

FWD ASSIST HQ / CARE TOOLKIT / NO. 20

Thirty and Sixty

There are actual numbers written into the regulation for how far you should have to drive and how long you should have to wait. Almost nobody knows them, so almost nobody measures.

The appointment is in four months and it is ninety minutes each way. You take it, because what else are you going to do, and you assume that is just how it works.

It is not just how it works. There are numbers in the regulation, and if your situation falls outside them that is one of the listed grounds for getting care in the community instead. But somebody has to notice, and the somebody is usually you.

WHAT IS IN HERE

1. The four numbers
2. The six doors, because distance is only one of them
3. The appointment log
4. A check before you accept an appointment

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The four numbers

These are called the designated access standards, and they are written down.

Type of care	Drive time	Wait time
Primary care, mental health, and non-institutional extended care	Within 30 minutes average driving time of your residence	Within 20 days of the date of request, unless you agreed to a later date
Specialty care	Within 60 minutes average driving time of your residence	Within 28 days of the date of request, unless you agreed to a later date

THE ONE LINE TO REMEMBER

Thirty minutes and twenty days. Sixty minutes and twenty-eight days.

Write those four numbers on something. They are the only thing standing between accepting a four-month wait and asking a question about it.

READ THE ESCAPE CLAUSE TOO

Both wait times say unless a later date has been agreed to by the veteran in consultation with the VA health care provider. That last part matters: it describes an agreement reached with a clinician, not a scheduler's offer accepted on the phone. Still worth knowing before you say fine to a date months out, because the standard is easier to raise before you have agreed to anything than after.

Six doors, not one

Distance and wait time is one of six listed grounds. People assume it is the only one, so they stop looking when they live twenty minutes away.

#	The condition, in plain terms
1	No VA facility offers the care or service you need.
2	VA does not operate a full-service VA medical facility in the state where you live.
3	You qualified under the older 2014 access law and still meet its conditions. The regulation ties this to residence in certain states, or to a past-care window that has since closed.
4	You contacted an authorized VA official to request the care, and VA determined it is not able to furnish it in a manner that complies with the designated access standards. Asking is part of the condition. This is the drive time and wait time door.
5	You and your referring clinician agree community care is in your best medical interest, considering distance, the nature of the care, how often you need it, timeliness, continuity, quality, and whether getting to a VA facility is an unusual or excessive burden.
6	VA determines the VA service line that would furnish your care is not meeting VA's own standards for quality.

DOOR FIVE IS THE ONE PEOPLE MISS

It is a conversation with your clinician, not a measurement, and how often you need the care is one of the listed factors. Excessive burden covers things a map does not: a road that closes in winter, no vehicle, a condition that makes the drive itself the problem, needing somebody to take a day off work to get you there. If that is your situation, say it out loud to the referring clinician rather than assuming they can see it.

Asking for it

NONE OF THIS APPLIES IN AN EMERGENCY

Everything on this page is about planned care. If you think your life or health is in danger, call 911 or go to the nearest emergency department. Those are VA's own words. Do not wait for authorization and do not drive past a closer hospital to reach a VA one.

Afterward there are rules about coverage. One is that VA has to be told within 72 hours that the emergency care started. Ask the hospital to notify VA right away, through VA's emergency care reporting portal or by phone. If they do not, you or somebody acting for you can. The instructions are at va.gov/resources/getting-emergency-care-at-non-v-a-facilities and the phone numbers are at va.gov/resources/helpful-v-a-phone-numbers.

That 72 hours is not the only clock. Getting paid back for emergency care at a non-VA facility is a separate claim with its own conditions, and the regulation gives 90 days to file it, running from the latest of a short list of events, usually the day the veteran left the facility. Being notified is not the same as being reimbursed. Ask about both. Get the care first and sort the paperwork after.

THE MISTAKE THAT COSTS MONEY

Community care generally has to be authorized before you go. Noticing you are outside the standards is not permission to book a local doctor and send VA the bill. Care obtained without authorization can end up being yours to pay for. Ask first, get it approved, then go.

IF THE ANSWER IS NO, OR NOTHING

The scheduler did not write the rules and often cannot change them. Two people can. Your referring clinician owns the best-medical-interest route, so raise the burden with them directly. And every VA medical center has a patient advocate whose job is exactly this kind of stuck. Ask for them by name and by title.

One more thing to ask: what drive time VA has on file for your address. VA calculates that figure with its own method rather than your odometer, so if your ninety minutes is their fifty-five, you need to know that before you argue about it.

One honest note. This is an eligibility framework, not a promise. Being eligible to elect community care is not the same as any particular request being approved, and the rules are administered by people who have to apply them to facts. What this page does is make sure you are asking about the right door instead of the only one you had heard of.

The appointment log

Keep this in the folder with your VA paperwork. One line every time you ask for care. It takes ten seconds and it is the only record of the date of request, which is the date the wait time is measured from.

NAME

DATE

The date you asked is not the date on the letter they send you later. Write down the day you actually picked up the phone or sent the message, and who you talked to. If a clinician put in a consult for you, note that date too, because the two can differ and you want both on record.

Date I asked	What for	Date offered	Drive time	Who I spoke to
<i>Ex: 5 Mar</i>	<i>Ortho, knee</i>	<i>12 Jun</i>	<i>abt 80 min</i>	<i>Denise, scheduling</i>

Also worth a line

Anything that makes the trip itself hard: no vehicle, a road or pass that closes, needing a driver, a condition that makes travel worse. Cancellations and reschedules, with dates. Anything you were told and by whom.

Before you accept an appointment

- ☐ I know which category this is, primary and mental health or specialty.
- ☐ I checked the offered date against 20 days or 28 days from when I asked.
- ☐ I checked the drive time against 30 minutes or 60 minutes.
- ☐ I did not agree to a later date without realizing that is what I was doing.
- ☐ If I need this care often, I said so, because frequency is a listed factor.
- ☐ I actually asked VA for the care, because asking is part of door four.
- ☐ If it is outside the standards, I said so and asked about community care.
- ☐ I raised anything that makes the trip an unusual burden, out loud.
- ☐ I asked my referring clinician about the best medical interest option.
- ☐ I wrote down the date I asked, not just the date they gave me.

HOW TO ASK WITHOUT MAKING IT A FIGHT

The person scheduling you did not write the rules and is usually working with what they have. A useful sentence: that date is more than twenty days from when I asked, can you tell me whether I am eligible for community care for this. That is a question, it is answerable, and it puts the standard on the table without accusing anybody of anything.

NONE OF THIS COSTS ANYTHING TO ASK ABOUT

Asking whether you qualify for community care is free, and so is the help. Every VA medical center has a patient advocate whose job is exactly this. The program pages are at va.gov/communitycare and the patient advocate page is at va.gov/health/patientadvocate.

If somebody offers to get you approved for community care for a fee, or to enroll you in VA health care for a fee, walk away. Enrollment is free, the eligibility decision is VA's to make, and nobody outside VA can sell you one. Report it to the VA Office of Inspector General at 1-800-488-8244.

Where this is written down

The emergency care rules, including the requirement that VA be notified within 72 hours, are in 38 CFR 17.4020. The 90 days to file a claim for payment or reimbursement of emergency treatment, and what that period runs from, are in 38 CFR 17.1004. The six eligibility conditions for community care are in 38 CFR 17.4010. The designated access standards, the 30 and 60 minute average driving times and the 20 and 28 day wait times measured from the date of request, are in 38 CFR 17.4040, which also carries the phrase unless a later date has been agreed to by the veteran in consultation with the VA health care provider.

Regulation text: [ecfr.gov](https://www.ecfr.gov), Title 38, Part 17, sections 17.1004, 17.4010, 17.4020 and 17.4040. Access standards and program details change, and current information is at va.gov. Confirm before you rely on this.

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Current as of October 2026. Regulations change. Check for a newer version before you rely on this.

If working on this is bringing things up, the Veterans Crisis Line is 988 then press 1, or text 838255. Family members can call it too.