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

**Veterans Benefits Administration December 19, 2014**

**Washington, DC 20420**

#### Transmittal Sheet

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| Changes Included in This Revision | The table below describes the changes included in this revision of Veterans Benefits Manual M21-1MR, Part III, “General Claims Process,” Subpart iv, “General Rating Process.”***Notes***: * Minor editorial changes have also been made to
* remove references to rescinded portions of M21-1
* update incorrect or obsolete hyperlink references
* update the term “veteran” to “Veteran”
* update obsolete terminology, where appropriate
* reassign alphabetical designations to individual blocks and repaginate, where necessary, to account for new and/or deleted blocks within a topic
* update section and topic titles to more accurately reflect their content, and
* bring the documents into conformance with M21-1MR standards.
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| Reason(s) for the Change | Citation |
| To add a definition for the coded conclusion. | Part III, Subpart iv, Chapter 6, Section E, Topic 22, Block a (III.iv.6.E.22.a) |
| To clarify the content of the combined evaluation sections of the coded conclusion. | III.iv.6.E.25.a |
| To delete (old) Block b, which discussed how to show combined evaluations on the codesheet, because these policies are already contained in the business rules for the Veterans Benefits Management System-Rating (VBMS-R). | -- |
| To clarify the application of the bilateral factor and to add that it does not apply to diagnostic code (DC) 7804 as revised in October 2008. | III.iv.6.E.25.b |
| To add new Block d to explain that when granting a previously denied issue, it should be removed from the not service connected portion of the codesheet.  | III.iv.6.E.27.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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