### Section D. Codesheet Section

#### Overview

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| In this Section | This section contains the following topics. |

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| Topic | Topic Name | See Page |
| [13](#Topic13) | Data Table and Jurisdiction | 6-D-2 |
| [14](#Topic14) | Additional Service Codes | 6-D-4 |
| [15](#Topic15) | Combat Status Codes | 6-D-5 |
| [16](#Topic16) | Special Provision Codes | 6-D-6 |
| [17](#Topic17) | Future Physical Examination Codes | 6-D-9 |
| [18](#Topic18) | Special Monthly Compensation (SMC) Codes | 6-D-11 |
| [19](#Topic19) | Disability Rating Codes | 6-D-12 |
| [20](#Topic20) | Special Notations and Other Template Fields | 6-D-13 |
| [21](#Topic21) | Signature | 6-D-15 |
| [22](#Topic22) | Exhibit: Sample Draft Codesheet | 6-D-17 |

#### 13. Data Table and Jurisdiction

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| Introduction | This topic contains information about the data table, *Jurisdiction* section, and coded conclusion, including   * [data table entries](#a13), and * [the *Jurisdiction* section](#b13)*.* |

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| a. Data Table Entries | Use the table below to determine when entries are generated in the fields of the data table.  ***Note***: Each page of the rating contains a heading with information identifying the claimant and rating.  ***Reference***: For more information on preparing a rating decision, see the *Veterans Benefits Management System-Rating (*[*VBMS-R) User Guide*](http://vbaw.vba.va.gov/VBMS/Resources_Technical_Information.asp) |

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| Field | When Entry Is Generated | Reference |
| Active duty dates, branch, and character of discharge | Entry generated for the initial rating.  ***Note***: The entries remain the same on subsequent ratings unless changed. | --- |
| Additional service code | Entry generated for the initial rating, if applicable. | See [M21-1MR, Part III, Subpart iv, 6.D.14](imi-internal:M21-1MRIII.iv.6.D.14). |
| Combat status code | Entry generated for the initial rating that addresses service connection.  ***Note***: There is no need for a later entry unless the combat status has changed. | See [M21-1MR, Part III, Subpart iv, 6.D.15](imi-internal:M21-1MRIII.iv.6.D.15). |
| Special provision code | Entry generated only if applicable to current or future benefit entitlement. | See [M21-1MR, Part III, Subpart iv, 6.D.16](imi-internal:M21-1MRIII.iv.6.D.16). |
| Future exam | Entry generated for all live cases. | See [M21-1MR, Part III, Subpart iv, 6.D.17](imi-internal:M21-1MRIII.iv.6.D.17). |

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| Field | When Entry Is Generated | Reference |
| Special monthly compensation (SMC) code | Entry generated only if applicable to current or future benefit entitlement.  ***Note***: The SMC table is part of the *Special Monthly Compensation* portion of the coded conclusion. The table appears only when SMC is granted at some point in time. | See [M21-1MR, Part III, Subpart iv, 6.D.18](imi-internal:M21-1MRIII.iv.6.D.18). |

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| b. Jurisdiction Part | The *Jurisdiction* section of the codesheet   * appears below the heading section * explains why the case is before the rating activity * refers to the claim at issue, and * cites the pertinent jurisdictional date(s). |

#### 14. Additional Service Codes

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| Introduction | This topic contains information about additional service codes, including   * [generating additional service codes](#a14), and * [description of the codes](#b14). |

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| a. Generating Additional Service Codes | The Additional Service Code is automatically generated, when, for example, the Rating Veterans Service Representative (RVSR) clicks “*combat related*” next to “*disability*.” |

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| b. Description of the Codes | Use the table below for a description of additional service codes. |

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| Code | Description |
| 1-WT | Indicates additional service, some of which occurred during a wartime period. |
| 2-PTE | Indicates additional service, all occurring during a peacetime period. |
| 3-SCD | Establishes entitlement in a pension rating based on the existence of a service-connected disability at the time of separation for which discharge or release was or would have been granted, as provided in 38 CFR 3.3(a)(1)(ii) and 38 CFR 3.3(a)(3)(ii).  ***Note***: This code is used only in pension ratings for Veterans with less than 90 days of service. |
| WWI-Service in Russia | Indicates whether or not there was service in Russia that qualifies as World War I (WWI) service.  ***Note***: The narrative must show whether or not there was service in Russia in cases where the Veteran had no active service during the inclusive dates for WWI, April 6, 1917, to November 11,1918, but did serve thereafter, on or before April 1, 1920. |

#### 15. Combat Status Codes

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| Introduction | This topic contains information about combat codes, including   * [definition of the term ***combat disability***](#a15), and * [description of combat status codes](#b15). |

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| a. Definition: Combat Disability | The term ***combat disability*** applies to any injury incurred in action against an enemy of the United States or as a result of an act of such an enemy. These injuries include   * wounds by missiles (bullets or shrapnel) * psychological trauma or posttraumatic stress disorder (PTSD) experienced in accidents, explosions, or airplane crashes during a period when the Veteran was in combat * diseases directly attributable to exposure to the elements as a result of action against the enemy or by the enemy, such as exposure following an airplane crash or shipwreck. |

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| b. Description of Combat Status Codes | The table below contains descriptions for each of the four combat status codes. |

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| Code | Description |
| 1-None | Indicates no combat disabilities. |
| 2-(Comp.) | One or more combat disabilities, all of which are compensable. |
| 3-(Noncomp.) | One or more combat disabilities, none of which are compensable. |
| 4-(Both) | One or more combat disabilities, not all of which are compensable. |

#### 16. Special Provision Codes

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| Introduction | This topic contains information on special provision codes, including   * [when to use special provision codes](#a16) * [successful computer audits](#b16) * [entering special provision codes](#c16) * [when to use code 3](#d16) * [when to use code 4](#e16) * [when to use code 6](#f16), and * [examples of code 6 used for computer audits](#g16). |

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| a. When to Use Special Provision Codes | Special provision codes are used to identify those rating cases that contain an evaluation or combined degree that would *not* ordinarily be acceptable but for a special provision of the rating schedule or other VA regulation. |

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| b. Successful Computer Audits | Special provision codes permit successful computer audits.  Computer audits of the rating data in a master record verify that the   * percentage of disability assigned to each diagnostic code is one of the evaluations permitted by the rating schedule, and * combined degree of disability is justified. |

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| c. Entering Special Provision Codes | Special provision codes   * 1, 2, 4, 5, and 7 are generated automatically when applicable, and * 3 and 6 must be entered in the appropriate block by the RVSR. |

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| d. When to Use Code 3 | Use code 3 to indicate extra-schedular entitlement to individual unemployability or pension under [38 CFR 3.321(b)](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_321.DOC).  ***Note***: Identify any extra-schedular evaluation by entry of “*ES*” following the specific diagnostic code. |

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| e. When to Use Code 4 | Use code 4 when assigning an under-schedular evaluation (by reason of deduction of the pre-service level of disability) to a pre-service disability aggravated by service.  ***Note***: Identify any under-schedular evaluation by entry of *“US”* following the specific diagnostic code.  ***Reference***: For more information on rating disabilities aggravated by service, see [38 CFR 3.322(a)](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_322.DOC). |

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| f. When to Use Code 6 | Use code 6   * for computer audit acceptance of any combination of the special provision codes * when a total evaluation is continued because it is protected under [38 CFR 3.951](http://www.benefits.va.gov/warms/docs/regs/38CFR/BOOKB/PART3/S3_950.DOC), or * for acceptance of a combined evaluation that is not justified by the individual evaluations. |

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| g. Examples of Code 6 Used for Computer Audit Acceptance | The following are examples of code 6 used when a combined evaluation is not justified by the individual evaluation in cases   * when graduated evaluations are assigned for two or more diagnoses of inactive tuberculosis that may not be combined * when an independent respiratory condition is assigned in addition to a graduated evaluation for pulmonary tuberculosis that may not be combined * when the combined evaluation exceeds the maximum allowable under the amputation rule in a case, such as two or more independent disabilities affecting one extremity (Use of code 6 provides for computer audit acceptance of valid diagnostic codes at any evaluation and a combined degree of less than the normal value of the individual evaluation.) * when a ten percent combined evaluation may be assigned under [38 CFR 3.324](http://www.benefits.va.gov/WARMS/docs/regs/38cfr/bookb/part3/S3_323.doc), such as two or more separate noncompensable disabilities, including disabilities under [38 U.S.C. 1151](http://www.law.cornell.edu/uscode/text/38/1151), and * when two or more conditions are assigned separate evaluations considered as one for the purpose of meeting the 40 percent or 60 percent single disability requirement of [38 CFR 4.16](http://www.benefits.va.gov/WARMS/docs/regs/38cfr/bookc/part4/s4_16.doc) in the rating schedule. (The *Reasons for Decision* should explain the basis for such consideration.) |

#### 17. Future Physical Examination Codes

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| Introduction | This topic contains information on future physical examination codes, including   * [entering future physical examination codes](#a17) * [explaining entries](#b17) * [establishing an examination date](#c17) * [requesting an immediate examination](#d17), and * [changing the future examination control](#e17). |

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| a. Entering Future Physical Examination Codes | On every disability rating decision, enter a future control date or “*None*” in the field for the future exam code, even though the entry may constitute repetition of a prior rating decision.  ***Reference***: For more information on   * determining the need for future examinations and the proper control period to set, see [M21-1MR, Part III, Subpart iv,.3.B.15](imi-internal:M21-1MRIII.iv.3.B.15) * controlling routine future examinations, see [M21-1MR, Part III, Subpart iv, 3.C.17](imi-internal:M21-1MRIII.iv.3.C.17). |

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| b. Explaining Entries | If a future examination is required, explain why in the *Reasons for Decision* using the appropriate glossary text in VBMS-R. |

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| c. Establishing an Examination Date | To establish an examination date, enter the month and year in the future physical examination code field.  ***Note***: The master record maintains only one future exam control at a time. |

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| d. Requesting an Immediate Examination | The master record cannot be used to generate a *VA Form 21-2507a*, *Request for Physical Examination*, if the requested examination date is less than three months in the future. To request an examination date less than three months in the future   * indicate an immediate examination request by selecting the*“AT ONCE”* field in the *Examination* section on the *Enter Disability Ratings* screen in VBMS-R, and * complete an examination request. |

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| e. Changing Future Examination Control | To change the date of a future examination control, enter the new month and year in the future examination control field.  To cancel an examination, enter “*None*.” |

#### 18. Special Monthly Compensation (SMC) Codes

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| Introduction | This topic contains information on SMC codes, including   * [entering SMC codes](#a18) * [entering future codes](#b18), and * [coding retroactive entitlement](#c18). |

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| a. Entering SMC Codes | Enter the appropriate code with appropriate effective dates in the fields provided for the   * SMC, and * loss of use, anatomical loss, and other losses.   ***Reference***: For more information on SMC codes, see [M21-1, Part I, Appendix A](http://www.benefits.va.gov/warms/docs/admin21/m21_1/part1/appa.doc). |

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| b. Entering Future Codes | Enter future SMC paragraph codes in the field provided, if appropriate. |

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| c. Coding Retroactive Entitlement | Do not enter SMC codes for retroactive entitlement for a period entirely in the past, unless the codes are needed to award retroactive SMC benefits. |

#### 19. Disability Rating Codes

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| Introduction | This topic contains information on disability rating codes, including   * [limitations on disability rating controls](#a19), and * [entering additional rating controls](#b19). |

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| a. Limitations on Disability Rating Controls | Only future date rating controls under some reason codes may be introduced, changed, or cancelled by a rating.  Use the table below for a description of the reason codes that can be so changed or cancelled. |

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| Code | Description | Time Limit |
| 01 | Future Physical Exam | five years |
| 03 | Helpless Child Review | open |
| 04 | NSC TB 38 CFR 3.324 Review | six months |

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| ***Note***: A control for a future date beyond the limit permitted will result in a reject as “*OUT OF RANGE*.” |

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| b. Entering Additional Rating Controls | Additional rating controls require entry on an award screen or by the DIAR command. |

#### 20. Special Notations and Other Notification Template Fields

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| Introduction | This topic contains information on use of the special notation field and other notification templates including   * [purpose of special notations and other template fields](#a20) * [special notation field](#b20) * [amputation rule template](#c20) * [38 CFR 3.105(a) grant template](#d20), and * [accrued grant template](#e20). |

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| a. Purpose of Special Notations and Other Template Fields | The primary purposes of special notations and other template fields on the codesheet are   * to record special remarks applicable to the rating decision, and * to communicate an instruction or administrative message to a Veterans Service Representative (VSR).   ***Note***: All special notations and templates are generated through input in the profile tab of VBMS-R. |

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| b. Special Notation Field | Use the special notation field to communicate an instruction or administrative message to the VSR. Clarify if the message is solely administrative (for example, *Cancel the erroneously established EP 930*) or to be shared with the Veteran (for example, *Tell the Veteran the STRs submitted are duplicative and are returned for his use*).  ***Note***: The special notation text appears at the bottom of the codesheet prior to the signature(s). |

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| c. Amputation Rule Template | Use the amputation rule template field to list the disabilities and evaluations included in the application of the amputation rule.  ***Note***: The amputation rule text appears at the bottom of the codesheet prior to the signature(s). |

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| d. 38 CFR 3.105(a) Grant Template | Use the 38 CFR 3.105(a) template when granting a Clear and Unmistakable Error (CUE) claim.  ***Note***: The 38 CFR 3.105(a) template is comprised of both automated text and free text. It appears at the top of the first page of the codesheet below the data tables. |

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| e. Accrued Grant Template | When granting an accrued benefit claim, use the template language generated by selecting the accrued grant radio button in VBMS-R.  ***Note***: The accrued template is only available for selection if the Veteran is deceased. When generated, the accrued grant template will appear at the top of the first page of the codesheet below the data tables. |

#### 21. Signature

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| Introduction | This topic contains information on the signature line on rating decisions, including   * [signatures on rating decisions](#a21) * [responsibilities of RVSRs](#b21) * [responsibilities of the Veterans Service Center Manager (VSCM)](#c21) * [single signature ratings](#d21) * [two signature ratings](#e21), and * [signatures by substitute RVSRs](#f21). |

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| a. Signatures on Rating Decisions | Ratings must be signed on the bottom of the last page of the rating decision. |

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| b. Responsibilities of RVSRs | RVSRs, in rating decisions to which they are signatories, are jointly and individually responsible for   * reviewing the claims folder, and * the correctness of action with all phases of the claims process. |

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| c. Responsibilities of the VSCM | The responsibilities of the Veterans Service Center Manager (VSCM) in single signature ratings include   * authorizing single signature ratings for those issues that he/she believes can be successfully processed without benefit of a second review * exercising sound discretion in selecting which individuals are eligible for single signature authority * carefully monitoring the quality of single signature ratings, and * approving single signature ratings that involve rating issues specified in M21-1MR and 38 CFR.   ***Reference***: For more information on monitoring the quality of rating decisions, see [M21-4, 7.06b(2)](http://www.benefits.va.gov/warms/docs/admin21/guide/lie/ch07.doc). |

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| d. Single Signature Ratings | Single signature authority is restricted to RVSRs whose ability to produce quality work independently without additional oversight has been demonstrated by review.  ***Note***: Authority for single signature may   * vary among different regional offices (ROs) and RVSRs depending on local circumstances * be granted to an RVSR for specific types of ratings as he/she demonstrates the requisite skill and understanding needed to ensure quality. |

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| e. Two-Signature Ratings | All rating decisions require the signatures of two RVSRs unless approved as single signature ratings by the VSCM.  The VSCM *may* require two signatures for ratings that   * provide SMC at a rate greater than SMC (k), or * deal with other special or complex issues, such as * former prisoner of war (POW) and Gulf War claims, and * claims for exposure to herbicide agents, radiation, or mustard gas. |

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| f. Signatures by Substitute RVSRs | In the absence of the regularly assigned RVSR, a completed rating requiring two signatures must be signed by another RVSR, or other qualified employee designated for this purpose by the VSCM or his/her designee.  The substitute RVSR must   * review the claims folder * fully participate in the rating * add the word *“acting”* after his/her signature, and * be jointly responsible along with the other RVSR for the decision’s completeness and accuracy.   ***Important***: The mere signing of the rating document by one RVSR for another is not permissible. |

#### 22. Exhibit: Sample Draft Codesheet

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| Introduction | This exhibit contains a sample draft codesheet for a claim for increase. |

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| a. Sample Draft Codesheet, Page 1 | This exhibit contains page 1 of a sample draft codesheet. |

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| Page 1 of sample draft codesheet containing data tables, 38 CFR 3.105(a) grant template box, jurisdiction, and rating coding. |

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| b. Sample Draft Codesheet, Page 2 | Page 2 of a sample draft codesheet is shown below. |

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| Page 2 of sample draft codesheet rating coding, combined evaluation lines, special monthly compesation coding and pargraph, ancillary decisions, special notation to VSR, and amputation rule template box. |

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| c. Sample Draft Codesheet, Page 3 | Page 3 of a sample draft codesheet is shown below. |

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| Page 3 of sample draft codesheet containing signature line for the rating veterans service representative (RVSR). |