



## Section 1. General Questions

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### 1.1 I submitted my claim. What happens next? *(Updated: October 17, 2018)*

Once you submit your claim, the first step the VCF takes is to do a preliminary review to confirm that all of the “minimally required” documents have been submitted. In addition to a complete Claim Form, we require the following documents before your claim can move forward for a more substantive review:

- Claim Form Signature Page (or the equivalent sections from Part IV of the original VCF 2 claim form)
- Original and signed Exhibit A – “Authorization for Release of Medical Information”
- Confirmation from the World Trade Center (“WTC Health Program”) Health Program that you have at least one physical condition certified for treatment (the VCF will contact the WTC Health Program directly to confirm you have an eligible certified condition; however, you may also upload your certification letter to your claim if you have it easily available)
- Proof of Presence documents as specified in Section 1.6 of the VCF [Policies and Procedures](#) document
- Exhibit 1 – “Social Security Administration Consent Form” (required only if you are claiming economic loss)
- Exhibit C – if represented by an attorney and the law firm does not already have an Exhibit C on file with the VCF
- Original Client Authorization to deposit the payment on your claim to your attorney’s bank account (if applicable)
- ACH payment form if payment on your claim will be deposited to your bank account
- In addition to the items above, the documents below are also required for deceased claims:
  - o Appendix A (or Exhibit F to the old claim form)
  - o Letters of Administration and original or certified death certificate

If any of the above documents are missing or insufficient, the VCF will send you a Missing Information letter and place the claim in “Inactive” status. Once the required documents are received and verified as sufficient, the claim will be reactivated for review.

If the requested documents are not submitted within 60 days of the date of the Missing Information letter, your claim may be denied. If your claim is denied, you can amend your claim once you have the necessary documents and the VCF will reactivate your claim for review. Follow these [instructions](#) on how to file an amendment.

See [here](#) for an overview of the claim review process.

### 1.2 I submitted my claim. When will a decision be made on my claim? *(Updated: October 17, 2018)*

As a general rule, claims are reviewed in “first in, first out” order based on the date the **compensation claim** was submitted. For claims submitted after August 1, 2016, this is the date the Claim Form was submitted. This means the VCF prioritizes claims that have been waiting longer before beginning review of newer submissions.

Our focus continues to be on the oldest compensation claims. As of October 1, 2018, there remain just over under 400 claims that were filed before January 1, 2017, and many of those are claims that have



only recently re-activated as claimants have responded to requests for missing information needed to move the claim forward. The VCF has met the goal of deciding claims within 18 months of the day they were filed (assuming we have all information needed to decide a claim) and we continue to shorten that timeframe. Claims filed in the first half of 2017 are now receiving award determinations, while claims filed in the second half of 2017 will come under review soon. We continue to make progress toward our goal of deciding claims within one year of when they are submitted.

Please remember that each VCF claim is individually reviewed and calculated, with some of the more complex claims taking significantly longer to complete. This is particularly true of claims filed for victims who died of a 9/11-related condition. These claims require the submission and review of a substantial amount of information and documentation in order for the award to be calculated. In addition to information from third parties that includes details of pensions, life insurance, and Social Security Survivors Benefits (as examples), the VCF must also review information on dependents, employer benefits, and confirm the legal authority of the Personal Representative who filed the claim.

Once the VCF begins reviewing your claim, we will contact you if we need any additional information. The best way to help speed the review of your claim is to respond promptly to any request.

### **1.3 How do I add or change the attorney on my claim? (Updated: November 14, 2017)**

To add, change, or remove the attorney on your claim, follow the instructions on the [Change of Attorney Form](#) and upload the completed and signed form to your claim. Please note that if you are adding or changing an attorney, you and your attorney will also need to submit certain documents with the form. Once the VCF receives the completed form and any required documents, we will make the appropriate updates to your claim, including who receives correspondence and who is able to access the claim online.

If you are adding an attorney to your claim for the first time, complete the information under “Option 1” on the [Change of Attorney Form](#) and upload the form to your claim. The VCF will review the form and make the necessary updates in the system.

Please note that if you are changing or removing the attorney on your claim and you previously submitted documents directing the VCF to pay your claim through your former attorney, that instruction may not be changed after your claim has moved to “Special Master Review” status in the online system. You may still remove or change the attorney associated with your claim for any future appeal or amendment. If your award is changed by that amendment or appeal and you submit new payment instructions, then the new payment instructions will apply to the payment resulting from the amendment or appeal and all subsequent payments. Claimants should be aware that, regardless of how they receive payment from the VCF, they are liable for any agreement related to attorney fees as specified in the attorney-claimant contract.

### **1.4 What is the WTC Health Program Disability Evaluation Process and how do I sign up for an evaluation? (Updated: October 17, 2018)**

The VCF has worked with the WTC Health Program to implement a disability evaluation process, which is designed to help provide qualifying claimants with a disability determination for an eligible condition in order to support an economic loss award in a VCF claim.

This program is not for everyone. It is intended to be available on a very limited basis for victims who do not already have a disability determination for an eligible condition from one of the standard third-party entities or sources (e.g., Social Security Administration, FDNY, NYPD, a state Workers’ Compensation program, or insurance company), and who have no other avenue to seek an occupational disability determination. Victims who have a disability decision based on an ineligible condition may be candidates for the program if their eligible condition has become disabling.



Click [here](#) for complete details on the WTC Health Program Disability Evaluation Process, including the criteria you must meet to be eligible for the process, and how you can request to be considered for an evaluation.

**1.5 If I already submitted my claim, how do I add a new condition for consideration? (Updated: October 17, 2018)**

You should amend your claim by following the guidance below based on your specific situation.

- **If the condition you want to add has been certified for treatment by the WTC Health Program:** Submit your amendment by following these [instructions](#).
- **If the condition you want to add is not being treated by the WTC Health Program:** If you are not being treated by the WTC Health Program for your new condition(s), you must seek certification for your condition(s) through the WTC Health Program in order for the VCF to evaluate the condition(s) as eligible for compensation. **Please do not amend your claim until the new condition has been certified for treatment by the WTC Health Program.** The VCF cannot review your newly claimed condition until you submit your WTC Health Program certification letter showing the condition has been certified for treatment. In certain very limited circumstances, you may be able to seek verification of the condition through the VCF Private Physician process. Information about the criteria to be a candidate for the Private Physician process can be found on the VCF website under “Forms and Resources.” Once the condition has been certified for treatment, submit your amendment by following these [instructions](#).

You can seek certification for treatment from the WTC Health Program for purposes of your VCF claim *and* still be treated for your certified condition by a physician outside of the WTC Health Program. You can find an application for the WTC Health Program online at [www.cdc.gov/wtc](http://www.cdc.gov/wtc) or by calling 1-888-982-4748. The WTC Health Program includes a Nationwide Provider Network (“NPN”) to serve members who live outside the New York City metropolitan area. The NPN is available to WTC, Pentagon, and Shanksville responders and WTC survivors. For information about the NPN call 1-888-982-4748.

Once you submit your eligibility amendment, the VCF will contact the WTC Health Program to confirm the condition is eligible and will send you a revised Eligibility Decision letter with the outcome of our review. If you have already submitted your Compensation Form but have not yet received your initial award decision, the VCF may calculate the amount of your loss and issue your payment based on your original submission while still reviewing your request to add a new condition.

**Please note:** The amount of your VCF award is not based on the number of certified conditions you have, but rather on the severity and impact of those conditions on your daily life. In many cases, being found eligible for additional conditions will not change the amount of your VCF award unless the new condition is a cancer and the compensation already awarded was based only on non-cancer conditions. Please see FAQ 4.2 for additional information about amending your claim to add a new condition.

**1.6 Do I need a lawyer to file a claim? (Added: November 10, 2016)**

No, you do not need an attorney to file a claim with the VCF.

**1.7 If I participate in a lawsuit under the Justice Against Sponsors of Terrorism Act (JASTA), can I still file a VCF claim? (Updated: November 14, 2017)**

Yes, if you participate in a lawsuit under JASTA, you can still file a VCF claim. See Zadroga Act, Pub. Law No. 107-42, as amended by Pub. Law No. 107-71, Section 405(c)(3)(C)(i). Any compensation



awarded by the court in the lawsuit or obtained in a settlement of litigation will be treated as an offset and deducted from your VCF award.

Please remember that you must inform the VCF of any new collateral source payments you receive, or become entitled to receive, after your claim has been filed – including after any award has been determined or paid – until the VCF closes on December 18, 2020. You should report any new collateral source payments using this [form](#).

**1.8 Is the WTC Health Program part of the VCF?** *(Added: March 22, 2017)*

No, the WTC Health Program and the VCF are different programs. The WTC Health Program provides medical monitoring and treatment for physical injuries and conditions resulting from 9/11 exposure. The VCF provides compensation for losses resulting from physical injuries and conditions related to 9/11 exposure. You must register for each of these programs separately. Enrollment in the Health program does not automatically register you with the VCF and if you are being treated by, or monitored through, the WTC Health Program, you are not automatically eligible for compensation from the VCF. For more information on the WTC Health Program, please visit their [website](#).

**1.9 If I have filed a claim with the VCF, can I also file a claim with the U.S. Victims of State Sponsored Terrorism Fund (“USVSST”)?** *(Updated: September 17, 2018)*

There are very specific guidelines for individuals with claims with both the USVSST Fund and the VCF. The USVSST has stated that they will not adjudicate a claim if they know a VCF claim is pending. **Therefore, individuals who have claims with both funds need to take action to decide how to proceed.** It is very important that you make sure to notify the USVSST if you have a VCF claim and vice versa. Both funds require you to provide that notification and doing so makes it much easier for both funds to properly handle the claims.

The USVSST Act includes a specific provision that explicitly addresses the situation where a USVSST claimant, or the claimant’s immediate family members, have an eligible final judgment and also have received an award or award determination from the VCF. That provision dictates that **even if you are eligible to receive compensation under USVSST criteria because of a qualifying final judgment, the “receipt” of a VCF1 or VCF2 award or award determination will preclude you or your immediate family members from recovering any additional compensation from the USVSST Fund.** The USVSST Fund has determined that “receipt” of a VCF award means that the VCF has issued an award letter that has become final and payable.

**If you have claims with both funds, you should be aware that unlike the USVSST fund, which will not review a claim if a VCF claim is pending, the VCF will continue to process claims from individuals who also have a claim pending with the USVSST fund.** This means that if the VCF issues an award determination and processes payment on the claim, you will no longer be able to receive any compensation from the USVSST fund.

For these reasons, claimants should consider the following options:

- **Request that the VCF claim be made “inactive” while deciding which claim to pursue:** If you have claims in both funds and you need time to decide which claim to pursue, and you do not want the VCF to continue processing your claim, you can request your VCF claim be placed in “Inactive” status while deciding how to proceed. Because, as noted above, the USVSST fund will not adjudicate a claim if a VCF claim is pending, neither the VCF nor the USVSST fund will take action on either claim until you make a decision about which claim to pursue. To request that your VCF claim be made inactive, please upload a letter to the claim stating your request and explain that you are considering whether to pursue a USVSST claim or your VCF claim.





- **Pursue USVSST claim and not VCF claim:** To request to withdraw your VCF claim to pursue a claim with the USVSST, you must submit a letter to the VCF specifically requesting to withdraw your claim with prejudice. The VCF will then mark your claim as “withdrawn” in our system. **By withdrawing your VCF claim “with prejudice,” your claim is permanently closed and cannot be re-opened for review for any reason at any point in the future.** Please be aware that without written notification requesting that your claim be withdrawn, the VCF will continue to process your claim even if you have a claim pending with the USVSST fund. Once the VCF award decision is rendered and the award letter is sent, if you decide to pursue the USVSST claim instead, you must withdraw your VCF claim with prejudice and in writing during the 30-day appeal period outlined in the award letter. Assuming all other statutory requirements are met, you will then be eligible for compensation from the USVSST Fund. If you appeal your VCF award, you must withdraw the VCF claim with prejudice before the final award letter is issued post-hearing. Once the claim moves to the VCF payment process (either on day 31 if not appealed, or immediately upon the issuance of the post-appeal award letter), the USVSST Act dictates that you will not be entitled to compensation from the USVSST Fund.

If you have filed a claim with the USVSST, we strongly recommend you visit their website ([www.usvsst.com](http://www.usvsst.com)) for more details regarding the impact of filing a VCF claim.

Please remember that you must inform the VCF of any new collateral source payments you receive, or become entitled to receive, after your claim has been filed – including after any award has been determined or paid – until the VCF closes on December 18, 2020. You should report any new collateral source payments using this [form](#).

#### **1.10 Does the VCF receive copies of my medical records from the WTC Health Program? Do I need to submit them with my claim? (Added: September 17, 2018)**

The VCF does not receive copies of your medical records as part of our information-sharing agreement with the WTC Health Program. The WTC Health Program only provides the VCF with information that is used to determine whether you have an eligible, certified condition. The information we receive from the WTC Health Program includes the name of the condition, the WTC Health Program category under which the condition falls (for example, Cancer or Upper Respiratory Disorder), and the associated medical diagnosis code. If the WTC Health Program notifies us that you have been certified for an eligible physical condition, we accept that certification as proof of your eligible condition.

If the WTC Health Program has certified your condition, you do not need to submit medical records to support a claim for non-economic loss at the lowest end of the range for your eligible condition. Similarly, if you have an eligible condition the VCF has identified as presumptively severe and debilitating, you do not need to submit medical records to qualify for the highest non-economic loss award allowed by the statutory caps. See Section 2.1.a – “Valuation of non-economic loss” – in the VCF [Policies and Procedures](#) document for a listing of conditions considered to be presumptively severe.

If, however, your certified condition is not among the list of conditions that the VCF considers to be presumptively severe and it significantly impairs activities of daily living, or if the certification does not reflect the severity of the condition, you may want to submit supporting medical documentation related to your condition to help the VCF evaluate the severity and effect of the condition in order to determine whether an increased non-economic loss award within the appropriate range is warranted. This may include medical documents showing hospitalization, surgery, emergency treatment, and/or treatment for side effects of the condition; test results and treatment prescribed that show the severity of your condition; or medical records documenting severity and/or effect of the condition on your daily life. For a listing of the types of documents that can assist the VCF in the evaluation of your claim, see Section 2.1.b – “Documentation of non-economic loss” – in the VCF [Policies and Procedures](#) document. Please



only submit documents that are related to your 9/11-related eligible physical conditions. **It is very helpful and will speed the review of your claim if you highlight the relevant information in the records so the VCF can easily find the pertinent information.**

**If you submit medical records in support of your claim, you do not have to submit all of your medical records.** A document from your physician summarizing the medical history of your condition and treatment will often be sufficient to prove the extent of your non-economic loss.

**1.11 I scheduled my appointment with the WTC Health Program but they told me it may take several months to be seen and to then receive a certification letter. Should I submit my claim even though I have not yet been certified?** *(Updated: November 14, 2017)*

As long as you have timely registered your claim, it is best to wait to submit your claim until you have been certified by the WTC Health Program. If you submit your claim without first being certified, the VCF will place your claim in Inactive status and it will remain in that status and will not be reviewed until you submit your certification letter. If you have questions about your registration date, please contact the Helpline 1-855-885-1555.

**1.12 Are there any circumstances under which the review of my claim can be accelerated?** *(Added: October 17, 2018)*

Yes. In cases involving terminal illness or significant financial hardship, you can request that the VCF expedite the processing of your claim. The VCF considers “significant financial hardship” to include an imminent or pending foreclosure or eviction proceeding, utility cut off, or other similar circumstances, as demonstrated by appropriate documentation. If you want to seek expedited processing of your claim based on a terminal diagnosis or financial hardship, you must contact the VCF Helpline at 1-855-885-1555 and upload any appropriate documentation to your claim. If you are represented by an attorney for your VCF claim, you should seek your attorney’s assistance. The VCF will review the request and notify you as to whether the request is granted or denied, typically within 48 hours. In claims that are approved for expedited processing, assuming all required documents have been submitted, the VCF can often process the claim, issue the award, and process the payment in as little as 3-4 weeks. In these instances, payment on the claim is issued as soon as the award letter is sent, but you retain your right to appeal within the 30-day appeal period.

## Section 2. Registration and Other Deadlines

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**2.1 How do I register my claim with the VCF and what is my deadline?** *(Updated: October 17, 2018)*

You must register with the VCF by the deadline that applies to your individual circumstances in order for your claim to be considered timely.

The table on page 2 of [Registration and Claim Filing Deadlines](#) outlines the registration deadlines. You must register by the applicable deadline in order for your claim to be considered timely. Once you register, you have preserved your right to file a claim with the VCF in the future, but no later than December 18, 2020. Below is a more detailed explanation of the timeliness deadlines for both Personal Injury claims and Deceased claims. **Please note that Personal Injury claims and Deceased claims have different registration deadlines.** We have also included several scenarios to help guide you in determining your specific registration deadline.



- For Personal Injury Claims:

The two-year registration deadline for personal injury claims is triggered when a federal, state, or local government entity determines that a physical injury or condition was 9/11-related. Note that “a government entity” may include the World Trade Center (“WTC”) Health Program; a state workers’ compensation board; or a government employer such as the FDNY, NYPD, or NYCERS for purposes of awarding a disability pension.

This means that for individuals being treated at the WTC Health Program who are filing personal injury claims, the starting date of the two year registration period (i.e., the “Registration Start Date”) is based on the earlier of two dates: (1) the date of the letter from the WTC Health Program indicating that the individual’s 9/11-related physical injury or condition has been certified for treatment, or (2) the date on which another government entity (e.g., the FDNY, NYPD, NYCERS, or state workers’ compensation board) determined that the physical injury or condition was 9/11-related. For individuals not being treated through the WTC Health Program, the Registration Start Date is the earlier of: (1) the date on which a government entity determined that the physical injury or condition was 9/11-related, or (2) the date on which the individual’s physical injury or condition is verified through the VCF’s Private Physician process.

For deceased victims who died of causes unrelated to a 9/11-related eligible condition, the claim is considered a personal injury claim and a properly appointed Personal Representative may either: (1) continue with an existing personal injury claim if the registration for that claim was already timely filed, or (2) may register and file a new personal injury claim *seeking compensation for losses suffered prior to the victim’s death*, as long as the registration is submitted within two years of the victim’s Registration Start Date. This means that:

(a) For deceased victims who were treated through the WTC Health Program or who had a government determination that their condition was 9/11-related, the registration for the personal injury claim must be submitted within two years of their WTC Health Program certification of the condition or government determination that the condition was 9/11-related, whichever was earlier.

(b) For those deceased victims who were not treated in the WTC Health Program and do not have any other government determination that their condition was 9/11-related, the personal injury claim is considered to be timely filed if the claimed physical injury or condition is verified by the VCF through the Private Physician process.

- For Deceased Claims:

Deceased claims are claims seeking compensation for losses incurred for a death that was the result of a 9/11-related physical injury or condition. For these claims, the registration deadline is two years from the date of death. This deadline does not change based on whether (or when) any government entity or individual determined that the cause of death was 9/11-related.

A deceased claim may be filed even in cases where the personal injury claim is untimely, so long as the deceased claim is registered within two years of the date of death. A Personal Representative may not, however, initiate a personal injury claim that would have been untimely if filed by the victim.

Note: The VCF considers a claim a deceased claim *only if* the victim’s cause of death was a 9/11-related physical injury or condition. If a victim has died due to an injury or condition that is not related to 9/11, the claim is considered a personal injury claim for purposes of the VCF program. Below are several sample scenarios based on questions that we frequently receive. We have included these to help guide you in determining whether to submit your registration and when to submit it to be sure you meet the applicable deadline.



**Sample Scenarios:**

**Scenario 1:**

**The claimant is being treated by the WTC Health Program. He has uploaded to his claim his original certification letter, dated November 2013, which indicates that his WTC-related aerodigestive conditions were certified for treatment in July 2011. The claimant registered with the VCF in October 2015. Is this registration timely?**

Yes. The VCF's general policy is to look at the date of the certification letter (November 2013), and not the date the certification was effective (July 2011). The letter date provides a clear date as to when the claimant knew that certain conditions had been certified as 9/11-related. Because the letter was dated November 2013, this claimant had two years from that date (until November 2015) to register with the VCF, so the October 2015 registration is considered timely.

**Scenario 2:**

**The claimant is being treated by the WTC Health Program. She has uploaded to her claim the original certification letter, dated November 2013, which indicates that her WTC-related aerodigestive conditions were certified for treatment in July 2011. In July 2016, the claimant was newly certified with cancer in a certification letter dated July 2016, which was also uploaded to the claim. The claimant registered with the VCF in October 2016. Is this registration timely?**

Yes. While the claimant's registration would have been untimely for her original aerodigestive conditions because she first registered in 2016, which is more than two years after the date of her original certification letter, the new certification for cancer triggers the start of a new two-year registration period. In addition, per VCF policy, if registration is timely for any one condition or injury, all eligible conditions – regardless of when they were determined to be 9/11-related – may be considered for an award, subject to the other requirements of the VCF claims process.

**Scenario 3:**

**The claimant has been treated by the WTC Health Program for aerodigestive conditions for many years. He did not recall receiving a certification letter from the WTC Health Program and asked the WTC Health Program to send him a copy of his certification letter. The copy of the certification letter from the WTC Health Program is dated July 2016. The claimant registered with the VCF in July 2016. Is this registration timely?**

No. Based on the information presented, the registration for this claim is not timely. As described above, the VCF's general policy is to look at the date of the certification letter, and not the date the certification was effective or the date the claimant received the letter. In this situation, however, the date of the letter is not the date on which timely registration can be based because the claimant was being treated at the WTC Health Program for many years and therefore would have had clear knowledge that the conditions being treated were related to his 9/11 exposure. The date on the copy of the letter is not the original date the WTC Health Program certified the conditions for treatment or the original date on which the WTC Health Program so notified the claimant, but is simply the date the requested copy was mailed to the claimant. This claim would be denied as the claimant did not meet the applicable registration deadline. If the claimant believes there are some circumstances that might merit a reconsideration by the Special Master, he could appeal the decision and explain the circumstances at a hearing. The claimant could also amend his claim in the future if he has additional 9/11-related conditions or injuries that are newly certified by the WTC Health Program or newly determined by a government entity to be 9/11-related.





Scenario 4:

**The deceased victim was a law firm employee working in the VCF's NYC Exposure Zone. The victim was diagnosed with a covered cancer in 2009 and died in 2011 of the cancer, as confirmed by the autopsy results. The victim did not enroll in the WTC Health Program while she was alive and did not register a personal injury claim with the VCF. The executor of the estate, as well as the family, had no indication the victim's cause of death was related to 9/11 and did not know about the VCF or the WTC Health Program. Recently, the executor learned of the VCF and the WTC Health Program for the first time and about the possibility of filing a deceased claim. If the executor files a deceased claim and the victim's cancer is verified through the VCF's Private Physician process, is the deceased claim timely registered?**

No, the registration for the deceased claim is untimely. The registration deadline would have been October 14, 2014, as explained in the [Registration and Claim Filing Deadlines](#) chart for deceased claims. The Personal Representative retains the right to appeal the determination and, in limited cases, if the circumstances presented are compelling, the Special Master may consider a waiver of the deadline. The Personal Representative in this case, however, may still file a timely personal injury claim for losses incurred by the victim up to the date of death if her cancer is verified as WTC-related through the Private Physician process.

Scenario 5:

**The deceased victim died in 2015 of a condition that was not related in any way to 9/11 exposure. The victim suffered, however, from a covered cancer that was diagnosed in 2009, but he never registered with the VCF or the WTC Health Program. In October 2010, the New York City Employees Retirement System (NYCERS) determined that his cancer was 9/11-related. How should the Personal Representative proceed? Should she file a deceased claim or a personal injury claim?**

Because the victim did not die as a result of a 9/11-related condition, the Personal Representative cannot file a deceased claim. As noted above, a Personal Representative can only file a deceased claim if the cause of death was a 9/11-related condition.

The Personal Representative also cannot file a personal injury claim on behalf of the deceased victim. In order for a personal injury claim to have been timely registered, it must have been registered within two years from the date that a government entity determined that the condition was 9/11 related. In this case, the victim did not register his claim by October 2014, which is the applicable deadline. A personal representative cannot properly register a Personal Injury claim that would have been untimely if filed by the victim.

Scenario 6:

**The deceased victim died in 2014 of a 9/11-related cancer. Prior to death, the victim had registered a personal injury claim in 2012 for Asthma. The victim's Personal Representative did not register the deceased claim within the two-year deadline. Does this mean the deceased claim would be considered untimely?**

No. Because the victim registered with the VCF in 2012, the right to file a claim in the future was preserved at that time for any claim filed for that individual. Each individual only needs to register one time with the VCF to preserve the right to file a claim in the future. In this situation, even if payment was made on the personal injury award, the wrongful death claim can still be filed and the registration would be considered timely based on the victim's original personal injury registration date.



**2.2 If my Registration was incomplete and I need to start over, will this impact whether or not my claim is considered to have been timely registered by my applicable deadline? (Added: September 9, 2016)**

If your Registration status was “Incomplete” prior to August 1, 2016 when the new claim form became available, you will need to create a new registration in the online system and you will receive a new VCF number. However, the information you previously entered in your original registration will still be stored in the system and the VCF will be able to see the data. When you submit your new registration and claim form, we will use the data from your original incomplete registration when determining the timeliness of your claim.

**2.3 If I was diagnosed with a newly-added WTC Health Program condition, such as new-onset COPD or Acute Traumatic Injury, what is my registration deadline? (Added: November 10, 2016)**

Your registration deadline depends on your specific situation and when the WTC Health Program or another government entity notified you that your new-onset COPD or acute traumatic injury is 9/11-related. The table on page 2 of [Registration and Claim Filing Deadlines](#) outlines the registration deadlines that apply based on your individual circumstances. You must register by the applicable deadline in order for your claim to be considered timely. Once you register, you have preserved your right to file a claim with the VCF in the future, but no later than December 18, 2020.

**2.4 Do I need to have my condition(s) certified for treatment by the WTC Health Program before I can register with the VCF? (Added: February 1, 2018)**

No, you do not need to be certified for treatment by the WTC Health Program in order to register with the VCF. You can register at any time – either [online](#), or by calling our Helpline at 1-855-885-1555. Registering with the VCF preserves your right to submit a claim, either now or at some point in the future, until the VCF closes on December 18, 2020. By registering, you do not waive any rights and you are not obligated to file a claim in the future.

Once you have timely registered your claim, however, it is best to wait to submit your claim form until you have been certified by the WTC Health Program. If you submit your claim without first being certified, the VCF will place your claim in Inactive status and it will remain in that status and will not be reviewed until you submit your certification letter.



## Section 3. Claim Form

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### 3.1 How do I view my answers to the claim form questions once I submit my claim? *(Added: September 9, 2016)*

Once you have logged into the system, follow the steps below to view the answers you submitted with your claim:

- *If you filed your claim after August 1, 2016 using the new claim form:* Click the “printer” icon in the far right column of the Summary Table. This will display all the completed questions and answers.
- *If you submitted all or part of your claim form prior to August 1, 2016:* Click on the “View Documents” icon and then the PDF file titled “ClaimFormsofJuly2016.pdf.” The PDF file will open and will include the completed questions and answers.
- *If you completed part of your form prior to August 1, 2016 and part of the form after that date:* You will need to look in both locations as explained above to see all of your claim form answers.

## Section 4. Amendments

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### 4.1 When should I amend my claim and when should I appeal? *(Updated: November 14, 2017)*

You should appeal **if you are challenging the VCF’s determination on your claim.**

You should amend **if you are seeking a new determination based on new information.**

*If you file a compensation appeal, your claim **will not be paid** until after a decision is made on your appeal. If you file an eligibility appeal, compensation review will not commence until after a decision is made on your appeal. The only circumstance in which a claim will be paid while under appeal is if the claimant has been approved for expedited status after meeting the applicable criteria. In all cases, filing an amendment will not affect payment on the original determination.*

When considering whether to appeal or to amend, consider whether you are waiving or compromising a particular claim or argument by accepting payment on the original determination and choosing to pursue an amendment rather than an appeal. For example, if you believe that the earnings basis that the VCF used to calculate lost earnings was too low and you do not appeal, you will have waived the right to raise that argument during a future appeal if you subsequently amend your claim and the VCF issues a revised determination. In that case, you are challenging the determination already made and you should appeal. Conversely, if you believe that the percentage of disability attributable to your eligible conditions that the VCF used was too low and you have information not previously submitted that you believe supports a higher disability percentage, you will not compromise your claim to a higher disability percentage if you accept payment on the determination already made while submitting proof relating to a request for a higher percentage as an amendment. In that case, you are accepting the determination already made because it was based on the information contained in your claim at that time, and also seeking a new determination based on new information, and you should amend.

If you have a legitimate basis to appeal – meaning you are challenging the basis of the determination already issued on your claim – the appeal must be filed within **30 days** of the decision letter using the appeal form that was included in the determination letter. Failing to file an appeal within the required



30-day period will waive your right to appeal that determination and the VCF will begin processing any applicable payment on the claim.

You should not appeal the decision on your claim as a way to seek a faster review of an amendment that is unrelated to the decision already made. Appeals filed solely for purposes of seeking consideration of an amendment on an unrelated issue are invalid, and you will be notified that your appeal is cancelled, that your right to appeal that determination is deemed waived, and, if an award determination has already been made, that your claim is moving to payment.

**Detailed information about how this applies to eligibility and compensation determinations, including specific examples, can be found [here](#), and is also located under "Forms and Resources."**

#### **4.2 If I am certified for a new condition by the WTC Health Program after my award was issued, or if I have a new loss, can I amend my application? (Updated: April 16, 2018)**

Yes, you can amend your claim to add a new condition or to claim a new loss at any time prior to December 18, 2020. You can find complete instructions on [How to File an Amendment](#) under "Forms and Resources" on our website.

The VCF will review the information you submit with your amendment and will notify you of the outcome of our review. If the VCF finds you eligible for compensation for the new condition and you are seeking additional loss related to the condition, you must also file a compensation amendment.

**Please note:** the amount of your VCF non-economic loss award is not based on the number of certified conditions you have, but rather on the severity and impact of those conditions on your daily life. In many cases, being found eligible for additional conditions will not change the amount of your VCF award unless the new condition is a cancer and the compensation already awarded was based only on non-cancer conditions.

There are certain situations when amending your claim will not result in a change to your award. Listed below are examples to consider before filing an amendment.

- **Amendments seeking additional non-economic loss:** Except in limited circumstances, if you already received a non-economic loss award at the statutory cap (\$90,000 for non-cancer conditions and \$250,000 for cancer), claiming a new condition will not change your non-economic loss award. You may file an eligibility amendment to add the new condition and the VCF will determine if it is considered eligible, but you should not file a compensation amendment to seek additional non-economic loss. The limited circumstances in which the VCF may award additional non-economic loss include if you are claiming a cancer where one was not previously considered in the award or if you were previously compensated for a cancer and are claiming a non-cancer condition that the Special Master has identified as presumptively severe and debilitating, as listed in Section 2.1(a) of the VCF [Policies and Procedures](#) document.
- **Amendments on claims with large collateral offsets:** If your initial award determination was reduced by collateral offsets, you should consider whether these offsets will exceed the new loss you are seeking. If your offsets are substantially higher than the loss you are claiming through the amendment, the amendment will not result in a change to your net total award. For example, if you received a \$350,000 settlement payment from a 9/11-related lawsuit, and are only seeking additional non-economic loss, you should not file an amendment as the non-economic loss awarded will not exceed the amount of this offset.

If you are represented by an attorney and are unsure whether your amendment will result in a substantial change in your award, we encourage you to discuss the amendment with your attorney. If





you are not represented, the VCF Helpline can assist you in deciding whether to submit the amendment.

For more detailed information on how the VCF calculates awards, see the VCF [Policies and Procedures](#) document.

**4.3 I do not agree with the VCF's finding regarding my level of disability. What should I do?** *(Added: November 10, 2016)*

If you have new information regarding your disability that you have not yet provided to the VCF, you should amend your claim. If you believe, however, that the VCF did not properly calculate your award based on your level of disability, and you provided all appropriate information with your claim, you should appeal the decision by following the instructions in your award letter.

When determining the level of disability, the VCF can only consider eligible physical conditions. For example, if another government entity has found you 100% disabled for two conditions, but only one condition is eligible for compensation from the VCF, then the VCF can only consider the one condition and its associated disability when calculating your loss.

**4.4 I amended my compensation claim. When will a decision be made?** *(Updated: October 17, 2018)*

Our first priority is to render decisions on claims for those claimants who have not yet received any award. At the same time, we do continue to review amendments and use the same priority order of rendering decisions on older amendments before reviewing newer ones.

How we prioritize the review of an amendment depends on whether we have already made payment on the claim. As a general rule, an amendment on a claim that has not yet been decided (meaning the claimant has not received any award determination) will not change its priority status. We are basing the priority on the date the compensation form was submitted (see FAQ 1.2).

For claims that have already received an award determination, however, our priority order relates to the date of submission of the amendment, and not back to the original compensation form submission date. So, as a general rule, it is better for claimants (and will allow us to consider claims as a whole rather than piecemeal), if amendments are made while the claim is under consideration rather than after an award is already made.

As of the "updated" date of this FAQ, we are reviewing amendments submitted prior to August 2017.



## Section 5. Compensation and Payment

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### 5.1 What if my bank account or address has changed since my last payment?

If you have already received at least one payment from the VCF and your banking information has changed since the last payment was processed, you must complete and mail or fax a new [Payment Information Form](#) to the VCF as quickly as possible. If your address has changed, please call our Helpline for assistance in updating our records.

### 5.2 How long can my attorney hold my payment before disbursing it to me? *(Updated: August 21, 2018)*

It is the Special Master's expectation that law firms will disburse payments to their claimants within 30 days of the money being deposited into the law firm account.

### 5.3 When can I expect to receive payment and will the payment be pro-rated? *(Updated: November 14, 2017)*

The VCF does not pro-rate payments. Your claim will be paid in full for the calculated loss amount at the time the payment is processed.

The timing of your payment depends on whether or not you appeal your award:

- *If you do not appeal the award decision on your claim*, the VCF will begin processing your payment once the 30-day appeal period ends. Once the VCF begins processing the payment, it may take up to 20 days for the Special Master to authorize the payment. The payment then gets processed by the Department of Justice and the Treasury Department, which may take up to 3 weeks. This means your payment should be issued to the designated bank account within 2-1/2 months from the date of your award letter.
- *If you appeal the award decision on your claim*, the VCF will not begin processing your payment until a decision is made on your appeal. The payment process starts once the VCF sends you the letter notifying you of the outcome of your appeal. Once the VCF begins processing the payment, it may take up to 20 days for the Special Master to authorize the payment. The payment then gets processed by the Department of Justice and the Treasury Department, which may take up to 3 weeks. This means your payment should be issued to the designated bank account within 1-1/2 months from the date of your post-appeal decision letter.

### 5.4 Are disability payments from other sources (such as Veterans Affairs, NYCERs, etc.) deducted from my award? *(Added: November 10, 2016)*

Yes, if the payments are related to your disability from an eligible 9/11-related condition. The statute requires that the VCF offset from your award any disability benefits you are receiving, or entitled to receive, related to your eligible physical conditions. If you are receiving disability payments for conditions that are not eligible under the VCF, those amounts will not be deducted from your award.

### 5.5 Can I get reimbursed for medical expenses that I paid out-of-pocket and were not covered by the WTC Health Program or reimbursed by my insurance? *(Updated: November 14, 2017)*

Yes. You can request reimbursement for past out-of-pocket medical expenses you have paid as a result of your eligible condition(s); however, you may only seek reimbursement once your initial award has been issued and only if the amount of the out-of-pocket expenses exceeds \$2,000.



Because claims for reimbursement of out-of-pocket medical expenses require the submission and review of significant documentation establishing both that the claimed medical expense was related to your eligible condition and that you personally paid for the expense out of pocket, processing these claims takes time and can delay your award. As a result, effective May 2017, it is VCF policy that claims for reimbursement of past out-of-pocket medical expenses will **only** be considered if the following criteria are met:

- The claim for medical expenses must be submitted as a compensation [amendment](#) to your claim and only **after** you have received your initial award determination. This allows the VCF to issue your initial award determination more quickly, since we are not spending time during our initial review to verify each claimed medical expense.
- If you amend your claim to seek reimbursement for medical expenses, the VCF will only review the amendment if the total amount of the claimed medical expenses incurred due to eligible conditions exceeds \$2,000. Establishing this minimum threshold is consistent with the Special Master's interpretation of the Reauthorized Zadroga Act's requirement to prioritize funding to those claimants with the most debilitating conditions.
- The amendment must be submitted with the required documentation and in the required format as explained in these [instructions](#), which can also be found on our website, under "Forms and Resources."

The Special Master may exercise discretion to waive one or more of these requirements as appropriate based on individual claimant circumstances. If you wish to seek a waiver, please contact the VCF Helpline.

## Section 6. Reauthorization

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### 6.1 What does the reauthorization of the James Zadroga 9/11 Health and Compensation Act of 2010 mean for the VCF? (Updated: September 9, 2016)

The reauthorization put in place a new law that extended the VCF for five years and included some important changes to the VCF's policies and procedures for evaluating claims and calculating each claimant's loss. The law included the following significant changes:

- *Extended the VCF for 5 years from the date the legislation was signed* – The deadline for filing a claim has been changed from the original deadline of October 3, 2016 to the new deadline of December 18, 2020.
- *Increased the VCF's total funding* – The new law made the original \$2.775 billion appropriation available immediately to pay claims and provided an additional \$4.6 billion in funding that became available on October 1, 2016.
- *Directed the VCF to make a full payment on any loss determination that has already been issued* – For claimants who received a letter dated on or before December 17, 2015 notifying them of the amount of their loss, the VCF has processed the final payment for the remaining 90% of the loss amount.
- *Placed certain limitations on future award amounts* – The law directed specific changes to the way in which the VCF calculates loss amounts for certain claimants. This includes limiting the amount of non-economic loss that can be awarded, eliminating claims for future out-of-pocket medical expenses, and capping the computation of economic loss by limiting the annual income level.



As required by the reauthorization, the Special Master reviewed the legislation to understand how it impacts claimants and the VCF's day-to-day operations and drafted updated regulations reflecting the new law. The [Final Rule](#) was published on September 2, 2016.

**6.2 How different is the Group B loss calculation methodology? Is there a cap on economic loss? (Updated: November 14, 2017)**

The reauthorization statute required certain changes to the loss calculations for Group B claims. Most notably, the law did the following:

- Capped non-economic loss that results from a cancer at \$250,000.
- Capped non-economic loss that does not result from a cancer at \$90,000.
- Instructed the Special Master to prioritize claims for victims who are determined by the Special Master to be suffering from the most debilitating physical conditions. The statute provides that such individuals should not be unduly burdened by procedures necessary to maintain the aggregate funding cap. The Special Master interprets this requirement to mean that the available funds should be prioritized for those with the most debilitating conditions. Therefore, non-economic loss awards for such claims will be at the higher end of the range of awards and non-economic awards for those with much less serious conditions will be at the lower end of the range of awards.
- For purposes of calculating economic loss, capped Annual Gross Income ("AGI") at \$200,000 for each year of loss. Annual Gross Income is defined in the Internal Revenue Code. This is a cap on the annual computation of loss.
- Removed the \$10,000 minimum award. The new statute required the Special Master to compute the loss and then deduct any collateral offsets without applying any minimum award. As a result, some claimants will not receive an award because the amount of the offset exceeds the amount of loss.

## Section 7. Private Physician Process

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**7.1 Who should complete the online Private Physician forms? (Added: July 25, 2017)**

You should only complete the online Private Physician forms if you meet the [criteria](#) for the Private Physician process. If you do **not** meet the criteria for the Private Physician process, you should answer "No" to any questions that ask about treatment by a physician not affiliated with the WTC Health Program. You should also answer "No" if the system displays the question that asks if you are ready to provide information regarding the Private Physician process. Answering "No" to these questions will prevent the Private Physician questions from being displayed in the system.

**7.2 Is the Private Physician process available to victims who died of an ineligible condition and are claiming personal injury losses? For example, if a WTC survivor died of a heart attack, yet had suffered asthma and GERD while living, had treated with private doctors only, and had never been a member of the WTC Health Program, can the estate seek**





**certification of an eligible condition through the Private Physician process or are they unable to become eligible for a VCF personal injury award? (Added: July 25, 2017)**

The Private Physician process would be available in this situation so that the claimant could pursue a personal injury claim. The process remains available for deceased individuals who were not certified for treatment for the claimed condition prior to death.

**7.3 Is the Private Physician process available only to deceased individuals who were previously certified by the WTC Health Program and now claim a cancer, or is it also available to personal injury victims who were previously certified for a non-cancer and are now seeking compensation for a cancer? (Updated: August 28, 2018)**

The Private Physician process will remain available for all claims - deceased or personal injury – where the victim was previously deemed eligible for compensation from the VCF based on a certified condition and is now seeking to add a cancer. Please note that the individual must have been previously certified for at least one eligible condition, and deemed eligible for compensation by the VCF, in order to seek verification of a cancer through the Private Physician process. For individuals claiming cancer who are not currently certified for treatment of any condition by the WTC Health Program, they must go to the WTC Health Program for certification of the cancer, although they can, of course, continue to be treated by their treating physician.

**7.4 How do I request consideration for an exception to the Private Physician criteria? What do I need to submit if I want to claim a substantial hardship exception? (Updated: August 23, 2017)**

In order to request an exception to the Private Physician criteria, you must show that you will suffer significant hardship in having your condition evaluated and certified for treatment by the WTC Health Program, either in the New York City metropolitan area or through the Nationwide Provider Network.

If you believe you will suffer significant hardship in seeking certification by the WTC Health Program, you should upload a statement or letter to your claim explaining the circumstances and why you should be considered for the Private Physician process **and** then call the VCF Helpline to alert us to the request. Once your request is reviewed and a decision is made about whether to grant the request, a member of our Helpline team will call you to notify you of the decision. If we determine that you are an appropriate candidate for the Private Physician process, once we call to notify you of that decision, you should complete and submit a Private Physician packet and the supporting documents.

**7.5 I live outside the continental United States. Do I need to go to the WTC Health Program to have my condition certified for treatment? (Added: February 1, 2018)**

No. As a foreign resident, living outside the U.S., you are able to have your conditions verified through our Private Physician process. You should complete the Private Physician forms either as part of your online claim submission or by using the [forms](#) on our website. The VCF will work directly with the WTC Health Program to verify your condition(s) as eligible for compensation.

If you have questions about your particular situation, please contact the Helpline 1-855-885-1555.