

## Claim Attributes Job Aid

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## Claim Labels Tab

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EP Code	Claim Label	Business Rule	Authority
011	<b>BDD-Initial 8+ issues</b>	Initial BDD claim containing eight issues or more.	Claim label with corresponding EP must be used when there is an initial BDD claim received within 60 to 180 days prior to date of discharge that contains eight issues or more. <b>This claim label should only be used by the BDD intake sites.</b> (M21-1MR III.i.2.A.2.a and b)
021	<b>BDD New</b>	BDD claim filed for the first time, but not previously adjudicated.	Claim label with corresponding EP should be applied when there is a claim for service connection for a new disability not previously claimed. <b>This claim label should only be used by the BDD intake sites.</b>
021	<b>BDD-Supplemental</b>	Supplemental BDD claim where disabilities are not static.	Claim label with corresponding EP should be applied when there is a supplemental BDD claim to reopen a previously claimed issue or for increased evaluation of a previously service connected issue. <b>This claim label should only be used by the BDD intake sites.</b>
111	<b>BDD-Initial</b>	Initial BDD claim containing seven issues or less.	Claim label with corresponding EP should be applied when there is an initial BDD claim containing seven issues or less. <b>This claim label should only be used by the BDD intake sites.</b>
290	<b>BDD-Resumption of Compensation</b>	BDD claim resumption where disabilities are static.	Claim label with corresponding EP should be applied if a service member files a Pre-Discharge claim, and the claim is for resumption of compensation for static disabilities. <b>This claim label should only be used by the BDD intake sites.</b>
290	<b>BDD-LGY Determination</b>	BDD claim which needs a loan guaranty determination.	Claim label with corresponding EP should be applied when there is a request for an eligibility determination from a Regional Loan Center (RLC) and the service members Pre-Discharge claim has not yet been decided. <b>This claim label should only be used by the BDD intake sites.</b>
095	<b>Pre-D Memo Rating for Ch31 Purposes (095)</b>	To be used when a Pre-Discharge intake site receives a VA Form 28-1900 for Chapter 31 benefits	Claim label with corresponding EP should be applied when an intake site receives a VA Form 28-1900 for Chapter 31 benefits.
010	<b>eBenefits 526EZ-Initial Live Comp 8 + Issues (010)</b>	Identifies initial live compensation claims filed via eBenefits (VDC) with 8 or more issues.	Claim label with corresponding EP should be applied when there is an initial compensation claim with eight issues or more received through eBenefits. <b>This is a system generated claim label and EP that is automatically applied when an electronic claim fitting the criteria is received via eBenefits.</b>

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EP Code	Claim Label	Business Rule	Authority
017	eBenefits 526EZ-Pre Discharge 8 + Issues (010)	Identifies initial Pre-discharge claims filed via eBenefits (VDC) that with 8 or more issues.	Claim label with corresponding EP should be applied when an initial Pre-Discharge compensation claim with eight issues or more is received through eBenefits. <b>This is a system generated claim label automatically applied when an electronic claim is received via eBenefits with 90-180 days remaining on active duty.</b>
027	eBenefits 526EZ-Pre Discharge (020)	Identifies subsequent Pre-discharge claims filed via eBenefits (VDC).	Claim label with corresponding EP should be applied when a subsequent Pre-Discharge claim is received through eBenefits. <b>This is a system generated claim label that is automatically applied when an electronic claim is received via eBenefits with 90-180 days remaining on active duty.</b>
020	eBenefits 526EZ-Supplemental (020)	Identifies subsequent claims filed via eBenefits (VDC).	Claim label with corresponding EP should be applied when a subsequent compensation claim is received through eBenefits. <b>This is a system generated claim label and EP that is automatically applied when an electronic claim fitting the criteria is received via eBenefits.</b>
110	eBenefits 526EZ-Initial Live Comp<8 Issues (110)	Identifies initial live compensation claims filed via eBenefits (VDC) with less than 8 issues.	Claim label with corresponding EP should be applied when an initial compensation claim with seven issues or less is received through eBenefits. <b>This is a system generated claim label and EP that is automatically applied when an electronic claim fitting the criteria is received via eBenefits.</b>
110	eBenefits 526EZ-Pre Discharge<8 Issues (110)	Identifies initial Pre-discharge claims filed via eBenefits (VDC) with less than 8 issues.	Claim label with corresponding EP should be applied when an initial compensation claim with seven issues or less is received through eBenefits. <b>This is a system generated claim label and EP that is automatically applied when an electronic claim fitting the criteria is received via eBenefits.</b>
010	eBenefits 526EZ-Exclusion Pre Dis 8 + Issues (010)	Identifies initial Pre-discharge claims filed via eBenefits (VDC) with 8 or more issues.	Claim label with corresponding EP should be applied when an initial Pre-Discharge compensation claim with eight issues or more is received through eBenefits. <b>This is a system generated claim label for electronic claims received via eBenefits with 1-89 days remaining on active duty.</b>
020	eBenefits 526EZ-Exclusion Pre-Dis (020)	Identifies subsequent Pre-discharge claims filed via eBenefits (VDC).	Claim label with corresponding EP should be applied when a subsequent Pre-Discharge compensation claim is received through eBenefits. <b>This is a system generated claim label for electronic claims received via eBenefits with 1-89 days remaining on active duty.</b>

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EP Code	Claim Label	Business Rule	Authority
110	<b>eBenefits 526EZ-Exclusion Pre-Dis &lt;8 Issues (110)</b>	Identifies initial Pre-discharge claims filed via eBenefits (VDC) with less than 8 issues.	Claim label with corresponding EP should be applied when an initial Pre-Discharge compensation claim with less than eight issues is received through eBenefits. <b>This is a system generated claim label for electronic claims received via eBenefits with 1-89 days remaining on active duty.</b>
130	<b>eBenefits Dependency Adjustment Reject</b>	Identifies dependency claims filed via eBenefits (VDC) that could not be processed automatically using RBPS.	Claim label with corresponding EP should be applied when a dependency adjustment, received through eBenefits, is required and was unable to be processed by RBPS. <b>This is a system generated claim label and EP that is automatically applied when an electronic claim fitting the criteria is received via eBenefits.</b>
130	<b>eBenefits Dependency Adjustment</b>	Identifies dependency claims filed via eBenefits (VDC).	Claim label with corresponding EP should be applied when a dependency adjustment, received through eBenefits, is required. <b>This is a system generated claim label and EP that is automatically applied when an electronic claim fitting the criteria is received via eBenefits.</b>
130	<b>eBenefits School Attendance</b>	Identifies school attendance claims filed via eBenefits (VDC).	Claim label with corresponding EP should be applied when a school attendance dependency claim is filed through eBenefits. <b>This is a system generated claim label and EP that is automatically applied when an electronic claim fitting the criteria is received via eBenefits.</b>
130	<b>eBenefits School Attendance Reject</b>	Identifies school attendance claims filed via eBenefits (VDC) that could not be processed automatically using RBPS.	Claim label with corresponding EP should be applied when a school attendance dependency claim is filed through eBenefits, and was unable to be processed by RBPS. <b>This is a system generated claim label and EP that is automatically applied when an electronic claim fitting the criteria is received via eBenefits.</b>
400	<b>eBenefits 526EZ Initial Live Comp&lt;8 (400)</b>	Identifies initial live compensation claims with less than 8 issues that are filed via eBenefits (VDC) when there is already a pending claim.	<b>System generated EP and claim label.</b>
400	<b>eBenefits 526EZ-Initial Live Comp 8 + Issues (400)</b>	Identifies initial live compensation claims with 8 or more issues that are filed via eBenefits (VDC) when there is already a pending claim.	<b>System generated EP and claim label.</b>
400	<b>eBenefits 526EZ-Supplemental (400)</b>	Identifies subsequent claims that are filed via eBenefits (VDC) when there is already a pending claim.	<b>System generated EP and claim label.</b>

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EP Code	Claim Label	Business Rule	Authority
400	<b>Exclusion Pre-Discharge 8+ Issues (400)</b>	This EP is established if a manually created BDD/QS claim is CEST and the service member later submits other claim documents through eBenefits	<b>System generated EP and claim label.</b>
400	<b>Exclusion Pre-Discharge &lt;8 Issues (400)</b>	This EP is established if a manually created BDD/QS claim is CEST and the service member later submits other claim documents through eBenefits	<b>System generated EP and claim label.</b>
400	<b>Exclusion Pre-Dis-Supplemental (400)</b>	This EP is established if a manually created BDD/QS claim is CEST and the service member later submits other claim documents through eBenefits	<b>System generated EP and claim label.</b>
010	<b>DES Initial Compensation 8 + Issues</b>	Initial DES claim containing eight issues or more.	Claim label with corresponding EP should be applied when there is an initial DES claim containing eight issues or more.
010	<b>DES Initial Comp 8 +/- Pension Dual Claim</b>	Initial DES claim for disability compensation and pension containing eight issues or more.	Claim label with corresponding EP should be applied when there is an initial DES claim for disability compensation and pension containing eight issues or more. (M21-MR III.i.2.D.28.e., August 2014 VDPO Monthly Teleconference)
020	<b>DES Supplemental</b>	Supplemental IDES claim	Claim label with corresponding EP should be applied when there is a subsequent IDES claim received. (M21-MR III.i.2.D.28.e., August 2014 VDPO Monthly Teleconference)
110	<b>DES Initial Live Comp &lt; 8 Issues</b>	Initial IDES claim containing seven issues or less.	Claim label with corresponding EP should be applied to an initial IDES claim with seven issues or less. (M21-MR III.i.2.D.28.e., August 2014 VDPO Monthly Teleconference)
110	<b>DES Initial Live Comp/Pension</b>	Initial IDES claim containing eight issues or more.	Claim label with corresponding EP should be applied when there is an initial IDES claim for disability compensation and pension containing seven issues or less. (M21-MR III.i.2.D.28.e., August 2014 VDPO Monthly Teleconference)
310	<b>IDES Rating - Proposed</b>	PCLR to take credit for a completed proposed rating; unless Service Member is not on Active Duty in which case 310 is not used.	Claim label with corresponding EP should be used for a PCLR to take credit for a completed proposed rating; unless service member is not on Active Duty. (M21-1 MR III.i.2.D.21)

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EP Code	Claim Label	Business Rule	Authority
689	<b>Disability Evaluation System Rating – Proposed</b>	Tracking EP when an IDES proposed rating decision is present.	<p>DRAS completes the preliminary rating under EP 689. Generally, the EP 689 is the only EP controlling the IDES claim until the service member is discharged--when it is cleared and a rating EP is established under which the Final rating is conducted.</p> <p>The only instance in which an IDES case would have concurrent 689 and rating EP is when a Veteran (not on Active duty) has a pending VA claim before he or she is referred to IDES.</p> <p>Note: The 689 controls the record through all stages of VA responsibility, not only the proposed rating. Even IDES claims that never get a proposed rating are controlled by a pending EP 689 (such as cases where the service member is found fit by MEB or PEB). (M21-1MR III.i.2.D.)</p>
070	<b>PMC-Cert to BVA</b>	Claim for appeal transferred to BVA.	Claim label with corresponding EP should be applied when there is an appeal transferred to BVA. <b>This claim label should only be used by the Pension Management Centers or Appeals Management Centers.</b>
070	<b>PMC-Supplemental Statement of the Case</b>	Claim established for each SOC mailed to claimant.	Claim label with corresponding EP should be applied for each statement of case mail to the claimant. <b>This claim label should only be used by the Pension Management Centers.</b>
120	<b>PMC-Reopened Pension</b>	Establish for disability and death pension claims.	Claim label with corresponding EP should be applied when there is a reopen pension claim. <b>This claim label should only be used by the Pension Management Centers.</b>
120	<b>PMC-Incompetency Review - Pension</b>	Claim established when medical evidence is received pertaining to the incompetency of the claimant after a pension claim as been previously filed or adjudicated.	Claim label with corresponding EP should be applied when there is a evidence of incompetency of the claimant received and there was a previously filed and adjudicated pension claim. <b>This claim label should only be used by the Pension Management Centers.</b>
120	<b>PMC-Special Monthly Pension</b>	Establish claim for special monthly pension based on aid and attendance or housebound status, including claims based on nursing home status.	Claim label with corresponding EP should be applied when there is a claim for special monthly pension based on aid and attendance or housebound. This also includes claims based on nursing home status as well. <b>This claim label should only be used by the Pension Management Centers.</b>
120	<b>PMC-Reopened Helpless Child</b>	Establish claim for helpless children based on pension entitlement.	Claim label with corresponding EP should be applied when there is a claim for helpless child based on pension entitlement. <b>This claim label should only be used by the Pension Management Centers.</b>

## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
130	<b>PMC-Apportionment</b>	Establish claims for apportionment involving entitlement of the veteran, his/her dependents or beneficiaries to benefits based on relationship or dependency.	Claim label with corresponding EP should be applied when there is a claim for apportionment involving entitlement of the Veteran and their dependents or beneficiaries. <b>This claim label should only be used by the Pension Management Centers.</b>
130	<b>PMC DIC Dependency Issue</b>	Establish claim for DIC.	Claim label with corresponding EP should be applied when there is a claim for DIC and dependency. <b>This claim label should only be used by the Pension Management Centers.</b> (M21-4 Appendix B.)
130	<b>PMC Automated Dependency 686c Reject</b>	Rejected Rules Based Processing System claims for dependency determinations involving entitlement of the veteran, his/her dependents or beneficiaries to benefits based on relationship or dependency.	Claim label with corresponding EP should be applied when there is a rejected rules based processing system claim for dependency determinations. <b>This is a system generated claim label and EP that is automatically applied.</b>
130	<b>PMC-Dependency</b>	Establish claims for dependency determinations involving entitlement of the veteran, his/her dependents or beneficiaries to benefits based on relationship or dependency.	Claim label with correspond EP should be applied when there is a claim for dependency. <b>This claim label should only be used by the Pension Management Centers.</b> (M21-4 Appendix B)
130	<b>PMC Automated Dependency 686c</b>	Rules Based Processing System claims for dependency determinations involving entitlement of the veteran, his/her dependents or beneficiaries to benefits based on relationship or dependency.	Claim label with corresponding EP should be applied when there is a rules based processing system claim for dependency determinations. <b>This is a system generated claim label and EP that is automatically applied.</b>
130	<b>PMC-Social Security Match</b>	Established verifying Veterans' records with duplicate dependents or incorrect social security account numbers.	Claim label with corresponding EP should be applied when there is a need to correct and verify a Veterans' record with duplicate dependents and/or incorrect social security numbers. <b>This claim label should only be used by the Pension Management Centers.</b>
130	<b>PMC Report of Death of Beneficiary</b>	Establish claim due to report of death.	Claim label with corresponding EP should be applied when information has been received that the Veteran and/or Beneficiary has died. <b>This claim label should only be used by the Pension Management Centers.</b>
130	<b>PMC Automated School Attendance 674</b>	Rules Based Processing System claims for increased benefits, or continuation of benefits, because of dependency including for children attending school after age 18.	Claim label with corresponding EP should be applied when there is a rules based processing system claim for dependency determinations based on school attendance. <b>This is a system generated claim label and EP that is automatically applied.</b>

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EP Code	Claim Label	Business Rule	Authority
130	<b>PMC Automated School Attendance 674 Reject</b>	Rejected Rules Based Processing System claims for increased benefits, or continuation of benefits, because of dependency including for children attending school after age 18.	Claim label with corresponding EP should be applied when there is a rejected rules based processing system claim for dependency determinations based on school attendance. <b>This is a system generated claim label and EP that is automatically applied.</b>
135	<b>PMC-Hospitalization Adjustment</b>	Applies to all reductions based on hospitalization and subsequent resumptions based on discharge from hospitalization.	Claim label with corresponding EP should be applied when there is a reduction based on any hospital and/or subsequent resumptions based on discharge from the hospital. <b>This claim label should only be used by the Pension Management Centers.</b>
140	<b>PMC-Initial S/C Death</b>	Initial DIC and death compensation claims for service-connected death (including accrued) if no prior claim for death benefits has been filed and adjudicated.	Claim label with corresponding EP should be applied when there is an initial DIC and/or death compensation claim for a service-connected death (including accrued). <b>This claim label should only be used by the Pension Management Centers.</b>
140	<b>PMC-Initial S/C Death/Pension</b>	Initial dual claims for service-connected death and death pension (including accrued) if no prior claim for death benefits has been filed or adjudicated.	Claim label with corresponding EP should be applied when there is an initial dual claim for service connected death and death pension (including accrued). <b>This claim label should only be used by the Pension Management Centers.</b>
150	<b>PMC-Election</b>	Establish claim for pension election.	Claim label with corresponding EP should be applied when there is a claim for pension election. <b>This claim label should only be used by the Pension Management Centers.</b>
150	<b>PMC-Income - Reopened Claim</b>	Establish claim for pension previously terminated or denied.	Claim label with corresponding EP should be applied when there is a claim for pension that was previously terminated or denied. <b>This claim label should only be used by the Pension Management Centers.</b>
150	<b>PMC-Income Adjustment</b>	Adjustments due to change in income or net worth.	Claim label with corresponding EP should be applied when adjustments due to a change in income or net worth is warranted. <b>This claim label should only be used by the Pension Management Centers.</b>
150	<b>PMC-Medical Expense Report</b>	Adjustment due to change in medical expenses.	Claim label with corresponding EP should be applied when adjustments due to a change in expenses is warranted. <b>This claim label should only be used by the Pension Management Centers.</b>
150	<b>PMC-Net Worth</b>	Net worth determinations under 38 U.S.C 1710	Claim label with corresponding EP should be applied when a net worth determination is warranted based on 38 USC 1710. <b>This claim label should only be used by the Pension Management Centers.</b>
150	<b>PMC-Railroad Retirement</b>	Establish for income verification if in receipt of railroad retirement.	Claim label with corresponding EP should be applied if income verification is warranted based on receipt of railroad retirement. <b>This claim label should only be used by the Pension Management Centers.</b>

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EP Code	Claim Label	Business Rule	Authority
150	<b>PMC-Soc Sec Admn Match</b>	Establish for income verification if in receipt of Social Security benefits. Used when working a write out message.	Claim label with corresponding EP should be applied if income verification is warranted based on receipt of social security benefits. This claim label is used when a user is working a write out message. <b>This claim label should only be used by the Pension Management Centers.</b>
150	<b>PMC-TDIP (Total Disability Income Provision)</b>	Establish claim for adjustment to improved pension due to countable TDIP payments.	Claim label with corresponding EP should be applied for adjustments to improve pension due to countable TDIP payments. <b>This claim label should only be used by the Pension Management Centers.</b>
154	<b>PMC IVM Category 10 (\$1000 to \$1999)</b>	Establish claim for income verification for pension and parents' DIC.	Claim label with corresponding EP should be applied to establish a claim for income verification for pension and parents' DIC between \$1000 to \$1999. <b>This claim label should only be used by the Pension Management Centers.</b>
154	<b>PMC IVM Category 1 (over \$10,000)</b>	Establish claim for income verification for pension and parents' DIC.	Claim label with corresponding EP should be applied to establish a claim for income verification for pension and parents' DIC over \$10,000. <b>This claim label should only be used by the Pension Management Centers.</b>
154	<b>PMC IVM Category 2 (\$9000 to \$9999)</b>	Establish claim for income verification for pension and parents' DIC.	Claim label with corresponding EP should be applied to establish a claim for income verification for pension and parents' DIC between \$9000 to \$9999. <b>This claim label should only be used by the Pension Management Centers.</b>
154	<b>PMC IVM Category 3 (\$8000 to \$8999)</b>	Establish claim for income verification for pension and parents' DIC.	Claim label with corresponding EP should be applied to establish a claim for income verification for pension and parents' DIC between \$8000 to \$8999. <b>This claim label should only be used by the Pension Management Centers.</b>
154	<b>PMC IVM Category 4 (\$7000 to \$7999)</b>	Establish claim for income verification for pension and parents' DIC.	Claim label with corresponding EP should be applied to establish a claim for income verification for pension and parents' DIC between \$7000 to \$7999. <b>This claim label should only be used by the Pension Management Centers.</b>
154	<b>PMC IVM Category 5 (\$6000 to \$6999)</b>	Establish claim for income verification for pension and parents' DIC.	Claim label with corresponding EP should be applied to establish a claim for income verification for pension and parents' DIC between \$6000 to \$6999. <b>This claim label should only be used by the Pension Management Centers.</b>

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EP Code	Claim Label	Business Rule	Authority
154	<b>PMC IVM Category 6 (\$5000 to \$5999)</b>	Establish claim for income verification for pension and parents' DIC.	Claim label with corresponding EP should be applied to establish a claim for income verification for pension and parents' DIC between \$5000 to \$5999. <b>This claim label should only be used by the Pension Management Centers.</b>
154	<b>PMC IVM Category 7 (\$4000 to \$4999)</b>	Establish claim for income verification for pension and parents' DIC.	Claim label with corresponding EP should be applied to establish a claim for income verification for pension and parents' DIC between \$4000 to \$4999. <b>This claim label should only be used by the Pension Management Centers.</b>
154	<b>PMC IVM Category 8 (\$3000 to \$3999)</b>	Establish claim for income verification for pension and parents' DIC.	Claim label with corresponding EP should be applied to establish a claim for income verification for pension and parents' DIC between \$3000 to \$3999. <b>This claim label should only be used by the Pension Management Centers.</b>
154	<b>PMC IVM Category 9 (\$2000 to \$2999)</b>	Establish claim for income verification for pension and parents' DIC.	Claim label with corresponding EP should be applied to establish a claim for income verification for pension and parents' DIC between \$2000 to \$2999. <b>This claim label should only be used by the Pension Management Centers.</b>
154	<b>PMC-Income Verification Match</b>	Establish claim for income verification for pension and parents' DIC.	Claim label with corresponding EP should be applied when there is a need for income verification for pension and parents' DIC. <b>This claim label should only be used by the Pension Management Centers.</b>
160	<b>PMC-Burial, Plot, Headstone, Marker, Engraving</b>	Applies to claims for statutory burial allowance, plot allowance, and claim for reimbursement of headstone, marker, or additional engraving expenses.	Claim label with corresponding EP should be applied when there is a claim for statutory burial allowance, plot allowance and/or claim for reimbursement of headstones, marker or additional engraving expenses. <b>This claim label should only be used by the Pension Management Centers.</b>
160	<b>PMC-Burial Allowance</b>	Applies to claims for statutory burial allowance and reopened claims for reconsideration of a prior decision	Claim label with corresponding EP should be applied when there is a claim for statutory burial allowance and reopened claims for reconsideration of a prior burial allowance decision. <b>This claim label should only be used by the Pension Management Centers.</b>
160	<b>PMC-Plot Allowance</b>	Applies to claims for statutory plot allowance and reopened claims for reconsideration of a prior decision.	Claim label with corresponding EP should be applied when there is a claim for statutory plot allowance and reopened claims for reconsideration of a prior plot allowance decisions. <b>This claim label should only be used by the Pension Management Centers.</b>

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EP Code	Claim Label	Business Rule	Authority
160	PMC SC Burial	Establish claim for statutory burial allowance.	Claim label with corresponding EP should be applied when there is a claim for initial statutory burial allowance. <b>This claim label should only be used by the Pension Management Centers.</b>
165	PMC Accrued Non-Veteran	Applies to claims for compensation or pension payable as reimbursement of the expenses of last sickness and burial or claims for an accrued benefits payable based on relationship when EP 140 or 190 is not involved.	Claim label with corresponding EP should be applied when there is a claim for compensation and/or pension payable as reimbursement of the expenses of last sickness, burial, and/or claims for an accrued benefits payable based on a relationship when a EP 140 or 190 is not involved. This claim label only applied for non-Veteran claimants. <b>This claim label should only be used by the Pension Management Centers.</b>
165	PMC-Accrued	Applies to claims for compensation or pension payable as reimbursement of the expenses of last sickness and burial or claims for an accrued benefits payable based on relationship when EP 140 or 190 is not involved.	Claim label with corresponding EP should be applied when there is a claim for compensation and/or pension payable as reimbursement of the expenses of last sickness, burial, and/or claims for an accrued benefits payable based on a relationship when a EP 140 or 190 is not involved. This claim label only applied for Veteran claimants. <b>This claim label should only be used by the Pension Management Centers.</b>
165	PMC Substitution of Claimant	Public Law 110-389, § 212(a), authorized a surviving spouse to be substituted for a deceased veteran in a pending claim for benefits for the purpose of processing the claim to completion if substitution is sought within one year of the veteran's death. Under section 5121A, a substituted claimant – as opposed to an accrued benefits claimant – is allowed to submit evidence. Congress determined that section 5121A would authorize substitution only in the case of a claimant who died on or after the date of the statute's enactment on October 10, 2008.	Claim label with correspond EP should be used in accordance with Public Law 110-389 § 212(a), which authorized a surviving spouse to be substituted for a deceased veteran in a pending claim for benefits for the purpose of processing the claim to completion if substitution is sought within one year of the veteran's death. <b>This claim label should only be used by the Pension Management Centers.</b>
170	PMC-Appeal Action	End product used for general appeal control. No work credit is attached. EP170 must be PCAN'd upon final disposition.	Claim label with corresponding EP should be applied for tracking an appeal pending at the pension management center and must be PCAN'd upon final disposition as no work credit is received. <b>This claim label should only be used by the Pension Management Centers.</b>

## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
170	PMC - Form 9	Applies to appellant returning the Form 9.	Claim label with corresponding EP should be applied when the appellant returns their Form 9. <b>This claim label should only be used by the Pension Management Centers.</b>
170	PMC - Notice of Disagreement	Applies to appellant submitting an NOD.	Claim label with corresponding EP should be applied when the appellant submits a notice of disagreement. <b>This claim label should only be used by the Pension Management Centers.</b>
170	PMC - Remand	Applies to cases remanded from BVA.	Claim label with corresponding EP should be applied when the appeal is remanded from BVA. <b>This claim label should only be used by the Pension Management Centers.</b>
172	PMC - BVA Grant	Applies to BVA-issued grants.	Claim label with corresponding EP should be applied when there is a BVA decision and issues were granted. <b>This claim label should only be used by the Pension Management Centers.</b>
172	PMC - Full Grant - Form 9	Applies to when a Vet submits a Form 9 and we are able to grant a Full Grant of benefits sought on appeal.	Claim label with corresponding EP should be applied when the Veteran submits a form 9 and there is full grant of benefits sought on appeal. <b>This claim label should only be used by the Pension Management Centers.</b>
172	PMC - Full Grant - Notice of Disagreement	Applies when a Vet submits his Notice of Disagreement and based on the evidence we can grant a Full Grant of Benefits sought on appeal.	Claim label with corresponding EP should be applied when the Veteran submits a notice of disagreement and based on the evidence has been granted full benefits sought on appeal. <b>This claim label should only be used by the Pension Management Centers.</b>
172	PMC-Grant of Benefits	Applies to grant of benefits.	Claim label with corresponding EP should be applied when there is a grant of benefits sought on appeal. <b>This claim label should only be used by the Pension Management Centers.</b>
172	PMC - Partial Grant - Form 9	Applies when a Vet submits a Form 9 and based on the evidence we can grant a Partial Grant of the benefits sought on Appeal.	Claim label with corresponding EP should be applied when the Veteran submits a form 9 and there is a partial grant of benefits sought on appeal. <b>This claim label should only be used by the Pension Management Centers.</b>
172	PMC-Statement of the Case	Applies to issuance of a statement of the case in response to a valid notice of disagreement. Consideration of additional evidence submitted with the notice of disagreement is part of EP 172 (generic definition of EP172).	Claim label with corresponding EP should be applied when there is a statement of case in response to a valid notice of disagreement. Consideration of additional evidence submitted with the notice of disagreement is part of this claim label. <b>This claim label should only be used by the Pension Management Centers.</b>

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EP Code	Claim Label	Business Rule	Authority
172	PMC - Traditional SOC Released	Established when DRO completes and releases an SOC.	Claim label with corresponding EP should be applied when the DRO completed and releases a statement of case. <b>This claim label should only be used by the Pension Management Centers.</b>
173	PMC - DRO Informal Conference	One-time PCLR for hearing	Claim label with corresponding EP should be applied for a one time PCLR for an informal conference. <b>This claim label should only be used by the Pension Management Centers.</b>
173	PMC-Formal Hearing by Other Than DRO	Established when a hearing is completed by staff other than DRO.	Claim label with corresponding EP should be applied when a hearing is completed by users other than a DRO. <b>This claim label should only be used by the Pension Management Centers.</b>
173	PMC-Informal Hearing by DRO	One-time PCLR for hearing.	Claim label with corresponding EP should be applied for a one time PCLR for an informal hearing by a DRO. <b>This claim label should only be used by the Pension Management Centers.</b>
173	PMC - Non DRO Hearing Held	Established when a hearing is completed by staff other than DRO (Same as 173 above).	Claim label with corresponding EP should be applied for a one time PCLR for an informal hearing by a non-DRO. <b>This claim label should only be used by the Pension Management Centers.</b>
174	PMC-DRO Decision	Established when an appellant chooses a DRO review	Claim label with corresponding EP should be applied for an appellant chooses a DRO review. <b>This claim label should only be used by the Pension Management Centers.</b>
174	PMC - Full Grant NOD - DRO	Established when there is a full grant by a DRO	Claim label with corresponding EP should be applied when there is full grant as a result of an appeal decision reached by a DRO. <b>This claim label should only be used by the Pension Management Centers.</b>
174	PMC-Formal Hearing by DRO	Established when a formal hearing is conducted by a DRO.	Claim label with corresponding EP should be applied when a formal hearing is conducted by a DRO. <b>This claim label should only be used by the Pension Management Centers.</b>
174	PMC - Partial Grant NOD - DRO	Established when there is a partial grant by a DRO	Claim label with corresponding EP should be applied when there is partial grant as a result of an appeal decision reached by a DRO. <b>This claim label should only be used by the Pension Management Centers.</b>
174	PMC - SOC - DRO	Established when a DRO completes an SOC when there is a denial.	Claim label with corresponding EP should be applied when a DRO completes a SOC when there is denial. <b>This claim label should only be used by the Pension Management Centers.</b>
180	PMC-Initial Live Pension	Establish claim for original live pension.	Claim label with corresponding EP should be applied when there is an original live pension claim pending. <b>This claim label should only be used by the Pension Management Centers.</b>

## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
190	PMC-Initial Death Pension	Establish claim for initial death pension.	Claim label with corresponding EP should be applied when there is an initial death pension claim pending. <b>This claim label should only be used by the Pension Management Centers.</b>
290	PMC-Bureau of Supplemental Security Income Rqst	Income verification request received from Social Security Administration.	Claim label with correspond EP should be applied when there is an income verification received from the social security administration. <b>This claim label should only be used by the Pension Management Centers.</b>
290	PMC DIC Eligibility Determination	Establish claim to determine DIC eligibility.	Claim label with correspond EP should be applied when there is a claim to determine DIC eligibility. <b>This claim label should only be used by the Pension Management Centers.</b>
290	PMC DIC Fiduciary Adjustment	Establish claim to adjust due to appointment or discharge of fiduciaries.	Claim label with corresponding EP should be applied when there is a DIC claim to adjust appointment or discharge of fiduciaries. <b>This claim label should only be used by the Pension Management Centers.</b>
290	PMC-Disappearance of Veteran	Establish to action upon disappearance of the veteran.	Claim label with corresponding EP should be applied when a reasonable effort has been taken to located the Veteran but the Veteran has disappeared. <b>This claim label should only be used by the Pension Management Centers.</b>
290	PMC-Eligibility Determination	Establish claim to determine pension eligibility.	Claim label and associated EP should be applied when there is a claim to determine pension eligibility. <b>This claim label should only be used by the Pension Management Centers.</b>
290	PMC-Fiduciary Adjustment	Establish claim to adjust due to appointment or discharge of fiduciaries.	Claim label with associated EP should be applied when there is a pension claim to adjust appointment or discharge of fiduciaries. <b>This claim label should only be used by the Pension Management Centers.</b>
290	PMC-Hospitalization Eligibility	Establish to determine hospital eligibility.	Claim label with associated EP should be applied to determine hospital eligibility. <b>This claim label should only be used by the Pension Management Centers.</b>
290	PMC-Incarceration Adjustment	Establish to adjust for incarceration.	Claim label with associated EP should be applied to adjust for incarceration. <b>This claim label should only be used by the Pension Management Centers.</b>
290	PMC-Medal of Honor	Establish to determine eligibility of Medal of Honor.	Claim label with associated EP should be applied to determine eligibility of Medal of Honor pension. <b>This claim label should only be used by the Pension Management Centers.</b>

## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
290	PMC MOD Check Request	Establish to determine entitlement to MOD check.	Claim label with associated EP should be applied to determine entitlement to MOD check. <b>This claim label should only be used by the Pension Management Centers.</b>
290	PMC-Fugitive Felon	Establish to determine fugitive felon status.	Claim label with associated EP should be applied to determine fugitive felon status. <b>This claim label should only be used by the Pension Management Centers.</b>
290	PMC-Social Security Prison Match	Establish to determine continued entitlement to pension benefits.	Claim label with associated EP should be applied to determine continue entitlement to pension benefits. <b>This claim label should only be used by the Pension Management Centers.</b>
290	PMC-Renouncement	Establish to renounce pension benefits.	Claim label with associated EP should be applied when pension benefits are renounced. <b>This claim label should only be used by the Pension Management Centers.</b>
290	PMC-Retired Pay Waiver/Election	Establish to identify waived retirement pay.	Claim label with associated EP should be applied identify waived retirement pay. <b>This claim label should only be used by the Pension Management Centers.</b>
290	PMC-Return to Active Duty	Establish to adjust pension due to returning to active duty status.	Claim label with associated EP should be applied to adjust pension due to returning to active duty status. <b>This claim label should only be used by the Pension Management Centers.</b>
290	Pre-Discharge-LGY Determination		This claim label, issued January 5, 2015, replaces the claim label EP 290 Quick Start -LGY Determination.
290	Pre-Discharge-Resumption of Compensation		This claim label, issued January 5, 2015, replaces the claim label EP 290 Quick Start -Resumption of Compensation. It should be applied to all pre-discharge resumption cases with static disabilities. (M21-1MR III.i.2.C.3.a and b.)
293	PMC-COWC	Applies to COWC decisions prepared by an employee of the Service Center.	Claim label with associated EP should be applied to COWC decision prepared by the Veterans Service Center. This claim label should only be used by the pension management centers.
310	PMC-Routine Future Exam	Used to request future examinations. These include both those mandated by the Schedule for Rating Disabilities and those determined by the Rating Board.	Claim label with associated EP should be applied when there is a request for a routine future examination. This is inclusive of mandated by the Schedule of Rating disabilities and those determined by the rating board. This claim label should only be used by the pension management centers.

## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
330	PMC-Review	Applies when the claims folder is being reviewed under the provisions of current regulations, instructions, directives, or procedures.	This claim label should be used the same way VSCs use EP 330. EP 330 series applies when the claims folder is being reviewed under the provisions of current regulations, instructions, directives, or procedures, the same authority as non-PMC reviews. (Compensation Service Site Visits Best Practices EP List)
400	PMC-Correspondence	Applies to disability and death cases when the action is independent and involves correspondence action on a letter, e-mail, inquiry, form, document, official notice, etc., which can usually be handled on the basis of existing records and decisions, and a rating or authorization determination is not required for final disposition of the issue created.	This claim label should be used by PMCs when they respond to general correspondence/inquiry pertaining to all benefits besides DIC that does not involve any adjudication of benefits. (M21-4, Appendix B. II.)
400	PMC DIC Correspondence	Applies to DIC cases when the action is independent and involves correspondence action on a letter, e-mail, inquiry, form, document, official notice, etc., which can usually be handled on the basis of existing records and decisions, and a rating or authorization determination is not required for final disposition of the issue created.	This claim label should be used by PMCs when they respond to general DIC correspondence/inquiry that does not involve any adjudication of benefits. It is useful since 'PMC correspondence' and 'PMC DIC correspondence' can be tracked separately if need be. (M21-4, Appendix B. II.)
500	PMC-Special Controlled Correspondence	Applies to correspondence that is controlled by the station Director or Service Center Manager, i.e., correspondence from Members of Congress, U.S. government officials, State or local officials	EP 507 for PMC. If there is an EP 020, attach special issue: Congressional. (M21-4, Appendix B. II.)
510	PMC-FOIA/Privacy Act Request	End product for Freedom of Information Act requests or Privacy Act requests received by the PMC	M21-4, Appendix B, Section II.
600	PMC DIC Predetermination Notice	Applies to all predetermination notices for running awards except Income Verification Matches (EP 154 and EP 314).	Claim label and associated EP should be applied when there is a DIC predetermination notice for running awards. Includes all predetermination notices except income verification matches). <b>This claim label should only be used by the Pension Management Centers.</b>



## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
600	<b>PMC Incompetency Determination</b>	Applies to all predetermination notices for running awards except Income Verification Matches (EP 154 and EP 314).	Claim label and associated EP should be applied when there is a incompetency predetermination notice for running awards. Includes all predetermination notices except income verification matches). <b>This claim label should only be used by the Pension Management Centers.</b>
600	<b>PMC-Fugitive Felon Case</b>	Applies to all predetermination notices for running awards except Income Verification Matches (EP 154 and EP 314).	Claim label and associated EP should be applied when there is a fugitive felon predetermination notice for running awards. Includes all predetermination notices except income verification matches). <b>This claim label should only be used by the Pension Management Centers.</b>
600	<b>PMC-Hospital Adjustment</b>	Applies to all predetermination notices for running awards except Income Verification Matches (EP 154 and EP 314).	Claim label and associated EP should be applied when there is a hospital adjustment predetermination notice for running awards. Includes all predetermination notices except income verification matches). <b>This claim label should only be used by the Pension Management Centers.</b>
600	<b>PMC-Predetermination Notice</b>	Applies to all predetermination notices for running awards except Income Verification Matches (EP 154 and EP 314).	Claim label and associated EP should be applied when there is a pension predetermination notice for running awards. Includes all predetermination notices except income verification matches). <b>This claim label should only be used by the Pension Management Centers.</b>
600	<b>PMC Predetermination - Rating Issue</b>	Applies to all predetermination notices for running awards except Income Verification Matches (EP 154 and EP 314).	Claim label and associated EP should be applied when there is a rating issue predetermination notice for running awards. Includes all predetermination notices except income verification matches). <b>This claim label should only be used by the Pension Management Centers.</b>
600	<b>PMC-Review-Potential Overpayment</b>	Applies to all predetermination notices for running awards except Income Verification Matches (EP 154 and EP 314).	Claim label and associated EP should be applied when there is a potential overpayment predetermination notice for running awards. Includes all predetermination notices except income verification matches). <b>This claim label should only be used by the Pension Management Centers.</b>
600	<b>PMC-Railroad Ret</b>	Applies to all predetermination notices for running awards except Income Verification Matches (EP 154 and EP 314).	Claim label and associated EP should be applied when there is a railroad retirement overpayment predetermination notice for running awards. Includes all predetermination notices except income verification matches). <b>This claim label should only be used by the Pension Management Centers.</b>

## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
600	<b>PMC-Review-Write out Affecting Payment</b>	Applies to all predetermination notices for running awards except Income Verification Matches (EP 154 and EP 314).	Claim label and associated EP should be applied when there is a review write out affecting payment overpayment predetermination notice for running awards. Includes all predetermination notices except income verification matches). <b>This claim label should only be used by the Pension Management Centers.</b>
600	<b>PMC-SSA Match</b>	Applies to all predetermination notices for running awards except Income Verification Matches (EP 154 and EP 314).	Claim label and associated EP should be applied when there is a social security match predetermination notice for running awards. Includes all predetermination notices except income verification matches). <b>This claim label should only be used by the Pension Management Centers.</b>
600	<b>PMC-SSA Prison Match</b>	Applies to all predetermination notices for running awards except Income Verification Matches (EP 154 and EP 314).	Claim label and associated EP should be applied when there is a Social Security Administration Prison Match predetermination notice for running awards. Includes all predetermination notices except income verification matches). <b>This claim label should only be used by the Pension Management Centers.</b>
600	<b>PMC-SS Number Verification</b>	Applies to all predetermination notices for running awards except Income Verification Matches (EP 154 and EP 314).	Claim label and associated EP should be applied when there is a Social Security Number Verification predetermination notice for running awards. Includes all predetermination notices except income verification matches). <b>This claim label should only be used by the Pension Management Centers.</b>
600	<b>PMC-TDIP (Total Disability Income Provisions)</b>	Applies to all predetermination notices for running awards except Income Verification Matches (EP 154 and EP 314).	Claim label and associated EP should be applied when there is a TDIP predetermination notice for running awards. Includes all predetermination notices except income verification matches). <b>This claim label should only be used by the Pension Management Centers.</b>
600	<b>PMC \$90 Reduction</b>	Applies to all predetermination notices for running awards except Income Verification Matches (EP 154 and EP 314).	This is used when a claimant has a running pension award, and they enter a Medicaid nursing home and Medicaid is paying for their care. We can reduce their benefit to \$90 so Medicaid does not count it as income and reduces the claimant's costs. Used to separate reductions for changing income based on Medicaid information. <b>This claim label should only be used by the Pension Management Centers.</b>
600	<b>PMC Social Security Reduction</b>	Applies to all predetermination notices for running awards except Income Verification Matches (EP 154 and EP 314).	Claim label and associated EP should be applied when there is a social security reduction predetermination notice for running awards. Includes all predetermination notices except income verification matches). <b>This claim label should only be used by the Pension Management Centers.</b>

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## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
680	PMC-Reviews - Ratings Involved	CO Review/assigned.	M21-4, Appendix B, Section II.
682	PMC-Reviews - Ratings Involved 2	CO Review/assigned.	M21-4, Appendix B, Section II.
683	PMC-CBRNE	Per TL 06-04, Development for Veterans in DoD Chemical Biological Radiological Nuclear and Explosives database.	Claim label with corresponding EP should be applied in accordance with TL 06-04 for development of Veterans in the DoD Chemical Biological Radiological Nuclear and Explosive database. <b>This claim label should only be used by the Pension Management Centers.</b>
683	PMC-Reviews - Ratings Involved 3	CO Review/assigned.	M21-4, Appendix B, Section II.
684	PMC-Reviews - Ratings Involved 4	CO Review/assigned.	M21-4, Appendix B, Section II.
685	PMC-Reviews - Ratings Involved 5	CO Review/assigned.	M21-4, Appendix B, Section II.
690	PMC-Reviews - Authorization Only	Requires authorization review only.	M21-4, Appendix B, Section II. It is used with claims pertaining to potential underpayment of benefits by first and third party notification.
690	PMC DIC Authorization Review	Requires authorization review only.	M21-4, Appendix B, Section II. DIC Dependency Questionnaire claims are worked under EP 692.
690	PMC-Review-Potential Overpmt	Potential Overpayment.	M21-4, Appendix B, Section II. It is used to track potential overpayment claims which should be worked prior to other claims without the label to limit the potential overpayment.
692	PMC-Reviews-Authorization Only 2	Requires authorization review only. One time PCLR.	M21-4, Appendix B, Section II. This is used to control for continued eligibility to DEA and IU.
692	PMC-SSN Verification	Requires SSN review. One time PCLR.	M21-4, Appendix B, Section II. EP 692 is used to control SSN verification.
693	PMC-Review-Write out Affecting Payments	Potential overpayment based on work item.	M21-4, Appendix B, Section II. EP 693 is used to control potential overpayments based on writeouts.
850	PMC-Pre Existing MOD Award Exists	Used to determine if duplicate MOD award exists.	VETSNET Work Items Desk Reference (WIDR)  <a href="http://vbaw.vba.va.gov/bl/20/201/docs/WIDR.DOC">http://vbaw.vba.va.gov/bl/20/201/docs/WIDR.DOC</a>

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## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
930	PMC DIC Rvw/Ref/Other	Applies to reviews and issues where no direct labor is performed or that require direct labor but no other EP is applicable.	M21-4, Appendix B, Section II.
930	PMC- Rvw/Ref/Other	Applies to reviews and issues where no direct labor is performed or that require direct labor but no other EP is applicable.	M21-4, Appendix B, Section II.
960	PMC- Administrative Error	Applies to administrative error cases under 38 CFR 3.500(b)(2).	Claim label with corresponding EP should be applied when an administrative error has been identified per 38 CFR 3.500(b)(2). <b>This claim label should only be used by the Pension Management Centers.</b>
95	PMC - VRE App Rcvd - Pending Memorandum Rating	Tracks PMC receipt of VA Form 21-1900 (Application for VR&E Benefits) for Veterans who do not have a rating of 20% or more, or 10% with a serious employment handicap, requiring a memorandum rating.	M21-4, Appendix B: End Product Classification Codes and Work Rate Standards for Quantitative Measurement
295	PMC - VRE App Rcvd - Pending Eligibility Decision	Tracks PMC receipt of a VA Form 21-1900 (Application for VR&E Benefits) for Veterans who have been rated at 20% or more, or 10% with a serious employment handicap and thus do not require a memorandum rating.	M21-4, Appendix B: End Product Classification Codes and Work Rate Standards for Quantitative Measurement
95	VRE App Rcvd - Pending Memorandum Rating	Tracks receipt of VA Form 21-1900 (Application for VR&E Benefits) for Veterans who do not have a rating of 20% or more, or 10% with a serious employment handicap, requiring a memorandum rating.	M21-4, Appendix B: End Product Classification Codes and Work Rate Standards for Quantitative Measurement
295	VRE App Rcvd - Pending Eligibility Decision	Tracks receipt of a VA Form 21-1900 (Application for VR&E Benefits) for Veterans who have been rated at 20% or more, or 10% with a serious employment handicap and thus do not require a memorandum rating.	M21-4, Appendix B: End Product Classification Codes and Work Rate Standards for Quantitative Measurement
718	NDAA	Tracks Veterans eligible for two year extension of the eligibility for VR&E services under the National Defense Authorization Act (NDAAs)	VR&E Letter 28-13-05 "Vocational Rehabilitation and Employment Procedures for Veterans Under the VOW to Hire Heroes Act"

## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
719	<b>VRE Pending Entitlement Determination</b>	A 719 is created when an entitlement determination is made on both 095 and 295 VR&E applications.	M21-4, Appendix B: End Product Classification Codes and Work Rate Standards for Quantitative Measurement
768	<b>SEI/VOW</b>	Expansion of the Special Employer Incentive (SEI) Program for VR&E Veteran participants under VOW to Hire Heroes Act.	VR&E Letter 28-13-05 "Vocational Rehabilitation and Employment Procedures for Veterans Under the VOW to Hire Heroes Act"
769	<b>Unemployment Compensation/VOW</b>	Additional VR&E services to unemployed Veterans who were previously rehabilitated and who have exhausted all of their unemployment benefits under VOW to Hire Heroes Act.	VR&E Letter 28-13-05 "Vocational Rehabilitation and Employment Procedures for Veterans Under the VOW to Hire Heroes Act"
795	<b>VR&amp;E Reapplicants from rehabilitated or discontinued (RC 31) status</b>	Establish an EP 795 to track re-applicants from rehabilitated statuses.	VR&E Letter 25-13-21 (Revised), "Changes in Vocational Rehabilitation and Employment (VR&E) Case Status Procedures"
17	<b>Quick Start-Initial 8+ issues.</b>	Initial Quick Start claim containing eight issues or more.	M21-1MR, III.i.2.B. Claim label with corresponding EP must be used when there is an initial Quick Start claim received within 1 to 59 days prior to date of discharge that contains eight issues or more. <b>This claim label should only be used by the BDD/QS intake sites.</b>
27	<b>Quick Start-Supplemental</b>	Supplemental Quick Start claim where disabilities are not static.	M21-1MR, III.i.2.A.2.b. Claim label with corresponding EP should be applied when there is a supplemental Quick Start claim. <b>This claim label should only be used by the BDD/QS intake sites.</b>
117	<b>Quick Start-Initial</b>	Initial Quick Start claim containing seven issues or less.	M21-1MR, III.i.2.A.2.b. Claim label with corresponding EP must be used when there is an initial Quick Start claim received within 1 to 59 days prior to date of discharge that contains less than eight issues. <b>This claim label should only be used by the BDD/QS intake sites.</b>
010	<b>Initial Compensation 8+ Issues</b>	Initial disability compensation claims containing eight issues or more.	Claim label with corresponding EP should be applied when there is an initial compensation claim with eight issues or more which is received through centralized mail. <b>This should only be used by Veterans Service Centers.</b>
010	<b>Initial Comp 8+/Pension - Dual Claim</b>	Initial disability compensation and pension claims containing eight issues or more.	Claim label with corresponding EP should be applied when there is an initial dual compensation and pension claim with seven issues or less which is received through centralized mail. <b>This should only be used by Veterans Service Centers.</b>

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## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
020	<b>Claim for Increase</b>	Claim for increase in the degree of service.	Claim label with corresponding EP should be applied when there is a compensation claim for increase received through centralized mail. <b>This should only be used by Veterans Service Centers.</b>
020	<b>Helpless child</b>	Claims for helpless children based on compensation entitlement.	Claim label with corresponding EP should be applied when there is a compensation claim for helpless child received through Centralized Mail.
020	<b>Incompetency Review - S/C</b>	Claim established when medical evidence is received pertaining to the incompetency of the claimant after a compensation claim as been previously filed or adjudicated.	Claim label with corresponding EP should be applied when there is medical evidence received pertaining to the incompetency of the claimant after a compensation claim has been previously filed or adjudicated.
020	<b>New</b>	Claims for disability compensation filed for the first time, but not previously adjudicated.	Claim label with corresponding EP should be applied when there is a compensation cases filed for the first time and no previous claim was previously adjudicated. <b>This should only be used by Veterans Service Centers.</b>
020	<b>New/Increase</b>	Claims for disability compensation filed for the first time and claims for increase in the degree of service disability received after a compensation or pension claim has been previously filed or adjudicated	Claim label with corresponding EP should be applied to compensation cases for increase for service connection after a compensation or pension claim has been previously filed and adjudicated. <b>This should only be used by Veterans Service Centers.</b>
020	<b>New/Reopen</b>	Claims for disability compensation filed for the first time and previously denied, received after a compensation or pension claim has been previously adjudicated.	Claim label with corresponding EP should be applied to compensation claims for first time new and previously denied claims received after a compensation or pension claim has been previously filed and adjudicated. <b>This should only be used by Veterans Service Centers.</b>
020	<b>New/Reopen/Increase</b>	Includes multiple claims for disability compensation filed for the first time, previously denied, or claim for increase in the degree of service disability received. In addition, these claims are received after compensation or pension claims have been previously adjudicated.	Claim label with corresponding EP should be applied to compensation cases for first time new, previously denied and increase claims received after a compensation or pension claim has been previously filed and adjudicated. <b>This should only be used by Veterans Service Centers.</b>
020	<b>Reopened Compensation</b>	Claims for disability compensation that were previously denied.	Claim label with corresponding EP should be applied to compensation cases for previously denied claims received after a compensation or pension claim has been previously filed and adjudicated. This should only be used by Veterans Service Centers.

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## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
020	<b>Reopen/Increase</b>	Claims for disability compensation that were previously denied and claims for increase in the degree of service disability received; usually received after compensation or pension claims have been previously adjudicated.	Claim label with corresponding EP should be applied to compensation cases for previously denied and increase claims received after a compensation or pension claim has been previously filed and adjudicated. This should only be used by Veterans Service Centers.
020	<b>Special Monthly Compensation</b>	Claims based on the need for aid and attendance or being housebound; and death or spouse's compensation based on the need for aid and attendance.	Claim label with corresponding EP should be applied to compensation cases based on the need for aid and attendance and/or housebound. This includes death or spouse's compensation based on the need for aid and attendance. This should only be used by Veterans Service Centers.
070	<b>Cert to BVA</b>	Claim for appeal transferred to the Board of Veterans Appeals.	Claim label with corresponding EP should be applied to a compensation case that has been certified by the Board of Veteran Appeals.
070	<b>Supplemental Statement of the Case</b>	Claim established for each supplemental statement of the case mailed. Also may occur while appeal is in Remand status.	Claim label with corresponding EP should be applied to a compensation case that requires a supplemental statement of the case and might be in remand status.
110	<b>Initial Live Comp/Pension</b>	Initial compensation and pension claims containing seven issues or less.	Claim label with corresponding EP should be applied when there is an initial dual compensation and pension claim with seven issues or less received through Centralized Mail. This should only be used by Veterans Service Centers.
110	<b>Initial Live Comp &lt; 8 issues</b>	Initial compensation claims containing seven issues or less.	Claim label with corresponding EP should be applied when there is an initial compensation claim with seven issues or less received through Centralized Mail. This should only be used by Veterans Service Centers.
120	<b>Reopened Pension</b>	Applies to reopened disability pension and death pension claims.	EP 120 applies to reopened disability pension and death pension claims. Unless otherwise noted, the EP will not be cleared until all issues raised by the claim have been resolved. (M21-4 Appendix B)
120	<b>Incompetency Review - Pension</b>	Claim established when medical evidence is received pertaining to the incompetency of the claimant after a pension claim as been previously filed or adjudicated.	Reconsideration solely relating to questions of competency when not incidental to adjudicative decisions involving other EPs. (Clear EP 120 when notification of the incompetency determination is sent. Only used by PMC. (M21-4 Appendix B)
120	<b>Special Monthly Pension</b>	Claims for special monthly pension based on aid and attendance or housebound status, including claims based on nursing home status.	This EP 120 applies to special monthly pension and unless otherwise noted, it will not be cleared until all issues raised by the claim have been resolved. (M21-4 Appendix B)

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EP Code	Claim Label	Business Rule	Authority
120	<b>Reopened Helpless Child</b>	New for helpless children based on pension entitlement that was previously denied.	This EP 120 applies to helpless children based on pension entitlement and unless otherwise noted, it will not be cleared until all issues raised by the claim have been resolved. (M21-4 Appendix B)
130	<b>Apportionment</b>	Claims for apportionment involving entitlement of the veteran, his/her dependents or beneficiaries to benefits based on relationship or dependency.	
130	<b>Automated Dependency 686c Reject</b>	Rejected Rules Based Processing System claims for dependency determinations involving entitlement of the veteran, his/her dependents or beneficiaries to benefits based on relationship or dependency.	<b>This is a system generated claim label and EP that is automatically applied.</b>
130	<b>Dependency</b>	Claims for dependency determinations involving entitlement of the veteran, his/her dependents or beneficiaries to benefits based on relationship or dependency.	
130	<b>Automated Dependency 686c</b>	Rules Based Processing System claims for dependency determinations involving entitlement of the veteran, his/her dependents or beneficiaries to benefits based on relationship or dependency.	<b>This is a system generated claim label and EP that is automatically applied.</b>
130	<b>Automated School Attendance 674</b>	Rules Based Processing System claims for increased benefits, or continuation of benefits, because of dependency including for children attending school after age 18.	<b>This is a system generated claim label and EP that is automatically applied.</b>
130	<b>Automated School Attendance 674 Reject</b>	Rejected Rules Based Processing System claims for increased benefits, or continuation of benefits, because of dependency including for children attending school after age 18.	<b>This is a system generated claim label and EP that is automatically applied.</b>
130	<b>Social Security Match</b>	Established verifying Veterans' records with duplicate dependents or incorrect social security account numbers.	
130	<b>C100-Year Review</b>	Review of beneficiary's DOB. Record indicates over 100 years of age	

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EP Code	Claim Label	Business Rule	Authority
133	REPS	Claims for Restored Entitlement Program for Survivors after certification of qualifying service connected death.	
135	Hospitalization Adjustment	Applies to all reductions based on hospitalization and subsequent resumptions based on discharge from hospitalization.	
140	Initial S/C Death	Initial DIC and death compensation claims for service-connected death (including accrued), if no prior claim for death benefits has been filed and adjudicated.	
140	Initial S/C Death/Pension	Initial dual claims for service-connected death and death pension (including accrued), if not prior claim for death benefits has been filed or adjudicated.	
150	Election	Elections of current law pension.	<b>This claim label should only be used by the Pension Management Centers.</b>
150	Income Adjustment	Adjustments due to change in income or net worth other than those generated by EVRs.	<b>This claim label should only be used by the Pension Management Centers.</b>
150	Income - Reopened Claim	Claim based on change in income or net worth that was previously adjudicated.	<b>This claim label should only be used by the Pension Management Centers.</b>
150	Net Worth	Net worth determinations under 38 U.S.C 1710	<b>This claim label should only be used by the Pension Management Centers.</b>
150	Railroad Retirement	Established for income verification for railroad retirement received.	<b>This claim label should only be used by the Pension Management Centers.</b>
150	Soc Sec Admn Match	Establish for income verification if in receipt of Social Security benefits. Used when working a write out message.	<b>This claim label should only be used by the Pension Management Centers.</b>
150	TDIP (Total Disability Income Provision)	Affects pension and parent's DIC	<b>This claim label should only be used by the Pension Management Centers.</b>
150	100-Year Review	Still in use? Are these handled under the 800 series?	<b>This claim label should only be used by the Pension Management Centers.</b>

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## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
154	<b>Income Verification Match</b>	Applies to all pension and Parents' DIC review case based on IRS and Social Security Income Verification Matches.	<b>This claim label should only be used by the Pension Management Centers.</b>
160	<b>Burial, Plot, Headstone, Marker, Engraving</b>	Applies to claims for statutory burial allowance, plot allowance, and claim for reimbursement of headstone, marker, or additional engraving expenses.	This claim label is generally only used by PMC, but VSCs will have EP 160s cleared based on automated burial processing.
160	<b>Burial Allowance</b>	Applies to claims for statutory burial allowance and reopened claims for reconsideration of a prior decision	This claim label is generally only used by PMC, but VSCs will have EP 160s cleared based on automated burial processing.
160	<b>Plot Allowance</b>	Applies to claims for statutory plot allowance and reopened claims for reconsideration of a prior decision.	This claim label is generally only used by PMC, but VSCs will have EP 160s cleared based on automated burial processing.
170	<b>Appeal Action</b>	End product used for general appeal control. No work credit is attached. EP170 must be PCAN'd upon final disposition.	The Processing Appeals in VBMS TIP Sheet located on the Compensation Service Intranet provides detailed guidance on the use of the EP 170 for this claim label.
170	<b>Form 9</b>	Applies to appellant returning the Form 9.	The Processing Appeals in VBMS TIP Sheet located on the Compensation Service Intranet provides detailed guidance on the use of the EP 170 for this claim label.
170	<b>Notice of Disagreement</b>	Applies to appellant submitting an NOD.	The Processing Appeals in VBMS TIP Sheet located on the Compensation Service Intranet provides detailed guidance on the use of the EP 170 for this claim label.
170	<b>Remand</b>	Applies to cases remanded from BVA.	The Processing Appeals in VBMS TIP Sheet located on the Compensation Service Intranet provides detailed guidance on the use of the EP 170 for this claim label.
172	<b>BVA Grant</b>	Applies to BVA-issued grants.	
172	<b>Full Grant - Form 9</b>	Applies to when a Vet submits a Form 9 and we are able to grant a Full Grant of benefits sought on appeal.	
172	<b>Full Grant - Notice of Disagreement</b>	Applies when a Vet submits his Notice of Disagreement and based on the evidence we can grant a Full Grant of Benefits sought on appeal	
172	<b>Grant of Benefits</b>	Applies to grant of benefits	

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## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
172	Partial Grant - Form 9	Applies when a Vet submits a Form 9 and based on the evidence we can grant a Partial Grant of the benefits sought on Appeal	
172	Statement of the Case	Applies to issuance of a statement of the case in response to a valid notice of disagreement. Consideration of additional evidence submitted with the notice of disagreement is part of EP 172 (generic definition of EP172)	
172	Traditional SOC Released	Established when DRO completes and releases an SOC	
173	DRO Informal Conference	One-time PCLR for hearing	
173	Formal Hearing by Other Than DRO	Established when a hearing is completed by staff other than DRO	
173	Informal Hearing by DRO	One-time PCLR for hearing	
173	Non DRO Hearing Held	Established when a hearing is completed by staff other than DRO (Same as 173 above)	
174	DRO Decision	Established when an appellant chooses a DRO review	
174	Full Grant NOD - DRO	Established when there is a full grant by a DRO	
174	Formal Hearing by DRO	Established when a formal hearing is conducted by a DRO	
174	Partial Grant NOD - DRO	Established when there is a partial grant by a DRO	
174	SOC - DRO	Established when a DRO completes an SOC when there is a denial	
180	Initial Live Pension	Established for live pension cases	<b>This claim label should only be used by the Pension Management Centers.</b>
190	Initial Death Pension	Established for initial death pension cases	<b>This claim label should only be used by the Pension Management Centers.</b>
290	Automobile Allowance	Applies to automobile allowance claims	

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## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
290	<b>Bureau of Prisons</b>	Applies to Bureau of Prisons Match Program	
290	<b>Bureau of Supplemental Security Income Rqst</b>	Applies to Social Security Administration income requests	
290	<b>CRSC/CRDP Processing</b>	Applies to CRSC/CRDP processing	
290	<b>Character of Discharge</b>	Applies to Character of Discharge decisions	
290	<b>Clothing Allowance</b>	Applies to clothing allowance claims	
290	<b>Death Gratuity</b>	Applies to determinations for \$100K payment for service members who died in service	
290	<b>Dental Treatment</b>	Applies to dental treatment only eligibility determinations	
290	<b>Drill Pay Adjustment</b>	Applies to drill pay adjustments	
290	<b>Disappearance of Veteran</b>	Established for disappearance of Veteran determinations	
290	<b>Enhanced Disability Severance Pay</b>	Development/adjustments due to severance pay	
290	<b>Eligibility Determination</b>	Generic term for all EP290s	EP 290 applies to adjudicative decisions relating to benefits under other VA programs, programs of other Federal and State agencies, and independent determinations relating to elections, waivers, guardianship issues, and other issues affecting payments. Detailed rules for the EP290 are located in the EP Guide, M21-4, Appendix B.
290	<b>Fugitive Felon</b>	Applies to fugitive felon cases	
290	<b>Fiduciary Adjustment</b>	Applies to fiduciary adjustments	
290	<b>Federal Office of Workers' Compensation</b>	Applies to determinations regarding possible concurrent receipt of OWCP and VA payments	
290	<b>Filipino Equity Comp 15000</b>	Applies to eligibility determinations for Filipino Equity payments	

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## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
290	<b>Filipino Equity Comp 9000</b>	Applies to eligibility determinations for Filipino Equity payments	
290	<b>Special Home Adaptation Grant</b>	Applies to special home adaptation grant determinations	
290	<b>Hospitalization Eligibility</b>	Established for hospital adjustments	
290	<b>Specially Adapted Housing</b>	Applies to specially adapted housing determinations	
290	<b>Incarceration Adjustment</b>	Established for incarceration adjustments	
290	<b>Insurance Eligibility</b>	Established for insurance eligibility	
290	<b>LGY Eligibility</b>	Established for loan guaranty eligibility	
290	<b>Medal of Honor</b>	Established in non-rating cases involving Medals of Honor.	
290	<b>Military Pay in Lieu of Comp</b>	Applies to determinations of military pay in lieu of comp	
290	<b>MOD - Entitlement Review</b>	Applies to month of death entitlement review	
290	<b>NICS Relief Request</b>	Established for relief requests of g relief regarding National Instant Criminal Background Check System program (this FBI-based program determines eligibility to purchase firearms in US).	
290	<b>Outpatient Treatment Eligibility</b>		
290	<b>Preference Certificate</b>	Established for 5 point or 10 point preference Veteran's letter. Not used much anymore due to eBenefits generating the same letter.	
290	<b>Pay Grade Verification</b>	Established when there is a case that needs military pay grade verification, such as retired pay case.	
290	<b>Renouncement</b>	Applies to renouncement of VA Benefits determinations	

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## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
290	<b>Retired Pay Waiver/Election</b>	Applies to retired pay waiver/election determinations	
290	<b>Return to Active Duty</b>	Applies to return to active duty determinations	
290	<b>Social Security Prison Match</b>	Applies to social security prison match program	
290	<b>Vehicular Adaptive Equipment</b>	Applies to vehicular adaptive equipment determinations	
293	<b>COWC</b>	Committee on Waivers and Compromises decisions made by VSC employee	
298	<b>298 - Batch CRSC CRDP Payment Made</b>	End product is automatically established and cleared with payment made without RO input	
310	<b>IU issue 4140 referred</b>	Veteran submitted VAF 21-4140 showing employment, however referred to rating activity to determine if employment is gainful	
310	<b>IU 4140 not returned</b>	Veteran failed to return VAF 21-4140	
310	<b>Routine Future Exam</b>	Request for routine future exam	
314	<b>Live Comp IU match IVM</b>	Review needed based on SSI verification match of Veteran in receipt of IU	
320	<b>Review Due to Hospitalization</b>	Notification received of Veteran hospitalized for service connected condition. Review for possible award adjustment	
330	<b>Review</b>	VACO assigned/designated	
400	<b>Correspondence</b>	End product credit for general correspondence. One time PCLR. Also used to control attorney fee cases	
410	<b>CH18 Initial Claim- Spina Bifida</b>	Processed at the Denver RO only- initial claim for spina bifida	Per Fast Letter 97-97 and the EP List on the Best Practices Page, "EP 410 applies to original claims received for benefits for veterans' children due to spina bifida or other birth defects and diseases secondary to herbicide exposure."

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## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
415	<b>CH18 Initial Claim-Birth Defects</b>	Processed at the Denver RO only- initial claim for birth defects	
420	<b>CH18 Reopened Claim-Spina Bifida</b>	Processed at the Denver RO only- reopened claim for spina bifida	
425	<b>CH18 Reopened Claim-Birth Defects</b>	Processed at the Denver RO only- reopened claim for birth defects	
450	<b>CH18 Claim for Increase-Spina Bifida</b>	Processed at the Denver RO only- increased claim for spina bifida	
455	<b>CH18 Claim for Increase-Birth Defects</b>	Processed at the Denver RO only- increased claim for birth defects	
470	<b>CH18 Notice of Disagreement-Spina Bifida</b>	Processed at the Denver RO only- spina bifida appeal	
475	<b>CH18 Notice of Disagreement-Birth Defects</b>	Processed at the Denver RO only- birth defect appeal	
500	<b>Special Controlled Correspondence</b>	End product for correspondence specifically designated as Special Controlled by administration/management	EP 500 applies to correspondence that is controlled by RO Director or Service Center Manager, i.e., correspondence from Members of Congress, U.S. Government officials, State, or local officials. (EP List on the Best Practices Page)
510	<b>FOIA/Privacy Act Request</b>	End product for Freedom of Information Act requests or Privacy Act requests.	
600	<b>Bur of Prisons</b>	Proposal based on BOP notice	
600	<b>Competency Issue</b>	Incompetency proposal established based on rating decision	
600	<b>Civil Svce Match</b>	Proposal based civil service data match	
600	<b>Fugitive Felon Case</b>	Proposal based on fugitive felon status	
600	<b>Federal Office of Workers' Comp</b>	Proposal based notice that Veteran is in receipt of workers' comp.	
600	<b>Hospital Adjustment</b>	Proposal based hospitalization, reduction in benefits	

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## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
600	<b>Predetermination Notice</b>	Generic proposal (due to errors, dependency, overpayments, etc.)	
600	<b>Predetermination - Rating Issue</b>	Proposal based on rating decision (to sever condition, reduce evaluation)	
600	<b>Railroad Ret</b>	Proposal based on duplicate benefits paid by railroad retirement board	
600	<b>SSA Prison Match</b>	Proposal based SSA prison match	
600	<b>SSA Match</b>	Proposal based SSA match for pension or DIC adjustments	
600	<b>SS Number Verification</b>	Proposal based SSN discrepancies/review	
600	<b>TDIP (Total Disability Income Provisions)</b>	Proposal based on adjustment to improved pension due to countable TDIP payments	
680	<b>Reviews - Ratings Involved</b>	CO review/assigned	
682	<b>Reviews - Ratings Involved 2</b>	CO review/assigned	
683	<b>CBRNE</b>	Per TL 06-04, Development for Veterans in DoD Chemical Biological Radiological Nuclear and Explosives database.	Claim label with corresponding EP should be applied in accordance with TL 06-04 for development of Veterans in the DoD Chemical Biological Radiological Nuclear and Explosive database.
683	<b>Reviews - Ratings Involved 3</b>	CO review/assigned	
684	<b>Reviews - Ratings Involved 4</b>	CO Review/assigned	
685	<b>Reviews - Ratings Involved 5</b>	CO Review/assigned	
687	<b>Nehmer - IHD - PD - HCL</b>	End date	
690	<b>Review-Potential Overpmt</b>	Potential Overpayment	



## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
690	<b>Social Security No Verification</b>	Not used outside of potential overpayment	Veterans Service Center Managers (VSCMs) are now responsible for completing an Internal Controls Systematic Analysis of Operations (SAO, see M21-4, Chapter 7) on system-generated writeouts that affect payment. By reviewing the average control time, average days to complete, etc. of EP 693 and conducting quality reviews, VSCMs can measure progress in this work's timely and accurate completion, and take appropriate corrective action. (FL 08-09)
692	<b>Reviews - Authorization Only 2</b>	One-time PCLR dependency verification	
692	<b>SSN Verification</b>	One-time PCLR for verifying SSN	
693	<b>Reviews - Authorization Only 3</b>	Not USED	
693	<b>Review-Write out Affecting Payments</b>	Potential overpayment based on work item	
694	<b>Reviews - Authorization Only 4</b>	CO Review/assigned	
930	<b>OCR Review</b>	Applies to provisional decision when there is no running award and as a result requires a future date of claim 364 days from the date of the provisional decision. This is for tracking purposes only as it is a future diary end product and will not be part of the current inventory.	
930	<b>Rvw/Ref/Other</b>	Applies to reviews and issues where no direct labor is performed or that require direct labor but no other EP is applicable.	EP 937 is "currently being used for corrections of non-rating related corrections at the PMCs." Per M21-4, modifiers 6-7 are to be used by the PMC. (EP List on the Best Practices Page)
960	<b>Administrative Error</b>	Applies to administrative error cases under 38 CFR 3.500(b)(2).	
800	<b>562E Cannot Process - Insufficient Source</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.

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## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
800	<b>566 Detail Cannot Be Processed Against M/R</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
800	<b>562D Deduction Improper--M/R Suspended</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
800	<b>565 Detail Name Does Not Match Master</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
800	<b>562F Deduction Not Established - No Address in M/R</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
800	<b>545 Master Record Not Found</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
800	<b>562B No Appropriate Deduction - Balance SEG</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
800	<b>562C New DED AMT Equals Existing Deduction</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
800	<b>549 Return of PFOP Withdrawal</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
800	<b>548 Returned Payment - No Master Record on File</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
800	<b>549E Unassociated Account Established</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>612 Account Suspended-Undeliverable Payment</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.

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EP Code	Claim Label	Business Rule	Authority
810	<b>643 Change Rejected - Exceeds Current Benefits</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>631 Diary Due Date/Reason/Legend</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>631F Disappearance - 7 Year Review</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>647 Deduction Resumed Effective</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>636 Effect Date DED REQ Changed To</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>616A FNOD Term - Rvw for Accrued/DLP Prior to DOD</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>631A Future Physical Examination</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>633 616A FNOD Terminated - DLP Prior to Death Date</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>631Y Follow-Up on Paragraph 28 Review</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>631C Helpless Child Review</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>631H Helpless Child Reaches Majority</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>635 Insurance Deduction SUSP (DISC) EOM (MON)</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.

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EP Code	Claim Label	Business Rule	Authority
810	<b>631O Local Regional Office Special Use</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>607 Miscellaneous Returned Payment</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>605 Payee Deceased - Accrual Sgt. Established</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>606 Payee Deceased - Accrual Segment Increased</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>634 Proceeds Established in Participant Record</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>611 Payment Returned Death of Person Entitled</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>626 Paid EFT - Verify Home Address</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>637 Retroactive Change To</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>633 CH 18 Case - Review Disability Level</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>631D Reduction Under 38 CFR 3.551(B)</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>631E Restore Under 38 CFR 3.556(D)</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>631Q Rev For Return of VAF 21-4140</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.

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EP Code	Claim Label	Business Rule	Authority
810	<b>631M Review Hardship Expense</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>631R Review Need for Reevaluation</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>603 Returned Payment Applied to Accts Receivable</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>602 Returned PFOP Payment - Master Record Updated</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>631L Return of Dependency Verification Form</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>604 Unapplied Balance Returned to Appropriation</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>631J Verify Income or Dependency</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>631G VR&amp;E Motivational Contact</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
810	<b>631I Verify School Attendance</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>882G Age 18 School Letter Not Sent</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>777 Clothing Allowance Letter Not Sent</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>836 Chng of Addr Notice-VMLI/Spec Housing Involve</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>842G DOD - Verify Income Rate</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.

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EP Code	Claim Label	Business Rule	Authority
820	<b>820 Drill Pay Waiver</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>882B Dependency Verification Letter Not Sent</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>882I EVR Due Process Letter Not Sent</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>882 Employability Letter Not Sent</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>882A EVR Letter Not Written</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>882K Manila Verification Letter Not Sent</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>811 Notice of VMLI Discontinuance</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>842C OPM - Verify Income Rate</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>884 Paragraph 29 Over 3 Months</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>850 Paragraph 28 Over xx Months</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>882J Return Check Due Process Letter Not Sent</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>808 Review For Continued Hospital Reduction</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>842E RRB - Verify Income Rate</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>897 DED AMT Exceeds Total AMT Available</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.

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EP Code	Claim Label	Business Rule	Authority
820	<b>882H School Child Verification Letter Not Sent</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>833C SSA Death C&amp;P Matched</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>833A SSA Death DOB Mismatch</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>833B SSA Death Name Mismatch</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>882C SOC SEC Income Reminder Letter Not Sent</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>899A SSA - Verify Income Rate</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>871 VMLI Deduction Established</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>857 VET Died - VMLI/SPEC/HSG/Involved</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
820	<b>738 FNOD Vet Married to Vet-Spse Awd Needs Adjstmt</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
830	<b>178 Balance Amount</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
830	<b>002 File Number</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
830	<b>267 Insurance Effective Date</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
830	<b>999 Multi Records Found on File for Beneficiary</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.

Use Ctrl+F to search for EP Code or Claim Label; Ctrl+Home to return to Table of Contents

## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
830	<b>National Cemetery Administration Notice of Death</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
830	<b>005 Person Entitled</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
830	<b>003 Payee Number</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
830	<b>705 Review Required - RVR Not Returned</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
830	<b>006 Trans Code</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
830	<b>830 - 833G Death Match Manual Follow-up</b>		
830	<b>190 Trans Rejected - Action Code</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
840	<b>840F CRSC/CRDP AEW-AWARD APPROPRIATE- Payment Due</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
840	<b>840C CRSC/CRDP AEW-VETSNET Award AR Exists</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
840	<b>840E CRSC/CRDP AEW-VETSNET Award Negative VA Due</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
840	<b>840D CRSC/CRDP AEW-VETSNET Award Withhold Exists</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.

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## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
840	<b>840J Potential CCP Debt Case Award AR Exists</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
840	<b>840H Potential CCP Debt Case Award Suspended</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
840	<b>840I Potential CCP Debt Case Award Terminated</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
840	<b>840G Potential CCP Debt Case Running Award</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
840	<b>840K Potential CCP Debt Case Award Withhold Exists</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
840	<b>840M - SBOP - State Prisoner Match</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
840	<b>840L - SBOP Wrkshst Incarcerated Vets Colctg Bnfts</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
840	<b>840A CRSC/CRDP AEW-VETSNET Award Suspended</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
840	<b>840B CRSC/CRDP AEW-VETSNET Award Terminated</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
840	<b>840 - 840O Fugitive Felon</b>		
850	<b>850A Legislative Adjustment Required</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
850	<b>850B Award in EVR Suspense 6 Months</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.

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## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
850	<b>850 Pre Existing MOD Award Exists</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
890	<b>890 Informal New Herbicide Presumptive 2010</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
890	<b>890 New Herbicide Presumptive 2010</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
890	<b>890 Other Issues Claimed via Fast Track</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
890	<b>890 SAH/SHA Online Application</b>	System Generated – should not be established by Regional Offices.	System Generated – should not be established by Regional Offices.
930	<b>930 HEC 21-7131 Tracking</b>		
LAA	<b>LAA New Application for Automatic Authority Fee</b>	\$500 for processing an application for auto authority (Handbook, page 1-36)	\$500 for processing an application for auto authority (Handbook, page 1-36)
LAAA	<b>LAAA Agent Fee</b>	\$100 for recognition of agent (Handbook, page 1-36)	\$100 for recognition of agent (Handbook, page 1-36)
LAAR	<b>LAAR Agent Annual Renewal Fee</b>	\$100 (Handbook, page 1-36)	\$100 (Handbook, page 1-36)
LACH	<b>LACH Home Office Annual Certification Fee</b>	\$200 for auto, non-supervised (Handbook, page 1-36)	\$200 for auto, non-supervised (Handbook, page 1-36)
LACR	<b>LACR Regional Office Annual Certification Fee</b>	\$200 annual recertification fee for non-supervised automatic lenders.	\$200 annual recertification fee for non-supervised automatic lenders.
LAM	<b>LAM Other - VA Administration Lender Action Fee</b>	\$100 (Handbook, page 1-36)	\$100 (Handbook, page 1-36)
LAR	<b>LAR Reinstatement for Automatic Authority Fee</b>	\$200 (Handbook, page 1-36)	\$200 (Handbook, page 1-36)

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## Claim Labels Tab

EP Code	Claim Label	Business Rule	Authority
LARU	Regional Underwriter Office Fee	\$100 fee for processing underwriter nominee requests from a non-supervised automatic lender.	\$100 fee for processing underwriter nominee requests from a non-supervised automatic lender.
LAS	Staff Appraisal Reviewer Fee	\$100 (Handbook, page 1-36)	\$100 (Handbook, page 1-36)
LAU	Underwriter Fee	\$100 (Handbook, page 1-36)	\$100 (Handbook, page 1-36)
VRE	Vocational Rehabilitation	N/A	N/A
WKST DY	Work Study	N/A	N/A

## Flashes Tab

Flashes Tab		
Title	Business rules	Authority
<b>1151 P&amp;T</b>	Used when there is an 1151 claim involving P&T.	Per M21-MR IV.ii.3.C.10.kk, this should be applied to identify when the veteran is P&T as a result of a 1151 claim.
<b>38 USC 1151</b>	Used when there is an 1151 claim.	Per 38 U.S.C. Section 1151 prior to rescission M21-1MR, Part IV, Subpart ii, Chapter 3, Section D, should be applied upon receipt to identify when the Veteran has a 1151 claim. This flash can be removed if the issue is denied.
<b>Active Chapter 31 Case</b>	Used when there is an open Chapter 31 case.	Per March 2014 VSCM Bulletin, should be applied when a Veteran's profile has an open Chapter 31 case.
<b>Amyotrophic Lateral Sclerosis</b>	Used when there is a claim for ALS.	Per FL 12-06, should be applied to a Veteran's profile when they are diagnosed with ALS.
<b>AO/Hypertension</b>	Used when there is a claim for hypertension due to AO exposure.	Per 38 CFR 3.309, should be applied upon receipt to identify the Veteran's profile who claims hypertension due to agent orange exposure.
<b>Attorney Fee</b>	Used when an attorney fee is involved in a case.	Per FL 11-12, should be applied to a Veteran's profile when there is a attorney fee involved in a case.
<b>Automobile Adaptive Equipment Paid</b>	Use when a payment for Automobile and/or Adaptive Equipment has been made.	Per FSC system limitations, should be applied to Veteran's profile when there has been a payment made for automobile and/or adaptive equipment. This flash is largely system-generated.
<b>Automobile Allowance Paid</b>	Used when Automobile Allowance is paid.	Per FSC system limitations, should be applied to Veteran's profile when there has been a payment made for automobile allowance. This flash is largely system generated.
<b>Blind</b>	Used to identify records of visually impaired claimants.	Per M21-1MR II.5.5.g, M21-1MR III.v.2.B.10.c, should be applied to a Veteran's profile when the Veteran is blind regardless of service connection.
<b>BVA Decision</b>	Used when there is a Board of Veterans Appeals decision.	Should be applied to a Veteran's profile when BVA Decision has resulted in a full grant. This flash should only be used by the AMC.
<b>CADD - Written Requests Only</b>	Used when a written request is needed in order to change the address on a record.	Per MR-M21 IV, should be applied to a Veteran's profile when there is a written request needed in order to change the address of record.
<b>Camp Lejeune Veteran</b>	Used for Veterans who served at Camp Lejeune.	Per FL 11-03, should be applied to a Veteran's profile when a Veteran served at Camp Lejeune between {} to {}. This flashes is used to identify Veteran's who may have been exposed to contaminated water.
<b>CAVC Temp File</b>	Used when temporary file was created because a claim is being reviewed by the Court of Appeals for Veterans Claims.	Should be applied to the Veteran's profile when there is a temporary paper file has been created because a claim is being reviewed by the Court of Appeals for Veterans Claims. This flash should be removed once the files have been consolidated.

## Flashes Tab

Title	Business rules	Authority
<b>CHAMPUS Entitlement Exists</b>	Used when veteran is entitled to CHAMPVA.	Should be applied to the Veteran's profile when the Veteran is entitled to CHAMPVA.
<b>Clear and Unmistakable Error</b>	Used when there is a clear and unmistakable error.	Per {}, should be applied to a Veteran's profile when a Veteran's case has resulted in a clear and unmistakable error. This flash should be removed from the Veteran's profile as soon as the clear and unmistakable error has been resolved.
<b>Closed Chapter 31 Case</b>	Used when Chapter 31 case is closed.	Should be applied to a Veteran's profile when a Chapter 31 case has been closed.
<b>Committee on Waiver Case</b>	Used when Committee on Waiver is involved.	Should be applied to a Veteran's profile when the Committee on Waiver is involved.
<b>Compensation Under 1925 Rating Schedule</b>	Used when compensation was decided under the 1925 Rating Schedule.	Per {}, should be applied to a Veteran's profile when there is a rating decision based on the 1925 Rating Schedule and the Veteran has submitted a New claim.
<b>Congressional</b>	Used when there is a congressional.	Should be applied to a Veteran's profile when there is a pending congressional inquiry. This flash should be removed from the Veteran's profile as soon as the congressional inquiry is resolved.
<b>Copy VAF 21-526 before return to vet for sign</b>	Used when a VAF 21-526 needs to be returned to Veteran for signature.	
<b>Counsel Folder Location</b>	Used when an advisory opinion from General Counsel is present.	Per 38 C.F.R. §20.901 and 20.902, should be applied to a Veteran's profile when an advisory opinion from General Counsel is sought. The flash should be removed once the advisory opinion form General Counsel is received.
<b>CRSC/CRDP Case</b>	Used when CRSC/CRDP applies.	Should be applied to the Veteran's profile when there is a CRSC/CRDP case.
<b>CSRS</b>	Used when CSRS is applies.	Should be applied to the Veteran's profile when there is a CSRS case.
<b>Death in Service</b>	Used when Veteran died in service.	Eligibility Based on Death in Service: M21-1MR III.iii.6.C.14.f Historical M21-1, Part II, 4.02e: "Forward applications for death in service or while in training or on officially authorized travel to Philadelphia RO."
<b>Denied - Fraud</b>	Used when claim is denied because of fraud.	Per 38 C.F.R 3.901, should be applied to a Veteran's profile when a case has been denied based on fraud.
<b>Disappearance of Veteran</b>	Used when Veteran cannot be located.	Per 38 C.F.R. § 3.656, should be applied to the Veteran's profile when a reasonable effort has been made to locate the Veteran and the Veteran cannot be located. The flash should be removed when the Veteran is located.
<b>Document(s) exist in VBMS</b>	Used to notify that there is/are document(s) uploaded into the VBMS eFolder.	Should be applied to the Veteran's profile when documents exists in VBMS. This is largely a system-generated flash.

## Flashes Tab

Title	Business rules	Authority
<b>Documents Exist in Virtual VA</b>	Used to notify that there is/are document(s) uploaded into the Virtual VA.	Should be manually applied to the Veteran's profile when documents exists in Virtual VA. (Virtual VA Minutes dated 2/13/12)
<b>Dual Benefits</b>	Used when there is a dual claim (for both Comp and Pension)	Per {}, Should be applied to the Veteran's profile when the Veteran is entitled to both Compensation and Pension benefits.
<b>Economic Recovery Payment 250</b>	Used when a payment is made due to the Economic Recovery Act.	<p>This flash is not available to Regional Offices. Per the Economic Recovery Payment (ERP) Post-Batch Payments Frequently Asked Questions (FAQs) document, "On February 17, 2009, the President signed the American Recovery and Reinvestment Act of 2009, Public Law 111-5. Section 2201 of the act authorizes a one-time, \$250 Economic Recovery Payment (ERP) to eligible persons."</p> <p>For inquiries received on or after July 10, 2009, "The Nashville RO ERP Team will control all ERP requests for payment with end product (EP) 290 using the claim label "Economic Recovery Payment- Entitlement Review" and the flash "Economic Recovery Payment 250." The date of claim is the date VA receives the request for payment."</p>
<b>FBI Case</b>	Used to identify claims where FBI is involved.	Per M21-1MR III.ii.5.F.27.c, should be applied to a Veteran's profile when the FBI is involved.
<b>Filipino Equity Comp 15000</b>	Used for Filipino Equity Compensation claims with a lump sum benefit of \$15,000.	Per M21-1MRV.iii.7.A.6.b, should be applied to a Veteran's profile when there is a Filipino Equity Compensation claim with a lump sum benefit of \$15,000
<b>Filipino Equity Comp 9000</b>	Used for Filipino Equity Compensation claims with a lump sum benefit of \$9,000.	Per FL 09-17, should be applied to a Veteran's profile when there is a Filipino Equity Compensation claim with a lump sum benefit of \$9,000
<b>Foreign Claim</b>	Used when claimant resides in a foreign country.	Per M21-1MR III.iii.3.A.7, should be applied to the Veteran's profile when the Veteran is living in a foreign country. The flash should be removed when the Veteran is no longer living in a foreign country.
<b>Forfeiture Case</b>	Used when there is a forfeiture case.	Per M21-1MR III.vi.5.B.4.a, should be applied to a Veteran's profile when there is a forfeiture case.
<b>Fraud</b>	Used when fraud is at issue.	M21-1MR III.vi.5.B.4.a, should be applied to a Veteran's profile when fraud is an issue. The flash should be removed when the issue of fraud is resolved.
<b>Fugitive Felon</b>	Used when Veteran is a fugitive felon.	Per 38 CFR 3.666 or 3.665 M21-1MR 16.4.a, should be applied to a Veteran's profile when the Veteran is identified as a fugitive felon.

## Flashes Tab

Title	Business rules	Authority
<b>Gulf War Registry</b>	Used for Veteran who are in the Gulf War Registry.	Per October 2005 VSCM Call/Bulletin & TL 10-01, should be applied to a Veteran's profile when the Veteran is in the Gulf War Registry.
<b>GW Undiagnosed Illness</b>	Used when Undiagnosed Gulf War Illness is at issue.	Per 38 CFR 3.317, should be applied to a Veteran's profile when the Veteran is service connected for conditions attributed to Gulf War Undiagnosed Illness
<b>G-WOT Active Duty DOD</b>	Used to identify G-WOT Veteran as confirmed by DOD.	Per M21-1MRIII.i.2.A.1.f, should be applied to a Veteran's profile when the Veteran is confirmed to have been an active duty GWOT Veteran by DOD.
<b>G-WOT Active Duty Veteran Provided</b>	Used to identify G-WOT Veteran as confirmed by evidence provided by Veteran.	Per M21-1MRIII.i.2.A.1.f, should be applied to a Veteran's profile when the Veteran is confirmed to have been an active duty GWOT Veteran by evidence the Veteran submitted
<b>G-WOT Guard/Reserve DOD</b>	Used to identify G-WOT Veteran who was in Reserves or national Guard as confirmed by DOD.	Per M21-1MRIII.i.2.A.1.f, should be applied to a Veteran's profile when the Veteran is confirmed to have been a Guard or Reserve GWOT Veteran by DOD.
<b>G-WOT Guard/Reserve Veteran Provided</b>	Used to identify G-WOT Veteran who was in Reserves or National Guard as confirmed by evidence provided by Veteran.	Per M21-1MRIII.i.2.A.1.f & <a href="http://vbaw.vba.va.gov/bl/21/systems/docs/vetsnetfeb2008releasechanges.pdf">http://vbaw.vba.va.gov/bl/21/systems/docs/vetsnetfeb2008releasechanges.pdf</a> , should be applied to a Veteran's profile when the Veteran is confirmed to have been a Guard or Reserve GWOT Veteran by evidence the Veteran submitted.
<b>Hardship</b>	Used to identify hardship case.	Per M21-1MR IV.16 Or M21-1MRi.3.c., should be applied to a Veteran's profile when the Veteran is a hardship case.
<b>Homeless</b>	Used to identify homeless case.	Per M21-1MR VII.6., should be applied to a Veteran's profile when the Veteran is a homeless case.
<b>In Receipt of Chapter 31</b>	Used when claimant is in receipt of Chapter 31 benefits.	M21-4, Appendix B, Section II.
<b>Incarceration</b>	Used when Veteran is incarcerated.	Per 38 CFR 3.452, 3.665 & 3.666 & M21-1MRV.iii.7.A.5.e, should be applied to the Veteran's profile when the Veteran is incarcerated.
<b>Insurance Flash (VA Form 20-6879)</b>	Used to indicate that there is an overpayment related to insurance.	Should be applied to the Veteran's profile when there is an overpayment due to insurance.
<b>IVM</b>	Used for IVM case.	Legal authorities: 26 IRC 6103 (l)(7), 38 CFR 3.103, 5 USC 552a, 38 USC 5317, 38 USC 5106; 38 USC Chapter 11. This flash will eventually need to be replaced with Post Award Audits. However, we still need this flash because we have 'IVM' folders at ROs. Until those claims are completed and the folders destroyed, this flash must remain.
<b>Job Training Folder Exists</b>	Used to indicate there is a separate VR&E folder related to job training.	Should be applied to the Veteran's profile when a job training folder exists.

## Flashes Tab

Title	Business rules	Authority
<b>Locked File</b>	Used to indicate that this file is in restricted and kept in a locked room.	Per M21-1MRIII.ii.1.C.14.j; M21-1MRIII.ii.4.A.3.a; M21-1MRIII.ii.4.A.3.b; FL 01-59, should be applied to the Veteran's profile when the Veteran's file is restricted and kept in a locked room.
<b>Mini-VSC Orlando</b>	Used to identify claims being the mini-Veterans Service Center in Orlando.	Should be applied to the Veteran's profile for paper claims being worked at the mini-VSC in Orlando, FL.
<b>Mini-VSC WPB</b>	Used to identify claims being the mini-Veterans Service Center in in West Palm Beach VAMC.	Should be applied to the Veteran's profile for paper claims being worked at the mini-VSC in West Palm Beach FL.
<b>National Guard</b>	Used to identify Veterans who served in National Guard.	Per M21-1MRIII.v.4.C.12.a; M21-1MRIII.v.4.C.12.b, should be applied to the Veteran's profile for Veterans who served in the National Guard.
<b>Nehmer - AL Amyloidosis</b>	Used to identify Nehmer cases involving AL Amyloidosis.	Per FL 09-43; FL 09-27; FL 09-09 Rescinded by FL 10-41; FL 08-46; FL 08-31, should be applied to the Veteran's profile when the Veteran has an identified Nehmer case involving AL Amyloidosis.
<b>Nehmer - IHD - PD - HCL</b>	Used to identify Nehmer cases involving Ischemic Heart Disease, Parkinson's disease, and Hairy-Cell Leukemia.	Per FL 10-41; FL 03-06 & 03-02 both rescinded by FL 06-2, should be applied to the Veteran's profile when the Veteran has an identified Nehmer case involving Ischemic Heart Disease, Parkinson's disease, and Hairy-Cell Leukemia.
<b>No Paper Claim Folder</b>	Used to identify claims being processed without a paper claims folder.	Should be applied to a Veteran's profile when claims are being processed without a paper claims folder.
<b>No Paper NOD Folder</b>	Used to identify survivor claims being processed without a Notice of Death (NOD) folder.	Should be applied to a Veteran's profile when a claims are being processed without a Notice of Death (NOD) folder.
<b>Non - Nehmer Agent Orange 2010</b>	Used to identify non-Nehmer cases involving Ischemic Heart Disease, Parkinson's disease, and Hairy-Cell Leukemia (conditions added to AO list in 2010).	Per FL 09-50, should be applied the Veteran's profile when the Veteran has a non-Nehmer case involving Ischemic Heart Disease, Parkinson's disease, and Hairy-Cell Leukemia
<b>Office of Investigation, Central Office</b>	Used to identify record being investigated by the Central Office – Office of Investigation.	Should be applied to the Veteran's profile when the case is being investigated by the Central Office- Office of Investigation.
<b>OIG Case</b>	Used to identify record being investigated by the Office of Inspector General (OIG).	Should be applied to the Veteran's profile when the record is being investigated by the OIG.



## Flashes Tab

Title	Business rules	Authority
<b>OWCP referral after rating, disallow, notify Vet</b>	Used to identify claims that were referred for worker's compensation after rating, and the disallowed (?).	Should be applied to the Veteran's profile when there is a claim that was referred for worker's compensation after rating and the claim was disallowed.
<b>Potential Attorney Fee</b>	Used to identify records that may involve an attorney fee.	Per M21-1MR, Part III, Subpart vi, Chapter 6, Section A and M21-1MR, Part I, 3.C, should be applied to the Veteran's profile when a potential attorney fee is involved.
<b>POW</b>	Used to identify Veterans who were Prisoners of War (POW).	Per FL 96-03 (Rescinded by FL 01-10; FL 10-04; FL 04-18, should be applied to the Veteran's profile when the Veteran is a POW.
<b>Private Attorney - Fees Payable</b>	Used to identify records that involve a private attorney to whom a fee must be paid.	Per M21-1MR, Part III, Subpart vi, Chapter 6, Section A and M21-1MR, Part I, 3.C, should be applied to the Veteran's profile when there is a private attorney to whom a fee must be paid.
<b>Private Attorney - No Fees Payable</b>	Used to identify records that involve a private attorney to whom a fee does not need to be paid.	Per M21-1MR, Part III, Subpart vi, Chapter 6, Section A and M21-1MR, Part I, 3.C, should be applied to the Veteran's profile when there is a private attorney to whom a fee does not need to be paid.
<b>Provider Proof of Medical Expense Case</b>	Used to identify cases where a Veteran's provider is claiming medical expenses.	Per M21-1MR, Part V, Subpart iii, Chapter 1, Section G, should be applied to the Veteran's profile when the Veteran's provider is claiming medical expenses. Only used by PMC.
<b>Railroad Retirement</b>	Used to identify records that involve Railroad retirement.	Per M21-1MRV.iii.1.C.16.i; FL 99-96; FL 98-11, should be applied to the Veteran's profile when the record involves Railroad Retirement.
<b>Rebuilt Fldr, Ntfy NPRC when consolid w/lost File</b>	Used to identify record with a rebuilt claims folder. Must notify NPRC when original (lost) claims folder is found and merged with the rebuilt folder.	Should be applied to the Veteran's profile when there is a need to identify a rebuilt claims folder. The user must notify the NPRC when original (lost) claims folder is found and merged with the rebuilt folder. Please remove the flash once the original (lost) claims folder is found.
<b>Reserve</b>	Used to identify Veterans who served in the Reserves.	Per M21-1MRIII.v.4.C.12.a; M21-1MRIII.v.4.C.12.b, should be applied to the Veteran's profile for Veterans who served in the Reserve.
<b>Restricted Access</b>	Used to identify records requiring restricted access.	Per Letter 20F-13-04, should be applied to the Veteran's profile to identify records requiring restricted access
<b>Returned to Active Duty</b>	Used to identify records of Veterans who returned to active duty.	Per M21-1MRIII.iv.8.C.8.i; M21-1MRIII.v.4.C.16.g, should be applied to the Veteran's profile when the Veteran has returned to Active Duty. The flash should be removed when the Veteran is no longer on Active Duty.
<b>Secret Service Case</b>	Used to identify cases involving the Secret Service.	Should be applied to the Veteran's profile when the secret service is involved.
<b>Sensitive Level 6</b>	Used to identify Sensitive Level 6 cases.	Per M21-1MR III.ii.4.A.4.d, should be applied to the Veteran's profile when there is sensitive level 6 access to the Veteran's record.

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Title	Business rules	Authority
<b>Seriously Injured/Very Seriously Injured</b>	Used to identify records of Veterans who were discharged due to being seriously/very seriously injured.	Per M21-1MR III.i.2.A.1.e; M21-1MR III.iii.2.I.53.a; M21-1MR, Part III, Subpart i, Chapter 2, Section A, should be applied to the Veteran's profile when the Veteran is seriously or very seriously injured.
<b>Specially Adapted Housing Claimed</b>	Used to identify records with a claim for Special Adapted Housing (SAH).	Per FL 14-01; FL 11-06, should be applied to the Veteran's profile when special adapted housing is claimed.
<b>Specially Adapted Housing Paid</b>	Used to identify records where Specially Adapted Housing was paid.	Per 38 CFR 3.809, should be applied to the Veteran's profile when a claim for specially adapted housing has been paid.
<b>Supervised Direct Pay</b>	Used to identify records of incompetent veterans that require supervised direct pay.	Should be applied to the Veteran's profile when the Veteran is incompetent and it requires supervised direct paid. This flash should only be added and removed by the Fiduciary Hubs.
<b>Temporary Folder Exists</b>	Used to indicate that a temporary folder exists for the record.	Per M21-1MR III.ii.1.C.14.e, should be applied to the Veteran's profile when there is a temporary folder in existence.
<b>Terminated - Fraud</b>	Used to identify a record where an award has been terminated due to fraud.	Per M21-1MR III.vi.5.A.1.a; M21-1MR III.vi.5.A.2.b, should be applied to the Veteran's profile when the Veteran's benefits have been terminated due to fraud.
<b>Third Party Release</b>	Used when third party release is involved.	Per FL 10-49, should be applied to the Veteran's profile when a third party release is required.
<b>Traumatic Brain Injury</b>	Used when Veteran has claimed a traumatic brain injury.	Per TL 09-01; TL 07-05; TL 06-03, should be applied to the Veteran's profile when the Veteran claims traumatic brain injury.
<b>VA Employee</b>	Used to identify records of VA employees.	Per M21-1MR III.ii.4.A.3.d, should be applied to the Veteran's profile when the Veteran is a VA employee.
<b>Vietnam In - Country Service Verified</b>	Used to identify Veterans who have confirmed in-country Vietnam service.	Per FL 10-37, should be applied to the Veteran's profile when the Veteran has confirmed in-country Vietnam Service
<b>Voluntary Separation Incentive</b>	Used to identify Veterans who received the Voluntary Separation Incentive.	Per M21-1MR, Part III, Subpart v, Chapter 4, Section B, should be applied to the Veteran's profile when the Veteran received Voluntary Separation Incentive
<b>VR Trainee</b>	Used to identify Veterans who are Vocational Rehabilitation (VR) trainees.	Should be applied to the Veteran's profile when the Veteran is a Vocational Rehabilitation (VR) trainees

## Special Issues (Development) Tab

Special Issues (Development) Tab		
Special Issue	Business Rule	Authority
<b>2009 Agent Orange Presumptive</b>	Herbicide-related claims for: ischemic heart disease, Parkinson's disease, and hairy cell and other chronic B cell leukemia's.	Per FL 11-27, should be applied to herbicide-related compensation contentions for ischemic heart disease, Parkinson's disease, and hairy cell and other chronic B cell leukemia's.
<b>38 USC 1151</b>	Claims for disability, injury or death incurred as a result of VAMC hospitalization.	Per 38 USC 1151, should be applied to compensation contentions for disability, injury and/or death incurred as a result of VAMC treatment
<b>4142 Pilot</b>	Only the Regional Offices participating in the pilot, as part of either the pilot group or the control group should use this special issue. They are: Pilot: New York, Chicago, Indianapolis, St. Louis, Jackson, Phoenix, and Portland. Control: Columbia, Cleveland, New Orleans, and Oakland.	Pilot Program: Only the New York, Chicago, Indianapolis, St. Louis, Jackson, Phoenix, and Portland. Control: Columbia, Cleveland, New Orleans, and Oakland Regional Offices should use this special issue. Special Issue can be end dated at the completion of the pilot program on 11/01/2014.
<b>5103 Waiver Review</b>	To identify claims that fall under the VCAA Waiver Letter Project.	Per FL 13-02, should be applied to a compensation and pension contentions identified as a part of the section 5103 notice initiative.
<b>Administrative Decision Review - Level 1</b>	Cases that require Administrative Decision Review- Level 1 approval.	Per NWQ SOP, should be applied when a case requires Administrative Decision Review- Level 1. The special issue should be removed as soon as this requirement is no longer required.
<b>Administrative Decision Review - Level 2</b>	Cases that require Administrative Decision Review- Level 2 approval.	Per NWQ SOP, should be applied when a case requires Administrative Decision Review- Level 2. The special issue should be removed as soon as this requirement is no longer required.
<b>Administrative Pension (Age 65) with 60% SMP</b>	Claims for non-service-connected (NSC) pension benefits under 38 U.S.C. § 1513(a) for having attained age 65 are entitled to special monthly pension (SMP) at the housebound rate when they have disability(ies) independently ratable at 60 percent or more, o	Per FL 08-23 and 38 USC 1513(a), should be applied to pension contentions when the veteran is age 65 or older and is rated at the housebound rate.

## Special Issues (Development) Tab

Special Issue	Business Rule	Authority
<b>Agent Orange - outside Vietnam or unknown</b>	When a Veteran claims Agent Orange Exposure outside of Vietnam.	Per 38 CFR 3.309(e), should be applied to compensation contentions when a veteran associates a disability to Agent Orange exposure during military service outside of Vietnam.
<b>Agent Orange - Vietnam</b>	When a Veteran claims Agent Orange Exposure while in Vietnam.	Per 38 CFR 3.309(e), should be applied to compensation contentions when a veteran associates a disability to Agent Orange exposure during military service in Vietnam.
<b>AMC NOD Brokering Project</b>	To identify claims that are part of the AMC NOD Brokering Project.	Per VSCM memo from December 2012, should be applied to compensation and pension contentions identified as a part of the AMC notice of disagreement brokering project.
<b>Amyotrophic Lateral Sclerosis (ALS)</b>	When a Veteran claims ALS	Per FL 08-31, should be applied to compensation contentions when the veteran claims amyotrophic lateral sclerosis (ALS).
<b>Asbestos</b>	When a Veteran claims a disability related to Asbestos	Per M21-1MR.IV.ii.2.C.9, should be applied to compensation contentions when a veteran associates a disability to asbestos exposure.
<b>Compensation Service Review</b>	Cases that require Compensation Service Review	Per NWQ SOP, should be applied when a case requires Compensation Service Review. The special issue should be removed as soon as this requirement is no longer required.
<b>Core Claim</b>	In support of segmentation pilots in Indianapolis and Houston. Identifies any claim that is not categorized as Express Claim or Special Ops Claim.	Per Segmented Lane TIP Sheet, should be applied to any compensation or pension contention associated with the core segmented lane team. This should only be used when the claim is an exclusion to VBMS and needs to be worked in MAP-D.
<b>Disability Benefits Questionnaire - Private</b>	Apply to any completed DBQ received from any source outside the VA.	Per FL 12-11, should be applied to any compensation contention when a DBQ is received from any non-VA source.
<b>Disability Benefits Questionnaire - VA</b>	Apply to any DBQ completed by a VHA clinician outside of the C&P exam process.	Per FL 12-11, should be applied to any compensation contention when a DBQ needs to be completed through the C&P examination process.
<b>Disability Evaluation System (DES)</b>	Claims received prior to separation from service when a VA examination has also been obtained	Per FL 08-01, should be applied to any compensation contention when the claim is a part of the IDES program. This should only be used by the Providence and Seattle DRAS.
<b>Enhanced Disability Severance Pay</b>	When a Veterans claim meets the criteria for this special issue	Per FL 13-16, should be applied to any compensation contention when VA compensation was withheld to recoup disability severance pay for certain Navy and Marine Corps veterans but at a later date a corrected DD Form 214 or separation orders was received.

## Special Issues (Development) Tab

Special Issue	Business Rule	Authority
<b>Environmental Hazard - Camp Lejeune</b>	When a Veterans claim is based on Camp Lejeune Environmental Hazard	Per FL 11-03, should be applied to any compensation contention when the veteran associates a disability with Camp Lejeune Environment Hazard.
<b>Environmental Hazard in Gulf War</b>	When a Veterans claim is based on Gulf War Environmental Hazards	Per TL 10-03, should be applied to any compensation contention when the veteran associates a disability with an environment hazard due to Gulf War military service.
<b>Express Claim</b>	When a claim meets express claim criteria	Per Segmented Lane TIP Sheet, should be applied to any compensation or pension contention associated with the express segmented lane team. This should only be used when the claim is an exclusion to VBMS and needs to be worked in MAP-D.
<b>Express Claim Excluded - Misidentified</b>	Used to identify those claims that are removed from the Express Lane because they were misidentified in Triage or IPC	Per Segmented Lane TIP Sheet, should be applied to any compensation or pension contention that was originally considered to be associated with the express segmented lane team but was later deemed an exclusion due to being misidentify. This should only be used when the claim is an exclusion to VBMS and needs to be worked in MAP-D.
<b>Express Claim Excluded-Additional Evidence</b>	Used to identify those claims that are removed from the Express Lane because additional issues are identified	Per Segmented Lane TIP Sheet, should be applied to any compensation or pension contention that was originally considered to be associated with the express segmented lane team but was later deemed an exclusion due to additional evidence received. This should only be used when the claim is an exclusion to VBMS and needs to be worked in MAP-D.
<b>Express Claim Excluded-VBA Administrative Reason</b>	When a claim meets express claim criteria	Per Segmented Lane TIP Sheet, should be applied to any compensation or pension contention that was originally considered to be associated with the express segmented lane team but was later deemed an exclusion due to an administrative reason. This should only be used when the claim is an exclusion to VBMS and needs to be worked in MAP-D.
<b>FDC Excluded - Claimant Declined FDC Processing</b>	During review, a claim is discovered to no longer meet FDC criteria because claimant declined FDC processing.	Per VSCM Memo May 2014, should be applied to compensation claims when the veteran submits a FDC and needs to be excluded due to the claimant declining the FDC processing.

## Special Issues (Development) Tab

Special Issue	Business Rule	Authority
<b>FDC Excluded - Evidence Received After FDC CEST</b>	During review, a claim is discovered to no longer meet FDC criteria because more evidence was received after FDC claim was established.	Per VSCM Memo May 2014, should be applied to compensation claims when the veteran submits a FDC and needs to be excluded due to evidence Received After FDC CEST
<b>FDC Excluded - Needs Non-Fed Evidence Development</b>	During review, a claim is discovered to no longer meet FDC criteria because development for non-Federal evidence is needed.	Per VSCM Memo May 2014, should be applied to compensation claims when the veteran submits a FDC and needs to be excluded due to needs non-federal evidence development
<b>FDC Excluded- Additional Claim Submitted</b>	FDC Excluded because an additional claim has been submitted	Per VSCM Memo May 2014, should be applied to compensation claims when the veteran submits a FDC and needs to be excluded due to additional claim submitted
<b>FDC Excluded- Appeal Pending</b>	FDC Excluded because there is an appeal pending	Per VSCM Memo May 2014, should be applied to compensation claims when the veteran submits a FDC and needs to be excluded due to appeal pending
<b>FDC Excluded- Claim Pending</b>	FDC Excluded because there is already a claim pending	Per VSCM Memo May 2014, should be applied to compensation claims when the veteran submits a FDC and needs to be excluded due to claim pending
<b>FDC Excluded- FDC Certification Incomplete</b>	FDC Excluded because the FDC certification is incomplete	Per VSCM Memo May 2014, should be applied to compensation claims when the veteran submits a FDC and needs to be excluded due to FDC certification incomplete
<b>FDC Excluded- FTR to Examination</b>	FDC Excluded because of failure to report for examination	Per VSCM Memo May 2014, should be applied to compensation claims when the veteran submits a FDC and needs to be excluded due to failure to report of examination
<b>FDC Excluded- Necessary Form(s) not Submitted</b>	FDC Excluded because the necessary form(s) were not submitted.	Per VSCM Memo May 2014, should be applied to compensation claims when the veteran submits a FDC and needs to be excluded due to necessary form(s) not submitted
<b>FDC Excluded- Requires INDPT VRFCTN of FTI</b>	FDC Excluded because it requires independent verification of FTI. This should only be applied to Pension cases.	Per (forthcoming guidance), should be applied to FDC cases where the case should be excluded because it requires independent verification of FTI. This should only be applied to Pension cases.
<b>Fully Developed Claim</b>	Use for FDC	Per FL 08-48, should be applied to any compensation contention apart of a fully developed claim.
<b>Gulf War Presumptive</b>	When a Veteran claims a Gulf War Presumptive condition	Per 11-09, should be applied to any compensation contention when the veteran associates a disability to a Gulf War presumptive condition.

## Special Issues (Development) Tab

Special Issue	Business Rule	Authority
<b>Hepatitis C</b>	When a Veteran claims Hepatitis	Per TL 01-02, should be applied to the compensation contention when the veteran claims Hepatitis C.
<b>HIV</b>	When a Veteran claims HIV	Per TL 00-03, should be applied to the compensation contention when the veteran claims HIV.
<b>Local Mentor Review</b>	Cases that require Local Mentor Review approval.	Per NWQ SOP, should be applied when a cases requires Local Mentor Review. The special issue should be removed as soon as this requirement is no longer required.
<b>Medical Foster Home</b>	Use for claim meeting Medical Foster Home Care criteria	Per FL 11-13, should be applied to the compensation or pension contention when the veteran claims medical foster home or corresponding equivalent.
<b>Military Sexual Trauma (MST)</b>	When a Veteran claims Military Sexual Trauma	Per TL 05-04, should be applied to the compensation contention when the veteran claims a disability attributed to military sexual trauma. These cases should be only worked by a MST Coordinator.
<b>Mustard Gas</b>	When a Veteran claims a disability related to exposure to Mustard Gas in WWII	FL 96-77, should be applied to the compensation contention when the veteran claims a disability attributed to mustard gas. These claims should only be worked by the Muskogee Regional Office
<b>Nehmer AO Peripheral Neuropathy</b>		Per FL 14-08, should be applied to the compensation contention when the veteran claims Nehmer Agent Orange peripheral neuropathy.
<b>Nehmer Phase II</b>	Identify claims that are part of Nehmer Phase II re-adjudication	Per TL 10—04.
<b>Non-ADL Notification Letter</b>	Cases that require a non-ADL Notification Letter.	Per NWQ SOP, should be applied when a case requires Non-ADL Notification Letter.
<b>Non-Nehmer AO Peripheral Neuropathy</b>		Per FL 14-08, should be applied to the compensation contention when the veteran claims non-Nehmer Agent Orange peripheral neuropathy.
<b>Non-PTSD Personal Trauma</b>	When a Veteran claims any condition, mental or physical (other than PTSD), resulting from a non-sexual personal trauma	Per FL 08-08, should be applied to the compensation contention when the veteran claims a disability attributed to non-PTSD personal trauma that is non-sexual.
<b>POW</b>	When a Veteran claims POW-related illness	Per FL 10-04, should be applied to a compensation or pension contention when the veteran claims a disability attributed to being a former POW. These cases should be only worked by a POW Coordinator.

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## Special Issues (Development) Tab

Special Issue	Business Rule	Authority
<b>Pre-Discharge Consolidated Action</b>	When a BDD or QS claim is ready to be sent from the intake site to a RAS or CPS for further processing.	Per NWQ SOP, this should be applied when a BDD or QS claim is ready to be sent from the intake sites to a RAS or CPS for further processing.
<b>PTSD - Combat</b>	When a Veteran claims Combat related PTSD	Per 38 CFR 3.304(f), should be applied to a compensation contention when the veteran claims PTSD due to combat.
<b>PTSD - Non-Combat</b>	When a Veteran claims Non-Combat related PTSD claims	Per 38 CFR 3.304(f), should be applied to a compensation contention when the veteran claims PTSD due to non-combat. Verification", or "Stressful Event".
<b>PTSD - Personal Trauma</b>	When a Veteran claims PTSD related to a personal trauma but not related to military sexual trauma (MST)	Per FL 10-25, should be applied to a compensation contention when the veteran claims PTSD due to personal trauma .
<b>Quick Pay</b>	When a claim meets the quick pay criteria	Per TL 11-02, should be applied to a compensation or pension contention when the quick pay criteria has been met to grant a complete set of benefits claimed by the veteran.
<b>Radiation</b>	Claims for disabilities resulting from exposure to ionizing or other radiation	Per FL 06-20, should be applied to a compensation contention when the veteran claims a disability associated with radiation exposure. These claims should only be worked at the Jackson Regional Office.
<b>Rating Decision Review - Level 1</b>	Cases that require Rating Decision Review - Level 1 approval.	Per NWQ SOP, should be applied when a case requires Rating Decision Review - Level 1. The special issue should be removed as soon as this requirement is no longer required.
<b>Rating Decision Review - Level 2</b>	Cases that require Rating Decision Review - Level 2 approval.	Per NWQ SOP, should be applied when a case requires Rating Decision Review - Level 2. The special issue should be removed as soon as this requirement is no longer required.
<b>RO Special Issue 1</b>	When an RO needs to track an issue that is not in MAP-D	Should be applied to a compensation or pension contention when the regional office needs to track a special issue not available in the application.
<b>RO Special Issue 2</b>	When an RO needs to track an issue that is not in MAP-D	Should be applied to a compensation or pension contention when the regional office needs to track a special issue not available in the application.
<b>RO Special issue 3</b>	When an RO needs to track an issue that is not in MAP-D	Should be applied to a compensation or pension contention when the regional office needs to track a special issue not available in the application.



## Special Issues (Development) Tab

Special Issue	Business Rule	Authority
<b>RO Special issue 4</b>	When an RO needs to track an issue that is not in MAP-D	Should be applied to a compensation or pension contention when the regional office needs to track a special issue not available in the application.
<b>RO Special issue 5</b>	When an RO needs to track an issue that is not in MAP-D	Should be applied to a compensation or pension contention when the regional office needs to track a special issue not available in the application.
<b>RO Special issue 6</b>	When an RO needs to track an issue that is not in MAP-D	Should be applied to a compensation or pension contention when the regional office needs to track a special issue not available in the application.
<b>RO Special issue 7</b>	When an RO needs to track an issue that is not in MAP-D	Should be applied to a compensation or pension contention when the regional office needs to track a special issue not available in the application.
<b>RVSR Examination</b>	Cases that are deemed to have complex examinations and require a RVSR to order the examination.	Per NWQ SOP, should be applied when a cases that are deemed to have complex examinations and require a RVSR to order the examination.
<b>Sarcoidosis</b>	When Veteran claims Sarcoidosis	Per 38 CFR 3.309(a), should be applied to a compensation contention when the veteran claims sarcoidosis.
<b>SHAD</b>	When a Veteran claims SHAD related disability	Per FL 02-24, should be applied to a compensation contention when the veteran claims a disability associated with SHAD. Please note: All notification of SHAD claims should be sent to VACO at SHADMANAGER@VBA.VA.GOV
<b>Special Ops Claim</b>	In support of segmentation pilots in Indianapolis and Houston. Identifies the following claims: Homeless, Military Sexual Trauma, Very seriously injured (VSI/SI), EP 681 Nehmer claims, POWs, FDC, ALS, Parkinson's disease, Multiple Sclerosis, Hazardous Exposure, CUE, SMC, 1151, and TBI.	Per Segmented Lane TIP Sheet, should be applied to any compensation or pension contention associated with the special ops segmented lane team. This should only be used when the claim is an exclusion to VBMS and needs to be worked in MAP-D.
<b>Tobacco</b>	When claim for disabilities as a result of in-service nicotine addiction	Per FL 01-30, should be applied to a compensation contention when the veteran claims a disability associated with a nicotine addiction that occurred during military service.
<b>VACO Special Issue 1</b>	When an RO needs to track an issue that is not in MAP-D	Should be applied to a compensation or pension contention when CO needs to track a special issue not available in the application.

## Special Issues (Development) Tab

Special Issue	Business Rule	Authority
<b>VACO Special Issue 2</b>	When an RO needs to track an issue that is not in MAP-D	Should be applied to a compensation or pension contention when CO needs to track a special issue not available in the application.
<b>VACO Special issue 3</b>	When an RO needs to track an issue that is not in MAP-D	Should be applied to a compensation or pension contention when CO needs to track a special issue not available in the application.
<b>VACO Special issue 4</b>	When an RO needs to track an issue that is not in MAP-D	Should be applied to a compensation or pension contention when CO needs to track a special issue not available in the application.
<b>VSR Single Signature</b>	Allows PMCs to delegate to certain employees single signature authority for eligible award actions. An employee delegated single signature authority when processing an eligible award action would not need a Senior VSR to review and cosign the award action prior to authorization.	M21-4 Appendix B. P&F supports changing this special issue to read "PMC VSR Single Signature".

## Special Issues (Rating) Tab

Special Issues (Rating) Tab	
Special Issue	Authority
<b>38 USC 1151</b>	Per 38 USC 1151, should be applied to compensation contentions for disability, injury and/or death incurred as a result of VAMC treatment. Additionally, can be applied to injuries or aggravation occurred while in Voc Reb per 38 USC Chapter 31 and participating under work related therapies per 38 USC 1718.
<b>Agent Orange</b>	Per 38 CFR 3.309(e), should be applied to compensation contentions when a veteran associates a disability to Agent Orange exposure during military service in Vietnam. Furthermore, RVSRs should distinguish whether the special issue basis is "AL Amyloidosis", "Chloracne or Acneform-3.309(e)", "Diabetes", "Hairy and Chronic B Cell Leukemia's (including CLL)", "Hodgkin's disease", "Interim Benefits- 3.813", "Ischemic Heart Disease", "Multiple Myeloma", "Non-Hodgkin's Lymphoma", "Other/Unknown- Agent Orange", "Parkinson's Disease", "Peripheral Neuropathy", "Porphyria Cutanea Tarda", "Prostate Cancer", "respiratory Cancers" or "Soft Tissue Sarcoma".
<b>Agent Orange – Outside Vietnam or Unknown</b>	Per 38 CFR 3.309(e), should be applied to compensation contentions when a veteran associates a disability to Agent Orange exposure during military service outside of Vietnam. Furthermore, RVSRs should distinguish whether the special issue basis is "AL Amyloidosis", "Chloracne or Acneform-3.309(e)", "Diabetes", "Hairy and Chronic B Cell Leukemia's (including CLL)", "Hodgkin's disease", "Interim Benefits- 3.813", "Ischemic Heart Disease", "Multiple Myeloma", "Non-Hodgkin's Lymphoma", "Other/Unknown- Agent Orange", "Parkinson's Disease", "Peripheral Neuropathy", "Porphyria Cutanea Tarda", "Prostate Cancer", "respiratory Cancers" or "Soft Tissue Sarcoma".
<b>Amyotrophic Lateral Sclerosis (ALS)</b>	Per FL 08-31, should be applied to compensation contentions when the veteran claims amyotrophic lateral sclerosis (ALS).
<b>Asbestos</b>	Per M21-1MR.IV.ii.2.C.9, should be applied to compensation contentions when a veteran associates a disability to asbestos exposure.
<b>Disability Evaluation system (DES)</b>	Per FL 08-01, should be applied to compensation and pension contentions when a veteran has a claim through the IDES program. Furthermore, RVSRs should distinguish whether the special issue basis is "Found DES Exam", "DES Claimed" or "PEB Referred".
<b>Environmental Hazard – Camp Lejeune</b>	Per FL 11-03, should be applied to any compensation contention when the veteran associates a disability with Camp Lejeune Environment Hazard.
<b>Environmental Hazard in Gulf War</b>	Per TL 10-03, should be applied to any compensation contention when the veteran associates a disability with an environment hazard due to Gulf War military service. Furthermore, the RVSR should distinguish whether the special issue basis is "Diagnosed- Biological", "Diagnosed- Environmental", "Other Unidentified" or "Undiagnosed Illness".
<b>Gulf War Presumptive</b>	Per FL 11-09, should be applied to any compensation contention when the veteran associates a disability to a Gulf War presumptive condition.
<b>Hepatitis C</b>	Per TL 01-02, should be applied to the compensation contention when the veteran claims Hepatitis C.
<b>HIV</b>	Per TL 00-03, should be applied to the compensation contention when the veteran claims HIV.

## Special Issues (Rating) Tab

Special Issue	Authority
<b>Mustard Gas</b>	Per FL 96-77, should be applied to the compensation contention when the veteran claims a disability attributed to mustard gas. These claims should only be worked by the Muskogee Regional Office. Furthermore, the RVSR should distinguish whether the special issue basis is "German Air Raid", "Manufacturing/ Handling", "Other/Unknown- Mustard Gas", "WWII Secret Tests", or "WWI- Mustard Gas"
<b>Non-PTSD Personal Trauma</b>	Per FL 08-08, should be applied to the compensation contention when the veteran claims a disability attributed to non-PTSD personal trauma. Furthermore, The RVSR should distinguish whether the special issue basis is "Personal Trauma (Non-Sexual)", "Sexual Harassment", or "Sexual Trauma/Assault".
<b>POW</b>	Per FL 10-04, should be applied to a compensation or pension contention when the veteran claims a disability attributed to being a former POW. These cases should only be worked by a POW Coordinator. Furthermore, the RVSR should distinguish whether the special issue basis is "Korea", "Other/Unknown-POW", "Peacetime", "Vietnam", "WWII-Asia", "WWII-Europe" or "WWI- POW".
<b>PTSD – Combat</b>	Per 38 CFR 3.304(f), should be applied to a compensation contention when the veteran claims PTSD due to combat. Furthermore, the RVSR should distinguish whether the special issue basis is "Combat Medal", "Fear-Easing Standard", or "Other Stressor Verification".
<b>PTSD – Non-Combat</b>	Per 38 CFR 3.304(f), should be applied to a compensation contention when the veteran claims PTSD due to non-combat. Furthermore, the RVSR should distinguish whether the special issue basis is "Fear-Easing Standard", "Other Stressor Verification", or "Stressful Event".
<b>PTSD – Personal Trauma</b>	Per FL 10-25, should be applied to a compensation contention when the veteran claims PTSD due to personal trauma that is non-sexual.
<b>Radiation</b>	Per FL 06-20, should be applied to a compensation contention when the veteran claims a disability associated with radiation exposure. These claims should only be worked at the Jackson Regional Office. Furthermore, RVSRs should distinguish whether the special issue basis is "Atmospheric Nuc-3.309(d)", "Atmospheric Nuc-3.311", "Occupational Treatment", "Occupying Force", "Occupying Force Hiro/Nag", or "Other/Unknown-Radiation".
<b>Burn Pit Exposure</b>	Per TL 10-03, should be applied to any compensation contention when the veteran associates a disability with an environment hazard due to Gulf War military service.
<b>Enhanced Disability Severance Pay</b>	Per FL 13-16, should be applied to any compensation contention when VA compensation was withheld to recoup disability severance pay for certain Navy and Marine Corps veterans but at a later date a corrected DD Form 214 or separation orders was received.