

St. Paul Pension Management Center

You are here

We are here
to help you
find your way



Presenters

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What We Will Cover

- PMC Jurisdiction and Overview
- Key Metrics
- Veterans Pension and Survivors Pension
- Dependency and Indemnity Compensation (DIC)
- Burial Benefits
- Accrued Benefits
- Up-Front Eligibility Verification
- VA Standardized Forms
- Questions

St. Paul PMC Jurisdiction

St. Paul Pension Management Center administers the Pension Program for Veterans and their families in 21 states and Central and South America and 23 VA Regional Offices.



Snapshot –Fiscal Year 2016 Progress

September 30, 2016	
PMC Inventory:	32,018
Rating Inventory:	8,140
Burial Inventory:	5,890
Survivors Inventory:	2,231
Maintenance Inventory:	4,693
Rating Average Days Pending:	59.0
% of Claims > 125 Days:	6.79%
Rating Claims > 1 year:	6

Pension Benefits

Qualifications for Veterans Pension

- 90 days or more of active military service, at least 1 day during a period of war. Effective September 7, 1980, must serve at least 24 months of continuous service (or entire period called to active duty)
- Discharged under conditions other than dishonorable
- Permanent and Total Disability (P&T) by rating, age 65 or older, in receipt of Social Security Disability, or in a nursing home
- Meets income and net worth guidelines

Pension Benefits

Qualifications for Survivors Pension

- Widow or qualifying child of a wartime Veteran with qualifying service
- Meets income and net worth guidelines
- Meets marital requirements as the surviving spouse
- Meets child requirements
 - Under age 18
 - 18 to 23 in school
 - Helpless before age 18

Special Monthly Pension

Housebound

- Substantially confined to the home
- Single disability rated at 100% and an additional disability at 60% or more

Aid and Attendance

- In need of assistance of another person with his/her activities of daily living. i.e. inability to dress or undress, keep ones self clean, adjust prosthetic appliance, or bedridden.
- In a licensed nursing home receiving skilled or intermediate care (granted administratively, medical evidence of disability not required)

Notes:

- Medical evidence needs to include diagnosis and description of severity of each disability
- Must be signed by a health care professional (MD, DO, PA, NP or an RN from a VAMC)

Who Can Sign an Application?

Signatures

M21-1MR. III.ii.1.C.11.a Signature by mark or thumbprint

Accept signatures by mark or thumbprint *only* if any one of the following individuals (or group of individuals) witness the mark or thumbprint:

- two persons who give their addresses
- a VA employee
- a notary public, or
- a person having the authority to administer oaths for general purposes.
- Need signature of claimant even if claimant has a durable power of attorney

What is Countable Income?

- Earnings
- Retirement income
- Interest
- Dividends
- Unemployment compensation
- Business income
- Life insurance dividends

What is Not Countable Income for VA Purposes?

- VA Pension
- Profit from sale of primary residence
- Welfare (benefits received from social services)
- SSI (Supplemental Security Income)

Reporting Change in Income

Tell us:

- Source of income
- Date of receipt
- How and when it changed
- If and when it stopped
- Gross amount (before deductions)

Net Worth

The term ***net worth*** for VA purposes includes all personal property owned by the claimant, except for personal effects suitable to the claimant's reasonable mode of life.

- For Veterans Pension, a Veteran's net worth includes the net worth of his/her spouse.
- This means that normal household objects and possessions are not included in a net worth determination. Likewise, motor vehicles used for family transportation are *not* included in determining net worth, nor is the claimant's home.
- However, personal property that is owned primarily as an investment, for example, an antique automobile or a coin collection, is included in determining net worth.

Note: The term ***personal property*** includes all tangible property that is not land (real property) or fixtures on land.

Net Worth

A formal administrative decision is required if:

- The beneficiary has net worth of \$80,000 or more, whether or not net worth bars entitlement, or
- Net worth (of any amount) bars entitlement.

Factors to consider include:

- Income
- Family expenses
- Claimant's life expectancy, and
- Ability to convert the assets into cash

Net Worth

Sale of Home

- Considered a conversion of assets
- Change in net worth may affect pension eligibility (submit VA Form 21-8049)
- Termination of benefits due to excessive net worth is effective January 1st of the following year
- If not residing in home, not countable as net worth unless rental income is generated or it is used for business purposes

Net Worth

Excluding the value of a single-family dwelling

- Value of the claimant's single-family dwelling is not included
- If the claimant owns and resides in a multi-family dwelling, only the value of the unit occupied by the unit is excluded from net worth consideration

Example: A claimant owns a duplex worth \$200,000.00 and resides in one of the units. If both units are roughly comparable, consider net worth of \$100,000.00.

Note: If a claimant receives rental income they should submit VA Form 21-4185, Report of Income from Property or Business

Reporting Medical Expenses

Include all five details required when reporting medical expenses (VA Form 21-8416)

- Purpose, amount paid, date paid, name of provider, and who were the expenses for

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. ITEMIZATION OF MEDICAL EXPENSES

A. PURPOSE *(Physician or Hospital Charges
Eyeglasses, Oxygen Rental, Medical Insurance, etc.)*

B. AMOUNT PAID
BY YOU

C. DATE PAID
(Mo/Day/Yr)

D. NAME OF PROVIDER
*(Name of Doctor, Dentist,
Hospital, Lab, etc.)*

E. FOR WHOM PAID
(Self, spouse, child)

Most Common Medical Expenses

- Medicare Part B premiums
 - Private medical insurance
 - Life and burial insurance do not count
 - Prescription and non-prescription drugs
 - Adaptive equipment
 - Care expenses
 - Nursing Home
 - Assisted Living
 - In-home Care
- * For a list of common medical expenses see: M21-1 V.iii.1.G.42.c

Continuing Medical Expenses

- Prediction of future expenses
- Amount and frequency of payment is easily predictable
- Common continuing medical expenses:
 - Nursing home, assisted living, in-home care
 - Private medical insurance
 - Medicare Part B and D
 - Incontinence supplies
 - Diabetic supplies

In-Home Care

- Annual verification is not required
- Specific services provided
- The claimant is required to submit documentation of expenses for in-home care:
 - When in-home attendant fees are initially claimed, AND
 - If the person/company providing the services changes

Nursing Home or Assisted Living

We need to know:

- Date entered
- Projected length of stay
- Facility name
- Facility address and telephone number
- If Medicaid is covering part of the costs

Medicaid \$90 rate

- 38 CFR 3.551 (i) states VA must limit claimants to the \$90/month for a Veteran, surviving spouse or surviving child who:
 - Has neither spouse nor dependent child, and
 - Is in a Medicaid approved nursing facility, and
 - A Medicaid plan covers in part or all of his or her nursing home care.

Note:

- No overpayment is created when reducing to the \$90 rate
- The \$90 payment is for personal use and cannot be used to cover nursing home expenses
- Exception: not reduced to the \$90 rate if in a State Veterans Home
- Be sure to include the name and phone number of the facility
- If claimant has a running award, Due Process is initiated before \$90 rate is set.

How to Calculate VA Pension Rates

$$\begin{aligned} & \text{Annual Income} \\ & - \text{Annual Medical Expenses} \\ & \quad + \underline{5\% \text{ medical deduction}} \\ & = \text{Income for VA Purposes (IVAP)} \end{aligned}$$

$$\begin{aligned} & \text{Maximum Annual Pension Rate (MAPR)} \\ & \quad - \underline{\text{IVAP}} \\ & = \text{Annual amount} \end{aligned}$$

$$\text{Annual amount} / 12 = \text{monthly amount}$$

Practical Exercise

Problem:

A Veteran and his spouse receive \$750 and \$450 from the Social Security Administration each month. They also receive \$250 per year in interest from a bank account. They pay \$800 per month in medical insurance and \$125 per month in prescription costs. The annual pension limit for a Veteran and one dependent set by Congress is \$16,051 and the 5% medical deduction is \$842.

Calculate the monthly amount the Veteran will receive from VA for Pension benefits.

Practical Exercise Answer

$$\$750 \times 12 = \$9,000$$

$$\$450 \times 12 = \$5,400$$

$$\text{Interest} = \underline{\quad \$250\text{k}} \quad$$

\$14,650 total annual income

$$\$800 \times 12 = \$9,600$$

$$\underline{\$125 \times 12 = \$1,500}$$

\$11,100 total annual medical expenses

$$\$14,650 - \$11,100 + \$842(5\%) = \mathbf{\$4,392 \text{ (IVAP)}}$$

$$\$16,051(\text{MAPR}) - \$4,392(\text{IVAP}) = \$11,659/12 = \mathbf{\$971 \text{ per month}}$$

Due Process

- Due Process is initiated when information is obtained that could adversely affect a beneficiary's award
 - Information is usually obtained from a third party or through a data matching program
 - VBA will inform the claimant (via notification letter) of new information discovered and give them 60 days to respond
 - After the 60 Day Due Process period, proposed changes will or will not be made based on a claimants response.

Independent Living Facilities

- Per Fast Letter 12-23 (*Room and Board as a Deductible Unreimbursed Medical Expense*), if the claimant is in an independent living facility, we need the following:
 - Itemized list of services provided, specifically the activities of daily living (ADLs)
 - Breakdown of nursing and “rent” fees
 - Date entered
 - Projected length of stay
 - Facility name
 - Facility address and telephone number

Liberalizing Legislation

- Liberalizing Legislation is a law that allows VA to grant benefits up to one year prior to the Veteran's original date of claim
- Who is eligible?
 - A Veteran that is age 65 or older on September 17, 2001
 - Or has been in a Medicaid approved skilled/intermediate nursing home continuously since September 17, 2001
 - Or has been in receipt of Social Security Disability Insurance continuously since September 17, 2001

Liberalizing Legislation

How to Apply for Liberalizing Legislation:

- Submit a Eligibility Verification Report (VA Form 21-0516) and a Medical Expense Report (VA Form 21-8416) for one year prior to the date of claim
- If receiving Special Monthly Pension, we will need an Examination for Housebound Status or Permanent Need for Regular Aid and Attendance (VA Form 21-2680) with information for the year prior to the date of claim
- If the Veteran is in a care facility, we will need care expense information for the year prior to the date of claim

Qualifications for DIC

- Veteran died of a service-connected condition
- Service-connected condition contributed to the cause of death
- Died of a presumptive service-connected condition
- Had a 100% service-connected evaluation in effect for 10 years prior to death

Burial Benefits

Types of Burial Benefits

- Non-service connected (NSC)
- Service-connected
- Plot allowance
- Transportation allowance

How to Apply

- Submit VA Form 21P-530 (within two years of death if NSC)
- Death Certificate (needs to show cause of death)
- Statement of Account (needs to show who paid the expenses)
- Certified copy of discharge document (if Veteran was not receiving benefits)

Non-Service Connected Burial

Eligibility:

- In receipt of compensation or pension at the time of death
- Receiving military retired pay in lieu of compensation
- Had a claim pending at the time of death (found entitled)
- Died while under VA care

Plot Allowance:

- The Statement of Account is no longer required. However, it may show additional expenses such as the opening / closing fees that we can allow
- We will only pay the statutory limit or the amount actually paid for the plot expenses, whichever is lower

Service Connected Burial and Transportation

Eligibility:

- Veteran died of a service-connected condition
- Service-connected condition contributed to the cause of death
- Died of a presumptive service-connected condition
- Had a 100% service-connected evaluation prior to death

Transportation

Payable if:

- Veteran dies under VA Care, or
- If died of a non-service connected condition AND was in receipt of service-connected compensation AND is buried in a National Cemetery
- If died of a service-connected condition AND is buried in a National Cemetery
- Statement of Account is required

Changes to Burial Benefits

Applies to claim received on or after July 7, 2014

- When “First to File” rule applies:
 - Spouse receives first priority for automated payments
 - VA will pay the first person or entity who files a claim that incurred the costs of the Veteran’s burial
- Funeral homes may only apply if the Veteran’s remains are unclaimed
- Recognition of cremation, burial at sea, and medical school donation approved
- VA will only pay burial benefits to a single person (no longer split between multiple claimants)
- If the Veteran was 100% service connected at the time of death then service connected burial benefits are automatically paid

Unclaimed Remains of Indigent Veterans

- ***Unclaimed Veteran remains*** are the remains of an identified person
 - who died while not properly hospitalized under VA care
 - who has not been claimed by relatives or friends, and
 - whose burial is not the responsibility of any other Federal, state or local agency.

The burial allowance is payable if:

- The Veteran has no family or friends who claim the Veteran's body and there are insufficient resources to cover burial and funeral expenses.

A funeral home is an eligible claimant if it covered the cost of burying the unclaimed remains of a Veteran.

A statement signed by an official of the State/County must certify that there is no next of kin or other person claiming the Veteran's remains. It must also certify there are insufficient resources in the Veteran's estate to cover burial and funeral expenses.

Automated Burial Process

- Burial and Plot payments are automatically payable to the surviving spouse of record when the First Notice of Death (FNOD) is processed
 - FNOD can be processed by a call center, CVS0 phone line, or other notification
 - If the Veteran was 100% service-connected at the time of death, service-connected burial benefits are automatically paid
 - Information available during FNOD process determines if plot is payable
- VA Form 21P-530, Application for Burial Benefits and supporting documentation is not required unless eligible for transportation and / or plot expenses

Burial and Transportation Rates

Effective Date	10/01/11	10/01/12	10/01/13	10/01/14	10/01/15
SC Burial	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000
NSC Burial (hospitalized by VA)	\$700	\$722	\$734	\$745	\$747
NSC Burial	\$300	\$300	\$300	\$300	\$300
State Cemetery Plot Allowance	\$700	\$722	\$734	\$745	\$747

Accrued Benefits

- Benefits due to the beneficiary but not paid prior to death
- Claim must be filed within one year of the death of the beneficiary
- No time limit for non-negotiated checks
- Can be eligible by Relationship or Reimbursement

Accrued Benefits

Relationship

- Spouse
- Child(ren) for VA purposes
- Parent(s), if dependent on the Veteran at the time of the Veteran's death
- VA Form 21-534 or VA Form 21-601 and a copy of beneficiary's death certificate

Reimbursement

- When no one is entitled by basis of relationship, anyone who paid expenses related to the beneficiary's last illness or burial
- VA Form 21-601, copy of beneficiary's death certificate and proof of paid expenses

Accrued Benefits

Substitution Appeal – Veteran had an appeal pending at the time of death, will be worked by office with jurisdiction of appeal at time of death

Substitution Claim – Veteran had a claim pending at the time of death, evidence to support claim pending at the time of death may be submitted by substitute claimant

Up-front Eligibility Verification

- Federal Tax Information (FTI) is data obtained from a claimant's tax return information. This information is provided to VA by Internal Revenue Service (IRS) and Social Security Administration (SSA)
- PMCs will use this information to verify the income of applicants
- Currently applies to Initial Live Pension and Initial Death Pension claims received on or after April 1, 2014

Standardized VA Forms

- VA requires all informal claims to be on a standard VA-Prescribed Form by submitting a complete VA Form 21-0966, *Intent to File Claim for Compensation and/or Pension, or Survivors Pension and/or Dependency and Indemnity Compensation*
- Claimants or his/her representative can establish an effective date placeholder for benefits provided that the complete claim is received within **one year** of the date that the intent to file is received for the same general benefit indicated on the intent to file.

Standardized VA Forms continued

An intent to file may be received from the claimant or his/her representative:

- Electronically via eBenefits or the Stakeholder Enterprise Portal,
- Over the phone with a VA National Call Center or other public contact representative or
- On the paper VA Form 21-0966, which may be mailed, faxed or delivered in person.

Standard Notice of Disagreement (SNOD)

- Claimants will be required to use a standard NOD form in cases where VA provides the form with the decision notice.
- Initially, VA will only provide the form (VA Form 21-0958, *Notice of Disagreement*) for compensation claims decisions.
- This only applies to notification of VA decisions after March 24, 2015

Standardized VA Forms – Common Forms

Intent to File

21-0966

Initial Veterans Pension

21-527EZ

Subsequent Veterans Pension

21-527EZ

21-0516

21-0517

Initial Survivors Claim

21-534EZ

21-535

21-601

Subsequent Survivors Claim

21-534EZ

21-601

21-0518

21-0519

21-0514

Income Adjustments*

21-0516/0518

21-8416

21-4185

21-4165

Burial Benefits

21-530

Special Monthly Pension

21-2680

21-0779

Dependency Change

21-686c

21-674

*A standard form is NOT required for a report that may cause a reduction in benefits

On All Forms....

- Make sure there is a proper signature on the form
- Make sure the form is “substantially” complete
- Double-check SSNs and other ID numbers for accuracy
- Provide as much information as possible to expedite the process
- If claiming an additional benefit (ie. SMP) include the signed, completed form for that benefit in the application packet
- When in doubt – call us and ask!

Centralized Mail

- Effective March 1, 2016, all St. Paul PMC mail will be sent to the address below.
- Mail will be processed through a centralized mail portal.

**Department Of Veterans Affairs
Claims Intake Center
Attention: St. Paul Pension Center
PO Box 5365
Janesville, WI 53547-5365**

Contact Information

- CVSO line 612-713-8978 (8:00-4:30) Central Time
- VBASPL/PMCVSO (if in outlook)
- Debt Management Center (DMC) 1-612-970-5737

Thank you!

Questions?

