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| --- | --- |
|  | **DEPARTMENT OF VETERANS AFFAIRS**  **VA Regional Office**  **«ROAddress»** |

«CurrentDate»

|  |  |
| --- | --- |
| «FullName» | **In Reply Refer to:** |
| «MailingAddress» | «ROStationNumber»/28  «ClaimPayee» |

Dear «FullName»:

Congratulations, I am writing to inform you of the following decision that grants your Department of Veterans Affairs (VA) benefits.

**What decision did I make and what authority did I use?**

When deciding on your VA benefits that are provided by the Veteran Readiness and Employment (VR&E) program, I must base my decision on specific laws and regulations. These laws are found in title 38 of the United States Code (U.S.C.) and the regulations are found in title 38 of the Code of Federal Regulations (CFR). Based on a review of these laws and regulations, I have been able to restore entitlement that you previously used as part of your Chapter 31 program under the authority of 38 U.S.C. § 3699.

**Why did I make this decision?**

I made this decision based on a recent change in the law that grants VR&E the authority to restore entitlement if a school closed or lost its approval for VA use while you were attending training at that facility if you meet specific criteria. Under this change, I have been able to restore [insert number of months and days] of entitlement.

**What findings are favorable to you, if any?**

As a result of this action, you may be able to receive additional VR&E benefits and services: however, you must meet all VR&E eligibility and entitlement criteria prior to receiving additional benefits.

If you would like to explore this option, please apply for VR&E benefits online at <https://www.va.gov>. You may also complete [VA Form 28-1900](http://vaww.va.gov/vaforms/Search_action.asp?FormNo=28-1900&tkey=&Action=Search), Application for Vocational Rehabilitation for Claimants with Service-Connected Disabilities and mail it to the address listed at the end of this letter.

**What evidence did I use to make this decision?**

I have reviewed your case file, along with the recent change in the law, when making this decision. If you would like copies of this information, please contact me to arrange the most efficient way to get this information to you.

**What if you disagree with my decision?**

If you do not agree with the decision, you have one year from the date of this letter to select a review option to preserve your earliest effective benefit date.

Please review the attached *VA Form 20-0998***,** Your Rights to Seek Further Review of Our Decision, which provides instructions on your options for an additional review.

The review options and corresponding applications are listed below:

* **Supplemental Claim (SC)**, complete **VA Form 20-0995**, *Decision Review Request: Supplemental Claim (Completed form may be submitted to the VR&E Intake Center below.)*
* **Higher-Level Review (HLR)**, complete **VA Form 20-0996***, Decision Review Request: Higher-Level Review (Completed form may be submitted to the VR&E Intake Center below.)*
* **Appeal to the Board**, complete **VA Form 10182**, *Decision Review Request: Board Appeal (Notice of Disagreement)*

You may obtain any of the required forms by downloading them from <https://www.va.gov/find-forms/> or by contacting me. You can also learn more about the disagreement process at <http://www.va.gov/decision-reviews>.

If you would like to obtain or access evidence used in making this decision, please contact us as noted below. Some evidence may be obtained by signing in at [www.va.gov](http://www.va.gov).

**Note:** You may elect either an HLR, a SC, or an appeal to the Board. You may not have the same issue under HLR, SC review or an appeal to the Board at the same time. You must elect which option you wish to pursue.

**What if you have questions or concerns?**

If you have any questions about this letter or need additional information on VA benefits, please contact me at «CaseMgrPhone», via email at «CaseMgrEmailAddress», or call 1-800-827-1000. If you use the Telecommunications Device for the Deaf (TDD), the federal number is 711.

You may also contact me by mail at:

Veteran Readiness and Employment (VR&E) Intake Center

Department of Veterans Affairs

P. O. Box 5210

Janesville, WI 53547-5210

Sincerely yours,

«CaseMgrName»

«CaseMgrTitle»

Enclosure: VA Form 20-0998

cc: «POAName»



YOUR RIGHT TO SEEK REVIEW OF OUR DECISION

This document outlines your right to seek review of our decision on any issue with which you disagree. You may generally select one of three different review options for each issue decided by VA. However, you may not request review of the same issue using more than one option at the same time. Below is information on the three different review options.



**Supplemental Claim Higher-Level Review Board Appeal**

# What Is This?

A reviewer will determine whether new and relevant evidence changes the prior decision.

An experienced claims adjudicator will review your decision using the same evidence VA considered in the prior decision.

A Veterans Law Judge at the Board of Veterans' Appeals (Board) will review your decision.

# By Selecting This Option

**Goal To**

You are adding or identifying new and relevant evidence to support your claim that we did not previously consider.

VA will assist you in gathering new and relevant evidence that you identify to support your claim.

You have no additional evidence to submit to support your claim, but you believe there was an error in the prior decision.

You can request an optional, one-time, informal conference with a Higher-Level Reviewer to identify specific errors in the case, although requesting this conference may delay the review.

You must choose a docket:

**Direct Review** - You do not want to submit evidence or have a hearing.

**Evidence Submission** - You choose to submit additional evidence without a hearing.

**Hearing** - You choose to have a hearing with a Veterans Law Judge.

**365 days** on average for

# Complete

**125 days** on average **125 days** on average

Direct Review (longer for the other options)

# Form To File To Select This Option\*

**Further Options After This Decision Review**

## VA Form 20-0995,

*Decision Review Request: Supplemental Claim*

You may request another Supplemental Claim, a Higher-Level Review, or a Board Appeal.

## VA Form 20-0996,

*Decision Review Request: Higher-Level Review*

You may request a Supplemental Claim or a Board Appeal.

## VA Form 10182,

*Decision Review Request: Board Appeal (Notice of Disagreement)*

You may request a Supplemental Claim or appeal to the U.S. Court of Appeals for Veterans Claims.

\* All forms listed above are available at [www.va.gov/vaforms/](http://www.va.gov/vaforms/).



For most VA benefits, **you have 1 year from the date on your decision notice to request a decision review to ensure the earliest possible effective date.** Consult your decision notice for specific limitations.

If you do not submit a decision review request within the required time, you may only seek review through the following:

* A request to revise the decision based on a clear and unmistakable error, or
* A Supplemental Claim. If you file a Supplemental Claim after the **1-year** time limit, the effective date for any resulting award of benefits generally will be tied to the date VA receives the Supplemental Claim.

While most decision review options are available to you, there are limitations based on the type of decision you received.

* If you are a party to a **contested claim** - such as claims for apportionment, attorney fee disagreement, or multiple parties filing for survivor's benefits - your *only* option for disagreeing with your decision is to file a Board Appeal within **60 days** of the date on your decision notice.
* If you are seeking review of an **insurance decision** you have an *additional* option to challenge VA's decision by filing a complaint with a United States district court in the jurisdiction in which you reside within 6 years from when the right of action first accrues. Consult your decision notice for details on what options are available and where to send the request.

**Get Help with Your Review Request:**

For more information on all the available review options, contact us at 1-800-827-1000 or visit [www.va.gov/decision-](http://www.va.gov/decision-reviews/) [reviews/](http://www.va.gov/decision-reviews/). If you need help filing a decision review, you may want to work with an accredited attorney, claims agent, or a Veterans Service Organization (VSO) representative. Additional information about working with an accredited attorney, claims agent, or VSO representative is available at [www.va.gov/decision-reviews/get-help-with-review-request/](http://www.va.gov/decision-reviews/get-help-with-review-request/). You may also find a directory of accredited representatives at [www.va.gov/vso](http://www.va.gov/vso).

VA Form  **20**-**0998** SUPERSEDEA VA FORM 20-0998, JAN 2019 Page 1

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