



DEPARTMENT OF VETERANS AFFAIRS
OFFICE OF INSPECTOR GENERAL

Office of Audits and Evaluations

VETERANS BENEFITS ADMINISTRATION

Veterans Are Still Being
Required to Attend
Unwarranted Medical
Reexaminations for Disability
Benefits

REVIEW

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Executive Summary

The Veterans Benefits Administration (VBA) provides disability compensation benefits to eligible veterans for disabilities caused by diseases, events, or injuries incurred or aggravated during active military service. To receive these benefits, veterans may be required to undergo medical examinations to determine the severity of their disabilities. Because some disabilities may change or improve over time, veterans may be required to attend medical reexaminations, which VBA refers to as “routine future examinations” or “review examinations.” For example, certain cancers may go into remission after treatment, which may lessen the severity of a veteran’s disability. To ensure veterans’ monthly compensation benefits are consistent with their levels of disability, VBA may require reexaminations for veterans when there is a need to verify either the continued existence or the current severity of a disability.¹ While required reexaminations are important to ensure taxpayer dollars are spent appropriately, unwarranted reexaminations are a waste of appropriated funds, could cause undue hardships for veterans, and, as VBA noted, reduce the efficiency and timeliness of claims processing.²

In a 2018 report, the VA Office of Inspector General (OIG) found that VBA staff did not consistently follow policy to request reexaminations only when necessary. In the report, the OIG estimated that, during the six-month review period, unwarranted reexaminations were requested by VBA claims processors in 37 percent of cases (19,800 of 53,500), costing \$10.1 million. The OIG projected that VBA would waste an additional \$100.6 million over the next five years unless it ensured that employees only requested reexaminations when necessary.³

The OIG conducted this review to determine whether VBA staff correctly followed procedures when requesting medical reexaminations associated with veterans’ disability compensation benefits. Further, this review evaluated whether VBA had demonstrated sustained improvement since 2018.

What the Review Found

The OIG found VBA has opportunities to reduce unwarranted reexaminations. To determine whether VBA staff correctly followed procedures when processing medical reexaminations associated with veterans’ disability compensation benefits, the team

¹ 38 C.F.R. § 3.327 (2022).

² VBA Policy Letter 21-01, “Updated Guidance on Routine Future Examination Requests,” October 7, 2021. Appendix A contains the full policy letter. In the review team’s sample, the costs for an individual medical reexamination ranged from \$69 to \$1,541, with an average of \$698.

³ VA OIG, [Unwarranted Medical Reexaminations for Disability Benefits](#), Report No. 17-04966-201, July 17, 2018. The report’s review period was from March through August 2017.

reviewed applicable laws, regulations, policies, and procedural guidance. The team also identified two categories of VBA staff critical to processing reexaminations.

In the first step of the process, VBA **rating specialists** complete rating decisions on veterans' claims for disability benefits. For this review, the term "rating specialist" refers specifically to members of the rating activity.⁴ A rating specialist may also indicate the need for reexamination, establishing an approximate reexamination control date (month and year) in VBA's electronic systems.⁵ The team reviewed 80 cases with reexamination controls established by completed decisions made from October 8, 2021, through April 8, 2022.

When the reexamination control date expires (or "matures"), a rating specialist or a locally designated **claims processor** with expertise in review examination ordering determines whether the reexamination is still needed and, if so, requests it from a Veterans Health Administration medical facility or contract provider. For this report, the term "claims processor" includes members of the rating activity, claims assistants, and veterans service representatives.⁶ The review team analyzed 120 cases where reexamination controls matured and were processed from June 7, 2021, through February 8, 2022. Half the sample contained cases processed through October 7, 2021, which is the day VBA issued updated guidance on processing reexaminations, while the other half were processed after that.⁷

Rating Specialists Erroneously Established Reexamination Controls

VBA's stated policy is to request reexaminations only when they are mandated by law or necessary before reducing an evaluation; every effort should be made to limit cases in which reexaminations are requested.⁸ However, the review team estimated rating specialists erroneously established reexamination controls in about 66 percent of cases (3,149 of 4,754),

⁴ The rating activity is a group of specially qualified employees vested with the authority to make formal decisions, called rating decisions, and take other actions on claims that require a rating decision. These employees include rating veterans service representatives, rating quality review specialists, and decision review officers, who are higher-level decision makers. VA Manual 21-1, "General Information on the Rating Activity," updated April 18, 2022, sec. V.i.1.A in *Adjudication Procedures Manual*.

⁵ VBA's electronic systems include the Veterans Benefits Management System Core (VBMS), Veterans Benefits Management System-Rating (VBMS-R), and SHARE. VBMS Core and VBMS-R are web-based, electronic claims-processing systems. SHARE, which is not an acronym, is an application used by VBA to access data sources located on different databases in multiple locations.

⁶ VA Manual 21-1, "Control of Future Examinations," updated September 15, 2021, sec. IV.ii.1.B, topic. 1.d. Although the manual specifies that a "locally designated claims processor with expertise in review examination ordering" may request reexaminations, the criteria are not defined. This will be discussed further throughout the report.

⁷ VBA Policy Letter 21-01, "Updated Guidance on Routine Future Examination Requests."

⁸ VBA Policy Letter 21-01, "Updated Guidance on Routine Future Examination Requests."

including for veterans whose disability was permanent and not likely to improve. This occurred, in part, because VBA does not require rating specialists to cite objective evidence and provide justification for establishing reexamination controls. VBA could assist rating specialists in determining when reexaminations are unwarranted by requiring them to cite specific evidence. If a rating specialist was unable to justify the need for reexamination, then they would be unable to establish the reexamination control. This additional step would reduce unwarranted examinations.

Claims Processors Requested Reexaminations When Controls Matured

VBA policy has historically specified that upon maturation of the reexamination control, a rating specialist will review the claim, but this policy was updated in February 2019 to specify that such reviews can also be conducted by “a locally designated claims processor with expertise in review examination ordering.”⁹ However, VBA did not define or provide criteria for such a claims processor, nor did it establish competency-based training requirements for this position or monitor completion of relevant training.

VBA’s October 2021 guidance stated that reexaminations would be conducted only if mandated by law or necessary before reducing an evaluation.¹⁰ Some VBA managers informed the review team that VBA has a control mechanism requiring employees to go into a training system, acknowledge that they read the emailed guidance, and certify their understanding. However, VBA leaders did not use this mechanism to track whether rating specialists indicated understanding of the October 2021 guidance.

The lack of defined criteria and competency-based training contributed to claims processors continuing to request unwarranted examinations. The team estimated claims processors requested unwarranted reexaminations when controls matured in about 44 percent of cases reviewed (9,733 of 22,354).¹¹ Until VBA strengthens its reexamination process, it lacks assurance that veterans are being required to attend reexaminations only when warranted.

What the OIG Recommended

The OIG made three recommendations to the under secretary for benefits, including for VBA to take action to help reduce unwarranted reexaminations by updating guidance and enhancing information systems to require rating specialists to cite objective evidence and provide

⁹ VA Manual 21-1, “Control of Future Examinations.” The February 2019 version of the manual placed this information in sec. III.iv.3.C, topic 2.d.

¹⁰ VBA Policy Letter 21-01, “Updated Guidance on Routine Future Examination Requests.”

¹¹ Appendixes B and C detail the team’s scope, methodology, and statistical sampling process.

justification for establishing reexamination controls.¹² The OIG also recommended VBA consider establishing criteria to define a “locally-designated claims processor with expertise in review examination ordering” and ensure these claims processors meet all training requirements related to establishing and ordering medical reexaminations. Finally, VBA should update training materials to include the October 2021 guidance and ensure the rating activity and locally designated claims processors with expertise in review examination ordering receive training.

VA Management Comments and OIG Response

The senior advisor for policy, performing the delegable duties of the under secretary for benefits, concurred with all three recommendations and provided responsive action plans. This includes a system enhancement that will require rating specialists to provide justification for establishing reexamination controls by citing relevant evidence. VBA will also establish criteria to define a “locally-designated claims processor with expertise in ordering medical reexaminations” and establish a protocol to ensure that all of these claims processors fulfill the training requirements for establishing and ordering medical reexaminations. Lastly, VBA will update training materials to include the October 2021 guidance—specifically that reexaminations should be conducted only if mandated by law or necessary before reducing an evaluation—as well as upcoming related system changes. The full text of the senior advisor’s comments appears in appendix D. The OIG will monitor VBA’s implementation of planned actions and will close the recommendations when satisfied that sufficient progress has been made to address the recommendations and issues identified.



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¹² The recommendations addressed to the under secretary for benefits are directed to anyone in an acting status or performing the delegable duties of the position.

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Abbreviations

OIG	Office of Inspector General
VBA	Veterans Benefits Administration
VBMS	Veterans Benefits Management System
VBMS-R	Veterans Benefits Management System-Rating



Introduction

The Veterans Benefits Administration (VBA) provides disability compensation benefits to eligible veterans for disabilities caused by diseases, events, or injuries incurred or aggravated during active military service.¹³ To receive these benefits, veterans may be required to undergo medical examinations to determine the severity of their disabilities. Because some disabilities may change or improve over time, veterans may be required to attend medical reexaminations, which VBA refers to as “routine future examinations” or “review examinations.” For example, certain cancers may go into remission after treatment, which may lessen the severity of a veteran’s disability. To ensure veterans’ monthly compensation benefits are consistent with their levels of disability, VBA may require reexaminations for veterans when there is a need to verify either the continued existence or the current severity of a disability.¹⁴

VBA rating specialists complete formal decisions—called rating decisions—on veterans’ claims for disability benefits. For this review, the term “rating specialist” refers to members of the rating activity.¹⁵ If a rating specialist determines that a veteran requires a medical reexamination, a control date is entered in the system. A control date is the month and year when the claim is due for review. When the control date arrives, a claims processor reviews the case and, if necessary, requests the reexamination. For this report, the term “claims processor” includes claims assistants, veterans service representatives, or members of the rating activity.¹⁶

While warranted reexaminations help ensure taxpayer dollars are spent appropriately, unwarranted reexaminations are a waste of appropriated funds and could cause undue hardships for veterans. Individual examination costs vary, depending on the type required. In the team’s sample, the costs ranged from \$69 to \$1,541. Based on this sample, the team identified nearly \$700 in average cost for the estimated 9,733 unwarranted reexaminations.¹⁷ Moreover, when claims processors establish unwarranted reexaminations, VBA employees must do additional work, reducing the efficiency and timeliness of claims processing. Failure to follow the prescribed guidelines represents a lack of good stewardship of resources and diverts VBA

¹³ 38 C.F.R. § 3.4(b) (2022).

¹⁴ 38 C.F.R. § 3.327 (2022).

¹⁵ The rating activity is a group of specially qualified employees vested with the authority to make formal decisions, called rating decisions, and take other actions on claims that require a rating decision. This includes rating veterans service representatives, rating quality review specialists, and decision review officers, who are higher-level decision makers. VA Manual 21-1, “General Information on the Rating Activity,” updated June 30, 2020, sec. V.i.1.A in *Adjudication Procedures Manual*.

¹⁶ VA Manual 21-1, “Control of Future Examinations,” updated March 1, 2021, sec. IV.ii.1.B, topic 1.d. Although VBA regulations specify that a “locally designated claims processor with expertise in review examination ordering” may request reexaminations, the criteria are not defined. This will be discussed further throughout the report.

¹⁷ Veterans may receive reexaminations at a Veterans Health Administration facility or from contracted providers. The review team obtained examination cost information from both the Veterans Health Administration and VBA for contracted reexaminations.

employees from other veteran care and services. Further, unwarranted reexaminations may cause undue hardship to veterans by forcing them to travel to and attend the reexamination. Also, when VBA rating specialists incorrectly indicate a veteran's disability may improve (without supporting medical evidence), the veteran may be delayed or prevented from receiving other benefits. For example, a veteran may not be eligible for state property tax reduction or exemption, dependents' educational assistance, or other benefits, such as priority health and dental care from the Veterans Health Administration.

In a 2018 report, the Office of Inspector General (OIG) estimated that, during the six-month review period, unwarranted reexaminations were requested by VBA claims processors in 37 percent of cases (19,800 of 53,500), costing about \$10.1 million. The OIG projected that VBA would waste an additional \$100.6 million over the next five years unless it ensured that employees only requested reexaminations when necessary.¹⁸

The OIG conducted this review to determine whether VBA staff correctly followed procedures when requesting medical reexaminations associated with veterans' disability compensation benefits. Further, this review evaluated whether VBA had demonstrated sustained improvement since 2018.

Overview of the Medical Reexamination Process

As previously indicated, VBA rating specialists complete rating decisions on veterans' claims for disability benefits. The amount of monetary benefits a veteran receives varies according to the degree of disability assigned by the rating specialist. The degree of the disability is expressed as a percentage ranging from 0 percent to 100 percent in increments of 10.¹⁹ The law mandates a reexamination for certain disability types. For example, certain cancers, infections, disorders, and surgical interventions require a mandatory reexamination six or 12 months after discontinuance of treatment or after surgical intervention to determine if there is recurrence of the disability or to evaluate any residual disability.²⁰

Rating specialists may also request a reexamination if they determine it is "likely that a disability has improved, or if evidence indicates there has been a material change in a disability or that the current rating may be incorrect."²¹ When rating specialists determine a veteran requires reexamination, they establish an approximate reexamination control date (month and year) in

¹⁸ VA OIG, [Unwarranted Medical Reexaminations for Disability Benefits](#), Report No. 17-04966-201, July 17, 2018. The report's review period was from March through August 2017.

¹⁹ 38 C.F.R. § 4.25 (2022).

²⁰ To illustrate, the law mandates VA examinations be conducted six months following hospital discharge for polycythemia vera (a type of blood cancer) and vitamin B12 deficiency anemia, but one year following hospital discharge for kidney transplants. 38 C.F.R. §§ 4.117 and 4.115b (2022).

²¹ 38 C.F.R. § 3.327.

VBA’s electronic systems.²² When the control date expires (or “matures”), according to VBA procedures, the veteran’s case is to be routed to either a rating specialist or a “locally designated claims processor with expertise in review examination ordering” to determine whether the reexamination is still needed.²³ If the reexamination is needed, the appropriate staff member requests it from a Veterans Health Administration medical facility or contract provider. Figure 1 shows VBA’s reexamination process.



Figure 1. VBA’s process when reexamination is warranted.

Source: VA OIG’s analysis of VBA processes.

* If it is determined that a reexamination is not warranted at the time, the control can be extended or canceled.

Medical Reexamination Determination

Both claims processors and rating specialists must exercise judgment in determining the need for reexaminations by requesting them only when necessary.²⁴ When deciding if a disability is likely to improve, rating specialists are instructed to identify the potential need for reexamination only if there is objective evidence, such as a medical professional stating that the disability is likely to

²² VBA electronic systems included the Veterans Benefits Management System Core (VBMS), Veterans Benefits Management System-Rating (VBMS-R), and SHARE. VBMS Core and VBMS-R are web-based, electronic claims-processing systems. SHARE, which is not an acronym, is an application used by VBA to access data sources located on different databases in multiple locations.

²³ VA Manual 21-1, “Control of Future Examinations.”

²⁴ VA Manual 21-1, “Determining the Need for Review Examinations,” updated September 15, 2021, sec. IV.ii.1.A, topic 1.b.

improve. For example, if a physician stated the veteran's disability was likely to improve with physical therapy, which the veteran is attending, reexamination would be required.

Rating specialists are instructed not to establish controls for reexaminations in the following circumstances:²⁵

- The veteran is over 55 years old at the time of the examination, and reexamination is not otherwise warranted by unusual circumstances or regulations.
- The disability is permanent and not likely to improve.
- The disability has not substantially improved over five years.
- The veteran's claims folder contains updated medical evidence sufficient to continue the current disability evaluation without additional examination.²⁶
- The disability is the prescribed minimum evaluation or is evaluated at 10 percent or less.
- The veteran's overall combined evaluation of multiple disabilities would not change irrespective of the outcome of reexamining the disability.²⁷

²⁵ VA Manual 21-1, "Determining the Need for Review Examinations," updated September 15, 2021, sec. IV.ii.1.A, topic 1.d.

²⁶ 38 C.F.R. § 3.326(b) (2022).

²⁷ 38 C.F.R. § 4.25. For example, if a veteran's overall combined evaluation based on multiple disabilities is 60 percent, and the single disability noted for likelihood of improvement and subject to reexamination would not change the overall combined evaluation even if the single disability was reduced to 0 percent, a reexamination is not required.

Results and Recommendations

Finding: VBA Has Opportunities to Reduce Veterans' Unwarranted Reexaminations

VBA is responsible for ensuring veterans attend reexaminations only when necessary. There are two main points in the claims process where VBA staff make decisions regarding the necessity of reexaminations: (1) when the rating specialist, if necessary, establishes the reexamination control, and (2) when the claims processor reviews the case after the reexamination control matures. Based on its sample, the review team estimated rating specialists erroneously established reexamination controls in about 66 percent of cases during the time period reviewed (3,149 of 4,754). This occurred because of limitations in the information system used to process reexaminations and because VBA did not confirm claims processors, to include rating specialists, understood updated guidance. In addition, based on analysis of another sample, the team estimated unwarranted reexaminations were requested in about 44 percent of cases during the time period reviewed (9,733 of 22,354). These errors occurred due to a lack of understanding of updated guidance and inconsistent levels of expertise.

In an October 2021 policy letter, VBA acknowledged the hardships of unwarranted reexaminations to veterans and noted that additional work for employees reduced the efficiency and timeliness of claims processing.²⁸ This letter specified that reexaminations are only to be scheduled when mandated by law or necessary before reducing an evaluation; every effort should be made to limit cases in which reexaminations are requested. During the review period, the team estimated VBA spent about \$6.8 million on unwarranted reexaminations.²⁹ Until VBA enhances its information systems used to process reexaminations, clearly defines roles, and effectively trains staff, it will continue to miss opportunities to reduce both tangible and intangible costs.

What the OIG Did

To determine whether VBA staff correctly followed procedures when processing medical reexaminations associated with veterans' disability compensation benefits, the team reviewed applicable laws, regulations, policies, and procedural guidance. To gain an understanding of VBA regulations and procedures for processing reexaminations, the team conducted site visits at

²⁸ VBA Policy Letter 21-01, "Updated Guidance on Routine Future Examination Requests," October 7, 2021. Appendix A provides the full policy letter.

²⁹ VA OIG, [Semiannual Report to Congress](#), issue 80, April 1–September 30, 2018. This semiannual report estimated \$100.6 million in monetary benefits related to unwarranted reexaminations for a five-year period ending February 28, 2022; the review team's control maturation sample was within this period. Nonetheless, the team included the estimated cost due to unwarranted reexaminations to provide context. See appendix B for the review's scope and methodology.

the VBA regional offices in San Diego, California; Atlanta, Georgia; Winston-Salem, North Carolina; and Waco, Texas. The team interviewed managers and staff involved in the processing of reexaminations. The team also discussed VBA's actions to implement the OIG's prior recommendations with staff from the Compensation Service, the Office of Field Operations, and the Office of Policy and Oversight; officials' comments are included in the report as appropriate.

The review team's analysis is based on two samples of veterans' claims related to reexaminations:

- **Control establishment sample:** From a population of 7,487 veterans (of which an estimated 4,754 veterans were in the scope of this review), the team reviewed 80 in-scope cases with reexamination controls established by completed decisions made from October 8, 2021, through April 8, 2022.³⁰
- **Control maturation sample:** From a population of 22,936 veterans (of which an estimated 22,354 veterans were in the scope of this review), the team reviewed 120 in-scope cases where reexamination controls matured and were processed from June 7, 2021, through February 8, 2022.³¹ Half the sample contained cases processed up to and including the day VBA issued updated guidance on processing reexaminations (October 7, 2021,) while the other half were processed after that.

For more information on the review's scope and methodology, see appendix B.

The OIG's finding is supported by two key elements:

- Rating specialists erroneously established reexamination controls.
- Claims processors requested unwarranted reexaminations when controls matured.

Rating Specialists Erroneously Established Reexamination Controls

VBA's stated policy is to request reexaminations only when necessary and to make every effort to limit reexaminations. VBA recognizes that not all disabilities improve and may consider a disability permanent by its nature, history, and severity. A veteran who has a permanent disability is not required to undergo reexaminations for the disability.³² In addition, a veteran

³⁰ The difference between the review population and the estimated population occurred because the team excluded 46 records from the statistical sample where the reexamination was required by regulation or diagnostic code, or reexamination was requested by a decision that occurred outside the scope of review.

³¹ The difference between the review population and the estimated population occurred because the team excluded three records from the statistical sample that did not have reexamination controls that matured during the scope of review.

³² VA Manual 21-1, "Rating Cases Involving Failure to Report for Review Examinations," updated September 15, 2021, sec. IV.ii.2.B, topic 2.b.

whose disability has not substantially improved over five years may not be required to undergo reexamination. Before establishing a reexamination control, the rating specialist considers factors including statutory exclusions and any objective evidence stating clearly the disability is likely to improve.³³ However, VBA does not require rating specialists to cite objective evidence and provide justification for establishing reexamination controls.

Over Half of Reexamination Controls Reviewed Were Unwarranted

In its sample of 80 cases where reexamination controls were established, the review team found 53 were unwarranted. The team found most errors occurred when the disability was permanent and not likely to improve, or the combined disability examination would not change. Based on its sample, the team estimated that 3,149 reexaminations (about 66 percent) were unwarranted for one or more of the reasons listed in table 1.

Table 1. Estimated Unwarranted Reexamination Errors for Established Controls

Reason reexamination was unwarranted	Estimated number of errors	Estimated percentage of errors (rounded)
The disability is permanent and not likely to improve	1,901	60
The combined disability evaluation would not change	1,188	38
The disability has not substantially improved over five years	475	15
The veteran is over 55 years of age absent unusual circumstances*	178 [†]	6
The disability evaluation is at the minimum level for the condition	119 [†]	4
The disability evaluation is 10 percent or less	119 [†]	4

Source: VA OIG analysis of veterans' cases with established controls from October 8, 2021, to April 8, 2022.

* "Unusual circumstances" is an individual, fact-specific determination left to the discretion of the rating activity. For example, VBA may schedule a veteran over 55 years of age for reexamination for a disability such as cancer.

[†] Due to the variability of this projection and the small sample size, the estimates are imprecise. Appendix C provides details on the statistical sampling methodology, projections, and margins of error.

Note: Because reexamination requests could have more than one error, the estimated percentage of errors does not sum to 100 percent.

The review team found some rating specialists erroneously established reexamination controls for veterans, as seen in examples 1 and 2.

³³ 38 C.F.R. § 3.327.

Example 1

In March 2022, a rating specialist assigned a veteran a 50 percent evaluation for a foot disability. Although there was no objective evidence stating clearly that the disability was likely to improve, the rating specialist established a reexamination control for 13 months in the future. Importantly, the veteran's combined disability evaluation would not change even if a reexamination resulted in a reduced evaluation for the foot disability.

Example 2

In December 2021, a rating specialist assigned a veteran a 30 percent evaluation for a digestive disability. Although there was no objective evidence stating clearly that the disability was likely to improve, the rating specialist established a reexamination control for 37 months in the future.

The review team informed VBA of the errors it found in the sample; its staff agreed with this assessment and stated corrective actions would be taken.

VBA could assist rating specialists in determining when reexaminations are unwarranted by requiring them to cite specific evidence. If a rating specialist was unable to justify the need for reexamination, then they would be unable to establish the reexamination control. This additional step would reduce unwarranted examinations.

Information System Updates Did Not Fully Support the Reexamination Process

The OIG recognizes that VBA has reduced some unwarranted reexaminations by enhancing its information systems. VBA reported updating its system in April 2019 to reduce the ordering of reexaminations for veterans that met certain conditions, to include age and evaluation levels.³⁴ For example, if a rating specialist establishes a reexamination control for a veteran who is over 55 years old, the system will provide a warning flash. To proceed, the rating specialist must manually override the system by choosing one of the following justifications:

- Objective evidence clearly stating disability is likely to improve.
- Disability is not static, with objective material improvement over the past five years.
- There is a BVA [Board of Veterans Appeals] or Court [Court of Appeals for Veterans Claims] mandate.

³⁴ VBMS-R, updated April 28, 2019.

- The override is warranted in light of unusual circumstances, in cases of veterans over age 55.

VBA could strengthen reexamination processing by adding a field to require the rating specialist to specify the support behind the justification for requested reexaminations not mandated by law. For example, a rating specialist’s note could state “[Name of examiner] dated [MM/DD/YYYY] stated the veteran’s disability is likely to improve with physical therapy, which she is attending.” The minimal time spent entering a short justification could save VBA from allocating its resources for the processing of unwarranted reexaminations.

Recommendation 1 is for VBA to take action to help reduce unwarranted reexaminations by updating guidance and enhancing information systems to require rating specialists to cite objective evidence and provide justification for establishing reexamination controls.

Claims Processors Requested Unwarranted Reexaminations When Controls Matured

As previously discussed, when the rating specialist establishes a reexamination control, a date is placed in VBA’s electronic systems. When the reexamination control matures, the veteran’s case must be reviewed by either a rating specialist or a locally designated claims processor with expertise in reexamination ordering.

In its sample of 120 cases with matured reexamination controls, the review team found 52 unwarranted reexaminations. The team found the most errors occurred when either the medical evidence was sufficient to continue the disability evaluation without reexamination or the disability was permanent and not likely to improve. Based on its sample, the team estimated that 9,733 reexaminations during the period reviewed (44 percent) were unwarranted for one or more reasons listed in table 2.

Table 2. Estimated Unwarranted Reexamination Errors for Matured Controls

Reason reexamination was unwarranted	Estimated number of errors	Estimated percentage of errors
The medical evidence is sufficient to continue the disability evaluation without an examination	9,105	94
The disability is permanent and not likely to improve	7,242	74
The disability has not substantially improved over five years	3,817	39
The combined disability evaluation would not change	209*	2
The veteran is over 55 years of age absent unusual circumstances	209*	2

Source: VA OIG analysis of veterans’ cases with matured controls for June 7, 2021, to February 8, 2022.

** Due to the variability of this projection and the small sample size, the estimates are imprecise. Appendix C provides details on the statistical sampling methodology, projections, and margins of error.*

The following examples show two cases when claims processors requested unwarranted reexaminations after controls matured.

Example 3

In July 2016, a veteran received a 50 percent evaluation for a mental health disability, and the rating specialist established a reexamination control for five years in the future. When the control matured in July 2021, the case was forwarded to a claims processor. At the time, the disability had been evaluated at 50 percent for more than five years and the available medical evidence did not show any material change. Instead of returning the case to a rating specialist, the claims processor erroneously requested the reexamination. The veteran attended the reexamination; a rating specialist continued the 50 percent evaluation and did not establish another reexamination control. The cost of the unwarranted reexamination was \$810.

Example 4

In September 2016, a veteran received a 50 percent evaluation for migraine headaches and a 50 percent evaluation for a mental health disability. The rating specialist established reexamination controls for five years in the future. When the controls matured in October 2021, the case was forwarded to a claims processor. At the time, both disabilities had been evaluated at 50 percent for more than five years and the available medical evidence did not show any material change. Instead of returning the case to a rating specialist, the claims processor erroneously requested reexaminations in November 2021. The veteran attended both reexaminations; a rating specialist continued both 50 percent evaluations and established additional reexamination controls. The cost of the unwarranted reexaminations was \$1,492.

The review team informed VBA of the errors found; its staff agreed with this assessment and stated corrective actions would be taken.

VBA Did Not Define Requirements for a Locally Designated Claims Processor with the Expertise in Processing Reexaminations

In its July 2018 report, the OIG recommended VBA establish internal controls sufficient to ensure that a reexamination is necessary prior to employees requesting it and modify procedures to reflect the improved business processes. VBA stated it would collaborate with internal stakeholders to determine the additional training and procedural changes needed based on the

trends identified in recurring reports. Historically, VBA policy specified that upon maturation of the reexamination control, the rating activity would review the claim. In February 2019, VBA updated its policy to specify that upon maturation of the reexamination control, the claim would be reviewed by “the rating activity, or a locally designated claims processor with expertise in review examination ordering.”³⁵ However, VBA did not define, or provide criteria for, a locally designated claims processor with expertise ordering review examinations.

The deputy under secretary of policy and oversight said VBA deliberately put the onus on local regional offices to define the criteria for such a claims processor and establish training, as local managers know their employees’ abilities.³⁶ The executive director of the Compensation Service stated her office sets policy as to the employees needing to become experts in reexamination ordering, but it is up to the Office of Field Operations to implement the policy.³⁷ The assistant director of projects and program management at the Office of Field Operations further confirmed that the regional office designates who meets the criteria to be a locally designated claims processor.

The team was unable to find written guidance at any level defining the criteria for a locally designated claims processor with expertise ordering review examinations. Further, regional office officials interviewed by the team stated they were not aware of any criteria for locally designated claims processors. Since VBA does not have criteria to define this role, it lacks assurance that staff with adequate levels of expertise are making these determinations. As this review shows, many veterans are being subjected to unwarranted reexaminations. A potential way to reduce unwarranted reexaminations would be to ensure there is a consistent level of expertise.

Therefore, recommendation 2 is for VBA to consider defining criteria for a “locally designated claims processor with expertise in review examination ordering” and ensure these claims processors meet all training requirements related to establishing and ordering medical reexaminations.

VBA Did Not Ensure Claims Processors Were Sufficiently Trained

Although VBA offers training for rating specialists on reexaminations, it is not mandatory. Further, while claims processors receive some mandatory training on examinations, they do not receive the same training rating specialists receive about when not to request reexaminations.

³⁵ VA Manual 21-1, “Control of Future Examinations.” The February 2019 version of the manual placed this information in sec. III.iv.3.C, topic 2.d.

³⁶ The Office of Policy and Oversight oversees the administration of benefits and services to veterans, service members, their family members, and survivors.

³⁷ The Compensation Service provides oversight of the delivery of disability compensation benefits to veterans. The Office of Field Operations oversees operations at VBA’s 56 regional offices and is responsible for ensuring that benefits and services delivered by VBA are provided in an effective and efficient manner.

A regional office manager told the team that claims processors are not trained to make the decision as to whether an examination should be requested when a reexamination control matures. They further stated that most claims processors are just requesting the reexamination because they have not been trained to look at the available medical evidence.

The review team interviewed 24 claims processors and asked if they felt qualified to review medical evidence to determine if reexaminations were warranted. Many indicated they were not qualified and did not question a rating specialist's establishment of the reexamination control. Others indicated they just requested the reexamination due to a lack of training or knowledge. Finally, some believed reviewing medical evidence for reexaminations fell outside the scope of their duties and should be conducted by the rating activity.

As stated earlier, in October 2021, VBA issued updated guidance to establish review examinations only if mandated or necessary before reducing an evaluation.³⁸ VBA did not incorporate the updated guidance into the (nonmandatory) reexamination training for rating specialists. Some managers informed the review team that VBA has a control mechanism requiring employees to go into a training system, acknowledge that they read emailed guidance, and certify their understanding. In interviews with the team, VBA leaders reported they did not use this mechanism to track whether rating specialists and claims processors indicated their understanding of the October 2021 guidance. By not using the existing confirmation mechanism, VBA missed an opportunity to ensure understanding and reduce unwarranted examinations.

Recommendation 3 addresses the need to update training materials to include the guidance from the policy letter and ensure the rating activity and locally designated claims processors with expertise in review examination ordering receive training.

Conclusion

During the review period, the OIG estimated rating specialists erroneously established over 3,000 reexamination controls. To reduce this occurrence, VBA should ensure rating specialists understand the updated guidance and enhance its information systems to fully support the reexamination process. Further, the OIG estimated claims processors requested over 9,000 unwarranted reexaminations during the review period. Until VBA clearly defines the role of "locally designated claims processor with expertise in review reexamination ordering" and ensures adequate training is provided, this will likely continue. In addition to the costs to veterans, VBA spent about \$6.8 million in taxpayer funds on these unwarranted reexaminations.

³⁸ VBA Policy Letter 21-01, "Updated Guidance on Routine Future Examination Requests."

Recommendations 1–3

The OIG made the following recommendations to the under secretary for benefits:³⁹

1. Take action to help reduce unwarranted reexaminations by updating guidance and enhancing information systems to require rating specialists to cite objective evidence and provide justification for establishing reexamination controls.
2. Consider establishing criteria to define a “locally-designated claims processor with expertise in review examination ordering” and ensure these claims processors meet all training requirements related to establishing and ordering medical reexaminations.
3. Update training materials to include the guidance from VBA Policy Letter 21-01, “Updated Guidance on Routine Future Examination Requests” and ensure these claims processors meet all training requirements related to establishing and ordering medical reexaminations.

VA Management Comments

The senior advisor for policy, performing the delegable duties of the under secretary for benefits, concurred with all three recommendations and provided responsive action plans. This includes a system enhancement that will require rating specialists to provide justification for establishing reexamination controls by citing relevant evidence. VBA will also establish criteria to define a “locally designated claims processor with expertise in ordering medical reexaminations” and establish a protocol to ensure that all of these claims processors fulfill the training requirements for establishing and ordering medical reexaminations. Lastly, VBA will update training materials to include the guidance from the policy letter and upcoming related system changes. The full text of the senior advisor’s comments appears in appendix D.

OIG Response

The action plans provided were responsive to all three recommendations. The OIG will monitor VBA’s implementation of its planned actions and will close the recommendations when satisfied that sufficient progress has been made to address the recommendations and issues identified.

³⁹ The recommendations addressed to the under secretary for benefits are directed to anyone in an acting status or performing the delegable duties of the position.

Appendix A: Policy Letter 21-01

DEPARTMENT OF VETERANS AFFAIRS
Veterans Benefits Administration
Washington, D.C. 20420

October 7, 2021

Executive Director (00/21C)

In Reply Refer To:

All VBA Regional Offices and Centers

Policy Letter 21-01

Subject: Updated Guidance on Routine Future Examination Requests

Purpose

This letter provides instruction to regional office claims processors regarding scheduling of routine future examinations (RFEs). Based on a data-driven analysis of outcomes of RFEs over a three-year period, RFEs will not be established or required absent an exception outlined in this policy letter.

Background

Generally, reexaminations will be required if it is likely that a disability has improved, or if evidence indicates there has been a material change in a disability or that the current rating may be incorrect. This principle and other requirements for RFEs is contained in 38 CFR § 3.327. An [Office of Inspector General \(OIG\) report](#), released July 17, 2018, indicated that further guidance may be needed in this area to ensure consistency in policies pertaining to reexaminations, including more clear direction as to when they are necessary. This OIG report estimated that approximately 37% of RFE requests from March to August 2017 were unnecessary or should not have been requested based on the regulations.

Analysis and Conclusion

Compensation Service analyzed data on all Veterans who had an RFE conducted in fiscal years 2018, 2019, and 2020. The analysis revealed that the majority (77%) of conditions reviewed were confirmed and continued. Only about 10% of conditions were reduced, and the remaining 13% of conditions were increased.

Furthermore, the data revealed that mental disorder conditions accounted for approximately 40% of all conditions reviewed by RFEs without a VA examination being required under the VA Schedule for Rating Disabilities (VASRD). While accounting for a large volume of RFEs, only 5% of mental disorder conditions were reduced. The majority (75%) were confirmed and continued, and the remaining 20% were increased.

These trends indicate that RFEs are being requested in circumstances other than when they are required. Unnecessary RFEs are not a demonstration of good stewardship of resources entrusted to VA. Apart from the time and costs to the agency of conducting unnecessary RFEs, there is impact to efficiency and timeliness of claims processing as VA examinations are often an important piece of

evidence in claims for original service connection, claims for increase and for new conditions. Equally as important, there are costs to Veterans, including their time to travel and attend. Some Veterans have reported anxiety and fears when receiving RFE notifications. RFEs can involve invasive medical examinations or cause Veterans to re-experience traumatic events associated with their mental health. Therefore, VA must improve consistency and focus on the intended purpose of RFEs.

Guidance

The policy guidance in this letter applies to all regional office claims and appeals processing personnel within the Veterans Service Centers and Decision Review Operations Centers.

Effective immediately, routine future examinations shall only be requested when

- Mandated by a provision found in 38 CFR Part 4 (e.g., 38 CFR §§ 4.28, 4.128, 4.129, and in evaluation criteria found in diagnostics codes like 7528 Malignant neoplasms of the genitourinary system), or
- Necessary to reduce an evaluation in accordance with 38 CFR § 3.344.

Duty to Assist

This policy letter does not alter VA's duty to assist, including the provisions for providing medical examinations or obtaining medical opinions when necessary to decide a claim. See 38 CFR § 3.159(c)(4) and 38 USC 5103A(d). Additionally, VA will continue to accept, without further examination, any hospital report or any examination report from any government or private institution, provided that it is otherwise adequate for rating purposes. See 38 CFR § 3.326.

Failure to Report for Examination

This letter also does not alter the provisions, found in 38 CFR § 3.655(c), concerning reexamining a claimant after failing to report for an examination. If an examination has been ordered to assess continuing entitlement when there is a running award and the claimant fails to report but indicates willingness to report for reexamination before payment has been discontinued or reduced, a reexamination shall be rescheduled.

Questions

Contact Compensation Service for questions on policy and procedures at 211_Policy.Vbavaco@va.gov.

Contact the Office of Administrative Review for questions on Higher Level Reviews and legacy appeals at OARADMIN.VBAWAS@va.gov.

Beth Murphy
Executive Director
Compensation Service

Timothy Sirhal
Acting Executive Director
Office of Administrative Review

Appendix B: Scope and Methodology

Scope

The review team conducted its work from March 2022 through January 2023. The team reviewed two samples of cases that were processed from June 7, 2021, through April 8, 2022, to ensure the reexaminations were warranted. One sample included cases where reexamination controls were established by completed decisions made from October 8, 2021, through April 8, 2022 (control establishment sample). The other sample included cases where reexamination controls matured and were processed from June 7, 2021, through February 8, 2022 (control maturation sample).

Methodology

To accomplish the review objectives, the team considered applicable laws, regulations, policies, procedures, and guidelines for reexamination processing. The team also interviewed and obtained information from managers and staff from VA's central office and the personnel in the following VA regional offices: San Diego, California; Atlanta, Georgia; Winston-Salem, North Carolina; and Waco, Texas.

The review team obtained the costs of reexaminations conducted by the Veterans Health Administration and contracted examiners. The director of clinical user support from the Veterans Health Administration Cost Accounting Office provided the team with the direct and indirect costs of examinations.

- **Direct costs:** The costs directly associated with providing patient care and services that do not vary in direct proportion to the volume of patient activity. Examples include labor costs such as doctors, nurses, social workers, and supplies and services.
- **Indirect costs:** All costs not directly related to patient care that cannot be specifically traced to or identified with an individual patient or group of patients. Examples of indirect costs are financial, human resources, and environmental services.

The review team added the direct and indirect costs to obtain the total cost for each Veterans Health Administration examination.

The risk management officer for VBA's Medical Disability Examination Office provided the review team with cost information for contracted examinations. The costs included amounts for transportation, record review, examination, and testing. The team added these costs to obtain the total cost for each contracted examination reviewed.

Internal Controls

The review team assessed VBA's internal controls significant to the objective. The two internal control components assessed were control activities and monitoring. In addition, the team assessed the principles of those internal control components. The team identified internal control deficiencies with two of the components and three principles:

Component: Control Activities

- Principle 11: Management should design the entity's information system and related control activities to achieve objectives and respond to risks.
- Principle 12: Management should implement control activities through policies.

Component: Monitoring

- Principle 16: Management should establish and operate monitoring activities to monitor the internal control system and evaluate the results.

Fraud Assessment

The review team assessed the risk that fraud and noncompliance with provisions of laws and regulations, significant within the context of the review objectives, could occur during this review. The team exercised due diligence in staying alert to any fraud indicators by

- soliciting the OIG's Office of Investigations for indicators, and
- reviewing OIG hotline complaints and concerns for indicators.

The OIG did not identify any instances of fraud or potential fraud during this review.

Data Reliability

The review team used computer-processed data from VBA's Corporate Database. To test for reliability, the team determined whether any data were missing from key fields, included any calculation errors, or were outside the time frame requested. The team also assessed whether the data contained obvious duplication of records, alphabetic or numeric characters in incorrect fields, or illogical relationships among data elements. Comparison of the data with information contained in the electronic claims folders did not disclose any problems with data reliability, as the team did not find any discrepancies in the fields in any of the data sets.

Government Standards

The OIG conducted this review in accordance with the Council of the Inspectors General on Integrity and Efficiency's *Quality Standards for Inspection and Evaluation*.

Appendix C: Statistical Sampling Methodology

Approach

To accomplish the objective, the review team evaluated two statistical samples of veterans' records with reexaminations. The team used statistical sampling to quantify the extent of records where claims processors requested or scheduled unwarranted reexaminations.

Population

The review population for the control establishment sample included 7,487 veterans' records with reexaminations from October 8, 2021, through April 8, 2022 (review period). For the review, the team estimated the population to be 4,754 veterans' records. The difference between the review population and the estimated population occurred because the team excluded 46 records from the statistical sample where the reexamination was required by regulation or diagnostic code, or reexamination was requested by a decision that occurred outside the scope of review. Since the excluded sample records represent others in the original review population that may also be out of scope, the team estimated the population eligible for this review was 4,754.

The review population for the control maturation sample included 22,936 veterans' records with reexaminations from June 7, 2021, through February 8, 2022 (review period). For the review, the team estimated the population for the control maturation to be 22,354 veterans. The difference between the review population and the estimated population occurred because the team excluded three records from the statistical sample that did not have reexamination controls that matured during the scope of review. Since the excluded sample records represent others in the original review population that may also be out of scope, the team estimated the population eligible for this review was 22,354.

Sampling Design

The review team selected a statistical sample of 126 records; 46 were not in scope, resulting in a control establishment sample of 80 records from the population of records where reexamination controls were established. The population was not stratified.

The review team selected a statistical sample of 123 records; three were not in scope, resulting in a control maturation sample of 120 cases with reexamination controls that matured and were processed. The population was categorized into two strata: before the updated guidance (June 7 through October 7, 2021) and after the updated guidance (October 8 through February 8, 2022).

Weights

Samples were weighted to represent the population from which they were drawn, and the weights were used in the estimate calculations. For example, the team estimated the mean cost of unwarranted exams by first obtaining the product of each unwarranted exam’s cost and sampling weight, and then dividing the sum of these values by the sum of all sampling weights for unwarranted exams.

Projections and Margins of Error

The projection is an estimate of the population value based on the sample. The associated margin of error and confidence interval show the precision of the estimate. If the OIG repeated this review with multiple sets of samples, the confidence intervals would differ for each sample but would include the true population value approximately 90 percent of the time.

The OIG statistician employed statistical analysis software to calculate estimates, margins of error, and confidence intervals that account for the complexity of the sample design. The sample size was determined after reviewing the expected precision of the projections based on the sample size, potential error rate, and logistical concerns of the sample review. While precision improves with larger samples, the rate of improvement decreases significantly as more records are added to the sample review.

Based on simple random sampling and a normal sampling distribution, figure C.1 shows the effect of progressively larger sample sizes on the margin of error.

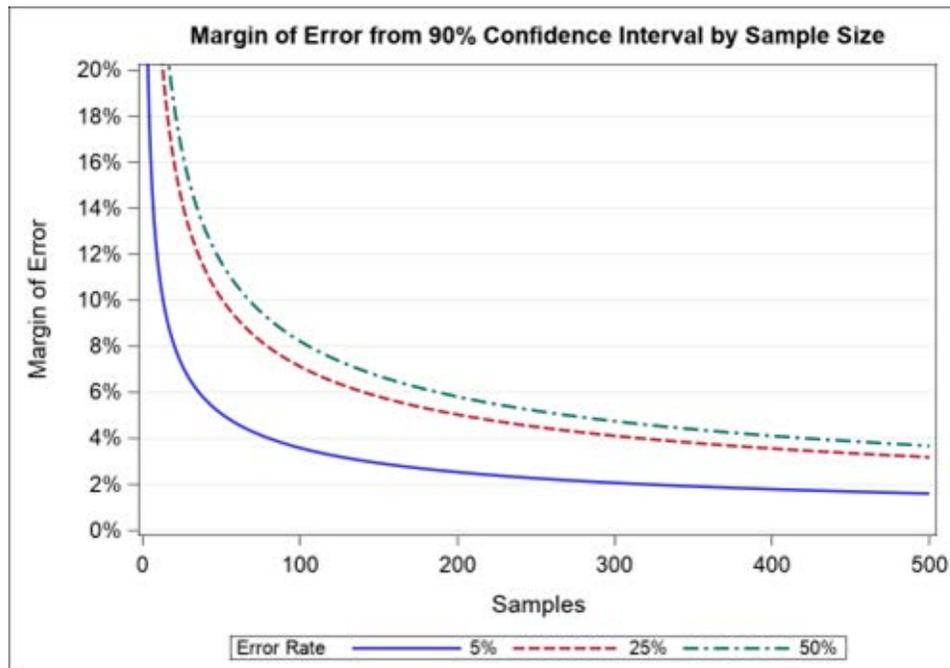


Figure C.1. Effect of sample size on margin of error.
Source: VA OIG statistician’s analysis.

Projections

Tables C.1 and C.2 detail the review team’s analysis and projected results for veterans’ cases with established reexamination controls during the review period.

Table C.1. Summary of Projections and Confidence Intervals for Estimated Adjusted Universe for Established Controls

Description	Estimate number	90 percent confidence interval			Sample Size	Sample count
		Margin of error	Lower limit	Upper limit		
Records where reexamination controls were established	4,754	554	4,182	5,289	126	80

Source: VA OIG statistician’s projection of estimated population based on the team’s findings.

Table C.2. Summary of Projections and Confidence Intervals for Errors on Established Controls

Reason reexamination was unwarranted	Estimate number	90 percent confidence interval			Sample Size	Sample count
		Margin of error	Lower limit	Upper limit		
The disability was permanent and not likely to improve	1,901	504	1,431	2,439	126	32
There was no change to the overall combined disability evaluation	1,188	429	807	1,664	126	20
The disability has not substantially improved over five years	475	298	239	836	126	8
The veteran was over 55 years of age at the time of the examination	178	202	49	452	126	3
The disability evaluation was at the minimum level for the condition	119	173	21	368	126	2
The disability evaluation was 10 percent or less	119	173	21	368	126	2
Total	3,149	567	2,593	3,727	126	53 errors

Source: VA OIG statistician’s projection of estimated cases with errors based on the team’s findings.

Note: Some cases had more than one error.

Based on the calculations presented in tables C.1 and C.2, the team estimated errors in 66.2 percent of cases (3,149 of 4,754).

Tables C.3 through C.5 detail the review team’s analysis and projections for veterans’ cases with reexamination controls that matured during the review period.

Table C.3. Summary of Projections and Confidence Intervals for Estimated Adjusted Universe for Control Maturation

Description	Estimate number	90 percent confidence interval			Sample Size	Sample count
		Margin of error	Lower limit	Upper limit		
Records where reexamination controls matured, and were processed	22,354	665	21,449	22,780	123	120

Source: VA OIG statistician’s projection of estimated population based on the team’s findings.

Table C.4. Summary of Projections and Confidence Intervals for Errors by Reason for Control Maturation

Description	Estimate number	90 percent confidence interval			Sample Size	Sample count
		Margin of error	Lower limit	Upper limit		
Cases where medical evidence was sufficient to continue the current disability evaluation	9,105	1,764	7,386	10,914	123 (120 in scope)	49
Cases where the disability was permanent and not likely to improve	7,242	1,680	5,642	9,003	123 (120 in scope)	39
Cases where the disability did not have substantial improvement over five years	3,817	1,380	2,587	5,346	123 (120 in scope)	20
Cases where there was no change to the overall combined disability evaluation	209	488	10	986	123 (120 in scope)	1
Cases where the veteran was over 55 years old at the time of the examination	209	488	10	986	123 (120 in scope)	1
Total cases with errors	9,733	1,783	7,982	11,548	123 (120 in scope)	52

Source: VA OIG statistician’s projection of estimated cases with errors based on the team’s findings.

Note: Some cases had more than one error.

Based on the calculations presented in tables C.3 and C.4, the team estimated control maturation errors in 43.5 percent of cases (9,733 of 22,354).

The Veterans Health Administration Managerial Cost Accounting Office and the VBA Medical Disability Examination Office provided the review team with the total estimated cost for each unwarranted examination. The OIG’s estimated costs for unwarranted reexaminations are based on the data provided. The projections are provided in table C.5.

Table C.5. Summary of Projections and Confidence Intervals for Estimated Costs for Control Maturation

Description	Estimate number	90 percent confidence interval			Sample size	Sample count
		Margin of error	Lower limit	Upper limit		
Estimated mean cost of an unwarranted reexamination	\$696.98	\$73.35	\$623.63	\$770.32	52 errors	52 errors
Estimated total cost of unwarranted reexaminations	\$6,783,403	\$1,390,794	\$5,392,609	\$8,174,196	123 (120 in scope)	52 errors

Source: VA OIG statistician’s projection of estimated costs based on information provided by VA and the team’s analysis.

Note: As previously mentioned, the OIG’s 2018 semiannual report to Congress estimated \$100.6 million in monetary benefits related to unwarranted reexaminations for a five-year period ending February 28, 2022; the review team’s control maturation sample was within this period. Nonetheless, the team included the estimated cost due to unwarranted reexaminations to provide context.

Appendix D: VA Management Comments

Department of Veterans Affairs Memorandum

Date: February 13, 2023

From: Senior Advisor for Policy, Performing the Delegable Duties of the Under Secretary for Benefits (20)

Subj: OIG Draft Report - Veterans Are Still Being Required to Attend Unwarranted Medical Reexaminations for Disability Benefits [Project No. 2022-01503-AE-0066] – [VIEWS 09276160]

To: Assistant Inspector General for Audits and Evaluations (52)

1. Attached is VBA's response to the OIG Draft Report: Veterans Are Still Being Required to Attend Unwarranted Medical Reexaminations for Disability Benefits.

The OIG removed point of contact information prior to publication.

(Original signed by)

Joshua Jacobs

Attachment

**Veterans Benefits Administration (VBA)
Comments on OIG Draft Report:
Veterans Are Still Being Required to Attend Unwarranted Medical
Reexaminations for Disability Benefits**

The Veterans Benefits Administration (VBA) concurs with OIG’s draft report findings and provides the following comments in response to the recommendations:

Recommendation 1: Take action to help reduce unwarranted reexaminations by updating guidance and enhancing information systems to require rating specialists to cite objective evidence and provide justification for establishing reexamination controls.

VBA response: Concur. VBA has begun the process of requesting a system enhancement, which will require rating specialists to identify the authority under which a reexamination is requested and provide justification for establishing reexamination controls by citing relevant evidence.

Target Completion Date: December 31, 2023

Recommendation 2: Consider establishing criteria to define a “locally-designated claims processor with expertise in review examination ordering” and ensure these claims processors meet all training requirements related to establishing and ordering medical reexaminations.

VBA response: Concur. VBA will establish criteria to define a locally-designated claims processor with expertise in ordering medical reexaminations. VBA will also establish a protocol to ensure that all designated claims processors have fulfilled the training requirements related to establishing and ordering medical reexaminations.

Target Completion Date: March 31, 2024

Recommendation 3: Update training materials to include the guidance from the policy letter and ensure these claims processors meet all training requirements related to establishing and ordering medical reexaminations.

VBA response: Concur. VBA will update the training materials to include the guidance from the policy letter and upcoming related system changes. VBA will also establish a protocol to ensure that all designated claims processors have fulfilled the training requirements related to establishing and ordering medical reexaminations.

Target Completion Date: March 31, 2024

For accessibility, the original format of this appendix has been modified to comply with Section 508 of the Rehabilitation Act of 1973, as amended.

OIG Contact and Staff Acknowledgments

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