

APPEALS MODERNIZATION ACT LETTER GUIDE

VETERANS BENEFITS ADMINISTRATION MARCH 2019



U.S. Department
of Veterans Affairs

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1 Purpose

To provide Veterans Service Representatives (VSRs), Rating VSRs (RVSRs), Decision Review Officers (DROs) and supervisory regional office personnel, including Directors and Veterans Service Center Managers (VSCMs) with guidelines on providing letters under Public Law 115-55 in connection to the Appeals Modernization Act (AMA).

2 Background

On August 23, 2017, *the Veterans Appeals Improvement and Modernization Act of 2017*, known as the Appeals Modernization Act (AMA) was signed into law and is one of the most significant statutory changes to VA in decades. The new appeals process is simple, timely and fair to Veterans, offering Veterans greater choice in how they resolve disagreements with VA decisions. AMA is effective February 19, 2019.

Under the new law, Veterans are given a choice of one of three “lanes” to have a disagreement reviewed: as a supplemental review with new and/or relevant evidence, a higher-level review (HLR) of the evidence, or an appeal directly to the Board of Veterans’ Appeals. The enhancements under AMA are part of VA’s continued effort to improve the delivery of benefits and services to Veterans and their families.

3 Improved VBA Decision Notices Initiative

The statutory provision concerning the content of a VA decision is found under § 5104 of title 38 of the United States Code (U.S.C.).

Public Law 115-55 amends § 5104(b) and now requires VA to include the following elements in all decision notices:

1. Identification of the issues adjudicated
2. Summary of the evidence considered
3. Explanation of the laws and regulations applicable to the claim
4. Summary of any findings made by the adjudicator that are favorable to the claimant
5. For denied claims, identification of the element(s) required to grant the claim(s) that were not met
6. If applicable, identification of the criteria required to grant the next higher level of the benefit sought
7. Explanation of how to obtain or access evidence used in making the decision
8. Summary of the applicable review options available for the claimant to seek review of the decision

To ensure Veterans receive notices and decisions in compliance with AMA, VA has developed new rating decision formats and notification letters. *Please note that AMA notice requirements*

do not apply to award adjustments (such as drill pay, military retired pay adjustments, incarceration, or return to active duty, etc.)

4 AMA Development Letters

In addition to new rating decision templates and notification letters, VA has created new development letters to assist claim adjudicators developing claims within AMA.

A. HLR Rejection Letter

The HLR Rejection letter should be used by claims processors when a review of the file notes that VA has not yet issued a decision on the contention requested for a HLR or the claimant has requested a HLR of a HLR decision.

Using the template provided in [Appendix A](#), the claim processor should identify the contentions that the claimant requested for HLR, select the pertinent scenario as to the reason for the rejection, and include the administrative information (date, address, file number, etc.) where required. Once completed, the claims processor should upload the document to VBMS and provide copies to the claimant and any power of attorney, if applicable.

Note: If the claimant has a power of attorney, the last paragraph before the signature should be removed and a cc: line to the power of attorney should be added above the enclosures.

B. HLR Not Timely Letter

The HLR Not Timely letter should be used by claim processors when a review of the file notes that VA is unable to accept a request for a HLR as the time limit to file the application has passed. Claimants must file a VA Form VA Form 20-0996 “Decision Review Request: Higher Level Review” within one year of VA’s decision.

Using the template provided in [Appendix B](#), the claim processor should provide the date of the decision that the claimant is requesting a HLR and provide the date the request for a HLR was received by VA. Additionally, the claims processor should include the administrative information: date, address, file number etc., where required. Once completed, the claims processor should upload the document to VBMS, and provide copies to the claimant and any power of attorney, if applicable. VA Form 20-0998 must be included as an enclosure.

Note: If the claimant has a power of attorney, the last paragraph before the signature should be removed and a cc: line to the power of attorney should be added above the enclosures.

C. HLR DTA Letter

The HLR DTA letter should be used by claim processors when a review of the file notes that VA failed to fulfill its duty to assist the claimant in obtaining evidence relevant to the contested decision and the HLR reviewer has returned the contention(s) for development, as the HLR reviewer could not grant the claimant the maximum benefit based on the evidence of record.

Using the template provided in [Appendix C](#), the claim processor should include the administrative information: date, address, file number etc., where required. Once completed, the claims processor should upload the document to VBMS, and provide copies to the claimant and any power of attorney, if applicable.

Note: If the claimant has a power of attorney, the last paragraph before the signature should be removed and a cc: line to the power of attorney should be added above the enclosures.

D. AMA Acknowledgement Letter

The AMA Acknowledgement letter should be used by claim processors when VA receives a request for a HLR. This letter acknowledges VA's receipt of the request for review.

Using the template provided in [Appendix D](#), the claim processor should include the administrative information: date, address, file number etc., where required. Additionally, the claims processor should enter in the date VA received the request for the higher-level review. Once completed, the claims processor should upload the document to VBMS, and provide copies to the claimant and any power of attorney, if applicable.

Note: If the claimant has a power of attorney, the last paragraph before the signature should be removed and a cc: line to the power of attorney should be added above the enclosures.

E. Decision Review Withdrawal Letter

The Decision Review Withdrawal letter should be used by claim processors when VA received a request to withdraw a request for further review from the claimant.

Using the template provided in [Appendix E](#), the claim processor should include the administrative information: date, address, file number etc., where required. The claims processor should also identify whether the withdrawal relates to a HLR or Supplemental Review, enter the date of the withdrawal and the issues that are being withdrawn.

Once completed, the claims processor should upload the document to VBMS, and provide copies to the claimant and any power of attorney, if applicable.

Note: If the claimant has a power of attorney, the last paragraph before the signature should be removed and a cc: line to the power of attorney should be added above the enclosures.

F. AMA Incomplete Application Letter

The AMA Incomplete letter should be used by claim processors when VA received a request for further review on either incorrect forms or if the information on the forms is not complete.

Using the template provided in [Appendix F](#), the claim processor should include the administrative information: date, address, file number etc., where required. The claims processor should clarify the information needed for a complete application.

Once completed, the claims processor should upload the document to VBMS, and provide copies to the claimant and any power of attorney, if applicable.

Note: If the claimant has a power of attorney, the last paragraph before the signature should be removed and a cc: line to the power of attorney should be added above the enclosures

5 AMA HLR Non-Rating Decisions

Higher-Level review decisions, both rating and non-rating, must provide the required improved notification. For dependency decisions, claim adjudicators should use VBMS-Awards functionality. However, other non-rating decisions will be primarily completed with existing notice templates (generally PCGL).

When claims adjudicators use PCGL, following a non-rating HLR decision, to generate the required notification letter, they must amend the sections noted below. Ensure that VA Form 20-0998 is included as an enclosure. (See also Chapter 6 for more specific information on these notification requirements)

- Introduction Paragraph
- “What We Decided”
- “What You Should Do if You Disagree With Our Decision”

G. Non-Rating Decision Template

Senior VSRs (SVSRs), or a AQRS, can complete HLR decisions on non-rating issues under AMA. Decisions from a HLR requests will be processed using the HLR Decision Template provided in [Appendix G](#). (For supplemental claims, claims adjudicators, typically a VSR, will utilize the standard notification letter format to issue a decision.)

Adjudicators must include the following elements within the decision itself:

1. Identification of the issues adjudicated
2. Summary of the evidence considered
3. Explanation of the law and regulations applicable to the claim
4. Summary of any findings made by the adjudicator that are favorable to the claimant
5. For denied claims, identification of the element(s) required to grant the claim(s) that were not met

Element 6 does not apply to non-rating decisions.

The HLR reviewer should provide the information in Appendix F, highlighted in yellow, starting with the claim identifying information, power of attorney information and the date of the decision. Next, the HLR reviewer should indicate the Veteran's period and dates of service and branch of service. The HLR should then provide the date the HLR request was received by VA.

If the HLR has identified that additional evidence was received after the request for a HLR, the HLR should include the following wording:

“Please note: The evidentiary record closed as of the date of notice of our prior decision. VA received additional evidence after the record closed that was not considered as part of this decision. If you would like VA to consider this evidence, you may submit a supplemental claim at any time; however, VA must receive your application within one year of the date of notice of this decision to preserve your right to receive the maximum possible benefit.”

If the claimant requested a HLR to be conducted at the same office that made the decision, but VA could not accommodate the request, the HLR reviewer should include the following wording:

“You requested to have your higher-level review conducted at the same office that decided your issue(s). Unfortunately, we were unable to fulfill your request to conduct the higher-level review at the same office that decided your issue(s) due to that office not having higher-level review personnel available to conduct the review (see 38 CFR § 3.2601(e)). Accordingly, we have conducted your review at an office with higher-level review personnel available.”

Next, the HLR reviewer should list the issue(s), the evidence used in making the decision, the decision(s), and reasons and bases for the decision(s). The reasons and bases

for the decision(s) should include the decision on the issue, all elements met and not met, an explanation of how to obtain a higher level of evaluation, if applicable, an explanation of the effective date, if applicable, any favorable findings and applicable laws and regulations.

6 AMA Decision Notice Letters

When claims adjudicators use PCGL to generate the required notification letter, they must amend the sections noted below. Ensure that VA Form 20-0998 is included as an enclosure.

- Introduction Paragraph- enter in the ADL language
- “What We Decided”
- “What You Should Do if You Disagree With Our Decision”

Amending these sections to PCGL letters, for both rating and non-rating issues, is necessary to ensure that Veterans received the following improved notification elements in the decision notification letter:

1. Explanation of how to obtain or access evidence used in making the decision
2. Summary of the applicable review options available for the claimant to seek review of the decision

Introduction Paragraph

- Ensure this section includes the following paragraph:

This letter will guide you through the information you should know and steps you may take now that VA has made a decision about your benefits.

What We Decided

- Ensure this section includes the following paragraph:

We have enclosed a copy of your Rating Decision for your review. It provides a detailed explanation of our decision, the evidence considered, and the reasons for our decision. Your Rating Decision and this letter constitute our decision based on the [insert supplemental claim or higher-level review] request that we received on [insert receipt date]. It represents all claims we understood to be specifically made, implied, or inferred in that claim.

- If applicable, include the following paragraph for higher-level reviews with both a rating decision and a deferred rating completed:

We completed your request for higher-level review on the following issue(s):

- Insert Issue

- Insert Issue

We determined additional development actions are necessary for us to fulfill our duty to assist in gathering evidence in support of your claim. We will take action to finish our development and notify you once a new decision is made on your claim.

What You Should Do If You Disagree With Our Decision

- Replace all of the PCGL generated text under this section with the following:

If you do not agree with our decision, you have one year from the date of this letter to select a review option in order to protect your initial filing date for effective date purposes. You must file your request on the required application form for the review option desired. The table below represents the review options and their respective required application form.

Review Option	Required Application Form
Supplemental Claim	VA Form 20-0995, Decision Review Request: Supplemental Claim
Higher-Level Review	VA Form 20-0996, Decision Review Request: Higher-Level Review
Appeal to the Board of Veterans' Appeals	VA Form 10182, Decision Review Request: Board Appeal (Notice of Disagreement)

Please note: You may not request a higher-level review of a higher-level review decision issued by VA.

The enclosed VA Form 20-0998, "*Your Rights To Seek Further Review Of Our Decision*", explains your options in greater detail and provides instructions on how to request further review. You may download a copy of any of the required application forms noted above by visiting www.va.gov/vaforms/ or you may contact us by telephone at 1-800-827-1000 and we will mail you any form you need.

You can visit va.gov/decision-reviews to learn more about how the disagreement process works.

If you would like to obtain or access evidence used in making this decision, please contact us by telephone, email, or letter as noted below letting us know what you would like to obtain. Some evidence may be obtained online by visiting VA.gov.

H. Character of Discharge Notification Letter

The Character of Discharge Notification letter, in Letter Creator, is utilized by claim processors when VA determines that a Veteran’s military service is dishonorable for VA purposes.

In Letter Creator, claim processors should complete all information requested, including dates of dishonorable service, whether the Veteran is entitled to healthcare, whether the discharge was a conditional discharge, how VA made the decision, what evidence VA used in making the determination, and all administrative information (address, file number, etc.).

Once the letter has been generated, claim processors should:

1. Replace the wording under “What You Should Do If You Disagree With Our Decision” with the new AMA compliant wording.
2. List VA Form 20-0998, “*Your Rights to Seek Further Review of Our Decision*” as an enclosure and include a copy of the form in the letter.
3. Update the “Where to Send Your Written Correspondence” with the Board of Veterans’ Appeals address by including the box indicated below

For correspondence relating to the Board of Veterans’ Appeals :	
Location of Residence	Address
All United States and Foreign Locations	Department of Veterans Affairs Board of Veterans’ Appeals P.O. Box 27063 Washington, DC 20038

Once completed, the claims processor should upload the document to VBMS, and provide copies to the claimant and any power of attorney, if applicable.

An example of this notification letter is located in [Appendix H](#).

I. Fee Decision Notice Letter- Comp Exceeds Military Retired Pay (MRP)

The Fee Decision Notice- Compensation Exceeds MRP Letter is utilized by claim processors when VA advises the attorney and claimant of the amount of withholding and payment of attorney fees when the Veteran is also receiving military retired pay. *Please note, for decisions on contested claims, such as attorney fees, issued after February 19, 2019 an appellant may only appeal directly to the Board. Do not include VA form 20-0998.*

In Letter Creator, claim processors should complete all information requested, including the type of decision, the past due amount, withheld amount, what was awarded, percentage, date of NOD, and all administrative information (address, file number, etc.).

Once the letter has been generated, claim processors will be required to update two sections of the letter. These sections are the “Requirements for Direct payment of Fees” and “What You Should Do If You Disagree With Our Decision.” In addition,

Requirements for Direct payment of Fees

[Insert at end of this section]

In addition, fees may be payable following a supplemental claim, higher-level review, NOD, or clear and unmistakable error, for decisions issued after February 19, 2019. Accordingly, agents and attorneys may charge claimants or appellants for representation provided after an agency of original jurisdiction has issued notice of an initial decision on the claim or claims, including any claim for an increase in rate of a benefit, if the notice of the initial decision was issued on or after February 19, 2019 and the agent or attorney has complied with the power of attorney requirements provided a valid fee agreement.

What You Should Do If You Disagree With Our Decision

If you disagree with this determination, you may file a Notice of Disagreement with this decision. For more information on filing an appeal, see the enclosed *VA Form 10182, Decision Review Request: Board Appeal (Notice of Disagreement)*. *All disagreements with attorney fee decisions must be filed with the Board of Veterans Appeals.*

Once completed, the claims processor should upload the document to VBMS, and provide copies to the claimant and any power of attorney, if applicable.

In addition, update the “Where to Send Your Written Correspondence” with the Board of Veterans’ Appeals address by including the box indicated below

For correspondence relating to the Board of Veterans’ Appeals:	
Location of Residence	Address
All United States and Foreign Locations	Department of Veterans Affairs Board of Veterans’ Appeals P.O. Box 27063 Washington, DC 20038

An example of this notification letter is located in [Appendix I](#).

J. Fee Recoupment Procedures Letter- Final Notice

The Fee Recoupment Procedures letter is utilized by claim processors when VA sends the final notice that VA mistakenly overlooked the filing of the direct-pay fee agreement and did not withhold attorney fees.

In Letter Creator, claim processors should complete all information requested, including the date of the proposal letter, whether a response was received from the claimant, the attorney fee amount, overpayment amount, and all administrative information (address, file number, etc.).

Once the letter has been generated, claim processors should

1. Replace the wording under “What You Should Do If You Disagree With Our Decision” with the new AMA compliant wording.
2. List VA Form 20-0998, “Your Rights to Seek Further Review of Our Decision” as an enclosure and include a copy of the form in the letter
3. Update the “Where to Send Your Written Correspondence” with the Board of Veterans’ Appeals address by including the box indicated below

For correspondence relating to the Board of Veterans’ Appeals:	
Location of Residence	Address
All United States and Foreign Locations	Department of Veterans Affairs Board of Veterans’ Appeals P.O. Box 27063 Washington, DC 20038

Once completed, the claims processor should upload the document to VBMS, and provide copies to the claimant and any power of attorney, if applicable.

An example of this notification letter is located in [Appendix J](#).

K. Summary of Case Fee Decision Notice

The Summary of Case Fee Decision Notice is utilized by claim processors when VA advises the attorney and claimant of VA’s attorney fee decision.

In Letter Creator, claim processors should complete all information requested, including the summary information, the type of decision, the past due amount, withheld amount,

what was awarded, percentage, date of NOD, and all administrative information (address, file number, etc.).

Once the letter has been generated, claim processors will be required to update two In Letter Creator, claim processors should complete all information requested, including the type of decision, the past due amount, withheld amount, what was awarded, percentage, date of NOD, and all administrative information (address, file number, etc.).

Once the letter has been generated, claim processors will be required to update two sections of the letter. These sections are the “Requirements for Direct payment of Fees” and “What You Should Do If You Disagree With Our Decision.” In addition,

Requirements for Direct payment of Fees

[Insert at end of this section]

In addition, fees may be payable following a supplemental claim, higher-level review, NOD, or clear and unmistakable error, for decisions issued after February 19, 2019. Accordingly, agents and attorneys may charge claimants or appellants for representation provided after an agency of original jurisdiction has issued notice of an initial decision on the claim or claims, including any claim for an increase in rate of a benefit, if the notice of the initial decision was issued on or after February 19, 2019 and the agent or attorney has complied with the power of attorney requirements provided a valid fee agreement.

What You Should Do If You Disagree With Our Decision

If you disagree with this determination, you may file a Notice of Disagreement with this decision. For more information on filing an appeal, see the enclosed *VA Form 10182, Decision Review Request: Board Appeal (Notice of Disagreement)*. All disagreements with attorney fee decisions must be filed with the Board of Veterans Appeals.

Once completed, the claims processor should upload the document to VBMS, and provide copies to the claimant and any power of attorney, if applicable.

In addition, update the “Where to Send Your Written Correspondence” with the Board of Veterans’ Appeals address by including the box indicated below

For correspondence relating to the Board of Veterans’ Appeals:	
Location of Residence	Address
All United States and Foreign Locations	Department of Veterans Affairs Board of Veterans’ Appeals P.O. Box 27063 Washington, DC 20038

An example of this notification letter is located in [Appendix K](#).

L. Audit Error Worksheet letter

The Audit Error Worksheet Letter is utilized by claim processors when VA advises the Veteran of entitlement to retired pay previously waived to received disability compensation from VA.

In Letter Creator, claim processors should complete all information requested, including all information on the Audit Error Worksheet Assistant section, and all administrative information (address, file number, etc.).

Once the letter has been generated, claim processors should replace the wording under “What You Should Do If You Disagree With Our Decision” with the new AMA compliant wording. Additionally, claims processors should list VA Form 20-0998, “Your Rights to Seek Further Review of Our Decision” as an enclosure and include a copy of the form in the letter.

In addition, update the “Where to Send Your Written Correspondence” with the Board of Veterans’ Appeals address by including the box indicated below

For correspondence relating to the Board of Veterans’ Appeals :	
Location of Residence	Address
All United States and Foreign Locations	Department of Veterans Affairs Board of Veterans’ Appeals P.O. Box 27063 Washington, DC 20038

Once completed, the claims processor should upload the document to VBMS, and provide copies to the claimant and any power of attorney, if applicable.

An example of this notification letter is located in [Appendix L](#).

7 Legacy Appeal Letters

M. Notice of Disagreement (NOD) Not Timely

The NOD Not Timely letter is utilized by claim processors when VA receives a legacy NOD after the time limit to submit the NOD has passed.

In Letter Creator, claim processors should complete all information requested, including date of the enter date of the rating, date of the receipt of the NOD, date of notification letter, and all administrative information (address, file number, etc.).

Once the letter has been generated, replace the generated text under “What This Means To You” with the following wording:

What This Means to You?

Because you did not submit a timely Notice of Disagreement, our decision on your claim is final.

Claim processors should also replace the wording under “What You Should Do If You Disagree With Our Decision” with the new AMA compliant wording. Additionally, claims processors should list VA Form 20-0998, “Your Rights to Seek Further Review of Our Decision” as an enclosure and include a copy of the form in the letter.

Once completed, the claims processor should upload the document to VBMS, and provide copies to the claimant and any power of attorney, if applicable.

An example of this notification letter is located in [Appendix M](#).

N. Form 9 Not Timely

The Form 9 Not Timely letter is utilized by claim processors when VA receives a VA Form 9, *Appeal to Board of Veterans’ Appeals* after the time limit to perfect the legacy appeal has passed.

In Letter Creator, claim processors should complete all information requested, including date of the Statement of the Case, date that the Form 9 was received by VA, date the appeal expired, date of NOD, date of notification letter, and all administrative information (address, file number, etc.).

Once the letter has been generated, replace the generated text under “What This Means To You” with the following wording:

What This Means To You

Because you did not submit a timely Substantive Appeal, our decision on your claim is final.

Claim processors should also replace the wording under “What You Should Do If You Disagree With Our Decision” with the new AMA compliant wording. Additionally, claims processors should list VA Form 20-0998, “Your Rights to Seek Further Review of Our Decision” as an enclosure and include a copy of the form in the letter.

Once completed, the claims processor should upload the document to VBMS, and provide copies to the claimant and any power of attorney, if applicable.

An example of this notification letter is located in [Appendix N](#).

O. Attorney Not Acknowledged Letter

The Attorney Not Acknowledged letter is utilized by claim processors when VA receives a Notice of Disagreement or Request for Further Review from an attorney, but is not accredited by VA.

In Letter Creator, claim processors should complete all information requested, including the name of the unaccredited attorney, and all administrative information (address, file number, etc.).

Once the letter has been generated, the claim processor should indicate the type of form submitted by the attorney on behalf of the claimant.

Once completed, the claims processor should upload the document to VBMS, and provide copies to the claimant and any power of attorney, if applicable.

An example of this notification letter is located in [Appendix O](#).

P. NOD Against a Proposal

The NOD against a proposal letter is utilized by claim processors when VA receives a Notice of Disagreement or Request for Further Review from a claimant, but VA has only proposed the adverse action and has not yet taken the adverse action.

In Letter Creator, claim processors should complete all information requested, including the free text option, and all administrative information (address, file number, etc.).

Once the letter has been generated, the claim processor should indicate the type of form submitted by claimant.

Once completed, the claims processor should upload the document to VBMS, and provide copies to the claimant and any power of attorney, if applicable.

An example of this notification letter is located in [Appendix P](#).

Q. NOD Against a Pending Claim

The NOD against a pending claim letter is utilized by claim processors when VA receives a Notice of Disagreement or Request for Further Review from a claimant, but VA has not yet made a decision on a pending claim.

In Letter Creator, claim processors should complete all information requested, including all administrative information (address, file number, etc.).

Once the letter has been generated, the claim processor should indicate the type of form submitted by claimant.

Once completed, the claims processor should upload the document to VBMS, and provide copies to the claimant and any power of attorney, if applicable.

An example of this notification letter is located in [Appendix Q](#).

8 Questions/Comments

Review the M21-1 for additional guidance on processing decisions under AMA. Submit any questions or concerns to the Appeals Management Office's Program Administration staff at the following corporate mailbox: AMO-Appeals.Admin@va.gov

DEPARTMENT OF VETERANS AFFAIRS

Appendix A- Sample HLR Rejection Letter



<Date>

<Veteran Name>
<Veteran Address>

In reply, refer to:
<RO/Division/Initials>
File Number:
<Veteran Name>

On <date>, VA received your VA Form 20-0996, “*Decision Review Request: Higher Level Review*” to seek further review of the following issue(s): <contention(s)>.

We cannot process this request at this time, because VA has not issued a decision and is currently reviewing the issue(s). VA will notify you once a decision is made on your issue(s). If you continue to disagree after reviewing VA’s decision, you can refile your request for further review at that time.

<or>

We cannot process your request at this time because VA recently completed a higher-level review on these issue(s). Claimants may not request a higher-level review of a higher-level review decision. Please review the VA Form 20-0998, “*Your Rights To Seek Further Review of Our Decision*” that accompanied your decision notice.

If You Have Questions or Need Assistance

If you have any questions or need assistance with this claim, you may contact us by telephone, e-mail, or letter.

If you	Here is what to do.
Telephone	Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the Federal number is 711.
Use the Internet	Send electronic inquiries through the Internet at https://iris.custhelp.va.gov .

File Number: 000000000
Veteran

Write	VA now uses a centralized mail system. For all written communications, put your full name and VA file number on the letter. Please mail or fax all written correspondence to the appropriate address listed on the attached <i>Where to Send Your Written Correspondence</i> .
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In all cases, be sure to refer to your VA file number, 000000000.

If you are looking for general information about benefits and eligibility, you should visit our website at <http://www.va.gov> or search the Frequently Asked Questions (FAQs) at <https://iris.custhelp.va.gov>.

We have no record of you appointing a service organization or representative to assist you with filing an intent to file and/or your claim. You can contact us for a listing of the recognized Veterans Service Organizations and/or representatives. Veterans Service Organizations, which are recognized or approved to provide services to the veteran community, can also help you with any questions.

Sincerely yours,

Regional Office Director

Enclosures: Where to Send Your Written Correspondence

Where to Send Your Written Correspondence

In order to properly determine where to send your written correspondence, please first identify your benefit type (Compensation, Veterans Pension, or Survivor Benefits); then, locate the corresponding address based on your location of residence.

For correspondence relating to all **Compensation** claims:

Location of Residence	Address
<p>All United States and Foreign Locations</p> <p>*Note: For foreign Veterans Pension and Survivor Benefits please refer to the below addresses.</p>	<p>Department Of Veterans Affairs Evidence Intake Center P.O. Box 4444 Janesville, WI, 53547-4444</p> <p>Or fax your information to: Toll Free: 844-531-7818 Local: 248-524-4260</p>

For correspondence relating to all **Veterans Pension** and **Survivor Benefit** claims:

Location of Residence	Address																											
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Alabama</td> <td style="width: 33%;">Kentucky</td> <td style="width: 33%;">Missouri</td> </tr> <tr> <td>Arkansas</td> <td>Louisiana</td> <td>Ohio</td> </tr> <tr> <td>Illinois</td> <td>Michigan</td> <td>Tennessee</td> </tr> <tr> <td>Indiana</td> <td>Mississippi</td> <td>Wisconsin</td> </tr> </table>	Alabama	Kentucky	Missouri	Arkansas	Louisiana	Ohio	Illinois	Michigan	Tennessee	Indiana	Mississippi	Wisconsin	<p>Department Of Veterans Affairs Claims Intake Center Attention: Milwaukee Pension Center P.O. Box 5192 Janesville, WI 53547-5192 Or fax your information to: Toll Free: (844) 655-1604</p>															
Alabama	Kentucky	Missouri																										
Arkansas	Louisiana	Ohio																										
Illinois	Michigan	Tennessee																										
Indiana	Mississippi	Wisconsin																										
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For correspondence relating to the **Board of Veterans' Appeals**:

Location of Residence	Address
All United States and Foreign Locations	Department of Veterans Affairs Board of Veterans' Appeals P.O. Box 27063 Washington, DC 20038

DEPARTMENT OF VETERANS AFFAIRS

Appendix B- Sample HLR Not Timely Letter



<Date>

<Veteran Name>
<Veteran Address>

In reply, refer to:
<RO/Division/Initials>
File Number: 000000000
<Veteran Name>

Dear <Veteran>:

We received your request for a higher-level review. This letter will explain what we decided, what you should do if you disagree with our decision, and how to contact us if you have questions.

What We Decided

Unfortunately, we cannot accept your request for a higher-level review as the time limit to file this application has passed. VA must receive a request for a higher-level review no later than one year following notification of the contested decision.

In your case, we notified you of our decision on <date>. VA did not receive your VA Form 20-0996 "Decision Review Request: Higher Level Review" until <date>, more than one year from the date we notified you of our decision.

What You Should Do If You Disagree With Our Decision

If you do not agree with our decision, you have one year from the date of this letter to select a review option in order to protect your initial filing date for effective date purposes. You must file your request on the required application form for the review option desired. The table below represents the review options and their respective required application form.

Review Option	Required Application Form
Supplemental Claim	VA Form 20-0995, Decision Review Request: Supplemental Claim

File Number: 000000000
Veteran

Higher-Level Review	VA Form 20-0996, Decision Review Request: Higher-Level Review
Appeal to the Board of Veterans' Appeals	VA Form 10182, Decision Review Request: Board Appeal (Notice of Disagreement)

Please note: You **may not** request a higher-level review of a higher-level review decision issued by VA.

The enclosed VA Form 20-0998, *Your Rights To Seek Further Review Of Our Decision*, explains your options in greater detail and provides instructions on how to request further review. You may download a copy of any of the required application forms noted above by visiting www.va.gov/vaforms/ or you may contact us by telephone at 1-800-827-1000 and we will mail you any form you need.

You can visit va.gov/decision-reviews to learn more about how the disagreement process works.

If you would like to obtain or access evidence used in making this decision, please contact us by telephone, e-mail, or letter as noted below letting us know what you would like to obtain. Some evidence may be obtained online by visiting VA.gov.

If You Have Questions or Need Assistance

If you have any questions or need assistance with this decision, you may contact us by telephone, e-mail, or letter.

If you	Here is what to do.
Telephone	Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the Federal number is 711.
Use the Internet	Send electronic inquiries through the Internet at https://iris.custhelp.va.gov .
Write	VA now uses a centralized mail system. For all written communications, put your full name and VA file number on the letter. Please mail or fax all written correspondence to the appropriate address listed on the attached <i>Where to Send Your Written Correspondence</i> .

In all cases, be sure to refer to your VA file number, 000000000.

Page 3

File Number: 000000000
Veteran

If you are looking for general information about benefits and eligibility, you should visit our website at <http://www.va.gov> or search the Frequently Asked Questions at <https://iris.custhelp.va.gov>.

We have no record of you appointing a service organization or representative to assist you. You can contact us for a listing of the recognized Veterans Service Organizations and/or representatives. Veterans Service Organizations, which are recognized or approved to provide services to the veteran community, can also help you with any questions.

Sincerely yours,

Regional Office Director

Enclosures: VA Form 20-0998
Where to Send Your Written Correspondence

Where to Send Your Written Correspondence

In order to properly determine where to send your written correspondence, please first identify your benefit type (Compensation, Veterans Pension, or Survivor Benefits); then, locate the corresponding address based on your location of residence.

For correspondence relating to all **Compensation** claims:

Location of Residence	Address
<p>All United States and Foreign Locations</p> <p>*Note: For foreign Veterans Pension and Survivor Benefits please refer to the below addresses.</p>	<p>Department Of Veterans Affairs Evidence Intake Center P.O. Box 4444 Janesville, WI, 53547-4444</p> <p>Or fax your information to: Toll Free: 844-531-7818 Local: 248-524-4260</p>

For correspondence relating to all **Veterans Pension** and **Survivor Benefit** claims:

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Location of Residence	Address
All United States and Foreign Locations	Department of Veterans Affairs Board of Veterans' Appeals P.O. Box 27063 Washington, DC 20038

DEPARTMENT OF VETERANS AFFAIRS

Appendix C- Sample HLR DTA Letter



<Date>

<Veteran Name>
<Veteran Address>

In reply, refer to:
<RO/Division/Initials>
File Number: 0000000000
<Veteran Name>

Dear <Veteran>:

We are currently working on your claim.

We completed your request for higher-level review, and discovered an error in assisting you to gather evidence to support your claim.

We will correct our error and forward your claim for further processing. We will then inform you of our new decision.

If You Have Questions or Need Assistance

If you have any questions or need assistance with this claim, you may contact us by telephone, e-mail, or letter.

If you	Here is what to do.
Telephone	Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the Federal number is 711.
Use the Internet	Send electronic inquiries through the Internet at https://iris.custhelp.va.gov .
Write	VA now uses a centralized mail system. For all written communications, put your full name and VA file number on the letter. Please mail or fax all written correspondence to the appropriate address listed on the attached <i>Where to Send Your Written Correspondence</i> .

In all cases, be sure to refer to your VA file number, 0000000000.

Page 2

File Number: 000000000
Veteran

If you are looking for general information about benefits and eligibility, you should visit our website at <http://www.va.gov> or search the Frequently Asked Questions at <https://iris.custhelp.va.gov>.

We have no record of you appointing a service organization or representative to assist you with filing an intent to file and/or your claim. You can contact us for a listing of the recognized Veterans Service Organizations and/or representatives. Veterans Service Organizations, which are recognized or approved to provide services to the veteran community, can also help you with any questions.

Sincerely yours,

Regional Office Director

Enclosures: Where to Send Your Written Correspondence

Where to Send Your Written Correspondence

In order to properly determine where to send your written correspondence, please first identify your benefit type (Compensation, Veterans Pension, or Survivor Benefits); then, locate the corresponding address based on your location of residence.

For correspondence relating to all **Compensation** claims:

Location of Residence	Address
<p>All United States and Foreign Locations</p> <p>*Note: For foreign Veterans Pension and Survivor Benefits please refer to the below addresses.</p>	<p style="text-align: center;">Department Of Veterans Affairs Evidence Intake Center P.O. Box 4444 Janesville, WI, 53547-4444</p> <p style="text-align: center;">Or fax your information to: Toll Free: 844-531-7818 Local: 248-524-4260</p>

For correspondence relating to all **Veterans Pension** and **Survivor Benefit** claims:

Location of Residence	Address																											
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All United States and Foreign Locations	Department of Veterans Affairs Board of Veterans' Appeals P.O. Box 27063 Washington, DC 20038

DEPARTMENT OF VETERANS AFFAIRS

Appendix D- AMA Acknowledgement Letter



<Date>

<Veteran Name>
<Veteran Address>

In reply, refer to:
<RO/Division/Initials>
File Number:
<Veteran Name>

Dear <Veteran>:

Thank you for submitting your request for further review under the Appeals Modernization Act.

We received your request for higher-level review on <date>.

What Is the Modernized Appeals System?

The modernized appeals system gives claimants the opportunity to participate in the new Supplemental Claim and Higher-Level Review Lanes, or choose to file an appeal directly to the Board of Veterans' Appeals.

No further action is needed from you at this time. However, if we need additional evidence to support your claim, we will contact you.

If You Have Questions or Need Assistance

If you have any questions or need assistance with this review, you may contact us by telephone, e-mail, or letter.

If you	Here is what to do.
Telephone	Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the Federal number is 711.
Use the Internet	Send electronic inquiries through the Internet at https://iris.custhelp.va.gov .

File Number: 000000000
Veteran

Write	VA now uses a centralized mail system. For all written communications, put your full name and VA file number on the letter. Please mail or fax all written correspondence to the appropriate address listed on the attached <i>Where to Send Your Written Correspondence</i> .
-------	--

In all cases, be sure to refer to your VA file number, 000000000.

If you are looking for general information about benefits and eligibility, you should visit our website at <http://www.va.gov> or search the Frequently Asked Questions (FAQs) at <https://iris.custhelp.va.gov>.

We have no record of you appointing a service organization or representative to assist you with your review. You can contact us for a listing of the recognized Veterans Service Organizations and/or representatives. Veterans Service Organizations, which are recognized or approved to provide services to the veteran community, can also help you with any questions.

Sincerely yours,

Regional Office Director

Enclosures: Where to Send Your Written Correspondence

Where to Send Your Written Correspondence

In order to properly determine where to send your written correspondence, please first identify your benefit type (Compensation, Veterans Pension, or Survivor Benefits); then, locate the corresponding address based on your location of residence.

For correspondence relating to all **Compensation** claims:

Location of Residence	Address
<p>All United States and Foreign Locations</p> <p>*Note: For foreign Veterans Pension and Survivor Benefits please refer to the below addresses.</p>	<p>Department Of Veterans Affairs Evidence Intake Center P.O. Box 4444 Janesville, WI, 53547-4444</p> <p>Or fax your information to: Toll Free: 844-531-7818 Local: 248-524-4260</p>

For correspondence relating to all **Veterans Pension** and **Survivor Benefit** claims:

Location of Residence	Address																											
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All United States and Foreign Locations	Department of Veterans Affairs Board of Veterans' Appeals P.O. Box 27063 Washington, DC 20038

DEPARTMENT OF VETERANS AFFAIRS

Appendix E- Decision Review Withdrawal Letter



<Date>

<Veteran Name>
<Veteran Address>

In reply, refer to:
<RO/Division/Initials>
File Number: 0000000000
<Veteran Name>

Dear <Veteran>:

We have withdrawn your <request for a higher-level review> <request for a supplemental review> based on your written request dated <date> for the following condition(s)/issue(s):

- <issue>

Important: Should you wish to refile your decision review request as either a supplemental claim or a higher-level review and retain your current entitlement date, VA must receive your request on a VA Form 20-0995, *Decision Review Request: Supplemental Claim*, or VA Form 20-0996, *Decision Review Request: Higher Level Review*, before <date>, which is one year after the date of your decision notification letter. If you refile after one year has passed from the decision you wish to have reviewed, your current entitlement date will not be preserved and you will be limited to a supplemental claim, for which you must submit new and relevant evidence.

If You Have Questions or Need Assistance

If you have any questions or need assistance with this claim, you may contact us by telephone, e-mail, or letter.

If you	Here is what to do.
Telephone	Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the Federal number is 711.
Use the Internet	Send electronic inquiries through the Internet at https://iris.custhelp.va.gov .
Write	VA now uses a centralized mail system. For all written communications, put your full name and VA file number on the letter. Please mail or fax all written

File Number: 000000000
Veteran

	correspondence to the appropriate address listed on the attached <i>Where to Send Your Written Correspondence</i> .
--	---

In all cases, be sure to refer to your VA file number, 000000000.

If you are looking for general information about benefits and eligibility, you should visit our website at <http://www.va.gov> or search the Frequently Asked Questions at <https://iris.custhelp.va.gov>.

We have no record of you appointing a service organization or representative to assist you with filing an intent to file and/or your claim. You can contact us for a listing of the recognized Veterans Service Organizations and/or representatives. Veterans Service Organizations, which are recognized or approved to provide services to the veteran community, can also help you with any questions.

Sincerely yours,

Regional Office Director

Enclosures: Where to Send Your Written Correspondence

Where to Send Your Written Correspondence

In order to properly determine where to send your written correspondence, please first identify your benefit type (Compensation, Veterans Pension, or Survivor Benefits); then, locate the corresponding address based on your location of residence.

For correspondence relating to all **Compensation** claims:

Location of Residence	Address
<p>All United States and Foreign Locations</p> <p>*Note: For foreign Veterans Pension and Survivor Benefits please refer to the below addresses.</p>	<p>Department Of Veterans Affairs Evidence Intake Center P.O. Box 4444 Janesville, WI, 53547-4444</p> <p>Or fax your information to: Toll Free: 844-531-7818 Local: 248-524-4260</p>

For correspondence relating to all **Veterans Pension** and **Survivor Benefit** claims:

Location of Residence	Address
<p>Alabama Kentucky Missouri Arkansas Louisiana Ohio Illinois Michigan Tennessee Indiana Mississippi Wisconsin</p>	<p>Department Of Veterans Affairs Claims Intake Center Attention: Milwaukee Pension Center P.O. Box 5192 Janesville, WI 53547-5192 Or fax your information to: Toll Free: (844) 655-1604</p>
<p>Alaska Montana Texas Arizona Nebraska Utah California Nevada Washington Colorado New Mexico Wyoming Hawaii North Dakota Mexico Idaho Oklahoma Central America Iowa Oregon South America Kansas South Dakota Caribbean Minnesota</p>	<p>Department Of Veterans Affairs Claims Intake Center Attention: St. Paul Pension Center P.O. Box 5365 Janesville, WI 53547-5365 Or fax your information to: Toll Free: (844) 655-1604</p>
<p>Connecticut New Hampshire South Carolina Delaware New Jersey Vermont Florida New York Virginia Georgia North Carolina West Virginia Maine Pennsylvania District of Maryland Rhode Island Columbia Massachusetts Puerto Rico Canada</p>	<p>Department Of Veterans Affairs Claims Intake Center Attention: Philadelphia Pension Center P.O. Box 5206 Janesville, WI 53547-5206 Or fax your information to: Toll Free: (844) 655-1604</p>
<p>Countries outside of North, Central or South America</p>	

For correspondence relating to the **Board of Veterans' Appeals**:

Location of Residence

Address

All United States and Foreign Locations

Department of Veterans Affairs
Board of Veterans' Appeals
P.O. Box 27063
Washington, DC 20038

Appendix F- AMA Incomplete Application Letter



<Date>

<Veteran Name>
<Veteran Address>

In reply, refer to:
<RO/Division/Initials>
File Number:
<Veteran Name>

Dear <Veteran>:

We received your application for further review on <date>.

We are unable to process your request for further review as it was not completed on the correct form. To file a Supplemental Claim, please complete a VA Form 20-0995, *Decision Review Request-Supplemental Claim*. To file a request for a Higher-Level Review, please complete a VA Form 20-0996, *Decision Review Request: Higher-Level Review*

<Or>

We are unable to process your request for further review as your VA Form 20-0995, *Decision Review Request-Supplemental Claim* <or> VA Form 20-0996, *Decision Review Request: Higher-Level Review* was incomplete. Please provide the following information: <Free Text>.

If we receive your completed application within 60 days from the date we received your incomplete application, we will consider your claim filed as of the date of receipt of your incomplete application. If we receive your completed application more than 60 days from the date we received your incomplete application, we will consider your claim filed as of the date of receipt of the completed application.

You may download a copy of any of the required application forms noted above by visiting www.va.gov/vaforms/ or you may contact us by telephone at 1-800-827-1000 and we will mail you any form you need. Additionally, you can visit va.gov/decision-reviews to learn more about how the disagreement process works.

If You Have Questions or Need Assistance

If you have any questions or need assistance with this claim, you may contact us by telephone, e-

mail, or letter.

If you	Here is what to do.
Telephone	Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the Federal number is 711.
Use the Internet	Send electronic inquiries through the Internet at https://iris.custhelp.va.gov .
Write	VA now uses a centralized mail system. For all written communications, put your full name and VA file number on the letter. Please mail or fax all written correspondence to the appropriate address listed on the attached <i>Where to Send Your Written Correspondence</i> .

In all cases, be sure to refer to your VA file number, 00000000000.

If you are looking for general information about benefits and eligibility, you should visit our website at <http://www.va.gov> or search the Frequently Asked Questions (FAQs) at <https://iris.custhelp.va.gov>.

We have no record of you appointing a service organization or representative to assist you with filing an intent to file and/or your claim. You can contact us for a listing of the recognized Veterans Service Organizations and/or representatives. Veterans Service Organizations, which are recognized or approved to provide services to the veteran community, can also help you with any questions.

Sincerely yours,

Regional Office Director

Enclosures: Where to Send Your Written Correspondence

Where to Send Your Written Correspondence

In order to properly determine where to send your written correspondence, please first identify your benefit type (Compensation, Veterans Pension, or Survivor Benefits); then, locate the corresponding address based on your location of residence.

For correspondence relating to all **Compensation** claims:

Location of Residence	Address
<p>All United States and Foreign Locations</p> <p>*Note: For foreign Veterans Pension and Survivor Benefits please refer to the below addresses.</p>	<p>Department Of Veterans Affairs Evidence Intake Center P.O. Box 4444 Janesville, WI, 53547-4444</p> <p>Or fax your information to: Toll Free: 844-531-7818 Local: 248-524-4260</p>

For correspondence relating to all **Veterans Pension** and **Survivor Benefit** claims:

Location of Residence	Address
<p>Alabama Kentucky Missouri Arkansas Louisiana Ohio Illinois Michigan Tennessee Indiana Mississippi Wisconsin</p>	<p>Department Of Veterans Affairs Claims Intake Center Attention: Milwaukee Pension Center P.O. Box 5192 Janesville, WI 53547-5192 Or fax your information to: Toll Free: (844) 655-1604</p>
<p>Alaska Montana Texas Arizona Nebraska Utah California Nevada Washington Colorado New Mexico Wyoming Hawaii North Dakota Mexico Idaho Oklahoma Central America Iowa Oregon South America Kansas South Dakota Caribbean Minnesota</p>	<p>Department Of Veterans Affairs Claims Intake Center Attention: St. Paul Pension Center P.O. Box 5365 Janesville, WI 53547-5365 Or fax your information to: Toll Free: (844) 655-1604</p>
<p>Connecticut New Hampshire South Carolina Delaware New Jersey Vermont Florida New York Virginia Georgia North Carolina West Virginia Maine Pennsylvania District of Maryland Rhode Island Columbia Massachusetts Puerto Rico Canada</p>	<p>Department Of Veterans Affairs Claims Intake Center Attention: Philadelphia Pension Center P.O. Box 5206 Janesville, WI 53547-5206 Or fax your information to: Toll Free: (844) 655-1604</p>
<p>Countries outside of North, Central or South America</p>	

For correspondence relating to the **Board of Veterans' Appeals**:

Location of Residence

Address

All United States and Foreign Locations

Department of Veterans Affairs
Board of Veterans' Appeals
P.O. Box 27063
Washington, DC 20038

Appendix G- Sample NR AMA Decision



**DEPARTMENT OF VETERANS AFFAIRS
Veterans Benefits Administration
Regional Office**

[First Name, Last Name]

VA File Number

[000 00 0000]

[Represented By:

Insert POA]

Higher-Level Review Decision

[MM/DD/YEAR]

INTRODUCTION

You have requested VA provide a higher-level review of the issue(s) addressed in this decision.

Our records reflect that you are a Veteran of the [insert period of service]. You served in the [insert branch] from XXXX to XXXX. We received your request for higher-level review on [insert date]. Based on a review of the evidence listed below, we have made the following decision(s) on your claim.

Additional evidence received after election:

[Please note: The evidentiary record closed as of the date of notice of our prior decision. VA received additional evidence after the record closed that was not considered as part of this decision. If you would like VA to consider this evidence, you may submit a supplemental claim at any time; however, VA must receive your application within one year of the date of notice of this decision to preserve your right to receive the maximum possible benefit.]

Claimant requested HLR at the same station, but VA could not accommodate request:

You requested to have your higher-level review conducted at the same office that decided your issue(s). Unfortunately, we were unable to fulfill your request to conduct the higher-level review at the same office that decided your issue(s) due to that office not having higher-level review personnel available to conduct the review (see 38 CFR § 3.2601(e)). Accordingly, we have conducted your review at an office with higher-level review personnel available.

ISSUE:

1. [Insert issue.]

- EVIDENCE:
- [List evidence used in making the decision]
-
-
- DECISION:

1. [Insert decision.]

REASONS AND BASES:

[Include the following for each issue:

1. the decision on the issue.
2. All elements met and not met.
3. Explanation of how to obtain a higher level of evaluation, if applicable.
4. Effective date explanation, when applicable.
5. Favorable findings. List favorable conclusions of fact or favorable application of law to facts, specific to the issue.]
6. Applicable laws and regulations. Insert list of specific CFR or U.S.C. references that apply to the issue.

REFERENCES:

Title 38 of the Code of Federal Regulations, Pensions, Bonuses and Veterans' Relief contains the regulations of the Department of Veterans Affairs, which govern entitlement to all veteran benefits. For additional information regarding applicable laws and regulations, please consult your local library, or visit us at our web site, www.va.gov.

DEPARTMENT OF VETERANS AFFAIRS

Appendix H- Character of Discharge Notification Letter



<Today's_Date>
<Veteran Name>
<Veteran_Address>

In reply, refer to:
<RO/Division/Initials>
File Number:
<Veteran Name>

Dear Veteran:

We made a decision regarding your discharge from military service. Every effort was made to see that your claim received complete consideration.

This letter tells you what we decided, how we reached our decision and what evidence we used to reach our decision. We have also included information on what you can do if you don't agree with our decision, and who to contact if you have questions or need assistance.

What We Decided

We decided that your military service for the period of 00/00/0000 through 00/00/0000 is dishonorable for VA purposes. You and your dependents aren't eligible for any VA benefits for this period of military service. Only Veterans with honorable service are eligible for VA benefits.

Our records show you had more than one period of military service. Eligibility for VA benefits is established based on military service from 00/00/0000 through 00/00/0000.

You may be eligible for treatment at a VA hospital for any condition determined to be related to your military service. You should apply for treatment at the nearest VA Medical Center or Outpatient Treatment Clinic. If you apply in person, please bring this letter. If you apply by letter, include your VA file number on your letter.

How Did We Make Our Decision?

<reasons for decision>

What Evidence Did We Use To Decide Your Claim?

In making our decision, we used the following evidence:

- <evidence>

What You Should Do If You Disagree With Our Decision

If you do not agree with our decision, you have one year from the date of this letter to select a review option in order to protect your initial filing date for effective date purposes. You must file your request on the required application form for the review option desired. The table below represents the review options and their respective required application form.

Review Option	Required Application Form
Supplemental Claim	VA Form 20-0995, Decision Review Request: Supplemental Claim
Higher-Level Review	VA Form 20-0996, Decision Review Request: Higher-Level Review
Appeal to the Board of Veterans' Appeals	VA Form 10182, Decision Review Request: Board Appeal (Notice of Disagreement)

Please note: You may not request a higher-level review of a higher-level review decision issued by VA.

The enclosed VA Form 20-0998, *"Your Rights To Seek Further Review Of Our Decision"*, explains your options in greater detail and provides instructions on how to request further review. You may download a copy of any of the required application forms noted above by visiting www.va.gov/vaforms/ or you may contact us by telephone at 1-800-827-1000 and we will mail you any form you need.

You can visit va.gov/decision-reviews to learn more about how the disagreement process works.

If you would like to obtain or access evidence used in making this decision, please contact us by telephone, email, or letter as noted below letting us know what you would like to obtain. Some evidence may be obtained online by visiting VA.gov.

If You Have Questions or Need Assistance

If you have any questions or need assistance with this claim, you may contact us by telephone, e-mail, or letter.

If you	Here is what to do.
Telephone	Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the Federal number is 711.

Use the Internet	Send electronic inquiries through the Internet at https://iris.custhelp.va.gov .
Write	VA now uses a centralized mail system. For all written communications, put your full name and VA file number on the letter. Please mail or fax all written correspondence to the appropriate address listed on the attached <i>Where to Send Your Written Correspondence</i> .

In all cases, be sure to refer to your VA file number, 000000000000.

If you are looking for general information about benefits and eligibility, you should visit our website at <http://www.va.gov> or search the Frequently Asked Questions (FAQs) at <https://iris.custhelp.va.gov>.

We have no record of you appointing a service organization or representative to assist you with filing an intent to file and/or your claim. You can contact us for a listing of the recognized Veterans Service Organizations and/or representatives. Veterans Service Organizations, which are recognized or approved to provide services to the veteran community, can also help you with any questions.

Sincerely yours,

Regional Office Director

Enclosures: Where to Send Your Written Correspondence
VA Form 20-0998
DD Form 149
DD Form 293

DEPARTMENT OF VETERANS AFFAIRS

Appendix I- Fee Decision Letter- Comp Exceeds MRP



<Date>

<Veteran Name>

<Veteran Address>

In reply, refer to:

<RO/Division/Initials>

File Number: 0000000000

<Veteran Name>

Dear Veteran:

Summary of the Case

An accredited* attorney or agent properly filed a valid direct-pay fee agreement per the provisions of 38 CFR 14.636(g). (See 38 CFR 14.636 for regulatory provisions relating to the payment of fees.) The fee agreement shows that the claimant and attorney/agent request that the Department of Veterans Affairs (VA) pay <amount> of your award of past-due benefits directly to the attorney/agent if all legal criteria for the payment of fees are met.

In a Decision dated <date>, benefits were awarded for the following issue(s): <issues>. The amount of past-due benefits, which is computed from the effective date of the award through the date of the decision, is \$0.00. The amount withheld for fees is \$0.00, which is <%> of past-due benefits. ****This is the amount based on the payment that we will release in 60 days, which is the amount that was computed WITH retired pay withholding.**

****Note: The aforementioned figures were based on the past-due benefits that will result in an immediate cash payment to you. This is in accordance with 38 CFR 14.636(h)(iii). A portion of the past-due benefits had to be withheld due to your receipt of military retired pay. We will conduct a review in 90 days to determine if any additional benefits need to be paid. Please see the Retired Pay section below.**

*Note: Attorneys need not have been accredited if representation was initiated, and the claim was filed, before June 23, 2008, the effective date of the amendments to 38 CFR 14.626-14.637.

Requirements for Direct Payment of Fees

Per 38 U.S.C. 5904, fees may not be charged, allowed, or paid with respect to services of agents and attorneys before the date on which a Notice of Disagreement (NOD) is filed with respect to the case. In addition to the requirement that services must be performed after the filing of a NOD, VA's regulation, 38 CFR 14.636(h), provides that if a fee agreement specifies that fees are to be paid directly by VA to an agent or attorney from past due benefits, the following requirements must be met for direct payment of fees:

- The total fee payable cannot exceed 20 percent of past-due benefits.
- The Fee must be contingent on a favorable outcome, and
- The award of past-due benefits must result in a cash payment to the claimant.

For NODs filed on or after June 20, 2007, if the above conditions are met, fees may be paid directly to the agent or attorney.

In addition to the above requirements, sections 14.636(c)(2) provides that for NODs filed on or before June 19, 2007, agents and attorneys may charge only for services provided after both of the following additional conditions have been met:

- A final decision was promulgated by the Board of Veterans' Appeals (BVA) with respect to the issue, or issues, involved in the appeal, and
- The attorney or agent was retained not later than one year following the date that the BVA decision was promulgated.
 - This condition will be met with respect to all successor attorneys or agents acting in the continuous prosecution of the same matter if the predecessor was hired within the required timeframe.

This limitation does not apply if the agent or attorney was retained while the case was pending before a court.

In addition, fees may be payable following a supplemental claim, higher-level review, NOD, or clear and unmistakable error, for decisions issued after February 19, 2019. Accordingly, agents and attorneys may charge claimants or appellants for representation provided after an agency of original jurisdiction has issued notice of an initial decision on the claim or claims, including any claim for an increase in rate of a benefit, if the notice of the initial decision was issued on or after February 19, 2019 and the agent or attorney has complied with the power of attorney requirements provided a valid fee agreement.

What We Decided and Why

In this case, the NOD was filed on <date>, and all of the requirements for direct payment of fees have been met. As a result, we will pay the attorney or agent a fee in the amount of \$0.00. Per the provisions of 38 U.S.C. 5904(a)(6), an assessment in the amount of \$0.00 has been deducted from the fees. **This is the amount based on the payment that we will release in 60 days, which is the amount that was computed WITH retired pay withholding.**

Retired Pay

You are not allowed to receive full military retired pay and full VA compensation at the same time. For now, we must withhold a portion of your past-due compensation benefits. We must do this to prevent a double payment. Therefore, at this time you will receive a reduced cash payment from award associated in this case. However, you may be entitled to a larger cash payment due to possible eligibility for concurrent receipt of VA compensation and military Retired Pay.

You may be eligible for full or partial concurrent receipt of VA compensation and military retired pay under the Combat-Related Special Compensation (CRSC) and/or Concurrent Retired and

Disability Pay (CRDP) programs. The Retired Pay Center (RPC) has been notified of this award of VA compensation. If your RPC determines the withholdings from the VA compensation should be retroactively adjusted due to CRSC/CRDP eligibility; VA will be notified and will adjust your VA compensation accordingly.

We will review the case in 90 days to determine if you will receive an additional cash payment as a result of the Rating Decision dated <date>, due to receipt of CRDP/CRSC. If the agent or attorney is due any additional direct payment of fees, then we will send another fee decision notice.

Note: Submitting a waiver for the additional payment will not circumvent the requirement for the VA to have received verification of CRDP/CRSC before payment of additional attorney fees.

What You Should Do If You Disagree With Our Decision

If you disagree with this determination, you may file a Notice of Disagreement with this decision. For more information on filing an appeal, see the enclosed *VA Form 10182, Decision Review Request: Board Appeal (Notice of Disagreement)*. All disagreements with attorney fee decisions must be filed with the Board of Veterans Appeals.

If You Have Questions or Need Assistance

If you have any questions or need assistance with this claim, you may contact us by telephone, e-mail, or letter.

If you	Here is what to do.
Telephone	Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the Federal number is 711.
Use the Internet	Send electronic inquiries through the Internet at https://iris.custhelp.va.gov .
Write	VA now uses a centralized mail system. For all written communications, put your full name and VA file number on the letter. Please mail or fax all written correspondence to the appropriate address listed on the attached <i>Where to Send Your Written Correspondence</i> .

In all cases, be sure to refer to your VA file number, 00000000.

If you are looking for general information about benefits and eligibility, you should visit our website at <http://www.va.gov> or search the Frequently Asked Questions (FAQs) at <https://iris.custhelp.va.gov>.

We have no record of you appointing a service organization or representative to assist you with filing an intent to file and/or your claim. You can contact us for a listing of the recognized Veterans Service Organizations and/or representatives. Veterans Service Organizations, which are recognized or approved to provide services to the veteran community, can also help you with any questions.

Sincerely yours,

Regional Office Director

Enclosures: Where to Send Your Written Correspondence
VA Form 10182

DEPARTMENT OF VETERANS AFFAIRS

Appendix J- Fee Recoupment Procedures- Final Notice



<Date>

<Veteran Name>

<Veteran Address>

In reply, refer to:

<RO/Division/Initials>

File Number: 0000000000

<Veteran Name>

Dear Veteran,

In our letter of <date>, we explained that VA mistakenly overlooked the filing of the direct-pay fee agreement and did not withhold any amount for fees from the <contention>, award. This action by VA resulted in an overpayment to you. After our failure to withhold, your attorney/agent was found to be entitled to a fee in the amount of <amount>, and VA has paid this amount to your attorney/agent. In our <date>, letter, we explained that we would recoup this amount if we did not hear back from you within 60 days. We did not receive a response to our letter. We have determined that you owe a debt to VA and have created an overpayment in the amount of <amount>.

What You Owe

Because VA did not withhold the attorney’s fee from your <contention>, award, you have been paid too much. The amount of the overpayment is <amount>. In a letter from VA’s Debt Management Center, we will tell you how you can repay this debt.

You may submit the evidence outlined in our letter of <date>, at any time, and we will reevaluate the amount of your overpayment.

What You Should Do If You Disagree With Our Decision

If you do not agree with our decision, you have one year from the date of this letter to select a review option in order to protect your initial filing date for effective date purposes. You must file your request on the required application form for the review option desired. The table below represents the review options and their respective required application form.

Review Option	Required Application Form
Supplemental Claim	VA Form 20-0995, Decision Review Request: Supplemental Claim

Higher-Level Review	VA Form 20-0996, Decision Review Request: Higher-Level Review
Appeal to the Board of Veterans' Appeals	VA Form 10182, Decision Review Request: Board Appeal (Notice of Disagreement)

Please note: You **may not** request a higher-level review of a higher-level review decision issued by VA.

The enclosed VA Form 20-0998, "*Your Rights To Seek Further Review Of Our Decision*", explains your options in greater detail and provides instructions on how to request further review. You may download a copy of any of the required application forms noted above by visiting www.va.gov/vaforms/ or you may contact us by telephone at 1-800-827-1000 and we will mail you any form you need.

You can visit va.gov/decision-reviews to learn more about how the disagreement process works.

If you would like to obtain or access evidence used in making this decision, please contact us by telephone, email, or letter as noted below letting us know what you would like to obtain. Some evidence may be obtained online by visiting VA.gov.

If You Have Questions or Need Assistance

If you have any questions or need assistance with this claim, you may contact us by telephone, e-mail, or letter.

If you	Here is what to do.
Telephone	Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the Federal number is 711.
Use the Internet	Send electronic inquiries through the Internet at https://iris.custhelp.va.gov .
Write	VA now uses a centralized mail system. For all written communications, put your full name and VA file number on the letter. Please mail or fax all written correspondence to the appropriate address listed on the attached <i>Where to Send Your Written Correspondence</i> .

In all cases, be sure to refer to your VA file number, 00000000000.

If you are looking for general information about benefits and eligibility, you should visit our website at <http://www.va.gov> or search the Frequently Asked Questions (FAQs) at <https://iris.custhelp.va.gov>.

We have no record of you appointing a service organization or representative to assist you with filing an intent to file and/or your claim. You can contact us for a listing of the recognized Veterans Service Organizations and/or representatives. Veterans Service Organizations, which are recognized or approved to provide services to the veteran community, can also help you with any questions.

Sincerely yours,

Regional Office Director

Enclosures: Where to Send Your Written Correspondence
VA Form 20-0998

DEPARTMENT OF VETERANS AFFAIRS

Appendix K- Summary of Case Fee Decision



<Date>

<Veteran Name>

<Veteran Address>

In reply, refer to:

<RO/Division/Initials>

File Number: 0000000000

<Veteran Name>

Dear <Veteran>:

Dear Veteran:

An accredited* attorney or agent properly filed a valid direct-pay fee agreement per the provisions of 38 CFR 14.636(g) in the above-cited case. (See 38 CFR 14.636 for regulatory provisions relating to the payment of fees.) The fee agreement shows you and your attorney/agent request that the Department of Veterans Affairs (VA) pay <%> of your award of past-due benefits directly to the attorney/agent if all legal criteria for the payment of fees are met.

*Note: Attorneys need not have been accredited if representation was initiated, and the claim was filed, before June 23, 2008, the effective date of the amendments to 38 CFR 14.626-14.637.

Summary of the Case

In a Rating Decision dated <date>, benefits were awarded for the following issue(s): <contentions>. The amount of past-due benefits, which is computed from the effective date of the award through the date of the decision, is \$0.00. The amount withheld for fees is \$0.00, which is <%> of past due benefits.

Requirements for Direct Payment of Fees

Per 38 U.S.C. 5904, fees may not be charged, allowed, or paid with respect to services of agents and attorneys before the date on which a Notice of Disagreement (NOD) is filed with respect to the case. In addition to the requirement that services must be performed after the filing of a NOD, VA's regulation, 38 CFR 14.636(h), provides that if a fee agreement specifies that fees are to be paid directly by VA to an agent or attorney from past due benefits, the following requirements must be met for direct payment of fees:

- The total fee payable cannot exceed 20 percent of past-due benefits.
- The Fee must be contingent on a favorable outcome, and
- The award of past-due benefits must result in a cash payment to the claimant.

For NODs filed on or after June 20, 2007, if the above conditions are met, fees may be paid directly to the agent or attorney.

In addition to the above requirements, sections 14.636(c)(2) provides that for NODs filed on or before June 19, 2007, agents and attorneys may charge only for services provided after both of the following additional conditions have been met:

- A final decision was promulgated by the Board of Veterans' Appeals (BVA) with respect to the issue, or issues, involved in the appeal, and
- The attorney or agent was retained not later than one year following the date that the BVA decision was promulgated.
 - This condition will be met with respect to all successor attorneys or agents acting in the continuous prosecution of the same matter if the predecessor was hired within the required timeframe.

This limitation does not apply if the agent or attorney was retained while the case was pending before a court.

In addition, fees may be payable following a supplemental claim, higher-level review, NOD, or clear and unmistakable error, for decisions issued after February 19, 2019. Accordingly, agents and attorneys may charge claimants or appellants for representation provided after an agency of original jurisdiction has issued notice of an initial decision on the claim or claims, including any claim for an increase in rate of a benefit, if the notice of the initial decision was issued on or after February 19, 2019 and the agent or attorney has complied with the power of attorney requirements provided a valid fee agreement.

What We Decided and Why

There was no NOD filed at any time in connection with the award in this case. As a result, direct payment of fees is denied.

What You Should Do If You Disagree With Our Decision

If you disagree with this determination, you may file an Appeal to the Board of Veterans' Appeals. For more information on filing an appeal, see the enclosed *VA Form 10182, Decision Review Request: Board Appeal (Notice of Disagreement)*. *All disagreements with attorney fee decisions must be filed with the Board of Veterans Appeals.*

If You Have Questions or Need Assistance

If you have any questions or need assistance with this claim, you may contact us by telephone, e-mail, or letter.

If you	Here is what to do.
Telephone	Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the Federal number is 711.

Use the Internet	Send electronic inquiries through the Internet at https://iris.custhelp.va.gov .
Write	VA now uses a centralized mail system. For all written communications, put your full name and VA file number on the letter. Please mail or fax all written correspondence to the appropriate address listed on the attached <i>Where to Send Your Written Correspondence</i> .

In all cases, be sure to refer to your VA file number, 00000000000.

If you are looking for general information about benefits and eligibility, you should visit our website at <http://www.va.gov> or search the Frequently Asked Questions (FAQs) at <https://iris.custhelp.va.gov>.

We have no record of you appointing a service organization or representative to assist you with filing an intent to file and/or your claim. You can contact us for a listing of the recognized Veterans Service Organizations and/or representatives. Veterans Service Organizations, which are recognized or approved to provide services to the veteran community, can also help you with any questions.

Sincerely yours,

Regional Office Director

Enclosures: Where to Send Your Written Correspondence
VA Form 10182

DEPARTMENT OF VETERANS AFFAIRS

Appendix L- Audit Error Worksheet Letter



<Date>

<Veteran Name>

<Veteran Address>

In reply, refer to:

<RO/Division/Initials>

File Number: 0000000000

<Veteran Name>

Dear Veteran:

The Defense Authorization Acts of 2003 and 2004 established two programs whereby certain military retirees may have restored some or all of the retired pay they waived as required by law to receive disability compensation from the Department of Veterans Affairs (VA). VA has worked with the Defense Finance and Accounting Service (DFAS) in Cleveland to develop a method for making retroactive Combat-Related Special Compensation (CRSC) and Concurrent Receipt of Retired and Disability Pay (CRDP) payments and disability payments previously withheld but now permitted by law.

What Is Your Entitlement?

<Entitlement Information>

Evidence Used to Decide Your Claim

In making our decision, we used the following evidence:

- Audit Error Worksheet, dated <date>
- Review of your claims file

What You Should Do If You Disagree With Our Decision

If you do not agree with our decision, you have one year from the date of this letter to select a review option in order to protect your initial filing date for effective date purposes. You must file your request on the required application form for the review option desired. The table below represents the review options and their respective required application form.

Review Option	Required Application Form
Supplemental Claim	VA Form 20-0995, Decision Review Request: Supplemental Claim

Higher-Level Review	VA Form 20-0996, Decision Review Request: Higher-Level Review
Appeal to the Board of Veterans' Appeals	VA Form 10182, Decision Review Request: Board Appeal (Notice of Disagreement)

Please note: You **may not** request a higher-level review of a higher-level review decision issued by VA.

The enclosed VA Form 20-0998, "*Your Rights To Seek Further Review Of Our Decision*", explains your options in greater detail and provides instructions on how to request further review. You may download a copy of any of the required application forms noted above by visiting www.va.gov/vaforms/ or you may contact us by telephone at 1-800-827-1000 and we will mail you any form you need.

You can visit va.gov/decision-reviews to learn more about how the disagreement process works.

If you would like to obtain or access evidence used in making this decision, please contact us by telephone, email, or letter as noted below letting us know what you would like to obtain. Some evidence may be obtained online by visiting VA.gov.

If You Have Questions or Need Assistance

If you have any questions or need assistance with this claim, you may contact us by telephone, e-mail, or letter.

If you	Here is what to do.
Telephone	Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the Federal number is 711.
Use the Internet	Send electronic inquiries through the Internet at https://iris.custhelp.va.gov .
Write	VA now uses a centralized mail system. For all written communications, put your full name and VA file number on the letter. Please mail or fax all written correspondence to the appropriate address listed on the attached <i>Where to Send Your Written Correspondence</i> .

You may also contact DFAS at 1-800-321-1080 for information concerning CRSC and CRDP payments. If you are a retiree of the Coast Guard or the Public Health Service, contact the Coast Guard Retired Pay Center at 1-800-772-8724.

In all cases, be sure to refer to your VA file number, 00000000000.

If you are looking for general information about benefits and eligibility, you should visit our website at <http://www.va.gov> or search the Frequently Asked Questions (FAQs) at <https://iris.custhelp.va.gov>.

We have no record of you appointing a service organization or representative to assist you with filing an intent to file and/or your claim. You can contact us for a listing of the recognized Veterans Service Organizations and/or representatives. Veterans Service Organizations, which are recognized or approved to provide services to the veteran community, can also help you with any questions.

Sincerely yours,

Regional Office Director

Enclosures: Where to Send Your Written Correspondence
VA Form 20-0998
Audit Error Worksheet, dated <date>

DEPARTMENT OF VETERANS AFFAIRS

Appendix M- NOD Not Timely Letter



<Date>

<Veteran Name>
<Veteran Address>

In reply, refer to:
<RO/Division/Initials>
File Number: 0000000000
<Veteran Name>

Dear <Veteran>:

We are writing in response to the letter you submitted to our office that was received on <date>. This letter will explain what we decided, what you should do if you disagree with our decision, and how to contact us if you have questions.

What We Decided

We have determined that we cannot accept your letter as a Notice of Disagreement. The time limit to file a Notice of Disagreement has passed. In order to file an appeal, you must submit your Notice of Disagreement no later than one year following notification of the decision you are appealing.

In your case, we notified you of our decision on <date>. Therefore, you had one year from <date> to submit your Notice of Disagreement. Your Notice of Disagreement was not received until <date>, more than one year from the date you were notified of the Rating Decision.

What This Means to You?

Because you did not submit a timely Notice of Disagreement, our decision on your claim is final.

What You Should Do If You Disagree With Our Decision

If you do not agree with our decision, you have one year from the date of this letter to select a review option in order to protect your initial filing date for effective date purposes. You must file your request on the required application form for the review option desired. The table below represents the review options and their respective required application form.

Review Option	Required Application Form
---------------	---------------------------

Supplemental Claim	VA Form 20-0995, Decision Review Request: Supplemental Claim
Higher-Level Review	VA Form 20-0996, Decision Review Request: Higher-Level Review
Appeal to the Board of Veterans' Appeals	VA Form 10182, Decision Review Request: Board Appeal (Notice of Disagreement)

Please note: You **may not** request a higher-level review of a higher-level review decision issued by VA.

The enclosed VA Form 20-0998, "*Your Rights To Seek Further Review Of Our Decision*", explains your options in greater detail and provides instructions on how to request further review. You may download a copy of any of the required application forms noted above by visiting www.va.gov/vaforms/ or you may contact us by telephone at 1-800-827-1000 and we will mail you any form you need.

You can visit va.gov/decision-reviews to learn more about how the disagreement process works.

If you would like to obtain or access evidence used in making this decision, please contact us by telephone, email, or letter as noted below letting us know what you would like to obtain. Some evidence may be obtained online by visiting VA.gov.

If You Have Questions or Need Assistance

If you have any questions or need assistance with this claim, you may contact us by telephone, e-mail, or letter.

If you	Here is what to do.
Telephone	Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the Federal number is 711.
Use the Internet	Send electronic inquiries through the Internet at https://iris.custhelp.va.gov .
Write	VA now uses a centralized mail system. For all written communications, put your full name and VA file number on the letter. Please mail or fax all written correspondence to the appropriate address listed on the attached <i>Where to Send Your Written Correspondence</i> .

In all cases, be sure to refer to your VA file number, 0000000000.

If you are looking for general information about benefits and eligibility, you should visit our website at <http://www.va.gov> or search the Frequently Asked Questions (FAQs) at <https://iris.custhelp.va.gov>.

We have no record of you appointing a service organization or representative to assist you with filing an intent to file and/or your claim. You can contact us for a listing of the recognized Veterans Service Organizations and/or representatives. Veterans Service Organizations, which are recognized or approved to provide services to the veteran community, can also help you with any questions.

Sincerely yours,

Regional Office Director

Enclosures: Where to Send Your Written Correspondence
VA Form 20-0998

DEPARTMENT OF VETERANS AFFAIRS

Appendix N- Form 9 Not Timely Letter



<Today's Date>
<Veteran Name>
<Veteran Address>

In reply, refer to:
<RO/Division/Initials>
File Number:
<Veteran Name>

Dear Veteran:

We are writing in response to the VA Form 9 "*Appeal To Board Of Veterans' Appeals*" that you submitted to our office and was received 00/00/0000. This letter will explain what we decided, what you should do if you disagree with our decision, and how to contact us if you have questions.

What We Decided

We cannot accept your VA Form 9 "*Appeal to Board of Veterans' Appeals*" as your substantive appeal as the time limit to continue your appeal has passed. In order to continue an appeal, you must submit your substantive appeal (VA Form 9 "*Appeal To Board Of Veterans' Appeals*" or statement in lieu of) no later than one year following notification of adverse decision you are appealing, or 60 days from the date our Statement of the Case was sent to you, whichever is later.

In your case, we notified you on 00/00/0000, of the adverse decision. You filed a Notice of Disagreement on 00/00/0000. A Statement of the Case was issued to you on 00/00/2000. Therefore, you had until 00/00/2000, to submit your substantive appeal.

What This Means To You

Because you did not submit a timely Substantive Appeal, our decision on your claim is final.

What You Should Do If You Disagree With Our Decision

If you do not agree with our decision, you have one year from the date of this letter to select a review option in order to protect your initial filing date for effective date purposes. You must file your request on the required application form for the review option desired. The table below represents the review options and their respective required application form.

Review Option	Required Application Form
---------------	---------------------------

Supplemental Claim	VA Form 20-0995, Decision Review Request: Supplemental Claim
Higher-Level Review	VA Form 20-0996, Decision Review Request: Higher-Level Review
Appeal to the Board of Veterans' Appeals	VA Form 10182, Decision Review Request: Board Appeal (Notice of Disagreement)

Please note: You **may not** request a higher-level review of a higher-level review decision issued by VA.

The enclosed VA Form 20-0998, "*Your Rights To Seek Further Review Of Our Decision*", explains your options in greater detail and provides instructions on how to request further review. You may download a copy of any of the required application forms noted above by visiting www.va.gov/vaforms/ or you may contact us by telephone at 1-800-827-1000 and we will mail you any form you need.

You can visit va.gov/decision-reviews to learn more about how the disagreement process works.

If you would like to obtain or access evidence used in making this decision, please contact us by telephone, email, or letter as noted below letting us know what you would like to obtain. Some evidence may be obtained online by visiting VA.gov.

If You Have Questions or Need Assistance

If you have any questions or need assistance with this claim, you may contact us by telephone, e-mail, or letter.

If you	Here is what to do.
Telephone	Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the Federal number is 711.
Use the Internet	Send electronic inquiries through the Internet at https://iris.custhelp.va.gov .
Write	VA now uses a centralized mail system. For all written communications, put your full name and VA file number on the letter. Please mail or fax all written correspondence to the appropriate address listed on the attached <i>Where to Send Your Written Correspondence</i> .

In all cases, be sure to refer to your VA file number, 0000000000.

If you are looking for general information about benefits and eligibility, you should visit our website at <http://www.va.gov> or search the Frequently Asked Questions (FAQs) at <https://iris.custhelp.va.gov>.

We have no record of you appointing a service organization or representative to assist you with filing an intent to file and/or your claim. You can contact us for a listing of the recognized Veterans Service Organizations and/or representatives. Veterans Service Organizations, which are recognized or approved to provide services to the veteran community, can also help you with any questions.

Sincerely yours,

Regional Office Director

Enclosures: Where to Send Your Written Correspondence
VA Form 20-0998

DEPARTMENT OF VETERANS AFFAIRS

Appendix O- Attorney Not Acknowledged Letter



<Today's Date>
<Veteran Name>
<Veteran Address>

In reply, refer to:
<RO/Division/Initials>
File Number:
<Veteran Name>

Dear Veteran:

Why We Are Sending This Letter

Department of Veterans Affairs (VA) records do not show that <Attorney> is accredited to represent you before VA. As noted in 38 CFR 14.629(b), no individual may act as an attorney or agent assisting claimants in the preparation, presentation, or prosecution of claims for VA benefits unless VA has first accredited him/her for such purposes. Until <Attorney> is accredited, we cannot accept his/her VA Form 21-22a, *Appointment of Individual as Claimant's Representative*.

Although <Attorney> is not accredited to represent you, we are accepting the <notice of disagreement>, <Decision Review Request: Supplemental Claim>, <Decision Review Request: Higher Level Review>, <Decision Review Request: Board Appeal (Notice of Disagreement)> <Attorney> filed on your behalf.

To find an accredited attorney, agent, or representative of a recognized Veterans Service Organization (VSO), you may wish to visit the Office of General Counsel's (OGC's) accreditation website at the following address:

<http://www.va.gov/ogc/apps/accreditation/index.asp>

What Your Attorney May Do

After <Attorney> has become accredited, he/she may resubmit the *VA Form 21-22a, Appointment of Individual as Claimant's Representative*. To obtain information on the accreditation, please visit the VA's Office of General Counsel (OGC) website at the following address:
http://www.va.gov/ogc/accred_faqs.asp

If You Have Questions or Need Assistance

If you have any questions or need assistance with this claim, you may contact us by telephone, e-

mail, or letter.

If you	Here is what to do.
Telephone	Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the Federal number is 711.
Use the Internet	Send electronic inquiries through the Internet at https://iris.custhelp.va.gov .
Write	VA now uses a centralized mail system. For all written communications, put your full name and VA file number on the letter. Please mail or fax all written correspondence to the appropriate address listed on the attached <i>Where to Send Your Written Correspondence</i> .

In all cases, be sure to refer to your VA file number, 00000000.

If you are looking for general information about benefits and eligibility, you should visit our website at <http://www.va.gov> or search the Frequently Asked Questions (FAQs) at <https://iris.custhelp.va.gov>.

We have no record of you appointing a service organization or representative to assist you with filing an intent to file and/or your claim. You can contact us for a listing of the recognized Veterans Service Organizations and/or representatives. Veterans Service Organizations, which are recognized or approved to provide services to the veteran community, can also help you with any questions.

Sincerely yours,

Regional Office Director

Enclosures: Where to Send Your Written Correspondence
VA Form 21-22

DEPARTMENT OF VETERANS AFFAIRS

Appendix P- NOD Against a Proposal Letter



<Today's _Date>
<Veteran Name>
<Veteran_Address>

In reply, refer to:
<RO/Division/Initials>
File Number:
<Veteran Name>

Dear Veteran:

This letter is being sent to you in reference to the letter you submitted to our office on <date>, regarding our proposal to <free text>.

What You Should Know?

Please be advised that your attempted <Notice of Disagreement> <Decision Review Request: Board Appeal (Notice of Disagreement)>, <Decision Review Request: Higher Level Review>, <Decision Review Request: Supplemental Claim> is premature as we have only made a proposal to reduce your benefits and, as of this date, we have not carried out this action.

If we decide to carry out our proposed action, you will receive written notification and at that time, you will be given be given appropriate instructions on what to do if you disagree with our decision.

If You Have Questions or Need Assistance

If you have any questions or need assistance with this claim, you may contact us by telephone, e-mail, or letter.

If you	Here is what to do.
Telephone	Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the Federal number is 711.
Use the Internet	Send electronic inquiries through the Internet at https://iris.custhelp.va.gov .
Write	VA now uses a centralized mail system. For all written communications, put your full name and VA file number on the letter. Please mail or fax all written correspondence to the appropriate address listed on the attached <i>Where to Send Your Written Correspondence</i> .

In all cases, be sure to refer to your VA file number, 0000000000.

If you are looking for general information about benefits and eligibility, you should visit our website at <http://www.va.gov> or search the Frequently Asked Questions (FAQs) at <https://iris.custhelp.va.gov>.

We have no record of you appointing a service organization or representative to assist you with filing an intent to file and/or your claim. You can contact us for a listing of the recognized Veterans Service Organizations and/or representatives. Veterans Service Organizations, which are recognized or approved to provide services to the veteran community, can also help you with any questions.

Sincerely yours,

Regional Office Director

Enclosures: Where to Send Your Written Correspondence

DEPARTMENT OF VETERANS AFFAIRS

Appendix Q- NOD Against a Pending Claim Letter



<Today's _Date>

<Veteran Name>
<Veteran_Address>

In reply, refer to:
<RO/Division/Initials>
File Number:
<Veteran Name>

Dear Veteran:

This letter is in reference to the <Notice of Disagreement>, <Decision Review Request: Board Appeal (Notice of Disagreement)>, <Decision Review Request: Higher Level Review>, <Decision Review Request: Supplemental Claim> you submitted to our office on 00/00/0000.

What You Should Know?

Please be advised that your attempted Notice of Disagreement <Decision Review Request: Board Appeal (Notice of Disagreement)>, <Decision Review Request: Higher Level Review>, <Decision Review Request: Supplemental Claim> is premature as we have not made a decision on your claim.

When we make a decision on your claim you will receive written notification, and at that time, you will be given appropriate instructions on what to do if you disagree with our decision.

If You Have Questions or Need Assistance

If you have any questions or need assistance with this claim, you may contact us by telephone, e-mail, or letter.

If you	Here is what to do.
Telephone	Call us at 1-800-827-1000. If you use a Telecommunications Device for the Deaf (TDD), the Federal number is 711.
Use the Internet	Send electronic inquiries through the Internet at https://iris.custhelp.va.gov .
Write	VA now uses a centralized mail system. For all written communications, put your full name and VA file number on the letter. Please mail or fax all written

	correspondence to the appropriate address listed on the attached <i>Where to Send Your Written Correspondence</i> .
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In all cases, be sure to refer to your VA file number, 0000000000.

If you are looking for general information about benefits and eligibility, you should visit our website at <http://www.va.gov> or search the Frequently Asked Questions (FAQs) at <https://iris.custhelp.va.gov>.

We have no record of you appointing a service organization or representative to assist you with filing an intent to file and/or your claim. You can contact us for a listing of the recognized Veterans Service Organizations and/or representatives. Veterans Service Organizations, which are recognized or approved to provide services to the veteran community, can also help you with any questions.

Sincerely yours,

Regional Office Director

Enclosures: Where to Send Your Written Correspondence