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

**Veterans Benefits Administration July 21, 2015**

**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 M21-1, Part III, “General Claims Process,” Subpart v, “General Development and Dependency Issues.”  ***Notes***:   * The term “regional office” (RO) also includes pension management center (PMC), where appropriate. * Unless otherwise noted, the term “claims folder” refers to the official, numbered, Department of Veterans Affairs (VA) repository – whether paper or electronic – for all documentation relating to claims that a Veteran and/or his/her survivors file with VA. * Minor editorial changes have also been made to * update incorrect or obsolete references * update obsolete terminology, where appropriate * remove references to specific claims-processing systems, where doing so does not affect the clarity of the instructions or information provided * reassign alphabetical designations to individual blocks, where necessary, to account for new and/or deleted blocks within a topic * update section and topic titles to more accurately reflect their content * clarify block labels and/or block text, and * bring the document into conformance with M21-1 standards. |

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| Reason(s) for the Change | Citation |
| * To add that information requests between Veterans Health Administration (VHA) and Veterans Benefits Administration may be provided through phone contact in addition to the other means described in this block * To add that medical facilties may request information from regional offices (ROs) when they cannot otherwise access the information through corporate record inquiry, and * To emphasize that this section of the manual relates primarily to requests from medical facilities using the *VA Form 10-7131,* *Exchange of Beneficiary Information and Request for Administrative and Adjudicative Action*, and * To delete reference to Automated Medical Information Exchange (AMIE) since examination requests are not covered in this section. | M21-1, Part III, Subpart v, Chapter 7, Section A, Topic 1, Block a  (III.v.7.A.1.a) |
| To clarify that medical facilities may require information from ROs when making determinations regarding Veteran eligibility for medical treatment. | III.v.7.A.1.b |
| To delete old Block d because this information is included in Block a | III.v.7.A.1.d (old) |
| To clarify how the medical facility will indicate the information it needs on *VA Form 10-7131*. | III.v.7.A.2.a |
| To clarify procedures for responding to VA Form 10-7131 requests that only require the review of the claims folder in order to provide the requested information. | III.v.7.A.2.b |
| To clarify when an administrative decision is required to respond to a medical facility’s request regarding eligibility for health care. | III.v.7.A.3.a |
| * To clarify that requests involving the authorization activity involve administrative decisions, and * To add a reference to the Topic describing guidance on administrative decisions when receiving a request from the medical facility for medical benefits. | III.v.7.A.3.b |
| To clarify when a medical facility may request an RO to make a determination as to whether a particular condition is service-connected for treatment purposes only. | III.v.7.A.4.a |
| To add a reference for processing requests for medical outpatient benefits. | III.v.7.A.4.b |
| To add a reference for guidance when returning VA Form 10-7131 to the medical facilities. | III.v.7.A.6.c |
| To clarify that health care benefits are based on discharges that are characterized as under conditions other than dishonorable, and that medical facilities may request information from ROs when a character of discharge decision is required. | III.v.7.A.7.a |
| To add a reference for referring cases to the authorization activity when eligibility determinations are required. | III.v.7.A.7.d |
| To clarify that the medical facility is responsible for determinations for eligibility to other services due to nasopharyngeal radium irradiation (NRI) treatment. | III.v.7.A.11.f |
| To add an explanation of *Public Law 94-491*, which established eligibility for medical services for certain members of the Polish and Czechoslovakian Armed Forces who served during World War I or II. | III.v.7.A.12.a |
| * To clarify that the Wilmington VA Medical Center, Medical Administration Service, is responsible for developing claims for eligbility of medical services from members of the Polish and Czechoslovakian Armed Forces, and * To add a reference for rating guidance for these types of claims for treatment purposes. | III.v.7.A.12.c |

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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, Director  Compensation Service |

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