#### Department of Veterans Affairs M21-1MR, Part III, Subpart i

**Veterans Benefits Administration October 26, 2011**

**Washington, DC 20420**

#### Transmittal Sheet

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| Changes Included in This Revision | Significant revisions were made to M21-1MR, Part III, “General Claims Process,” Subpart i, “Overview of Claims Processing and Structure of the Veterans Service Center,” Chapter 2, sections A and B (III.i.2.A and B) in order to incorporate the content of* fast letters (FLs) 08-20, 08-21, 09-31, 10-29, and
* M21-1MR, Part III, Subpart ii, 2.B.8.d, e, f, and g.

Section, chapter, and topic headings were also changed, where necessary, to reflect the new content.III.i.2.B was changed in its entirety. The table below describes the specific changes made to III.i.2.A.***Notes***: * M21-1MR will retain some information related to the Benefits Delivery Network (BDN) until it is no longer operational, since the Veterans Service Network (VETSNET) does not yet permit processing of all types of benefit transactions.  For information on VETSNET applications and input, consult the [VETSNET User Guides](http://vbaw.vba.va.gov/bl/21/Systems/awards.htm) on the Compensation Service Intranet.
* The term regional office (RO) also includes pension management center (PMC), where appropriate.
* The term Veterans Service Center Manager (VSCM) also includes Pension Management Center Manager (PMCM), where appropriate.
* Minor editorial changes have also been made to
* update incorrect or obsolete hyperlink references
* update the term “veteran” to “Veteran”
* update the term “VCAA notice” to “section 5103 notice”
* update obsolete terminology, where appropriate
* clarify block labels and/or block text, and
* bring the documents into conformance with M21-1MR standards.
* The responsibilities of intake sites, ROs, and Integrated Disability Evaluation System (IDES) rating activity sites, in handling IDES claims, is not included in this change. Compensation Service’s Procedures Staff will add this information to the appropriate chapter of this Subpart upon release of an FL announcing the nationwide rollout of this pre-discharge program.
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|  (continued) | Claims received after a BDD rating activity site (RAS) processes a pre-discharge claim in a paperless environment are *not* considered pre-discharge claims. Accordingly, the instructions for handling such claims are not included in this change. Compensation Service’s Procedures Staff will add this information, which is currently contained in FL 08-21, to the appropriate location within M21-1MR in a subsequent change. |

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| Reason(s) for the Change | Citation | Page(s) |
| * Consolidated the first and second topics within Section A.
* Replaced “OEF/OIF” (Operation Enduring Freedom/Operation Iraqi Freedom) with “GWOT” (Global War on Terror).
* Replaced “non-BDD” with “Quick Start,” wherever appropriate.
 | III.i.2.A.1 and 2 | 2-A-1 through 2-A-7 |
| Removed erroneous sentences regarding BDD claims.  | III.i.2.A.1.a | 2-A-2 |
| Reworded to be consistent with FLs 08-20 and 09-31. | III.i.2.A.1.b | 2-A-2 |
| Added a block that provides the basic criteria for filing a pre-discharge claim, as set forth in FLs 08-20 and 09-31. | III.i.2.A.1.c | 2-A-3 |
| * Reworded to align with current procedures for processing BDD and Quick Start claims, including RASs and consolidated processing sites (CPSs).
* Updated text in accordance with FL 08-20.
 | III.i.2.A.1.d | 2-A-4 |
| * Clarified that the RO of jurisdiction is responsible for processing pre-discharge claims that BDD RASs and Quick Start CPSs do *not* process.
* Deleted statement that BDD RASs and Quick Start CPSs do not process “claims with pending separations involving MEB [Medical Evaluation Board] or PEB [Physical Evaluation Board] proceedings.”
* Added note from FLs 08-20 and 09-31 that warns intake sites against automatically excluding from the BDD and Quick Start programs claims for service connection for
* post-traumatic stress disorder, and
* disabilities resulting from exposure to radiation.
* Incorporated the content of (old) III.i.2.A.1.d.
* Added claims for which no service treatment records exist, as of the date of discharge, as a type of pre-discharge claim that requires prolonged development.
 | III.i.2.A.1.e | 2-A-5 |

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| Reason(s) for the Change | Citation | Page(s) |
| * Added additional detail to the instructions for establishing future dates of claim.
* Added information regarding claim labels and corporate flashes for pre-discharge claims.
 | III.i.2.A.2.a | 2-A-6 |
| Modified the table that shows the proper end products (EPs) for controlling pre-discharge claims. | III.i.2.A.2.b | 2-A-7 |
| Clarified that the date of claim for all *pre-discharge claims* is the day following the anticipated date of separation from active duty, regardless of the date VA receives the claim. | III.i.2.A.2.c | 2-A-7 |
| Added a new topic (in order to retain the numbering convention in Section A) that discusses the common responsibilities of ROs and intake sites in handling pre-discharge claims. | III.i.2.A.3 | 2-A-8 through 2-A-19 |
| Deleted (old) III.i.2.A.1.c, as the information in this block duplicates that found in III.i.2.B.3.c. | --- | --- |
| Deleted (old) III.i.2.A.1.e and f, as their content is no longer correct. | --- | --- |
| Deleted (old) III.i.2.A.2.b, as the information contained in this block duplicates that found in III.i.2.A.1.c. | --- | --- |
| Deleted (old) III.i.2.A.2.c, as the information contained in this block duplicates that found in III.i.2.A.1.c and d. | --- | --- |

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| Rescissions | None |

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| Authority | By Direction of the Under Secretary for Benefits |

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| Signature | Thomas J. Murphy, DirectorCompensation Service |

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