

Frequently Asked Questions for Providers

Overview

- Community Care Network (CCN) contracts are awarded by the Department of Veterans Affairs (VA) to help ensure health care services are available for Veterans who are unable to receive care at a VA medical facility.
- VA determines the eligibility of Veterans to receive care from a community provider.
- VA awarded VA CCN contracts for Regions 1, 2 and 3 to Optum. Optum and UnitedHealthcare are contracting with providers to participate in VA CCN.
- VA CCN health care delivery is fully deployed in Regions 1 and 2. Deployment will be finalized in Region 3 by June 19, 2020.

Region 1		Region 2		Region 3	
Connecticut	New Hampshire	Illinois	Missouri	Alabama	South Carolina
Delaware	New Jersey	Indiana	Nebraska	Arkansas	Tennessee
District of Columbia	New York	Iowa	North Dakota	Florida	U.S. Virgin Islands
Maine	North Carolina	Kansas	Ohio	Georgia	
Maryland	Pennsylvania	Kentucky	South Dakota	Louisiana	
Massachusetts	Rhode Island	Michigan	Wisconsin	Mississippi	
	Vermont	Minnesota		Oklahoma	
	Virginia			Puerto Rico	
	West Virginia				

To become more familiar with VA CCN, please read the following frequently asked questions. Please visit the Optum VA Community Care Network provider portal at provider.vacommunitycare.com to find the VA CCN Provider Manual and other provider resources.

Eligibility and Benefits

Q. Are all Veterans eligible to receive care from providers participating in VA CCN?

- A. VA determines a Veteran’s eligibility to receive community care. To be eligible, a Veteran must be both:
- Enrolled in VA’s patient enrollment system
 - Have an approved referral from VA for community care

The Veteran’s caregivers and family members are not eligible for VA CCN.

Q. How do I confirm that a Veteran is eligible for VA CCN services?

- A. VA will contact the VA CCN provider to request that the provider accept a referral to deliver care to a Veteran and will then send the provider a referral packet of information. This referral packet includes the type of care the Veteran can receive and the Veteran's medical history. To view approved referrals and check a Veteran's community care eligibility, go to provider.vacommunitycare.com > Medical/Behavioral Provider. The Veteran may have a military or Veteran ID card, but it is not required to treat the Veteran.

Q. How will I know when VA will begin sending referrals to me under the Optum VA CCN?

- A. VA CCN will roll out in phases. Health care delivery began in Summer 2019 for Region 1, Fall 2019 for Region 2 and January 2020 for Region 3. As each VA medical center (VAMC) phase becomes active, you will begin receiving referrals from VA. The phase deployment schedules are posted to provider.vacommunitycare.com > Training & Guides.

Q. Could I receive referrals for a Veteran living in a region not awarded to Optum?

- A. Yes. A VAMC is able to refer Veterans to VA CCN providers in any region. Because you're participating under your contract with Optum or UnitedHealthcare, the approved referrals you would receive would be for regions awarded to Optum: Regions 1, 2 or 3 (shown on the approved referral as CC Network 1, CC Network 2 or CC Network 3). Your region is based on your location.

Referrals

Q. Are referrals required for VA CCN?

- A. Yes. Before a Veteran receives care or services from a VA CCN provider, VA must issue an approved referral with a standardized episode of care (SEOC) and a consult order indicating what services the VA provider is requesting. With the exception of emergency care, which requires a retroactive referral, if the VA CCN provider delivers care or services without an approved referral, the VA CCN provider will not be reimbursed for the care or services provided.
- The referral will include a referral issue date and expiration date. The end date may change based on the date of the first appointment to allow for the complete appointment time frame. When the expiration date is recalculated, a new referral is not issued. However, the VA CCN provider will be able to see the update at provider.vacommunitycare.com > Medical/Behavioral Provider.
 - The referral has a specified number of visits and/or services related to a plan of care. When the number of visits is listed as 999, use your clinical judgment to provide the appropriate medically necessary care to Veterans.
 - All approved services will be listed on the approved referral under the SEOC section. The VA CCN provider will be able to verify the status of an approved referral at provider.vacommunitycare.com or by calling CCN Provider Services.
 - Information on Urgent Care is available at provider.vacommunitycare.com > Training & Guides > [Urgent Care Benefits](#).

Q. If I want to perform additional services not included on the approved referral and SEOC, can I perform additional care without a new approved referral?

- A. No. When a VA CCN provider identifies a need for care that falls outside of the Veteran's SEOC or a need to extend the number of authorized visits, the VA CCN provider must send a Request for Service (RFS) form to VA. You can find the referral instructions and procedures at provider.vacommunitycare.com > Training & Guides.

Q. Can I perform any medical procedure after confirming that an eligible Veteran has been referred to me?

- A. No. All approved referrals will include a SEOC and consult order. Services provided within the SEOC are approved. However, the provider should review the consult order to see which services are being requested from VA and use their clinical judgment to evaluate and treat the Veteran. In many situations, not all services listed on the SEOC will be medically necessary. You may locate a list of codes included in a SEOC at [VA SEOC Billing Code List](#).

Q. Are approved referrals required for VA CCN treatment during a medical emergency?

- A. If a VA CCN provider is providing services to a Veteran under an approved referral and determines that the Veteran is experiencing an emergent symptom or condition, follow internal emergent protocols. Once the situation has stabilized, contact the referring VA medical facility listed on the referral to report the incident.

If a Veteran goes to an emergency room and states they want to use their VA benefits, notify VA within 72 hours of the start of emergent care to request a retroactive referral. For more information, refer to provider.vacommunitycare.com > Training & Guides or va.gov/COMMUNITYCARE/providers/info_EmergencyCare.asp.

Q. Can I refer a Veteran for care to another provider in the VA CCN network?

- A. Yes. For services and procedures on the approved referral and SEOC, a provider may send the Veteran to a VA CCN provider in the same region listed on the approved referral. However, all referral requests for additional services not on the approved referral and SEOC must be approved by VA. The VA CCN provider must submit an RFS form to the VAMC listed on the approved referral. You can find the referral instructions and procedures at provider.vacommunitycare.com > Training & Guides.

Q. When I have an approved referral, can I refer that Veteran for care to a provider, even if it's another location of my office, in another region?

- A. No. The region is listed on the approved referral as CC Network 1, CC Network 2 or CC Network 3. All services must be provided by a VA CCN provider in the region listed on the approved referral.

Q. Can I refer a Veteran to a hospital for admission?

- A. Referral requests for hospitalization must be approved by VA, just the same as any other services beyond what is specified in the approved referral and SEOC. You can find the referral instructions and procedures at provider.vacommunitycare.com > Training & Guides.

Claims and Provider Reimbursement**Q. How do I file a claim?**

- A. The VA CCN provider will find instructions for filing electronic and paper CCN claims at provider.vacommunitycare.com > Training & Guides. All claims must have an approved referral number.

Medical documentation must be sent directly to VA and not submitted with the claim.

Q. What is the VA CCN reimbursement rate for approved services?

- A. For claims submitted with a valid approved referral number, services will be reimbursed according to the following payment order:
- Covered services will be reimbursed at 100% of the Centers for Medicare & Medicaid Services (CMS) Fee Schedule amount.
 - Covered services that are not covered by the Medicare program, or for which the Medicare program does not have local pricing, will be reimbursed according to the VA Fee Schedule.
 - If the VA Fee Schedule does not include a rate for the covered service provided, reimbursement will be made at 100% of customary charges, as defined in the provider's VA CCN Payment Appendix.

The VA Fee Schedule is available at provider.vacommunitycare.com > Documents & Links.

Q. Are there exceptions to the reimbursement rates noted above?

- A. Yes.
- For home infusion providers, if not covered by CMS Fee Schedule, and the VA Fee Schedule does not include a rate for the covered services provided, reimbursement will be made at 85% of customary charges, as defined in the provider's VA CCN Payment Appendix.
 - All providers will be paid \$20.50 for the administration of the influenza (flu) vaccine.
 - All dental providers will be reimbursed according to the fee schedule in their Dental Payment Appendix.

Q. Can I provide emergency services to a Veteran if I am not participating in the VA CCN?

- A. Yes. If the Veteran states they are using their VA benefits, out-of-network providers must submit health care claims directly to VA. Information on VA's claim process is at va.gov/communitycare.



Q. Will I be reimbursed if I am not participating in the VA CCN and provide emergency services to a Veteran?

A. The claim must be submitted to VA as soon as possible. Claims for non-service-connected care should be submitted within 90 days of the encounter and claims for service-connected care should be submitted within two years. VA will evaluate eligibility for payment and process the claim accordingly. You can find information on VA's process at va.gov/COMMUNITYCARE/programs/veterans/EmergencyCare.asp.

Q. Can I bill the Veteran for services denied by VA?

A. No. VA CCN providers cannot bill Veterans for any services denied by VA or for services not included on an approved referral issued by VA.

Q. What number do I call if I have questions about VA CCN?

A. You can call CCN Provider Services, a dedicated provider services support team, from 8 a.m. – 6 p.m. provider's local time zone, Monday – Friday, excluding federal holidays.

- Region 1: **888-901-7407**
- Region 2: **844-839-6108**
- Region 3: **888-901-6613**

Additional VA Resources

Q. Where can I find additional information on VA CCN?

A. VA information on CCN, including training, is available at va.gov/communitycare.