

Department of Veterans Affairs Medication Copayments

VA charges a copayment for each 30 day or less supply of medication provided on an outpatient basis for the treatment of a non-service connected condition.



Effective early 2017, copay amounts are:

Priority Group	Outpatient Medication Tier	Copayment amount		
		1-30 day supply	31-60 day supply	61-90 day supply
2-8	Tier 1 (Preferred Generics)	\$5	\$10	\$15
	Tier 2 (Non-Preferred Generics and some OTCs)	\$8	\$16	\$24
	Tier 3 (Brand Name)	\$11	\$22	\$33
	\$700 Medication Copayment Cap			

These changes apply to:

- Veterans without a service-connected condition, or
- Veterans with a disability rated less than 50%
 - » who are receiving outpatient treatment for a non-service connected condition, and
 - » whose annual income exceeds the limit set by law.

Note: Medication copayments do not apply to former Prisoners of War, catastrophically disabled Veterans, or those covered by other exceptions as set by law.

Copayments stop each calendar year for Priority Groups 2-8 once a \$700 cap is reached.

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For more information call us at: 1-877-222-VETS (8387), or visit our website at: <http://www.va.gov/healthbenefits>

VA



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