Philadelphia Pension Management Center



Philadelphia Pension Management Center

Serves the 17 eastern most U.S. states, DC and Puerto Rico (20 VA Regional Offices) and process claims from all foreign countries except those in Central and South America

377 Full Time Employees

Claims Completed in FY 17-272,490 (9/1/2017)

Rating Teams 50,368

Maintenance Teams 126,105

Survivor Teams 92,042

Advocacy Team 3,975



Processing Teams

Estimated Annual Program Recipients in FY 18 (PHL) 270,503

Death Pension: 66,319

DIC/Death Compensation: 129,934

Live Disability Pension: 74,250

Annual Amount Paid to Program Recipients in FY 18 (PHL)

Approximately \$300 billion

Death Pension Benefits: \$46,015,098

DIC/Death Compensation: \$172,139,020

Live Pension: \$73,499,277

As of the end of FY 17 75% of workload is non-rating (with 167) 77% (without 167)



Processing Teams

Rating Teams(4) as of October 1, 2017

20 VSR/VCE, Coach/Asst. Coach

Original NSC Pension, Re-Open NSC Pension, Re-Open Survivor Pension, DIC and Burials, Aid and Attendance Adjustment

On October 1, 2017, all rating activity will be done on a separate Rating Board Team consisting of all PMC RVSRs (36).

Maintenance Teams(4) as of October 1, 2017

20 VSR/VCE, Coach/Asst. Coach

All adjustments to claims after original determination (Medical Expense Reports, COLA, Dependency, Matching Programs, Pension re-open{income/net worth}).

Survivor Benefit Teams(3) as of October 1, 2017 14-16 VSR/VCE, Coach/Asst. Coach Survivor Pension, Burial Benefits



Processing Teams

Claim Group	Inventory as of 5/4	ADP as of 5/4	Backlog as of 5/4	FYTD Completes as of 5/4
Rating	7,837	63.7	915	28,904 (excluding burials)
Maintenance	13,132	68.8	1,911	94,090
Survivor	6,499	84.8*	543*	33,801
Advocacy	44	5.8	0	1,701

^{*}includes 165 claims. The PMC currently has 300 backlog accrued claims as of 5/4/18

190 ADP – 42.1, 111 backlog pending

160 ADP - 38.6, 132 backlog pending



Advocacy Team

16 VSR/VCE, 2 Congressional Liaison, Coach Congressional Inquiries and Associated Claims, IRIS, White House Inquiries, Congressional Flashed Claims, Accrued Claims Telephone Queue for Congressional Staff/VSOs 215-381-3762

Handle Inquiries for 162 Congressional Districts and 34 Senators And All VSOs in the 17 states, DC and Puerto Rico.

End Product 500- Used to control Congressional Inquiries

Claims with Congressional Inquiries remain with the Advocacy Team until completed

CONGRESSIONAL MAILBOX

E-mails to the Congressional Mailbox Reviewed and responded to within 2 Days.

VBAPHI.PMCCONGRESSIONAL@VA.GOV

Special Issue claims received by e-mail are forwarded to IPC for immediate establishment.

VSO Mailbox

PensionCtrVSO.VBAPHI@va.gov

Any claims received are forwarded to IPC for establishment. IPC will review for Special Issues Inquiries forwarded to respective Processing Team



Appeals Team

4 VSR, 1 RVSR, 7 DRO, Coach

NOD Inventory – 375

NOD ADP – 106.5 *Appeals Data as of 3/1/18

Form 9 Inventory – 218

Form 9 ADP – 244.92

Remands Pending Adjudication – 63

De-Novo (DRO) Reviews of PMC cases now done at PMC.

No prescribed NOD Form for PMC however claimants are encouraged to use VA Form 0958 Notice of Disagreement.



Quality Team

19 AQRS, 3 RQRS, Coach, 2 Assistant Coaches

12 Month Claim-Based Quality

Accuracy	94.10%	93.80%	92.60%	92.40%
Target	91.5%	91.5%	91.5%	91.5%
+/- Target	2.60%	2.30%	1.10%	.90%
	October 2017	November 2017	December 2017	January 2018

Performs Quality Reviews for all PMC Employees
Performs IPRS Analyze for Error Trends
Conducts all Refresher Training for PMC
Conducts Initial Training for all Newly Hired Personnel
(Currently 15 VSRs)

Intake Processing Center

45 Claims Assistants, 6 VSRs, 2 Coaches & 2 Assistant Coaches

- Process all Incoming Mail through SMS Portal and establish claims
- No Longer Process Faxes through EPA
- Folder Transfers and Storage
- Maintenance and Control of DUP-Cs
- Processing of FOIA Requests
- Review/Processing of Military/Unidentified Mail



SMS Portal

- Contractor scans and indexes in Mail
- Approx. 1,100 pieces of mail received per day
 - April average receipts 1,309
- PMC SMS Portal Inventory is typically about 3,000 pieces.
 - Current inventory is 4969 (as of 5/4/18)
 - April average inventory 4,840
 - CEST Assistance Team created to help with mail portal
- Approximately 1,000 pieces processed (Uploaded to VBMS/Claim Established) per day.
 - April average completes 1,358
- Portal scanned for Congressional Mail and Special Issue and expedited



Address to SMS Portal

Scanning Contractor for Claims and Responses to Development:

Department of Veterans Affairs
Pension Intake Center
ATTN: Philadelphia Pension Center
PO Box 5206
Janesville, WI 53547-5206

FAX For Pension – 1-844-655-1604

No FTI or IVM responses will be scanned into VBMS



Ways to Submit a Claim

- Online through eBenefits:
 https://www.ebenefits.va.gov/ebenefits/vona
 pp
- By mail to the scanning vendor in Janesville, WI.
- Or by fax 1-844-655-1604
- ***VVA faxes was discontinued effective May 31, 2017



Automated Payments

- Month of Death Checks
- Non-Service Connected Burial & Plot if Spouse listed on Award
- Service Connected Burial if Veteran was rated 100% SC or was IU for 10+ years and Spouse is listed on the award
- DIC payment if veteran was rated 100% for 10+ years or IU for 10+ years and Spouse is on the award

Initiated when the Veteran's award is stopped through FNOD function



Forms

- Original Live Pension: VA Form 21–527EZ or 21–526
- Reopen Live Pension: VA Form 21–527EZ or 21– 0516–1
- Original Death Benefits for Spouse, Child or Parent:
 VA Form 21-534EZ, VA Form 21-535 (parent only)
- Reopen Death Pension: VA Form 21–0518–1
- Burial Benefits: VA Form 21P-530
- Medical Expense Report: VA Form 21P–8416
- Request for Nursing Home Information: VA Form 21–0779
- Examination for HB of A&A: VA Form 21–2680
- Accrued Benefits Only: VA Form 21–601
- Intent to File: VA Form 21–0966



OUTDATED FORMS

- Outdated versions of forms (excluding notices of disagreement (NODs)) may only be accepted in the circumstances described below:
- When generated through a VA electronic claims submission system, such as eBenefits, Stakeholder Enterprise Portal, Digits-to-Digits, or other VA system that includes form-generation capacity. Claim labels and document properties in VBMS will clearly denote the source of the submission.
- As an interim procedure pending appropriate systems updates when submitted by an authorized VSO representative whether submitted electronically or via paper, and
- VA Forms not submitted by a VSO representative for 12 months after a revision of a form to allow for depletion of existing stock of forms and/or systems updates.
- The most updated forms can be found at https://www.va.gov/vaforms/



Pension

Veteran's Pension- needs based benefit paid to wartime Veterans who meet certain age or non service connected disability requirements.

To be eligible:

- Discharge other than dishonorable conditions and
- Served 90 days (pre Gulf War) or 24 months (Gulf War) or more of active duty with at least 1 day during period of wartime and
- Countable income is below maximum annual pension rate and
- Meet the net worth limitations and
- Age 65 or older or have a permanent and total non serviced connected disability or patient in a nursing home or receiving Social Security benefits.

Survivor's Pension

It is a tax free monetary benefit payable to low income, un remarried surviving spouse and/or unmarried children of the deceased Veteran with wartime service.

To be eligible:

- Deceased Veteran must have wartime service
- Meet the income limits
- Spouse must be unmarried
- For children to qualify they must be under 18, under age 23 if attending school or permanently incapable of self-support due to disability before age 18



Special Monthly Pension

- Veterans and survivors who are eligible for VA pension and require the aid and attendance of another person or are housebound maybe eligible for additional monetary payment.
 - Housebound
 - Medical evidence must demonstrate that the claimant is basically confined to the home and is unable to leave without assistance due to a medical or mental condition.
 - Aid and Attendance
 - Medical evidence must demonstrate that the veteran needs assistance with the activities of daily living because of specific physical or mental impairments.
 - Administrative Grants
 - A Patient in a extended care facility that is licensed by a State to provide skilled or intermediate-level nursing care or
 - A Patient in a nursing home care unit in a State Veterans' Home or
 - · A Patient in a Department of Veterans Affairs Nursing Home Care Unit

Forms required to apply: VA Form 21-2680 or 21-0779 (nursing home patients only)



Dependency and Indemnity Compensation (DIC)

- Tax free money benefit generally payable to surviving spouse, child, or parent of service members who died while on active duty or survivors of Veterans who died from their service connected disabilities.
- To apply survivors use the same forms for Survivors pension
- Note: Not income based except for Parents DIC



Upfront Verification of Income

- IRS and SSA will provide VA with application income information for pension applicants.
- PMC will use this information to verify the income of applicants for original Veterans and survivors pension claims.
- In the future upfront verification will be expanded to include additional pension end products.
- Upfront Verification for Net Worth also coming in the near future





- The rules for establishing a child or spouse for VA Pension purposes are more or less the same as establishing a child or spouse for VA Compensation.
- However, there are some special rules regarding whether a spouse can be added to a Veteran's Pension award.





If the Veteran and spouse physically	Then, for Improved Pension purposes, the		
live	spouse is		
together in the same residence	a dependent.		
	a dependent, regardless of whether or not the		
apart for reasons not related to marital discord	Veteran contributes to the support of the		
	spouse.		
	a dependent.		
apart for reasons related to marital discord,			
but the Veteran makes reasonable	Reference: For more information on counting		
contributions to the support of the spouse	the income of a spouse, see M21-1MR, Part V,		
	Subpart iii, 1.E.38.b.		
apart for reasons related to marital discord,			
and the Veteran does not make reasonable	not a dependent, per <u>38 CFR 3.23(d)</u> ⊠.		
contributions to the support of the spouse			





Dependency requirements (surviving spouse)

- Married to the Veteran at the time of death for at least one year
- Lived continuously with the Veteran (exceptions being separation due to reasons other than marital discord)
- Un-remarried





Dependency requirements (surviving child)

- Be under the age of 18
- Be between the ages of 18 and 23 and attending school
- Be permanently incapable of self support due to disability which occurred prior to the age of 18



Income



- Most all income is countable, with the major exception being needs-based benefits (SSI, welfare).
- VA must count gross income, prior to deductions for taxes, insurance, etc.
- If a claimant's household income exceeds the prescribed limit, then VA Pension is not payable.
- If a claimant's household income does not exceed the prescribed limit, then the VA Pension rate will make up the difference between the claimant's income and the income limit.



Income

Expenses



- Medical expenses reduce countable income on a dollar for dollar basis after consideration of a 5% deductible.
 - The deductible depends on the claimant and their dependents and ranges from approximately \$400.00 to approximately \$900.00 yearly.



Medical Expense Overview

- All expenses related to medical care can be considered. Examples include
 - Prescriptions
 - Over the counter medications
 - Doctor/dental/hospital visits and tests
 - Medical transportation
 - Medical insurance (including Medicare Part B, Part D and private medical insurance that might be deducted from retirements or paid out of pocket).
 - At-Home care, nursing home care and assisted living care
 - M21-1 V.iii.1.G.2-3 is a great resource for medical expense rules, etc.



Definitions

- Assisted Living Facility (ALF) means a facility designed to assist people who need help with daily activities.
- Independent Living Facility (ILF) means a facility where people can generally live independently, and may or may not need help with daily activities.
- Custodial care means regular
 - supervision because a 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).

Definitions

- ADLs are basic self-care activities, consisting of
 - bathing or showering
 - dressing
 - eating
 - getting in or out of bed or a chair, and
 - using the toilet.

ADLs do *not* include Instrumental Activities of Daily Living (IADLs).

- IADLs are activities other than basic self-care that are needed for independent living. Examples of IADLs include
 - shopping
 - food preparation
 - housekeeping
 - laundering
 - handling medication, and
 - using the telephone.



Assisted Living

- Assisted living fees are deductible as a medical expense as long as the Veteran or surviving spouse is receiving housebound or aid and attendance, or as long as 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 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

- 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.



Home Caregiver fees

- Allow all fees paid to an in-home attendant as long as the attendant provides medical services, nursing services, or custodial care for the disabled person.
 - The attendant does not have to be a licensed health professional when the disabled person
 - is rated A&A or housebound, or
 - is not eligible to be rated for A&A or housebound and a licensed physician states that the person requires custodial care.
- If VA has not rated the disabled person as entitled to A&A or housebound, or if there is no evidence of record that a licensed physician has stated that a person ineligible to be rated for A&A or housebound requires an in-home care attendant, allow expenses paid to an in-home attendant only if the attendant is a licensed health professional.

Claiming Home Caregiver Fees

- The easiest/best way to claim any sort of home caregiver fees is to file a VA Form 21P-8416 (to claim the expenses)
- However, additional documentation is required the first time fees are claimed per provider and every time a new provider is used or hired.
- Type of documentation acceptable:
 - receipted bill,
 - statement on the provider's letterhead,
 - computer summary,
 - a ledger or bank statement



Net Worth



- A claimant's Net Worth is considered when determining entitlement to VA Pension (not the rate of Pension, which is determined based on income and medical expenses).
- Definition Net worth means the market value, less mortgages or other encumbrances, of all real and personal property owned by the claimant and/or spouse, except the claimant's single-family dwelling and reasonable personal effects



Net Worth



- ·While there is no specific dollar amount that can be designated as 'excessive' VA is required to make a formal determination as to whether net worth is excessive in all cases where the total household net worth is more than \$80,000.00.
- ·If a claimant's assets are large enough that the claimant could use those assets to pay living expenses for a reasonable period of time, net worth is considered a bar



Net Worth



- VA Pension is...
 - Intended to afford beneficiaries a minimum level of security
 - Not intended to protect substantial assets or build up the beneficiary's estate for the benefit of heirs
- We consider it is reasonable, under all circumstances, for the claimant to consume some of his/her estate for maintenance when considering the pension claim.





Pension rates are considered provisional, meaning they are awarded at a rate based on what we estimate one's projected income and medical expenses for a given year.

Pension rates can be retroactively adjusted if income or medical expenses change.





If a beneficiary wants to report a change in income for an adjustment in their pension rate, he or she should file an Eligibility Verification Report.

VA Form 21–0516 (Vet with no children)

VA Form 21–0517 (Vet with children)

VA Form 21–0518 (Surviving spouse with no children)

VA Form 21–0519s (Surviving spouse with children)

Any supporting documentation is also helpful.





If a beneficiary wants to report a change in medical expenses for an adjustment in their pension rate, he or she should file Medical Expense Report (VA Form 21P-8416).

Any supporting documentation is also helpful. If the beneficiary is unclear of the period of time for which they should report meds, they should contact VA.





The time limit to report a change in income or medical expenses to receive an increased rate is generally the last day of the year following the year in which the expenses were paid or the income changed.

There is no time limit to report changes that might result in a decreased pension rate.





Pension beneficiaries who have changes in income, dependency, medical expenses, or net worth that might affect their benefits are responsible to tell VA as soon as possible to avoid significant overpayments. Some examples might include:

- Receipt of additional income (i.e. received an inheritance or began receiving long term care income)
- Decrease in recurring medical expenses (i.e. left nursing home)
- Increase in net worth (i.e. sold home)
- Loss of spouse (i.e. death, divorce)



Decision Ready Claim (DRC)

On December 11, 2017, VBA began accepting new claim types in the Decision Ready Claim (DRC) program. In addition to claims for compensation, surviving spouses will be able to file certain claims for **Dependency and Indemnity Compensation**, (DIC).

VA designed the DRC initiative for the purposes of improving:

- Claims-processing timeliness,
- Claimant experience
- Offering expedited decisions on certain types of claims for Compensation and Pension

Successful participation in the DRC Initiative will result in the issuance of a decision within 30 days of submission.



DRC continued...

To participate in the DRC Initiative, a Veteran or eligible surviving spouse must:

- ▶ Be represented by an accredited VSO.
- Include all relevant evidence needed to render a decision for the VSO to submit into the DRC Direct Upload portal
- Simultaneously submit signed claims on specific forms containing language (i.e. 21P-534EZ) satisfying the general notice requirements of 38 U.S.C.5103 for the VSO to submit into the DRC Direct Upload portal



DRC Process (VSO Initial Actions)

- Veterans Service Organizations (VSOs) are a primary function of the DRC Program
- VSOs must complete a few initial actions before a claim can be included in the DIC Decision Ready Claim Program
- VSOs may contact the IPC Coach(es) (also known as a DRC Superuser) if the claimant's electronic file is not accessible



VSO DRC DIC Process

- 1. VSO submits VA Form 21-22
 - VSO requests paper claims folder to be uploaded into VBMS

 (if necessary)
- 2. Utilizing a checklist, VSO gathers evidence, required forms, and submits claim into DRC Direct Upload Portal if claim meets

 DRC DIC Criteria
 - VSOs will include a DRC Evidence Coversheet and DRC Coversheet



Common Errors that delay claims

- Wrong signature or no signature (Claimants, VSO, alternate signers)
- Incomplete applications sections left blank or missing pages
- Not enough information to identify the Veteran or to add them in our system
- Wrong information (address is wrong, SSN numbers, etc)
- Wrong forms or outdated forms used to apply
- Claimant doesn't check off benefit for which they are applying



Common Errors that delay claims

- Information incomplete income, net worth, marital history, service is not all there no DD214
- When applying for A&A- please submit medical evidence (VA Form 21-2680) signed by doctor.
- Claimant forgets to submit nursing home information or caregiver statement, or the VA Form 21-2680 is incomplete or missing
- When applying for DIC- evidence to support service connected death not provided

Tips

- > Always send DD214 and death certificate
- Always state interest earned we do not need to see the bank statements
- When submitting medical expenses keep it simple and provide all information
- Always provide complete marital history. VA cannot grant benefits if spouse is unable to provide her own marital history.



Questions?



