

**VOCATIONAL REHABILITATION: CHAPTER 31 BENEFITS
TIMELY ACCESS TO HEALTH CARE SERVICES**

- 1. REASON FOR ISSUE:** This Veterans Health Administration (VHA) Directive outlines policy for provision of timely access to any Department of Veterans Affairs (VA) health care services for participants in the VA Vocational Rehabilitation Program.
- 2. SUMMARY OF MAJOR CHANGES:** None.
- 3. RELATED ISSUES:** None.
- 4. RESPONSIBLE OFFICE:** The Chief Business Office (10NB) is responsible for the contents of this Directive. Questions may be addressed to 202-382-2500.
- 5. RESCISSIONS:** VHA Directive 2010-022, dated May 14, 2010, is rescinded.
- 6. RECERTIFICATION:** This VHA Directive is due for recertification on or before the last working day of April 2020.

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**VOCATIONAL REHABILITATION: CHAPTER 31 BENEFITS
TIMELY ACCESS TO HEALTH CARE SERVICES**

1. PURPOSE: This Veterans Health Administration (VHA) Directive outlines policy for provision of timely access to any Department of Veterans Affairs (VA) health care services for participants in the VA Vocational Rehabilitation Program. **AUTHORITY:** 38 U.S.C. 3104(a)(9).

2. BACKGROUND: Vocational Rehabilitation began as a government service to war-injured Veterans and disabled citizens during the World War I era. In 1917, the War Risk Insurance Act of 1914 was amended to provide rehabilitation and vocational training for Veterans with dismemberment injuries, injuries to their sight or hearing, and other injuries resulting in permanent disability. The VA Vocational Rehabilitation Program is authorized by Title 38 United States Code (U.S.C.) Chapter 31 (hereinafter Chapter 31). As noted by the 2004 Vocational Rehabilitation and Employment (VR&E) Task Force Report to the Secretary, "Annually, the VR&E field staff submits about 15,000 requests to VA medical facilities for Chapter 31 recipients who need a variety of clinical and support services. The number of requests for medical services for Chapter 31 Veterans is only a small fraction of the total annual number of annual services provided by VA. However, these Veterans are typically in a rehabilitation program or ready to enter the workforce. The timely delivery of these services is therefore critical to preclude the interruption of rehabilitation."

3. POLICY: It is VHA policy to provide timely access to VA health care services for Veterans participating in a Vocational Rehabilitation Program under Chapter 31. The health care services authorized by 38 U.S.C. 3104(a)(9) are limited to those provided in 38 U.S.C. Chapter 17.

4. RESPONSIBILITY: The VA medical facility Director is responsible for ensuring:

a. VA staff members provide clinically appropriate care to Veterans participating in a VA Vocational Rehabilitation Program under Chapter 31 including referral and payment of non-VA care, if required.

b. Veterans participating in a VA Vocational Rehabilitation Program are eligible for VA health care services in accordance with 38 Code of Federal Regulations (CFR) 17.47(i)(2). *NOTE: Veterans participating in a Vocational Rehabilitation Program under Chapter 31 are not exempt from co-payments for inpatient, outpatient, prescription drug or extended care services, or third party billing for care relating to non-service connected conditions. Billing action needs to be taken where appropriate.*

c. Medical facility procedures are established to manage timely access to care for Veterans participating in a VA Vocational Rehabilitation Program to include:

(1) Verification of participation in an approved VA Vocational Rehabilitation Program, and request for treatment using VA Form 28-8861, "Request for Medical Services, Chapter 31" from the Veterans Benefits Administration (VBA).

(2) Upon confirmation of participation in a VA Vocational Rehabilitation Program, a clinical review must occur to determine:

(a) Whether the care or treatment is medically required.

(b) Whether or not the care or treatment is needed to maintain the Veteran's participation in their Vocational Rehabilitation Program.

(c) If paragraphs 4.c.(2)(a) and 4.c.(2)(b) are met, the timeliness of the appropriate care to the Veterans training schedule needs to be based upon a clinical decision by a VA health care provider. To that end, care may be provided at another VA medical facility or by non-VA medical care, subject to authorization. See VHA Directive 1601, Non-VA Medical Care Program.

(3) Instructions to notify the requesting VBA office in any situation where timeliness of care could be an issue and to determine the appropriate course of action. Notification can be done either by completing appropriate items on VA Form 28-8861 and returning the form to the requesting VBA office, or by contacting that office directly.

(a) Administrative and clinical staff is made aware of the VA Vocational Rehabilitation Program and timeliness of care guidelines.

(b) Administrative and clinical staff is trained to ensure compliance with the requirements of this Directive.

(c) Communication is established with appropriate VBA officials at local Regional Offices.

NOTE: This ensures the needs of the Veteran are met and provides points of contact for questions or issues.

5. REFERENCES:

a. 38 U.S.C. 3104 (a)(9).

b. 38 U.S.C. 3115(b)(2).

c. 38 CFR 17.38(a)(1)(vi).

d. 38 CFR 17.47(i).

e. 38 CFR 21.240.

f. 38 CFR 21.242.

g. VHA Directive 1601.

h. VR&E Task Force Report to the Secretary of Veterans Affairs, 2004.