Department of Veterans Affairs Veterans Health Administration Washington, DC 20420 Amendment July 7, 2022

VHA DIRECTIVE 1601D.05(1)
Transmittal Sheet
March 23, 2021

CIVILIAN HEALTH AND MEDICAL PROGRAM OF THE DEPARTMENT OF VETERANS AFFAIRS

1. REASON FOR ISSUE: This Veterans Health Administration (VHA) directive maintains Department of Veterans Affairs (VA) information regarding medical care for survivors and dependents of eligible Veterans under the Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA) program.

2. SUMMARY OF MAJOR CHANGES:

This amendment dated July 7, 2022:

- a. Removes the requirement that school enrollment be full-time for general eligibility of children between the ages of 18 and 23, per the decision in *Petite v. McDonough*, No. 19-5815 (Ct. Vet. App. Dec. 16, 2021).
- b. Additionally, the amendment provides reorganization updates throughout the Directive to account for the new Office of Integrated Veteran Care (IVC), which combines the functions of the Office of Community Care (OCC) and the Office Veterans Access to Care (OVAC).

As published on March 23, 2021, this directive:

- a. Added responsibilities for Deputy to the Assistant Under Secretary for Health for Integrated Veteran Care (16), Executive Directors at the Office of Integrated Veteran Care (which include the Executive Officer, Business Operations and Administration (BOA) and Executive Director, Delivery Operations (DO)) and the Directors under them (which include the Director, Policy; Director, DO Veteran Family Member Programs; Director, Customer Experience; and Director, Business Integrity and Compliance), to account for organizational changes (see paragraph 5).
- b. Added required application materials to apply for medical benefits (see paragraph 7).
- c. Added CHAMPVA Operational Policy Manual paragraph to clarify how CHAMPVA meets the statutory requirement to be the same or similar to TRICARE and the process for benefits determinations (see paragraph 8).
- d. Updated appeals information to account for changes due to Public Law 155-55 (see paragraph 9).
- **3. RELATED ISSUES:** VHA Directive 1601, Non-VA Medical Care Program, dated January 23, 2013; VHA Handbook 1601D.05, Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA), dated November 2, 2015; VHA

Directive 1152(1), Caregiver Support Program, dated October 4, 2018; and DoD Directive 5136.13, Defense Health Agency (DHA), dated September 30, 2013.

- **4. RESPONSIBLE OFFICE:** The Office of Integrated Veteran Care (16) is responsible for the contents of this VHA directive. Questions may be addressed to 303-331-7500 or VHA16IVCAction@va.gov.
- **5. RESCISSION:** VHA Handbook 1601D.05, Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA), dated November 2, 2015, is rescinded.
- **6. RECERTIFICATION:** This VHA directive is scheduled for recertification on or before the last working day of March 2026. This VHA directive will continue to serve as national VHA policy until it is recertified or rescinded.

BY DIRECTION OF THE OFFICE OF UNDER SECRETARY FOR HEALTH:

/s/ Mark Upton, MD
Acting Assistant Under Secretary for Health for Community Care

NOTE: All references herein to VA and VHA documents incorporate by reference subsequent VA and VHA documents on the same or similar subject matter.

DISTRIBUTION: Emailed to the VHA Publication Distribution List on March 29, 2021.

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CIVILIAN HEALTH AND MEDICAL PROGRAM OF THE DEPARTMENT OF VETERANS AFFAIRS

1. PURPOSE

This Veterans Health Administration (VHA) directive maintains statutory and regulatory authority for reimbursing medical care for survivors and dependents of certain Veterans under the Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA), delineates responsibilities for administrating CHAMPVA and states mandatory standards and procedures regarding determinations of health care benefits under CHAMPVA. **AUTHORITY:** Title 38 United States Code (U.S.C.) § 1781, 38 Code of Federal Regulations (C.F.R.) § 17.270-17.278.

2. BACKGROUND

- a. CHAMPVA is a health benefits program in which the Department of Veterans Affairs (VA) shares costs of covered medical care for eligible beneficiaries. CHAMPVA is the secondary payer to other health insurance coverage to include Medicare.
- b. CHAMPVA is authorized to provide medical care benefits for the spouses, surviving spouses, children and eligible Primary Family Caregivers of certain Veterans, in the same or similar manner and subject to the same or similar limitations as medical care furnished to certain dependents and survivors of active duty and retired members of the Armed Forces under Title 10 U.S.C., Chapter 55 (CHAMPUS).
- c. The Office of Integrated Veteran Care (IVC) interprets the statute's term "same or similar" broadly because the original CHAMPUS program was replaced by the Department of Defense (DoD) with the TRICARE program in 1993, which differs significantly from its predecessor. TRICARE includes several plan options with varying coverages (e.g., Prime, Select, Retired Reserve, Young Adult). As a result of these differences, CHAMPVA has coverage variations from TRICARE.
- d. CHAMPVA is administered by IVC under the administrative and programmatic direction of the Assistant Under Secretary for Health for Integrated Veteran Care.
- e. CHAMPVA covers most medical services and supplies required to meet the health care needs of eligible beneficiaries. Covered medical services and supplies may be provided by approved health care providers. Limitations to benefits include but are not limited to services that are not medically necessary, such as those that are cosmetic in nature, and services that are investigational or experimental. **NOTE:** For a specific list of exclusions, see 38 C.F.R. § 17.272.

3. DEFINITIONS

a. <u>Approved Health Care Provider.</u> For purposes of this directive, an approved health care provider is an individual or institutional non-VA community health care provider of CHAMPVA-covered medical services and supplies who is licensed or certified by a State to provide the covered medical services and supplies or is otherwise

certified by an appropriate national or professional association that sets standards for the specific health care provider.

- b. **Beneficiary.** A beneficiary is a CHAMPVA-eligible spouse, surviving spouse, child, or caregiver of a sponsor.
- c. <u>Child.</u> For the purposes of this directive, a child is an individual unmarried and under the age of 18, or between the ages of 18 and 23 and pursuing a course of instruction at an approved educational institution, or a person who before attaining the age of 18 years became permanently incapable of self-support. A child may include a legitimate or illegitimate child, adopted child or a stepchild. (See 38 U.S.C. § 101.)
- d. <u>Eligible Caregiver.</u> For the purposes of this directive, an eligible caregiver is an individual designated as a primary provider of personal care services under 38 U.S.C. § 1720G(a)(7)(A) who is not entitled to care or services under a health-plan contract (as defined in 38 U.S.C. § 1725(f)). **NOTE**: CHAMPVA is a Caregiver Support Program benefit to qualified Primary Family Caregivers under 38 U.S.C. § 1720G(a)(3) and 38 C.F.R. § 71.40(c)(3). See VHA Directive 1152(1) Caregiver Support Program, dated October 24, 2016.
- e. <u>Helpless Child.</u> A helpless child is an individual who became permanently incapable of self-support before age 18.
- f. Other Health Insurance. Other Health Insurance (OHI) are health insurance plans or programs designed to provide reimbursement or coverage for expenses incurred by the beneficiary for medical services or supplies. These plans or programs for which the beneficiary pays a premium to an issuing agent, are those plans and programs that the beneficiary is entitled to by law, employment, membership, association with an organization, group, and student insurance, due to "student status." Additionally, managed-care plans that provide comprehensive services at discounted rates or set copayments depending on the type of service and supply provided, are included. These plans further include Health Maintenance Organizations (HMOs), Preferred Provider Organizations (PPOs), and Paid Prescription Plans. CHAMPVA is secondary to Medicare among OHI plans or program coverage.
- g. **Sponsor.** A sponsor is the Veteran upon whom CHAMPVA eligibility for the beneficiary is based.
- h. **Spouse.** A spouse is an individual who is married to an eligible CHAMPVA sponsor.
- i. **Surviving Spouse.** A surviving spouse is the spouse of a sponsor at the time of the sponsor's death.

4. POLICY

It is VHA policy to provide medical care benefits for eligible spouses, surviving spouses, children and qualified Primary Family Caregivers of certain Veterans in the

same or similar manner and subject to the same or similar limitations as medical care that is furnished under TRICARE.

5. RESPONSIBILITIES

- a. <u>Under Secretary for Health.</u> The Under Secretary for Health is responsible for ensuring overall VHA compliance with this directive.
- b. <u>Assistant Under Secretary for Health for Integrated Veteran Care.</u> The Assistant Under Secretary for Health for Integrated Veteran Care is responsible for:
- (1) Providing overall enterprise-wide oversight and guidance on this directive and CHAMPVA program.
 - (2) Communicating the contents of this directive to each Executive Director.
- (3) Ensuring that each Executive Director has sufficient resources to implement this directive.
- (4) Providing oversight of Executive Directors to assure compliance with this directive, relevant standards, and applicable regulations.
- c. <u>Deputy to the Assistant Under Secretary for Health for Integrated Veteran</u>

 <u>Care.</u> The Deputy to the Assistant Under Secretary for Health for Integrated Veteran

 Care is responsible for:
- (1) Managing all CHAMPVA activities, including planning, organizing, budgeting, directing, coordinating, evaluating and improving administrative operations consistent with applicable public laws, statutes, regulations and established program requirements.
- (2) Representing VA as a CHAMPVA program official and exercising a controlling influence in matters of executive level involvement in CHAMPVA program matters.
- (3) Providing liaison support to the Assistant Under Secretary for Health for Integrated Veteran Care, VA Central Office staff and other Federal agencies.
 - d. **Executive Officer.** The Executive Officer is responsible for:
- (1) Managing all CHAMPVA activities conducted through the Executive Office such as Policy, including planning, organizing, budgeting, directing, coordinating, evaluating and improving administrative operations consistent with applicable public laws, statutes, regulations and established program requirements.
- (2) Representing VA as a CHAMPVA program official and exercising a controlling influence in matters of executive level involvement in CHAMPVA program matters.
- (3) Providing liaison support to the Assistant Under Secretary for Health for Integrated Veteran Care, VA Central Office staff and other Federal agencies.

- e. <u>Executive Director, Integrated External Networks.</u> The Executive Director, Integrated External Networks is responsible for:
- (1) Managing all CHAMPVA activities conducted through the Directorates of Veteran Family Member Programs (VFMP), including planning, organizing, budgeting, directing, coordinating, evaluating and improving administrative operations consistent with applicable public laws, statutes, regulations and established program requirements.
- (2) Representing VA as a CHAMPVA program official and exercising a controlling influence in matters of executive level involvement in CHAMPVA program matters.
- (3) Providing liaison support to the Assistant Under Secretary for Health for Integrated Veteran Care, VA Central Office staff and other Federal agencies.
 - f. Director, Policy. The Director, Policy is responsible for:
- (1) Ensuring determinations of CHAMPVA benefit coverage and payment methodologies.
 - (2) Ensuring maintenance and updates of the CHAMPVA Operational Policy Manual.
- g. <u>Director, Veteran Family Member Programs (VFMP).</u> The Director, VFMP is responsible for:
- (1) Ensuring the processing, review and maintenance of records of CHAMPVA applications, claims, decision review requests, and administrative and clinical appeals.
- (2) Ensuring the approval or rejection of applications, including the verification of a Veteran's eligible sponsor status, beneficiary eligibility, and provision of a written determination to applicants via email or letter that notifies them of the approval or rejection of the initial application.
- (3) Ensuring the processing of claims for reimbursement of medical services, including issuing explanations of benefits paid and denial letters.
- (4) Ensuring the provision of a written determination to the applicants for decision review requests and appeals that affirms, reverses or modifies the initial determination.
 - (5) Ensuring pre-authorizations of benefits and medical services.
- (6) Developing and implementing a comprehensive quality assurance program, as well as internal controls, to ensure appropriate beneficiary eligibility determinations, authorization of benefits, payment of claims, and overall operational effectiveness.
 - (7) Overseeing CHAMPVA fiscal intermediary claim processing functions.
 - (8) Overseeing CHAMPVA pharmacy benefits management.
 - h. <u>Director, Customer Service.</u> The Director, Customer Service is responsible for:

- (1) Overseeing a designated call center to assist potential CHAMPVA applicants and current beneficiaries with the application process or answer any questions on the CHAMPVA program.
 - (2) Pre-authorize certain benefits and medical services as needed.
- (3) Evaluate problems and complaints of inbound callers to provide proper solutions to resolve and respond to the needs of beneficiaries and provider inquiries.
- (4) Reprocess previously denied claims when supporting information justifies health care claim resolution.
 - i. **<u>Director</u>**, **Compliance**. The Director, Compliance is responsible for:
- (1) Managing an active Fraud Waste and Abuse Program (FWA), including auditing of payments, eligibility, and internal controls.
- (2) Periodically providing reports on the status of FWA to the VHA Chief of Program Integrity and Compliance Officer or the FWA Sub-Committee of the Audit, Risk and Compliance Committee (ARCC).

6. ELIGIBILITY

- a. The Veterans Benefits Administration (VBA) adjudicates a Veteran's service-connected disability rating or determines that a Veteran's death was service-connected. VHA uses this VBA decision to qualify the Veteran as a CHAMPVA sponsor.
 - b. The following persons are eligible to be CHAMPVA sponsors:
- (1) A Veteran who has a total disability, permanent in nature, resulting from a service-connected disability.
 - (2) A Veteran who died as a result of a service-connected disability.
- (3) A Veteran who at the time of death had a total disability permanent in nature, resulting from a service-connected disability.
- (4) A person who died in the active military, naval or air service in the line of duty and not due to such person's own misconduct.
- c. The following persons are eligible for CHAMPVA benefits so long as they are not otherwise eligible for TRICARE:
 - (1) The spouse or child of an eligible sponsor.
 - (2) The surviving spouse or child of an eligible sponsor.
 - (3) The helpless child of an eligible sponsor.

- (4) An individual designated as a primary provider of personal care services under 38 U.S.C. § 1720G(a)(7)(A) who is not entitled to care or services under a health-plan contract (as defined in 38 U.S.C. § 1725(f)).
- (5) A child or surviving child of an eligible sponsor, who is between the ages of 18 and 23, and is pursuing a full-time course of instruction at an educational institution approved under 38 U.S.C. Chapter 36, and who, while pursuing such course of instruction, incurs a disabling illness or injury (including a disabling illness or injury incurred between terms, semesters, or quarters or during a vacation or holiday period) which is not the result of such child's own willful misconduct and which results in such child's inability to continue or resume such child's chosen program of education at an approved educational institution shall remain eligible for benefits until the end of the 6-month period beginning on the date the disability is removed, the end of the 2-year period beginning on the date of the onset of the disability or the 23rd birthday of the child, whichever occurs first.
- (6) An eligible CHAMPVA beneficiary who retains Medicare upon entitlement to coverage.
- d. To remain eligible for CHAMPVA, beneficiaries must enroll in Medicare when entitled. CHAMPVA is the secondary payer to OHI coverage to include Medicare. To be CHAMPVA eligible as a qualified Primary Family Caregiver of certain Veterans, the Primary Family Caregiver cannot have no OHI coverage.

7. APPLICATION FOR BENEFITS

- a. To apply for medical benefits under CHAMPVA, applicants must submit a completed application for benefits which includes the following documents:
- (1) VA Form 10-10d, Application for CHAMPVA Benefits at: https://www.va.gov/vaforms/medical/pdf/vha-10-10d-fill.pdf. NOTE: Due to a recent decision made by the Court of Veterans Claims (CAVC), some of the information contained on VA Form 10-10d is inaccurate. The form is in the process of being updated but is still valid and should continue to be used until the current version of the form is rescinded.
- (2) VA Form 10-7959c, CHAMPVA Other Health Insurance (OHI) Certification when applicable at: https://www.va.gov/vaforms/medical/pdf/VA%20Form%2010-7959c.pdf.
 - (3) A copy of the applicant's Medicare card or OHI card, when applicable.
- (4) Documentation of school enrollment status, when applicable (required for a child age 18 and older who is not a helpless child). **NOTE:** Acceptable proof of enrollment includes a school transcript or letter from the admissions office or other school official, confirming enrollment, the dates of enrollment, and the anticipated graduation date.

8. CHAMPVA OPERATIONAL POLICY MANUAL

a. The CHAMPVA Operational Policy Manual, detailing IVC implementation of CHAMPVA statute and regulations, is available at: https://www.vha.cc.va.gov/system/templates/selfservice/va_ssnew/help/customer/locale/en-US/portal/554400000001036.

b. When determining CHAMPVA benefit coverage and payment methodologies, which 38 U.S.C. § 1781 requires to be same or similar to the CHAMPUS program, VA interprets the term "same or similar" broadly because the original CHAMPUS program was replaced by DoD with the TRICARE program, which differs significantly from its predecessor. As a result of these differences, CHAMPVA has coverage variations from TRICARE.

9. APPEALS AND DECISION REVIEW REQUESTS

All appeals to the Board of Veterans' Appeals or any decision review requests to VFMP of a denied benefit must be submitted in accordance with Public Law (P.L.) 155-55 as detailed on the explanation of benefits or denial letter.

10. TRAINING

There are no formal training requirements associated with this directive.

11. RECORDS MANAGEMENT

All records regardless of format (e.g., paper, electronic, electronic systems) created by this directive shall be managed as required by National Archives and Records Administration (NARA) approved records schedules found in VHA Records Control Schedule 10-1. Questions regarding any aspect of records management should be addressed to the appropriate Records Officer.

12. REFERENCES

- a. P.L. 155-55.
- b. 10 U.S.C. Chapter 55.
- c. 38 U.S.C. § 101.
- d. 38 U.S.C. § 1720G(a)(7)(A).
- e. 38 U.S.C. § 1725(f).
- f. 38 U.S.C. § 1781.
- g. 38 U.S.C. Chapter 36.
- h. 38 C.F.R. § 17.270-17.278.
- i. VHA Directive 1152(1), Caregiver Support Program, dated October 24, 2016.

j. CHAMPVA Operational Policy Manual:

https://www.vha.cc.va.gov/system/templates/selfservice/va_ssnew/help/customer/locale/en-US/portal/55440000001036.