



DEPARTMENT OF VETERANS AFFAIRS  
Office of the General Counsel  
Washington DC 20420

July 8, 2013

02REG

Ms. Sarah Bashadi, Desk Officer  
Office of Information and Regulatory Affairs  
Office of Management and Budget  
725 17<sup>th</sup> Street, NW  
Washington, DC 20503

In Reply Refer To:

Dear Ms. Bashadi:

The Department of Veterans Affairs (VA) submits the enclosed update on VA's Plan for Periodic Review of Existing Regulations, in response to Executive Order (E.O.) 13563, "Improving Regulation and Regulatory Review," and the reporting requirements in Office of Management and Budget (OMB) Memorandum, "Implementation of Retrospective Review Plans," dated October 26, 2011. This report also updates VA's response to E.O. 13610, "Identifying and Reducing Regulatory Burdens," dated May 10, 2012, and the reporting requirements in OMB's Memorandum, "Reducing Reporting and Paperwork Burdens," dated June 22, 2012. VA's update reports follow OMB's suggested templates.

VA's mission is to administer benefit programs, provide health care, and perform mortuary services for America's Veterans. Consequently, we are focusing on identifying, updating, and simplifying significant rules that are obsolete, outdated, confusing, or that place unnecessary burdens on Veterans or their beneficiaries. We currently have two major rewrite projects pursuing the retrospective review goals of EO 13563--the Compensation and Pension Regulation Rewrite Project and VA's Schedules for Rating Disabilities Project. Neither retrospective review project is expected to result in significant economic savings, but both projects will improve the administration of benefits for veterans. VA's paperwork burden reduction initiatives, however, should result in substantial monetary savings and significant reductions in paperwork burdens.

VA's Office of Regulation Policy and Management in the Office of General Counsel is the point of contact for the retrospective review portion of this report (Janet Coleman, (202) 461-4937). VA's Records Management Service in the Office of Information and Technology provided the paperwork reduction information (Crystal Rennie at (202) 632-7492).

Sincerely,

*Robert C. McFetridge*  
Robert C. McFetridge  
Director,  
Office of Regulation Policy and  
Management

Enclosure

**Department of Veterans Affairs Retrospective Review Plan Report**

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<b>Agency/ Admin</b>	<b>RIN/OMB Control No.</b>	<b>Title of Initiative/ Rule/ICR</b>	<b>Brief Description</b>	<b>Actual or Target Completion Date</b>	<b>Anticipated savings in costs and/or information collection burdens, together with any anticipated changes in benefits (please quantify, to the extent feasible, and also specify baseline, time horizon, and affected groups)</b>	<b>Progress updates and anticipated accomplish- ments</b>	<b>Notes</b>
<b>Office of the General Counsel</b>	2900- AO13, proposed rule	VA Compensation and Pension Regulation Rewrite Project	VA has reorganized and rewritten its compensation and pension regulations in a logical, user-friendly format. The intent of the Rewrite Project is to assist veterans, their representatives, and VA staff in locating and understanding these regulations. The new regulations will be placed in 38 CFR, and become effective for claims filed after a	TBD. VA's leadership is considering the best way to integrate the Regulation Rewrite Project with VA's current priority effort to reduce and eliminate the claims backlog. VA already has published 20 proposed rules and received public comments.	No anticipated cost savings. The new regulations will not alter the benefits VA provides nor alter claims procedures. By reorganizing and redrafting these regulations they will become much easier to find, read, understand, and apply. The new reorganization and redrafting should reduce the amount of time it takes to	The proposed rule is continuing through the Executive Branch review process. Publication and implementation of a final rule will be delayed until after VA's Claims Transformation Initiatives have successfully eliminated VA's	

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			certain date, TBD.	VA intends to publish this 21st consolidated rule in 2013, to provide the public with an additional opportunity to comment on all of the proposed regulations and keep the document up to date.	adjudicate VA claims and should improve accuracy. The publication of AO13 will enhance public participation by allowing the public to see all of the rewritten provisions at one time, review VA's responses to all previous comments, and provide a final opportunity for any additional comments.	claims backlog. In the interim, additional proposed rules may be published to keep the project up to date.	
<b>Compensation Service</b>	2900-AO19, proposed rule	Schedule for Rating Disabilities—Hematologic and Lymphatic	AO19 (The Hematologic and Lymphatic Systems) proposes to amend the portion of the VA Schedule for Rating Disabilities that addresses the hematologic and lymphatic systems. The intended effect of this change is to incorporate medical advances that have	Publish the proposed rule NLT Dec 2014.	No anticipated cost savings. Updated rating schedules will benefit veterans by applying the latest medical information for disability adjudications.	AO19 currently is being coordinated with VA's Office of General Counsel.	A VASRD Status Summit: Public Overview of Proposed Disability Evaluation Criteria for 9 body systems was held in

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			occurred since the last revision of these regulations, update medical terminology, add medical conditions not currently in the Rating Schedule, and refine criteria for further clarity and ease of rater application.				Arlington, VA, June 4-13, 2012.
<b>Compensation Service</b>	2900-AO44, proposed rule	Schedule for Rating Disabilities—Endocrine	AO44 (The Endocrine System) proposes to revise the portion of the VA Schedule for Rating Disabilities that addresses the endocrine system. The intended effect of this change is to update medical terminology, add medical conditions not currently in the Rating Schedule, revise the criteria to reflect medical advances since the last revision of these regulations, and clarify the criteria.	Publish the proposed rule NLT Dec 2014.	No anticipated cost savings. Updated rating schedules will benefit veterans by applying the latest medical information for disability adjudications.	AO44 currently is being coordinated with VA's Office of General Counsel.	Discussed at the June 2012 public VASRD status summit.
<b>Compensation</b>		Schedule for		Draft a proposed	No anticipated cost		Discussed

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<b>sation Service</b>		Rating Disabilities— Mental Disorders		rule, TBD.	savings. Updated rating schedules will benefit veterans by applying the latest medical information for disability adjudications.		at the June 2012 public VASRD status summit.
<b>Compensation Service</b>		Schedule for Rating Disabilities— Musculoskeletal, Rheumatologic, and Immune Disorders		Draft a proposed rule, TBD.	No anticipated cost savings. Updated rating schedules will benefit veterans by applying the latest medical information for disability adjudications.		Discussed at the June 2012 public VASRD status summit.
<b>Compensation Service</b>		Schedule for Rating Disabilities— Dental and Oral Conditions		Draft a proposed rule, TBD.	No anticipated cost savings. Updated rating schedules will benefit veterans by applying the latest medical information for disability adjudications.		Discussed at the June 2012 public VASRD status summit.
<b>Compensation Service</b>		Schedule for Rating Disabilities— Genitourinary		Draft a proposed rule, TBD.	No anticipated cost savings. Updated rating schedules will benefit veterans by applying the latest medical information for disability adjudications.		Discussed at the June 2012 public VASRD status summit.

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<b>Compensation Service</b>		Schedule for Rating Disabilities— Infectious Diseases		Draft a proposed rule, TBD.	No anticipated cost savings. Updated rating schedules will benefit veterans by applying the latest medical information for disability adjudications.		Discussed at the June 2012 public VASRD status summit.
<b>Compensation Service</b>		Schedule for Rating Disabilities— Digestive System and Nutritional Deficiencies		Draft a proposed rule, TBD.	No anticipated cost savings. Updated rating schedules will benefit veterans by applying the latest medical information for disability adjudications.		Discussed at the June 2012 public VASRD status summit.
<b>Compensation Service</b>		Schedule for Rating Disabilities— Cardiovascular		Draft a proposed rule, TBD.	No anticipated cost savings. Updated rating schedules will benefit veterans by applying the latest medical information for disability adjudications.		
<b>Compensation Service</b>		Schedule for Rating Disabilities— Respiratory		Draft a proposed rule, TBD.	No anticipated cost savings. Updated rating schedules will benefit veterans by applying the latest medical information for disability		

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					adjudications.		
<b>Compen- sation Service</b>		Schedule for Rating Disabilities— Impairment of Auditory Acuity and Diseases of the Ear, Nose, and Throat		Draft a proposed rule, TBD.	No anticipated cost savings. Updated rating schedules will benefit veterans by applying the latest medical information for disability adjudications.		
<b>Compen- sation Service</b>		Schedule for Rating Disabilities— Neurological Conditions, Convulsive Disorders, and Other sense Organs (Smell & Taste)		Draft a proposed rule, TBD.	No anticipated cost savings. Updated rating schedules will benefit veterans by applying the latest medical information for disability adjudications.		
<b>Compen- sation Service</b>		Schedule for Rating Disabilities— Gynecological Conditions and Disorders of the Breast		Draft a proposed rule, TBD.	No anticipated cost savings. Updated rating schedules will benefit veterans by applying the latest medical information for disability adjudications.		
<b>Compen- sation Service</b>		Schedule for Rating Disabilities— Skin		Draft a proposed rule, TBD.	No anticipated cost savings. Updated rating schedules will benefit veterans by		

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					applying the latest medical information for disability adjudications.		
<b>Compensation Service</b>		Schedule for Rating Disabilities—Organs of Special Sense (Eye)		Draft a proposed rule, TBD.	No anticipated cost savings. Updated rating schedules will benefit veterans by applying the latest medical information for disability adjudications.		

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## Burden Reduction Initiatives

Sub-Agency	Title	Description of the initiative	Hours of paperwork/reporting eliminated	Estimated effective date of the change	Notes
Veterans Benefits Administration	E-Benefits Portal	2900-0737 - eBenefits is a joint VA and Department of Defense (DoD) web portal that provides resources and self-service capabilities to Veterans, Servicemembers, and their families, to research, access, and manage their VA and military benefits and personal information. eBenefits uses secure credentials to allow access to personal information and gives users the ability to perform numerous self-service functions. In April 2012, DoD, with support from VA, changed the registration form resulting in a simpler and faster registration process. The reduction in burden hours for the enhanced form is estimated to be 2 minutes (a decrease from 5 minutes). In April 2013, the estimated eBenefits user base grew to 2,600,000. As a result, it is assumed hours of paperwork will be eliminated based on the portal's user base. Registration information belongs to DoD and is not collected by eBenefits. Once an authenticated user accesses their personal profile screen, numerous fields are pre-populated, e.g. name, thus the user has fewer fields to complete.	130,000	4/2012	

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Veterans Health Administration	Application and Renewal for Health Benefits	<p>2900-0091 Collects Veteran information to enroll for health care benefits. It establishes basic eligibility, identifies 3rd party health insurance coverage, identifies prescription copayment, provides for income verification, and serves as a mechanism to make changes upon admission or yearly financial updates. VHA plans to consolidate the 10-10EZ and 10-10EZR online applications by electronically presenting questions to Veterans based on responses they provide and data needed by VA to effect a determination for benefits or renewal for VA health care.</p> <p>VA eliminated the financial reporting requirements for the 10-10EZR in 2013. It is now optional. VA has discontinued use of the VA Form 10-10EZ to collect updated veteran information. This further eliminates the collection of needless and duplicative information from veterans. The 10-10 EZ had a reduction of 15 minutes, due to reduction of questions and current information from the Enrollee survey.</p> <p>VHA plans to convert VA form 10-10HS into an electronically submitable format in FY 2014.</p>	658,990	7/2013	<i>\$6,988,950 - Cost Savings to the Government.</i>
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<p>Veterans Benefits Administration</p>	<p>Disability Benefits Questionnaires (Groups 1 and 2)</p>	<p>2900-0776 and 2900-0779-DBQs use standardized questions specifically designed to address the questions needed by VA to adjudicate a veteran's disability claim. Additionally, DBQs enable a Veteran to have a treating physician complete the DBQ and, thereby, aid in VA's disability examination process. VA, VA-contracted, and private providers will all use the same identical standardized questionnaire in the future, resulting in consistent products regardless of who completes the form. VA is currently building and will soon field an online, interview-based tool that will allow both VA and private providers to complete and submit DBQs online. This interview-based tool will assist in the completion of a DBQ thereby making it easier and faster to complete. Additionally, the tool will collect data and automatically upload it into VA adjudication system which will create an aggregate timeliness and quality advantage for claims processing and thus help alleviate claims backlog. At this time, there will be no changes to the forms but VA does plan to have future improvements to the content of the forms. The estimated timeframe for implementation of this planned improvement is in late FY2014.</p>	<p>180,750</p>	<p>12/2014</p>	<p>\$21,156,787.50 - <i>Cost Savings to the Government.</i></p>
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