

REQUEST FOR VA BILLING
FOR CARE RELATED TO MASS LITIGATION

INSTRUCTIONS - Visit the OGC Collections website at <https://www.va.gov/OGC/Collections.asp> for the most up to date form prior to use.

1. Complete the information for VA to process your request.

Failure to submit complete information may result in significant delays in processing your request. Attorney's Letter of Representation. If requested by, or on behalf of, a law firm/lawyer representing a party (includes record retrieval company for a law firm), send a letter of representation with your request.

2. Click Print or Save using the Buttons displayed in Yellow at bottom of second page.

3. Select each VA Hospital that provided or paid for care to see the fax number to send the request. Select the location(s) where accident-related care was provided from the drop down lists below. Locations listed are the locations of VA Hospitals. If care was provided at a VA clinic or a non-VA provider whose exact location is not listed below, choose the location closest to where the care was provided. If more than three VA Hospitals provided or paid for care, use an additional form. Requests must be faxed or mailed to all VA Hospitals that provided or paid for care in order for VA to produce billing for all related treatment. *If unable to Fax, the mailing address for each location selected will be displayed at bottom of second page.*

Select

Location:

VETERAN & INJURY DESCRIPTION

Veteran's Name (Last, First, Middle Initial)	
Veteran's Full Social Security Number	
Veteran's Date of Birth	
Veteran's Mailing Address	
Veteran's Phone	
Type of Mass Litigation Case (product name)	MDL No.: Court Case No.:
Date of Injury	
Describe IN DETAIL Injuries Sustained / Nature of Disease DESCRIPTION MUST BE SPECIFIC	
Has the case settled? If so, what is the date of settlement?	Yes No
List all VA Facilities Where Related Treatment Was Received	

If Related Treatment was provided at a Non-VA Facility, List all non-VA Providers	
Have any of the providers above been paid by the VA? If so, what amounts have been paid to each provider?	Yes No
Is Treatment Complete? If so, what date was it completed? If Not, Describe the Nature and Location of Ongoing Treatment.	Yes No
Has the Veteran Opted-In to this Mass litigation class?	Yes No
Is there a Qualified Protection Order in this case? (If so, please attach)	Yes No
Has a lien administrator been appointed? If so, please name the lien administrator and attach all documents appointing the lien administrator.	Yes No
Name, address, telephone number, fax number and email address of Veteran's Attorney	
If ICD billing codes have been approved, please list the approved ICD codes	
Settlement Amount:	
Non-VA Medical Amount:	
Medicare Lien Amount:	
Other Government Lien Amount:	

RESPONSIBLE PARTY (DEFENDANT)

-USE MULTIPLE SHEETS FOR MORE THAN ONE PARTY

Name of Defense counsel	
Defense counsel's mailing address	
Defense counsel's phone number	
Defense counsel's fax number	
Defense counsel's email address	

Privacy Act:

The authority for collection of the requested information is found within the following: 38 USC 501, 38 CFR 1.900 et. Seq.; 42 USC 2651-2653; 38 USC 1729; 28 CFR 43.2; and E.O. 9397. The purpose of collecting this information is to provide basic information from which potential liability can be assessed for VA to recover the cost of care from the liable party instead of the American taxpayer and Veteran paying for the care. Failure to provide any or all of the requested information may delay or result in VA's inability to create accident-related billing, assert a claim for reimbursement, and assist the Veteran in their personal injury or workers compensation claim. Without a third party paying for the care, the Veteran may owe VA copayments. Information on this form will become part of a system of records which complies with the Privacy Act of 1974. This system is identified as "Revenue Program Billing and Collections Records-VA (114VA16)" as set forth in the Compilation of Privacy Act Issuances via online GPO access. Assurances of privacy for information on this form which is covered under 38 USC 7332 are contained within that statute.