

VETERANS HEALTH ADMINISTRATION FUGITIVE FELON PROGRAM

1. PURPOSE. This Veterans Health Administration (VHA) Handbook establishes procedures for ensuring compliance with the prohibition on providing certain benefits to fugitive felons as outlined in Public Law 107-103 Section 505, “Veterans Education and Benefits Expansion Act of 2001,” codified at Title 38 United States Code § 5313B.

2. SUMMARY OF CHANGES. This revision of VHA Handbook 1000.02:

a. Addresses the program office responsibility reassignment from the Deputy Under Secretary for Health for Operations and Management (10N) to the Health Eligibility Center (HEC);

b. Implements the HEC’s Fugitive Felon Program Database to assist VHA in the managing of fugitive felon cases; and

c. Defines and encompasses the VHA Fugitive Felon Program (FFP).

3. RELATED ISSUES. VHA Directive 1000 (to be published).

4. RESPONSIBLE OFFICE. The Health Eligibility Center is responsible for the contents of this Handbook. Questions may be addressed to (404) 828-5257.

5. RESCISSIONS. VHA Handbook 1000.2 dated December 2, 2004, is rescinded.

6. RECERTIFICATION. This VHA Handbook is scheduled for re-certification on or before the last working day of February 2017.

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Under Secretary for Health

DISTRIBUTION: E-mailed to the VHA Publications Distribution List 2/24/2017

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VETERANS HEALTH ADMINISTRATION FUGITIVE FELON PROGRAM

1. PURPOSE

This Veterans Health Administration (VHA) Handbook establishes procedures for ensuring compliance with the prohibition on providing certain benefits to fugitive felons as outlined in Public Law (Pub. L.) 107-103 Section 505, “Veterans Education and Benefits Expansion Act of 2001,” codified at Title 38 United States Code (U.S.C.) 5313B. In addition, this Handbook provides guidance to Veterans Integrated Service Network (VISN) Directors, Medical Facility Directors, Chief Officers, and Program Directors in meeting their responsibilities in implementing VHA’s Fugitive Felon Program (FFP) for patients and beneficiaries.

2. AUTHORITY

a. The Veterans Education and Benefits Expansion Act (VEBEA) of 2001 requires that the Department of Veterans Affairs (VA) withhold specified benefits (including health care) from Veterans and dependents of Veterans who are fugitive felons. The VEBEA requires VA, upon request, to furnish law enforcement personnel with the most current address of a Veteran or a Veteran’s dependent who is determined to be a fugitive felon. *NOTE: This assists law enforcement personnel in apprehending fugitive felons.*

b. VA Handbook 0730 describes the questioning and arrest authority of law enforcement officers, and it encourages facility Directors to cooperate to the fullest extent possible with law enforcement officers (see App. E).

3. BACKGROUND

a. The FFP is initiated through a Memorandum of Understanding (MOU) with Federal agencies and agreements with States as implemented and administered by the Office of Inspector General (OIG) for VA. These MOUs provide OIG with access to Federal electronic databases enabling OIG to locate fugitive felons.

b. The most common resolutions of outstanding felony warrants are cancellation of the warrant by the law enforcement agency that issued the warrant (i.e., the Originating Agency); arrest of the fugitive felon; or the fugitive felon’s surrender to officers of the Originating Agency or official designees. It is the fugitive felon’s responsibility to resolve any open warrant issue with the Originating Agency.

c. OIG has implemented processes and procedures that fulfill VA’s requirement to furnish addresses of fugitive felons (patients, Veteran-sponsored beneficiaries, or non-Veteran beneficiary) to law enforcement personnel.

d. This Handbook uses references to VHA’s traditional organizational and functional models, i.e., Facility Director, Chief, and Human Resources Management Service (HRMS). It is recognized that a VISN and/or VHA program office administering health benefits (e.g., Health

Administration Center (HAC)) must apply this Handbook within its currently-approved organizational and functional models.

4. DEFINITION OF A FUGITIVE FELON

A fugitive felon is defined as a person who is:

- a. Fleeing to avoid custody or confinement after conviction for an offense, which is a felony under the laws of the place from which the person is fleeing, or for an attempt to commit such an offense; or
- b. Fleeing to avoid prosecution for an offense, which is a felony under the laws of the place from which the person is fleeing; or
- c. Violating a condition of probation or parole imposed for committing a felony under Federal or State law.

NOTE: The preceding definition includes high misdemeanors under any State law that treats felony offenses as high misdemeanors, which would be a felony offense under Federal law.

5. REASONS FOR VA TO BE INVOLVED IN A FFP

a. The FFP seeks to assist United States (U.S.) law enforcement agencies in locating and apprehending felons, including dangerous felons, who have evaded justice and represent a significant safety risk to American citizens. Title 38 U.S.C. 5313B mandates that the Secretary of Veterans Affairs comply with the section of the law concerning addresses of, and benefits for, fugitive felons.

b. VA's Inspector General in June 28, 2001, gave testimony at a hearing of the U.S. Senate Committee on Veterans' Affairs that included the following:

(1) At least one estimate indicates there could be as many as 1.9 million outstanding felony warrants existing in the U.S. Every year, U.S. law enforcement authorities issue over one million new felony warrants.

(2) Preliminary research in VA for the year 2000 indicated there may be significant amounts of money paid to fugitive felons in Compensation & Pension benefits, educational benefits, and home loan programs. While the dollar value of VA medical benefits paid has not been determined, a related finding indicated that several dozen fugitive felons were acting as fiduciaries for Veterans unable to care for themselves.

(3) Being a fugitive from justice is itself a violation of Federal law.

(4) Providing financial or other benefits to fugitives may actually be facilitating illegal activity, which could lead to erosion of the public's trust and confidence in the integrity of programs and systems administered by VA.

(5) The Inspector General Act of 1978 requires agencies to avoid duplication and waste of government resources. At the same time that fugitive felons are receiving a variety of Veterans' benefits, the government is expending considerable financial, technical, and human resources to locate, arrest, and bring to justice the very same fugitives. This conflict is resolved by terminating the duplicate expenditures to provide benefits.

(6) Many fugitives are violent offenders or have a propensity for violence; this poses a significant safety risk to American citizens, particularly Veterans and VA employees. This is a major concern for VA administrators, particularly facility Directors.

6. SCOPE

a. To be compliant with the requirements of 38 U.S.C. 5313B, VHA must withhold VA benefits and, within the guidelines established in VA Handbook 0730, ensure the safety of all patients, beneficiaries, staff, and visitors as it implements the FFP.

b. The Health Eligibility Center (HEC) administers VHA's FFP.

c. This VHA Handbook addresses VA's legal obligation to withhold specified benefits from fugitive felons who are patients or beneficiaries and to coordinate with law enforcement authorities. This policy applies to Veterans and non-Veteran beneficiaries receiving VA health care benefits at VA expense in, or through, VHA.

7. RESPONSIBILITIES OF THE OFFICE OF THE INSPECTOR GENERAL (OIG)

The OIG is responsible for:

a. Matching fugitive felon warrant data obtained by the MOU with the National Crime Information Center (NCIC), States, and other sources, against information in existing VHA databases on patients, beneficiaries, and employees.

b. Confirming that a Veteran or other non-Veteran beneficiary (generally a family member) in VHA databases has been matched to a valid Fugitive Felon Warrant. **NOTE:** *Some fugitive felons have multiple warrants.*

(1) In some cases, the fugitive felon is no longer actively receiving care in a VHA facility or through VHA Purchased Care Programs. The fugitive felon may no longer reside at the address identified during the matching process. Regardless, OIG must provide notice of a match linked to the health care facility or program that most recently treated the fugitive felon while providing the most current available address information to the appropriate law enforcement agency.

(2) If it is identified that a fugitive felon is a Veteran sponsor of a family member or is a non-Veteran beneficiary participating in the VA's Purchased Care Programs, then OIG must provide notice to Purchased Care Program Integrity. If the family member is being seen at a VA medical center or clinic under the Civilian Health and Medical Program (CHAMPVA) In-house Treatment Initiative (CITI), Purchased Care Program Integrity must notify the appropriate VA medical facility Director.

(3) If it is identified that a fugitive felon is a Veteran enrolled in the Foreign Medical Program (FMP), then OIG must provide notice to Purchased Care Program Integrity.

(4) OIG's confirmation serves as verification that the warrant is still open or active at the time the warrant data was compared to VA data. Prior to VHA taking any action, VA Police must verify with the warrant holder that the warrant is valid. This requirement is necessary because of delays between the time that data is received by the OIG and VHA's implementation of the program.

c. Ensuring when a VA medical facility or Purchased Care Program Integrity confirms they have or are providing benefits to a FFP Veteran or a non-Veterans beneficiary, the VA medical facility or Purchased Care Program Integrity notifies the HEC of matches of patients. Notification is in the form of a PKI-encrypted electronic mail or facsimile transmission and must include information located on the OIG's electronic version of Form FFP-3, VA Investigative Summary Form, to include the Veteran's or beneficiary's complete name, social security number, date of the warrant, warrant number, Originating Agency, and the status of the warrant.

d. Ensuring when the OIG is not able to communicate FFP case information by electronic notice to the HEC or Purchased Care Program Integrity, OIG uses a paper notice containing the information located on the OIG's electronic version of Form FFP-3. The paper notice may be delivered by hand, facsimile transmission, or expedited mail. Given the time-sensitive nature of these actions, the OIG must follow up with an immediate electronic mail message if that is not the initial means of transmission. The OIG must send these notices to the HEC or Purchased Care Program Integrity, as appropriate.

8. RESPONSIBILITIES OF THE HEALTH ELIGIBILITY CENTER (HEC)

The HEC is responsible for:

a. Notifying the appropriate VISN Director(s) or the Program Director, based on the field facility or station number cited in the FFP-3 housed in the HEC's FFP electronic database or OIG letter. The HEC's notice to the VISN Director or Program Director must be done by PKI-encrypted electronic mail. If an electronic notice is not available, a paper notice must be provided to the VISN Director by facsimile transmission, expedited mail, or hand-delivery. Notice must be accomplished within 3 business days after receipt of the notice from OIG.
NOTE: Access to the HEC's FFP Database is provided electronically to authorized personnel, upon request.

b. Providing OIG access to the HEC's FFP Database Website for the purpose of tracking FFP information.

9. RESPONSIBILITIES OF THE HEALTH ADMINISTRATION CENTER (HAC)

The HAC is responsible for:

a. When applicable, notifying the appropriate VISN Director(s) or the Program Director, based on the field facility or station number cited where the CHAMPVA beneficiary is being treated in a CITI facility. The Purchased Care Program Integrity's notice to the VISN Director or Program Director must be done by PKI-encrypted electronic mail. If an electronic notice is not available, a paper notice must be provided to the VISN Director or the Purchased Care Program Integrity Director by facsimile transmission, expedited mail, or hand-delivery. This must be accomplished within 3 business days after receipt of the notice from OIG.

b. Providing the VA OIG in Austin, TX, with quarterly encrypted payment information for Veterans enrolled in the FMP.

c. Searching the HEC's FFP Database for matches to their beneficiaries or Veterans.

d. Implementing the procedures described in paragraphs 15 through 18, as applicable.

10. RESPONSIBILITIES OF THE VISN DIRECTOR

Each VISN Director is responsible for:

a. Reviewing decisions, on a recurring basis, taken on all FFP cases, including "closed without further action," as appropriate.

b. Submitting tracking information into HEC's FFP Database, as required.

11. RESPONSIBILITIES OF THE VHA CHIEF PROGRAM OFFICER

The VHA Chief Program Officer, with line authority for programs and/or services to Veterans and other non-Veteran beneficiaries, has the same responsibilities as the VISN Director, to the extent applicable (i.e., provide notice, review, etc.).

12. RESPONSIBILITIES OF THE FACILITY DIRECTOR

Each Facility Director is responsible for:

a. Implementing the procedures described in paragraphs 15 through 18, as applicable.

b. Notifying law enforcement officers of possible harm to a patient or beneficiary if subjected to questioning or removal from a program of health care.

c. Submitting updated information, as required, to the appropriate worksheet(s) in the HEC's FFP database.

d. Ensuring that Category I and II FFP flags are originated and accessible in the patient's record.

e. Ensuring that each FFP flag in a patient's record is accompanied by a template Progress Note. The template titles utilized must be: FFP Category I - non-VA Care Medically Acceptable, or FFP Category II - non-VA Care Medically Unacceptable.

f. Ensuring billing is effected within 60 days of fugitive felon status notification for services rendered at the facility during the period of verified fugitive felon status (see subpar. 15k)

g. Training appropriate staff on the FFP.

13. RESPONSIBILITIES OF THE FACILITY CHIEF OF STAFF (COS)

The facility COS is responsible for:

a. Ensuring a clinical review has been conducted within the 60-day waiting period.

b. Instituting procedures to ensure that the FFP and associated processes are ethical, effective, and reviewed as noted in this Handbook.

c. Identifying a Fugitive Felon Program Committee, which reports to the COS.

14. RESPONSIBILITIES OF THE FUGITIVE FELON PROGRAM COMMITTEE

a. The Fugitive Felon Program Committee is responsible for:

(1) Conducting the clinical reviews prescribed by this Handbook.

(2) Providing the written documentation of their reviews to the facility Directors.

(3) Identifying system problems.

(4) Identifying training needs relating to the implementation and management of the FFP.

(5) Reporting to the COS.

b. The Fugitive Felon Program Committee membership needs to include:

(1) A senior clinical chairperson.

(2) A member (s) of the VA Police.

(3) A member (s) of Health Information Management Service (HIMS).

(4) A member (s) of Patient Safety or Risk Management Program.

- (5) A Regional Counsel (ad hoc).
- (6) A patient advocate.
- (7) Other members, as needed.
- (8) Clerical and administrative support to accomplish the required tasks.

15. PROCEDURES

Facility Directors must ensure that the following occurs when a patient is identified as a fugitive felon: **NOTE:** *Appendix A provides a flowchart of procedures that needs to occur at VA medical facilities.*

a. **Warrant Validation.** VA medical center Police must contact the issuing agency to verify the validity of the fugitive felon warrant.

b. **Searching Veterans Information Systems and Technology Architecture (VistA).** The facility's VistA System must be searched immediately to determine if the fugitive felon is:

(1) Currently an inpatient at a VHA facility, other government facility (sharing agreement), or in a community non-VA facility at VA's expense.

(2) Currently a CHAMPVA beneficiary or a Veteran receiving care in the FMP.

(3) Scheduled for an outpatient clinic appointment, or an ambulatory procedure, or for elective admission.

(4) Currently a non-VA Fee Identification (ID) card holder, or on a non-VA short-term authorization.

(5) In a contract nursing home, other care under VA Geriatric and Extended Care (GEC), or in a State Home.

c. **Searching Purchased Care Menu in VistA.** The Purchased Care VistA System menu must be searched immediately by the applicable Purchased Care organization to determine if the fugitive felon:

(1) Is currently receiving, or is scheduled to receive, health care at a VA medical facility, a non-VA facility, or clinic under CITI. Upon verification that a fugitive felon is scheduled or currently receiving care, the appropriate VISN FFP Coordinator, Purchased Care Program Integrity, or VA medical facility Director must be notified.

(2) Is currently receiving or scheduled to receive benefits in which VHA is sponsoring through CHAMPVA, Fee Basis, State Home, Project Hero, GEC, or FMP. If so, the Purchased Care Program Integrity must notify the appropriate VISN FFP Coordinator, Purchased Care Program Integrity Director or VA medical facility Director.

(3) Is a beneficiary or Veteran who has received care paid by Purchased Care programs such as CITI, CHAMPVA, Fee Basis, State Home, Project Hero, GEC, or FMP. If so, then Purchased Care Program Integrity must notify the appropriate VISN FFP Coordinator, Purchased Care Program Integrity Director, or VA medical facility Director.

d. **Flagging the Patient's Electronic Medical Record.** The fugitive felon's record must be flagged and identified as a sensitive record using a software patch in VistA. The flagging action is required to indicate that the clinical review has been conducted and that the determination of the appropriateness on "non-VA care" has been made. No indications are to be placed on, or in, the patients' paper records, such as a sticker on the outside front of a file jacket. Information Security must perform appropriate monitoring to ensure only those who have a legitimate need to know are able to access flagged records

e. **Reviewing Medical Record.** The VA medical facility FFP contact must review the fugitive felon's medical record to determine if the fugitive felon Veteran or non-Veteran beneficiary (enrolled in the CITI Program) is currently receiving care through VHA.

(1) Results of the clinical review or transition plan must be documented in the Veteran's or non-Veteran beneficiary's medical record. Documentation in the medical record is not to cite the status as a fugitive felon. It needs to state that eligibility for VA benefits has been terminated by the Agency and a clinical review has been completed. Documentation needs to include whether or not a care transition plan is required and who is responsible for ensuring the care transition plan is accomplished. "No further action required," or similar statement, needs to be included in the documentation, as medically appropriate. The plan and any needed background information are to be communicated as promptly as possible, to VA Police and to staff members directly involved in the patient's care, as well as the necessary action(s) authorized by the facility Director.

(2) In cases where the notification letter has been sent to a Veteran or non-Veteran beneficiary identified as a fugitive felon, and the Veteran or non-Veteran beneficiary presents for either scheduled care or unscheduled care before the clinical review and resulting plan have been completed:

(a) Staff may contact facility VA Police to determine a plan for notifying the patient of the fugitive felon status identification; and

(b) Facility VA Police must respond to the general location of the Veteran or non-Veteran beneficiary to ensure the safety of all individuals involved.

f. **Issuing a Letter.** A notification of FFP status letter must be issued to the fugitive felon notifying the fugitive felon that care can no longer be provided by VA (see App. C).

g. **Notification to the HEC or Purchased Care Program Integrity.** After a 60-day period, allowing for due process, if proof of satisfied warrant has not been presented to facility VA Police or the VA medical facility FFP contact, appropriate documentation (e.g., letter sent to Veteran or non-Veteran beneficiary notifying of FFP status) must be sent in PKI-encrypted

electronic mail or facsimile transmission to the HEC and Purchased Care Program Integrity for a Veteran or for a non-Veteran beneficiary. Notification to HEC or Purchased Care Program Integrity must include information located on the OIG's electronic version of the FFP-3, a VA Investigative Summary Form, to include the Veteran's or beneficiary's complete name, social security number, date of the warrant, warrant number, Originating Agency, and status of warrant. After receipt of the notification, the HEC or Purchased Care Program Integrity must ensure an Ineligible Enrollment status is appropriately transmitted to affected sites. *NOTE: The facsimile number of HEC is (404) 828-5060 and Transmission of FFP status to Purchased Care Program Integrity needs to be PKI-encrypted electronic email.*

h. **Notifying Non-VA Health Care Facilities When Appropriate.** When specific non-VA health care facilities, programs, and/or providers are identified to assume the care of a fugitive felon patient, they need to be notified by confidential letter (see App. F).

i. **Discontinuing VA Health Care and Services.** It is understood that discontinuing health care and services provided by VA due to loss of eligibility is potentially uncomfortable territory for VHA staff. However, 38 U.S.C. 5313B, provides that a Veteran or non-Veteran that is otherwise eligible for certain benefits, including medical care, may not be paid or otherwise provided such benefits for any period of time during which the Veteran is in a fugitive felon status. Fugitive felon warrants are typically resolved by the felon surrendering or being arrested, or by the Originating Agency, canceling the warrant due to error in issuance (i.e., mistaken identity), or by choice if allowed by law. *NOTE: Two sample notification letters to Veterans are included in Appendix C and Appendix D.*

j. **Canceling Remaining Scheduled Health Care and Debarment.** Once the clinical review has been completed and the Director has approved the action plan, sites must coordinate cancellation of any remaining scheduled health care admissions or appointments and terminate the provision of all services and products, including, but not limited to the provision of pharmaceuticals, supplies, prosthetics, etc. If the fugitive felon has not been extradited and continues to present for care after receiving notice that the fugitive felon is no longer eligible for VHA benefits, a Letter of Debarment (see App. D) may be issued.

k. **Billing for Services Rendered.** Action must be taken within 60 days of fugitive felon status notification by FFP points of contacts to bill for services rendered at the facility while the Veteran was in a verified fugitive felon status.

(1) Back billing must be for the period that the Veteran or non-Veteran beneficiary was in a verified fugitive felon status, or the date care was received, for any period, on or after December 27, 2001; this is the enactment date of the Veterans Education and Benefits Expansion Act of 2001. The billing rate must be at the humanitarian rate.

(2) When the Veteran has been to multiple VA health care facilities during the period of verified fugitive felon status, action must be taken by each facility to bill for services rendered at their facility during the period of verified fugitive felon status.

(3) FFP billing transactions need to follow the same procedural path of any other billing for services rendered to someone ineligible for VHA services (see current VHA policy on case-

based and interagency billing rates, and VHA Procedure Guide 1601C.04, Accounts Receivable Codes, for the proper billing code for FFP transactions as Resource Code 8001).

(4) In the case where a third party has already paid for VA health care services and later VHA learns the Veteran was in a verified fugitive felon status during this same period, the billing must be at a humanitarian rate, and the payment refunded to the payer since the Veteran was ineligible for care. VHA then bills the Veteran at the humanitarian rate.

l. **Guidance for Withholding Services.** A copy of this VHA Handbook must be provided to all potentially impacted staff. If the Veteran or non-Veteran beneficiary continues to present for care or services after receiving a Letter of Debarment, the Veteran is considered to be trespassing and VA Police must initiate established arrest procedures (see App. E).

m. **VHA Purchased Care.** Once VA OIG notifies the Purchased Care Program Integrity of the Veteran's or the non-Veteran beneficiary's fugitive felon status, the Purchased Care Program Integrity must inform the appropriate VISN FFP Coordinator, Purchased Care Program Integrity Director, or VA medical facility Director, who is responsible for:

(1) Flagging records using internal processes.

(2) Taking action within 60 days of fugitive felon status notification to bill the Veteran or non-Veteran beneficiaries for VA services rendered while the beneficiary or the Veteran sponsor is in a fugitive felon status.

(3) Notifying the Veteran or non-Veteran beneficiary identified as a fugitive felon.

(4) Using one of the sample letters to inform the Veteran or non-Veteran beneficiary of fugitive felon status (see App. C).

(a) Appendix G is a sample letter to a CHAMPVA beneficiary when the Veteran sponsor is a fugitive felon.

(b) Appendix H is a Sample Letter to CHAMPVA regarding a beneficiary identified as a fugitive felon

(5) Submitting updated information as required to the appropriate worksheet(s) in the HEC's FFP database.

(6) Training appropriate staff.

16. ARRESTS

a. **If an Arrest is to Occur.** If the Veteran or non-Veteran beneficiary is to be arrested at a VHA Facility, established procedures must be adhered to (see App. E).

b. **If No Arrest is to Occur.** If no arrest is to occur, but health care, services, and products must be withheld in accordance with Pub. L. 107-103, then a medically appropriate transfer and

other transitioning of care to a non-VHA facility or program of care must be determined and enacted by VHA. VA cannot cover any costs of non-VA care, regardless of service-connected status (38 U.S.C. 1703), emergency care (38 U.S.C. 1725 or 38 U.S.C. 1728), newborn care (38 U.S.C. 1786 defined in Public Law 111-163) or other Purchased Care Program eligibilities during the time in which the Veteran or non-Veteran beneficiary is ineligible for VHA benefits due to fugitive felon status. If a Veteran or non-Veteran beneficiary restores eligibility for care by resolving the warrant with the Originating Agency, VA cannot retroactively cover any costs of non-VA care. The exception to this is if evidence is provided to the facility Director that the Originating Agency made an error and the Veteran or non-Veteran beneficiary was actually not in a fugitive felon status at the time the patient's or beneficiary's care was transitioned to non-VA.

17. DECISIONS REGARDING VETERAN OR NON-VETERAN BENEFICIARIES IDENTIFIED AS FUGITIVE FELONS WHO ARE MEDICALLY ASSESSED AS NOT COMPETENT

a. The facility Director may authorize VHA staff in the facility to work with the Originating Agency to determine an appropriate course of action that would resolve the warrant for fugitive felon Veteran or non-Veteran beneficiaries who are:

(1) Medically-assessed as not competent to handle their own affairs; or

(2) Patients for whom withholding care could result in critical medical complications, such as complications arising from discontinuation of dialysis or anti-psychotic medication, regardless of whether an arrest is planned; or

(3) Being withheld from VHA care, as required by law.

b. Extensions are authorized for fugitive felon Veteran or non-Veteran beneficiaries who could be critically harmed by withholding of benefits, including, but not limited to: dialysis, anti-psychotic medications, or medication for controlling blood pressure.

c. VA is required to bill the Veteran, non-Veteran beneficiary or guardian for all care provided at VA expense during any extension, including for humanitarian aid or medical risk.

18. EVIDENCE OF WARRANT SATISFACTION

Upon the presentation of evidence that the warrant has been satisfied:

a. Appropriate action must be taken by VA medical facility staff to deactivate the FFP Flag located in VistA.

b. Notification that the warrant has been satisfied must be sent to the HEC in PKI encrypted electronic mail or facsimile transmission to the HEC at (404) 828-5060. This notification must have a FFP-3, or a Report of Contact from the VA medical facility's VA Police with the Veteran's or beneficiary's complete name, social security number, date of the warrant, warrant number, Originating Agency, and status of warrant.

c. HEC staff must match this notification to the notification the Veteran has verified FFP status and has been provided a 60-day notice of the right to due process. If HEC cannot match the two notifications, HEC must contact the VA medical facility for correct documentation. Once HEC has matched the notifications, HEC must restore the Veteran's eligibility and enrollment status to its state prior to FFP and ensure the restored eligibility and enrollment status is transmitted to all sites of record by using the VistA systems.

d. Designated field staff must update the appropriate fields on the FFP database worksheet titled "Coordinator's Task."

19. REMOVAL OF VETERAN OR NON-VETERAN BENEFICIARIES FROM THE OIG FUGITIVE FELON LIST

OIG must access the HEC's FFP Database monthly or quarterly to obtain data indicating warrant satisfaction entered by designated field or VISN staff. When a warrant has been satisfied, OIG must remove the Veteran and non-Veteran beneficiary from the Fugitive Felon List maintained by OIG.

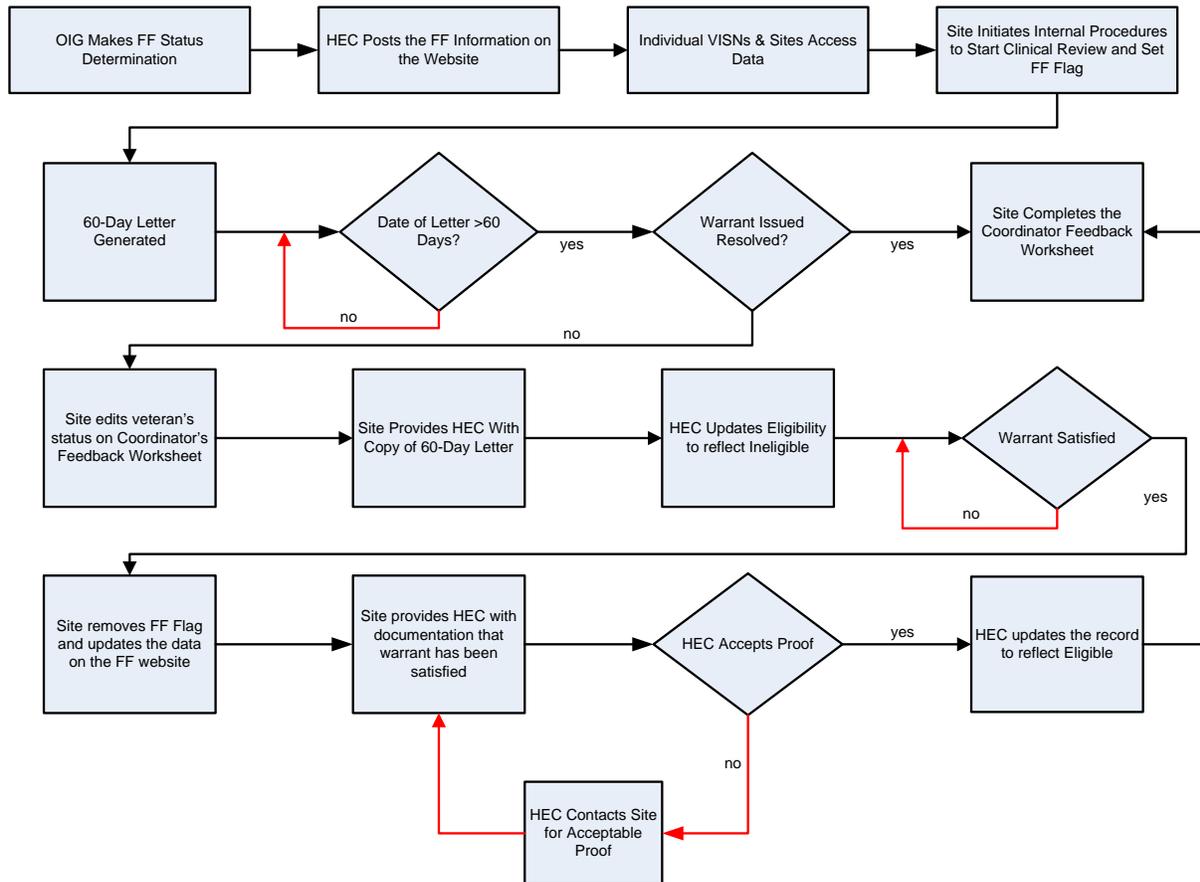
20. REFERENCES

a. Pub. L. 107-103 Section 505, "Veterans Education and Benefits Expansion Act of 2001," codified at 38 U.S.C. 5313B, effective December 27, 2001.

b. VA Handbook 0730.

**FLOWCHART OF THE VETERANS HEALTH ADMINISTRATION (VHA)
FUGITIVE FELON PROGRAM (FFP) AND PROCEDURES FOR FACILITIES**

Fugitive Felon Program Flow Chart

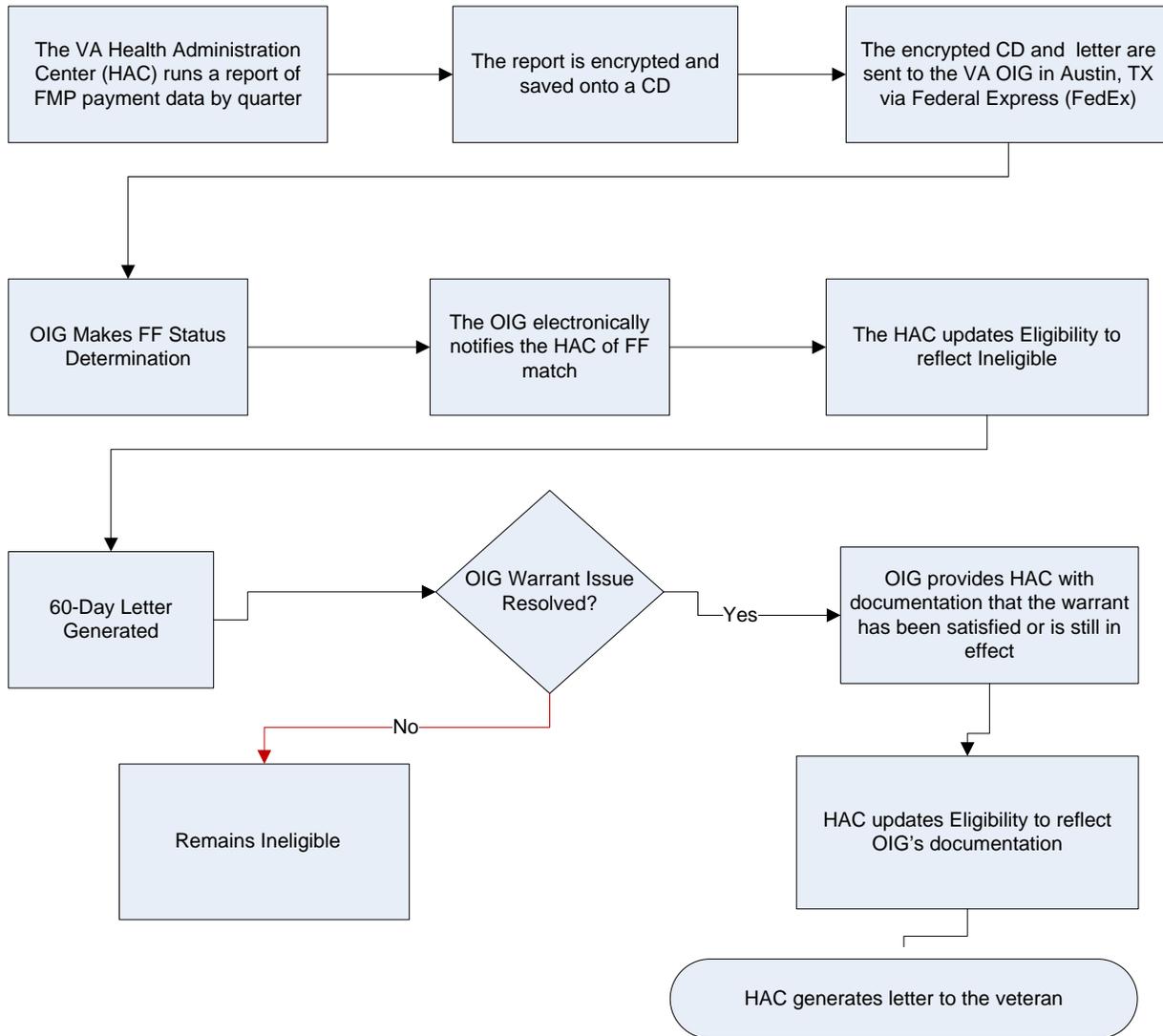


1. The Office of the Inspector General (OIG) matches the Department of Veterans Affairs (VA) database against the National Crime Information Center (NCIC) database to identify VA beneficiaries that are possible fugitive felons.
2. The OIG electronically sends the possible fugitive felons list with associated data to the Health Eligibility Center (HEC).
3. HEC posts the fugitive felon data on the HEC’s FFP Database Website and sends an electronic notification email of the new posting to all Veterans Integrated Service Network (VISN) FFP Coordinators.
4. The VISN FFP Coordinator sends an electronic notification email of the new posting to their VHA sites.

5. Sites initiate their internal processes including validating the warrants, performing Clinical Reviews, flagging records and sending the 60-day letter.
6. The site notifies the HEC of all validated fugitive felons who have not satisfied the warrant within 60-days by sending a copy of the 60-day letter. The site continually updates the HEC's FFP Database Website throughout the process.
7. The HEC changes the Veteran's eligibility to "Ineligible" and lists the reason as Fugitive Felon. This eligibility status is then automatically sent to all treatment sites.
8. When the Veteran has satisfied the warrant, the responsible VHA site notifies the HEC to remove the "Ineligible" status by sending a verifiable notification from the VA Chief of Police or FFP Coordinator. The site then updates the HEC's FFP Database Website.
9. The HEC changes the Veteran's eligibility to "Eligible" thus returning the Veteran to the appropriate eligibility status. This eligibility status is then automatically sent to all treatment sites.

FLOWCHART OF THE VETERANS HEALTH ADMINISTRATION CENTER (HAC) FOREIGN MEDICAL PROGRAM (FMP) FUGITIVE FELON PROGRAM (FFP) AND PROCEDURES FOR FACILITIES

FMP Fugitive Felon Program Flow Chart



1. The Office of Inspector General (OIG) matches Department of Veterans Affairs (VA) payment information against the National Crime Information Center (NCIC) database to identify VA Veterans that are possible fugitive felons (FF).
2. The OIG electronically sends the possible FF list with associated data to the Health Administration Center (HAC).
3. The HAC updates eligibility files to reflect “Ineligible” and generates a letter to the Veteran.

**SAMPLE LETTER FROM THE DEPARTMENT OF VETERANS AFFAIRS (VA) TO
CURRENT PATIENT IDENTIFIED AS A FUGITIVE FELON**

(Date) Ref. (Facility #)

Mr. One VHAPatient
1 Street
City, ST 00011

Dear Mr. VHAPatient:

Under Public Law 107-103, “Veterans Education and Benefits Expansion Act of 2001,” the Department of Veterans Affairs (VA) is prohibited from providing or continuing to provide certain benefits to Veterans and dependents identified as fugitive felons. The prohibition includes health care and services, including medications and any care provided in the community at VA expense. The Act also requires VA to provide law enforcement personnel, upon request, the most current address of a Veteran or dependent whose identity was matched in a fugitive felon database.

This letter notifies you that your name has been matched in the database searches as having a felony warrant against you in an open status. Your identity matched on all three criteria: name, social security number, and date of birth. As required by law, the Office of Inspector General (OIG) contacted the law enforcement agency that issued the warrant against you. This agency is referred to as the “Originating Agency.” If the Originating Agency has local jurisdiction, it may choose to arrest you. If the Originating Agency does not have local jurisdiction, it may choose to extradite you to its area of jurisdiction and then arrest you.

You have been identified as a fugitive felon, and VA must terminate the health care it has been providing to you, effective 60 days from the date of this letter. Under the law, this applies even to those Veterans who are service-connected or have other eligibilities, such as those for VA coverage of emergency care in communities. This applies to other beneficiaries, such as Veterans’ family members who qualify as eligible dependents and includes: clinic appointments, scheduled admissions, scheduled ambulatory procedures, medication, dental care, prosthetic devices and care, supplies, and other health care services. Your computerized medical record or other health record has been flagged so that VA staff can take appropriate steps to plan transition or termination of your health care in VA programs or other programs at VA expense. In addition, VA must bill you or your beneficiaries for all VA-provided care received while in this fugitive felon status.

Because you are an active outpatient, we performed a confidential Clinical Review of your medical or health record and other relevant data and information. The purpose of this review was to assess your treatment needs and to assist you, if desired or needed, in locating alternative care outside the VA health care system. Under the law, VA cannot pay for any of this alternative

care. (*Or, as an inpatient, we are notifying you that VA can no longer provide care at our expense. That being the case, we will work with you to transition your care.*) If you or a beneficiary comes to a VA health care facility for a medical emergency, VA will provide emergency care on a humanitarian basis at the expense of the person receiving the care. This will be provided to stabilize the medical condition. Afterward, you or the beneficiary must be discharged or transferred to an appropriate non-VA health care facility and you will be billed for any health care provided by VA on an emergency humanitarian basis. If a non-VA health care facility provides care to you or the beneficiary, VA will not be financially or otherwise responsible for that care.

We must ensure that the VA medical facility, and all its community clinics and other activity sites, provide a safe environment where health care and administrative business can be provided in an orderly fashion and that we are in compliance with the law. Therefore, in addition to notifying you of your match to a fugitive felon warrant, this letter also notifies you that at any time you are on VA property or at a VA site, whether owned or leased, you must abide by all prevailing laws, regulations, and policies. Failure to do so may result in arrest by VA Police and/or local law enforcement officials. Also, you may be subject to arrest by Federal or State law enforcement agencies for the fugitive felony warrant itself. If you have any questions about this notification letter and how it applies to your legal status as far as VA is concerned, please contact our VA Police at (telephone number).

Fugitive felon status is a self-inflicted status that you may resolve by contacting the Originating Agency that issued the felony warrant. You must contact the Originating Agency that issued a felony warrant against you, not the VA Police, if you believe:

- a. An error was made, such as mistaken identity.
- b. The warrant should be cancelled.
- c. The warrant has been satisfied by your arrest or surrender.
- d. There are other reasons, which would resolve the warrant.

If you have evidence now that the warrant has been satisfied, or you obtain such evidence, you need to provide this evidence to my office immediately. You may provide this evidence by mail or fax, or you may ask someone you trust to deliver the evidence. If the Originating Agency (warrant holder) does not have local jurisdiction, it may choose to have you arrested by local authorities, and have you extradited back to the jurisdiction responsible for the warrant.

Thank you for your cooperation.

Sincerely,

Signature block for the Director
VA Medical Facility Name

February 23, 2012

**VHA HANDBOOK 1000.02
APPENDIX C**

Name: One VHA Patient
DOB: 01/01/1950

VA Treatment Location: VA MEDICAL FACILITY NAME, ST
Law Enforcement Agency: Originating Agency Title
Address: Originating Agency Address
Telephone Number: Originating Agency Telephone Number
Date of Warrant: 01/01/2003
Warrant Number: 000000000111
Offense: Obstruction of justice

**SAMPLE LETTER TO A VETERAN NOT CURRENTLY RECEIVING CARE OR
AS A DEBARMENT FROM THE DEPARTMENT OF VETERANS AFFAIRS (VA)
TO A FUGITIVE FELON**

(Date) Ref. (Facility #)

Ms. Two VHAPatient
2 Street
City, ST 00011

Dear Ms. VHAPatient:

Under Public Law 107-103, “Veterans Education and Benefits Expansion Act of 2001,” VA is prohibited from providing or continuing to provide certain benefits to Veterans and dependents identified as fugitive felons. The prohibition includes health care and services, including medications and any care provided in the community at Department of Veterans Affairs (VA) expense.

Since you are currently not receiving care through VA, this letter is to confirm that you are no longer eligible or entitled to receive health care and services at or through __ (VA medical facility Anywhere) __ while you have any felony warrant against you. You may not receive health care and services at any other Veterans Health Administration (VHA) facility or through a VA-paid program, effective immediately. In addition, VA will bill you or your beneficiaries for all VA-provided care received while you are in this fugitive felon status.

You have been identified as a fugitive felon; VA must terminate your eligibility to receive health care, effective 60 days from the date of this letter. We realize that you are not currently receiving care from VA. If you or a beneficiary comes to a VA health care facility 60 days from the date of this letter for a medical emergency, VA will provide emergency care on a humanitarian basis at the expense of the person receiving the care. This emergency care is provided to stabilize the person’s medical condition. Afterward, you or the beneficiary will be discharged or transferred to an appropriate non-VA health care facility and you will be billed for any health care provided by VA on an emergency humanitarian basis. If a non-VA health care facility provides care to you or the beneficiary, you or the beneficiary will also be billed for that care. These billings will occur even: if you are service connected, if you previously qualified for VA coverage of emergency care in your local or nearby community under other treatment authorities, or if you have any other eligibility as a Veteran or beneficiary.

(Only if applicable) This letter serves as Official Debarment from entering VA property. Failure to comply with this debarment will result in your arrest by VA Police for trespassing. If you have any questions about this Letter of Debarment, please call our VA Police at (telephone number).

Please contact the law enforcement agency that issued the felony warrant against you to try to resolve this. If you have evidence now that the warrant has been satisfied, or you obtain such evidence, your eligibility for VHA health care and services may be reinstated. You may provide my office with this evidence by mail or you may fax the VA Police at (fax number) . (If this is applicable). You may also ask someone you trust to deliver that evidence to our VA Police. It is important that you not come to this facility in person while this Letter of Debarment is in force. If you come to this facility, you will be arrested by VA Police for trespassing.

Thank you for your cooperation.

Sincerely,

Signature block for the Director
VA Medical Facility Name

Name: Two VHA Patient

DOB: 01/01/1960

VA Treatment Location: VA Medical Center Name, ST

Law Enforcement Agency: Originating Agency Title

Address: Originating Agency Address

Telephone Number: Originating Agency Telephone Number

Date of Warrant: 01/02/2004

Warrant Number: 000000000222

**QUESTIONING AND THE ARREST AUTHORITY OF
LOCAL LAW ENFORCEMENT OFFICERS**

1. A law enforcement officer acting officially for an agency having local, State, or Federal law enforcement jurisdiction may not be denied access to the facility or a patient.
 - a. At facilities on property in which the Federal Government exercises concurrent or proprietary jurisdiction, local and State officers may affect patient arrests.
 - b. At facilities on property in which the Federal Government exercises exclusive jurisdiction, only Federal officers, including Department of Veterans Affairs (VA) police, may arrest without a warrant.
 - c. Local or State officers may only arrest with a warrant on property under exclusive Federal jurisdiction when the State act of cession reserves the right of the State to serve or execute State civil and criminal process on the property.
2. All non-VA law enforcement officials entering the VA health care facility need to be directed to the Office of the Director or the office of the facility Chief, Police and Security, for a formal presentation of the purpose of the visit.
3. Facility Directors must cooperate to the fullest extent possible with law enforcement authorities carrying out official investigations or the orders of a judicial official given the Federal Government's jurisdiction over the facility.
4. The Director and members of the facility staff have no legal authority to prevent the lawful questioning, arrest, or serving of process on a patient.
5. When the purpose of the visit is to question or arrest a patient, the responsible medical staff member, preferably the attending physician, must be immediately consulted for a determination of the effect that questioning or arrest and removal from a treatment program would have on the patient.
 - a. Directors and health care professionals have a responsibility to warn law enforcement officers of the possibilities of harm to a patient if the patient is subjected to questioning or removal from a program of health care.
 - b. A written record must be made when a medical staff member's opinion is that the intended action would have a clearly adverse effect on the patient.
 - c. During the conference between the law enforcement officer and the medical staff member, no information may be disclosed except as authorized by law.
 - d. When the seriousness of a charge against a patient causes the law enforcement officer to insist on taking the patient into custody against medical advice, every effort needs to be made to

influence the law enforcement officials to seek a postponement of orders from their superiors or to arrange for the patient's transfer to a custodial health care facility capable of continuing needed treatment.

e. If the law enforcement official requires a detailed statement of the patient's condition to achieve either a postponement or to effect continued treatment in a custodial facility, the law enforcement official must be advised to submit a written request for the information, which meets the requirements of the Privacy Act and Title 38 United States Code 5701 and 7332. Any such written request received will be forwarded to the appropriate release of information officials for consideration.

f. Agreements reached by Directors and law enforcement officials to retain a patient, against whom criminal or civil charges are pending, will not include the stationing of an armed police officer, guard, or a VA police officer to guard the patient.

**SAMPLE OF DEPARTMENT OF VETERANS AFFAIRS (VA)
FACILITY DIRECTOR'S LETTER TO A NON-VA HEALTH CARE
ENTITY ASSUMING A VETERAN'S CARE**

CONFIDENTIAL Information Accompanying Transition of Health Care for Mr. One
VHAPatient

Mr. VHAPatient has been declared ineligible to continue receiving benefits from the Department of Veterans Affairs (VA). This includes health care, services, and products provided to him by the Veterans Health Administration (VHA).

Thank you for your assistance with this complex and sensitive matter. If you have any questions, please call me at ____ (telephone number) ____.

Sincerely,

Signature block for the Director
VA Medical Center Name

**SAMPLE LETTER TO VHA PURCHASED CARE PROGRAM OF THE
DEPARTMENT OF VETERANS AFFAIRS BENEFICIARY
WHEN THE VETERAN SPONSOR IS A FUGITIVE FELON**

(Date) Ref. (Facility #)

Mrs. Four VHABeneficiary
4 Street
City, ST 00044

Subject: Notification of Non-entitlement to Civilian Health and Medical Program of the
Department of Veterans Affairs (CHAMPVA) Benefits

Dear Mrs. VHABeneficiary:

This office has been informed that your spouse has been identified as a fugitive felon. Under Public Law 107-103, "Veterans Education and Benefits Expansion Act of 2001," the Department of Veterans Affairs (VA) is prohibited from providing or continuing to provide certain benefits to Veterans and dependents identified as fugitive felons. The prohibition includes health care and services, including medications and any care provided in the community at VA expense, effective 60 days from the date of this letter.

The Act also requires VA to provide law enforcement personnel, upon request, the most current address of a Veteran or dependent whose identity was matched in a fugitive felon database. This will assist law enforcement personnel in apprehending fugitive felons. The Health Administration Center (HAC) is a participant in the Fugitive Felon Program.

This letter notifies you that the Veteran sponsor for your CHAMPVA benefits has been matched in database searches as having a felony warrant in an open status. The identity of the Veteran matched all three criteria - name, social security number, and date of birth. As required by law, the Office of Inspector General contacted the HAC regarding the outstanding warrant.

Because the Veteran sponsor for your CHAMPVA benefits has been identified as a fugitive felon, VA must terminate CHAMPVA benefits provided to you and any other dependents. Your record has been flagged so that our staff can take appropriate steps to terminate your CHAMPVA health care benefits. In addition, VA will bill you or beneficiaries for all VA-provided care received while your Veteran sponsor is in this fugitive felon status. Fugitive felon status is a self-inflicted status that may be resolved if the Veteran contacts the Originating Agency that issued the felony warrant. The Veteran may contact the Originating Agency that issued the felony warrant, if:

- a. An error was made, such as mistaken identity.
- b. The warrant should be canceled.

- c. The warrant has been satisfied by the Veteran's arrest or surrender.
- d. Other reasons that may resolve the warrant.

If you have evidence now that the Veteran's warrant has been satisfied, or you obtain such evidence, you need to provide this evidence to my attention immediately. You may provide this evidence by mail, or by fax to (303) 331-7800, or you may ask someone you trust to deliver the evidence. You may also make an appointment by calling (303) 331-7500 to provide this evidence.

Thank you for your cooperation in this matter.

Sincerely,

<Name>,
Director, Health Administration Center

Sponsor's Name: Three VHABeneficiary
DOB: 01/03/1970
Law Enforcement Agency: Originating Agency Title
Date of Warrant: 01/07/07
Law Enforcement Agency: Hudson County Sheriff's Office
Address: Originating Agency Address
Telephone Number: Originating Agency Telephone Number
Date of Warrant: 01/02/2005
Warrant Number: 0000000044444
Offense: Obstruction of justice

**SAMPLE LETTER TO VHA PURCHASED CARE PROGRAM OF
THE DEPARTMENT OF VETERANS AFFAIRS REGARDING A
BENEFICIARY IDENTIFIED AS A FUGITIVE FELON**

(Date) Ref. (Facility #)

Mrs. Four VHAPatient
4 Street
City, ST 000444

Subject: Beneficiary Matched in Fugitive Felon Database(s)

Dear Mrs. VHAPatient:

This office has been informed that you have been identified as a fugitive felon. Under Public Law 107-103, "Veterans Education and Benefits Expansion Act of 2001," the Department of Veterans Affairs (VA) is prohibited from providing or continuing certain benefits to Veterans and dependents identified as fugitive felons. The prohibition includes health care and services, including medications and any care provided in the community at VA expense, effective 60 days from the date of this letter. The Act also requires VA to provide law enforcement personnel, upon request, the most current address for a Veteran dependent whose identity was matched in a fugitive felon database.

This will assist law enforcement personnel in apprehending fugitive felons. The Health Administration Center (HAC) is a participant in the Fugitive Felon Program. This letter notifies you that your name has been matched in database searches as having a felon warrant against you in an open status. Your identity matched on all three criteria: name, social security number, and date of birth. As required by law, the Office of Inspector General contacted the law enforcement agency that issued the warrant against you. This agency is referred to as the "Originating Agency." If the Originating Agency has local jurisdiction, it may choose to extradite you. If the Originating Agency does not have local jurisdiction, it may choose to extradite you to its area of jurisdiction and then arrest you. The Originating Agency may choose not to extradite you. Because you have been identified as a fugitive felon, VA must terminate your Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA) benefits. Your record has been flagged so that our staff can take appropriate steps to terminate these benefits. In addition, VA will bill you or your beneficiaries for all VA-provided care received while in this fugitive felon status.

Fugitive felon status is a self-inflicted status that you may resolve by contacting the Originating Agency for the felony warrant. You must contact the Originating Agency that issued a felony warrant against you, if you believe:

- a. An error was made, such as mistaken identity.
- b. The warrant should be canceled.

- c. The warrant has been satisfied by your arrest or surrender.
- d. There are other reasons that may resolve the warrant.

If you have evidence now that the warrant has been satisfied, or you obtain such evidence, you need to provide this evidence to my office immediately. You may provide this evidence by mail, fax at (303) 331-7800, or you may ask someone you trust to deliver the evidence. You may also make an appointment by calling (303) 331-7500 to provide this evidence.

Thank you for your cooperation in this matter.

<name>

Director, Health Administration Center

Name: Four VHAPatient

DOB: 01/04/1980

Law Enforcement Agency: Originating Agency Title

Address: Originating Agency Address

Telephone Number: Originating Agency Telephone Number

Date of Warrant: 01/04/07

Warrant Number: 00000005555

Offense: Assault