MILPERSMAN 1910-804

INFORMATION TO BE PROVIDED UPON SEPARATION REGARDING CLAIMS FOR COMPENSATION, PENSION, OR HOSPITALIZATION TO BE FILED WITH THE DEPARTMENT OF VETERANS AFFAIRS (DVA)

| Responsible Office | NAVPERSCOM (PERS-832) | Phone: DSN COM FAX | 882-4433 (901) 874-4433 882-2754 |

References

(a) 10 U.S.C. 1218

1. Policy

a. Per reference (a), prior to discharge/release from active duty members with disabilities must

   (1) file/refuse to file a claim with the Department of Veterans’ Affairs (DVA) for compensation, pension, or hospitalization; or

   (2) sign/refuse to sign a statement acknowledging that claim procedures were fully explained.

b. A right that members may assert after failing/refusing to sign a claim is not affected by that failure/refusal.

c. This section does not prevent the immediate transfer of a member to DVA facilities for needed hospital care.

2. Rules

a. Designated separation activities must ensure disabled members are not discharged, retired, or released from active duty until they are fully briefed on the right to file a claim for compensation, pension, or hospitalization.

b. Instruct members that any hospitalization or benefits from the DVA at a later date are generally contingent upon the
filing of a claim. Delay in filing may result in the eventual loss of monetary benefits or deprivation of hospitalization.

c. Advise member in some instances DVA benefit payments may exceed their retirement pay entitlement.

d. Commanders of separation activities are responsible for DVA claims submission. Where practicable use DVA counselors for assistance.

3. **Separation Activity Actions**

   a. Within 5 days of separation, separation activity will submit a member’s claim form VA-21-526 (02-04), Veterans Application for Compensation or Pension at Separation from Service, to the DVA regional office serving the locality where member intends to live (VA Bulletin I-IV refers). Use the following to complete the claim:

   (1) VA 21-526

   (2) DD 214 (Rev. 2-00), Certificate of Release or Discharge from Active Duty (copy 3)

   (3) a certified and legible complete copy of member’s military health records (medical) (less jacket cover), including enlistment and separation physical examination records

   (4) one copy of the NAVMED 6100/1 (Rev. 09-04), Medical Board Report Cover Sheet, including all attachments if applicable

   (5) a certified and legible copy of member’s complete military dental treatment record (less jacket cover).

   b. Omission of any document or record could cause undue delay in adjudicating the claim by the DVA resulting in undue hardship for the member.

4. **SF 600 (Rev. 6-97), Chronological Record of Medical Care**

   a. When the member does not desire to file a claim, request them to sign the following statement on SF 600:
“I have been told that I am to be (discharged/retired/released) from active duty in the Naval Service by reason of disability and have been advised of my right to file a claim with the Department of Veterans Affairs for compensation, pension, or hospitalization. I have decided not to submit a claim for any of those benefits at this time. I understand that my failure to file a claim at this time does not prejudice any right to submit a claim in the future.”

SIGNATURE OF MEMBER

WITNESS’ SIGNATURE

b. While the above statement is not a waiver of any rights, it should be forwarded to the Navy Personnel Command (NAVPERSCOM), Reserve Personnel Services (PERS-4912) with the member’s closed health record. If the member later files a claim, this along with a copy of the health record, must be forwarded to the DVA.

5. **Others Filing for Compensation.** Members being separated for reasons other than disability may also file compensation claims with the DVA under this article. All claims are submitted per this article.