

August 7, 2001

VA'S POLICY ON PROVIDING HOSPITAL CARE AND OTHER MEDICAL SERVICES TO ENROLLED VETERANS

1. PURPOSE: This Veterans Health Administration (VHA) Directive outlines the Department of Veterans Affairs' (VA) policy on providing hospital care and outpatient care to enrolled veterans; clarifies VA's enrollment policies, and outlines Veterans Integrated Service Network (VISN) and VA health care facilities' responsibility for providing hospital care and other authorized medical services in VA's medical benefit package to enrolled veterans.

2. BACKGROUND: Title 38 United States Code (U.S.C.) Section 1710, "Eligibility for hospital, nursing home, and domiciliary care," governs eligibility for certain VA health care benefits. Title 38 U.S.C. Section 1705, "Management of health care: patient enrollment system," outlines VA's enrollment and priority requirements for managing the provision of care authorized under 38 U.S.C. Section 1710. Congress directed VA to provide all needed hospital care and other medical services to enrolled veterans and to manage health care programs to promote the cost-effective delivery of health services. In October 1999, VA published its final rules in the Federal Register establishing VA's requirements for enrollment and services covered under VA's medical benefits package. Each year the Secretary of Veterans Affairs makes a determination regarding which enrollment categories will be enrolled in the VA health care system based on funding appropriated by Congress and other factors. Once this determination is made, the Secretary's enrollment decision is binding on all VA health care facilities, and is to be applied consistently throughout the VA health care system.

3. POLICY: It is VHA policy to provide all needed services authorized in VA's medical benefits package set forth in Title 38 Code of Federal Regulations (CFR) 17.38 to all enrolled veterans.

4. ACTION: Each VISN Director is responsible for establishing a network-wide policy that ensures VA health care facilities are providing care to all enrolled veterans in accordance with VA laws and regulations directly, by contract, sharing agreements, or by referral to other VA health care facilities outside their respective VISN. **NOTE:** *Under no circumstance should an eligible enrolled veteran be denied needed hospital care or other medical services authorized under VA's medical benefits package.*

5. REFERENCES

- a. Title 38 U.S.C. Sections 1710 and 1705.
- b. Title 38 CFR Parts 17.36, 17.37 and 17.38.

THIS VHA DIRECTIVE EXPIRES AUGUST 31, 2006

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6. FOLLOW-UP RESPONSIBILITY: The Director Health Administration Service (10C3) is responsible for the contents of this Directive. Questions may be directed to VA Central Office Health Administration Service at (202) 273-8303.

7. RESCISSION: This VHA Directive expires on August 31, 2006.

S/ Tom Sanders for
Thomas L. Garthwaite, M.D.
Under Secretary for Health

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