

What is the Veterans Choice Program?

For Veterans who have faced unacceptable waiting times for needed medical care, or for whom a regular VA medical facility is inaccessible, the Veteran Choice Program (VCP) will make it possible for you to receive the needed care from a non-VA health care provider in your community.

The Veterans Choice Card (Choice Card) has been distributed to all Veterans enrolled for care at VA. Veterans will receive a letter in the mail along with the Choice Card and information about eligibility. The cards were mailed first to those VA believes are in immediate need and meet the eligibility requirements. If you have recently moved or your primary residence has changed, complete [VA Form 10-10EZR](#) to update your information and contact your enrollment coordinator at your nearest VA medical facility.

The Choice Card will enhance other treatment options already available at VA and is designed to improve wait times and access. It does not impact existing VA health care or any other VA benefit – it just offers other options for care when VA cannot meet Veterans' health care needs.

Receiving Your Veterans Choice Card

If you were enrolled for care with the VA Health Care System on or before August 1, 2014, or you qualify to enroll under the authority Title 38 section 1710(e)(1)(D), you would have received a letter in the mail along with your Choice Card.

Here is a sample of the [Choice Card](#).

VA wants to ensure your letter is sent to the correct address. If your address has recently changed, you can:

- fill out the [VA Form 10-10EZR](#) to update your information, *or*
- contact your Enrollment Coordinator at your nearest VA medical facility, *or*
- call the Veterans Choice Program hotline at 1-866-606-8198.

When you call 1-866-606-8198 to authorize your Choice Card for services, a Health Net representative will verify your eligibility and confirm if you qualify to receive benefits. Please be ready to provide your name, address, the ID number on your Choice Card, and reasons you believe the eligibility criteria apply to you. The representative will help you find available physicians, make appointments, explain other insurance requirements, and ensure medical records are coordinated.

Finding a Provider

You have the option of seeing a physician of your choice, but Health Net will need to first confirm the physician's willingness to participate in the Veterans Choice Card benefits. If your preferred provider is not available, other providers in your area will be recommended. You may

also use our online provider search tool on the left.

Remember, eligibility to use the Choice Card must be verified and any services approved before you can seek care with your Choice Card. If you have not verified your eligibility, call the Veterans Choice Program hotline at 1-866-606-8198.

Appointments

Once eligibility is verified and your treatment is approved, remember to bring the following information with you on the day of your appointment:

- **Your Choice Card** – it contains information important to your physician.
- **Other health insurance information** – your physician will need to record this information. If you do not have another health insurance plan, you only need to bring your Choice Card.
- **A form of picture identification** – this helps the doctor match you with the name on your card. Please remember that if your care is for the treatment of a non-service connected condition, you may be responsible for copayments or other costs required by another health insurance plan.

Out-of-Pocket Costs

You may be required to make copayments during your visit to a physician when using your Choice Card. Two copayment types **may** apply to your office visit:

- **Copayments required by your other health insurance (OHI)** – When your OHI is primarily responsible for the costs of your care, you are responsible for making those copayments. Typically, these copayments must be paid at the point of service. Copayments cannot be waived or changed by your provider, VA or Health Net.
- **Copayment required by the Department of Veterans Affairs** – VA requires Veterans receiving care for non-service-connected conditions to make copayments. For information on exceptions to copayments for non-service-connected care, please refer to [VA costs](#) and [exceptions](#). Please note, participating providers are not *required* to collect VA copayments for the provision of health care services. In such instances, you will receive an invoice from VA for any copayments associated with your Veteran's Choice Program care.
- Replacing a Card
- If you have lost or misplaced your Choice Card, please call the Veterans Choice Program hotline at 1-866-606-8198 for information on obtaining a new card.

Grievances

What is a grievance?

A grievance is a complaint or concern about a medical provider, Health Net Federal Services, LLC (Health Net) or the Veterans Choice Program in general. The following are examples of grievances:

- the quality of care given by a provider (inappropriate care, not enough care, poor results)
- the attitude or behavior of providers and their staff
- incorrect information or not enough information by a Health Net associate
- delays or errors in processing authorizations
- patient safety issues at a facility or doctor's office
- privacy concerns/HIPAA violations

Our grievance program is designed to review what occurred, determine if errors were made or if poor service was provided, and obtain corrective actions to improve services in the future. We appreciate the opportunity to help our providers and Health Net better serve our Veterans.

Who can file a grievance?

Anyone can file a grievance; however, if the grievance is from someone other than the involved Veteran, Health Net may not be able to give a full response without authorization to disclose medical information on file. This generally applies to spouses and parents writing on behalf of the Veteran.

What is the grievance process?

Health Net conducts a thorough investigation of the concerns and takes actions as necessary to improve services. If necessary, we will contact the involved provider(s) and various Health Net departments to gather additional information. The person who submitted the grievance will receive a written response, usually within 60 days.

How is a grievance submitted?

Verbally – You can submit a grievance verbally by calling the Veterans Choice Call Center at 1-866-608-8198. If the grievance is about an authorization or eligibility, our representatives will attempt to address your concerns. If your concerns are still unresolved, you may request the representative submit a complaint or grievance to our Grievance Department.

In writing – Complete and print a Health Net [Grievance Form](#) or send a letter with the following:

- name, address and telephone number of the person submitting the grievance
- the Veteran's name, address and telephone number if different from the submitter

- the Veteran's Social Security number
- a description of the issue(s), including the day, time and details
- the name of the involved provider(s) or Health Net associates or departments
- the provider's address if the complaint is about a provider
- any appropriate supporting documents
- Fax to: (916) 353-6826
- Mail to: Health Net Federal Services, LLC
Veterans Choice Program Grievances
2025 Aerojet Road
Rancho Cordova, CA 95742