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Supplemental Claim

https://bmvetlaw.participoll.com/

Lesson Learning Objectives

Learn about Supplemental Claims:

- Learn advantages and limitations of Supplemental Claims.
- Learn what is required for new and relevant evidence to submit with a Supplemental Claim.
- Learn when to choose Supplemental Claim.
- Learn how to complete a Supplemental Claim, VA Form 20-0995.
- Learn which review options are available after VA issues a rating decision on a Supplemental Claim.

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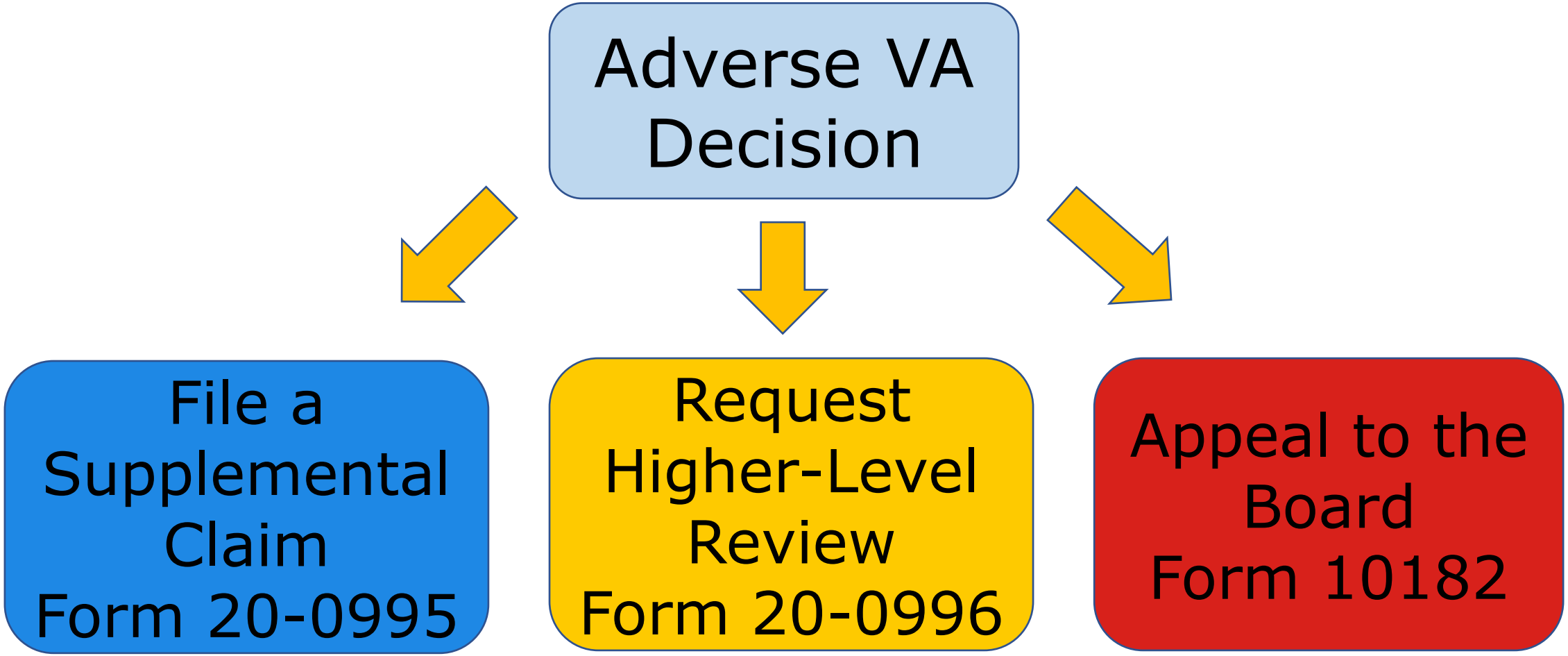
Appeals Modernization Act (AMA)



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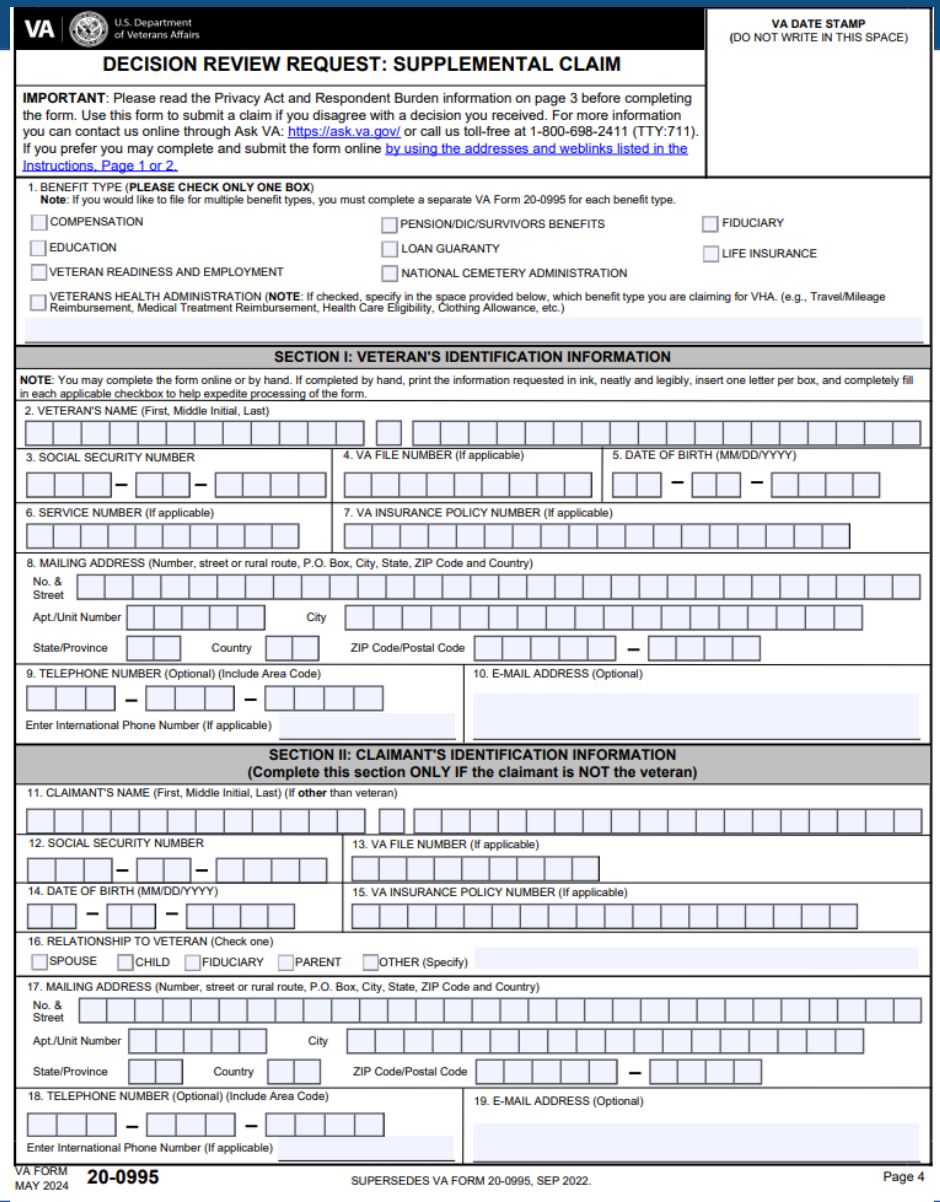
Supplemental Claim

- One of the VBA review lanes.
- Establish by submitting VA Form 20-0995 **plus *new and relevant* evidence**.
- Allows the Veteran to submit new evidence, as well as argument, to VA.
- VA's goal is to decide in an average of 125 days.



VA U.S. Department of Veterans Affairs

VA DATE STAMP
(DO NOT WRITE IN THIS SPACE)

DECISION REVIEW REQUEST: SUPPLEMENTAL CLAIM

IMPORTANT: Please read the Privacy Act and Respondent Burden information on page 3 before completing the form. Use this form to submit a claim if you disagree with a decision you received. For more information you can contact us online through Ask VA: https://ask.va.gov/ or call us toll-free at 1-800-698-2411 (TTY:711). If you prefer you may complete and submit the form online by using the addresses and weblinks listed in the Instructions, Page 1 or 2.

1. BENEFIT TYPE (**PLEASE CHECK ONLY ONE BOX**)
Note: If you would like to file for multiple benefit types, you must complete a separate VA Form 20-0995 for each benefit type.

☐ COMPENSATION ☐ PENSION/DIC/SURVIVORS BENEFITS ☐ FIDUCIARY
☐ EDUCATION ☐ LOAN GUARANTY ☐ LIFE INSURANCE
☐ VETERAN READINESS AND EMPLOYMENT ☐ NATIONAL CEMETERY ADMINISTRATION
☐ VETERANS HEALTH ADMINISTRATION (**NOTE**: If checked, specify in the space provided below, which benefit type you are claiming for VHA. (e.g., Travel/Mileage Reimbursement, Medical Treatment Reimbursement, Health Care Eligibility, Clothing Allowance, etc.)

SECTION I: VETERAN'S IDENTIFICATION INFORMATION

NOTE: You may complete the form online or by hand. If completed by hand, print the information requested in ink, neatly and legibly, insert one letter per box, and completely fill in each applicable checkbox to help expedite processing of the form.

2. VETERAN'S NAME (First, Middle Initial, Last)
3. SOCIAL SECURITY NUMBER
4. VA FILE NUMBER (If applicable)
5. DATE OF BIRTH (MM/DD/YYYY)
6. SERVICE NUMBER (If applicable)
7. VA INSURANCE POLICY NUMBER (If applicable)
8. MAILING ADDRESS (Number, street or rural route, P.O. Box, City, State, ZIP Code and Country)
No. & Street
Apt./Unit Number City
State/Province Country ZIP Code/Postal Code
9. TELEPHONE NUMBER (Optional) (Include Area Code)
Enter International Phone Number (If applicable)
10. E-MAIL ADDRESS (Optional)

SECTION II: CLAIMANT'S IDENTIFICATION INFORMATION
(Complete this section ONLY IF the claimant is NOT the veteran)

11. CLAIMANT'S NAME (First, Middle Initial, Last) (If **other** than veteran)
12. SOCIAL SECURITY NUMBER
13. VA FILE NUMBER (If applicable)
14. DATE OF BIRTH (MM/DD/YYYY)
15. VA INSURANCE POLICY NUMBER (If applicable)
16. RELATIONSHIP TO VETERAN (Check one)
☐ SPOUSE ☐ CHILD ☐ FIDUCIARY ☐ PARENT ☐ OTHER (Specify)
17. MAILING ADDRESS (Number, street or rural route, P.O. Box, City, State, ZIP Code and Country)
No. & Street
Apt./Unit Number City
State/Province Country ZIP Code/Postal Code
18. TELEPHONE NUMBER (Optional) (Include Area Code)
Enter International Phone Number (If applicable)
19. E-MAIL ADDRESS (Optional)

VA FORM MAY 2024 **20-0995** SUPERSEDES VA FORM 20-0995, SEP 2022. Page 4

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Supplemental Claim: Advantages

- Veterans can submit new evidence, as well as argument to describe the errors VA made.
- **Duty to assist applies**.
  - Remember: This is the only lane where it applies!
- VA usually meets their 125-day goal to decide Supplemental Claims.

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Supplemental Claim: Limitations

- Decided by same level VA employee who decided the prior rating decision.
  - Not necessarily the same employee, but an employee with the same level of training.
- Veterans must submit new and relevant evidence.
  - If a Veteran does not have new evidence, that Veteran should pick another lane.

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New and Relevant Evidence

- "New and Relevant" under the Appeals Modernization Act (AMA) means evidence not previously part of the record before the VA that tends to prove or disprove a matter at issue:
  - "New and Relevant" is a lower standard of evidence for AMA when compared with the previous legacy requirement for "new and material" evidence.
- Veterans can use VA form 20-0995 to identify new and relevant medical records for VA to obtain and use as evidence.

Advocacy tip: Focus on submitting or identifying new evidence that would win the claim or trigger VA's Duty to Assist.

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Quiz

Click the **Quiz** button to edit this object

(This question does not count towards your final grade)

Veteran Jane was denied service connection for fibromyalgia for lack of nexus. Now she wants to file a Supplemental Claim. Which of the following do you think is likely new and relevant evidence? (Check all that apply)

- [ ] A new written statement from Jane detailing that her symptoms of pain began after her deployment to Iraq.
- [ ] A copy of an internet article on the prevalence of fibromyalgia among Veterans who were deployed to the Persian Gulf.
- [ ] A copy of 38 C.F.R. § 3.317, VA regulations involving presumption service connection for fibromyalgia for Persian Gulf veterans.
- [ ] A new letter from Jane's doctor opining that he knows no other cause for her fibromyalgia other than her deployment to Iraq.

Question

Veteran Jane was denied service connection for fibromyalgia for lack of nexus. Now she wants to file a Supplemental Claim. Which of the following do you think is **NOT** new and relevant evidence?

A. A new written statement from Jane detailing that her symptoms of pain began after her deployment to Iraq.

B. A copy of an internet article on the prevalence of fibromyalgia among Veterans who were deployed to the Persian Gulf.

C. A copy of 38 C.F.R. § 3.317, involving the presumption of service connection for fibromyalgia for Persian Gulf Veterans.

D. A new letter from Jane's doctor opining that he knows no other cause for her fibromyalgia other than her deployment.

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Answer

Answer: A copy of VA's regulations 38 C.F.R. § 3.317 is argument, not evidence.

The other three answers provide VA with new and relevant evidence that would tend to prove Jane's claim:

- A new letter from Jane's doctor opining that he knows no other cause for her fibromyalgia other than her deployment to Iraq.
- A new written statement from Jane detailing that her symptoms of pain began after her deployment to Iraq.
- A copy of an internet article on the prevalence of fibromyalgia among Veterans who were deployed to the Persian Gulf.

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Disputing New and Relevant Evidence

- Whether the Veteran has submitted new and relevant evidence is a separately appealable issue.
- If VA rejects a Supplemental Claim for the lack of New and Relevant Evidence, the Veteran can dispute VA's rejection in any review lane.
- Continuous pursuit preserves the Veteran's original effective date on the merits.

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When to Choose Supplemental Claim?

Yes: When the Veteran has new evidence to submit to VA.

Yes: When the Veteran needs VA's help obtaining new evidence.

Yes: When the Veteran wants a quick VA resolution.

No: When the Veteran has no new evidence to submit or identify.

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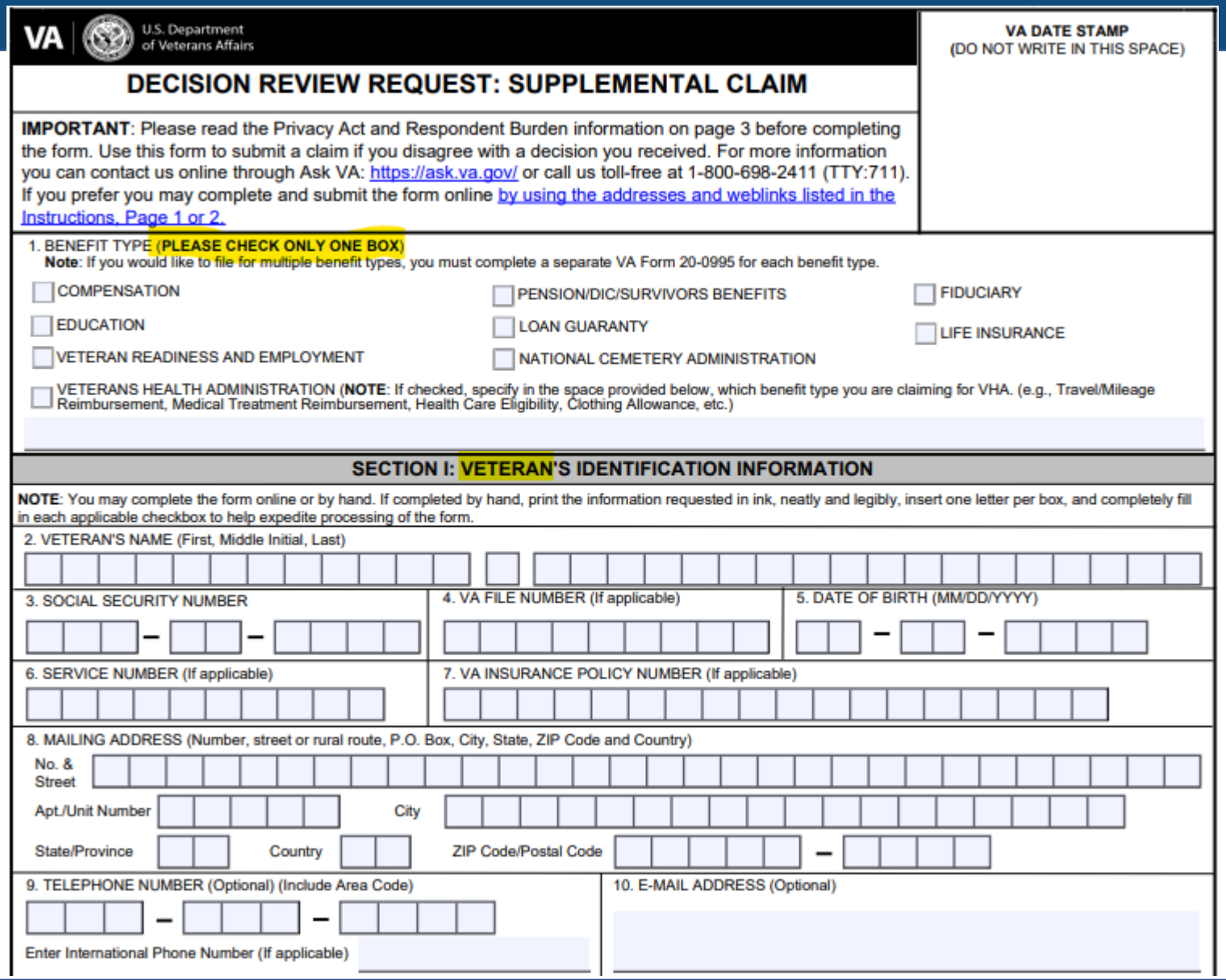
VA Form 20-0995

Box 1: Check only one box for type of benefits seeking.

If the Veteran seeks more than type one benefit, then complete a separate form for each type of benefit.

Section I: Enter the Veteran's information first.
Section II: Enter then Claimant's (ex. widow). (If the Veteran is the claimant, then leave II blank.)



VA | U.S. Department of Veterans Affairs

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8. MAILING ADDRESS (Number, street or rural route, P.O. Box, City, State, ZIP Code and Country)

No. & Street

Apt./Unit Number | City

State/Province | Country | ZIP Code/Postal Code –

9. TELEPHONE NUMBER (Optional) (Include Area Code) – –

Enter International Phone Number (If applicable)

10. E-MAIL ADDRESS (Optional)

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VA Form 20-0995 - 2

SECTION IV: ISSUE(S) FOR SUPPLEMENTAL CLAIM

21. YOU MUST LIST EACH ISSUE DECIDED BY VA THAT YOU WOULD LIKE VA TO REVIEW AS PART OF YOUR **SUPPLEMENTAL CLAIM** (**Note**: Refer to your decision notice(s) for a list of adjudicated issues. For each issue, identify the date of VA's decision.)

If you are responding to a Statement of the Case (SOC) or a Supplemental Statement of the Case (SSOC): By submitting this form, I agree to participate in the modernized review system for the following issues decided in a SOC or SSOC. I am withdrawing the eligible appeal issues listed in Item 21A in their entirety, and any associated hearing requests, from the legacy appeals system. I understand I cannot return to the legacy appeals system for the issue(s) withdrawn.

21A. SPECIFIC ISSUE(S)	21B. DATE OF VA DECISION NOTICE
	– –

Section IV: List each issue in a separate box. Hint: list disabilities as well as benefits such as TDIU and SMC.

Use VA Form 21-4138: Statement in Support of Claim for additional room.

SECTION V: NEW AND RELEVANT EVIDENCE

IMPORTANT: To complete your application, you must submit new and relevant evidence to VA or tell us about new and relevant evidence that VA can assist you in gathering in support of your **supplemental claim**. If you have records in your possession, attach the records to this form. List your name and file number on each page. If you would like VA to obtain non-Federal records, review your decision notification letter or read the instructions for this section on Page 3 that lists the appropriate forms to complete and submit those forms to VA with this request form. **Note**: Unless your **supplemental claim** is based on a change in law, you'll need to submit supporting evidence that's **new and relevant** for your application to be complete. You can also identify evidence you'd like us to gather for you.

22A. IDENTIFY WHERE YOU HAVE RECEIVED TREATMENT (Check all that apply)

- ☐ PRIVATE HEALTH CARE PROVIDER (including non-Federal records)
- ☐ VA VET CENTER
- ☐ COMMUNITY CARE (Paid for by VA)
- ☐ VA MEDICAL CENTER(S) (VAMC) AND COMMUNITY-BASED OUTPATIENT CLINICS (CBOC)
- ☐ DEPARTMENT OF DEFENSE (DOD) MILITARY TREATMENT FACILITY(IES) (MTF)
- ☐ OTHER (Specify):

Note: VA has access to VAMC, CBOC, and MTF records. A consent form is not needed. However, if you would like VA to attempt to obtain your **private provider, (excluding community care (paid for by VA)) or VA Vet Center health records**, VA requires your consent by completing VA Forms 21-4142, *Authorization to Disclose Information to VA*, and 21-4142a, *General Release for Medical Provider Information to VA*. VA forms are available at www.va.gov/vaforms.

Note: If treatment began from 2005 to present, you ***do not*** need to provide in Item 22C the date(s) of treatment.

22B. NAME AND LOCATION OF THE TREATMENT FACILITY	22C. DATE(S) OF TREATMENT (Approximate dates are acceptable) (MM-YYYY)	22D. CHECK THE BOX IF YOU DO NOT HAVE DATE(S) OF TREATMENT
	–	☐ Don't have date

Section V: Check <u>all</u> applicable boxes in 22A. 22B list each provider on a separate line

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VA Form 20-0995 - 3

- Listing the name of private medical facilities on 20-0995 is not enough for VA to get those records!

> **Note**: VA has access to VAMC, CBOC, and MTF records. A consent form is not needed. However, if you would like VA to attempt to obtain your **private provider, (excluding community care (paid for by VA)) or VA Vet Center health records**, VA requires your consent by completing VA Forms 21-4142, *Authorization to Disclose Information to VA*, and 21-4142a, *General Release for Medical Provider Information to VA*. VA forms are available at www.va.gov/vaforms.

Advocacy tip: Remember to attach to the 20-0995 a separate VA Form 21-4142, Release for Private Medical Records, for each private facility.

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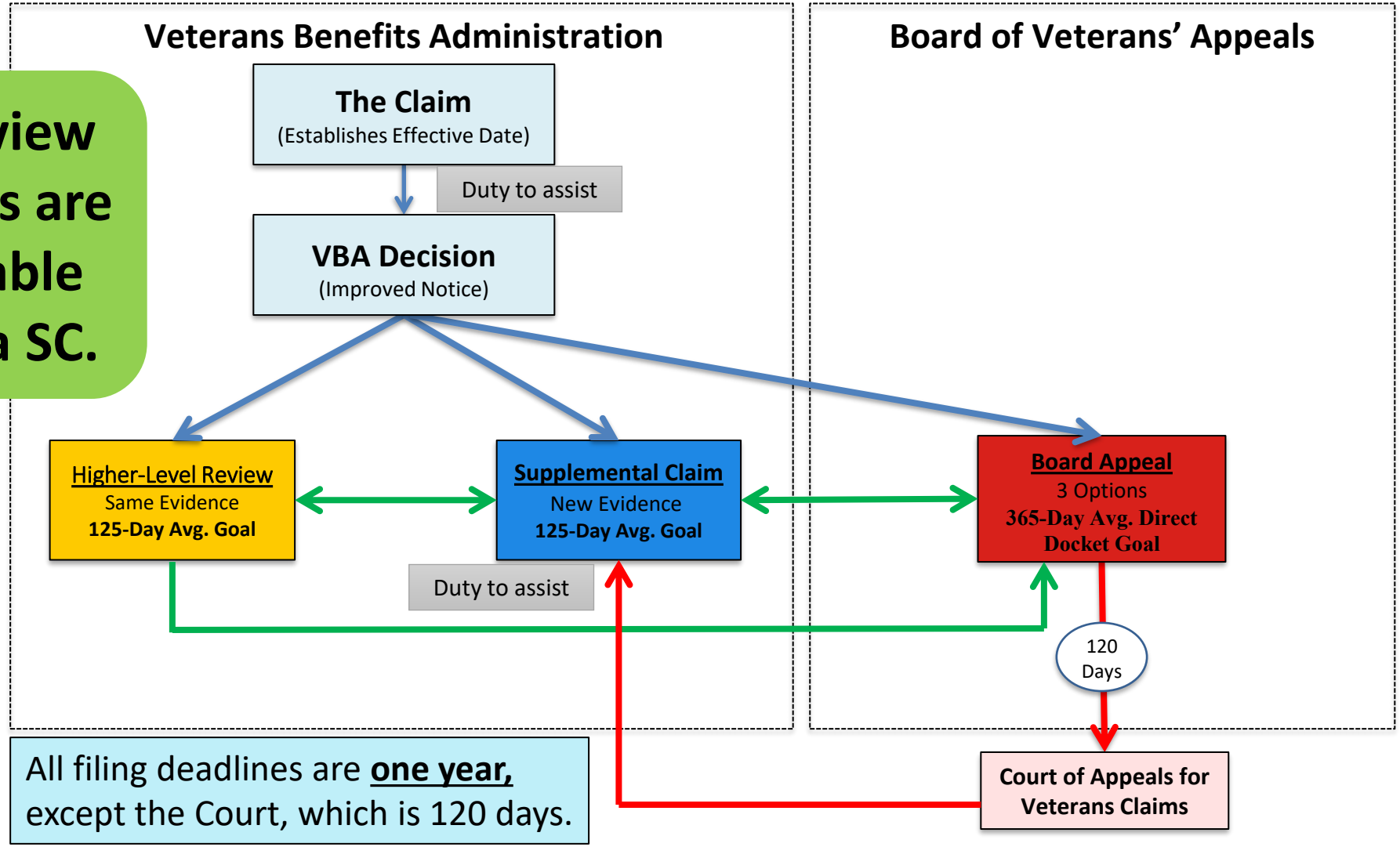
AMA Basic Structure

All review options are available after a SC.



All filing deadlines are **one year,** except the Court, which is 120 days.

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