

2010 Military Health System Conference

Impact of Disability Evaluation System Pilot:

Lessons Learned from the Field

Sharing Knowledge: Achieving Breakthrough Performance

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Bureau of Medicine and Surgery

Disability Evaluation System (DES) Pilot



- What is the DES Pilot?
- Impact of Pilot
 - On Service Members
 - Length of DES process
 - Receipt of benefits
 - On Military Treatment Facilities
 - Expands role for medical board staff (PEBLOs)
 - Includes a VA Military Services Coordinator (MSC)
 - MEB changes

Service Member Cannot Return To Duty or Meet Retention Standards



- Enters current Disability Evaluation System
 - Found UNFIT by the PEB
 - Disability rating for unfitting conditions
 - Medically retired from military service
- Files VA claim for disability evaluation
 - Disability rating for claimed conditions
 - Obtains compensation (service-connected)

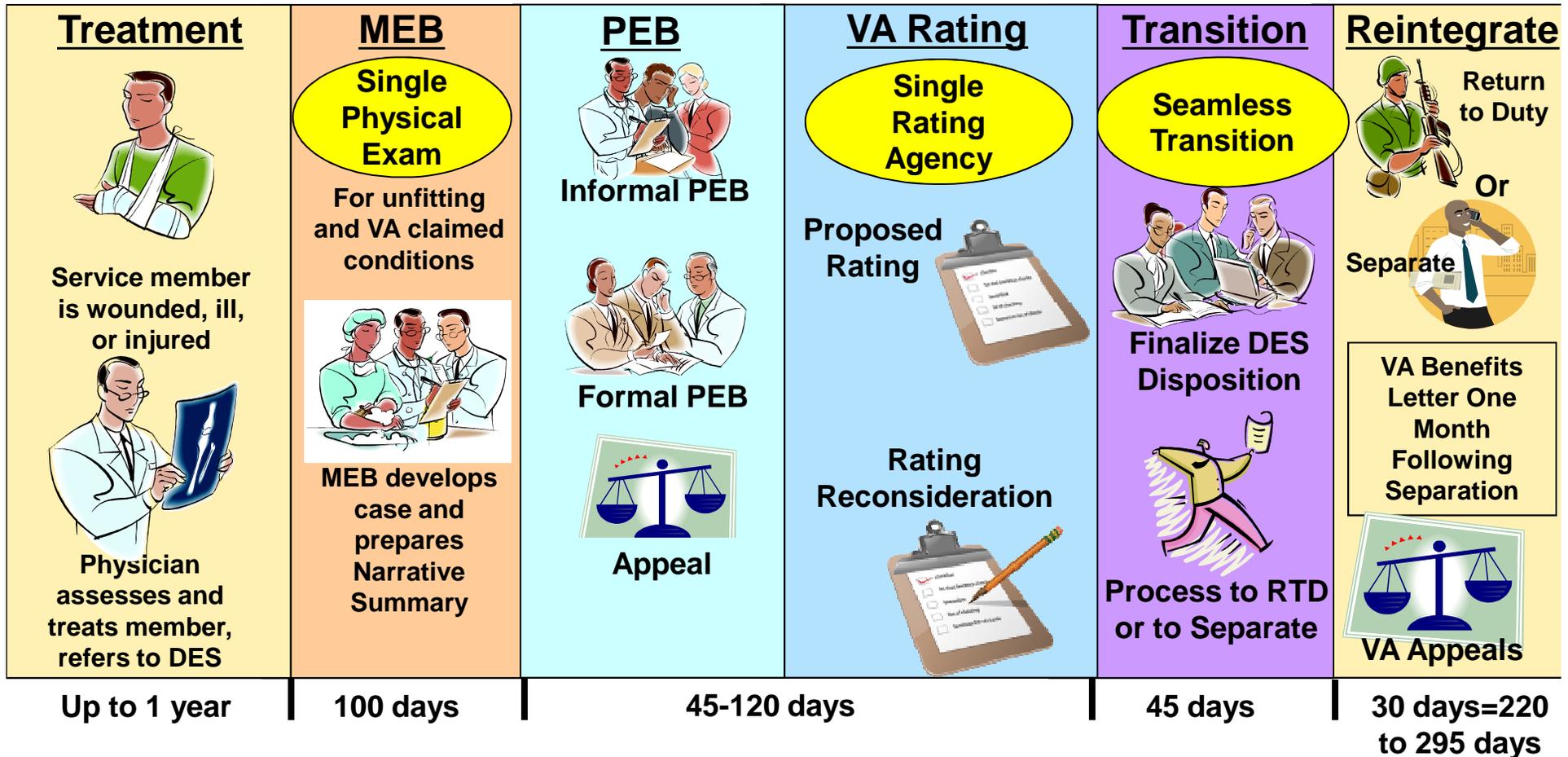
DES Pilot combined military and VA disability evaluation

Disability Evaluation System Pilot



- 1 Comprehensive physical (VA)
 - Compensation and Pension Exam (C&P)
 - Services determine FITNESS
 - VA rates disability
- 1 Rating organization (VA)
 - Military: unfitting conditions
 - VA: all service-connected claimed conditions
- Seamless transition to VA health system

New DES Timeline and Phases



Impact on Service Members



- Longer process
 - Remains on active duty
- VA benefits immediately upon separation from AD (57% faster)
- Due process
 - Rebut the NARSUM
 - Appeal FITNESS determination by PEB
 - Request reconsideration of rating



Top Issues to Consider

Prepare for and Execute the DES Pilot

“Besides the war itself, we have no higher priority”

Thorough Pre-Implementation Assessment



- Identify resource needs and shortfalls
 - PEBLO staffing and workload
 - Touch points with the VA
 - CAC cards, installation access, IT network access
 - Space, equipment, training
- Early on, establish site implementation team
 - Involve key players from the beginning
 - Flow chart how to accomplish pilot processes for your local setting

Prepare to Integrate New Elements



- Visible Leadership
 - Lean Six Sigma or flow chart DES Pilot to your locale
 - Establish VA relationships early
 - Educate local commands, Guard and reserve units
 - Ensure clinician and administrator collaboration
- Staff: train and establish realistic expectations
 - New requirements for PEBLOs
 - Interaction with VA
 - Changes to MEB roles
- Patients need to understand new process

PEBLOs and MSCs



- Facilitate case coordination for service member
 - Co-locate PEBLOs and MSCs in the same spaces
 - Establish positive and efficient communication
 - PEBLO staffing: 1:20 ratio
 - Get familiar with local command structures to obtain Non-Medical Assessments
- Consider:
 - Hire staff
 - Reconfigure spaces: ADA and HIPAA compliant
 - Command VTC capability for VA claims

Clinicians



- Ongoing physician education
- Train clinicians on service requirements
 - Medically restricted duty, referral to DES
 - Capture unfitting conditions
- Medical Evaluation Board members:
 - Review military health records and VA Compensation and Pension exams
 - Occupational impact, retention standards
- Diagnostic alignment between military and VA

Second-Order Impact of DES Pilot



- Ongoing medical care needs
 - Especially mental health care
- Larger population of wounded, ill and injured
 - Security and disciplinary issues
 - Billeting and hotel services
 - Support services
- Exceptions
 - Expedited DES?
 - Legacy process?

Critical Elements



- Ensure advanced IT connectivity with VA systems
- CAC cards and base access for MSCs
- Proper space, phone lines, equipment
- Transportation
- Keep tracking database up to date
 - Veteran Tracking Application
 - Measures adherence to timelines, outliers

Pitfalls to Avoid



- Legacy vs. DES Pilot: know the differences
- Stay in swim lanes:
 - PEBLOs brief military information
 - MSCs brief VA information
- Ensure commands understand
 - Non-Medical Assessments needed promptly
 - C&P exams: appointed time and place of duty
 - Missed appointments cause delays
- Plan for billeting larger number of service members due to longer time in DES

Questions?



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VA C&P Exam Worksheets



- <http://www.vba.va.gov/bIn/21/Benefits/exams/index.htm#bm01>



UNITED STATES DEPARTMENT OF VETERANS AFFAIRS

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- Benefits Home
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- If You Owe VA
- Special Programs
- Rate Tables
- ADVISOR Program
- Fact Sheets
- Forms
- Federal Benefits for Veterans & Dependents Pamphlet
- Directives
- Ask Benefits Questions Via E-mail
- Site Map of Compensation & Pension Benefits

COMPENSATION AND PENSION BENEFITS

Index to Disability Examination Worksheets

These 57 Disability Examination Worksheets are in use both by the doctors of VHA (Veterans Health Administration) who do the disability examinations and by the rating specialists, hearing officers, and Decision Review Officers of VBA (Veterans Benefits Administration) who do the disability evaluations.

- [Acromegaly](#)
- [Aid and Attendance or Housebound Examination](#)
- [Arrhythmias](#)
- [Arteries, Veins, and Miscellaneous](#)
- [Audio](#) *Changed October 10, 2008*
- [Bones \(Fractures and Bone Disease\)](#) *Changed May 1, 2007*
- [Brain and Spinal Cord](#)
- [Chronic Fatigue Syndrome](#) *Changed May 1, 2007*
- [Cold Injury Protocol Examination](#)
- [Cranial Nerves](#) *Changed May 1, 2007*
- [Cushing's Syndrome](#) *Changed May 1, 2007*
- [Dental and Oral](#)
- [Diabetes Mellitus](#) *Changed September 22, 2008*
- [Digestive Conditions, Miscellaneous](#)
- [Ear Disease](#) *Changed April 30, 2007*



- Benefits Home
- Compensation and Pension Benefits Homepage
- Apply On-Line
- Benefit Information
- Pension Benefits
- If You Owe VA
- Special Programs
- Rate Tables
- ADVISOR Program
- Fact Sheets
- Forms
- Federal Benefits for Veterans & Dependents Pamphlet
- Directives
- Ask Benefits Questions Via E-mail
- Site Map of Compensation & Pension Benefits

DISABILITY EXAMINATION WORKSHEETS

General Medical Examination

General Medical

Name: SSN:
 Date of Exam: C-number:
 Place of Exam:

Narrative: This is a comprehensive base-line or screening examination for all body systems, not just specific conditions claimed by the veteran. It is often the initial post-discharge examination of a veteran requested by the Compensation and Pension Service for disability compensation purposes. As a screening examination, it is not meant to elicit the detailed information about specific conditions that is necessary for rating purposes. **Therefore, all claimed conditions, and any found or suspected conditions that were not claimed, should be addressed by referring to and following all appropriate worksheets, in addition to this one, to assure that the examination for each condition provides information adequate for rating purposes.** This does not require that a medical specialist conduct examinations based on other worksheets, except in the case of vision and hearing problems, mental disorders, or especially complex or unusual problems. **Vision, hearing, and mental disorder examinations must be conducted by a specialist.**

The examiner may request any additional studies or examinations needed for proper diagnosis and evaluation (see other worksheets for guidance). All important negatives should be reported. The regional office may also request a general medical examination as evidence for nonservice-connected disability pension claims or for claimed entitlement to individual unemployability benefits in service-connected disability compensation claims. Barring unusual problems, examinations for pension should generally be adequate if only this general worksheet is followed.