Claims that Require Priority Processing

Trainee Handout

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Objectives

After this training, the trainee will be able to:

* identify the different types of claims that require VA priority processing
* manage claims that require priority processing
* expedite federal records requests
* request a claims folder needed for priority processing that is located at a Decision Review Operations Center (DROC)

References

All M21-1 references are found in the [Adjudication Procedures Manual](https://vaww.compensation.pension.km.va.gov/).

* M21-1, Part III, Subpart i, Chapter 3, Section B – Processing Fully Developed Claims (FDCs)
* M21-1, Part III, Subpart ii, Chapter 1, Section D – Claims That Require Priority Processing
* M21-1, Part III, Subpart iii, Chapter 2, Section I – Control and Follow-Up of Requests for Service Records
* M21-1, Part IV, Subpart ii, Chapter 1, Section G – Claims Based on Former Prisoner of War (FPOW) Status
* M27-1, Part II, Chapter 3 – Homeless and Justice Involved Veterans Program
* SHARE User Guide
* VBMS Core User Guide

Topic 1: Claims that Require VA Priority Processing

**Claims Requiring VA Priority Processing**

Listed below are the types of claims that require priority processing:

* claims from any claimant who is
* a participant in the Fully Developed Claim Program
* homeless or experiencing extreme financial hardship
* terminally ill
* more than 85 years old
* a survivor of a former prisoner of war (FPOW)
* claims from any current or former member of the Armed Forces who
* became very seriously ill/injured or seriously ill/injured (VSI/SI) during service and is not already receiving Department of Veterans Affairs (VA) disability benefits
* is diagnosed with Amyotrophic Lateral Sclerosis (ALS) or Lou Gehrig’s Disease
* is an FPOW
* received the Medal of Honor
* the following types of claims from any current or former member of the Armed Forces or a claimant whose claim is based on the death of a service member or former service member who received the Purple Heart:
* original compensation or pension claims
* an original claim for Dependency and Indemnity Compensation (DIC)

**Fully Developed Claims**

To be eligible for priority processing the Veteran must:

* submit their claim on a substantially complete prescribed form
* simultaneously submit all private medical treatment records with their claim
* identify any relevant treatment records at a Federal facility, and
* submit any additional forms or treatment records required under special circumstances that support their specific claim

If the claimant is eligible for FDC processing, the claim should be identified by attaching the ***Fully Developed Claim*** special issue to a least one contention in VBMS.

If at any time during the processing of an FDC, a reason for exclusion is met, the claim must be excluded from the FDC Program.

Any claim excluded from the FDC program is no longer eligible for FDC priority processing.

For more information about excluding claims from the FDC program, see M21-1 III.i.3.B.2.

**Homeless Veterans**

VBA qualifies a Veteran as homeless when a Veteran self-identifies as such, or when there is an indication the Veteran is

* living in a primary nighttime residence not meant for human habitation, including examples such as a(n)
* car
* park
* abandoned building
* bus
* train station
* airport, **or**
* camping ground;
* living in housing designated to provide temporary living arrangements, including examples such as a(n)
* congregate shelter
* transitional housing, **or**
* hotel or motel paid for by charitable organizations or by federal, state, or local government programs
* residing in an emergency shelter or place not meant for human habitation immediately before entering an institution
* exiting an intuition without sufficient resources to prevent returning to such an environment
* receiving support from VA’s Homeless Program to maintain permanent housing, including examples such as a(n)
* Housing and Urban Development-VA Supportive Housing (HUD-VASH) Grant and Per Diem Program
* Support Services for Veteran Families (SSVF), **or**
* other programs within VA that support Veteran housing
* living with a family member or friend due to lack of his or her own housing or economic hardship, **or**
* fleeing or attempting to flee domestic violence when there is evidence the Veteran has no other residence and lacks the resources including social support networks, to obtain permanent housing, **or**
* selects the homeless box on the VA Form 21-526EZ.

VBA qualifies a Veteran at imminent risk of homelessness when a Veteran self-identifies as such, or if there is an indication of the following

* the Veteran will imminently lose his or her primary nighttime residence, including
* owned, rented, or free permanent housing
* shared housing, and
* hotel or motel rooms not paid for by federal, state, or local government programs for low income individuals or charitable organizations
* the Veteran lacks the resources or support networks needed to obtain permanent housing and no subsequent residence has been identified
* the Veteran resides in a public or privately operated shelter or institution
* the Veteran’s residence will be lost within 30-days of the date of notification of financial hardship to VA
* the Veteran has received notification that his/her right to occupy the current housing or living situation will be terminated
* the Veteran is exiting a publicly funded institution or system of care
* the Veteran has moved frequently because of economic reasons, **or**
* the Veteran lives in housing that has characteristics associated with instability and an increased risk of homelessness.

VBA qualifies a Veteran as formerly homeless when a Veteran self-identifies as such, or if there is an indication the Veteran is

* living in a fixed, regular, and adequate nighttime residence intended for human habitation
* the residence is a permanent place of residency, or
* indication the Veteran has the resources or support networks to obtain and sustain permanent housing without assistance from charitable organizations or federal, state, and local government programs.

The RO’s HVOC, HVCCs or designee is responsible for identifying Veterans that are deemed homeless, at risk of homelessness, and formerly homeless, by ensuring the correct corporate flash is associated with the Veterans record.

The table below outlines the proper use of flashes for the Homeless Veterans program.

|  |  |
| --- | --- |
| **If the Veteran Meets the…** | **Then ...** |
| homeless Veteran criteria | * use the ***Homeless***corporate record flash, and * the HOMELESS indicator in BIRLS on the MISC screen. |
| at risk of homelessness criteria | use the ***Hardship*** corporate record flash |
| formerly homeless criteria | use the ***Formerly Homeless*** corporate record flash. |

***For more information about applying a coporate flash, see the SHARE User Guide.***

The RO closest to the Veterans physical address is considered the station of jurisdiction (SOJ) for homeless and at imminent risk of homelessness Veterans claims. If the Veteran’s physical address changes while the claim is being processed, the SOJ will be the RO closest to the new address; the claim will be transferred immediately to the new SOJ.

The SOJ will expedite and provide priority processing for all homeless and at imminent risk of homelessness Veterans’ benefit claims.

Upon receipt of an application for benefits that contains a telephone number but no mailing address, attempt to contact the claimant by telephone to obtain a current mailing address.

If neither a mailing address nor a telephone number are provided on the application, follow the instructions in M21-1, Part III, Subpart ii, 1.B.6.m.

**Extreme Financial Hardship**

If a claimant states that they are experiencing extreme financial hardship and submits documentation to support the assertion, accept the claimant’s statement as factual.

Documentation to support the assertion of extreme financial hardship includes, but is not limited to

* an eviction notice or statement of foreclosure
* notices of past-due utility bills, **and/or**
* collection notices from creditors.

***A Veterans Service Center Manager (VSCM) may designate that a claim requires priority processing because of extreme financial hardship even though the documentation described in this block does not exist.***

***Add the Hardship corporate flash to a claimant’s record when extreme financial hardship has been adequately demonstrated.***

VSI/SI

For the purposes of this topic, a ***serious illness or injury*** is defined as a disability that

* occurred as a result of participation in a military operation, **and**
* will likely result in discharge from military service.

The Department of Defense (DoD) determines whether a service member is

* very seriously injured (VSI) ,
* seriously injured (SI), **or**
* not seriously ill or injured (NSI).

All service members categorized by DoD as VSI or SI are considered seriously disabled for VA purposes.

In the absence of an indicator from DoD that a claimant is VSI/SI, a VSI/SI Coordinator may decide whether a claimant has a serious illness or injury.

Ensure the ***Seriously Injured/Very Seriously Injured***corporate flash is added to the claimant’s record

Although VSI/SI Coordinators should contact and assist individuals that DoD has categorized as NSI, their claims do not require case management and priority processing.

Prior to awarding benefits to a claimant, ensure they are discharged from service. A service member may receive treatment at a VA or DoD medical facility for several months before actual separation from service. Pre-discharge sites do ***not*** process claims requiring case management, including claims from VSI/SI claimants.

Follow the procedures in the table below if a VSI/SI claimant is released from service while hospitalized or convalescing.

|  |  |
| --- | --- |
| **If the ...** | **Then prepare a rating decision that grants entitlement to ...** |
| medical evidence of record shows  • the existence of an unstabilized condition with severe disability, **and**  • substantially gainful employment is not feasible or advisable | a prestabilization rating under 38 CFR 4.28.  ***It is not necessary to request a VA examination or service treatment records, or undertake other routine development, if the evidence of record is sufficient to justify a pre-stabilization rating.*** |
| medical evidence of record shows  • the existence of an unstabilized condition with unhealed or incompletely healed wounds or injuries, **and**  • employability is likely impaired because of the condition |
| • claimant was discharged from service while hospitalized for a service-connectable disability, and  • the period of hospitalization exceeded 21 days | benefits under 38 CFR 4.29.  ***Do not postpone rating action simply because a claimant is discharged from service while hospitalized.*** |
| claimant requires convalescence following a period of hospitalization for a service-connected disability | benefits under 38 CFR 4.30. |

Terminal Illness

Upon receipt of medical evidence showing a claimant has an illness that is likely terminal in nature, present the evidence to a coach or assistant coach for a determination as to whether or not priority processing of the associated claim is warranted.

When determining whether priority processing is warranted, consider

* the likelihood the claimant will pass away before completion of the claims process, **and**
* the probable need for additional benefits, such as the benefits payable based on a claimant’s need for aid and attendance.

When priority processing of a claim based on terminal illness is warranted, follow the guidance in the table below.

|  |  |
| --- | --- |
| **If the claimant has...** | **Then ...** |
| a paper claims folder | • attach a paper flash to the front of the claims folder that reads *Process Next – Terminal Illness*  • add the *Terminally Ill* flash to the corporate record using Share, and  • process the claim expeditiously |
| an electronic claims folder (eFolder) only | • add the *Terminally Ill* flash to the corporate record using Share, and  • change the claim priority in the Veterans Benefits Management System (VBMS) to *High*. |

If a claim for ALS is received add the **Amyotrophic Lateral Sclerosis** flash and remove if the claim is denied due to no diagnosis of ALS.

Former Prisoners of War (FPOW)

A **former prisoner of war** (FPOW) is defined in [38 U.S.C. 101(32)](https://www.law.cornell.edu/uscode/text/38/101) as a person who, while serving in the active military, naval, or air service, was forcibly detained or interned in the line of duty by

* an enemy government or its agents, or a hostile force, during a period of war, or
* a foreign government or its agents, or a hostile force, under circumstances which the Secretary finds to have been comparable to the circumstances under which persons have generally been forcibly detained or interned by enemy governments during periods of war.

***The Court of Appeals for Veterans Claims, in* McBurney v. Shinseki*, observed that the definition of “detain,” under the provisions of 38 U.S.C. 101(32) must include the elements of “restraint” and “custody.”***

Circumstances comparable to prisoner of war (POW) detainment include, but are not limited to

* physical hardships or abuse
* psychological hardships or abuse
* malnutrition, and
* unsanitary conditions.

In the absence of evidence to the contrary, consider that each individual in a group of detainees/internees encountered the same circumstances experienced by the group as a whole.

***For more information about the circumstances of detention or internment, see 38 CFR 3.1(y)(2).***

Generally, the reason for detention or internment is immaterial when making FPOW determinations.

***Exception***:  Do not authorize FPOW status if a serviceperson was detained or interned by a foreign government for a violation of its laws. Such a person is *not* entitled to FPOW status unless the charges were a sham intended to legitimize the detention/internment.

Assume that forcible detention or internment occurred in the line of duty unless there is affirmative evidence showing that it was the proximate result of the serviceperson’s own willful misconduct.

VA will accept the finding of the service department concerning FPOW status during wartime if detention or internment was by an enemy government or its agents.

VA has sole authority to determine FPOW status if

* detention or internment occurred
* in peacetime, **or**
* during wartime by
  + - allied governments or their agents
    - neutral governments, **or**
    - hostile forces, not necessarily representative of a recognized foreign government,

***VA is also responsible if a reasonable basis exists for questioning the service department findings.***

***Examples***:  Some examples of governments where American personnel were detained include the following:

* the Soviet Union in World War II (WWII), which was an allied country
* Switzerland and Sweden in WWII, which were declared neutral countries, **and**
* Somalia and Kosovo, which contained hostile forces, but were *not* designated enemy countries during a period of war.

***See the chart in M21-1 III.v.1.C.1.h for a list of countries that are considered declared enemies of the United States and the periods of those hostilities.***

FPOW claims require priority processing. Add the ***POW***flash (when it is not already present) when a claim is received from a

* Veteran or survivor who claims FPOW status, or
* Veteran whose FPOW status has been previously verified, or the Veteran’s survivor.

The FPOW flash will result in prioritization of the FPOW claim within the National Work Queue and cause the claim to be routed to the RO nearest in geographical location to the Veteran or claimant.

Medal of Honor

The Medal of Honor is the highest and most prestigious personal military decoration that may be awarded to recognize Veterans who have distinguished themselves by acts of valor during specifically defined combat or combat-related service. It is awarded by the President of the United States on behalf of Congress.

***For more information on award of the Medal of Honor for members of the***

* ***U.S. Army, see 10 U.S.C. 3741***
* ***U.S. Navy and Marine Corps, see 10 U.S.C. 6241***
* ***U.S. Air Force, see 10 U.S.C. 8741, and***
* ***U.S. Coast Guard, see 14 U.S.C. 491***

Priority processing is required for all claims for Veterans or service members who have earned the Medal of Honor.

Add the ***Medal of Honor***corporate flash (when it is not already present) when a claim is received from a Veteran, service member, or survivor and receipt of the Medal of Honor is documented. The flash will result in prioritization of the claim within the National Work Queue.

*When the claimant has a paper claims folder, also attach a paper flash to the front of the claims folder that reads Process Next – Purple Heart/Medal of Honor and process the claim expeditiously.*

Purple Heart

The Purple Heart is awarded in the name of the President of the United States to members of the Armed Forces of the United States who have been wounded, were killed, or who have died or may hereafter die of wounds received during specifically defined combat or combat-related service.

***For more information on award of the Purple Heart, see 10 U.S.C. 1129.***

Priority processing is required for

* original compensation or pension claims for a Veteran or service member who earned the Purple Heart
* original DIC claims based on the death of a Veteran or service member who earned the Purple Heart

Add the ***Purple Heart***corporate flash (when it is not already present) when a claim is received from a Veteran, service member, or survivor and receipt of the Purple Heart is documented. The flash will result in prioritization of original claims within the National Work Queue.

*When the claimant has a paper claims folder, also attach a paper flash to the front of the claims folder that reads Process Next – Purple Heart/Medal of Honor and process the claim expeditiously.*

Topic 2: Managing Priority Claims

**Managing Priority Claims**

Upon receipt of a claim that requires priority processing, the claims processor must take any and all necessary development actions ***before*** taking action on any other non-priority claim. If the claims processor has multiple claims that require priority processing in their work queue, they should use their best judgement on which claim to process first.

The claims processor should do the following to expedite the processing of priority claims:

* utilizing appropriate flashes or claim attributes, when indicated
* frequently following up on pending actions
* utilizing issue-specific coordinators, such as Military Records Specialists, when applicable
* using the telephone to
* contact homeless Veterans, and
* conduct development activities with other types of claimants, whenever possible
* collaborating with the Veterans Health Administration and other involved counterparts
* reviewing any available medical evidence early in the claims process to determine its potential adequacy for rating purposes, **and**
* sympathetically considering the claimant’s level of impairment (particularly where evidence is suggestive of terminal illness) so as to
* solicit for disability benefits questionnaires completed by his/her primary care provider in lieu of examination, **and/or**
* request medical opinions based solely on records review when available evidence is otherwise sufficient to assign an evaluation

There is no step-by-step guide for processing priority claims nor will one process work for every priority claim. The claims processor should take any legal and available action to obtain evidence, make a decision, or notify the Veteran of our decision. Be creative and think outside the box.

Some examples include:

* using a shorter time period for the tracked item, a few days versus 30 days, when requesting DPRIS records so that follow-up and review can happen sooner
* utilizing the phone to follow-up with a military treatment facility on a records request
* involving a Joint Service Records and Research Center (JSRRC) representatives when trying to confirm a stressor
* identifying the claim as a priority in the exam request and, whenever possible, coordinating with the examining location to ensure the exam is completed expeditiously
* recognizing that there is enough evidence of record to grant the benefit sought
* utilizing a soft hand off between development activity and rating activity, rating activity and promulgater, and promulgater and authorizer

**PIES Follow-ups**

Priority handling of requests for records at the National Personnel Records Center (NPRC) is necessary for fully developed claims (FDCs) and claims for benefits that have been pending for more than one year.

Follow the procedures in the table below for processing requests for records and any necessary follow-up requests.

|  |  |
| --- | --- |
| **Step** | **Action** |
| 1 | Request the necessary records using the appropriate Personnel Information Exchange System (PIES) request code(s). |
| 2 | Follow-up on the PIES request if it  • remains in an open status after 30 days, or  • has been completed for at least 15 days, but the records are not available in the Veterans Benefits Management System (VBMS). |
| 3 | If a follow-up on the PIES request is necessary, send an e-mail, tagged with *High Importance*, to the appropriate mailbox identified in the table below.   |  |  | | --- | --- | | **If the claim is…** | **Then send the follow-up request to…** | | an FDC | VAVBASTL/RMC/PIESFDC | | pending longer than one year | VAVBASTL/RMC/PIES | |
| 4 | Associate a copy of the follow-up request e-mail with the claims folder. |

Priority handling of requests for records at NPRC is occasionally necessary under other circumstances. Claims processors may submit priority PIES requests after obtaining authorization from the Department of Veterans Affairs (VA) Liaison Office (VALO) by sending an e-mail, tagged with *High Importance*, containing the Veteran’s identification information required to request records.

The table below indicates the mailbox to which claims processors must send the authorization request and any necessary follow-up requests.

|  |  |
| --- | --- |
| **Circumstance** | **VALO Mailbox** |
| VA receives a claim from a homeless Veteran | VAVBASTL/RMC/PIESHOMELESS |
| all other priority claims not previously mentioned | VAVBASTL/RMC/LNO |

After the authorized priority PIES request is submitted, any claims processor may send follow-up e-mails to the mailboxes listed in the table above if the PIES request

* remains in an Incomplete or Submitted status after 15 days, or
* has been completed for at least 15 days, but the records are not available in VBMS.

***The VALO will coordinate with the National Archives and Records Administration to expedite records requests for Veterans over 85 years of age. However, the majority of these records have been archived or exist in a delicate state due to the fire at NPRC. A response to the records request may take longer than other expedited requests.***

**RMC Records**

Check the scanning status of STRs previously stored at the RMC using the RMC Source Material Tracking System (SMTS) Portal.

Claims processors must follow the steps in the table below if VA is awaiting the scanning/upload of STRs that were extracted from RMC.

|  |  |
| --- | --- |
| **Step** | **Action** |
| 1 | Add the VBMS tracked item Awaiting STR Auto Receipt. |
| 2 | Change the tracked item suspense date to match the amount of time remaining on the request.  ***Example***: If establishing the tracked item  • 20 days after the request was generated, input *10* in the TRACKED ITEM SUSPENSE field, **or**  • 37 days after the request was generated, input *8* days in the TRACKED ITEM SUSPENSE field (45 days total being the initial 30-day suspense period and the additional 15 days of the first follow-up suspense period). |

***For more information on the extraction and cataloguing of STRs stored in RMC file banks (File Bank Extraction project), see M21-1, Part III, Subpart iii, 2.A.4.d.***

***For more information on adding tracked items in VBMS, see the VBMS Core User Guide.***

**Paper Claims**

Adjudicate a claim that requires priority processing ***before*** sending any associated documentation to a vendor for conversion into an electronic format (scanning) if

* the claim is in paper form, or
* the claimant still has a traditional claims folder.

If the following are true, follow the process below

* an RO receives a claim that requires priority processing, and
* the corresponding paper claims folder is located at a DROC

For the purpose of this topic, priority processing includes

* those previously listed
* claims that have been pending for more than one year
* BDD claims
* Integrated Disability Evaluation System claims, and
* Dependency and Indemnity Compensation claims

|  |  |
| --- | --- |
| **Step** | **Action** |
| 1 | Send an e-mail to the DROC with jurisdiction of the folder requesting access to the contents of the claims folder based on receipt of a claim that requires priority processing.  Enter *Priority-Processing Claim* in the subject line of the e-mail.  • Include the following in the body of the e-mail:  ‒ claimant’s name and claims folder number  ‒ type of end product (EP) established  ‒ date of claim, and  ‒ type of priority  • DROC e-mail addresses are as follows:  ‒ Washington, D.C.: VAVBAARC/VSC  ‒ St. Petersburg: VAVBASPT/RO/DROC  ‒ Seattle: VAVBASEA/RO/DROC  ***The DROC will send the paper claims folder to a vendor that will scan the documents contained in the claims folder and upload them into the appropriate eFolder.***  ***Exception***: If the claims folder must be maintained as a paper folder, the claims folder will not be sent for scanning. |
| 2 | As soon as the contents of the claims folder appear in the claimant’s eFolder process the pending claim. |

If the claim at the DROC must be maintained in paper form, the RO may request a temporary 21-day transfer of the claims folder.

This request should be sent via email to the DROC with jurisdiction of the claims folder. The email should contain the same information as before.

The DROC will determine whether the paper claims folder can be returned to the RO. If the DROC cannot return the paper claims folder timely, it will indicate the anticipated date of return.

If mitigating circumstances prevent a paper claims folder from being returned to a DROC within this 21-day time frame, the RO must submit an extension request to the DROC via email.