

Quick Reference Guide for Providers

Overview

This quick reference guide provides important information about the Department of Veterans Affairs (VA) Community Care Network (CCN).

Using This Guide

This guide provides an overview of key resources and information for VA CCN providers. For more complete information on applicable requirements, please refer to your VA CCN provider agreement and the VA CCN Provider Manual.

Provider Services

VA CCN providers can call CCN Provider Services from 8 a.m. – 6 p.m. provider's local time, Monday – Friday, excluding federal holidays.

CCN Provider Services assists with:

- Benefits issue resolution
- Claims status and issue resolution
- Pharmacy issue resolution
- Provider enrollment
- Referrals status
- Veteran eligibility

CCN Provider Services Region 1: 888-901-7407

CCN Provider Services Region 2: 844-839-6108

CCN Provider Services Region 3: 888-901-6613

To determine the VA CCN provider region, click here: [Community Care Network Regions](#).

Online Tools

Optum's VA Community Care Network provider portal is available at provider.vacommunitycare.com. It contains Training & Guides, News & Announcements and Documents & Links.



Additional functionality is available at provider.vacommunitycare.com > Medical/Behavioral Provider. Register or sign in to:

- Check status of referrals
- Confirm Veteran eligibility
- Check claims status
- Submit claims
- Access provider resources and education
- View VA CCN provider directory
- Access real-time pharmacy dispensing

Referrals and Veteran Eligibility

Eligibility for community care is determined by VA before a Veteran can be referred to a VA CCN provider. Approved referrals from VA will authorize a specific Standardized Episode of Care (SEOC) that will include a specified number of visits and/or services related to a plan of care. The approved referral will state when it's issued and how long it's valid.

All services require an approved referral from VA before services are rendered. The only exceptions are for urgent care benefits administered by Optum. VA CCN urgent care provider is required to call for eligibility prior to rendering care, and an in-network emergency room may provide care and notify VA within 72 hours of start of emergent care to request a retroactive referral. The process to request a retroactive referral is outlined in the Referral Process at provider.vacommunitycare.com > Training & Guides.

Pharmacy Benefits and Prescription Guidelines

- Providers are prohibited from giving pharmaceutical samples to Veterans.
- Before prescribing a controlled substance, VA requires providers to check their state's prescription-monitoring program to see if the Veteran has been prescribed other controlled substances.
- Prescriptions for routine and maintenance medications will be filled by the VA pharmacy.
 - VA National Formulary Search Tool is on pbm.va.gov > VA National Formulary > Formulary Search.
- For urgent and emergent prescriptions:
 - Covered medications are on the VA Urgent/Emergent Formulary at provider.vacommunitycare.com > Formulary and Pharmacy Search > Urgent/Emergent Formulary Search.
 - Urgent/emergent prescriptions can be written for a maximum 14-day supply with no refills. Opioids may be filled up to a 7-day supply or state limits – whichever is less. The prescription must be associated with an approved referral. Veterans should fill this prescription at a VA CCN retail pharmacy.
 - If urgent/emergent medication is required beyond a 14-day supply, provider should write a second prescription to be filled by the VA pharmacy.
 - VA does not consider topical compounds urgent or emergent.

Additional information on [Prescribing Medications for Veterans](https://provider.vacommunitycare.com) is available at provider.vacommunitycare.com > Training & Guides.



Claims Management

- Instructions for filing electronic and paper VA CCN claims are in the VA CCN Provider Manual, available at provider.vacommunitycare.com > Training & Guides.
- All claims must have an approved referral number listed, except Urgent Care, which requires verification of eligibility.
- To check the status of a claim, the VA CCN provider can access provider.vacommunitycare.com > Medical/Behavioral Provider or contact CCN Provider Services.
- Submit claims within 180 days from the date of service or date of discharge.

Reconsideration Request

The reconsideration request is a formal process. Claim reconsideration requests for denied or partially denied claims must be submitted to Optum within 90 days of the process date. If a claim is not partially or completely denied but the provider does not agree with payment, a reconsideration request must be submitted within 12 months of the process date.

Submitting Medical Documentation

VA CCN providers must submit medical documentation directly to VA and/or the VA CCN referring provider. Additional details are available at provider.vacommunitycare.com > Training & Guides > [Medical Documentation Requirements](#).

Additional VA Resources

VA information on VA CCN, including upcoming VA trainings, can be found at va.gov/communitycare > For Providers > Community Providers Overview.