

COMPACT Act, Section 201

VAMC Veteran and Eligible Individual Frequently Asked Questions



COMPACT Act Section 201 Overview

Section 201 of the Veterans Comprehensive Prevention, Access to Care and Treatment (COMPACT) Act of 2020 requires the Department of Veterans Affairs' (VA) to directly furnish, pay for, or reimburse for emergent suicide care (to include associated transportation costs) at VA and non-VA facilities for eligible individuals in acute suicide crisis.

Below you will find frequently asked questions that may be helpful.

Who can I talk to if I am in crisis?

To connect with a Veterans Crisis Line responder, anytime day or night:

- Dial **988** then press 1
- Start a confidential chat by visiting: <https://www.veteranscrisisline.net/get-help-now/chat>
- Text 838255
- If you have hearing loss, call TTY: 800-799-4889

What should I do during a medical or mental health emergency?

During a medical or mental health emergency, you should immediately seek care at the nearest emergency department. If you believe your life or health is in danger, call 911 or go to the nearest emergency department right away. If possible, you should also take steps to safely store, or ask a trusted individual to assist with securing all lethal means when in a mental health crisis.

How can I look up the nearest community emergency room?

Emergencies are never planned, so ensure you and your family member know where to go before you need help. Find your nearest community emergency room, urgent care facility or pharmacy by visiting https://www.va.gov/find-locations/?facilityType=emergency_care. You should also remember to inform emergency care staff of your eligibility status while checking in to enable care coordination with VA as soon as possible.

Who is eligible?

- An individual is eligible for Emergent suicide care if they have been determined to be in acute suicidal crisis, and such individual is either:
 - Former members of the armed forces (enrolled or non-enrolled) who were discharged or released from active duty after more than 24 months of active service under conditions other than dishonorable, or;
 - A former member of the armed forces, including the reserve components, who
 - while serving in the active military, naval, air, or space service was discharged or released under a condition that is not honorable but not dishonorable or discharge by court martial;
 - is not enrolled in the VA health care system; and
 - either (A) served in the Armed Forces for more than 100 cumulative days and was deployed in a theater of combat operations, in support of a contingency operation, or in an area at a time during which hostilities are occurring in that area during service, including by controlling an unmanned aerial vehicle from a location other than such theater or arena; or (B), while serving in the Armed Forces, was the victim of a physical assault of a sexual nature, a battery of a sexual nature, or sexual harassment.

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What is available?

- Up to 30 days of inpatient or crisis residential care related to the acute suicide crisis (this period can be extended if deemed clinically necessary).
- Up to 90 days of outpatient care related to the acute suicide crisis, which includes both medical and mental health care (this period can be extended if deemed clinically necessary).
- Prescription medications that are related to your acute suicide crisis
- Emergency transportation (i.e. ambulance and air ambulance) required to receive Emergent suicide care.
- Emergent suicide care and associated emergency transportation must be provided at no cost—there will not be copayments or bills for eligible individuals.
- VA will determine eligibility for other VA services and benefits if individuals receiving Emergent suicide care are not enrolled or registered with VA.
- VA will refer eligible individuals for appropriate services for which they are otherwise eligible, including social work.

What is an acute suicide crisis?

Acute suicide crisis means an individual was determined to be at imminent risk of self-harm by a trained crisis responder or health care provider.

- Imminent risk of self-harm will be assessed on a case-by-base basis, and can include clinical considerations such as an individual's stated intent to harm themselves as well as other information such as knowledge of an individual's past or present behaviors that signal a risk of self-harm (such as past suicide attempts that could evidence additional risk of self-harm).
- Trained crisis responder means an individual who responds to emergency situations in the ordinary course of their employment and therefore possess adequate training in crisis intervention. Such individuals include, but are not limited to, Veteran Crisis Line responders, law enforcement or police officers, firefighters, and emergency medical technicians.
- Health care provider means a VA or non-VA provider who is licensed to practice health care by a State and who is performing within the scope of their practice as defined by a State or VA practice Standard.

What is emergent suicide care?

For an individual in acute suicidal crisis, care that ensures, to the extent practicable, immediate safety and reduces: the severity of distress; the need for urgent care; or the likelihood that the severity of distress or need for urgent care will increase during the transfer of that individual from a facility at which the individual has received care for that acute suicidal crisis.

Can I also receive emergent suicide care in the community or must I receive all COMPACT eligible care at a VA facility?

You may receive emergent suicide care at a VA or non-VA facility. VA can assist with coordinating your care to ensure your care plan is comprehensive and delivers the care you need when you need it.

What do I do if I receive a bill for emergent suicide care?

VA strives to ensure you are not billed for care related to an acute suicide crisis, to eliminate any additional stress during your time of need. If you receive a bill for COMPACT related care, please see the patient advocate at your local VA facility to facilitate a clinical review with appropriate provider. Alternatively, you can contact the number on your bill to initiate this process.

What happens to my bill while it is under review?

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Part of your billing inquiry related to emergent suicide care includes COMPACT specific processes. If collection activity has already begun prior to notification, it may continue – it is **imperative** that you notify your patient advocate or call the number on your bill promptly to avoid collection activity.

How will I know the result of my billing review?

You will be contacted by either revenue staff at your facility or your provider.

What do I do if I do not agree with clinical or eligibility decisions related to emergent suicide care?

VA has a well-established appeal process for both clinical and administrative appeals. The best way for you to initiate these processes is through your local VA facility patient advocate.