

526 Claims for Increase

What is it?

1. **526 Claims for Increase** is a vets.gov tool that allows veterans who have been rated for disabilities via a 526EZ application to independently apply for an increase for those disabilities. The tool precedes full 526 online form availability. Veterans can select a rated disability for which they would like to apply, upload corresponding evidence, and submit their information to be evaluated by Compensation Services. This Product Guide will outline the steps involved in the process.

Target launch date for 526 Claims for Increase: late July-early August

Table of Contents

526 Claims for Increase	1
User Access	3
Who can access these tools?	3
How can users access these tools?	3
Navigation	4
Functionality	8
Error & Notification Log	21

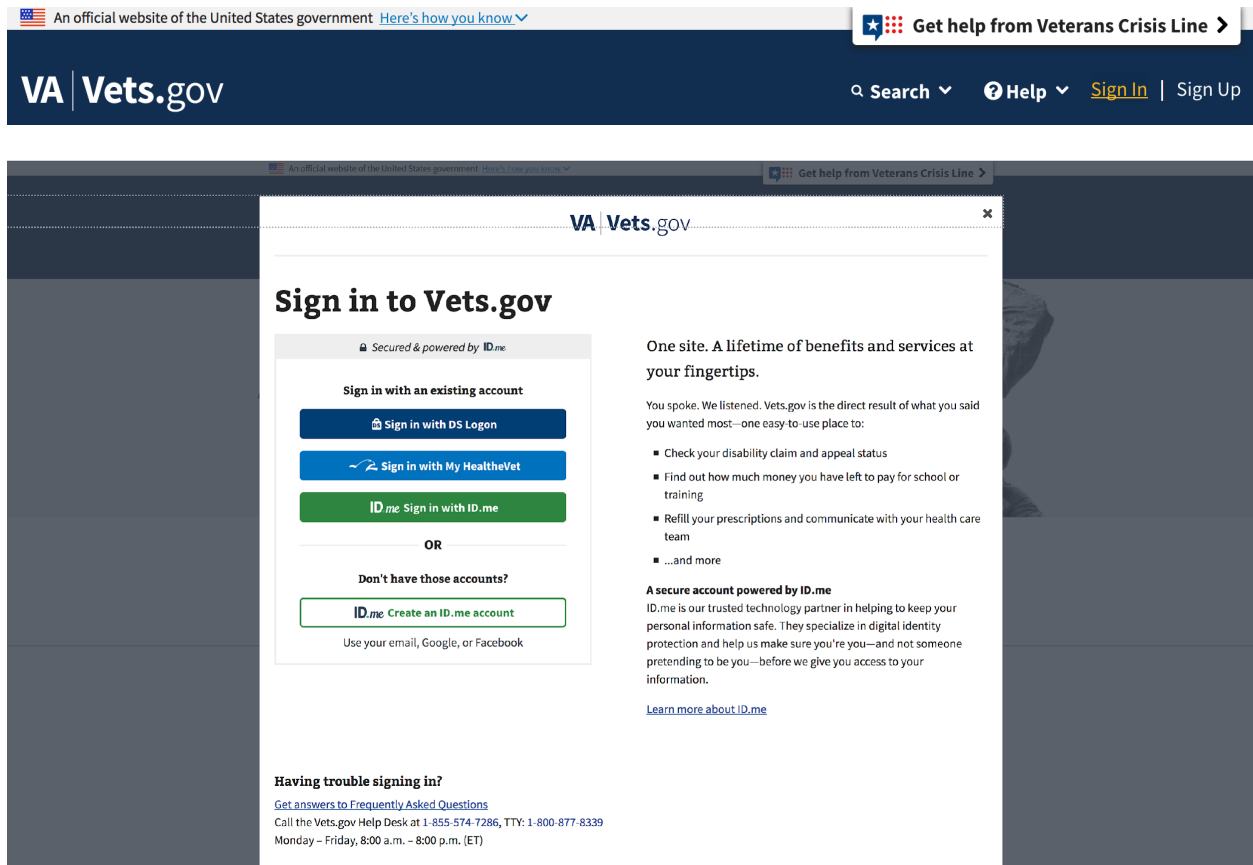
User Access

Who can access these tools?

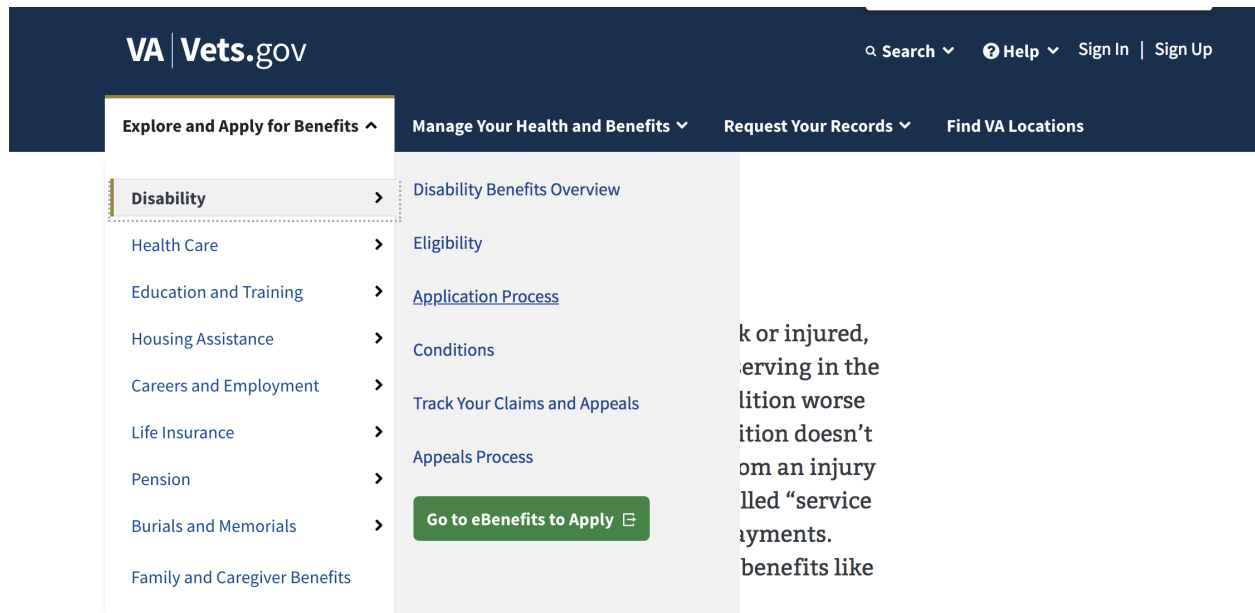
Veterans who have logged-in with the highest level of identity verification on Vets.gov (LOA3), are found in the Master Veteran Index (MVI), who have applied for disability claims and received rated disabilities.

How can users access these tools?

Users can log in using their DS Logon Premium, MHV Premium, or ID.me accounts, as long as they are registered as LOA3 users and found in MVI.



Navigation



k or injured,
erving in the
lition worse
ition doesn't
om an injury
lled "service
yments.
benefits like

<https://staging.vets.gov/disability-benefits/apply/>

Navigate to “Apply for Increased disability benefits” in the left menu.

VA | Vets.gov Search Help Mark

Explore and Apply for Benefits Manage Your Health and Benefits Request Your Records Find VA Locations

Home > Disability Benefits > Application Process

Disability Benefits

- Eligibility
- Application Process**
- Apply for increased disability benefits
- Claim Types and When to File
- How to Gather Evidence for Your Claim
- Get Help Filing Your Claim or Appeal
- After You Apply
- Conditions
- Track Your Claims and Appeals

Disability Benefits Application Process

You can apply for disability benefits online. We've listed all the steps below so when you're ready, you can apply for this tax-free monetary benefit. Find out how to apply.

Prepare

- [Check your eligibility.](#)
- Gather the supporting documents listed below that you'll need to file a disability claim.
- Be sure your claim is filled out completely and you have all the supporting documents ready to send in along with your claim. This will help us process your claim quickly. [Learn more about fully developed claims.](#)

The apply page presents the veteran with an application wizard to help direct users to the right platform for submitting their application based on their specific circumstance.

Application Wizard

Select “I have a new or worsening condition...”

Find out what kind of claim to file

Check all that apply to you:

- I have never filed a disability claim before.
- I have a new or worsening condition to add to my rated disabilities.
- I want to appeal the VA decision on my disability claim.

[Next](#)

Select “One or more of my rated disabilities have gotten worse...”

Making this selection allows submission of an online claims for increase application via vets.gov. All other selections currently direct users to eBenefits.

Find out what kind of claim to file

Check all that apply to you:

- I have new conditions to add to my rated disabilities.
- One or more of my rated disabilities have gotten worse.

Back

Next

<https://staging.vets.gov/disability-benefits/apply/form-526-disability-claim/introduction>

7

Note: all information shown in the screenshots in this document is fake test user data.

Veterans must log in.

[Home](#) > [Disability Benefits](#) > [Apply for Increase](#)

Apply for increased disability compensation

Equal to VA Form 21-526EZ (Application for Disability Compensation and Related Compensation Benefits).

i To apply for a disability increase, you'll need to sign in and verify your account.

[Sign In and Verify Your Identity](#)

Logged in state:

Apply for increased disability compensation

Equal to VA Form 21-526EZ (Application for Disability Compensation and Related Compensation Benefits).

i **Note:** Since you're signed in to your account and your account is verified, we can prefill part of your application based on your account details. You can also save your form in progress, and come back later to finish filling it out. You have 1 year from the date you start or update your application to submit the form.

[Start the Disability Compensation Application »](#)

Note: By clicking the button to start the disability application, you'll declare your intent to file and this will set the date you can start getting benefits. This intent to file will expire 1 year from the day you start your application.

Follow the steps below to apply for increased disability compensation.

1 Prepare

When you apply for a disability increase, be sure to have these on hand:

- Your Social Security number

Functionality

8

Note: all information shown in the screenshots in this document is fake test user data.

Part 1: Veteran Details

The veteran will review identity, contact, military, payment, and other details to check for accuracy and make corrections where relevant.

Veteran identity information is pre-populated. If any of the information is incorrect, they are directed to contact VBA Call Center.

Apply for increased disability compensation

Form 21-526EZ

1 of 5 Veteran Details

This is the personal information we have on file for you. If something doesn't look right and you need to update your details, please go to eBenefits.

[Go to eBenefits](#) 

MARK WEBB

Date of birth: 10/04/1950

Gender: Male

Note: If something doesn't look right and you need to update your details, please call Veterans Benefits Assistance at [1-800-827-1000](tel:1-800-827-1000), Monday – Friday, 8:00 a.m. to 9:00 p.m. (ET).

[« Back](#)

[Continue »](#)

[Finish this application later.](#)

Contact information is pre-populated and can be edited for the 526 application, specifically. Updates to the veteran's VA account can be completed on the Profile page.

1 of 5 **Veteran Details**

This is the contact information we have on file for you. We'll send any important information about your disability claim to the address listed here. Any updates you make here to your contact information will only apply to this application.

If you want to update your contact information for all your VA accounts, please go to your profile page.

[Go to my profile page.](#)

Phone & email	Edit
Primary phone: 444-222-8989	
Email address: email@address.com	
Mailing address	Edit
16494 WEST HIGH PARK	
SUITE 14 APT 20234	
CHARLOTTESVILLETOWN, VA 20171	

I want to provide a forwarding address since my address will be changing soon.

Military history is pre-populated and can be edited for the 526 application, specifically. Updates to the veteran's VA account can be completed by contacting VBA Call Center.

Apply for increased disability compensation

Form 21-526EZ

1 of 5 **Veteran Details**

Military service history

This is the military service history we have on file for you.

Coast Guard

07/13/1970 — 08/31/1998

[Edit](#)

[Add Another Service Period](#)

[« Back](#)

[Continue »](#)

Veteran payment information is pre-populated. If any of the information is incorrect, they are directed to contact VBA Call Center.

Apply for increased disability compensation

Form 21-526EZ

1 of 5 **Veteran Details**

This is the bank account information we have on file for you. We'll pay your disability benefit to this account. If you need to update your bank information, please call Veterans Benefits Assistance at [1-800-827-1000](tel:1-800-827-1000), Monday through Friday, 8:00 a.m. to 9:00 p.m. (ET).

Checking Account

Account number: ●●●●●●●●●●●●●●●●4567

Bank routing number: ●●●●●0017

Bank name: BANK OF AMERICA, N.A.

[« Back](#)

[Continue »](#)

[Finish this application later.](#)

Homelessness

Veterans indicate whether or not they are homeless. If “Yes”, veteran is prompted to provide additional contact info. If “No”, they proceed through the application.

1 of 5 **Veteran Details**

Homelessness

Are you homeless or at risk of becoming homeless? (*Required)

Yes

No

Please provide the name and number of a person we should call if we need to get in touch with you.

Name of person we should contact

Phone number

« Back

Continue »

✔ Application has been saved. Last saved at 7/4/2018 at 10:50 p.m.

Part 2: Your Rated Disabilities

Veterans are presented with all of their existing rated disabilities and will select the one(s) they want to submit for increase in benefits.

Apply for increased disability compensation

Form 21-526EZ

2 of 5 Your Rated Disabilities

Below are your rated disabilities. Please choose the disability that you're filing for an increase because the condition has gotten worse.



Sarcoma, Soft-Tissue - Synovioma, Malignant

Current rating: **100%**

Part 3: Supporting Evidence

Veterans will need to provide any evidence supporting the claim that their condition has worsened. They can upload this information or request that they be retrieved from a VA Medical Center.

Apply for increased disability compensation

Form 21-526EZ

3 of 5 Supporting Evidence

On the next few screens, we'll ask you where we can find medical records or supporting evidence that show your rated condition has gotten worse. You don't need to turn in any medical records that you already submitted with your original claim. **We only need new medical records or evidence that show your rated condition has gotten worse.**

« Back

Continue »

3 of 5 Supporting Evidence

Sarcoma, Soft-Tissue - Synovioma, Malignant

What supporting evidence will you be turning in that shows your Sarcoma, Soft-Tissue - Synovioma, Malignant **has gotten worse since you received a VA rating?**

- VA medical records
- Private medical records
- Lay statements or other evidence

Which evidence type should I choose? ▾

« Back

Continue »

VA Medical Records

The VA medical facility name has an auto-suggest feature that helps veterans select the intended facility. Facility name and approximate first date of treatment is required. More than one facility can be added.

3 of 5 **Supporting Evidence**

Sarcoma, Soft-Tissue - Synovioma, Malignant

Please tell us where VA treated you for Sarcoma, Soft-Tissue - Synovioma, Malignant **after you got your disability rating.**

Name of VA medical facility **(*Required)**

Date of first treatment (This date doesn't have to be exact.)

(*Required)

Month

Day

Year

Date of last treatment (This date doesn't have to be exact.)

Month

Day

Year

Private Medical Records

If the veteran has private medical records, they can upload them or have VA get them from the private doctor. If “No, my doctor has my medical records” is selected then the veteran is prompted to download and attach form 21-4142 (Private Medical Records Release) and told where to send that form.

Sarcoma, Soft-Tissue - Synovioma, Malignant

About private medical records

You said you were treated for Sarcoma, Soft-Tissue - Synovioma, Malignant by a private doctor. If you have your private medical records, you can upload them to your application. If you want us to get them for you, you'll need to authorize their release.

Do you want to upload your private medical records? (*Required)

- Yes
- No, my doctor has my medical records

Since your doctor has your private medical records, you'll need to fill out an Authorization to Disclose Information to the VA (VA Form 21-4142) so we can request your records. You'll need to fill out a form for each doctor.

[Download VA Form 21-4142](#) .

Please print the form, fill it out, and send it to:

Department of Veterans Affairs
Claims Intake Center
PO Box 4444
Janesville, WI 53547-4444

Or you can upload a completed VA Form 21-4142 to your online application.

Which should I choose? 

Lay Statements or Other Evidence

Supporting documents can be uploaded by the veteran and submitted along with the application. Upload guidelines are provided. If this option is selected, an upload is required.

3 of 5 Supporting Evidence

Lay statements or other evidence (*Required)

If you have other evidence, such as a lay or buddy statement to turn in, you can upload them here. You can upload your document in a pdf, .jpeg, or .png file format. You'll first need to scan a copy of your document onto your computer or mobile phone. You can then upload the document from there. Please note that if you have a slow Internet connection, large files can take longer to upload.

File upload guidelines:

- File types you can upload: .pdf, .jpeg, or .png
- Maximum file size: 50 MB

Large files can be more difficult to upload with a slow Internet connection

Upload

All uploaded files are listed for review.



3 of 5 Supporting Evidence

Summary of evidence

- We have received the additional evidence you uploaded:
 - test_upload.png

Part 4: Additional Information

Veterans will confirm whether they have provided all their supporting evidence and want to participate in the Fully Developed Claim (FDC) program. If they have additional information that needs to be submitted their application is reviewed through the standard claim process. More information about the FDC program is provided in a link on this screen.

4 of 5 **Additional Information**

Fully developed claim program

You can apply using the Fully Developed Claim (FDC) program if you've uploaded all the supporting documents or additional forms needed to support your claim.

[Learn more about the FDC program.](#)

Do you want to apply using the Fully Developed Claim program?

- Yes, I've uploaded all my supporting documents.
- No, I have some extra information that I will submit to VA later.

Since you've uploaded all your supporting documents, your claim will be submitted as a fully developed claim.

« Back

Continue »

- No, I have some extra information that I will submit to VA later.

Since you'll be sending in additional documents later, your application doesn't qualify for the Fully Developed Claim program. We'll review your claim through the standard claim process. Please turn in any information to support your claim as soon as you can.

Part 5: Review Application

Prior to submitting the application, veterans can review each section of the form for accuracy using the '+' toggle buttons to reveal detailed information. In order to submit the application, acceptance of the privacy is required by clicking the provided checkbox.

5 of 5 Review Application

Review Veteran Details	+
Rated Disabilities	+
Supporting Evidence	+
Additional Information	+

Note: According to federal law, there are criminal penalties, including a fine and/or imprisonment for up to 5 years, for withholding information or for providing incorrect information. (See 18 U.S.C. 1001)

I have read and accept the [privacy policy](#) *

« Back

Submit Application

✔ Application has been saved. Last saved at 7/4/2018 at 11:35 p.m.

Submitted applications will receive a confirmation message that contains a '**Claim ID**' number that can be used to track their application. A veteran should be able to review the status of their claim using the Claim Status tool within minutes of the submission.

After Submit: A claim is electronically established for the veteran in the VBMS database for VBA. In addition, a pdf version of the 526 claims for increase form is generated and forwarded to the National Work Queue to be assigned to a reviewer.

Error & Notification Log

ITF (description) - selecting the blue 'Start' button (below) will trigger the creation of an ITF (Intent to File) date for the veteran.

Equal to VA Form 21-526EZ (Application for Disability Compensation and Related Compensation Benefits).

i Note: Since you're signed in to your account and your account is verified, we can prefill part of your application based on your account details. You can also save your form in progress, and come back later to finish filling it out. You have 1 year from the date you start or update your application to submit the form.

[Start the Disability Compensation Application »](#)

Note: By clicking the button to start the disability application, you'll declare your intent to file, and this will set the date you can start getting benefits. This intent to file will expire 1 year from the day you start your application.

ITF (pending)



Please wait while we verify your Intent to File request.

ITF (created)

21

Note: all information shown in the screenshots in this document is fake test user data.



Thank you for submitting your Intent to File for disability compensation. Your Intent to File will expire on Apr. 10, 2019.

[What is an Intent to File request? ▾](#)

ITF (retrieved) - this message appears if a veteran already has an ITF date on record.



Our records show that you already have an Intent to File for disability compensation. Your Intent to File will expire on Apr. 10, 2019.

[What is an Intent to File request? ▾](#)

ITF (renewed)



Your existing Intent to File expired on Apr. 10, 2019, so we've created a new one for you. This new Intent to File request will expire on Apr. 10, 2019.

[What is an Intent to File request? ▾](#)

ITF (error: not retrieved for returning user)



We're sorry. Your Intent to File request didn't go through because something went wrong on our end. Please try applying again tomorrow.

[What is an Intent to File request? ▾](#)

ITF (error: not retrieved for new user)



We can't access your Intent to File request right now. Please try applying again tomorrow.

[What is an Intent to File request? ▾](#)

ITF (error: not created)



We're sorry. We can't process your Intent to File request at this time. Please try applying again tomorrow.

[What is an Intent to File request? ▾](#)

ITF (error: not renewed)



We're sorry. Your Intent to File request didn't go through because something went wrong on our end. Please try applying again tomorrow.

[What is an Intent to File request? ▾](#)

Save In Progress(SIP) - Unverified/Unauthenticated Intro

Equal to VA Form 21-526EZ (Application for Disability Compensation and Related Compensation Benefits).



To apply for a disability increase, you'll need to sign in and verify your account.

[Sign In and Verify Your Identity](#)

SIP (Verified Intro)

Equal to VA Form 21-526EZ (Application for Disability Compensation and Related Compensation Benefits).

i Note: Since you're signed in to your account and your account is verified, we can prefill part of your application based on your account details. You can also save your form in progress, and come back later to finish filling it out. You have 1 year from the date you start or update your application to submit the form.

[Start the Disability Compensation Application »](#)

Note: By clicking the button to start the disability application, you'll declare your intent to file, and this will set the date you can start getting benefits. This intent to file will expire 1 year from the day you start your application.

SIP (Continue Intro)

Apply for increased disability compensation

Equal to VA Form 21-526EZ (Application for Disability Compensation and Related Compensation Benefits).

Application status: **In progress**

Last saved on 4/23/2018 at 4:30 p.m.

Your saved application **will expire on 6/22/2018**.

[Continue Your Application](#)

[Start Over](#)

Note: By clicking the button to start the disability application, you'll declare your intent to file, and this will set the date you can start getting benefits. This intent to file will expire 1 year from the day you start your application.

i **Your increased disability compensation (21-526EZ) application has been saved.**

Last saved on 7/5/2018 at 6:27 p.m.

Your saved application **will expire on 9/3/2018**.

If you're logged in through a public computer, please sign out of your account before you log off to keep your information secure.

Checkbox validation error (must select at least one)

3 of 5 **Supporting Evidence**

Intervertebral Disc Syndrome

What supporting evidence do you have that shows how your Intervertebral Disc Syndrome **has worsened since VA rated your disability?**

Please select at least one type of supporting evidence

- VA medical records
- Private medical records
- Lay statements or other evidence

Which should I choose? 

« **Back**

Continue »

Static content below form elements

Need help?

For help filling out this form, please call:

1-877-222-VETS (1-877-222-8387)

Monday – Friday, 8:00 a.m. – 8:00 p.m. (ET)

To report a problem with this form,
please call the Vets.gov Technical Help Desk:

1-855-574-7286

TTY: **1-800-877-8339**

Monday – Friday, 8:00 a.m. – 8:00 p.m. (ET)

The following table contains the message types and notifications that would appear for standard errors and failures. Some messages may vary slightly as we develop updates versions of the tool.

Save in Progress

Scenario	Title	Description	Location
Save in progress data		Application has been saved. Last saved m/dd/yyyy at HH:MMam/pm	Below affected component
Unable to complete an automated task (e.g. save application in progress)	We couldn't save your form	We're sorry. Something went wrong when we tried to save your form. If you're on a secure and private computer, you can leave this page open and try saving your form again in a few minutes. If you're on a public computer, you can continue to fill out your form, but it won't automatically save as you fill it out.	Below affected component

Access messaging

Appears when the user tries to access an item that's not available to them. It may be because the record has been deleted, the user doesn't have access, etc.

System downtime

Variations in messaging will be contingent on:

- Whether or not the downtime is scheduled/expected
- If scheduled, when the application will be back up (precise time stamp if known, general estimate if not)
- If not expected, general estimate of when the application will be back up

Scenario	Title	Description	Location
Entire site is not accessible (scheduled downtime)	Vets.gov is down for maintenance right now	We're sorry. Vets.gov isn't ready for you right now. We're doing some work to help make this site even better for Veterans, Servicemembers, and family members like you. We hope to finish our work by [DATE/TIME]. Please check back then.	Replace page
Entire site is not accessible (expected)	Vets.gov isn't working right now	We're sorry. Something went wrong on our end. Please refresh this page or try again [LENGTH OF TIME (ie, "tomorrow" or "in an hour")].	Replace page

Entire site is accessible	We're working on the site	We're doing some work on Vets.gov right now. You should still be able to use the applications and tools. But if you have any trouble, please check back soon.	Banner
Application or page is not accessible	[APPLICATION NAME] is down for maintenance	We're making some updates to [APPLICATION NAME]. We're sorry it's not working right now, and we hope to be finished by [DATE], [TIME]. Please check back soon.	Replace page below title
Application or page is not accessible, no timeframe	[APPLICATION NAME] is down for maintenance	We're making some updates to [APPLICATION NAME]. We're sorry it's not working right now. Please check back soon.	Replace page below title
Application or page is accessible (general message; specific iterations to be added later)	Some parts of this may not be working	You can still use [APPLICATION/PAGE NAME], but some parts of it may not work for you. If you're having trouble, please try again later.	Below page title

Component is not accessible (general message; specific iterations to be added later)	[COMPONENT NAME] isn't working right now	We're sorry. Something went wrong on our end. Please refresh this page or try again [LENGTH OF TIME (ie, "tomorrow" or "in an hour")].	Replace affected component
Component is accessible (general message; see application/component specific messages)	Some information may not be up to date	We're sorry. Something's not working quite right. You can still use [COMPONENT NAME], but you may not be able to see all your updated information. If you're having trouble, please try again [LENGTH OF TIME (ie, "tomorrow" or "in an hour")].	Above affected component
Unable to complete a user-initiated task, can't proceed	We've run into a problem	We're sorry. Something went wrong on our end. Please try again.	Above page title
Unable to complete a user-initiated task, can still proceed	We've run into a problem	We're sorry. Something went wrong on our end. You can try again now, or move on to the next step and come back later to complete this.	Above page title

Network connection loss

Scenario	Title	Description	Location
Application/page /component is not accessible due to user connection loss	We can't load [APPLICATION/PAGE/COMPONENT NAME]	Please make sure you're connected to the Internet, and refresh this page to try again.	Below page title
Unable to complete an automated task (e.g. save application in progress) due to user connection loss	We can't save your form right now	Please make sure you're connected to the Internet, and then try saving your form again.	Below affected component
Unable to complete a user-initiated task due to user connection loss	We've run into a problem	Please check to make sure you're connected to the Internet, and try again.	Above page title

Authorization

Scenario	Title	Description	Location
(Application) user's records are not found	We don't seem to have your records	We're sorry. We can't find your records in our system. If you think they should be here, please try again later or call the Vets.gov Help Desk at 1-855-574-7286 (TTY: 1-800-829-4833). We're here Monday–Friday, 8:00 a.m.–8:00 p.m. (ET).	Replace content below page title
(Page) user's records are not found	We don't seem to have your records	We're sorry. We can't find your records in our system. If you think they should be here, please try again later or call the Vets.gov Help Desk at 1-855-574-7286 (TTY: 1-800-829-4833). We're here Monday–Friday, 8:00 a.m.–8:00 p.m. (ET).	Replace content below page title

(Component) user's records are not found	We don't seem to have your records	We're sorry. We can't find your records in our system. If you think they should be here, please try again later or call the Vets.gov Help Desk at 1-855-574-7286 (TTY: 1-800-829-4833). We're here Monday–Friday, 8:00 a.m.–8:00 p.m. (ET).	Replace affected component
(Application) user is not eligible for a benefit because they aren't a Veteran/dependent/spouse	You're not eligible for this benefit	It looks like you're not eligible for this benefit based on the information you've given us. Please check your eligibility again.	-

Empty state

Scenario	Title	Description	Location
(Application) No data tied to the user or scenario	No [DATA TYPE (ie, prescription refills or health records)] to show	We don't have any [DATA TYPE] in our system to show here.	Replace content below page title
(Page) no data tied to the user or scenario	No [DATA TYPE] to show	We don't have any [DATA TYPE] in our system to show here.	Replace content below page title

(Component) no data tied to the user or scenario	No [DATA TYPE] to show	We don't have any [DATA TYPE] for you in our system.	Replace affected component
--	------------------------	--	----------------------------

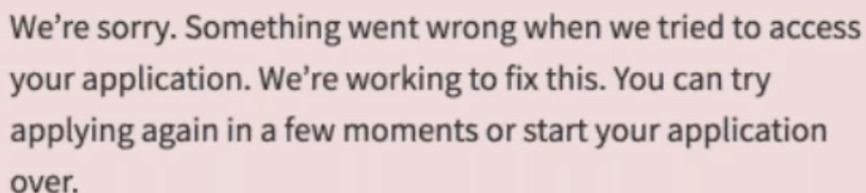
Feedback messaging

The application's response when the user is interacting with it. The majority of create, read, update, delete (CRUD) actions will result in feedback messaging.

Note: See [content style guide](#) for guidance on when to consider adding instruction to call the Vets.gov Help Desk or other "next-step" call to action.

Form Restart

When a user wishes to restart the 526 form (i.e., hit 'start over' on the intro page), they see an error that 'something went wrong' after the form loads. If they go back to the intro page, they see the 'start disability compensation application' button, and clicking on it results in the form working as usual. So, the form must be restarted twice.



We're sorry. Something went wrong when we tried to access your application. We're working to fix this. You can try applying again in a few moments or start your application over.

Mitigation steps:

Go back to root url ([vets.gov/https://www.vets.gov/disability-benefits/apply/form-526-disability-claim/](https://www.vets.gov/disability-benefits/apply/form-526-disability-claim/)) and try again, at least twice

❗ We're sorry, the application didn't go through.

We're working to fix the problem, but it may take us a little while. Please [save your application](#). and try submitting it again tomorrow.

If it still doesn't work, please call the Vets.gov Help Desk at [1-855-574-7286](tel:1-855-574-7286), TTY: [1-800-877-8339](tel:1-800-877-8339). We're here Monday – Friday, 8:00 a.m. – 8:00 p.m. (ET).

Recommended Actions if a veteran calls saying they have received an error:

- 1) Verify the source: vets.gov, eBenefits, SEP (only if working with VSO)
- 2) If vets.gov, make sure that the veteran can see their identity (SSN, DOB, Gender, etc), address, contact info, payment info, service history when they log into the application. If payment info is not on file or other records are missing, this could produce an error.
- 3) If you have access to VBMS, check recently submitted claims. If there is nothing there for the veteran, double-check to see if the veteran has any confirmation number for their submission. If not, batch those reports for vets.gov. We'll be logging failed applications and retrying them. Anything that we're unable to push through will be manually sent over for forced entry. The cadence of this will have to be determined by volume.

Error for Unverified (missing SSN, EDIPI, and/or Corporate DB ID)

❗ We're sorry. It looks like we're missing some information needed for your application

For help with your application, please call Veterans Benefits Assistance at 1-800-827-1000, Monday – Friday, 8:00 a.m. to 9:00 p.m. (ET).

Will look like this on Dashboard:

We're having trouble matching your information to our Veteran records ✕

We're sorry. We're having trouble matching your information to our Veteran records, so we can't give you access to tools for managing your health and benefits.

If you'd like to use these tools on Vets.gov, please contact your nearest VA medical center. Let them know you need to verify the information in your records, and update it as needed. The operator, or a patient advocate, can connect with you with the right person who can help.

[Find your nearest VA Medical Center](#)