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Veterans-For-Change

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We appreciate all donations to continue to provide information and services to Veterans and their families.

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IB 10-430 January 2013

\$50 / visit

2013 Copay Rates

Outpatient Services *

Basic Care Services \$15 / visit services provided by a primary care clinician

Specialty Care Services services provided by a clinical specialist such as surgeon, radiologist, audiologist, optometrist, cardiologist, and specialty tests such as magnetic resonance imagery (MRI), computerized axial tomography (CAT) scan, and nuclear medicine studies

Medications

Veterans in Priority Groups 2-6, for each 30-day or less supply of medication for treatment \$8 of nonservice-connected condition

(Veterans in Priority Groups 2 through 6 are limited to \$960 annual cap)

Veterans in Priority Groups 7-8, for each 30-day or less supply of medication for treatment \$9 of nonservice-connected condition

(Veterans in Priority Groups 7-8 do not qualify for medication copay annual cap)

NOTE: Veterans in Priority Group 1 do not pay for medications

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^{*} Copayment amount is limited to a single charge per visit regardless of the number of health care providers seen in a single day. The copayment amount is based on the highest level of service received. There is no copayment requirement for preventive care services such as screenings and immunizations.

Inpatient Services

Priority Group 8

Inpatient Copay for first 90 days of care during a 365-day period	\$1,184
Inpatient Copay for each additional 90 days of care during a 365-day period	\$592
Per Diem Charge	\$10/day
Priority Group 7	
Inpatient Copay for first 90 days of care during a 365-day period	\$236.80
Inpatient Copay for each additional 90 days of care during a 365-day period	\$118.40
Per Diem Charge	\$2/day

Long-Term Care **

Nursing Home Care/Inpatient Respite Care/Geriatric Evaluation	maximum of \$97/day
Adult Day Health Care/Outpatient Geriatric Evaluation Outpatient Respite Care	maximum of \$15/day
Domiciliary Care	maximum of \$5/day

^{**} Copayments for Long-Term Care services start on the 22nd day of care during any 12-month period—there is no copayment requirement for the first 21 days. Actual copayment charges will vary from Veteran to Veteran depending upon financial information submitted on VA Form 10-10EC.

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