2009 Copay Requirements at a Glance

	Inpatient (\$10/day + \$1068 for first 90 days and \$534 after 90 days – based on 365-day period).	Outpatient Care (\$15 Primary Care; \$50 Specialty Care; \$0 for x-rays, lab, immunizations, etc.)	Outpatient Medication (\$8 per 30-day supply) PG 2-6 Calendar Year cap - \$960	Extended Care Services 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%) No medication copay for SC condition, ex-POW, in receipt of VA A&A, HB pension or income below applicable pension threshold	No	No	Yes	No
Priority Group 4 Copay rules apply if placed from lower PG based on VHA catastrophic disability determination	No	No	No	No
Priority Group 5 No medication or extended care services copay if in receipt of VA pension or income below applicable pension threshold	No	No	Yes	Yes
Priority Group 6 (Combat Veteran, SHAD, SC0% compensable, ionization radiation)Copay rules apply if unrelated to PG6 placement	No	No	No	No
Priority Group 7 Inpatient copay is reduced 80% of full rate	Yes	Yes	Yes	Yes
Priority Group 8 Unless income is below applicable pension threshold for medication and extended care services copays	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.