Medical Foster Home (MFH) Program

Purpose

The purpose of this letter is to provide information about the Medical Foster Home (MFH) program and to establish the responsibilities of the MFH Coordinator.

Background

The MFH program is a non-institutional alternative to nursing home care for Veterans who are unable to safely live alone due to chronic or terminal illness. An MFH is a privately-owned residence that offers 24-hour care and supervision. It is less costly than a nursing home and is fully financed by the Veteran’s own resources. To be accepted into the program, a Veteran must meet the nursing home level of care. The level of care ranges from ambulatory requiring close supervision to bedridden. Other eligibility requirements include (1) being unable to live independently due to functional, cognitive, and/or psychosocial impairment and (2) having complex medical conditions requiring care from a VA home health care team. Currently, a total of 65 VA medical centers (VAMCs) have MFH programs that are either fully operational or in development.

Responsibilities of Regional Offices

All regional office (RO) veterans service centers (VSCs) and pension management centers (PMCs) must designate an MFH Coordinator and an alternate, complete the enclosed spreadsheet (Enclosure), and forward it to the VAVBAWAS/CO/212A mailbox within 30 days of the date of this letter. ROs must promptly notify the Compensation and Pension (C&P) Service when there is a change in coordinators or alternates. The C&P
Service will publish the list of MFH Coordinators on its Coordinator Lists Intranet page located at vbaw.vba.va.gov/bl/21/staff/coordinator.htm.

**Expedited Claims Processing**

Successful placement into an MFH requires payment from the Veteran within two weeks from the date of referral to an MFH. Therefore, ROs must adjudicate claims involving MFH placement (which can be claims for any benefit, but most often for special monthly pension (SMP) or special monthly compensation (SMC)) within **14 days** of receipt. Any greater delay will extend a Veteran’s hospital stay and reduce the likelihood of placement in an MFH.

**Tracking**

A special issue has been created in the Modern Awards Processing – Development (MAP-D) application to track cases involving MFH claims. When an MFH claim is established, add the special issue “Medical Foster Home” in MAP-D.

**Claims Based on MFH Placement**

Currently, the majority of claims under the MFH program involve pension and may include determining aid and attendance/housebound status. Returning Operation Enduring Freedom and Operation Iraqi Freedom Veterans who require assistance with activities of daily living may file for SMC.

Currently, a person eligible for pension is considered to be in need of aid and attendance if he/she is a patient in a nursing home (Title 38 U.S.C. § 1502(b)). Based on statutory authority and current procedure, VA may process a claim for SMP based on the need for aid and attendance without a single 100-percent disability evaluation and/or a rating decision, if nursing home status is of record and the beneficiary is receiving or is entitled to receive pension benefits (see M21-1 Manual Rewrite (MR), Part V, Subpart ii, Chapter 3, Topic 1, Block e, or M21-1MR V.ii.3.1.e).

As noted, the admission criteria for the MFH program require the Veteran to meet the nursing home level of care and be unable to live independently due to functional, cognitive, and/or psychosocial impairment. Therefore, prior to the finalization of the rulemaking, SMP should be administratively granted based on MFH placement.

For compensation claims, a single disability rated 100 percent is generally a prerequisite for a determination of SMC based on the need for aid and attendance. A combination of disabilities that meets the definition of a single disability in accordance with title 38 CFR § 4.16 should be applied, if warranted. In addition, the permanent need for aid and attendance is not required before awarding benefits.
MFH Coordinator Responsibilities at the VAMC

Each participating VAMC will also have a designated MFH Coordinator. VHA maintains the list of VAMC Coordinators and their contact information on its web site, located at VAMC Coordinators.

The MFH Coordinator at the VAMC will identify Veterans who meet the eligibility requirements for placement in the MFH program. The VAMC MFH Coordinator will perform the following preliminary steps before submitting the claim to the RO:

- Contact the Coordinator at the RO when the Veteran is ready to be admitted into an MFH, and ask if any information or evidence is needed to support the Veteran’s claim to make sure it will be ready for a prompt decision.
- Ensure that the treating facility conducts an examination for aid and attendance and completes a VA Form 21-2680, Examination for Housebound Status or Permanent Need for Regular Aid and Attendance, prior to sending a compensation claim to the RO.
- Fax all material to the RO MFH Coordinator, including any pertinent medical records. The VAMC MFH Coordinator will subsequently send all original applications to the RO for inclusion in the claims record. Faxed signatures are acceptable on all documents unless there is a question about the validity.

MFH Coordinator Responsibilities at the RO

The role of the MFH Coordinator at the RO is to act as a liaison with the VAMC. The RO MFH Coordinator will track all claims based on MFH placement and will work to ensure that claims are processed within 14 days.

The MFH Coordinator, or alternate, will perform the following duties at the RO:

- Obtain any needed medical or treatment records from the VA treating facility through such means as the Compensation and Pension Records Interchange (CAPRI).
- Ensure that all pertinent claims applications, forms, and medical evidence, if necessary, are of record before the claim is sent to either the Rating or Post-Determination Team for processing.
- Notify the MFH Coordinator at the VAMC of the decision as soon as a decision is made.

Claims Received From the VAMCs

The VAMC MFH Coordinators should submit claims to the ROs that are ready for a decision. If the claim can be granted, do so immediately. ROs must send a Veterans
Claims Assistance Act (VCAA) letter if the claim cannot be granted based on the evidence of record. The RO MFH Coordinators should promptly inform the VAMC MFH Coordinator, work through the VAMC MFH Coordinator to get the completed VCAA notice response, and immediately initiate all required development action (if any).

**Veterans Service Organization (VSO) Review**

Completed rating decisions, rating code sheets, and deferred ratings will be made available to the designated power of attorney for review if the VSO is represented at the RO where the rating decision is completed. For any rating decision with a VSO designated as the power of attorney that does not have a local representative, follow instructions in **M21-1MR I.3.B.12.c**, concerning brokered work.

For VSOs at VSCs, allow two business days for the service organization to review the case.

For VSOs at PMCs, follow these guidelines:

- **Fast Letter 08-38, Survivor Benefits Claims Consolidation Procedures**, states that all VSOs located at the PMCs must have access to encrypted e-mail and Virtual VA. Therefore, all rating decisions should be placed in Virtual VA for review and PMC veterans service representatives (VSRs) must notify the appropriate service organization mailbox by e-mail of a pending rating decision in Virtual VA. Allow two business days for the service organization to respond.

- If a response is received, the VSR will electronically insert the e-mail and response into Virtual VA using the “Insert Doc” feature. The service organization may contact the PMC to discuss the decision with the appropriate rating VSR or supervisor prior to promulgation. If the service organization fails to respond, insert the e-mail into Virtual VA and promulgate the award.

- Currently, each State Veterans Affairs Department has an encrypted mailbox for ratings to be sent for 48-hour review.

**Questions**

E-mail questions regarding this letter to VAVBAWAS/CO/212A.

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VERNA L. JONES, Director
National Veterans Affairs and Rehabilitation Commission

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Medical Foster Home Coordinator Directory – by VSC or PMC

(A) = Alternate

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<th>Coordinator Name</th>
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