



## Reference Sheet

# Veterans Prescription Benefit

The VA MISSION Act of 2018 (MISSION), which went into effect June 6, 2019, streamlines VA's community care programs, provides Veterans with expanded access to health care, and replaces the Veterans Choice Program. While VA implements MISSION, there are important details to know about prescriptions for medications to avoid confusion and ensure Veterans continue to choose VA.

## VA's Pharmacy Program

All prescribers, including VA-authorized prescribers, must follow the [VA National Formulary \(https://www.pbm.va.gov/PBM/nationalformulary.asp\)](https://www.pbm.va.gov/PBM/nationalformulary.asp) process. Eligible Veterans who receive their care through authorized community providers must have prescriptions filled at VA pharmacies for any fills longer than 14 days. VA pharmacies can be identified through VA's facility locator on VA.gov (<https://www.va.gov/find-locations/>). Some Veterans may be required to make a copayment for medication based on the type of care and the Veteran's financial situation. Information about copayments can be found at [https://www.va.gov/COMMUNITYCARE/revenue\\_ops/copays.asp](https://www.va.gov/COMMUNITYCARE/revenue_ops/copays.asp).

Community providers are required to fax, mail, or electronically prescribe non-urgent prescriptions to the appropriate VA pharmacy. VA pharmacies are available through typical electronic prescribing mechanisms that community providers utilize. If a Veteran prefers to take a prescription to the VA pharmacy, he or she will also need to bring the community care authorization. If a Veteran prefers to receive his or her prescriptions by mail from a VA pharmacy, community providers should include that instruction in the comments of the individual prescriptions that are faxed, mailed, sent or taken to the VA pharmacy.

The local VA pharmacy fills prescription medications written by authorized community providers up to the amount of refills authorized according to the [VA National Formulary \(https://www.pbm.va.gov/PBM/nationalformulary.asp\)](https://www.pbm.va.gov/PBM/nationalformulary.asp) process. If a Veteran needs a

medication that is not on VA's National Formulary, the community provider should contact the local VA pharmacy available through the VA facility locator. The provider may be requested to complete a non-Formulary request and return it to the local VA for approval or denial. Each VAMC manages their own non-formulary request management process, as governed by [VHA Directive 1108.08 \(https://www.pbm.va.gov/directive/vhadirective.pdf\)](https://www.pbm.va.gov/directive/vhadirective.pdf). VA will communicate the result of the review and if the medication is approved, VA will provide that to the Veteran. If VA does not approve the request, the community provider will be required to prescribe an alternative medication.

## Prescriptions Received through Authorized Community Care

Standardized episodes of care (SEOC) are a requirement in most cases for Veterans to receive care from community care network providers. Community providers may prescribe up to a 14-day supply of medications; longer prescriptions should be forwarded to the VA as described above. Veterans can either fill the 14-day prescription at a VA pharmacy or any community pharmacy.

If a community pharmacy is used, Veterans must pay for the prescription out-of-pocket and then submit a claim for reimbursement with their local VA medical facility via fax or in person. Veterans seeking reimbursement for urgent prescriptions filled at a non-network pharmacy must submit the following to their local VA medical facility:

- Copy of the prescription
- Receipt of purchase from the pharmacy (VA payment is not to exceed the average wholesale price)

Contracted community pharmacies may soon become available under TriWest for prescriptions received through authorized community care. CCN Region 1 will have access to contracted community pharmacies as facilities deploy under Optum. This guidance will be updated as contracts changes.

## Prescriptions Received through Community Urgent Care

Community urgent care providers may prescribe up to a 14-day supply of medications for a Veteran using the urgent care benefit from the VA Urgent Formulary. Longer prescriptions should be forwarded to the VA as described in the VA Pharmacy Program. Veterans can either fill the 14-day prescription at 1) a contracted pharmacy in the VA network (an additional option), 2) a VA pharmacy, or 3) a non-contracted, community pharmacy. Contracted pharmacies can be found through the VA facility locator under the urgent care provider link. Veterans using contracted pharmacies do not need to pay for the prescriptions out-of-pocket. Veterans will still be subject to any copayments based on the type of care and the Veteran's financial situation. Processes for using non-contract pharmacies are described in the preceding section.

In the event that a Veteran believes that additional medication is needed after his or her urgent care visit, he or she should contact his or her VA care team to determine if further care is needed and/or a refill should be prescribed.

## Frequently Asked Questions

### **Q1. Can Veterans refill existing prescriptions that were generated under the Choice program?**

Yes, any Choice prescription can be refilled after June 6, 2019, at a local VA medical facility or VA pharmacy and will not require a rewritten authorization.

### **Q2. Will prescriptions written prior to June 6, 2019, but not entered by June 5 have to be adjudicated for new community care eligibility and re-written?**

The referral, not the prescription itself, will need to be reassessed for eligibility. If a Veteran had an appropriate authorization prior to June 6, the associated prescriptions are valid and can be filled if all other requirements are met.

### **Q3. Can VA pharmacists enter prescriptions from Choice providers if they were written prior to June 6, 2019?**

The approval/authorization of the prescription goes with the referral, not the provider.

### **Q4. Which pharmacies can Veterans use for their prescriptions written by community providers?**

Eligible Veterans who receive care through community providers must have prescriptions longer than 14 days filled at VA pharmacies. Community providers must fax,

mail, or e-prescribe the prescription to the appropriate VA pharmacy. If a Veteran decides to fill and pay for their prescription at a community pharmacy, VA will not reimburse the amount unless the prescription was previously approved by VA or is deemed urgent by the community provider.

For a prescription written through the urgent care benefit that lasts 14 days or fewer, Veterans can either fill the prescription at a contracted pharmacy in the VA network, a VA pharmacy, or a non-contracted pharmacy. If a non-contracted pharmacy is used, Veterans must pay for the prescription and then file a claim for reimbursement with their local VA medical facility.

For a prescription written by an authorized community care provider that lasts 14 days or fewer, Veterans can either fill the prescription at a VA pharmacy or any community pharmacy.

Any prescriptions that are written for over 14 days must be submitted to VA to be filled. For prescriptions needed through the urgent care benefit, TriWest contracts with ExpressScripts which includes most major pharmacy chains.

### **Q5. How will retail pharmacies confirm that a prescription is urgent?**

Community retail pharmacists will confirm urgent care eligibility through the contracted third-party administrator (TriWest, Optum or other). Once eligibility is confirmed, they can follow the VA urgent formulary and provide up to a 14-day supply.

### **Q6. How will VA medical facilities receive funding to support prescriptions without Choice funding?**

Prescriptions that are filled by VA pharmacies or through the Consolidated Mail Outpatient Pharmacy (CMOP) will be funded by each VA medical center's pharmacy budget using Medical Services appropriation funds. Prescriptions that are filled outside of VA's system (e.g., urgent care prescriptions, those filled through third-party administrator contracts) will be funded using Medical Community Care appropriation funds. Additional detailed guidance regarding the accounting of prescriptions will be forthcoming from the VHA Office of Finance.

### **Q7. Will copayments be assessed for prescriptions from community providers?**

For prescriptions filled at VA pharmacies or non-VA pharmacies, copayments will be charged by VA after care has been provided. Copayments will be directly charged to the Veteran.

**Q8. Where are contracted pharmacies located?**

Contracted pharmacies can be found via the VA facility locator (<https://www.va.gov/find-locations/>) under the urgent care provider link.

**Q9. Where can I find additional information?**

Additional information about Veterans health care benefits under the VA MISSION Act can be found at: <https://www.va.gov/communitycare/>.