

VETERAN AFFAIRS MATCH FILE

USER'S MANUAL

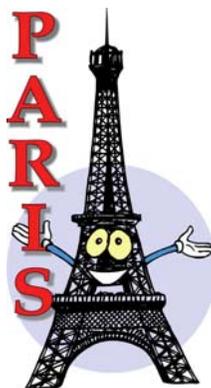


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Background

The Public Assistance Reporting Information System (PARIS) is a computer data matching and information exchange system administered by the Administration for Children and Families (ACF) to provide States with a tool to improve program integrity in administering public and medical assistance programs. The PARIS project is designed to match State enrollment data from the Temporary Assistance to Needy Families (TANF) Program, the Supplemental Nutrition Assistance Program (SNAP), the Workers' Compensation Program, the Childcare Program, and Medicaid, with data from other participating States and from a selected group of Federal databases. Using the client's Social Security number (SSN) as the unique identifier, the files submitted by the States are matched against:

- The Interstate match, where SSNs of public assistance clients are submitted by participating PARIS States and matched with data from all other participating States to determine if participants are enrolled in two or more States.
- The VA match, which provides States with information on clients' eligibility for veterans' benefits and also allows States to confirm if their clients are receiving income and medical assistance payments from the Department of Veterans Affairs (VA).
- The Federal match, which matches State data with information from the Department of Defense (DoD) and the Office of Personnel Management (OPM) to determine if clients are receiving income from any of these sources or are eligible for Federal health care coverage.¹

States participate in PARIS on a voluntary basis, and they receive no ongoing funding from ACF for participation. States are required to sign a PARIS Memorandum of Agreement (MOA), which commits the State to a minimum participation level and requires that data be submitted in a standardized format.

Purpose of the Manual

The PARIS Veterans match can be used by States for multiple purposes. The match can provide information about income received by program clients from the VA, which can then be used to verify

¹ Federal health coverage could include health benefits through such sources as coverage for current Federal employees, military health coverage through TRICARE, or benefits obtained through military retirement.

amounts reported by the client. If the client under-reported income from the VA, their benefit amount for TANF or SNAP can be adjusted to reflect their change in income eligibility. The data can also be used by State Medicaid programs to coordinate health benefits between Medicaid and the VA, thus saving the States Medicaid expenditures and providing veterans with appropriate health coverage for which they are entitled.

Many States do not use the VA match to its full potential, either because they do not understand its multiple uses or because they do not understand how to use the data. The purpose of the manual is to provide States with a clear understanding of how to best use data from the VA match, including the type of information contained in the VA file, how this information can be used by States, and the steps necessary to prepare useful reports that will allow States to take appropriate actions.

What is the VA Match File?

The VA match file is the data file returned to participating member States that matches State enrollment data with information from the VA. The file allows States to perform a number of activities that have the potential to reduce State spending related to public assistance programs, improve program integrity, and enhance or maximize benefits for veterans.

Chapter 1 – Uses of the VA Match File

The VA match file can be a valuable resource that can be used for multiple purposes. The primary uses for the VA match file fall into one of three categories: (1) traditional PARIS activities related to income eligibility determination and proper benefit issuance, (2) activities related to the coordination of benefits between Medicaid and the VA to reduce State Medicaid expenditures, and (3) outreach activities that help enhance and maximize veteran benefits. The uses that this manual is focused on are briefly described below by type of activity:

1. TRADITIONAL PARIS ACTIVITIES RELATED TO INCOME ELIGIBILITY DETERMINATION AND PROPER BENEFIT ISSUANCE

Clients applying for benefits under TANF, SNAP, and Medicaid must accurately report all sources of income. Sometimes persons receiving benefits from the VA do not believe they must report income from this source, and thus do not report it when they report income sources for eligibility. Using the VA match file, State or local offices can verify whether or not income from the VA was properly reported – whether it was reported at all or if it was reported accurately. The results of this verification may affect the client’s eligibility status; which may lead to adjustments of their benefit level or to the discontinuation of benefits (for clients whose income levels are too high to meet eligibility requirements).

Using PARIS VA data for this purpose may require an additional step in the verification process. Some States accept data from the PARIS VA file to be “verified upon receipt,” thus being able to use the data to support an action on benefit levels. Other States do not consider the data verified upon receipt, and thus use the data as an indicator of a problem, but then contact the VA to verify that the client did receive benefits. If the former is true, then the action related to benefits can be taken swiftly. If the latter is true, then it will take additional efforts on the part of the eligibility worker to take action. Each State should verify which policy applies to their situation.

One other issue that can be problematic for local eligibility workers is: how to identify, within the PARIS file sources, income that must be reported and income the veteran is not required to report. Some payment amounts reported in the VA fields, such as payments for medical support services, do not count towards determining a client’s eligibility. These data could be used to determine if the

client reported income properly as well as accurately. If a client reported income that should not have been counted towards eligibility, it could result in an increase of benefits.

Finally, a client may have only reported net income to the State instead of gross income. The VA file provides information on both so that a local eligibility worker can assess if an unintentional error was made by the client in reporting income, and thus be corrected.

Detailed instructions related to verifying income can be found in Chapter 3, section A.1.

2. COORDINATION OF BENEFITS BETWEEN MEDICAID AND THE VA TO REDUCE STATE MEDICAID EXPENDITURES

There are multiple health care coverage programs for which a veteran may be eligible, but for which they have not applied. Often veterans apply for Medicaid either because they do not understand the benefits to which they are entitled, or they believe that Medicaid is an easier program from which to receive benefits. States can reduce their Medicaid expenditures by helping veterans to understand that it may be to their advantage to receive benefits through the VA, and coordinating benefits between Medicaid and other Federal health insurance sources. Below are examples of how benefits can be coordinated:

- *Establish VA health benefit eligibility (CHAMPVA) for third-party liability (TPL) purposes.*

Information in the VA match file can be used to determine if a client or their dependents are eligible for health care coverage through the VA. If a client is enrolled in Medicaid, but eligible for health care through the VA, State Medicaid officials can work with these entities to coordinate the payment of benefits by identifying the VA coverage as TPL. This coordination results in savings to State Medicaid programs because they would be shifting the cost of health care services for these individuals to the Federal government. Detailed instructions related to identifying clients eligible for CHAMPVA can be found in Chapter 3, section B.1.

- *Ensure that veterans receiving long-term care services who have a service-related disability designation in the range of 70–100 percent and are in a nursing home are covered by VA medical benefits – not Medicaid.*

Long-term care services are one of the most expensive services provided by Medicaid. Veterans who are receiving long-term care services through Medicaid but have a service-related disability designation in the range of 70–100 percent are entitled to receive these services through the VA. Transferring coverage has an advantage to the State in that it reduces Medicaid costs. It also is an advantage to the veterans and their families in that Medicaid will require the family to pay back the costs related to providing long-term care services. The VA has no such requirement. PARIS data can be used to help reduce or eliminate State recovery for families of veterans who are receiving long-term care from Medicaid, who are otherwise eligible for the same services through the VA (see Chapter 3, section B.2 for details on how to identify these veterans). Medicaid costs for long-term care can be recovered from the families under Medicaid rules but are not recovered under VA rules.

- *Ensure that recipients of long-term care services who are not in nursing homes are receiving the additional aid and attendance allowance with their VA benefit.*

Veterans that are receiving long-term care services through the VA may be receiving an additional support amount known as an aid and attendance (A&A).² This payment is designed to help veterans pay for assistance that will help them to continue to live at home or in an assisted living facility. If Medicaid is also paying for support services, the amount the veteran receives from an A&A can be considered a TPL for which the State can recover some of its costs. PARIS VA data can be used to determine if A&A benefits are being provided to the veteran that could be considered a Medicaid TPL payment for long-term care costs (see Chapter 3, section B.3 for details). Use of an A&A to offset long-term care costs reduces the family liability for pay back.

3. OUTREACH ACTIVITIES THAT HELP ENHANCE AND MAXIMIZE VETERAN BENEFITS

A few States use PARIS data to enhance veterans outreach services and assist veterans with obtaining services for which they are entitled. While not directly related to savings in the programs noted earlier, these efforts often complement other activities within a State to better serve veterans. Some examples of PARIS data being used for these services include:

² Many veterans and survivors of veterans receive monthly payments from the VA. Recipients who need the regular assistance of a caregiver receive an increased amount from VA. This additional amount, added to the regular payment amount, is known as an A&A.

- *Ensure that recipients of long-term care services who are no longer living in a nursing home are receiving their full pension and not the reduced pension of \$90 per month.*

Veterans that receive a pension and require placement in a nursing home have that pension reduced to an amount to support incidentals only. If they leave the nursing home to return to their home or a community placement, they are entitled to receive their full pension again. Data in the VA match file can be used to identify veterans who are receiving a pension of \$90 per month (the Medicaid nursing facility pension rate), but no longer residing in a nursing facility (see Chapter 3, section C.1 for details). These veterans should be referred for outreach because they are likely eligible to receive their full pension again.

- *Refer cases where the veteran is not being paid any benefits or where the veterans pay has changed and the reason provided indicates a lack of information to VA, for outreach.*

In some cases, a veteran may be eligible for services through the VA, but has never applied. Codes in the VA file provide reasons for veterans not receiving compensation or for changes in veterans pay. Often these reasons are tied to incomplete applications or families not providing enough information. The PARIS data can identify these veterans for referral and assistance in completing benefit forms (see Chapter 3, section C.2 for details).

The activities described above represent examples of PARIS VA match uses that have been implemented by one or more States. However, as of the time of this manual's development, there were few States using the VA match file to its full potential. There are likely several reasons for its infrequent use, including a general lack of understanding of how the file can be used, the level of coordination with other departments that is required for most of the described activities, and the file's additional layers of complexity. The next chapter provides a description of key data elements from the VA match file and additional data elements from the States' client database or eligibility file that are necessary to conduct the activities described above. Chapter 3 provides step-by-step technical directions on how to process and utilize the information.

Chapter 2 – Using the VA Match: Essential Elements

Upon first glance, the multiple data fields contained in the VA match can seem overwhelming to State and local officials. This is because of the large number of fields and a lack of understanding of the information contained within these fields. As a result States that have not received help may have been deterred from using this information. However, States that have made the effort to understand and utilize the VA match have found it a valuable tool with which they can save State dollars and significantly enhance veterans' benefits. In this section, we describe key variables contained within the VA match file as well as key fields that need to be utilized from a State's eligibility database to effectively conduct activities previously described. In addition, this section describes the various filters that can be used to manage the file. We also discuss the necessity of establishing a relationship with the State VA office in order to perform certain activities with the VA match file, including some coordination of benefits activities and all veteran outreach activities. With careful filtering of information combined with a clear understand of how the information can be used, the VA match file can be an invaluable tool for enhancing Veterans' benefits and saving substantial State funds.

A. Essential Variables (Fields) from the VA Match File

In this section we will list and describe data fields supplied by the VA match file that can be used to conduct the activities described above. In most cases, these fields will need to be used in combination with additional data fields from the State's eligibility file (described in Chapter 2, section B). A complete list of available data fields as well as their position and format in the VA match file can be found in Appendix A.

Case Number (120-129)

This field contains a number for each client that is unique to the State's eligibility system. This number links all individuals associated with a common benefit "case," and allows States to identify all benefit recipients who are associated with a particular match. For example, most States submit SSNs for benefit enrollees and their eligible dependents (e.g., spouse, children); however, a match might only be returned for the benefit enrollee. In this case, the case number allows the State to identify and update benefit information for all beneficiaries associated with that enrollee.

Entitlement Code (419-420)

The entitlement code returned from the VA match file can be very useful in terms of identifying the type of income to which a veteran is entitled. There are essentially two types of income that a veteran can receive: a pension, which is based on financial need, and compensation, which is a benefit based on degree of service-connected disability or death. In order to use this field for the purpose of identifying benefit entitlement type, it is necessary to split the two-character field into two distinct fields or columns. The first position (position 419 in the VA file) designates the period of service and the second position (420 in the VA file) designates the type of benefit.

TABLE 1. SPLITTING THE ENTITLEMENT CODE FIELD

Period of Service – Entitlement Code (position 419)		Type of Benefit – Entitlement Code (position 420)	
Code	Value	Code	Value
0	Gulf War Service	1	Compensation
1	WWI Service	2	Protected Pension (veteran)
2	WWII Service	4	Section 306 Pension (veteran)
3	Korean Conflict Service	5	Death Compensation
4	Peacetime Service	6	Protected Pension (survivor)
7	Vietnam Service Compensation	7	Dependency Indemnity Compensation
9	Philippine Service	8	Section 306 Pension (survivor)
		L	Improved Pension (veteran)
		D	Improved Pension (survivor)

Understanding the types of benefits that are available to Veterans also is important when using the VA match file to conduct PARIS-related activities or outreach to veterans. The most common types of benefits include:

1. PENSION

Disability Pensions are benefits paid to wartime veterans with limited income who are no longer able to work. Pensions are available to veterans and surviving spouses and children if the veteran has qualifying service and there is financial need. Veterans also must have a qualifying disability that does not need to be service-connected.

All *pensions* are needs-based, meaning the veteran or survivor must meet a certain income criteria to be eligible. However, the VA uses different income methodologies to determine benefit for the various pension types.

There are currently three disability pension types being paid. VA determines which pension a veteran is eligible for based on when his or her entitlement to benefits began. Table 2 provides the entitlement periods, eligible persons, codes from the VA match file, and the entitlement program names for these three pension types. Currently, the only pension program accepting applications for veterans is the Improved Pension and Improved Death Pension program.

TABLE 2. ENTITLEMENT PROGRAMS FOR DISABLED VETERANS

Entitlement period	Eligible Party	Code*	Entitlement program name
Began prior to July 1, 1960	Veteran	2	Protected Pension (veteran)
	Survivor	6	Protected Pension (spouse)
Began on or after July 1, 1960 and prior to December 31, 1978	Veteran	4	Section 302 Pension (veteran)
	Survivor	8	Section 302 Pension (spouse)
Began on or after January 1, 1979	Veteran	L	Improved Pension (veteran)
	Survivor	D	Improved Pension (spouse)

*Second position of the Entitlement Code field (position 420)

Along with their pensions, some veterans and spouses can receive additional benefits such as A&A, housebound allowance, dependent allowance, or an offset of other income for a claim of unusual medical expenses (UME). These benefits are described in detail under those field descriptions below.

2. PARENTS DEPENDENCY & INDEMNITY COMPENSATION (PDIC)

PDIC is an income-based monthly benefit for one or both parents of a military service member or veteran who died from a disease or injury incurred or aggravated while on active duty or active duty for training, an injury incurred or aggravated in line of duty while on inactive duty for training, or a service-connected disability. Eligibility for PDIC³ is based on need. When countable income exceeds the limit set by law, no benefit is payable.

³ The term "parent" includes biological, adoptive, and foster parents.

3. SERVICE-CONNECTED DISABILITY COMPENSATION

Service Connected Disability Compensation is a benefit paid to a veteran because of injuries or diseases that happened while on active duty or were made worse by active military service. The benefits are tax-free. The amount of basic benefit paid ranges from \$104 to \$2,193 per month, depending on how disabled the veteran is. Other family income does not affect the veterans' compensation or entitlement to this benefit.

Veterans may be paid additional amounts, in certain instances, if they:

- a) Have very severe disabilities or loss of limb(s) - usually at 100 percent disability levels
- b) Have a spouse, child(ren), or dependent parent(s) – dependent allowance
- c) Have a seriously disabled spouse – helpless spouse A&A

The VA web site provides the most recent payment amounts for these types of additional benefits.⁴

3. SURVIVORS DIC

DIC is a monthly benefit paid to eligible survivors of (1) a military service member who died while on active duty, (2) a veteran whose death resulted from a service-related injury or disease, or (3) a veteran whose death resulted from a non service-related injury or disease, and who was receiving, or was entitled to receive, VA compensation for service-connected disability that was rated as totally disabling.

Eligible survivors include spouses, children when there is no surviving spouse of the veteran, and children of female Vietnam veterans who were born with certain birth defects.

Gross Award Amount (425-430)

This field provides the veteran beneficiary's gross monthly payment from the VA, which can be used to identify a veteran's level of disability.

Change Reason (417-418)

The "change reason" field on the VA match file indicates why a client's benefits were reduced or increased since the last pay period. In some cases, the change reason will indicate an explanation for non-payment (e.g., "Failure to file income questionnaire" or "Whereabouts unknown"). This field can be a valuable tool when providing outreach to veterans who may not be receiving benefits they are entitled

⁴ <http://www.vba.va.gov/bln/21/>

to. The following are a list of key codes that indicate a veteran may require some outreach in order have their benefits reinstated.

TABLE 3. VETERAN KEY CODES DETERMINING OUTREACH OR BENEFIT REINSTATEMENT NEED

Code	Value
16	Failure to furnish requested evidence
17	Failure to report for physical examination
20	Claim withdrawn or benefits renounced
21	Whereabouts unknown
32	Failure to file income questionnaire

Check Amount (437-442)

This field provides the amount a veteran beneficiary actually received from the VA, which can be used to verify income. It is important to note that when verifying income, it is the local field worker’s responsibility to determine what portion of the veteran’s benefit is countable for eligibility purposes. For example, in most States the additional payment some veterans receive, called A&A, (see description below) is considered exempt income and should not be counted for eligibility purposes.

A&A and Housebound – Payee (216)

A&A and Housebound payments are additional benefits paid to veterans, their spouses (A&A only), surviving spouses, and parents. This allowance is available within all Compensation, DIC, and Pension Programs. A&A is paid based on the need for assistance by another person or by specific disability. Housebound is paid based on specific disabilities and conditions. There is a Special Monthly Compensation (L) (service-connected) that can, at times, be designated as an A&A or Housebound benefit.

TABLE 4. A&A AND HOUSEBOUND CODES AND VALUES

Code	Value
0	A&A or housebound not payable
1	Entitled to A&A, paying housebound while hospitalized
2	Entitled to A&A
3	Entitled to housebound
4	A&A or housebound not payable, but with helpless spouse

Code	Value
5	Entitled to A&A, paying housebound while hospitalized, but with helpless spouse
6	Entitled to A&A, but with helpless spouse
7	Entitled to housebound, but with helpless spouse

While the PARIS file can be used to determine whether or not a client is receiving A&A payments, the file does not explicitly provide the amount of the A&A payment. However, information provided on the VA match file, such as record type and income fields, can help local field workers determine what the A&A amount is.

Washington State, which leads the nation with regards to their use of the VA match file, has developed a veteran benefit calculator for their local field staff. The local field workers can plug in values provided on the PARIS file and the calculator will tell them what portion of the veteran’s payment can be used for determining benefits. A manual describing these calculations can be obtained by contacting Washington State Department of Social and Health Services.

B. Essential variables (Fields) from the State’s Eligibility Database

In order to perform most of the activities described above, the State will need link up the information from the VA file with several key fields from their eligibility system. This can be done in one of two ways — by back-matching the VA match file received from the Defense Manpower Data Center (DMDC) with the State’s eligibility file, or preferably, by including these fields (in the output fields reserved for optional State data) from the State’s data system in the file that they submit to the DMDC. Submitting the necessary data in advance is just one way States can increase efficiency and speed up processing.

The following are examples of State data fields that could be added to the file submitted to the DMDC for purposes related to working the VA match file match:

- Financial Responsibility

This information can be used by field workers to determine the relationship between the person who was returned as a “match” and the other beneficiaries associated with that person (see “Case Number”). Often times the person who is returned on the file as a “match” or “hit” is a “non-household member.” For example, if the person returned as a “match” is coded in the State’s

eligibility file as an “ineligible parent” (perhaps because he is a military retiree), but his children are eligible recipients, the field worker would know to refer only the children associated with this match to the Coordination of Benefits Department for TPL updating. In this case the father is eligible for TRICARE and so are his children.

Financial responsibility also is important when verifying income because income from non-household members and/or non-applying spouses is not typically a factor when determining eligibility. Therefore, income verification should be limited to benefit recipients only. Examples of financial responsibility include:

- direct recipient of State benefits
 - non-applying spouse
 - ineligible parent
-
- **LIVING ARRANGEMENT**

The client’s living arrangement (home, long term care facility, etc.) can be used to assess client eligibility to be transferred from Medicaid to the VA for long-term care services. It also can be used to provide outreach to veterans who are still receiving the reduced nursing home pension rate of \$90 per month even though they are no longer in a nursing home.⁵ Examples of living arrangements include:

- at home
 - in a nursing facility
 - assisted living
-
- **MARITAL STATUS**

Marital status can be used to determine a veteran benefit recipient’s eligibility for A&A payments. For example, clients who are in a nursing home, receiving a VA pension, and are not married, are not eligible for A&A.

⁵ If the client is no longer living in a nursing home, the pension amount should revert to its full amount, and not remain at the \$90 incidentals rate.

- **VA INCOME REPORTED (TO THE STATE)**

If a client has not reported their VA income as a separate source to the State, then examining earned versus unearned income will help determine what portion of their income can be attributed to the VA. However, local field workers will most likely need to confirm what portion of reported earned or unearned income can be attributed to the VA.

- **TPL INFORMATION (IF AVAILABLE) FROM THE CLIENT’S FILE**

If TPL information is available from the client’s State eligibility file, then it is worthwhile to include it in the input file. There are certain carrier codes that are indicative of veteran-related insurance programs, such as TRICARE For Life. Knowing that a client is eligible for insurance from the VA up front will cut down on the number of TPL cases a State or local office needs to work.

C. Using Filters to Manage the VA Match File

One of the best ways to make the VA file useful and more manageable is to use filters to eliminate irrelevant data. Data “filters” are specific criteria that a State uses to reduce the size of its matched data files. Filters can be a very effective tool in reducing the number of cases for which follow-up must be conducted, prioritize follow-up activity, and eliminate files with incomplete or erroneous information. Filters also may help States focus their follow-up efforts on cases that require less effort to resolve. Some specific filters that are recommended include:

ELIMINATING ERRONEOUS MATCHES. As previously described, the files submitted by the States to DMDC are matched against the VA database to produce the VA match file. These records are matched only on the client’s SSN. Although the submitted SSNs are all verified prior to submission, the State will likely receive some “erroneous” matches in their file. Erroneous matches, for our purposes, are matches that may not actually be for the same individual, such as if the SSN were transcribed incorrectly or transposed. We recommend filtering out records where the first name AND last name AND date of birth do not match.

ELIMINATING CLOSED CASES. Match results are returned after submission very quickly, however, the population that the PARIS program is working with tends to be a very fluid one. Someone who was active when the data file was submitted may have been closed (e.g., due to an out-of-State move) subsequent to the file submission. It is recommended that each State compare the results of a match

against their current client database in order to eliminate cases that have since been closed and thus are no longer a viable match.

INCOME DISCREPANCY MINIMUMS. States that are interested in using the VA match file to verify income may opt to filter out match hits in which benefits of less than a specific amount, such as \$50, are involved or in cases where the discrepancy between actual and reported income is below a certain amount. Sometimes these discrepancies are due to cost of living increases, which may be minimal so it makes sense to filter them out. Setting a dollar threshold or allowable margin of error also depends on what the State determines to be a meaningful or significant amount. Furthermore, the volume of matches returned to the State with mismatched income and the availability of resources to conduct follow-up will probably play an even bigger role in setting this threshold dollar amount. In fact, some States may only be interested in following up on cases where no income was reported.

When filtering data based on income, it is important to make a proper comparison. Therefore, the caseworker must know if the income reported to the State was a net or gross amount. In addition, it is essential that you compare the income data provided on the Veteran file to VA income data reported to the State. It is possible that within a State's data system income has been lumped together as either earned or unearned income. If this is the case, be sure to separate out VA-specific income before filtering the data.

ELIMINATING CASES WITH VALID CARRIER CODES. States that are interested in determining TPL for clients could consider filtering out cases for which they already have a valid carrier code for veteran-related insurance programs. These are cases in which you would expect to find a match in the VA match file, and are thus, for TPL purposes, already resolved.

D. Establishing a Relationship with State Veteran Service Office

Many of the activities that improve benefits for veterans involve making contact with the veteran or a family member to encourage the veteran to apply for benefits to which they are entitled. In order to make use of the PARIS data to help veterans, it will likely be necessary to collaborate or establish a relationship with an organization that provides outreach services to veterans, such as a State VA or Veteran Service Office. The State VA can help verify data on the VA match file (if necessary), advocate for the veteran to receive appropriate VA benefits, and assist eligible Medicaid clients with enrollment in benefits to which they are entitled.

One such example of a strong partnership exists in Washington State. The Department of Social and Health Services (DSHS) in there has maintained a successful partnership with the Washington Department of Veteran Affairs (WDVA) for many years. Currently, their partnership is managed through two separate performance-based contract vehicles — the first addresses the need to review current VA benefits for Medicaid recipients and facilitates the enhancement of benefits for clients not receiving maximum entitlement. The second addresses the enrollment of Medicaid recipients into the VA health care system. In many cases, the WDVA acts as the “client representative” and the VA Regional Office assumes the role of “attorney in fact” with regards to VA claims representation. This type of direct VA benefit service and representation allows awards to be increased to the maximum amount possible under law and decreases the time it takes to get claims approved.

The relationship that has been established in Washington State between DSHS and WDVA is an excellent example of the type and level of collaboration necessary to make full use of the VA match file.

Chapter 3 – Analyzing Data and Creating Reports

Perhaps the easiest way to understand the previously described activities is to think of them in terms of sorting the matched files by the type of activity for which you wish to take action. A “report” in this case could be either a data file or pages of output that have been sorted to include: (a) only individuals on the VA match file who are eligible for a particular benefit, and (b) only those data fields that are required to examine the appropriateness of the individual’s eligibility. For example, a “Verify Income Report” would only include individuals whose reported VA income (that is, reported to the State) does not match the VA income they are receiving. The fields included in the report would be the individuals’ identification numbers, case numbers, reported income (from State database), and check amounts (from VA match file).

Organizing subsets of cases as reports helps streamline processes and makes it easier for eligibility workers to understand what action might need to be taken. For example, if a State produces three reports from the VA match file, it is possible that these reports need to be distributed to different departments or offices (e.g., the State VA Office for outreach activities, Medicaid Coordination of Benefits Department for updating TPL information) in order to be “worked.” For this reason, we may refer to the various activities, or categories of eligibilities as “reports” in this section.

A. Traditional PARIS-Related Activities Related to Eligibility Determination and Proper Benefit Issuance: Identifying Clients with Unreported or Underreported Income from the VA

As was noted earlier, the VA match file provides States with useful data that can be used to verify client income received from the VA. States can use this information to:

- Verify that clients are reporting this source of income
- Verify that clients are accurately reporting their eligible income from the VA

Verifying the income reported by clients who are currently collecting benefits for TANF, SNAP, and Medicaid is important because it can lead to the adjustment of clients' benefit level or to the discontinuation of benefits for clients whose income levels are too high to meet eligibility requirements. These changes can result in a significant cost savings at the State level as well as potential fraud investigations.

The steps involved in identifying unreported and underreported income are as follows:

Identifying Unreported income

1. Create a subset of the data that includes only clients that are benefit recipients (exclude non-household members and non-applying spouses) that did not report any VA income to the State (this is one of the recommended optional State data fields).
2. Create a subset of the data further to include only clients that are receiving some type of veteran benefit (income) according to the VA match file.
 - Check amount (position 437-442) greater than zero
3. Match these data to create a report showing those clients that reported no income, but show income being received from the VA.

Identifying Differences between Reported and Actual Income

States have an interest in identifying clients that under-report income or incorrectly report income that should not count towards eligibility. Creating a report that shows this discrepancy can be used to reconcile these differences; however, some States choose to limit the amount of discrepancy for which they will take action. States may choose to select a threshold for the maximum allowable discrepancy between reported and actual income from the VA. Some States have used cut points as high as \$1,000

and as low as \$1. The amount chosen by your State will largely be related to the number of matches returned and the need to limit the number of cases worked due to limited resources as well as the overall goals of the State with regards to the use of PARIS data.

The process for identifying differences between reported and actual income are:

1. Create a subset of data to include only clients that are benefit recipients (exclude non-household members and non-applying spouses) that reported some VA income to the State (this is one of the recommended optional State data fields).
2. Create a subset of data set you created above to include only clients that are receiving some type of veteran benefit (income) according to the VA match file.
 - Check amount (position 437-442) greater than zero
3. Compare the amount reported to the State with the amount reported through the VA match file and sort the report to include only those cases where there is a discrepancy.
4. Filter out cases where the discrepancy is lower than the threshold set by the State (if applicable). Otherwise, verify the income of this entire set of cases.

When comparing the client's reported income (as reported to the State) to the client's actual income (as reported through VA match file), it is important to understand three aspects of the client's income. First, if VA income cannot be pulled directly from the State system (e.g., other income sources are lumped together as earned and unearned income), then local field workers will need to actually confirm what, if any, VA income was reported to the State by the client.

Second, the local field worker must understand what income the client reported to the State — gross or net income, to ensure that they are making a proper comparison. Many veterans do not fully understand the information they receive from the VA, and tend to report their income to the State using multiple methods of documentation. For example, they may include VA award letters, bank statements showing direct deposits, or via local or State VA verification (the worker calls the VA to verify gross and check amounts and whether the amount includes A&A or unusual medical expenses).

Third, the worker must figure out what portion of the client's benefit is eligible for the determination of State-level benefits. For example, in most States, A&A can not be counted as eligible income when determining benefits, so a field worker must determine whether or not the client is receiving A&A and how much that benefit is worth.

B. Coordination of Benefits between Medicaid and the VA to Reduce State Medicaid Expenditures

1. Determine eligibility for VA health insurance.

Information in the VA match file can be used to determine if a client or their dependents are eligible for health care coverage through the VA. Here we describe the various categories of eligibility for the Civilian Health and Medical Program of the VA (CHAMPVA), a comprehensive health care program in which the VA shares the cost of covered health care services and supplies with eligible beneficiaries, and how to identify clients eligible for this benefit using the VA match file.

The similarity between CHAMPVA and the DoD TRICARE program (sometimes referred to by its old name, CHAMPUS) often leads to the two programs being confused with one another. CHAMPVA is a VA program, whereas TRICARE is a regionally managed health care program for active duty and retired members of the uniformed services, their families, and survivors. In some cases a veteran may seem to be eligible for both/either program on paper. However, if you are a military retiree, or the spouse of a veteran who was killed in action, you are, and will always be a TRICARE beneficiary and cannot choose between the two.

CATEGORIES OF ELIGIBILITY

- Spouses and children of veterans rated totally and permanently disabled for a service-connected disability by VA
- Surviving spouses and children of veterans who died from a VA-rated service connected disability
- Surviving spouses and children of veterans who were at the time of death rated totally and permanently disabled from a service-connected disability by VA
- Surviving spouses and children of veterans killed in the line of duty, not due to misconduct (in most cases, these family members are eligible for TRICARE, not CHAMPVA)

IDENTIFYING CLIENTS ELIGIBLE FOR CHAMPVA

1. Create a subset of the data to include
 - a. Veterans receiving compensation at 100% disability rate
 - Type of Benefit (position 419) = 1 for “compensation”
 - Gross Pay (position 425-430) is at least \$2527/month (2008 rate)

- b. Widows receiving Death Indemnity Compensation (DIC)
 - Type of Benefit (position 419) = 7 for “Death Indemnity Compensation”
 - Gross Pay (position 425-430) is at least \$1091/month (2008 rate)
2. Next, identify all CHAMPVA-eligible Medicaid recipients on current State rolls by matching case numbers with those of the veterans and widows included in the subset of records described above. This will capture all spouses, surviving spouses, and children of veterans rated totally and permanently disabled or those killed in the line of duty.

2. Identify veterans in nursing homes that are 70–100 percent disabled and may be eligible for VA medical benefits.

PARIS data from the VA match file can be used in combination with the additional State data fields to identify veterans who may be eligible for long-term care coverage through the VA health care system. As was noted earlier, transferring Medicaid clients who are in nursing homes to VA medical care can help reduce or eliminate State recovery for families of veterans. This transfer from Medicaid to VA health care also can result in a significant savings to the State. Cost-shifting to the Federal government (via VA health care) can save the State its share of the Medicaid match. Here we describe how to identify potentially eligible veterans:

1. Create a subset of the data to include only veterans that are currently residing in a nursing home by using the optional, recommended State data field on Living Arrangement (if submitted) or by back-matching the VA match file with the State eligibility system to obtain this information.
2. Identify veterans in this group that are 70–100 percent disabled, and thus, may be eligible for medical care through the VA by using the following VA match file fields.
 - Type of Benefit (position 419) = 1 for “compensation”
 - Gross Award Amount (position 425-430) is at least \$1161/month (2008 rate)⁶

3. Identify recipients of long-term care services that may be eligible for additional A&A allowance with their VA benefit and assure that A&A allowance is being applied as a TPL payment towards long-term care service costs.

⁶ These are the income levels at the time this manual was developed. They will need to be adjusted as the VA makes adjustments to income levels.

PARIS data from the VA match file can be used in combination with the additional State data fields to identify veterans who are currently receiving long-term care services and who are eligible for A&A. If these clients are not receiving A&A then they can be referred for outreach or follow-up.

If clients are receiving A&A then the State should ensure that this amount is being used as a Medicaid TPL payment for long-term care costs. While VA allowances for A&A may not be considered income for eligibility purposes, the Centers for Medicaid and Medicare Services (CMS) has recognized that A&A allowances from VA payments can be applied as third-party payments toward the cost of Medicaid long-term care services when paying claims for long-term care services.⁷ It is important to note that some States may not consider A&A amounts to be third-party resources. However, it would behoove such States to review the determination made in Washington State that A&A is a third party resource.

Again, use of A&A to offset long-term care costs reduces the family liability for payback. Furthermore, Washington State reported an initial savings of \$2.3 million once their system was programmed to count A&A as a third-party resource.

1. Create a subset of the data to only include veteran benefit recipients that are receiving long-term care services (i.e., in a nursing home, in-home care, etc.) using the optional, but recommended State data field on Living Arrangement (if submitted) or by back-matching the VA match file with the State eligibility system to obtain this information.
2. Identify clients within this subset that are:
 - a. Not receiving A&A. These clients are most likely eligible for this additional payment and should be referred for follow-up.

A&A (position 216) –

0 for “Aid & attendance or housebound not payable” OR

4 for “Aid & attendance or housebound not payable, but with helpless spouse”

- b. Receiving A&A and confirm that this payment is being applied towards TPL. Again, this only applies if A&A is considered a third-party resource for long-term care services in your State.

⁷ State Medicaid Manual §3705(A)

C. Outreach Activities to Enhance Veteran Benefits

It is important to note that there are many potential uses for the VA match file, particularly for the purpose of providing outreach to veterans. In fact, some States have found innovative and creative ways to use the VA match file to enhance veteran benefits. For example, in Washington State, the VA match file is used to identify veterans with a service-related disability whose condition may be worsening. In these cases, veterans would be entitled to additional compensation or health coverage if they re-apply for benefits. This would be especially helpful when considering veterans with service during particular war periods because there are 11 diseases presumed by VA to be service-related for compensation purposes for veterans exposed to Agent Orange or other herbicides during the Vietnam War; including certain forms of cancer.⁸

In this section we describe in detail how to conduct the two previously described outreach activities. We limited the discussion in this manual to these activities because of their relative simplicity. However, we believe that States will discover on their own, as well as through communication with other States, how they can maximize their use of the VA match file once they become more familiar with the data.

1. Identify recipients who are no longer living in a nursing home, but still receive a reduced pension of \$90 per month.

PARIS data from the VA match file can be used in combination with the additional State data fields to identify veterans who are currently receiving a pension of \$90 per month (the Medicaid nursing facility pension rate), but who are no longer residing in a nursing facility. These veterans should be referred for outreach because they are most likely eligible to receive their full pension again.

- a. Create a subset of the data to only include veteran benefit recipients that are receiving \$90 pension checks.
 - Gross Award Amount (position 425-430) is equal to \$90
- b. Identify clients within this subset who are no longer living in a nursing home by using the optional, but recommended, State data field on Living Arrangement (if submitted) or by back-matching the VA match file with the State eligibility system to obtain this information.

⁸ Eleven diseases are presumed by VA to be service-connected for such veterans: chloracne or other acneform disease similar to chloracne, porphyria cutanea tarda, soft-tissue sarcoma (other than osteosarcoma, chondrosarcoma, Kaposi's sarcoma or mesothelioma), Hodgkin's disease, multiple myeloma, respiratory cancers (lung, bronchus, larynx, trachea), non-Hodgkin's lymphoma, prostate cancer, acute and subacute peripheral neuropathy, diabetes mellitus (Type 2) and chronic lymphocytic leukemia.

2. Identify veterans who are not receiving any pay and whose “change reason” indicates a lack of information.

PARIS data from the VA match file can be used to identify veterans or veteran benefit recipients who are not receiving any pay and to refer cases in which the “change reason” indicates that the client has an incomplete application or the VA is missing a critical piece of information on them. These cases can be referred for outreach and provided assistance with completing benefit forms.

- a. Create a subset of the data to only include veteran benefit recipients that are not receiving any pay.
 - Gross Award Amount (position 425-430) is equal to \$0
- b. Identify clients within this subset that have change codes indicating that incomplete applications or a lack of information is the reason for non-payment (Table 3).

Appendix A: VA Match File Record Format

Data Element Name	Position	Description/Definition
State Segment		
Client SSN	01-09	Client's SSN
Client Surname	10-24	Client's Last Name
Client First Name	25-39	Client's First Name
Client Date of Birth	40-47	Client Date of Birth (YYYYMMDD)
Filler	48	Blank
File Date	49-54	Match Run Year & Month (YYYYMM)
State Name	55-56	Postal Abbreviation for the State
State Optional Data	57-116	Data used by sending State, returned as sent.
Client Locator Code	117-119	3 position location code that identifies Client Case File Residence (Count/Local Office designator)
Case Number	120 129	Ten Position Case Number
VA Segment		
File number	130-138	9 numeric
Payee Number	139-140	2 numeric
Record Type	141	1 alpha
Social Security Number of Veteran	142-150	9 numeric
Social Security Number of Spouse	151-159	9 numeric
Social Security Number of Payee	160-168	9 numeric
Stub Name of Veteran	169-175	7 alpha/numeric
Stub Name - Payee (Person Entitled)	176-182	7 alpha/numeric
Birth Date of Veteran	183-190	8 numeric (YYYYMMDD)
Birth Date of Spouse	191-198	8 numeric (YYYYMMDD)
Birth Date of Payee	199-206	8 numeric (YYYYMMDD)
Death Date - Veteran	207-214	8 numeric (YYYYMMDD)
DD/EFT Segment Indicator	215	1 alpha (Y or N)
Aid & Attendance/Housebound – Payee	216	1 numeric
Birth Date of Child	217-224	8 numeric (YYYYMMDD)
First Name of Child	225-234	10 alpha/numeric
Birth Date of Child	235-242	8 numeric (YYYYMMDD)
First Name of Child	243-252	10 alpha/numeric
Birth Date of Child	253-260	8 numeric (YYYYMMDD)
First Name of Child	261-270	10 alpha/numeric
Note: Items	217-270	will include data for the three youngest children.
Address Line – 1	271-290	20 alpha/numeric
Address Line – 2	291-310	20 alpha/numeric
Address Line – 3	311-330	20 alpha/numeric
Address Line – 4	331-350	20 alpha/numeric
Address Line – 5	351-370	20 alpha/numeric
Address Line – 6	371-390	20 alpha/numeric
Zip Code	391-399	9 numeric
Type of Recurring Expenses	400	1 alpha

Data Element Name	Position	Description/Definition
Amount of Recurring Expenses	401-405	5 numeric
Source of Payee Income	406	1 numeric
Source of Spouse Income	407	1 numeric
Type of Other Retirement Income	408	1 numeric
Net Award Date (CCYYMMDD) (Current Award Line)	409-416	8 numeric
Change Reason (Current Award Line)	417-418	2 numeric
Entitlement Code (Current Award Line)	419-420	2 numeric
Total Dependency Code (Current Award Line)	421-422	2 numeric
This Dependency Code (Current Award Line)	423-424	2 numeric
Gross Award Amount (Current Award Line)	425-430	6 numeric (\$\$\$\$cc)
Net Award Amount (Current Award Line)	431-436	6 numeric This is the net amount (after withholding but prior to deductions) awarded the payee. (\$\$\$\$cc)
Check Amount (Current Award Line)	437-442	6 numeric Payment amount released or to be released for the current month.(\$\$\$\$cc)
Type of Withholding	443	1 zone decimal
Date of Prior	444-451	8 numeric (YYYYMMDD)
Change Reason	452-453	2 numeric
Entitlement Code	454-455	2 numeric
Dependency Total Award	456-457	2 numeric
Dependency This Award	458-459	2 numeric
Prior Net Award Amount	460-465	6 zone decimal (\$\$\$\$cc)
Type of Withholding	466	1 zone decimal
Gross Award	467-472	6 numeric (\$\$\$\$cc)
Date of Prior (2)	473-480	8 numeric (YYYYMMDD)
Change Reason	481-482	2 numeric
Entitlement Code	483-484	2 numeric
Dependency Total Award	485-486	2 numeric
Dependency This	Award	487-488
Prior Net Award Amount	498-494	6 zone decimal (\$\$\$\$cc)
Type of Withholding	495	1 zone decimal
Gross Award	496-501	6 numeric (\$\$\$\$cc)
Date of Prior (3)	502-509	8 numeric (YYYYMMDD)
Change Reason	510-511	2 numeric
Entitlement Code	512-513	2 numeric
Dependency Total Award	514-515	2 numeric
Dependency This Award	516-517	2 numeric
Prior Net Award Amount	518-523	6 zone decimal (\$\$\$\$cc)
Type of Withholding	524	1 zone decimal
Gross Award	525-530	6 numeric
Date of Prior (4)	531-538	8 numeric (YYYYMMDD)

Data Element Name	Position	Description/Definition
Change Reason	539-540	2 numeric
Entitlement Code	541-542	2 numeric
Dependency Total Award	543-544	2 numeric
Dependency This Award	545-546	2 numeric
Prior Net Award Amount	547-552	6 zone decimal (\$\$\$\$cc)
Type of Withholding	553	1 zone decimal
Gross Award	554-559	6 numeric (\$\$\$\$cc)
Date of Prior (5)	560-567	8 numeric (YYYYMMDD)
Change Reason	568-569	2 numeric
Entitlement Code	570-571	2 numeric
Dependency Total Award	572-573	2 numeric
Dependency This Award	574-575	2 numeric
Prior Net Award Amount	576-581	6 zone decimal (\$\$\$\$cc)
Type of Withholding	582	1 zone decimal
Gross Award	583-588	6 numeric
Date of Prior (6)	589-596	8 numeric (YYYYMMDD)
Change Reason	597-598	2 numeric
Entitlement Code	599-600	2 numeric
Dependency Total Award	601-602	2 numeric
Dependency This Award	603-604	2 numeric
Prior Net Award Amount	605-610	6 zone decimal (\$\$\$\$cc)
Type of Withholding	611	1 zone decimal
Gross Award	612-617	6 numeric
Date of Prior (7)	618-625	8 numeric (YYYYMMDD)
Change Reason	626-627	2 numeric
Entitlement Code	628-629	2 numeric
Dependency Total Award	630-631	2 numeric
Dependency This Award	632-633	2 numeric
Prior Net Award Amount	634-639	6 zone decimal (\$\$\$\$cc)
Type of Withholding	640	1 zone decimal
Gross Award	641-646	6 numeric (\$\$\$\$cc)
Date of Prior (8)	647-654	8 numeric (YYYYMMDD)
Change Reason	655-656	2 numeric
Entitlement Code	657-658	2 numeric
Dependency Total Award	659-660	2 numeric
Dependency This Award	661-662	2 numeric
Prior Net Award Amount	663-668	6 zone decimal (\$\$\$\$cc)
Type of Withholding	669	1 zone decimal
Gross Award	670-675	6 numeric (\$\$\$\$cc)
Date of Prior (9)	676-683	8 numeric (YYYYMMDD)
Change Reason	684-695	2 numeric
Entitlement Code	686-687	2 numeric

Data Element Name	Position	Description/Definition
Dependency Total Award	688-689	2 numeric
Dependency This Award	690-691	2 numeric
Prior Net Award Amount	692-697	6 zone decimal (\$\$\$\$cc)
Type of Withholding	698	1 zone decimal
Gross Award	699-704	6 numeric (\$\$\$\$cc)
Filler	705-729	25 AN

Appendix B: VA Match File Codebook

Payee Number	
0	Veteran
10	Wife, Husband, surviving spouse
11	Child #1
12	Child #2
13	Child #3
14	Child #4
15	Child #5
16	Child #6
17	Child #7
18	Child #8
19	Child #9
31	Consolidated Award Payee #1
32	Consolidated Award Payee #2
33	Consolidated Award Payee #3
34	Consolidated Award Payee #4
35	Consolidated Award Payee #5
36	Consolidated Award Payee #6
37	Consolidated Award Payee #7
38	Consolidated Award Payee #8
39	Consolidated Award Payee #9
50	Father
60	Mother
Record Type	
A	Veteran's Master Record
B	Death Payee
C	Apportioned Payee - Living veteran
D	Accounts Receivable
E	Terminated, Pending Purge
F	Apportioned Payee - Deceased Veteran
A&A - Payee	
Blank	Aid and attendance or housebound not a factor
0	Aid and attendance or housebound not payable
1	Entitled to aid and attendance, paying housebound while hospitalized
2	Entitled to aid and attendance
3	Entitled to housebound

4	Same as 0 but with helpless spouse
5	Same as 1, but with helpless spouse
6	Same as 2, but with helpless spouse
7	Same as 3, but with helpless spouse
Type of Recurring Expenses	
B	Both Social Security and other
C	Continuing unusual medical expenses
O	Other
R	10% Retired pay waiver exclusion
S	Social Security
Source of Payee Income	
C	Other Income
E	Retirement (Other than Social Security)
F	Social Security
G	No source
P	Earned Income
Other	Multiple Sources of Income
Source of Spouse Income	
C	Other Income
E	Retirement (Other than Social Security)
F	Social Security
G	No source
P	Earned Income
Other	Multiple Sources of Income
Type of Other Retirement Income	
B	Black Lung
C	Civil Service Retirement
O	Other, or combination of any other than B, C, M or R
M	Military Retirement
R	Railroad Retirement
S	Social Security
X	Combinations involving B, C, M, or R types.

Change Reason - This field contains a code to indicate the reason for the award change.	
0	Original or no change
11	Excess Income or Dependency of parent not established or
Change in income or dependency	
12	Excessive Net Worth
15	Person entitled remarried
16	Failure to Furnish requested evidence
17	Failure to report for physical examination
18	Estate in excess of \$1,500
19	Veteran on active duty or in receipt of retired pay - or restored to VA rolls
20	Claim withdrawn or benefits renounced.
21	Whereabouts unknown
22	Death of claimant or person entitled
23	Child over 18 on this award enters school \
24	Child reaches age 18
25	Child over 18 on this award terminates school or becomes age 23
26	Dependent added
27	Apportionment made, changed, or discontinued, due to separation, change in custody, or change in amount of special apportionment.
28	Claimant or dependent incarcerated or released from prison
29	Other reasons not listed
30	Election of VA or other benefit or change of VA benefit
31	Change of payee
32	Failure to file income questionnaire
33	Increased evaluation
34	Reduced evaluation
35	Hospital adjustment - hospitalized
36	Hospital adjustment - released from hospital
37	Legislative change
39	Administrative error
42	Child over 18 in another award determined helpless
43	Child over 18 in another award enters school
44	Child in another award reaches age 18
45	Child in another award terminates school, reaches age 23, or is no longer helpless died or married.
46	IVM match - related decrease or termination
50	Grant of A/A for disability compensation spouse

51	A/A for spouse discontinued		
52	Child over 18 determined helpless		
53	Helpless child enters school		
54	Child no longer helpless		
55	Child status changed from school to helpless child		
56	Loss of dependent		
57	Award requires payment of attorney fees		
60	Reopened award		
98	Automatic adjustment based on Eligibility Verification Report		
Entitlement Code - This field contains a code designating the type of benefit and period of service.			
First Position		Second Position	
0	Gulf War Service	1	Compensation
1	WWI Service	2	Protected Pension (veteran)
2	WWII Service	4	Section 306 Pension (veteran)
3	Korean Conflict Service	5	Death Compensation
4	Peacetime Service	6	Protected Pension (survivor)
7	Vietnam Service	7	Dependency Indemnity
9	Philippine Service	Compensation	
		8	Section 306 Pension (survivor)
		L	Improved Pension (veteran)
		D	Improved Pension (survivor)
The second position will reflect 0 when there are no children, or 1-9 to indicate the number of children.			
Dependency Codes - Living Veteran			
0	Veteran		
10	Veteran - Spouse		
20	Veteran - Spouse - Father		
30	Veteran - Spouse - Mother		
40	Veteran - Spouse - Both Parents		
50	Veteran - Father		
60	Veteran- Mother		
70	Veteran - Both Parents		
8X	Veteran - Child		

Dependency Codes - Deceased Veteran	
0	Veteran
10	Veteran - Spouse
20	Veteran - Spouse - Father
30	Veteran - Spouse - Mother
40	Veteran - Spouse - Both Parents
50	Veteran - Father
60	Veteran- Mother
70	Veteran - Both Parents
8X	Veteran - Child
Withholding Type Codes	
1	Code to indicator withholding for one or both of the following purposes:
	a. Apportionment - Total of amounts withheld for or being paid to dependents.
	b. Institutional maintenance and/or apportioned amount to a dependent parent
	c. Record purpose award - indicate total award withheld.
2	Philippine Case - indicate amount payable in pesos when there is combined entitlement
3	PFOP - Portion of total award deposited in a Personal Funds of Patient Account
4	Amount (PL 86-211 pension) not payable due to hospitalization
5	Reduction of Protected Pension due to hospitalization.
6	Computer generated code when there are simultaneous withholdings of types 7 and 8 or 7 and 9
7	Offset under 38 U.S.C. 351.
8	Recoupment of readjustment allowance or separation pay
9	Recoupment of severance pay