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LEGISLATIVE HEARING ON PRE–DISCHARGE CLAIMS PROGRAMS: ARE VA AND DOD EFFECTIVELY SERVING SEPARATING MILITARY PERSONNEL

HEARING

BEFORE THE

SUBCOMMITTEE ON DISABILITY ASSISTANCE AND MEMORIAL AFFAIRS

OF THE

COMMITTEE ON VETERANS' AFFAIRS
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LEGISLATIVE HEARING ON PRE–DISCHARGE CLAIMS PROGRAMS: ARE VA AND DOD EFFECTIVELY SERVING SEPARATING MILITARY PERSONNEL

Wednesday, December 13, 2017

U.S. HOUSE OF REPRESENTATIVES,
COMMITTEE ON VETERANS' AFFAIRS,
SUBCOMMITTEE ON DISABILITY ASSISTANCE
AND MEMORIAL AFFAIRS,
Washington, D.C.

The Subcommittee met, pursuant to notice, at 10:00 a.m., in Room 334, Cannon House Office Building, Hon. Mike Bost [Chairman of the Subcommittee] presiding.

Present: Representatives Bost, Coffman, Banks, Esty, and Brownley.

OPENING STATEMENT OF HONORABLE MIKE BOST, CHAIRMAN

Mr. BOST. Good morning, and welcome. The oversight hearing of the Subcommittee on Disability Assistance and Memorial Affairs will now come to order.

There are currently 1.3 million men and women serving in the United States armed forces. It is our duty to ensure that those who have defended our country receive their earned VA benefits as soon as possible. Today's hearing will review whether VA and DoD pre-discharge programs are effectively assisting ervice members who are leaving the military while coping with illness and injuries.

In a hearing on pre-discharge programs this Subcommittee held in 2014, we heard from veteran service organizations who were concerned about the quality of disability examinations, the accuracy of the VA's ratings, and the lengthy decision process. At this hearing we will look at what VA and DoD have done to address those concerns since the hearing several years ago.

Last week I had the privilege to meet with some of the wounded warriors at Walter Reed, we were going through one of the pre-discharge programs, the IDES program, more commonly, well, Integrated Disability Evaluation Systems, or IDES as it is commonly known. IDES is celebrating its tenth anniversary this year, and is the joint VA–DoD program used to determine if servicemembers dealing with injuries or illness are able to continue to serve.

If the servicemember is found unfit for active duty, IDES is designed to ensure that the transition from warrior to veteran is seamless. Under IDES, servicemembers received one medical exam

from VA which will serve two purposes. First, DoD will use the exam to assess if the servicemember is fit to return to duty. And, if not, whether the member will be medically retired.

Second, if DoD finds that the servicemember is not fit for duty, the VA uses the exam results to issue a proposed disability rating. This process saves the servicemember from having to undergo two exams, one from DoD and another from the VA.

I talked with the servicemembers about IDES last week, and was pleased to hear that the people I talked to had no complaints about their experience with the program at Walter Reed, but that does not mean that the program can't be improved on. We can always do better.

I want to discuss concrete proposals that will make this process more effective to ensure that VA providers provides the men and women of the armed forces who go to IDES the support they need when they return to civilian life. We are also going to focus on two other pre-discharge program benefits deliveries.

The delivery at discharge—the Benefit Delivery at Discharge, or the BDD, and Quick Start, which are also supposed to help servicemembers with disabilities access VA benefits soon after separating from the military. The BDD program servicemembers who were within 60 to 180 days of discharge could file a claim and receive a VA disability examination before leaving the military.

The second program, Quick Start, allowed the servicemembers who were going to be discharged within 60 days file a claim and receive a disability exam from the VA as soon as they were discharged. Both of these programs allowed separate servicemembers to get a head start on their VA disability claim. If the system worked as intended, individuals would begin to receive disability benefits soon after leaving the military.

However, VA has acknowledged that it had some challenges with timeliness when administering the BDD and the Quick Start programs. The VA recently told my staff that it was not meeting timeliness goals for Quick Start because it can be difficult to schedule a disability examination for servicemembers who are within 90 days of discharge. To try to resolve this issue, other VA and others, the VA eliminated the Quick Start program on October 31st, 2017, and made some changes to the BDD program.

I am looking forward to hearing feedback from both the Department and VSO witnesses on three of these programs; IDES, BDD, and Quick Start. I am particularly interested in whether VA redesigning the BDD program is actually streamlining the disability claim process for separating military personnel. Lastly, I am hoping that we can find out ways that the VA and DoD can make all of the pre-discharge processes more efficient for our Nation's military members.

Again, I want to thank everyone for being here today. And I would like to recognize, for opening comments, Ranking Member Esty.

OPENING STATEMENT OF HONORABLE ELIZABETH ESTY, RANKING MEMBER

Ms. ESTY. Thank you very much, Mr. Chairman. And thank all of you for being with us here today. We are here today to look at

two programs that hold the promise of providing every servicemember separating from military with his or her veteran's benefits before discharge. That is our goal.

And we are not there yet, but the basis to achieve this goal exists in the IDES and BDD programs. We now have ten years of experience, and it is clear from what I have seen—and I want to thank those of you who did a lengthy briefing with me earlier this week in preparation for this—that the most important element that we have seen in making improvement is, in fact, better coordination between DoD and VA. And I want to commend you for that. That is not easy to do, but it is essential if we are going to continue to make progress.

A lot of progress has been made. If you look at the timeliness numbers, for example. VA is showing a 102-day improvement in terms of scheduling these. Now that is extraordinary. So the time to completion has been cut almost in half. The goal has been do these exams within 100 days, you are now 19 days under that. That is to be commended. And I think it is important to look at the progress that has been made.

But timeliness is one factor. Accuracy is another. Connection is another, particularly for high-risk groups. And I want to return to that. DoD tells us the result of the customer satisfaction surveys of servicemembers are taken twice during the IDES process. You are showing a satisfaction rate of 90 percent, and that is with 40-plus percent completion rate, which is quite high for surveys. Again, we are pleased with that. But it is over time, and it is with everyone that we are looking for.

So in order to set a course towards even greater improvement, today I want to do the following. Number one, I want to make sure that errors are not slipping through as a result of the recent changes in the way in which BDD claims are being tracked. So, accuracy.

Two, I want to understand what steps are being taken to ensure that Guard and Reserve troops have the same opportunity to receive benefit determinations before they leave the Guard and Reserves. BDD may not be the right program for them. But due to the uniqueness of their service commitment, we need to make sure they are not short-changed.

And I want to explore that a little bit more with the time requirements and how those do not really line up very well with the Guard, and we need to anticipate that and do this. I hear about this from Guard and Reservists in Connecticut. And they have frequent deployments, and this process is not really serving them well.

Number three, I want to be assured that the military service coordinators and the physical exam board service officers are receiving the training that they need to help injured or ill servicemembers and their families through the process involved in IDES in a way that acknowledges and respects the service to the Nation that they have given, and particularly for terminally ill or those who have struggled with mental health issues when leaving the military. I think that respect factor and ensuring that it is not just about timeliness and checking the boxes, it needs to be high touch and respectful at all times.

Fourth, I want to hear that VA intends to update and modernize how it is reaching out and communicating with troops pre-separation about what benefits are available to them. I also want to see a particular focus on that outreach to high-risk groups that we know tend not to connect and suffer even more when they do not. Especially looking at women and looking at those who are most likely to suffer from PTSD, and all the attendant issues of homelessness, chronic illness, and worse.

The other thing I want to do today is to ask our witnesses to tell us what we in Congress can do to help support DoD and VA to achieve greater success. We want an update on where you are but, obviously, a charge from you and enlightenment about what we need to do to do our jobs.

Let us know what resources you need, what authority you may need to continue going forward to effectively, and appropriately, and respectfully serve those who served this great Nation. So, again, thank you for being here today, for working with us as we exercise our responsibility to provide oversight of these programs.

I look forward to your testimony and the opportunity to ask questions. Thank you, and I yield back.

Mr. BOST. Thank you, Ms. Esty. I ask all Members waive their opening remarks as per the Committee's custom. I want to welcome the witnesses who are joining us here this morning, and thank you for taking the time to be here.

Our first witness is Dr. Terry Adirim, the Deputy Assistant Secretary of Defense of Health Services and Policy and Oversight for DoD. Joining us from VA is Mr. Willie Clark, who is the Department Under Secretary for the Field Operations of VBA. He is accompanied by Ms. Beth Murphy, the Director of Compensation Services for VBA, and by Ms. Patrick Murphy—Murray, I am sorry, Patricia Murray, the Chief Officer of Office of Disabilities and Medical Assistance for VHA.

Testifying on the behalf of the American Legion is Mr. Gerardo Avila—I will get that correct, yeah—who is the Deputy Director for the Medical Evaluation Board, Physical Evaluation Board, and Department of Defense Correction Board for the American Legion. Also joining us today is Mr. Ryan Gallucci, the Department Director of the National Veterans Services for VFW. We welcome to all of you.

I want to remind the witnesses that your complete written statement will be entered into the hearing record.

Dr. Adirim, you are now recognized for five minutes for the Department of Defense's testimony on opening statement.

STATEMENT OF DR. TERRY ADIRIM

Dr. ADIRIM. Thank you. And I appreciate you pronouncing my name perfectly.

Mr. BOST. I wish I did it for everybody.

Dr. ADIRIM. Yeah. No. I am very impressed. Thank you. Good morning, everybody. Chairman Bost, Ranking Member Esty, and distinguished Members of the Subcommittee, thank you for the opportunity to testify today on the Integrated Disability Evaluation System, and we all call it IDES, so thank you for shortening that for us.

Since 2007, DoD and VA have jointly administered the IDES to evaluate our Nation's wounded, ill, or injured servicemembers, and to ensure they receive the benefits they so rightly deserve. As a joint venture, DoD and VA implemented the IDES to provide servicemembers with quality, efficient, and transparent disability evaluations.

As you know, the IDES is a streamlined process in which servicemembers receive a single examination, a single disability rating, and simultaneous DoD and VA processing to deliver benefits as early as possible following disability separation or retirement from military service.

As a result, the IDES process accomplishes two primary DoD objectives. The first, it ensures the medial readiness of the U.S. armed forces. And, second, it provides potentially unfit servicemembers with expedient transition to benefits and VA care.

The IDES framework continues to exceed expectations. In 2007, prior to the IDES implementation, servicemembers waited an average of 540 days from referral for disability evaluation to receipt of VA benefits. Today, I am happy to report, active component cases average 258 days for both DoD and VA to complete their combined stages of the DES, a 52 percent improvement from the previous DES process.

DoD is also outperforming our core, DoD-only process stage goals as required by DoD policy. In October 2017, DoD core stage performance for Active Component disability evaluation was 104 days against 105-day goal, while Reserve Component disability evaluation was 88 days against 125-day goal. Nonetheless, DoD and VA continuously seek to improve the timeliness and efficacy of the IDES.

Since DoD's last appearance before this Subcommittee to discuss IDES, we have continued to improve processing across all the military departments. We have made a concerted effort to enhance case management, upgrade training standards, reduce overall IDES timeliness, and expand our quality control program.

Within IDES, servicemembers have a single point of contact to help navigate the process known as a Physical Evaluation Board Liaison Officer, or PEBLO. The PEBLO provides servicemembers with all the critical information they need to make informed decisions throughout the process that is our direct touch.

Since 2014, DoD has taken concrete steps to improve the IDES staff training. In collaboration with the military departments, we issued new training standards and performance objectives to ensure all IDES staff members are armed with the necessary tools to assist wounded, ill, or injured servicemembers.

Further, our quality assurance program enables us to evaluate the performance, accuracy, and consistency of the IDES. Our expansion of the quality assurance program gives DoD the necessary information to monitor performance and correct inefficiencies.

For fiscal year 2017, IDES scores reflect an accuracy rate of 94 percent, a consistency rate of 77 percent, and a duty performance rate of 80 percent, and we are still not satisfied. Results of these combined efforts can be seen in our most recent survey—as was already mentioned—of over 9,000 servicemembers who indicated an

overall 93 percent satisfaction rating with DoD and VA personnel implementing the IDES, and their overall IDES experience.

So I am not surprised, Mr. Bost, that the Walter Reed experience demonstrated this.

Again, I would like to thank you for the opportunity to testify on these important issues, and I look forward to answering your questions.

[THE PREPARED STATEMENT OF DR. TERRY ADIRIM APPEARS IN THE APPENDIX]

Mr. BOST. Thank you, Doctor, for your testimony. Mr. Clark, you are recognized for five minutes.

STATEMENT OF WILLIE CLARK SR.

Mr. CLARK. Good morning, Chairman Bost—

Mr. BOST. Good morning.

Mr. CLARK [continued]. —Ranking Member Esty, and Members of the Subcommittee. My name is Willie Clark, Deputy Under Secretary for Field Operations and the Veterans Benefits Administration. I am joined by Beth Murphy, Director of Compensation Service, and Patricia Murray, Chief Officer, Office of Disability and Medical Assessment with the VHA.

Today I will discuss VBA's pre-discharge programs for servicemembers including IDES—sir, what you spoke to—and BDD. I will also discuss improvements in both of these programs; servicemembers satisfaction with IDES and training employees involved in IDES and BDD.

On November 28, 2017, the Department of Veterans Affairs and DoD celebrated the tenth anniversary of IDES. In 2007, VA and DoD created an integrated disability evaluation process for servicemembers who are being medically retired or separated from service. This joint process was designed to provide a seamless transition of benefits and health care for medically separating servicemembers.

In fiscal year 2017, more than 22,000 servicemembers were enrolled in IDES. As a result of our collaborative efforts, VBA and DoD have met the goals established for IDES. VBA's average processing time in September 2017 was 81 days, which is a 102-day improvement from May of 2014; the last time we testified here on the IDES program.

This 81 days is 10 days better than the VBA average of 100 days. And VBA awarded benefits within an average of 26 days of discharge, exceeding the IDES timeliness goal of 30 days. As of June 2017, the semi-annual customer satisfaction survey showed that satisfaction was at 93 percent for IDES, and 89 percent for our military service coordinators. VA continues to collaborate with DoD on ways to improve the IDES execution while remaining focused on timeliness and accuracy.

Since 1995, BDD and Quick Start programs have provided transitional assistance to separating servicemembers by engaging them in the claims process prior to discharge. VBA's goal is to ensure that each servicemember transitioning from service who wishes to file a claim for service-connected disability benefits receives timely assistance.

In fiscal year 2017, VBA significantly improved BDD production and timeliness, completing over 32,000 claims in an average of 90 days compared to approximately 29,000 in 127 days in fiscal year 2016. VBA also completed over 25,000 Quick Start claims with an average of 109 days in fiscal year 2017. Pretty good accomplishments, but as you mentioned, we have to do better. We realize that, and we are embracing that.

VBA is dedicated to ensuring that veterans receive the benefits they earned as quickly and accurately as possible. To this end, VBA has redesigned the pre-discharge program to enable servicemembers to receive disability benefit decisions, in most cases the day after their discharge.

The redesigned program went into effect October the 1st of 2017. Pre-discharge claims are now distributed through the National Work Queue, sending these claims to all the VA offices rather than just a few. Modifications to the existing BDD program include changing the filing deadline from 60 to 90 days, enabling VBA to complete all medical examinations prior to the servicemembers' discharge from active duty.

So one of the reasons for redesigning the program was to make sure that we had enough time to complete all of the exams and get them completed along with the servicemembers active duty and TDY requirements, and the like. So that is one of the main reasons we changed the program.

As part of the redesign, VBA discontinued the Quick Start program, instead utilizing the new decision ready claims process, fully developed claim process, or traditional claims as appropriate. We continue to work in concert with our VSO partners who regularly collaborate with our MSCs on various military basis in order to facilitate servicemembers' initial claims submission.

VBA's pre-discharge program provide all transitioning servicemembers the opportunity to initiate a claim for disability compensation benefits. VBA provides substantial training for all employees involved in the processing of claims, including pre-discharge claims.

Ongoing technical training is required each year, and training is regularly updated. VBA conducted training on the redesigned BDD program in September of 2017, for MSCs in October 2017 for claims processes. VBA plans to conduct a comprehensive MSC training event in fiscal year 2018. VBA remains committed to supporting our Nation's servicemembers through improvements in the pre-discharge program.

Mr. Chairman, this concludes my statement. We would be pleased to respond to questions you, Ranking Member Esty, or other Members of the Subcommittee may have.

[THE PREPARED STATEMENT OF MR. WILLIE CLARK APPEARS IN THE APPENDIX]

Mr. BOST. Thank you, Mr. Clark. I guess I should have the mike on. Thank you. Mr. Avila, you are recognized for five minutes.

STATEMENT OF GERADO AVILA

Mr. AVILA. Chairman Bost, Ranking Member Esty, and distinguished Members of the Subcommittee on Disability Assistance

and Memorial Affairs, on behalf of the 2 million members of the American Legion and National Commander Denise H. Rohan, thank you for the opportunity to testify regarding the American Legion's positions on the Integrated Disability Evaluation System and VA's pre-discharge program for separating servicemembers.

The goal of IDES since its inception ten years ago has been to streamline the medical board process and create a seamless transition for wounded, ill, and injured servicemembers from DoD to VA. The American Legion has testified in the past concerning issues with timeliness, lack of information for those enrolled, and gaps in medical and compensation benefits after separating.

Despite these concerns, we believe that the current IDES system is an improvement over its predecessor. The issues highlighted in our previous testimony have shown to improve. Despite this, we have the following concerns.

DoD's practice of rating and, in many instances, recommending a reduction of disability rating decisions for individuals placed on the Temporary Disability Retirement List, also referred to as TDRL. A servicemember found unfit with a condition deemed not stable to assign the permanent disability rating will end up on TDRL.

Once an individual transitions out of military service, they will be required to undergo periodic examinations by DoD to determine if the condition has stabilized and able to assign a permanent disability rating. In many instances these examinations are done at a DoD medical facility or by a DoD contractor. For instance, I have recently been contacted by a Navy veteran in this predicament.

In 2013 the individual was given a rating for 60 percent for and unfit condition and placed on TDRL. After this latest reexamination in October of this year, the Navy considered the condition stable and is proposing a new rating of 20 percent. If nothing changes, this individual will be separated with severance despite still being rated at 60 percent for the same condition by VA.

One of the goals of IDES was to have a single rating decision used by both VA and DoD. In an effort to keep the integrity and spirit of the IDES process, the American Legion believes that DoD should communicate with VA when recommending new ratings for individuals placed on TDRL. We recommend that if VA has a current rating for the condition, DoD should apply that same rating.

American Legion service officers continue to encounter lack of resources for members of the National Guard and Reserves, specifically with Line of Duty, or LOD, investigations. An LOD is crucial to establish that a disability was caused due to military service. Without needed documentation, many servicemembers face a possibility of being separated with no benefits.

With the hectic nature of military duty, it is not always possible to capture the facts when an injury occurs. The failure to capture and record crucial details has shown to be harmful for members of the National Guard and Reserve when undergoing the IDES process.

With regards to the pre-discharge program for transitioning servicemembers, the American Legion continues to maintain service officers at the regional office in Winston-Salem, North Carolina,

and Salt Lake City, Utah. A service officer assists transitioning servicemembers with 500 pre-discharge claims quarterly.

Recently, the Veterans Benefit Administration introduced the new changes with the launch of the pre-discharge redesigned program. Major changes include the elimination of the Quick Start program and adjusting the filing day for pre-discharge claims between 180 and 90 days before separation.

The Salt Lake City regional office was selected as the pilot site for the program. The early feedback from a representative there has been positive. A representative states that he has seen more pre-discharge claims being completed prior to the date of separation. This was not the case under the previous program. This new expedited method is beneficial to the veterans as they will receive their compensation immediately upon separating.

The American Legion has concerns with the elimination of the Quick Start program due to the loss of the in-service diagnosis. Without this diagnosis, servicemembers are at greater risk at being denied, or at least delayed, in being considered service-connected.

The American Legion continues their commitment to transitioning the servicemembers by maintaining a dedicated staff to assist during this crucial phase. We feel that these challenges can be improved with the integration of stakeholders at all levels and improve channels of communication, we owe it to the men and women who have volunteered for service to the Nation.

Thank you, again, Chairman Bost, Ranking Member Esty, and distinguished Members of the Subcommittee. We appreciate the opportunity to present the American Legion's views, and look forward to answering any question that you and/or the Subcommittee may have.

[THE PREPARED STATEMENT OF MR. GERARDO AVILA APPEARS IN THE APPENDIX]

Mr. BOST. Thank you, Mr. Avila. And, Mr. Gallucci, you are recognized for five minutes.

STATEMENT OF RYAN M. GALLUCCI

Mr. GALLUCCI. Thank you. Chairman Bost, Ranking Member Esty, and Members of the Subcommittee, on behalf of the VFW, thank you for the opportunity to testify on VA and DoD's pre-discharge claims programs.

To the VFW, there is no more critical point than when a servicemember leaves the military and seeks to access their benefits. Filing an initial claim is just the beginning of what the VFW considers a lifetime of advocacy that resulted in nearly $7.7 billion in benefits delivered to all VFW-represented veterans in 2017.

We serve 24 military installations through our pre-discharge program, and I want to thank both VA and DoD for allowing our highly-trained and professional advocates to assist in this transition. By working together, we ensure timely delivery of benefits for veterans at a pivotal point, and we set up veterans for positive interactions with VA moving forward.

As transition programs evolve, we seek to make changes to improve the experience. Many times they yield positive results such as the military life cycle model, IDES, or the acceptance of pre-dis-

charge claims, but sometimes changes have unintended consequences. This is where it is the VFW's responsibility to inform the agencies and this Committee of our concerns.

Recently, VA made two significant changes that concern the VFW. First, VA shifted its timelines for BDD, only allowing servicemembers to submit claims from 180 to 90 days prior to discharge. Second, VA eliminated Quick Start, meaning servicemembers with 89 days or fewer left on active duty no longer have an option tailored to their needs.

On its own, the shift to 90 days makes sense. VA can complete exams and propose decisions in time for separation. However, coupled with DoD's VOW Act requirements to deliver transition training and the elimination of Quick Start, the VFW believes this only makes it more difficult for transitioning servicemembers to access their benefits at separation, and more difficult to evaluate whether VA is effectively serving this population.

GAO recently reported that DoD still struggles to meet the 90-day requirement to commence transition. This is problematic for lower-ranking servicemembers who do not control their schedules and for those who must remain operational as long as possible.

VFW data shows that nearly half of our clients were Quick Start prior to October 1. This is not a knock on DoD. We know military mission requirements come first and believe the VOW Act standard is reasonable. This is where VA needs to be flexible and cutting off BDD at 90 days does not help. If servicemembers have not been briefed yet on how to access their benefits, how can we expect them to file their claims?

In the past, the Quick Start EP code allowed both the VFW and VA to track pre-discharge work and ensure the best possible outcome for the veteran. VA argues that eliminating the code is not a big deal, and that BDD excluded claims can be worked in regular order once the servicemember is discharged. However, this unique population deserves unique attention.

It troubles us that VA is telling servicemembers they will no longer work up to 50 percent of pre-discharge claims until they officially leave the military. Additionally, by losing the EP code, we lose optics on this population at a critical point.

Pre-discharge claims are treated differently when we review them, and we can find errors in up to 20 percent of them. If we cannot identify problems early, we are not setting the servicemember up for post-military success.

To make matters worse, when VA receives a claim with fewer than 90 days, the servicemember now receives a letter that implies that they did something wrong and that VA did not accept their claim. Since this change went into effect, all of our pre-discharge reps on military installations have heard from clients who received this letter and believe that something went wrong.

Many have confidence that we can resolve the issues, but for those who believe that the VFW did something wrong, we have lost our ability to advocate. At best, these letters are unnecessary. At worst, they are tone deaf and viewed as irresponsible.

The solutions are simple. First, stop the disqualification letters. Second, reinstate an EP code for pre-discharge claims filed with fewer than 90 days. And, third, address the ambiguity and code re-

garding VA's authority to accept these claims. In Title 10 and Title 38, nothing explicitly directs VA to accept them. Instead, the authority is inferred through the statutes of authorizing TAP and VA compensation generally. We should clarify this.

Finally, the VFW worries that these changes are the latest in a series of changes that obfuscate VA's pending workload , but not all pending work is bad for the veteran. While VA does not get a pass on drawing out certain processes, some pending work is legitimate.

If we set reasonable expectations and explain the process, veterans will have positive experiences. But this also means we can't seek out headlines every time VA reports that something took more than 125 days. It is time to have a reasonable discussion about workload and what it really means to the veteran's experience.

The military to civilian transition can be unknown and unpredictable. All of us in the room have dedicated substantial time and resources to make sure we get it right. The VFW values the role that we play alongside VA and DoD, and we are always looking for ways to improve. Our goal is to work together to ensure that our transitioning servicemembers have access to the benefits they have earned.

Mr. Chairman, this concludes my testimony, and I am happy to answer any questions you or the Subcommittee may have. Thank you.

[THE PREPARED STATEMENT OF RYAN M. GALLUCCI APPEARS IN THE APPENDIX]

Mr. BOST. Thank you, Mr. Gallucci. Thank you. We are going to go on now with questioning. I will recognize myself for five minutes.

Mr. Avila, you stated that the agreement and the spirit of IDES is so DoD stays out of the rating business and leaves part of the process—that part of the process to the VA. Can you explain why the American Legion recommends that the VA rather than DoD conduct the needed periodic exams, and assigns any—just a minute, let me get this right—and then assign any revised rating for veterans who have already been placed on TDRL?

Mr. AVILA. The American Legion—sorry. The American Legion does not feel that DoD is doing this on purpose or is doing it to low-ball the military member when giving them a rating. And we understand that ratings can change. Maybe they were given 60 percent, in the sample that I used, and it's now maybe a lower, or maybe even a higher rating if the condition has gotten worse.

But I think if we are trying to get it—if the goal is to get an accurate reading of what the current condition is today, I think the conversation needs to happen between DoD and VA. Specifically, if the member is now receiving the health care through the VA, I think VA can paint a complete picture to DoD by saying this is the current condition, this is his latest appointment, this is the current medication, or what has been the action plan.

And I think once the VA has that—I mean, once DoD has a complete picture, then they can make perhaps a better decision than just bringing the member in and doing a one-time compensation and pension examination, for lack of a better word, and then bas-

ing a rating off that one decision. Going forward, like I mentioned in my testimony, let's use one rating.

If we start changing ratings and we have different ratings between DoD, then we are going back to the old system, and that was kind of the change of IDES that we would have one rating decision and the only rating decision would be used by both DoD and VA. I do not think we want to head back down that road.

Mr. BOST. Mr. Clark, why doesn't the VA conduct the follow up exams and ratings when a veteran is placed on TDRL?

Mr. CLARK. Chairman Bost, we would have to work with DoD to change the process. But as it currently stands, then that is a DoD responsibility for the temporary, and even permanent due to retirement list. But I am in agreement, and certainly we would have to work with our DoD partners that VA can take that responsibility on and provide this one rating.

But as Mr. Avila just mentioned, as it presently stands, that is a DoD responsibility. But we are certainly open to making that happen, and I feel that we can make that happen. But we will have to speak to that. And Dr. Adirim—

Mr. BOST. Dr. Adirim, does DoD agree with that?

Dr. ADIRIM. Whenever there is a—in general, when there is a VA rating, and we have access to that, and we have found about, at least Army, about 70 percent of the time has access to that rating, we do use that exam. But we are happy to work with our VA colleagues to see where we can make improvements.

Mr. BOST. Thank you. Ms. Murphy, I am going to ask some real quick things here. Quick Start was eliminated, and then BDD was changed around and tried to revamp. What were the reasons for the changes—

Ms. MURPHY. Certainly.

Mr. BOST [continued]. —and getting rid of quick Start?

Ms. MURPHY. Good morning. Thank you. So we are always looking to improve, and streamline, and modernize in our processes with DoD, within VA, to best help our transitioning servicemembers and our veterans. I heard some of the comments, and certainly your concerns are our concerns as well for our servicemembers and our veterans about giving them the head start on their disability claim before they leave service for tailoring the process to them. And I think we have maintained that in our new redesign of the pre-discharge program.

In BDD, now instead of 60 days prior to dis-charge, we have moved that back 90 to 120 days. I think we are doing a better job through our TAP program to get the word out to transitioning servicemembers about what is available to them through VA. And we are getting them educated, if you will.

So giving us a little bit more time prior to discharge to get all the records together, to get the exams done, it is—we see it as better service to them in that time. We did not want to leave a gap, in fact, for some time we considered just completely eliminating Quick Start and not replacing it with anything, and just saying we will meet you on the other side of discharge and we will work with your claim there.

We had some feedback from our VSO partners. They were very adamant about working with the servicemember while they were

still on active duty. So we went back to the table, we thought about it, and we decided we would go ahead and open up some of our other options—traditional claim process, fully developed claim process, and our brand new decision ready claim process—that transitioning members can have that available now tailored to them, and they get to be in the driver's seat.

They decide when it is best for them to get the exam, they work with a service officer if that is helpful to them. Quick Start was not quick, and with decision ready claims, we are seeing an early result of about eight days after—

Mr. BOST. Okay. I have one quick question, my time is about out, too. But this is for Ms. Murray. Was VA having difficult—why was VA having difficulty scheduling and completing the medical exams before? What are some reasons that were in there?

Ms. MURRAY. Can you repeat the question, please?

Mr. BOST. Yeah. Why were we having trouble scheduling these exams? You know, there was a problem with scheduling, correct? What were some of the reasons that the scheduling problems were occurring?

Ms. MURRAY. I think in terms of scheduling in VHA, we initially had a contract that we were using for surge capacity. And so we had examiners that we could tap into under contract. But then the contract was removed from VHA, and so we are now limited to our internal capacity. And so we did have a challenge with being able to surge outside of VA, and so we are limited to our in-house capacity. And so now we are sharing that overflow of capacity with the VBA contract. So we had to shift to a different way of scheduling.

Mr. BOST. Okay. Thank you. Ms. Esty, you are recognized for five minutes.

Ms. ESTY. Thank you very much. Dr. Adirim, I wanted to ask—drill down a little bit more on the Guard and Reservists, because we are getting feedback about difficulty with records. So, for example, they are often in a rush to try to get their records updated. Now this is done much better with active duty. As soon as the Reservists come back, everybody, everybody disperses. Those records do not get updated, and that then poses huge problems.

That is the kind of thing we get calls in our office all the time. I can't find my records, nobody updated them. I will tell you here is where I was, this happened, and there is no records available to us. As part of this process, I think we need to make sure that that is being dealt with. So I would like you to start, and anyone else who has—it is not directly on this, but this is literally we do not get the medical records updated, and that causes enormous problems down the line because you can't get accurate evaluation if the records are not present at the time that they are transitioning back.

Dr. ADIRIM. All right. Well, thank you for bringing up this issue. It is a struggle because when you are in active duty the records are there, it is a central, you know, health record and so it is easy to access. With the Guard and Reserves, their care could be, you know, outside of the military system which makes it a struggle. And as a physician, I know this struggle in getting records for my patients.

So I think this is something that we would like to take back, and we would like to look at, and determine what we can do to help our Guard and Reserve access their records quicker. Whatever that we need to do to help them with that. And we can get back to you on that.

Ms. ESTY. Thank you, because I think that is important as part of this process, and, again, as we are relying so much on Guard and Reserve. This is not occasional, these are our seasoned fighters at this point, and they deserve to have those records updated. And, again, I hope we can schedule to have a hearing in a few months' time so that we can put our heads together and find out what needs to happen to get this fixed. And—

Dr. ADIRIM. I agree. And thank you for bringing up the issue.

Ms. ESTY. Thank you. We had discussed earlier some of the challenges, earlier in my office, some of the challenges we are looking at. Can you talk about what is being done with outreach for populations who do not seem to be connected, who we know, based on other surveys and other data, are more at risk for not getting employment? Suffering from PTSD, becoming homeless. What are you doing to use technology and to use every resource available to improve outreach at that transition point?

Mr. CLARK. I will start, and then Ms. Murphy, or Ms. Murray, and even Dr. Adirim may join. As we discussed, that is an opportunity for improvement. We have a TAP program that I am working with DoD. We are attempting to get that word out sooner and to more people. We have a division in VBA benefits services led by Margarita Devlin that is in charge of TAP, to get that information out.

And as our MSCs and our other members of the regional offices go on and engage with the military members before they get out, we provide information on VA benefits. But we need to do a better job because one servicemember that does not get the word is one servicemember too many.

So we have ways that we get out using TAP, but we have to do a better job, and then we have to reinforce it because a one and done won't get it. Often times you have members that they are at a point in their lives that they are transitioning, they are thinking about a lot of things, and even when they get the briefing, it may not be a point in time that they are ready to receive that.

So we need to do a better job of going back and telling them again, and yet again, until they get that. And that is an opportunity for improvement that we need to do, and we have taken that and embraced that.

Ms. ESTY. Well, I hope you will come back to us maybe when we reconvene in a couple months' time with specific things. Are there resources you need to do that? I think ensuring that we get Internet, you know, appropriate email that is good for every single departing servicemember is one key thing. And then you can actually code them and do outreach, at least online outreach, at two months out, six months out when people might be more ready, more aware of the challenges they are facing, and we can target that a lot better.

So I think we have to be using technology, we have to be capturing all pieces of information as we can when they are making

that transition so it does not get lost, and they do not get lost. And that is, again, I know all of you are committed to that, but we have to do better, and I do think we need to use technology as well to capture who these folks are so that we have a way systematically when they move around the country to be able to reach back out and make sure they are connected.

I am over time. Thank you, and I yield back.

Mr. BOST. Thank you. Mr. Banks, you are recognized for five minutes.

Mr. BANKS. Thank you, Mr. Chairman. Mr. Avila, to Ms. Esty's point, the Ranking Member's point. As a Navy Reserve Officer myself, I have seen first-hand the difficulties that Reservists and Guardsmen sometimes have in comparison with their active duty counterparts. In your testimony, you mentioned the American Legion's concerns regarding the lack of resources for members of the National Guard and Reserves who are undergoing the IDES process in their home station.

I know we have heard some others on the panel about their perspective, but could you elaborate on the American Legion's perspective on that point?

Mr. AVILA. As Chairman Bost mentioned going out to Walter Reed earlier, and I think if you go there you see the resources that are available in-house to everybody. You have JAG, social work, your medical appointments are there. There is a benefit to National Guard Reservists doing the medical process at their home station.

They are home, they are with the family, they are not separated. But I think the fear there is that they do not have the resources that their active duty counterparts have. So it is a double-edged sword. Do we send them somewhere as a TDY to make sure they do their IDES process at a consolidated location where the resources are there. So I think that is the biggest gap that we see.

I receive emails from Guard members or Reservists going through the IDES process at their home station, and they are telling me, I just got my proposed ratings and my 199 back from DoD, and I need to make some elections. And my JAG lawyer is, you know, at the state capital, or something like that. So they do not have somebody readily available to go there.

And I think that is where we see the biggest difference. And then whenever you talk about available resources that are there on hand to assist the member make the crucial decisions, they are always going to be crucial as they separate, and what are the benefits they are going to receive.

Mr. BANKS. Thank you. Ms. Murphy, in place of Quick Start, the VA is allowing servicemembers who are within 90 days of discharge to begin preparing but not submit a fully developed claim, decision ready claim, or a traditional claim. If the servicemember has a character of discharge determination and has completed all requirements to develop their claim, why must this servicemember wait until after separation to file their claim with the VA?

Ms. MURPHY. We can begin working on this and we track these things, but until you are a veteran, we can't start paying you, until you are out of service. We do have some in-house tracking of end products and tracking those claims, but we are just working with you ahead of time.

As far as the decision ready claim, your formal claim is what really starts our clock. So a servicemember works with a veteran service officer, collects records, goes gets the exam. And then when it is time, submits that to us. And as I said earlier, we have been turning those around in about eight days.

And I do want to clarify that that new program is not just available to transitioning servicemembers that is available to any veteran who wants to work with a VSO. Right now we are limited to claims for increase, but we have recently expanded just this week to additional new issues on claims that we have already seen. So if you want to add an issue, a secondary issue, maybe your back is hurting because of your knee, also presumptive claims. So we have expanded about 500 percent the eligible pool there.

But to your point, we are working with them ahead of time, it is just that we are not processing the claim and paying the benefits until they are on the discharged side.

Mr. BANKS. Okay. Thank you.

Mr. GALLUCCI. Mr. Banks, I would like to comment on that, if I could, for just a couple of minutes because this is—

Mr. BANKS. No, I do not have a couple of minutes.

Mr. GALLUCCI. Okay. Well—

Mr. BANKS. Let me move onto my next—

Mr. GALLUCCI. About just—

Mr. BANKS. Excuse me. Mr. Avila, and Mr. Gallucci, to get to you on another point. Do you think that the fully developed claim program and decision ready claim program will meet the needs of separating servicemembers who are unable to file a BDD claim, to that point?

Mr. GALLUCCI. I am glad you asked that, because that is what I was about to talk about.

Mr. BANKS. All right.

Mr. GALLUCCI. So, no. Unequivocally, no. From the VFW's perspective, we have not had positive experiences with the decision ready claims process. I would say about 60/30 negative—or 70/30 negative to positive experiences. What we are talking about here is that control over the exam, the official submission date. There is no product on the VA side. We are requesting exams, a veteran may conduct an exam—

Mr. BANKS. I have five seconds. Mr. Avila, do you agree with that?

Mr. AVILA. I think from part of my testimony, we have seen some positive experience. We are seeing the claims completed prior to the discharge date. Obviously, it is early on, and we got to keep an eye on it.

Mr. BANKS. Okay. Thanks. My time is expired.

Mr. BOST. Ms. Brownley.

Ms. BROWNLEY. Thank you, Mr. Chairman. I have two quick questions. One to the VA. If you could speak to the issue that VFW raised with regards to letters that the servicemembers are receiving saying that veterans are disqualified from BDD. I think what is happening is they are receiving those letters and thinking, well, I am not eligible for any kind of benefit. But you are saying that they are not eligible right now but they will be later. But that is—

the letter, they way it is written, is I think creates a lot of misunderstanding.

Mr. CLARK. Well, we will have to take that back, and certainly in working in concert with the VSOs to make sure that we are clear when we send that letter what that is about. So, obviously, we have to work closer with them to make sure that between the two of us, you know, we have got military service coordinators out there, we have got outreach specialists in the field that go out to military bases to let folks know that, hey, we have got these programs. The combined program just started on 1 October, so we have not gone the full 90 days.

But as the testimony was shown by American Legion, we are finding that it is successful, and we need to do better. And, obviously, we need to get more information out there and let folks know. But we think it is a good program.

Ms. BROWNLEY. So does VFW, would you like to respond?

Mr. GALLUCCI. Thank you, Ms. Brownley, absolutely. Based on the volume that we see, we anticipate significant challenges, especially in tracking how we serve that population who does not meet that 90-day deadline. I respectfully have to disagree with the Legion's perspective on this.

The VFW processed more than 15,000 pre-discharge claims last year, and in reviewing our pending workload, it has gone down. I was out at the San Diego VA Regional Office, where we have a rating review team, just last week, and they have all but processed all of their Quick Start claims.

Whether they are processed as DRC, FDC, or a traditional claim, we do not know that it is a transitioning servicemember anymore. To us that is problematic from a quality control standpoint to evaluate the efficacy of these programs as we have discussed in detail today.

Ms. BROWNLEY. Thank you. And, hopefully, we can follow up on this and improve upon that process. So the other question I wanted to ask is, you know, I want to commend everybody for improvement of timeliness. This is good, we seem to be moving in the right direction. I am sort of interested in the spirit of, I guess, transparency and really pealing the onion to have a good look at everything that is going on.

What about, you know, are there cases where they are sort of outliers to the averages of the data? And so I would appreciate candidness with an answer. And, you know, if there is, you know, what are we doing to identify those issues and barriers, and how to improve upon the process for where there are, indeed, outliers?

Mr. CLARK. You know, with the IDES process, and I can let the Doctor speak to that. But overall, you know, we have said that there is an average processing time, well less than 100 days for all claims in VA. Certainly IDES and BDD processes it shorter still, but that is an average. So we do have scenarios where it will take a little longer.

Sometimes there are issues that are added later in the process, there are attempts if they are Guard and Reserve trying to get the records. But we have identified those and we continue to work and collaborate on ways to make sure that we get all of the records, and that we just be mindful that we have got the need from DoD

to transition as quickly as possible while also trying to understand that we are dealing with members that are unsure about their future and where they are going, and we need to be compassionate in our approach and worry about them whether than our processes.

Ms. BROWNLEY. So you said two things. You said, all claims are under a hundred and some days. And then you said, but we are dealing with averages. So those are two very different things. An average is an average, and, you know, there are highs and lows, and all means all. So, anyway, Doctor, do you have any comments?

Dr. ADIRIM. No, I would just add, thank you for that question. And, certainly, with any process there are going to be outliers, and those are cases that are more complicated. And we do monitor those cases, and we look into what the issues are to see where we can address those issues. But I would caution you that we want to make sure that every servicemember, you know, gets all due consideration. So if there are problems where we can expedite those cases, we do do that. But then there are cases where, you know, time is helpful to that servicemember. So thank you for brining that up.

Ms. BROWNLEY. Well, and I appreciate that answer. I, you know, in those more complicated cases I think, you know, the expectation is that we are hanging in there with the veteran, and communicating and standing by them shoulder to shoulder because, you know, both the veteran and their family, obviously, are going to be very, very concerned in those more complicated processes.

Dr. ADIRIM. Right. Good point. Thank you.

Ms. BROWNLEY. Yes. Thank you. I yield back.

Mr. BOST. Mr. Coffman.

Mr. COFFMAN. Thank you, Mr. Chairman. Dr. Adirim, what conditions does the Department of Defense require somebody who has an injury to be on a medical hold status subject to treatment? If somebody says that I have a physical injury, I have some type of stress related condition, is there ever a situation where that individual is put on medical hold, and that is subject to treatment, and that discharge is delayed?

Dr. ADIRIM. I am not certain I quite understand the question. Do you mean that the servicemember is put on TDRL, or?

Mr. COFFMAN. I do not know what TDRL is. A medical hold being that their discharge is suspended pending some sort of treatment, medical treatment.

Dr. ADIRIM. I think what you are talking about is the TDRL. That when a servicemember has a condition under which they, you know, may have a condition where they will—where it is anticipated that they will eventually need to be put through the disability evaluation system. However, they will undergo treatment, and then a determination is made subsequently whether or not they can return to service versus being put through the disability evaluation system. That is what you are talking about, right?

Mr. COFFMAN. Yes.

Dr. ADIRIM. Okay. Good. And so your question is, what conditions?

Mr. COFFMAN. Well, how often does that occur, and under what conditions?

Dr. ADIRIM. We have—I believe we have—I can get back to you on that because I know the number but it is not coming to me right now, of servicemembers who are on that particular list. And the conditions would include any condition for which they are currently undergoing treatment which it is anticipated that they may improve but, you know, and they are reassessed at 18 months. So I am not sure if I answered the question.

Mr. COFFMAN. Well, if they are going through the disability process, and they are claiming something that the Department of Defense, the health system, could rehabilitate, you know, through surgery, through treatment, or through any process. What is the connection between our DoD health care system and that claims process relative to that issue?

Dr. ADIRIM. Sure. Well, there are multiple different steps, and I just want to make sure I understand clearly what you are asking. If there is—a servicemember has a condition or an injury to which they need treatment, they would be put on a profile or limited duty, that would be the first step. If it is determined that it is likely that they will not be able to serve but they are still undergoing treatment, they would be put on the Temporary, TDRL—

Mr. GALLUCCI. Temporary Disability.

Dr. ADIRIM [continued]. —Disability, right. They may be put on that particular status, and they would undergo their treatment, and then at 18 months they would have another exam to determine whether or not they would need to be separated versus—undergo the disability system and separated versus going back to service.

Mr. COFFMAN. Okay. So we have 20 veterans committing suicide on a daily basis in the United States. I would suspect a fair amount are going through the process, let's say it is post-traumatic stress—

Dr. ADIRIM. Sure.

Mr. COFFMAN [continued]. —or depression, or whatever. So my concern is what type of treatment are they then receiving before the discharge, and what connection do they have with the VA for an automatic hand-off to continue that treatment?

Dr. ADIRIM. Thank you for that question. Now I understand what you are asking. Suicide and mental health conditions is a top priority of both DoD and the VA. We have a program in DoD called In Transition, which provides a warm hand-off for a servicemember to their care when they are out of the service.

So a coach calls any servicemember that has had any mental health visits within that past year, or has been diagnosed with a mental health condition over that past year, and the servicemember's able to opt in. So all are called who have a mental health condition.

And those that opt in get coaching and are provided with information about care that they may receive, and there is a warm hand-off, for example, to the VA. So we do have a program to do that for people who have mental health conditions.

Mr. COFFMAN. Okay. And I think that in Congress—and I can't remember if it is this Committee or armed services—I think passed a provision in the last couple years that provided a physical for Guard and Reserve prior to their retirement. Am I correct in that?

Dr. ADIRIM. I believe that is true, yes.

Mr. COFFMAN. Okay. I yield back.

Mr. BOST. All right. With that, I would like to recognize the Ranking Member for any closing remarks you might have.

Ms. ESTY. Thank you very much, I really appreciate your joining us here today. And there are a couple of issues that sort of came up in the course of our discussion today that I wanted to flag for you and have you think about.

One is to facilitate transition, and this, frankly, has to do with other hearings we have had here. It seems to me that getting accurate email address is unbelievably important to stay in touch with our veterans, particularly in this transition time.

They are much more likely to keep their email address and be findable that way than when we know from past experience, they are moving around, they are not sure where they are going to be living. That leads to a whole host of problems. We are not able to find them, we have had all those issues about service of process and receiving notice. It seems to me vital that we figure out a way to capture, as best we can, their email addresses.

And I understand there has been some question about whether that can or should be asked as part of the DD–214. But I would like you to consider what we can do to ensure that we have our best possible, not only physical presence mail address which we ask for, but that is a legacy. The reality is right now a cell phone number and—that you could send text to, which we know to, in fact, be very effective.

In a lot of the mental health issues, being able to text is actually vitally important. So I would ask you to consider the utility of having email addresses and cell phone numbers to facilitate interacting with and not, frankly, losing our veterans. So that is one, and where can we do that?

And the other is, in my discussion with folks on my team, is to ask you, too, what kind of outreach is being done by the VA at that transition time to advise people of what state benefits might be available? Some of the states have very extensive programs, some do not. And it would seem to me, as part of our one-stop shopping, that we should be looking at that issue of what we can do.

And there, again, having email addresses then allows us, as people are moving around, to say, say in a check-in, two months out, six months out, to say where are you currently living, and, if so, you should be aware, here are at least links to your state programs that you should explore. And we could, I think—again, using technology, we could do a much better job.

So I would like, when we next convene, to look at both of those pieces as to how we do a better job. And it is just, frankly, leveraging the resources. States who have very good programs and are devoted, we should be utilizing and making those available to our veterans and not waiting for them to try to find them, or requiring our VSOs to try to find the veterans we have lost track of.

So this is, again, in part of a spirit in doing a better job, connecting better with our veterans, faster, and better, and not losing one single one of them. So, again, thank you all very much. Thank you, Mr. Chairman.

Mr. BOST. Thank you. And the only thing I would add is, obviously, from the conversation that we had today, you will be work-

ing with the VSOs on trying to—notification letter, try to correct that. So thank you. I want to thank all the witnesses for being here.

And as I said at the beginning of the hearing, the complete written statements of today's witnesses will be entered into the hearing record.

Hearing no objection, so ordered.

I also ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks, and include extraneous material.

Hearing no objection, so ordered.

This hearing is now adjourned.

[Whereupon, at 11:04 a.m., the Subcommittee was adjourned.]

APPENDIX

Prepared Statement of Dr. Terry A. Adirim

REGARDING

THE INTEGRATED DISABILITY EVALUATION SYSTEM

Opening Remarks

Chairman Bost, Ranking Member Esty, distinguished Members of the Subcommittee, thank you for the opportunity to appear before you today to discuss the Integrated Disability Evaluation System, also known as the IDES.

The IDES is a joint Department of Defense (DoD) and Department of Veterans Affairs (VA) program that achieves two primary DoD objectives: (1) ensuring the readiness of our military forces, and (2) providing timely, quality disability evaluation of wounded, ill, or injured Service members so we can assess their fitness-for-duty and, if unfit, the appropriate disability disposition and compensation.

Improved IDES Performance

The IDES is a success story that reflects the two Departments' shared commitment to collaboratively improve the evaluation of Service members transitioning to Veteran status due to disability. Since DoD's last appearance before this Subcommittee to discuss the IDES, the Department has continued to improve the efficiency and quality of the disability evaluation process.

Since 2014, improved processing of nearly 22,000 physically unfit Service members per year has allowed the Military Departments to significantly reduce the amount of time Service members spend in a permanent non-deployable status and direct their resources towards accessing, training, and equipping ≥≥≥physically ready forces.

The IDES also provides improved case management and transparency for Service members undergoing evaluation due to disability. Within the IDES, there is a single point of contact for providing information to the Service member or their representative, as applicable, about the DES process. The IDES also provides a more transparent disability evaluation process by allowing Service members to receive their proposed VA disability ratings and compensation at the same time they receive their DoD physically unfit determination. This allows the member to make an informed decision about the best course of action, which is a great help to Service members who have their military career unexpectedly ended by a disabling condition.

Today, Active Component (AC) IDES cases average 258 days from the date of referral to notification of VA disability benefits, well within the 295-day goal. This represents a 23 percent improvement since Fiscal Year (FY) 2014 and an overall 52 percent improvement over the 540 days Service members averaged to complete the Departments' separate disability processes prior to the worldwide implementation of the IDES. Similarly, Reserve Component (RC) IDES cases achieved a 22 percent timeliness improvement since FY 2014.

DoD is responsible for four core IDES process steps: Referral, Medical Evaluation Board, Physical Evaluation Board, and Transition. We are outperforming the DoD core process stage goals required by DoD policy. For example, in October 2017, DoD Core Stage performance for AC disability evaluation was 104 days against a 105-day goal, while RC disability evaluation was 88 days against a 125-day goal.

Although exceeding IDES performance goals, DoD is analyzing opportunities to reduce these goals to improve the readiness of our military forces and allow Service members to more quickly transition to veteran status.

Improved IDES Efficiency

In 2014, DoD consolidated and revised its disability evaluation issuances to provide clear policy guidance on Military Department operation of their respective DES processes. To accomplish this goal, DoD combined thirteen previous disability evaluation issuances and directive-type memoranda. A revised DoD Instruction, sup-

ported by specific topics presented in three DoD Manuals, addresses each aspect of the disability evaluation system and set requirements for each Military Department's execution of disability evaluation activities. This effort was the first attempt to establish a DoD-wide group of consolidated disability evaluation policy and procedure issuances since the 1996 publication of a legacy DES directive and instruction. As a result, the Military Departments now operate with a much-improved, well-defined set of policy and process documents.

As directed by Congress in the FY2013 National Defense Authorization Act, the Department implemented the DES Quality Assurance Program (QAP) in 2014. The DES QAP enables DoD to evaluate the accuracy and consistency of Military Department disability determinations, the degree to which Military Departments comply with DoD policy in their disability determinations, and the duty performance of Medical and Physical Evaluation Boards and Physical Evaluation Board Liaison Officers. DoD requires a minimum 80 percent score for quality assurance measures, and uses case reviews to help assess and monitor Military Departments' DES performance in those areas. DES QAP scores for FY 2017 reflect an accuracy rate of 94 percent, a consistency rate of 77 percent, and 80 percent for duty performance. Consistency scores fell under the 80% goal in FY 2017 due to a purposeful effort to increase the complexity of test case themes used to evaluate Military Departments' consistent application of DoD policy. DoD increased the number of conditions for each test case, as well as the complexity of conditions presented. This added rigor in DoD's evaluation methodology identifies deficient areas so that the Military Departments ensure equitable and consistent application of DoD policy.

Training remains vital to the continued success of the IDES. DoD issued, in collaboration with the Military Departments, training standards and performance objectives (TSPOs) to ensure all IDES staff are prepared to provide Service members with the critical assistance on which they depend. Collectively, these efforts ensure that disability evaluation personnel are prepared to provide final adjudicative decisions accurately and in compliance with law and DoD policy.

Service Member Satisfaction

DoD remains committed to continuously evaluating the IDES to enhance the experience of wounded, ill, and injured Service members as they undergo this process. Constant oversight is critical to identify needed IDES improvements, monitor implementation, and measure Military Department performance. As such, DoD surveys Service members at the end of both the Medical Evaluation Board and Physical Evaluation Board phases of the IDES process, assessing their satisfaction with DoD and VA personnel and their overall IDES experience. Survey results taken from over 9,000 Service members from April to September 2017 indicate 93 percent of Service members were satisfied with their IDES experience. DoD will continue to utilize survey information and data to identify improvements.

Conclusion

DoD is committed to the IDES process and identifying potential improvements to the program. Moving forward, we will maintain our close collaboration with the VA to meet our shared goals of providing quality and timely integrated disability evaluations of America's wounded, ill, and injured Service members.

Mr. Chairman, Ranking Member Esty, and distinguished members of the subcommittee, I thank you for your unwavering support of the brave men and women that serve our nation, and your dedication to ensuring we have the most efficient systems in place to meet their evaluation and transition needs.

Prepared Statement of Willie C. Clark, Sr.

Good morning Chairman Bost, Ranking Member Esty, and Members of the Subcommittee. My name is Willie Clark, Deputy Under Secretary for Field Operations, in the Veterans Benefits Administration (VBA). I am joined by Beth Murphy, Director of VBA's Compensation Service, and Patricia Murray, Chief Officer, Office of Disability and Medical Assessment, Veterans Health Administration (VHA). I appreciate the opportunity to discuss several of VBA's pre-discharge programs for Servicemembers, including the Integrated Disability Evaluation System (IDES) and Benefits Delivery at Discharge (BDD). My testimony will also cover improvements to the IDES and BDD programs; Servicemember satisfaction with IDES; and training for employees involved in IDES and BDD claims.

Integrated Disability Evaluation System (IDES)

On November 28, 2017, the Department of Veterans Affairs (VA) and the Department of Defense (DoD) will celebrate the 10th Anniversary of IDES. In 2007, VA and DoD created an integrated disability evaluation process for Servicemembers who are being medically retired or separated from service. This joint process was designed to eliminate the duplicative, time-consuming, and often confusing elements of the separate and consecutive disability processes within VA and DoD. In fiscal year (FY) 2017, more than 22,000 Servicemembers were enrolled in the IDES program.

IDES provides a single set of disability examinations and a single-source disability rating that are used by both departments in executing their respective responsibilities - eliminating the duplicate medical examination and rating determinations within DoD and within VA processes. The joint VA and DoD partnership through IDES has resulted in more consistent disability ratings, faster decisions, and more timely delivery of benefits for those personnel being medically retired or separated. Following discharge, VA can deliver disability compensation benefits in the shortest period allowed by law, thus reducing the "benefit gap" that previously existed under the legacy process. The integration of VBA's Military Service Coordinators (MSCs), disability examinations, and proposed disability ratings into the IDES process prior to separation ensures Servicemembers no longer have to navigate the VA disability compensation system on their own to apply for VA benefits.

As a result of our collaborative efforts, VA and DoD have met the six goals established for IDES. These goals are (1) develop a single set of medical exams used by VA and DoD for disability rating; (2) eliminate the benefits delivery gap from separation to receipt of VA benefits; (3) increase transparency and consistency of the disability evaluations for Servicemembers; (4) reduce the combined processing time; (5) develop a less complex and non-adversarial process; and (6) provide a seamless transition of benefits and health care for separating Servicemembers through IDES.

VA is responsible for four core IDES process steps: claim development, medical examination, proposed rating, and benefit notification. For the combined four core steps, VA's average processing time in September 2017 was 81 days, a 102-day improvement from the last time we testified on the IDES program in May 2014, and 19 days better than the VA target of 100 days. In addition, VBA awarded benefits within an average of 26 days of discharge, under our IDES timeliness goal of 30 days.

DoD provides Servicemembers with IDES customer service satisfaction surveys when they separate. DoD publishes the results on a semi-annual basis, which includes VBA MSC customer satisfaction. At the end of June 2017, customer satisfaction with the overall IDES program was 93 percent and with MSCs was 89 percent.

VA continues to collaborate with DoD on ways to improve IDES execution, while remaining focused on meeting timeliness standards. Our continued partnership with DoD is critical. VA and DoD are committed to supporting our Nation's wounded, ill, and injured Servicemembers through the IDES process.

Benefits Delivery at Discharge (BDD)

Since 1995 when the BDD pilot started, the BDD and Quick Start programs have provided transitional assistance to separating or retiring Servicemembers and engaged Servicemembers in the claims process prior to discharge. VBA's goal is to ensure that each Servicemember separating from active duty and who wishes to file a claim with VA for service-connected disability benefits receives the upfront and timely assistance in doing so. Just as IDES provides Servicemembers, who are facing medical discharge, with the opportunity to initiate a claim for disability compensation benefits, the program has also provided this opportunity to Servicemembers who are transitioning via traditional or "non-medical" separation.

In FY 2017, VBA significantly improved BDD production and timeliness, completing over 32,000 claims in an average of 90 days, compared to approximately 29,000 claims in 127 days in FY 2016. VBA also completed over 25,000 Quick Start claims in an average of 109 days in FY 2017.

VA is dedicated to ensuring that Veterans get the benefits they have earned and deserve as quickly and accurately as possible. As a result, VA has redesigned its pre-discharge program to enable Servicemembers to receive disability benefit decisions, in most cases, the day after their discharge. The redesigned program went into effect October 1, 2017. Since then, pre-discharge claims are distributed through the National Work Queue to all VBA regional offices. Prior to this change the claims were distributed only to the rating activity sites that were processing these types of claims. The new modifications to the existing BDD program include changing the filing deadline to 90 days, rather than 60 days, in order to enable VBA to schedule and complete all of the medical examinations that are necessary to prepare the disability compensation claim decision prior to the Servicemember's discharge from

military service. As part of the redesign, VBA discontinued the Quick Start program and instead will fill the gap by utilizing the new Decision Ready Claim program in addition to the Fully Developed Claim or traditional claim processes as appropriate after separation. We continue to work in concert with our Veterans Service Organization (VSO) partners on the pre-discharge program. VSOs regularly collaborate with our MSCs on various military bases, in order to facilitate Servicemembers' initial claims submission.

Training

VBA provides substantial training for all employees involved in the processing of claims, including pre-discharge claims. VBA's Challenge Training program provides the basic technical skills to process claims in a blended learning format that includes both classroom and practical application. Ongoing technical training is also required each year.

In September 2017, BDD redesign training was provided to MSCs, and VBA plans to conduct a comprehensive MSC training event in FY 2018. In October 2017, VBA conducted focused training on the new redesigned BDD program for claims processors.

Conclusion

VA remains committed to supporting our Nation's Servicemembers through improvements in pre-discharge programs. VA believes its continued enhancements are critical to program success in delivering the benefits and services our Servicemembers and future Veterans deserve.

Mr. Chairman, this concludes my statement. We would be pleased to respond to questions you or other Members may have.

Prepared Statement of Gerardo Avila

ON

"THE INTEGRATED DISABILITY EVALUATION SYSTEM (IDES) AND VA'S PRE–DISCHARGE PROGRAMS FOR SEPARATING SERVICEMEMBERS"

December 13, 2017

Chairman Bost, Ranking Member Esty and distinguished members of the Subcommittee on Disability Assistance and Memorial Affairs (DAMA); on behalf of the 2 million members of The American Legion and National Commander Denise H. Rohan; The American Legion, the largest patriotic service organization for veterans serving every man and woman who has worn the uniform for this country, thank you for the opportunity to testify regarding The American Legion's position on the "Integrated Disability Evaluation System and VA's pre-discharge programs for separating servicemembers".

The goal of the Integrated Disability Evaluation System (IDES) since its inception in 2007 has been to streamline the medical separation process and create a seamless transition for wounded, ill, and injured servicemembers from the Department of Defense (DoD) to the Department of Veterans Affairs (VA). This seamless process would create a one-stop shop and encourage better coordination between DoD and VA. Key components would include reducing the overall time it takes a servicemember to complete the IDES process, a medical evaluation for receipt of VA benefits, utilizing a single examination process that meets the needs of both VA and DoD, and increasing transparency of both the DoD disability evaluation system and the VA claims process.

Prior to the IDES program, the transfer of wounded, ill and injured servicemembers from DoD to VA was fragmented. This led to large gaps in medical care and VA disability compensation. These large gaps in coverage placed further stress on those servicemembers most at risk and at the crucial point of transitioning out of active duty service. It also hindered their ability to plan for their financial future due to their VA claims not being adjudicated for months and in some cases, years after their separation. In many instances it seemed that DoD and VA were using different sets of criteria to rate disabilities, all too often unfit conditions received a different set of ratings from DoD compared to VA. Servicemembers were confused by this new system, and many were unaware of their rights and how the process worked.

As a response to fill the void, The American Legion works to assist servicemembers across the United States. Until recently, The American Legion assisted with the Medical Evaluation & Physical Evaluation Board (MEB/PEB) proc-

ess at the Servicemember & Family Assistance Center (SFAC) at Joint Base Lewis-McChord, WA. Additionally, the National staff offices in Washington D.C. supports surrounding region by assisting transitioning servicemembers at the Warrior Transition Units located at Walter Reed National Military Medical Center (WRNMMC), and Fort Belvoir, VA. The American Legion helps in reviewing the findings of the board, writing rebuttals, and answering questions on the IDES process. Also, The American Legion maintains service officer staff at the VA's Benefits Delivery at Discharge (BDD) sites in Winston-Salem, NC and Salt Lake City, UT and have assisted veterans with over 500 BDD and Quick Start (QS) claims quarterly. The service officers also review exam results, as well as represent servicemembers in hearings when warranted.

The American Legion continues to focus on the many challenges facing today's transitioning servicemembers. The IDES program, while not perfect, has been helpful in reducing the number of days it takes to complete the medical board process, which has drastically reduced the gap from separation date to receipt of benefits. The American Legion supports the idea of having one compensation & pension (C&P) exam and rating decision with the results being accepted by both VA and DoD.

While the above improvements have been made, The American Legion still has the following concerns:

DoD Rating individuals placed on the Temporary Disability Retirement List (TDRL):

Servicemembers found unfit to continue service for a condition that is not stable enough to assign a permanent rating will end up on TDRL. If the individual is retired and is transitioned out of service, they will be required to undergo periodic examinations by DoD to see if the condition has improved, worsened, or become stable enough to assign a permanent rating. The agreement and spirit of IDES is that DoD would stay out of the rating business and leave the decision to VA. The American Legion believes that DoD is violating the principles of IDES and should not be conducting ratings. The American Legion suggests that DoD communicate with VA and inquire if the individuals ratings have changed. By doing so, the one rating decision will be maintained. Additionally, the ability to add new conditions once a servicemember is enrolled in IDES can cause issues. Medical appointments and treatment do not stop once an individual is enrolled in IDES and the probability of receiving a new diagnosis is likely. The American Legion has represented individuals who were unable to add new conditions and told to file a claim with VA once they were separated. While the advice is true, the goal of IDES was to correctly rate an individual by both DoD and VA concurrently and prior to seperation. By allowing new conditions to be added, the servicemember will have a complete picture of their financial outlook and can concentrate on transitioning and not have to think about another VA claim.

A lack of available resources by members of the National Guard and Reserves undergoing the IDES process at their home station:

In the past, The American Legion has expressed concern about Line of Duty (LOD) investigations, lack of resources, and the accurate dissemination of information on the IDES process for this group of servicemembers. Unlike their active duty counterparts, LOD investigations are crucial to proving that the disability was incurred due to their service, without it, they will be separated with no retirement or severance. Attempting to undergo this endeavor at home is much more difficult compared to their active duty counterparts who are located at a military instillation where medical, legal services, and transition assistance are co-located. If feasible, members of the Reserves and National Guard should be recommended for assignment to a Warrior Transition Unit while enrolled in IDES.

The American Legion would also like to see improvements in other areas as well, specifically, the pre-discharge program previously referred to as Benefits Delivery at Discharge (BDD) and Quick Start (QS) program. Under BDD, transitioning servicemembers could file their VA disability claim between 60–180 days from their separation dates and those under 60 days could file under the QS program. The goal of the program was to initiate the claim while the servicemember was still on active duty, with the goal of shortening the gap from separation to the benefits receipt date. BDD intended to have the claims completed within 60 days of discharge. According to our two BDD field service officers, this goal was never reached. Almost all BDD claims were taking an average of 6–12 months after discharge to be completed, with QS claims taking even longer earning the nickname "quick start, slow finish."

These statements are supported by the last audit conducted by the VA Office of the Inspector General (VAOIG) which conducted a review of the Quick Start program. VAOIG found delays remained and accuracy figures well below VA target

numbers. While VA was able to reduce the Average Days to Complete a Claim (ADTC) from 291 days in 2011 to 249 days in 2013 the accuracy of those claims remains below 70 percent.[1] The OIG found the lengthy ADTC rates were due to insufficient program controls in VA and recommended recurring program evaluations and increased training on processing QS claims.

In 2017, the Veterans Benefits Administration (VBA) introduced new changes to the BDD program with the launch of the pre-discharge redesign. The major changes include doing away with the QS program and combining it with BDD. Timelines have also changed. Now servicemembers must file their claim between 90–180 days of their separation. VA will hold claims filed under the 90 day window and begin to work as a traditional or fully developed claims once the separation date is reached. The Salt Lake City Regional Office was selected as the pilot site for the program, and our representative has indicated that the recent changes have been positive thus far. They base their opinions on seeing more pre-discharge claims completed prior to discharge, previously BDD claims were rated after discharge. For example, a claim was completed on October 31st for someone with a discharge date of November 30th and another completed on October 17th with a discharge date of October 31st. Our representatives stated that this was not the case under the previous program and mentioned that the new program is good for veterans because they will receive their compensation right after discharge.

The elimination of the QS program creates a serious concern for The American Legion in cases where VA is quicker to grant service-connection for conditions that are diagnosed while still in service, as opposed to being diagnosed even one day after. Servicemembers are at a greater risk of being delayed service-connection for medical conditions unless it's a condition subject to presumptive service-connection under Code of Federal Regulations (CFR) paragraph 3.309.

If this is the case, a veteran will have to gather supporting documentation to establish the nexus between the disability and their time in service to be granted service-connection for the condition. This could result in additional obstacles the veteran must overcome to receive their benefits. Another concern is the inability to add new conditions once under the 90-day window. New conditions claimed will not be accepted and written notification will be sent reminding the servicemember the need to file a new claim after separating.

The American Legion has lent its voice and taken direct actions to ensure today's transitioning servicemembers are fully supported and have all the information available to make sound decisions. We also support a more robust presence of veteran service organizations and other private stakeholders on the DoD side to ensure transitioning veterans have the support required. The American Legion has asked for better dissemination of information by both DoD and VA, as well as requesting to make the IDES system robust enough to assist veterans with Vocational Rehabilitation and Employment [2]programs [3]. Better support is needed for National Guard and Reserve members to ensure they do not fall behind their active duty counterparts.

All of these challenges can be improved with better integration of stakeholders at all levels of the process. We cannot allow this severe disparity in access of medical support between the military and veteran communities. These men and women who deserve these earned services must not continue to struggle unnecessarily.

As always, The American Legion thanks this subcommittee for the opportunity to elucidate the position of the 2 million veteran members of this organization. For additional information regarding this testimony, please contact Mr. Derek Fronabarger, Deputy Director of The American Legion's Legislative Division at (202) 861–2700 or dfronabarger@legion.org.

Prepared Statement of Ryan M. Gallucci

WITH RESPECT TO

"To Discuss the Integrated Disability Evaluation System (IDES) and VA's Pre-Discharge Programs for Separating Service Members"

Chairman Bost, Ranking Member Esty and members of the Subcommittee, on behalf of the men and women of the Veterans of Foreign Wars of the United States (VFW) and its Auxiliary, I would like to thank you for the opportunity to testify on

[1] VAOIG Report 12–00177–138 "Audit of VA's Quick Start Program" May 20, 2014

[2] Resolution No. 42: "Compensation Benefits Information Disseminated at all Transition and Access Points"

[3] Resolution No. 32: "Enhancements to Integrated Disability Evaluation System Process"

the Integrated Disability Evaluation System (IDES) and the Department of Veterans Affairs' (VA) pre-discharge programs for separating servicemembers.

As the nation's oldest major veterans service organizations (VSO), the VFW serves 24 military installations to help veterans navigate and understand their earned VA benefits. Given the structure of the IDES program, we only have minimal interaction with servicemembers as they navigate this process. Therefore, most of this testimony will focus on VA's pre-discharge claims programs.

To the VFW, filing claims prior to separation from the military is one of the most important processes that a servicemember can complete during the transition process. Not only does this ensure timely delivery of benefits after discharge, but it also increases the likelihood of granting benefits, setting veterans up for future success.

The reason that the VFW has invested significant resources to support transitioning servicemembers is to foster a lifetime of advocacy on their behalf. As you know, the VFW and organizations like us provide this service free of charge. This is not just a courtesy that we provide. This highly-regulated professional service is a cornerstone of the VFW's mission to advocate for our nation's veterans.

When we say a lifetime of advocacy, we mean that the advocacy we provide does not stop after the initial appointment with a transitioning servicemember to file an initial VA claim. Instead, from that point forward, we hold limited power of attorney to advocate on behalf of the veteran and his or her dependents in any claim actions before VA. What this means is that after service, if a condition worsens, if the veteran marries or has children, the VFW's global network of more than 1,900 highly-trained, professional, and VA-accredited advocates is there to help navigate the process. Even when the veteran passes away, VFW advocates are there to support the surviving family members in understanding and accessing any benefits to which they are entitled.

According to VA, this lifetime of advocacy yielded nearly $7.7 billion in earned benefits for nearly 500,000 VFW-represented claimants in fiscal year (FY) 2017—an increase of more than $200 million over FY 2016. The VFW believes in this lifetime of advocacy, and the most critical point in establishing this relationship is the time when a servicemember chooses to leave the military. For this, I want to thank both VA and the Department of Defense (DoD), whom we heard from today, for allowing the VFW to play a critical role in this transition.

I just had the opportunity to visit with our work sites on Camp Pendleton, Naval Base San Diego, and in the San Diego VA Regional Benefits Office, so I have seen firsthand the importance of collaboration among DoD, VA, and the VSOs to best serve our transitioning servicemembers.

A positive experience for a transitioning servicemember in navigating their VA benefits sets everyone up for success. The veteran receives timely, accurate benefits, setting them on a course to financial stability during a difficult transition. VA can more easily process benefits for veterans whose health conditions clearly manifest during their time on active duty, making VA an approachable and non-adversarial steward of these critical benefits. DoD fosters a smooth transition into civilian life, solidifying its rapport with veterans and ensuring the sustainment of the all-volunteer force. Finally, it postures the VFW to provide the best possible service to our clients no matter where they choose to go after they leave the military.

As transition programs evolve, Congress, DoD, and VA all seek to make changes to better suit the transition experience. Many times, these changes result in improved service for the transitioning servicemember, such as the Transition Assistance Program (TAP) mandate included in the VOW to Hire Heroes Act; DoD's deployment of the military lifecycle model for transition; VA's establishment of the pre-discharge claims program; or the joint DoD/VA commitment to develop a single medical record for servicemembers and veterans.

Unfortunately, sometimes changes have unintended consequences that may result in a degraded transition experience for the servicemember. This is where the VFW takes its responsibility as a veterans' advocate to inform the agencies of jurisdiction and this committee of our concerns.

Recently, VA made two significant changes to its pre-discharge claims programs that make the VFW concerned about the future of this critical interaction and the professional services we provide to our transitioning military members. First, VA shifted its timelines for the Benefits Delivery at Discharge (BDD) program, only allowing servicemembers to submit BDD claims from 180 - 90 days prior to discharge. Second, VA eliminated the Quick Start (QS) claims program entirely, meaning veterans with 89 days or fewer left on active duty no longer have an option tailored to their unique circumstances to easily access their earned benefits.

The VFW understands why VA wanted to shift the timeline for BDD to 90 days. We understand that this allows VA to complete exams and propose rating decisions to deliver benefits as close to a servicemember's date of discharge as possible. In

a vacuum, this is a positive step. However, coupled with the elimination of QS and the military's cumbersome transition timelines, the VFW believes this change would disqualify most servicemembers the VFW serves from easily accessing their benefits on their way out of the military.

According to VA, the VFW's claimants on military installations who filed QS claims fluctuated between 33 and 50 percent over the past year. In visiting with our pre-discharge claims sites, we hear that most clients visit our offices with far fewer than 90 days left on active duty, meaning most of our past BDD clients would no longer be qualified for the program. Yes, VA still accepts these claims, but they are no longer processed expediently while the veteran still serves on active duty, and they are no longer tracked with a unique end product (EP) code specific to QS claims, formerly EP code 337.

In the past, this EP code allowed the VFW to track pre-discharge claims work to perform rating reviews and ensure the best possible outcome for our transitioning servicemembers. Now, with the elimination of the QS EP code, claims we submit on behalf of transitioning servicemembers are assigned as any other claim in VA's National Work Queue. VA will argue that this is not a big deal and that VFW-accredited representatives anywhere can conduct these rating reviews. While this is technically true, we lose optics on these claims and can no longer properly track and report how well VA is serving the transitioning servicemember population. If we cannot identify problems this early in the process, we are not setting up the servicemember for post-military success.

This is why the VFW commits substantial resources at the national level to not only initial claims intake but also quality controls on adjudication of the original claim. As of this hearing, the VFW has six personnel stationed at the VA regional offices (VARO) responsible for pre-discharge claims adjudication whose sole responsibility is to review rating decisions and correct any possible errors. Our most recent data indicates that our rating review specialists catch VA adjudication errors in up to 20 percent of pre-discharge claims and are able to resolve such errors prior to promulgation of the award. This quality control allows us to establish the aforementioned lifetime of advocacy that we consider so vital to a veteran's future, posturing our local advocates for success once a recently-transitioned veteran settles down.

Several years ago, recognizing the unique needs of transitioning servicemembers, VA committed not to broker work from the consolidated pre-discharge claims worksites at the VAROs in Winston-Salem, Salt Lake City, and San Diego. VA reneged on this promise last year with its across-the-board implementation of the National Work Queue, as we have testified in the past, and we do not expect VA will go back to its old workflows, since this has seemed to increase productivity and efficiency for VA. However, through unique EP codes and Station of Origination filtering in Veterans Benefits Management System (VBMS), our pre-discharge quality control team was able to track and review work regardless of the VARO of jurisdiction for adjudication. This was a satisfactory middle ground to meet both the needs of VA to broker its work and the VFW's need to maintain optics on specific claims for quality control purposes. However, with the elimination of the QS EP code, we lose optics on this work and can no longer fulfill our commitment to transitioning servicemembers to perform the proper quality controls on their claims.

We have not seen the full effects of this yet, but our rating review specialist at the San Diego VA Regional Benefits Office already reports that QS claims for review are declining, and in meeting with the VARO Director, we learned that the total pending QS workload is all but adjudicated. So what happens now?

This becomes especially problematic for servicemembers who are lower in rank—the servicemembers who need our services the most. Through surveying the VFW's clients, we have learned that many of our junior enlisted clients do not receive their TAP training in time to file a BDD claim. We also know that the military branches are just narrowly able to satisfy the VOW to Hire Heroes Act requirement for servicemembers to start their transition training with no fewer than 90 days remaining on active duty. If servicemembers have not been briefed yet on how to access their earned benefits, how can VA expect them to file their claim actions?

This is especially problematic on installations, like Camp Pendleton, that serve large numbers of junior enlisted transitioning servicemembers. On my recent site visit, I saw that most of the clients visiting our representative are much closer to their discharge date than 90 days. Based on our internal numbers, most of our clients on Camp Pendleton were QS claimants prior to October 1.

Moreover, VA exacerbated an already tenuous situation by notifying transitioning servicemembers with fewer than 90 days on active duty that they were "disqualified" from filing BDD claims. This is a situation where language is critical. When the VFW was first presented with this letter, we vehemently disagreed with VA's decision to send it as worded. This concern was ignored. Since the change went into

effect October 1, we have heard from all of our pre-discharge claims sites and several of our VARO worksites that veterans have called or visited the office, concerned that something went wrong with their claim. We even have one report from our office at Walter Reed National Military Medical Center that a retiree received a BDD disqualification letter 92 days prior to separation.

Thankfully, many of these clients have confidence in our representatives to explain the situation or resolve any discrepancies. However, what concerns us are the servicemembers that we do not hear from who thinks that the VFW did something wrong. For these veterans, we have lost our ability to advocate, and they already have a negative perception of how both VFW and VA will handle their benefits.

The VFW calls on VA to put veterans, not appearances, first. It must accept claims prior to separation instead of punishing transitioning servicemembers whose chain of command does not permit them the opportunity to begin their transition process 90 days before they separate from military service. At the very least, VA must reestablish an EP code for transitioning servicemembers who file a claim within 90 days of separation to ensure the VFW and other veterans organizations are able to assist veterans in successfully transitioning from military service back to civilian life, regardless of where they choose to call home.

VA must also rework the disqualification letters to simply notify the veterans that their claims have been received, but it cannot be worked until they separate from service and submit their DD–214 paperwork. It is unconscionable that transitioning servicemembers be led to believe they are not eligible for VA benefits simply because VA refuses to change the wording on its letters. These simple steps will once again ensure that the VFW and similarly-structured organizations can continue to provide the advocacy our clients expect, and transitioning servicemembers will once again have peace of mind that VA is responsibly handling their pending benefits claims.

Unfortunately, the VFW worries there is a larger objective with the recent changes to VA's pre-discharge claims programs. While VA asserts that moving the window to 90 days results in better claims service, the elimination of the QS EP code and the rapid deployment of programs like the Decision-Ready Claims (DRC) process indicate to the VFW that VA's primary objective is to obfuscate the total pending workload.

Based on the VFW's estimates, we would lose optics on up to 50 percent of our pre-discharge workload simply by VA shuffling the BDD timelines and eliminating the QS EP code. The problem is not only that we lose optics on the claims, but VA will not formally establish the BDD-excluded claims until veterans formally submits their DD–214 after they separate from service. This means that any time from 89 days to the time of the veteran's submission does not count as pending work as it formerly counted when the claim was established under a QS EP code.

On December 11, 2017, VA deployed new functionality in DRC, encouraging VSOs to work DRC claims for transitioning servicemembers. While it may seem advantageous for VSOs to be able to request VA exams for separating servicemembers who are not BDD eligible, the process completely falls apart with the requirement for the separating servicemembers to formally submit the claim once they leave military service. Per VA guidance, if we were to work with a separating servicemember to prepare a DRC claim, the VSO would never actually submit the claim. Instead, the servicemember would be responsible for not only formally submitting their DD–214 after they leave active duty, but for also completing and submitting the formal paperwork to establish their claim. This is a non-starter for the VFW and our clients because we lose all control of our client's claim. Veterans come to us so that they do not have to worry about these processes and wonder whether or not they are doing something right. Moreover, after our pre-discharge claims representatives work with a separating servicemember who leaves the military, we have lost the ability to help them without their proactive effort. Our preferred method of doing business is to take care of all the required claims processes while the servicemember is still on active duty—especially establishing a claim. To the VFW, the only benefit to shifting the onus to file onto the veteran is that, once again, there is no formal work product pending with VA, implying that claims processing times have improved. To the VFW, we cannot compromise quality customer service so that VA can report more favorable adjudication numbers.

Please do not read this as VFW accusing VA of having nefarious motives in clearing its pending workload. After all, the VA pending workload has been the subject of heavy scrutiny from VSOs, the public, and this committee for years. But maybe it is time to have an honest discussion about this. VA is notorious for unnecessarily drawing out certain business processes, but not all pending work is because of VA inaction, such as development for QS claims, and not all pending work is bad for the veteran, such as the 48-hour review period. As veterans' advocates, it is our job

to properly explain these nuances in the VA claims process to veterans before the barracks lawyers get a hold of them and tells them VA is out to get them. We can help do this. In fact, I did it just this week on a site visit to our pre-discharge claims site in San Diego. During a Transition Goals, Plans, Success (TGPS) Capstone briefing, I had the opportunity to speak with a sailor who was going through the IDES process at Naval Base San Diego. He had been notified of his VA rating, but still has a few weeks left on active duty. His question was simple: When do my benefits start? After a brief explanation of the next steps, he understood why he would not receive his VA benefits while on active duty, and he understood the timelines he would experience once he received his discharge paperwork. After the conversation, he seemed more confident and understanding of what was happening. To this sailor, the timelines did not matter nearly as much as the clarity. If we all set reasonable expectations, and explain the processes behind the timelines, veterans will have a positive experience. This is what we do as advocates.

Unfortunately, confusion and constant changes only perpetuate negative perceptions of VA and the programs VA administers. I say this in our regular meetings with VA: Help us help you. After all, we are the veterans' community. Many of us have been through this transition. We understand what our clients are going through. Our personal experiences, coupled with the training VA requires of us to understand this highly-regulated process means that we can explain things in a context that separating servicemembers will understand. We can carry the water if the focus is veteran-centric.

To the VFW, the time when servicemembers transition off of active duty is one of the most significant changes they will experience in their lives. This Congress and the VSO community have dedicated substantial resources to make sure that we get this right. The VFW values the role that we are allowed to play in the process through both VA and DoD, and we are always looking for ways to improve. Our goal is that we can move forward together to ensure that our transitioning servicemembers have access to the programs, information, and services they need for a successful transition out of military life.

Mr. Chairman, this concludes my testimony. I will be happy to answer any questions you or the Committee members may have.