## Post Service Officer Claim Preparation Checklist

☐ Completed Information Sheet (C&P)
☐ Copy of ALL DD-214's or Discharge Documents for all periods of service (C&P)
☐ Copy of Current Marriage Certificate (C&P)
☐ Spouses Date of Birth and Social Security Number (C&P)
□ Dates and Locations of ANY Prior Marriages (C&P)
□ Dates and Locations of Divorce of ANY Prior Marriages (C&P)
☐ Death Certificate of veteran if filing for widows benefits (C&P)
☐ Complete Copy of Service Medical Treatment Records (C) (May be requested from NPRC)
☐ Name & Address for any physician who has treated you since you left military service or since the current condition began. (C)
☐ Itemized Bill and Receipt of <u>VETERANS</u> Funeral Expenses (P)
☐ Birth Certificates and Social Security Numbers for all <u><b>DEPENDENT</b></u> children (C&P)
☐ Itemized income verification (Social Security, Railroad Retirement, Pensions Payments, Interest/Dividend Payments, Interest Bearing Accounts of Any Kind) (P)
☐ Itemized asset information (Stocks, Bonds, IRA's, Keogh Plans, etc.) (P)
☐ Itemized monthly medical expenses (Health Insurance Premiums, Cancer Police Premiums, Prescription Medication Cost, over the counter medication or supplies [i.e. vitamins, supplements, absorbent pads or material, etc.], Sitter Fees. (P)
☐ Federal benefit payments must be paid electronically, so ensure that the claimant includes a <b><u>VOIDED</u></b> check with their claim package so that routing and account numbers can be taken directly from the check. (C&P)
□ VA Form 21-2680 completed if the claimant is seeking Housebound or Aid and Attendance Benefits (C&P)
□ VA Form 21-0779 completed if the claimant is a resident of a skilled nursing facility (C&P)
C = Compensation P = Pension

## **List of Common Allowable Medical Expenses**

The lists below show many of the common allowable medical expenses.

*Note:* This list is not all-inclusive.

- •Abdominal supports
- •Acupuncture service
- •Ambulance hire
- Anesthetist
- •Arch supports
- Artificial limbs and teeth
- Assisted living fees
- Back supports
- Braces
- •Cardiographs
- •Chiropractor
- •Convalescent home (for medical treatment only)
- •Crutches
- •Dental service, for example, cleaning, x-ray, filling teeth
- Dentures
- •Dermatologist
- •Drugs, prescription and nonprescription
- •Eye glasses
- •Gynecologist
- •Hearing aids and batteries
- •Home health services
- •Hospital expenses
- •Insulin treatment/diabetic supplies
- •Insurance premiums, for medical insurance only
- •Invalid chair
- •Lab tests
- •Lip reading lessons designed to overcome a disability
- •Lodging incurred in conjunction with outof-town travel for treatment (to be determined on a facts-found basis)
- •Medicare Part B premiums

- •Medicare Part D premiums
- •Neurologist
- •Nursing services for medical care, including nurse's board paid by claimant
- Occupational therapist
- Ophthalmologist
- Optician
- Optometrist
- Oral surgery
- •Osteopath, licensed
- •Pediatrician
- Physical examinations
- Physician
- Physical therapy
- Podiatrist/Chiropodist
- Psychiatrist
- Psychoanalyst
- Psychologist
- Psychotherapy
- •Radium therapy
- Sacroiliac belt
- Seeing-Eye dog and maintenance
- Speech therapist
- Splints
- Surgeon
- •Telephone/teletype special communications equipment for the deaf
- •Transportation expenses for medical purposes (41.5 cents per mile effective January 1, 2009, plus parking and tolls or actual fares for taxi, buses)
- Vaccines
- •Wheelchairs
- •Whirlpool baths for medical purposes
- •X-rays