



U.S. Department of Veterans Affairs

Philadelphia Pension Management Center – Your Duty and Mine: VA Helps You, You Help Vets

Briefed by:

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U.S. Department
of Veterans Affairs

Who We Are: Philadelphia PMC

- Service Area: CT, DE, FL, GA, MA, MD, ME, NC, NH, NJ, NY, PA, PR, RI, SC, VA, VT, WV, the Philippines, and any foreign case **not** from Mexico, Central and South America, or the Caribbean
- **375** full time claims processing/adjudication employees
- **67** employees in National Pension Call Center (NPCC)



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Fastest Method

- The address that claimants and facilities should be using:

Department of Veterans Affairs

Claims Intake Center

ATTN: Philadelphia Pension Center

PO Box 5206

Janesville, WI 53547-5206

Fax: 1-844-655-1604



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Pension Overview

- Eligibility is based on:
 - Needs-based benefit paid to a wartime Veteran because of permanent and total disability or reaching age 65
 - Surviving spouse or child because of a wartime Veteran's death
- Entitlement is based on:
 - Veteran's character of discharge
 - Wartime/active duty service requirements
 - Income and net worth

Survivor's Pension

- Eligibility is based on:
 - Needs-based, tax-free benefit paid to un-remarried surviving spouse or unmarried children
- Entitlement is based on:
 - Deceased Veteran must have wartime service
 - Claimant must meet the income limits
- For children to qualify they must be:
 - under 18, or under age 23 if attending school or
 - permanently incapable of self-support due to disability before age 18 (helpless child)



VA and Sales Managers

- Asking leads about military status pays five major dividends for your facility and your client...
- VA Pension is **NOT** military retirement!!



Minimum Service Requirement

- For all wartime periods before the Gulf War Era
 - 90 days of active duty and one day of wartime service
- Any amount of time during a period of war and
 - was discharged for a disability incurred or aggravated in service, or
 - had a service-connected disability at time of discharge that would have justified a discharge for disability
- Veterans entering service after September 7, 1980 (Gulf War Era)
 - 24 months of minimum service *or*
 - Full period for which the Veteran was called to active duty



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Type of Discharge

- Honorable - **OK**
- Under honorable conditions (general) - **OK**
- Under other than honorable conditions
 - **VA determination required**
- Dishonorable – **not OK** (in most circumstances)

CAUTION: NOT TO BE USED FOR IDENTIFICATION PURPOSES THIS IS AN IMPORTANT RECORD SAFEGUARD IT ANY ALTERATIONS IN SHADED AREAS RENDER FORM VOID

CERTIFICATE OF RELEASE OR DISCHARGE FROM ACTIVE DUTY

1. NAME (Last, First, Middle) 2. DEPARTMENT, COMPONENT AND BRANCH 3. SOCIAL SECURITY NO.

4.a. GRADE, RATE OR RANK 4.b. PAY GRADE 5. DATE OF BIRTH (YYMMDD) 6. RESERVE OBLIG. TERM DATE

7.a. PLACE OF ENTRY INTO ACTIVE DUTY 7.b. HOME OF RECORD AT TIME OF ENTRY (City and state, or complete address if known) Year Month Day

8.a. LAST DUTY ASSIGNMENT AND MAJOR COMMAND 8.b. STATION WHERE SEPARATED

9. COMMAND TO WHICH TRANSFERRED

11. PRIMARY SPECIALTY (List number, title and years and months in specialty. List additional specialty numbers and titles involving periods of one or more years.)

12. RECORD OF SERVICE

	Year(s)	Month(s)	Day(s)
a. Date Entered AD This Period			
b. Separation Date This Period			
c. Net Active Service This Period			
d. Total Prior Active Service			
e. Total Prior Inactive Service			
f. Foreign Service			
g. Sea Service			
h. Effective Date of Pay Grade			

13. DECORATIONS, MEDALS, BADGES, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED (All periods of service)

14. MILITARY EDUCATION (Course title, number of weeks, and month and year)



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Income Requirements

- Most gross income is countable*
 - Embedded list not considered all-inclusive
- If a claimant's household income exceeds the VA prescribed limit, then
 - VA Pension → not payable
- If a claimant's household income does *not* exceed the VA prescribed limit, then
 - VA Pension → payable
 - VA Pension rate will be the difference between the claimant's income and VA income limit



Countable
Income



2018 Pension Rate
Chart



Income Calculation Sample

- Tarzan's Social Security: \$1,400 (gross amounts)
- Jane's Social Security: \$600

$\$1,400 + \$600 = \$2,000$, then $\$2,000 \times 12 = \$24,000$ in countable income.

- | | |
|-----------------------------------|-----------------------------------|
| • Tarzan's 2018 Medical Expenses: | Jane's 2018 Medical Expenses: |
| \$134/month for Part B | \$127/month for Part B |
| \$70/month for Part D | \$189/month for medical insurance |
| \$235/month for medical insurance | |

$\$134 + \$70 + \$235 + \$127 + \$189 = \755 /month, $\$755 \times 12 = \$9,060$
 $\$9,060 - \$863 = \$8,197$ in countable medical expenses.

$\$24,000 - \$8,197 = \$15,803$ is Income for VA Purposes (IVAP).

$\$15,803$ lower than $\$17,241$, the Maximum Annual Pension Rate (MAPR).

Difference is $\$2,158$. Divide by 12 for $\$179$ /month.

Medical Expenses

- Unreimbursed medical expenses reduce countable income
- 5% deductible
- Use VA Form 21P-8416 to claim unreimbursed medical expenses
 - VA Form 0779 needed for ALF/NH expenses
- All expenses related to medical care are allowed. For example:
 - Prescriptions and over the counter medications
 - Doctor/dental/hospital visits and tests
 - Medical insurance
 - At-Home care, nursing home care and assisted living care
 - For a list of common expenses allowed, please refer to [M21-1 V.iii.1.G.2.c](#)

OMB Control No. 2900-0047
Required Fields: * 001-0001

Department of Veterans Affairs

MEDICAL EXPENSE REPORT

1. NAME OF VETERAN (Print name, last) _____ 2. VA FILE NUMBER _____

3A. NAME AND ADDRESS OF CLAIMANT _____ 3B. CHANGE OF ADDRESS? If a change in last 18 months, provide address on back of this form. 3C. EMAIL ADDRESS (if available) _____

4. VETERAN/RACIAL CATEGORY: _____

NOTE: Family medical expenses actually paid by you may be deductible from your income. Report the actual amount of unreimbursed medical expenses you paid for yourself or relatives who are members of your household. Do not report any expenses you did not pay or expenses for which you were or will be reimbursed. Any expenses reasonably related to medical or dental care may be allowed as medical expenses. Examples of allowable medical expenses include the following: hospital expenses, office visits, drugs and medicines, x-rays, mental care, medical insurance premiums (including the Medicare deduction), hearing aids, hearing instrument fees, home health services, and transportation for medical purposes (24¢ per mile, plus parking and tolls for both driver and passenger). If you are not sure whether a particular expense can be allowed, furnish a complete description of the purpose of the expense. We will let you know if an expense cannot be allowed. If more space is needed, attach a separate sheet of paper with columns corresponding to those on this form. Be sure to write your VA file number on any attachments.

You may be asked to verify the amounts you actually paid, so keep all records of any documentation of payments for at least 3 years after we make a decision on your medical expense claim. If you are unable to provide documentation of the claimed medical expense when asked to do so by VA, your benefits will be retroactively reduced or terminated.

Report medical expenses for the period _____ thru _____ If no dates appear on this line, refer to the accompanying letter or Eligibility Verification Report for the dates your medical expense report should cover.

5. CATEGORIZATION OF MEDICAL EXPENSES

A. PURPOSE (Illness or Hospital Charge, Employee's Major Risk, Medical Research, etc.)	B. AMOUNT PAID (BY YOU)	C. DATE PAID (MM/DD/YY)	D. NAME OF PROVIDER (Name of doctor, dentist, hospital, lab, etc.)	E. FOR WHOM PAID (Vet, spouse, child)
MESSAGE: MAIL TO PROVIDER MEDICAL INSURANCE				

IMPORTANT: Be sure to sign this form in item 7A on the reverse side. Unsigned reports will be returned.

VA FORM 21-8416 SEP 2010 21-8416 REVISED VA FORM 21-8416, MAY 2006, WHICH WILL NOT BE USED.



Definitions

- ***Assisted Living Facility (ALF)***
 - Assists people who need help with daily activities
- ***Independent Living Facility (ILF)***
 - People can generally live independently, and may *or* may not need help with daily activities
- ***Custodial Care***
 - Person with a physical, mental, developmental, or cognitive disorder requires care or assistance on a regular basis to be protected from hazards or dangers incident to his or her daily environment, or
 - Assistance with two or more activities of daily living (ADLs)



Assisted Living Expenses

- Deductible as a medical expense
 - Must be entitled to receiving housebound or aid and attendance benefits, or
 - A licensed physician has certified the person has a medical condition that makes such a level of care necessary
- If a Veteran's spouse is in an assisted living, the expense can be considered as long as a licensed physician has certified the person has a medical condition that makes such a level of care necessary



Independent Living Expenses (ILF)

- Room and Board expenses from an ILF are acceptable if:
 - The individual's physician states in writing that the claimant must reside in *that* facility and separately contract for custodial care with a third-party provider
- Or...
 - The facility provides the individual with custodial care in the form of assistance with two or more activities of daily living



Net worth

Definition

- Considered when determining *entitlement* to VA Pension
- Claims filed after today have new net worth counting rules (no more subjectivity!)
- VA has aligned itself to the Community Spouse Resource Allowance (CSRA) for Medicaid purposes:
 - Indexed for inflation
 - Changes annually at Social Security COLA percentage
 - Claimant must exceed amount to deny benefits
 - 2018 amount is \$123,600



Aid and Attendance (A&A)

- A&A is for Veterans and survivors who are:
 - Eligible for VA pension *and*
 - Require the aid and attendance of another person

To qualify:

- Veteran or survivor should be:
 - A patient in a nursing home due to mental or physical incapacity, or
 - Have limited eyesight, or
 - Require help when bathing, feeding, dressing, etc.

Forms required to apply:

- VA Form 21-2680
- VA Form 21-0779 (nursing home clientele only)



Popular VA Forms

- **Alternate Signer Certification:** [VA Form 21-0972](#)
- **Examination for HB or A&A:** [VA Form 21-2680](#)
- **Intent to File:** [VA Form 21-0966](#)
- **Individual Representation:** [VA Form 21-22A](#)
- **Medical Expense Report:** [VA Form 21P-8416](#)
- **Nursing Home Information:** [VA Form 21-0779](#)
- **Spouse/Child Death Benefits:** [VA Form 21-534EZ](#)
- **Third Party Disclosure:** [VA Form 21-0845](#)
- **Veteran Live Pension:** [VA Form 21-527EZ](#)
- **VSO Representation:** [VA Form 21-22](#)

The most updated forms can be found at:

<https://www.va.gov/vaforms/>



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Tips

- Always send DD214 and death certificate
- Always state interest earned
 - Bank statements not needed
- When submitting medical expenses keep it simple and provide all information as requested
- Always provide complete marital history
 - VA cannot grant benefits if spouse is unable to provide her own marital history
 - Number of marriages should match



Top 10 Common Claim Delays

1. Wrong signature or no signature
2. Incomplete applications
3. Not enough information to identify the Veteran
4. Wrong information
5. Wrong forms or outdated forms used to apply
6. Claimant doesn't check off which benefit
7. Incomplete information
8. If applying for A&A - please submit medical evidence
9. Failed to submit nursing home information
10. Variable billing based on levels of care



How Can We Help You? Questions?



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