

OCT 20, 2016

Veteran's Fee Basis CARDS
ISSUED 10-17-00 USED IN 1980's

BILLING AND REPORTS - Bills submitted after two years from date of treatment or services will NOT be paid. Submit bills monthly to the VA clinic of jurisdiction. To facilitate payment, please include on your bill your Social Security Number or employer's identification number and the veteran's name and Social Security Number. Also itemize the following: (1) condition(s) treated; (2) types and date(s) treatment rendered; (3) your usual and customary fee for each type of treatment and (4) CPT code(s). Failure to provide any of this information will delay payment. Bills for supportive medical services must include the name and address of the prescribing doctor of medicine or osteopathy. Submit a brief treatment report when the cost of treatment exceed the \$125.00 monthly limitation or when a significant clinical change in a disability occurs. Pharmacies submitting bills for the first time should include the original prescription, or a certified copy of it if the State requires retention of original. VA will provide pharmacies instructions and claim forms for use in subsequent billings.

IMPORTANT: Direct inquiries and change of address to the following VA clinic of jurisdiction:

DEPARTMENT OF VETERANS AFFAIRS
4150 Clement Street
San Francisco, CA 94121



**VA FEE BASIS OUTPATIENT
MEDICAL CARE AUTHORIZATION**

(Valid until cancelled by VA)

OJALA, GEORGE P.

VETERAN'S NAME

S.S.N.

George P. Ojala

EFF. 10/17/00

VETERAN'S SIGNATURE

DISABILITY FOR WHICH TREATMENT IS AUTHORIZED

ANY CONDITION (except dental & psych).

0053027

VA FORM 10-1174, APR 1985

PLEASE READ CAREFULLY

LIMITATIONS: THIS AUTHORIZATION IS FOR OUTPATIENT MEDICAL TREATMENT ONLY. IT MUST NOT BE USED TO OBTAIN MEDICAL SERVICES FOR DISABILITIES, BUT LISTED UNDER VA POSITIVE RATING, NURSING HOME CARE, PROSTHETIC APPLIANCES OR RYTO APPLIES, PRESCRIPTIONS FOR MEDICATIONS MUST BE PRESENTED TO THE VA CLINIC OF JURISDICTION UNLESS THEY ARE CERTIFIED BY PHYSICIAN THAT MEDICATIONS ARE NEEDED AT ONCE. ALL ROUTINE TREATMENT MAY NOT EXCEED \$55 PER MONTH WITHOUT PRIOR VA APPROVAL. THE USE OF THIS CARD IS LIMITED TO THE VETERAN IDENTIFIED ON REVERSE SIDE AND IS VALID ONLY WHEN SO USED BY THE VETERAN. NOT VALID WITH OTHER FEDERAL FACILITIES ARE AVAILABLE. NOT VALID IN FOREIGN COUNTRIES.

TO OPTOMETRIST: You may provide additional information if you have error when this card authorizes treatment for any condition. Prescriptions for eyeglasses must be sent to the VA clinic of jurisdiction.

TO PHYSICIAN: The veteran's name on this card is authorized to obtain OUTPATIENT treatment for the disability listed on reverse side. A doctor of medicine or osteopathy licensed in the State in which the facility is located.

Admission to VA S.F 415 750201A

Certain diagnostic and minor surgical procedures may be provided on an OUTPATIENT basis with prior VA approval. When treatment of these conditions requires hospitalization, dental services, home nursing services, eyeglasses, hearing aids or other prostheses, notify the VA clinic of jurisdiction. Services or items of this nature, if approved, will be provided by the VA. Please request additional medical or other information, if required, from the VA clinic of jurisdiction.

MEDICAL SERVICES include prescription and referral by a physician for supportive medical services when required. All routine treatment may not exceed \$55 per month without prior VA approval. PRESCRIPTIONS must be filled by VA unless needed at once. Veterans may obtain medications needed at once from a PRIVATE PHARMACY if the physician certifies the prescriptions with the statement: "This medication order is needed immediately for the patient's disability which the VA has authorized me to treat".

PAYMENT - Payment in accordance with the VA Medical Fee Schedule shall be provided, in full. Supplemental or duplicate claims for the particular services rendered under this authorization must not be submitted to other parties.

MONTHLY LIMITATION \$125.00

Before Prez Bush cancelled this program in the 90's, I could spend \$125.00 to see a local doctor, chiropractor, ect. THE U.A. paid for prescriptions as well.

*payment "IN FULL"
"Supplement or duplicate claims for particular service..."

"MUST NOT BE SUBMITTED TO OTHER PARTIES"