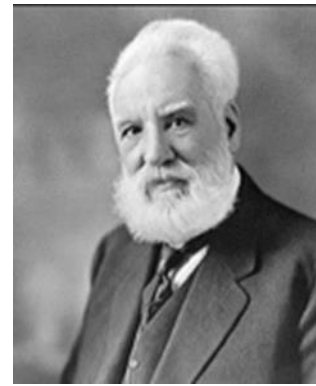




# VA Benefits for Survivors of Veterans:

Practical Applications

# Objective:



Before anything else, preparation is the key to success.

(Alexander Graham Bell)



Enhance proficiency in organizing and handling death claims.



Foster a greater sense of ease and confidence in managing death claims.



Anticipate and manage the workload associated with death claims.



Equip you with the tools to prepare death claims comprehensively.




Ensure the submission of well-grounded death claims.


# Introduction:

## Understanding Your Role


Recognize that you are there to provide support and assistance, but you can't personally fix the emotional pain



Reassuring your client that you can help reduce the emotional burden by handling all the paperwork



Be knowledgeable about the specific requirements and forms involved. The more confident you are, the less stressful the process will be.



Offer compassionate communication & always approach with empathy and genuine care for the situation without making unrealistic promises. Listening actively can help provide emotional support without overstepping boundaries

A photograph of a red ceramic mug filled with dark coffee, a silver ballpoint pen, and a white paper napkin with blue handwriting. The napkin is placed on a light-colored wooden surface. The text on the napkin is written in a cursive, blue ink style. The pen is positioned vertically to the right of the napkin.

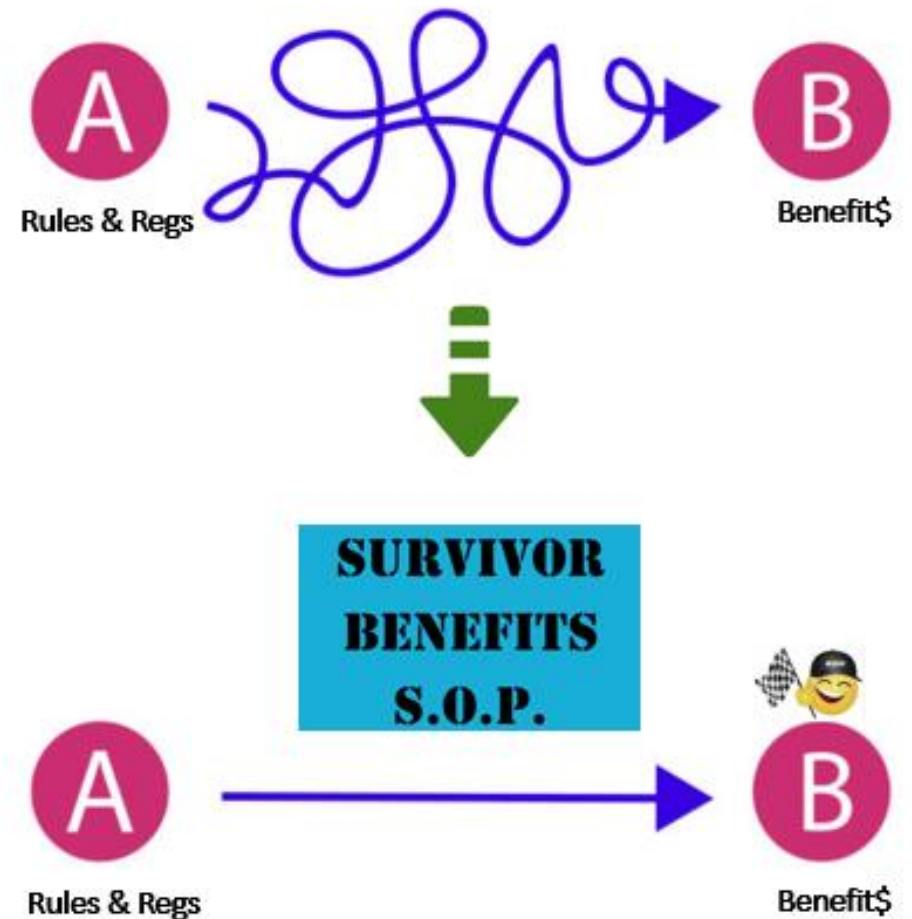
Where  
should  
I start?



# Survivor Benefits S.O.P

## A Step-By-Step Guide

- 1. Clarity:** It ensures that all involved parties understand their roles and responsibilities, reducing confusion.
- 2. Efficiency:** The administrative tasks become more streamlined, decreasing the likelihood of errors.
- 3. Emotional Support:** By adhering to a well-defined process, you can better provide support to grieving clients.
- 4. Uniformity:** Standardization guarantees a steadfast and professional approach to handling different cases.



# Survivor Benefits S.O.P A Step-By- Step Guide

## Beneficial For:

- Training others and office continuity
- Mitigating Emotional Stress
- Dealing with Complex Eligibility Issues
- Addressing Unique Circumstances
- Efficient Claim Processing
- Building Trust and Rapport with Survivors
- Time Management and Follow-Up
- Supportive learning
- Professional growth and competence in death claims

# Survivor Benefits S.O.P

## A Step-By-Step Guide



### **Intake Sheet:**

This sheet assists in gathering essential information for verifying death claim workload and eligibility.



### **Benefits Checklist:**

A valuable tool for ensuring that all necessary steps and documents are accounted for in the claims process.



### **Apt Reminder List:**

This list helps you stay organized by keeping track of important appointment dates and times.



### **VetraSpec List:**

An essential resource for monitoring and addressing any pending issues related to the claims, ensuring a smoother process.



### **Death Claim Folder:**

A dedicated folder for organizing and frontloading tasks leading up to the appointment and for storing client copies of forms after the appointment.



### **Step-by-Step Instructions:**

Detailed instructions on how to conduct an appointment, ensuring a structured and client-focused approach.

# Real-World Scenario

*"My husband passed away. He is a veteran, and I was told to come here. I don't know what to do."*

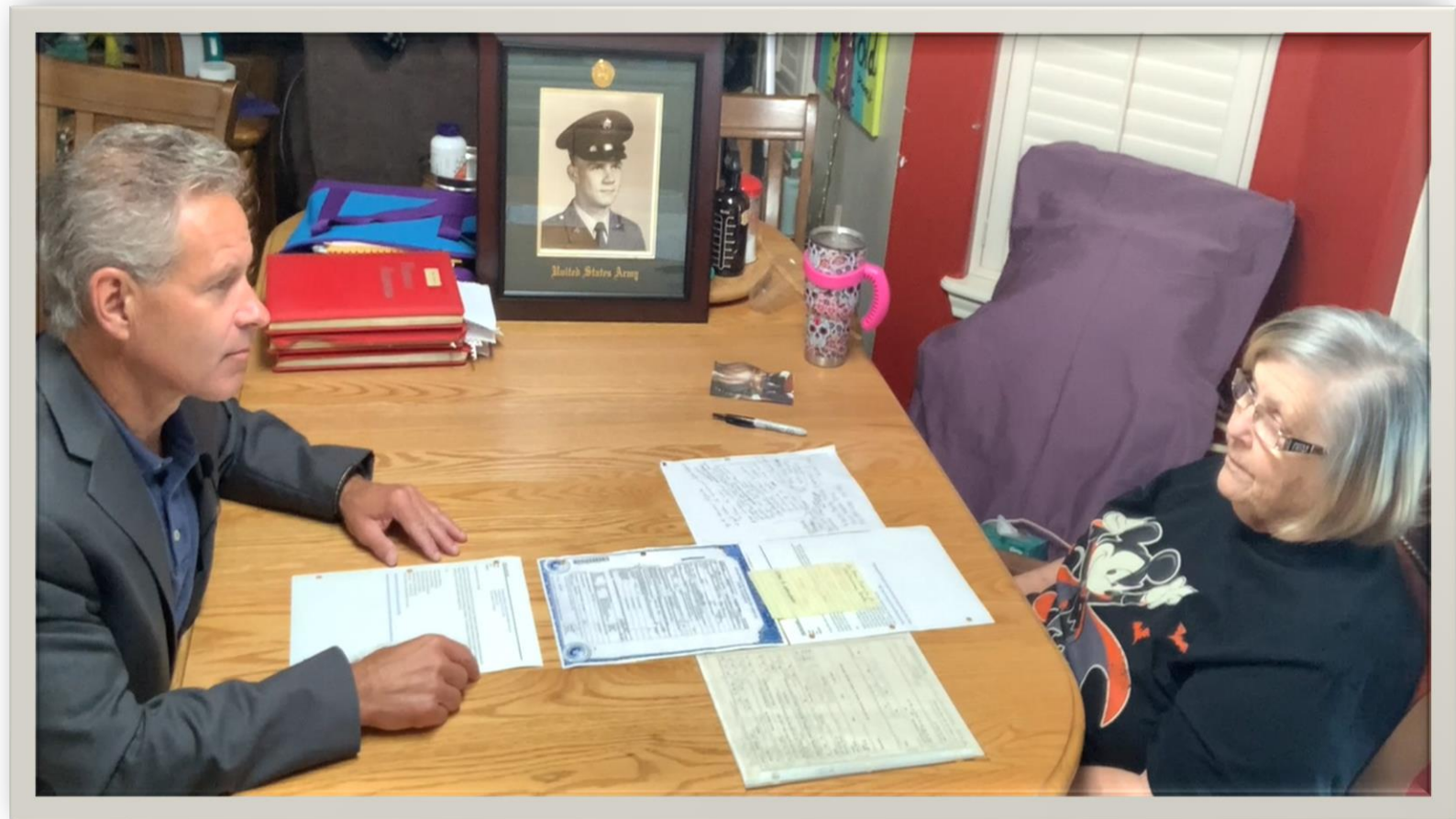




**SURVIVOR  
BENEFITS  
S.O.P.**

## ESTABLISH RAPPORT

- ❖ Express Condolences
- ❖ Acknowledge their visit
- ❖ Introduce yourself
- ❖ Offer a comfortable space
- ❖ Explain the intake process
- ❖ Provide Assurance & Support



# PLAN

## COMPLETE INTAKE SHEET

- ❖ Collect info & eligibility criteria
- ❖ Assess the urgency & appropriate scheduling
- ❖ Streamline the process
- ❖ Prevents unnecessary appointments
- ❖ Creates Continuity
- ❖ Reduces Appointment times
- ❖ Demonstrates professionalism & respect for time
- ❖ Reduces likelihood of missing/incorrect information

DEATH CLAIM APPOINTMENT VERIFICATION INFO				
VETERAN'S INFORMATION				
First Name	Middle	Last Name	SSN/Claim#:	
DOB:	Place of Birth:	DOD:	Place of Death:	
Funeral Home:			Cemetery Name & City:	
Cause(s) of Death:		Date of Burial:		
Did Death occur at a VA Medical Facility/one contracted by VA, enroute to one, or at a VA Nursing home/one contracted by VA? <input type="checkbox"/> No <input type="checkbox"/> Yes - If yes - list Facility Name:				
SERVICE INFORMATION/VA CLAIM STATUS				
Branch of Service:		Component/status:		
<input type="checkbox"/> Army	<input type="checkbox"/> Navy	<input type="checkbox"/> Air Force	<input type="checkbox"/> Active <input type="checkbox"/> Reserve <input type="checkbox"/> National Guard	
<input type="checkbox"/> Marine Corps		<input type="checkbox"/> Coast Guard	Retired: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Is there SBP w/DFAS:	VA notified:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Service # if different from SSN	Rank:
<input type="checkbox"/> Yes <input type="checkbox"/> No	DFAS notified:	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Combat Service: <input type="checkbox"/> WWII <input type="checkbox"/> Korea <input type="checkbox"/> Vietnam <input type="checkbox"/> Gulf War <input type="checkbox"/> OIF/OEF <input type="checkbox"/> Other:				
Was veteran in receipt of any of these benefits (Circle One):			Scan to VetraSpec:	
S/C Disability @	%	Non S/C Pension	None/Unknown	<input type="checkbox"/> Death Cert <input type="checkbox"/> Funeral Receipt
				<input type="checkbox"/> DD214 <input type="checkbox"/> Marriage Cert
				<input type="checkbox"/> Dep. Childs birth certs (if applicable)
CLAIMANT'S INFORMATION				
First Name	Middle	Last Name	SSN:	
Relationship:	DOB:	Date Of Marriage:	Place of Marriage:	Married on the DOD?
<input type="checkbox"/> Surviving Spouse <input type="checkbox"/> Other:				<input type="checkbox"/> Yes <input type="checkbox"/> No
Veteran Previously Married: <input type="checkbox"/> Yes** <input type="checkbox"/> No		Spouse Previously Married: <input type="checkbox"/> Yes** <input type="checkbox"/> No		
Dependent Children: <input type="checkbox"/> No <input type="checkbox"/> Yes (list names/ages):				
Mailing Address:			City:	State Zip
Daytime phone:	Evening phone:	Email Address:		
( )	( )			
NOTES				

# Real-World Scenario



1. Intake sheet

# PLAN

## DEATH CLAIM APPOINTMENT VERIFICATION INFO

VETERAN'S INFORMATION				
First Name <i>John</i>	Middle <i>Roy</i>	Last Name <i>Smith</i>	SSN/Claim#: <i>012-34-5678</i>	
DOB: <i>09/17/1934</i>	Place of Birth: <i>Las Vegas, NV</i>	DOD: <i>10/01/2023</i>	Place of Death: <i>Home (Nashville, TN)</i>	
Funeral Home: <i>Foster's Funeral Home, Nashville, TN</i>			Cemetery Name & City: <i>Middle TN State Vets</i>	
Cause(s) of Death: <i>Lung cancer</i>		Date of Burial: <i>10/5/2023</i>		
Did Death occur at a VA Medical Facility/one contracted by VA, enroute to one, or at a VA Nursing home/one contracted by VA? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes - If yes -list Facility Name:				
SERVICE INFORMATION/VA CLAIM STATUS				
Branch of Service: <input checked="" type="checkbox"/> Army <input type="checkbox"/> Navy <input type="checkbox"/> Air Force <input type="checkbox"/> Marine Corps <input type="checkbox"/> Coast Guard			Component/status: <input checked="" type="checkbox"/> Active <input type="checkbox"/> Reserve <input type="checkbox"/> National Guard Retired: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is there SBP w/DFAS: <input type="checkbox"/> Yes <input type="checkbox"/> No	VA notified: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	DFAS notified: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Service # if different from SSN	Rank:
Combat Service: <input type="checkbox"/> WWII <input type="checkbox"/> Korea <input checked="" type="checkbox"/> Vietnam <input type="checkbox"/> Gulf War <input type="checkbox"/> OIF/OEF <input type="checkbox"/> Other:				
Was veteran in receipt of any of these benefits (Circle One): S/C Disability @ <i>100%</i> <input type="checkbox"/> Non S/C Pension <input type="checkbox"/> None/Unknown <input type="checkbox"/>			Scan to VetraSpec: <input type="checkbox"/> Death Cert <input type="checkbox"/> Funeral Receipt <input type="checkbox"/> DD214 <input type="checkbox"/> Marriage Cert <input type="checkbox"/> Dep. Childs birth certs (if applicable)	
CLAIMANT'S INFORMATION				
First Name <i>Mary</i>	Middle <i>Joy</i>	Last Name <i>Smith</i>	SSN: <i>987-65-4321</i>	
Relationship: <input checked="" type="checkbox"/> Surviving Spouse <input type="checkbox"/> Other:	DOB: <i>1/22/38</i>	Date Of Marriage: <i>06/15/1958</i>	Place of Marriage: <i>Redding, UT</i>	Married on the DOD? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Veteran Previously Married: <input type="checkbox"/> Yes** <input checked="" type="checkbox"/> No		Spouse Previously Married: <input type="checkbox"/> Yes** <input checked="" type="checkbox"/> No		
Dependent Children: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (list names/ages):				
Mailing Address: <i>123 North West Lane</i>			City: <i>Nashville</i>	State <i>TN</i>
Daytime phone: <i>(615) 123-4567</i>		Evening phone: <i>( ) Same</i>	Email Address: <i>None</i>	
NOTES				

## CREATE FOLDER

- ❖ Create a death claim folder and attach the **SURVIVOR BENEFITS CHECKLIST** to the front
- ❖ Use this for preparations & frontloading until the appointment
- ❖ After the appointment – we'll put her copies in it and she can keep it for future reference and/or follow up

# START CHECKLIST

- ❖ Systematic
- ❖ Organization
- ❖ Efficiency
- ❖ Comprehensive Coverage
- ❖ Accuracy
- ❖ Time Management
- ❖ Communication & Documentation Tool
- ❖ Client Reassurance
- ❖ Transparency & Consistency
- ❖ Training, Monitoring Progress

# PLAN

SURVIVOR BENEFITS CHECKLIST	
<p><b>VA</b> <b>1-800-827-1000</b></p> <p><small>*Call anytime to check the status of your claim; Average claim takes about 3-6 months but processing time may vary from case to case.</small></p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Appointment of VSO as Claimant's Representative/POA (21-22)</li> <li><input type="checkbox"/> Application for DIC, Death Pension, and Accrued (21-534ez)             <ul style="list-style-type: none"> <li><input type="checkbox"/> Accrued (21-601 - only when no 21-534ez is submitted)</li> <li><input type="checkbox"/> Substitution (21-0847 <u>Only</u> if claim was still pending)</li> <li><input type="checkbox"/> Aid &amp; Attendance/Housebound (21-2680)</li> <li><input type="checkbox"/> Third Party Consent (21-0845)</li> </ul> </li> <li><input type="checkbox"/> Burial Benefits (21P-530 - burial allowance, plot, transportation)</li> <li><input type="checkbox"/> Headstone/Marker (40-1330 and 40-4964-or or 40-1330M)             <ul style="list-style-type: none"> <li><input type="checkbox"/> Presidential Memorial Certificate (40-0247 - only if not previously submitted on 40-1330 Headstone app)</li> </ul> </li> <li><input type="checkbox"/> Burial Flag (27-2008 - only if not previously issued)</li> <li><input type="checkbox"/> VA Life Insurance             <ul style="list-style-type: none"> <li><input type="checkbox"/> Contact OSGLI if policy for SGLV or VGLI: 1-800-419-1473 and submit SGLV 8283</li> </ul> </li> <li><input type="checkbox"/> Contact the VALI if policy for VALI, SDVI, VMMLI or any other policy number that begins with a V, RH, J, RS, K or W 1-800-669-8477 and submit 29-4125 for lump sum (online is quickest way: <a href="https://insurance.va.gov/Home/IDU">https://insurance.va.gov/Home/IDU</a> )</li> </ul>
<p><b>DFAS</b> (for retirees only) <b>1-888-332-7411</b></p> <p><small>*If you do not hear from DFAS in <u>30 days</u> - call to check the status of your claim!</small></p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Arrears of Pay SF1174 (Claim for Unpaid Compensation of Deceased Member of the Uniformed Service (aka the final pro-rated retirement pay for the month of death)</li> <li><input type="checkbox"/> Survivor Benefits Packet (SBP)             <ul style="list-style-type: none"> <li>- DD2656-7 Verification of Survivors Annuity</li> <li>- W-4P Withholding Certificate for Pension/Annuity</li> <li>- SF1199A Direct Deposit</li> </ul> </li> </ul>
<p><b>Referral:</b></p>	<ul style="list-style-type: none"> <li>&gt; Social Security Administration (SSA)             <ul style="list-style-type: none"> <li>o Report the death &amp; ask about benefit apt</li> <li>o <a href="https://www.ssa.gov/">https://www.ssa.gov/</a></li> <li>o 1-800-772-1213</li> </ul> </li> <li>&gt; DEERS ID Cards             <ul style="list-style-type: none"> <li>o BOOK APT ONLINE TODAY: <a href="https://ideo.dmdc.osd.mil/ideo/#/locator">https://ideo.dmdc.osd.mil/ideo/#/locator</a></li> </ul> </li> <li>&gt; Army Emergency Relief (AER) (financial hardship)             <ul style="list-style-type: none"> <li>o <a href="https://www.armyemergencyrelief.org/offices/">https://www.armyemergencyrelief.org/offices/</a></li> </ul> </li> <li>&gt; Dept of Human Services (DHS) (financial hardship)             <ul style="list-style-type: none"> <li>o <a href="https://faonlineapp.dhs.tn.gov/">https://faonlineapp.dhs.tn.gov/</a></li> <li>o 1-833-772-TDHS (8347)</li> </ul> </li> </ul>



# Real-World Scenario



1. Intake sheet
2. Checklist

# PLAN

*SMITH*  
10/19/23

## SURVIVOR BENEFITS CHECKLIST

<p><b>VA</b> <b>1-800-827-1000</b></p> <p><small>*Call anytime to check the status of your claim; Average claim takes about 3-6 months but processing time may vary from case to case.</small></p>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Appointment of VSO as Claimant's Representative/POA (21-22)</li> <li><input checked="" type="checkbox"/> Application for DIC, Death Pension, and Accrued (21-534ez)             <ul style="list-style-type: none"> <li><input type="checkbox"/> Accrued (21-601 - only when no 21-534ez is submitted)</li> <li><input type="checkbox"/> Substitution (21-0847 <u>Only</u> if claim was still pending)</li> <li><input type="checkbox"/> Aid &amp; Attendance/Housebound (21-2680)</li> <li><input type="checkbox"/> Third Party Consent (21-0845)</li> </ul> </li> <li><input checked="" type="checkbox"/> Burial Benefits (21P-530 - burial allowance, plot, transportation)</li> <li><input type="checkbox"/> Headstone/Marker (40-1330 and 40-4964-or or 40-1330M)             <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Presidential Memorial Certificate (40-0247 - only if not previously submitted on 40-1330 Headstone app)</li> </ul> </li> <li><input type="checkbox"/> Burial Flag (27-2008 - only if not previously issued)</li> <li><input type="checkbox"/> VA Life Insurance             <ul style="list-style-type: none"> <li><input type="checkbox"/> Contact OSGLI if policy for SGLI or VGLI: 1-800-419-1473 and submit SGLV 8283</li> </ul> </li> <li><input type="checkbox"/> Contact the VALI if policy for VALI, SDVI, VMLI or any other policy number that begins with a V, RH, J, RS, K or W 1-800-669-8477 and submit 29-4125 for lump sum (online is quickest way: <a href="https://insurance.va.gov/Home/IDU">https://insurance.va.gov/Home/IDU</a>)</li> </ul>
<p><del><b>DFAS</b></del> <del>(for retirees only)</del> <del><b>1-888-312-7411</b></del></p> <p><small>*If you do not hear from DFAS in <u>30 days</u> - call to check the status of your claim!</small></p>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> <del>Arrears - Pay SF 1199A</del> <small>(Claim for unpaid compensation of Deceased Member of the Uniformed Services (a) (4) pro-rated retirement pay for the month of death)</small></li> <li><input checked="" type="checkbox"/> <del>Survivor Benefits Packet (SBP)</del> <small>- DD Form 1300 - Verification of Survivors Annuity - SF 1199A - Direct Deposit</small></li> </ul>
<p><b>Referral:</b></p>	<ul style="list-style-type: none"> <li>&gt; <u>Social Security Administration (SSA)</u> <ul style="list-style-type: none"> <li><input type="checkbox"/> Report the death &amp; ask about benefit apt</li> <li><input type="checkbox"/> <a href="https://www.ssa.gov/">https://www.ssa.gov/</a></li> <li><input type="checkbox"/> 1-800-772-1213</li> </ul> </li> <li>&gt; <u>DEERS ID Cards</u> <ul style="list-style-type: none"> <li><input type="checkbox"/> <b>BOOK APT ONLINE TODAY:</b></li> <li><input type="checkbox"/> <a href="https://idco.dmdc.osd.mil/ideo/#/locator">https://idco.dmdc.osd.mil/ideo/#/locator</a></li> </ul> </li> <li>&gt; <u>Army Emergency Relief (AER)</u> (financial hardship)             <ul style="list-style-type: none"> <li><input type="checkbox"/> <a href="https://www.armymemgiversrelief.org/offices/">https://www.armymemgiversrelief.org/offices/</a></li> </ul> </li> <li>&gt; <u>Dept of Human Services (DHS)</u> (financial hardship)             <ul style="list-style-type: none"> <li><input type="checkbox"/> <a href="https://faonlineapp.dhs.tn.gov/">https://faonlineapp.dhs.tn.gov/</a></li> <li><input type="checkbox"/> 1-833-772-TDHS (8347)</li> </ul> </li> </ul>

# SCHEDULING

- Contact the claimant to schedule at a convenient time. Be sure to block out 1-3 hours for the appointment (more or less, depending on the amount of forms you have to complete).
- Give the client an **APPOINTMENT REMINDER** with a list of what documents they need to bring.

# PLAN

## *APPOINTMENT REMINDER*

Mon.  Tues.  Wed.  Thurs.  Fri.

Date: 10/19/23 Time: 1:00

PLEASE CALL AT LEAST 24 HOURS IN ADVANCE FOR ANY CANCELLATIONS

## *PLEASE BRING WITH YOU:*

- DD214 - Veteran's Discharge
- Retirement Orders
- Marriage Certificate SSN for spouse
- Birth Certificates/SSN for dependent children (18 & under or 19-23 college)
- Copy of service records or private medical records
- Doctor's note/letter/diagnosis or NEXUS
- Death Certificate
- Itemized receipt for funeral/burial expenses
- Divorce decrees for previous marriages
- VA Correspondences (or letters received)
- Direct deposit information, bank acct. & routing number
- Other: \_\_\_\_\_

# APT SLIP REMINDERS

## Why it's important:



**Efficiency:** Appointment slip reminders help manage your schedule better. They ensure that time is allocated appropriately, preventing overbooking or delays.



**Client Preparation:** Providing a list of required documents in advance allows Mary to prepare thoroughly for her appointment. This not only saves time during the appointment but also ensures that she brings all necessary paperwork, reducing the need for follow-up visits.



**Client Expectations:** It sets clear expectations for Mary. She knows what is expected of her and what she needs to bring, reducing any potential confusion or anxiety.



**Effective Use of Time:** By having the necessary documents ready, you can make the most of the appointment time, addressing her needs more effectively.



**Professionalism:** It demonstrates professionalism and a client-focused approach. It shows that you value Mary's time and are committed to helping her through this process.

# REVIEW & FRONTLOAD

- Gather & Scan all necessary documents required for the claim.
- Pull any pertinent info from VBMS before calling the VSO line to notify the VA of the death.
- Familiarize yourself with the specific benefits relative to the case.
- Review vet's history to determine eligibility for specific benefits.
- Front Load info in VetraSpec tabs.
- Start marking pertinent benefits on the **CHECKLIST**
- Conduct notifications by calling VA, DFAS, or VA Life Insurance to notify them date of death.

# PREPARE

## VETRA TABS FOR DEATH CLAIMS

VETERAN DETAILS											
HOME	SEARCH	ADD	NO RESULTS	DOCUMENTS	REPORTS	FORMS	CALCULATOR	MY TABS	GENERAL CONTACT LINK	Today is Sep 21, 2023 Logged in as: Kell Brown (Admin)   Logout	
GENERAL CONTACT LINK	GENERAL CONTACT LINK	GENERAL CONTACT LINK	GENERAL CONTACT LINK	GENERAL CONTACT LINK	GENERAL CONTACT LINK	GENERAL CONTACT LINK	GENERAL CONTACT LINK	GENERAL CONTACT LINK	GENERAL CONTACT LINK	GENERAL CONTACT LINK	GENERAL CONTACT LINK

### QUICK OVERVIEW

- Edit DEMOGRAPHICS OVERVIEW
- Mark as DECEASED

### MORE DETAILS

- Complete DEATH AND BURIAL INFORMATION block
- Copy/Paste obituary in REMARKS section
- Complete CLAIMANT INFORMATION
- Be sure to check "This person is also a dependent" block

### MILITARY SERVICE

- Add DD214/Discharge information and all service info

### CURRENT RATINGS

- Review/insert current ratings; compare/update this tab according to VBMS & the codesheet before calling to report the death.

### PENDING ISSUES

- Make one pending issue tab and label it "Death Claim" – then copy/paste the LIST FOR PENDING ISSUES in the NOTES block. You can also paste the confirmation numbers next to each form and easily track what was done or still needed.

### DEPENDENTS

- Add any other dependents not already listed

### COMMUNICATION

- Document the details of the appointment, including the forms submitted, eligibility discussions, and any additional information relevant for follow up appointments.

# PREPARE

## PRO-TIP

Copy/Paste  
Obituary in  
Remarks block:

**CLICK**

**DEATH AND BURIAL INFORMATION**

DEATH DATE: Apr 09 2023  
CAUSE 1: Cancer of the head, neck, and throat (squamous cell carcinoma of the hypopharynx/larynx)  
CAUSE 2:  
CAUSE 3:  
CAUSE 4:  
CAUSE 5:  
BURIAL DATE: Apr. 14, 2023  
BURIAL LOCATION: Greenwood Cemetery Clarksville TN  
CEMETERY NAME: Greenwood Cemetery  
CEMETERY CITY / STATE: Clarksville TN  
RANGE / GRAVE :  
LOT:  
HEADSTONE REQUESTED:  
SOURCE OF INFORMATION:  
REMARKS:  
[Redacted] age 64, of Clarksville, passed away Sunday, April 9, 2023, peacefully in his sleep. He was born August 26, 1958, in East St. Louis, IL, to [Redacted] and the late [Redacted]. In addition to his parents, [Redacted] was preceded in death by two brothers [Redacted]. Mr. [Redacted] is survived by his wife [Redacted], a son, [Redacted], remaining brothers, [Redacted] and [Redacted], and grandchildren [Redacted]. A career military serviceman, [Redacted] retired as an E7 in the 5th Special Forces Group after 23 years and continued after as a Field Service Tech with the Department of Defense. He was awarded the Bronze Star in honor of his service. He was a member of Immaculate Conception Church, adored his grandkids and was the best "G Dad". A Celebration of Life Service will be held at 1:00 p.m. Friday, April 14 in the Chapel of Neal Tarpley Parchman Funeral Home. Pallbearers will be [Redacted] and [Redacted]. Honorary pallbearers will be his Brothers in Arms of the 5th Special Forces Group. Burial will follow in Greenwood Cemetery. Visitation will be held from 4:00 p.m. until 7:00 p.m. Thursday, April 13 and from 11am until the hour of service Friday, April 14. In lieu of flowers, memorial donations may be made to Green Beret Foundation at <https://fundraise.greenberetfoundation.org/give/457637/#/donation/checkout> or to the Special Forces Foundation at <https://specialforcesfoundation.org/donate>.  
Arrangements are entrusted to Neal Tarpley Parchman Funeral Home, 1510 Madison Street, Clarksville, TN 37040, (931) 645-6488. Online condolences and live streaming of the service may be viewed at [www.nealtarpleyparchman.com](http://www.nealtarpleyparchman.com).

**CLAIMANT**

NAME: [Redacted]  
ADDRESS: [Redacted] Lane  
CITY / STATE: Clarksville,  
ZIP: 37043  
PHONE: (931) [Redacted]  
RELATIONSHIP TO VETERAN: Spouse  
SSN: [Redacted]  
DATE OF BIRTH: Jun 24, 1960

**Paste Obituary in REMARKS**

VetraSpec | [www.tylertech.com](http://www.tylertech.com) | 1-877-568-7732 | Help  
Use constitutes agreement of the TOS

## OPENING THE APPOINTMENT

- Begin by offering condolences, Kleenex and expressing empathy for their loss. Acknowledge the emotional difficulty of the situation.
- Check for any VA or DFAS paperwork already done (so as not to duplicate claims)

### EXPLAIN THE PROCESS

- Outline the purpose of the appointment, which is to assist them in applying for the benefits and support available to them.
- Provide a brief overview of what to expect during the appointment, including discussing eligibility, completing necessary forms, and answering any questions they may have.

### GATHER & VERIFY INFORMATION

- Collect any additional information or documents that were unavailable during prior preparations.
- Verify all current information in VetraSpec is correct and up to date before populating any forms.**



## COMPLETING THE FORMS

- Complete the necessary forms (use the **SURVIVOR BENEFITS CHECKLIST** to help you stay organized and on track)
- Ensure accuracy and completeness of all forms and documentation with signatures in all required blocks. Have your client also review the forms to ensure they are correct and complete.
- Put a copy of all forms in the folder you have prepared along with a copy of the checklist.

### REVIEW ELIGIBILITY AND BENEFITS

- Explain eligibility for different benefits you have applied for and the specific criteria for each.
- Provide an explanation of the claims process, what to expect, and estimated processing time of each.

### ADDRESS QUESTIONS AND CONCERNS

- Encourage the survivor to ask any questions or express concerns they may have.
- Be prepared to clarify and provide information regarding benefits and timelines for processing.

## CLOSING THE APPOINTMENT

- Reiterate your condolences and offer support.
- Provide your contact information for any additional questions that may arise.
- Offer to assist the survivor with any follow-up actions or questions that may arise after the appointment.

### SUBMISSION OF CLAIMS

- Submit completed claims and documents to the appropriate office/agency.

### FOLLOW-UP

- Explain the importance of monitoring the status of their claim, how to check on it and staying in touch for updates.
- Provide agency contact information for follow-up inquiries.

# WRAP IT UP

- Pending Issues Tab:** Make one pending issue tab and label it “Death Claim” – then copy/paste the **LIST FOR PENDING ISSUES** in the **NOTES** block. You can also paste the confirmation numbers next to each form and easily track what was done or still needed.
- Communication Notes:** Document the details of the appointment, including the forms submitted, eligibility discussions, and any additional information relevant for follow up appointments.

## LIST FOR PENDING ISSUES TAB (COPY/PASTE IN VETRA)

### DIC & Burial List

- POA (21-22) – (put confirmation number here or other method sent)
- ITF (only if death is more than 1 year ago AND you are not filing a 534ez today) -
- DIC/Accrued (21P-534ez) -
- Accrued (21P-601) (w/out DIC) -
- Burial Benefits (21P-530) -
- Substitution of Claimant (21P-0847) (only if claim/appeal pending at time of death)-
- Third Party Consent (21-0845) -
- A&A (21-2680) -
- 4142/4142a -
- Death Cert -
- Marriage Cert -
- DD214 -
- Itemized Funeral Receipt -
- Flag (give form to Post Office) (27-2008) – hand delivered
- Headstone (40-1330) -

### PENDING ISSUES OVERVIEW

[ADD](#)**ISSUE:** DEATH CLAIM**RECIPIENT:** Veteran[EDIT](#)**ORIGINAL OR REOPENED?** Original claim  
Claim filed on: Sep. 22, 2023**CLAIM STATUS:** In progress  
Claim filed on: Sep. 22, 2023**REVIEW BY:****NOTES:**

VA

- POA (21-22) – QS Confirmation #79603051
- DIC/Accrued (21P-534ez) – QS Confirmation #79603051
- Burial Benefits (21P-530) - QS Confirmation #79603051
- Substitution of Claimant (21P-0847) - QS Confirmation #79603051
- Third Party Consent (21-0845) – QS Confirmation #79603051
- A&A (21-2680) QS Confirmation #79603051
- 4142/4142a - QS Confirmation #79603051
- Death Cert - QS Confirmation #79603051
- Marriage Cert – QS Confirmation #79603051
- DD214 - QS Confirmation #79603051
- Itemized Funeral Receipt – QS Confirmation #79603051
- Flag ((27-2008) - KY West Veterans Cemetery
- Headstone (40-1330) - KY West Veterans Cemetery
- PMC x10 (40-0247) QS Confirmation #79603051
- VGLI/VALI - Faxed to VALI

DFAS

- 1174 - Faxed 9/22/23
- DD2656 - Faxed 9/22/23
- W-4P - Faxed 9/22/23
- SF1199A - Faxed 9/22/23

## HYPO #1

Navy veteran, CPT Jack Sparrow recently died from a stroke; His wife Angelica has come to the front desk to get scheduled for an appointment with you so you can help her with all the paperwork.

- Review the information on the Intake Sheet from your front desk assistant
- Flip the page over and complete the Survivor Benefits Checklist and Apt Reminder



## HYPO #2

Space Force veteran, 2LT Han Solo also recently died from brain cancer; His x-wife Leia has come to the front desk to get scheduled for an appointment with you so you can help her file for benefits for her son, Kylo.

- Review the information on the Intake Sheet from your front desk assistant
- Flip the page over and complete the Survivor Benefits Checklist and Apt Reminder



# Additional Tips

- Use Visual Aids
  - Headstones, Markers, Medallions
  - Presidential Memorial Certificates

Shown below are the three medallions with the actual dimensions (±1/32") for width and height.



## ILLUSTRATIONS OF STANDARD GOVERNMENT HEADSTONES AND MARKERS

<p><b>UPRIGHT HEADSTONE</b> WHITE MARBLE (U) OR LIGHT GRAY GRANITE (V)</p>  <p>The headstone is 42 inches long, 13 inches wide and 4 inches thick. Weight is approximately 230 pounds. Variations may occur in stone color, and the marble may contain light to moderate veining. Additional inscription is limited to 15 characters (including spaces) up to four lines maximum.</p>	<p><b>BRONZE NICHE (Z)</b></p>  <p>This niche marker is 8-1/2 inches long, 5-1/2 inches wide, with 7/16 inch thickness. Weight is approximately 3 pounds; mounting bolts and washers are threaded with the marker. Used for columbarium or mausoleum interment. Also provided to supplement a privately-purchased, permanent and durable headstone or marker for eligible Veterans who died on or after November 1, 1990 and are buried in a private cemetery. Additional inscription is limited to 27 characters (including spaces) up to two lines maximum.</p>	<p><b>FLAT MARKERS</b> BRONZE (B)</p>  <p>This grave marker is 24 inches long, 12 inches wide, with 3/4 inch thickness. Weight is approximately 15 pounds. Anchor holes, size and number for fastening to base are furnished with the marker. The base is not furnished by the Government. Additional inscription is limited to 27 characters (including spaces) up to two lines maximum.</p>
<p><b>ANGEO SANTONO</b> ON 10 APRIL 1918 DIED 10 APR 1918 DURING WW I RECEIVED GOVERNMENT BURIAL BENEFIT SEE BACK FOR SERIAL NO. AND DATA</p> <p>Special inscription information (i.e., name, date of birth, and date of death) is authorized on a Government-furnished headstone or marker if the Veteran's date of death is on or after October 1, 2019. For flat markers, the special information is inscribed at the bottom. For upright headstones, the special information is inscribed on the back.</p>	<p><b>GENERIC V</b> FUGILE SERVING IN THE WORLD WAR II SERVING IN THE WORLD WAR II RECEIVED GOVERNMENT BURIAL BENEFIT SEE BACK FOR SERIAL NO. AND DATA</p> <p>VA will include a Prisoner of War (POW) or Former Prisoner of War (FPWW) inscription, upon request and with verification. Character and space limitations apply based on marker type.</p>	<p><b>LIGHT GRAY GRANITE (G) OR WHITE MARBLE (F)</b></p>  <p>This grave marker is 24 inches long, 12 inches wide, and 4 inches thick. Weight is approximately 130 pounds. Variations may occur in stone color, the marble may contain light to moderate veining. Additional inscription is limited to 27 characters (including spaces) up to two lines maximum.</p>
		<p><b>SMALL FLAT GRANITE (L)</b></p>  <p>This grave marker is 18 inches long, 12 inches wide, and 3 inches thick. Weight is approximately 70 pounds. Variations may occur in stone color. Additional inscription is limited to 27 characters (including spaces) up to two lines maximum.</p>

## Presidential Memorial Certificates



- Give Resources
  - Agency Contacts
  - Your Contact
  - Survivor Benefit Booklet
  - Fact Sheets



Summary of VA Dependents' and Survivors' Benefits

VA supports Servicemembers' and Veterans' families







Questions?

Feedback?

