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Veterans Benefits Administration Web Automated Reference Material System

M21-1MR

Adjudication Procedures Manual Rewrite

January 29, 2002 M21-1MR, Part VI

Part VI

Chapter 18 Benefits

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Part VI Chapter 18 Benefits

Overview

Introduction

Chapter 18 benefits are payable to or for

- a Vietnam veteran's biological child suffering from spina bifida
- a female Vietnam veteran's biological child suffering from certain other birth defects.

This part contains information on

- types of benefits
- general eligibility requirements for benefits
- the claims process for spina bifida benefits, and
- the claims process for other birth defects benefits.

In this Part

This part contains the following chapters:

	Chapter	Chapter Name	See Page
I	1	General Chapter 18 Benefits Information	1-1
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Chapter 1. General Chapter 18 Benefits Information

1. Handling of Chapter 18 Benefits by the Denver Regional Office

Introduction

This topic contains information the handling of Chapter 18 benefits by the Denver regional office (RO), including the

- policy information on handling all Chapter 18 benefit claims, and
- Denver RO address.

Change Date

November 1, 2004

a. Policy: All Chapter 18 Benefit Claims Will be Handled by the Denver RO All Chapter 18 benefits are to be handled by the Denver regional office (RO).

All other ROs must forward the following information to the Denver RO for development and processing:

- new claims with any supporting evidence from the claimant
- any service data/verification available from the Veteran's claim folder (if located at RO), and
- any development evidence or additional documentation evidence received from the claimant or any other source.

Note: The spina bifida/birth defects coordinators at each RO will coordinate forwarding of all evidence with the Denver RO.

b. Denver RO Address

The address of the Denver RO is Box 25126, Denver, CO 80225.

2. Impact of Chapter 18 Benefits on Other VA Benefit Entitlements

Introduction

This topic contains information on the

- impact of Chapter 18 benefits on entitlement to other VA benefits, and
- prohibition on multiple Chapter 18 allowances.

Change Date

March 11, 2010

a. Impact of Chapter 18 Benefits on Entitlement to Other VA Benefits

Payment of Chapter 18 benefits has no effect on the right of the

- Chapter 18 beneficiary to receive any other VA benefit to which he/she may be entitled under VA law, with one exception, or
- Veteran on whose service the Chapter 18 benefits are based to receive additional compensation benefits for the Chapter 18 beneficiary.

Exception: VA regulations prohibit an individual pursuing a program of vocational training based on Chapter 18 eligibility to receive assistance at the same time under a Chapter 35 program.

Examples:

- An individual who is entitled to Dependency and Indemnity Compensation (DIC) may also be eligible for Chapter 18 benefits.
- A child in receipt of Chapter 18 benefits is also a dependent on the Veteran's compensation award.

b. Prohibition on Multiple Chapter 18 Allowances

An individual is eligible to receive only one Chapter 18 monthly allowance.

Note: An individual currently receiving spina bifida benefits under 38 C.F.R. § 3.814 who has another qualifying birth defect under 38 C.F.R. § 3.815 will be paid the greater Chapter 18 monthly benefit.

3. Monthly Monetary Allowance

Introduction

This topic contains information on the monthly monetary allowance, including

- the levels of monthly allowance payable for spina bifida and other covered birth defects
- Chapter 18 beneficiaries under age 18, and
- Chapter 18 incompetent beneficiaries.

Change Date

November 1, 2004

a. Levels of Monthly Allowance Payable for Spina Bifida and Other Covered Birth Defects A monthly monetary allowance is payable at one of

- three levels to, or on behalf of, an individual with spina bifida, and
- four levels to, or on behalf of, an individual with other covered birth defects, which may or may not include spina bifida.

References: For more information on the

- disability levels for individuals with spina bifida, see M21-1MR, Part VI, 2.C.11.a.
- disability levels for individuals with other covered birth defects, see M21-1MR, Part VI. 2.C.12.a, and
- rate of the monthly allowance designated for each disability level, see M21-I, Part I. Appendix B.

Note: Individuals with covered birth defects other than spina bifida may be evaluated at a non-compensable level (level zero). Although these individuals are not compensated, they may be entitled to VA health care and vocational training.

b. Chapter 18BeneficiariesUnder Age 18

Beneficiaries of a monthly monetary allowance who are under the age of 18 will be paid as minor children in the custody of a parent or guardian.

c. Chapter 18 Incompetent Beneficiaries

Beneficiaries over the age of 18 may be determined to be incompetent under the provisions of 38 C.F.R. § 3.353.

Note: Annotate the codesheet with a code 33 where applicable.

4. Health Care and Vocational Training

Introduction

This topic contains information on health care and vocational training, including

- the extent of health care coverage provided by VA
- where to find more information on health care coverage
- availability of vocational training, and
- where to find more information on vocational training.

Change Date

November 1, 2004

a. Extent of Health Care Coverage

VA health care and vocational training are available to individuals who qualify for Chapter 18 benefits at any level of disability described under 38 C.F.R. § 3.814(d)(1) or 38 C.F.R. § 3.815(e)(1).

VA shall provide health care necessary for an eligible individual's spina bifida and other covered birth defects and for any associated disability. (See 38 C.F.R. §§ 17.900-17.905)

Important: Note the following VA policies regarding the extent of health care coverage under Chapter 18 benefits

- coverage does not extend to unrelated conditions or disabilities
- health care is provided directly by VA or by an arrangement with an approved health care provider, and
- pre-authorization for service is required in many cases.

b. Where to Find More Information on Health Care Coverage

More information about health care coverage is available from the

- VA spina bifida hotline at 1-888-820-1756
- VA Health Administration Center web page at http://www.va.gov/hac, or
- Denver, Colorado, VA Health Administrative Center at 1-800-733-8387.

4. Health Care and Vocational Training, Continued

c. Availability of Vocational Training

If achievement of a vocational goal is feasible, an individual found entitled at any level of disability described under 38 C.F.R. § 3.814(d)(1) or 38 C.F.R. § 3.815(e)(1) may be eligible for a program of vocational training provided by Vocational Rehabilitation and Employment (VR&E).

The local VR&E office will schedule the individual for an evaluation appointment once

- the individual files an application for vocational training, and
- VA verifies the individual's monthly monetary allowance.

Note: Pursuant to VA regulation for vocational rehabilitation and employment, an individual may not receive benefits concurrently under

- 38 U.S.C., Chapter 35, and
- 38 U.S.C., Chapter 18, for vocational training.

Important: If the individual is eligible for both benefits, he/she must elect in writing which benefit to receive.

Reference: VA regulations for vocational rehabilitation and employment, see 38 CFR Book G, Subpart M.

d. Where to Find More Information on Vocational Training

Eligible individuals should contact the VR&E Division at the nearest VARO.

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Section A. Process Overview

Overview

Introduction This section contains information on how to process a Chapter 18 benefits

claim.

In this Section This section contains the topic, "Chapter 18 Claims Process."



1. Chapter 18 Claims Process

Change Date November 1, 2004

a. Process The table below describes the stages of the Chapter 18 benefits claim process.

Stage	Name	Description
1	Eligibility	• Veteran Service Representative (VSR) verifies
	and	specific eligibility requirements for spina bifida
	Development	or other covered birth defects benefits, including
		 qualifying Vietnam or Korean service of the
		veteran parent (see M21-1MR, Part VI, 2.B.5
		and M21-1MR, Part VI, 2.B.6)
		- individual's relationship to the veteran, or
		– the nature of the claimed disability, and
		 VSR develops for and obtains the following
		evidence to support claim:
		 Vietnam or Korean service records
		- relationship and date of conception records, and
		 medical and lay evidence.
2	Rating	Rating Veteran Service Representative (RVSR)
		considers medical and lay evidence
		• determines whether to award or deny entitlement
		to a monthly monetary allowance
		determines disability level according to
		- severity of symptoms, and
		 degree of permanent physical or mental
		disability, and
		• determines incompetency of beneficiaries over
2	Authorization	the age of 18 under provisions of <u>38 CFR 3.353</u> .
3	Authorization	VSR
	Y	• processes award or denial of monthly monatory
		 processes award or denial of monthly monetary allowance, and
		notifies claimant of decision.
		• nounces chainmaint of uccision.

Section B. Eligibility and Development

Overview

In this Section

This section contains the following topics:

Topic	Topic Name	See Page
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2. Application for Benefits

Introduction

This topic contains information on the application for benefits, including

- VA Form 21-0304, Application for Benefits for Certain Children with Disabilities Born of Vietnam and Certain Korean Service Veterans, and
- where to obtain the form.

Change Date

September 26, 2008

a. VA Form 21-0304

A claimant should normally submit VA Form 21-0304, Application for Benefits for Certain Children with Disabilities Born of Vietnam and Certain Korean Service Veterans, to VA in order to apply for benefits associated with spina bifida and other covered birth defects. However, any signed statement that contains all the information required by VA Form 21-0304 will be acceptable.

b. Where to Obtain VA Form 21-0304

VA Form 21-0304 can be obtained through

- the VA toll-free number, at 1-800-827-4833, or
- a local VA office.

3. Initial Eligibility Verification

Introduction

This topic contains information on initial eligibility verification, including

- initial review of eligibility requirements before complete development of evidence
- example 1: when additional development is not necessary for a spina bifida claim, and
- example 2: when additional development is not necessary for a Chapter 18 claim.

Change Date

September 26, 2008

a. Initial
Review of
Eligibility
Requirements
Before
Complete
Development of
Evidence

Veterans Service Representatives (VSRs) will not develop for additional evidence from the claimant if it can be determined immediately that the claimant cannot meet all the qualifying requirements for

- Vietnam or specific Korean service
- nature of the disability, and
- relationship to the Veteran.

References: For information on

- Vietnam Service and Date of Conception Requirements and Development, see M21-1MR, Part VI, 2.B.5
- Korean War Service and Date of Conception Requirements and Development, see <u>M21-1MR</u>, <u>Part VI</u>, 2.B.6
- Relationship Requirements and Developing for Relationship Evidence, see M21-1MR, Part VI. 2.B.7
- Disability Requirements for Spina Bifida Benefits, see M21-1MR, Part VI, 2.B.8, and
- Disability Requirement for Other covered Birth Defects, see M21-1MR, Part VI. 2.B.9.

3. Initial Eligibility Verification, Continued

b. Example 1:

Situation

When Additional A child of a Veteran who served only during the Gulf War applies for spina bifida benefits.

Development Is Not Necessary

for a Spina Bifida Claim Result The VSR will send a denial letter without developing for nature of disability or relationship evidence.

Rationale

The VSR can immediately determine that the parent of the claimant cannot meet Vietnam or specific Korean service requirements for Chapter 18 benefits.

c. Example 2:

Situation

When **Additional Development Is** A child with spina bifida occulta applies for Chapter 18 benefits.

Not Necessary for a Chapter 18 Claim

Result

The VSR will give the case to an RVSR for an immediate rating decision denying the claim without developing for Vietnam or specific Korean service requirements and relationship evidence.

Rationale

The claimant does not have a qualifying spina bifida disability that meets the requirements for Chapter 18 benefits. A rating decision is required to implement a denial of benefits when the child has spina bifida occulta or no spina bifida condition exists.

Note: In addition to denying the claim for spina bifida benefits, the rating decision must also address entitlement to benefits for other covered birth defects under 38 CFR 3.815.

4. Development Process Overview

Change Date December 26, 2008

a. Development Process for Chapter 18 Benefits The table below describes the responsibilities of the VSR during the stages of the development process for Chapter 18 benefits.

Important: The development process is shown here in stages for presentational purposes. In practice, each of the development stages, as presented in the table below, is executed simultaneously by the VSR.

Stage	Description
1	The VSR develops for and reviews
	• service records to prove that the biological Veteran parent has
	qualifying Vietnam or specific Korean service dates and duty assignments
	• birth certificates to determine date of conception, and
	• evidence of a biological relationship between the individual and
	the parent with qualifying Vietnam or specific Korean service.
	References: For information on
	• Vietnam service requirements, see M21-1MR, Part VI, 2.B.5,
	and
	• Korean service requirements, see <u>M21-1MR, Part VI, 2.B.6</u> .
2	The VSR develops for medical evidence verifying that the
	individual has a qualifying medical condition for Chapter 18
	benefits along with any other medical and lay evidence regarding
	treatment and symptoms.

5. Vietnam Service and Date of Conception Requirements and Development

Introduction

This topic contains information on the Vietnam service and date of conception requirements and development, including

- Vietnam service requirement
- the definitions of
 - qualifying Vietnam service, and
 - the Vietnam era
- character of discharge exception for Chapter 18 eligibility
- development for Vietnam service
- requirement for conception during or after Vietnam service, and
- development for date of conception evidence.

Change Date

September 26, 2008

a. Vietnam Service Requirement

A Vietnam Veteran must have performed active military, naval, or air service in the Republic of Vietnam (RVN) during the Vietnam era.

b. Definition: Qualifying Vietnam Service

Qualifying Vietnam service means service in the

- RVN, and
- waters off-shore and service in other locations, if such service involved duty or visitation in the RVN.

c. Definition: Vietnam Era

The *Vietnam era* is defined as

- beginning on January 9, 1962, and ending on May 7, 1975, for the purpose of spina bifida benefits eligibility, and
- beginning on February 28, 1961, and ending on May 7, 1975, for the purpose of other covered birth defect benefits eligibility.

References: For regulatory definitions of "Vietnam Veteran," see

- 38 CFR 3.814(c)(1) and
- <u>38 CFR 3.815(c)(1)</u>.

5. Vietnam Service and Date of Conception Requirements and Development, Continued

d. Character of Discharge Exception for Chapter 18 Eligibility

Eligibility for Chapter 18 benefits is *not* dependent on character of discharge. That is, regardless of characterization of the service of the Veteran parent, individuals may receive Chapter 18 benefits if the necessary Vietnam service and relationship requirements are met.

e. Development for Vietnam Service

Reference: For information on developing for evidence of Vietnam service, see

- M21-1MR, Part III, Subpart iii, 2.D.23.c, and
- M21-1MR, Part III, Subpart iii, 2.E.33.

f. Conception During or After Vietnam Service

In order for an individual to be eligible for Chapter 18 benefits, the individual must have been conceived after the date on which the Veteran parent first served in the RVN during the Vietnam era.

Questions about the child's date of conception will be resolved by an administrative decision.

Reference: For information on developing for date of conception, see M21-LMR, Part VI, 2.B.5.g.

5. Vietnam Service and Date of Conception Requirements and Development, Continued

for Date of Conception **Evidence**

g. Development Follow the steps in the table below to develop for evidence to determine date of conception.

Step	Action	
1	Review the date of birth on the birth certificate.	
2	Does the date of birth indicate that conception occurred during or	
	after the Veteran's qualifying service during the Vietnam era?	
	• If yes, go to M21-1MR, Part VI, 2.B.7.	
	• If no, go to M21-1MR, Part VI, 2.D.16.c.	
	Notes:	
	• According to <i>Danforth's Obstetrics and Gynecology</i> , a "normal"	
	full-term birth may occur as many as 10 months or as few as	
	eight months after conception.	
	• The second page of a birth certificate (part 2) contains health and	
	statistical data, such as an estimate of the length of pregnancy.	
	Although part 2 of a birth certificate is not mandatory to	
	establish eligibility, this evidence may help to establish the date	
	of conception.	

6. Korean Service and Date of Conception Requirements and Development

Introduction

This topic contains information on Korean service and date of conception requirements and development, including

- specific Korean service requirements
- conceding herbicide exposure for service in or near the Korean demilitarized zone (DMZ)
- character of discharge exception for Chapter 18 eligibility
- establishing herbicide exposure
- requirement for conception during or after Korean service, and
- development for date of conception evidence.

Change Date

November 22, 2011

a. SpecificKorean ServiceRequirements

Effective December 16, 2003, the Veterans Benefits Act of 2003 provides benefits and services to children born with spina bifida who are the natural children of Veterans who served in Korea "in or near" the demilitarized zone (DMZ) between September 1, 1967, and August 31, 1971.

6. Korean Service and Date of Conception Requirements and Development, Continued

b. Conceding Herbicide Exposure for Service in or Near the Korean DMZ Under 38 CFR 3.814(c)(2), effective February 24, 2011, concede exposure to herbicides on a presumptive basis for Veterans who served

- between April 1, 1968, and August 31, 1971, and
- in a unit that VA or the Department of Defense (DoD) has determined to have operated in an area in or near the Korean DMZ.

The table below shows the units and other personnel that DoD has identified as operating in or near the Korean DMZ during the qualifying time period.

Note: Before the amendment of 38 CFR 3.814(c)(2), effective February 24, 2011, VA conceded exposure to herbicides on a factual basis for Veterans who served in one of the units below between April 1968 and July 1969.

Combat Brigade of the 2 nd	Division Reaction Force	3 rd Brigade of the 7 th
Infantry Division		Infantry Division
1 st Battalion, 38 th Infantry	4 th Squadron, 7 th Cavalry,	1 st Battalion, 17 th Infantry
	Counter Agent Company	
2 nd Battalion, 38 th Infantry		1 st Battalion, 31 st Infantry
1 st Battalion, 23 rd Infantry		1 st Battalion, 32 nd Infantry
2 nd Battalion, 23 rd Infantry		2 nd Squadron, 10 th Cavalry
3 rd Battalion, 23 rd Infantry		2 nd Battalion, 17 th Infantry
2 nd Battalion, 31 st Infantry		2 nd Battalion, 31 st Infantry
<i>Note</i> : Service records may		<i>Note</i> : Service records may
show assignment to either		show assignment to either
the 2 nd or the 7 th Infantry		the 2 nd or the 7 th Infantry
Division.		Division.
		2 nd Battalion, 32 nd Infantry
3 rd Battalion, 32 nd Infantry		3 rd Battalion, 32 nd Infantry
<i>Note</i> : Service records may		<i>Note</i> : Service records may
show assignment to either		show assignment to either
the 2 nd or the 7 th Infantry.		the 2 nd or the 7 th Infantry.
1 st Battalion, 9 th Infantry		1 st Batallion, 73 rd Armor
2 nd Battalion, 9 th Infantry		
1 st Battalion, 72 nd Armor		
2 nd Battalion, 72 nd Armor		
1 st Battalion, 12 th Artillery		
1 st Battalion, 15 th Artillery		

6. Korean Service and Date of Conception Requirements and Development, Continued

b. Conceding Herbicide Exposure for Service in or Near the Korean DMZ (continued)

Combat Brigade of the 2 nd	Division Reaction Force	3 rd Brigade of the 7 th
Infantry Division		Infantry Division
7 th Battalion, 17 th Artillery		
5 th Battalion, 38 th Artillery		
6 th Battalion, 37 th Artillery		
Other Qualifying Assignment		
2 nd Military Police Company,		
13 th Engineer Combat Battalie	on	
United Nations Command Security Battalion-Joint Security Area (UNCSB-JSA)		
Crew of the USS Pueblo		

c. Character of Discharge Exception for Chapter 18 Eligibility As with Vietnam service, eligibility for Chapter 18 benefits based on Korean service is not dependent on character of discharge. That is, regardless of the characterization of service of the Veteran-parent, individuals may receive Chapter 18 benefits if the specific Korean service and relationship requirements are met.

d. Establishing Herbicide Exposure

The table below shows how to establish exposure to herbicides in claims based on Korean service.

If the Veteran served in Korea	Then
in a unit or other military entity	concede that the Veteran
listed in block M21-1MR, Part VI,	
2.B.6.b, between April 1, 1968, and	• served at or near the DMZ, and
August 31, 1971	 was exposed to herbicides
	containing Agent Orange.
• in a unit other than one listed in	send a request to the U.S. Army and
block M21-1MR, Part VI, 2.B.6.b,	Joint Services Records Research
and	Center (JSRRC) for verification of
• during a period that was not	exposure to herbicides on a factual,
between April 1, 1968, and August	case-by-case basis.
31, 1971.	

6. Korean Service and Date of Conception Requirements and Development, Continued

e. Requirement for Conception During or After Korean Service

In order for an individual to be eligible for Chapter 18 benefits, the individual must have been conceived after the date on which the Veteran-parent first served in Korea during the dates and with the units indicated in the previous block M21-1MR, Part VI, 2.B.6.b.

Questions about the child's date of conception will be resolved by an administrative decision.

f. Development for Date of Conception Evidence

Follow the steps in the table below to develop for evidence to determine date of conception.

C4	A -45
Step	Action
1 Review	the date of birth on the birth certificate.
2 Does th	e date of birth indicate that conception occurred during or
after the	e Veteran's Korean service?
• If yes	, go to <u>M21-1MR, Part VI, 2.B.7</u> .
• If no,	go to M21-1MR, Part VI, 2.D.16.b.
Notes:	
• Accor	ding to Danforth's Obstetrics and Gynecology, a "normal"
full-te	erm birth may occur as many as 10 months or as few as
eight	months after conception.
• The se	econd page of a birth certificate (part 2) contains health and
statist	ical data, such as an estimate of the length of pregnancy.
Altho	ugh part 2 of a birth certificate is not mandatory to
	ish eligibility, this evidence may help to establish the date
of cor	aception.

7. Relationship Requirements and Developing for Relationship Evidence

Introduction

This topic contains information on relationship requirements and developing for relationship evidence, including

- general relationship eligibility requirements of an individual
- the definition of natural child
- spina bifida benefit requirements: male or female Veteran parent
- other covered birth defect requirements: female Veteran parent
- development for relationship evidence for spina bifida, and
- development for relationship evidence for other covered birth defects.

Change Date

November 22, 2011

a. General Relationship Eligibility Requirements of an Individual

To be eligible for Chapter 18 benefits, the individual must be the natural child of a Veteran who served in

- the RVN during the Vietnam era (see M21-1MR, Part VI, 2.B.5), or
- Korea between September 1, 1967, and August 31, 1971, in or near the DMZ, and who is determined by VA to have been exposed to an herbicide agent during such service.

VA requires more than a written statement to establish parentage. A birth certificate will *always* be required.

Note: Specific relationship requirements exist, separately, for spina bifida benefits and other covered birth defects benefits.

Reference: For more information on specific relational requirements for benefits for

- spina bifida benefits, see M21-1MR, Part VI, 2.B.7.c, and
- other covered birth defects, see M21-1MR, Part VI, 2.B.7.d.

7. Relationship Requirements and Developing for Relationship Evidence, Continued

b. Definition:Natural Child

An parent's *natural child* is the parent's biological child, regardless of the child's

- age
- marital status, or
- dependency status.

An individual cannot become eligible for Chapter 18 benefits through an adoptive parent. Only a biological parent of an adopted individual can make that individual eligible.

c. Spina Bifida Benefit Requirements: Male or Female Veteran Parent If a child of a Vietnam Veteran, or a Veteran meeting specific Korean service requirements, suffers from spina bifida, VA may award benefits regardless of the gender of the Veteran parent.

Note: Even if both of an individual's parents are eligible Veterans meeting the service requirements, the eligible child is entitled to only one award of spina bifida benefits.

d. Other Covered Birth Defect Requirements: Female Veteran Parent VA may award benefits to a child suffering from a covered birth defect only if the child's natural mother is a Vietnam Veteran.

7. Relationship Requirements and Developing for Relationship Evidence, Continued

e. Procedure for Developing for Relationship Evidence for Spina Bifida Review the parents' names on the birth certificate in the Veteran's claims folder. Ensure the birth certificate lists the Veteran(s) as the parent of the claimant.

Notes:

- A birth certificate with the parents' names on it or a photocopy of the birth certificate is considered sufficient evidence to verify the claim.
- If the child lives with adoptive parents, evidence is still required to show that one of the biological parents is a Vietnam Veteran or a Veteran meeting the specific Korean service requirements.
- In circumstances where paternity is an issue (for example, the birth certificate shows no father or shows someone other than the Veteran father as the informant)
 - request the types of evidence specified in <u>38 CFR 3.209</u> and <u>38 CFR 3.210</u> to establish parentage, and
 - note that the provisions of <u>38 CFR 3.204(a)(1)</u> for accepting only a written statement are *not* applicable to these cases per <u>38 CFR 3.814(c)(2)</u>.

f. Procedure for Developing for Relationship Evidence for Other Covered Birth Defects Review the mother's name on the birth certificate in the Veteran's claims folder. Ensure that the birth certificate lists the Veteran as the mother of the claimant

Note: A birth certificate with the mother's name on it or a photocopy of the birth certificate is considered sufficient evidence to verify the claim.

8. Disability Requirements for Spina Bifida Benefits

Change Date September 26, 2008

a. Qualifying Types of Spina Bifida for Eligibility Under Chapter 18 Spina bifida benefits are payable for all types of spina bifida except spina bifida occulta.

The term "spina bifida" refers to a defective closure of the bony encasement of the spinal cord but does not include other neural tube defects, such as encephalocele and anencephaly (VAOPGCPREC 05-99).

Note: The Rating Veterans Service Representative (RVSR) is responsible for assessing disability level for spina bifida.



9. Disability Requirement for Other Covered Birth Defects

Introduction

This topic contains information on the disability requirement for other covered birth defects, including

- a definition of birth defect
- the limitation on birth defects and conditions covered
- covered birth defects for benefits under Chapter 18
- birth defects not covered due to familial disorders
- birth defects not covered due to birth-related disorders, chromosomal disorders, or congenital malignancies
- conditions not covered due either to birth-related injury or fetal/neonatal infirmity
- conditions not covered due to developmental disorders, and
- birth defects not covered due to lack permanent physical or mental disability.

Change Date

September 26, 2008

a. Definition:Birth Defect

A birth defect is an abnormality of

- structure
- function, or
- metabolism.

The abnormality may be

- genetically determined, or
- a result of environmental influence during embryonic or fetal life.

9. Disability Requirement for Other Covered Birth Defects, Continued

b. Limitation on BirthDefects and ConditionsCovered

Not all birth defects and conditions qualify an individual for Chapter 18 benefits. VA will only cover birth defects that are potentially linked to a female Veteran's Vietnam service and have resulted in a permanent mental or physical disability.

Birth defects and conditions that have been excluded fall under one of the categories listed below. The condition

- has been determined by VA not to be associated with Vietnam service (M21-1MR, Part VI, 2.B.5), including
 - chromosomal abnormalities, or
 - congenital malignancy
- is related to a familial or heredity condition of the parent
- is likely to have occurred due to actions during prenatal or postnatal period, including a
 - birth-related injury, or
 - fetal or neonatal infirmity with well-established causes
- is a developmental disorder rather than a birth defect, or
- does not result in a permanent mental or physical disability.

9. Disability Requirement for Other Covered Birth Defects,

Continued

c. Covered Birth Defects for Benefits Under Chapter 18 Covered birth defects include, but are not limited to

- achondroplasia
- cleft lip and cleft palate
- congenital heart disease
- congenital talipes equinovarus (clubfoot)
- esophageal and intestinal atresia
- Hallerman-Streiff syndrome
- hip dysplasia
- Hirschprung's disease (congenital megacolon)
- hydrocephalus due to aqueductal stenosis
- hypospadias
- imperforate anus
- neural tube defects (including spina bifida, encephalocele, and anencephaly)
- Poland syndrome
- pyloric stenosis
- syndactyly (fused digits)
- tracheoesophageal fistula
- undescended testicle, and
- Williams syndrome.

Note: If any of the birth defects listed above are determined to be familial in a particular family, they are not covered birth defects.

9. Disability Requirement for Other Covered Birth Defects, Continued

d. Birth
Defects Not
Covered Due to
Familial
Disorders

Birth defects that are familial disorders are not covered birth defects. These include, but are not limited to

- albinism
- alpha-antitrypsin deficiency
- Crouzon syndrome
- cystic fibrosis
- Duchenne's muscular dystrophy
- Galactosemia
- Hemophilia
- Huntington's disease
- Hurler syndrome
- Kartagener's syndrome (Primary Ciliary Dyskinesia)
- Marfan syndrome
- Neurofibromatosis
- osteogenesis imperfecta
- pectus excavatum
- Phenylketonuria
- sickle cell disease
- Tay-Sachs disease
- Thalassemia, and
- Wilson's disease.

Note: If any of the birth defects listed above are determined not to be familial in a particular family, then they are covered birth defects.

9. Disability Requirement for Other Covered Birth Defects,

Continued

e. Birth Defects
Not Covered
Due to BirthRelated
Disorders,
Chromosomal
Disorders, or
Congenital
Malignancies

Conditions that are due to birth-related injury are not covered birth defects. These include, but are not limited to

- brain damage due to anoxia during or around time of birth
- cerebral palsy due to birth trauma
- facial nerve palsy or other peripheral nerve injury
- fractured clavicle, and
- Horner's syndrome due to forceful manipulation during birth.

Conditions that are chromosomal disorders are not covered birth defects. These include, but are not limited to

- Down syndrome and other Trisomies
- Fragile X syndrome,
- Klinefelter's syndrome, and
- Turner's syndrome.

Conditions that are congenital malignant neoplasms are not covered birth defects. These include, but are not limited to

- medulloblastoma
- neuroblastoma
- retinoblastoma
- teratoma, and
- Wilm's tumor.

9. Disability Requirement for Other Covered Birth Defects, Continued

f. Conditions Not Covered Due Either To Birth-Related Injury or Fetal/Neonatal Infirmity

Conditions that are due to a fetal or neonatal infirmity with well-established causes or that are miscellaneous pediatric conditions are not covered birth defects. These include, but are not limited to

- asthma and other allergies
- effects of maternal rubella, toxoplasmosis, syphilis, or other maternal infection during pregnancy
- fetal alcohol syndrome or fetal effects of maternal drug abuse
- hyaline membrane disease
- maternal-infant blood incompatibility
- neonatal infections
- neonatal jaundice
- post-infancy deafness/hearing impairment (onset after the age of one year)
- prematurity, and
- refractive disorders of the eye.

g. Conditions Not Covered Due to Developmental Disorders

Conditions that are developmental disorders are not covered birth defects. These include, but are not limited to

- attention deficit disorder
- autism
- epilepsy diagnosed after infancy (after the age of one year)
- learning disorders, and
- mental retardation (unless part of a syndrome that is a covered birth defect).

9. Disability Requirement for Other Covered Birth Defects,

Continued

h. Birth
Defects Not
Covered Due to
Lack of
Permanent
Physical or
Mental
Disability

Birth defects that are not covered because they lack permanent physical or mental disability include, but are not limited to

- conditions rendered non-disabling through treatment
- congenital heart problems surgically corrected or resolved without disabling residuals
- heart murmurs unassociated with a diagnosed cardiac abnormality
- hemangiomas that have resolved with or without treatment, and
- scars (other than of the head, face, or neck) as the only residual of corrective surgery for birth defects.



10. Developing for Medical and Lay Evidence

Introduction

This topic contains information on developing for medical and lay evidence, including

- acceptable medical evidence for benefits under Chapter 18, and
- procedure for development for medical and lay evidence.

Change Date

September 26, 2008

a. Acceptable Medical Evidence for Benefits Under Chapter 18 VA considers the following documents acceptable without further examination for rating purposes, as long as they are adequate for assessing the appropriate level of disability:

- statements from private physicians, and
- examination reports from government or private institutions.

Note: VA will schedule an examination if the claimant does not have documents that are acceptable for rating purposes.

10. Developing for Medical and Lay Evidence, Continued

b. Procedure for Developing for Medical and Lay Evidence Follow the steps in the table below to develop for medical and lay evidence.

Reference: For more information on developing for medical and lay evidence, see M21-1MR, Part I, 1.C.6.

Does the Chapter 18 claims folder contain medical evidence submitted by the claimant showing that he/she has a qualifying medical condition for Chapter 18 benefits? • If yes, go to Step 3. • If no - send the claimant a letter requesting supporting medical evidence and attach VA Form 21-4142, Authorization and Consent to Release Information to the Department of Veteran Affairs, allow 30 days to reply, and - go to Step 2. 2 Did the claimant reply to the request and submit supporting medical evidence of spina bifida or other covered birth defect? • If yes, go to Step 3. • If no, schedule a VA examination and follow up to obtain report. 3 Is the medical evidence adequate for rating purposes?	Step	Action	
 medical condition for Chapter 18 benefits? If yes, go to Step 3. If no send the claimant a letter requesting supporting medical evidence and attach VA Form 21-4142, Authorization and Consent to Release Information to the Department of Veteran Affairs, allow 30 days to reply, and – go to Step 2. Did the claimant reply to the request and submit supporting medical evidence of spina bifida or other covered birth defect? If yes, go to Step 3. If no, schedule a VA examination and follow up to obtain report. Is the medical evidence adequate for rating purposes? 	1		
 If yes, go to Step 3. If no send the claimant a letter requesting supporting medical evidence and attach VA Form 21-4142, Authorization and Consent to Release Information to the Department of Veteran Affairs, allow 30 days to reply, andgo to Step 2. Did the claimant reply to the request and submit supporting medical evidence of spina bifida or other covered birth defect? If yes, go to Step 3. If no, schedule a VA examination and follow up to obtain report. Is the medical evidence adequate for rating purposes?		submitted by the claimant showing that he/she has a qualifying	
 If no send the claimant a letter requesting supporting medical evidence and attach VA Form 21-4142, Authorization and Consent to Release Information to the Department of Veteran Affairs, allow 30 days to reply, and — go to Step 2. Did the claimant reply to the request and submit supporting medical evidence of spina bifida or other covered birth defect? If yes, go to Step 3. If no, schedule a VA examination and follow up to obtain report. Is the medical evidence adequate for rating purposes?		medical condition for Chapter 18 benefits?	
 If no send the claimant a letter requesting supporting medical evidence and attach VA Form 21-4142, Authorization and Consent to Release Information to the Department of Veteran Affairs, allow 30 days to reply, and — go to Step 2. Did the claimant reply to the request and submit supporting medical evidence of spina bifida or other covered birth defect? If yes, go to Step 3. If no, schedule a VA examination and follow up to obtain report. Is the medical evidence adequate for rating purposes?			
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evidence and attach VA Form 21-4142, Authorization and Consent to Release Information to the Department of Veteran Affairs, allow 30 days to reply, and – go to Step 2. 2 Did the claimant reply to the request and submit supporting medical evidence of spina bifida or other covered birth defect? • If yes, go to Step 3. • If no, schedule a VA examination and follow up to obtain report. 3 Is the medical evidence adequate for rating purposes?		● If <i>no</i>	
evidence and attach VA Form 21-4142, Authorization and Consent to Release Information to the Department of Veteran Affairs, allow 30 days to reply, and – go to Step 2. 2 Did the claimant reply to the request and submit supporting medical evidence of spina bifida or other covered birth defect? • If yes, go to Step 3. • If no, schedule a VA examination and follow up to obtain report. 3 Is the medical evidence adequate for rating purposes?		– send the claimant a letter requesting supporting medical	
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 - go to Step 2. Did the claimant reply to the request and submit supporting medical evidence of spina bifida or other covered birth defect? • If yes, go to Step 3. • If no, schedule a VA examination and follow up to obtain report. Is the medical evidence adequate for rating purposes? 		Consent to Release Information to the Department of Veteran	
Did the claimant reply to the request and submit supporting medical evidence of spina bifida or other covered birth defect? • If yes, go to Step 3. • If no, schedule a VA examination and follow up to obtain report. 3 Is the medical evidence adequate for rating purposes?		Affairs, allow 30 days to reply, and	
medical evidence of spina bifida or other covered birth defect? • If yes, go to Step 3. • If no, schedule a VA examination and follow up to obtain report. 3 Is the medical evidence adequate for rating purposes?			
 If yes, go to Step 3. If no, schedule a VA examination and follow up to obtain report. Is the medical evidence adequate for rating purposes? 	2	S A	
• If <i>no</i> , schedule a VA examination and follow up to obtain report. 3 Is the medical evidence adequate for rating purposes?			
• If <i>no</i> , schedule a VA examination and follow up to obtain report. 3 Is the medical evidence adequate for rating purposes?			
3 Is the medical evidence adequate for rating purposes?		• If yes, go to Step 3.	
		• If <i>no</i> , schedule a VA examination and follow up to obtain report.	
	3		
• If yes, go to Step 4.			
• If <i>no</i> , schedule a VA examination and follow up to obtain report.		• If <i>no</i> , schedule a VA examination and follow up to obtain report.	
4 Send the claim to the RVSR to review the claim for rating.	4		
Reference : For more information on the general rating process,		Reference : For more information on the general rating process,	
see M21-1MR, Part III, Subpart iv, 5.			

Section C. Rating

Overview

Introduction

The next stage in the Chapter 18 benefit claims process is to prepare a rating decision.

This section contains information on:

- the overall rating process for Chapter 18 benefits
- disability rating levels assigned to spina bifida claims
- disability rating levels assigned to other covered birth defect claims, and
- preparation of a Chapter 18 benefit rating decision with codesheet.

In this Section

This section contains the following topics:

Topic	Topic Name	See Page
11	Rating Process Overview for Chapter 18 Benefits	2-C-2
12	Disability Rating Levels Assigned to Spina Bifida	2-C-8
	Claims	
13	Disability Rating Levels Assigned to Other	2-C-14
	Covered Birth Defect Claims	
14	Preparation of a Chapter 18 Benefits Rating	2-C-19
	Decision with Codesheet	

11. Rating Process Overview for Chapter 18 Benefits

Introduction

This topic contains information on the rating process, including

- roles and responsibilities in the rating process
- rating process for spina bifida
- rating process for other covered birth defects, and
- determining a beginning date of entitlement.

Change Date

August 14, 2006

a. Roles and Responsibilities

Veterans Service Representatives (VSRs) are responsible for initial development and review of claims.

b. RatingProcess forSpina Bifida

The table below describes the stages in the rating process for Spina Bifida claims.

Stage	Who is Responsible	Description
1	VSR	Confirms that elements of basic eligibility
		have been met.
		Have elements of basic eligibility been
		met?
		• If yes, VSR continues to Stage 2.
		• If no, VSR
		 prepares an administrative denial, and
		 notifies claimant of denial.
		Exception : Rating Service Representative
		(RVSR) must prepare rating decision with
		codesheet if the reason for denial is
		• spina bifida occulta (Reason 02), or
,		• no spina bifida condition exists (Reason
		03).
2	VSR	Forwards claims folder with all medical and
		lay evidence to RVSR for review and
		preparation of rating decision.
		Towns of the Chairman dellar and the DVGD
		Important: Claims are delivered to RVSR
		for rating <i>only</i> if all other evidence
		concerning eligibility has been obtained and verified.
		verifieu.

b. Rating Process for Spina Bifida (continued)

Stage	Who is Responsible	Description
3	RVSR	Prepares rating decision establishing
		entitlement, as
		– Level I
		– Level (I, or
		– Level III, and
		• determines a beginning date of
		entitlement, or
		• prepares rating decision denying
		entitlement, as
		– spina bifida occulta, or
		 no spina bifida condition exists.
		Important: RVSR must prepare a rating
		decision with codesheet for every case that
		is granted or that is denied based on spina
		bifida occulta or no spina bifida condition
		exists.
		• References: For more information on the
		topics listed above, see
		• M21-1MR, Part VI, 2.C.11.a, and
	DYGD	• <u>M21-1MR, Part VI, 2.C.13</u> .
4	RVSR	Sends rating decision with codesheet to
		VSR for input and notification to claimant.

c. Rating Process for Other Covered Birth Defects The table below describes the stages in the rating process for other covered birth defect claims.

Stage	Who is Responsible	Description
1	VSR	Confirms that elements of basic eligibility
		have been met.
		Have elements of basic eligibility been
		met?
		• If yes, VSR continues to Stage 2.
		• If no, VSR
		– prepares an administrative denial, and
		 notifies claimant of denial.
2	VSR	Forwards claims folder with all medical and
		lay evidence to RVSR for review and
		preparation of rating decision.
		<i>Important</i> : Claims are delivered to RVSR
		for rating <i>only</i> if all other evidence
		concerning eligibility has been obtained and
		verified.

c. Rating Process for Other Covered Birth Defects (continued)

Stage	Who is Responsible	Description
3	RVSR	Prepares rating decision establishing
		entitlement, as
		– Level I
		– Level II
		– Level III,
		– Level IV, or
		- Level Zero if the individual has no
		current disability resulting from covered
		birth defects, and
		determines a beginning date of
		entitlement, or
		• prepares rating decision denying
		entitlement.
		Important: RVSR must prepare a rating
		decision with codesheet for every case that
		is granted or that is denied after basic
		eligibility requirements of biological
		relationship and mother's qualifying
		Vietnam era service are met.
		• <i>References</i> : For more information on the
		topics listed above, see
		• <u>M21-1MR, Part VI, 2.C.12.a</u> , and
	Diag	• <u>M21-1MR</u> , <u>Part VI</u> , <u>2.C.13</u> .
4	RVSR	Sends rating decision with codesheet to
		VSR for input and notification to the
		claimant.

d. Determining a Beginning Date of Entitlement Use the table below to determine how the beginning date of entitlement is established.

Important: Spina bifida benefits cannot be awarded prior to December 1, 1997, and for other covered birth defects, the date is December 1, 2001.

If	Then the effective date of award is the later of
	the date
the claim is	VA received the claim, or
	• the entitlement arose.
• the original claim	
• a reopened claim, or	Exception : On a claim for increase, the effective
• a claim for increase	date is the earliest date of evidence supporting a
	higher disability level, if the claim is received
	within one year of such date; otherwise, the
	effective date is the date of receipt of the claim.
the claimant reopens a	• the veteran or beneficiary applied for correction
previously denied claim	of military records
based on corrected	• the disallowed claim was filed, or
military records	• one year before the reopened claim was
	received.
If claim is received	then the effective date for both spina bifida and
within one year of date	other covered birth defects is the date of birth.
of birth	

12. Disability Rating Levels Assigned to Spina Bifida Claims

Introduction

If the RVSR determines that the individual is entitled to benefits based on spina bifida disability, the RVSR assigns the highest disability level based on severity of symptoms and degree of any permanent physical or mental disability.

This topic contains information on

- spina bifida disability levels
- categories of neurological impairment
- minimum disability level assignable
- exceptional cases, and
- scheduling periodic reassessment of disability levels.

Change Date

November 1, 2004

a. Spina BifidaDisabilityLevels

The table below describes the disability levels for spina bifida ratings.

	Level	Description
1	I	The individual
		• walks without braces or other external support as his/her primary
		means of mobility in the community
		• has no sensory or motor impairment of upper extremities
		• has an IQ of 90 or higher, and
		• is continent of urine and feces without the use of medication or
		other means to control incontinence.

12. Disability Rating Levels Assigned to Spina Bifida Claims, Continued

a. Spina Bifida Disability Levels (continued)

Level	Description	
II The individual meets any of the criteria listed below. He/she		
	• walks with braces or other external support as his/her primary	
	means of mobility in the community, or	
	• has sensory or motor impairment of upper extremities, but is able	
	to	
	– grasp a pen	
	– feed self, and	
	– perform self care, or	
	• has an IQ of at least 70 but less than 90, or	
	• requires medication or other means to control the effects of	
	urinary bladder impairment and no more than two times per week	
	is unable to remain dry for at least three hours at a time during	
	waking hours, or	
	• requires bowel management techniques or other treatment to	
	control the effects of bowel impairment but does not have fecal	
	leakage severe or frequent enough to require wearing absorbent	
	materials at least four days a week, or	
	• has colostomy that does not require wearing a bag.	
	<i>Note</i> : The RVSR assigns a disability at Level II provided that none	
	of the disabilities is severe enough to warrant payment at Level III.	
	of the disabilities is severe chough to warrant payment at Level III.	

12. Disability Rating Levels Assigned to Spina Bifida Claims, Continued

a. Spina Bifida Disability Levels (continued)

Level	Description	
III	The individual meets <i>any</i> of the criteria listed below. He/she	
	• uses a wheelchair as his/her primary means of mobility in the	
	community, or	
	• has sensory or motor impairment of the upper extremities severe	
	enough to prevent	
	grasping a penfeeding self, and	
	- performing self care, or	
	• has an IQ of 69 or less	
	• at least three times a week is unable to remain dry for three hours	
	at a time during waking hours, despite the use of medication or	
	other means to control the effects of urinary bladder impairment,	
	or	
	• has fecal leakage severe or frequent enough to require wearing of	
	absorbent materials at least four days a week, despite bowel	
· ·	management techniques or other treatment to control the effects	
	of impairment, or	
	• regularly requires manual evacuation or digital stimulation to	
	empty the bowel, or	
	• has a colostomy that requires wearing a bag.	

12. Disability Rating Levels Assigned to Spina Bifida Claims,

b. Categories of Neurological Impairment

In determining the appropriate disability level to assign, the RVSR assesses the severity of each category of neurological impairment (extremities functioning, mental functioning, and bowel-bladder functioning) as

- least severe (1)
- intermediate severity (2), or
- most severe (3).

The RVSR records these category values on the codesheet.

Important: The highest level assigned for any of the categories determines the overall level of disability.

Example: If extremities and bowel-bladder functions are not impaired (each scored 1) but IQ is 80 (scored as 2), then disability Level II is assigned.

c. Minimum Disability Level Assignable

The RVSR assigns the highest evaluation warranted by the evidence of record. The minimum disability level assignable is Level I.

Assign a Level I

- if basic entitlement is granted, but there is no or insufficient evidence to determine the disability level, and
- unless or until one of the following is received supporting a higher level:
 - additional medical evidence, or
 - VA examination report.

The RVSR prepares a deferred rating under code 38 while the required evidence is pending. The minimum disability Level I remains in effect even if the individual fails to report to VA examination.

12. Disability Rating Levels Assigned to Spina Bifida Claims,

d. Disability Level for Children Under the Age of One Year

The RVSR assigns disability Level I for children under the age of one year unless a pediatric neurologist or pediatric neurosurgeon certifies that, in his or her medical judgment, there is neurological deficit that will prevent the child from

- ambulating
- grasping a pen
- self feeding
- performing self care, or
- achieving urinary or fecal continence.

If such a deficit is present, the RVSR assigns disability Level III.

e. Scheduling Periodic Reassessments of Disability Level

VA periodically reassesses the disability level of beneficiary.

Use the table below to determine course of action for scheduling the periodic reassessments of the disability level.

When the individual is	Schedule a reassessment
under the age of one	when the individual is one.
between one and twenty-one	when medical evidence is received
	indicating a change is warranted, but
	at a minimum every five years.
over the age of twenty-one	only if evidence indicates
	• a material change in disability, or
	• that the current rating may be
	incorrect.

12. Disability Rating Levels Assigned to Spina Bifida Claims,

f. Exceptional Cases

The Director of Compensation and Pension Service may increase the monthly allowance in order to best represent the extent that the disabilities resulting from spina bifida, or from treatment procedures for spina bifida, limit the individual's ability to engage in ordinary day-to-day activities.

The Director may increase the monthly payment for an individual who would otherwise be paid at Level I or II, if there are one or more disabilities resulting from spina bifida, or treatment for spina bifida, such as

- blindness
- uncontrolled seizures, or
- renal failure.

In this case, the individual may receive a Level II or Level III payment, depending on whether the effects of a disability are equal in severity to the effects specified under Level II or III.

Introduction

In the process of examining medical evidence, the RVSR determines a disability level for each case qualifying for other covered birth defect benefits.

This topic contains information on

- other covered birth defect disability levels
- scheduling periodic reassessments of disability level, and
- exceptional cases.

Change Date

November 1, 2004

a. Other Covered Birth Defect Disability Levels The table below describes the disability levels for other covered birth defect ratings.

	Level	Description
1	Ĺ	The individual
		• has residual physical or mental effects that only occasionally or
		intermittently limit or prevent some daily activities, or
		• has disfigurement or scarring of the head, face, or neck with
		gross distortion or gross asymmetry of any facial feature (nose,
		chin, forehead, eyes (eyelids), ears (auricles), cheeks, or lips).

a. Other Covered Birth Defect Disability Levels (continued)

Level	Description
II	The individual has residual physical or mental effects that
	frequently or constantly limit or prevent some daily activities, but
	the individual
	• is able to work or attend school
	• can carry out most household chores
	• can travel
	• provides age-appropriate self-care, and
	• displays communication, behavior, social interaction, and
	intellectual functioning appropriate for age, or
	• has disfigurement or scarring of the head, face, or neck with
	either gross distortion or gross asymmetry of one facial feature
	or one paired set of facial features (nose, chin, forehead, eyes
	(eyelids), ears (auricles), cheeks, or lips).

a. Other Covered Birth Defect Disability Levels (continued)

Level	Description		
III	The individual		
	• has residual physical or mental effects that limit or hinder most		
	daily activities, but individual is able to provide age-appropriate		
	self-care, such as		
	– eating		
	- dressing		
	– grooming, and		
	 carrying out personal hygiene 		
	• may be unable, or does so intermittently and with difficulty, to		
	- attend school		
	- travel, or		
	 carry out household chores 		
	 displays communication, behavior, social interaction, and 		
	intellectual functioning that are not entirely appropriate for age,		
	or		
	• has disfigurement or scarring of the head, face, or neck with		
	either gross distortion or gross asymmetry of two facial features		
	or two paired sets of facial features (nose, chin, forehead, eyes		
	(eyelids), ears (auricles), cheeks, or lips).		

a. Other Covered Birth Defect Disability Levels (continued)

Level	Description	
IV	The individual	
	• has residual physical or mental effects that prevent age-	
	appropriate self-care, such as – eating	
	- dressing	
	– grooming, and– carrying out personal hygiene	
	• displays communication, behavior, social interaction, and	
	intellectual functioning that are grossly inappropriate for age, or	
	• has disfigurement or scarring of the head, face, or neck with	
	either gross distortion or gross asymmetry of three facial	
	features or three paired sets of facial features (nose, chin,	
	forehead, eyes (eyelids), ears (auricles), cheeks, or lips).	

b. Scheduling Periodic Reassessments of Disability Level VA will reassess a determination whenever it receives evidence indicating that a change is warranted.



Introduction

This topic contains information on preparing a rating decision, including

- rating format, and
- entries on codesheet.

Change Date

August 14, 2006

a. Rating Format

Rating decisions for Chapter 18 benefits conform to the general format of other rating decisions, with sections for

- issue
- evidence
- decisions
- facts and analysis, and
- coded conclusion.

b. Entries on Codesheet for Spina Bifida Claims Whether granted or denied, all rating decisions require certain entries on the codesheet.

Use the table below to determine how to annotate the codesheet.

If benefits are	Then state the coded	Example
	conclusion as	
granted	"Spina bifida benefits"	Spina bifida benefits
	followed by	Level II (extrm 1,
		control 1, intel 2) from
	• disability level (İ, II, or III)	10-01-01
	 a parenthetical evaluation 	
	for each of the three	
	categories of neurological	
	impairment (1, 2, or 3), and	
\	• the effective date.	
	Notes:	
	When a minimum	
	evaluation is assigned	
	because of insufficient	
	medical evidence, the coded	
	conclusion is as follows:	
	Level I (minimum) from 10-	
	01-01.	
	• If additional development is	
	conducted for medical	
	evidence, reflect the	
	deferred rating as a code 38	
	on the codesheet.	

b. Entries on Codesheet for Spina Bifida Claims (continued)

If benefits are	Then state the coded	Example
	conclusion as	
denied	"Spina bifida benefits denied"	Spina bifida benefits
	followed on the next line by	denied
		02-Diagnosis of spina
	• "02-Diagnosis of spina	bifida occulta
	bifida occulta," or	
	• "03- No spina bifida	
	condition."	

Note: Rating and codesheets are not prepared for claims that have been denied for the following reasons:

- the individual was conceived before specific Korean or Vietnam service
- the individual failed to furnish requested evidence
- the parent(s) were not Vietnam veteran(s) or veterans with specific Korean service
- the individual is not a natural child of the veteran.

References: For more information on

- Vietnam service requirements, see M21-1MR, Part VI, 2.B.5
- the specific Korean service requirements, see <u>M21-1MR</u>, <u>Part VI</u>, <u>2.B.6.b</u>, and
- administrative decisions see M21-1MR, Part III, Subpart v, 1.

c. Entries on Codesheet for Other Covered Birth Defect Claims Whether granted or denied, all rating decisions require certain entries on the codesheet. Follow the instructions below to determine how to annotate the codesheet.

Granted	State: Chapter 18 benefits are granted for [insert name of defect]			
	at level [insert level 0, 1, 2, 3 or 4] effective [insert date].			
	If benefits are granted at level 0, state: No current disability			
	exists, entitlement for treatment purposes and vocational training			
	only.			
	Example 1) Chapter 18 benefits are granted for cleft lip at level I			
	effective 12-01-2001.			
	Example 2) Chapter 18 benefits are granted for Poland syndrome			
	at level II effective 01-01-2002.			
Denials	1			
	condition]. Then, list the reason:			
	 No qualifying birth defect exists 			
	Disability due to familial disorder			
	 Disability resulted from birth-related injury 			
	• Disability is the result of a fetal or neo-natal infirmity with			
	well-established causes			
	Disability not a permanent physical or mental disability			
	Disability due to congenital malignant neoplasm			
	Disability due to chromosomal disorder, and			
	• Disability due to developmental disorder.			

c. Entries on Codesheet for Other Covered Birth Defect Claims (continued) *Note*: Rating and codesheets are not prepared for claims that have been denied for the following reasons:

- the individual was conceived before the veteran-parent first served in the Republic of Vietnam during the Vietnam era M21-1MR, Part VI, 2.B.5
- the individual failed to furnish requested evidence
- the biological mother was not a Vietnam veteran
- veteran parent is not female
- child deceased prior to 12-01-2001, and the individual is not a natural child of the veteran.



Section D. Authorization Issues

Overview

Introduction

The final stage in the Chapter 18 claims process is to authorize an award or denial rating decision or prepare an administrative denial and to notify the claimant of the decision.

This section contains information on the authorization and notification of decisions regarding entitlement to Chapter 18 benefits, including

- effective dates for reduction and terminations, and
- processing awards and denials

In this Section

This section contains the following topics:

Topic	Topic Name	See Page
15	Effective Date for Reductions and Terminations	2-D-2
16	Processing Awards and Denials	2-D-3

15. Effective Date for Reductions and Terminations

Introduction

This topic contains information on effective dates for reductions and terminations of awards of a monthly monetary allowance.

Change Date

November 1, 2004

a. Effective Date for Reduction of Benefits

Whenever it is necessary to reduce, or discontinue a monthly allowance, generally reduce or discontinue based on the facts found, except as provided in 38 CFR 3.105(g), and 38 CFR 3.114(b).

Note: If benefits were paid erroneously due to

- beneficiary error, reduce or discontinue benefits as of effective date of erroneous award, or
- VA administrative error, reduce or discontinue benefits as of the date of last payment.

b. EffectiveDate forTermination ofBenefits

In the event of death, discontinue Chapter 18 benefits on the last day of the month *before* the month in which the child died.

Note: Handle abandoned claims for Chapter 18 benefits in the same manner as for compensation, pension, or DIC.

Reference: For more information on the effective date for termination of benefits, see 38 CFR 3.503(b).

16. Processing Awards and Denials

Introduction

This topic contains information on processing awards and denials of Chapter 18 monetary allowances, including

- roles and responsibilities
- award and denial process
- denial codes for spina bifida benefits, and
- denial codes for other covered birth defect benefits.

Change Date

November 1, 2004

a. Roles and Responsibilities

Veteran Service Representatives (VSR) and Senior Veteran Service Representatives (SVSR) are responsible for processing awards and denials.

b. Award andDenial Process

Reference: For information on award and denial processing and notification, see M21-1MR, Part III, Subpart v, 2 (TBD) or M21-1, Part IV, Chapter 28 and M21-1, Part V, Chapter 4.

Notes:

- Minimum evaluations will require an entry into the OTHER field of the 451 screen
- The BDN letter is not to be used for notification of a grant or denial and must be suppressed.
- SVSR should annotate the red folder with the veteran's claims numbers.

16. Processing Awards and Denials, Continued

Benefits

c. Denial Codes Use the table below to determine the correct denial codes to enter into for Spina Bifida VETSNET on the 453 screen.

If spina bifida benefits have been denied because	Then enter code
	number
the individual is not a natural child of the veteran	01
of spina bifida occulta	02
no spina bifida condition exists	03
the individual was conceived before Vietnam service or	04
specific Korean service	
the individual failed to furnish requested evidence	05
the parent(s) was(were) not a Vietnam veteran(s) or a	06
veteran(s) with specific Korean service	
of other reasons	07

d. Denial **Codes for Other Covered Birth Defects**

Use the table below to determine the correct denial reasons to enter into VETSNET on the 453 screen.

If other covered birth defects have been denied	Then enter code
because	number
the individual is not a natural child of the veteran	01
the individual was conceived before the veteran first	04
served in Vietnam	
the claimant failed to furnish requested evidence	05
the individual's biological mother was not a Vietnam	06
veteran	
of other reasons, such as	07
• no qualifying covered birth defect exists	
• the veteran is not female, and	
• the child died prior to December 1, 2001	

VI

M21-1MR, Part Attached is the first complete part of the manual rewrite project. M21-1 is reorganized under this project. To avoid confusion, all new parts of the manual will be referred to as "M21-1MR" until such time the entire manual

Manual Rewrite Version in Information

Mapping Style

The new Part V1 incorporates Other Birth Defect benefit procedures.

Authority

By Direction of the Under Secretary for Benefits

has been rewritten and disseminated.

Signature

Ronald J. Henke, Director, Compensation and Pension Service

Distribution

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M21-1MR, Part VI Veterans Benefits Manual M21-1MR, Part VI, "Chapter 18 Benefits," is revised as follows:

Manual Rewrite Version in Information Mapping Style

Pages i through 2-D-5: Remove these pages and substitute pages 1-i through 2-D-4, attached. This change replaces M21-1MR, Part VI, in its entirety.

Part VI, 1.2, 1.4, and 2.C.14.c. are revised to show that individuals who meet qualifications for covered birth defects at Level 0 disability are eligible for vocational training and health care. Eligibility for these benefits does not require that such individuals be in receipt of a monetary allowance.

Part VI, 2.B. is revised to add a new Topic 6 with the renumbering of subsequent Topics. This covers provisions of the Veterans Benefits Act of 2003, effective December 16, 2003, providing benefits for individuals born with spina bifida who are the children of veterans who served with specific units in or near the DMZ in Korea between September 1, 1967 and August 31, 1971. Additionally, all discussions of spina bifida eligibility throughout Part VI now include references to individuals with spina bifida who qualify as children of veterans with this Korean service.

The chart in 2.D.16.e. is revised to show the reason codes to use with denial of claims for other covered birth defects.

The title of 2.B.2. is changed to "Application for Benefits," the phrase "other birth defects" is changed to "other covered birth defects," and other minor editorial changes are made throughout Part VI.

Note: "TBD" (to be determined) after a reference indicates that the referenced material is located in a part of M21-1MR that has not yet been published.

Note: M21-1MR changes are released at the chapter or section level. Change numbers will no longer be assigned to M21-1MR changes. The date of the change will continue to show in the "Change Date" block located on the first page of each topic.

M21-1MR, Part VI November 1, 2004

Transmittal Sheet

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Signature

Renée L. Szybala, Director

Compensation and Pension Service

Rescissions M21-1MR, Part VI, dated January 29, 2002.

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M21-1MR, Part VI

Veterans Benefits Manual M21-1MR, Part VI, "Chapter 18 Benefits," is changed as follows:

The following pages are updated in this change:

- 2-B-25, and
- 2-C-2.

Notes:

- M21-1MR changes are released at the chapter or section level. Change numbers will no longer be assigned to M21-1MR changes. The date of the change will continue to show in the "Change Date" block located on the first page of each topic.
- "TBD" (to be determined) after a reference indicates that the referenced material is located in a part of M21-1MR that has not yet been published.

Changes Included in This Part

Formatting changes are made throughout Part VI to conform to M21-1MR publication standards. In addition, references to rescinded paragraphs in M21-1 and "TBD" after published M21-1MR chapters are removed.

Rescissions

None

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Veterans Benefits Administration Department of Veterans Affairs Washington, DC 20420

Veterans Benefits Administration M21-1MR, Part VI, Continued

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M21-1MR, Part VI

Veterans Benefits Manual M21-1MR, Part VI, "Chapter 18 Benefits," is changed as follows:

The following pages are updated in this change:

- 2-B-25, and
- 2-C-2.

Notes:

- M21-1MR changes are released at the chapter or section level. Change numbers will no longer be assigned to M21-1MR changes. The date of the change will continue to show in the "Change Date" block located on the first page of each topic.
- "TBD" (to be determined) after a reference indicates that the referenced material is located in a part of M21-1MR that has not yet been published.

Changes Included in This Part

Formatting changes are made throughout Part VI to conform to M21-1MR publication standards. In addition, references to rescinded paragraphs in M21-1 and "TBD" after published M21-1MR chapters are removed.

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M21-1MR, Part VI

Veterans Benefits Manual M21-1MR, Part VI, "Chapter 18 Benefits," Chapter 2, "Spina Bifida and Other Birth Defects," is changed as follows:

The following pages are updated in this change:

- 2-B-5
- 2-B-7
- 2-B-11
- 2-B-25
- 2-C-2
- 2-C-4
- 2-C-6
- 2-C-21

Notes:

- M21-1MR changes are released at the chapter or section level. Change numbers will no longer be assigned to M21-1MR changes. The date of the change will continue to show in the "Change Date" block located on the first page of each topic.
- "TBD" (to be determined) after a reference indicates that the referenced material is located in a part of M21-1MR that has not yet been published.

Changes Included in This Part

Formatting changes are made throughout Part VI to conform to M21-1MR publication standards. In addition, references to rescinded paragraphs in M21-1 and "TBD" after published M21-1MR chapters are removed.

Part VI, Chapter 2, Section B, Topic 6, Block e is corrected to show the reference to the previous block as VI.2.B.6.b.

Reference to VI.2.C.10.d has been deleted from VI.2.C.11.b. and VI.2.C.11.c., as the reference citation does not exist within M21-1MR, Part VI.2.C.

Rescissions

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M21-1MR, Part VI, Chapter 2

Veterans Benefits Manual M21-1MR, Part VI, Chapter 2, Section B, *Eligibility and Development*, is changed as follows:

The following pages are updated in this change:

• 2-B-2 through 2-B-7, 2-B-9 through 2-B-10, 2-B-14, 2-B-16 through 2-B-19, and 2-B-24 through 2-B-25

Notes:

- This change reflects a revision in policy now permitting 30 days for development response rather than 60 days.
- M21-1MR changes are released at the chapter or section level. Change numbers will no longer be assigned to M21-1MR changes. The date of the change will continue to show in the "Change Date" block located on the first page of each topic.

Changes Included in This Revision

The table below describes the changes included in this revision to Part VI, Chapter 2, Section B

1	Location of revision	Reason(s) for the change
l	Part VI, Chapter 2,	To include the title of Form 21-0304 in the block
,	Section B, Topic 2,	heading.
	Block a	
	IV.2.B.10.b	To change the development control time from 60
		days to 30 days.
	The following blocks	To clarify the block titles.
	were revised	
	• IV.2.B.3.b	
	• IV.2.B.3.c	
	• IV.2.B.4.a	
	• IV.2.B.5.d	
	• IV.2.B.6.c	
	• IV.2.B.7.d	
	• IV.2.B.8.a	
	• IV.2.B.9.b	
	• IV.2.B.9.c	
	• IV.2.B.10.a	

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/S/
Bradley G. Mayes, Director
Compensation and Pension Service

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Changes Included in This Revision

The table below describes the changes to M21-1MR, Part VI, "Chapter 18 Benefits."

Location of the revision	Reason(s) for the change
Page 1-2: Part VI,	To state that payment of Chapter 18 benefits has
Chapter 1, Topic 2,	no effect on the Veteran-parent's entitlement to
Block a (VI.1.2.a)	compensation.
Pages 2-B-10 and 2-B-	To update the chart of qualifying units and other
11: VI.2.B.6.b	assignments in conformance with M21-1MR,
	IV.ii.2.C.10.o, "Exposure to Herbicides Along
	the Demilitarized Zone in Korea."
Throughout this revision	• To capitalize the word "Veteran."
	 To add the symbol for section, §, before
	citations of statutes and regulations where
	appropriate.
	To make minor editorial changes in
	conformance with M21-1MR publication
	standards.

Transmittal Sheet, Continued

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Changes Included in This Revision

The table below describes the changes included in this revision of M21-1MR, Part VI, "Chapter 18 Benefits," Chapter 2, "Spina Bifida and Other Covered Birth Defects."

Notes:

- M21-1MR will retain some information related to the Benefits Delivery Network (BDN) until it is no longer operational, since the Veterans Service Network (VETSNET) does not yet permit processing of all types of benefit transactions. For information on VETSNET applications and input, consult the VETSNET User Guides on the Compensation Service Intranet.
- The term regional office (RO) also includes pension management center (PMC), when appropriate.
- The term Veterans Service Center Manager (VSCM) also includes Pension Management Center Manager (PMCM), when appropriate.
- Minor editorial changes have also been made to
 - update incorrect or obsolete hyperlink references, and
 - clarify block labels and/or block text.

Reason(s) for the Change	Citation	Page(s)
To state that per 38 CFR 3.814(c)(2), effective February	Part VI, Chapter 2,	2-B-10
24, 2011, VA will concede exposure to herbicides for	Section B, Topic 6,	
Veterans who served	Block b (VI.2.B.6.b)	
• between April 1, 1968, and August 31, 1971, and		
• in a unit that VA or the Department of Defense (DoD)		
has determined to have operated in or near the Korean		
demilitarized zone (DMZ).		
To add the 2 nd Military Police Company, 2 nd Infantry	VI.2.B.6.b	2-B-11
Division, to the table of units that DoD determined to		
have operated in or near the Korean DMZ.		
To revise the table in accordance with 38 CFR	IV.2.B.6.d	2-B-11
3.814(c)(2).		

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Thomas J. Murphy, Director Compensation Service

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Changes Included in this Revision

The table below describes the changes included in this revision of Veterans Benefits Manual M21-1MR, Part VI, "Chapter 18 Benefits."

Notes:

- M21-1MR will retain some information related to the Benefits Delivery Network (BDN) until it is no longer operational, since the Veterans Service Network (VETSNET) does not yet permit processing of all types of benefit transactions. For information on VETSNET applications and input, consult the VETSNET User Guides on the Compensation Service Intranet.
- The term regional office (RO) also includes pension management center (PMC), when appropriate.
- The term Veterans Service Center Manager (VSCM) also includes Pension Management Center Manager (PMCM), when appropriate.
- Minor editorial changes have also been made to
 - update incorrect or obsolete hyperlink references
 - update the term "veteran" to "Veteran"
 - update obsolete terminology, where appropriate
 - clarify block labels and/or block text, and
 - bring the documents into conformance with M21-1MR standards.

Reason(s) for the Change	Citation	Page(s)
To change "2 nd Battalion, 10 th Cavalry," to "2 nd	Part VI, Chapter 2,	2-B-10
Squadron, 10 th Cavalry."	Section B, Topic 6,	
	Block b (VI.2.B.6.b)	
To clarify how to establish exposure to herbicides in	VI.2.B.6.d	2-B-11
claims based on Korean service when the Veteran did		
not serve between April 1, 1968, and August 31, 1971,		
and in a unit listed in M21-1MR, Part VI, 2.B.6.b.		
To clarify the eligibility criteria for Chapter 18 benefits	VI.2.B.7.a	2-B-13
based on a Veteran's Korean service.		

Transmittal Sheet, Continued

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