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**Chapter 1. History And Jurisdiction**

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**1.01 DISABILITY INSURANCE BENEFITS RECORD**

During World War II and the years immediately following, claims for waiver of premiums were filed in a DIC (disability insurance claims) folder, which was identified by the claim number. At that time, the insurance folder was not combined with the DIC folder. A copy of the waiver award was placed in the insurance folder. At a later date, about 1950, the file containing a claim for waiver was combined with the insurance file and a DIB (disability insurance benefits) folder (green) was established under the insurance number. During August 1976, the establishment of the DIB folder (green) was discontinued. All disability insurance benefits material is now filed on the right side of the insurance folder.  See M29-1, Part 8 – Records for additional information on requesting retired paper folders.

**1.02 DISABILITY DECISIONS**

1. Total Disability with Application for S-DVI – VCE/SVCE reviews the SDVI applications and makes the determination on whether waiver of premiums can be approved, or, if additional evidence is required.

***Note:****If VCE is processing the SDVI application, they, must refer the disability determination to the VCE/SVCE.*

1. S-DVI Already Inforce On a Premium Paying Basis, Formal or Informal Waiver Application Received at a Late Date - VCE/SVCE reviews the SDVI applications and makes the determination on whether waiver of premiums can be approved, if additional evidence is required.

**1.03 CONTROL OF PENDING S-DVI WAIVER CLAIMS**

Pending S-DVI Waiver claims are controlled by setting an electronic 45-day diary for follow up in VA Insurance Systems.  A task is generated from the diary.   If evidence comes in before the follow-up task is generated, the VCE/SVCE ill approve or disapprove the claim with appeal rights.  If evidence does not come in after the follow-up task is generated, the VCE/SVCE will disapprove the claim with appeal rights.

**1.04 JURISDICTION OF ASSISTANT DIRECTOR, INSURANCE PROGRAM**

 **MANAGEMENT DIVISION, VA INSURANCE CENTER, PHILADELPHIA**

The Assistant Director, Insurance Program Management is responsible for the development of policies and technical standards with reference to claims for disability insurance benefits. The Assistant Director, Insurance Operations will refer all questions as to the proper application of approved policies and technical standards to the Assistant Director, Insurance Program Management.

**1.05 CASES OVER WHICH INSURANCE PROGRAM MANAGEMENT DIVISION HAS**

 **JURISDICTION**

Insurance Program Management (290) has jurisdiction over the following types of cases:

1. Unusual or complex cases when an advisory opinion is requested by Insurance Operations.

1. When a case is in litigation and where, prior to judgment, reconsideration is requested by the Department of Justice or the Office of the General Counsel.

1. Cases in which judgments have been rendered in favor of the government when further claim is made regarding total and permanent disability or with reference to the Veterans' condition as found at the time of the judgment.

1. Litigated cases in which initial action is required pursuant to judgment regarding total and permanent disability benefits.

1. Cases involving the question of fraud where there is the possibility that the Veteran's mental condition makes it questionable whether the insured understood the nature of his or her action.  This can be on cases of living or deceased insureds.

1. Cases in which the insured suffers from a high degree of disability and has disappeared under circumstances which make it probable that he or she is dead, although the evidence is not sufficiently definite to make a finding of death.

1. Claims filed by insureds who are or have been employed by VA.

1. Claims filed by insureds who have been determined to be fugitive felons in VA records.

1. Claims filed by insureds who have Privacy Act or Freedom of Information Act requests in to the Insurance Center.

1. Claims in which a referral to VA’s Office of Inspector General has been made or will be made.

1. Claims in which a power of attorney or guardian are acting on behalf of the insured and it is unclear if the supporting documents provide appropriate authority for the agent to act on behalf of the insured.

**1.06 JURISDICTION OF INSURANCE LIVE CLAIMS SECTION**

The Live Claims Section in the Insurance Operations Division, VA Insurance Center, is responsible for performing the following functions:

1. Jurisdiction over claims for total disability and total disability income benefits under government life insurance.  This includes original decisions, continuing, granting or denying benefits and review decisions terminating benefits.

1. Fraud determinations on obtaining and reinstating insurance involving living veterans, where the question of fraud occurs prior to, or subsequent to, the filing of claims for disability insurance benefits.  The only two exceptions to this are:

1.    The Veteran’s mental condition makes it questionable whether he comprehended the nature of his or her action.

2.    In death cases when claims for disability insurance benefits are adjudicated prior to the adjudication of the death benefit.

3.    In both exceptions, Program Management has jurisdiction under 1.12.

1. Decisions on questions of mental competency in connection with disability benefits.
2. Preparation of amended or supplemental disability benefits based on new and material evidence or clear and unmistakable error.
3. Certifying appeals regarding disability benefits to the Board of Veterans Appeals.
4. Total disability determinations in connection with conversion from an endowment plan, change of plan, cash surrenders, loans and paid-up insurance.