

**WHITE PAPER JUSTIFICATION
NON-SUBSTANTIVE CHANGE REQUEST**

OMB Control Number 2900-0091

**VA Health Benefits: Application, Update, Hardship Determination
VA Form 10-10EZR**

Submitted: April 2026

Summary of Request: VHA is submitting this non-substantive change request for a revision to VA Form 10-10EZR – Health Benefits Update Form.

Description of Changes Requested: This request adds a Race/Ethnicity field to VA Form 10-10EZR, as described below, to match VA Form 10-10EZ and allow enrollees to provide edits to this information. There is no impact to the burden hours for this collection as a result of this change.

Description of Changes:

Form	Type of Change	Question/Item	Requested Change
10-10EZR	Revision	Section I, Field 4	Add new field, with all options, to match the 10-10EZ form: WHAT IS YOUR RACE/ETHNICITY?