

Add an Appointment

| Facility Name (*Req | uired) | | |
|--|---------------------|-------------|----------|
| Where was this app | oointment? | | |
| What do I do if my | facility isn't list | ed? | |
| Tucson VA Medical Center - Tucson - AZ | | | V |
| | | | |
| Date (*Required) | | | |
| Month | Day | Year | |
| <u> </u> | | | |
| | | | |
| Time (*Required) | | | |
| Time | AM/PM | | |
| | | | |
| | | J | |
| Appointment Name | (*Required) | | |
| Give your appointme | ent a descriptive | name. | |
| | | | |
| | | | |
| Appointment Type (| *Required) | | |
| Other | | | ~ |
| Did samulata tia | iit | /*D | |
| Did you complete th Yes | is appointment? | (Kequirea) | |
| O No | | | |
| | | | |

When you create a claim for an appointment outside of a VA facility (also known as community care), attach confirmation from

your provider that you completed the appointment to expedite claim processing.

If you do not attach proof of attendance, you may experience a longer processing time to payment for your mileage reimbursement claim.



Add New Appointment