#### Department of Veterans Affairs M21-4, Appendix B

**Veterans Benefits Administration November 30, 2015**

**Washington, DC 20420**

#### Key Changes

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| Changes Included in This Revision | The table below describes the changes included in this revision of Veterans Benefits Manual M21-4, Manpower Control and Utilization in Adjudication, Appendix B, “End Product Codes and Work-Rate Standards for Quantitative Measurements.”  ***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. |

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| Reason(s) for the Change | Citation |
| * To add an exception to use EP 173 for any subsequent adjustments following non-DRO hearings when adjustment has already been made and previous EP has already been cleared. * To add usage for end product (EP) 590 for due process for proposed incompetency determinations that fall under the Fiduciary Hub’s jurisdiction. * To update EP 600 to * clarify that claims processors ensure that companion EPs 690/693 were established prior to EP 600 and remain pending until final action is completed * add a note that final action will not be taken on EP 600 until 65 days from proposed adverse action unless payee requests immediate adjustment, and * add a note that final action on EP 600 will be deferred until a requested hearing is completed, cancelled, or withdrawn. | M21-4, Appendix B, Section II |

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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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**Section II. End Products - Compensation, Pension, and Fiduciary Operations**

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| Change Date | November 30, 2015 |

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| Introduction | This section contains a comprehensive list of authorized EPs, with a description of the claims or issues applicable to each. |

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| 010 - Initial Disability Compensation Claims - Eight Issues or More | ***General***: EP 010 is limited to initial disability compensation or concurrent initial disability compensation and pension claims containing eight issues or more. Each disability claimed or identified and rated for disability compensation entitlement will be counted as an issue.  A claim for pension entitlement will be counted as a single issue.    Consideration of entitlement to SMC will be considered a single issue.    Specific determinations for ancillary benefits such as adaptive housing, Chapter 35 eligibility, or automobile allowance will also be considered issues.  ***Unless otherwise noted***, the EP will not be cleared until all issues raised by the claim have been resolved.  ***Final disposition and control in total waiver case where compensation exceeds retired pay***: EP 010 will be cleared in the absence of certification of actual amounts of retired pay, but an EP 290 control must be maintained until certification is received and all remaining issues are resolved.  ***Exception***: Claims from service members who are patients in VAMCs awaiting discharge from active duty (see EP 930). |

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| 020 - Compensation Claims Received After the Initial Eligibility Decision | ***General***: EP 020 applies to disability compensation or service-connected death claims received after an initial eligibility decision has been made. Unless otherwise noted, the EP will not be cleared until all issues raised by the claim have been resolved.  ***Disability claims***: Reopened claims related to service connection, line of duty or similar basic entitlement factors and claims for increase, subsequent to an initial claim under EP 110 or 010, are generally the disability claims applicable to EP 020.  ***Reopened Dependency and Indemnity Compensation (DIC) claims related to cause of death, and basic eligibility*** (line of duty, character of discharge, or misconduct), subsequent to an initial claim (whether from the same or another claimant) adjudicated under EP 140, are generally the death claims applicable to EP 020.  ***Claims for special monthly DIC*** based on need for aid and attendance or being housebound; and death compensation or spouse's compensation based on need for aid and attendance (see [38 CFR 3.351](http://www.ecfr.gov/cgi-bin/text-idx?SID=19dc744ce55ae8a7f54cbf45798ebc4c&mc=true&node=se38.1.3_1351&rgn=div8)).  ***Reconsideration solely relating to questions of competency*** when not incidental to adjudicative decisions involving other EPs. (Clear EP 020 when notification of the competency determination is sent and establish EP 290 to control for appointment of a fiduciary.)  ***Examples***:   * Claims for disability compensation filed for the first time, but received after a disability pension claim has previously been filed and adjudicated. * Claims for service connection for disabilities not previously adjudicated. * Claims for service connection based on the same disability considered in prior disallowances. * Claims for increase in degree of service-connected disability. * Claims for total disability due to unemployability. * Claims for SMC or increase in SMC. * Claims for increase or reconsideration filed subsequent to admission for hospital treatment. * Restored Entitlement Program for Survivors (REPS) claims, if the issue of service connection has not been considered in a prior claim for death benefits or if the date of incurrence or aggravation of disability cannot be determined without additional rating action. * Claims for children incapable of self-support based on compensation entitlement.   ***Exceptions***:   * Compensation grants based on Board of Veterans’ Appeals (BVA) review (see EP 172). * When all benefits sought on appeal in a compensation claim are granted without BVA’s review (see EP 172). EP 020 will ***not*** be recorded for issuance of a statement of the case (SOC), SSOC, or certification of appeal (see EPs 172 & 070). * Claims based solely on relationship or dependency (see EP 130). * Hospitalization adjustments (see EP 135). * Reopened burial claims (see EP 160).   ***Reference***: For information on claim statuses, see [38 CFR 3.160](http://www.ecfr.gov/cgi-bin/retrieveECFR?gp=&SID=fa1c0e42f4267e45d7e62f51ea3ee335&mc=true&n=pt38.1.3&r=PART&ty=HTML#se38.1.3_1160). |

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| 050 - EVR Processing | ***Historical***: EP 050 was credited automatically for any EVR successfully processed to completion. |

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| 070 - Appeals Processing | EP 070 is to be cleared whenever an SSOC is mailed.  EP 070 is to be cleared whenever an appeal is transferred to BVA (entered in VACOLS as “Certified to BVA” or “Remand Returned”).  A one-time EP 070 should be cleared for each SSOC mailed while an appeal is in Remand status. |

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| 095 - Vocational Rehabilitation Eligibility Determination - Memorandum Rating Decision Required | EP 095 applies to requests for vocational rehabilitation eligibility determinations received from the Vocational Rehabilitation and Counseling Division. These require preparation of a memorandum rating decision to determine eligibility. |

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| 110 - Initial Disability Compensation Claims - Seven Issues or Less | ***General***: EP 110 is limited to initial disability compensation or concurrent initial disability compensation and pension claims containing seven issues or less. Each disability claimed or identified and rated for disability compensation entitlement will be counted as an issue.  A claim for pension entitlement will be counted as a single issue.  Consideration of entitlement to SMC will be considered a single issue. Specific determinations for ancillary benefits such as adaptive housing, Chapter 35 eligibility, or automobile allowance will also be considered issues.  ***Unless otherwise noted***, the EP will not be cleared until all issues raised by the claim have been resolved.  ***Final disposition and control in total waiver case where compensation exceeds retired pay***: EP 110 will be cleared in the absence of certification of actual amounts of retired pay, but an EP 290 control must be maintained until certification is received and all remaining issues are resolved.  ***Exception***: Claims from service members who are patients in VAMC awaiting discharge from active duty (see EP 930). |

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| 120 - Pension Claims Received After the Initial Eligibility Decision | ***General***: EP 120 applies to Veterans Pension or Survivors Pension claims received after an initial eligibility decision has been made under EP 180 or EP 190. Unless otherwise noted, the EP will not be cleared until all issues raised by the claim have been resolved.  ***Special monthly pension (SMP)***: EP 120 also applies to claims for entitlement to SMP.  ***Survivors Pension claims related to basic eligibility*** (character of discharge or misconduct), subsequent to the initial determination (whether from the same or another claimant) previously adjudicated under EP 190, are generally the survivor claims applicable to EP 120.  ***Claims for additional pension***benefits for surviving spouse based on need for aid and attendance or being housebound (see [38 CFR 3.351](http://www.ecfr.gov/cgi-bin/text-idx?SID=19dc744ce55ae8a7f54cbf45798ebc4c&mc=true&node=se38.1.3_1351&rgn=div8)).  ***Reconsideration solely relating to questions of competency*** when not incidental to adjudicative decisions involving other EPs. (Clear EP 120 when notification of the incompetency determination is sent. Establish EP 290 to control for appointment of a fiduciary.)  ***Examples***:   * Claims for Veterans Pension filed for the first time, but received after a compensation claim has previously been filed and adjudicated. * Claims for SMP based on aid and attendance or housebound status, including claims based on nursing home status. * Claims for children incapable of self-support based on pension entitlement.   ***Exceptions***:   * Pension grants based on BVA review (see EP 172). * When all benefits sought on appeal in a pension claim are granted without BVA review (see EP 172). EP 120 will not be recorded for issuance of a SOC, SSOC, or certification of appeal (see EPs 172 & 070). * Claims based solely on relationship or dependency (see EP 130). * Claims based solely on income or estate issues (see EP 150). * Hospitalization adjustments (see EP 135). |

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| 130 - Disability and Death Dependency | ***General***: EP 130 applies to all actions involving dependency determinations where the primary issue involves entitlement of the Veteran, his/her dependents, or beneficiaries to benefits based on relationship or dependency. EP 130 is equally applicable to action taken without the claims folder. Unless otherwise noted, the EP will not be cleared until all issues raised by the claim have been resolved.  ***Examples***:   * Claims for apportionment. * Claims for increased benefits, or for continuation of benefits, because of dependency including for children attending school after age 18. * Adjustments in running awards due to a change in dependency status by reason of death, divorce, marriage, remarriage, or discontinuance of school attendance. * Adjustments in running awards due to the special allowance under 38 U.S.C. 1312 (a) payable to an eligible survivor or survivors. * Death claims from other beneficiaries subsequent to initial claims adjudicated under EP 140 or 190 and not involving reconsideration as to cause of death or basic eligibility. * Election of DIC.   ***Final Disposition***:   * When dependency is part of a basic claim or review, a separate EP 130 is not in order. However, when this issue must be developed, the appropriate EP will be cleared when all other issues are resolved and an award is made. The EP 130 will remain pending and cleared when the dependency issue is resolved. * A dependency claim, not part of another claim, will warrant only one EP 130, unless the dependency change affects multiple benefits and/or multiple payees (as in apportionment claims). Development and/or award action must be simultaneous and the EP cleared after all appropriate adjustments. |

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| 133 - REPS(St. Louis Only) | EP 133 applies to claims for REPS properly referred to the St. Louis RO after clarification of qualifying service-connected death.  ***Note***: Improperly referred REPS claims will be returned to the RO of jurisdiction with no EP credit. |

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| 135 - Hospitalization Adjustments or Resumptions | ***General***: EP 135 applies to all reductions based on hospitalization (including nursing home or domiciliary care at VA expense) and subsequent adjustments based on discharge from hospitalization (includes claims adjudicated under the provisions of [38 CFR 3.551](http://www.ecfr.gov/cgi-bin/text-idx?SID=19dc744ce55ae8a7f54cbf45798ebc4c&mc=true&node=se38.1.3_1351&rgn=div8) - [3.559](http://www.ecfr.gov/cgi-bin/text-idx?SID=19dc744ce55ae8a7f54cbf45798ebc4c&mc=true&node=se38.1.3_1359&rgn=div8)).  ***Note***:EP 135 should be cleared and EP 600 established when notification of proposed reduction is sent.  ***Examples***:   * Proposed reduction based on initial hospitalization for: * Pension beneficiaries without dependents ([38 CFR 3.551](http://www.ecfr.gov/cgi-bin/text-idx?SID=19dc744ce55ae8a7f54cbf45798ebc4c&mc=true&node=se38.1.3_1351&rgn=div8)). * Beneficiaries receiving aid and attendance allowance (SMP & SMC) ([38 CFR 3.552](http://www.ecfr.gov/cgi-bin/text-idx?SID=19dc744ce55ae8a7f54cbf45798ebc4c&mc=true&node=se38.1.3_1352&rgn=div8)). * Incompetent Veterans without dependents whose estates exceed the regulatory limit ([38 CFR 3.557](http://www.ecfr.gov/cgi-bin/text-idx?SID=19dc744ce55ae8a7f54cbf45798ebc4c&mc=true&node=se38.1.3_1357&rgn=div8)). * Proposed reduction based on readmission following irregular discharge from prior hospitalization for the beneficiaries listed above. * Rate adjustments based on discharge from the hospital (or nursing home or domiciliary care). * Release of money withheld for incompetent Veterans ([38 CFR 3.558](http://www.ecfr.gov/cgi-bin/text-idx?SID=19dc744ce55ae8a7f54cbf45798ebc4c&mc=true&node=se38.1.3_1358&rgn=div8) - [3.559](http://www.ecfr.gov/cgi-bin/text-idx?SID=19dc744ce55ae8a7f54cbf45798ebc4c&mc=true&node=se38.1.3_1359&rgn=div8)). * Subsequent resumption of benefits for an incompetent Veteran, without dependents, whose estate falls below the regulatory limit.   ***Exceptions***:   * Upon receipt of VA Form 10-7131, Exchange of Beneficiary Information and Request for Administrative and Adjudicative Action, or VA Form 10-7132, Status Change, when the only adjudicative action is filing or uploading of the form in the claims folder, or Compensation and Pension Record Interchange (CAPRI) notices when no action is required (see EP 330). * When a future date control for hospitalization adjustment is created or canceled (see EP 330). * If question of competency or incompetency arises during hospitalization and no rating issues under EP 320 are involved (see EPs 020 & 120). |

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| 140 - Initial Death Compensation and DIC Claims | ***General***: EP 140 is limited to initial DIC or death compensation claims or initial dual claims for service-connected death and Survivors Pension (including accrued) and REPS claims, if no prior claim for survivors benefits has been filed and adjudicated.  Reopened claims for service-connected death will be processed under EP 020 and reopened claims based on dependency issues will be processed under EP 130.  EP 140 will not be used for inferred DIC or death compensation determinations unless rating action is required.  ***Note***: Unless otherwise noted, the EP will not be cleared until all issues raised by the claim have been resolved, or until Survivor Benefit Plan (SBP) determination is completed. |

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| 150 - Income, Estate, and Election Issues | ***General***: EP 150 applies to death and disability claims where the issue involved is entitlement of the Veteran, his/her dependent(s) or beneficiaries to benefits based on income or estate factors. Unless otherwise noted, the EP will not be cleared until all issues raised by the claim have been resolved.  ***Examples***:   * Claims for increased pension, restoration, or reopened claims based on change in income or net worth. (If a rating decision is required to establish entitlement, use EP 120.) * Adjustments due to change in income or net worth, or submission of medical expenses. An EP 150 is appropriate even if receipt of new income information only requires updating of the corporate record income segment. * Elections of current law pension. * Net worth determinations under [38 U.S.C. 1710](https://www.law.cornell.edu/uscode/text/38/1710).   ***Exceptions***:   * When a rating decision is required to establish or confirm pension entitlement (see EP 120). * Reports of change in income requiring only a correspondence reply (see EP 400). * Reports of change in income requiring review of claims folder only, but with no award adjustment or system update needed (see EP 330). |

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| 154 - IVM Match Cases - Pension and Parents’ DIC | ***General***: EP 154 applies to all pension and Parents' DIC review cases based on Internal Revenue Service (IRS) and Social Security Income Verification Match (IVM).  ***A separate EP 154 is allowed for each payee for whom an IVM worksheet is received and reviewed*** even if development is not required.  ***Examples***:   * If both parents are in receipt of Parents' DIC and worksheets are received for each, a separate EP 154 credit is warranted for each parent. * When worksheets are received for dependents of a payee (i.e., spouse of a Veteran in receipt of pension), only one EP 154 is warranted for all worksheets reviewed in computing the Veteran's countable income. * In unusual situations where multiple worksheets are generated at one time because of numerous ***payers***, only one EP is allowed. * If worksheets are received for separate years, a separate EP 154 is warranted for each year's income reviewed.   ***EP 154 should remain pending until the final resolution*** of the income verification issue. A separate EP 600 is not to be used for these issues. |

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| 155 - EVR Referrals | ***Historical***: EP 155 was used for Eligibility Verification Reports (EVRs), as shown below.  ***General***: A single EP 155 is applicable for all income issues raised by an EVR which is referred for adjudication. EP 155 is established automatically when a case is referred for adjudication due to EO2 screen edits.  ***Final disposition of EP 155 when non-income issues are raised***: If the EVR furnishes sufficient income information to permit the EVR control to be cleared, but the EVR raises a separate issue (e.g., dependency, special monthly pension), the EP 155 will be taken when the transaction 45 or 13Q is processed.  ***Development actions under other EPs***:   * If a beneficiary reports the existence of a dependent, development for the dependent will be under EP 130. * If the payee reports that he or she is in a nursing home, development for the entitlement to aid and attendance will be under EP 120. |

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| 160 - Burial, Plot, Headstone, Marker, Engraving Claims | ***General***: EP 160 applies to claims for the statutory burial allowance, plot allowance, reopened claims for reconsideration of a prior decision, and claim for reimbursement of headstone, marker, or additional engraving expenses.  ***Final Disposition***: Any claims processed simultaneously for these benefits will be established/taken as separate EPs except for plot allowance paid at the same time the burial claim is resolved. |

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| 165 - Accrued by Reimbursement or Accrued by Relationship Claims | ***General***: EP 165 applies to claims solely for   * compensation or pension payable as reimbursement of the expenses of last sickness and burial, or * accrued benefits payable based on relationship when EP 140 or 190 is not involved.   ***Exception***: If notice of accrued payable is received subsequent to final adjudication of a claim under EP 140 or 190, a separate EP 165 will be cleared upon award of the accrued benefit. |

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| 170 - Appeal Control | ***General***: No work rate credit attaches to EP 170. Exceptions are education issues (EP 270) and VR&E issues (EP 768).  ***Final Disposition***: EP 170 must be cancelled upon a final disposition of the appeal by VSC/PMC or BVA action. |

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| 172 - Statement of the Case/Grant ofBenefits | ***General***: EP 172 applies to   * issuance of an SOC (which may include a rating decision for a partial grant), *and/or* * final disposition of an appeal through a full grant of all issues.   ***Notes***:   * A grant under a separate EP 020 (or 120) is not applicable. * Consideration of additional evidence submitted with the NOD is part of EP 172. * If individual unemployability (IU) is inferred on an appeal decision, and development is needed, continue the EP 172 until the issue of IU is resolved. * For issuance of an SSOC subsequent to release of an SOC (use EP 070).   ***Reference***: For definitions of downstream or inextricably intertwined issues, see M21-1, Part I, 5.A.1. |

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| 173 - Hearings Conducted by an Employee Other Than a DRO/Informal DRO Hearings | ***General***: EP 173 is applicable to Compensation, Pension and Fiduciary (P&F), or Committee on Waiver Cases (COWC) where   * a formal hearing is conducted by one or more VSC/PMC employees other than a Decision Review Officer (DRO), or * an informal conference/informal hearing or hearing is held by the DRO.   ***Final Disposition***:   * For non-DRO hearings * EP 173 will be cleared when the transcript is filed or uploaded in the claims folder or at the time that the claimant fails to appear, cancels the hearing request, withdraws the appeal or claim, or a notice of death is received. Any further action or decision will be controlled by the pending rating or non-rating EP that led to the hearing request. * ***Exception***: When a hearing is requested after a proposed action has been finalized and the *related EP has already been cleared*, any subsequent award adjustment necessary as a result of evidence presented at the hearing will be made under the EP 173. * For DRO informal hearings, EP 173 will be cleared when the informal hearing is completed or cancelled, and no further action is required. If a decision is rendered based on new and material evidence, clear and unmistakable error (CUE), or De Novo review, see EP 174. |

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| 174 - Hearings Conducted by DRO/Decisions | ***General***: EP 174 is applicable to Compensation, P&F, or Education cases in which a formal hearing is conducted by a DRO or a formal decision is rendered by the DRO (including issuance of a SOC).  ***Final Disposition***:   * EP 174 will remain pending until notification of the decision is sent to the claimant (De Novo, CUE, new evidence, no change, partial grant). * If a request for a postponement is received, EP 174 may be cancelled (not cleared) and re-established using the date of request for postponement as the new date of claim. * EP 174 will be cleared when the claimant fails to appear for a scheduled formal hearing or cancels his/her hearing request.   ***Note***: If IU is inferred on an appeal decision, and development is needed, continue the EP 174 until the issue of IU is resolved.  ***Reference***: For definitions of downstream or inextricably intertwined issues, see M21-1, Part I, 5.A.1. |

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| 180 - Initial Disability Pension Claims | ***General***: EP 180 is limited to initial disability pension claims filed by, or on behalf of, living Veterans. Unless otherwise noted, the EP will not be cleared until all issues raised by the claim have been resolved.  ***Exception***: For initial claims for *both* service-connected compensation and nonservice-connected pension, use EP 010 or 110, whichever is applicable. |

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| 190 - Initial Survivors Pension Claims | ***General***:EP 190 is limited to initial Survivors Pension claims (including accrued). Unless otherwise noted, the EP will not be cleared until all issues raised by the claim have been resolved.  Pension eligibility claims received after an initial decision under EP 190 is completed, are processed under EP 120 (entitlement), EP 150 (income issues), or EP 130 (dependency issues).    ***Exceptions***:   * Initial claims for both service-connected death compensation and Survivors Pension (see EP 140). * Claims received from other beneficiaries after the initial claim has been adjudicated under EP 140 or 190 (see EP 020, 120, 130, or 150). |

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| 290 - Eligibility Determinations - Other | ***General***: EP 290 applies to adjudicative decisions relating to benefits under other VA programs, programs of other Federal and State agencies, and independent determinations relating to elections, waivers, guardianship issues, and other issues affecting payments.  ***Note***: The independent determinations applicable to EP 290 are those which require separate formal rating or authorization decisions.  ***Examples***:   * Eligibility for dental treatment. * Eligibility for hospitalization. * Eligibility for outpatient treatment. * Automobile claims. * Special housing claims. * Preference certificates (for civil service employment, Federal, State, or local public housing, etc.). * Eligibility for loan guaranty benefits. * Eligibility for insurance benefits. * Claims for clothing allowance. * Claims solely involving waivers and elections of retired pay (see also EPs 110 & 010). * Renouncement of rights. * Waivers of compensation to receive active or inactive duty pay. * Discontinuance of payments upon return to active duty. * REPS claims for completion of disallowances or certificates of entitlement if issues of service connection were properly disposed of previously. * Fiduciary program matters, such as adjustments due to appointment or discharge of fiduciaries. * Adjustments due to incarcerations. * Awards of Medal of Honor Pension. * Actions upon disappearance of the Veteran. * Bureau of Supplemental Security Income (BSSI) requests for information * Dependents’ Educational Assistance (DEA) - Ch. 35 eligibility * Eligibility to CHAMPVA. * Benefits at the full-dollar rate for Filipino Veterans and their survivors. * Resumption of compensation for BDD/Quick Start claims, when a service member who is discharged from active duty has service-connected static and non-static disabilities.   ***Exception***: Requests for statements regarding eligibility for various benefits or reconsiderations which can be furnished on the basis of existing records and decisions in the claims folder at the time of receipt (see EP 400). |

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| 293 - COWC Decisions | EP 293 applies to decisions by the COWC. |

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| 295 - Vocational Rehabilitation Eligibility Determination*,* Memorandum Rating - Decision Not Required | EP 295 applies to requests for vocational rehabilitation eligibility determinations received from the Vocational Rehabilitation and Education (VR&E) division, which do not require preparation of a memorandum rating decision to determine eligibility. |

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| 298 - CRSC/CRDP Awards | EP 298 applies to the review of/adjustment to Combat Related Special Compensation/Concurrent Retired Disability Payments (CRSC/CRDP) compensation awards. |

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| 310 - Routine Future Examinations | EP 310 is used for the following   * **requests for routine future examinations** * These include those mandated by the Schedule for Rating Disabilities, and those determined by the rating activity to be necessary to verify continued severity of a disability. * EP 310 is assigned for the total work requirements involved from the time of preliminary review of the claims folder in preparation of the examination request, until final rating and authorization action is taken. * ***Exception***: Cancellation or extension of a future date control (see EP 330). * **review of unemployability, and** * EP 310 is assigned for the annual review for continued unemployability in service-connected cases. * **requests for proposed rating decisions in the Integrated Disability Evaluation System (IDES)** * During the proposed rating stage, EP 310 will run concurrently with the EP 689 (M21-1, Part III, Subpart i, 2.D.10).   ***Note***: An EP 310 can co-exist with an EP 020 if they are controlling two distinctly separate disabilities. |

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| 314 - Income Verification Match - Service-Connected Individual Unemployability | ***General***: EP 314 applies to all disability compensation individual unemployability cases reviewed based on a Social Security IVM.  ***EP 314 applies to all IVM worksheets reviewed*** even if development is not required. However, in unusual situations where multiple worksheets are generated at one time because of numerous payers, only one EP 314 is allowed.  ***EP 314 should remain pending until final resolution*** of the income verification issue. A separate EP 600 is not to be used for these issues. |

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| 320 - Reviews Due to Hospitalization | ***General***: EP 320 is applicable upon receipt of a hospitalization report showing admission for a service-connected disability evaluated at less than 100 percent, received through   * CAPRI * *VA Form 10-7131*, *Exchange of Beneficiary Information and Request for Administrative and Adjudicative Action*, or * a uniformed service medical facility.   If the Veteran has not been discharged, a future date control (EP 320) must be established for receipt of the 21-day certificate or hospital report.  When an open rating under paragraph 29 is assigned while the Veteran is in the hospital, EP 320 will be taken. Concurrent with that action, a future date control (EP 320) will be established for receipt of the notice of discharge and hospital summary. EP 320 will remain pending until final rating board action, even though an award restoring the pre-hospital evaluation may have been authorized in the interim.  ***Notes***:   * A Report of Hospitalization from VA or a uniformed service medical facility will be accepted as a standard prescribed form for the purpose of establishing entitlement to Paragraph 29 and/or 30 benefits (reference M21-1, Part IV, Subpart ii, 2.J). * Such hospitalization report is ***not*** to be taken as a claim for increase, unless the Veteran submits a specific request on a standard prescribed form. * An EP 320 can co-exist with an EP 020 if they are controlling two distinctly separate disabilities (e.g., not a complication of the other).   ***Exceptions***:   * Solicited or unsolicited hospital reports received for non-service-connected conditions (see EP 330). * If a hospital/outpatient report has been requested under a controlling EP 320 and a subsequent claim for increase is filed by or on behalf of the veteran, referring to the requested report, change EP 320 to EP 020 (see EP 020). * If the Report of Hospitalization does not warrant hospitalization benefits (Paragraph 29 or 30), change any pending EP 320 to an EP 330, and cancel the EP 330. |

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| 330 - Reviews - Regulatory and Procedural | ***General***: EP 330 applies when the claims folder is being reviewed under the provisions of current regulations, instructions, directives, or procedures.  ***Examples***:   * Service records routinely submitted by the service department, not requested in connection with pending issues where no action is required other than review and incorporation in the claims folder. * Complete routine review and related action required on permanent transfer out of folders. * Review of periodic reports from the claimant when an examination of the folder is required but no authorization action is necessary. * Examination of a claimant's records in connection with local administrative review when such review is justified and requires a thorough examination of the folder. * Review and evaluation of miscellaneous correspondence and documents which are not directly related to an award action and when a reply is not required. * Review of a report of change in income requiring only review of the claims folder. * Upon receipt of *VA Form 10-7131, Exchange of Beneficiary Information for Administrative Action*, or *VA Form 10-7132, Status Change*, or CAPRI notice, where no hospitalization benefits can be granted (Paragraph 29 or 30), or when the only adjudicative action is filing of the form in the claims folder. * When a future date control for hospitalization adjustment is canceled. * Solicited and unsolicited hospital reports for non-service-connected disabilities are received. * Confirmed actions by BVA filed in the folder. * Cancellation or deferral of a routine future examination.   ***Exception***: Quality reviews (see EP 930). |

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| 331 - IDES Rating Activity - Seattle and Providence | ***Historical***: EPs 331/336/339 were used for tracking and managing IDES, rating activity at the Seattle and Providence Disability Rating Activity Sites (DRASs).   * EP 331 was used by Providence RO for brokered cases to designate a preliminary rating request. * During the preliminary rating and rating reconsideration stages, EPs 331/336/339 ran concurrently with the EP 689. |

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| 332 - AMC Brokered | ***Historical***: EP 332 was used by the AMC for control of brokered development cases. |

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| 333 - Brokered DRC Development Work | ***Historical***: Used by Development Resource Centers (DRCs) to control work. All DRCs were to conduct development and update Modern Awards Processing Development (MAP-D)/Veterans Benefits Management System (VBMS) under an EP 333. |

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| 334 - Pension Cases TTO’d | ***Historical***: EP 334 was used for pension claims that were temporarily transferred out from an RO to a PMC for VETSNET award processing. EP 334 would remain pending until the claim was promulgated by PMC.  ***Note***: Historical use for AMC Brokered Development to Nashville. |

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| 335 - Nehmer Phase II Review | ***Historical***: EP 335 was used for *Nehmer* Phase II reviews, for QTC *Nehmer* Exams (see [*Nehmer* Supplemental Training, May 3, 2013](http://vbaw.vba.va.gov/bl/20/201/Nehmer%20Addendum%20Updated.pdf)).  ***Historical***: EP 335 was used to control claims affected by the *Haas v. Nicholson* decision. |

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| 336 - IDES Rating Activity - Seattle and Providence | ***Historical***: EP 336 was used by the Providence and Seattle ROs to control requests for preliminary rating requests from the Physical Evaluation Board. During the rating and rating reconsideration stages, EP 336 ran concurrently with the EP 689. |

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| 337 | ***Historical***: Used for AMC brokered ratings to Seattle. |

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| 339 - Camp Lejeune Adjudication Hold | EP 339 is used to control claims for a temporary adjudication hold based on contaminated drinking water at Camp Lejeune, NC where service connection cannot be established.  ***Historical***: EP 339 was used by the Seattle and Providence ROs to control requests for reconsideration. During the reconsideration EP 339 ran concurrently with the EP 689. |

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| 400 - Correspondence and Information Actions | ***General***: EP 400 applies to disability and death cases when the action is independent and involves correspondence action on a letter, e-mail, inquiry, form, document, official notice, etc., which can usually be handled on the basis of existing records and decisions, and a rating or authorization determination is not required for final disposition of the issue created.  ***Examples***:   * Requests for information from the folder (including documents, status, and/or forms) from the following sources * Central Office * VA activities or organization elements * Government agencies (Federal, State, county or other political subdivisions) * service organizations or other individuals when the nature of correspondence is primarily to secure the existing status as a valid claim, or * beneficiaries. * Letters prepared by the ROs, inviting claimants to file for additional benefits for continued dependency status of a child or children attaining age 18. * Actions required when a CAPRI inquiry or *VA Form 10-7131, Exchange of Beneficiary Information and Request for Administrative and Adjudicative Action*, is received requesting information only. * Discontinuance of disability benefits upon the death of the Veteran, correspondence to potential beneficiaries, notice to other agencies or other divisions and review of claims folder to determine whether a claim should be invited. * Reports of change in income, requiring a correspondence reply only.   ***EP 400 will be used to control attorney fee cases.***   * Take the underlying end product and establish a pending EP 400 when award action is taken to pay past due benefits, while withholding 20 percent pending notification to the parties involved. * Clear EP 400 upon payment of withheld amounts and notification to attorneys/claimants.   ***EP 400 will be used to control Inquiry Routing and Information System (IRIS) Response Center (IRC) referrals***.   * Clear EP 400 upon providing the requested information to the IRC via IRIS. * Do not use EP 400 for Veterans Assistance Inquiries (VAIs) handled by the Veterans Service Center (VSC) or the Pension Management Center (PMC).   ***Note***: Historical use for processing claims over one and two years old, after the provisional decision is issued to control the request of Federal and/or private records. Also applies to brokered cases forwarded to VCIP contractors for scanning (see [USB letters 20-13-05 and 20-13-07](http://vbaw.vba.va.gov/usb/letters/usb2013.htm)).  ***Exceptions***:   * Correspondence actions (development letters, notice of actions etc., not involving preparation of correspondence reply only). * Controlled correspondence for Members of Congress, U.S. Government officials, State or local officials (see EP 500). * Benefit claims and letters of protest which have previously received appropriate consideration (see EP 172). |

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| 401, 402, 403, 404, 406, 408 - VBMAP Historical | ***Historical***: Used for cases completed in/under the VBMAP system/contract.   * EP 401 was used for a claim for increase. * EP 402 was used for an original claim with less than eight issues. * EP 403 was used for an original claim with eight or more issues. * EP 404 was used for an original pension claim. * EP 406 was used for a dependency claim. * EP 408 was used for a pension dependency claim. |

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| 405/409 - Fast Track System Historical | ***Historical***: Used to support Agent Orange (AO) claims processed in the Fast Track System.   * EP 405 applied to claims received between September 01, 2010 and October 30, 2010 for one of the three new presumptive conditions based on AO exposure (ischemic heart disease, Parkinson’s disease, and hairy cell and other B-cell leukemias). * EP 409 was established to control claims after a preliminary finding of entitlement was determined and additional development and review was required before the final rating decision was promulgated. * After October 24, 2011, EPs 405/409 are no longer used for this process. The issues are now incorporated into the rating bundle. |

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| 410, 411, 412, 413, 414 - Original Claim Spina Bifida | EPs 410, 411, 412, 413, and 414 apply to original claims received for benefits for a Veteran’s child due to spina bifida secondary to herbicide exposure. |

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| 415, 416, 417, 418, 419 - Original Claim Birth Defects | EPs 415, 416, 417, 418, and 419 apply to original claims received for benefits for a Veteran’s child due to birth defects and diseases secondary to herbicide exposure. |

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| 420, 421, 422, 423, 424 - Reopened Claim Spina Bifida | EPs 420, 421, 422, 423, and 424 apply to reopened claims received for benefits for a Veteran’s child due to spina bifida secondary to herbicide exposure. |

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| 425, 426, 427, 428, 429 - Reopened Claim Birth Defects | EPs 425, 426, 427, 428, and 429 apply to reopened claims received for benefits for a Veteran’s child due to birth defects and diseases secondary to herbicide exposure. |

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| 450, 451, 452, 453, 454 - Review/Claim for Increase Spina Bifida | EPs 450, 451, 452, 453, and 454 apply to a review/claim for increase of a running award for a Veteran’s child related to spina bifida secondary to herbicide exposure. |

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| 455, 456, 457, 458, 459 - Review/Claim for Increase Birth Defects | EPs 455, 456, 457, 458, and 459 apply to a review/claim for increase of a running award for a Veteran’s child due to birth defects and diseases secondary to herbicide exposure. |

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| 470, 471, 472, 473, 474 - NOD Spina Bifida | EPs 470, 471, 472, 473, and 474 apply to NODs pertaining to benefits for a Veteran’s child related to spina bifida secondary to herbicide exposure. |

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| 475, 476, 477, 478, 479 - NOD Birth Defects | EPs 475, 476, 477, 478, and 479 apply to NODs pertaining to benefits for a Veteran’s child related to birth defects secondary to herbicide exposure. |

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| 500 -Special Controlled Correspondence | EP 500 applies to correspondence that is controlled by the RO Director or Veterans Service Center Manager (VSCM)/Pension Management Center Manager (PMCM), such as correspondence from members of Congress, U.S. Government officials, State, or local officials. |

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| 510 - FOIA and Privacy Act Requests | EP 510 applies to requests for release of information under the FOIA/PA (Freedom of Information Act and Privacy Act) which are answered in the VSC/PMC. |

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| **590 - Due Process for Incompetency** | EP 590 applies to all due process periods for proposed incompetency determinations that fall under the Fiduciary Hub’s jurisdiction. Establish an EP 590 with a suspense date 65 days following the release date of the due process notice. |

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| 600 - Predetermination Notice | ***General***: EP 600 applies to all predetermination notices for running awards except IVM (EP 154 and EP 314). EP 600 does not apply to original or reopened claims. EP 600 applies to proposed incompetency determinations only when a running award exists.  ***Setting Up Controls***: At the time a predetermination notice is furnished, clear any pending end product which would normally be completed at this point. Concurrently, establish a pending EP 600 with a suspense date 65 days following the release date of the predetermination notice.  Ensure that a ***companion EP (EP 690/693)***, if necessary, was previously established and remains pending until final action is completed (see M21-1, Part III, Subpart ii, 1.C.6.b).  ***Date of Claim***: For claims establishment purposes, the date of the EP 600 is the date that the EP is established for the proposed adverse action.  ***Disposition***:   * Take final action on the EP 600 no earlier than the 65th day from the date of the notice of proposed adverse action, unless the payee or his/her representative requests immediate adjustment. * If a hearing is requested, continue the EP 600 and defer final action until the hearing is completed, or cancelled for reasons such as failure to show for the hearing or withdrawal of the hearing request. |

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| 680, 681, 682, 683, 684 -Reviews-Ratings Involved | EPs 680, 681, 682, 683 and 684 are authorized on specific Central Office direction and apply to special reviews which require rating activity reviews.   * EP 680 is used for hemodialysis review (see M21-1, Part III, Subpart iv, 4.I.2.j). * EP 681 is used for *Nehmer* Phase II (see [*Nehmer* Supplemental Training, May 3, 2013](http://vbaw.vba.va.gov/bl/20/201/Nehmer%20Addendum%20Updated.pdf), and M21-1, Part IV, Subpart ii, 1.H.9.b). * EP 682 is used for Radiation cases (see M21-1, Part IV, Subpart ii, 1.C.2). * EP 683 is used for SHAD (Shipboard Hazard and Defense) (see M21-1, Part IV, Subpart ii, 1.I.7). * EP 684 is used for Temporary 100 percent disability evaluation reviews (see M21-1, Part III, Subpart iv, 3.C.2.e). * historical use for POW reviews, not under the EP 680 series, and * historical use for BDD claims from pregnant servicewomen. |

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| 685 -Contaminated Drinking Water Claims | EP 685 is used for all appeals based on exposure to contaminated drinking water at Camp Lejeune. All appeals based on contaminated drinking water at Camp Lejeune must be sent to the Louisville RO with the exception of foreign claims.  Special issue indicator (Environmental Hazard – Camp Lejeune) is to be used on all claims (see M21-1, Part IV, Subpart ii, 1.I.6.k). |

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| 686 - Peripheral Neuropathy | EP 686 is used for Peripheral Neuropathy (PN) pursuant to the *Nehmer* stipulation (see M21-1, Part III, Subpart ii.1.H.9.b).  Historically it was used for amyotrophic lateral sclerosis (ALS). The final rule regarding ALS was published March 1, 2012. |

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| 687 - Nehmer | ***Historical***: EP 687 was used for *Nehmer* AO presumptives of ischemic heart disease, Parkinson’s disease, hairy cell leukemia, and other chronic B-cell leukemias, and other diseases under *Nehmer* (see M21-1, Part IV, Subpart ii, 1.H.9.b). |

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| 688 - Mustard Gas | EP 688 is used for mustard gas exposure (see M21-1, Part IV, Subpart ii, 1.F.3.a). |

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| 689 - Control of IDES Process | Used with IDES claim label to control claims during the IDES process (established only at DRAS). Final ratings are completed under EPs 110, 010, or 020.  ***Note***: The date of claim must match the date of signature on *VA Form 21-0819, VA/DOD Joint Disability Evaluation Board Claim* (see M21-1, Part III, Subpart i, 2.D). |

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| 690, 692, 693, 694, 695, 696, 698, 699 - Reviews - Authorization Review Only | ***General***: EPs 690, 692, 693, 694, and 696 are authorized on specific Central Office direction and apply to special reviews which require authorization review only.   * EP 690 is established to control potential overpayment/underpayment for first and third party notification of awards needing review and possible adjustment (see M21-1, Part III, Subpart ii, 1.C.6.b). * EP 692 is used to control Social Security Verification, compensation COLA adjustments, dependency questionnaires, Dependents Educational Assistance and Individual Unemployability continued eligibility. * EP 693 is used to control potential over/under payments based on write-outs (see M21-1, Part III, Subpart ii, 1.C.6.b). * EP 694 is used to restore DIC awards. * ***Historical***: EP 695 was used for cases claiming hypertension related to AO exposure. * EP 696 is used to control pension COLA adjustments. * ***Historical***: EP 698 was used for adjudicating claims based on service in the Gulf War and Southwest Asia. * EP 699 is used for unassociated STR processing (see M21-1, Part IV, Subpart ii, 2.A.2). |

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| 930 - Review, Referrals, Other | ***General***: EP 930 applies to reviews and issues where no other EP is applicable and where the appropriate EP credit has already been taken to include the following   * ***missed issues or prematurely cleared EPs*** - select one of the following claim labels * Non-Rating Control * Rating Control * PMC - Non-Rating Control * PMC - Rating Control, or * PMC - DIC Rvw/Ref/Other   ***Important***: Missed issues are not unadjudicated discovered claims. A missed issue is an issue that was previously placed under EP control but not decided.   * ***correction of previous erroneous actions*** (other than those applicable to EP 960) - select one of the following claim labels * Correction of Local Quality Error * Correction of National Quality Error * PMC - Correction of Local Quality Error * PMC - Correction of National Quality Error * Appeals Control   *Actions to take for missed issues or prematurely cleared EPs and corrections of previous erroneous actions*:   * If a subsequent claim is received while an EP 930 is pending for the same contention, process the claim under the pending EP 930. * If the new claim is for a *different* contention or claim type (rating vs. non-rating) * establish the appropriate rating or non-rating EP, and * leave the EP 930 pending for correction of the error. * If a rating or non-rating EP is pending, and a missed issue is identified, then establish EP 930 to control the missed issue.   ***Note***: EP 930 and the appropriate rating or non-rating EP can be pending concurrently in these scenarios.   * ***claimants on active duty who are patients in VAMCs awaiting discharge from military service*** (see M21-1, Part III, Subpart i, 2.A.1.e). * for initial control only - use the claim label *DRAS Rvw/Ref/Other*, and * cancel when notice is received that the claimant has been discharged from active duty. * EP 110 (or EP 010) should then be established using the date the notification of discharge was received as the date of claim.   ***Reminders***:   * The contention on a new claim must be validated as being different from the contention on the EP 930 prior to establishing the rating or non-rating EP. * The appropriate claim label must be used as shown in the chart above. * The specific contention(s) must be added in MAP-D or VBMS. * The date of claim for EP 930 must match the date of claim for the underlying EP prematurely cleared or incorrectly processed. * EP 930 does not apply to a missed appeal issue; those should be controlled under an EP 170. |

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| **934 - Provisional Ratings Administrative Review** | EP 934 is used to control administrative reviews of provisional rating decisions that were issued as part of VBA’s oldest claim initiative from April to November 2013.  ***Note***: Provisional rating decisions were authorized by [VBA Letters 20-13-05, *Guidance Regarding Special Initiative to Process Rating Claims Pending over Two Years*](http://vbaw.vba.va.gov/usb/letters/2013/VBA-Letter-20-13-05.doc) dated April 19, 2013, and [20-13-07, *Guidance Regarding Special Initiative to Process Rating Claims Pending over One Year*](http://vbaw.vba.va.gov/usb/letters/2013/VBA-Letter-20-13-07.doc) dated June 21, 2013. The authority to issue provisional ratings was rescinded as of November 8, 2013 per [VBA Letter 20-13-18, *Cessation of Authority for Use of Provisional Ratings*](http://vbaw.vba.va.gov/usb/letters/2013/VBA-Letter-20-13-18.doc), dated December 11, 2013. |

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| 939 - Records Incident | ***Historical***: Used for special temporary procedures in response to the October 2008 records incident. |

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| 960 - Administrative Error Cases | EP 960 applies to administrative errors under 38 CFR 3.500(b). Use EP 960 to make corrections to the master record. The appropriate claim label should be used to identify whether it is a VSC or PMC related action. |

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| 1000 - IA Field Exam - Original | EP 1000 applies to original initial appointment field examinations (Fiduciary Beneficiary System (FBS) work process codes 511, 512, 516, and 517). |

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| 1001 - IA Field Exam - Successor | EP 1001 applies to *successor* initial appointment field examinations (FBS work process codes 513, 514, 518, and 519). |

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| 1002 - FB Personal Field Exam - Scheduled | EP 1002 applies to scheduled fiduciary-beneficiary field examinations conducted by personal visit (FBS work process codes 522 and 527). |

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| 1003 - FB Personal Field Exam - Unscheduled | EP 1003 applies to *unscheduled* fiduciary-beneficiary field examinations conducted by personal visit (FBS work process codes 522 and 527). |

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| 1004 - FB Alternate Supervision Field Exam | EP 1004 applies to fiduciary-beneficiary field examinations conducted by letter and/or telephone (FBS work process code 531). |

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| 1005 - Non-Program/Special Field Exam | EP 1005 applies to non-fiduciary program and special field examinations (FBS work process codes 540 and 545). |

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| 1006 - Accountings Audited/Prepared | EP 1006 applies to fiduciary accountings audited or prepared (FBS work process codes 560 and 565). |

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| 1701 - Telephone Interviews | EP 1701 applies to telephone interviews (incoming only). |

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| 1720 - Personal Interviews - At Office (RO or Outbased) | EP 1720 applies to Personal Interviews - conducted at the office (RO or Outbased). A personal interview is a face-to-face conversation with a claimant to provide information, advice, or assistance relating to VA benefits. Report as one case regardless of the number of topics discussed or number of persons present during the interview. |

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| 1721 - Personal Interviews - Away from Office | EP 1721 applies to personal interviews conducted away from the office. An away from Office interview is a personal interview conducted at any place other than an RO, VAMC, VA office (VAO), VA outpatient clinic (VAOPC), or VA Military Services office location.  ***Examples***: Itinerant service at military facilities, senior centers, job fairs, and similar locations.  ***Exceptions***: Interviews conducted as part of field examinations. |

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| 1722 - VAMC Personal Interviews | EP 1722 applies to personal interviews with in-patients conducted at VAMCs. |