

To access the Inquiry Routing & Information System (IRIS), please follow the steps below. This site should help with our ongoing efforts to meet the needs of our customers while protecting their privacy and security.

- 1) Log onto the Department of Veterans Affairs Health Administration Center website at: www.va.gov/hac/ and click on "Contact Us" from the HAC option at the top bar of the home page.

UNITED STATES
DEPARTMENT OF VETERANS AFFAIRS

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+ Open Advanced Search

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HAC
Health Administration Center
Chief Business Office
Veterans Health Administration

Why We're Here: "...to care for him who shall have borne the battle and his widow, and his orphan..." - Abraham Lincoln

The Center's Vision: The Health Administration Center is a VA center of health plan excellence that inspires trust with stakeholders. We do this with an engaged workforce that focuses on results and leverages best practices.

The Center's Mission: To honor our Nation's commitment to our veterans and their families by administering health benefits.

How We Do It: Professionalism, Accountability, Integrity, Respect (PAIR)

The Health Administration Center (HAC) administers federal health benefit programs for veterans and their family members. Winner of the 2005 Colorado Performance Excellence Timberline Award and the 2005 Mayor of Denver's Top Employer Partner Award.

Quick List	Highlights	Special Programs
<ul style="list-style-type: none"> Beneficiaries Providers MyCHAMPVA Fact Sheets Forms Publications Policy Manuals Handbooks Brochures 	<ul style="list-style-type: none"> Contact Us IRIS About Us Awards HAC News Human Resources Other Clients Provider News National Provider Identifier (NPI) 	<ul style="list-style-type: none"> HAC Programs CHAMPVA Spina Bifida / CWVV Meds by Mail Foreign Medical Program

Forms | Publications

Home Page - Health Administration Center - Windows Internet Explorer

http://www4.va.gov/hac/hacmain.asp

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Home Page - Health Administration Center

Home Feeds (1) Print Page Tools

UNITED STATES DEPARTMENT OF VETERANS AFFAIRS

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Veteran Services Business About VA Media Room Locations Contact Us HAC

HAC
Health Administration Center
Office of Business Office
Veterans Health Administration

Why We're Here: "...to care for him who served his widow, and his orphan..." - Abraham Lincoln

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How We Do It: Professionalism, Accountability, and Customer Service.

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- Home
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- Recovery Contract (1995-2002)
- Recovery Contract

For Beneficiaries

- Beneficiaries
- CHAMPVA
- Spina Bifida / CWVV
- Meds by Mail
- Foreign Medical Program
- Locating a Provider

For Providers

- Providers
- Provider News
- National Provider Identifier (NPI)
- How to File a Claim Electronically
- CHAMPVA
- Spina Bifida / CWVV

List

- Beneficiaries
- Providers
- CHAMPVA

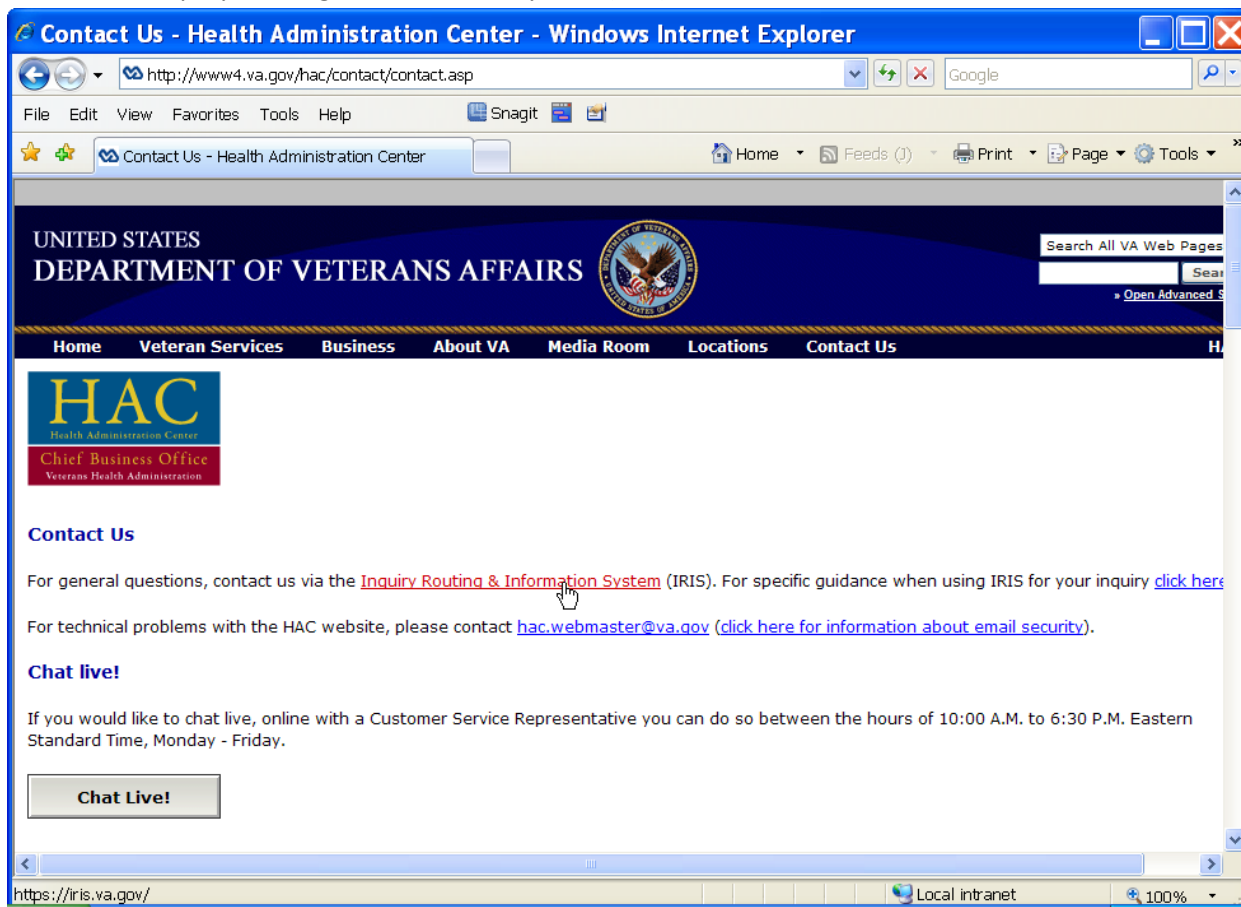
Highlights

- Contact Us
- IRIS
- About Us

http://www4.va.gov/hac/contact/contact.asp

Local intranet 100%

2) Click on the Inquiry Routing & Information System (IRIS) link.



3) Scroll down to the "Ask a Question" option and click on the link.

The screenshot shows the top portion of the Department of Veterans Affairs website. At the top left, it reads "UNITED STATES DEPARTMENT OF VETERANS AFFAIRS" next to the VA seal. On the top right, there is a search bar with the text "Search All VA Web Pages" and a "Search" button, with a link to "Open Advanced Search" below it. A navigation menu below the header includes "Home", "Veteran Services", "Business", "About VA", "Media Room", "Locations", "Contact Us", and "IRIS Links".

Inquiry Routing & Information System (IRIS)

Our inquiry system will be down and unavailable because of scheduled maintenance starting at 8:00 p.m. ET Friday evening, July 16th. Our site will be back up by 8:00 p.m. ET Saturday evening, July 17th. We apologize for any inconvenience during this maintenance period.

Warning! Our goal is to respond to your inquiry within 5 business days. If you are experiencing a medical emergency or in need of immediate crisis counseling, please go to your nearest medical facility Emergency Room or call 911. If you are in need of immediate crisis counseling, please contact VA's suicide hotline at 1-800-273-TALK; counselors are available 24/7 to help.

Locations (Find a VA Facility)
This directory provides complete information regarding the locations of all VA Medical and Regional Office Facilities and Cemeteries.

FOIA (Freedom of Information Act) Requests
FOIA requests cannot be submitted on this webpage. FOIA requests must be in writing and signed by the person submitting the request. VA does not accept requests via the Internet or by email. Only signed requests received by postal mail or fax will be accepted. For further information, click here.

Frequently Asked Questions (FAQs)
Search our Frequently Asked Questions (FAQs) and answers. Search by topic or phrases.

Education Benefits Inquiries
The VA provides a site specifically to handle your Veterans Education Benefits inquiries. Also use this link for WAVE pin/password problems.

Board of Veterans Appeals
The Board of Veterans Appeals is the component of the Department of Veterans Affairs (VA) that is responsible for reviewing Regional Office decisions on appeals for benefits claims. When an appeal is elevated to the Board, the Board enters a decision on behalf of the Secretary of Veterans Affairs. Please see instructions below to reach the correct location for questions about your appeal before clicking on this link:

- If your claim or appeal is still at the local office level, please select "Status of Claim or Appeal at a VA Office" for the Type of Inquiry. Select the applicable Topic from the dropdown list and then be sure to select your state on the second page of the web form so that your inquiry may be routed to the office of jurisdiction.
- If you have an inquiry about your appeal that you know is at the Board of Veterans Appeals in Washington, DC, please select "Status of Appeals at BVA" as your Type of Inquiry and "Appeals claims at BVA in Wash DC" as your Topic.

Board of Veterans Appeals

The Board of Veterans Appeals is the component of the Department of Veterans Affairs (VA) that is responsible for reviewing Regional Office decisions on appeals for benefits claims. When an appeal is elevated to the Board, the Board enters a decision on behalf of the Secretary of Veterans Affairs. Please see instructions below to reach the correct location for questions about your appeal before clicking on this link:

- If your claim or appeal is still at the local office level, please select "Status of Claim or Appeal at a VA Office" for the Type of Inquiry. Select the applicable Topic from the dropdown list and then be sure to select your state on the second page of the web form so that your inquiry may be routed to the office of jurisdiction.

- If you have an inquiry about your appeal that you know is at the Board of Veterans Appeals in Washington, DC, please select "Status of Appeals at BVA" as your Type of Inquiry and "Appeals claims at BVA in Wash DC" as your Topic.

Please note that questions about appeals pending before the Court of Appeals for Veterans Claims should be made through your legal representative directly to [Click here](#) Board of Veterans Appeals or a VA regional office.

Ask a Question

If you were unable to find the answer in our Frequently Asked Questions (FAQs), then ask your question here. Use this link to ask questions, submit compliments, complaints and suggestions. If you are experiencing a medical emergency or in need of immediate crisis counseling, please go to your nearest medical facility Emergency Room or call 911. This web site is not intended to provide medical diagnosis or emergency care.

Toll Free Numbers for Contacting VA

The VA provides toll-free 800 phone service for Veterans to obtain information about benefits.

Paperwork Reduction Act Notice

The Paperwork Reduction Act of 1995 requires us to notify you that this information collection is in accordance with the clearance requirements of section 3507 of the Paperwork Reduction Act of 1995.

OMB Number: 2900-0619
Estimated Burden: 10 minutes

The Paperwork Reduction Act of 1995 requires us to notify you that this information collection is in accordance with the clearance requirements of section 3507 of the Paperwork Reduction Act of 1995. We may not conduct or sponsor, and you are not required to respond to, a collection of information unless it displays a valid OMB number. We anticipate that the time expended by all individuals who must complete this form will average ten (10) minutes. This includes the time it will take to read instructions, gather the necessary facts and fill out the form. This collection of information is intended to fulfill the need identified by the Department of Veterans Affairs (VA) to categorize your question, complaint, compliment, or suggestion and collect the necessary information to respond to it. Results will be used to automatically route your inquiry to the appropriate person in the VA, which will help ensure that you receive a response in a timely manner. Use of this form is voluntary and failure to participate will have no adverse effect of benefits to which you might otherwise be entitled.

[VA Home](#) | [Privacy Policy](#) | [FOIA](#) | [Web Policies](#) | [No. 5549](#) | [Act Data](#) | [Site Index](#) | [USA.gov](#) | [White House](#) | [National Resource Directory](#) | [Inspector General](#)

4) Under number one, select "Question".

UNITED STATES
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Home Veteran Services Business About VA Media Room Locations Contact Us IRIS Links

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Department of Veterans Affairs IRIS CUSTOMER ENTRY FORM

Warning! Our goal is to respond to your inquiry within 5 business days. If you are experiencing a medical emergency or in need of immediate crisis counseling, please go to your nearest medical facility Emergency Room or call 911. If you are in need of immediate crisis counseling, please contact VA's suicide hotline at 1-800-273-TALK; counselors are available 24/7 to help.

Before you begin, please try to be as accurate as possible in deciding which one of topics below is most closely related to the issue you want VA to address. This is for your benefit. Proper selection will prevent lost time for VA to re-route your message to the appropriate office.

If this is a request to submit a **Change of Address**, please return to ["Search for FAQs,"](#) select "Change of Address", and follow the instructions accordingly.

Thank you.

1. *What Type of Inquiry Is This?

2. *Select a Topic

Question

Select a Topic

- Status of Claim** (Select this option if your question is about the status of a claim for which VA has not made a decision.)
- Status of Appeal at a Local VA Office** (Select this option if VA has made a decision on your claim and you filed an appeal with the VA office that made the decision. If your appeal pertains to compensation & pension benefits, please select Compensation & Pension from the Topic selection in step #2, or, if a medical issue, please select one of the medical options in #2.)
- Status of Appeals at BVA, Wash, DC** (Select this option only if you received a written notice that your appeal is under consideration at the Board of Veterans Appeals (BVA), Washington, DC, not at the Court of Appeals for Veterans Claims (CAVC), or a VA Regional Office. If you select this option you must select the "Appeals Claims at BVA in Wash DC" in step #2.)
- Complaints about a lack of courtesy or service received from VA**
- Compliment**
- Suggestion**
- eBenefits** (This selection is not intended for general public use. It should be used only by employees of VA's Health Resource Center. Thank you.)
- CCI (Special VA Project. Not for public use.)**

should be used only by employees of VA's Health Resource Center. Thank you.)

- CCI (Special VA Project. Not for public use.)**
- CMI (Special VA Project. Not for public use.)**

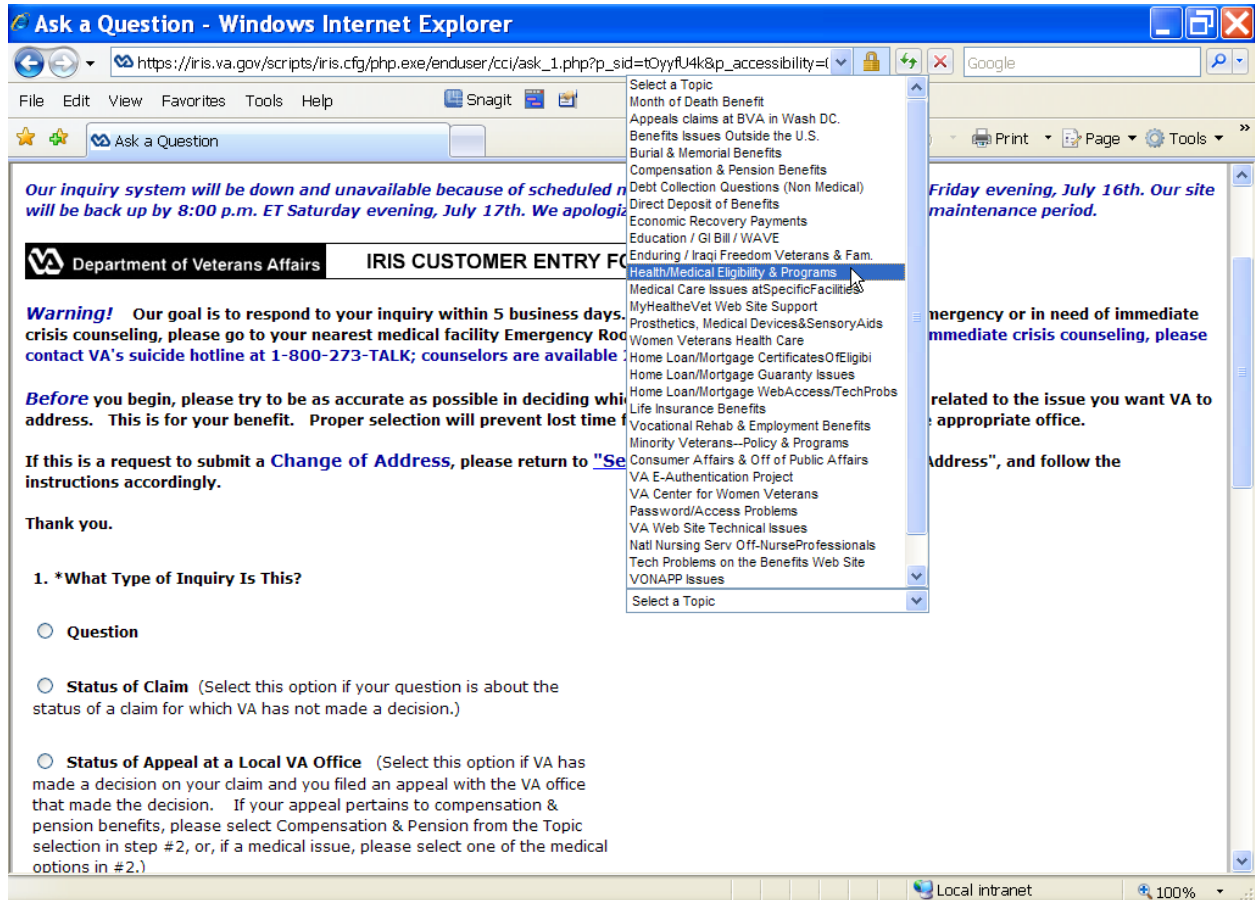
Next

VA Form 0873
DEC2005


OMB Number: 2900-0619
Estimated Burden: 10 minutes

The Paperwork Reduction Act of 1995 requires us to notify you that this information collection is in accordance with the clearance requirements of section 3507 of the Paperwork Reduction Act of 1995. We may not conduct or sponsor, and you are not required to respond to, a collection of information unless it displays a valid OMB number. We anticipate that the time expended by all individuals who must complete this form will average ten (10) minutes. This includes the time it will take to read instructions, gather the necessary facts and fill out the form. This collection of information is intended to fulfill the need identified by the Department of Veterans Affairs (VA) to categorize your question, complaint, compliment, or suggestion and collect the necessary information to respond to it. Results will be used to automatically route your inquiry to the appropriate person in the VA, which will help ensure that you receive a response in a timely manner. Use of this form is voluntary and failure to participate will have no adverse effect of benefits to which you might otherwise be entitled.

- 5) From the drop down menu under number two, select "Health/Medical Eligibility & Programs" and then click on "Next".



6) In the next screen, fill in each section that begins with a star (*). These are mandatory fields.

 Department of Veterans Affairs	IRIS CUSTOMER ENTRY FORM
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You have selected the following topic for your question:

Health/Medical Eligibility & Programs

If you have not checked yet, you can find FAQs for this topic [in our FAQs](#).

Your Contact Information - This Information is Required

*Form of Address: Mrs.

*First Name: Joan

Middle Initial:

*Last Name: Beneficiary

Email Address:

*How would you like your question answered?

Note: Please remember, the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and VA privacy regulations do not permit us to return information containing personal identifiers or medical data via electronic messaging. That type of information will be transmitted via telephone or regular mail.

*Select method for VA to respond to this question: - Please Select from the List

*Duties Phone:

Ask a Question - Windows Internet Explorer

https://iris.va.gov/scripts/iris.cfg/php.exe/enduser/vet_submit.php

File Edit View Favorites Tools Help Snagit

Ask a Question Home Feeds (1) Print Page Tools

*How would you like your question answered?

Note: Please remember, the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and VA privacy regulations do not permit us to return information containing personal identifiers or medical data via electronic messaging. That type of information will be transmitted via telephone or regular mail.

*Select method for VA to respond to this question: - Please Select from the List

*Daytime Phone: - Please Select from the List

E-Mail
Telephone
*Street: US Mail

*City:

*State: - Please Select from the List

*ZIP/Postal Code:

*Country: - Please Select from the List

*Are you the Veteran?

Yes

No (Please complete the Veteran information below so that we can associate your information with your records and provide a response as quickly as possible.)

Done Local intranet 100%

Ask a Question - Windows Internet Explorer

https://iris.va.gov/scripts/iris.cfg/php.exe/enduser/vet_submit.php

File Edit View Favorites Tools Help

Ask a Question Home Feeds (1) Print Page Tools

*How would you like your question answered?

Note: Please remember, the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and VA privacy regulations do not permit us to return information containing personal identifiers or medical data via electronic messaging. That type of information will be transmitted via telephone or regular mail.

*Select method for VA to respond to this question:

*Daytime Phone:

*Street:

*City:

*State:

*ZIP/Postal Code:

*Country:

*Are you the Veteran?

Yes

No (Please complete the Veteran information below so that we can associate your information with your records and provide a response as quickly as possible.)

Veteran Information

Done Local intranet 100%

as possible.)

Veteran Information

(The following information is **optional** if the question is about benefits in general. **All** the following information is **required** if your question is asking for any information about an existing benefits claim other than the amount of benefits.)

First Name:

Middle Initial:

Last Name:

Street:

City:

State:

ZIP/Postal Code:

Country:

CCI Vet ID (For VA special project use only): [Privacy Act](#)

Social Security Number (Provide SSN XXX-XX-XXXX if this is your service number/claim number or only if material to your inquiry):

[Privacy Act](#)

Date of Birth (MM-DD-YYYY): [Privacy Act](#)

Branch of Service:

Service Number (If different from Social Security Number):

[Privacy Act](#)

[Privacy Act](#)
 Date of Birth (MM-DD-YYYY): [Privacy Act](#)

Branch of Service:
 Service Number (If different from Social Security Number):
 [Privacy Act](#)

Date Entered Active Duty (MM-DD-YYYY): [Privacy Act](#)
 Date Released from Active Duty (MM-DD-YYYY): [Privacy Act](#)

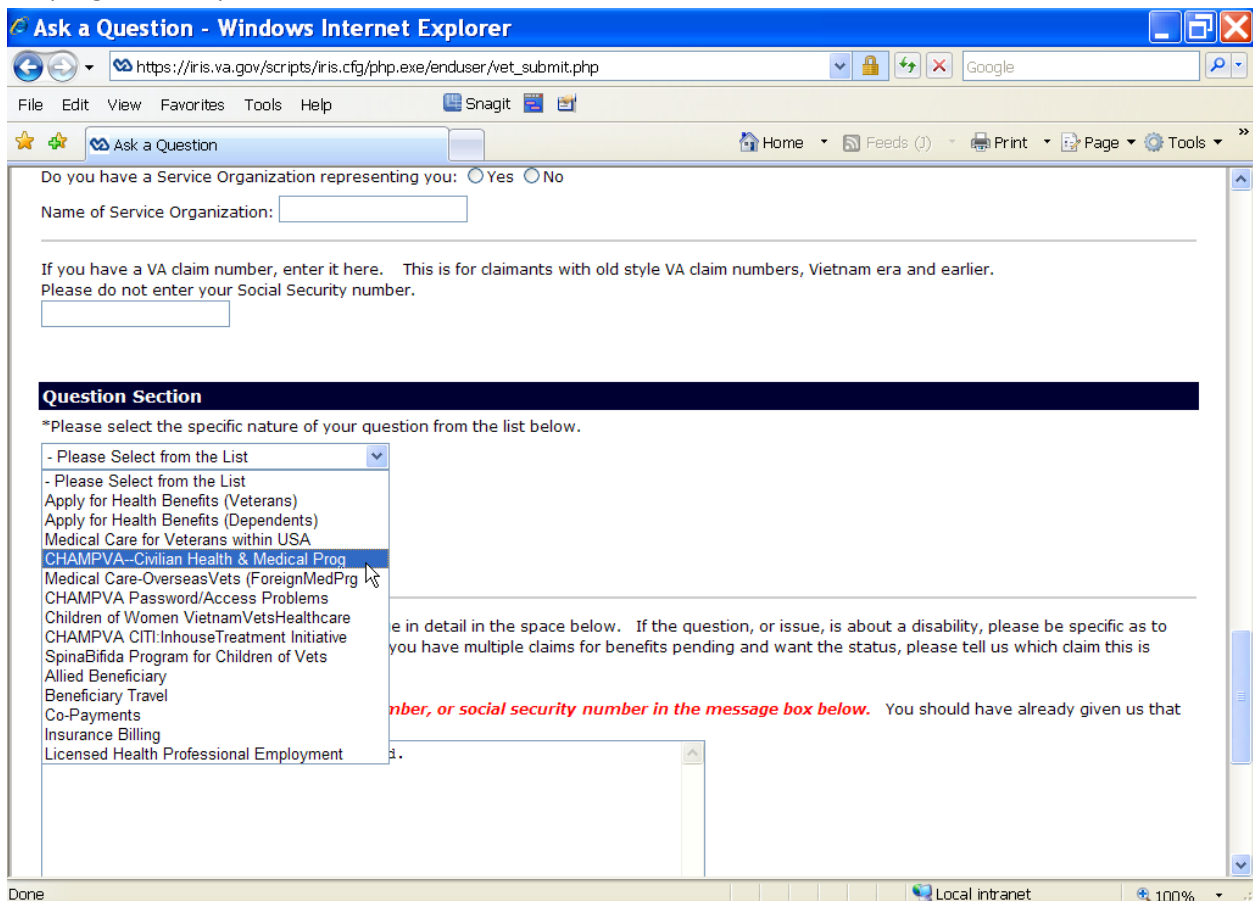
Do you have a Service Organization representing you: Yes No
 Name of Service Organization:

If you have a VA claim number, enter it here. This is for claimants with old style VA claim numbers, Vietnam era and earlier.
 Please do not enter your Social Security number.

Question Section
 *Please select the specific nature of your question from the list below.

*Is this question regarding:

7) From the drop down on "Please select the specific nature of your question from the list below" Choose the program this question is related to, in most cases it will be CHAMPVA.



8) Enter your question with as much detail as possible in the field shown below. Then click the "Submit" button.

is this question regarding:

- Please Select from the List

Please ask your question or describe the issue in detail in the space below. If the question, or issue, is about a disability, please be specific as to the type of disability(ies) or the issue(s). If you have multiple claims for benefits pending and want the status, please tell us which claim this is about.

Please do not re-enter your name, file number, or social security number in the message box below. You should have already given us that information in the form above.

This is where my questions goes.

Please click on the "Submit" button **JUST ONE TIME**. There may be a delay as long as 25 seconds while your information is routed electronically to the appropriate office. Again, please **click only once**. Processing is complete when your screen changes to an acknowledgement from VA that your message has been received.

Submit

VA Form 0873
DEC2005

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9) You will receive a confirmation that your message has been sent with a reference number assigned to your inquiry.

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Inquiry Routing & Information System (IRIS)

Contact the VA Home | Frequently Asked Questions (FAQs) | Ask a Question | FAQ Help

Your Message has been Received

Hello,

This confirms receipt of the electronic message you just sent to the Department of Veterans Affairs (VA). The reference number for your question is **100714-000924**. You should also receive an e-mail message confirming the office to which your message was routed.

You should expect a response within 5 workdays.

PLEASE NOTE: This is not an emergency contact system. If you need emergency medical care, please call 911 or go to your nearest VA medical center. If you need to speak to a professional emergency crisis counselor, please contact VA's Suicide Hotline at 1-800-273-TALK. Counselors are available 24/7 at this number.