

Quick Reference Guide for Providers

Overview

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

VA CCN contracts provide eligible Veterans access to community health care providers.

Using This Guide

This guide provides resources and VA CCN requirements. To keep up to date on VA CCN, please visit Optum's VA Community Care Network portal at vacommunitycare.com, click I am a Provider, and then access Training & Guides to locate this guide, frequently asked questions, training resources, as well as the VA CCN Provider Manual.

Provider Services

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

- Check status of referrals (with exception of retroactive emergency referrals, as these must be routed directly to the VA Community Care Contact Center)
- Confirm Veteran eligibility
- Check claim status
- Resolve claim issues
- Verify provider enrollment status
- Resolve pharmacy issues

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

The Optum provider portal is available at vacommunitycare.com > I am a Provider, which contains Training & Guides, News & Announcements, and Documents & Links.



Secure functionality is available at vacommunitycare.com > I am a Provider > 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 is issued and how long it is valid.

All services require an approved referral from VA before services are rendered. The only exception is an in network emergency room may provide care and notify VA within 72 hours of a Veteran seeking care to receive a retroactive referral. The process to request a retroactive referral is outlined in the VA CCN Provider Manual at vacommunitycare.com > I am a Provider > Training & Guides.

Pharmacy Benefits and Prescription Guidelines

- VA CCN providers must **not** dispense any pharmaceutical samples to Veterans.
- Before prescribing a controlled substance, VA CCN providers must check their State's prescription monitoring program to verify that other practitioners are not currently prescribing a Veteran a controlled substance.
- 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 vacommunitycare.com > I am a Provider > Formulary and Pharmacy Search > VA Urgent/Emergent Formulary.
 - Urgent/emergent prescription 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.
 - Topical compounds are never considered urgent/emergent.



Additional information on [Prescribing Medications for Veterans](#) is available on [vacommunitycare.com](#) > I am a Provider > Training & Guides.

Claims Management

- Instructions for filing electronic and paper VA CCN claims are in the VA CCN Provider Manual available at [vacommunitycare.com](#) > I am a Provider > Training & Guides.
- All claims must have an approved referral number listed.
- To check the status of a claim, the VA CCN provider can access [vacommunitycare.com](#) > I am a Provider > 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 [vacommunitycare.com](#) > I am a Provider > 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.