave.
Milwaukee, WI 53214

Continental District



Denver Regional Office
155 Van Gordon St.
Lakewood, CO 80228

Des Moines Regional Office
210 Walnut St.
Des Moines, IA 50309

Wichita Regional Office
5500 East Kellogg
Wichita, KS 67218

St. Paul Regional Office
1 Federal Dr.
Fort Snelling
St. Paul, MN 55111

Fort Harrison Regional Office
3633 Veterans Dr.
Fort Harrison, MT 59636

Lincoln Regional Office
3800 Village Dr.
Lincoln, NE 68516

Fargo Regional Office
2101 Elm St.
Fargo, ND 58102

Muskogee Regional Office
125 South Main St.
Muskogee, OK 74401

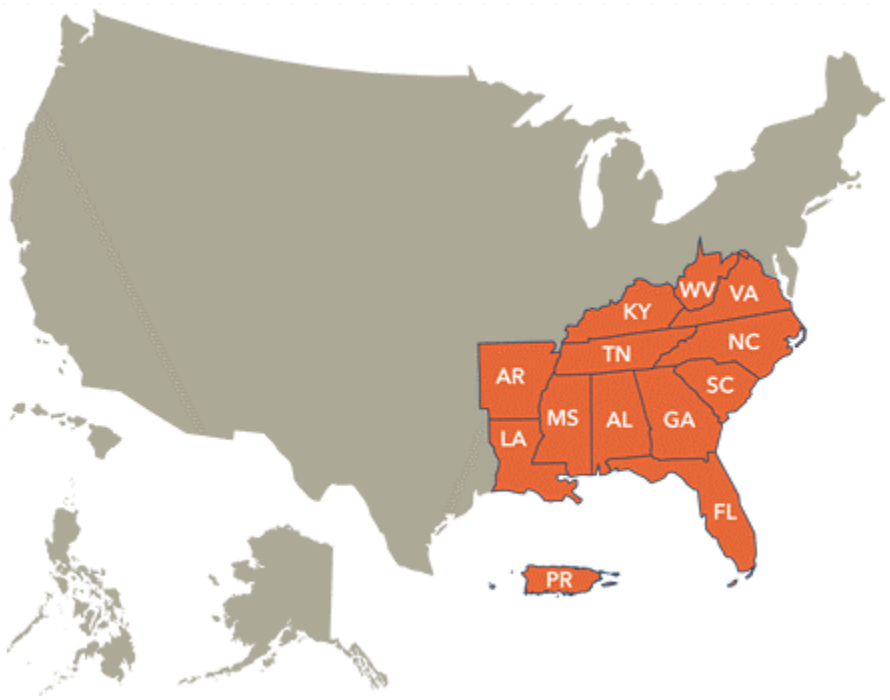
Houston Regional Office
6900 Almeda Rd.
Houston, TX 77030

Waco Regional Office
1 Veterans Plaza
701 Clay Ave.
Waco, TX 76799

Sioux Falls Regional Office
2501 W. 22nd St.
Sioux Falls, SD 57105

Cheyenne Regional Office
2360 East Pershing Blvd.
Cheyenne, WY 82001

Southeast District



Montgomery Regional Office
345 Perry Hill Rd.
Montgomery, AL 36109

Little Rock Regional Office
2200 Fort Roots Dr.
Building 65
North Little Rock, AR 72114

St. Petersburg Regional Office
9500 Bay Pines Blvd.
Bay Pines, FL 33744

Atlanta Regional Office
1700 Clairmont Rd.
Decatur, GA 30033

Louisville Regional Office
321 West Main St.
Suite 390
Louisville, KY 40202

New Orleans Regional Office
1250 Poydras St.
Suite 200
New Orleans, LA 70113

Jackson Regional Office
1600 E. Woodrow Wilson Ave.
Jackson, MS 39216

Winston-Salem Regional Office
Federal Bldg.
251 N. Main St.
Winston-Salem, NC 27155

San Juan Regional Office
50 Carr 165
Guaynabo, PR 00968-8024

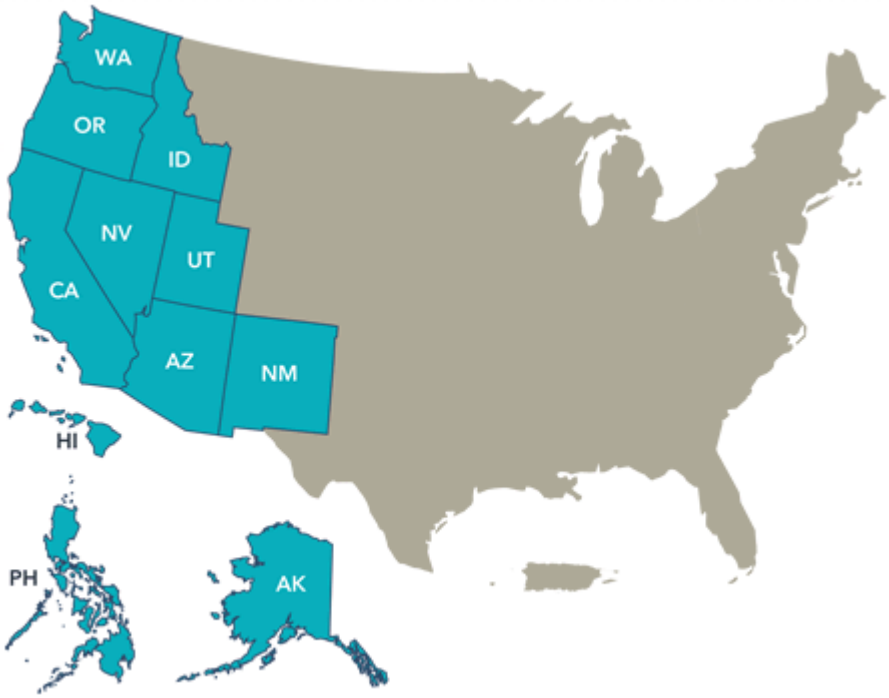
Columbia Regional Office
6437 Garners Ferry Rd.
Columbia, SC 29209

Nashville Regional Office
110 9th Ave., South
Nashville, TN 37075

Roanoke Regional Office
210 Franklin Rd., SW
Roanoke, VA 24011

Huntington Regional Office
640 Fourth Ave.
Huntington, WV 25701

Pacific District



Anchorage Regional Office
1201 N. Muldoon Rd.
Anchorage, AK 99504

Phoenix Regional Office
3333 North Central Ave.
Phoenix, AZ 85012

Los Angeles Regional Office
11000 Wilshire Blvd.
Los Angeles, CA 90024

Oakland Regional Office
1301 Clay St.
North Tower
Oakland, CA 94612

San Diego Regional Office
8810 Rio San Diego Dr.
San Diego, CA 92108

Honolulu Regional Office
459 Patterson Rd.
E-Wing
Honolulu, HI 96819

Boise Regional Office
444 W. Fort St.
Boise, ID 83702

Reno Regional Office
5460 Reno Corporate Dr.
Reno, NV 89511

Albuquerque Regional Office
Dennis Chavez Federal Bldg.
500 Gold Ave., SW
Albuquerque, NM 87102

Portland Regional Office
First and Main Bldg.
100 SW Main St.
Floor 2
Portland, OR 97204

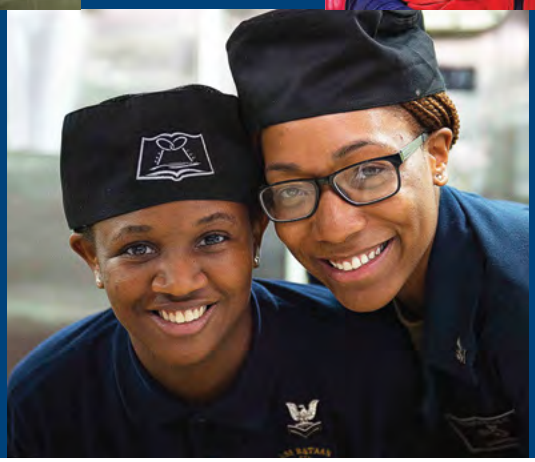
Manila Regional Office
U.S. Embassy
1501 Roxas Blvd.
Pasay City, PI 1302

Salt Lake City Regional Office
550 Foothill Dr.
Salt Lake City, UT 84148

Seattle Regional Office
Jackson Federal Bldg
915 2nd Ave.
Seattle, WA 98174

> Knowing more about what is available and the quality of services available makes me confident in transitioning.

— Former Women's Health Transition Training participant



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