WV DEPARTMENT OF VETERANS ASSISTANCE



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2016 Training

CODE OF FEDERAL REGULATIONS

Under Franklin D. Roosevelt's New Deal in the 1930s, Congress began delegating more responsibility to federal agencies to create legislation. At the time, there was no centralized system to communicate up-to-date legislation from the executive department or the agencies of the federal government to the public. The Federal Register Act (1935) and the Administrative Procedure Act (1946) paved the way for the Federal Register System to issue and publish government laws.

Federal Register System

The Federal Register System's two major publications are the Federal Register and the Code of Federal Regulations (CFR). The Federal Register is published and issued every federal working day. Legislation is published first as a proposed rule followed by a comment period. The comment period is a time the public can give their input on the proposed rule. Once the rule is finalized, it becomes a legal document a minimum of 30 days after publication in the Federal Register. These final rules are then codified and published annually in the CFR. The Federal Register and the CFR must be used together to determine an up-to-date stipulation of a ruling.

3.37 - Individuals and Groups Considered to have performed active military, naval, or air service.

Who is a Veteran???

38 CFR 3.7

38 CFR PART 3 ADJUDICATION.

Administrative practice and procedure

Claims

Disability benefits

Health care

Pensions

Presumptive Service Connections

38 CFR PART 3 ADJUDICATION.

- 38 CFR 3.3 Pension
- 3.3 (3) Improved pension
- 3.3 (4) Improved death pension
- 3.5 Dependency and Indemnity Compensation

38 CFR Part 4 - Schedule for rating disabilities.

SUBPART B - DISABILITY RATINGS

- ► How does the VA Rate specific conditions??????
- ► How do we know what percentage a veteran is going to get??????
- ► How do we use Part 4 to our benefit???????

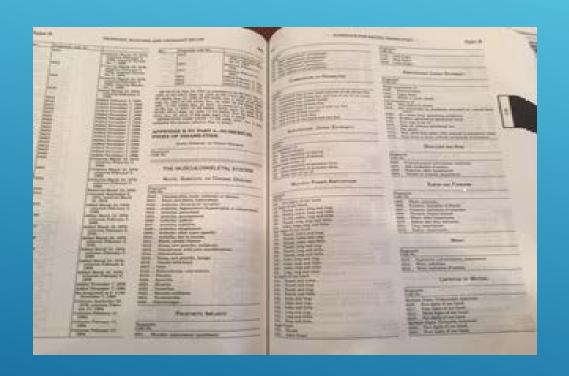
HOW DOES THE VA RATE SPECIFIC CONDITIONS?????

► 1stMust be Service Related

- Incurred in Service
- Aggravated by Service
- A result stemming from service (Presumptions 3.309)

APPENDIX B TO PART 4 – NUMERICAL INDEX OF DISABILITIES.

Find Diagnostic Code.



USE DIAGNOSED CONDITIONS

4.130-3

§4.130 Scheduling of ratings-mental disorders

4.130-3

General Rating For	mula for Mental Disorders:	
gross impai persistent d behavior; p inability to of minimal	mal and social impairment, due to such symptoms as: rment in thought processes or communication; elusions or hallucinations; grossly inappropriate ersistent danger of hurting self or others; intermittent perform activities of daily living (including maintenance personal hygiene); disorientation to time or place; memory nes of close relatives, own occupation, or own name	100
such as wordue to such which inter obscure, or the ability to impaired in of violence, hygiene; directly work or a wordun to the control of t	nd social impairment, with deficiencies in most areas, k, school, family relations, judgment, thinking, or mood, symptoms as: suicidal ideation; obsessional rituals fere with routine activities; speech intermittently illogical, irrelevant; near-continuous panic or depression affecting of function independently, appropriately and effectively; spulse control (such as unprovoked irritability with periods; spatial disorientation; neglect of personal appearance and ficulty in adapting to stressful circumstances (including torklike setting); inability to establish and maintain ationships	. 70
productivity circumlocu a week; diff of short- an material, fo abstract thi	nd social impairment with reduced reliability and due to such symptoms as: flattened affect; circumstantial, ory, or stereotyped speech; panic attacks more than once iculty in understanding complex commands; impairment d long-term memory (e.g., retention of only highly learned spetting to complete tasks); impaired judgment; impaired sking; disturbances of motivation and mood; difficulty in and maintaining effective work and social relationships	. 50
efficiency a tasks (altho behavior, so as: depresso less often),	and social impairment with occasional decrease in work and intermittent periods of inability to perform occupational along generally functioning satisfactorily, with routine alf-care, and conversation normal), due to such symptoms d mood, anxiety, suspiciousness, panic attacks (weekly or chronic sleep impairment, mild memory loss (such as ames, directions, recent events)	. 30
which decre tasks only d	and social impairment due to mild or transient symptoms asse work efficiency and ability to perform occupational uring periods of significant stress, or; symptoms controlled	1.0

General Rating Formula for Diseases and Injuries of the Spine

(For diagnostic codes 5235 to 5243 unless 5243 is evaluated under the Formula for Rating Intervertebral Disc Syndrome Based on Incapacitating Episodes):

With or without symptoms such as pain (whether or not it radiates), stiffness, or aching in the area of the spine affected by residuals of injury or disease

of the	e spine affected by residuals of injury or disease
Ur	nfavorable ankylosis of the entire spine
Ur	nfavorable ankylosis of the entire thoracolumbar spine
	of the thoracolumbar spine 30 degrees or less; or, favorable ankylosis of the entire thoracolumbar spine
Fo	rward flexion of the cervical spine 15 degrees or less; or, favorable ankylosis of the entire cervical spine
	rward flexion of the thoracolumbar spine greater than 30 degrees but not greater than 60 degrees; or, forward flexion of the cervical spine greater than 15 degrees but not greater than 30 degrees; or, the combined range of motion of the thoracolumbar spine not greater than 120 degrees; or, the combined range of motion of the cervical spine not greater than 170 degrees; or, muscle spasm or guarding severe enough to result in an abnormal gait or abnormal spinal contour such as scoliosis, reversed lordosis, or abnormal kyphosis
Fo	rward flexion of the thoracolumbar spine greater than 60 degrees but not greater than 85 degrees; or, forward flexion of the cervical spine greater than 30 degrees but not greater than 40 degrees; or, combined range of motion of the thoracolumbar spine greater than 120 degrees but not greater than 235 degrees; or, combined range of motion of the cervical spine greater than 170 degrees but not greater than 335 degrees; or, muscle spasm, guarding,

Note (1): Evaluate any associated objective neurologic abnormalities, including, but not limited to, bowel or bladder impairment, separately, under an appropriate diagnostic code.

or localized tenderness not resulting in abnormal gait or abnormal spinal contour; or, vertebral body fracture with loss of 50 percent or more of the

Note (2): (See also Plate V.) For VA compensation purposes, normal forward flexion of the cervical spine is zero to 45 degrees, extension is zero to 45 degrees, left and right lateral flexion are zero to 45 degrees, and left and right lateral rotation are zero to 80 degrees. Normal forward flexion of the thoracolumbar spine is zero to 90 degrees, extension is zero to 30 degrees, left and right lateral flexion are zero to 30 degrees, and left and right lateral rotation are zero to 30

MEDICAL REPORTS/ DOCTORS ORDERS

- Medical evidence is the key to any veterans claim.
- Diagnosis
- Medical opinions
- Doctors orders
- Use the C.F.R. to cross reference what percentage you expect to get on an award letter.
 - Be Honest with the Veteran. Not every condition can be rated at 100%.

How do we use Part 4 to our benefit????????

- Obtain Service Medical Records.
 - ▶ VA FORM SF-180
- Review SMR's with the Veteran.
- Look for Presumptive Conditions that the veteran may qualify for.
 - Presumptive Conditions don't need to be directly service related.

3.301 – LINE OF DUTY AND MISCONDUCT

- Willful misconduct. Disability pension is not payable for any condition due to the veteran's own willful misconduct.
- Venereal disease The residuals of venereal disease are not to be considered the result of willful misconduct.
- The simple drinking of alcoholic beverage is not of itself willful misconduct.

▶ AGE IN SERVICE – CONNECTED CLAIMS

Age may not be considered as a factor in evaluating service-connected disability; and unemployability, in service-connected claims, associated with advancing age or intercurrent disability, may not be used as a basis for a total disability rating. Age, as such, is a factor only in evaluations of disability not resulting from service, i.e., for the purposes of pension.

38 CFR 4.19

VA MATH

- **COMBINED RATINGS TABLE**
- ► HOW TO USE THE TABLE
- > 50% + 50% does not equal 100%

38 CFR 4.25

BILATERAL FACTOR AND HOW TO APPLY IT TO RATINGS

38 CFR 4.26

Special Monthly Compensation

Dependent Status	N 1/2	O/P	R.1	R.2/T	
Veteran Alone	\$4,808.00	\$5,075.60	\$7,252.63	\$8,318.95	\$3,253.67
Veteran with Spouse	\$4,970.07	\$5,237.67	\$7,414.70	\$8,481.02	\$3,415.74
Veteran with Spouse ar One Parent	nd \$5,100.13	\$5,367.73	\$7,544.76	\$8,611.08	\$3,545.80
Veteran with Spouse an Two Parents	nd \$5,230.19	\$5,497.79	\$7,674.82	\$8,741.14	\$3,675.86
Veteran with One Parer	nt \$4,938.06	\$5,205.66	\$7,382.69	\$8,449.01	\$3,383.73
Veteran with Two Paren	nts \$5,068.12	\$5,335.72	\$7,512.75	\$8,579.07	\$3,513.79
Additional A/A spouse. See footnote (b)	\$148.64	\$148.64	\$148.64	\$148.64	\$148.64

▶ 3.20 – SURVIVING SPOUSE'S BENEFIT FOR MONTH OF VETERAN'S DEATH.

- > 3.53 CONTINUOUS COHABITATION
 - ▶ (a) General. ???????
 - 3.102 REASONABLE DOUBT
 - 3.353 DETERMINATIONS OF INCOMPETENCY AND COMPETENCY.

38 CFR

- Re-Education Program
- Operation Recognition
- War Orphan Program
- Governors Flag Program
- Bonus Program
- Veterans Home
- Cemetery
- Nursing Facility
- ▶ 17 Field Offices located in WV.

WVDVA STATE BENEFITS

- ► General information on filing a disability claim.
- Evidence needed and how to obtain that evidence.

WVDVA STATE BENEFITS

► 1. Understand what you are filing

COMMUNICATE!!!

- Explain to the person filing the claim the importance of what you are asking for.
 - If the veteran is unable to obtain medical opinions or information needed to file a good solid claim, his chances are less likely to get a good result.

C & P exams

>Vs.

Private Medical Opinions

Be Honest and Upfront!!!

The procedures and information needed to file a good solid claim is all listed in 38 C.F.R.

AVOID RUMORS ABOUT THE VA!!!

- DO NOT FEED INTO STORIES ABOUT THE VETERAN DOWN THE ROAD.
 - Explain the process and try to help the veteran that you are speaking with understand how the entire process works.

- Initial Filing of the Claim
 - > Explain each form that you are filling out.
 - > 21-526EZ Claim Form
 - > 21-22 Accreditation Form
 - > 21-4142 Private Doctor Records
 - Length of wait time expected
 - Don't let this slide or it will come back to bite you!!!

- Approximately in 60 Days the claimant will receive a DTA letter from the VARO handling their case.
 - Explain to the veteran what to do when they receive this letter
 - Help them understand the consequences of not acting on the DTA letter.

Decision Letter!!!

- Advise the veteran to call you when they receive any correspondence from the VA.
- Explain the Decision letter and Rating Decision in detail.
 - Go over the ratings to see if they are correct

VISE YOUR 38 CFR

- Give your opinion to the veteran and let them know their rights to appeal
 - Traditional Review
 - DRO Review