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Department of Veterans Affairs Veterans Health Administration Washington, DC 20420 VHA DIRECTIVE 1029 Transmittal Sheet June 19, 2013

PRESUMPTIVE ELIGIBILITY FOR PSYCHOSIS AND OTHER MENTAL ILLNESS

- **1. PURPOSE:** This Veterans Health Administration (VHA) Directive establishes policy for providing medical care benefits to certain Veterans (at no cost) for care of conditions presumed to have been incurred during their qualifying active military, air or naval service. **AUTHORITY:** 38 U.S.C. 1702 and 38 CFR 17.37, 17.108, 17.109, 17.110, and 17.111.
- **2. SUMMARY OF MAJOR CHANGES:** This is a new VHA Directive implementing title 38 Code of Federal Regulations (CFR) 17.109.
- 3. RELATED ISSUES: None.
- **4. FOLLOW-UP RESPONSIBILITY:** The VHA Chief Business Office (10NB) is responsible for the contents of this Directive. Questions may be referred to the Chief Business Office at 202-461-1589. Specific clinical questions related to mental health may be referred to Mental Health Services at 202-461-6032.
- **5. RESCISSIONS:** None.
- **6. RECERTIFICATION:** This VHA Directive is due to be recertified on or before June 30, 2018.

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2. BACKGROUND

- a. Under title 38 United States Code (U.S.C.) 1702 and the implementing regulation, 38 CFR 17.109, certain Veterans who experience psychosis within a specified time-frame are to have their psychosis presumed to be service-connected for purposes of Department of Veterans Affairs (VA) medical benefits. In addition, VA will presume that Persian Gulf War Veterans are service-connected for purposes of VA medical benefits if such Veterans develop mental illness other than psychosis within two years after discharge or release from service and before the end of the 2-year period beginning on the last day of the Persian Gulf War. *NOTE: The Persian Gulf War period began August 2, 1990, and currently has no end date.* These presumptions are granted by law and are to be used solely for the purposes of receiving VA medical benefits for those conditions. These Veterans do not have to file a claim for service-connection with the Veterans Benefits Administration (VBA) or have received a formal grant of service-connection from VBA before invoking this presumption to receive treatment for these specific conditions.
- b. Eligibility criteria applicable to these presumptions are set out in Appendix A of this Directive.
- (1) Veterans who qualify for this presumption do not have to be enrolled in VA health care, to receive treatment for their psychosis and/or mental health illness other than psychosis or for conditions determined by the Veteran's VA provider to be associated with the Veteran's mental illness (see 38 CFR 17.37(k)). For instance, the Veteran's gastric ulcer or substance abuse disorder that is determined by the Veteran's provider to be associated with the Veteran's mental illness would be included in the treatment authorized under this Directive.
- (2) Veterans who qualify for this presumption are <u>not</u> required to meet the minimum active-duty service requirement before VHA provides all necessary treatment (including rehabilitation) for their psychosis or mental illness other than psychosis. That requirement does not apply to the provision of a VA benefit for, or in connection with, a service-connected disability or condition, and, as explained in this Directive, these conditions are presumed to have been incurred in service. *NOTE:* For clarification of VHA eligibility criteria, including character of discharge requirements, see VHA Handbook 1601A.02.
- (3) No third-party, copayment, or humanitarian billing is to be created for Veterans who are eligible to receive medical care under this Directive.
- (4) All health care, including rehabilitation, outpatient medications, etc., provided to eligible Veterans under this Directive is exempt from any otherwise applicable copayment charge (see 38 CFR, §§17.108, 17.110, and 17.111).

- (5) In addition to non-VA medical care furnished under sharing agreements and similar contractual arrangements, these Veterans are also eligible to receive non-VA hospital care and medical services at VA-expense under 38 U.S.C. 1703 for treatment of these conditions, based again on the presumption that these conditions were incurred in or aggravated by military service. Regular rules and procedures governing the purchase of non-VA medical care apply to these cases. Refer any questions concerning the criteria or procedures applicable to the use of non-VA care for treatment of these Veterans' conditions of psychosis or other mental illness other than psychosis to the facility's Business Office. *NOTE:* Referral to the local Readjustment Counseling Service (Vet Center) may also be an appropriate option for those who are combat-theater Veterans. For further information on Vet Center services, see http://www.vetcenter.va.gov/, a publicly-accessible VA website.
- **3. POLICY:** It is VHA policy to provide eligible Veterans with medical care and services at no cost for treatment of psychosis and/or mental illness other than psychosis, in accordance with 38 CFR 17.109; this includes any physical or mental health condition that is determined by their VA provider as being related to, or associated with, their psychosis or mental illness other than psychosis.

4. RESPONSIBILITIES

- a. <u>Veterans Integrated Service Network (VISN) Director.</u> The VISN Director is responsible for ensuring that Veterans have access to outpatient, long-term care, or inpatient programs and residential facilities that provide specialized mental health care for Veterans suffering from psychosis and mental illness other than psychosis, when clinically indicated.
- b. <u>Health Care Facility (HCF) Director</u>. The HCF Director is responsible for ensuring that policies and procedures exist in the HCF to:
- (1) Ensure appropriate health care services (including mental health care) are available at/through the facility to treat psychosis and mental illness other than psychosis and other related or associated conditions.
- (2) Make certain that eligible Veterans receive this care (i.e., care needed to treat their psychosis or mental illness other than psychosis plus any condition determined by their VA provider to be related to, or associated with, such condition) at no cost. Again, all such care is exempt from any otherwise applicable copayment requirements.
- (3) Ensure the scope of care and services available to these Veterans includes inpatient care, outpatient medical services, mental health care, and outpatient medications.
- (4) Ensure VHA providers make and document all of the necessary clinical determinations on which they base their clinical judgment that a Veteran is or is not eligible for the presumption(s) afforded by 38 CFR 17.109 and this Directive.
- (5) Ensure that mechanisms are in place for Veterans, who may have conditions related to psychosis and/or mental illness other than psychosis and who require care for those conditions but who otherwise cannot be enrolled in VA's health care system, to be evaluated by a VA

clinician to determine if they are eligible to receive the presumption of service connection for health care purposes under 38 CFR and this Directive, and are able to receive needed VA treatment for those specific conditions (as well as any related or associated conditions) notwithstanding that they are not eligible to receive other VA care, i.e., the medical benefits package.

- c. Facility Enrollment Staff. The Facility Enrollment Staff are responsible for:
- (1) Providing verification of the Veteran's eligibility for Veterans who are eligible to receive medical care under this Directive based on military service record and dates of service.
- (2) Ensuring the registration of the Veteran into the Veterans Health Information and Technology Architecture (VistA) system in accordance with VHA Handbook 1601A.03, Enrollment Determinations. Veterans with limited eligibility under 38 U.S.C. 1702, for registration purposes only, are to be entered under Veterans Benefits Administration (VBA) code 9410 other neurosis. Veterans who are receiving services under the authority of 38 CFR 17.109 and who are otherwise ineligible for VA care, are to be registered as ineligible and are to be placed in Priority Group 8e, as having a 0 percent SC for a mental health disorder(s) indicating that care is only to be provided for conditions related to the mental health or psychosis diagnosis.
 - (3) Referring the Veteran to the appropriate mental health team or provider for evaluation.
 - d. **VHA Provider.** The VHA provider is responsible for determining:
- (1) If the onset of the Veteran's psychosis or mental illness other than psychosis is likely to have occurred within 2 years of the Veteran's discharge or release from active military, air, or naval service;
- (2) If the onset of the condition also occurred within the time-frames specified for the wars or conflicts covered under this Directive (see App. A); and
- (3) If any other physical or mental health condition suffered by the Veteran is related to or associated with the patient's psychosis or mental illness other than psychosis.

5. REFERENCES

- a. Title 38 U.S.C. 1702.
- b. Title 38 CFR 17.37 and 17.108-17.111.

ELIGIBILITY

1. Psychosis. Eligibility for benefits under title 38 Code of Federal Regulations (CFR) 17.109(a) is established for treatment of psychosis, and such condition is exempted from copayments under 38 CFR 17.108, 17.110, and 17.111 for any Veteran who served in the United States active duty military, naval, or air service and developed such psychosis within 2 years after discharge or release from the active duty military, naval or air service; and before the following date associated with the war or conflict in which the Veteran served:

Veteran Served	Date:
During	
World War II	July 26, 1949
Korean Conflict	February 1, 1957
Vietnam Era	May 8, 1977
Persian Gulf War	End of the 2-year period beginning on the last day of the Persian Gulf
	War (end date not yet determined)

- **2. Mental Illness (other than Psychosis).** Eligibility for benefits under 38 CFR 17.109(b) is established for treatment of an active mental illness (other than psychosis), and such condition is exempted from copayments under 38 CFR 17.108, 17.110, and 17.111 for any Veteran of the Persian Gulf War who developed such mental illness:
- a. Within 2 years after discharge or release from the active duty military, naval, or air service; and
- b. Before the end of the 2-year period beginning on the last day of the Persian Gulf War (end date not yet determined).