

PENSION AND FIDUCIARY SERVICE

PMC VSR Advanced Core Course Phase 5, Part 1(a): Initial Screening and Claim Establishment

# Phase 5, Part 1(a) Knowledge Check Preparation Appendix B

October 28, 2016 Version 1.0

### Knowledge Check Preparation Worksheet

#### Part A: Initial Screening

Using Appendix A: Example Claim, answer the following questions regarding the initial screening process.

- 1. Is the application dated before or after 3/24/2015?
- 2. Is the application substantially complete? Provide the rationale for your decision.
- 3. Does this claim meet the requirements of a FDC program? Provide the rationale for your decision.
- 4. Does this claim meet the requirement for special processing? Provide the rationale for your decision.
- 5. Does this claim meet the characteristics of an Old Law pension? Provide the rationale for your decision.
- 6. What is the DOC for this claim? Provide the rationale for your decision.

7. Using the SHARE screen below, determine if the DOC is correct in SHARE. Provide rationale for your decision.

🔯 Pending Issue File Data 310 Philadelphia 🛛 Process is: Search All In List						
File Help						
Selection File Numbe: TRA-65-9782 Fayee 00 Benefit Claim Type 180 - PMC - Initial I	Live Pension Name	JHERNAN				
Claim Status (P01) Rating Data (301) Dependency (304) Widow(er)s/Custodian Incom	e Report (306) 403 - 498					
Veteran Stub J HERNAÑ Address	Claim History					
Payee Stub	Station Date Status 310 03/21/2016 ESTABLISH	Who MENT 1710				
Power Of Attorney 74	310 0372172016 ESTABLISH	MENT 1710				
Benefit Type						
Claim Date 01/08/2016						
Suspense Date 04/20/2016						
Section/Unit 2111						
Claim Jurisdiction 310 Philadelphia						
Claim Location 03/21/2016 MAP-D						
Folder Location OTHER FOLDER DELAY						
Employee Number						
Employee Station 310						
Employee Name	4	Þ				
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ISSUE WAS CREATED BY SHARE PROCESSING -C&P Award-VETSNET						
1						
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8. Review the SHARE screen below. Using the example claim and **End Product (EP) Code** job aid, determine if the EP code is correct. Provide the rationale for your decision.

🔯 Pending Issue F	File Data 310 Philadelph	nia Process is: S	earch All In Li	t					
File Help									
- Selection File Number   TR	A-65-9782 Fayee 00	Benefit CPL C	laim Type 180	PMC - Initial I	ive Pension	n	Name	JHER	NAN
Claim Status (PO	11) Rating Data (301)	Dependency (304)	Widow(er)s/	Custodian Incom	e Report (30	6) 403 - 498			
Veteran Stub	J HERNAÑ		- Address		11	C	laim History		
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	17								
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Claim Jurisdiction	310 Philadelphia			2 🗹					
Claim Location	03/21/2016 MAP-D								
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9. Does the claimant list a POA? If POA is listed, is POA accredited. Remember to use the <u>Accreditation Search</u>.

## Phase 5, Part 1(a) Knowledge Check Preparation Appendix B

#### Part B: Claim Establishment

Use the example claim and the SHARE screens below to determine if the claim has been established. Provide rationale for your decision.

🚺 101 Pending Issue / Corporate Control Establish	hment	
Data Entered File Number TRA-65-9782 Veteran SSN TRA- Benefit Type CPL - Compensation-Pension Live	65-9782 Veteran Name Payee 00 - Veteran	Jesus Hernandez Claim Type Incremental 180 - PMC-Initial Live Pension 0 🗸
Fiduciary: T		Principal Guardianship Folder Location:
Person Title:     Organization     Last:     Hernandez	First: Suffix:	4
⑦ Domestic ○ International ○ Overseas Military		01/08/2016 Disposition: MAPD -
Address 1: Address 2:	Suspense Date Future Reason:	
Address 3: City: State: Zip Code:	Claimant SSN: Power of A Searc	TRA-65-9782 Bene Birth Date: 11/29/1938
DayTime: [[] Nighttime:[[] Email: Edit 6x20 Address	GW Registry Permit: In-take Site: Vie	N - N/A   Suppress Ack Letter Special Issues  PCGL  w Current 6x20 Address  Dependents
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## Phase 5, Part 1(a) Knowledge Check Preparation Appendix B

Pending Issue F File Help	ile Data 31	10 Philadelph	ia Process is: S	earch All In Li	ŧ				
Selection									
File Number TR	A-65-9782	Fayee 00	Benefit CPL C	laim Type 180	PMC - Initial	Live Pension		Name	JHERNAN
Claim Status (PO	1) Rating	) Data (301) 🏹	Dependency (304)	Widow(er)s/	Custodian Incor	me Report (306	6) 403 - 498		
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Payee Stub		-				Station	Date	Status	Who
Power Of Attorney	74					310	03/21/2016	ESTABLISH	4ENT 1710
Benefit Type									
Claim Date	01/08/2016	6							
Suspense Date	04/20/201	6							
Section/Unit	2111			r i d	ก 🗗	1			
Claim Jurisdiction	310 Philade	elphia			2 🗹				
Claim Location	03/21/201	6 MAP-D							
Folder Location	OTHER FO	LDER DELAY	1						
Employee Number									
Employee Station	310								
Employee Name						4			•
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