

[illegible]

PROVINCE: AB

PROGRAM OF CHOICE: 15 - VETERANS INDEPENDENCE PROGRAM

BENEFIT DESCRIPTION	BENEFIT CODE	EFF. DATE TERM. DATE	PRESCRIBER REQUIRED	RECOMMENDER REQUIRED	PRE-AUTHORIZATION		FREQUENCY	MAXIMUM AMOUNT \ VAC FEE	SUBSEQUENT PREAUTH.	COMMENT
ACCESS TO NUTRITION	345502	16-06-2003			DO	DO			Y	SEE NOTES 1,2,3
ADULT RESIDENTIAL CARE	345510	16-06-2003			DO	DO			Y	SEE NOTES 1,2,3,4
AMBULATORY HEALTH CARE	345500	16-06-2003			DO	DO			Y	SEE NOTES 1,2,3
GRANT GROUNDS MAINTENANCE	345515	01-01-2013			DO				Y	
GRANT HOUSEKEEPING	345514	01-01-2013			DO				Y	
GRANT PRIMARY CAREGIVER GROUNDS MAINTENANCE	345517	01-01-2013			DO				Y	
GRANT PRIMARY CAREGIVER HOUSEKEEPING	345516	01-01-2013			DO				Y	
HEALTH & SUPPORT SERVICES	345501	16-06-2003			DO	DO			Y	SEE NOTES 1,2,3
HOME ADAPTATIONS	345507	16-06-2003			DO	DO			Y	SEE NOTES 1,2,3

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INTERMEDIATE CARE	345512	16-06-2003			DO	DO			Y	SEE NOTES 1,2,3,4
PERSONAL CARE	345503	16-06-2003			DO	DO			Y	SEE NOTES 1,2,3
SOCIAL TRANSPORTATION	345506	16-06-2003			DO	DO			Y	SEE NOTES 1,2,3

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- NOTE 1 - PROVIDERS MAY OBTAIN AUTHORIZATION NUMBERS FOR APPROVED VETERANS INDEPENDENCE PROGRAM (VIP) SERVICES, AS WELL AS GENERAL INFORMATION BY CONTACTING THE VIP PROVIDER RELATIONS TOLL-FREE INQUIRY LINE 1-888-261-4033.
- NOTE 2 - THE CLIENT OR HIS/HER REPRESENTATIVE (IE. FAMILY MEMBER) MUST CONTACT THEIR DISTRICT OFFICE TO OBTAIN PRE-AUTHORIZATION. IF THERE HAS BEEN A CHANGE IN THE CLIENT'S CIRCUMSTANCES (IE. NEED FOR INCREASED SERVICES), THE CLIENT OR HIS/HER REPRESENTATIVE MUST CONTACT THEIR DISTRICT OFFICE.
- NOTE 3 - SEE THE VIP SCHEDULE OF BENEFITS FOR THE DESCRIPTION OF THE SERVICES COVERED UNDER EACH VIP SERVICE.
- NOTE 4 - MOST CLIENTS ARE RESPONSIBLE FOR A PORTION OF THE FEE CHARGED BY THE FACILITY; THE MONTHLY AMOUNT IS DETERMINED BY VAC. VAC IS NOT RESPONSIBLE FOR EXTRA EXPENSES SUCH AS CABLE, HAIR CUTS, LAUNDRY AND DRY- CLEANING.