

If I move outside of the United States, would I lose my CHAMPVA prescription coverage?

No, prescription coverage for CHAMPVA does not terminate when you leave the United States. For a drug to be covered by CHAMPVA, it must be FDA approved and appropriate for the treatment of a covered diagnosis. It must be prescribed and dispensed in accordance with applicable laws and licensing requirements. The drug must also be administered according to accepted standards of practice in the VA/U.S. medical community.

Will it take longer to process my claim if I submit my foreign claims in a language other than English?

If your provider is able to bill in English, this will reduce the amount of time needed to process the claim. If your provider is not able to bill in English, then the claim will be translated by CHAMPVA.

What documents should I include with my foreign prescription claim?

Foreign prescription claims need to include a minimum amount of documentation (see prescription filing instructions that follow). In all cases, the prescriptions must be FDA approved. Provide the following legible information when submitting a prescription claim:

- Your full name, U.S. Social Security number (SSN) and mailing address
- A copy of the prescription to include:
 - name of medication
 - diagnosis for which the medication is prescribed
 - dosage, strength and quantity
- Full name, address and phone number of the pharmacy
- Date(s) of service

Provide the following legible information when submitting an inpatient claim:

- Your full name, U.S. SSN and mailing address
- The provider's full name, medical title, office address and phone number, and the provider's billing address, if different from the office address
- Discharge summary
- Operation report, if an operation was performed
- Itemized statement of the charges

Provide the following legible information when submitting an outpatient claim:

- Your full name, U.S. SSN and mailing address
- The provider's full name, medical title, office address and phone number, and the provider's billing address, if different from "office address"
- Date(s) of service
- Diagnosis treated
- Billed charge for each service

Provide the following information when submitting a claim for a rehabilitation device, equipment or supplies:

- Your full name, U.S. SSN and mailing address
- Physician's prescription to include:
 - name and detailed description of item
 - diagnosis of condition for which the item is prescribed
 - expected medical benefit
 - duration of need
 - justification must be provided if there is a non-standard feature or modification
- The provider's full name, medical title, office address and phone number, and the provider's billing address, if different from "office address"

Is there a time limit for filing claims?

CHAMPVA has a one-year timely filing limit on claims. Refer to the following claim filing instructions and forward any outstanding claims as soon as possible to the address listed below.

How do I get more information?

- Mail: VHA Office of Community Care
CHAMPVA Foreign
PO Box 469063
Denver, CO 80246-9063
- Phone: 1-800-733-8387, Monday-Friday
8:05 a.m. to 7:30 p.m., Eastern Standard Time
- Email: Follow the directions for submitting email via IRIS at <https://iris.custhelp.com/app/ask>
- Website: <http://www.va.gov/purchasedcare/>