

Eligibility & Enrollment

3601 S. 6th Ave Building 50 Room 156 Tucson, AZ 85723 Monday – Friday 8am – 4pm walk in basis (520)792-1450 Option 4



U.S. Department of Veterans Affairs

Veterans Health Administration

Southern Arizona VA Health Care System (SAVAHCS)







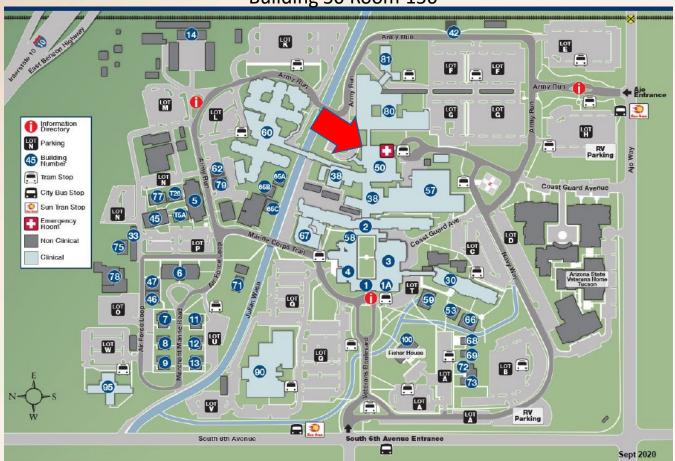






Where is Eligibility?

Building 50 Room 156













How To Apply for VA Health Care

Online: VA.gov

• Mail: VA Form 10-10EZ

By phone: (877) 222-VETS (8am-8pm ET)

In Person:

Eligibility and Enrollment Office Building 50 Room 156 Monday-Friday 8am-4pm walk-in basis



You may also inquire at a Community Based Outpatient Clinic











Is VA Healthcare Health Insurance?

- VA Healthcare is a Benefit
- This is not health insurance
- Health benefits are different for each Veteran



TRICARE/CHAMPVA/Medicare



For more information please visit:

https://www.va.gov/health-care/about-va-health-benefits/va-health-care-and-other-insurance/













Types of Veteran ID Cards

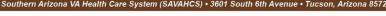
- Department of Defense Identification Card
- Veteran Health Identification Card (VHIC)
- Veteran ID Card (VIC)
- Veteran's designation on a State-Issued Driver's License or ID















Medical Benefits Package

The Standard Medical Benefits Package includes:

- Preventative Care Services
- **Inpatient and Outpatient Diagnostics and Treatment**
- **Prescription Services**



Benefits subject to certain eligibility restrictions include:

- Eyeglasses and hearing aides
- Ambulance services
- Non-VA care
- Prosthetics, Durable Medical Equipment and Rehabilitative Devices
- Dental
- Extended Term Care
- VA Foreign Medical Program















Dental Eligibility

- Service connected at 100% or Unemployable paid at the 100% rate
- Serviced Connected for a dental condition (Compensable or combat/service trauma)
- A former Prisoner of War (POW)
- Within 180 days of discharge, if indicated on DD214 (One-time dental care)
- Homeless (One-time dental care)
- Enrolled in Veteran Readiness & Employment (VR&E)
- Have a dental condition aggravating a service-connected disability (VA clinically determined)
- Require dental care for a condition complicating a medical condition (VA clinically determined)













VA Dental Insurance Program (VADIP)

VA's Dental Insurance Program (VADIP) offers enrolled Veterans the opportunity to purchase dental insurance at a reduced cost through Delta Dental or MetLife

Delta Dental: 1-855-370-3303

MetLife: 1-888-310-1681



For more information please visit: https://www.va.gov/healthbenefits/VADIP/













General Exclusions

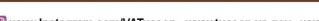
VA cannot provide the following services or benefits:

- Cosmetic surgery except determined by VA to be medically necessary for reconstructive or psychiatric care
- Drugs, biologicals, and medical devices not approved by the FDA unless the treating medical facility is conducting formal clinical trials under an Investigational Device Exemption (IDE) or an Investigational New Drug (IND) application, or the drugs, biologicals, or medical devices are prescribed under a compassionate use exemption
- Gender alteration
- Health club or spa membership
- Hospital and outpatient care for a Veteran who is either a patient or inmate in an institution of another government agency if that agency has a duty to give the care or services.
- Paternity testing
- Refractive laser surgery (LASIK, PRK)
- Services not ordered and provided by licensed/accredited professional staff
- Special private duty nursing













2025 VA Healthcare Copay Rates

Outpatient Care	Copay amount for each visit/test	
Primary care services (like a visit to your primary care doctor)	\$15	
Specialty care services (like a visit to a hearing specialist, eye doctor, surgeon, or cardiologist)	\$50	
Specialty tests (like an MRI or CT scan)	\$50	

Note: There are no copayments for services/medications related to a special eligibility authority (i.e., Service Connection).











2025 VA Healthcare Copay Rates

Inpatient Care	Copay Amount
First 90 days of care during a 365-day period	\$1,676 copay + \$10 charge/day
Each additional 90 days of care during a 365-day period	\$838.00 copay + \$10 charge/day
Note: Reduced Rate for Veterans enrolled in Priority Group 7	Reduced to 20%











Medication Copayments

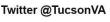
Outpatient Medication Tier	1-30 Day Supply	31-60 Day Supply	61-90 Day Supply
Tier 0 (Prescription and over-the-counter medicines with no copay)	0	0	0
Tier 1 (Preferred Generics)	\$5	\$10	\$15
Tier 2 (Non-Preferred Generics and some OTCs)	\$8	\$16	\$24
Tier 3 (Brand Name)	\$11	\$22	\$33

You may pay a copay for these types of medications:

- Medications your health care provider prescribes to treat non-service-connected conditions, and
- Over-the-counter medications (like aspirin, cough syrup, or vitamins) that you get from a VA pharmacy. You may want to consider buying your over-the-counter medications on your own.













2025 Urgent Care Copay Rates

(Care for minor illness and injuries)

Priority Group	Copayment per visit	
1-5	\$0 for the first 3 visit in each calendar Year \$30 for each additional visit	
6-8	\$30	

To be eligible for urgent care benefits, including through our network of approved community providers, both of these must be true:

- You must be enrolled in the VA health care system, and
- You must have received care from us within the past 24 months (2 years)

If you're only getting a flu shot at your visit, you won't have to pay any copays, no matter your priority group.













Geriatric & Extended Care Copay Rates

2025 Geriatric and Extended Care Copayments

	Amount
 Short-term or long-term stays in a community living center (formerly called nursing homes) Overnight respite care (in-home or onsite care designed to give family caregivers a break, available up to 30 days each calendar year) Overnight geriatric evaluations (evaluations by a team of health care providers to help you and your family decide on a care plan) 	Up to \$97













Geriatric & Extended Care Copay Rates

2025 Geriatric and Extended Care Copayments

Level of Care	Types of Care included	Daily Copay
		Amount
Non-Institutional (Outpatient)	 Adult day health care (care in your home or at a facility that provides daytime social activities, companionship, recreation, care, and support) Daily respite care (in-home or onsite care designed to give family caregivers a break, available up to 30 days each calendar year) 	Up to \$15
	 Geriatric evaluations that don't require an overnight stay (evaluations by a team of health care providers to help you and your family decide on a care plan) 	
Domiciliary	Short-term RehabilitationLong-term maintenance care	Up to \$5













Priority Groups

Priority Group 1:

- Rated Service Connected (SC) disability 50% or more
- Unemployable due to VA SC disability
- Medal of Honor (MOH)
 - Copay Responsibility: Treatment Exempt/ Medication Exempt

Priority Group 2:

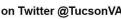
- Rated SC Disability 30% 40%
 - Copay Responsibility: Treatment Exempt/ Medication Required

Priority Group 3:

- Former POWs (No Pharmacy Co-Pay)
- Purple Heart
- Discharged due to a disability that was incurred or aggravated in the line of duty
- 10% 20% SC Disabilities
 - Copay Responsibility: Treatment Exempt/ Medication Required













Priority Group 4:

- Receiving aid and attendance or housebound benefits
- Determined by VA to be Catastrophically Disabled
 - Copay Responsibility: Treatment Exempt/ Medication Exempt

Priority Group 5:

- Veterans with income below established VA Means Test Threshold
- Veterans in receipt of VA pension benefits
- Veterans eligible for Medicaid benefits
 - Copay Responsibility: Subject to income













Priority Group 6: **New PACT Act Eligibility Criteria**

- Toxic-exposed Veterans under 38 U.S.C. § 1710(e)(1):
 - Vietnam-era herbicide-exposed Veterans
 - Radiation-exposed Veterans
 - Veterans in Southwest Asia during the Persian Gulf War
 - Combat Veterans who served in a theater of combat operations after the Persian Gulf War and those Veterans who served in combat against a hostile force during a period of hostilities after November 11, 1998. NOTE: Expires 10yrs from the date of discharge or release from Active Duty. Once this period ends, combat Veterans will remain enrolled and placed into Priority Group 8, unless they are otherwise eligible for a higher priority group.
 - Project 112/SHAD Veterans
 - Camp Lejeune Veterans
 - Toxic-exposure risk activity Veterans
 - "Covered Veterans" under 38 U.S.C. § 1119(c)
- World War II (WWII) Veterans
- Veterans with compensable 0% service-connected disability rating(s)
 - Copay Responsibility: Treatment Required/ Medication Required













Priority Group 7:

Veterans with income and/or net worth above the VA national income threshold and below the geographic threshold who agree to pay copays

Copay Responsibility: Treatment Required/ Medication Required (Reduced Inpatient Rate)

Priority Group 8 (A-D):

Veterans with gross household income above the Means Test threshold and Geographic Means Test threshold who agree to pay applicable copayments under 38 USC §§ 1719(f) and 1710 (g)

Copay Responsibility: Treatment Required/ Medication Required

Priority Group 8 (E-G): (Not Eligible)

Veterans whose income exceed the established income thresholds

Note: 8E can be treated for Service-Connected Disabilities only

















Questions? (520)792-1450 Option 4















