

2008 Copay Requirements at a Glance

	<u>Inpatient</u> (\$10/day + \$1068 for first 90 days and \$534 after 90 days - based on 365-day period).	<u>Outpatient Care</u> (\$15 Primary Care; \$50 Specialty Care; \$0 for x-rays, lab, immunizations, etc.)	<u>Outpatient Medication</u> (\$8 per 30-day supply) PG 2-6 Calendar Year cap - \$960	<u>Extended Care Services</u> Institutional NHCU, Respite, Geriatric Eval - \$0-97 per day. Non-Institutional Respite, Geriatric Eval, ADHC - \$15 Domiciliary - \$5
Priority Group 1 (SC 50% or more)	No	No	No	No
Priority Groups 2, 3 (SC 10% - 40%) <i>No medication copay for SC condition, ex-POW, in receipt of VA A&A, HB pension or income below applicable pension threshold</i>	No	No	Yes	No
Priority Group 4 <i>Copay rules apply if placed from lower PG based on VHA catastrophic disability determination</i>	No	No	No	No
Priority Group 5 <i>No medication or extended care services copay if in receipt of VA pension or income below applicable pension threshold</i>	No	No	Yes	Yes
Priority Group 6 (Combat Veteran, SHAD, SC 0% compensable, ionization radiation) <i>Copay rules apply if unrelated to PG6 placement</i>	No	No	No	No
Priority Group 7 <i>Inpatient copay is reduced 80% of full rate</i>	Yes	Yes	Yes	Yes
Priority Group 8 <i>Unless income is below applicable pension threshold for medication and extended care services copays</i>	Yes	Yes	Yes	Yes

Basic Business Rule

Cost Free Care and Medication for SC treatment, SC 50% or more, ex POWs, VA pensioners, under Special Authorities (e.g. PG 6, military sexual trauma, nasopharyngeal radium irradiation).

OEF/OIF Combat Veterans Enhanced Eligibility for Health Care Benefits

* Combat veterans discharged from active duty on or **after** January 28, 2003, are eligible for enrollment in Priority Group (PG) 6 for 5 years following discharge unless eligible for a higher enrollment priority (PG 1-5). Combat veterans discharged from active duty **before** January 28, 2003, who apply for enrollment on or after January 28, 2008, are eligible for enrollment in Priority Group 6 until January 27, 2011. After the special eligibility period ends, these veterans will be reassigned to appropriate PG and subject to copays, if applicable.

* Copays only applicable for PG 6 combat veteran enrollees for care related to a condition that is congenital or developmental e.g., scoliosis, existed before military service (unless aggravated by combat service) or has a specific etiology that began after military service, such as a common cold, etc.