

What is CHAMPVA?

CHAMPVA is a health benefits program in which the Department of Veterans Affairs (VA) shares the cost of certain health care services and supplies with eligible beneficiaries (see Eligibility Fact Sheet 01-3 for criteria for CHAMPVA coverage). CHAMPVA is managed by the VA's Health Administration Center (HAC) in Denver, Colorado. We process CHAMPVA applications, determine eligibility, authorize benefits, and process medical claims.

How does CHAMPVA relate to TRICARE?

Both are federal programs, however, an individual who is eligible for TRICARE is not eligible for CHAMPVA. Although similar, TRICARE (formerly CHAMPUS – which is administered by the Department of Defense) should not be confused with CHAMPVA. TRICARE provides coverage to the families of active duty service members, families of service members who died while on active duty, and retirees and their families, whether or not the veteran is disabled.

What is the relationship between CHAMPVA and Medicare?

Both are federal benefits programs, however, CHAMPVA is always the last payer after Medicare and any other health insurance (OHI). An exception to this is when you reside or travel overseas. When that is the case, if you meet all eligibility criteria, CHAMPVA will be the primary payer (unless you have OHI in addition to Medicare) until you return to the United States.

Is preauthorization required for services?

Certain types of care/services require advance approval commonly known as preauthorization. This approval or preauthorization is extremely important and the failure to obtain it may result in denial of the claim. Preauthorization is required for:

- Dental care
- Durable medical equipment with a purchase price or total rental price of \$300 or more
- Hospice services

- Mental health/substance abuse services (see Mental Health and Substance Use Disorder Benefits Fact Sheet 01-1)
- Transplants

Are approvals for referrals to specialists or for diagnostic tests needed?

No, as long as they are medically necessary.

Are case management and utilization reviews performed?

Yes, clinical claims reviews are performed for a variety of medical services including physical, occupational and speech therapy, home health, skilled nursing, rehabilitation, and utilization of controlled substances. Simply submit the medical documentation along with your claim. Utilization reviews are also performed for services requiring preauthorization.

How do I find a CHAMPVA provider?

You have many choices in selecting a provider, but be sure the provider is properly licensed in your state and is not on the Medicare exclusion list.

CHAMPVA does not maintain a provider listing. If you need to find a provider, we recommend you go to the TRICARE website at WWW.TRICARE.OSD.MIL to search for a provider in your area. From the pull-down menu, select Provider Directory and then select TRICARE Standard. Most TRICARE providers will also accept CHAMPVA, but be sure you ask the provider. If you wish to see a provider who does not accept CHAMPVA, you will likely have to pay for the care received and then file a claim with CHAMPVA.

Another good source of provider information is Fact Sheet 01-16. This sheet explains both the claims process and the obligations of the beneficiary and the government in terms of billing and payment of claims. If you are looking for a new provider, bring Fact Sheet 01-16 along with you and present it to the provider if they have any questions about the CHAMPVA program.

If there is a VA medical facility in your area, check with them to see if they participate in the CHAMPVA In-house Treatment Initiative (CITI – pronounced city) program. CITI is a voluntary program for CHAMPVA beneficiaries. You can receive treatment at VA medical facilities, on a space available basis, with no cost share or deductible. There is no enrollment in the CITI program. If the VA medical facility in your area participates in the program and has available services, then you can receive care at that facility. **The CITI program is not available to beneficiaries with Medicare or with an HMO insurance plan** (see CITI Fact Sheet 01-18).

How do I find a pharmacy that accepts CHAMPVA?

- Local Retail Pharmacy: You can choose any pharmacy. The CHAMPVA Authorization Card is your proof of coverage. Advise the pharmacy that

CHAMPVA does not have a special drug coverage card for prescriptions. When using a local retail pharmacy, you may request reimbursement from us by submitting a CHAMPVA Claim Form VA Form 10-7959a, the itemized pharmacy statement, and the explanation of benefits from any other health care plan that may have paid on the claim.

- **Meds by Mail:** If you have submitted a current Other Health Insurance Certification that supports that you do not have another health insurance plan with pharmacy coverage, you can use Meds by Mail for your non-urgent, maintenance medication needs. There are no co-payments, no deductible requirements, and no claims to file! Prescribed maintenance medication is mailed to your home. Registration forms are available from the website at WWW.VA.GOV/HAC by selecting FORMS from the left panel. You can also receive more information by clicking on the Meds by Mail link from the left panel on the same web page. Forms can also be requested from 1-800-733-8387 and they will be mailed to you. This program is a great benefit and we highly encourage its use.
- **Medical Matrix Network Pharmacies:** Many pharmacies use the billing agent, Medical Matrix, that has over 45,000 pharmacies in its network. If you have submitted an Other Health Insurance Certification Form and do not have another health insurance plan that includes pharmacy coverage, you can use this network of pharmacies. The advantage to you is that you need only pay your cost share for the medication (after your outpatient deductible has been met) and there are no claims to file. To obtain information on local pharmacies in your area that are a part of the Medical Matrix network of pharmacies, you may access our website at WWW.VA.GOV/HAC. For those of you who do not have access to a computer, call Medical Matrix at 1-800- 880-1377 and ask for names of pharmacies in your area that are a part of their network.

Does the provider have to accept the CHAMPVA allowable rate?

Yes, under 38 CFR section 17.272(b) (3) and (4), providers must accept the CHAMPVA allowable rate and cannot balance bill the beneficiary, even if the beneficiary is the one that files the claim.

How do you get a claim paid?

The HCFA-1500 or UB-92 should be sent to:

VA Health Administration Center
CHAMPVA
PO Box 65024
Denver, CO 80206-9024

This is the only address that should be used for CHAMPVA claim submissions.

Beneficiaries who submit a claim, should use the CHAMPVA claim form available through the mail (1-800-733-8387) or from our website at WWW.VA.GOV/HAC, select FORMS.

What is the impact on CHAMPVA if I have other major health insurance?

If you have other health insurance (OHI), upon receiving the explanation of benefits (EOB) from the OHI, you or the provider may file a claim for any remaining balance. By law, CHAMPVA is always secondary payer except to Medicaid, State Victims of Crime Compensation Programs, and supplemental CHAMPVA policies.

What does CHAMPVA pay?

In most cases, CHAMPVA pays equivalent to Medicare/TRICARE rates. CHAMPVA has an outpatient deductible (\$50 per person up to \$100 per family per calendar year) and a cost share of 25%. The 25% cost share will be collected from the patient except when the patient has other health insurance.

If the beneficiary has other health insurance, then CHAMPVA pays the lessor of either 75% of the allowable amount after \$50 calendar year deductible is satisfied, or the remainder of the charges and the beneficiary will normally have no cost share.

See Payment Methodology Fact Sheet 01-11 for further information regarding payment on other than outpatient type of services.

Are there special considerations for Ambulatory Surgery Centers?

Yes, they must have Medicare approval to perform the specific procedure at free-standing surgical centers.

How does my provider or pharmacy know I am eligible for CHAMPVA?

Every CHAMPVA beneficiary has a CHAMPVA Authorization Card that looks like this (not all cards have a Plan Number or Group Number):

CHAMPVA Benefit Coverage/Limitations – see the CHAMPVA Handbook for information on covered benefits and limitations. This is also your Pharmacy Card. Preauthorization – required for the following services: Organ and bone marrow transplants Hospice services Most mental health/substance abuse services All dental care All durable medical equipment with a purchase or total rental price of \$300 or more Preauthorization Requests Medical Services 1-800-733-8387 Mental Health/Substance Abuse 1-800-424-4018		 Department of Veterans Affairs Health Administration Center Authorization Card P.O. Box 65024 Denver, CO 80206-9024	
<div style="font-size: 4em; opacity: 0.2; text-align: center; position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%); pointer-events: none;"> SAMPLE </div>		Subscriber Name	
		A-Card Number	
Note: Include A-Card Number on all claims and correspondence			
		Effective Date	Expiration Date
		Assistance 1-800-733-8387 hac.inq@med.va.gov	

VA Form 10-7959, Sep 2001 (RS)

How do I get more information?

- Mail: VA Health Administration Center
CHAMPVA
PO Box 65023
Denver, CO 80206-9023
- Phone: 1-800-733-8387 Monday - Friday 8:15 AM – 6:00 PM Eastern Time
- FAX: 1-303-331-7804
- E-mail: HAC.INQ@MED.VA.GOV
- Website: WWW.VA.GOV/HAC