

Beneficiary Travel - Research Study Participant Note Template

The Beneficiary Travel-Research Study Participant note aims to help reduce barriers for Veterans' participation in **service-connected clinical trials** by providing necessary information on consideration for eligibility or on statutory regulations related to Beneficiary Travel. This note is part of an ongoing effort to support Veterans in accessing clinical trials related to their service-connected disabilities, which may otherwise be hindered by travel related challenges.

While some research trials offer compensation, this is not consistently applied, which underscores the need for uniform support mechanism. This note will ensure Veterans are informed about beneficiary travel resources, encouraging equitable and inclusive participation in research that directly impacts their health and service-related conditions.

The Beneficiary Travel-Research Study Participant note will be entered by one of the listed clinicians when a Veteran enrolls in a research study and may wish to be considered for Beneficiary Travel reimbursement. A clinician is the only staff authorized to provide medical justification for the research beneficiary travel request. A clinician is:

- Physician
- Physician assistant
- Nurse practitioner
- Certified Nurse Practitioner
- Clinical Nurse Specialist
- Certified Nurse-Midwife Psychologist
- Other independent licensed practitioner involved in helping Veterans enroll in research studies.

The Beneficiary Travel-Research Study Participant note should be completed and signed for all Veterans enrolled in any research study, whether the study is conducted at the VA or outside the VA, or if study is ineligible for travel benefits. This ensures that travel staff have clear guidance on how to respond if a Veteran applies for travel reimbursement. The Beneficiary Travel-Research Study Participant request is subject to the Beneficiary Travel eligibility requirements and administrative approval.

Below is a link to the end user educational materials.

https://dvagov.sharepoint.com/sites/VHANCRC/Install%20Guides/UPDATE_2_0_492%20VABENE%20TRAVEL%20RESEARCH%20PARTICIPANT/Beneficiary%20Travel-Research%20study%20participant%20template%20education%20Research%20Staff.pdf

BENEFICIARY TRAVEL- RESEARCH STUDY PARTICIPANT TEMPLATE

November 2024

Collaboration between Veteran Transportation Program (VTP)
and Office of Research and Development (ORD)

Reminder Dialog Template: BENEFICIARY TRAVEL (BT) RESEARCH STUDY PARTICIPANT

Beneficiary Travel-Research Study Participant v1.2

PURPOSE: Used to assess if a Veteran is eligible for Beneficiary Travel payments for travel related to participation in a clinical trial. This note should be entered for ALL Veterans participating in a research study.

INTENDED USER: Physician, Physician Assistant (PA), Nurse Practitioner (NP), Certified Nurse Practitioner (CNP), Clinical Nurse Specialist (CNS), Certified Nurse-Midwife (CNM), Psychologist, or other independent licensed practitioner involved in helping Veterans enroll in research studies

[VIEW Abbreviations](#)

++ This request is subject to Beneficiary Travel eligibility requirements and administrative approval.

[Beneficiary Travel Eligibility](#) ++

[VIEW Medical Benefits 38 C.F.R 17.38](#)

++ If the Veteran will need a common carrier or special mode transportation, please also enter a Beneficiary Travel note. ++

[VIEW Last Beneficiary Travel Note](#)

Research Study Title:

*

ClinicalTrials.gov (en NCT followed by an 8

*

*Does the research study involve the use of a c

☐ Yes

☐ No:

Beneficiary Travel-Research Study Participant

Health Factors: **VA-RBT NCT NUMBER, VA-RBT RESEARCH General Findings: [VIEW PROGRESS NOTE TEXT](#)**

* Indicates a Required Field

VA-RBT LAST BT NOTE VIEW

11/06/2024 12:41 Local Title: BENEFICIARY TRAVEL (BT)
Standard Title: ADMINISTRATIVE NOTE

BENEFICIARY TRAVEL AND SERVICE DOG:
This consult is only to be used in conjunction with travel benefits associated with obtaining and training/re-training of a service dog provided by the VA, and the provision, maintenance, and replacement of hardware for the dog to perform such tasks necessary to assist such Veterans.

VA may provide to Veterans enrolled under 38 U.S.C. 1705 guide dogs trained for the aid of people who are blind and service dogs trained for the aid of the hearing impaired or persons with a spinal cord injury or dysfunction or other chronic impairment that substantially limits mobility. Under Section 1714(d), VA is also authorized to provide certain travel expenses and assistance related to the provision of such dogs.

The purpose of consult is to confirm that an examination/certification is on file in the claimant's medical record documenting manifestations and findings pertinent to whether the claimant is visually or hearing impaired or has a mobility impairment that medically requires the service of a service dog and therefore may be eligible to receive reimbursement of travel costs or assistance with travel associated with obtaining the service dog, to include all necessary initial and follow up training the provisions of 38 U.S.C. 111 and 38 CFR part 70, to include approved lodging.

Medical reason for service dog:
VISUAL IMPAIRED

Is the Veteran able to transport self to obtain service dog?
[No]

Is Veteran legally blind?
[Yes]

TYPE OF TRANSPORT/ASSISTANCE
COMMON CARRIER (VA provided commercial carries or VST vehicle)
Order Placed for: Common Carrier Consult

Provider Statement:
I certify that the Veteran meets the medical requirements for VA service dog and that documentation is on file in their medical record.

Signed by: /es/ AMY HOWARD
11/06/2024 13:00

01/25/2017 07:14 Local Title: BENEFICIARY TRAVEL (BT)
Standard Title: ADMINISTRATIVE NOTE

Close

VA-RBT INTENDED USER/PURPOSE/ABBREV

Abbreviations:

Controlled Substance:

Class I = drugs, substances or chemicals that have no medical use, have a high potential for abuse, and 1 use under medical supervision.

Class II = drugs that are considered to have medical high potential for abuse.

NCT = National Clinical Trial

Non-VA entity = not a part of the Department of Vetera

VA = Veterans Affairs

VA-RBT EXAM/TX/CARE DEF VIEW

38 C.F.R 17.38

17.38 Medical benefits package.

(a) Subject to paragraphs (b) and (c) of this section, the following hospital, outpatient, and extended care services constitute the "medical benefits package" (basic care and preventive care):

(1) Basic care.

(i) Outpatient medical, surgical, and mental healthcare, including care for substance abuse.

(ii) Inpatient hospital, medical, surgical, and mental healthcare, including care for substance abuse.

(iii) Prescription drugs, including over-the-counter drugs and medical and surgical supplies available under the VA national formulary system.

(iv) Emergency care in VA facilities; and emergency care in non-VA facilities in accordance with sharing contracts or if authorized by §§ 17.52(a) (3), 17.53, 17.54, 17.120-132.

(v) Bereavement counseling as authorized in § 17.98.

(vi) Comprehensive rehabilitative services other than vocational services provided under 38 U.S.C. chapter 31.

(vii) Consultation, professional counseling, training, and mental health services for the members of the immediate family or legal guardian of the veteran or the individual in whose household the veteran certifies an intention to live, if needed to treat:

(A) The service-connected disability of a veteran; or

(B) The nonservice-connected disability of a veteran where these services were first given during the veteran's hospitalization and continuing them is essential to permit the veteran's release from inpatient care.

(viii) Durable medical equipment and prosthetic and orthotic devices, including eyeglasses and hearing aids as authorized under § 17.149.

(ix) Home health services authorized under 38 U.S.C. 1717 and 1720C.

(x) Reconstructive (plastic) surgery required as a result of disease or trauma, but not including cosmetic surgery that is not medically necessary.

(xi) (A) Hospice care, palliative care, and institutional respite care; and (B) Noninstitutional geriatric evaluation, noninstitutional adult day health care, and noninstitutional respite care.

(xii) Payment of travel and travel expenses for veterans eligible under § 17.143 if authorized by that section.

(xiii) Pregnancy and delivery services, to the extent authorized by law.

(xiv) Completion of forms (e.g., Family Medical Leave forms, life insurance applications, Department of Education forms for loan repayment exemptions based on disability, non-VA disability program forms) by healthcare professionals based on an examination or knowledge of the veteran's condition, but not including the completion of forms for examinations if a third party customarily will pay health care practitioners for the examination but will not pay VA

Finish

Cancel

Close

Beneficiary Travel-Research Study Participant v1.2

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[VIEW Abbreviations](#)

++ This request is subject to Beneficiary Travel eligibility requirements and administrative approval.

[Beneficiary Travel Eligibility](#) ++

[VIEW Medical Benefits 38 C.F.R 17.38](#)

++ If the Veteran will need a common carrier or special mode transportation, please also enter a Beneficiary Travel note. ++

[VIEW Last Beneficiary Travel Note](#)

Research Study Title:

* test

ClinicalTrials.gov (enter NCT followed by an 8 digit number, i.e. NCT12345678)

* NCT12345678

*Does the research study involve the use of a class I or II controlled substance for treatment?

☐ Yes

☐ No:

[Visit Info](#)

[Finish](#)

[Cancel](#)

Beneficiary Travel-Research Study Participant

Health Factors: **VA-RBT NCT NUMBER, VA-RBT RESEARCH BENEFICIARY TRAVEL, VA-RBT RESEARCH STUDY TITLE**

General Findings: **VIEW PROGRESS NOTE TEXT**

* Indicates a Required Field

related to participation in a clinical trial. This note should be entered for ALL Veterans participating in a research study.

INTENDED USER: Physician, Physician Assistant (PA), Nurse Practitioner (NP), Certified Nurse Practitioner (CNP), Clinical Nurse Specialist (CNS), Certified Nurse-Midwife (CNM), Psychologist, or other independent licensed practitioner involved in helping Veterans enroll in research studies.

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Research Study Title:

* test

ClinicalTrials.gov (enter NCT followed by an 8 digit number, i.e. NCT12345678)

* NCT12345678

*Does the research study involve the use of a class I or II controlled substance for treatment?

☐ Yes

☒ No:

*Is the Veteran receiving funds specifically for travel from the research study itself or another source that is a non-VA entity?

☐ Yes

☐ No:

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[Cancel](#)

Beneficiary Travel-Research Study Participant

Health Factors: **VA-RBT INVOLVE CLASS I/II CONTROLLED SUBSTANCE NO, VA-RBT NCT NUMBER, VA-RBT RESEARCH BENEFICIARY TRAVEL, VA-RBT RESEARCH STUDY TITLE**
General Findings: **VIEW PROGRESS NOTE TEXT**

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INTENDED USER: Physician, Physician Assistant (PA), Nurse Practitioner (NP), Certified Nurse Practitioner (CNP), Clinical Nurse Specialist (CNS), Certified Nurse-Midwife (CNM), Psychologist, or other independent licensed practitioner involved in helping Veterans enroll in research studies.

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Research Study Title:

* test

ClinicalTrials.gov (enter NCT followed by an 8 digit number, i.e. NCT12345678)

* NCT12345678

*Does the research study involve the use of a class I or II controlled substance for treatment?

☐ Yes

☒ No:

*Is the Veteran receiving funds specifically for travel from the research study itself or another source that is a non-VA entity?

☒ Yes

++ Not eligible for consideration of Beneficiary Travel related to this research study. Click FINISH and sign the note. ++

☐ No:

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[Cancel](#)

Beneficiary Travel-Research Study Participant

Health Factors: VA-RBT INVOLVE CLASS I/II CONTROLLED SUBSTANCE NO, VA-RBT NCT NUMBER, VA-RBT NOT ELIGIBLE AT THIS TIME, VA-RBT RESEARCH BENEFICIARY TRAVEL, VA-RBT RESEARCH STUDY TITLE, VA-RBT VETERAN RECEIVING FUNDS FROM STUDY/NON-VA ENTITY YES

* Indicates a Required Field

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++ This request is subject to Beneficiary Travel eligibility requirements and administrative approval.

[Beneficiary Travel Eligibility](#) ++

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[VIEW Last Beneficiary Travel Note](#)

Research Study Title:

* test

ClinicalTrials.gov (enter NCT followed by an 8 digit number, i.e. NCT12345678)

* NCT12345678

*Does the research study involve the use of a class I or II controlled substance for treatment?

☐ Yes

☒ No:

*Is the Veteran receiving funds specifically for travel from the research study itself or another source that is a non-VA entity?

☐ Yes

☒ No:

*Is the research study performed at a VA Facility?

☐ Yes:

☐ No:

[Visit Info](#)[Finish](#)[Cancel](#)

Beneficiary Travel-Research Study Participant

Health Factors: VA-RBT INVOLVE CLASS I/II CONTROLLED SUBSTANCE NO, VA-RBT NCT NUMBER, VA-RBT RESEARCH BENEFICIARY TRAVEL, VA-RBT RESEARCH STUDY TITLE, VA-RBT VETERAN RECEIVING FUNDS FROM STUDY/NON-VA ENTITY NO

* Indicates a Required Field

Research Study Title:
*

ClinicalTrials.gov (enter NCT followed by an 8 digit number, i.e. NCT12345678)
*

=====

*Does the research study involve the use of a class I or II controlled substance for treatment?

☐ Yes
☒ No:

*Is the Veteran receiving funds specifically for travel from the research study itself or another source that is a non-VA entity?

☐ Yes
☒ No:

*Is the research study performed at a VA Facility?

☒ Yes:

*Will the research study provide the Veteran with medically beneficial examination, treatment, or care?

++ This request is subject to Beneficiary Travel eligibility requirements and administrative approval.
[Beneficiary Travel Eligibility](#) ++

☐ Yes:
☐ No:

☐ No:

Beneficiary Travel-Research Study Participant

Health Factors: VA-RBT INVOLVE CLASS I/II CONTROLLED SUBSTANCE NO, VA-RBT NCT NUMBER, VA-RBT PERFORMED VA FACILITY, VA-RBT RESEARCH BENEFICIARY TRAVEL, VA-RBT RESEARCH STUDY TITLE, VA-RBT VETERAN RECEIVING FUNDS FROM STUDY/NON-VA ENTITY NO

* Indicates a Required Field

☒ No:

*Is the Veteran receiving funds specifically for travel from the research study itself or another source that is a non-VA entity?

☐ Yes☒ No:

*Is the research study performed at a VA Facility?

☒ Yes:

*Will the research study provide the Veteran with medically beneficial examination, treatment, or care?

++ This request is subject to Beneficiary Travel eligibility requirements and administrative approval.

[Beneficiary Travel Eligibility](#) ++

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☒ Yes:

Duration of time as a part of this research study (indicate dates if relevant):

*

☐ Dates of study: TO

Frequency of visits:

*

++ This request is subject to Beneficiary Travel eligibility requirements and administrative approval.

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++ If the Veteran will need a common carrier or special mode transportation, please also enter a Beneficiary Travel note. ++

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☐ No:[Visit Info](#)[Finish](#)[Cancel](#)

Beneficiary Travel-Research Study Participant

Health Factors: VA-RBT INVOLVE CLASS I/II CONTROLLED SUBSTANCE NO, VA-RBT NCT NUMBER, VA-RBT PERFORMED VA FACILITY, VA-RBT PROVIDE EXAM/TX/CARE OF VETERAN, VA-RBT RESEARCH BENEFICIARY TRAVEL, VA-RBT RESEARCH STUDY TITLE, VA-RBT VETERAN RECEIVING FUNDS FROM STUDY/NON-VA ENTITY NO

* Indicates a Required Field

*

ClinicalTrials.gov

NCT Number: *

=====

*Does the research study involve the use of a class I or II controlled substance for treatment?

☐ Yes

☒ No:

*Is the Veteran receiving funds specifically for travel from the research study itself or another source that is a non-VA entity?

☐ Yes

☒ No:

*Is the research study performed at a VA Facility?

☐ Yes:

☒ No:

*Was the Veteran referred by a VA facility to a non-VA entity to participate in the research study?

☐ Yes:

☒ No:

++ Not eligible for consideration of Beneficiary Travel related to this research study. Click FINISH and sign the note. ++

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Cancel

Beneficiary Travel-Research Study Participant

=====

Research Study Title:

ClinicalTrials.gov

=====

Health Factors: VA-RBT INVOLVE CLASS I/II CONTROLLED SUBSTANCE NO, VA-RBT NCT NUMBER, VA-RBT PERFORMED NON-VA ENTITY, VA-RBT REFERRED BY VA FACILITY TO NON-VA ENTITY NO, VA-RBT RESEARCH STUDY TITLE, VA-RBT VETERAN RECEIVING FUNDS FROM STUDY/NON-VA ENTITY NO, VA-RESEARCH BENEFICIARY TRAVEL

General Findings: VIEW PROGRESS NOTE TEXT

* Indicates a Required Field

☐ Yes☒ No:

*Is the Veteran receiving funds specifically for travel from the research study itself or another source that is a non-VA entity?

☐ Yes☒ No:

*Is the research study performed at a VA Facility?

☐ Yes:☒ No:

*Was the Veteran referred by a VA facility to a non-VA entity to participate in the research study?

☒ Yes:

Name of Non-VA Entity:

*

*Will the research study provide the Veteran with medically beneficial examination, treatment, or care?

++ This request is subject to Beneficiary Travel eligibility requirements and administrative approval.

[Beneficiary Travel Eligibility](#) ++

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☐ Yes:☐ No:☐ No[Visit Info](#)

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Beneficiary Travel-Research Study Participant

Health Factors: VA-RBT INVOLVE CLASS I/II CONTROLLED SUBSTANCE NO, VA-RBT NCT NUMBER, VA-RBT PERFORMED NON-VA ENTITY, VA-RBT REFERRED BY VA FACILITY TO NON-VA ENTITY YES, VA-RBT RESEARCH BENEFICIARY TRAVEL, VA-RBT RESEARCH STUDY TITLE, VA-RBT VETERAN RECEIVING FUNDS FROM STUDY/NON-VA ENTITY NO

* Indicates a Required Field

☐ Yes:☒ No:

*Was the Veteran referred by a VA facility to a non-VA entity to participate in the research study?

☒ Yes:

Name of Non-VA Entity:

* test

*Will the research study provide the Veteran with medically beneficial examination, treatment, or care?

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[Beneficiary Travel Eligibility](#) ++

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☒ Yes:

Duration of time as a part of this research study (indicate dates if relevant):

*

☐ Dates of study: TO

Frequency of visits:

*

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[Beneficiary Travel Eligibility](#) ++

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☐ No:☐ No

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Beneficiary Travel-Research Study Participant

Health Factors: VA-RBT INVOLVE CLASS I/II CONTROLLED SUBSTANCE NO, VA-RBT NCT NUMBER, VA-RBT PERFORMED NON-VA ENTITY, VA-RBT PROVIDE EXAM/TX/CARE OF VETERAN, VA-RBT REFERRED BY VA FACILITY TO NON-VA ENTITY YES, VA-RBT RESEARCH BENEFICIARY TRAVEL, VA-RBT RESEARCH STUDY TITLE, VA-RBT VETERAN RECEIVING FUNDS FROM

* Indicates a Required Field

☐ Yes:☒ No:

*Was the Veteran referred by a VA facility to a non-VA entity to participate in the research study?

☒ Yes:

Name of Non-VA Entity:

* test

*Will the research study provide the Veteran with medically beneficial examination, treatment, or care?

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[Beneficiary Travel Eligibility](#) ++

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☐ Yes:☒ No:

*Is the Veteran's condition that is being studied in the research study part of their Service-Connected (SC) disability?

=====

DS - Disabilities
No data available

☐ Yes:☐ No☐ No[Visit Info](#)[Finish](#)[Cancel](#)

Beneficiary Travel-Research Study Participant

With Factors: VA-RBT INVOLVE CLASS I/II CONTROLLED SUBSTANCE NO, VA-RBT NCT NUMBER, VA-RBT NOT PROVIDE EXAM/TX/CARE OF VETERAN, VA-RBT PERFORMED NON-VA ENTITY, VA-RBT REFERRED BY VA FACILITY TO NON-VA ENTITY YES, VA-RBT RESEARCH BENEFICIARY TRAVEL, VA-RBT RESEARCH STUDY TITLE, VA-RBT VETERAN RECEIVING FUNDS FROM

Indicates a Required Field

VIEW Medical Benefits 38 C.F.R 17.38

☐ Yes:☒ No:

*Is the Veteran's condition that is being studied in the research study part of their Service-Connected (SC) disability?

DS - Disabilities
No data available

☒ Yes:

Disability Related to the Study:

Duration of time as a part of this research study (indicate dates if relevant):

*

☐ Dates of study: TO

Frequency of visits:

*

++ This request is subject to Beneficiary Travel eligibility requirements and administrative approval.

[Beneficiary Travel Eligibility](#) ++

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☐ No☐ No

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Beneficiary Travel-Research Study Participant

Health Factors: VA-RBT CONDITION STUDIED SERVICE CONNECTED, VA-RBT INVOLVE CLASS I/II CONTROLLED SUBSTANCE NO, VA-RBT NCT NUMBER, VA-RBT NOT PROVIDE EXAM/TX/CARE OF VETERAN, VA-RBT PERFORMED NON-VA ENTITY, VA-RBT REFERRED BY VA FACILITY TO NON-VA ENTITY YES, VA-RBT RESEARCH BENEFICIARY TRAVEL, VA-RBT

* Indicates a Required Field

*Was the Veteran referred by a VA facility to a non-VA entity to participate in the research study?

☒ Yes:

Name of Non-VA Entity:

* test

*Will the research study provide the Veteran with medically beneficial examination, treatment, or care?

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[Beneficiary Travel Eligibility](#) ++

VIEW Medical Benefits 38 C.F.R 17.38

☐ Yes:

☒ No:

*Is the Veteran's condition that is being studied in the research study part of their Service-Connected (SC) disability?

=====

DS - Disabilities

No data available

☐ Yes:

☒ No:

++ Not eligible for consideration of Beneficiary Travel related to this research study. Click FINISH and sign the note. ++

☐ No

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Finish

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Beneficiary Travel-Research Study Participant

Health Factors: VA-RBT CONDITION STUDIED NOT SERVICE CONNECTED, VA-RBT INVOLVE CLASS I/II CONTROLLED SUBSTANCE NO, VA-RBT NCT NUMBER, VA-RBT NOT ELIGIBLE AT THIS TIME, VA-RBT NOT PROVIDE EXAM/TX/CARE OF VETERAN, VA-RBT PERFORMED NON-VA ENTITY, VA-RBT REFERRED BY VA FACILITY TO NON-VA ENTITY YES, VA-RBT RESEARCH

Indicates a Required Field