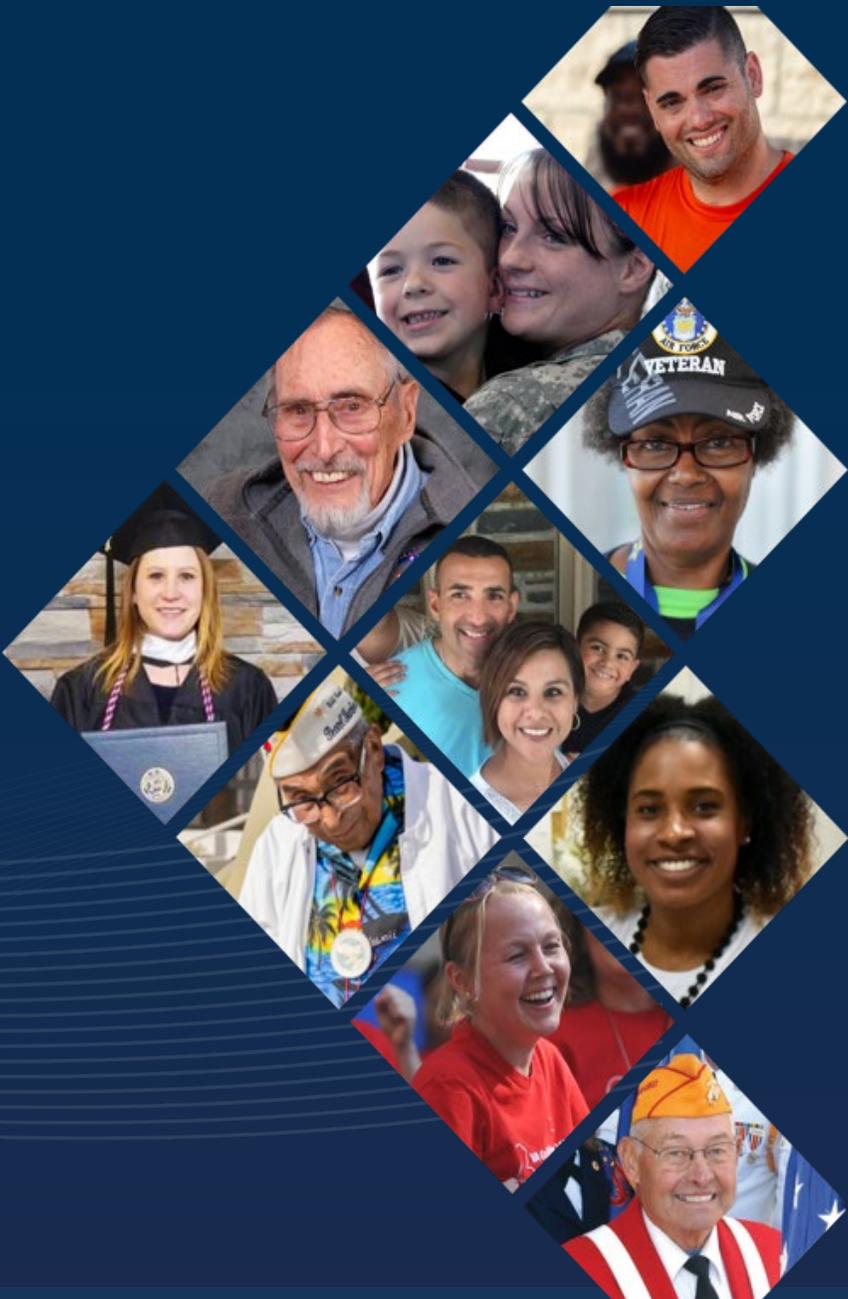


# VBA VSO Quarterly Meeting

FY24: Q3

June 20, 2024



Choose **VA**



**VA**



U.S. Department of Veterans Affairs



# U.S. Department of Veterans Affairs

Office of Policy & Oversight



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U.S. Department  
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**VA**

**Over-Development Reduction Task  
Force (ODRTF) - Phase II VA  
Examinations**

June 2024



Choose **VA**

**VA**



U.S. Department  
of Veterans Affairs

# ODRTF, Phase II Status

1

## Status

- Exploring opportunities in policy, processes, and technology to obtain a desired state to eliminate over-development, specifically in the area of VA examinations.
- Coordinating with various business lines and program offices to understand processes and ongoing efforts underway to streamline claims processing.
- ODRTF large group and breakout work groups meet on weekly cadence.
- Developing two additional workstreams based on case review findings, to identify areas for potential mitigation of over-development in the spaces of:
  - PACT Act/TERA
  - Pre-Discharge/claims within 1 year of discharge.

2

## Key Accomplishments

- Identified areas of potential improvement and established working groups for each.
- Began brainstorming problems and solutions in each respective area.
- Submitted 30 manual update proposals to Compensation Service (CS), with potential for more.
- BOT Examination workstream was developed to explore the possibility of expanding BOT exam reviews. Workstream is now closed.
  - Case reviews were conducted to determine whether auto-scheduled exams were required to rate the claims.
  - Results show 89% of the exams ordered by the BOT were required for a decision.

3

## Issues/Risks and Policy Implications

Risk (R) / Issue (I)	Mitigation	Rating

4

## Next Steps

Deliverable	Due Date	Status
Project Kick-off Meeting	02/01/24	Completed
Offsite Large Group Meeting	03/26/24	Completed
Identification of Majority of Workstreams for Improvement	03/31/24	Completed
Development of Solutions for Workstreams	05/31/24	Completed
Implementation of Solutions for Workstreams	07/31/24	On Track
Hand-off of Long-Term Solutions	07/31/24	On Track
Project Closeout	08/15/24	On Track

Project Status Legend:



Completed



On Track



At Risk (Plan in Place)



Issues (Additional Support Needed)



Choose VA

VA



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# BOT Examination Review

Workstream Description: Explore the possibility of expansion of BOT for examination review.

1

## Status

- Reviewed the assigned cases received.

2

## Key Accomplishments

- Established a workgroup.
- Each working group member assigned 20 cases to review for whether an auto-scheduled examination was required to rate the claim.
- All case reviews completed. Results of reviews:
  - 89% of the exams ordered by the BOT were required for a decision.
- Confirmed updates to automation code related to the spine and peripheral nerves.

3

## Issues/Risks and Policy Implications

Risk (R) / Issue (I)	Mitigation	Rating

4

## Next Steps

Deliverable	Due Date	Status
Case reviews completed	03/08/24	■

Project Status Legend:



Completed



On Track



At Risk (Plan in Place)



Issues (Additional Support Needed)



Choose **VA**

VA



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# Examination Checklist/ESR Tool

Workstream Description: Explore the possibility of developing a rules-based checklist to drive whether claims processors request exams or decide claims are RFD based on the evidence of record.

1

## Status

- Considering options to modify the Exam Scheduling Request (ESR) Contention Determination Tool to include questions intended to prevent unnecessary exams – evidence of record, private DBQs, etc.
- Considering renaming the ESR Tool to be more intuitive/explanatory of its true purpose. Change request submitted to Executive leadership.
- Reviewing each section of the ESR Tool for potential updates and developing recommendations for improvements.
- Consulting with CS and Office of Administrative Review on proposed updates.

2

## Key Accomplishments

- Assigned workgroup members contention claim types for testing and recommended improvements.
- Identified manual reference (M21-1 IV.i.1.B.1.a) for consideration to define persistent/recurrent symptoms.
- Submitted the first round of suggested updates (increase and supplemental). Medical Disability Examination Office (MDEO) has agreed to name change – Exam Scheduling Assistant.

3

## Issues/Risks and Policy Implications

Risk (R) / Issue (I)	Mitigation	Rating
Challenge to identify all possible updates	Individual analysis and group discussion of updates	Med.

4

## Next Steps

Deliverable	Due Date	Status
Consider options to rename ESR Tool and select a more clear, descriptive name.	05/01/24	■
Identify additional items to be revised in the current ESR Tool to further prevent exam request over-development.	05/17/24	■
Submit recommended updates to ESR Tool.	05/22/24	■
Incorporate ESR Tool into VBMS.	TBD	■

Project Status Legend:



Completed



On Track



At Risk (Plan in Place)



Issues (Additional Support Needed)



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# Change Management - Private DBQ Acceptance

Workstream Description: Explore the possibility of changing the culture around privately submitted DBQs – building trust in the process to increase use of DBQs.

1

## Status

- Reviewing public awareness of private DBQ fraud. Updating public information to increase awareness.
- Updating other public-facing information such as DBQ FAQs on va.gov.
- Discussing options to provide guidance to field management on how to manage employee concerns of inauthentic DBQs and what actions to take for reporting incidents when warranted. Will likely require manual updates.
- Exploring options to create a public-facing one-pager specific to private evidence/DBQ acceptance and awareness.

2

## Key Accomplishments

- Distributed an email to claims processors promoting the use of private DBQs to decide claims.
  - Included guidance, references and resources regarding sufficient vs. inauthentic evidence.
- Made suggested updates to Contact Center Portal FAQ and forwarded to National Contact Center (NCC).

3

## Issues/Risks and Policy Implications

Risk (R) / Issue (I)	Mitigation	Rating
If VBA promotes the increased acceptance and use of private DBQs, then VBA will need to avoid potential fraud.	Ensuring robust manual guidance is available and proper verification of medical provider credentialing/licensure. A centralized location/mailbox for suspected fraudulent DBQ referrals.	High
Without having clear data on the prevalence of DBQ inauthenticity/fraud, it is difficult to dispel concerns among field employees regarding use of private DBQs to decide claims.	Collaborate with OIG to collect/share data and outcomes of reporting/OIG investigative findings.	Med.

4

## Next Steps

Deliverable	Due Date	Status
Submit recommendations to NCC for Contact Center Portal FAQ updates.	05/07/24	Completed
Review M21-1 to determine what guidance is available (and needed) regarding procedures for assessing/reporting inauthentic DBQs.	07/01/24	On Track
Work with OFM, MDEO, etc. on training opportunities for the field regarding fraudulent DBQs.	07/01/24	On Track

Project Status Legend:



Completed



On Track



At Risk (Plan in Place)



Issues (Additional Support Needed)



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VA



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# Manual Updates

Workstream Description: Explore manual updates to reduce or prevent the likelihood of over development.

1

## Status

- Reviewing which manual references need updates.
- Identifying manual reference updates with updates to align with the task force’s efforts to reduce over-development.

2

## Key Accomplishments

- Identified **30** Manual References for potential updates.
  - 29 revisions in M21-1
  - 1 addition for Over-Development SOAR in M21-4
- Drafted Over-Development SOAR for addition to M21-4, Chapter 5, Section 4. Submitted to CS for implementation, expected winter 2024/2025.
- Collaborated with CS on manual updates and submitted proposals.
  - **14** manual updates to be implemented by 06/06/24.
  - **3** manual updates to be implemented by 06/30/24.
  - Additional manual updates expected before end of ODRTE, Phase II (07/31/24).

3

## Issues/Risks and Policy Implications

Risk (R) / Issue (I)	Mitigation	Rating
If the workgroup fails to identify all applicable manual references, then there is the potential for ambiguity in claims processing.	CS and MDEO will need to ensure all corresponding updates are identified and completed.	High

4

## Next Steps

Deliverable	Due Date	Status
Continue review of the Manual.	07/31/24	<span style="color: green;">■</span>

Project Status Legend:



Completed



On Track



At Risk (Plan in Place)



Issues (Additional Support Needed)



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# On-the-Spot Examiner Position

Workstream Description: To determine if an On-the-Spot (OTS) Examiner position is feasible.

1

## Status

- Initial set of brainstorming ideas and data requests conceived.
- Met with MDEO and DAMA held to discuss whether such a position would be more feasible/appropriate within VHA or under contract vendors.
- Exploring possibility to use this position specifically for ACE exams.

2

## Key Accomplishments

- Identified potential opportunity for ODRTF to influence the new MDEO-vendor contract re-compete process.
- Identified opportunity to use the Independent Medical Opinion (IMO) process as a template for encouraging vendors/examiners to offer opinions on the work of others.

3

## Issues/Risks and Policy Implications

Risk (R) / Issue (I)	Mitigation	Rating
If the vendor/examiner has resistance to offering medical opinions on the work of others, then the gain with the addition of the position would be minimal.	Build this as a requirement into a new contract.	High
If physical space availability for OTS examiners in VBA regional offices is limited, then the benefits of the position could be reduced.	Allow for virtual position.	Med.

4

## Next Steps

Deliverable	Due Date	Status
MDEO data request: Centered on finding delays within clarification requests, returned exams, vendor KPIs, and timeliness.	TBD	■
PA&I data request: Delays with clarification requests and medical opinions. Are there opportunities for time savings and timeliness analysis?	TBD	■
PA&I data request: Exam abandonment and duplicate re-ordering, how often does this happen?	TBD	■

Project Status Legend:



Completed



On Track



At Risk (Plan in Place)



Issues (Additional Support Needed)



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VA



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# QRT Training Symposium

Workstream Description: Conduct a large-scale multi-day training for Quality Reviewers to improve confidence in reviewing quality of claims rated based on the evidence of record and identifying over-development when it occurs.

1

## Status

- Creating a training agenda for the QRT Symposium, identifying the appropriate audience for each training topic (AQRS, RQRS, both).
  - Training will include topics specific to the work of claims processors, as it relates to over-development.
  - Soft skills training and ice breaker activities will be incorporated to promote collaboration, communication, and networking.
- Identifying resources necessary to execute a successful symposium and deciding logistical details for the event.

2

## Key Accomplishments

- Identified key training topics, with both claims-related and soft skills.
- Determined based on available facilities and funding, more than likely at least 2 separate symposiums must occur.
- Met with CS to discuss the preliminary courses. Gained CS support for the symposium and expertise for development of training content and resources.

3

## Issues/Risks and Policy Implications

Risk (R) / Issue (I)	Mitigation	Rating
If funding is not obtained the symposium cannot take place.	Explore all options to determine most cost-effective platforms to host the symposium.	High

4

## Next Steps

Deliverable	Due Date	Status
Draft Plan for the symposium.	05/31/24	■
Submit proposal to leadership for approval.	07/01/24	■
Formalize the Training Summit Plan and Funding	07/31/24	■

Project Status Legend:



Completed



On Track



At Risk (Plan in Place)



Issues (Additional Support Needed)

# Case Reviews

Workstream Description: Review of top three manual references used in errors called related to exams. Identify potential manual, training or Quality Review Checklist updates.

## 1 Status ■

- Largest Error Call areas of concern identified:
  - Exam not ordered when warranted
    - Conducting analysis to determine if errors were valid.
  - Improper selection of ACE box.
- PACT Act/TERA.
- Pre-Discharge/Claims within 1 year of discharge.
- Dental claims may be added as an area of review.

## 2 Key Accomplishments

- Case reviews assigned to work group members, and case reviews continue.
- Additional ODRTF workstreams were created based on current findings – PACT Act/TERA and Pre-Discharge/claims within 1 year of discharge.
- Proposed a manual change to simplify ACE box selection/non-selection.

## 3 Issues/Risks and Policy Implications

Risk (R) / Issue (I)	Mitigation	Rating

## 4 Next Steps

Deliverable	Due Date	Status
Completion of case reviews	06/15/24	■
Identify changes warranted based on reviews	06/30/24	■
Implement action plan to address identified changes needed	06/30/24	■

Project Status Legend:

- Completed
- On Track
- At Risk (Plan in Place)
- Issues (Additional Support Needed)

# Case Review #1 (Exams)

## Case Details

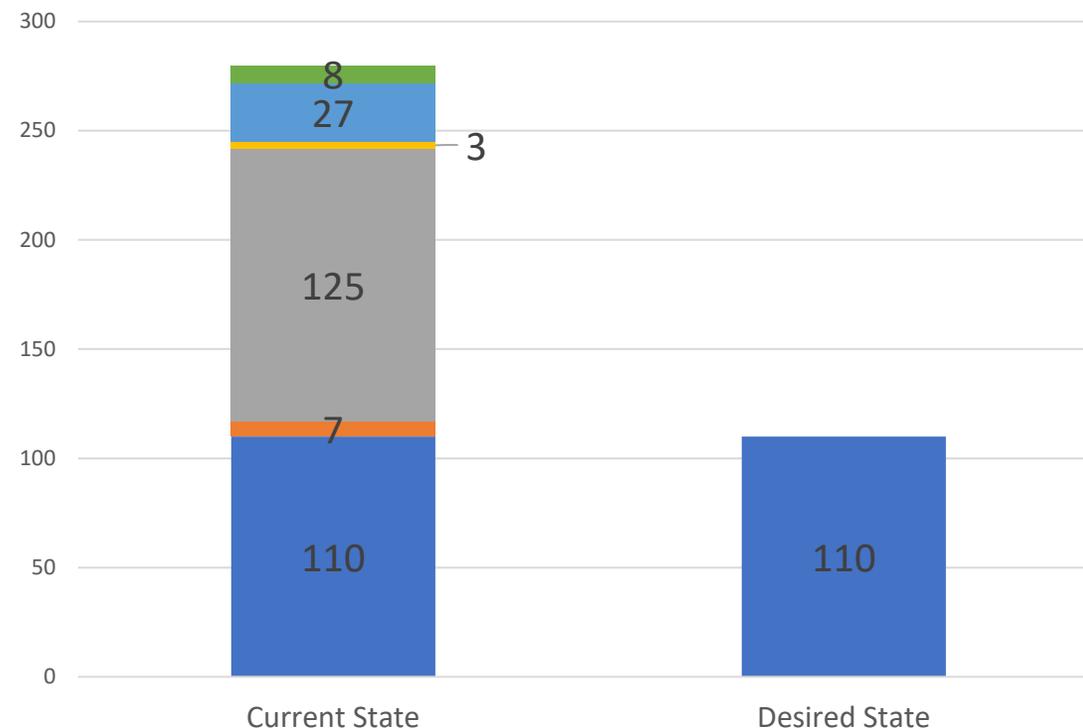
- Day 1:** Claim for hypertension received (Purple Heart with confirmed Vietnam service).
- Day 110:** Private medical records received show diagnosis of hypertension.
- Day 117:** Unnecessary exam and medical opinion for hypertension requested.
- Day 242:** Exam Request Cancelled.
- Day 245:** Unnecessary medical opinion for hypertension requested.
- Day 272:** Positive medical opinion received.
- Day 280:** Grant of hypertension.

**Delay due to overdevelopment: 170 days**

## Next Claim for Same Veteran - Good News Story

- Day 1:** Claim for IU received.
- Day 58:** Unnecessary exams requested.
- Day 99:** Exams cancelled after ODRTF intervention, Employment Impact Assessment only.

**Multiple Veterans Service Representatives (VSR) failed to take appropriate action resulting in overdevelopment delays of 170 days**



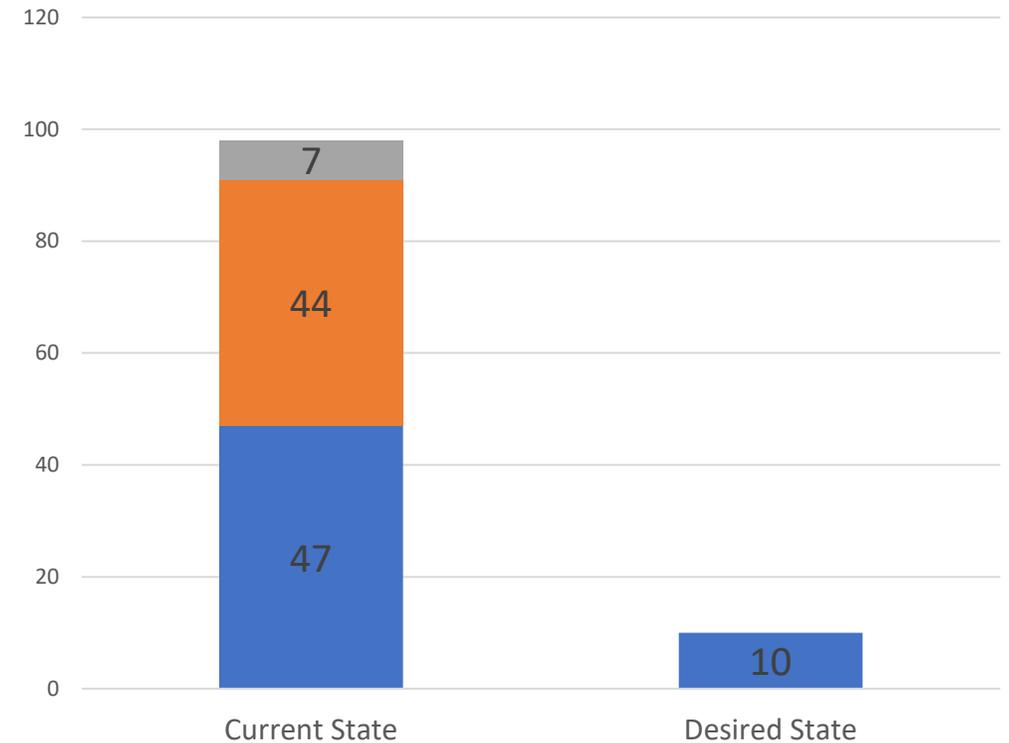
# Case Review #2 (Private DBQs)

## Case Details

- Day 1:** Claim and private DBQs for maxillary sinusitis (increase), degenerative disc disease of the lumbar spine (increase), sciatic nerve (increase), and right wrist ganglion cyst (increase) received.
- Day 2:** Claim was made Ready for Decision by automation.
- Day 47:** Claim was deferred by RVSR for unnecessary VA examinations.
- Day 91:** Veteran canceled scheduled VA examinations.
- Day 98:** Claim was decided and increased evaluations granted based on the private DBQs.

**Delay due to overdevelopment: 51 days**

## Rating Veterans Service Representative (RVSR) failed to accept Private DBQs resulting in overdevelopment delays of 51 days



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# Case Review #3 (Automation RFD)

## Case Details – Good News Story

**Day 1:** Increase claim for knees with private DBQ received and made Ready for Decision by Automation.

**Day 3:** RVSR deferred for unnecessary exam.

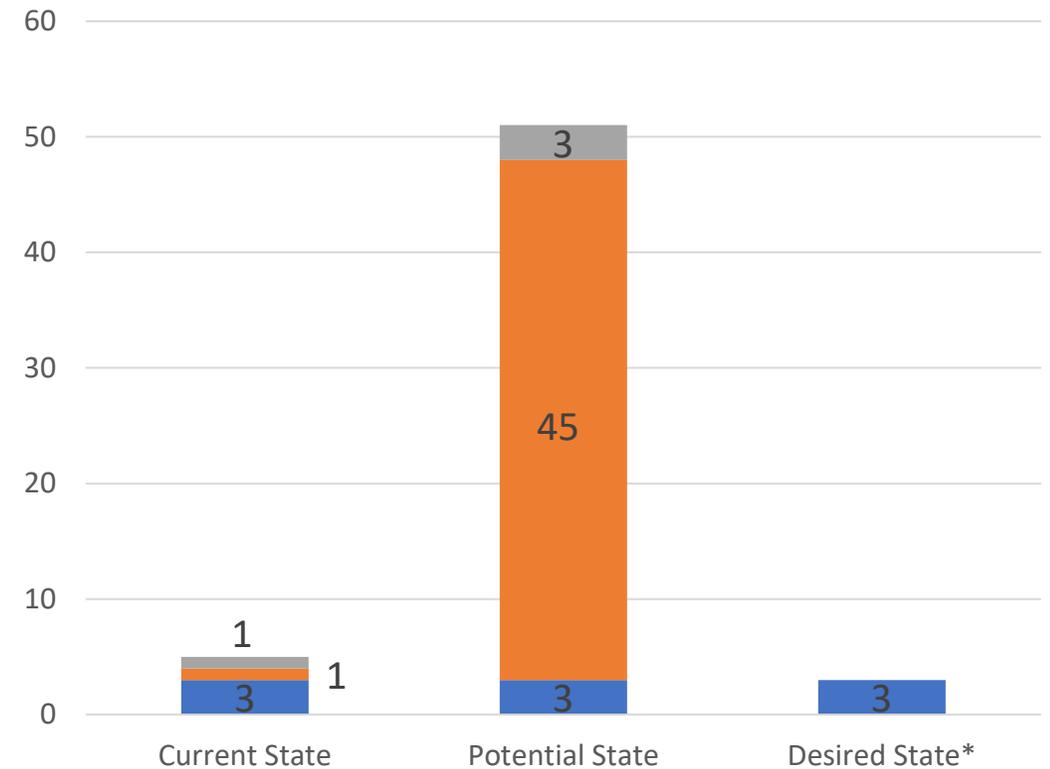
**Day 4:** Deferral is reviewed by ODRTF, exam is not requested, and RVSR makes decision increasing knees

**Day 5:** Claim is finalized.

**Potential overdevelopment delay if claim had not been discovered and remedied: 51 days**

**Desired State: 3 days**

## Automation RFD, RVSR failed to accept private DBQ and deferred



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# Quality Stand Down: Exam Requests and Rework Process

MDEO led training on examination requests and the Rework process during the VBA Quality Stand down Day on June 6, 2024

FY23 and 1Q FY24 data:

- 3,879,753 ESRs submitted with **895,635** clarifications required from claims processors
- Top clarifications included:
  - Wrong DBQ: DBQ does not match contention
  - Missing DBQ: No DBQ for contention
  - Requested Opinion: Incomplete medical opinion/Missing medical opinion

In order to address the above, examination refresher training consisted of:

- ESR request and rework process
- DBQ selection and upload process
- Medical opinion process
- Tracked item updates



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# U.S. Department of Veterans Affairs

Compensation Service



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# Part 3 Regulation: Character of Discharge

- Proposed Rule published July 10, 2020 (85 FR 41471).
- Currently, there are 6 statutory bars and 5 regulatory bars.
- VA considered several potential courses of action in the final rulemaking based on input from the public, internal and external stakeholders, and the Department of Defense.
- The Final Rule\* published April 26, 2024 (89 FR 32361), does the following:
  - **Maintains** the following regulatory bars:
    - Discharge in lieu of general court-martial
    - Mutiny or Spying
    - Moral turpitude, and
    - Willful and persistent misconduct.
  - **Removes** the aggravated homosexual acts bar.
  - **Adds clarifying definitions** for willful and persistent misconduct.
  - **Applies compelling circumstances** (including mental impairment, physical health, combat-related or overseas-related hardship; sexual abuse/assault; duress, coercion, or desperation; family obligations or comparable obligations to third-parties; and age, education, cultural background, and judgmental maturity) to the moral turpitude and willful and persistent misconduct bars.

\*Final rule effective June 25, 2024

# Regulations Update – Part 3 Adjudication

- **Herbicide Claims Final Rule (AR10)**

- Status: Proposed rule published 4/12/24 (89 FR 9803). Final rule drafting in progress.
- Anticipated Publication Date – April 2025
- Summary of rule: Amend regulations in key areas relating to the presumption of exposure to herbicide agents, expanding the list of conditions eligible for presumptive service-connection based on herbicide exposure, and adding new locations eligible for a presumption of exposure to herbicides during specific timeframes.
- Codifies provisions in the PACT Act, the Blue Water Navy Act of 2019, and the National Defense Authorization Act for 2021.

- **Personal Trauma Evidence Requirements Proposed Rule**

- Status: Review by OGC
- Anticipated Publication Date - November 2024
- Summary of rule: Amends the type of evidence that may be used to support a Veteran’s statement regarding the occurrence of an in-service personal trauma by expanding acceptance of behavioral marker evidence to all covered mental health claims based on in-service personal trauma.

- **PACT Act Gulf War Proposed Rule**

- Status: Review by OGC
- Anticipated Publication Date - September 2024
- Summary of rule: 1) Removes the manifestation period and the minimum evaluation requirements from Gulf War claims based on undiagnosed illness and medically unexplained chronic multi-symptom illnesses. 2) Expands the definition of a Persian Gulf Veteran. 3) Updates the locations eligible for a presumption of toxic exposure. 4) Adds diseases associated with exposure to burn pits and other toxins. 5) Codifies the procedure for determining when examinations and medical opinions are required for non-presumptive claims based on toxic exposure risk activity.



# VA Working Group: Background

- Since the fall of 2023, VBA has engaged in stakeholder feedback sessions regarding our forms and letters.
  - November 2023- VBA participated in a listening session with Legal Aid providers and received feedback regarding letters and form-related concerns.
  - January 2024- VBA held a Forms Listening Session with VSOs.
  - February 2024- VBA and the Board of Veterans' Appeals (BVA) hosted an Appeals Modernization Act (AMA) Summit, attended by VSOs, private attorneys, and Congressional staffers. VBA received feedback regarding the letters and forms.
    - Based on this feedback, VBA formed a workgroup to examine key concerns raised and to develop recommendations. This workgroup is currently in progress.
  - April 25, 2024- VBA met with VSOs to discuss their submitted edits to VBA letters sent to Veterans and survivors and to identify next steps.
- The House Committee on Veterans' Affairs Sub-Committee on Disability and Memorial Affairs (HVAC-DAMA) has recently focused significant attention on VA's letters.
  - March 2024- VBA and BVA provided briefings to the HVAC-DAMA on VA's letters.
  - March 20, 2024- HVAC-DAMA held an oversight hearing on VA's letters.
  - May 7, 2024- HVAC-DAMA held a Congressional Roundtable on letters with VA and VSOs.
- VBA is committed to improving the Veteran and claimant experience based on stakeholder feedback and doing the work needed to get there.



# VA Working Group Objectives

- Strategic Program Management Office (SPMO) is convening a workgroup to focus on improvements that can be made to VBA-related letters under the purview of Compensation Service, Pension & Fiduciary Service, and the Office of Administrative Review at this time.
- Participants will collaborate to refine the format, content, and overall delivery of VBA's intended message in those notification letters.
- Identify a list of letters to prioritize for revisions, as well as a timeline to complete and implement the revisions to and/or replacement of those letters in VA/VBA systems.



# Project Phases

## Phase 1

Initial Response to the Chairman's Request

- Received feedback during a listening session with VSO representatives; hosted by OPO
- SPMO developed themes from VSO feedback
- VBA contingent (to include select leaders) met with Congressional personnel (staff)

## Phase 2

Congressional Review of Revised Letter Examples

- OPO arranged for Key VBA offices to address/develop sample revised letters
- SPMO designated as lead (on behalf of OPO)
- SPMO to coordinate:
  - Mock-up of example letters (Grants, Appeals, Denials, Pension)
  - VBA leadership review
  - VSO comments/feedback
  - VSO Listening Session (AKA round table)
  - Consolidate VSO feedback and revise mock-ups
  - Preparation for Congressional meeting
- Meet with Congressional Representatives to review mock-up letters and capture feedback

## Phase 3

To Be Determined (TBD)

- Decision on scaling of letter revision
- Utilization of revised letters



# VSO Themes Identified



- Letters should be prepared and/or written in layman's terms.
- Letters should have the important information on the first page and the bottom-line up front.
- Letters should provide step-by-step actions required from the Veteran(s).
- Letters should contain headers and outline the timelines for the response.
- Letters are generally confusing, which often leads to more questions and the need for clarification.
- Letters that contain the “favorable findings” language when a claim is denied are confusing.
- Letters should provide a detailed but concise explanation of the award amount; including how VA calculates rating percentages.
- Letters should clearly provide the amount of the retroactive payment.
- Letters should clearly identify what claim is being addressed within the letter.
- Letters should provide a clear explanation of benefits.



# Phase 2 Timeline

- 05/29/2024
  - Mock-up letters due
    - Grants
    - Appeals
    - Denials
    - Pension (remarriage)
- 05/30/2024 – 06/04/2024
  - Concurrence for Mock-up Letters
  - VBA Leadership
- 06/05/2024 – 06/10/2024
  - VSO Review & Feedback
- 06/11/2024
  - VSO Roundtable
- 06/17/2024 – 06/21/2024
  - Consolidate VSO Feedback & Incorporate Edits
- 06/27/2024
  - Congressional Roundtable



# MST Claims Processing Updates

New content complies with two Public Laws:

- P.L. 117-271 VA Peer Support Enhancement for MST Survivors Act
- P.L. 117-303 MST Claims Coordination Act
- Consent Options have been added through:
  - Consent Letter Attachment
  - VA Form 21-0781, and
  - VA Form 20-0995



# P.L. 117-271 VA Peer Support Enhancement for MST Survivors Act

- In claim forms, VA shall provide an option for a Veteran to elect to be referred to a VHA MST Coordinator
  - Two phase implementation
    - Phase 1 – VA provides information about VHA MST resources in claim forms.
    - Phase 2 – VA will amend the language to provide an election option.



# P.L. 117-303 MST Claims Coordination Act

Automatic Notification System – VBA shall automatically notify VHA at certain times in the claims process when:

- there is a compensation claim related to MST,
- the Veteran is enrolled/registered with VHA, and
- the Veteran provides consent to the notice.

The ability for the claimant to elect a consent option has been included via a letter attachment and updated VA Forms 21-0781 and 20-0995.



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# Consent Letter Attachment

## OPTION FOR VETERANS BENEFIT ADMINISTRATION (VBA) TO NOTIFY VETERANS HEALTH ADMINISTRATION (VHA) ABOUT CERTAIN UPCOMING EVENT(S) DURING THE CLAIM AND/OR APPEAL PROCESS

If you are filing a claim for compensation for a condition due to a personal traumatic event(s) (involving Military Sexual Trauma (MST)) and you are registered and/or enrolled for VHA health care, you have the option for VBA to electronically notify VHA about certain upcoming event(s) during your claim and/or appeal process. These events are any:

- scheduled compensation and pension (C&P) examination,
- hearing before the Board of Veterans' Appeals, and/or
- decision notification.

When notified, VHA will place an indicator in your medical record to alert VA health care providers that these events are scheduled to occur. Notifications to VHA would only indicate the type of event and potential timeframe, not any details specific to your claim. The indicator in your medical record would not identify your claim as MST-related, but at this time, only claimants filing MST-related claims are provided this notification option. For this reason, providers may know that the indicator is in relation to an MST-related claim. The decision to **consent, not consent, or revoke prior consent** into the automatic notification system will not affect the status or outcome of your claim. **A response is not required.** If you do not respond, VBA will not send electronic notifications to VHA, nor will the outcome of your claim be impacted.

If you would like VBA to send these electronic notifications to VHA, please indicate your decision by selecting a checkbox below.

**I CONSENT TO HAVE VBA NOTIFY VHA ABOUT CERTAIN UPCOMING EVENTS RELATED TO MY CLAIM AND/OR APPEAL.** (Note: I understand that an indicator for these events will appear in my VHA medical record.)

**I DO NOT CONSENT TO HAVE VBA NOTIFY VHA ABOUT CERTAIN UPCOMING EVENTS RELATED TO MY CLAIM AND/OR APPEAL.** (Note: I understand that an indicator for these events will not appear in my VHA medical record.)

**I REVOKE PRIOR CONSENT TO HAVE VBA NOTIFY VHA ABOUT CERTAIN UPCOMING EVENTS RELATED TO MY CLAIM AND/OR APPEAL.** (Note: I understand that in the future, notice of these events will no longer appear in my VHA medical record.)

**NOT APPLICABLE AND/OR NOT ENROLLED OR REGISTERED IN VHA HEALTHCARE.**

Note: You have the option to modify your previous selection at any time. Mail your correspondence to: Department of Veterans Affairs Compensation Intake Center P.O. Box 4444 Janesville, WI 53547.

SSN:



Choose **VA**

**VA**



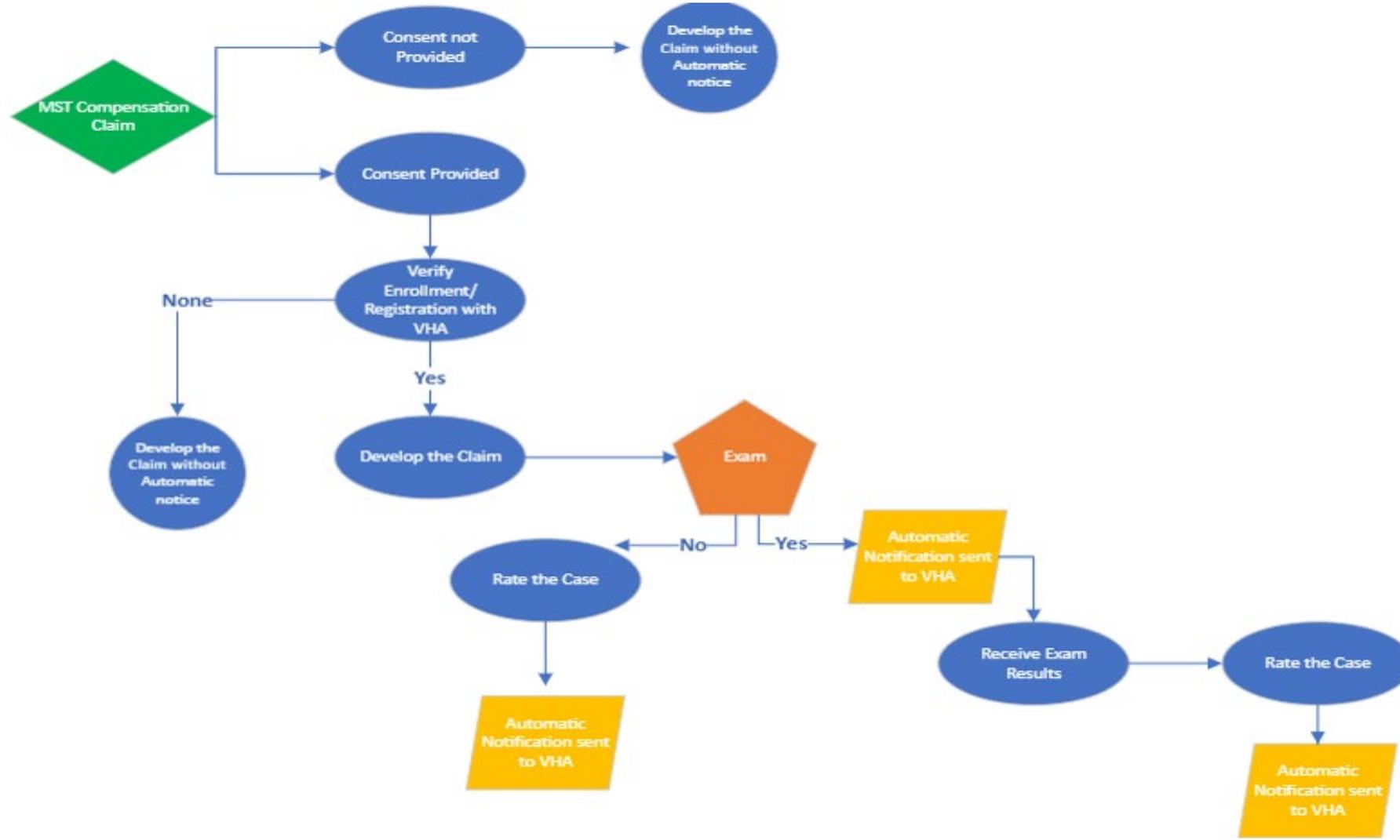
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# Interim Consent Implementation Actions

- Implementation deadline is June 27, 2024
  - VBA full automation efforts anticipated to deploy on June 30, 2024
    - Mail automation will track consent via forms and the consent letter attachment.
      - VBMS systems will track consent using special issue flashes to send notification between the VBA and VHA
      - VBMS will reflect the Veteran's consent and enrollment status under the Veteran summary
    - Veterans may provide or change their consent selection by calling the contact center
  - VHA full automation efforts are anticipated to deploy in January of 2024
- VBA and VHA are collaborating and will implement a manual solution until joint automation is complete



# Future Consent Implementation Actions



# VA Form 21-0781 Update

- VA Form 21-0781 may be optional and not required, however;
  - Completing the form could assist the claimant with their claim,
  - VA can use the information provided to review military records and other sources of information for evidence to support their claim, and
  - All mental health disorders are now included.
- The new version of VA Form 21-0781, dated March 2024, is scheduled to **release on June 28, 2024**.
  - VA Form 21-0781a (version dated June 2021) will discontinue on June 28, 2024, and will no longer be accepted from June 29. If received after June 29, per [M21-1, Part II, Subpart i, 2.B.4](#) (Handling Outdated or Discontinued Forms), the discontinued form will be reviewed to determine evidentiary value.
- The new burden estimate of 45 minutes includes new instructions, easier navigation with trauma informed language, and a Veteran-centric streamlined format.



# VA Form 21-0781 Update

Compensation Service combined VA Forms 21-0781, *Statement in Support of Claim for Service Connection for PTSD*, and 21-0781a, *Statement in Support of Claim for Service Connection for PTSD Secondary to Personal Assault*, into a single form that **will**:

1. Be referred to as, VA Form 21-0781, with a **new title** of: *Statement in Support of Claimed Mental Health Disorder(s) Due to an In-Service Traumatic Event(s)*,
2. Reduce the burden (i.e., estimated number of minutes it takes for a respondent (i.e., claimant, Veteran) to fill out a form) for the Veteran who completes the form:
  - a. Current burden estimate of the series is 70 minutes for each form, with a combined total of 2 hours and 20 minutes.
  - b. Discontinuing VA Form 21-0781a reduces the current burden by 50%.
3. Improve trauma-sensitivity and decrease the potential for respondents to provide information that is not needed (which further reduces the burden of the combined form to 45 minutes), and
4. Allow for other mental health conditions to be submitted.



# VA Form 21-0781 Update

Changes made to VA Form 21-0781, include:

- Instructions:
  - Use of the form,
  - Evidence that can be used to support a claim,
  - Additional information providing further assistance, if needed, and
  - Where to send the form when complete.
- Form:
  - New sections that help the claimant complete the form with their type of in-service traumatic event(s),
  - Guidance with examples for describing the traumatic event(s),
  - Expanding the behavioral changes question; including if a report was filed and/or if another source can be used for evidentiary purposes,
  - New section requesting treatment information and locations, and
  - New signature sections allowing witnesses, a POA, or an alternate signer to sign on behalf of the claimant.

# VA Form 20-0995 Update

Substantive changes have been made to VA Form 20-0995, *Decision Review Request: Supplemental Claim*, version dated May 2024, and will release on June 28, 2024.

The substantive edits, includes:

- Instructions
- Reformatting to match other forms in inventory,
  - Headings over each informational section,
  - Addresses added for each benefit evidence intake center the form is used for,
  - New information regarding fees for claims, and
  - An update to the specific instructions for each section in the form.
- Form:
  - New question identifying the benefit type the claimant is requesting,
  - New claimant's section,
  - New homeless section,
  - Treatment information and location section edited to match other forms in inventory, and
  - Additional signature sections allowing witnesses, a POA, or an alternate signer to sign on behalf of claimant.

We would like to encourage the use of the new versions of both VA Forms 21-0781 and 20-0995, as they are the most up to date; however, the previous versions can still be used as described in [M21-1, Part II, Subpart i, 2.B.4](#). (Handling Outdated or Discontinued Forms).

# VASRD Status Update

Final Rule Published
Final Rule Drafting
Proposed Rule Drafting

BODY SYSTEM	PROPOSED RULE	FINAL RULE	STATUS
Dental and Oral	07/28/15	08/03/17	Published
Eye	06/09/15	08/10/18	Published
Gynecological Conditions/Breast	02/27/15	05/09/18	Published
Endocrine	07/08/15	11/02/17	Published
Skin	08/12/16	07/13/18	Published
Hematologic and Lymphatic	08/06/15	10/29/18	Published
Infectious Diseases, Immune Disorders/ Nutritional Deficiencies	02/05/19	06/18/19	Published
Musculoskeletal	08/01/17	11/30/20	Published
Genitourinary	10/15/19	09/30/21	Published
Cardiovascular	08/01/19	09/30/21	Published
Digestive	01/11/22	03/20/24	Published
BODY SYSTEM	PROPOSED RULE/*ESTIMATED PROPOSED RULE PUBLICATION DATE	ESTIMATED FINAL RULE PUBLICATION DATE	STATUS
Respiratory/Ear Nose Throat (ENT)/Audio	02/15/22	December 2024	Final Rule in VBA concurrence
Mental Disorders	02/15/22	December 2024	Final Rule in VBA concurrence
Neurological	*September 2024	TBD: 2025	Proposed Rule recently cleared concurrence with VA Office of General Counsel



# Digestive Final Rule

- Digestive final rule published on March 20, 2024. Changes became effective May 19, 2024.
- **Impact of Update:**

## Finalized changes:

- Added 8 diagnostic codes (DCs), revised 38 DCs, and removed 8 DCs
- Replaced subjective terms with more objective criteria.
- Revised irritable bowel syndrome and hemorrhoids to allow for higher evaluations
- Added diagnostic codes for celiac disease and gastroesophageal reflux disease (GERD)

## New Evaluative criteria

- Aligns the digestive conditions to medical and scientific advancements
- Clarifies existing rating criteria and updates current medical terminology



# Mental Disorders Final Rule

- Mental Disorders proposed rule published on February 15, 2022. VA received 826 comments during the public comment period.
  - Final Rule Pending VBA Concurrence
  - **Anticipated Publication**: December 2024
- **Impact of Update:**

## Updated General Rating Formula (GRF) for mental disorders (including eating disorders)

- Provide more adequate compensation for financial losses.
- More accurately capture the occupational impairment that mental disabilities cause.
- Removed requirement for “total occupational and social impairment” to attain a 100% evaluation.
- Include a 10% minimum evaluation



# Respiratory/ENT Final Rule

- Respiratory/ENT proposed rule published on February 15, 2022. VA received 2,680 comments during the public comment period.
  - Final Rule Pending VBA Concurrence
  - **Anticipated Publication**: December 2024
- **Impact of Update:**

## Established GRF for Respiratory Conditions

- Lowers symptom severity level to receive 100% evaluation.
- Adds 10% evaluation to some DCs based on certain prescribed medications.
- Includes additional metrics for evaluation (VO2 Max and METs).

## Updated Several PACT Act Conditions from Section 406 Indirectly

- GRF for Respiratory Conditions.
- GRF for Chronic Rhinosinusitis and Recurrent Acute Rhinosinusitis (RARS).

## Key DC Changes

- Sleep Apnea: Modernize sleep apnea to evaluate based on residual impairment after treatment instead of treatment itself.
- Tinnitus: Evaluate tinnitus as symptom of underlying service-connected disease, not as standalone condition.





# U.S. Department of Veterans Affairs

Medical Disability Examination  
Office (MDEO)



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# Veteran Claim Clinics (VCC) Overview

- MDEO provides on-site C&P examinations support utilizing vendor operated Mobile Medical Units
  - Collaboration with the RO's is necessary to execute the exam request aspect
- MDE vendor Veteran Claim Clinics participation is voluntary
- All C&P examinations must be requested via Exam Management System
- Analysts provide on-site operational support



# Mobile Medical Unit Types



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U.S. Department of Veterans Affairs

# Mobile Unit Photos



Opto Evaluation Area

Dental Exam Room with Modern X-ray Capability



Audio w/Booth



Pano X-ray



X-ray



Handicap Accessibility



Boothless Audio



ADA Compliant Rooms



# Veteran Claims Clinics (VCC)

- MDEO **supports** national outreach efforts by working with the contract vendors to provide onsite Compensation and Pension (C&P) exams
  - MDEO does not own or initiate these outreach efforts
- Thus far in FY24 MDEO has supported 21 VCC events:

Type of Event	Number of Events	Examinations Completed	Pending FY24 Events
Tribal Outreach	10	299	10
Standard/PACT Act	6	348	11
Economic Development Initiative (EDI)	3	215	0
National Conferences	2	638	3



# Exam Communications

- VBA and MDE vendors utilize a combination of methods to inform Veterans and Service members (SM) of their C&P examination appointments.
  - VBA will email Veterans/SMs when ESR is submitted to an MDE vendor.
  - MDE vendors will use telephone, text, and email to communicate.
    - Allow for preferred options of communication
- MDE vendors portal access is available to every Veteran/SM to track appointment(s).
- If positive contact is not made, MDE vendors can/will “Reserve Schedule”.
  - If Reserve Scheduling is utilized, appointment details will be sent via mail.



# Examination Rescheduling

- If a claimant needs to reschedule the exam, they should contact their scheduled MDE vendor at least 48 hours prior to the examination.
- Claimants can only reschedule once per exam for contract examinations.
  - Rescheduled appointment must be within 5 days of the original appointment.
- If the claimant is not available during those 5 days, they should tell the MDE vendor and should call VA at [\(800\) 827-1000](tel:8008271000)



# MDEO Inquiry Resolution

- MDEO receives inquiries from a variety of sources, including:
  - Office of the Under Secretary for Benefits, White House Hotline, Congressional Offices, Regional and District Offices, Veterans Service Organizations, Veterans Health Administration, Office of the Inspector General
- Most inquiries involve:
  - Veteran travel issues, appointment scheduling conflicts, examiner complaints, issues claims processors are experiencing with examination requests, Exam Management System inquiries
- When an inquiry is received, MDEO takes the following actions:
  - Logs and tracks all inquiries
  - Thoroughly reviews the inquiry
  - Review VA Systems
  - Thoroughly review the Veteran's file, and any completed exams, if applicable
  - Contact MDE vendor(s) for action
  - Contact Veterans for more information or to report resolution
- MDEO strives to resolve all inquiries in 10 days or less.
  - MDEO can pursue additional avenues to address emergent issues in a shorter time period.

# What Happens If A Veteran Receives A Bill?

**Procedure:** If you are contacted by a Veteran who received bill(s) related to their C&P examination(s) conducted by an MDE Vendor, please advise the Veteran to immediately contact the MDE Vendor involved for resolution.

The Veteran should provide to the MDE Vendor:

- A copy of the bill received
- Identify the date/location of the appointment



# DoD SHA Implementation Update

- The DD Form 3146, Separation Health Assessment, recently received final Office of the General Counsel (OGC) approval. And the form is now available on [Washington Headquarters Services](#) website as an official DOD form.
- The DD Form 3146 will replace DoDs current separation exam, Separation History and Physical Exam DD 2807, and DD 2808.
- VA SHA DBQ and DD Form 3146 was jointly constructed by VA and DoD and share the same content.
- Upon DoD implementation, VA and DoD will be using the same content to access separating Service members with the goal of eliminating duplicative separation health assessments.
- DOD is preparing to initially implement as a pilot at the end of FY24.
- VA will continue to conduct SHA exams for all BDD and IDES participants.



# Additional Examination Resources

- [How To File A VA Disability Claim | Veterans Affairs](#)
  - Information on filing claims and submitting evidence
- [VA Claim Exam \(C &P Exam\) | Veterans Affairs](#)
  - Answers to commonly asked questions about VA claims exams
- [VA Claim Exam \(C&P Exam\) Information and Exam FAQ Links | Veterans Affairs](#)
  - Provides information on the examination process and links to additional claims related pages
- Inquiries can be submitted to MDEO via:
  - [Contract Examination Inquiry Submissions](#), or
  - [VAVBAWAS/CO/Contract Examination Inquiries](#)
  - These links are for internal use only





# U.S. Department of Veterans Affairs

Loan Guaranty Service



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# VA Targeted Foreclosure Moratorium



## What is it?

VA's targeted foreclosure moratorium strongly encourages servicers to cease initiating, continuing, and/or completing foreclosures on VA-guaranteed loans. The moratorium will give servicers time to implement the Veterans Affairs Servicing Purchase (VASP) program. The targeted moratorium is effective between May 31, 2024, and December 31, 2024.

## Who is it for?

VA-guaranteed loan borrowers that meet the qualifying criteria to be considered for VASP but the servicer hasn't implemented the program. Servicers can use the VASP program beginning May 31, 2024. VA expects servicers to fully implement VASP not later than October 1, 2024.



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# Targeted Moratorium versus Blanket Moratorium

## ➤ Blanket Moratorium

- All loan activity including borrower engagement and consideration of loss mitigation to bring the loan current stops.

## ➤ VA Targeted Moratorium

### Home Retention Options

- For loans covered under the targeted moratorium, servicers are expected to continue loss mitigation efforts and offer reasonable solutions to resolve the delinquency. Options are described in VA Servicer Handbook M26-4, Chapters 5 and 9 and Appendix F. These efforts include fully implementing VASP as soon as practicable beginning May 31, 2024, but no later than October 1, 2024.

### Foreclosure Exceptions

- Property is vacant or abandoned.
- The borrower desires neither to retain homeownership nor avoid foreclosure.
- Borrower has been evaluated for all home retention options and alternatives to foreclosure but does not qualify.

# Traditional Loss Mitigation and Foreclosure Avoidance

## ➤ VA Loan Technicians

- VA has ~220 Loan Administration staff who provide guidance to Veteran borrowers, and/or work directly with servicers to identify the best solution to resolve the delinquency.
- VA loan technicians are available to work with VA borrowers to determine which of the below loss mitigation options may be best for their individual circumstance. VA loan technicians are available via phone from 8:00am to 6:00pm EST at: 1-877-827-3702.

## ➤ VA Loss Mitigation

### Home Retention Options

- *Special forbearance*: Allows a borrower to pause mortgage payments and offers extra time to repay the missed mortgage payments.
- *Repayment plans*: Allows a borrower to resume making regular payments, with an added amount each month to cover missed payments.
- *Loan modification*: Allows a borrower to add missed mortgage payments and any related legal costs to the total loan balance.

### Alternatives to Foreclosure

- *Short sales*: Allows a borrower to sell the home if it is worth less than what is owed on the loan.
- *Deed in lieu of foreclosure*: Allows a borrower to avoid the foreclosure process by signing over the deed to the home to the servicer.



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# VASP Goals, Program Guidelines, and Qualifying Criteria

## Goals of VASP

- Maximize Veterans' ability to retain their home
- Protect long-term financial solvency of the guaranteed home loan program and provide relief during economic downturns or personal financial crises
- Avoid creating future financial burden for Veterans

## Program Guidelines

- Servicer certifies all viable home retention options have been exhausted
- Veteran agrees to VA's purchase and loan modification
- Servicer completes the modification prior to servicing transfer
- VA pays whole-loan balance to servicer

## Qualifying Criteria

- Reason for default has resolved and Veteran can resume making monthly mortgage payments
- Property is owner-occupied
- Veteran has been delinquent at least three (3) months, but no more than 60 months
- At least six (6) monthly payments made since loan origination or modification
- Servicer completes purchasing risk assessment confirming title status and no second liens/mortgages that would encumber VA's first lien position (e.g., title report/search) - to be reimbursed by VA
- Loan is not in active bankruptcy (Chapter 13 or Chapter 7)



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# Buyer's Broker Commission

- On October 31, 2023, a class action case Sitzer/Burnett v. NAR, a jury awarded the plaintiffs \$1.785 billion in damages.
- A significant advantage for Veteran looking to purchase a home is the VA Home loan. These loans offer competitive rates and terms, require no down payment, and do not necessitate private mortgage insurance--making VA loans incredibly valuable.
- VA's Code of Federal Regulations Series, 38 C.F.R. § 36.4313(b) specifies that, generally, a Veteran cannot pay for real estate brokerage charges.
- The NAR settlement has created uncertainty as to how buyer's agents will be compensated and what amount of compensation is reasonable for such services.
- VA stresses Veterans or their representation can continue to negotiate commissions with sellers. The NAR settlement **DOES NOT** prohibit the seller from paying the buyer's agent's commission, but it could make it more difficult for Veterans to have an offer accepted.

# Buyer's Broker Commission, Continued

- In anticipation of NAR's rule change in August 2024, VA has taken action to preserve a Veteran's ability to remain competitive during the home buying process by enacting a temporary local variance for certain Buyer-Broker fees.
- After real estate brokerage markets restabilize, VA will develop permanent policy, through a notice-and-comment rulemaking to revise 38 C.F.R. § 36.4313(b).

# LUNCH

We will resume the VSO Quarterly at 1:00  
PM EST.





# U.S. Department of Veterans Affairs

Office of Benefits Automation

Automation Updates

Briefed by: Lauren Sylvia



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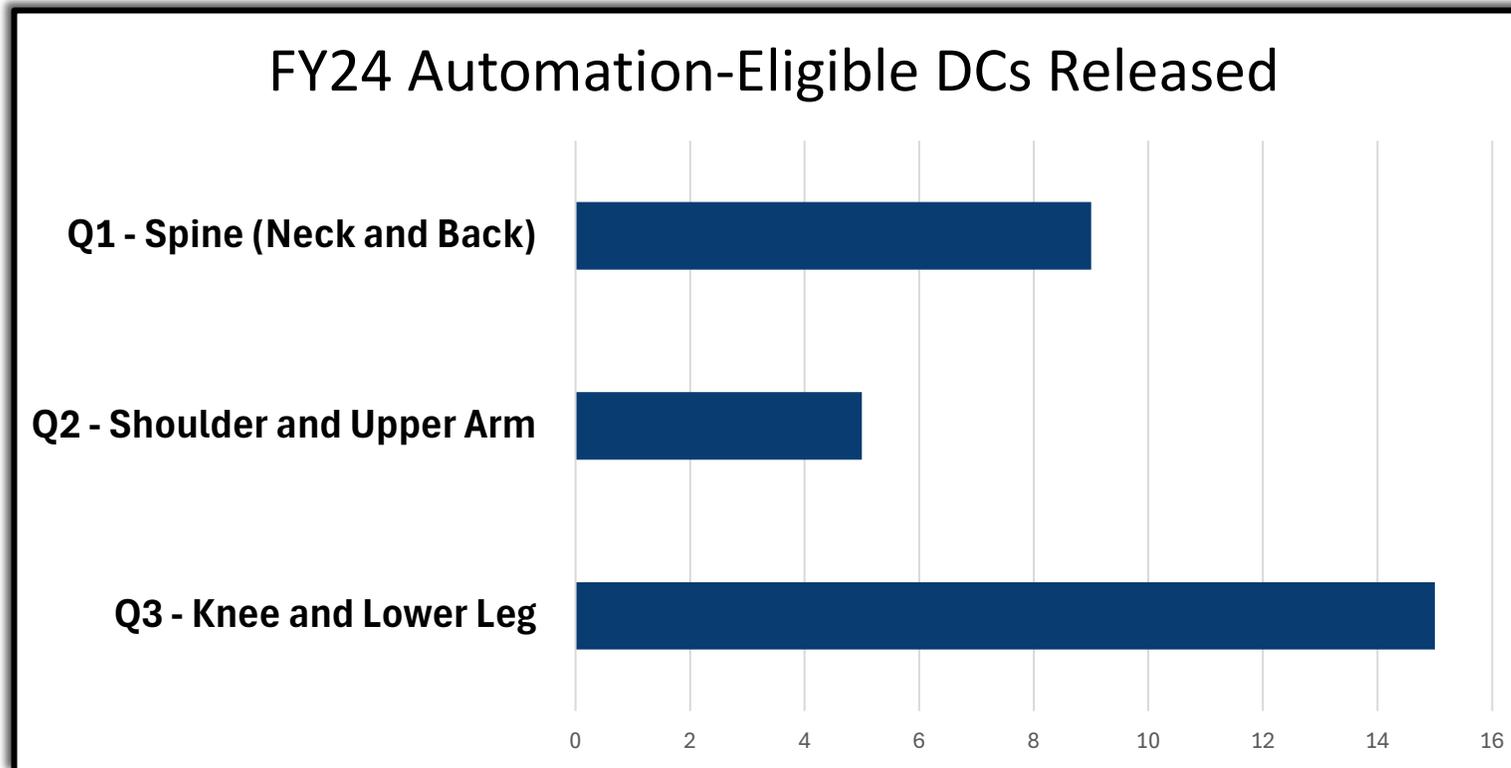


U.S. Department  
of Veterans Affairs

# Automation-Eligible Diagnostic Codes (DCs)

**186** DCs are currently automation-eligible

In FY24, 29 automation-eligible DCs have been released (all from the musculoskeletal system).



# Coming Soon to Automated Decision Support (ADS)

Conditions in  
the  
Development  
Phase of ADS:

Disease	Diagnostic Codes
Elbow	5052, 5205-5213
Fingers, Multiple Finger Amputations; Three digits of one hand; Two digits of one hand; Single finger	5126-5131; 5132- 5141; 5142-515; 5152-5156
Fingers, Limitation of Motion: Multiple digits: Unfavorable ankylosis; Favorable ankylosis	5216-5219; 5220- 5223
Fingers, Limitation of Motion: Individual digits	5228-5230
Foot	5269, 5276-5284
Foot Amputation	5166, 5167, 5170- 5173
Hip	5054, 5250-5255
Wrist	5053, 5214, 5215



# Coming Soon to ADS

## Conditions in the Identification Phase of ADS:

Disease	Diagnostic Codes
Chronic Fatigue Syndrome	6354
Fibromyalgia	5025
Irritable Bowel Syndrome	7319
Thyroid Conditions	7900-7903



# What is ADS 2.0?



In response to claims processor feedback, ABD is refining and updating automation logic. With ADS 2.0, we aim to further improve the accuracy of automation outcomes and to show the logic behind those outcomes.

Refined logic relies more on structured medical data from VHA Medical Center Records to identify diagnoses, diagnostic testing, imaging studies, lab analysis, and other VHA medical data.

The updated ARSD “shows the math” behind automation outcomes. It includes new tables explaining which specific contentions were reviewed, the outcome per contention, and the evidence supporting the automation outcome.



# ADS 2.0

New with ADS 2.0

Updated logic for 17 ADS groupings, consisting of 126 DCs, seen here

\*Graduated

Conditions with Updated Logic	Number of DCs
Tinnitus*	1
Migraine*	1
Hypertension*	1
Hearing Loss*	1
Rhinitis*	4
Mental Conditions*	36
Asthma	1
Peripheral Nerves	63
Sinusitis	5
Prostate Cancer	1
Bladder Cancer	1
Kidney Cancer	1
Male Reproductive Cancer	1
Sleep Apnea	1
Respiratory Cancer	1
Respiratory Conditions	15
Melanoma	1



# ADS 2.0

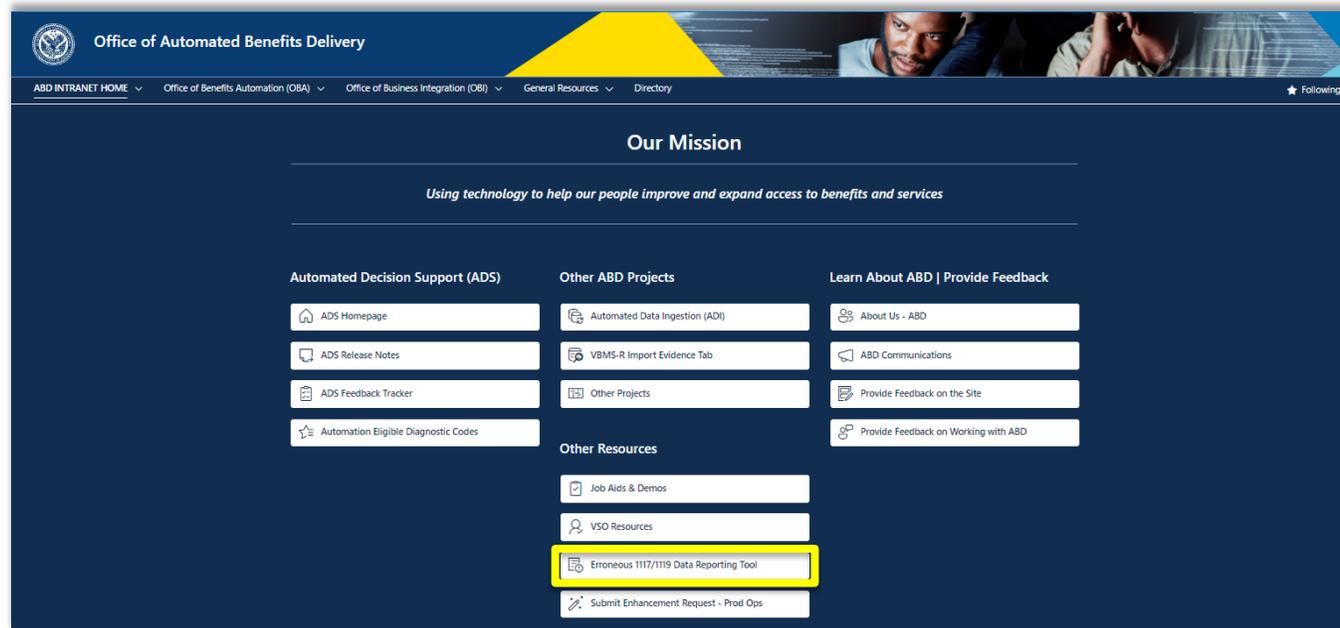
The following conditions have been identified to receive updated logic through Automation 2.0:

Conditions	Number of DCs
Sarcoidosis	1
Pleuritis	1
Lymphoma/Lymphatic Cancer	8
Head and Neck Cancer	11
Gynecological Cancer	1
GI and Pancreatic Cancer	1
Breast Cancer	1
Brain Cancer	1

# ABD SharePoint Intranet

ABD replaced intranet pages with a modernized [SharePoint](#), which includes:

- VSO page, highlighting most relevant resources
- Updated, electronically distributed ADS Release Notes
- Lists of automation-eligible DCs
- PowerApp feedback tracker
- Resources including job aids, user tools, and ABD organizational information



Note: You must be logged on to the VA network to access the ABD SharePoint.



# U.S. Department of Veterans Affairs

Office of Benefits Automation  
Accredited Representative Management  
Briefed by: Becky Lindstrom

# Accredited Representative Management



## Project Goals

Create user-friendly and accessible tools on VA.gov for Veterans to manage representation.

Provide tools for accredited representatives to submit/track claims and update dependents.



# Accredited Representative Management



## Finding Representation

- Landing page [updated](#) March 11, 2024
- New search functionality. Veterans can search for accredited representative based on:
  - Address
  - mileage range
  - by name
- Appoint a new representative via multiple submission options.
  - Upload the form through AccessVA
  - Mail to Claims Intake Center
  - Drop off at VA Regional Office



# Accredited Representative Management

- As of May 20, 2024, claimants may visit VA.gov to verify their current representative.



**View  
Representation**

## Check if you already have an accredited representative

We don't automatically assign you an accredited representative, but you may have appointed one in the past.

If you appoint a new accredited representative, they will replace your current one.

### Your current accredited representative

#### Texas Veterans Commission

You can work with any accredited representative at this organization

 [1700 Congress Ave Ste 800](#)

[Austin, TX 78701](#)

 [512-463-6564](#)

 [Learn about accredited representatives](#)



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# Accredited Representative Management



## Future Enhancements



- Fill and print VA Forms 21-22 and VA Form 21-22a (~September 2024)
- Digital submission of VA Forms 21-22 and 21-22a (~November 2024)
- Accredited Representative Portal with accept/reject POA functionality (~December 2024)
- VA Form 21a with accept/reject functionality. (~December 2024)
- Accredited Representative Portal update to submit, track claims status, update dependents (TBD)



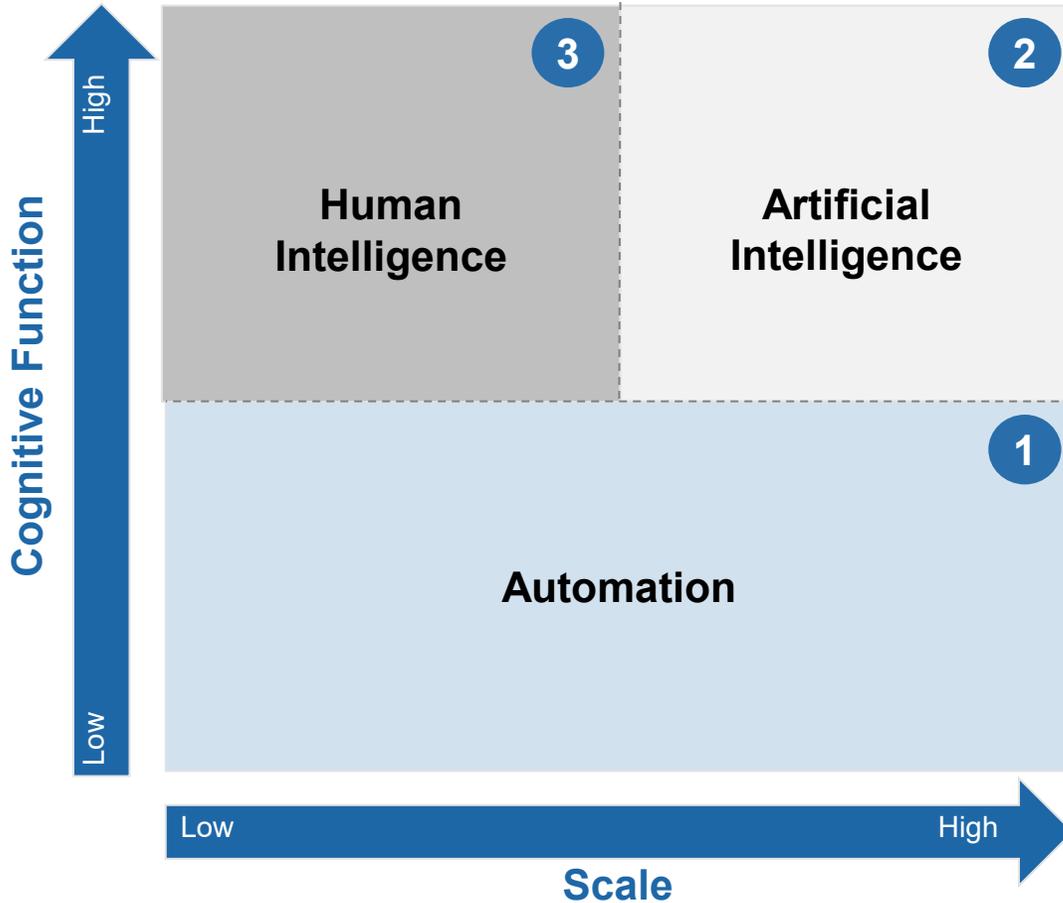


## **Automation vs. Artificial Intelligence**

**Paul Shute, Assistant Deputy Under Secretary  
Office of Automated Benefits Delivery**

**June 17, 2024**

# Solution Assessment Model



## Terminology

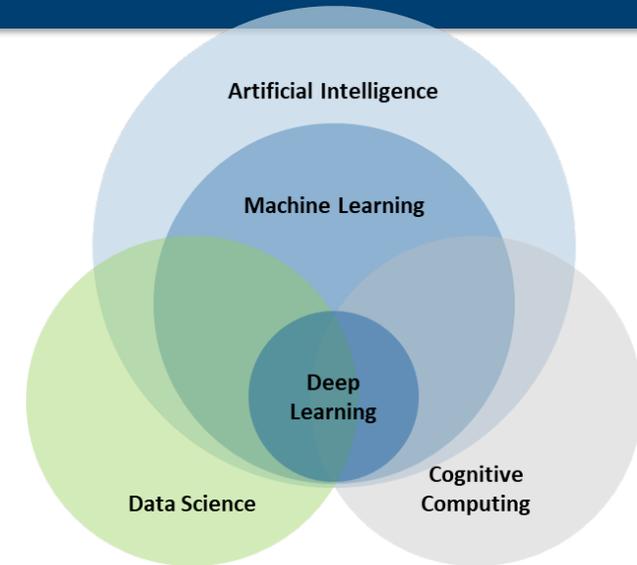
- 1 Automation:** Rules-based system that can complete easy tasks automatically and repeatedly without human intervention
- 2 Artificial Intelligence:** Systems that learn from, respond to, and interact with data, information, and business processes
- 3 Human Intelligence:** Cognitive function including empathy, complex thinking for problem-solving, and original/creative thought

*Automation and artificial intelligence have the potential to free employees from routine and repetitive tasks and redirect their time and talent to high-value work*

# Key Terms and Definitions

## Key AI Terms & Definitions

<b>Artificial Intelligence</b>	Systems that learn from, respond to, and interact with an environment or process intelligently
<b>Cognitive Computing</b>	Technologies whose design is inspired by the brain and/or theories of cognition
<b>Data Science</b>	Multidisciplinary field whose focus is centered on extracting insights from data
<b>Deep Learning</b>	ML techniques leveraging artificial neural networks to process data and capture complex patterns for use in decision making
<b>Machine Learning</b>	Software that learns structures and relationships within data and applies that learned pattern against future data



**Figure 1.** Illustration of key concepts in AI and their relationships. Adapted from USAA.

## Additional Frequently Used Terms & Definitions

<b>Automation</b>	Rules-based system that can complete easy tasks automatically and repeatedly without human intervention
<b>Natural Language Processing</b>	Software that learns structures and relationships within data, and applies that learned pattern against future data
<b>Optical Character Recognition</b>	Technology that recognizes and converts images of typed, handwritten or printed text into machine-encoded text
<b>Semi-structured Data</b>	Data containing some defining characteristics without conforming to a structure expected with a relational database; organizational properties such as semantic tags or metadata make it easier to organize (e.g., email messages)
<b>Structured Data</b>	Data usually contained in rows and columns whose elements can be mapped into fixed pre-defined fields; easiest to search and analyze (e.g., Excel spreadsheet data)
<b>Unstructured Data</b>	Data that cannot be contained in a row-column database and does not have an associated data model (e.g., text files, photos, PDFs); usually stored in data lakes, NoSQL databases, applications and data warehouses

# Automated Decision Support

## Automation as a Decision Support System?

- Unlike end-to-end automation that requires no human intervention, VBA's Automated Decision Support (ADS) is being used as a decision support system
- Decision support systems leverage technology to help inform decision-making activities

## Examples of Decision Support Systems

- Global Positioning System (GPS) route planning
- Agriculture crop planning
- Real estate comparisons
- Medical support for clinicians and doctors



# Why AI at VA?

## 9.1 million patients

VA is the largest integrated healthcare system in the U.S.



## 120,000 clinicians

The majority of U.S. doctors and nurses do at least some of their training at VA.



## 1,000,000+ genomic donations

VA has the largest genomic database tied to medical records in the world.



## 2 million claims processed per year

Providing benefits to more than 6 million Veterans, Survivors, and their families.



## 1,200+ medical facilities

Veterans receive care across all U.S. states and territories.



## 400k+ employees

More than 1 in 1000 U.S. adults is a VA employee



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U.S. Department of Veterans Affairs

# The VA AI Strategy sets the agency vision and mission to improve outcomes and experiences for Veterans

- VA was one of the first federal agencies with an official and explicit AI strategy, bringing together 20+ offices across VA.
- Four strategic pillars:
  1. Use existing AI to improve outcomes and experiences for our Veterans
  2. Increase VA AI capacity and capabilities
  3. Increase Veteran and stakeholder trust in AI
  4. Build upon VA's existing partnerships across agencies and industry



# The VA Trustworthy AI (TAI) Framework provides a foundation for agency TAI activities

- Approved by the VA Data Governance Council (DGC) for agency-wide use in July 2023.
- Synthesizes federal and VA requirements (i.e., EO 13960, EO 14091, EO 14110, VA Data Ethics Framework) with other federal resources (e.g., AI Bill of Rights, NIST AI RMF).
- VA Trustworthy AI Principles underpin AI use case intake and assessment processes.
  - Currently executed by VA Chief AI Officer, NAII, and AI Working Group under VA DGC.

**The Department of Veterans Affairs Establishes a Trustworthy AI Framework**



# VA's Trustworthy AI Journey - EOs to Implementation Guidance

## Federal TAI Frameworks

- ✓ **Executive Order 13960, Promoting the Use of Trustworthy Artificial Intelligence in the Federal Government (2020)**
- ✓ **Executive Order 14110, Safe, Secure, and Trustworthy Development and Use of Artificial Intelligence (2023)**
- ✓ **OMB M-24-10, Advancing Governance, Innovation, and Risk Management for Agency Use of Artificial Intelligence**
- ✓ Executive Order 13985, *Advancing Racial Equity and Support for Underserved Communities Through the Federal Government* (2021)
- ✓ Executive Order 14091, *Further Advancing Racial Equity and Support for Underserved Communities Through the Federal Government* (2023)
- ✓ OMB Memo Advancing Governance, Innovation, and Risk Management for Agency Use of Artificial Intelligence, (2023, draft)
- ✓ White House AI Bill of Rights (2022)
- ✓ NIST AI Risk Management Framework (2023)
- ✓ VA Principle-Based Ethics Framework for Access to and Use of Veteran Data (2022)
- ✓ GAO *Artificial Intelligence: An Accountability Framework for Federal Agencies and Other Entities* (2021)
- ✓ OECD *Recommendation of the Council on Artificial Intelligence* (2019)

## VA Trustworthy AI Framework



- ✓ Unifies multiple federal frameworks into a tailored VA framework to streamline AI governance activities
- ✓ Provides a foundation for developing actionable and measurable guidance for AI use case owners
- ✓ Aligns to the needs and timing of multiple imminent White House initiatives, including new EO, OMB guidance, and the National AI Strategy

## Implementation Guidance

✓ Quick Start Guide

 TAI Intake and Assessment

**WHAT DO I NEED TO KNOW FOR MY AI PROJECT?**

NALI is currently working with the VA Data Governance Council AI Working Group (AIWVG) and other stakeholders to develop implementation guidance for the VA Trustworthy AI Framework. Until that guidance is developed and approved, the following table provides a set of questions to ask of your AI project or system to build a roadmap towards consistency with the principles in the Framework.

VA Trustworthy AI Framework Principle	Ask yourself...
<b>Purposeful</b>	<ul style="list-style-type: none"> <li>Is the purpose of this system clearly defined and documented during the current stage of this system's life cycle?</li> <li>Are benefits and risks clearly understood and articulated?</li> <li>Is the method and location of documentation clearly described, or is a plan for future documentation clearly articulated?</li> <li>What are the specific benefits to Veterans or system users versus a non-AI approach?</li> </ul>
<b>Effective &amp; Safe</b>	<ul style="list-style-type: none"> <li>Are mechanisms in place to ensure the safety and efficacy of this system during the current stage of this system's life cycle?</li> <li>Do these mechanisms include pre-deployment testing, third party validation, ongoing monitoring, accuracy metrics, representativeness of training data, risk-benefit analysis?</li> <li>Is an authoritative (i.e., VA-approved, industry standard, etc.) process, framework, or tool used to assess this system for safety and efficacy?</li> <li>Are methods for mitigating any risks that are identified clearly articulated?</li> </ul>
<b>Secure &amp; Private</b>	<ul style="list-style-type: none"> <li>Are mechanisms in place to ensure the security and privacy of this system during the current stage of this system's life cycle?</li> <li>Are practices to identify and address security risks documented, such as cybersecurity controls, VA Handbook 6500, compliance with FedRAMP and/or VA ATO requirements?</li> <li>Are practices to identify and address privacy risks documented, including access to PHI, PII, or other VA sensitive information?</li> <li>Are plans to respond to security or privacy breaches in place and clearly documented?</li> </ul>

Department of Veterans Affairs | Trustworthy Artificial Intelligence Standard Operating Procedure

**SECTION 2: VA TRUSTWORTHY AI STANDARD OPERATING PROCEDURE TABLES**

VA Trustworthy AI Principle Requirement	Description	ID
Does the system provide clear benefits to Veterans with minimal risks?		P-1
Element	Describe the purpose of the AI system using plain-spoken, non-technical language.	P-2
	Use letters of contact (POCs) for assistance and to report potential issues or faults with the AI use case.	P-3
	Summarize the data scope used for the AI use case.	P-4
	Describe the specific AI techniques and models used in the AI use case.	P-5
	Summarize AI use case limitations or boundary conditions.	P-6
	Describe the expected outcomes for Veterans or VA staff.	P-7
	Describe the expected impact on VA's mission, including: <ul style="list-style-type: none"> <li>Alignment to VA's strategic goals</li> <li>Alignment to project's home office strategic goals</li> </ul>	P-8
	Describe AI use case risks, including consequences, likelihood, and priority (critical, high, medium, low) and whether each risk will be: <ul style="list-style-type: none"> <li>Managed (and how)</li> <li>Transferred or shared with other organizations, if so, please name the organizations</li> <li>Avoided (and why)</li> <li>Accepted (and why)</li> </ul>	P-9
	Provide a summary of resources, personnel, technologies, and time needed to implement this AI use case (RPI).	P-10

For more information about this section, please consult the following VA resources:

- Department of Veterans Affairs Artificial Intelligence (AI) Strategy, July 2023

DRAFT AND PRE-DECISIONAL

## Executive Order 14110

- Released: October 30, 2023
- Broad EO with actions across government, industry, and academia
- Establishes new standards for AI safety and security, protects Americans' privacy, advances equity & civil rights, stands up for consumers and workers, promotes innovation and competition, advances American leadership across the world

## OMB M-24-10 Memo on AI

- Released: March 28, 2024
- Outlines requirements for federal agencies to annually assess AI applications' impact on safety and rights and report their status.

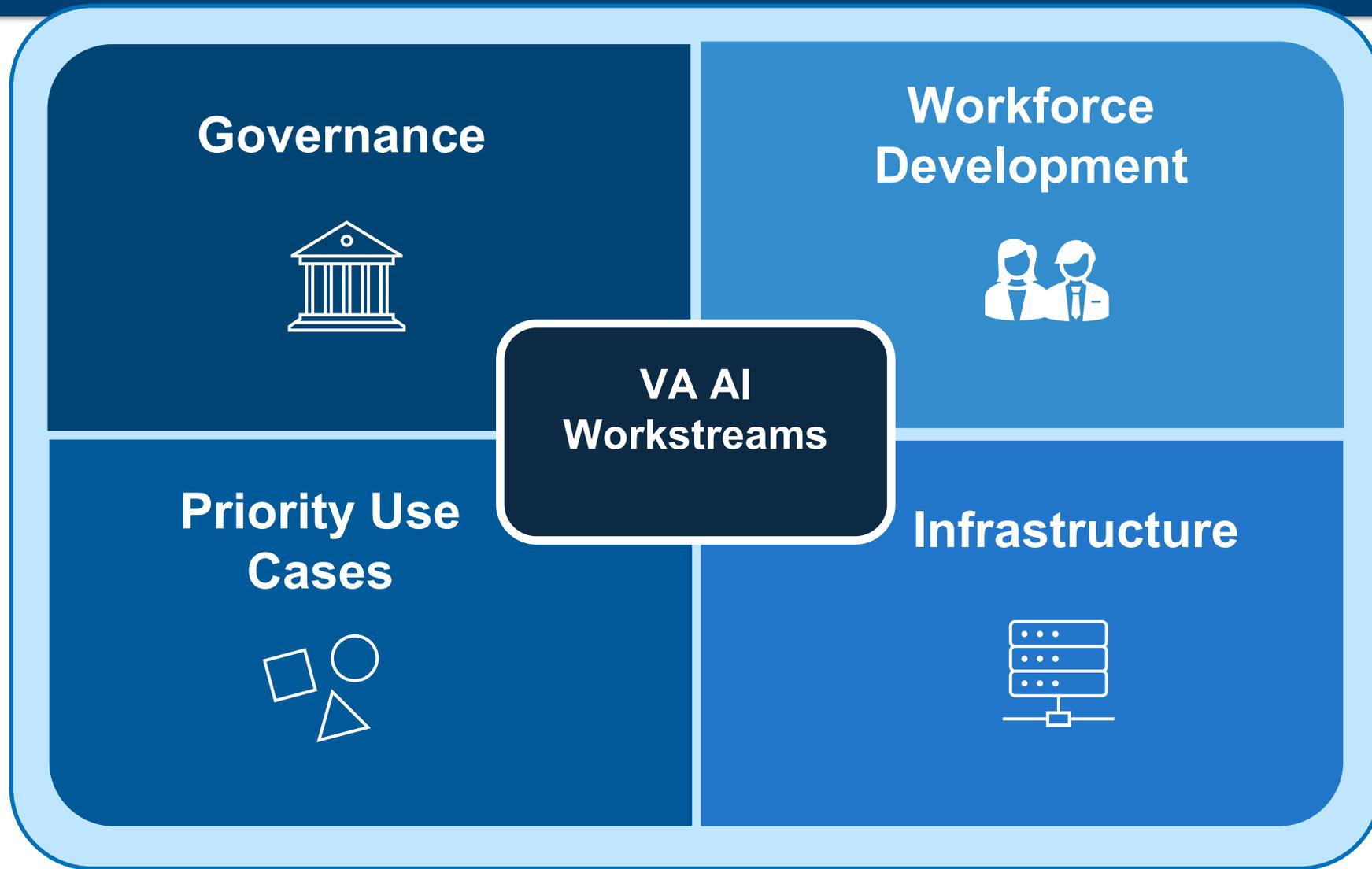


# OMB M-24-10: Actions for Federal Agencies

Action	Deadline	Due Dates	Status
Designate an agency <b>Chief AI Officer</b> and notify OMB	60 days	May 27, 2024	Complete
Convene Agency <b>AI Governance Board</b>	60 days	May 27, 2024	Complete
Submit to OMB and release publicly an <b>agency plan to achieve consistency</b> with this memorandum	180 days and every two years thereafter until 2036	September 24, 2024	Developing plan
Develop and <b>release publicly an agency strategy</b> for removing barriers to the use of AI and advancing agency AI maturity	365 days	March 28, 2025	“”
Publicly release an <b>expanded AI use case inventory</b>	Annually	Q1 FY2025	“”
Share and release AI code, models, and data assets, as appropriate	Ongoing		“”
<b>Stop using any safety-impacting or rights-impacting AI that is not in compliance</b> with Section 5(c) and has not received an extension or waiver	December 1, 2024 (with extensions possible)	December 1, 2024	“”
Certify the ongoing validity of the waivers granted under Section 5(b) and (c) and publicly release a summary detailing each individual waiver and its justification	December 1, 2024 and annually thereafter	December 1, 2024	“”
Conduct <b>periodic risk reviews</b> of any safety-impacting and rights-impacting AI in use	At least annually and after significant modifications		“”
Report to OMB any determinations made under Section 5(b) or waivers granted under Section 5(c)	Ongoing, within 30 days of granting waiver		“”



# VA AI Workstreams



# AI Inventory and Assessment



## AI Governance Council

Membership across VA, including Privacy, Cybersecurity, Data, Ethics, etc.



## Public AI Use Case Inventory

2023 Inventory:

- 128 use cases
- 40 in Operations



## Federal Requirements for 'high risk' AI

- AI impact assessment
- Assess in real-world context
- Monitor & mitigate discrimination

Due: December 2024

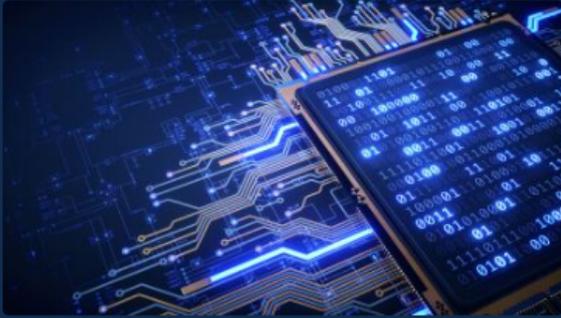


## AI Policy & Guidance



# AI Awareness

## Artificial Intelligence (AI) Awareness for All



The trainings provided on this page are intended to create a baseline understanding of AI and prepare all VA employees for their use of AI and or their support of AI implementation at VA.

The three categories listed below are aligned to different roles at VA. It is important to note that all employees, regardless of position or level should review the category for All Employees in addition to the category best aligned to their individual role.

- ✓ All Employees
- ✓ Leaders and Managers
- ✓ Executive Leaders



### Quick Links

 Home

 Technical Career Development Tracks

 Have Questions? Contact Us!

## Software



DevSecOps Specialist



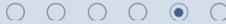
Product Designer User Interface



Product Manager



Service Designer User Experience



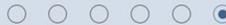
Software/Cloud Architect



Software Developer



Software Test and Evaluation Specialist



## Artificial Intelligence (AI)



AI Awareness for All



AI/Machine Learning (ML) Specialist



AI Test and Evaluation Specialist



AI Risk and Ethics Specialist



AI Adoption Specialist



AI Innovation Leader

## Data



Data Analyst



Data Architect



Data Officer



Data Operations Specialist



Data Scientist



Data Steward



Database Administrator



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# AI-Enabled Workforce

## BUILD THE WORKFORCE

### Hiring Strategies

A traditional approach may not always achieve the optimal state of VA - AI workforce recruitment and retention efforts, so it is important to leverage all available resources and best practices for sourcing highly-qualified candidates. Robust talent pipelines facilitate continuous proactive recruitment and hiring processes and significantly expedite Time-to-Hire (T2H).

To become and remain competitive, VA must act now to develop an enhanced recruitment and retention process for identified AI and AI-enabling occupations by integrating the following flexibilities, authorities, and incentives into recruitment and retention plans and business practice.

It is important to note that there is not a single AI position or occupation that VA will need to hire to support the workforce. Integrating foundational AI-enabling roles, such as data scientists, will help to build the needed infrastructure to support employees in AI roles.

#### Expected Outcomes

- Transform VA hiring culture to a proactive team-centric approach where all stakeholders work together to promote continuous readiness to hire.
- Create a candidate focused, positive first impression of the VA in a new employee's journey to a career with VA. The recruitment through onboarding experience should be organized and seamless.
- Improved relations and diversity, size, quality, and talent of all candidate pipelines.
- Improved staff retention and enhanced Veteran experience.
- Increase end-user engagement and satisfaction throughout the hiring process.
- Hire the right candidates from the right markets and using the right assessment tools.

The following section is dedicated to the best practice hiring strategies with special focus on:

- VA Optimal State - Proactive Hiring
- AI Hiring Journey
  - Pre-recruitment
  - Recruitment
  - Interview, Select, Onboard



### Plan \* Recruit \* Hire \* Retain

#### Key Reminders for Building the AI Workforce

- Maximize all available hiring flexibilities.
- Leverage the VA classified position descriptions for AI and AI-enabling positions.
- Define specific or unique characteristics required for the AI or AI-enabling position that directly impacts the recruitment process for that position. Identifying specific needs up front allows you to target the specific audience and talent pipelines.
- Highly-qualified candidates are interested in working for the VA, develop sourcing streams to tap into those markets.
- Focus on developing a team-centric approach to find, attract, and hire the right candidate for the AI or AI-enabling position.
- Make the hiring process quick, efficient, and seamless for all end-users and candidates.

12 | VA AI Workforce Resources Blueprint

## AI HIRING JOURNEY

### Recruitment through Onboarding

#### Focus on Enhancing the Candidate Experience

The candidate experience through the AI hiring journey can boost or decrease the candidate's opinion and perception about a career with VA. Positive candidate experience is important because it helps VA attract top talent, makes more people inclined to accept a role in VA, encourages referrals, and enhances VA branding.

#### Focus on improving the candidate experience by:

- **Improve communication with candidates.** Clear and frequent communication throughout the entire recruitment and onboarding process is key to a positive candidate experience.
- **Improve internal communications.** Be respectful of the candidate's time. Internal communications are critical to moving the recruitment and onboarding processes forward, updating stakeholders at each milestone with the status of the candidate and process. Work collaboratively to develop and establish internal communication processes with real-time updates and notifications.
- **Educate and inform candidates of the benefits of a career at VA.** Emphasize Total Rewards during the recruitment process and make sure the candidates receive the Total Reward\$ estimated with their tentative job offers (TJO).
- **Demonstrate your commitment and excitement to new members of your team.** Develop a team-centric, quick, efficient, and transparent hiring process.

#### Maximize the team-centric approach:

- Many different offices work in a coordinated effort to hire new employees. Identify the stakeholders involved in the AI hiring process and develop the team-centric approach focused on enhancing the candidate experience and onboarding them quickly and efficiently.
- Promote investment from each stakeholder to encourage direct engagement and collaboration.
- As a team, develop a communication plan to remove any silos between stakeholders and services to seamlessly recruit and onboard candidates.
- Work to identify and eliminate extraneous processes and automate processes when possible.
- Establish team-centric approved goals and expectations for each stakeholder to drive realistic expectations for each candidate activity.
- Develop back-up plans for coverage of employees during leave to keep the hiring process in motion.



#### AI Hiring Journey Map



14 | VA AI Workforce Resources Blueprint



## PRE-RECRUITMENT



### Plan

#### Pre-recruitment - strategically plan

Recruitment is everyone's responsibility. The focus should be to enhance the candidate experience and to simplify the application process to find applicants. It is critical to strategically plan the AI workforce needs and build the candidate pipelines of qualified candidates who are interested and ready to work for VA. This promotes VA's optimal state of proactive and continuous recruitment.

Pre-recruitment is the process of preparing and strategizing for your hiring needs. Cultivating a systematic approach to building your workforce sets the tone and ensures success of the recruitment process.

There are numerous recruitment flexibilities that allow VA to meet future AI workforce needs. The best practices in this section help VA by improving the candidate experience, increasing satisfaction for hiring officials, enhancing the quality and diversity of the talent pool, and driving down recruitment and onboarding cycle time.

#### Pre-recruitment Strategies

- **Strategy #1** - Develop AI focused career pathways.
- **Strategy #2** - Forecast vacancies and commit to hire.
- **Strategy #3** - Develop strategic marketing recruitment and retention plans.
- **Strategy #4** - Develop pay incentive strategies.
- **Strategy #5** - Develop hiring strategies.
- **Strategy #6** - Establish early AI talent pipeline partnerships and focus on developing source streams to build the candidate pipelines of the future VA AI workforce.

#### Best Practice Tips

- Commit to Hire. Have all approved recruitment, hiring, and pay incentives authorized.
- Make budgetary and resource decisions to directly support the required AI workforce needs.
- Use the AI marketing recruitment approach to develop a local strategic approach to build talent pipelines and find the right candidate from the right market.
  - Use geo-fencing, geo-tagging, and other innovative marketing tactics.
- Use authorized hiring authorities.
- Plan to host career and hiring (virtual and in-person) fairs to expand outreach to potential candidates that are not found within the normal AI marketing recruitment niches.
- A traditional "post and pray" on USA Jobs approach may not achieve VA's optimal hiring state, so it is important to leverage all available resources and best practices for sourcing AI and AI-enabling candidates.
- Develop a team-centric and collaborative approach to streamline the onboarding journey for AI candidates.
- Be ready to interview and offer TJOs with a pre-determined salary range estimate and all authorized incentives.

15 | VA AI Workforce Resources Blueprint



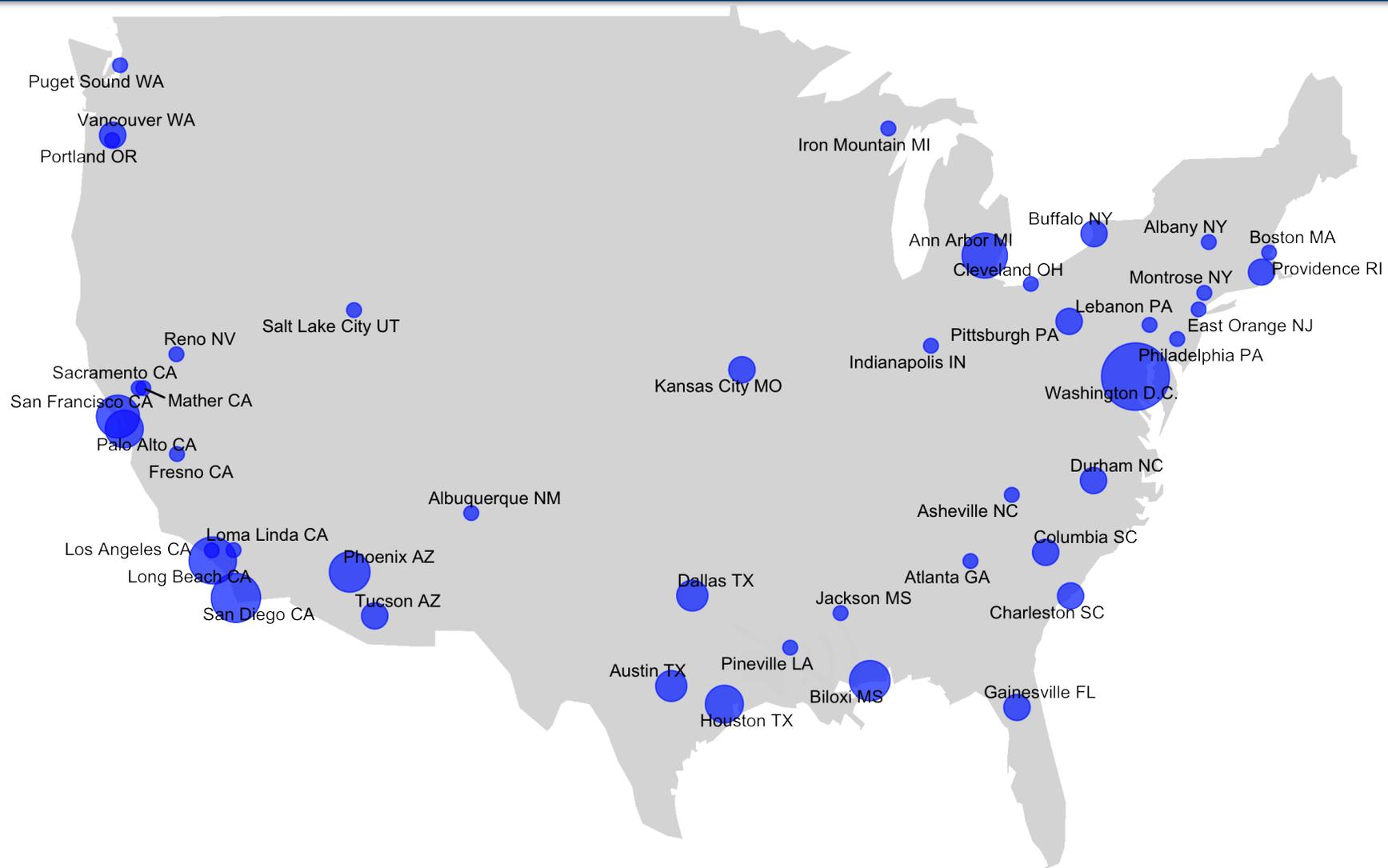
Choose VA

VA



U.S. Department of Veterans Affairs

# 2023 VA AI Use Cases



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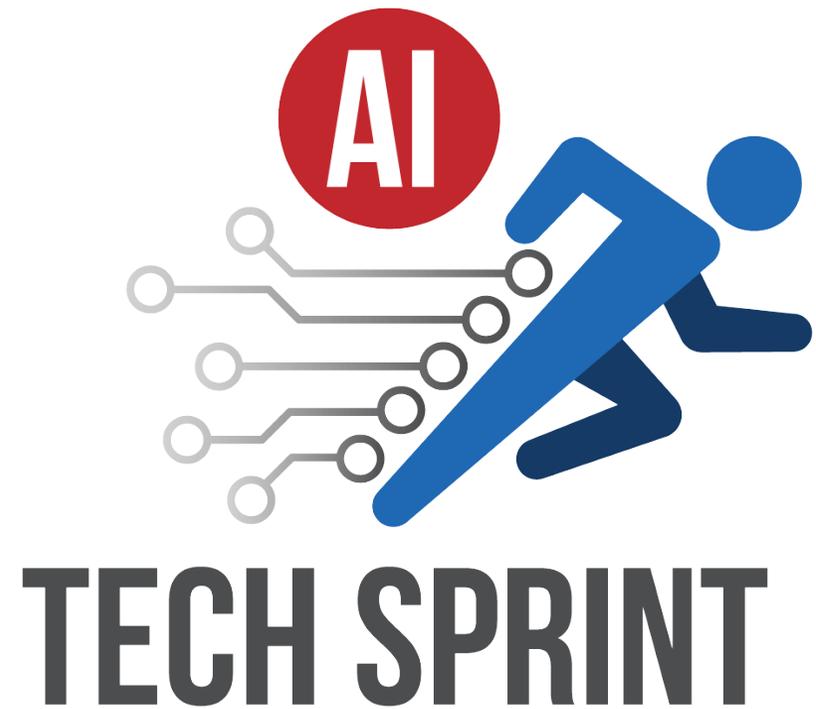
VA



U.S. Department of Veterans Affairs

# AI Tech Sprints

- AI Tech Sprints provide a novel approach to innovation to meet Veteran needs
- AI Tech Sprints are three-month competitive engagements that foster collaboration between industry, academia, and the Department of Veterans Affairs (VA)
- Teams compete to create AI-enabled tools that leverage federal data to address specific Veteran health care issues
- AI Tech Sprints accelerate VA innovations and vastly expand our ability to work with many different partners in industry and academia
- **Executive Order 14110: "The Secretary of Veterans Affairs will... 5.2(f)(i) Within 365 days of the date of this order, host two 3-month nationwide AI Tech Sprint competitions"**



## Ongoing Tech Sprint: Health Care Worker Burnout

- **Voice to medical documentation.**  
Artificial intelligence (AI) solutions to transform natural conversations between providers and patients into structured medical documentation.
- **Intelligent document processing for care in the community PDFs in medical records.**  
AI solutions to rapidly extract salient information from copious community care documentation and transform into structured data that can integrate into clinical and benefits workflows.





# U.S. Department of Veterans Affairs

Office of Field Operations  
Operations Management  
VBA Backlog and Workload Distribution



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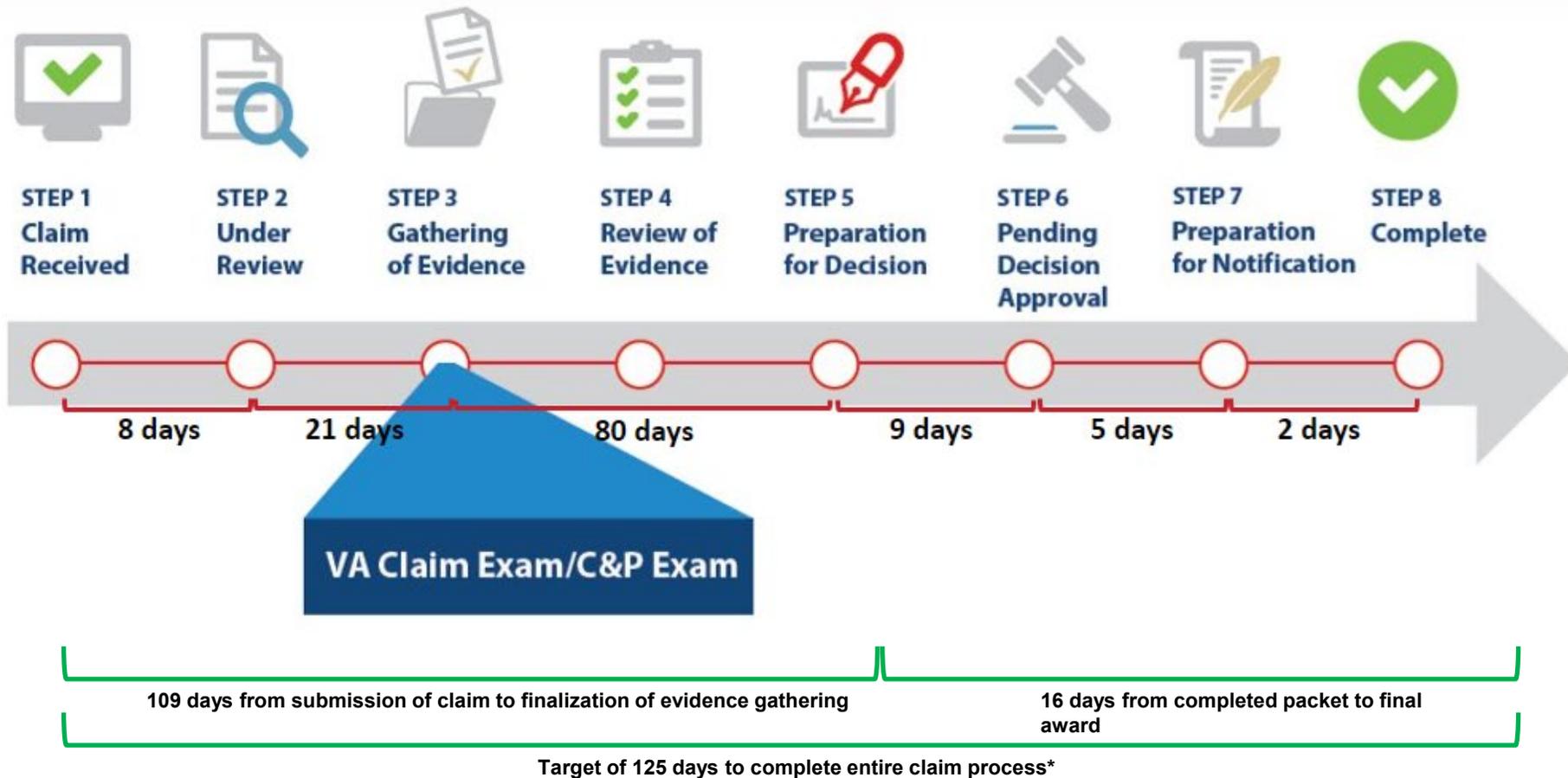
U.S. Department  
of Veterans Affairs

# Rating Claims Backlog

- VA's backlog is defined as disability rating claims that have been awaiting a decision for more than 125 days.
- Peak: 611,073 claims, March 23, 2013.
- Low: 64,783 claims, December 21, 2019.
- As of May 31, 2024, the backlog was 278,383, 33% lower than its recent peak of 423,179 on January 2, 2024.
  - Extended processing time is sometimes necessary and in the Veteran's interest.



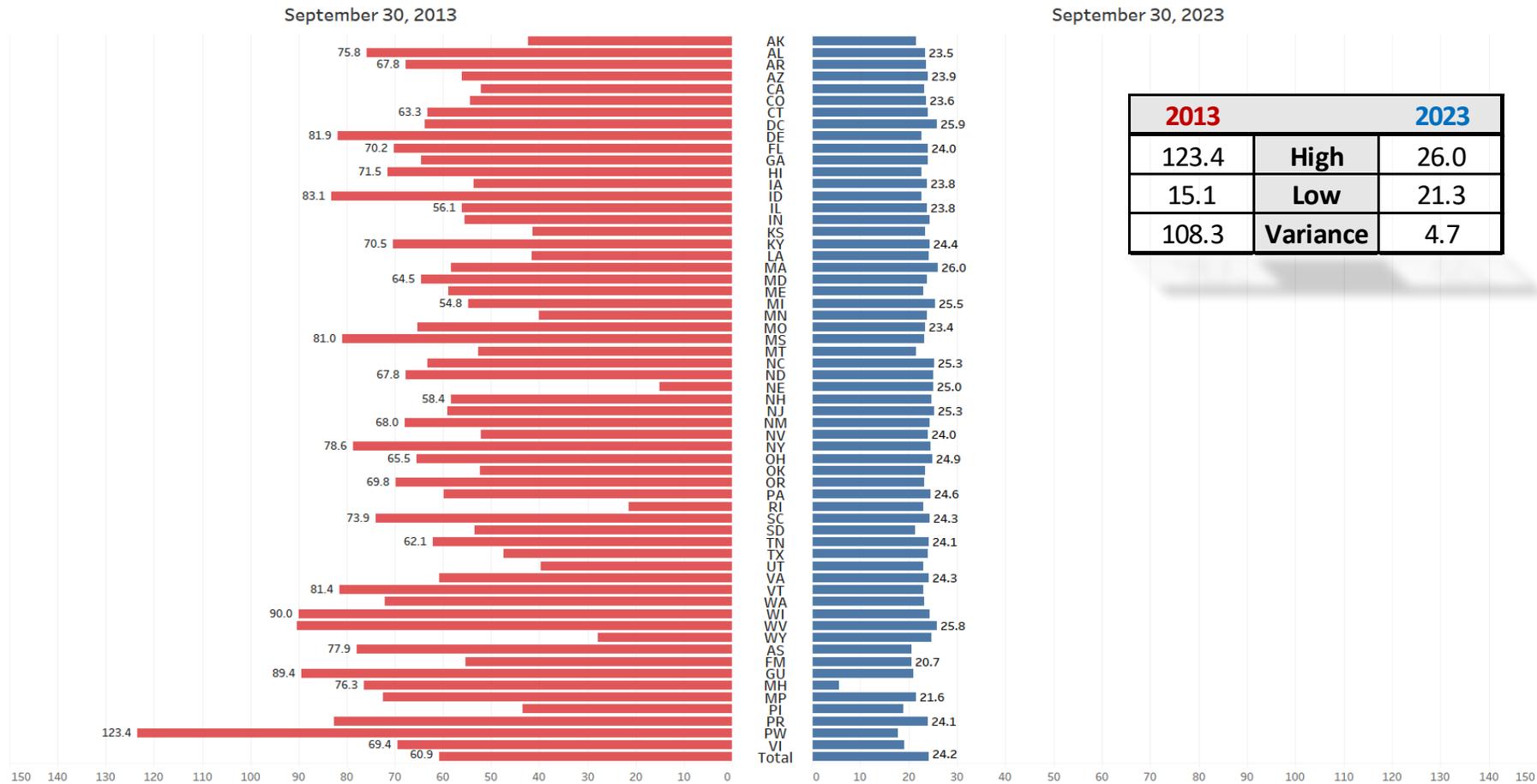
# VA Claim Process Timeline



<sup>a</sup> Process time varies based on evidence, number of conditions, number of exams, and individual factors that speed up (homelessness, terminal illness) or slow down (Agent Orange-related issues under Court supervision, additional evidence-gathering and secondary decisions) process times.



# Timeliness Before and After NWQ



Awaiting Development Times for Claims in Inventory by Veteran Residence



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U.S. Department of Veterans Affairs

# Impacts to Backlog

- The COVID-19 pandemic temporarily halted the supply of critical evidence necessary to render decisions on Veterans' disability claims, to include Compensation and Pension (C&P) examinations and retrieval of Federal records.
- Since August 10, 2022, 1.6M PACT and 2.5M non-PACT claims have been submitted.
- Other factors in VA's higher backlog include additional inventory from passed legislation and VA regulation decision:

Type of Inventory	Additional Inventory
Blue Water Navy (Nehmer)	62,168
Agent Orange (NDAA-2021)	82,956
Gulf War Particulate Matter	113,036
PACT (Since 8/10/2022)*	1,689,739

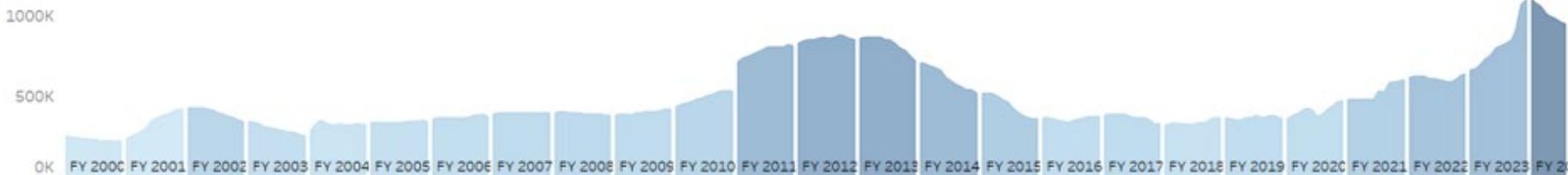
\*Through 6/1/2024

# VA Claims History

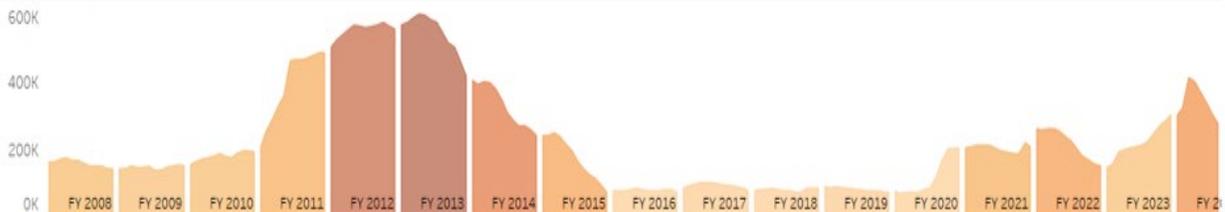
Monthly Rating Receipts Over Time



Pending Rating Inventory Over Time



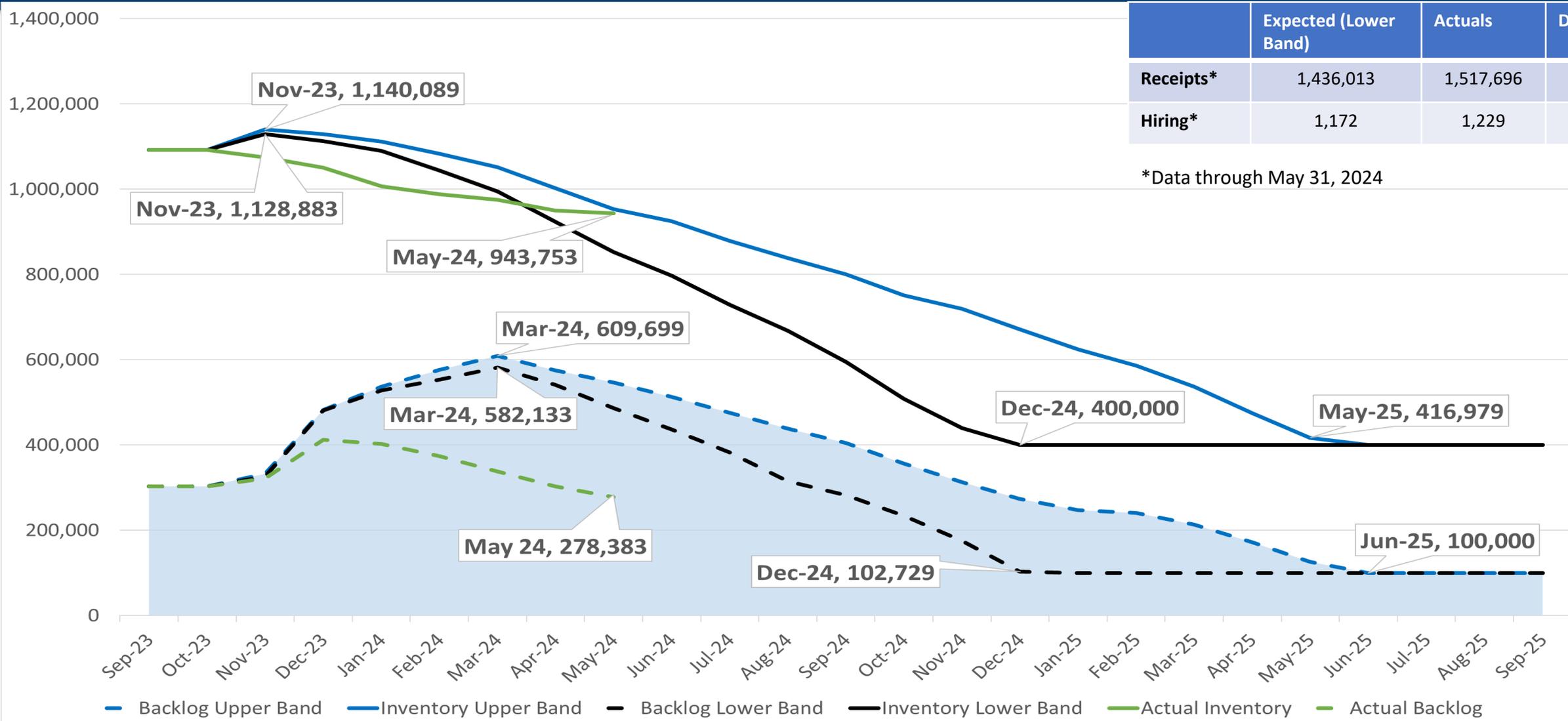
Rating Backlog Inventory Over Time



Completed Rating Claims Over Time



# FY24 Inventory and Backlog



	Expected (Lower Band)	Actuals	Delta
Receipts*	1,436,013	1,517,696	+5.7%
Hiring*	1,172	1,229	+4.9%

\*Data through May 31, 2024

# Improving Timeliness of Service

- VBA is prioritizing older claims to reduce backlog
  - Fiscal Year (FY) 2024: Backlog peaked at 432k claims on January 2, 2024, and has since been reduced to 282k on June 1, 2024, a 33% reduction.
  - FYTD, 62% of completed claims have been from the backlog
- Despite receipts being 5.7% higher than expected, VBA has completed 148,000 *more* claims vs. receipts.
- Average Age of Pending Rating-Related Claims
  - 142.8 days (September 30, 2021)
  - 106.4 days (September 30, 2022) **-33.2 days improvement**
  - 113.5 days (May 31, 2024) **+7.1 days**



# Efforts Taken to Address Backlog

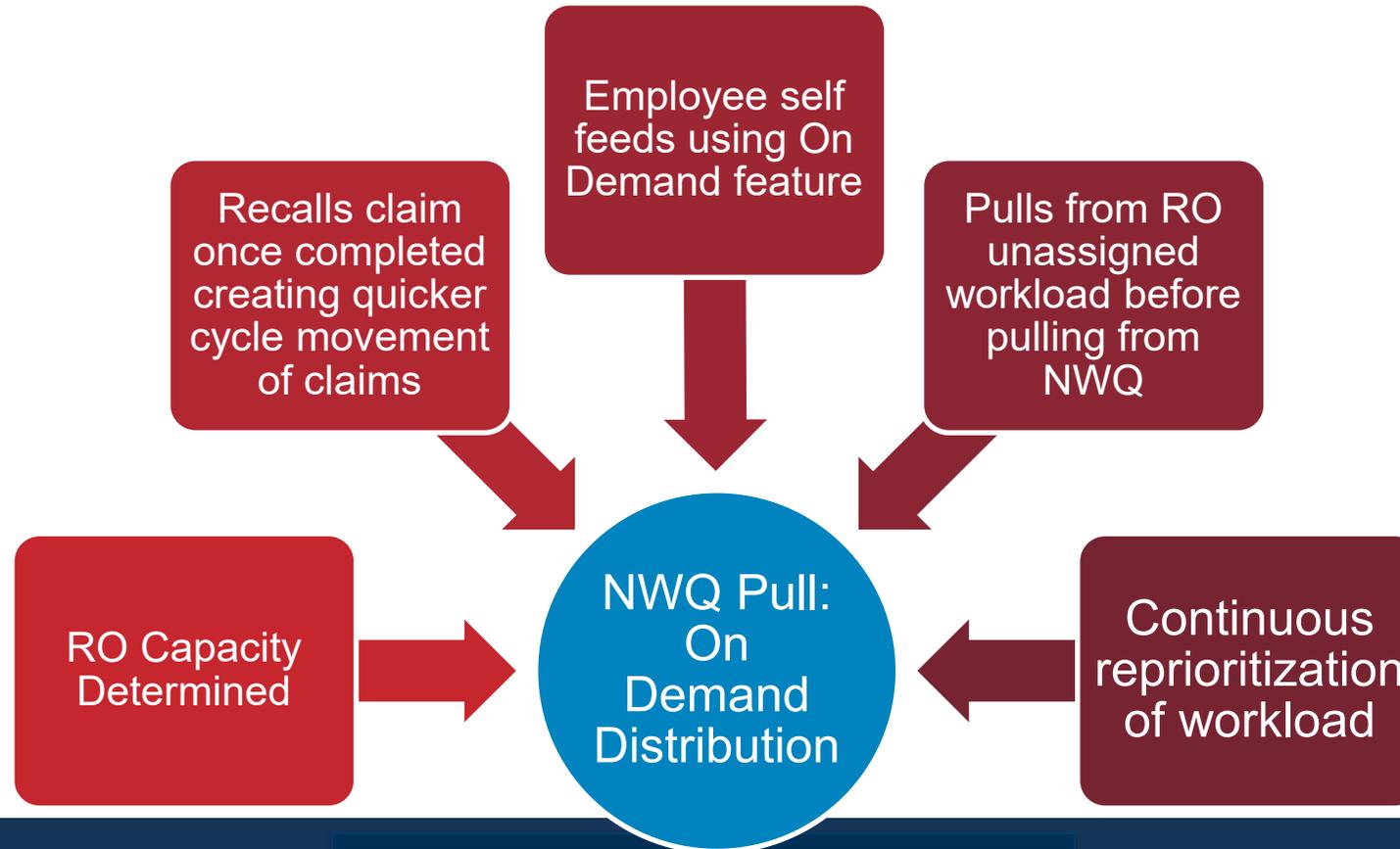
- VBA has taken proactive steps to ensure sufficient resourcing, such that the organization can keep pace with the increasingly available evidence and continuing just-in-time benefit delivery.

Project	Resourcing Gained
Hiring	<p>From October 1, 2021, to June 1, 2024, VBA has completed over 15,000 hiring actions of claims processors. Claims processing capacity has been greatly increased, with 61% more claims processors vs. FY21 levels.</p> <p>FYTD 2024, VBA has hired over 2,500 net new employees.</p>
Continued Use of Overtime Funds	<p>In FY2023, VBA completed 1,981,854 claims for the fiscal year—more than 15.9% greater than last year. The one millionth claim of FY24 was completed on March 1, 2024, and 1.67M claims have been completed FYTD. VBA currently maintains a voluntary OT stance for disability claims processors and is primarily focused on completing ratings and authorization.</p>
Automated Decision Support (ADS)	<p>Technology will result in faster, more consistent decisions ultimately improving the Veterans customer experience.</p>



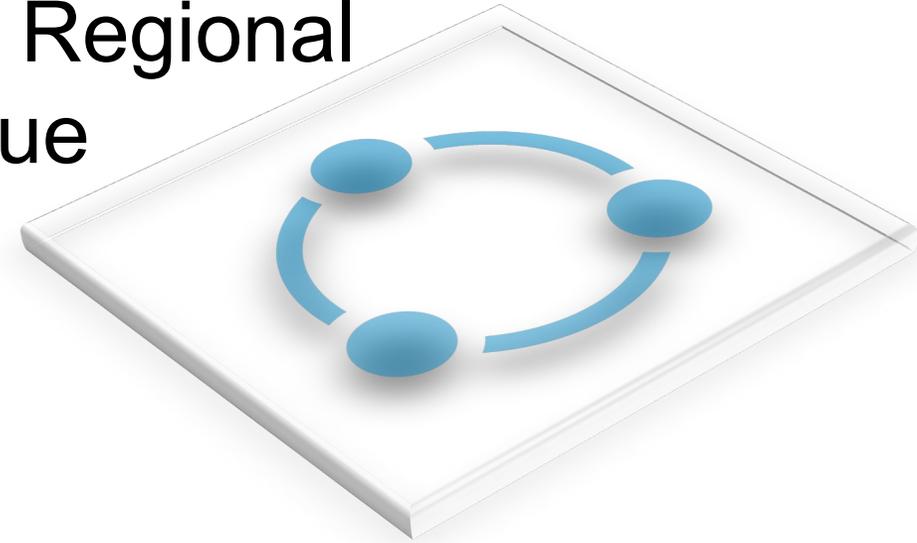
# Path Forward: NWQ 2.0

Incorporates a “pull” distribution system at both the Regional Office and employee level, leveraging work assignments to resources using just-in-time distribution.



# Additional Benefits of NWQ 2.0

- Streamlined capacity inputs from the Regional Office directly to National Work Queue
- Prior Assignment Routing
- System identifies the type of work employees can receive to further enhance workload distribution
  - “Badging” system using employee-specific attributes based on qualifications, training, and quality of the specific employee.



# Q&A



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U.S. Department  
of Veterans Affairs

# MST Updates

**Kenesha Britton, ADUSFO**  
VBA Office of Field Operations  
National Contact Operations



**Choose VA**

**VA**



U.S. Department  
of Veterans Affairs

# MST...Did You Know

## MST Program Updates

*MST claims processor training targets program and process improvements balanced with training to assist our claims processors with managing their emotional intelligence as they work these highly sensitive claims daily.*

### MST Claims Processor Training

- Trauma-Informed Interactions and Communications with Veterans who Experienced Military Sexual Trauma
  - Presented by Dr. Jessica Keith
- MST Training Symposium July 2024
  - Hosted by OTED
- Whole Health Peer-to-Peer Support: Trauma-Informed Second Victim



### **\*New\*** VA Form 21-0781

- VAF 21-0781 Implementation Update
- Form Release Date: 6/28/24



### MST Path Forward Workgroup

- **Subsequent dev letter:** **\*New\*** trauma informed text approved by workgroup on 5/9/2024
- Pending policy review for regulatory compliance



### Regulatory Change - 38 CFR 3.304(f)(5)

- Targeted Publication Date to Fed. Register: 11/2024



# MST Backlog and Quality Update

## MST Program Findings – Historical Headwinds:

- MST accuracy rate based on Special Focused Review (SFR) declines from **2019 to 2023** .
- During this same period, employee individual quality reviews (IQRs) continued to **increase for both VSRs and RVSRs** .
- MST claims receipts outpace MST claim completions despite complete claims hitting an all time high of 43,400 for FY2023.

## Mitigation Strategy:

- Improve workload management strategy to include adding FTE and re-evaluating workload distribution
- Partner and collaborate with Comp Service and OPO to review quality processes
- Collaborate with TRIAD to determine additional needs and assessments to target MST claims processing and supporting activities.



# Special Focus Reviews

	FY19	FY20	One Review			45% Exam Errors 47.9% Dev. Errors	69% Exam Errors
	All ROs	All ROs	All Support Sites	Pre-Consolidation 5 Support Sites 5/2021	Post-Consolidation 8 Support Sites 11/2021	Post-Consolidation 8 Support Sites	MST Operations Center + 8 Help Sites
<b>SFR Accuracy</b>	85.2%	85.9%	78.4%	74.4%	87.28%	76.9%	71.7%
<b>Review Period</b>	5/2019 – 6/2019	7/2019 – 9/2020	10/2020 – 9/2021	Prior to 5/2021	After 5/2021 to 9/2021	11/2022	10/2022 to 9/2023
<b>Total MST Claims Reviewed</b>	<b>197</b>	<b>242</b>	<b>125</b>	<b>86</b>	<b>39</b>	<b>121</b>	<b>212</b>
<b>Total MST Claims Completed</b>	<b>Data Not Available</b>	<b>23,307</b>	<b>22,022</b>			<b>28,354</b>	<b>43,044</b>

\*\*While both FY22 and FY23 SFR quality is the lowest following consolidation, exams are identified as a leading error trend.\*\*

Note: Special Focus Reviews targeted MST-denials only.



# MST Inventory Snapshot

Events	ADP	ADC	Pending Inventory	Receipts FYTD	Completions FYTD
<b>FY 20 [10/1/2019 to 09/30/2020]</b>	172.5	173.4	10,352	24,720	23,307
<b>FY 21 [10/1/2020 to 09/30/2021]</b>	180.8	194.5	17,633	29,283	22,002
<b>2/2/2021: 90 days before Prior to Consolidation to 5 Support Sites</b>	190.1	175.5	11,168	8,576	7,760
<b>05/03/2021: After 5 Support Sites 5/3/21</b>	188.9	176.4	11,455	15,620	14,517
<b>11/1/2021: Consolidation to 8 Support Sites</b>	185.4	228.4	18,879	2,778	1,532
<b>2/18/2022: MST Ops Center Established + 8 Support Sites</b>	200.9	239.4	22,063	12,221	7,791
<b>FY 22 [10/1/2021 to 09/30/2022]</b>	187.1	282.8	25,551	36,272	28,354
<b>10/1/2022: MST 9,724 Prior Denial Rereview Commenced</b>	187.3	263.6	25,622	N/A	N/A
<b>FY 23 [10/1/2021 to 09/30/2023] (includes PACT Act Claims)</b>	206.6	328.6	31,270	48,763	43,044
<b>FY 24 [10/1/2023 to 09/30/2024] MST Ops Center Only Interim Locations returned to non-MST claims processing (9/30/23)</b>	213.4	300.7	36,365	20,062	14,967
<b>10/1/2023 through 3/31/2024 FY to EOM March [prior to surge support assistance]</b>	219.0	300.2	37,674	26,750	20,346
<b>10/1/2023 through 4/30/2024 Surge Support Commences</b>	215.0	304.9	38,661	31,589	24,198
<b>10/1/2023 through 5/31/2024 Metrics include Ops and Roanoke.</b>	211.6	305.8	39,079	36,346	28,536
<b>10/1/2023 through 6/12/2024 [day before brief deck completion]</b>	211.8	298.4	39,077	38,036	30,229

Since FY 20 to date MST-related claim receipts have increase month over month.

Adding to the increased inventory special projects such as rereview of 9,724 prior denied MST-related claims, have impacted the volume of pending inventory.

Following consolidation of this work in May 2021, VBA continued to see MST-related claims receipts rise with the workload assigned to five consolidated locations.

VBA proactively added three additional locations in February 2022 based on increased claims receipts.

The interim consolidated claims processing locations remained in place through September 30, 2024, when the 8 interim sites returned to processing non-MST claims.

143 additional FTE was added to the MST Operations Center increasing their resource allocation to 533 FTE.

With the passage of the PACT Act and a focus on MST outreach receipts continued to increase.

On 4/1/2024 VBA implemented surge support.



Choose VA

VA



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# Surge Support

- **Accelerate inventory and backlog reduction**
  - **Surge Team Implement: 4/1/2024**
    - Roanoke Regional Office: 121 VSRs and 109 RVSRs
    - MST Training Completed: April 10, 2024
  - **Increase permanent MST Operation Center RAM**
    - FTE Increase: from 390 to 533
      - ADM: 2
      - CO/ACO: 8
      - VSR: 50
      - RVSR: 65
      - AQRS: 8
      - RQRS: 10
- **Improve MST claim quality**
  - Implement In Process Quality Reviews (IPRs) throughout the lifecycle MST claims adjudication.
  - Modify onboarding training framework to include IPRs
  - Develop targeted training for top error trends
  - Re-assess IPR framework to identify program effectiveness post 120 days after implementation
  - Participated in national Quality Stand Down on 6/6/2024



# MST Inventory – By Week

## 4/1/2024 Surge Commences

WEEK	ADP	ADC	INVENTORY	RECEIPTS	COMPLETIONS	DEV	EVID	DEC	AWD	AUTH
04/01/2024	218.6	318.3	37,725	26,965	20,510	438	30,134	7,001	99	53
04/08/2024	218.1	309.4	38,072	28,137	21,335	623	29,561	7,696	111	81
04/15/2024	217.2	356.6	38,392	29,265	22,143	464	29,543	8,222	94	69
04/22/2029	216.3	317.4	38,527	30,309	23,052	460	29,400	8,385	171	111
04/29/2024	215.8	315	38,652	31,377	23,995	509	29,228	8,706	110	99
05/06/2024	214.4	299.3	38,808	32,534	23,996	599	29,016	8,862	184	147
05/13/2024	214.5	298.3	38,707	33,483	26,046	728	28,916	8,876	111	76
05/20/2024	213.8	328.1	38,876	34,566	26,960	927	28,587	9,144	123	95
05/28/2024	213.9	297.4	38,946	35,617	27,941	1,018	28,143	9,508	170	107
06/03/2024	212.8	289.7	39,203	36,667	28,734	817	28,437	9,628	211	110
06/10/2024	212.9	303.4	39,077	38,036	30,229	545	28,521	9,670	212	129

- **Roanoke – Claims completions: 1,052**
  - All surge employees assisting with MST are required to take mandatory MST training.
  - MST VSRs and RVSRs must also have 10 claims reviewed with a 90% accuracy rate to remove the requirement of a second signature review.
  - Once VSRs and RVRs are no longer on a second signature review, in process quality reviews will be done to monitor quality for each claim cycle
  - Additional Quality Review Specialists from the prior interim locations are currently being solicited and undergoing required MST training.

# Questions



Choose **VA**

**VA**



U.S. Department  
of Veterans Affairs

# Quality Standdown

June 6, 2024



Choose **VA**

**VA**



U.S. Department  
of Veterans Affairs

# Quality Standdown and Employee Wellness

Veterans Benefits Administration hosted an organizational wide Quality Standdown and Employee Wellness Day to focus every echelon of the agency on the quality of decisions and customer service delivered to Veterans, caregivers, and survivors, as well as the quality of the employee work experience on June 6, 2024.

The VBA Quality Standdown and Employee Wellness Day was comprised of two hours of a nation-wide training provided by HCS, two hours of national content provided by business lines to field employees, and the remaining time customized to address local quality and improvement topics in all divisions.

Training Topics Examples	
Mental Health and Burnout	Advanced Data Visualizations
Overdevelopment Reduction Task Force	Exam Request and Rework Process (Disability Benefits Questionnaire)
Top Quality Error Trend Identification, Navigating Resources, Tools, and References for Claims Processing	Quality Assurance Program: Practical Applications
Special Hiring Authority and Disability Awareness	Providing High Quality Customer Service in a Stressful Environment
Operational Safety and Health, Annual Workplace Evaluations, Physical Security and PIV process, GSA leasing, and Facility management	Rapid Evolution of Technology Advancements and Using Technology to Stay Ahead of Fraudsters



# QSDEW Survey Results

