VSR eCase Generator Worksheet

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| **Sequence** | **Initial Claim** |
| **Name** | **COLLINS, Franklin** |
| **Claim #:** | **6Y17XX00 – TRA-35-4701** |
| **Branch of Service** | **Army** |
| **Period of Service** | **See DD214** |
| **Type of Claim** | **EP 110; Initial** |
| **Contentions** | **Depression, Hearing loss, Tinnitus, Right shoulder condition, Left knee**  **condition** |
| **FDC Y/N** | **Y** |
| **FDC Exclusion Y/N** | **Y** |

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| **VA Forms and Revision**  **Date** | **Revision Date** | **Required: Y/N and Details** |
| **VA Form 21-526EZ** | 09/2019 | **Y** |
| **VA Form 21-22** | 02/2019 | **Y, AL Y/N (074)** |
| **VA Form 21-4138** | 06/2021 | **Y** |
| **VA Form 21-4142** | 07/2021 |  |
| **VA Form 21-0966** | 08/2018 |  |
| **VA Form 21-686c** | 09/2018 |  |
| **VA Form 21-674** | 06/2018 |  |
| **VA Form 21-0538** | 02/2021 |  |
| **VA Form 21-0781** | 07/2017 |  |
| **VA Form 21-0781a** | 07/2017 |  |
| **Standard 5103 Letter** |  |  |
| **3101** |  |  |
| **BIRLS SHARE Screen** |  |  |
| **Rating Decision** |  |  |
| **CAPRI Records** |  |  |

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| **Supporting Documents** | **Required Y/N** |
| **DD214** | **Y** |
| **CAPRI Enterprise Search** | **Y, Negative** |
| **Private Medical Records** |  |
| **SF88 Entrance Exam** |  |
| **SF88 Separation Exam** |  |
| **Service Treatment Records** |  |
| **Personnel Records** |  |
| **DOMA first request letter** |  |
| **DOMA final letter** |  |

# Scenario Comments

1. Upload all documents for this scenario to the VBMS eFolder.
2. Properly label and establish date of receipt
3. Associating all documents to correct EP
4. Bookmark medical and dependency documents (if appropriate)
5. Update subject line

Subject: VA Form 21-526EZ with additional documents

Category – Type: Applications – Original Claim: VA 21-526EZ, Fully Developed Claim (Compensation)

Content Source: VBMS

Date of Receipt – date of receipt on the 21-526EZ

1. CEST EP 110LCOMP7 – Initial Live Comp < 8 Issues Input Contentions:

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| Contention: depression Classification: Mental Disorders Date of Contention: (DOC) Verified: Yes  Type: New Medical: Yes  Special Issue: FDC Excluded – Needs Non- Fed Evidence Development, Local Mentor  Review | Contention: hearing loss Classification: Hearing loss Date of Contention: (DOC) Verified: Yes  Type: New Medical: Yes  Special Issue: N/A Special Issue are claim based |
| Contention: tinnitus Classification: Hearing Loss Date of Contention: (DOC) Verified: Yes  Type: New Medical: Yes  Special Issue: N/A Special Issue are claim based | Contention: right shoulder condition Classification: Musculoskeletal - Shoulder Date of Contention: (DOC)  Verified: Yes Type: New Medical: Yes  Special Issue: N/A Special Issue are claim based |
| Contention: left knee condition Classification: Musculoskeletal - Knee Date of Contention: (DOC)  Verified: Yes Type: New Medical: Yes  Special Issue: N/A Special Issue are claim  based |  |

1. Trainee will need to complete a subsequent development letter for the following information. Add the following paragraphs:
   * Under Compensation the paragraph – *21-4142/21-4142a;* as the veteran mentioned private treatment on the VA Form 21-4138, Statement in Support of the Claim. A tracked item is established when the letter is finalized.
2. The trainee will also need to exclude from FDC and provide the following paragraph from Letter Creator:

You requested that we expedite your claim under the FDC Program; however, we cannot process your claim under this program because you did not submit non-Federal evidence that is required to process your claim. Because your claim is not eligible for processing under the FDC Program, we are processing it under our standard claims-processing procedures.

Once the letter is finalized. The trainee must click on the “Here” hyperlink to go to Package Manager or click on the veteran tab to select Package Manager. While in Package Manager, the letter will show as a draft format. Choose the letter, ensure the recipient info is correct and select Send Package at the top right.

1. As an exam is needed, the trainee will need to generate an ERRA Request. **IMPORTANT:** The exam will be done in VBMS Demo. Please ensure the trainee checks “Use Exam Destination Mock Data” under the fly wheel or they will receive an error when trying to submit the exam**.**
2. The trainee will request a General Medical Compensation DBQ for the left knee condition and right shoulder condition, a PSYCH Mental Disorders exam for depression and AUDIO Hearing Loss DBQ with MOS opinion for the hearing loss and tinnitus in VBMS Demo, as the veteran submitted his claim within a year of discharge and the STRs are present (per the Trainee Instructions). Hearing loss and tinnitus are ACE eligible; however, the Veteran must report for the General Medical Exam and the mental health exam.

# Bookmark the following documents in VBMS Demo

DD214 (Tab A) STRs (Tab B)

If the student asks why we are ordering an Audio exam without current medical evidence or a lay statement, refer them to M21-1 V.iii.2.B.1.d, Requesting Audiometric Examinations and Medical Opinions**.**

A sample exam request is included within this package.

1. Tracked items should be: a. 21-4142/21-4142a
2. Exam Request – left knee condition
3. Exam Request – right shoulder condition
4. Exam Request – depression
5. Exam Request – hearing loss
6. Exam Request – tinnitus
7. Exam Request – Processing
8. Trainee must enter a note in VBMS: “Exam Review complete for all issues. General Medical, Audio and mental disorder exams ordered**.** Developed to Veteran for 21-4142 and 4142a. CAPRI enterprise search completed, with a negative response.”

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| **References:** | | | |
|  | Scenario | Reference | Title |
|  | 2-5 | M21-1 II.ii.2.A | Folder Maintenance |
|  | 6-8 | M21-1 II.iii.3.A M21-1 X.i.2.A  M21-1 X.i.2.B M21-1 III.i.2.F.2.a  M21-4 Manual | Claims Establishment General Information about the Fully Developed Claim (FDC) Program  Processing Fully Developed Claims (FDC) Identifying Contentions  Appendix A: Regional Office Station Numbers, Payee Codes, and Work-Rate Standards  Appendix B: End Product Codes  Appendix C: Index of Claim Labels  Appendix D: Index of Claim Stage Indicators  Appendix E Index of Corporate Flashes and Special Issues |
|  | 9-10 | M21-1 IV.i.2.A.1.d  M21-1 V.iii.2.B | Mandatory use of the ERRA Tool  Conditions of the Auditory System |
|  | 11-12 | M21-1 IV.i.1.A.1.e.  M21-1 III.ii.1.A.2.a | Documentation of the Status of Examination Review  Requirement to Obtain VA Medical Records |