VA Offers Long-Term Care Benefits

Department of Veterans Affairs

VA offers health care coverage for veterans with a full range of long-term care services.

LONG-TERM CARE BENEFITS

The Veterans Millennium Health Care and Benefits Act, which enhances the medical benefits package introduced by VA Eligibility Reform, extends long-term care benefits to provide a full range of possible services, including:

- Nursing Home Care
- Domiciliary Care
- Adult Day Health Care
- Geriatric Evaluation
- Respite Care

This continuity of care is provided through a variety of coordinated services - offered at VA facilities or in the community - which the eligible veteran can access in different ways depending on the type of treatment needed. Recognizing a need for different types and levels of care over time, VA's goal is to help veterans maintain optimal health in the least restrictive environment.

VA is committed to providing a customized treatment plan for the veteran who is eligible for long-term care. This may be accomplished by providing care at a VA medical facility, through VA contracted health care services, or by referral to a community provider at the veteran's expense. VA strongly encourages veterans to retain their existing health care coverage, even if they are enrolled with VA and are eligible for long-term health care benefits.

Long-term care benefits for veterans are now more comprehensive and more flexible than ever.

VA Offers Comprehensive Benefits

for Long-Term Care

Congress has given VA the authority to provide long-term care benefits for qualifying veterans. These benefits ensure that veterans who qualify can receive the long-term care services they need.

Frequently Asked Questions

What do VA's benefits include?

The benefits provide for a range of long-term care services, including:

- Nursing Home Care
- Domiciliary Care
- Adult Day Health Care
- Geriatric Evaluation
- Respite Care

Who qualifies for nursing home care?

Any veteran who has a service-connected disability rated at 70 percent or more qualifies for nursing home care. Veterans whose service-connected disability is clinically determined to require nursing home care also qualify. Care will be provided in a VA nursing home or contract nursing home.

What if I am a veteran who needs nursing home care, but I don't meet the above requirements?

VA may provide nursing home care to other veterans if space and resources are available. Veterans who have a service-connected disability are given first priority for nursing home care. Contact your nearest VA health care facility to obtain the latest information.

Nonservice-connected veterans and zero percent, non-compensable, service-connected veterans requiring nursing home care for any nonservice-connected disability must complete an income and asset assessment to determine whether they will be billed for nursing home care.

If I want to go to a private nursing home, will VA pay for it?

In most cases, no. VA can pay for care only in nursing homes that participate in its contract program. About 10 percent of the country's nursing homes have VA contracts. In addition, most veterans are not eligible for direct placement to private nursing homes.

Can I be transferred from a VA nursing home without my consent?

No. If you are in a VA nursing home and continue to have a medical need for nursing home care you will not be transferred from the facility without your consent or, in the event you cannot provide informed consent, your representative's consent.

What is domiciliary care?

Domiciliary care provides rehabilitative and long-term, health-maintenance care for veterans who require some medical care, but who do not require all the services provided in nursing homes. Domiciliary care emphasizes rehabilitation and return to the community.

Who is eligible for domiciliary care?

VA may provide domiciliary care to veterans whose annual income does not exceed the maximum annual rate of VA pension or to veterans the Secretary of Veterans Affairs determines have no adequate means of support. Contact your nearest benefits or health care facility to obtain the latest information.

What is adult day health care?

The adult day health care program is a therapeutic day care program, which provides medical and rehabilitation services to disabled veterans in a congregate setting.

Who is eligible for adult day health care?

Adult day health care (ADHC) is part of the basic benefits package. Veterans need to be enrolled in VA for their health care and meet the clinical admission criteria for ADHC.

What is geriatric evaluation?

Geriatric evaluation is the comprehensive assessment of a veteran's ability to care for him/herself, physical health, and social environment, which leads to a plan of care. The plan could include treatment, rehabilitation, health promotion, and social services. These evaluations are performed in inpatient Geriatric Evaluation and Management (GEM) Units, GEM clinics, geriatric primary care clinics, and other outpatient settings.

Frequently Asked Questions

What is respite care?

Respite care provides supportive care to veterans on a short-term basis to give the caregiver a planned period of relief from the physical and emotional demands associated with providing care. Prior to the new changes, respite care was limited to VA nursing home care or hospital beds. Now, respite care can be provided in the home or other non-institutional settings.

What about home care?

Skilled home care is provided by VA and by contract agencies to veterans that are homebound with chronic diseases and includes nursing, physical/occupational therapy, and social services.

What about hospice/palliative care?

Hospice/palliative care programs offer pain management, symptom control, and other medical services to terminally ill veterans or veterans in the late stages of the chronic disease process, as well as bereavement counseling and respite care to their families.

Must I make copayments for long-term care services?

Veterans with a compensable service-connected disability are exempt from long-term care copayments. Nonservice-connected veterans and non-compensable zero percent service-connected veterans may be subject to long-term care copayments. Some veterans may be required to complete VA Form 10-10EC, Application for Extended Care Services, which is a measure of your family's current income and assets. Contact your nearest VA health care facility to obtain the latest information.

What type of information is needed to complete VA Form 10-10EC?

In order to complete VA Form 10-10EC, you will need to gather the following information:

- Current gross income for you and your spouse (including but not limited to, wages, bonuses, severance pay, interest/dividends, workers compensation, inheritance, alimony)
- The value of fixed assets, such as residences, land, farm, vehicles, minus any lien or mortgage
- The value of liquid assets, such as cash, retirement accounts, stocks, bonds, collectibles, art work
- Current monthly expenses such as rent/mortgage, car payment, food, education, utilities, taxes, and insurance

For a more detailed explanation of the financial information required, contact your nearest VA health care facility.

At what point do I begin to make copayments?

VA does not require a copayment for the first 21 days of long-term care services received in any 12-month period. The 12-month period begins on the date that VA first provided the long-term care services to the veteran.

How are the long-term care copayments determined?

The maximum copayment rates that can be charged for long-term care services are:

- Nursing home, inpatient geriatric evaluation, inpatient respite: $97/day
- Adult day health care, outpatient geriatric evaluation, outpatient respite: $15/day
- Domiciliary care: $5/day

However, the monthly copayment amounts will vary from veteran to veteran and are based on current financial information submitted on VA Form 10-10EC.

How will I know what my long-term care copayment will be?

The Social Worker or Case Manager involved in your long-term care placement will provide you with a projection of your monthly long-term care copayment amounts for the next 12 months.

For more information on your eligibility for these benefits, call toll-free

1-877-222-VETS (1-877-222-8387)

or obtain information on the Internet at

www.va.gov/elig

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