



# Emergency Medical Care

During a medical emergency, Veterans should immediately seek care at the nearest medical facility. A medical emergency is an injury or illness so severe that without immediate treatment, you believe your life or health is in danger. If you believe your life or health is in danger, call 911 or go to the nearest emergency department (ED) right away.

Veterans do not need to check with VA before calling for an ambulance or going to an ED. During a medical emergency, VA encourages all Veterans to seek immediate medical attention without delay. A claim for emergency care will never be denied based solely on VA receiving notification, or approving the care in advance. It is, however, important to promptly notify VA after receiving emergency care at a community ED. When possible, notification should be made within 72-hours of admission to a community medical facility. This allows VA to assist the Veteran in coordinating necessary care or transfer, and helps to ensure that the administrative requirements for VA to pay for the care are met.

**Important:** An emergency department (ED) is a facility that is staffed and equipped to provide emergency treatment only, and does not include urgent care or similar community facilities that provide medical treatment.

## VA Payments for Emergency Medical Care

VA can pay for emergency medical care at a community ED, including hospital charges, professional fees, and emergency transportation (such as ambulances). How much VA will pay for emergency medical care largely depends on whether or not:

- The treatment was for a service-connection condition;
- VA was reasonably available to provide care; or
- The Veteran was stabilized for transfer to an available VA facility (payment can only be made up to the point where a Veteran could be safely transferred to an available VA facility, unless no VA facility is available upon notification and request by the community provider).

For treatment of both service-connected and non-service connected conditions, there are different requirements.

## Service-Connected Emergency Care

In general, VA can pay for emergency medical care at a local ED for a Veteran's service-connected condition, or if the care is *related* to a Veteran's service-connected condition. Specifically, emergency medical care for a Veteran's service-connected or related (adjunct) condition(s) is eligible for VA payment.

Generally, VA payment for emergency care is limited to treatment of service-connected (or adjunct) conditions, but there are exceptions. In accordance with the following situations and requirements, VA can pay emergency care costs for:

1. A Veteran who receives emergency treatment of a service-connected, or adjunct condition\* in a community emergency department; OR
2. A Veteran who is Permanently and Totally disabled (P&T) as the result of a service-connected condition is eligible for emergency treatment of ANY condition; OR
3. A Veteran who is participating in a VA Vocational Rehabilitation Program, and who requires emergency treatment to expedite their return to the program, is eligible for emergency treatment for any condition; AND (scenarios 1-3 must all meet #4)
4. The emergency was of such a nature that the Veteran (or other prudent layperson without medical training) would reasonably believe that any delay in seeking immediate medical attention would cause their life or health to be placed in jeopardy.

\*A service-connected condition is one that has been adjudicated by the Veterans Benefits Administration (VBA) and a disability rating has been granted. An adjunct condition is one that, while not directly service-connected, is medically considered to be aggravating a service-connected condition.



**Non-Service Connected Emergency Care**

VA can also pay for emergency medical care at a community ED for a Veteran's non-service connected condition. However, there are several requirements and factors that affect the amount and types of costs VA can pay. Specifically, emergency medical care for a Veteran's non-service connected condition(s) is eligible for VA payment when all of the five following elements are true:

1. Care was provided in a hospital emergency department (or similar public facility held to provide emergency treatment to the public); AND
2. The emergency was of such a nature that the Veteran (or other prudent layperson without medical training) would reasonably believe that any delay in seeking immediate medical attention would cause their life or health to be placed in jeopardy; AND
3. A VA medical facility or another Federal facility was not reasonably available to provide the care; AND
4. The Veteran had received care within a VA facility during the 24-months before the emergency care; AND
5. The Veteran is financially liable to the provider of emergency treatment.

There are specific requirements when a Veteran has other health insurance (OHI). VA can pay certain costs for which the Veteran is personally liable, if the OHI payment does not fully eliminate the Veteran's bill. By law, VA cannot pay for certain costs assigned to the Veteran in an OHI policy. The following charges cannot be paid by VA

- Copayments
- Coinsurance

- Deductibles
- Similar payments a Veteran may owe to the provider as required by their OHI

**Emergency Care in Foreign Counties**

VA can pay for emergency medical care outside the United States if the emergency is related to a Veteran's service-connected condition. Contact the Foreign Medical Program at 1-877-345-8179 or visit [www.va.gov/communitycare](http://www.va.gov/communitycare) for more information.

**After Receiving Care**

Once a Veteran's immediate emergency medical care needs have been addressed, the Veteran, a family member, friend, or hospital staff member should contact the nearest VA medical facility as soon as possible (preferably, within 72-hours). Once notified, VA staff will assist the Veteran in making sure they receive any additional care without interruption and, when necessary, are transferred to a VA medical facility for care after the Veteran has been stabilized.

**Important:** When a Veteran receives emergency medical care, notifying VA as quickly as reasonably possible is always best. It helps make sure the Veteran gets the care they need and VA payment of the emergency care, as applicable, is timely.

**Filing a Claim**

Claims for emergency medical care should be submitted to VA as soon as possible after care has been provided. The deadline for filing a claim depends on whether care was provided for a service-connected condition or a non-service connected condition. The charts below describe the requirements, how to file a claim, and payment rates.

Requirements	
Service-Connected Condition	Non-Service Connected Condition
Claim must be submitted to VA within two (2) years of the date emergency medical care was received. However, filing the claim as soon as possible after care has been provided is highly recommended because it helps make sure that all required documentation is readily available and that providers receive their payment in a timely manner.	Claim must be submitted to VA within 90 days of the date of discharge, or 90 days from the date that all attempts to receive required payments from a liable third party are completed and not successful in eliminating the Veteran's personal liability to the provider. A liable third party includes an other health insurer, worker's compensation, civil litigation, etc.



Filing a Claim	
Veterans/Veteran's Representatives	Providers
<p>Veterans or their personal representatives may file a claim for reimbursement of emergency treatment costs that they have incurred and paid to the provider.</p> <p>In this situation, Veterans should obtain and submit all related treatment and billing records to the closest VA medical facility.</p> <p><b>Note:</b> In most cases, providers can submit a claim directly with VA, and the Veteran will not have to take further action.</p>	<p>Must submit claims to the VA medical facility closest to where the treatment was provided.</p> <p>Claims other than for emergency transportation must include a standard billing form (such as a UB04 or CMS 1500), containing a false claims notice. Along with the completed form, all documentation related to the medical care provided must be included.</p> <p>Claims for emergency transportation do not require any specific billing form. The claimant must submit a signed, dated request for payment to the nearest VA medical facility to where the emergency treatment was received. This statement must justify the emergency transportation and be accompanied by a bill showing the services provided as well as the charges related to those services.</p>
Payment Rates	
Service-Connected Condition	Non-Service Connected Condition
Generally, 100% Medicare rates.	Generally, 70% Medicare rates.

**Receiving Payment from VA**

Once a claim for emergency treatment of a non-service connected condition is received by VA, the claim will be administratively reviewed to determine Veteran eligibility. If the Veteran meets the eligibility criteria to receive emergency care in the community, the treatment documentation will then be reviewed by VA clinical staff to determine if the treatment received meets the clinical criteria necessary for VA to pay for the care.

VA makes every effort to adjudicate claims for emergency treatment quickly and accurately. In most cases, VA payment for emergency care is issued to the provider or Veteran within 30 days of receipt of the claim. When further information or clarification is needed by VA, claims processing may take longer than 30 days.

If a Veteran is contacted by the ED that provided the emergency care, or receives more bills after VA has received the Veteran's claim, they should contact the nearest VA medical facility as soon as possible. VA staff

will assist the Veteran in determining whether the bill received by the Veteran is appropriate, or work to resolve any billing issues with the ED provider to ensure the Veteran avoids being subjected to any adverse credit or collection efforts.

**Support**

- Call 1-877-466-7124 to speak to a customer service representative, Monday through Friday, between the hours of 8:00 a.m. to 5:00 p.m. Eastern Standard Time (EST).
- Visit [www.va.gov/communitycare](http://www.va.gov/communitycare)