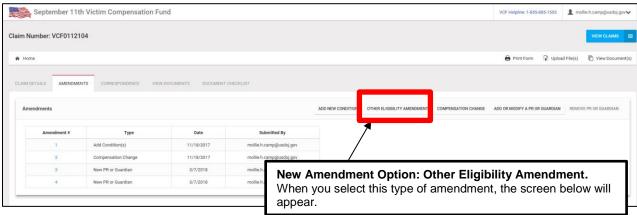
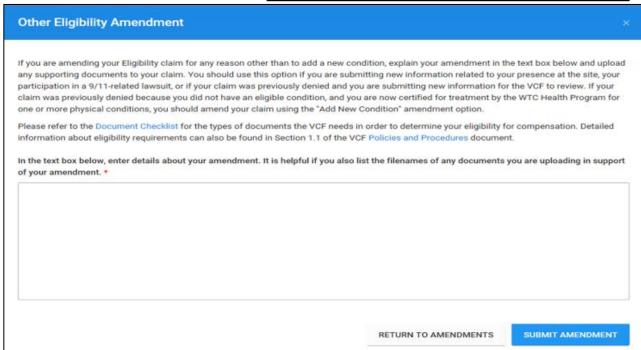
The enhancements and updates listed below will be available in the online claims system beginning on Monday, March 19th.

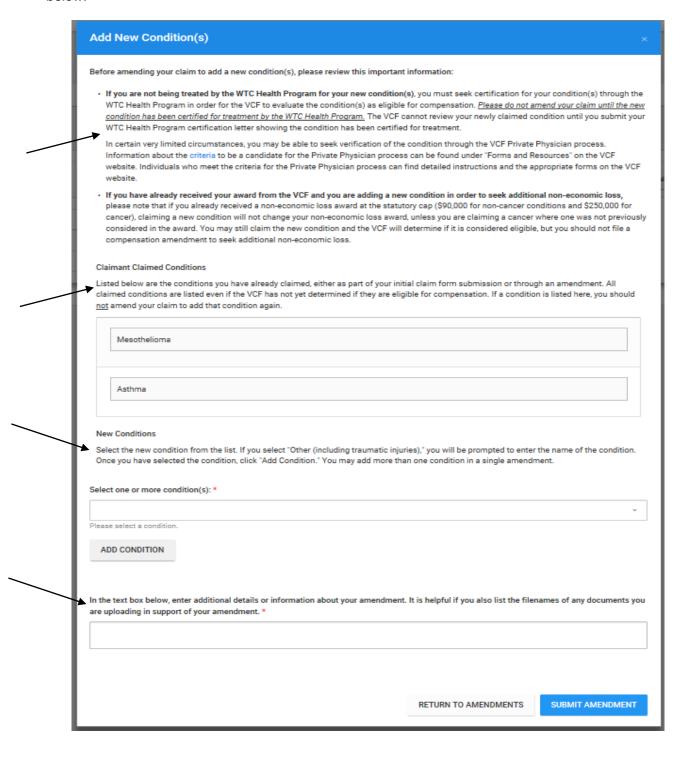
General Updates to Amendments – The fix is now in place to prevent multiple amendments from being created if the 'Submit' button is clicked multiple times in succession. Additionally, the issue that caused data from prior amendments to display when a new amendment is initiated has been fixed, and new amendments should now open with a blank form.

New "Other Eligibility" Amendment – A new Eligibility amendment option has been added for use when claimants are amending their eligibility claim for any reason <u>other</u> than to add new conditions. This option should be used to submit new information on presence, lawsuits, or additional information for previously denied claims. Claimants should still submit a Conditions amendment if their claim was previously denied or deactivated for lack of an eligible injury.





Updates to "Add Conditions" Amendment – With the addition of the new "Other Eligibility" amendment option, the "Add Conditions" amendment should now only be used when amending the claim to add a new condition. The opening text has been updated to provide additional guidance to claimants. Several other text changes have been made throughout the page as shown by the arrows below.



Updates to Compensation Amendments – Three new options have been added to the "Compensation Change" amendment: (1) withdraw lost earnings; (2) request consideration for the WTC Health Program Disability Evaluation Process; and (3) submit a completed WTC Health Program Disability Evaluation report. In addition, the label for the checkbox for "Medical Expenses" has been changed to "Reimbursement for Out of Pocket Medical Expenses."

The text throughout the page has been updated with more detailed information, including what is required with the submission of each type of claimed loss. These changes result in a longer page and you will need to scroll down to see all of the options. The images below and on the next page show the expanded text and the red boxes highlight the new amendment options.

Compensation Change	×
Check the appropriate boxes to indicate the changes you would like considered. You must also provide additional details or information about your amendment in the text box at the bottom of the page.	^
For each change, review the list of required supporting documents and upload them with your amendment. Please only amend the claim when you have the information in hand to support the amendment. The required supporting documents must be submitted or the VCF will not evaluate your request for additional losses.	
Reimbursement for Out-of-Pocket Medical Expenses: The VCF will only accept medical expense claims after your initial award has been issued, and only if the total amount of claimed medical expenses incurred due to your eligible condition(s) exceeds \$2,000. If you have not yet received your initial award determination, you should not file a Medical Expenses amendment at this time. Please review these instructions before submitting your amendment. You must submit the following items with your amendment:	
(1) Submit the Medical Expense Worksheet.	
(2) Submit the Medical Expense Supporting Documentation Packet.	
Withdraw prior claim for Lost Earnings: If you filed a claim for lost earnings and have since decided that you do not want the VCF to review that portion of your claim, you may withdraw your lost earnings claim by selecting this box. In the text box at the bottom of the page, please specify whether you are withdrawing your claim for past/temporary lost earnings and/or future/ongoing lost earnings.	
Loss of Earnings: You must submit certain information to support your claim for lost earnings. Please carefully review section 2.2 of the VCF Policies and Procedures document and the information below and submit the required documentation with your amendment.	
▶ To claim loss of past earnings for a temporary period : In the box at the bottom of the page, enter a detailed description of the loss, including information such as the timeframe of lost earnings, the amount of lost earnings, and the employer at the time of loss. You must submit the following documents to support your amendment:	
(1) Exhibit 1 - "Social Security Administration Consent Form" if not previously submitted	
(2) Documents showing the victim did not work and was not paid for the time not worked. Examples include: a letter from the victim's employer, copies of pay statements that show a reduction in work, or a year-end pay summary.	
(3) Documents showing that the victim's inability to work was due to an eligible condition. Examples include: medical records that reflect lengthy hospitalization, surgery, or chemotherapy; a letter from the victim's doctor; a determination by a disability insurance carrier; or Workers' Compensation records.	
(4) If you are represented by an attorney, you must submit a completed Temporary Past Lost Earnings Worksheet.	
To claim ongoing loss of earnings into the future: In the text box at the bottom of the page, enter a detailed description of the loss, including:	
 Information about disability findings for the victim's physical injury; 	
 Compensation and employment history including any pension, health insurance, or other benefits provided by the victim's employer at the time of loss; and 	
Any other information about earnings or other compensation loss.	

Unless you have filed a Deceased claim for lost earnings due to death from an eligible condition, you must also show that another entity-such as the Social Security Administration, Workers Compensation, or other government agencies - found that the victim's ability to work has been reduced because of an eligible condition. In rare cases, the VCF may accept a well-supported disability opinion from a qualified doctor who evaluated the victim and determined that the victim's ability to work has been reduced because of an eligible condition. You must submit the following documents to support your amendment:

(1) Exhibit 1 - "Social Security	Administration Consent Forn	n" if not previously submitted.

(2) Documents applicable to your claim as listed on page 3 of the Document Checklist.

If you are represented by an attorney, and the victim had a **defined benefit pension**, you should also review **section 2.2.d** of the Policies and Procedures document for additional information and instructions.

Request consideration for the WTC Health Program Disability Evaluation Process: Check this box if you meet the requirements for the WTC Health Program Disability Evaluation Process and are requesting to be considered as a candidate for the process. You must follow the specific steps for submitting the request and submit the required documents or your request will be denied. The VCF will review your request and make a determination as to whether you are an appropriate candidate for the disability evaluation process. You will receive a letter explaining the outcome of our review.
Submit WTC Health Program Disability Evaluation Report: Check this box if your WTC Health Program disability evaluation is complete. Be sure to upload the completed report with your amendment and select the document type "WTCHP Disability Evaluation."
Replacement Services: If you regularly performed general household-related tasks and you can no longer perform those tasks as a result of an eligible condition, then the VCF may provide compensation for the value of those "services." This component of economic loss is typically considered to be a component of loss in wrongful death claims, or in claims where the claimant did not have prior earned income or worked only part-time outside the home. Please review section 2.4.b of the Policies and Procedures document for more information about claiming replacement services.
▶ To claim replacement services : In the text box at the bottom of the page, enter a detailed description that includes the type of service, the frequency of service, the timeframe in which the victim stopped performing the service, and (unless you are claiming replacement services after the victim's death from an eligible condition) the eligible condition that prevents the victim from performing the service. You must submit the following to support your claim for replacement services:
(1) Exhibit 1 - "Social Security Administration Consent Form" if not previously submitted.
(2) A statement listing the types of services the victim provided before death or disability from an eligible condition, and the amount of time spent on those services (per week or month).
(3) If you are claiming replacement services due to disability, you should also explain how the victim's eligible condition prevents or reduces the victim's ability to perform services, and submit medical records that show that the reason the victim cannot perform the services is because of an eligible condition.
Non-Reimbursed Burial and Memorial Service Costs: In the text box below, enter a detailed description of the type and cost of any services. You will also need to submit invoices, receipts, or other documentation to support the claimed expenses.
Collateral Offsets: Check this box if you have already received your initial award determination and now want the VCF to review your prior award based on a change to a collateral source payment. For example, if the VCF previously offset a recurring benefit that you receive, and your benefit amount has decreased, you may ask the VCF to re-review your claim taking into account the reduced benefit amount. You must submit the Collateral Offset Update Form with your amendment. If you received your initial award determination and are notifying the VCF of a change in your collateral offsets, but are <u>not</u> requesting a re-review of your claim, you should still complete and upload the Collateral Offset Update Form, but should not submit an amendment for that purpose.
If a collateral source payment has changed since you filed your compensation claim, but you have not yet received your initial award

determination, do not check this box. You should still complete and upload the Collateral Offset Update Form along with any other information

about your collateral offset, but should not submit an amendment for that purpose.

	RETURN TO AMENDMENTS	SUBMIT AMENDMENT	
In the text box below, enter additional details or information about your amendmen you are uploading in support of your amendment. *	nt. It is helpful if you also list the file	enames of any documents	
(2) Personal statement to demonstrate the impact of the eligible conditions on	your life.		
(1) Medical records, if applicable. Please remember that there are circumstances where there is no need to submit medical records in support of your claim. Please see section 2.1 of the Policies and Procedures document for additional information about when to submit medical records in support of non-economic loss.			
If you are amending your claim to seek additional non-economic loss, you should s	ubmit:		
■ Non-Economic Loss: Check this box if you have already received your initial awa newly certified condition or increased severity of a previously compensated condition-economic loss, please note that if you already received a non-economic loss and \$250,000 for cancer), claiming a new condition will not change your non-economic was not previously considered in the award. You may amend your claim to add the eligible, but you should not file a compensation amendment to seek additional non-	on. If you are amending your claim i ward at the statutory cap (\$90,000 f mic loss award, unless you are clai new condition and the VCF will dete	in order to seek additional for non-cancer conditions ming a cancer where one	

Updates to prevent PR Amendments for Wrongful Death Claims – As explained in the VCF's guidance on what to do if a victim passes away after filing a personal injury claim, the PR should *only* file a PR amendment to the personal injury claim if the victim did <u>not</u> pass away from a 9/11-related physical injury. To ensure the proper handling of the claim, the "Add or Modify PR or Guardian" amendment has been changed as shown on the following page to prevent the PR from filing a PR amendment if the victim passed away from a 9/11-related injury. Instructions have also been added explaining that a new wrongful death claim should be submitted. The text box at the bottom of the page has also been changed so it is now a required field.

