

# VA Claims Assistance Request



As an AAFMAA Premier Services member you now have access to VA Claims Assistance. All you need to do is complete this form and submit the required documents to activate your services.

1. MEMBER		
Name (Last, First MI)	Rank/Title	Social Security Number
Email ( <input type="checkbox"/> Personal <input type="checkbox"/> Work)	Phone ( <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work)	
Military Service <input type="checkbox"/> Army <input type="checkbox"/> Air Force <input type="checkbox"/> Navy <input type="checkbox"/> Marines <input type="checkbox"/> Coast Guard	Military Status <input type="checkbox"/> Active <input type="checkbox"/> Guard <input type="checkbox"/> Reserve <input type="checkbox"/> Retired <input type="checkbox"/> Veteran	

2. VA DISABILITY CLAIMS INFORMATION	
Have you ever filed a VA disability claim? <input type="checkbox"/> No <input type="checkbox"/> Yes	Current VA Service Connected Disability Award <input type="checkbox"/> None <input type="checkbox"/> _____ % <input type="checkbox"/> \$ _____ Monthly
You are a veteran of which of the following conflicts? (Mark all that apply) <input type="checkbox"/> None <input type="checkbox"/> Korean Conflict <input type="checkbox"/> Vietnam <input type="checkbox"/> Persian Gulf War (Operation Desert Storm) <input type="checkbox"/> OEF (Operation Enduring Freedom) <input type="checkbox"/> OIF (Operation Iraqi Freedom) <input type="checkbox"/> OND (Operation New Dawn)	
Do you have a 20 year letter (Guard and Reserve)? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Did/do you receive any type of military separation/severance/retired pay? Type _____ Amount \$ _____	
What condition(s) are you interested in claiming for service connected disability to the VA? <i>To obtain compensation, a condition must be chronic and incurred during active military service. Conditions diagnosed post service must be secondary to service connected disabilities or presumptive conditions recognized by the VA as a result of military service (such as Agent Orange exposure).</i>	
_____ _____ _____ _____	

## **\*\* IMPORTANT! ACTION REQUIRED \*\***

In order to begin the VA Claims process we require copies of the following documents (no originals please):

- DD 214
- Military Discharge documents
- VA Award Letter and Rating Decisions
- Marriage Certificate
- Birth Certificates for Dependent Children
- 20 Year Letter (if applicable)

Options to Get Documents to AAFMAA:

- Upload: From the Premier Services tab on your Member Center account upload PDF documents
- Email: MemberBenefits@aafmaa.com
- Fax: 571-765-2033

## **AAFMAA's Actions After Receipt of Documents**

Please allow at least 48 hours for us to review your information. One of our VA Coordinators will contact you to discuss your claim. As part of the evidence requirements, we may ask for documentation such as medical records for claimed conditions, service treatment records for new conditions and Disability Benefits Questionnaires to be completed by your physician.

AAFMAA utilizes the VA Fully Developed Claims (FDC) process in which a claim is submitted with all the evidence required to substantiate the claims resulting in faster claims processing time.

Thank you for your membership. We look forward to assisting you with your VA Claim!