The VA Claims Backlog Working Group

2015 Report

Table of Contents

Statement of Purpose 1
Working Group Solutions Implemented by the VA and Congress 3
What Impact Does the Backlog Have on Veterans? 6
The History of the VA Backlog 7
An Analysis of the VA Claims Process 10
The VA's Current Strategic Plan 15
The Process Needs More than What the VA Is Doing 19
Initiative #1 – Improve Claims Submission 21
Initiative #2 – Reform VA and VARO Practices 24
- PERSONNEL AND MANAGEMENT 24
- EFFICIENCY 26
- TRANSPARENCY 29

Initiative #3 – Government Must 31
Glossary 33
Appendix 37
Acronyms 42
Citations 43

Statement of Purpose

Since its inception in 1930, the Department of Veterans Affairs (VA) has existed not only to serve the needs of Veterans, but to keep a longstanding promise our nation made to care for our men and women in uniform when they return home.

Part of this critical mission is to provide compensation for those who have suffered the visible and invisible injuries of war. However, nearly 188,000 men and women who sacrificed on behalf of America are still waiting more than 125 days to receive a decision on their disability claim. While the injuries range from knee problems to limb loss to post-traumatic stress, these issues can have a far-reaching and serious impact on the quality of life of each Veteran.

Recognizing the urgency of this issue and the need for action, we formed the VA Claims Backlog Working Group and released a report in March 2014 to provide a better understanding of the VA claims process, outline the history of the backlog, and recommend legislative solutions to bring the system into the 21st century.

Since the introduction of the VA Claims Backlog Working Group's 2014 Report, the VA and Congress have implemented many of the recommendations proposed in the report and the legislation we introduced. However, more changes are needed to create a system that can withstand surges in claims without generating another backlog in the future.

We have issued this follow-up report to identify the progress that has been made on the claims backlog since 2014, which Working Group recommendations have been implemented by the VA and Congress, and what actions must still be taken to fully transition the VA to a 21st century benefits delivery system.

Just as Congress acted last year to address the VA's health care failures, Congress must act to fix the claims backlog.

The current process has failed for more than two decades due to an outdated system. Since at least 1993, the VA has underperformed in its duties to provide timely and accurate disability compensation claims for Veterans.

Numerous Office of Inspector General (OIG) reports, government accountability reports, and hearings in the Veterans' Affairs Committees in the Senate and House of Representatives have examined ways to address this inefficiency.

However, the VA continues to see the backlog rise every few years because the claims process is currently not structured to handle a surge of filed claims. Also, according to the VA, the influx of disability claims will continue to increase as more than one million servicemembers will transition from active duty over the next four years. Therefore, substantive, legislative proposals to reform the process are needed to help the VA modernize its system.

Under Secretary Robert McDonald's leadership, there is a renewed opportunity to examine the claims process and make changes that will serve the best interests of our nation's Veterans.

The challenges facing the VA are enormous, and promises of reform must be met with action. That is why the Working Group has issued this new report and our legislation and remains committed to working in conjunction with Veterans, the VA, and Veterans Service Organizations (VSOs) to help the VA make progress until our nation can guarantee that every Veteran has their disability claim adjudicated accurately and efficiently.

This new report provides a platform to discuss progress on the backlog, underscores previous recommendations from the Working Group, addresses issues where we see more work needed, and highlights the collaborative effort to achieve our goal of reducing the backlog.

Veterans and their families have made tremendous sacrifices for their country. We need to move the process into the 21st century to ensure that Veterans and their families are receiving the care and service they deserve.

Sincerely,

DEAN HELLER, Co-Chair
U.S. Senator

ROBERT P. CASEY, JR., Co-Chair
U.S. Senator

JERRY MORAN
U.S. Senator

JOE MANCHIN III
U.S. Senator

PAT TOOMEY
U.S. Senator

MARTIN HEINRICH
U.S. Senator

DAVID VITTER
U.S. Senator

JON TESTER
U.S. Senator

SUSAN M. COLLINS
U.S. Senator

Working Group Solutions Implemented by the VA and Congress

Since the introduction of the VA Claims Backlog Working Group's Report in March 2014, the VA and Congress have implemented many of the recommendations proposed in the report and the 21st Century Veterans Benefits Delivery Act. While many process reforms still need to be made, we are encouraged to see the VA working to implement some of these commonsense proposals and pleased Congress also enacted several recommendations.

Recommendation: Encourage forms for VA claims—The VA will encourage claimants to file using applicable VA forms for all types of claims. (Page 20 of March 2014 Report)

VA Action: On September 24, 2014, the VA announced that it will implement a new standardized form process for Veterans submitting a disability claim or appeal.

In order to reduce paperwork, accelerate the claims process, and ensure claimants have a fair effective date, the VA developed a standards "Intent to File Form" (VA Form 21-0966) to establish the claimant's effective date. After completing the Intent to File form, the claimant has one year to submit a formal claim with supporting evidence. The VA intends for this process to go into effect in late March 2015 following an open comment period.

Working Group Perspective: The Working Group is encouraged that the VA considered this recommendation and developed a solution that intends to protect the effective date for Veterans. However, the Working Group urges the VA to ensure that Veterans and stakeholders are consulted. It is crucial the VA work to ensure that implementation of these forms is efficient and fair and that Veterans and VSOs are made fully aware of this new process and have every resource necessary to complete the standardized forms.

Recommendation: Require the Veterans Benefits Administration (VBA) to implement the Houston pilot program regarding Notice of Disagreement (NOD) forms across all VAROs. (Page 22 of March 2014 Report)

VA Action: As part of VA's new standardized form process, the NOD form utilized in the Houston Pilot Program will be available in all VA Regional Offices (VAROs). Veterans will be required to use this form, which simplifies identification and control of appeals and prompts the Veteran to specify what is being appealed or evaluated.

Working Group Perspective: While supportive of the permanent implementation of the Houston Pilot Program in all VAROs, the Working Group did not recommend the VA require Veterans to use the NOD form. However, under the new standardized form process, the VA will now require Veterans who wish to appeal their claims

decision to use this form (VA Form 21-0958).

The Working Group would like to ensure these changes do not negatively impact the safety net that Veterans have when submitting a claim. The VA should work with stakeholders to resolve any concerns associated with this new requirement. The VA should also ensure the NOD is implemented in the best interest of the Veteran and verify the information requested on the form is clear and necessary.

Recommendation: Require the VA to develop a plan and execute a uniform mail processing and scanning system throughout the 56 VAROs no later than a year from the date of the legislation's enactment. The VA will also provide a report to Congress on implementation of this plan. (Page 25-26 of the March 2014 Report)

Congressional Action: In a legislative package (Public Law 113-235) passed at the end of the 113th Congress, a provision was included directing "the VA to develop a plan to execute a uniform mail processing and scanning system throughout all regional offices."

Working Group Perspective: We are pleased Congress has acted on this recommendation, which will help ensure that the VA finally establishes a uniform system that will bring greater accountability to the mail process. However, we remain concerned regarding reports of mail mismanagement in VA facilities. For example, in a July 2014 testimony, Assistant Inspector General for Audits and Evaluations, Linda Halliday, stated that the VA IG continues to receive allegations that staff is shredding or destroying military and returned mail and hiding mail within VA facilities.

Furthermore, at a field hearing in October 2014, Halliday testified that the OIG continued to receive numerous allegations of data manipulation and mail mismanagement, including inappropriately shredding or hiding mail within the VARO.

Recommendation: Require the VA to conduct a study that would analyze and report data regarding the statistical progression of disabilities over time based on the VA's historical data of Veterans' disabilities. (Page 24 of the March 2014 Report)

Congressional Action: In a legislative package (Public Law 113-235) passed at the end of the 113th Congress, a provision was included requiring "the VA to report whether it is feasible to conduct a study to analyze data regarding the statistical progression of disabilities over time and whether this data could be used to more quickly adjudicate claims for increased compensation."

Working Group Perspective: As the VBA implements the Veterans Benefits Management System (VBMS), Congress and the VBA must look for ways to make the claims process more efficient for both Veterans and claims processors under the new automated system. That is why the Working Group would like to see the VA report on the feasibility of this study in a timely manner so that the VA can move forward with gathering this data and determining whether it can be used to adjudicate claims faster in an electronic environment.

Recommendation: Provide a three-year extension and expansion of authority for contract examinations. (Page 25 of the March 2014 Report)

Congressional Action: In a legislative package (Public Law 113-235) passed at the end of the 113th Congress, a provision was included that expanded the contract disability examinations pilot program to additional VAROs and extended authorization of the program.

Working Group Perspective: To establish service connection, some Veterans must receive a disability examination at a VA Medical Center (VAMC). However, this process can take months when VAMCs do not have the resources to handle the number of incoming requests for exams.
That is why the Veterans Benefits Improvement Act (Public Law 104-275) authorized a pilot program to contract out medical disability examinations to private physicians, allowing more examinations to be conducted in a shorter timeframe.

Extending this pilot program ensures that disability exams continue to be completed in a timely manner, especially in locations where the VA may have higher demand for care and lack the facilities or resources to provide these exams quickly. Furthermore, expanding the program authority to additional VAROs will allow more claims processors to benefit from this expedited examination process.

What remains to be accomplished is ensuring non-VA providers' licenses can cross state lines when conducting these disability exams for the VA. This will help facilitate timely exams in areas where there may be a shortage of doctors providing this service for the contractor. This provision has been included in Title II, Section 211 of the legislation.

Recommendation: Require the Department of Defense (DOD) to have the Health Artifact and Image Management Solution (HAIMS) program fully developed and operational for the VA to use within 6 months. If it is not interoperable by this deadline, the DOD will issue a report on the difficulties achieving interoperability.

VA/DOD Action: As a result of this recommendation, which was also filed by Senator Heller as an amendment that was included in the Fiscal Year 2014 National Defense Authorization Act (Public Law 113-66), HAIMS was fully deployed in June 2014. Through HAIMS, the DOD combines and electronically stores a transitioning servicemember's Service Treatment Record (STR), which the VA can request from DOD. As of June 1, 2014, 52,000 STRs for newly separated servicemembers were digitized and put into the HAIMS system. Furthermore, VBA was able to successfully retrieve and import 1,952 of those STRs into VBMS for adjudication.

Working Group Perspective: The working group is encouraged by the process the DOD has made with the functionality of HAIMS in digitizing and storing paper claims. However, the Working Group encourages the DOD and the VA to continue implementing any recommendations that have been provided to them in reports issued by the DOD and VA's Offices of Inspector General to ensure full and proper implementation of HAIMS.

What Impact Does the Backlog Have on Veterans?

The current backlog breaks the sacred oath the United States made to our brave men and women when they joined the military. It is our duty to take care of them if they incur a service-connected disability.

Veterans suffer because of extremely long waits for benefits. For example:

- Because of this backlog, a Marine who lost an eye and use of his right arm and leg from an IED explosion waited more than 18 months for compensation.
- Because of this backlog, a woman who flew a Blackhawk helicopter and was involved in a crash that resulted in a broken back and a spinal fusion was forced to wait more than nine months to be awarded her claim.
- Because of this backlog, a Veteran—who was raising his young daughter, suffered multiple hospitalizations, and could not keep a civilian job due to strain in his back and knees—was forced to wait 284 days for his claim to be approved.

At best, waiting over 125 days for a disability compensation claim to be processed by the VA can be frustrating and tiresome.

At worst, it can devastate a Veteran financially and emotionally.

The people of the United States have always taken care of our Veterans when they come home. This backlog is tantamount to breaking our promise to our nation's Veterans and must come to an end.

The History of the VA Backlog

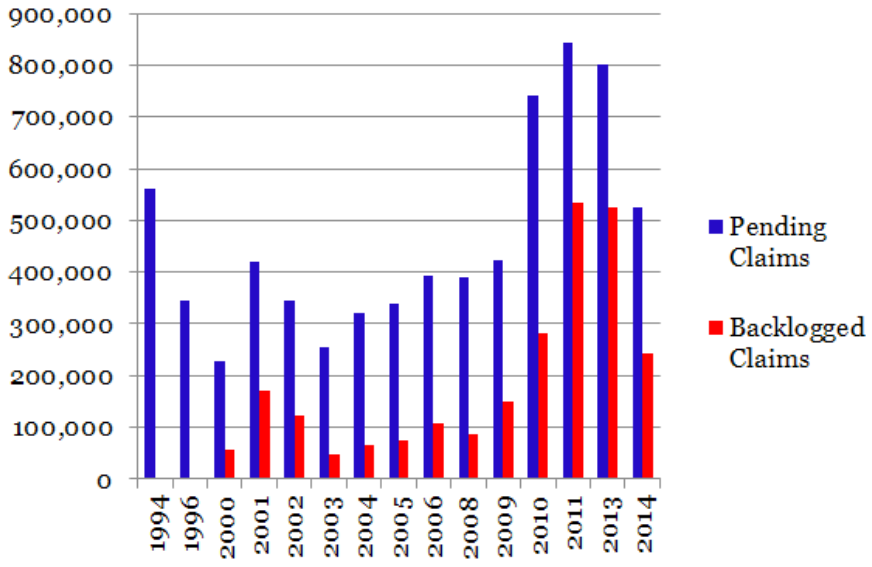
To date, there remain around 461,000 claims that are in the processing phase throughout the 56 VAROs nationwide, and 188,000 of which have been pending more than 125 days.

Since at least 1993, the VA has had hundreds of thousands of rating claims open at one time and has struggled to adjudicate these claims in a timely manner. This struggle was noted in 1993 when the Deputy Undersecretary for Benefits appointed a Blue Ribbon Commission to find ways to make disability decisions more quickly.

Furthermore, in a letter sent on June 17, 1994, to then-Chairman John D. Rockefeller IV of the Senate Veterans' Affairs Committee, Director David Baine of the VA Federal Health Care Delivery Issues Office wrote:

> ***"The Department of Veterans Affairs has recognized slow claims processing and poor customer service as critical concerns. Claims processing times are increasing as are claims backlogs. In 1993, over 500,000 claims were pending in VA regional offices nationwide."***

Since that time, the President, Members of Congress, the VA, and VSOs have worked to eliminate the backlog. While efforts have led to some decreases, the backlog soon returned to an unacceptable level as displayed in the graph below.



The failure to bring the backlog down has been noted by the Government Accountability Office (GAO) numerous times. GAO reported in December of 2005:

> ***"For a number of years, VBA's regional offices have experienced problems processing Veteran's disability compensation and pension claims. As we reported in May 2000, VBA's regional offices still experience problems such as large backlogs of pending claims, lengthy processing times, and questions about consistency of its regional office decisions."***

In February of 2008:

> ***"The VA's inventory of claims awaiting a decision and their average time pending has increased significantly in the last 4 years, in part because of an increase in the number of claims received. The number of pending claims increased by more than 50 percent from the end of fiscal year 2003 to the end of fiscal year 2007 to about 392,000. During the same period, the number of claims pending longer than 6 months more than doubled from about 47,000 to 101,000."***

And again on March 13, 2013:

> ***"In Fiscal Year 2011, VA completed over 1 million compensation ratings claims, a 6 percent increase from fiscal year 2009. However, the number of VA compensation rating claims received had grown 29 percent – from 1,013,712 in FY09 to 1,311,091 in FY11. As a result, the number of backlogged claims – defined as claims awaiting a decision for more than 125 days – has increased since 2009. As of August of 2012, VA had 856,092 pending compensation rating claims of which 568,043 (66 percent) were backlogged."***

Government reports, newspaper articles, Congress, and the Administration have all found different reasons at different times as to why a backlog exists:

1. The Melidosian Commission reported that the 570,000 claims in 1993 were in part due to the "common agreement that claims are much more complex than they were five or ten years ago."[1]

2. In 1994, the Sun-Sentinel published an article citing poor economic conditions for older Veterans that led them to file more claims, which overwhelmed the VA.[2]

3. In 2001, the Veterans Claims Assistance Act of 2000 added steps to the claims process, lengthening the time it takes to develop and decide a claim.[3] Furthermore, the VA Claims Processing Task Force identified an "apparent lack of uniformity in interpreting directives, compliance, and ultimate accountability" at VAROs as contributing to underperformance.[4]

4. In 2004, a September 2003 court decision required more than 62,000 claims to be deferred, many for 90 days or longer.[5]

5. In 2006, *Haas v. Nicholson* (20 Vet. App. 257 (2006)) was adjudicated and broadened the presumption of exposure to herbicides in Vietnam, resulting in additional claims to adjudicate.[6]

6. In 2008, the VA reopened 488,000 claims for disability benefits and the agency changed its rating process for traumatic brain injury.[7]

7. In 2009, Secretary Shinseki changed the definition of the backlog[8] and added B-cell leukemia and ischemic heart disease to diseases associated with Agent Orange.[9]

8. In 2010, the VA saw an increase in claims due to the drawdown in Iraq and Afghanistan.[10]

These examples demonstrate the continuous issues that can arise which will result in a claims backlog. Therefore, Congress must work to restructure the VA claims process such that its system can effectively handle an influx of submitted claims.

An Analysis of the VA Claims Process

The claims process is complex. The VA has a duty to both Veterans and taxpayers to ensure that the correct decision is provided every time. This requires evidence gathering, analysis, and adjudication. The VA breaks down the claims process in the following manner:[11]

Step 1. Claim Received

Your claim has been received by the VA. If you applied online with VONAPP Direct Connect, you should see receipt in your list of Open Claims within one hour. If you applied through the U.S. mail, please allow mailing time plus one week for us to process and record receipt of your claim.

Step 2. Under Review

Your claim has been assigned to a Veterans Service Representative and is being reviewed to determine if additional evidence is needed. If we do not need any additional information, your claim will move directly to the **Preparation for Decision** phase.

Step 3. Gathering of Evidence

The Veterans Service Representative will request evidence from the required sources. Requests for evidence may be made of you, a medical professional, a government agency, or another authority. It is common for claims to return to this phase, should additional evidence be required.

Step 4. Review of Evidence

We have received all needed evidence. If, upon review, it is determined that more evidence is required, the claim will be sent back to the **Gathering of Evidence** phase.

Step 5. Preparation for Decision

The Veterans Service Representative has recommended a decision, and is preparing required documents detailing that decision. If more evidence is required, the claim will be sent back in the process for more information or evidence.

Step 6. Pending Decision Approval

The recommended decision is reviewed, and a final award approval is made. If it is determined that more evidence or information is required, the claim will be sent back in the process for more information or evidence.

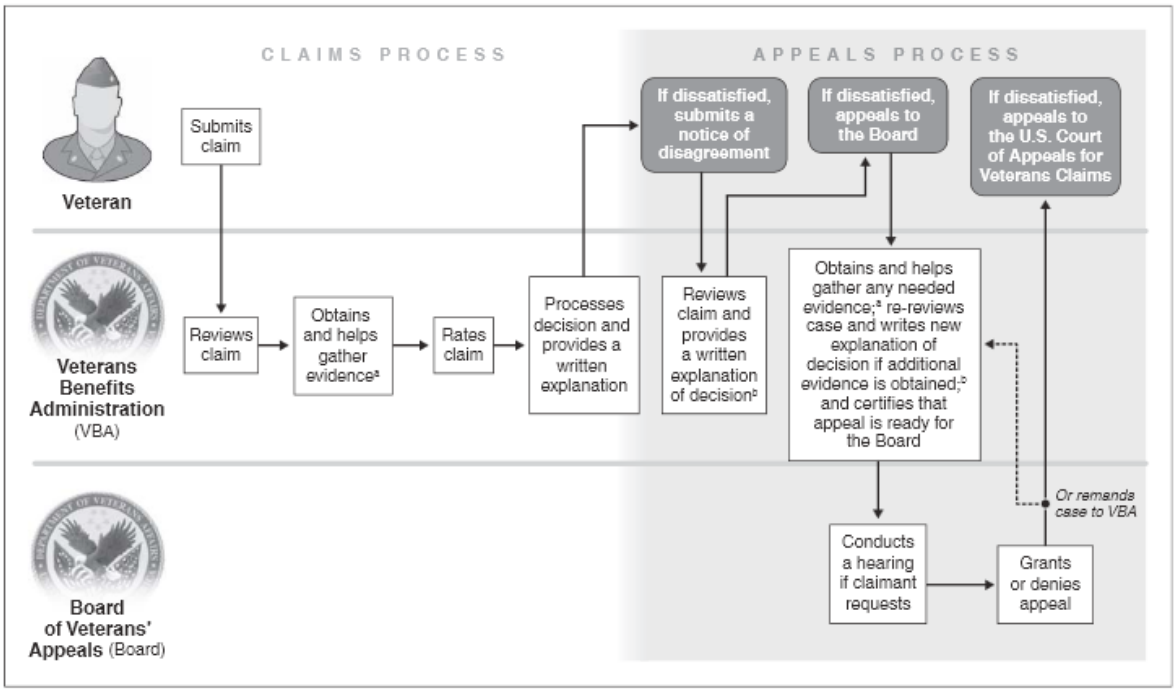
Step7. Preparation for Notification

Your entire claim decision packet is prepared for mailing.

Step 8. Complete

The VA has sent a decision packet to you by U.S. mail. The packet includes details of the decision or award. Please allow standard mailing time for your packet to arrive before contacting a VA call center.

The process is further summarized by the following graphic generated by the GAO.[12]



The VA's overview of the claims process does not offer as broad a picture as the actual experience a Veteran will go through.

The reality is that the claims process starts when an individual joins the United States Armed Forces and ends when the Veteran is satisfied with the compensation and benefits decision by the VA or when they have exhausted the appeals process. For example:

- **Individual joins the U.S. Armed Forces** – Today, the Armed Forces keeps a military STR, which is a chronological record documenting the medical and dental care and treatment received while in the military. The STR may contain a synopsis of any inpatient hospital care or mental health treatment related to the service. All military STR documentation is used by the VA to determine eligibility for service-connected compensation and pension benefits. [13]

  The Official Military Personnel File (OMPF) may also contain a compilation of the servicemember's medical treatment. However, it is not definitive as to which portions this may include.[14]

- **Servicemember decides to leave the Armed Forces** – When servicemembers choose to retire or leave the Armed Forces, they are eligible to apply for compensation for any service-connected disability they have suffered while serving the United States.

- **Transition Assistance Program (TAP)** – Before being discharged, every member of the military must attend TAP, which is offered by each branch of service.[15]

  TAP helps separating servicemembers with searching for civilian employment or with pursuing educational opportunities. However, the VA also has its own curriculum within this program: VA Benefits I and II.

  - VA Benefits I Briefing is four hours and provides information on education, health care, compensation, life insurance, and home loans.[16]

  - VA Benefits II Briefing is two hours and provides information on the services and programs related to VA health care, as well as the VA disability compensation process and how to navigate through eBenefits.[17]

- **Veteran/Servicemember decides to file a claim and seeks assistance** – Veterans and separating servicemembers have a number of options for filing a claim:

  - **Traditional** – Go to a VARO and file a claim.[18]

  - **Benefits Delivery at Discharge (BDD)** – BDD allows a servicemember to submit a claim for disability compensation, either through eBenefits or by mailing it to the nearest VARO, 60 to 180 days prior to discharge.[19]

  - **Quick Start Program** – Quick Start allows a servicemember to submit a claim for disability compensation, either through eBenefits or by mailing it to the nearest VARO, 1 to 59 days prior to discharge.[20]

- **Integrated Disability Evaluation System (IDES)** – If a servicemember is found medically unfit for duty, IDES gives the individual a proposed VA disability rating before leaving service. These ratings are normally based on VA examinations conducted using required IDES examination templates.[21]
- **See a Veteran Service Officer** – VSOs have nationwide networks of skilled Veterans Service Officers who are dedicated to helping Veterans navigate the claims process and act as an advocate on their behalf—all at no cost to the Veteran. VSOs are located in VAROs across the nation and can also provide assistance by phone.[22]
- **Online at eBenefits**– Through eBenefits Veterans Online Application VONAPP, a Veteran can file a claim online by filling out relevant forms on their own and providing the necessary documents. Veterans can also check the status of their online submission using the eBenefits portal, which tracks where the claim is in the process. [23]
- **Fully Developed Claims (FDCs)** – The FDC program is an optional new initiative that the VA offers to speed up the claims process. The individual filing the claim submits all required records and documentation and certifies that there is no further evidence. This allows the VA to process the claim more rapidly. [24]

- **Veteran files a claim** – Once a Veteran chooses one of the above options for filing a claim, the claim will be received in one of the following ways:
  - Online through a web portal.
  - Submitted directly to the VARO in person.
  - Submitted to a Veteran Service Officer, who then submits the claim directly to the VARO.
  - By U.S. mail – Paper claims are collected by mail staff, organized, and sent to the proper location.
- **Veteran receives notification** – Once the VA is in receipt of a claim, the Veteran will receive notification from the VA by mail.
- **Claim goes under review** – The claim is assigned to a VSR, who reviews it to determine if additional evidence or examinations are needed before sending to an RVSR. A VSR needs, at the very least, the following evidence before sending a claim to an RVSR[25]:
  - Discharge or separation papers (DD214 or equivalent).
  - Service Treatment Records, if they are in the Veteran's possession.
  - Medical evidence – This can include private medical evidence from a physician outside the VA.
- **Gathering of evidence** – The VSR will request necessary evidence from the required sources, which may include the Veteran, a medical professional, a government agency, or another authority.

- During this time, the Veteran may be asked to see a doctor for a disability medical examination. The exams requested will depend on the Veteran's claim and treatment history. The VAMC will schedule the exam and will contact the Veteran with the date and type of exam scheduled. Veterans can also opt to see a private physician by using the VA's Disability Benefits Questionnaire (DBQ).[26]

- **Review of evidence** – The VSR reviews the claim to determine if further evidence is required before sending the claim out for a decision. If additional evidence is needed, the claim will go back to the evidence-gathering stage.

- **Preparation for decision** – An RVSR recommends a decision and prepares required documents detailing that decision. If more evidence is required, the claim will be sent back in the process for more information or evidence. Otherwise, the RVSR carefully reviews all the medical evidence, applies the policies set forth in federal regulations to determine entitlement to each issue claimed, and documents the results in a rating decision.[27]

- **Pending decision approval** – The recommended decision is reviewed, and a final award approval is made. If it is determined that more evidence or information is required, the claim will be sent back in the process for more information or evidence.

- **Preparation for Notification** – The entire claim decision packet is prepared for mailing.

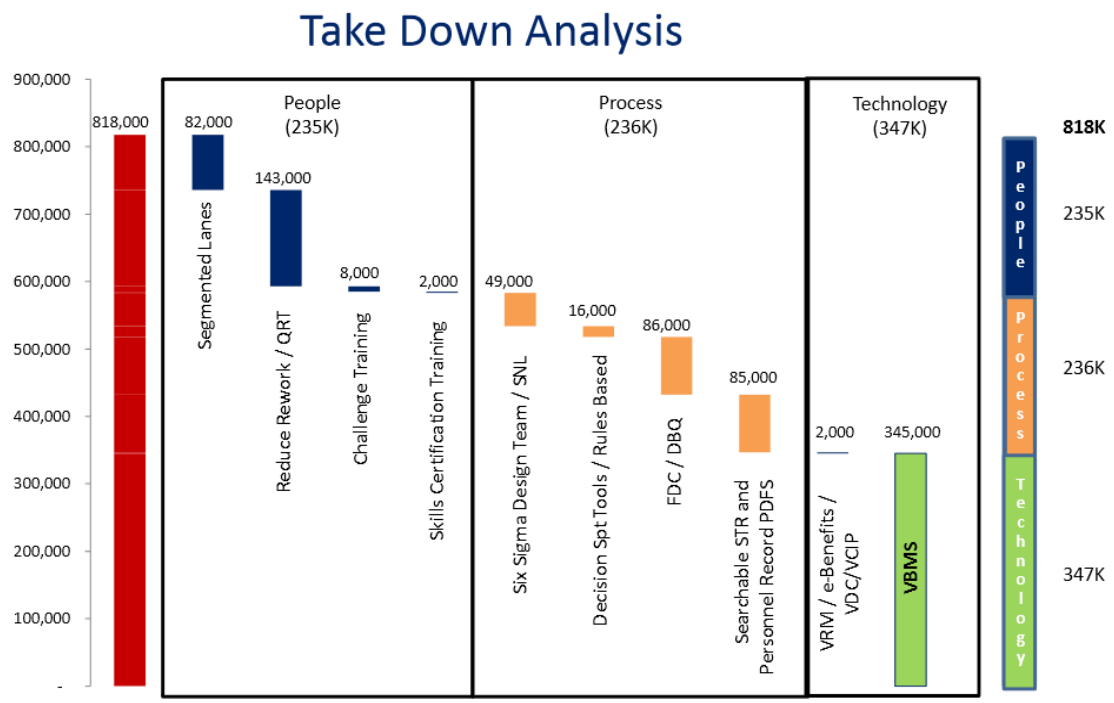
- **Claim is completed** – The VA sends a decision packet by U.S. mail, at which point the Veteran has a year to appeal the decision if they disagree.

- **Veteran chooses to appeal** – If a Veteran disagrees with the decision, they have the option to appeal through a written Notice of Disagreement. If the VA does not agree with the appeal, the Veteran can appeal to the Board of Veterans Appeals, which conducts a hearing and makes a further determination. If the Veteran still disagrees, then the Veteran can appeal to the U.S. Court of Appeals for Veteran Claims, the Court of Appeals for the Federal Circuit and finally the Supreme Court of the United States. As displayed below, the appeals process is its own separate process with a layer of steps.

Given that there are multiple options available for claims submission, as well as hundreds of contentions a Veteran could file for, it is clearly a complex process that will be different for every Veteran. That is why there is no single arrow that will fix the process.

The VA's Current Strategic Plan

Having acknowledged the seriousness of the claims backlog, the VA released the "VA Strategic Plan to Eliminate the Compensation Claims Backlog" in 2013 and provided updated initiatives in its fiscal year 2016 budget request. This plan includes three primary components to reduce the backlog of claims—people, process, and technology. [28] The graph below estimated how the backlog will be impacted by certain initiatives.[29]



People

The VA has faith that its employees, over 50 percent of whom are Veterans, will be able to reduce the backlog if given the proper tools.

- **Establish Segmented Lanes**
    - The VBA established a new standardized organizational model that focuses on case management by separating its workforce into teams that work on one of three segmented lanes: express, special operations, or core. [30]

- Express – Claims that predictably take less time to process will go through the express lane. This is expected to be 30 percent of claims.
- Special Operation – Claims that typically take more time or require special handling will go through the special operations lane. This is expected to be 10 percent of claims.
- Core – All other claims will flow through the core lane, which is expected to be 60 percent of claims.

- **Reduce Rework through Quality Review Teams and Challenge Training**
  - In 2012, the VBA instituted Quality Review Teams (QRTs) to enhance employee accuracy by focusing on improving the most frequent errors that claims processors make. The VBA then addressed those issues during Challenge training to ensure there is less rework of claims.[31] According to the VBA, new employees who received Challenge Training decide 150 percent more claims per day than previous new employees who did not receive Challenge Training.[32]
- **Skills Certification Training**
  - The VBA claims processors go through intensive training and then take a skills certification test demonstrating thorough knowledge of reference materials, computer information systems and codes, the workflow system, and some understanding of the medical and legal requirements to receive compensation.[33]

Process

While VBA employees must have the training and management environment to work effectively, the VBA also analyzed its process to streamline operations and eliminate repetition.

- **Six Sigma Design Team**
  - The VBA established a "Design Team" concept to conduct quick development and testing of process changes. Through pilot programs, the VBA ensures that changes are efficient before implementing across the nation. The FDC Program is an example of one of those successful changes.[34]
- **Decision Support Tools**
  - The VBA has incorporated decision-support tools using evaluation builders and rules-based calculators to increase accuracy and efficiency. This capability is included in VBMS, the electronic claims processing system which is being deployed across the nation's VAROs.[35]
- **Fully Developed Claims and Disability Benefits Questionnaires**
  - Pushing FDCs has been a critical effort for the VBA because these claims have all the necessary federal and personnel records needed to move forward, making it quicker for the claims processor to move forward rather than waiting on federal agencies or a Veteran to deliver additional evidence.

- DBQs are forms that physicians complete during an exam that contain explicit medical information needed to decide a disability compensation claim. The largest area of rework for a claims processor was a lack of data provided by the doctor after an examination. DBQs request the specific information needed so that the Veteran does not have to repeat the process. DBQs are used by private physicians, the VAMCs, and the DOD when issuing exit exams.[36]

- **Searchable Service Treatment Records and Personnel Record PDFs**
  - The DOD and the VA reached an agreement to have the DOD provide 100 percent complete service treatment and personnel records for any departing servicemembers. These records will be provided in an electronic, searchable format, allowing for more claims to be filed as fully developed and reducing the evidence-gathering phase—which can take 60-90 days when the VA must request and wait for records to be transferred.[37]

- **National Work Queue**
  - The National Work Queue is a national workload management strategy that will allow the VBA to distribute claims electronically from a centralized queue based on VARO capacity. According to the FY16 VA budget request, placing claims in the NWQ will automatically direct Veterans' claims "across all ROs to efficiently match claim demand with available expertise and processing capacity regardless of RO jurisdiction, delivering benefits to Veterans more quickly and accurately."[38]

- **Centralized Mail Operations**
  - Consolidating paper mail from VAROs to a "centralized intake site" enhances VBA's "capabilities for scanning and conversion of claims evidence, increases electronic processing capabilities and assists in converting 100 percent of received source materials to electronic format."[39]

- **Social Security Administration (SSA) Government-to-Government Services Online**
  - This initiative is a web-based data exchange tool to enhance collaboration between the VBA and SSA. This nationwide exchange includes approximately 6,000 participating VBA users. VBA employees receive medical records as PDFs "through a secure date exchange to expedite the upload to the electronic claims folder." According to the VA, the average wait time for a response is eight days.[40]

- **Private Medical Records (PMR) Program**
  - Through this program, contractors can contact private health care providers to obtain medical records. They can also upload the results of their requests to the VBA's system. According to the VA, the VBA received responses to more than 136,000 requests for medical records through this program. Their goal is to have the PMR program nationally throughout the VBA in 2015.[41]

Technology

The VBA had been using an outdated process that is paper-intensive and time consuming. The VBA is in the process of deploying technology that will "improve access, drive automation, reduce variance, and enable faster and more efficient operations."

- **Veterans Benefits Management System**
  - VBMS is a web-based, electronic claims processing solution that will serve as the VBA's technology platform for claims processing. Many of the initiatives mentioned above go hand-in-hand with VBMS's electronic format as the VBA transitions to a paperless environment that is more accurate, efficient, and results in a quicker decision.[42]
- **Online Portal—eBenefits**
  - To complement the VBA's implementation of VBMS, the DOD and the VA created a shared self-service portal called eBenefits that will allow Veterans to file a claim online and scan in all needed evidence. This program also gives the Veteran information about where the claim is in the process.[43]
- **Veterans Claims Intake Program (VCIP)**
  - As VBMS is implemented across the nation, it is important that the VA scan all existing and future documents since the new system is paperless. The VCIP focuses on scanning and transferring Veteran data into VBMS.[44]
- **Veterans Relationship Management (VRM)**
  - This new model is designed to help facilitate a more Veteran-centric digital operating environment by providing a "scalable, enterprise-wide, services-based technology environment that will be the foundation for how Veterans are served and how benefits and services are delivered."[45]
- **Rules Based Processing System**
  - This initiative allows for automated rules-based adjustments of compensation awards based on dependency changes.[46]

The Process Needs More than What the VA Is Doing

The current VA initiatives are necessary changes, but we also recognize that more must be done beyond these efforts.

That is why we propose the following three recommendations that aim to support the Veteran, improve the claims process, and involve an across-the-board government approach to ending the backlog.

1. Veterans must be given every tool they need to understand the claims process and what they can do to provide information that the VBA needs by law to process the claim efficiently and accurately.

   The Veteran must always have the safety net that Congress has rightfully provided for Veterans who need additional assistance from the VA. However, if Veterans can provide the necessary information when initially filing a claim, they can be awarded what they have earned in a timelier manner.

   To accomplish this, the following needs to occur:

   - Provide better education to Veterans and servicemembers on filing a claim;
   - Ensure direct access to VSOs to assist Veterans.

2. The VBA and VAROs must make structural changes to ensure claims are being processed quickly, particularly as the VBA transitions to an electronic claims processing environment. The Backlog Working Group believes the workforce at each VARO is capable of tackling this enormous task, provided they have the resources and guidance that is consistent throughout the VBA.

   The VBA must make structural changes that increase accuracy and efficiency in the following ways:

   - Ensure accountability and oversight of VARO management;
   - Provide resources to VBA employees and implement process changes that allow claims processers to efficiently move claims through the benefits awards structure;
   - Improve the transparency to the public on the size and scope of the current backlog.

3. The federal government, across-the-board, must make Veteran benefits claims a priority. Files at other departments within the VA or at outside agencies are targeted as a reason for delays in the claims process. The VA is trying to become a 21st century benefits delivery service for our Veterans, but they cannot award claims when lacking critical evidence.

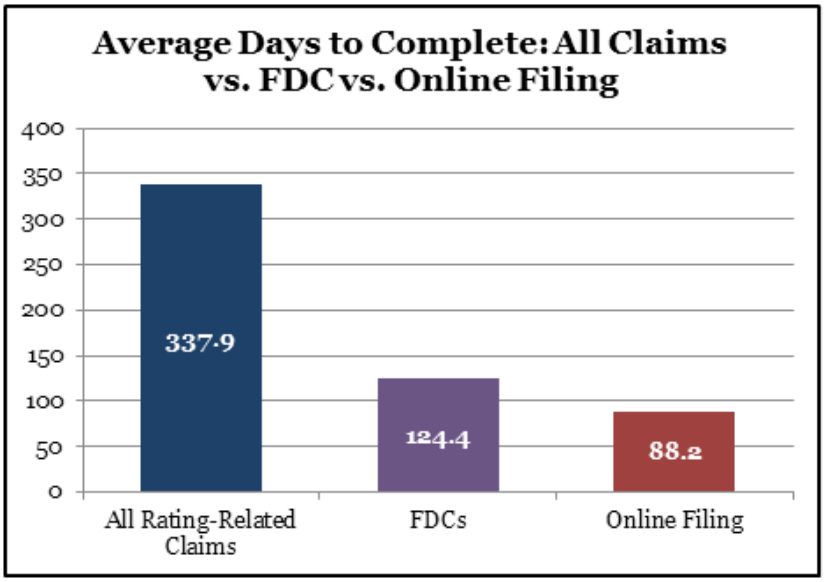
In order to gain necessary evidence to process claims, the VA and outside agencies must do the following:

- Demand more from federal agencies to transfer requested information;
- Ensure VBA employees process information they receive from these agencies in a timely fashion.

Focusing on these goals, in addition to what the VA is doing, will help to provide a system that is accurate and efficient and can work to stop the backlog from growing in the future.

Initiative #1 – Improve Claims Submission

We believe if Veterans are better prepared to submit a claim, the wait time will decrease. The chart below shows the average days the VBA takes to complete a claim. As of March 2015, claims that were not fully developed took on average 200 more days to complete than FDCs.[47]



*Data provided by the VBA—based on Average Days to Complete, fiscal year to date thru June 30, 2013.[48]

It must be noted that developing a claim takes time because Congress and the courts have increased the obligations the VA must fulfill when assisting a Veteran with a claim.

For example, when Congress passed the Veterans Claims Assistance Act (VCAA) of 2000 (Public Law 106-475), which requires the VA to assist Veterans in obtaining evidence needed to decide a claim, it enacted a landmark change in the way the VA handles claims.[49]

Subsequent court decisions handed down by the U.S. Court of Appeals for Veterans Claims and the U.S. Court of Appeals for the Federal Circuit also interpreted the VCAA's obligations upon the VA. In response, the VA implemented internal policies to meet those obligations.[50]

Prior to the VCAA passing, the VA had a policy in place to assist a claimant in developing the facts relevant to the claim and gathering evidence in favor of the claim. Today, codified into law are the VA's responsibilities, such

as obtaining relevant records from any federal agency, including the DOD, VAMCs, and the SSA.

Further, the VA must provide a medical examination or obtain a medical opinion if it is determined necessary to decide the claim. The claimant's responsibility is to identify and obtain, if possible, relevant records not held by a federal agency, including state and local governments, private doctors or hospitals, and former employers. The VA also assists in obtaining these records.[51]

It is critically important that the VA should work to help every Veteran, and the Working Group is not proposing a change to any current law in this regard. However, it must be understood by all involved parties that while the VA should adhere to the VCAA and assist Veterans in obtaining necessary records and evidence, the process has the potential to be cumbersome and lengthy.

That is why the following proposals encourage, assist, and educate Veterans on the benefits of submitting a completed claim when possible without removing the safety net that is available to Veterans should they choose to submit a claim and opt to allow the VA to collect evidence on their behalf.

Access to Claims Submission Information

- Extension of TAP: This proposal requires the VA and the DOD to make the program curriculum accessible to a Veteran through eBenefits.
    - *Justification: Not all Veterans apply for VA benefits upon leaving active duty. Veterans who wait years to apply for benefits may no longer have information they initially received, such as the Transition Assistance Program Participant Guide Benefits Curriculum. Ensuring Veterans can access this information at a later time on eBenefits will allow them to revisit the information and resources previously offered.*

VSO Attendance at TAP Seminars

On December 23, 2014, former Defense Secretary Chuck Hagel issued a policy memo on the subject of "Installation Access and Support Services to VA-Recognized Veteran Service Organizations/Military Service Organizations." This memo highlights the importance of the relationship and collaboration between the DOD and Veteran and military service organizations in providing our servicemembers with the best information available as they are transitioning to civilian life. Specifically, it states: "It is in the best interest of the DOD to maintain strong relationships with national VSOs/ [Military Service Organizations] MSOs approved and recognized by the Secretary of Veterans Affairs for the preparation, presentation, and prosecution of VA claims."[52]

Often this support can assist servicemembers file or begin the disability claims process when they are preparing to discharge from the U.S. military. As former Secretary Hagel's memo encourages greater access to VSOs on military bases, there will be more opportunities for coordination with VSO officers for filing claims. Such coordination can include the TAP seminars that servicemembers are required to attend before discharging.

- **Encourage the DOD to establish a process to allow VSOs to participate in and attend the TAP seminars related to filing a VA disability claim.**
    - *Justification: An important aspect of the TAP seminar is the portion covering the claims process; however, VSOs are not always present during each seminar. VSOs can help by providing valuable information about the claims process to servicemembers who are preparing to retire from the military. The Working Group believes that a VSO officer being present to provide information and answer questions at TAP seminars will help ensure that servicemembers are well informed and positioned to submit an FDC.*

Appeals Submission

When a Veteran disagrees with the decision regarding a claim, he or she can submit a written Notice of Disagreement to the VARO handling the claim. The VBA will review the case, and a Decision Review Officer (DRO) provides the Veteran with a written explanation of the decision or grants the appealed issues. If the Veteran further disagrees with the decision, he or she may appeal to the Board of Veterans' Appeals.

Many Veterans wait years to receive a decision on an appealed claim—far longer than Veterans who are filing an initial claim. Congress's 2003 mandate (Sec. 707, Public Law 108-183) requires that appeals remanded to a VARO be expedited; yet, there are more than a quarter of a million Veterans stuck in the appeals process.[53] These claims cannot be ignored.

- Notice of Disagreement Filing Period: Encourage Veterans to file an appeal, if desired, within 180 days following the issuance of a rating decision.
    - *Justification: It is important that the Veteran has the full year to submit an appeal; however, submitting an appeal sooner will ensure that evidence remains up-to-date so the appeal can be processed quickly and exams do not have to be rescheduled.*
- Require the VA to determine and schedule the most expeditious type of hearing to afford an appellant (i.e. an in-person hearing or a video conference hearing), but allow appellants to request alternate hearing options.
    - *Justification: Allowing the Board of Veterans' Appeals to schedule the most expeditious type of hearing will ensure the best time management and use of resources, which will allow the appeals process to move forward in a timely manner for each Veteran. However, it is also important that Veterans have the option to schedule a different type of hearing available if they choose.*

Initiative #2 – Reform VA and VARO Practices

PERSONNEL AND MANAGEMENT

In addition to improving claims submission, personnel and management must be given tools to perform efficiently. VSRs, RVSRs, and DROs have a unique skill set that requires extensive training to obtain. Good management and proper employee support will ensure that quality personnel are retained. Creating an efficient work environment requires consistent management practices, as well as accountability at all levels.

When analyzing the pending and backlogged claims across the 56 VAROs, it is apparent that there are differences in output and success at each VARO. Below are the top ten best and worst VAROs as of April 6, 2015, based on the average days it took to complete claims fiscal year to date (FYTD).

Ten Best VAROs	Avg. Days to Complete - FYTD
Providence	60.4
Fort Harrison	103.9
Lincoln	118.8
Togus	121.3
Cheyenne	138.2
Fargo	141.1
Seattle	142.7
Sioux Falls	147.4
Salt Lake City	148.3
Boise	151.1

Ten Worst VAROs	Avg. Days to Complete - FYTD
Baltimore	280.6
Jackson	270.8
Reno	257.9
Philadelphia	249.7
Los Angeles	244.7
Chicago	244.1
Oakland	240.5
Indianapolis	236.7
Boston	235.1
St. Petersburg	231.2

The Working Group asked whether the differences in average number of days to complete claims are a result of the location of the VARO, the resources provided to that particular VARO, or the management of the VARO. During Working Group meetings and the Roundtable in September 2014, it was clear that improvements to management are needed. However, it is also necessary to conduct a thorough analysis of the current state of management at VAROs to offer more specific solutions for the future.

Analyze VBA Management

- Require GAO to analyze the VA's 56 regional offices in order to identify ways to achieve more consistent performance in Veterans' disability claims processing. Specifically, the GAO will identify the factors, including management practices, which appear to distinguish the higher performing regional offices from other regional offices. As part of this analysis, the GAO will identify possible lessons learned that the VA Secretary could use to achieve improvement.
    - *Justification: This review by GAO will answer questions that existing GAO, IG, and Commission reports have not been able to answer. Having a good management team can impact work environment, productivity, accountability, the employee support system, and retention of quality employees—all of which are key factors to reducing the claims backlog. Comparing the higher performing regional offices will help determine if there are practices that should be implemented nationwide to create more efficiency for claims processors.*

Improve Training Programs

Efficient and consistent management is an important step in eliminating the disability claims backlog. In every VARO, the Veterans Service Center Managers (VSCM) plays a critical leadership role in the delivery of benefits and the provision of quality service to Veterans. They must also coordinate their activities with other divisions within the VARO and keep the VARO director informed.

- Require the VBA to establish a management training program specifically for VSCMs.
    - *Justification: During the VA Backlog Working Group Roundtable in September 2014, stakeholders identified a lack of effective training programs as a concern.[54] Poor management was also cited as a specific issue contributing to claims delays in the VA IG's report about the Reno VARO.[55] Given that every VSCM may not have experience in other critical leadership positions within the VARO, the Working Group believes that a management program designed specifically for VSCMs will give these individuals the tools and training needed to effectively provide oversight and perform their duties.*

Enhance Management's Communication

Critical to the success of a VARO is how well it is operated by management, which is why VAROs are expected to complete Systematic Analyses of Operations (SAOs). As described best by the VA's Office of Inspector General:

> "An SAO is a formal analysis of an organizational element or operational function. SAOs provide an organized means of reviewing VSC operations to identify existing or potential problems and to propose corrective actions. VARO management must prepare annual SAO schedules designating the staff required to complete the SAOs by specific dates. The VSCM is responsible for ongoing analysis of VSC operations, including completing 11 SAOs annually."[56]

- Include an SAO for communication with VSOs in each VARO, as well as Congressional caseworkers in the VARO's jurisdiction.
    - *Justification: An additional SAO should be implemented to analyze the communication with and responsiveness to VSOs and Congressional caseworkers, as well as their access to VARO staff. Given that VSOs and Congressional staff are advocating on behalf of the Veteran, it is essential that the VARO maintains a productive working relationship with these stakeholders. An SAO examining these factors will ensure VSCMs are focused on enhancing and improving these critical relationships.*

EFFICIENCY

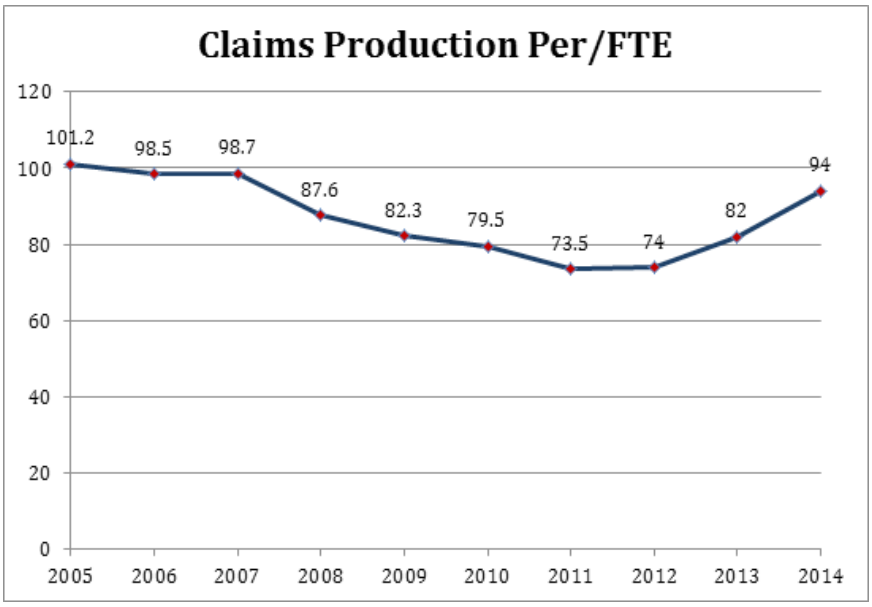
As the VBA transitions into a 21st century benefits delivery system, many of the practices used by the VBA and its management remain outdated. Improving, simplifying, and streamlining these practices will help claims processors with the challenges they face that lead to a backlogged claim. The following recommendations target the inefficiencies the Working Group has identified.

Suspense Dates

- Require the VA IG to review the process and utilization of "Suspense Dates" to determine if VAROs need additional VSRs to handle the massive amounts of critical evidence received every day and to determine whether it is advisable to restrict the ability to extend Suspense Dates, with permissions only granted due to claims that have higher priority.
    - *Justification: The VBA utilizes "Suspense Dates" to set incremental deadlines for a VA disability claim as it flows through the claims process. Because of the daily, sometimes multiple, priorities that are sent to the VAROs from the VA Central Business Office, as suspense dates are triggered, often they are extended until months have passed. The VA's IG should review the utilization of suspense dates, determine the frequency of suspense dates being extended, and provide recommendations for utilization of suspense dates. If Coaches are restricted on the number of times a suspense date is extended, the flow of a claim should move through the process more expeditiously.*[57]

Ensuring Proper Allocation of Resources

Based on data between 2005 and 2014, the VA experienced an increase in the receipt of claims, the year-end inventory, production, and the number of employees it hired. Yet, regardless of the increase in labor, the production per full-time employee (FTE) decreased from 101.2 claims per FTE to 74 claims per FTE by 2012.



*This data is based on VBA disability determination workload (all rating related claims with the combined totals for C&P and DIC claims)

Recognizing that claims are more complex and employees have a learning curve of two years[58], the Working Group must understand what the expected output should be given the current claims processing environment. Understanding the expected output of a FTE will allow the VBA and Congress to determine the appropriate resources to put towards claims processing and how to measure the success of VSRs and RVSRs. Furthermore, an established Resource Allocation Model will also help Congress as it seeks to provide resources to the VA.

- Require the VBA to provide a report on an annual basis that calculates the number of claims open at the VBA, the number of FTEs, and the expected average output over the course of the year to determine whether the VBA has adequate workforce to reduce backlogged claims while also performing regular VBA duties. The report shall include a justification of whether the VBA needs to increase or adjust the workforce to meet the needs of incoming Veterans' claims over the next 1, 5 and 10 years.
    - *Justification: Combining the current inventory with estimates of the next year's receipts and utilizing the prior year's "Production per FTE" will allow the VA and Congress to determine how many VSRs and RVSRs are needed to process claims without having to draw from other areas such as appeals. The VBA cannot continue to wait for the backlog to grow and then address the fact that it is under-resourced. The VBA should be predicting its incoming claim numbers and acting pre-emptively to ensure claims do not fall into the backlog as a result of under-staffing.*
- Require VBA to complete its revised Resource Allocation Model within six months.
    - *Justification: Staffing decisions within regional offices rely on the VBA's resource allocation model, which considers the number of current pending disability claims, the receipt of new claims, the current backlog, and the differing tasks of each office.[59] As the VBA transforms into a 21st Century*

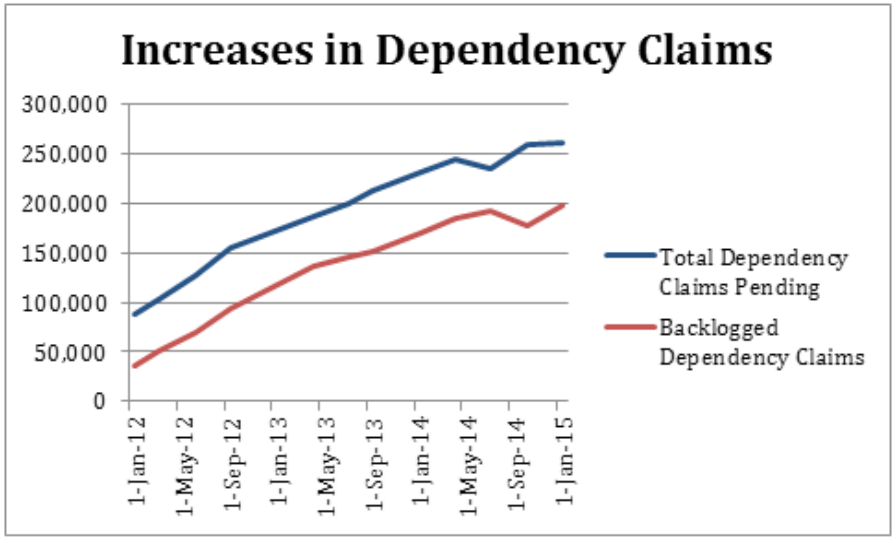
electronic system, its resource allocation model must be completed so Congress can take action to provide VBA with the appropriate tools and resources.

Progress of Veterans Benefits Management System

VBMS is one of the main pillars of the VBA's transformation plan that is a necessary step to speed up claims processing long term. However, VBMS has not been fully implemented across all the VAROs[60], and some recommendations in this report are dependent upon the VBA utilizing VBMS and embracing the paperless system.

- Require the VA to report to Congress every six months on VBMS, which must include comments and recommendations for improvement from claims processors at the VAROs and Veteran Service Officers utilizing the system.
    - *Justification: As part of Congress's oversight responsibilities, Members need to know when to expect VBMS to be fully functional, especially since the VA Secretary has set a target date of 2015 for all backlogged claims to be eliminated. Furthermore, input from VSRs, RVSRs, and DROs will determine whether VBMS is functional and adaptable to the needs of claims processors.*

Addressing Certain Non-Rating Related Claims



- Require the VA to report on its plan to reduce the inventory of dependency and other non-rating related claims.

- *Justification: As the VBA has focused on reducing the disability claims backlog, the number of dependency and non-rating related claims has increased. Although the VBA is taking steps to improve the processing of non-rating related claims, the graph above shows that there has been decreased focus on addressing these types of claims in light of the push to reduce the disability claims backlog. That is why a plan is needed to demonstrate to Congress how the VBA will address this rising workload while simultaneously handling the continued influx of rating-related disability claims.*

TRANSPARENCY

As part of the VA's Transparency Program, the VBA issues a Monday Morning Workload Report (MMWR) each week. This MMWR is a compilation of performance measures for the processing of disability, pension, and education benefits. The report measures statistics such as the number of pending and backlogged claims that are under VBA's jurisdiction, as well as accuracy measurements on claim decisions.

To ensure accountability, the Working Group generated the following recommendations regarding information and statistics that should be included in the MMWR to keep Congress, the VSOs, and the public fully aware of VA's progress and efforts with the claims backlog.

- Include in the MMWR the number of claims that received a partial rating in both the "Transformation" and "Aggregate" sections of the report.
  - *Justification: A partial rating grants one of the conditions a Veteran files for, but not the rest of the conditions. Partial ratings are utilized in cases in which the condition can be quickly granted and all the necessary evidence is available. This allows the Veteran to start receiving benefits although the full claim is not completed. Granting partial ratings has been a policy utilized and encouraged by the VA, but its implementation in VAROs has not been tracked. Including this information in the MMWR would shine a spotlight on which VAROs are granting partial ratings so that managers and supervisors, as well as Congress, can ensure this policy is being implemented by VSRs and RVSRs.*
- Include in the MMWR "Transformation" section two additional "bundles": (1) a bundle that adds up the number of pending and backlogged non-rating-related claims; (2) a bundle that adds up all non-rating and rating-related claims pending and backlogged.
  - *Justification: Currently, the MMWR defines the pending claims and backlog only as it relates to rating-related claims. However, the workload of the VAROs is not limited to these particular claims. There are hundreds of thousands of other claims that must be processed—such as educational or dependency. When analyzing the backlog, policymakers, VSOs, and the public need a full understanding of the workload that VAROs are handling. While these numbers are included in the workload report, they are not added up to paint a complete picture.*
- Include in the MMWR a section on percentage of FDCs in the system and the average days pending by VARO.

- *Justification: This information will allow policymakers, VSOs, and the public to understand how quickly an FDC is processed on average to demonstrate the effectiveness of filing an FDC. Furthermore, it will bring greater transparency to the success each VARO is experiencing with the FDC program.*

- Allow public access to the appeals reports entitled "Appeals Pending" and "Appeals Work By Station." Include in one of the reports the percentage of appeals granted by station.

  - *Justification: Policymakers, VSOs, and the public should have an understanding of how many appeals are pending in each phase of the appeals process to determine if a specific part of the appeals process should be fixed or receive better oversight by managers. Furthermore, understanding the percentage of appeals granted by station, over time, will highlight any discrepancies in how appeals are being awarded across the country.*

Initiative #3 – Government Must Make VA Claim a Priority

In addition to assisting Veterans with filing a fully developed claim and giving the VA additional tools to perform efficiently, the Backlog Working Group believes the government must also make Veterans' claims a priority.

In December 2012, the GAO released a report analyzing the VA's disability claims process and the challenges the VA faced with timeliness. One of its primary findings was that claims processors struggled to receive requested records from other federal agencies in a timely manner.[61]

The VA has also faced similar challenges with the DOD due to a lack of an interoperable electronic health record (EHR) between the VA and the DOD. Congress mandated in 2008 that the VA and the DOD develop an interoperable EHR.[62] After Congressional oversight, progress has been made in the interoperability of health records between the VA and DOD. However, more work is needed to further improve this process.

The below recommendations address other federal agencies' role in the claims process and ensure they are held accountable to Congress for timely responses.

- Require federal agencies, specifically the DOD and its reserve components, and National Archives and Records Administration, to provide liaisons or another form of direct access that can serve as a point-of-contact to the VA to help facilitate the acquisition of records requested.
    - *Justification: Agencies relevant to the VA processing Veteran disability claims should ensure the VA has ease of access to necessary records, whether it is a Veteran's service record held at National Archives, current disability benefits, or an STR held by the DOD. Establishing a liaison will ensure VA can follow up on requests with a designated individual.*
- Require federal agencies to respond within 30 days to a VA request for records necessary to adjudicate a Veteran's claim.
    - *Justification: According to the December 2012 GAO report, evidence-gathering takes 157 days on average; whereas, the VA's goal is to complete the evidence-gathering phase in 85 days.[63] Giving agencies 30 days to respond to a VA's request for records will allow VSRs to complete the evidence-gathering phase in less than 85 days.*
- Require the VA to submit a report to Congress each year on the number of days information requested by the VA to other government agencies takes to be returned.
    - *Justification: It is Congress's responsibility to conduct oversight to ensure that federal agencies are responding in a timely manner and that the VA is moving the claim forward after receiving timely responses.*

- Require the VA and the DOD to submit a joint report setting a timeline and milestones for achieving interoperability of EHRs between the two agencies.
    - *Justification: The Working Group is pleased that the Fiscal Year 2014 National Defense Authorization Act (Public Law 113-66) includes a provision requiring the VA and the DOD to submit a report by January 31, 2014, regarding progress on the interoperable EHR. While there have been reports regarding VA and DOD's progress on reaching interoperability, the two Departments have not provided a timeline or plan for sharing necessary information for processing claims, nor has every Member received a specific written report. Congress needs a timeline and milestones to hold the DOD and VA accountable to this initiative mandated by Congress.*

Glossary

The Veterans Benefits Administration

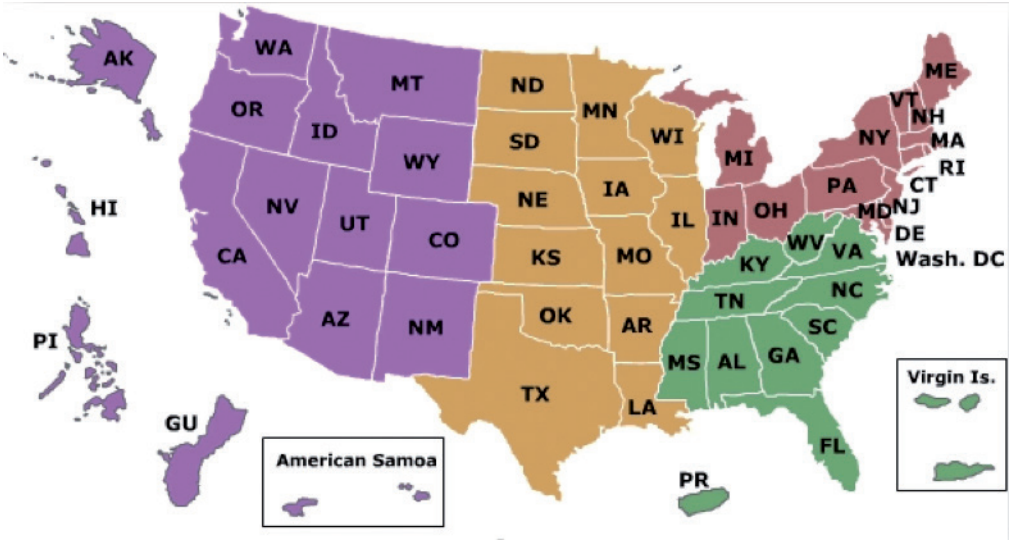
The VBA is in charge of processing disability and compensation claims. The VA website describes the VBA this way:

"As one of three administrations within the VA, the VBA, in partnership with the Veterans Health Administration and the National Cemetery Administration, provides benefits and services to servicemembers, Veterans, and their families in recognition of their service to the Nation.

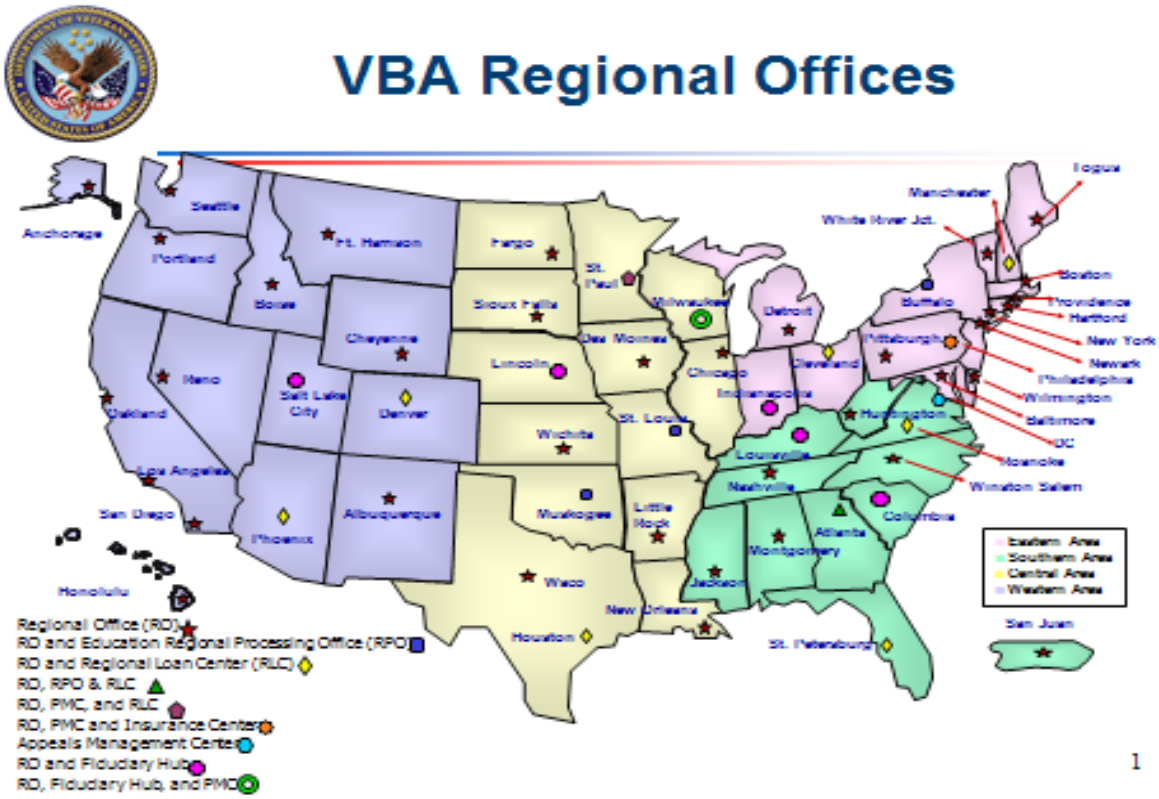
Within VBA, there are three Deputy Under Secretaries led by the Under Secretary for Benefits. Their organizations provide oversight for Disability Assistance, Economic Opportunity, and Field Operations. Additionally, there are four program offices including Strategic Planning, Management, Resource Management and Performance Analysis and Integrity."[64]

The VBA has four field offices that provide oversight of the 56 VAROs that accept, develop and rate claims. The four field offices are in the following locations:

- Philadelphia, PA, (oversight of VAROs in Northeast)
- Nashville, TN (oversight of VAROs in South
- St. Louis, MO (oversight of VAROs on Midwest)
- Phoenix, AZ (oversight of VAROs in West)



The 56 VAROs serve Veterans and their families in their geographic location with compensation and pension claims as well as career counseling, retraining benefits, job placement assistance and follow up for Veterans.



The mission of each VARO is to provide benefits and services to Veterans and their families within their jurisdiction in a responsive, timely and professional manner. The VAROs report to the Office of Field Operations through their respective Area Offices.

A VARO is comprised of six divisions that carry out the functions of the VBA and generally includes the following:

1. Veterans Service Center
2. Finance Division
3. Support Services Division
4. Human Resources
5. Loan Guaranty Division
6. Vocational Rehabilitation and Employment Division

Before the type of claim can be identified, the Veteran must submit their claim application to the VA. The VA then assigns an Effective Date to the application. The Effective Date determines when benefits are payable and can vary based on the type of claim.[65]

Types of Claims Processed

The 56 VAROs in the VBA system are run by one of the four regions in which they preside. Each VARO is responsible for rating and non-rating claims.

Pre-Discharge Claims: Servicemembers that are within 180 days of separation or retirement from active duty or full time National Guard duty may file claims for disability compensation.

Claims Based on Pre-Service Disabilities: Individuals may enter military service with a known disability. Should this disability become worse due to military service, the VA may be able to pay compensation. This is known as aggravation; however, compensation can only be paid for the level of aggravation. For example, at entry into military service, an individual has a disabling condition that could be considered 10% disabling. In order for this condition to be considered aggravated, it would have to have worsened due to military service to at least 20%.

Claims Based on In-Service Disabilities: These claims are based on disabilities that are a result of an injury or disease that occurred in active service, and in the line of duty. Injuries or diseases as a result of the Veteran's own willful misconduct or abuse of alcohol or drugs are excluded.

Claims Based on Post-Service Disabilities: Claims for post-service disabilities would include claims for disabilities that are a result of disabilities considered to be service-related, even though the disability arose after service. There are various classifications of presumptive disabilities which can be based on location or circumstances of service or just by military service itself.

Claims Based on Special Circumstances: Claims regarding compensation are not always based on an in-service event. In other words, after a disability has been determined to be service connected, there may be other types of claims a Veteran or surviving spouse may wish to file. This might include a claim for a temporary 100% rating due to surgery for a service-connected disability, or additional compensation based on being in need of regular aid and attendance.

How VA Identifies Claims

Original Claim: An original claim is the first claim Veterans file for compensation from the VA. This can be filed by a servicemember, Veteran or survivors of deceased Veterans.

Reopened Claim: A reopened claim is a claim filed for a benefit that could not be granted and the decision has become final, meaning that it is over one year old and has not been appealed. The VA cannot reopen these claims unless new and material evidence is received. New evidence is evidence that the VA has never before considered in connection with the specific benefit claimed. Material evidence is evidence that is relevant to and has a direct

bearing on the issue at hand.

New Claim: A new claim is a claim for a benefit that may or may not have been filed before. Generally, the decision made on the claim is based entirely on new evidence. These may include claims for (1) An increased disability evaluation; (2) Special monthly compensation; or (3) Individual unemployability.

A new claim differs from a reopened claim in that a decision on the claim is totally independent of any evidence submitted in connection with an earlier claim.

Secondary Claim: A secondary claim is a claim for disabilities that developed as a result of or were worsened by another service-connected condition. In other words, it is recognized that a service-connected disability may cause a second disability. This second disability may not otherwise be considered service-connected.

Types of Compensation

- **Disability Compensation –** A tax-free monetary benefit paid to Veterans with disabilities that are the result of a disease or injury incurred or aggravated during active military service. The benefit amount is graduated according to the degree of the Veteran's disability on a scale from 10 percent to 100 percent (in increments of 10 percent). Compensation may also be paid for disabilities that are considered related or secondary to disabilities occurring in service and for disabilities presumed to be related to circumstances of military service, even though they may arise after service. Generally, the degrees of disability specified are also designed to compensate for considerable loss of working time from exacerbations or illnesses.

- **Dependency and Indemnity Compensation (DIC)** – DIC is a tax-free monetary benefit generally payable to a surviving spouse, child, or parent of servicemembers who died while on active duty, active duty for training, or inactive duty training, or to survivors of Veterans who died from their service-connected disabilities. Parents DIC is an income-based benefit for parents who were financially dependent on a servicemember or Veteran who died from a service-related cause.

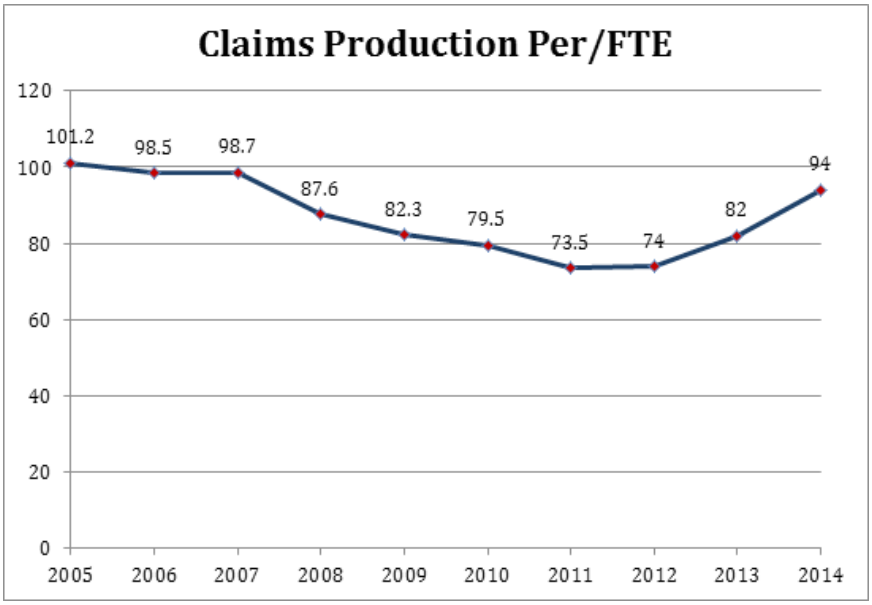
- **Special Monthly Compensation (SMC)** – SMC is an additional tax-free benefit that can be paid to Veterans, their spouses, surviving spouses and parents. For Veterans, Special Monthly Compensation is a higher rate of compensation paid due to special circumstances, such as the need of aid and attendance by another person, or by specific disability, such as loss of use of one hand or leg.

- **Compensation Based on Special Circumstances** – Veterans may be eligible for other types of disability compensation once a disability has been determined to be service connected. Special VA disability compensation programs include: individual unemployability, automobile allowance, clothing allowance, prestabilization, hospitalization, convalescence, dental, and birth defects.

- **Non-rating related claims –** These claims involve both compensation and pension (C&P) benefits and, in general, can be processed by a Veterans Service Representative (VSR) without a rating decision. Examples of non-rating claims are dependency changes, claims for Veteran burial benefits, and initial death pension claims for widows, many of which fall into the categories above.[66]

Appendix

Figure 1.



VBA disability determination workload (all-rating related claims - combined totals for C&P/DIC claims)										
Year	**2005**	**2006**	**2007**	**2008**	**2009**	**2010**	**2011**	**2012**	**2013**	**2014**
Compensation Direct Labor FTE	7,547	7,858	8,353	10,277	11,868	13,555	14,038	14,119	12,445	12,231
Receipts	788,298	806,382	838,141	888,112	1,013,712	1,192,346	1,311,091	1,080,342	897,396	963,834
Year-end Inventory	346,292	378,296	391,593	379,842	416,335	531,698	810,455	846,590	680,534	498,761
Production	763,464	774,378	824,844	899,863	977,219	1,076,983	1,032,344	1,044,207	1,017,513	1,145,607
Claims Production Per/FTE	101.2	98.5	98.7	87.6	82.3	79.5	73.5	74	82	94

Figure 1 Data Citations:

2005: "Volume II – National Cemetery Administration, Benefits Program, and Departmental Administration – Congressional Submission, FY 2007," Department of Veterans Affairs, Fiscal Year 2007 Budget Estimate; http://www.va.gov/budget/products.asp.

2006: "Volume II – National Cemetery Administration, Benefits Program, and Departmental Administration – Congressional Submission, FY 2008," Department of Veterans Affairs, Fiscal Year 2008 Budget Estimate, page 6B-4; http://www.va.gov/budget/products.asp.

2007: "Volume III – Benefits and Burial Programs and Departmental Administration – Congressional Submission, FY 2009," Department of Veterans Affairs, Fiscal Year 2009 Budget Estimate, page 4B-6; http://www.va.gov/budget/products.asp.

2008: "Volume III – Benefits and Burial Programs and Departmental Administration – Congressional Submission, FY 2010," Department of Veterans Affairs, Fiscal Year 2010 Budget Estimate, page 4B-10; http://www.va.gov/budget/products.asp.

2009: "Volume III – Benefits and Burial Programs and Departmental Administration – Congressional Submission, FY 2011," Department of Veterans Affairs, Fiscal Year 2011 Budget Estimate, page 4B-14; http://www.va.gov/budget/products.asp.

2010: "Volume III – Benefits and Burial Programs and Departmental Administration – Congressional Submission, FY 2013," Department of Veterans Affairs, Fiscal Year 2013 Budget Estimate, page 4B-8; http://www.va.gov/budget/products.asp.

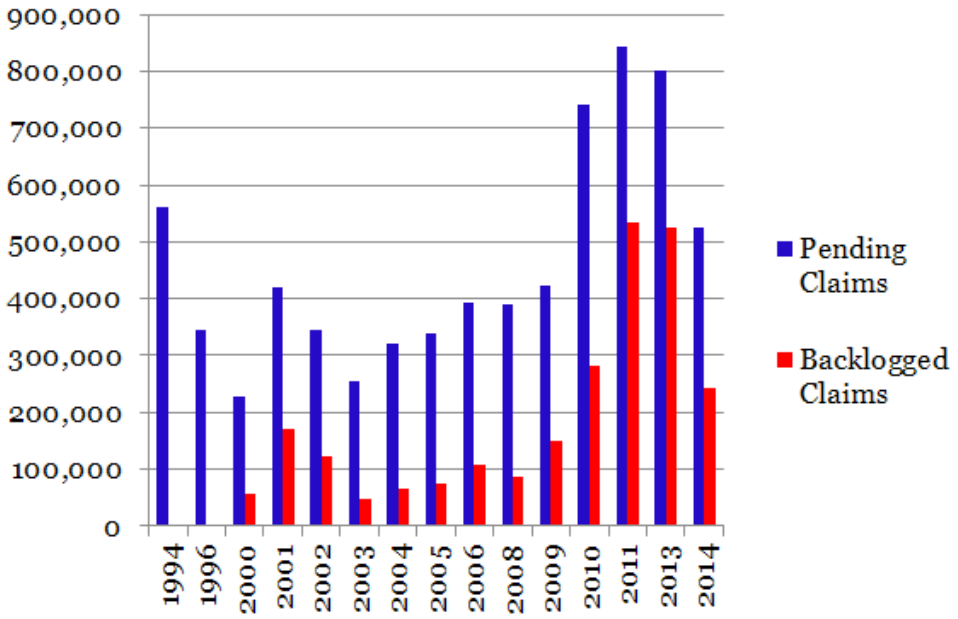
2011: "Volume III – Benefits and Burial Programs and Departmental Administration – Congressional Submission, FY 2013," Department of Veterans Affairs, Fiscal Year 2013 Budget Estimate, page 4B-8; http://www.va.gov/budget/products.asp.

2012: "Volume III – Benefits and Burial Programs and Departmental Administration – Congressional Submission, FY 2014," Department of Veterans Affairs, Fiscal Year 2014 Budget Estimate, page 3B-10; http://www.va.gov/budget/products.asp.

2013: "Volume III – Benefits and Burial Programs and Departmental Administration – Congressional Submission, FY 2016," Department of Veterans Affairs, Fiscal Year 2016 Budget Estimate, page VBA-202; http://www.va.gov/budget/products.asp.

2014: "Volume III – Benefits and Burial Programs and Departmental Administration – Congressional Submission, FY 2016," Department of Veterans Affairs, Fiscal Year 2016 Budget Estimate, page VBA-202; http://www.va.gov/budget/products.asp.

Figure 2



Year	1993	1994	1996	2000	2001	2002	2003	2004
Pending Claims	570,000	560,000	346,000	228,000	421,000	346,000	254,000	321,000
Backlogged Claims*	N/A	N/A	N/A	57,000	172,000	122,000	47,000	67,000

Year	2005	2006	2008	2009	2010	2011	2013	2014
Pending Claims	340,000	394,000	389,000	423,000	742,000	844,000	801,000	525,000
Backlogged Claims*	75,000	108,000	87,000	150,000	281,000	534,000	524,000	243,000

*Prior to 2009, claims were considered "backlogged" if pending more than 6 months.

Figure 2 Data Citations:

1993: "The Veteran. VA's Customer: Who Claims Benefits and Why?" Veterans' Claims Adjudication Commission, December 1996, page 1; http://www.veteranslawlibrary.com/files/Commission_Reports/Melidosian_Commission_Report_Dec_1996.pdf.

1994: "Stem VA Backlog, Other Problems," SunSentinel, March 28, 1994, Available at http://articles.sun-sentinel.com/1994-03-28/news/9403250530_1_veterans-claims-veterans-affairs-department-older-veterans, accessed on June 14, 2013.

1996: "The Veteran. VA's Customer: Who Claims Benefits and Why?" Veterans' Claims Adjudication Commission, December 1996, page 1; http://www.veteranslawlibrary.com/files/Commission_Reports/Melidosian_Commission_Report_Dec_1996.pdf.

2000: "Veterans' Disability Benefits: Claims Processing Problems Persist and Major Performance Improvements May Be Difficult," Government Accountability Office, GAO-05-749T, May 2006; http://www.gao.gov/assets/120/111723.pdf.

2001: "Veterans' Disability Benefits: Claims Processing Problems Persist and Major Performance Improvements May Be Difficult," Government Accountability Office, GAO-05-749T, May 2006; http://www.gao.gov/assets/120/111723.pdf.

2002: "Veterans' Disability Benefits: Claims Processing Problems Persist and Major Performance Improvements May Be Difficult," Government Accountability Office, GAO-05-749T, May 2006; http://www.gao.gov/assets/120/111723.pdf.

2003: "Veterans' Disability Benefits: Claims Processing Problems Persist and Major Performance Improvements May Be Difficult," Government Accountability Office, GAO-05-749T, May 2006; http://www.gao.gov/assets/120/111723.pdf.

2004: "Veterans' Disability Benefits: Claims Processing Problems Persist and Major Performance Improvements May Be Difficult," Government Accountability Office, GAO-05-749T, May 2006; http://www.gao.gov/assets/120/111723.pdf.

2005:"Veterans' Disability Benefits: Claims Processing Problems Persist and Major Performance Improvements May Be Difficult," Government Accountability Office, GAO-05-749T, May 2006; http://www.gao.gov/assets/120/111723.pdf.

2006: "Monday Morning Workload Report – December 31, 2006." Veterans Benefits Administration, December 2006; http://www.vba.va.gov/REPORTS/mmwr/.

2008: "Monday Morning Workload Report – December 29, 2008." Veterans Benefits Administration, December 2008; http://www.vba.va.gov/REPORTS/mmwr/.

2009: "Monday Morning Workload Report – October 5, 2009." Veterans Benefits Administration, October 2009; http://www.vba.va.gov/REPORTS/mmwr/.

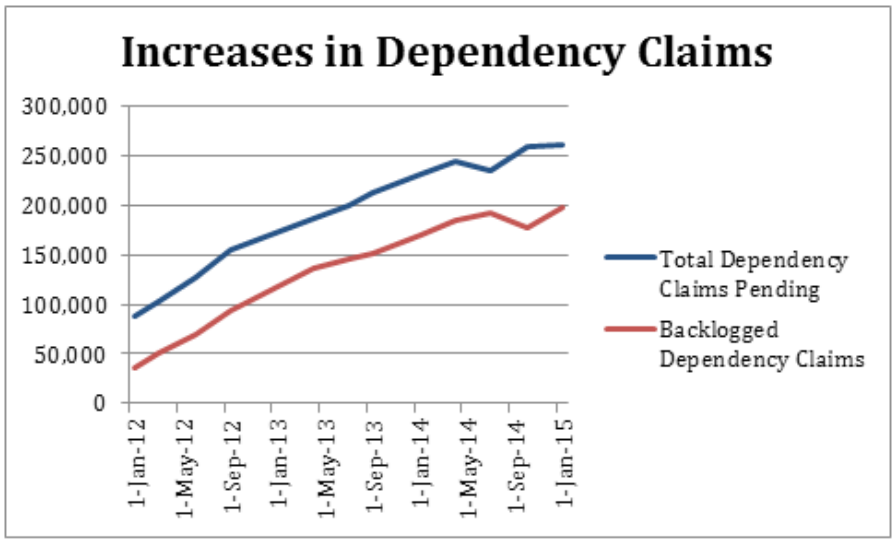
2010: "Monday Morning Workload Report – December 27, 2010." Veterans Benefits Administration, December 2010; http://www.vba.va.gov/REPORTS/mmwr/.

2011: "Monday Morning Workload Report – December 27, 2011." Veterans Benefits Administration, December 2011; http://www.vba.va.gov/REPORTS/mmwr/.

2013: "Monday Morning Workload Report – June 24, 2013." Veterans Benefits Administration, June 2013; http://www.vba.va.gov/REPORTS/mmwr/.

2014: "Monday Morning Workload Report – October 27, 2014." Veterans Benefits Administration, October 2014; http://www.vba.va.gov/REPORTS/mmwr/.

Figure 3



Increases in Dependency Claims		
Date	Total Dependency Claims Pending	Backlogged Dependency Claims
3-Jan-12	88,778	35,734
31-Mar-12	103,724	50,668
30-Jun-12	127,337	69,735
29-Sep-12	155,682	92,852
1-Apr-13	186,175	137,054
1-Jul-13	199,366	145,880
30-Sep-13	212,434	152,005
6-Jan-14	232,040	170,445
7-Apr-14	245,073	185,289
7-Jul-14	235,749	192,322
6-Oct-14	259,452	178,399
5-Jan-15	260,787	197,725

***All data for dependency claims was pulled from the Monday Morning Workload Report that corresponds with the dates in the first column. This report can be found at** http://www.vba.va.gov/REPORTS/mmwr/

Acronyms

BDD	Benefits Delivery at Discharge
C&P	Compensation and Pension
DBQ	Disability Benefits Questionnaire
DIC	Dependency and Indemnity Compensation
DOD	Department of Defense
DRO	Decision Review Officer
EHR	Electronic Health Record
FDC	Fully Developed Claim
FTE	Full Time Employee
FYTD	Fiscal Year to Date
GAO	Government Accountability Office
HAIMS	Health Artifact and Image Management Solution
IDES	Integrated Disability Evaluation System
MMWR	Monday Morning Workload Report
NOD	Notice of Disagreement
OIG	Office of Inspector General
OMPF	Official Military Personnel File
PMR	Private Medical Records
QRT	Quality Review Team
RVSR	Rating Veterans Service Representative
SAO	Systematic Analysis of Operation
SMC	Special Monthly Compensation
SSA	Social Security Administration
STR	Service Treatment Record
TAP	Transition Assistance Program
VA	Department of Veterans Affairs
VAMC	Department of Veterans Affairs Medical Center
VARO	Department of Veterans Affairs Regional Office
VBA	Veterans Benefits Administration
VBMS	Veterans Benefits Management System
VCAA	Veterans Claims Assistance Act
VCIP	Veterans Claims Intake Program
VRM	Veterans Relationship Management
VSCM	Veterans Service Center Manager
VSO	Veterans Service Organization
VSR	Veterans Service Representative

Citations

1 "The Veteran. VA's Customer: Who Claims Benefits and Why?" Veterans' Claims Adjudication Commission, December 1996, page 1; http://www.veteranslawlibrary.com/files/Commission_Reports/Melidosian_Commission_Report_Dec_1996.pdf.

2 "Stem VA Backlog, Other Problems," SunSentinel, March 28, 1994. Available at http://articles.sun-sentinel.com/1994-03-28/news/9403250530_1_veterans-claims-veterans-affairs-department-older-veterans, accessed on June 14, 2013.

3 "Veterans' Disability Benefits: Challenges to Timely Processing Persist," Government Accountability Office, GAO-13-453T, March 2013, page 8; http://www.gao.gov/assets/660/652979.pdf.

4 "Report to the Secretary of Veterans Affairs," Department of Veterans Affairs VA Claims Processing Task Force, October 2001, Page 16; http://www.vawatchdog.org/uploads/VA_Claims_Processing_Task_Force_Report_Oct_3_2001.pdf.

5 "Veterans' Disability Benefits: Claims Processing Problems Persist and Major Performance Improvements May Be Difficult," Government Accountability Office, GAO-05-749T, May 2006, page 7; http://www.gao.gov/assets/120/111723.pdf.

6 "Veterans' Disability Benefits: Challenges to Timely Processing Persist," Government Accountability Office, GAO-13-453T, March 2013, page 8; http://www.gao.gov/assets/660/652979.pdf.

7 "Veterans' Disability Benefits: Further Evaluation of Ongoing Initiatives Could Help Identify Effective Approaches for Improving Claims Processing," Government Accountability Office, GAO-10-213, January 2010, pages 11-12; http://www.gao.gov/assets/310/300398.pdf.

8 Philpott, Tom. "Shinseki: Backlog Goal Drew Fire, Also Dollars," *Military.com Benefits.* Available at http://www.military.com/benefits/2013/07/18/shinseki-backlog-goal-drew-fire-also-dollars.html, accessed on August 14, 2013.

9 "Veterans' Disability Benefits: Further Evaluation of Ongoing Initiatives Could Help Identify Effective Approaches for Improving Claims Processing," Government Accountability Office, GAO-10-213, January 2010, page 12; http://www.gao.gov/assets/310/300398.pdf.

10 "Veterans' Disability Benefits: Further Evaluation of Ongoing Initiatives Could Help Identify Effective Approaches for Improving Claims Processing," Government Accountability Office, GAO-10-213, January 2010, page 11; http://www.gao.gov/assets/310/300398.pdf.

11 "Compensation: Claims Process," Department of Veterans Affairs. Available at http://www.benefits.va.gov/compensation/process.asp, accessed on October 27, 2014.

12 "Veterans' Disability Benefits: Further Evaluation of Ongoing Initiatives Could Help Identify Effective Approaches for Improving Claims Processing," Government Accountability Office, GAO-10-213, January 2010, page 4; http://www.gao.gov/assets/310/300398.pdf.

13 "Veterans' Medical and Health Records," National Archives and Records Administration. Available at http://www.archives.gov/veterans/military-service-records/medical-records.html, accessed on August 21, 2013.

14 "Veterans' Medical and Health Records," National Archives and Records Administration. Available at http://www.archives.gov/veterans/military-service-records/medical-records.html, accessed on August 21, 2013.

15 "VETS Fact Sheet 1," United States Department of Labor. Available at http://www.dol.gov/vets/programs/tap/tap_fs.htm, accessed on September 13, 2013.

16 "Transition Assistance Program - VA Benefits Briefings," United States Department of Veterans Affairs. Available at http://www.benefits.va.gov/tap/, accessed on September 13, 2013.

17 "Transition Assistance Program - VA Benefits Briefings," United States Department of Veterans Affairs. Available at http://www.benefits.va.gov/tap/, accessed on September 13, 2013.

18 "Compensation- How to Apply," United States Department of Veterans Affairs. Available at http://www.benefits.va.gov/compensation/apply.asp, accessed on July 8, 2013.

19 "Pre-Discharge," United States Department of Veterans Affairs. Available at http://www.benefits.va.gov/predischarge/, accessed on July 8, 2013.

20 "Pre-Discharge- Quick Start Program," United States Department of Veterans Affairs. Available at http://benefits.va.gov/predischarge/claims-pre-discharge-quickstart.asp, accessed on July 8, 2013.

21 "Pre-Discharge," United States Department of Veterans Affairs. Available at http://www.benefits.va.gov/predischarge/, accessed on July 8, 2013.
22 "Compensation- How to Apply," United States Department of Veterans Affairs. Available at http://www.benefits.va.gov/compensation/apply.asp, accessed on July 8, 2013.
23 "Compensation- How to Apply," United States Department of Veterans Affairs. Available at http://www.benefits.va.gov/compensation/apply.asp, accessed on July 8, 2013.
24 "Fully Developed Claims," United States Department of Veterans Affairs. Available at http://www.benefits.va.gov/fdc/, accessed on July 8, 2013.
25 "Compensation- How to Apply," United States Department of Veterans Affairs. Available at http://www.benefits.va.gov/compensation/apply.asp, accessed on July 8, 2013.
26 "Compensation-Disability Benefits Questionnaires: Overview," United States Department of Veterans Affairs. Available at http://www.benefits.va.gov/compensation/dbq_overview.asp, accessed on July 8, 2013.
27 "Rating Veterans Service Representative," *VA Learning University,* United States Department of Veterans Affairs. Available at http://mycareeratva.va.gov/Careerpath/Pages/Job.aspx?job=05_099604, accessed on July 8, 2013.
28 "Department of Veterans Affairs (VA) Strategic Plan to Eliminate the Compensation Claims Backlog," Veterans Benefits Administration, January 2013, page 6; http://benefits.va.gov/transformation/docs/VA_Strategic_Plan_to_Eliminate_the_Compensation_Claims_Backlog.pdf.
29 "Department of Veterans Affairs (VA) Strategic Plan to Eliminate the Compensation Claims Backlog," Veterans Benefits Administration, January 2013, page 6; http://benefits.va.gov/transformation/docs/VA_Strategic_Plan_to_Eliminate_the_Compensation_Claims_Backlog.pdf.
30 "Department of Veterans Affairs (VA) Strategic Plan to Eliminate the Compensation Claims Backlog," Veterans Benefits Administration, January 2013, page 7; http://benefits.va.gov/transformation/docs/VA_Strategic_Plan_to_Eliminate_the_Compensation_Claims_Backlog.pdf.
31 "Department of Veterans Affairs (VA) Strategic Plan to Eliminate the Compensation Claims Backlog," Veterans Benefits Administration, January 2013, page 7; http://benefits.va.gov/transformation/docs/VA_Strategic_Plan_to_Eliminate_the_Compensation_Claims_Backlog.pdf.
32 "Department of Veterans Affairs (VA) Strategic Plan to Eliminate the Compensation Claims Backlog," Veterans Benefits Administration, January 2013, page 7; http://benefits.va.gov/transformation/docs/VA_Strategic_Plan_to_Eliminate_the_Compensation_Claims_Backlog.pdf.
33 "Department of Veterans Affairs (VA) Strategic Plan to Eliminate the Compensation Claims Backlog," Veterans Benefits Administration, January 2013, page 7; http://benefits.va.gov/transformation/docs/VA_Strategic_Plan_to_Eliminate_the_Compensation_Claims_Backlog.pdf.
34 "Department of Veterans Affairs (VA) Strategic Plan to Eliminate the Compensation Claims Backlog," Veterans Benefits Administration, January 2013, page 8; http://benefits.va.gov/transformation/docs/VA_Strategic_Plan_to_Eliminate_the_Compensation_Claims_Backlog.pdf.
35 "Department of Veterans Affairs (VA) Strategic Plan to Eliminate the Compensation Claims Backlog," Veterans Benefits Administration, January 2013, page 8; http://benefits.va.gov/transformation/docs/VA_Strategic_Plan_to_Eliminate_the_Compensation_Claims_Backlog.pdf.
36 "Department of Veterans Affairs (VA) Strategic Plan to Eliminate the Compensation Claims Backlog," Veterans Benefits Administration, January 2013, page 8; http://benefits.va.gov/transformation/docs/VA_Strategic_Plan_to_Eliminate_the_Compensation_Claims_Backlog.pdf.
37 "Department of Veterans Affairs (VA) Strategic Plan to Eliminate the Compensation Claims Backlog," Veterans Benefits Administration, January 2013, page 8; http://benefits.va.gov/transformation/docs/VA_Strategic_Plan_to_Eliminate_the_Compensation_Claims_Backlog.pdf.
38 "Volume III – Benefits and Burial Programs and Departmental Administration – Congressional Submission, FY 2016," Department of Veterans Affairs, Fiscal Year 2016 Budget Estimate, page VBA-195; http://www.va.gov/budget/docs/summary/Fy2016-VolumeIII-BenefitsBurialProgramsAndDeptmentalAdministration.pdf
39 "Volume III – Benefits and Burial Programs and Departmental Administration – Congressional Submission, FY 2016," Department of Veterans Affairs, Fiscal Year 2016 Budget Estimate, page VBA-196; http://www.va.gov/budget/docs/summary/Fy2016-VolumeIII-BenefitsBurialProgramsAndDeptmentalAdministration.pdf

40 "Volume III – Benefits and Burial Programs and Departmental Administration – Congressional Submission, FY 2016," Department of Veterans Affairs, Fiscal Year 2016 Budget Estimate, page VBA-197; http://www.va.gov/budget/docs/summary/Fy2016-VolumeIII-BenefitsBurialProgramsAndDeptmentalAdministration.pdf
41 "Volume III – Benefits and Burial Programs and Departmental Administration – Congressional Submission, FY 2016," Department of Veterans Affairs, Fiscal Year 2016 Budget Estimate, page VBA-198; http://www.va.gov/budget/docs/summary/Fy2016-VolumeIII-BenefitsBurialProgramsAndDeptmentalAdministration.pdf
42 "Department of Veterans Affairs (VA) Strategic Plan to Eliminate the Compensation Claims Backlog," Veterans Benefits Administration, January 2013, page 9; http://benefits.va.gov/transformation/docs/VA_Strategic_Plan_to_Eliminate_the_Compensation_Claims_Backlog.pdf.
43 "Department of Veterans Affairs (VA) Strategic Plan to Eliminate the Compensation Claims Backlog," Veterans Benefits Administration, January 2013, page 9; http://benefits.va.gov/transformation/docs/VA_Strategic_Plan_to_Eliminate_the_Compensation_Claims_Backlog.pdf.
44 "Department of Veterans Affairs (VA) Strategic Plan to Eliminate the Compensation Claims Backlog," Veterans Benefits Administration, January 2013, page 9; http://benefits.va.gov/transformation/docs/VA_Strategic_Plan_to_Eliminate_the_Compensation_Claims_Backlog.pdf.
45 "Volume III – Benefits and Burial Programs and Departmental Administration – Congressional Submission, FY 2016," Department of Veterans Affairs, Fiscal Year 2016 Budget Estimate, page VBA-200; http://www.va.gov/budget/docs/summary/Fy2016-VolumeIII-BenefitsBurialProgramsAndDeptmentalAdministration.pdf
46 "Volume III – Benefits and Burial Programs and Departmental Administration – Congressional Submission, FY 2016," Department of Veterans Affairs, Fiscal Year 2016 Budget Estimate, page VBA-202; http://www.va.gov/budget/docs/summary/Fy2016-VolumeIII-BenefitsBurialProgramsAndDeptmentalAdministration.pdf
47 "Veterans Benefits Administration Reports—Fully Developed Claims." United States Department of Veterans Affairs. Available at http://benefits.va.gov/reports/mmwr_va_claims_online.asp, accessed on March 5, 2015.
48 "Understanding the VA Claims Process," Veterans Benefits Administration, PowerPoint presentation, July 2013.
49 "Veterans' Disability Benefits: Challenges to Timely Processing Persist," Government Accountability Office, GAO-13-453T, March 2013, page 8; http://www.gao.gov/assets/660/652979.pdf.
50 "Veterans' Disability Benefits: Challenges to Timely Processing Persist," Government Accountability Office, GAO-13-453T, March 2013, page 8; http://www.gao.gov/assets/660/652979.pdf.
51 38 USC. Sec. 51013A
52 Secretary of Defense Chuck Hagel, Memorandum: "Installation Access and Support Services to VA-Recognized Veteran Service Organizations/Military Service Organizations." December 23, 2014.
53 "Monday Morning Workload Report – January 26, 2014." Veterans Benefits Administration, January 2014; http://www.vba.va.gov/REPORTS/mmwr/.
54 VA Claims Backlog Working Group Roundtable. U.S. Senate Capitol Visitors Center, Washington, D.C., September 9, 2014.
55 "Inspection of VA Regional Office Reno, Nevada," Department of Veterans Affairs Office of Inspector General; http://www.va.gov/oig/pubs/VAOIG-13-04324-170.pdf.
56 "Inspection of VA Regional Office Reno, Nevada," Department of Veterans Affairs Office of Inspector General, page 10; http://www.va.gov/oig/pubs/VAOIG-13-04324-170.pdf.
57 "Audit of VA Regional Office Rating Claims Process Exceeding 365 Days," Department of Veterans Affairs Office of Inspector General, 08-03156-227, September 2009, pages 13-14; http://www.va.gov/oig/52/reports/2009/VAOIG-08-03156-227.pdf.
58 Shinn, M., Moore, D., & Rich, S., "Claims processors received bonuses while backlog more than doubled; Awards handed out in Baltimore, Oakland as problems festered," August 2013, Available at http://www.publicintegrity.org/2013/08/26/13229/claims-processors-received-bonuses-while-backlog-more-doubled, accessed on September 2, 2013.
59 Clark, Willie. Letter to Senator Dean Heller. April 25, 2013. Washington, D.C.
60 Hickey, Allison. Statement to the Senate Veterans' Affairs Committee. *VA Claims System: Review of VA's Transformation Progress*, Hearing, December 11, 2013, pages 4-5; http://www.veterans.senate.gov/imo/media/doc/Allison%20Hickey%20-%20Testimony%20-%2012.11.13.pdf.
61 "Veterans' Disability Benefits: Challenges to Timely Processing Persist," Government Accountability Office, GAO-13-453T, March 2013, page 10; http://www.gao.gov/assets/660/652979.pdf.

62 Panangala, S.V. and Jansen, D.J., "Departments of Defense and Veterans Affairs: Status of the Integrated Electronic Health Record (iEHR)." Congressional Research Service, R42970, February 2013; http://crs.gov/pdfloader/R42970.

63 "Veterans' Disability Benefits: Challenges to Timely Processing Persist," Government Accountability Office, GAO-13-453T, March 2013, page 5; http://www.gao.gov/assets/660/652979.pdf.

64 "About VBA," United States Department of Veterans Affairs. Available at http://www.benefits.va.gov/benefits/about.asp, accessed on July 8, 2013.

65 "Compensation—Effective Dates." United States Department of Veterans Affairs. Available at http://www.benefits.va.gov/compensation/effective_dates.asp, accessed on March 17, 2015.

66 Department of http://www.va.gov/oig/52/reports/2008/VAOIG-06-03537-69.pdf

UNITED STATES SENATE