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VETERANS POST

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Getting community care

The VA spent over \$36 billion on community care in fiscal year 2025, and it appears to be money well spent.

The expenditures were courtesy of the 2018 MISSION Act, which lets veterans get their care out in the community from non-VA health care providers — with the VA picking up the tab. Added to that in 2025 was the Dole Act (more specifically, the Senator Elizabeth Dole 21st Century Veterans Healthcare and Benefits Improvement Act), which lets veterans seek care in the community without frequent medical reviews or permissions from VA medical staff.

It used to be that veterans had to get a new referral every 90 to 180 days to keep getting care out in the community. Now, for 30 categories of care — pulmonary, dermatology, podiatry and endocrinology, as a few examples — new referrals will only be needed once a year.

Veterans in three states in particular benefited from that money: Texas at \$3.3 billion, Florida at \$2.8 billion and California at \$2.1 billion.

If you've already been getting community care, find out from the community care office at your VA medical facility where in the permission and referral cycle you are so you know in advance when the next one will be required. Since most of the medical categories will only need a yearly referral, get your schedule in writing so there isn't a problem at the last minute with an expired authorization.

If you need medical treatment that the VA doesn't provide, or if the wait times at your local VA hospital are too long, or if the driving time to your VA hospital is too long, you might qualify for community care. To get specifics, call the community care office for an initial referral. If you already have a community care provider in mind, find out whether they are part of the VA network before you get care from them to be certain the VA will pay for it.

To learn more about getting medical care in your own community, go to department.va.gov/vha/community-care.

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