



PENSION AND FIDUCIARY

PMC VSR Advanced Core Course
Phase 5: Stages of a Claim
Part 1: Determine Eligibility

Lesson 5: Validate Power of Attorney (POA)

Lesson Plan

October 28, 2016

Version 1.0

Lesson 5: Validate Power of Attorney (POA)

Lesson Plan

Validate Power of Attorney (POA)

Lesson Overview

Topic	Description
Time Estimate:	1 hour
Purpose of the Lesson:	This lesson is part of the entry-level curriculum, Core Course for PMC VSRs. The purpose of this lesson is to prepare PMC VSRs to recognize indicators of a POA and verify the POA.
Prerequisite Training Requirements:	Prior to taking the Validate Power of Attorney (POA) lesson, the trainee must complete PMC VSR Core Course Phases 1–4, and Phase 5, Part 1, lessons 1–4. (Refer to the Master Course Map learning aid for a list of lessons.)
Target Audience:	This lesson is for entry level PMC VSRs.
Lesson References:	<ul style="list-style-type: none">• Master Course Map learning aid• VA Form 21-22 (Appointment of Veterans Service Organization as Claimant's Representative)• VA Form 21-22a (Appointment of Individual as Claimant's Representative)• M21-1 I.3.B.1.a. (A Claimant's Right to Representation)• M21-1 I.3.B.1.b (Notices That Must Be Provided to the Representative)• M21-1 III.ii.3.C.5.a (Required System Updates for Changes in POA Appointments)• M21-1 III.ii.3.C.5.b (Updating the POA in SHARE and VBMS)• M21-1 III.ii.3.C.6.c–f (National Organization POA Codes Listed Alphabetically—State Organization POA Codes Listed Numerically)• 38 CFR 3.103(a) (Procedural Due Process and Appellate Rights)• 38 CFR 14.630 (Authorization for a Particular Claim)

Lesson 5: Validate Power of Attorney (POA)

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Topic	Description
Knowledge Check:	Phase 5: Stages of a Claim, Part 1 (a): Initial Screening and Claim Establishment Knowledge Check
Technical Competencies:	<ul style="list-style-type: none"> • Program Benefits and Eligibility (PMC VSR) • Processing Claims (PMC VSR) • VBA Applications (PMC VSR)
Lesson Objectives:	Validate Power of Attorney (POA) <ul style="list-style-type: none"> • Define POA • Determine POA action required • Determine to grant one-time representation • Modify SHARE with correct POA information
What You Need:	<ul style="list-style-type: none"> • Lesson plan • Master Course Map learning aid • Slides • Projector • Access to VBA Intranet • Access to CPKM • Access to the SHARE to see the PIF Inquiry and BIRLS search screen <ul style="list-style-type: none"> ○ Sample of claimant screen showing POA information entered on the PIF Inquiry and BIRLS search ○ Sample of claimant screen without POA information entered on the PIF Inquiry and BIRLS search • Access to VBMS to see the forms with sample claimant files to include the following forms: <ul style="list-style-type: none"> ○ VA Form 21-22 (Appointment of Veterans Service Organization as Claimant's Representative) ○ VA Form 21-22a (Appointment of Individual as Claimant's Representative) • Claim 1 (pmc_vsr_case_8) Group activity for POA • Claim 2 (pmc_vsr_case_3) Group activity for POA

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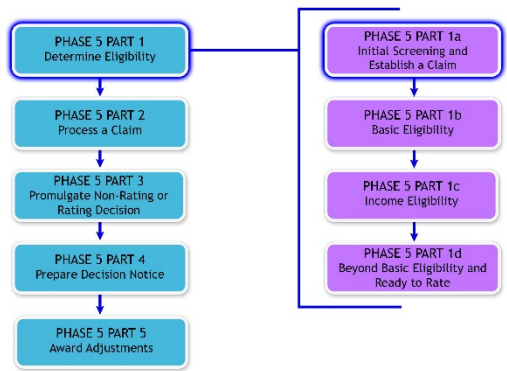


Topic	Description
	<ul style="list-style-type: none">• Claim 3 (pmc_vsr_case_2) Group activity for POA• Claim 4 (pmc_vsr_case_1) Practice exercise for POA• Claim 5 (pmc_vsr_case_7) Practice exercise for POA• Claim 6 (pmc_vsr_case_4) Practice exercise for POA

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Instructor Notes

This lesson provides trainees with the information and references to be able to determine whether POA information needs action or not. The lesson presents scenarios to allow the trainees to discuss and make determinations based on the information received related to POA.

PowerPoint Slides	Instructor Activities
<p>Validate Power of Attorney (POA)</p>	<p>DISPLAY slide</p> <p>1. "Validate Power of Attorney (POA)"</p> <p>INTRODUCE yourself as the instructor.</p> <p>INTRODUCE the lesson.</p>
<p>You Are Here</p>  <pre> graph TD P1[PHASE 5 PART 1 Determine Eligibility] --> P2[PHASE 5 PART 2 Process a Claim] P2 --> P3[PHASE 5 PART 3 Promulgate Non-Rating or Rating Decision] P3 --> P4[PHASE 5 PART 4 Prepare Decision Notice] P4 --> P5[PHASE 5 PART 5 Award Adjustments] P1a[PHASE 5 PART 1a Initial Screening and Establish a Claim] --> P1b[PHASE 5 PART 1b Basic Eligibility] P1b --> P1c[PHASE 5 PART 1c Income Eligibility] P1c --> P1d[PHASE 5 PART 1d Beyond Basic Eligibility and Ready to Rate] P1 --- P1a </pre>	<p>DISPLAY slide</p> <p>2. "You Are Here"</p>  <p>REFER to the Master Course Map learning aid in the Trainee Guide.</p> <p>DESCRIBE the diagram.</p> <p>EXPLAIN where the trainees are in the phase, what they have completed, and where they are headed next.</p> <p>INFORM trainees that Phase 5, Part 1a: Initial Screening and Establish a Claim contains five subparts.</p>  <p>EMPHASIZE that each of these lessons relate to each other as part of the initial screening process.</p>


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PowerPoint Slides	Instructor Activities
<p>Initial Screening</p> <ul style="list-style-type: none"> • Complete or Incomplete Applications for Benefits • Fully Developed Claims • Flash, Expedited (Priority), Previous, Dual or Reopened/New Claims • Date of Claim • Validate POA • End Product Codes • Introduction to Old Law and Section 306 Pension Programs 	<p>DISPLAY slide</p> <p>3. "Initial Screening"</p> <p>EXPLAIN to the trainees that during the initial screening process, the PMC VSR verifies whether the Claims Assistant has processed the initial screening correctly and evaluates other aspects of the claim.</p> <p>INFORM trainees that this lesson will focus on validating a POA for a claim.</p> <p>REMINDE trainees that they have learned how to perform the following parts of the initial screening:</p> <ul style="list-style-type: none"> • Determine whether the application for benefits is complete or incomplete. • Determine if a claim can be processed as an FDC. • Confirm special claim types. • Confirm date of claim is correct.
<p>Icebreaker Activity (1 of 2)</p> <ul style="list-style-type: none"> • Instructions: <ul style="list-style-type: none"> ○ Read the scenario on the next slide. ○ Use the OGC Accreditation Search Page to determine attorney POA code from M21-1 I.3.A.2.a. (Requirements to Represent Claimants). ○ Write down your answer. • Time allowed: 5–7 minutes 	<p>DISPLAY slide</p> <p>4. "Icebreaker Activity (1 of 2)"</p> <div style="text-align: center;">  </div> <p>ASK what is accreditation?</p> <ul style="list-style-type: none"> • <i>Recognition from VA's Office of General Counsel in order to represent claimants M21-1 I.3.A.2.a (Requirements to Represent Claimants)</i> <div style="text-align: center;">  </div> <p>REFER to M21-1 I.3.A.2.a (Requirements to Represent Claimants) to access the OGC Accreditation Search Page.</p>

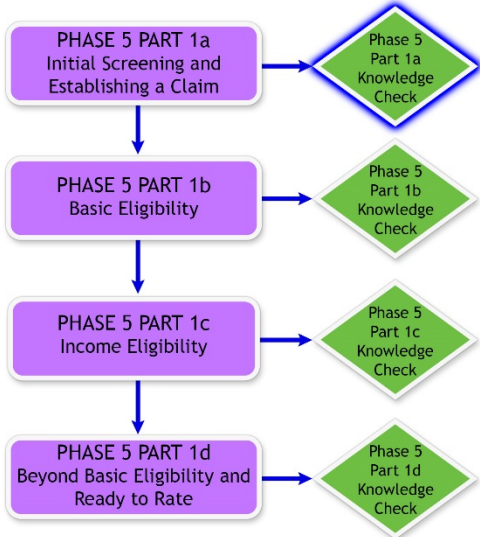

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PowerPoint Slides	Instructor Activities
<p>Icebreaker Activity (2 of 2)</p> <p>Scenario:</p> <p>VA received an initial application for Veteran Nate Barcalow on October 22, 2014, requesting non-service connected pension. A VA Form 21-22 (Appointment of Veterans Service Organization As Claimant's Representative) was received with the claim requesting Jarvis Abbott of American Legion Veteran Service Organization as the POA.</p>	<p>DISPLAY slide</p> <p>5. "Icebreaker Activity (2 of 2)"</p> <p>READ the scenario or ask a volunteer to read it aloud.</p> <p></p> <p>ASK trainees to determine if the POA is accredited and if it is, give the accreditation number.</p> <p>PROVIDE the correct answers.</p> <ol style="list-style-type: none"> 1. Is Jarvis Abbott accredited? <ul style="list-style-type: none"> o Yes 2. What is American Legion's POA number? <ul style="list-style-type: none"> o <i>074 is the correct national code for ALG (CPKM)</i> <p>EXPLAIN the importance of determining whether a claimant's representative is accredited and verifying their POA code.</p> <ul style="list-style-type: none"> • Ensures appropriate representative is notified with any decision and/or development request. • Claimants have the right to responsible, qualified representation to assist in preparation, presentation, and prosecution of claims for VA benefits. M21-1 I.3.B.1.b (Notices That Must Be Provided to the Representative).
<p>Technical Competencies</p> <ul style="list-style-type: none"> • Program Benefits and Eligibility (PMC VSR) • Processing Claims (PMC VSR) • VBA Applications (PMC VSR) 	<p>DISPLAY slide</p> <p>6. "Technical Competencies"</p> <p>EXPLAIN that this lesson prepares trainees for the program benefits and eligibility, processing claims, and VBA applications competencies.</p>





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PowerPoint Slides	Instructor Activities
<p>Objectives</p> <p>Validate Power Of Attorney (POA).</p> <ul style="list-style-type: none"> • Define POA. • Determine POA action required. • Determine to grant one-time representation. • Modify SHARE with correct POA information. 	<p>DISPLAY slide</p> <p>7. "Objectives"</p> <p>PRESENT the objectives for the lesson.</p>
<p>Knowledge Check</p> 	<p>DISPLAY slide</p> <p>8. "Knowledge Check"</p> <p>INFORM the trainees that they will be assessed on this content in the Phase 5: Stages of a Claim, Part 1a: Initial Screening and Claim Establishment Knowledge Check. The Knowledge Check will be given after Phase 5, Part 1, Lesson 8.</p>  <p>REFER to the Master Course Map learning aid, <i>Lessons by Phase</i> section, to review the lessons included within the Knowledge Check.</p>



Lesson 5: Validate Power of Attorney (POA)

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PowerPoint Slides	Instructor Activities
<p>What Is a POA?</p> <ul style="list-style-type: none">• M21-1 I.3.B.1.a (A Claimant's Right to Representation)• M21-1 III.ii.3.C.6.c – f (National Organization POA Codes Listed Alphabetically— State Organization POA Codes Listed Numerically)	<p>DISPLAY slide</p> <p>9. "What Is a POA?"</p> <p>DISCUSS the role and responsibilities of a POA. Initiate the discussion by asking trainees the following questions:</p> <ol style="list-style-type: none">1. Has anyone had an experience with a POA?2. What are the responsibilities of a POA? <p></p> <p>REFER to M21-1 I.3.B.1.a. and ask a volunteer to read it aloud and summarize the passage in his or her own words.</p> <p></p> <p>REFER to M21-1 III.ii.3.C.6.c-f and randomly read the names of national and state organizations listed.</p> <p></p> <p>ASK trainees to locate and call out the POA code and/or organization name for the following:</p> <ol style="list-style-type: none">1. Vietnam Veterans of America<ul style="list-style-type: none">○ 0702. POA code 085<ul style="list-style-type: none">○ <i>Fleet Reserve Association</i> <p></p> <p>EMPHASIZE that the POA codes list with the National and State organizations in this reference are unique identifiers that will be used VBA systems.</p>


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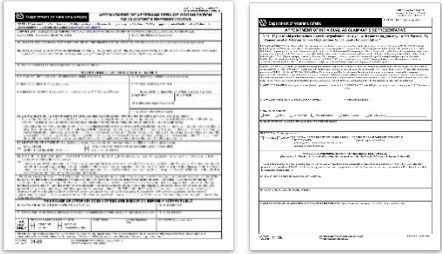


PowerPoint Slides	Instructor Activities
<p>Types of POAs</p> <ul style="list-style-type: none">• Accredited<ul style="list-style-type: none">○ Service Organization Representative○ Claims Agent○ Attorney• Non-licensed<ul style="list-style-type: none">○ Any individual○ M21-1 I.3.A.2.a (Requirements to Represent Claimants)○ 38 CFR 14.630 (Authorization for a particular claim)	<p>DISPLAY slide 10. "Types of POAs"</p> <p>DISCUSS the different types of POAs. Initiate the discussion by asking if anyone knows the difference between accredited and non-licensed.</p> <p>USE your personal experience or the following questions to guide the discussion.</p> <ol style="list-style-type: none">1. What is an accredited attorney?<ul style="list-style-type: none">○ <i>An attorney who received recognition from VA's Office of General Counsel (OGC) in order to represent claimants</i>2. What is a Veteran Service Organization?<ul style="list-style-type: none">○ <i>Private non-profit group that advocates on behalf of Veterans</i>3. What is a claims agent?<ul style="list-style-type: none">○ <i>A type of accredited POA</i>4. What is a non-licensed individual?<ul style="list-style-type: none">○ <i>Anyone who is listed on VA Form 21-22a and who has not been recognized by VA's OGC as accredited</i> <p></p> <p>EMPHASIZE that an individual or organization who has not formally completed the application process with VA for accreditation is considered non-licensed and will be granted one-time representation. A one-time grant representation notification letter will be sent to the claimant and representative. Notification letters will be covered in a later lesson.</p> <p></p> <p>REFER to M21-1 I.3.A.2.a and 38 CFR 14.630 and give trainees five minutes to read the sections.</p>

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PowerPoint Slides	Instructor Activities
	<p>Select a volunteer to summarize in his or her own words.</p>  <p>ASK volunteers to describe the difference between an accredited attorney and a non-licensed attorney. Ensure understanding of the difference.</p>

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PowerPoint Slides	Instructor Activities
<p data-bbox="155 296 586 327">VA Forms for POA (1 of 2)</p> <div data-bbox="175 352 613 604"></div>	<p data-bbox="699 296 927 327">DISPLAY slide</p> <p data-bbox="699 338 1175 369">11. "VA Forms for POA (1 of 2)"</p> <p data-bbox="699 390 1377 464">EXPLAIN that you are going to introduce the forms used by VBA for POA recognition.</p> <div data-bbox="699 485 797 590"></div> <p data-bbox="699 611 1458 768">USE the VA Form 21-22 (Appointment of Veterans Service Organization as Claimant's Representative) from the Nate Barcalow icebreaker scenario as an example.</p> <p data-bbox="699 789 1425 905">REFER to the VBA Intranet to pull up a blank VA Form 21-22a (Appointment of Individual as Claimant's Representative.)</p> <p data-bbox="699 926 1468 1041">DESCRIBE the differences between the forms and in your own words provide background info on each form. Use the following to guide your descriptions:</p> <ul data-bbox="699 1062 1458 1314" style="list-style-type: none">• VA Form 21-22 is used for recognized service organizations for appointment as an ongoing POA.• VA Form 21-22a is used for a non-licensed individual who is representing a claimant as the POA for a particular claim only. <div data-bbox="699 1335 797 1440"></div> <p data-bbox="699 1451 1458 1566">EMPHASIZE that sometimes they will have to check the form version to ensure that the most up-to-date form was used.</p>

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Department of Veterans Affairs		APPOINTMENT OF VETERANS SERVICE ORGANIZATION AS CLAIMANT'S REPRESENTATIVE	
OMB Control No. 2900-0321 Respondent Burden: 5 minutes			
NOTE - If you would prefer to have an individual assist you with your claim, you may use VA Form 21-22a, "Appointment of Individual as Claimant's Representative." VA Forms are available at www.va.gov/vaforms .			
IMPORTANT - PLEASE READ THE PRIVACY ACT AND RESPONDENT BURDEN ON REVERSE BEFORE COMPLETING THE FORM.			
1. LAST-FIRST-MIDDLE NAME OF VETERAN		2. VA FILE NUMBER (include prefix)	
3A. NAME OF SERVICE ORGANIZATION RECOGNIZED BY THE DEPARTMENT OF VETERANS AFFAIRS (See list on reverse side before selecting organization)			
3B. NAME AND JOB TITLE OF OFFICIAL REPRESENTATIVE ACTING ON BEHALF OF THE ORGANIZATION NAMED IN ITEM 3A (This is an appointment of the entire organization and does not indicate the designation of only this specific individual to act on behalf of the organization)			
3C. E-MAIL ADDRESS OF THE ORGANIZATION NAMED IN ITEM 3A			
INSTRUCTIONS - TYPE OR PRINT ALL ENTRIES			
4. SOCIAL SECURITY NUMBER (OR SERVICE NUMBER, IF NO SSN)		5. INSURANCE NUMBER(S) (include letter prefix)	
6. NAME OF CLAIMANT (If other than veteran)		7. RELATIONSHIP TO VETERAN	
8. ADDRESS OF CLAIMANT (No. and street or rural route, city or P.O., State and ZIP Code)		9. CLAIMANT'S TELEPHONE NUMBERS (include Area Code)	
		A. DAYTIME	B. EVENING
		10. E-MAIL ADDRESS (If applicable)	
		11. DATE OF THIS APPOINTMENT	
12. AUTHORIZATION FOR REPRESENTATIVE'S ACCESS TO RECORDS PROTECTED BY SECTION 7332, TITLE 38, U.S.C. By checking the box below I authorize VA to disclose to the service organization named on this appointment form any records that may be in my file relating to treatment for drug abuse, alcoholism or alcohol abuse, infection with the human immunodeficiency virus (HIV), or sickle cell anemia.			
<input type="checkbox"/> I authorize the VA facility having custody of my VA claimant records to disclose to the service organization named in Item 3A all treatment records relating to drug abuse, alcoholism or alcohol abuse, infection with the human immunodeficiency virus (HIV), or sickle cell anemia. Redisclosure of these records by my service organization representative, other than to VA or the Court of Appeals for Veterans Claims, is not authorized without my further written consent. This authorization will remain in effect until the earlier of the following events: (1) I revoke this authorization by filing a written revocation with VA; or (2) I revoke the appointment of the service organization named above, either by explicit revocation or the appointment of another representative.			
13. LIMITATION OF CONSENT - I authorize disclosure of records related to treatment for all conditions listed in Item 12 except:			
<input type="checkbox"/> DRUG ABUSE <input type="checkbox"/> ALCOHOLISM OR ALCOHOL ABUSE		<input type="checkbox"/> INFECTION WITH THE HUMAN IMMUNODEFICIENCY VIRUS (HIV) <input type="checkbox"/> SICKLE CELL ANEMIA	
14. AUTHORIZATION TO CHANGE CLAIMANT'S ADDRESS - By checking the box below, I authorize the organization named in Item 3A to act on my behalf to change my address in my VA records.			
<input type="checkbox"/> I authorize any official representative of the organization named in Item 3A to act on my behalf to change my address in my VA records. This authorization does not extend to any other organization without my further written consent. This authorization will remain in effect until the earlier of the following events: (1) I file a written revocation with VA; or (2) I appoint another representative, or (3) I have been determined unable to manage my financial affairs and the individual or organization named in Item 3A is not my appointed fiduciary.			
I, the claimant named in Items 1 or 6, hereby appoint the service organization named in Item 3A as my representative to prepare, present and prosecute my claim(s) for any and all benefits from the Department of Veterans Affairs (VA) based on the service of the veteran named in Item 1. I authorize VA to release any and all of my records, to include disclosure of my Federal tax information (other than as provided in Items 12 and 13), to my appointed service organization. I understand that my appointed representative will not charge any fee or compensation for service rendered pursuant to this appointment. I understand that the service organization I have appointed as my representative may revoke this appointment at any time, subject to 38 CFR 20.608. Additionally, in some cases a veteran's income is developed because a match with the Internal Revenue Service necessitated income verification. In such cases, the assignment of the service organization as the veteran's representative is valid for only five years from the date the claimant signs this form for purposes restricted to the verification match. Signed and accepted subject to the foregoing conditions.			
THIS POWER OF ATTORNEY DOES NOT REQUIRE EXECUTION BEFORE A NOTARY PUBLIC			
15. SIGNATURE OF VETERAN OR CLAIMANT (Do Not Print)		16. DATE SIGNED	
17. SIGNATURE OF VETERANS SERVICE ORGANIZATION REPRESENTATIVE NAMED IN ITEM 3B (Do Not Print)		18. DATE SIGNED	
VA USE ONLY	COPY OF VA FORM 21-22 SENT TO: <input type="checkbox"/> VR&E FILE <input type="checkbox"/> EDU FILE <input type="checkbox"/> LG FILE <input type="checkbox"/> INSURANCE FILE		DATE SENT
			ACKNOWLEDGED (Date)
		REVOKED (Reason and date)	
NOTE: As long as this appointment is in effect, the organization named herein will be recognized as the sole representative for preparation, presentation and prosecution of your claim before the Department of Veterans Affairs in connection with your claim or any portion thereof.			
VA FORM OCT 2014 21-22		SUPERSEDES VA FORM 21-22, JUN 2014, WHICH WILL NOT BE USED.	

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OMB Control No. 2900-0321
Respondent Burden: 5 Minutes
Expiration Date: 08/31/2018




Department of Veterans Affairs		1. VA FILE NO(S) <i>(Include prefix)</i>
APPOINTMENT OF INDIVIDUAL AS CLAIMANT'S REPRESENTATIVE		
Note - If you would prefer to have a service organization assist you with your claim, you may use VA Form 21-22, "Appointment of Veterans Service Organization As Claimant's Representative."		
<p>PRIVACY ACT NOTICE: VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., civil or criminal law enforcement, congressional communications, epidemiological or research studies, the collection of money owed to the United States, litigation in which the United States is a party or has an interest, the administration of VA programs and delivery of VA benefits, verification of identity and status, and personnel administration) as identified in the VA system of records, 58VA21/22/28, Compensation, Pension, Education, and Vocational Rehabilitation and Employment Records-VA, published in the Federal Register. Your obligation to respond is voluntary. However, failure to respond provide the requested information could impede the recognition of your representative and/or identification of disclosable records. Except for information protected by 38 U.S.C. 7332, your representative is not prohibited from redisclosing records. The responses you submit are considered confidential (38 U.S.C. 5701). Information submitted is subject to verification through computer matching programs with other agencies.</p>		
<p>RESPONDENT BURDEN: We need this information to recognize the individuals appointed by claimants to act on their behalf in the preparation, presentation, and prosecution of claims for VA benefits (38 U.S.C. 5902, 5903, and 5904) and for those individuals to accept appointment. We will also use the information to verify consent for disclosure of VA records to the appointed representative (38 U.S.C. 5701(b) and 7332) Title 38, United States Code, allows us to ask for this information. We estimate that claimants and individuals appointed for purposes of representation will each need an average of 5 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. A Valid OMB control number can be located on the OMB Internet Page at www.reginfo.gov/public/da/PRAMain. If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.</p>		
2. NAME OF CLAIMANT <i>(Veteran, guardian, beneficiary, dependent, or next of kin)</i>	3. ADDRESS OF CLAIMANT <i>(No. and street or rural route, city or P.O., State and ZIP Code)</i>	
4. LAST NAME - FIRST NAME - MIDDLE NAME OF VETERAN	5. SERVICE NUMBERS	
<p>8. BRANCH OF SERVICE</p> <p><input type="checkbox"/> ARMY <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> OTHER <i>(Specify _____)</i></p>		
7A. NAME OF INDIVIDUAL APPOINTED AS CLAIMANT'S REPRESENTATIVE		
<p>7B. INDIVIDUAL IS <i>(check appropriate box)</i></p> <p><input type="checkbox"/> ATTORNEY <input type="checkbox"/> AGENT <input type="checkbox"/> INDIVIDUAL PROVIDING REPRESENTATION UNDER SECTION 14.630 <input type="checkbox"/> SERVICE ORGANIZATION REPRESENTATIVE</p> <p><i>(*See required statement below. Signatures are required in Items 7C and 7D)</i></p> <p style="text-align: right;">_____</p>		
<p>"INDIVIDUALS PROVIDING REPRESENTATION UNDER SECTION 14.630" (Skip to Item 8, if the box for "Individual Providing Representation Under Section 14.630" was not checked in Item 7B)</p> <p>The appointment of the individual named in Item 7A (the representative) authorizes the individual to represent the claimant named in Item 2 for a particular claim pursuant to the provisions of 38 CFR 14.630. By our signatures below, we, the representative and the claimant, attest that no compensation will be charged or paid for the individual named in Item 7A.</p>		
7C. SIGNATURE OF REPRESENTATIVE NAMED IN ITEM 7A		
7D. SIGNATURE OF CLAIMANT NAMED IN ITEM 2		
8. ADDRESS OF INDIVIDUAL APPOINTED AS CLAIMANT'S REPRESENTATIVE <i>(No. and street or rural route, city or P.O., State, and ZIP code)</i>		

VA FORM
AUG 2015 **21-22a**

SUPERSEDES VA FORM 21-22a, JUN 2009,
WHICH WILL NOT BE USED.

(Continued on Reverse)

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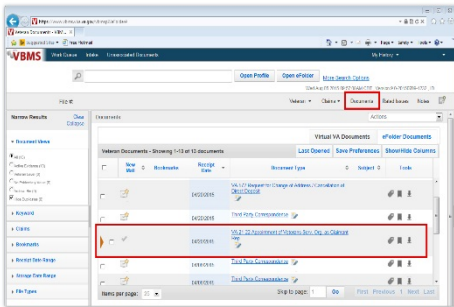
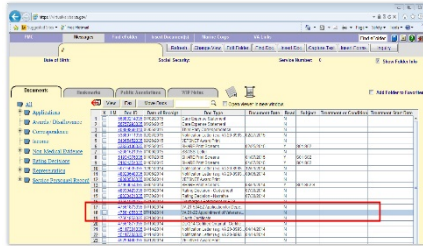
PowerPoint Slides	Instructor Activities
<p>VA Forms for POA (2 of 2)</p>  <ul style="list-style-type: none">• Ensure the form is complete and signed by the claimant and POA.• Check for authorization to access the protected record (38 CFR 7332).• Check for authorization to change the claimant's address.	<p>DISPLAY slide 12. "VA Forms for POA (2 of 2)"</p>  <p>DEMONSTRATE where to find completed VA Form 21-22 and VA Form 21-22a in eFolder.</p> <p>DISCUSS each section on the form.</p> <ul style="list-style-type: none">• Ensure the form is complete and signed by the claimant and POA.• Check for authorization to access the protected record (38 CFR 7332).• Check for authorization to change the claimant's address.  <p>EMPHASIZE that for the representative to be able to view the Veteran's records in the eFolder, the Authorization for Representative's Access to Records Protected by Section 7332, Title 38 U.S.C. (item number 12 on VA Form 21-22 or item number 9 on VA Form 21-22a) must be checked.</p>

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PowerPoint Slides

Current POA Status in SHARE



Instructor Activities

DISPLAY slide

13. "Current POA Status in SHARE"

EXPLAIN that not every claim for benefits arrives with a VBA Form 21-22 or VA Form 21-22a. The PMC VSR is responsible for checking the claimant's electronic records for an existing POA. The PMC VSR may have to search the claimant's electronic records to determine if a POA had been appointed previously. Also, confirm whether a new form has been submitted within the past two years.

TELL trainees to take note of the "Veteran" drop-down box. This is necessary for VSOs to view a VBMS file if they are the designated POA.

EXPLAIN the 48-hour rule, which states that POAs only have 48 hours to review a Rating Decision (I.3.B.3.a).



ASK where can you find the status of the POA in VBA applications?

EXPLAIN that the POA status is found in the following locations in SHARE.

- BIRLS search records
- PIF Inquiry



DEMONSTRATE how to locate the POA in SHARE, BIRLS search and PIF inquiry screens.



EMPHASIZE that if the POA fields are blank or indicate None, then there is no POA assigned.

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The screenshot shows the Virtual VA interface with a list of documents. The following table represents the data visible in the document list:

Doc ID	Date of Receipt	Doc Type	Document Date	Read	Subject	Treatment or Condition	Treatment Start Date
56883214335	07/02/2015	Care Expense Statement		N			
56757293335	06/26/2015	Care Expense Statement		N			
70989869310	06/05/2015	Third Party Correspondence		N			
53880711335	02/27/2015	Notification Letter (e.g. VA 20-8993...	02/27/2015	N			
54065452335	02/26/2015	VETSNET Award Print		N			
53836100335	02/25/2015	SHARE Print Screens	02/25/2015	Y	S01 S02		
52081621335	01/09/2015	SSA/SSI Letter		N			
51934376335	01/07/2015	SHARE Print Screens	01/07/2015	Y	S01 S02		
51934354335	01/07/2015	SHARE Print Screens	01/07/2015	Y	S01 S02		
50775035335	12/01/2014	Notification Letter (e.g. VA 20-8993...	12/01/2014	N			
48028648335	08/06/2014	Notification Letter (e.g. VA 20-8993...	08/06/2014	N			
48093533335	08/05/2014	VETSNET Award Print		N			
47950054335	08/01/2014	SHARE Print Screens	08/01/2014	Y	S01 S02 S...		
48030423335	07/30/2014	Rating Decision - Codesheet	07/30/2014	N			
48030421335	07/30/2014	Rating Decision - Narrative	07/30/2014	N			
47651094335	07/30/2014	Discharge / Retirement of CTC		N			
47561873335	07/10/2014	VA 21-534EZ Application for Depe...		N			
47561855335	07/10/2014	VA 21-22 Appointment of Veterans...		N			
47561853335	07/10/2014	Death Certificate		N			
47561877335	07/10/2014	DD 214 Certified Original - Certific...		N			
45117331335	04/14/2014	Notification Letter (e.g. VA 20-8993...	04/14/2014	N			
45117333335	04/14/2014	Notification Letter (e.g. VA 20-8993...	04/14/2014	N			
45290480335	04/12/2014	VETSNET Award Print		N			

The screenshot shows the Virtual VA interface with a list of documents. The following table represents the data visible in the document list:

Receipt Date	Document Type	Subject
04/20/2015	VA 572 Request for Change of Address / Cancellation of Direct Deposit	
04/20/2015	Third Party Correspondence	
04/20/2015	VA 21-22 Appointment of Veterans Serv. Org. as Claimant Rep	
04/08/2015	Third Party Correspondence	
04/08/2015	Third Party Correspondence	

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PowerPoint Slides	Instructor Activities
<p>Group Activity—POA</p> <ul style="list-style-type: none">• Instructions:<ul style="list-style-type: none">○ Divide into groups of two or three.○ Each group will receive claim information.<ul style="list-style-type: none">▪ Group 1: Claim 1▪ Group 2: Claim 2▪ Group 3: Claim 3○ Determine whether the POA information on the VA Form 21-22 or 21-22a matches the record in SHARE.○ Use the OGC Accreditation website to confirm individual and/or organization accreditation.• Time allowed: 10–12 minutes	<p>DISPLAY slide 14. “Group Activity—POA”</p> <p>DIVIDE trainees into three groups.</p> <p>ASSIGN each group an example claim:</p> <ul style="list-style-type: none">• Group 1: Claim 1• Group 2: Claim 2• Group 3: Claim 3 <p>DIRECT trainees to consult with group members to determine whether the POA information on the VA Form 21-22 or 21-22a matches the record in SHARE.</p> <p>GIVE groups 10–12 minutes to discuss and record their answers.</p> <p>DISCUSS each group’s answers. For each group’s answers, give feedback supported with examples or references. Use the following questions to guide the discussion:</p> <ul style="list-style-type: none">• Did anyone have difficulties determining if the POA information matched?• Did anyone have to look up to two years back to find the VA Form?• Has anyone determined that the VA Form and VBA application does not match?

Group Activity—POA Worksheet

1. Does the form have POA information?
 - *Answers provided by instructor based on example claims used.*
2. Is the POA VA accredited? If so, what is the accreditation number?
 - *Answers provided by instructor based on example claims used.*

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3. Did the information on the VA Form match that of the electronic record in SHARE?
- o *Answers provided by instructor based on example claims used.*

PowerPoint Slides	Instructor Activities
<p>Example of POA Not Matching Scenario:</p> <p>We received an initial application for Veteran Nate Barcalow on October 22, 2014, requesting non-service connected pension. A VA Form 21-22 (Appointment of Veterans Service Organization as Claimant's Representative) was received with the claim requesting Jarvis Abbott of American Legion Veteran Service Organization as the POA.</p> <p>The PMC VSR working the claim noticed that the POA information in SHARE was Kim Vanderpool.</p>	<p>DISPLAY slide 15. "Example of POA Not Matching"</p> <p>READ the scenario.</p> <p>DISCUSS the scenario. Use the following questions to guide your experience:</p> <ul style="list-style-type: none">• What is the name of the attorney on the VA Form 21-22 (Appointment of Veterans Service Organization as Claimant's Representative)?<ul style="list-style-type: none">o <i>Jarvis Abbott</i>• What would you do next?<ul style="list-style-type: none">o <i>If the attorney is accredited, update SHARE with the most current POA information from the VA Form 21-22 (Appointment of Veterans Service Organization as Claimant's Representative).</i> <p>EXPLAIN that SHARE would need to be updated to match the current requested POA on the VA Form 21-22 (Appointment of Veterans Service Organization as Claimant's Representative).</p>


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PowerPoint Slides	Instructor Activities
<p>Update POA Information in SHARE</p> <ul style="list-style-type: none">• When a claimant appoints a new representative or revokes a current representative, update SHARE.• Use the steps in M21-1 III.ii.3.C.5.b (Updating the POA in SHARE and VBMS).	<p>DISPLAY slide 16. "Update POA Information in SHARE"</p> <p></p> <p>ASK what do you do when the POA information does not match?</p> <ul style="list-style-type: none">◦ <i>Update the POA information in SHARE.</i> <p>RECALL the scenario in the icebreaker activity. We found that the representative listed on the form did not match the POA listed in SHARE.</p> <p></p> <p>REFER to M21-1 III.ii.3.C.5.b and have two of the trainees take turns reading the steps in the table.</p> <p>DEMONSTRATE updating the POA information in SHARE.</p> <p></p> <p>EMPHASIZE that SHARE automatically updates all other VBA applications. If, for example, MAP-D was updated with new POA information, the new POA will not automatically update in SHARE.</p> <p></p> <p>ASK if they have any questions before moving on.</p>



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Lesson Plan

PowerPoint Slides	Instructor Activities
<p>Group Activity—Practice Exercise</p> <ul style="list-style-type: none"> • Instructions: <ul style="list-style-type: none"> ○ Divide into groups of three. ○ Each group will receive a claim information. <ul style="list-style-type: none"> ▪ Group 1: Claim 4 ▪ Group 2: Claim 5 ▪ Group 3: Claim 6 ○ Use the OGC Accreditation website to confirm individual and/or organization accreditation. ○ Update SHARE, if needed by following steps located in M21-1 III.ii.3.C.5.a—b (Required System Updates for Changes in POA Appointments—Updating the POA in SHARE and VBMS). • Time allowed: 10–15 minutes 	<p>DISPLAY slide 17. “Practice Exercise—POA Match”</p> <p>DIVIDE trainees into groups of three.</p>  <p>REFER trainees to Claim 4, 5, and 6. Assign each group a claim as follows:</p> <ul style="list-style-type: none"> • Group 1: Claim 4 • Group 2: Claim 5 • Group 3: Claim 6 <p>DIRECT trainees to consult with group members to determine whether the POA information on the VA Form 21-22 or 21-22a matches the VBA applications. If POA information does not match, have trainees update SHARE with the correct information.</p> <p>GIVE groups 10–12 minutes to discuss and record their answers.</p> <p>DISCUSS each group’s answers. For each group’s answers, give feedback supported with examples or references.</p>
<p>Lesson Summary</p> <ul style="list-style-type: none"> • What is a POA? • How do you determine if POA action is required? • How do you determine if one-time representation can be granted? • How do you modify POA information in VBA applications if the VA form and VBA applications do not match? 	<p>DISPLAY slide 18. “Lesson Summary”</p> <p>REVIEW the key points of the lesson with a guided discussion using the following questions:</p> <ul style="list-style-type: none"> • What is a POA? • How do you determine if POA action is required? • How do you determine if one-time representation can be granted? • How do you modify POA information in VBA applications if the VA form and VBA applications do not match?

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PowerPoint Slides	Instructor Activities
<p>Questions</p> 	<p>DISPLAY slide 19. "Questions"</p>  <p>ASK trainees if they have any questions or concerns about validating a Power of Attorney (POA). Use this time to clear up any confusion or misconceptions about the information presented.</p>
<p>What's Next?</p> <p>Phase 5: Stages of a Claim, Part 1: Determine Eligibility, Lesson 6: End Product (EP) Codes</p>	<p>DISPLAY slide 20. "What's Next?"</p> <p>EXPLAIN the upcoming Phase 5, Part 1, Lesson 6: End Product (EP) Codes lesson with trainees.</p>