

Office of Inspector General

FOLLOW-UP AUDIT OF THE ASSESSMENT OF SERVICE-CONNECTED DISABILITY DETERMINATIONS

Recommendations made in our prior review were satisfactorily implemented.

Report No. 8R5-B01-039 Date: November 17, 1997



DEPARTMENT OF VETERANS AFFAIRS Office of Inspector General Washington DC 20420

Memorandum to the Under Secretary for Benefits (20)

Follow-up Audit of the Assessment of Service-Connected Disability Determinations

- 1. The purpose of the audit was to follow up on the implementation of recommendations made in our Assessment of Service-Connected Disability Determinations, Report No. 5R6-B01-083, dated July 6, 1995. Additionally, the audit identified the current status of service-connected (SC) disability ratings for the 100 veterans reviewed in the prior assessment, and analyzed the reasons for rating changes and the associated costs. VA paid 2.2 million veterans disability compensation totaling \$11 billion in Fiscal Year (FY) 1994 and \$11.9 billion in FY 1996.
- 2. Veterans Benefits Administration (VBA) personnel make service-connected disability determinations in response to claims for disability compensation, and certain other VA benefits. Service connection may be established for diseases or injuries incurred or aggravated during active military service. Our prior assessment reviewed VBA's determinations of service connection and concluded that 97 percent of the determinations were appropriate. Although the percentage of questionable determinations (3 percent) was low, a single determination can have a significant impact on the claimant's life. Therefore, we recommended that the Under Secretary for Benefits inform appropriate VBA personnel of the types of deficiencies identified and correct specific deficiencies identified during the assessment.
- 3. We concluded that the prior assessment recommendations were implemented. VBA officials notified VA Regional Office (VARO) staff of the deficiencies noted in the assessment and took corrective action on specific deficiencies identified during the assessment. We also found that 33 of the 100 veterans had a total of 61 individual conditions in which disability ratings were either new or had changed since our prior assessment. The net effect of these changes was that total benefit payments were \$138,444 per year higher than they would have been if the veterans' status had remained unchanged. These ratings resulted primarily from changes in the severity of the veterans' conditions, new conditions identified, new evidence related to old conditions, differing interpretations of old evidence in which the benefit of the doubt was given to the veteran,

and in a few cases, errors by the original rating board. The rating changes were initiated by a variety of methods including: appeals by the veteran, scheduled re-ratings of conditions, initial/new application for rating for a condition, and prior assessment findings. In evaluating the quality of the original rating decisions we noted that 12 veterans had appealed their ratings. While the veterans' appeals did result in service connection or increased ratings for 17 conditions, only 4 of the changes in service-connected determinations may be attributed to differences in interpretation of the evidence of record.

4. Since VBA has implemented our prior recommendations and we did not identify any new conditions, no recommendations were made. The Acting Under Secretary for Benefits reviewed this report and had no additional comments. We are providing statistical and narrative information concerning the observed changes in disability ratings for Departmental use.

For the Assistant Inspector General for Auditing

(Original signed by)
WILLIAM D. MILLER
Director, Kansas City Operations Division

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RESULTS

1. VBA Implemented Prior Assessment Recommendations

The prior assessment found that 22 of the 668 determinations reviewed were inappropriate. These inappropriate determinations were made because VBA personnel overlooked pertinent evidence in veterans' claims folders or did not recognize the need for additional evidence. The prior assessment recommended that the Under Secretary for Benefits (a) inform appropriate personnel of deficiencies identified and (b) correct specific deficiencies identified in the audit. These recommendations were implemented as discussed below.

Recommendation a. Inform appropriate VBA personnel, including disability rating specialists, of the types of deficiencies we identified.

VBA's Compensation and Pension Service (C&P) staff issued Training Letter 95-5, dated October 30, 1995, which discussed deficiencies identified in the prior assessment. This training letter was mailed to the VARO Directors and made available on the Automated Reference Materials System (ARMS).

In response to our survey questionnaire, staff members for 45 of the 56 VAROs stated that they received the training letter and that appropriate VBA personnel, including disability rating specialists, were notified of the deficiencies. Also, some of the VAROs reported that they held training sessions and/or implemented additional quality controls as a result of the training letter.

Since all VAROs had access to ARMS, we concluded that the remaining 11 VAROs received adequate notification of the deficiencies.

Recommendation b. Correct the specific deficiencies identified during the assessment, as appropriate.

The prior assessment found 14 veterans with a total of 22 medical conditions in which available evidence did not support VBA's determinations. The assessment recommended that VBA correct the specific identified deficiencies, as appropriate. This included reexamining either the veteran or the medical evidence in the veteran's claim file to validate the original determinations.

VBA agreed that 12 determinations needed to be re-examined, and they took or attempted to take corrective action in all 12 cases. These actions included:

- In seven cases, the initial determination was modified (six to establish or increase the disability rating and one to decrease the disability rating).
- In four cases, the veteran and/or the veterans' medical records were reviewed and VBA officials concluded that the initial determination was proper.
- In one case, VBA staff made two attempts to re-examine the veteran; however, the veteran did not show for the re-examinations.

VBA did not agree that the other ten determinations identified in the prior assessment needed to be re-examined, citing legislative or other reasons for disagreeing. For example, in seven determinations, the prior assessment found evidence to indicate that the condition for which service connection was granted, existed prior to entry into the service. VBA officials cited the "presumption of soundness" principle as their basis for granting service connection. Under this principle, veterans are presumed to be in sound condition upon entrance into the service, unless:

- specific medical defects, disorders, or infirmities are found at the time of the entrance examination, or
- there is clear and unmistakable evidence that the injury or disease existed prior to acceptance and enrollment and was not aggravated by such active military service.

In all seven determinations, the veterans' entrance examination did not identify the condition. Also, VBA officials cited that the evidence indicating that the condition existed prior to entry into the service was not clear and unmistakable.

2. Status Changes for the Sample of 100 Veterans for the Ensuing 3-Year Period

In the Fiscal Year (FY) 1994 audit sample, the 100 veterans reviewed had 358 SC conditions. A review of their status as of June 1997 showed that they had 386 SC conditions, an increase of 28. Four of the veterans (with a total of 14 SC conditions) were deceased. Thirty-three veterans (including those who were deceased) had a total of 61 ratings which were either new or had changed from their 1994 ratings.

Reasons for Changes in Disability Ratings

The ratings were changed for various reasons, as discussed below:

Change in the Severity of the Condition. In 29 cases, the severity of the condition changed. In 26 of these cases, the veterans' conditions deteriorated and the SC percentage increased. For example, in one case the veteran's SC rating was increased for post traumatic stress disorder (PTSD). Based on a medical examination which concluded that his condition had worsened, the veteran's SC rating for PTSD was increased from 30 percent to 100 percent. In three cases the veterans' conditions improved and the SC percentage decreased. For example, one veteran's rating for a knee injury was reduced from 30 percent (following surgery) to 10 percent. A current medical examination found that the condition had improved and that there was good range of motion in the knee.

<u>New Conditions</u>. In 11 cases, veterans were given SC ratings for new conditions that either did not exist at the time of the prior audit in 1994, or the rating was deferred until further medical evidence could be obtained. For example, one veteran was diagnosed with lung cancer in 1994, which later spread to his liver. Therefore, the veteran did not receive a rating in 1994 for liver cancer, but in 1997, he received a rating for 100 percent.

Errors by the Original Rating Board. In five cases, disability ratings were changed when veterans' conditions were re-rated because the original rating board made errors. In these cases, previously provided evidence was sufficient. For example, one veteran received a nonservice-connected (NSC) rating for tinnitus. The original rating decision stated that the service medical records were negative for any complaints of ringing in the ears or a diagnosis of tinnitus. The decision also stated that tinnitus was not noted on the current VA exam. However, our prior assessment found that the VA examination diagnosed constant ringing and tinnitus. In addition, the service medical records showed that an audiological evaluation noted tinnitus and a history of noise exposure. As a result of our audit recommendation, the veteran was granted a 10 percent evaluation for tinnitus.

<u>Differing Interpretation of Existing Evidence</u>. In four cases, disability ratings were changed when veterans' conditions were re-rated due to a differing interpretation of previously provided evidence by the original rating board. For example, in one case the

veteran was given an NSC rating for a left elbow disability based on the fact that service medical records and VA examinations proved negative for significant elbow disability. The veteran requested reconsideration of the claim, and a subsequent examination showed painful inflammation of the muscles and soft tissue around the elbow. Reasonable doubt was resolved in favor of the veteran, and the rating was established at 10 percent SC.

Anticipated Reduced Rating. In two cases, changes were made as anticipated by the original rating board. For example, one veteran was given a 100 percent rating for malignant growth of the lung, with an anticipated rating of 30 percent to become effective 2 years later. This anticipated rating was based on the schedule of ratings for respiratory conditions, in Title 38, which required a reduced rating following the cessation of surgical, X-ray, antineoplastic chemotherapy, or other therapeutic procedure. The veteran's rating was reduced as planned, as there was no recurrence or metastasis of the condition.

New Evidence. In eight cases, disability ratings were changed when veterans' conditions were re-rated based on new evidence. For example, one veteran was granted a 30 percent rating for psoriasis, since there was no evidence of systemic or nervous manifestations, and the condition was not shown to be exceptionally disfiguring to warrant a higher rating. The veteran appealed the rating decision and submitted new pictures and outpatient treatment reports concerning the condition. Based on the new evidence provided, the rating board found that the condition warranted a 50 percent rating. In another case, an error by the original rating board resulted in a premature grant of service connection. The veteran was initially given a rating of zero percent for a residual right hip injury. However, the rating was based on the veteran's complaint of hip pain, which is not sufficient by itself to warrant a SC rating. A re-evaluation of the condition found new evidence which justified a SC rating of 10 percent.

In two cases, there were other reasons that contributed to the change in SC ratings. In the first case, the veteran was given a 30 percent rating for carpal tunnel syndrome of the left hand. However, due to an apparent clerical error, the rating was later reduced to 20 percent. This error did not affect the veteran's combined service connected rating, which remained at 50 percent. In the second case, the veteran was granted a 10 percent rating for residual effects from a right ankle injury incurred while in service. The veteran was scheduled for a follow-up examination to determine whether compensation should be continued. However, the veteran did not show for the scheduled appointment, and therefore, his rating was reduced to zero percent.

The net effect of the 61 changes or additions is that total benefit payments are \$138,444 per year higher. (See chart in Appendix III, pages 12-16, for a listing of the changes and additions)

How Rating Changes Were Initiated

The changes in disability ratings were initiated by a variety of causes, most notably due to periodic re-ratings or appeals of rating decisions by veterans. This information is summarized in the following chart and discussed in detail in the paragraphs that follow.

How Change Was	No. of	No. of
Initiated	Conditions	Veterans
Veteran appealed to VARO	16	11
Veteran appealed to Board	1	1
of Veterans Appeals (BVA)		
Veteran appealed to Court	0	0
of Veterans Appeals (CVA)		
Veteran reopened claim	4	3
Scheduled re-rating	22	13
Initial rating	11	7
Prior Office of Inspector	5	5
General (OIG) assessment		
Rating following surgery	2	2
Total	61	33*

^{*}Some veterans are counted in more than one category.

<u>Appealed Or Reopened Claims</u>. Veterans who disagree with rating decisions can appeal the case to the regional office or further to the BVA, and finally to the CVA. A veteran may also simply request that the regional office reconsider the claim, without going through the formal appeal process. Appeals and reopened claims accounted for 21 of the rating changes in our sample.

<u>Scheduled Re-ratings</u>. Veterans are scheduled for periodic re-ratings if their SC conditions are of a nature that improvement or decline is probable. There were 22 rating changes which occurred as a result of scheduled re-ratings (14 ratings were increased, and 8 were decreased).

<u>Initial Claims</u>. Veterans must submit a claim to receive ratings for SC conditions. There were 11 ratings in our sample which resulted from veterans submitting initial claims for SC ratings.

<u>OIG assessment</u>. There were five ratings from our sample which were changed as a result of recommendations made from the prior assessment. Four of the ratings were increased, and one was decreased.

<u>Rating following surgery</u>. Veterans who have surgery for a SC condition are generally given a temporary increase in their ratings. There were two ratings in our sample which were temporarily increased as a result of surgeries.

Effect on Benefit Payments

Rating changes for 26 of the 100 veterans increased benefit payments by \$138,444 per year or 20 percent above what they would have been if the veterans' status had remained unchanged.

67	No changes in ratings for individual conditions occurred								
	from 1994 to 1997. As a result, there was no dollar impact.								
7	Changes in ratings for individual conditions occurred, but								
	the combined rating remained unchanged. As a result, there								
	was no dollar impact.								
26	Changes in combined ratings occurred. As a result, benefit								
	payments were increased by \$138,444 per year.								

Current Status of Ratings

We found that there are 386 SC ratings for the 100 veterans as of 1997, as shown below.

- 358 1994 SC determinations
- (2) 1994 SC determinations eliminated as of 1997
- 12 1994 SC conditions expanded or changed to multiple SC conditions
- 5 1994 NSC determinations changed to SC as of 1997
- 13 New SC determinations added after 1994 initial rating
- 386 Total

Nine of the veterans currently have appeals in process that involve 22 of the 386 SC determinations (6 percent). Five of the nine veterans have appealed their cases to the BVA, and four veterans have appealed to the VARO level.

OBJECTIVES, SCOPE, AND METHODOLOGY

Objectives

The purpose of the audit was to follow-up on the implementation of recommendations made in our prior Assessment of Service-Connected Disability Determinations, Report No. 5R6-B01-083, dated July 6, 1995. The three objectives were:

- Determine whether appropriate VBA personnel, including disability rating specialists, were advised of the deficiencies identified from the prior assessment.
- Determine whether regional offices, with custody of the individual cases, in which deficiencies were noted during the prior assessment, have taken corrective action.
- Identify the current status of SC disability ratings for the 100 veterans reviewed in the prior assessment, and analyze the reasons for rating changes and the associated costs.

Scope and Methodology

The scope for the first two objectives was limited to reviewing the implementation of the prior assessment recommendations. The scope for the third objective focused on the 100 veterans randomly selected during the prior assessment with initial rating determinations made during FY 1994.

To achieve our audit objectives, we:

- Reviewed prior assessment workpapers.
- Reviewed regulations that pertain to rating determinations and appeals.
- Reviewed Benefits Delivery Network (BDN) data.
- Reviewed 58 claim files from 26 regional offices.
- Interviewed officials from VBA's C&P Service and staff from the regional offices.
- Surveyed 56 regional offices by means of questionnaires.

We relied on computer-processed data in the BDN system to determine the current status of disability determinations and identify changes since the prior audit. For a sample of the determinations, we compared the BDN data to source documents in claims folders and concluded that information in the BDN system was accurate for our purpose.

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The audit was conducted in accordance with generally accepted government auditing standards and included such tests of the procedures and records as were deemed appropriate under the circumstances.

BACKGROUND

Title 38, United States Code, Chapter 11, provides for payment of disability compensations to veterans with service-connected disabilities. The law authorizes service connection and payment amounts for conditions that are incurred or aggravated during military service. Title 38, Code of Federal Regulations, paragraph 3.303(a), states that evidence must affirmatively show that a disabling condition has its inception during service or within applicable presumptive periods, or was aggravated by service in order for service connection to be established. Once service connection has been established, it cannot be severed unless the evidence of record shows the decision was clearly and unmistakably erroneous and continuation of service connection cannot be maintained on any reasonable theory.

In our prior assessment, the OIG examined VBA's SC disability determinations for claims filed in FY 1994. The major objectives of the assessment were:

- Determine whether VBA personnel made appropriate SC disability determinations.
- Determine whether VA received all pertinent records from military records centers.
- Determine the validity of SC disability data in the C&P System.

To achieve the objectives of the prior assessment, records for 100 veterans were reviewed. The 100 veterans were randomly selected from an estimated 78,000 veterans who were initially awarded disability compensation during FY 1994. The records in the sample included 668 requests for SC disability determinations. VBA personnel established service connection for 358 conditions and denied service connection for the remaining 310 conditions. VA paid 2.2 million veterans disability compensation totaling \$11 billion in FY 1994, which was the scope of the assessment.

The prior assessment concluded that 646 of the 668 (97 percent) SC disability determinations were appropriate. The propriety of the remaining 22 determinations was questioned. While the percentage of questionable determinations was low, a single determination can have a significant impact on the claimant's life. Therefore, the prior assessment recommended that the Under Secretary for Benefits inform appropriate VBA personnel of the types of deficiencies identified and correct specific deficiencies identified during the assessment. The prior assessment also concluded that military records centers sent pertinent medical records to VA and SC data in the C&P system were accurate.

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The Deputy Under Secretary for Benefits agreed with the assessment's recommendations and provided acceptable implementation plans and the audit issues were considered resolved.

DETAILS OF AUDIT

The chart on the following pages summarizes the 61 changes in ratings identified in our review. The basis for the change, the reason for the change, and how the change was initiated is shown for each change. Also, our conclusion regarding the appropriateness of the original (FY 1994) determination is shown for each change.

Change Number	Condition	1994 Rating %	1997 Rating	Rating Change	Basis For Change	Reason For Change	How Change Was Initiated	Original Determination Appropriate?
1	Hypertensive heart disease	10	30	Rating increased	Change in condition	Condition worsened	Veteran re-opened claim	Yes
2	Hiatal hernia with reflux	0	10	Rating increased	New evidence	New evidence provided	Veteran re-opened claim	Yes
3	Left inguinal hernia	NSC	0	Rating increased	New evidence	New evidence provided	Veteran appealed to VARO	Yes
4	Herniated disc	NR	20	New condition	New evidence	New evidence provided	Veteran appealed to VARO	Yes
5	Dysfunctional uterine bleeding	0	10	Rating increased	New evidence	New evidence provided	Veteran appealed to VARO	Yes
6	Gastrosoleus equinus & metaductus	NR	10	New condition	N/A - Initial rating	Veteran did not include condition on initial claim	N/A - Initial rating	Yes
7	Post traumatic stress disorder	30	100	Rating increased	Change in condition	Condition worsened	Veteran appealed to VARO	Yes
8	Lateral meniscectomy - right knee	10	20	Rating increased	Existing evidence	Differing interpretation by original board	Veteran appealed to BVA	Yes
9	Tinnitus	NSC	10	Rating increased	Existing evidence	Error by original board	Prior OIG audit	No
10	Major depression	NR	50	New condition	Existing evidence	Error by original board	Veteran appealed to VARO	No
11	Tinnitus	NR	10	Rating increased	Existing evidence	Error by original board	Prior OIG audit	No
12	Tinea pedis	NR	0	New condition	N/A - Initial rating	Veteran did not include condition on his initial claim	N/A - Initial rating	Yes
13	Residuals of back injury	20	40	Rating increased	Change in condition	Condition worsened	Scheduled Re-rating	Yes
14	Hallux Abuctovalgus - left toe	NR	0	New condition	N/A - Initial rating	Veteran did not include condition on his initial claim	N/A - Initial rating	Yes

NR - Not Rated N/A - Not Applicable

Change Number	Condition	1994 Rating %	1997 Rating %	Rating Change	Basis For Change	Reason For Change	How Change Was Initiated	Original Determination Appropriate?
15	Hallux Abuctovalgus - right toe	NR	0	New condition	N/A - Initial rating	Veteran did not include condition on his initial claim	N/A - Initial rating	Yes
16	Ulcerative colitis	30	60	Rating increased	Change in condition	Condition worsened	Veteran re-opened claim	Yes
17	Psychosis	50	70	Rating increased	Change in condition	Condition worsened	Scheduled Re-rating	Yes
18	Post traumatic stress disorder	30	100	Rating increased	Existing evidence	Differing interpretation by original board	Scheduled Re-rating	Yes
19	Hiatal Hernia	0	30	Rating increased	Change in condition	Condition worsened	Scheduled Re-rating	Yes
20	Psoriasis	30	50	Rating increased	New evidence	New evidence provided	Veteran appealed to VARO	Yes
21	Residuals of Dermatomyositis	40	NR	Rating decreased	Change in condition	Separate rating assigned due to worsening condition	Veteran appealed to VARO	Yes
22	Loss of use of both feet due to Dermatomyositis and DJD of hip	NR	100	Rating increased	Change in condition	Separate rating assigned due to worsening condition	Veteran appealed to VARO	Yes
23	Weakness of right upper extremity due to dermatomyositis	NR	20	Rating increased	Change in condition	Separate rating assigned due to worsening condition	Veteran appealed to VARO	Yes
24	Weakness of left upper extremity due to dermatomyositis	NR	20	Rating increased	Change in condition	Separate rating assigned due to worsening condition	Veteran appealed to VARO	Yes
25	Right knee degenerative joint disease	10	100	Rating increased	Change in condition	Condition worsened	Rating following surgery	Yes
26	Organic Brain Syndrome	100	70	Rating decreased	Change in condition	Separate rating assigned due to worsening condition	Scheduled Re-rating	Yes
27	Paralyzed right vocal cord	NR	60	Rating increased	Change in condition	Separate rating assigned due to worsening condition	Scheduled Re-rating	Yes
28	Degenerative arthritis - cervical spine	NR	20	Rating increased	Change in condition	Separate rating assigned due to worsening condition	Scheduled Re-rating	Yes

Change Number	Condition	1994 Rating %	1997 Rating %	Rating Change	Basis For Change	Reason For Change	How Change Was Initiated	Original Determination Appropriate?
29	Degenerative arthritis - lumbar spine	NR	20	Rating increased	Change in condition	Separate rating assigned due to worsening condition	Scheduled Re-rating	Yes
30	Right shoulder fracture	NR	10	Rating increased	Change in condition	Separate rating assigned due to worsening condition	Scheduled Re-rating	Yes
31	Head fracture	NR	10	Rating increased	Change in condition	Separate rating assigned due to worsening condition	Scheduled Re-rating	Yes
32	Right knee strain	NR	10	Rating increased	Change in condition	Separate rating assigned due to worsening condition	Scheduled Re-rating	Yes
33	Degenerative arthritis - thoracic spine	NR	10	Rating increased	Change in condition	Separate rating assigned due to worsening condition	Scheduled Re-rating	Yes
34	Multiple rib fractures	NR	0	Rating increased	Change in condition	Separate rating assigned due to worsening condition	Scheduled Re-rating	Yes
35	Mechanical low back pain	10	0	Rating decreased	Change in condition	Condition improved	Scheduled Re-rating	Yes
36	Acute dislocation, left patella	30	10	Rating decreased	Change in condition	Condition improved	Scheduled Re-rating	Yes
37	Left knee ligament reconstruction	10	20	Rating increased	Change in condition	Condition worsened	Veteran appealed to VARO	Yes
38	Bilateral knee disorder	NSC	10	Rating increased	New evidence	New evidence provided	Veteran appealed to VARO	Yes
39	Flat feet	NSC	0	Rating increased	Existing evidence	Differing interpretation by original board	Veteran appealed to VARO	Yes
40	Bronchial asthma	10	NR	Rating decreased	Existing evidence	Error by rating board	Prior OIG audit	No
41	Moderate torso muscle injury	0	10	Rating increased	Existing evidence	Error by rating board	Prior OIG audit	No
42	Arthritis of left and right elbow	0	10	Rating increased	New evidence	New evidence provided	Veteran appealed to RO	Yes
43	Arthritis, thoracic spine	NR	10	New condition	N/A - Initial rating	Veteran did not include condition on his initial claim	N/A - Initial rating	Yes

Change Number	Condition	1994 Rating %	1997 Rating %	Rating Change	Basis For Change	Reason For Change	How Change Was Initiated	Original Determination Appropriate?
44	Arthritis, lumbar spine	NR	20	New condition	N/A - Initial rating	Veteran did not include condition on his initial claim	N/A - Initial rating	Yes
45	Carpal tunnel syndrome left	30	20	Rating decreased	Other	Clerical error	Scheduled Re-rating	Yes
46	Bony tumor - left shoulder	NR	100	New condition	N/A - Initial rating	Rating deferred until medical evidence was obtained	N/A - Initial rating	Yes
47	Compression fracture - spine	NR	30	New condition	N/A - Initial rating	Rating deferred until medical evidence was obtained	N/A - Initial rating	Yes
48	Right hip bursitis	0	10	Rating increased	New evidence	New evidence provided	Prior OIG audit	No
49	Left elbow disability	NSC	10	Rating increased	Existing evidence	Differing interpretation by original board	Veteran appealed to VARO	Yes
50	Status post - hysterectomy	NR	50	New condition	N/A - Initial rating	Condition did not previously exist	N/A - Initial rating	Yes
51	Hypertension & Mitral valve prolapse	10	100	Rating increased	Change in condition	Condition worsened	Rating following surgery	Yes
52	Cervical strain	0	10	Rating increased	Change in condition	Condition worsened	Scheduled Re-rating	Yes
53	Malignant growth of the lung	100	30	Rating decreased	Existing evidence	Change made as anticipated	Scheduled Re-rating	Yes
54	Metastatic Adenocarcinoma of Lymph Nodes	100	0	Rating decreased	Existing evidence	Change made as anticipated	Scheduled Re-rating	Yes
55	Post traumatic stress disorder	30	50	Rating increased	Change in condition	Condition worsened	Veteran re-opened claim	Yes
56	HIV related illness	30	100	Rating increased	Change in condition	Condition worsened	Veteran appealed to VARO	Yes
57	Positional vertigo	NR	0	New condition	N/A - Initial rating	Rating deferred until medical evidence was obtained	N/A - Initial Rating	Yes

Change Number	Condition	1994 Rating %	1997 Rating	Rating Change	Basis For Change	Reason For Change	How Change Was Initiated	Original Determination Appropriate?
58	Residuals - right ankle injury	10	0	Rating decreased	Other	Veteran was no-show for re-exam	Scheduled Re-rating	Yes
59	Non-small cell carcinoma	60	100	Rating increased	Change in condition	Condition worsened	Scheduled Re-rating	Yes
60	Metastatis liver cancer	NR	100	New condition	N/A - Initial rating	Condition did not previously exist	N/A - Initial rating	Yes
61	Residual soft tissue sarcoma - thumb	100	10	Rating decreased	Change in condition	Condition improved	Scheduled Re-rating	Yes

MEMORANDUM FROM THE UNDER SECRETARY FOR BENEFITS

Department of Veterans Affairs

Memorandum

Date: SEP 17 1997

From: Acting Under Secretary for Benefits (20)

Subj: Draft Report, Follow-up Audit of the Assessment of Service-Connected Disability Determinations

To: Assistant Inspector General for Auditing (52)

- 1. We have received the subject report which was a follow-up to an audit of service-connected disability determinations conducted in 1995. Noting that the recommendations of the prior audit were implemented and that the current report contains no recommendations of its own, we have no comments or suggestions.
- 2. Thank you for the opportunity to review the draft report.

(Original signed Stephen L. Lemons)
Stephen L. Lemons

Attachment

VA Form 2105

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