BOCEPHIS, Henry - eCase Automatic Feedback

Instructions: Please review the eCase provided and determine the following:

TMS# for objectives: XXXXXXXXXX

Date of Receipt Page Number: 010 Identify the date of receipt you used for each of these documents in /* firstmiddlelastsuffix */'s eCase. *VA Form 21-686c* Date Received: /* receivedon */ 02/14/2021 *VA Form 21-22* Date Received: /* receivedon */ 02/14/2021 **Correct Answer Feedback**: Correct. The date of receipt is the date the documents were received by a VA facility. M21-1 III.ii.1.C – Initial Screening Policies. **Incorrect Answer Feedback**: That is incorrect. The date of receipt for these documents is /* receivedon */. The date of receipt is the date the documents were received by a VA facility. M21-1 III.ii.1.C – Initial Screening Policies.	
Any answer, continue to 020	
Representation Page Number: 020 Did the Veteran appoint a Power of Attorney (POA)? • Yes • No **Correct Answer Feedback**: Good job! A properly completed and executed *VA Form 21-22, Appointment of Veterans Service Organization as Claimant's Representative*, shows the service organization as representative. M21-1 I.3.A - General Information on Power of Attorney (POA) **Incorrect Answer Feedback**: Sorry, that is incorrect. According to the *VA Form 21-22*, American Legion (074) is the appointed representative, has access to VBMS and authorization to change the Veteran's mailing address. Use VBMS to reflect the appointment of a	

POA, as well as the POA's permission to change a claimant's address and/or access to a Veteran's eFolder. M21-1 III.ii.3.C - System Updates	
Correct answer, go to 025	Incorrect answer, jump to 030

Representation
Page Number: 025

What organization did /* firstmiddlelastsuffix */ select as /* hisher */ POA?
- Disabled American Veterans (083)
- Vietnam Veterans of America (070)
- <mark>American Legion (074)</mark>
- Military Order of the Purple Heart (089)
- Veterans of Foreign Wars (097)

Does the organization have access to VBMS?
- <mark>Yes</mark>
- No

Did /* firstmiddlelastsuffix */ authorize /* hisher */ representative to change /* hisher */ mailing address?
- <mark>Yes</mark>
- No

Correct Answer Feedback:
Awesome! Use VBMS to reflect the appointment of a POA, as well as the POA's permission to change a claimant's address and/or access to a Veteran's eFolder. M21-1 III.ii.3.C - System Updates

Incorrect Answer Feedback:
Incorrect. According to the *VA Form 21-22*, American Legion (074) is the appointed representative, has access to VBMS and authorization to change the Veteran's mailing address. Use VBMS to reflect the appointment of a POA, as well as the POA's permission to change a claimant's address and/or access to a Veteran's eFolder. M21-1 III.ii.3.C - System Updates

Any answer, continue to 030.

Substantially Complete Claim
Page Number: 030

Is the claim substantially complete?
- <mark>Yes</mark>
- No

Correct Answer Feedback:
Great job! This claim meets the substantially complete criteria found in M21-1 I.1.A.4.f - Definition: Substantially Complete Application.

Incorrect Answer Feedback:
Incorrect. This claim meets the substantially complete criteria found in M21-1 I.1.A.4.f - Definition: Substantially Complete Application.

Any answer, continue to 040	

Application Version
Page Number: 040

Is the version of the form(s) submitted acceptable?
- Yes
- No

Correct Answer Feedback:
Great job! This claim was submitted on a prescribed form used for dependents listed in M21-1 III.ii.2.B.1.b. Requirements for a Complete Claim Received on or After March 24, 2015. The JUN 2017 version of *VA Form 21-686c* may be accepted in this case because it was submitted electronically. M21-1 III.ii.1.C.8.a - Accepting Outdated Versions of a VA Form.

Incorrect Answer Feedback:
Incorrect. This claim was submitted on a prescribed form used for dependents listed in M21-1 III.ii.2.B.1.b. Requirements for a Complete Claim Received on or After March 24, 2015. The JUN 2017 version of *VA Form 21-686c* may be accepted in this case because it was submitted electronically. M21-1 III.ii.1.C.8.a - Accepting Outdated Versions of a VA Form.

Any answer, continue to 050	

Claims Establishment
Page Number: 050

What EP(s) and claim label(s) did you apply to /* firstmiddlelastsuffix */'s claim at CEST? Select all appropriate End Product(s) (EP) and claim label(s) that you established.

- 020CPHLP – Helpless child
- 130APTNMT – Apportionment
- 130DPNDCY – Dependency
- 130DPV0538 – Dependency Verification – 0538
- 130DRASDP – DRAS Dependency
- 130RD – Removal of Dependent
- 400CORRC – Correspondence

- 400IA – Incomplete Application
- 400RA – Request for Application

Correct Answer Feedback:
Awesome! EP 130 – Dependency applies to all actions involving dependency determinations and is the appropriate choice. M21-4 Appendix B End Product Codes and Work Rate Standards for Quantitative Measurement and M21-1 III.ii.3.B - Claims Establishment.

Incorrect Answer Feedback:
Incorrect. EP 130 – Dependency applies to all actions involving dependency determinations and is the appropriate choice. M21-4 Appendix B End Product Codes and Work Rate Standards for Quantitative Measurement and M21-1 III.ii.3.B - Claims Establishment.

Any answer, continue to 060.	

Date of Claim
Page Number: 060

What is the Date of Claim (DOC)?
- /* receivedon */ 02/14/2021

Correct Answer Feedback:
Correct. The date of claim is the date VA received the *VA Form 21-686c*. M21-1 III.ii.2.B - Claims for Disability Compensation and-or Pension, and Claims for Survivors Benefits and 38 CFR 3.155(d)(1)

Incorrect Answer Feedback:

Sorry, that is incorrect. The correct date of claim is /* receivedon */, which is the date VA received the *VA Form 21-686c*. M21-1 III.ii.2.B - Claims for Disability Compensation and-or Pension and Claims for Survivors Benefits and 38 CFR 3.155(d)(1)

Any answer, continue to 070.	

Entering Claimed Contentions into VBMS
Page Number: 070

Select the contention(s) you added to VBMS for the /* firstmiddlelastsuffix */ eCase. (Select all that apply.)

- Add dependents
- Add spouse and child
- Dependency claim
- Dependency claim for Christopher
- Dependency claim for Joseph

- Dependency claim for Henry

Correct Answer Feedback:
Correct. These are the dependents that the Veteran claimed on /* hisher */ *VA Form 21-686c.* M21-1 III.iii.1.F.2.a – Identifying Contentions

Incorrect Answer Feedback:
Incorrect. Create separate contentions for each dependent, as shown in M21-1 III.iii.1.F.2.a – Identifying Contentions.

The dependents that the Veteran claimed on /* hisher */ *VA Form 21-686c* are:
- Dependency claim for Christopher
- Dependency claim for Joseph

Entering Claimed Contentions into VBMS
Page Number: 075

For each of the dependents found in /* firstmiddlelastsuffix */'s claim, identify the classification, contention date and type, whether it is a medical contention, and any applicable special issue indicators. For the purposes of training, place any Local Mentor Review special issue indicator on the first issue.

Dependency claim for Christopher
Classification: Administrative Issue
Date: /* receivedon */ 02/14/2021
Type: New
Medical?: No
Special Issue Indicators: Local Mentor Review

Dependency claim for Joseph
Classification: Administrative Issue
Date: /* receivedon */ 02/14/2021
Type: New
Medical?: No
Special Issue Indicators: N/A

Correct Answer Feedback:
Good job. You entered the correct classification, date, type, and medical fields for the contention(s). Additionally, apply the Local Mentor Review special issue indicator when a draft letter is completed and requires mentor review. M21-1 III.iii.1.F.2 – Utilizing Contentions and Special Issue Indicators Associated With the Claimed Issues, M21-4 Appendix C.3 – Special Issues

Incorrect Answer Feedback:

Incorrect. The classification, type, and medical fields for dependency claims are required components when entering a contention. Additionally, apply the Local Mentor Review special issue indicator when a draft letter is completed and requires mentor review. M21-1 III.iii.1.F.2 – Utilizing Contentions and Special Issue Indicators Associated With the Claimed Issues, M21-4 Appendix C.3 – Special Issues

You should have made the following selections for each contention:

Dependency claim for Christopher
Classification: <mark>Administrative Issue</mark>
Date: /* receivedon */ 02/14/2021
Type: <mark>New</mark>
Medical?: <mark>No</mark>
Special Issue Indicators: <mark>Local Mentor Review</mark>

Dependency claim for Joseph
Classification: <mark>Administrative Issue</mark>
Date: /* receivedon */ 02/14/2021
Type: <mark>New</mark>
Medical?: <mark>No</mark>
Special Issue Indicators: <mark>N/A</mark>

Any answer, continue to 080.	

Eligibility to Dependency
Page Number: 080

Is /* firstmiddlelastsuffix */ eligible to receive additional compensation for /*hisher*/ dependents based on /*hisher*/ disability evaluation?
- <mark>Yes</mark>
- No

Correct Answer Feedback:
Great Job! The claim documents show /* firstmiddlelastsuffix */ has a combined disability rating of at least 30 percent. 38 CFR 3.4(b)(2)

Incorrect Answer Feedback:
Incorrect. The claim documents show /* firstmiddlelastsuffix */ has a combined disability rating of at least 30 percent. 38 CFR 3.4(b)(2)

Any answer, continue to 090.	

Evidence Sufficient to Determine Dependency
Page Number: 090

Is the evidence of record (form and/or additional documentation) sufficient proof to establish dependency for the claimed dependent(s)?

- Yes
- No

Correct Answer Feedback:
Correct. Not all the information requested on the VA Form 21-686c was provided for each dependent claimed and there is no other documentation of record providing the incomplete information. M21-1 III.iii.5.A.2.b - Accepting Entries a Claimant Makes on VA Form 21-686c as Proof of an Event and M21-1 III.iii.5.A.4.b - Handling an Incomplete Form – Disability Compensation or DIC

Incorrect Answer Feedback:
Incorrect. Not all the information requested on the VA Form 21-686c was provided for each dependent claimed and there is no other documentation of record providing the incomplete information. M21-1 III.iii.5.A.2.b. Accepting Entries a Claimant Makes on VA Form 21-686c as Proof of an Event and M21-1 III.iii.5.A.4.b. Handling an Incomplete Form – Disability Compensation or DIC

You should have determined the following information is missing or incomplete:

- Complete Social Security Numbers (SSNs) for Christopher and Joseph
- Complete date of marriage to Christopher

Any answer, continue to 100.

Determining Whether Development is Required
Page Number: 100

Is development to the claimant required to obtain any information not provided on the VA Form 21-686c?

- Yes
- No

Correct Answer Feedback:
Correct. Since the submitted version of the *VA Form 21-686c* predates the SEP 2018 version, additional development for the incomplete dependent information is necessary. M21-1 III.iii.5.A.4.b. Handling an Incomplete Form – Disability Compensation or DIC

Incorrect Answer Feedback:
Incorrect. Since the submitted version of the *VA Form 21-686c* predates the SEP 2018 version, additional development for the incomplete dependent information is necessary. M21-1 III.iii.5.A.4.b. Handling an Incomplete Form – Disability Compensation or DIC

Since the /* firstmiddlelastsuffix */ instructions indicate telephone contact was unsuccessful, you should have determined a subsequent development letter is required with the following development actions: • Claimant – date of current marriage needed • Dependent Social Security Number SSN needed	
If correct, continue to 110.	**If incorrect, continue to 140.**
Required Development Actions Page Number: 110 What development action(s) is/are required on the /* firstmiddlelastsuffix */ eCase? (Select all that apply.) • Send the Veteran a Request For Application (RFA) letter • Send the Veteran an Incomplete Application letter • <mark>Call the Veteran to obtain the incomplete information</mark> • <mark>VBMS note regarding unsuccessful telephone contact</mark> • <mark>Send the Veteran a Subsequent Development letter to request the incomplete information</mark> • N/A – no development is required **Correct Answer Feedback**: Great job! Telephone contact should first be attempted and documented before sending the Veteran a letter requesting the incomplete dependent information. M21-1 III.iii.5.A.4.b. Handling an Incomplete Form – Disability Compensation or DIC **Incorrect Answer Feedback**: Sorry, that is not correct. Telephone contact should first be attempted, but as training instructions indicate, any contact is unsuccessful. As a result, the unsuccessful contact should be documented in VBMS notes and followed up by sennding the Veteran a letter requesting the incomplete dependent information. M21-1 III.iii.5.A.4.b. Handling an Incomplete Form – Disability Compensation or DIC	
Any answer, continue to 120.	
Telephone Development Page Number: 120 For the /* firstmiddlelastsuffix */ case, how should the attempted telephone contact be documented? • *VA Form 27-0820*	

- *VA Form 21-686c*
- <mark>Permanent note in VBMS</mark>
- N/A – documentation not required

Correct Answer Feedback:
Correct. Document unsuccessful attempts to contact a claimant by telephone as a permanent note in VBMS. M21-1 III.iii.1.B.1.e. Documenting Information Received by Telephone

Incorrect Answer Feedback:
Sorry, that is not correct. Document unsuccessful attempts to contact a claimant by telephone as a permanent note in VBMS. M21-1 III.iii.1.B.1.e. Documenting Information Received by Telephone

Any answer, continue to 130.	
Subsequent Development Letter/Tracked Items Page Number: 130 Which VBMS Development Action(s) would you select to create your subsequent development letter and generate tracked items? (Select all that apply.) <mark>Claimant - date of current marriage needed</mark> <mark>Dependent Social Security Number (SSN) needed</mark> - Evidence of adoption needed - Claimant – date of divorce needed - Stepchild – proof of marriage to parent needed - Married child – proof of termination needed - Dependent date of birth needed - School – VA Form 21-674 needed - Address of dependent needed - Claimant – location of current marriage needed - Claimant marital history inconsistent – need 21-686c - Helpless – chld mbr household before 18 needed **Correct Answer Feedback**: Awesome! Selecting these specific Development Actions in a Subsequent Development Letter in VBMS will automatically generate the required tracked items when the letter is finalized. M21-1 III.iii.1.F.3 – Utilizing Tracked Items to Document Development and M21-1 III.iii.5.A.4.b. Handling an Incomplete Form – Disability Compensation or DIC **Incorrect Answer Feedback**: Incorrect. Selecting these specific Development Actions in a Subsequent Development Letter in VBMS will automatically generate the required tracked items when the letter is finalized. M21-1 III.iii.1.F.3 – Utilizing Tracked Items to	Correct answer(s) + 5 distractors

Document Development and M21-1 III.iii.5.A.4.b. Handling an Incomplete Form – Disability Compensation or DIC You should have determined the following development actions/tracked items are required: • Claimant - date of current marriage needed • Dependent Social Security Number (SSN) needed	
Any answer, continue to 140.	
Claim Status Page Number: 140 What is the claim status? • Ready for Decision • Rating Decision Complete • Secondary Ready for Decision • Ready to Work • <mark>Open</mark> **Correct Answer Feedback**: Correct! The current status of this claim is "Open" due to the currently pending development for incomplete dependent information. M21-4, Appendix D, Index of Claim Stage Indicators and M21-1 III.iii.1.F.4 – Updating Claim Status **Incorrect Answer Feedback**: Sorry, that is not correct. The current status of this claim is "Open" due to the currently pending development for incomplete dependent information. M21-4, Appendix D, Index of Claim Stage Indicators and M21-1 III.iii.1.F. Updating Claim Status	
End of test	End of test