

VA DISABILITY CLAIM FORMS & TIPS

****Disclaimer - I am not a VA employee, I have not had any specialized training from the VA or any other source, I simply gathered this information as I was preparing to do my VA Claim from the VA website, various Facebook groups, legal websites about VA Claims, articles, and other sources to serve as a guide in preparing to file a claim and ensure my records and claim was as complete, accurate, and detailed as possible. I make no representation that using the information in this document will guarantee any specific results as everyone's records and conditions are different. This document is not meant to replace the trained advice of a Veteran Service Officer (VSO) who are trained to assist service members in filing claims. The use of a VSO in filing a claim is always advised.**

VA Disability claim forms

The below listed forms are the most commonly required and optional forms in a VA claim. The required forms will be part of every claim, whereas some forms are only required depending on the claimed condition, or option of the individual such as the statement of support. There may be other required forms which a VSO would notify you of.

Required

R – VA21-526EZ – Application for Disability Compensation – the basic application filled out for all claims. You will list all conditions, date began, and cause.

R- VA 21-686C – Application to add/ remove dependents – required if married or have children or other dependents claimed in DEERS. Will ensure you get paid disability w/dependent rate

R/O – VA 21-0781 Statement in support of claim for PTSD – required for all PTSD claims, list the stressors (events), details about event only. Not required if not claiming PTSD.

Optional based on service member

O – VA 21-4138 Statement in Support of Claim -used to write your personal statement about your claim. Tell the condition, the symptoms, how it affects you personally and professionally

O - VA 21-10210 Lay/Witness Statement - This form is for buddy statements, or spouse statements regarding your claims. Especially useful if medical records are not available, or you feel they are insufficient. (example: your spouse writing a statement about how you snore at night, are restless and stop breathing to support a sleep apnea claim, or a fellow service member who saw you fall off a vehicle and took you to the medic in support of a back injury claim)

O – VA 21-0781 Statement in support of claim for PTSD – required for all PTSD claims, list the stressors (events), details about event only.

O – VA 21-22 – Appointment of VSO – basically a power of attorney where you elect to be represented by a VSO, recommended for most all claims to ensure accuracy.

Tips:

Statement of Support

Statements in support of claim are great for detailing how various conditions affect you personally/professionally, which affects your rating. You can use the official form (VA21-0781) or simple word document. Try to keep them to 1-2 pages, detailed and precise, as more lengthy statements might not be fully read or understood. These statements can potentially be helpful for conditions you claim which you either don't have medical records to support, or you feel are not well enough documented in your records. Statements from a spouse who can attest to how they see a condition affecting you at home, statements from people you served with in a unit who saw an injury occur or saw how your condition affects you at work can help paint a picture that isn't clear from medical records.

PTSD / Mental Health Claims

For PTSD or other mental health claims you WILL get a C&P Exam from the VA. You will be required to see a new psych doctor of their choosing; you only get one chance to get your story across to them. Mentally prepare yourself for this. Most of us do not like to reveal a vulnerable and personal side that we often try to bury. Even those who have opened up and sought mental health help take time to open up to a therapist and lay all the cards on the table, but you don't have that luxury here.

You will meet a complete stranger and have to be bluntly honest about your mental health and how it affects you if you desire to be adequately rated for this. Be ready to be uncomfortably emotionally vulnerable, and yes, you likely will leave the exam emotionally raw and upset from being so honest. But again, you meet this person once, and while it's tough, after you are done you likely never see them again and it's over with.

Consider bringing a trusted confidant for this exam if you want. They probably won't be allowed in the exam with you, but having them there afterwards for support or to even drive you home can be reassuring.

Make sure to review VA 21-0781 (Statement in support of claim for PTSD). To successfully claim PTSD on a VA Claim you have to meet certain criteria laid out on this form and 38CFR. Even if you were diagnosed previously with PTSD if you don't speak to the criteria of PTSD the VA has they may list you having another mental health condition. Looking over and familiarizing yourself with this form may even make you realize symptoms you hadn't considered as being due to PTSD. Being familiar with this form and your symptoms will ensure you speak to your symptoms to "check the blocks" and don't leave anything out at your exam.

One major factor in a PTSD claim is that you must have been diagnosed with the condition, so seek help before you get out. Review the DBQ form for PTSD, this will be important. Even if you have been diagnosed with PTSD previously, the VA requires service members meet the VA criteria to be rated with PTSD, otherwise you will be considered to have another mental health disorder such as general anxiety, depression, etc. These criteria are as follows:

- Veteran was exposed to traumatic event where an actual threat of death or serious injury to self or others, and response involved intense fear, helplessness, or horror
- The event is persistently re-experienced (dreams, recollections, memories, psychological distress)
- Persistent avoidance of stimuli associated with the trauma; diminished interest in activities, feeling of detachment, restricted range of affection, avoidance of people or activities that remind you of an event, avoid thoughts of the events, difficulty remembering, etc (must have 3 of the symptoms listed on DBQ)
- Persistent symptom of increase arousal: hypervigilance, startled response, difficulty sleeping, etc
- Duration of symptoms lasting more than one month
- Clinically significant distress or impairment
- Not caused by alcohol or drug use

If you are nervous about freezing up in the exam and not speaking to your condition, write a detailed statement about your condition, symptoms, and how it affects you personally and professionally. Bring this statement with you to the exam and provide a copy to the examiner and ask to read if necessary. If thorough enough this statement will answer most of the questions they will have.

38 CFR Book C, Schedule for Rating Disabilities

38 CFR Book C, Schedule for Rating Disabilities- this is the VA Bible on disability claims. Every compensable illness/injury is listed. Familiarize yourself with your claimed conditions in this guide. Know your symptoms and speak to them. Knowing how to write out

your symptoms in detail is essential. (for example, migraines. if you say you get one every couple months that might get 10%, if you are specific about your symptoms, “I get one to two monthly and have to lay down in a dark room, have to take medication and can't function till it passes, you are more likely to get a higher rating because your symptoms warrant it according to 38CFR AND you spoke of those symptoms).

Now is not the time to “man up” or “tough it out”, you have to tell them what is wrong with you and how it affects your daily life personally and professionally. “I get frequent headaches” does not come across the same as “I get frequent headaches that render me unable to do my job for a day or two, and those headaches prevent me from enjoying time with my family, I have missed school events with my children because of my headaches” Link to regulation:

<https://www.benefits.va.gov/WARMS/bookc.asp>

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General Tips

- Chronic conditions such as pain, migraines, high blood pressure are more likely to be rated or rated higher with supportive evidence such as medical records or tracking data of your condition and symptoms using an app.
 - o Migraine Buddy – app for tracking migraines
 - o Blood Pressure Diary – for BP
- Print a silhouette and label every single issue you have from head to toe, no matter how big or small, to include scars. The visual will help you not forget something small that you have learned to ignore or live with. Compare your conditions against the information in CFR 38. On a word document list each issue you labeled and think solely about how

that issue affects you; do you have pain, limited range of motion from the issue, do you avoid certain social activities or events with family (how it affects you personally), can you not perform certain professional activities due to the issue (standing in formations for long periods, running, concentrating?) Documenting these now will help you when it's time to fill out the C&P questions about your conditions and will make it fresh in your mind.

- GET SEEN, GET SEEN, GET SEEN. If you plan to claim something you have to have been seen for that issue. Nothing hurts your chances for a fairly assessed VA claim more than not having medical records to support your claim. Many of us postpone going to sick call as we fear it will hinder our career progression, that we will be looked down upon by our peers or leaders, or we simply don't like doctors. In some cases unit leaders will discourage you from going to get seen, but at the end of the day if it's not in your medical records IT DID NOT HAPPEN, and the VA will adjudicate your claim as such due to lack of evidence. Rest assured those same leaders who tell you not to go to sick call or treat you differently for going will be going to sick call themselves when they are nearing retirement.

- Keep your treatment current! If you were seen for your knees 10 years ago and have not been back to the doctor since, the VA will assume the issue has improved and deny your claim for that condition most likely. If you have an on-going treatment for an issue, you do not need to be seen again, i.e., sleep apnea where you were issued a CPAP. The CPAP and supply refills are your treatment, it's considered current

- Claim EVERYTHING, no matter how big or small before you separate. Anything you claim that occurred while on active duty or AGR status is typically considered service connected in most cases. (Even things that happen off duty, provided you were in active status at the time, i.e. you fell and injured your arm playing basketball off duty). If you do not claim an issue now, after you are separated you will be required to prove service connection, that the issue stems from your military service. Even if something you claim now isn't bad enough to be rated for compensation, it will get a "0% Service Connected", meaning at a later time if the condition worsens, you can file for an increase and it's already service connected.
- You CAN claim conditions that existed prior to service if they were aggravated by serving. For example, if you tore a rotator cuff prior to joining the injury will not be service connected, however, the aggravated condition from years of service will be. The VA will determine what the service-connected rating would be, and what the aggravated rating will be, you will be paid the difference. So, for example, if the service connection rating for the injury was 10% disability, but the current service-aggravated symptoms warrant a 30% rating, you would end up with a 20% disability rating for that condition.
- Range of motion test will be performed for any joint related claims, knees, back, shoulders, elbows, hips, etc. You can google "VA range of motion chart _____ (back, knee, etc.) to see what the test will consist of. The key to the range of motion tests is to remember they want you to flex or extend till you FEEL pain, NOT till the pain is too much to go further. If while reaching for your toes from an upright position you begin to

feel pain at 15 degrees STOP, if you can push through the pain and reach down to your knees, you have only hurt your claim and your back. During these tests it's not time to "suck it up" or "work through the pain" The goal should be to leave the exam in no more pain than you arrived in.

- Find the Disability Benefits Questionnaire (DBQ) on google for your conditions. Most claimable conditions have one, especially PTSD. These are VA internal forms they use in reviewing your claim. Familiarizing yourself with the form will help you ensure you speak to the information they need to know, especially with PTSD.
- Anticipate everything at your C&P exams will be documented. From the moment the examiner says the simple, "how are you today", if you say "I'm good", that can and likely will be in the report, "service member reported being good and feeling ok on the day of exam". If you claim that you have difficulty driving long distances due to pain but answer that you drove yourself to the exam by yourself that will be noted. (Yes, expect each examiner to ask how you got to your appointment that day, regardless of what you are being treated for). Be honest, don't try and put on theatrics, they will see right through it, just keep in mind that you are likely being evaluated in everything you say and do, so act accordingly.
- If you have been prescribed a brace, wear it to the exam, if you have been prescribed shoe inserts, wear them to the exam. Failing to use a prescribed medical device will be noted and can be considered evidence that your claim is not as bad as you state.

BACKWARD PLAN YOUR CLAIM!!!!!!

Backwards plan to ensure your claim is done timely. Benefits Delivery at Discharge (BDD) claims can only be submitted 180-90 days from separation date. With a BDD claim the VA will contract out your claim, you will be scheduled for all your Compensation and Pension (C&P) exams before your separation date. The effective date of your disability will be the date you separate, and you should have a rating from the VA shortly after your separation date.

You can NOT submit your BDD Claim before the 180 days, or AFTER passing the 90-day mark. If you submit your claim 89 days or closer to the separation date it will be processed as a normal claim. The VA will take no action on your claim until your date of separation. You will have to complete your C&P exams and wait on the final review, which will delay when you start getting paid.

Timeline for doing BDD Claim	
Known Separation Date	T- 0
Final Date to submit BDD Claim	- 90 days from Separation
First Date to submit BDD Claim	-180 days from Separation
Request Military Medical Record	-30 days from date of request to receive
Turn-in Civilian records for upload to military record	-10 business days
Request Civilian medical Records	- 30 days from date of request to receive.
	250 days / 8 months prior to separation start getting ready!!!

Military Medical Records

To submit your claim, you will need your military medical record file. Most military treatment facilities have a 30 day turn around on providing your records from the date you request them. Be sure to add that 30 days to the 180 days you already planned. The first time you request your full medical record it will be free, additional copies typically will have to be paid for and will run around \$10-15. The reason for getting the first copy is to review and ensure everything is in there that needs to be. You will be able to identify if you are missing any treatment records as well as identifying what conditions you plan to claim that you need to seek further treatment or initial treatment for. Once you have obtained any additional treatment you desire and have added any civilian treatment records you have you will want to obtain an updated copy of your military medical records to provide to the VA in support of your claim. This will ensure everything you are claiming on your VA Disability has associated medical records that substantiate what you are claiming.

Civilian Medical Records

Obtain your medical records from any civilian doctors you saw while in service. Even if a Military Treatment Facility (MTF) referred you off post for treatment, they will likely only get a report from that doctor on the condition they saw you for. To obtain your full civilian medical record you need to request it from the various providers you have seen. Some providers are very quick and give you your records at the time of request or within days, some may take longer.

Some civilian providers will advise you that they have to charge you and let you know that the VA can request your records for free, but this places you at the mercy of them taking the time to obtain your records, and trusting that they will. This could also delay your claim being settled while they wait for records. The couple of dollars you might pay to obtain your records is worth the peace of mind that they are included.

Once you have received all your civilian records you can take these to your MTF Medical Records department and request they be uploaded to your Military Medical records. Recommended that you retain a copy for yourself and add another 30 days to get these records and have them uploaded before you request your full medical record from the MTF.

Facebook Groups

There are several helpful Facebook groups that can be a treasure trove of information for your claim, knowing how to file, what to expect, or answering general questions:

- VA Disability Chatter That Matters
- VA Comp & Pension Claims
- VA Claims Insider - **Their Facebook page has a lot of good info, but be warned, they are a paid service, they advertise a lot on their Facebook offering to help for a significant sum, and many people report bad experiences with their paid service.

Most of these group members are fellow veterans, service members who are currently separating, VSO's, or others who have some level of experience with this process. Keep in mind that information gained in these groups should always be verified and could be an individual's experience, not the standard practice.

