Medicare for Veterans

Agent Guide

Understanding Healthcare Options for Veterans

NEISHLOSS & FLEMING, LLC

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WHY VETERANS? WHY NOW?

There are about 18 million living veterans in the United States. Nearly half of them — around 9 million people — are age 65 or older, which means they qualify for Medicare.

Many veterans do not fully understand what health benefits they have or how Medicare fits in. Some do not even know they are eligible for veterans benefits at all. As an agent, you can make a real difference by learning what plans are available and asking the right questions.

Key Stat: About 49% of all living veterans are over age 65 — nearly 9 million people who may need Medicare guidance.*

Compliance Note: *Not all veterans or family members are eligible for these programs. Agents should verify eligibility, coverage rules and benefit details directly with the applicable program. This material is for educational purposes only.*

How to Use This Guide: This reference helps agents understand how veteran-related healthcare options interact with Medicare in order to support compliant, educational conversations. It does not replace eligibility verification or official program guidance.

What Is a Medicare-Eligible Veteran?

Medicare-eligible veterans have:

Medicare Eligibility	Veteran Status
• U.S. citizen or resident • 65 or older • Under 65 with certain disabilities, including end-stage renal disease	• Individuals who have served in the active United States military, naval, air or space service and who were not dishonorably discharged

Families of Medicare-Eligible Veterans

In some cases, spouses or dependents of certain veterans also qualify for veteran health programs. Here are a few examples:

Spouses of Military Retirees	Family of Disabled/Deceased Veterans
• Spouses of those who have retired from the military • Qualify for TRICARE before Medicare eligibility • Qualify for TRICARE For Life after Medicare eligibility	• For spouses or dependent children of veteran • Veteran severely disabled due to service • Veteran deceased due to service • Qualify for CHAMPVA

*Source: "Aging Veterans: America's Veteran Population in Later Life", United States Census Bureau, retrieved June 2026. https://www.census.gov/content/dam/Census/library/publications/2023/acs/acs-54.pdf

Veteran Health Coverage Options

Veterans and their family members may have access to up to three different healthcare programs, depending on when and how they served:

VA Health Care

- ✓ Covers primary care, mental health, prescriptions and specialty care
- ✓ Low or no cost based on your priority group and disability rating
- ✓ Focuses mostly on service-connected conditions

TRICARE For Life (TFL)

- ✓ For military retirees — acts as secondary coverage after Medicare pays first
- ✓ Covers most Medicare cost-sharing and includes prescription drug coverage
- ⚠ Requires Medicare Part B enrollment — missing it can mean losing TFL

CHAMPVA

- ✓ For eligible spouses and dependents of veterans who are permanently and totally disabled due to a service-connected condition, or who died from a service-connected condition
- ✓ Medicare is primary; CHAMPVA acts as secondary coverage — no network restrictions when Medicare is primary

At-a-Glance Comparison

Use this table as a quick reference when talking with veterans or their spouses:

	VA Health Care	TRICARE For Life	CHAMPVA
Who qualifies	Veterans only (based on service)	TRICARE For Life Military retirees + spouses	Spouse/dependents of severely disabled/deceased veterans
Medicare needed?	Enroll in Part B (VA is not creditable for medical)	Yes — Medicare A & B is primary	Yes — Medicare A & B is primary
Drug coverage	Creditable — no Part D required (copays may apply)	Creditable — no Part D required	Creditable — no Part D required (Meds by Mail = $0 cost)
Network rules	Nationwide HMO - referral needed for specialists	No network — see any Medicare provider	No network - see any Medicare provider
Dental/Vision/Hearing	Some veterans qualify; most don't	Not included	Not included
Fitness/OTC benefits	Not included	Not included	Not included
Covers spouses?	No	Yes (retiree spouses)	Yes

VA Healthcare System

The VA (Veterans Affairs) healthcare system is a nationwide network of hospitals, clinics and health programs run by the federal government. Think of it like a large HMO — members get care through the VA system, and their primary care doctor coordinates everything.

Who Can Use It?

Only veterans can use the VA healthcare system. Spouses and other family members are not covered. Not every veteran qualifies either. Eligibility depends on:

- When and where the veteran served
- Whether the veteran was injured during service
- Other factors set by the VA

Important: Not all veterans are automatically eligible for VA health care. Some may not know they qualify — or may have never applied. Always ask.

What Does It Cover?

Veterans who qualify for VA health care can get a wide range of services, including:

- Primary care (regular doctor visits)
- Specialist visits (with a referral from your primary care doctor)
- Hospital care
- Prescription drugs (usually with a copay)
- Mental health services
- Some dental, vision and hearing benefits (not everyone qualifies)
- Health and wellness programs

How Does It Work?

The VA works like an HMO. Veterans must go through their VA primary care doctor to see a specialist. For example, to see a dermatologist, the member cannot just call and schedule an appointment — they need a referral from their primary care doctor first.

This can sometimes mean long wait times or travel if the nearest VA facility is far away. That is one reason why some veterans want additional insurance.

Is VA Coverage the Same as Medicare?

No — and this is very important for agents to understand.

The VA healthcare system is NOT considered creditable health coverage for Medicare purposes. **That means if a veteran only has VA coverage, Medicare will treat them as uninsured for medical services.**

You should encourage every veteran who becomes Medicare eligible to enroll in Medicare Part B. That way, they can see doctors outside the VA when needed.

What About Drug Coverage? VA prescription drug coverage IS considered creditable by Medicare. Veterans do NOT need to enroll in a Medicare Part D plan just because they have VA coverage. However, some veterans pay copays at the VA for their prescriptions. A Medicare Advantage plan with drug coverage might lower or eliminate those copays.

Benefits of Having a Medicare Advantage Plan as a Veteran

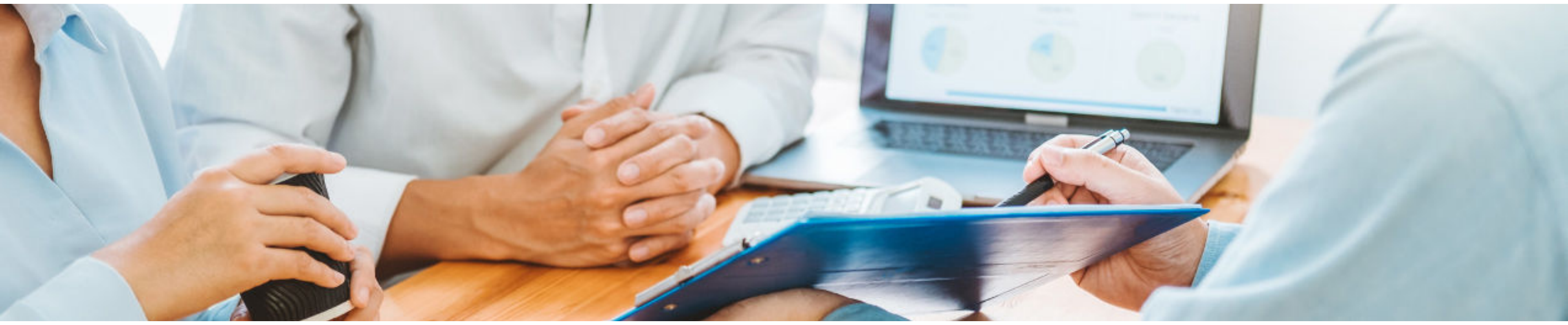
Even with VA health care, there can be gaps. A Medicare Advantage (MA) plan can help with:

- Dental, vision and hearing coverage (if VA doesn't provide it)
- Fitness benefits like SilverSneakers
- Over-the-counter allowances
- Flexibility to see any in-network provider outside the VA — no referral needed
- Faster access to care when VA wait times are long
- Care from providers closer to home

Veterans can use both the VA and a Medicare Advantage plan. They choose which one to use for each situation. On any given day, a veteran might go to the VA because it meets their needs — or they might go to a community doctor through their MA plan instead.

A veteran with VA health care could choose any of these options to add to their coverage:

- Medicare Advantage only (MA)
- Medicare Advantage with Prescription Drug plan (MAPD)
- Stand-alone Prescription Drug Plan (PDP)
- Medicare Supplement Insurance plan (Medigap)



TRICARE For Life

What Is It?

TRICARE is the healthcare program for active-duty military members and their families. When a service member retires from the military and later becomes eligible for Medicare, their TRICARE coverage automatically becomes TRICARE For Life.

Who Can Use It?

TRICARE For Life is available only to military retirees and their spouses (once they qualify for Medicare). To qualify, you must have retired from the military — not just served and left. This is an important difference.

Example: Someone who served 8 years in the Marines and then left is a veteran — but they did NOT retire from the military. They would not have TRICARE or TRICARE For Life. Only those who served long enough to retire (typically 20+ years) and who then become Medicare eligible get TRICARE For Life. **This is about 10% of all veterans.**

How Does It Work?

With TRICARE For Life, Medicare is your primary insurance. TRICARE For Life acts like a secondary insurance — it wraps around Medicare to cover much of what Medicare does not pay. In this way, it is similar to a Medicare Supplement Insurance plan.

Because Medicare is primary, you can:

- See any doctor who accepts Medicare — no network to worry about
- Get referrals without going through a gatekeeper
- Have most or all of your out-of-pocket costs covered

TRICARE For Life also includes prescription drug coverage, which is considered creditable by Medicare. So, you do NOT need to enroll in a Medicare Part D or MAPD plan to avoid a penalty.

What Are the Gaps?

TRICARE For Life does NOT include:

- Dental coverage
- Vision benefits
- Hearing benefits
- Fitness memberships (like SilverSneakers)
- Over-the-counter allowances

That is one reason a veteran or their spouse might want to add a Medicare Advantage plan — to access those extra benefits.

What Should Agents Know Before Recommending an MA Plan?

There are two key things to think about before recommending a Medicare Advantage plan to someone with TRICARE For Life:

1. Network Restrictions

With TRICARE For Life alone, there are no network rules. You can see any doctor who accepts Medicare. But if you enroll in a Medicare Advantage plan, you must follow that plan's network. This could limit which doctors you can see.

2. Claims Process

With TRICARE For Life only, the claims process is seamless. When you see a doctor, the provider sends the claim to Medicare. Medicare automatically sends the remainder to TRICARE For Life. The veteran usually owes nothing.

If you add a Medicare Advantage plan, this process changes. The provider now files a claim with the private insurance company. The insurance company does not automatically know about the veteran's TRICARE For Life coverage. The veteran may get a bill for a copay. They then need to ask the provider to file with TRICARE For Life — or file it themselves to get reimbursed.

Agent Tip: Be honest with veterans about these trade-offs. Some veterans may feel the extra benefits (dental, fitness, OTC allowance) are worth the extra steps. Others may prefer to keep things simple. Your job is to educate, not decide for them.

CHAMPVA

What Is It?

CHAMPVA stands for Civilian Health and Medical Program of the Department of Veterans Affairs. It is a health benefit program for certain family members of veterans — *not for veterans themselves.*

Who Can Use It?

A spouse or dependent child may qualify for CHAMPVA if the veteran:

- Is permanently and totally disabled due to a service-related condition, OR
- Died from a service-related condition, OR
- Was rated totally disabled at the time of death (even if death was not service-related), OR
- Died in the line of duty (but was not dishonorably discharged)

In short, CHAMPVA is usually connected to a serious or tragic circumstance in the veteran's life. It is a benefit that helps families who may have lost a loved one or are caring for a severely disabled veteran.

How Does It Work?

Like TRICARE For Life, CHAMPVA works alongside Medicare:

- Medicare A and B is the primary insurance
- CHAMPVA pays what Medicare does not (within covered services)
- No network restrictions — you can see any Medicare-accepted provider
- If both Medicare and CHAMPVA cover the service, you typically pay nothing out of pocket
- CHAMPVA includes prescription drug coverage (creditable, so no Medicare Part D required)

CHAMPVA's Meds by Mail Program

This is one of the most valuable — and most easy to lose — benefits under CHAMPVA. The Meds by Mail program delivers prescription medications right to the beneficiary's home at NO cost.

Critical Warning: If a CHAMPVA beneficiary enrolls in ANY Medicare prescription drug plan — either a stand-alone PDP or a Medicare Advantage plan with drug coverage (MAPD) — they LOSE access to the Meds by Mail program. This can be a very costly mistake. Do not recommend a plan with drug coverage to a CHAM VA beneficiary without making sure they understand this trade-off.

What Should Agents Know Before Recommending an MA Plan?

There are three important things to keep in mind:

1. Network Restrictions

Joining an MA plan means following that plan's network. CHAMPVA pays NO benefits for out-of-network care. So if the beneficiary joins an HMO-type MA plan and goes out of network, CHAMPVA will not pick up the rest of the bill either. If you recommend an MA plan, consider a PPO to reduce this risk.

2. Claims Process

Just like with TRICARE For Life, the seamless claims process goes away once you add an MA plan. The beneficiary may have to pay up-front and then file for reimbursement from CHAMPVA.

3. Meds by Mail

As described above — enrolling in any Medicare drug plan means losing the $0 Meds by Mail benefit. This is a big deal. Make sure the client understands what they are giving up.

Comparing Combinations of VA + Medicare Coverage

Coverage Option	Provider Access	Drug Coverage	Best For
VA Only	VA facilities and VA-approved providers	VA formulary	Veterans with strong VA access & service-connected needs
VA + Original Medicare + Medigap + Part D	Any Medicare provider nationwide + VA	VA or Part D (VA = creditable)	Veterans wanting maximum provider freedom & low cost-sharing
VA + Medicare Advantage (Part C/D)	MA network + VA for VA-authorized care	MA plan's Part D + VA formulary	Veterans wanting extra benefits (dental/vision) at lower premium
TRICARE For Life + Medicare	Any Medicare provider + VA	TRICARE Pharmacy	Military retirees — TFL covers Medicare cost-sharing
VA + Medicare (no supplement)	Any Medicare provider + VA	VA or separate Part D	Veterans comfortable with Original Medicare cost-sharing
CHAMPVA + Medicare A & B only	Any Medicare-accepting provider nationwide; no network restrictions	CHAMPVA Meds by Mail ($0 cost); no Part D needed or recommended	Eligible spouses/dependents comfortable with Original Medicare cost-sharing; want to preserve Meds by Mail
CHAMPVA + Medicare + Medigap (no Part D)	Any Medicare-accepting provider nationwide; no network restrictions	CHAMPVA Meds by Mail ($0 cost); Medigap adds no drug coverage — Meds by Mail remains intact	Eligible spouses/dependents wanting maximum cost-sharing protection and provider freedom while keeping Meds by Mail
CHAMPVA + Medicare Advantage (MAonly, no Part D)	MA plan network; CHAMPVA pays no out-of-network benefits — PPO plan strongly recommended	CHAMPVA Meds by Mail ($0 cost); MA-only plan carries no Part D — Meds by Mail is preserved	Eligible spouses/dependents wanting extra benefits (dental/vision/fitness) while keeping Meds by Mail; must use PPO

Doing Needs Analysis With Veterans

Every veteran's situation is different. Your job as an agent is to ask good questions and listen carefully. A proper needs analysis will help you figure out what coverage they already have, what gaps exist and what — if anything — they might want to add.

Questions to Ask Every Client

- Are you a veteran, or are you the spouse of a veteran?
- Have you ever applied for VA health care benefits?
- Do you currently use the VA healthcare system?
- Did you retire from the military, or did you serve and separate before retirement?
- Do you or your spouse have TRICARE or TRICARE For Life?
- Do you receive any CHAMPVA benefits?
- Are you enrolled in Medicare Part A and Part B?
- Are you happy with the care you get through the VA or your military coverage?
- Are there any benefits you feel like you are missing — such as dental, vision or fitness?
- Would you like help understanding what you may qualify for?

Pro Tip: Many veterans do not know they are eligible for VA health care benefits — or have never applied. Just asking "Have you ever applied for VA benefits?" can open doors and change lives. Helping a veteran access benefits they earned is one of the most valuable things you can do.

Helping Veterans Apply for Benefits

If a veteran has never applied for VA health care or other VA benefits, you can point them toward resources that can help:

- Veteran Service Officers (VSOs) — available in most counties, at no cost
- VA.gov — the official VA website for applying online
- Local VSO organizations such as the VFW, American Legion, or Disabled American Veterans

VSOs help veterans and their families apply for all types of VA benefits — not just healthcare. This includes VA home loans, educational benefits, burial benefits, disability compensation, and more.

How Agents Can Get Involved in the Veteran Community

Sure, serving veterans can be good for your business — but it's also a way to make real connections in your community and feel good about your ability to give back to those who have given a lot.

1. Always Ask the Veteran Questions

At every Medicare appointment, ask: "Are you a veteran, or the spouse of a veteran?" This simple question can open a powerful conversation. It builds rapport and helps you learn what benefits your client may have — or be missing.

2. Build a Relationship With a Veteran Service Officer

VSOs are in most counties. They help veterans apply for benefits. Think of them as a referral partner. You send veterans who need benefits help their way. In return, when veterans come to them needing health insurance, they can send those clients to you. It is a relationship that benefits everyone — especially the veteran.

3. Join a Veteran Organization

Many communities have:

- VFW posts (Veterans of Foreign Wars)
- American Legion posts
- Disabled American Veterans (DAV) chapters

These are active community organizations — not just social clubs. They hold fish fries, bingo nights, community service projects and more. Getting involved means showing up, volunteering and becoming a trusted member of the community. Agents who genuinely participate often become the go-to person for health insurance questions in that entire community.

Real Example: One agent joined an American Legion post and started volunteering — cooking at fish fries, helping at golf outings, donating to the food pantry. He ended up getting every health insurance referral from that post. The agents who just showed up once to hang out got nothing.

4. Connect With Veteran Councils

Many communities have veteran councils that address issues like affordable housing, mental health and veteran suicide prevention. Getting involved shows you care beyond just selling insurance — and it puts you in contact with veterans who have serious needs.

5. Participate in Veteran Fundraising Events

Events like 5K runs, half-marathons or golf tournaments that support veteran organizations are another great way to connect with the community. Even small gestures — like raising money for the Semper Fi Fund or another veterans' charity — show that you value their service.

6. Wear Red on Fridays

RED stands for "Remember Everyone Deployed." Wearing red on Fridays is a simple but symbolic way to show respect for service members who are currently deployed. It is a small gesture that can start meaningful conversations.

CONCLUSION: VETERANS ARE AMAZING

Veterans are everywhere in our communities, and they've given so much. This is your chance as an agent to make new connections WHILE serving their needs.

You've got this.