

LINDA BOISSEAU, DEPARTMENT SERVICE OFFICER, DEPARTMENT OF ALASKA of
the DISABLED AMERICAN VETERANS

STATEMENT OF
LINDA BOISSEAU
DEPARTMENT SERVICE OFFICER
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OF THE
DISABLED AMERICAN VETERANS
BEFORE THE
COMMITTEE ON VETERANS' AFFAIRS
UNITED STATES SENATE
FIELD HEARING
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Mr. Chairman and Members of the Committee:

Thank you for the opportunity to present testimony on the current state of veterans services available to Alaska's 76,000 veterans. Before I begin my formal statement, I would like to thank Senators Begich and Murkowski and Representative Don Young for their support of funding reform and Senator Murkowski for her special interest and support of women veterans.

In Alaska and across the country, the Department of Veterans Affairs (VA) offers a comprehensive array of benefits and services to military veterans and their survivors, including health care, vocational rehabilitation, readjustment counseling, disability compensation and pensions, educational assistance, home loans, life insurance, and burial services.

Disabled American Veterans (DAV) Department Service Officers assist our National Service Officers (NSOs) in representing veterans and their families with claims for benefits from government agencies, including VA, and the Department of Defense. Veterans need not be DAV members to take advantage of this assistance, which is provided free of charge.

NSOs function as attorneys-in-fact, assisting veterans and their families in filing claims for VA disability compensation and pension; vocational rehabilitation and employment; education; home loan guaranty; life insurance; death benefits; health care and much more.

One of the biggest problems facing Alaska's veterans today is their inability to get correct or timely decisions on claims for disability compensation. As you are aware, VA's Office of Inspector General (VA OIG) recently completed an inspection of the disability compensation claims processing and Veterans Service Center (VSC) operations at the VA Regional Office in Anchorage. During this review, the OIG found that the Anchorage RO did not meet the requirements for 13 of 14 operational areas reviewed. While this may come as a surprise to some, it is consistent with what is been happening at VA Regional Offices across the United States.

During recent inspections of other Regional Offices, as well as in reviews of Veterans Benefits Administration (VBA) operations in general, the VA Inspector General found the same problems as those identified in Alaska: inaccurate decisions, too much workload, not enough trained staff, inadequate oversight and quality control, and insufficient IT capability to handle the mountain of paper claims.

In March of 2009, VA OIG reported on the overall system and found that almost a quarter (22%) of all veterans' claims for disability compensation were decided incorrectly in the 12-month

period reviewed. During that period, over 200,000 veterans received inaccurate decisions on disability compensation. Here in Alaska, the OIG found that 29% of the cases reviewed had errors resulting in veterans being denied compensation due to them. Equally troubling, of the cases which the Regional Office itself found, 42% of those errors were not corrected. The chart attached at the end of my testimony depicts the result of the last six VA OIG visits.

And while errors go uncorrected, the volume of claims is rising faster than VA's ability to address this growing workload. As of January 11, 2010, there were 466,985 claims for disability compensation and pensions awaiting rating decisions; 162,352 (37.3%) of the claims have exceeded VBA's 125-day strategic goal. In fact, the average time to approve a rating has exceeded 180 days for more than a decade. And to complicate the problem even further, claims folders for almost 300,000 veterans were misplaced and claims for 141,000 veterans are lost. VA today continues to rely on a cumbersome paper-based system to review and evaluate claims for disability compensation and pension. Beginning with the application for benefits, which is now a 23-page document, the system has become increasingly complicated. Moreover, in the past several years, there has been about a 50% increase in the most complex disability compensation applications, those in which a veteran cites eight or more disabilities, requiring even greater time and expertise to correctly reach a correct, equitable decision.

Unfortunately, the VBA has yet to develop a modern information technology (IT) system to begin to move from such a paper-centric system to a contemporary electronic system. Regional Offices are being overwhelmed with massive amounts of paper, from the applications themselves to piles of medical evidence supporting those claims.

In fact, after a recent inspection at the Roanoke, Virginia VA Regional Office, the VA OIG found nearly 11,000 folders sitting on top of file cabinets already filled to capacity with the paper claims and supporting evidence of tens of thousands of veterans. After calling in the building engineer to look at the situation, they determined that the load on floors 10, 11 and 12 of the 14-story building was double what is considered safe and heavy enough to cause the entire building to collapse.

Mr. Chairman, too many disabled veterans and their survivors must wait too long for disability compensation and pension rating decisions that are too often wrong or inaccurate. If we do not address these problems and reform the claims processing system here in Alaska and across the United States, the entire system is in danger of collapsing on itself just from the sheer weight of the workload.

Congress must reform the claims processing system so that disabled veterans and their survivors are able to apply for benefits through a simple, uniform and modern IT-based process that enables VA to make accurate decisions within acceptable time frames. Active duty service

members should be able to apply for benefits before discharge and receive accurate decisions by the time of their discharge.

To accomplish these goals, VBA must develop a work culture that emphasizes quality at all steps of the process. It must begin with the development of a management culture that measures and rewards the quality of results, not just the quantity, and that provides sufficient training of both VA's management and workforce in order to arrive at correct decisions.

VBA must modernize its IT infrastructure and optimize its business processes. The current paper-centric system must be replaced with a secure and accessible paperless system that rapidly moves and organizes information necessary to help rating specialists reach correct decisions. The new system must optimize both the workflow and the business processes.

VBA must also implement a simpler and more transparent benefits application and approval process. There should be a universal and simple application procedure that provides veterans with regular updates on the progress of their claims and allows them to access their records and pending claims securely from any location.

In the short term, there are several reforms that VBA could begin to immediately implement either on its own, or consonant with Congressional action. For example, VBA wastes significant time by ordering a VA medical examination for virtually every claim for compensation, even when sufficient medical evidence from the veterans' private physician already exists. VBA should create standardized templates for private physicians so that private medical evidence can be developed and delivered in a standardized manner that meets VBA requirements and allows VBA rating specialists to use that private medical evidence to make determinations without the need for redundant VA examinations.

VBA should also take advantage of their existing authority to provide deferred rating decisions quickly to veterans when there is sufficient evidence to establish a compensable service-connected condition. This would allow VBA to quickly adjudicate those issues where the service connection matters and levels of disability are clear cut, assign an interim rating so that the veterans could begin to receive financial support and access VA health care services. Then, at a later date VA can schedule any necessary exams and develop the evidence necessary to determine the final rating for other more complicated disabilities.

VBA must also take steps to establish comprehensive and uniform systems to train and provide continuing education to its workforce, including more substantial on-the-job-training. They must develop and implement a new quality control regime that places emphasis on the quality of decisions made, rather than only on the quantity of work completed and reward employees accordingly. A renewed commitment to and investment in training and quality control will help to ensure that benefits decisions are done right the first time, which will save time over the long run. For a more detailed explanation of these recommendations and their origins, please refer to the Independent Budget for fiscal year 2011, in which DAV is a major participant and partner along with AMVETS, Veterans of Foreign Wars of the United States and Paralyzed Veterans of America.

Although DAV NSOs and Department Service Officers do not heavily focus on the VA health care system, I would like to make a few comments on the state of medical care available to Alaska's veterans. Today, VA operates a medical center in Anchorage, and Community- Based Outpatient Clinics (CBOCs) in Fairbanks, Kenai and Matanuska-Susitna Valley, in total providing more than 130,000 outpatient visits a year. We recognize the unique challenges our veterans face in Alaska and I am pleased DAV Resolution 247, adopted by the delegates to DAV's last National Convention, assembled in Denver, Colorado, August 22-25, 2009, fully supports the right of rural veterans to be served by VA. Our resolution further notes that funding for additional rural care options and outreach be sustained and not be the cause of reductions in highly specialized VA medical programs.

Public Law 109-46 1 authorized VA to establish the Veterans Health Administration Office of Rural Health to promulgate policies, best practices and innovations to improve services to veterans who reside in rural areas. We strongly urge this Office to coordinate with VA medical care facilities and veterans service organizations in Alaska to ensure alternative and creative programs and services are developed to meet the unique needs of sick and disabled veterans residing in this area.

Mr. Chairman, this completes my testimony. I would be happy to answer any questions you may have.