

What is non-VA medical care?

Non-VA medical care is health care provided within the community to eligible Veterans when VA facilities cannot provide the care. All VA Medical Centers (VAMCs) can use this program when needed. The use of the National Non-VA Medical Care Program is governed by federal laws containing eligibility criteria and other policies specifying when and how it can be used. A preauthorization for treatment in the community is required for non-VA medical care — unless the medical event is an emergency.

Non-VA medical care authorization

In general, Veterans seeking health care at VA expense should be treated at VA facilities. Non-VA medical care, also known as purchased care or fee care, is only authorized under specific circumstances, such as when VA facilities/services are not available. VA may purchase care outside of VA for care a Veteran may need, including inpatient, outpatient, emergent, medication prescriptions and long-term care for eligible Veterans. Once non-VA medical care is authorized, Veterans may seek treatment from a provider in their community.

In the event of an emergency

Veterans *do not* need authorization from a VA facility for emergency treatment — they simply proceed to the nearest emergency room to get the care they need. Eligibility for VA payment of emergency care as well as deadlines for filing claims depend upon whether or not the Veteran has a service-connected condition. It's important to contact the closest VAMC as soon as possible to find out more about VA payment of the Veteran's emergency care. Emergency events may be reimbursed on behalf of the Veteran in certain cases.

For more information

To learn more about non-VA medical care and whether or not you are eligible, contact your local VAMC and ask for the non-VA medical care office. You can find the nearest VA Medical Center by visiting the VA facility directory page at <http://www.va.gov/directory>.

History of the Non-VA Medical Care Program

The Non-VA Medical Care Program, previously called the Fee-Basis Program, evolved from the Hometown Program. In December 1945, General Paul R. Hawley, Chief Medical Director, Veterans Administration, recognized that many hospital admissions of World War II Veterans could be avoided by treating them before they needed hospitalization. So General Hawley instituted a plan for "hometown" medical and dental care at government expense for Veterans with service-connected ailments.

Under the Hometown Program, eligible Veterans could be treated in their community by a doctor or dentist of their choice. At the same time, a similar Hometown Pharmacy Program was placed in operation where drugs could be purchased at government expense from the Veteran's local pharmacist as prescribed by his private physician.