



Pension and Fiduciary (P&F) Service

Pension Quality Call

Date: May 31, 2023

TMS: # VA 4644143

AGENDA TOPICS

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AGENDA ITEMS

Agenda item: STAR Error Trends

Presenter: Jennifer Kunkel,
Analyst

Target Audience:
QRT and Management

Discussion:

In February, PA&I released the FY 2023 sample calculation for Pension STAR cases. Beginning with the March 2023 reviews, the overall sample size dropped from 50 to 38. Sample sizes are calculated based on an average performance from the past 2 years.

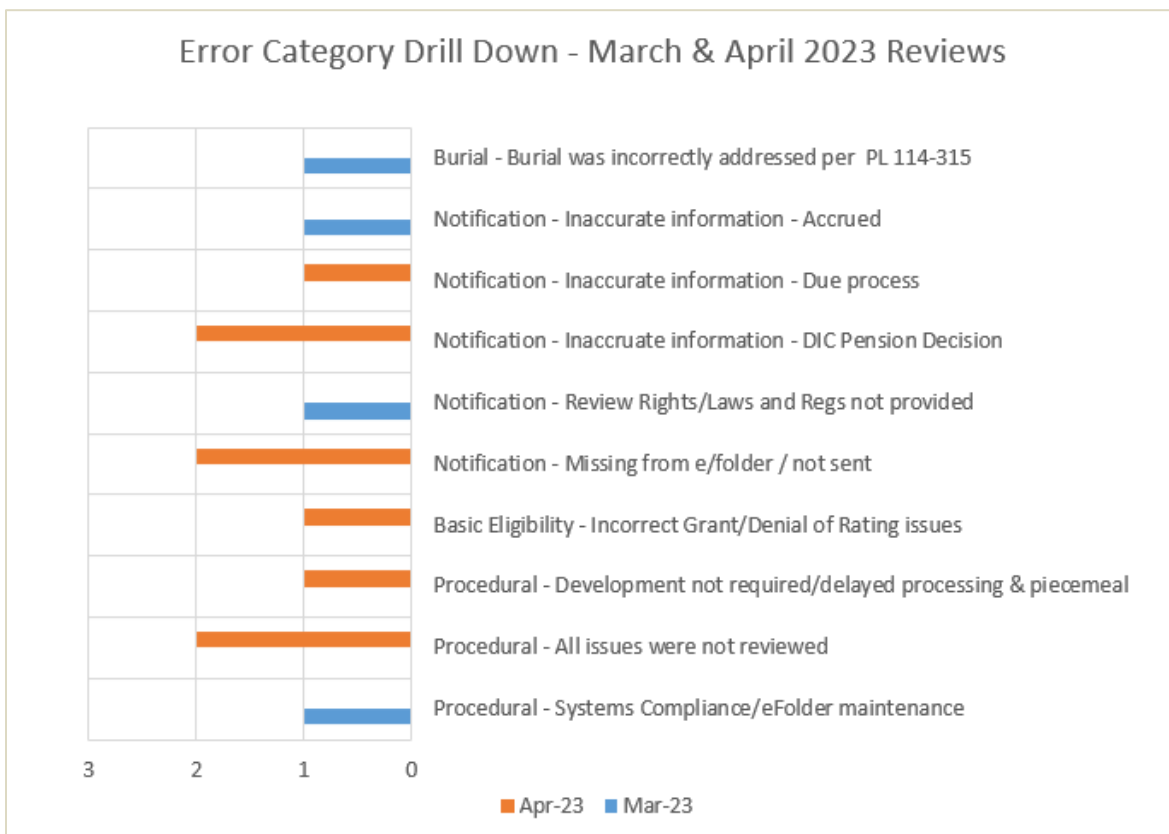
A trend analysis was conducted of the errors cited on National STAR Pension Quality Reviews completed between the months of **March 2023 and April 2023** (transactions completed between February 1, 2023, through March 31, 2023). STAR reviews are performed the month after a claim is completed.

| Review Month | Review Category | Total Reviewed | Total Claims in Error | BE Errors Cited | Non-BE Errors Cited | Number of Errors Cited | BE Accuracy % | Recons Received |
|--------------|-----------------|----------------|-----------------------|-----------------|---------------------|------------------------|---------------|-----------------|
| Mar | Authorization | 24 | 2 | 0 | 2 | 2 | 100% | 0 |
| | Rating | 14 | 2 | 0 | 2 | 2 | 100% | 0 |
| | Total | 38 | 4 | 0 | 4 | 4 | | 0 |
| Apr | Authorization | 24 | 4 | 1 | 3 | 5 | 95.83% | 0 |
| | Rating | 14 | 4 | 1 | 3 | 4 | 92.86% | 0 |
| | Total | 38 | 8 | 2 | 6 | 9 | | 0 |

Out of the **76** claims reviewed for quality, **12** claims had a total of **13** errors cited; **2** of those claims had BE errors. No reconsiderations (recons) were submitted from any of the 13 errors cited. The 13 errors were within the following categories:

| March | | April | |
|--|--|---|--|
| BE | Non-BE | BE | Non-BE |
| <ul style="list-style-type: none"> • None | <ul style="list-style-type: none"> • 2 – Notification • 1 – Burial • 1 – Procedural | <ul style="list-style-type: none"> • 1 – Basic Eligibility • 1 – Procedural | <ul style="list-style-type: none"> • 5 – Notification • 2 – Procedural |

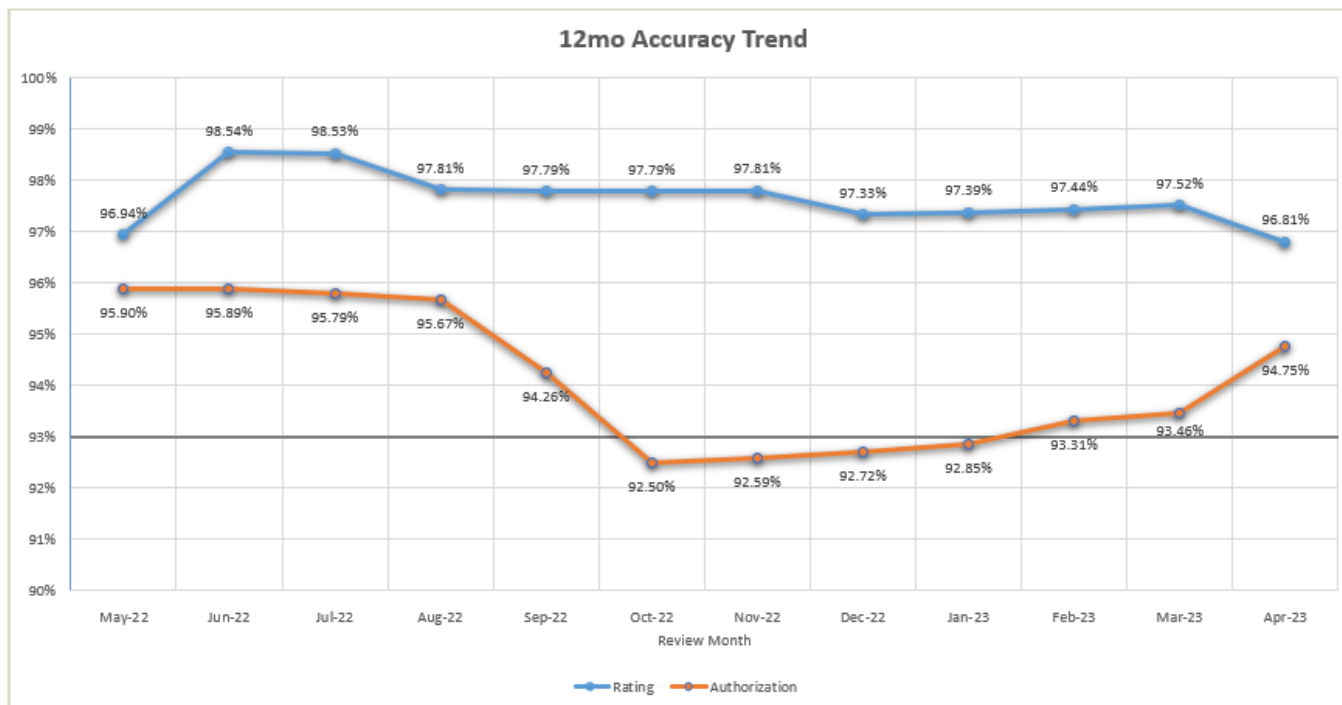
The *Error Drill Down* graph below (next page) details the errors broken out by category/reasons:



Notification continues to be the highest area of errors. Please remember to include all appropriate attachments and review all letters for accuracy before releasing.

During the 12-month review period of May 2022 through April 2023 (transactions between April 1, 2022, through March 31, 2023), the graph below shows consistent authorization improvement since the November 2022 reviews.

Rating errors have also increased slightly over the last 12-month period.



Sample Case: EP 160. Typically, errors categorized as procedural are non BE errors because the action cited does not change the outcome of the award. However, one procedural error was called in the April reviews on a non-service-connected (NSC) burial EP 160 for not referring the claim to the rating activity for inferred service-connected death. The Veteran was service connected for a condition that was listed a cause of death. The lower NSC rate was paid to the claimant when the higher SC death rate was payable. The root cause of the incorrect rate was failing to send that claim to the rating activity per M21-1 XI.iii.1.B.3.c.

References/Contacts

- ✓ STAR Reports https://vbaw.vba.va.gov/bl/21/star/reports/star_rpts20.htm
- ✓ Pension STAR Dashboard [Pension STAR Dashboard | Salesforce](#)

Target Audience:
QRT and Management

Discussion:

On May 5, 2023, the Office of Field Operations (OFO) released guidance extending the quality grace period for PACT claims through May 31st. The email included guidance for handling IQR errors called between April 1, 2023, through May 8, 2023, for PACT Act specific issues. OFO also provided guidance in a document to assist with QMS adjustments to errors cited during that time frame. The grace period for National STAR was also extended through May 31, 2023.

Training:

Three new trainings were released on May 10th.

- ‘PACT Act Scenario Samples’ (VA 4643554), due by COB June 6, 2023
- ‘PMC PACT Act Effective Dates’ (VA 4643556), due by COB June 9, 2023
- ‘PMC PACT Act Processing Guide/Job Aid’ (VA 4643560), due by COB June 6, 2023

Live TERA Tool Training was given on June 1, 2023. TMS information for this course is forthcoming.

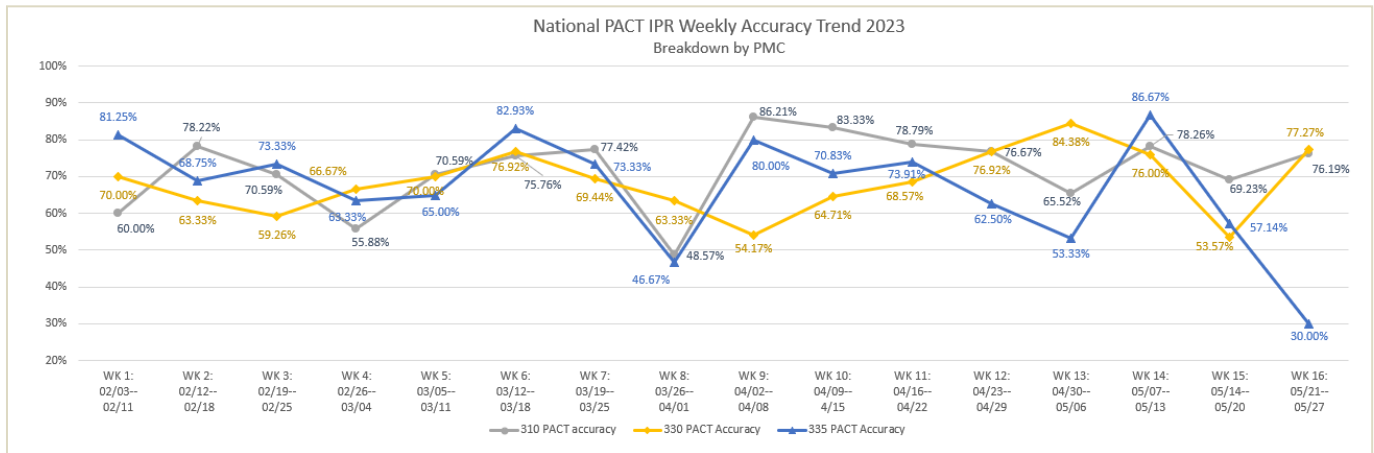
Questions regarding training courses should be directed to the Pension & Fiduciary Service Training Team via the [Field Inquiry Tool](#) (FIT).

IPRs:

An updated check list was implemented on April 25th. PACT IPRs have been extended an extra 30 days through June 6, 2023. Reviewers are currently in the 17th week of conducting these reviews. Stats as of the end of Week 16 are shown on the below chart.

| IPRs through Week 16: | | | |
|--|---------------|---------------|---------------|
| <i>Review Period: 02/03/2023 -- 05/27/2023</i> | | | |
| # Transactions Reviewed: | 1456 | | |
| PACT Cumulative Transaction Accuracy: | 69.99% | | |
| PMC Breakdown | | | |
| | 310 | 330 | 335 |
| # Transactions reviewed: | 480 | 584 | 392 |
| # Transactions with no PACT errors: | 341 | 405 | 272 |
| PACT Transaction Accuracy: | 71.04% | 69.35% | 69.39% |

Collectively, the PACT Accuracy rate has been showing general overall improvement over time. The graph below shows the weekly accuracies of each PMC through week 16.



The noted top error trends during these reviews continue to show:

- Inappropriately applying or removing special issue indicators
- Misidentifying PACT related, or not related, claims
- Proper documentation of TERA memo and ILER

PMC TERA Memo Tool for survivor claims:

OFO, in partnership with Medical Disability Examination Office (MDEO) and P&F Service, released the P&F Service: PMC TERA Memo Tool to the field on May 11, 2023. Training for the PMCs took place on June 1, 2023.

The PMC TERA Memo Tool is an interactive Adobe Memorandum that asks the claims processor a series of questions to help determine:

- When TERA applies to service-connected cause of death (and if the TERA Memorandum is needed)
- When a TERA exception is met for a cause of death
- How to complete the TERA Memorandum

Remember, TERA is applied at the contention level. Each response must take into consideration every cause of death listed for the Veteran. A TERA Memorandum should be completed in any claim that contains at least one cause of death for which a TERA exception does not apply. Only one TERA Memorandum is needed for each claim.

References/Contacts

- ✓ IPR SharePoint [P&F Service - PMC PACT IPRs](#)
- ✓ PMC Intranet Site [PACT Act - Pension and Fiduciary Service \(va.gov\)](#)
- ✓ Questions [Field Inquiry Tool \(FIT\)](#).

Agenda item: Entitlement To Accrued Benefits

Presenter: Julieann Brantseg,
Analyst

Target Audience:
QRT and Management

Discussion:

P&F Service recently updated [M21-1 XI.ii.3.A.2.a](#) to clarify that a claim with withheld funds pending a fiduciary appointment is now considered a claim pending at the time of death and may be paid as accrued benefits.

Agenda item: Preliminary Special Focus Review Results

Presenter: Gary Hodge,
Lead Analyst

Target Audience:
QRT and Management

Discussion:

Cleland Dole COVID-19

In December 2022, the Joseph Maxwell Cleland and Robert Joseph Dole Memorial Veterans Benefits and Healthcare Improvement Act of 2022 was passed which requires VA to secure a medical opinion to determine if a service-connected disability was the principal or contributory cause of death before notifying the survivor of the final decision in any case in which all of the following factors are met:

1. A claim for compensation is filed under chapter 13 of title 38, United States Code, with respect to a Veteran with one or more service-connected disabilities who dies.
2. The death certificate for the Veteran identifies Coronavirus Disease 2019 (COVID–19) as the principal or contributory cause of death.
3. The death certificate does not clearly identify any of the service-connected disabilities of the Veteran as the principal or contributory cause of death.
4. A service-connected disability of the Veteran includes a condition more likely to cause severe illness from COVID– 19 as determined by the Centers for Disease Control and Prevention.
5. The claimant is not entitled to benefits under section 1318 of such title.
6. The evidence to support the claim does not result in a preliminary finding in favor of the claimant.

Prior to the passage of the Cleland-Dole Act, VA had already updated its procedures in response to the COVID-19 pandemic on September 16, 2021. Claims processors were instructed that:

- A medical opinion must be requested if service connection for the cause of death cannot be granted and the following apply:
 - COVID-19 (coronavirus disease) is listed as a primary or contributory cause of death, and

- the Veteran was service connected for one of the conditions listed on the [Centers for Disease Control and Prevention website](#) that are more likely to lead to severe illness from COVID-19.
- Medical opinions being requested that include COVID-19 as a primary or contributory cause of death must include a request for a contributory cause of death opinion. (M21-1 XII.i.1.B.1.h)

While few errors were found in reviewed claims processed after September 16, 2021, this serves as a general reminder to follow the guidance in M21-1 XII.i.1.B.1.h when COVID-19 is noted on the death certificate.

Medical Mileage

On June 9, 2022, the Internal Revenue Service issued [Announcement 2022-13](#), increasing the optional standard mileage rate from 58.5 cents per mile to 62.5 cents per mile effective July 1, 2022 through December 31, 2022. OFO released guidance on November 4, 2022 regarding the mid-year 2022 medical mileage reimbursement. The guidance also included a split-year calculator that should be used and uploaded to VBMS per [M21-1, IX.iii.1.G.4.a](#). The mileage change is also reflected in [M21-1, IX.iii.1.G.2.c](#).

A number of errors were found where the increased mileage rate was not used and the calculator was not loaded into VBMS. Please remind claims processors to use the updated mileage rates when appropriate and to upload the calculator to VBMS.

Agenda item: COVID-19 Policy Expiration

Presenter: Shannon Hunsicker,
Analyst

Target Audience:
QRT and Management

Discussion:

As a reminder, President Biden ended the COVID-19 National Emergency on April 10, 2023. This means the VBA's temporary claims and appeal processing guidance will end on June 9, 2023, which is 60 calendar days following the date the President ends the national emergency. The policies in [PL 20-02](#) will no longer apply starting June 10, 2023.

VBA is currently revising policies and guidelines to remove COVID-19 references. Once complete, notification with updated instructions will be sent to the field.

Agenda item: Field Inquiries

Presenter: Shannon Hunsicker,
Analyst

Target Audience:
QRT and Management

Discussion:

Philadelphia PMC Inquiry:

- 1) The Philadelphia PMC is requesting that P&F share any FIT inquiries/responses submitted by one PMC with all three PMCs. It could help with consistency and potential error avoidance.

P&F Service Response: FIT was designed to only respond to the author of the inquiry. P&F Service is researching ways to share responses with multiple recipients when warranted.

Milwaukee PMC Inquiries:

- 1) Manual Update – [M21-1 IX.iii.1.H.3.e](#). Report of Death and Due Process: The Milwaukee PMC has a question regarding the update to the manual and the implementation of [M21-1 IX.iii.1.H.3.e](#). Report of Death and Due Process, containing the guidance to use the override function in VBMS. Previously, the Milwaukee PMC processed the award as normal with accurate information using the “Revert to last auth” function. Using the override function could cause confusion when someone does an accrued award. Please clarify the reason for the implementation of the override function for this scenario and whether we should be using this instead of using the “revert to last auth” function. If we should be using the override command as referenced, please give specific instructions on using the override command in VBMS-A.

P&F Service Response: Using the system command Revert to Last Auth Award will normally revert VBMS-Awards back to its previous stored information prior to the proposed reduction, however, when the claim label PMC - Pension Cola Due Process is established for the EP 600, a sample size of cases that were tested returned inaccurate overpayments by erroneously adjusting date lines in the VBMS-A Financial Decision screen. This required remediation. [M21-1 Part IX, Subpart iii, 1.H.3.e](#) was created to ensure that an overpayment is not erroneously created when new financial information was recorded under an EP 600 that would impact promulgation of the notice of death award stop, and final action is not yet warranted for the EP 600. The VBMS-Awards override page, or, Generate Award Override (GAO), does not result in any technical glitches for this claim label, and therefore, our procedural guidance must recommend this as a viable route. Instructions for using this page can be found in the VBMS-Awards User Guide. P&F Service is reviewing the pertinent M21-1 changes. Note: If a manual change is implemented, you will be notified via the Compensation Service Calendar email blast. To subscribe to this email blast, visit the Calendar Subscriptions website.

Please note, this inquiry was also received from the field (Milwaukee PMC) as a FIT inquiry and the above response was sent on May 11, 2023.

- 2) Manual Update [M21-1 X.iv.1.A.1.n](#). (from February 2023): We are hoping to get clarification on the February 2023 updated to [M21-1 X.iv.1.A.1.n](#). (Providing Decision Notice of the COD Determination). The manual reference previously stated that if the unfavorable COD admin decision allowed Chapter 17 VA medical treatment for any SC disabilities, then we should send the Veteran a VA Form 21-526EZ. As currently written, we are not allowed to invite a claim for comp benefits when the COD admin decision was made in connection with a claim for benefits. The updated COD TMS 4638210 indicates similar information.

If the Veteran only applied for pension, should we not send the Veteran a 526EZ as the references seems to indicate? The manual reference states “Do not invite the claimant to file another VA Form 21-526EZ” (by saying “another,” this seems to assume we’ve already received a 526EZ). Are we going to make a decision on whether the claimed conditions are SC for health care purposes if all we have is a 527EZ for pension? The reference doesn’t provide any kind of distinction between receipt of a compensation claim vs receipt of a pension claim, but rather lumps them together. The updated guidance is claimant centric if the Veteran applied for compensation. However, it’s not claimant centric if the Veteran applied for pension. The manual reference previously stated “enclose VA Form 21-526EZ, and invite the former service member to claim entitlement to SC for treatment purposes for any specific conditions believed to be related to service” which, presumably, should still apply if all we’re working is a pension claim. It appears the only time we can now send the Veteran a 526EZ is if the COD admin decision was not made in connection with a claim for benefits.

Please clarify if the PMCs should be soliciting for a 526EZ in situations where there is an unfavorable administrative decision regarding COD and the Veteran applied for pension.

P&F Service Response:

P&F Service recommends that the PMCs should still solicit for a VA Form 21-526EZ following an unfavorable Character of Discharge (COD) decision if the unfavorable COD decision was made in connection with a claim for pension benefits. However, this form should only be solicited if the unfavorable COD decision precludes eligibility to all benefits other than medical treatment under 38 U.S.C. Chapter 17. This allows the former service member to claim entitlement to service connection for treatment purposes of any specific conditions believed to be related to service. P&F Service is exploring clarification updates to the M21-1. Note: If a manual change is implemented, you will be notified via the Compensation Service Calendar email blast. To subscribe to this email blast, visit the Calendar Subscriptions website.

St. Paul PMC Inquiry

- 1) We request clarification of when to concede asbestos exposure, specifically how it applies to DIC claims. Asbestos is not a presumptive and, generally, a medical opinion would not be requested. However, Modified Examination Threshold for TERA Claims § 1168(a) directs that VA will provide an examination and medical opinion when:
 - the Veteran submits a claim for compensation, and
 - there is evidence of a disability, and
 - there is evidence of participation in a TERA, and
 - such evidence is not sufficient to establish service connection for the disability

The new statutory language in § 1168 modifies the existing § 5103A threshold in the above situations. As such, in scenarios where claims processors previously would not have requested an examination based on insufficient evidence and such claim would result in a denial, if such claim is related to a TERA, VA now is required to request an examination and medical opinion before deciding the claim.

P&F Service Response: We are currently working on this issue and will provide a response once it is finalized.

Closing Comments

P&F Quality Call Topics:

We will solicit for agenda topic(s) for each future Quality Call. If you have a specific topic suggestion, please feel free to email it to the Pension and Fiduciary (P&F) Quality mailbox at PFTNGQUALOVRST.VBACO@va.gov. For specific policy and procedures related topics, please send inquiries through the [P&F Service Field Inquiry Tool \(FIT\)](#).

Quality Call Bulletins

Quality Call Bulletins can be found within TMS along with call recordings. Once the monthly bulletin is finalized, information will be sent to the PMCs and Fiduciary Hubs which will include the TMS #.

The next Quality Call is tentatively scheduled for July 2023.