VA Office of Inspector General

OFFICE OF AUDITS AND EVALUATIONS

Department of Veterans Affairs

Audit of VA's Internal Controls Over the Use of Disability Benefits Questionnaires

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ACRONYMS AND ABBREVIATIONS

C&P	Compensation and Pension
DBQ	Disability Benefits Questionnaire
DEMO	Disability Examination Management Office
MAP-D	Modern Awards Processing-Development
OIG	Office of Inspector General
ROJ	Regional Office of Jurisdiction
SOP	Standard Operating Procedure
STAR	Systematic Technical Accuracy Review
VARO	Veterans Affairs Regional Office
VBA	Veterans Benefits Administration
VHA	Veterans Health Administration

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Report Highlights: Audit of VA's Internal Controls Over the Use of Disability Benefits Questionnaires

Why We Did This Audit

In October 2010, VA implemented the disability benefits questionnaire (DBQ) process to reduce the claims backlog. This changed the way VA collects medical evidence to support veterans' disability compensation claims. VA expects DBQs to replace the compensation and pension examination reports currently in use. The volume of disability compensation claims processed using this new method will increase significantly as VA completes its planned deployment of about 80 DBQs.

The Office of Inspector General conducted this audit to provide an early assessment of VA's internal controls over the use of DBQs. Once Veterans Benefits Administration (VBA) personnel make a decision on a veteran's disability benefits application, awarded claims result in recurring monthly compensation payments. Therefore, it is critical to establish adequate front-end controls to identify and minimize risks before benefit payments are initiated.

What We Found

The expedited rollout of the DBQ process did not provide VA sufficient time to design, evaluate, and implement adequate internal controls to prevent potential fraud. VA does not verify the authenticity of medical information submitted by veterans and private physicians prior to awarding disability benefits, track disability-rating decisions where a DBQ was used as medical evidence, or electronically capture information contained on completed DBQs.

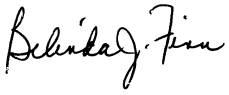
Further, while VBA has a quality assurance review process to verify a limited number of DBQs completed by private physicians, in our opinion, the quality assurance reviews do not provide reasonable assurance that fraudulent DBQs will be detected. Developing and implementing additional controls—as conveyed in this report—should reduce the risk of fraud, allow for greater fraud detection, and help VA identify disability compensation claims that carry an increased risk of fraud.

What We Recommend

We recommend the Under Secretary for Benefits and Under Secretary for Health strengthen internal controls over the use of DBQs.

Agency Comments

The Under Secretary for Health concurred with our report recommendations. The Under Secretary for Benefits generally concurred and agreed to provide a long-term solution for verifying the identity and credentials of private physicians. We will follow up on the implementation of corrective actions to determine their effectiveness in preventing and detecting fraud.



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INTRODUCTION

Objective

The audit provided an early assessment of VA's internal controls over the use of disability benefits questionnaires (DBQs). Specifically, the audit determined whether internal controls were adequate to detect and minimize the risk of fraud and provide reasonable assurance that documentation was authentic and unaltered.

Disability Benefits Questionnaires

DBQs are condition-specific forms designed to capture medical information relevant to veterans' disability benefits claims. Veterans have the option, at their own expense, to have their private physicians complete DBQs to provide medical evidence on disability benefits claims. VA developed and implemented DBQs as part of its efforts to help reduce the claims backlog. As of the end of FY 2011, VA had an inventory of almost 810,500 compensation rating claims, of which just over 488,000 (60 percent) were pending over 125 days.

In October 2010, VA implemented three DBQs for public use. As of December 5, 2011, VA has 81 DBQs, to replace compensation and pension (C&P) examination report templates. VA reported this option will be available for 71 of the 81 DBQs released. The remaining 10 DBQs will only be available for VHA and VA-contract clinicians to complete because the related conditions require the physician to review the veteran's claim folder.

Fast Track Claims Processing System

The Fast Track Claims Processing System (Fast Track System) is designated for use by Vietnam Veterans claiming one or more of the three new Agent Orange presumptive conditions. Medical providers are encouraged to fill out DBQs on the Fast Track System Web site. The Fast Track System will then compile the medical evidence and generate a proposed rating decision for Veterans Benefits Administration (VBA) claims processors to review.

VA Program Offices

VBA and the Veterans Health Administration (VHA) have processing requirements associated with the use of DBQs. Compensation Service, as the VBA national office with jurisdiction over the DBQ process, is responsible for providing DBQ-related training and guidance to VBA and for tracking and monitoring DBQ workload. The Disability Examination Management Office (DEMO) is a VHA national office that monitors the medical disability examination process. DEMO is responsible for providing DBQ-related training and guidance to VHA providers and for monitoring the DBQ process as it pertains to VHA.

Additional Information

Appendix A provides background information and Appendix B provides information on our audit scope and methodology. Appendix C illustrates steps in the process where internal controls were not found or required improvement.

RESULTS AND RECOMMENDATIONS

Finding 1 VA Needs To Strengthen Internal Controls Over the Use of Disability Benefits Questionnaires

VBA and VHA collaborated to provide training and communicate information regarding the DBQ process. However, VA needed to strengthen internal controls over the use of DBQs in order to better prevent, detect, and minimize the risk of fraud and provide reasonable assurance that medical documentation used in the rating process is authentic and unaltered. Specifically, VBA had not developed adequate internal controls to ensure DBQs completed by private physicians were authentic and unaltered. VBA's new Fast Track System did not have controls in place to verify the identity of individuals submitting disability claims or completing DBQs.

VA does not adequately track disability-rating decisions where a DBQ was used as medical evidence, or electronically capture information contained on completed DBQs—which could be used to conduct data analysis and/or identify potential instances of fraud. Generally, this occurred because the expedited rollout of the DBQ process and Fast Track System did not provide VA sufficient time to design, evaluate, and implement adequate controls to prevent potential fraud. Development and implementation of additional controls should reduce the risk of fraud, allow for greater fraud detection, and help VBA identify disability compensation claims that carry an increased risk of fraud.

Implementation of the DBQ Process

The intent of the DBQ process is to help reduce the disability claims backlog. However, the expedited rollout of the DBQ process did not provide adequate time to design, evaluate, and implement appropriate controls over the process. VBA submitted the DBQ innovation initiative idea in late 2009. Once approved by VA management, the process was developed, tested on a limited basis, and formally implemented in October 2010.

VA officials stated that the DBQ process was not fully defined and additional plans are in place to develop internal controls to electronically capture information contained on completed DBQs. However, OIG contends without adequate front-end internal controls in place over the use of DBQs, VA compensation payments are at risk because decisions on some veterans' medical disability claims are currently processed using DBQs as medical evidence.

Need for Preventive Controls

Office of Management and Budget Circular A-123 states management is responsible for establishing and maintaining internal controls to achieve the objectives of effective and efficient operations. Adequate internal controls should minimize instances of fraud and, under normal circumstances, help

detect those instances that do occur. Once VBA personnel make a decision on a veteran's disability benefits application, awarded claims result in recurring monthly compensation payments. Therefore, it is critical to establish adequate front-end controls to identify and minimize risks before benefit payments are initiated.

VBA established a monthly quality assurance review process whereby staff review a limited number of completed claims that included DBQs completed by private physicians. Veterans or their physicians may mail or fax completed DBQ forms to the VARO responsible for the veteran's claim. The veteran may also hand carry a hardcopy DBQ directly to VARO personnel. The purpose of the quality assurance reviews is to verify that the information presented on each sampled DBQ is authentic and unaltered. However, this quality assurance review process only verifies information after benefits have been awarded, thus is not preventative in nature.

Since VA stated 71 DBQs will be available for use by private physicians—a significant increase over the 3 that were initially available—we expect the number of claims developed using DBQs as evidence will continue to increase. VBA does not plan to adjust the number of claims to validate; therefore, DBQs sampled as part of VBA's quality assurance reviews will represent a smaller percentage of the overall universe of transactions processed. (We have additional concerns with VBA's quality assurance review process, which are discussed in Finding 2 of this report.)

In addition to improving the current monitoring controls, VBA needs to develop front-end preventive controls to minimize fraud risks before claims processors complete disability-rating decisions and award benefits.

Examples of Controls to Reduce the Risk of Fraud

The following are examples of controls that VBA could develop or implement to deter individuals from attempting fraud within the DBQ process:

- VBA's policy states claims processors should request that veterans complete VA Form 21-4142, "Authorization for Release of Information," when filing a disability claim. VBA's current procedure allows claims processors to make disability-rating decisions in instances where a veteran does not complete VA Form 21-4142. Completion of this form would allow claims processors to contact private physicians or request additional medical records to verify information submitted on a completed DBQ. Further, requiring veterans to complete this form prior to making a disability-rating decision can serve as a preventive control because those considering committing fraud will know that information from private physicians is subject to verification.
- DBQ forms that private physicians can complete are available on the internet (http://www.vba.va.gov/disabilityexams). A notification could

be added to the website stating that VBA conducts quality assurance reviews to detect instances of fraud and ensure information on submitted DBQs is accurate and unaltered.

- DBQ forms include a certification statement in the physician's signature section that reads, "To the best of my knowledge, the information contained herein is accurate, complete and current." Language could be added stating that VA selects a sample of DBQs on a monthly basis to verify the accuracy of reported information. The additional language could also notify physicians that they may be contacted by VBA staff to verify or request additional information.
- Upon receipt of a disability compensation claim, VBA sends a Veterans Claims Assistance Act (VCAA) letter to the applicant. The letter notifies the veteran that their claim has been received and provides information about the claim process. VBA could add language to the VCAA letter regarding the DBQ process, including information on the validation reviews conducted by VBA each month.

Private Physicians' Information Not Verified

VBA's procedures do not require VA Regional Office (VARO) personnel to take steps to verify that a licensed physician completed a DBQ or to assess whether a completed DBQ appears to be unaltered. VBA's current procedure dictates that claims processors should accept a DBQ at face value and use it as medical evidence if information is not missing. This guidance places VBA at risk that VARO personnel may make decisions on veterans' claims based on inappropriate representations contained on DBQs—such as someone falsely claiming to be a physician or the veteran.

At one VARO we visited, the Veteran Service Center Manager stated that local management decided to require claims processors to verify the physician's information on each DBQ completed by private physicians by comparing it to medical licensing information available on the Internet. This procedure has limitations because physician information is available not only to VARO employees but also to the public on the Internet. Nonetheless, local management established this additional verification procedure to mitigate the risk of fraud, even though it is not required by VBA policy. The other VAROs we visited had not established additional verification procedures.

Private physicians or veterans submit completed DBQs to VBA in various ways. Veterans or their physicians may mail or fax completed DBQ forms to the VARO responsible for the veteran's claim. The veteran may also submit a hardcopy DBQ directly to VARO personnel. Developing internal controls to review the authenticity of the information received on hardcopy DBQs, should reduce the risk that evidence could be falsified or altered prior to receipt by VARO personnel.

VBA could consider actions to better ensure submitted DBQs are authentic and unaltered. For example, as a long-term option, VBA could require that private physicians register with VA before they can submit completed DBQs. Adopting a one-time registration process, VA could assign a unique identifier to the physician, which the physician would be required to record on completed DBQs—whether submitted on paper forms or through the Fast Track System. In the short term, VBA could notify veterans and physicians that DBQs are subject to verification. VBA could also increase front-end controls to verify physician information until long-term controls are finalized and implemented.

Decisions Based on Unverified Evidence

The Fast Track System is designated for use by Vietnam Veterans claiming one or more of VA's three new Agent Orange presumptive conditions. VBA designed the system as the primary resource for veterans, medical professionals, and VA employees to enter, document, and manage these disability benefits claims. Once necessary evidence is entered, the Fast Track System generates a proposed medical disability-rating decision for a Rating Veterans Service Representative to review. The Fast Track System generates the proposed rating decision based on the veteran information entered and the medical evidence contained on the DBQ submitted. However, adequate controls are not in place to verify the accuracy of submitted information.

Actions taken on disability claims processed through the Fast Track System are based on the information that has been entered into the system—system controls are not in place to verify the information. For example, all correspondence mailed to the veteran is sent to the address that has been entered into the designated address fields. Prior to sending mail correspondence, VBA does not ensure the address entered into the Fast Track System is the correct address for the veteran. VBA handles bank account information in the same manner. If VBA awards disability compensation benefits for a claim processed through the Fast Track System, the disability benefits are deposited to the bank account that has been entered in the Fast Track System. VBA does not ensure the bank account entered into the Fast Track System is actually the veteran's bank account.

VBA could explore options for verifying the address and bank account information for veterans who submit claims through the Fast Track System. Alternately, VBA could require veterans to submit a bank statement for an active bank account or a void or canceled bank check—both document the veteran's name, address, and bank account number. If verifying address and bank account information for every veteran is not feasible, VBA could validate this information using a statistical sampling methodology.

Not Capturing Information Electronically

VHA and VA-contract clinicians, as well as private physicians can complete DBQs. VA has not developed mechanisms to track disability-rating decisions where a DBQ was used as medical evidence or electronically capture information contained on completed DBQs. Electronically capturing DBQ information is important as it allows VA personnel the ability to conduct data analysis to identify potential instances of fraud or extend analysis to determine the extent of fraud in instances that have been identified. For example, if VBA electronically captured information contained on completed DBQs the following trends could be identified:

- Private physicians who complete an abnormally high volume of DBQs
- Veterans who submit multiple DBQs for the same claimed condition
- Veterans who submit DBQs completed by private physicians located in different states
- Private physicians who provide abnormally high positive diagnosis rates

Identifying these trends would allow VA to detect instances of potential fraud. VBA management stated that they have initiated the process of developing an electronic web-based version of DBQs for private physicians to use.

DBQs Completed by Private Physicians

VBA maintains information on DBQs completed by private physicians in veterans' claims folders, but it is not electronically captured in VBA's data systems. Without electronic data on completed DBQs, VA is limited in its ability to conduct data analysis.

VBA established a process using the Modern Awards Processing–Development (MAP-D) System to track the receipt of DBQs completed by private physicians; however, the process needs improvement. When a claims processor receives a DBQ completed by a private physician, he or she is supposed to select the "disability benefits questionnaire" special issue flash in MAP-D. This manual process requires claims processors to be aware of and familiar with related guidance and instructions—system controls are not in place to ensure that claims processors appropriately select the special issue flash. At the three VAROs we visited, claims processors were not consistently using the MAP-D special issue flash to identify DBQs completed by private physicians.

Effective December 5, 2011, VBA modified the process for using MAP-D special flashes for DBQs. If a DBQ is received from a VA healthcare provider outside the C&P examination process, claims processors should select the "Disability Benefits Questionnaire – VA" flash. If a DBQ is received from any other source outside of VA, claims processors should select the "Disability Benefits Questionnaire – Private" flash. VBA needs to develop a plan to measure compliance with this new guidance to ensure that

DBQs are being adequately tracked and monitored. The ability to identify these claims is important as it allows VBA to identify potential instances of fraud, as well as expand its review to determine the extent of fraud when specific instances are detected. Currently VBA does not have the capability to identify all DBQs completed by a given physician because documentation is maintained in hardcopy. If an instance of fraud was detected for a given physician, having the capability to identify all DBQs submitted by that physician would be critical in order to measure the extent of potential fraud.

No Process in VBA's Policy Manual

VBA has released guidance pertaining to the DBQ process through Fast Letters.* However, the Fast Letters did not include procedures for verifying information on completed DBQs or information on how DBQs would be electronically tracked and monitored. Even though VBA issued guidance to VAROs and claims processors through these Fast Letters, VBA has not updated its policy manual to include information on the DBQ process. VBA needs to update its policy manual to include procedures for verifying information and electronically tracking and monitoring all DBQs completed by VHA and VA-contract clinicians and private physicians. Without updating the policy manual to include these procedures, VBA is at risk that VARO personnel will inconsistently implement the DBQ process at different VAROs, potentially affecting how they provide benefits to veterans. VBA senior management informed us that DBQ information would be incorporated into the policy manual once the process is fully defined.

Conclusion

Adequate internal controls minimize instances of fraud and, under normal circumstances, help to detect those instances that do occur. VA needs to establish and strengthen internal controls over the use of DBQs in order to better prevent, detect, and minimize the risk of fraud and provide reasonable assurance that medical documentation used in the rating process is authentic and unaltered. The expedited rollout of the DBQ process did not provide adequate time to design, evaluate, and implement appropriate controls over the process.

VA also needs to strengthen internal controls to:

- Ensure DBQs completed by private physicians are authentic and unaltered

*VBA issued Fast Letter 10-34, "Disability Benefits Questionnaires," on September 2, 2010, which provided general background information on the DBQ process. VBA issued Fast Letter 10-53, "Disability Benefits Questionnaire Update," on December 16, 2010, which provided updated information on the DBQ process. VBA issued Fast Letter 11-36, "Disability Benefits Questionnaires Update: Groups – 1, 2, and 3," on December 5, 2011, which provides information and guidance on the 81 DBQs available for VA use.

- Verify the identity of individuals submitting disability claims or completing DBQs using the Fast Track System
- Track disability-rating decisions where a DBQ was used as medical evidence
- Electronically capture information contained on completed DBQs
- Ensure VBA's policy manual includes information on the DBQ process.

Since VA has released DBQs for public use, and transactions are currently being processed using DBQ forms as medical evidence; we believe immediate action is needed to put internal controls in place to help detect and prevent fraud. Development and implementation of additional controls should allow for greater fraud detection, help VBA identify disability compensation claims that carry an increased risk of fraud, and mitigate fraudulent activity and attempts to exploit the DBQ process.

Recommendations

1. We recommend the Under Secretary for Benefits develop internal controls within the disability benefits questionnaire process that will reduce the risk of fraud, such as notifying veterans and physicians that submitted information is subject to verification.

2. We recommend the Under Secretary for Benefits develop front-end controls for the disability benefits questionnaire process to verify the identity and credentials of private physicians who submit completed disability benefits questionnaires, including those entered into the Fast Track Claims Processing System.

3. We recommend the Under Secretary for Benefits develop a plan to measure compliance with the guidance contained in Fast Letter 11-36 pertaining to tracking claims where a disability benefits questionnaire was received as medical evidence.

4. We recommend the Under Secretary for Benefits develop controls to electronically capture information contained on completed disability benefits questionnaires.

5. We recommend the Under Secretary for Benefits update the policy manual with information on the disability benefits questionnaire process, to include procedures for verifying information on completed disability benefits questionnaires and tracking and monitoring completed disability benefits questionnaires.

Management Comments

The Under Secretary for Benefits stated that the OIG initiated this review although VBA informed OIG that the DBQ process was undergoing changes to ensure that internal controls were considered and implemented. VBA continues to improve these controls.

The Under Secretary also said that DBQs are actually an extension of VBA's current claims processes, supporting the receipt and use of private medical evidence to make disability determinations. VA's current disability examination protocols, as well as other forms, are available to the public on the Internet. Once approved by OMB, the DBQs will also be available on the Internet.

VBA says it believes the OIG Audit Report of VA's Internal Controls Over the Use of Disability Benefits Questionnaires misstates agency actions related to the DBQ process. For instance, the OIG states VA does "not verify the authenticity of medical information submitted by Veterans and private physicians," but also acknowledges that "VBA has a quality assurance process to verify a limited number of DBQs completed by private physicians." In fact, VBA is now reviewing 100 DBQs per month, or 1,200 per year. VBA was proactive in instituting this review, although it is an additional protection that previously did not exist for non-electronic medical reports. VBA also provided general comments regarding VA's actions related to the DBQ process.

OIG Response

After lengthy discussions with VBA management to review the differing aspects over the controls for the expanded use of DBQs, the Under Secretary for Benefits generally agreed with our findings and recommendations. OIG initiated the audit to provide proactive assistance to an expanding claims process already at an increased risk to potential fraud and abuse.

We appreciate VBA implementing new measures, as stated, to review the 1,200 DBQs a year and their agreement to make timely referrals of DBQs with questionable information or inconsistencies to OIG for further investigation. That being said, quality assurance, to be truly effective in controlling or preventing fraud, needs to be proactive to the program, not simply focused on efforts to detect past wrongdoing. VBA's current monthly quality assurance review process may be sufficient as an interim internal control, and more so with the additional controls following the ongoing development of a secure electronic portal. However, the current monthly quality assurance review process relies solely on detecting fraud on a small number of annual claims already being paid and thus the fraud may have already occurred.

Further, given the limitations associated with the DBQ information that VBA collects, quantifying the extent of errors or examining trends related to the processing of DBQ claims could be a significant challenge.

We will monitor and assess the effectiveness of VBA's planned actions and the DBQs' ability to decrease the claims processing backlog. Upon consideration of these comments, we clarified and made changes to this report as deemed appropriate. Appendix D provides the complete text of the Under Secretary's comments.

Finding 2 VA Needs To Improve the Process for Conducting Quality Assurance Reviews of Completed Disability Benefits Questionnaires

VBA's Systematic Technical Accuracy Review (STAR) staff and DEMO are responsible for conducting quality assurance reviews of the DBQ process for VBA and VHA respectively. VBA had not developed an adequate quality assurance review process to ensure that DBQs completed by private physicians are authentic and unaltered. VHA is currently pilot testing a new quality assurance review process for C&P examinations; however, the planned process does not specifically target DBQ examinations. VA had not developed adequate quality assurance reviews because the expedited rollout of the DBQ process did not provide VA sufficient time to design effective review procedures. Improving the quality assurance review process should reduce the risk of fraud, allow for greater fraud detection, and help VA identify disability compensation claims that carry an increased risk of fraud.

Improvements Needed in Validation Review Process

According to VBA officials, STAR staff conduct monthly quality assurance reviews of completed claims that include DBQs completed by private physicians to verify that the information presented on each sampled DBQ is authentic and unaltered. VBA developed a Standard Operating Procedure (SOP) summarizing the validation review process; however, we determined that improvements were needed for STAR staff to conduct complete and comprehensive reviews. According to VBA officials, STAR staff attempt to verify 100 DBQs each month that were submitted by private physicians and resulted in a completed claim. STAR staff will use the Internet to verify the physician's medical license information using the National Provider Identifier available through the National Plan and Provider Enumeration System. Once confirmed, STAR staff will fax the completed DBQ to the physician for verification that the document received is both authentic and unaltered.

Analysis Needs Potential Fraud Indicators

While VBA has developed procedures to review individual DBQs completed by private physicians, additional analysis was required to identify potential fraud indicators. VBA could strengthen the validation review process if it included data mining and analysis of all completed DBQs, specifically targeted at identifying instances of fraud. For example, STAR staff could review electronic data for DBQs completed by private physicians to identify the occurrence of the following trends:

- Private physicians who complete an abnormally high volume of DBQs
- Veterans who submit multiple DBQs for the same claimed condition
- Veterans who submit DBQs completed by private physicians located in different states

- Private physicians who provide an abnormally high positive diagnosis rate

Since VBA does not electronically capture information on completed DBQs, this type of analysis is not possible at this time. If VBA identified specific instances of fraud, it would be challenging to identify the extent of the fraud because of the current electronic data limitations. Without a process to analyze key information—such as identifying information pertaining to the private physicians who have completed DBQs—VBA could not extend its review procedures to determine the extent of the fraud committed.

Data and Sampling Limitations

VBA faced limitations in identifying a complete universe of DBQs in order to select a sample for review. STAR staff stated that for the January and February 2011 validation reviews, the primary source for DBQ universe information was the Fast Track System. According to VBA officials, STAR staff received a list of claims entered into the Fast Track System during the previous month—this data included claims that were pending, completed, or canceled. In order to identify unique claims for review, STAR staff initiated a manual process to refine the data by eliminating duplicate documentation and isolating claims that used a DBQ submitted by a private physician.

STAR staff did not use Veterans Services Network Operational Reports to identify claims where claims processors selected the "disability benefits questionnaire" special issue flash in MAP-D. Therefore, a segment of DBQs completed by private physicians was not included in the validation review universe. According to STAR staff, quality assurance reviews starting in March 2011 included DBQs identified using Veterans Services Network Operational Reports. However, as discussed in Finding 1, VARO personnel do not consistently use the MAP-D special issue flash. Therefore, the Veterans Services Network Operational Reports do not include all DBQs completed by private physicians.

VBA should strengthen the quality assurance review process by enhancing efforts to identify claims that use a DBQ submitted by private physicians. Further, VBA should identify DBQs that pose an increased risk of fraud. Examples of this may include DBQs submitted through the Fast Track System because the system proposes a disability-rating decision based on unverified information submitted by veterans and private physicians. Once VBA identified high-risk DBQs, the quality assurance review process could be improved by focusing more attention on those DBQs that pose an increased risk of fraud.

Unverified DBQs Go Unchecked

Until recently, VBA had not implemented a specific plan for DBQs that STAR staff could not verify. For example, if a clinician's office did not respond to VBA's efforts to validate DBQ information, the unverified DBQs were simply rolled forward and incorporated into the sample review for the following month. DBQs completed by private physicians that cannot be

verified are of particular importance because those cases carry a potential higher risk of fraud. VBA's SOP for the validation reviews, dated March 25, 2011, stated that follow-up measures for inconsistencies identified would be determined on a case-by-case basis until experience allowed definition of a specific set of actions appropriate to the discrepancies found.

Updates Not Followed

Effective October 3, 2011, VBA updated their SOP for the DBQ validation review process. The SOP provides more detail on the steps that STAR staff will take in an attempt to validate DBQs. Specifically:

- After telephone contact with the clinician's office, STAR staff will fax a validation certificate and a copy of the submitted DBQ to each provider to verify that the information is accurate.
- If the clinician fails to respond within three working days, STAR staff will fax a second request.
- If the clinician fails to respond to the second fax request within ten working days, STAR staff will mail a letter to the provider's address of record in attempt to verify the information.
- If VBA receives no response to the third request, the case will be sent to another STAR reviewer and, if the second reviewer agrees, case identification information and a description of the basis for suspicion will be referred to the Regional Office of Jurisdiction (ROJ), for possible referral to the OIG.

Further, in any case involving potential fraud, a second review will be conducted by a different STAR reviewer, and if the second reviewer agrees, case identification information and a description of the basis for suspicion will be referred to the ROJ, for possible referral to the OIG. Immediately forwarding instances of potential fraud to the OIG Hotline—while concurrently providing notification to management at the Regional Office of Jurisdiction—would allow for quicker action in potentially fraudulent situations.

DBQ Validation Review Results

STAR staff provided a spreadsheet summarizing DBQ validation review results from April 2011 through September 2011. VBA attempted to validate 511 total DBQs, of which 72 (14 percent) remained pending in October 2011. Our review of 25 DBQs showed that even though the updated SOP went into effect on October 3, 2011, STAR staff had not initiated follow up action on these DBQs as of early November. STAR staff initiated follow-up attempts to validate the DBQs after our request.

Potential Fraud Not Referred

Of the 25 DBQs reviewed, at least 6 had indications of potential fraud. For example, three cases involved clinicians whose telephone and fax numbers were not in service and STAR staff could not obtain accurate contact information. In two cases, clinicians reported inconsistencies on the DBQs

that they had completed when compared to the DBQs that the veterans submitted to VBA. Lastly, a clinician reported that they had no record of ever seeing or treating the veteran. These cases contain strong fraud indicators, and VBA had not referred these cases to the OIG for further action. After our November 1, 2011, request, STAR staff reported they initiated action to return these cases to the ROJ for their review and potential referral to the OIG.

VHA Quality Assurance Needs Improvements

DEMO has primary jurisdiction over the DBQ process for VHA. DEMO's role in the DBQ process is to monitor the C&P medical examination process, which is currently being updated to include the review of DBQs. DEMO restructured its quality assurance review process, which will measure conformance with current criteria for quality and consistency in the completion of C&P examination requests and reports.

DEMO Not Focused on DBQs

For quality assurance review purposes, DEMO treats DBQs no differently than traditional C&P examinations. At the time of our review, DEMO had not implemented specific quality review steps for DBQs. An examination of DEMO's review criteria showed no components identified that specifically focused on the evaluation of DBQs. The expedited rollout of the DBQ process did not provide DEMO sufficient time to develop specific quality assurance steps focused on completed DBQs.

DEMO's initial process was to send VAROs a letter 2 weeks in advance of its planned site visit requesting the VARO select any 60 completed claims for review. Allocating a 2-week time period affords the VARO ample lead time to select claims folders that are free from error and as a result introduces significant bias into the results of its reviews. Additionally, the sampling methodology does not specifically target claims where VARO staff considered a DBQ as medical evidence in the rating decision process. Even if DEMO planned to examine a sample of DBQs, it would be difficult to identify a universe because VA does not electronically capture information on all completed DBQs—much of the data is hard copy and maintained only in veterans' claims folders.

Conclusion

The expedited rollout of the DBQ process did not provide VA sufficient time to design an effective quality assurance process. Without an effective quality assurance process, VAROs and VA Medical Centers nationwide may not be implementing the DBQ process consistently and completing DBQs in a quality manner. Improving the quality assurance review process should reduce the risk of fraud, allow for greater fraud detection, and help VA identify disability compensation claims that carry an increased risk of fraud.

Recommendations

6. We recommend the Under Secretary for Benefits take steps to improve quality assurance reviews by focusing reviews on disability benefits questionnaires that pose an increased risk of fraud.

7. We recommend the Under Secretary for Benefits establish control mechanisms to ensure that potential cases of fraud identified during the quality assurance review process are immediately forwarded to the Office of Inspector General.

8. We recommend the Under Secretary for Health identify key components of disability benefits questionnaires that should be reviewed as part of the Disability Examination Management Office's quality assurance review process.

9. We recommend the Under Secretary for Health modify the process used to select claims reviewed by the Disability Examination Management Office's quality assurance staff.

VBA's Comments

The Under Secretary for Benefits agreed with our findings and recommendations, and plans to address our recommendations by April 30, 2012.

OIG Response

Regarding recommendation 7, VBA revised the standard operating procedure for validation reviews of DBQs in January 2012. The SOP mandates quality assurance reviewers refer DBQs with potentially fraudulent information to the OIG Hotline Division.

VHA's Comments

The Under Secretary for Health agreed with our findings and recommendations. VHA reports that the Office of Disability and Medical Assessment (DMA) through DEMO developed an audit review tool that evaluates disability examination reports using criteria developed to measure the quality of all disability examination reports to include DBQs. VHA also stated that DMA/DEMO has implemented an electronic audit review process that allows for a computer generated random selection of exams and requests.

OIG Response

We will monitor VHA's progress and follow up on its implementation until all proposed actions are completed. Appendix E provides the full text of the Under Secretary for Health's comments.

Appendix A Background

VA Disability Compensation

VA disability compensation is a monetary benefit paid to veterans who are disabled by injury or illness incurred or aggravated during active military service. These disabilities are considered service-connected. Disability compensation is paid monthly and varies with the degree of disability and the number of dependents claimed by a veteran. The purpose of this benefit is to compensate veterans for the average loss in earnings capacity in civilian occupations associated with the severity of the service-connected condition. A veteran initiates a disability benefits claim by filing an application online or at a VARO.

Disability Compensation Claims Processing

After a veteran submits a benefits application online or at a VARO, a Veterans Service Representative typically develops the claim by obtaining relevant medical information. In many instances, the veteran undergoes a medical examination by a VHA or VA-contract clinician, who provides a medical diagnosis for the veteran. With the inception of DBQs, veterans have the option to have a private physician provide a medical diagnosis by completing a DBQ on their behalf. Once medical evidence is received, a Rating Veterans Service Representative evaluates the evidence and determines if the diagnosed impairments are service-connected, assigns a degree of disability for each of the service-connected impairments by applying the medical criteria of the VA Schedule for Rating Disabilities, and determines the veteran's overall degree of service-connected disability.

Additional Information on DBQs

An October 26, 2010, news release announced that VA issued the first three DBQs. DBQs are condition-specific medical forms used to capture precise medical information needed by VBA personnel to make decisions on veterans' disability benefits claims. DBQs are similar to other private medical evidence that VBA accepts in support of veterans' disability compensation claims. However, DBQs allow for easier alteration because information is recorded in check boxes and limited or no narrative remarks are required. DBQs are specific to a single condition and do not provide additional information on veterans' overall health, which may include other service-connected conditions. The purpose of the DBQ initiative, which was developed in the Pittsburgh Regional Office, is to streamline the claims process for injured or ill veterans and help eliminate the disability claims backlog by 2015.

A private physician with an active medical license is qualified to sign and attest to completed DBQs. The physician must have sufficient medical expertise to conduct a medical assessment regarding the type of DBQ completed. The first three DBQs approved for use by private physicians cover VA's three new Agent Orange presumptive conditions—Ischemic

Heart Disease, Parkinson's Disease, and Hairy Cell and other B-cell Leukemias.

Effective December 5, 2011, VA released 81 DBQs to be used in the evaluation of medical conditions affecting veterans. DBQs will replace the C&P examination templates that have been in use. Of the 81 DBQs released, VA reports 71 will be available for private physicians to complete. The remaining 10 DBQs will only be available for VHA and VA-contract clinicians to complete because the related conditions require the physician to review the veteran's claim folder.

Additional Information on Fast Track System

Veteran information can be added to the Fast Track System in multiple ways. A veteran or his or her representative can register and submit information on the public Fast Track System Web site (http://www.fasttrack.va.gov). VARO staff can also enter information into the Fast Track System based on documentation they receive related to a claim. For example, if a veteran mailed a hard-copy application for Ischemic Heart Disease, a VARO claims processor can input the information recorded on the application into the Fast Track System on behalf of the veteran.

Systematic Technical Accuracy Review

VBA administers a quality assurance review program with the goal of ensuring veterans and beneficiaries receive accurate and consistent C&P benefits. STAR is a mechanism for evaluating regional office performance in processing accurate benefits claims for veterans and beneficiaries. STAR staff are also responsible for conducting 100 validation reviews each month for DBQs completed by private physicians.

Previous OIG Reports and Investigations

VA first started using DBQs in October 2010. We did not identify previous audits, attestation engagements, or other studies directly related to the objective of this audit. However, recent OIG reports have made recommendations to improve the C&P examination process, including the *Audit of VA's Efforts To Provide Timely Compensation and Pension Medical Examinations* (Report No. 09-02135-107, March 17, 2010) and the *Audit of VA Incomplete Compensation and Pension Medical Examinations* (Report No. 08-01392-144, June 25, 2009). In 2001, OIG conducted a criminal investigation involving a VARO Atlanta, GA, employee and former employees who were able to bypass VA's internal controls over the C&P benefits process and receive about $11.2 million in fraudulent compensation payments. The employee used her position of trust and access to VA records to process claims for deceased veterans resulting in both large retroactive payments and recurring monthly payments.

Applicable Criteria

Office of Management and Budget Circular A-123 states management is responsible for establishing and maintaining internal controls to achieve the objectives of effective and efficient operations. GAO's *Standards for Internal Control in the Federal Government* provides the overall framework

for Federal agencies to establish and maintain internal controls and to identify and address major performance and management challenges and areas at greatest risk for fraud, waste, abuse, and mismanagement.

VBA Fast Letter 10-34 (September 2, 2010) introduced DBQs to VBA employees. The Fast Letter explains that the streamlined questionnaires are designed for use by both private physicians and VA clinicians and are derived directly from the disability-rating criteria contained in the VA Schedule for Rating Disabilities. VHA Directive 2010-045, "Introduction of Disability Benefits Questionnaires (DBQs) To Support the Compensation and Pension (C&P) Process," (October 1, 2010) defined the policy for the introduction and use of DBQs for eligible veterans, in support of the C&P examination process. VBA Fast Letter 10-47, "Fast Track Claims Processing System (Version 1.0)," (October 29, 2010) provided guidance on the implementation of the Fast Track System. The Fast Track System is a Web-based, automated, claims processing system, specifically developed to process claims for service connection for the three new presumptive conditions. VBA Fast Letter 11-36 (December 5, 2011) provided information and guidance on the 81 DBQs available for VA use. VA stated 71 of the 81 DBQs released will be available for use by private physicians. The remaining 10 DBQs will only be available for VHA and VA-contract clinicians to complete.

Appendix B Scope and Methodology

Scope

We conducted audit work from December 2010 through December 2011. The audit focused on internal controls VBA and VHA established over the DBQ process. The audit also focused on internal controls VBA established over the Fast Track System because medical providers are encouraged to fill out DBQs on the Fast Track System Web site, which compiles medical evidence and generates a proposed rating decision for claims processors to review.

Methodology

To obtain information on VA's internal controls over the DBQ process we reviewed relevant policies and procedures, which included discussions with VBA and VHA Central Office officials.

We conducted site visits at VAROs in St. Petersburg, FL; Togus, ME; and Nashville, TN. We also visited the VA Medical Center in St. Petersburg, FL; the STAR office in Nashville, TN; and DEMO in St. Petersburg, FL. During site visits, we interviewed management and staff regarding local procedures for the DBQ process. VBA had not updated its policy manual with information on the use of DBQs. Therefore, in order to support our findings and conclusions, we relied on information obtained during VA Central Office and site visit interviews. We also observed demonstrations of the Fast Track System.

While onsite at the VAROs, we reviewed a sample of 51 veterans' claims folders in order to determine how the DBQ process was being implemented and how it was affecting the disability benefits claims process. The number of claims processed using DBQs will represent a significant number of claims processed by VBA. However, at the time of our audit, the number of claims processed using DBQs was considered too small to statistically project the potential impact of inadequate internal controls for this initiative. As a result, we considered a review of 51 claims folders to be adequate to meet the audit objectives.

In October 2011, we conducted a follow-up site visit to the STAR office to obtain an update on VBA's DBQ validation review procedures and results of recent DBQ validation efforts. We obtained VBA's recently updated SOP for validation reviews and validation review results for the most recent 6-month period. During our follow-up site visit, STAR staff provided a spreadsheet summarizing DBQ validation review results from April 2011 through September 2011. We selected 25 pending DBQs and requested a summary of STAR staff's validation efforts for each case.

Reliability of Computer-Processed Data

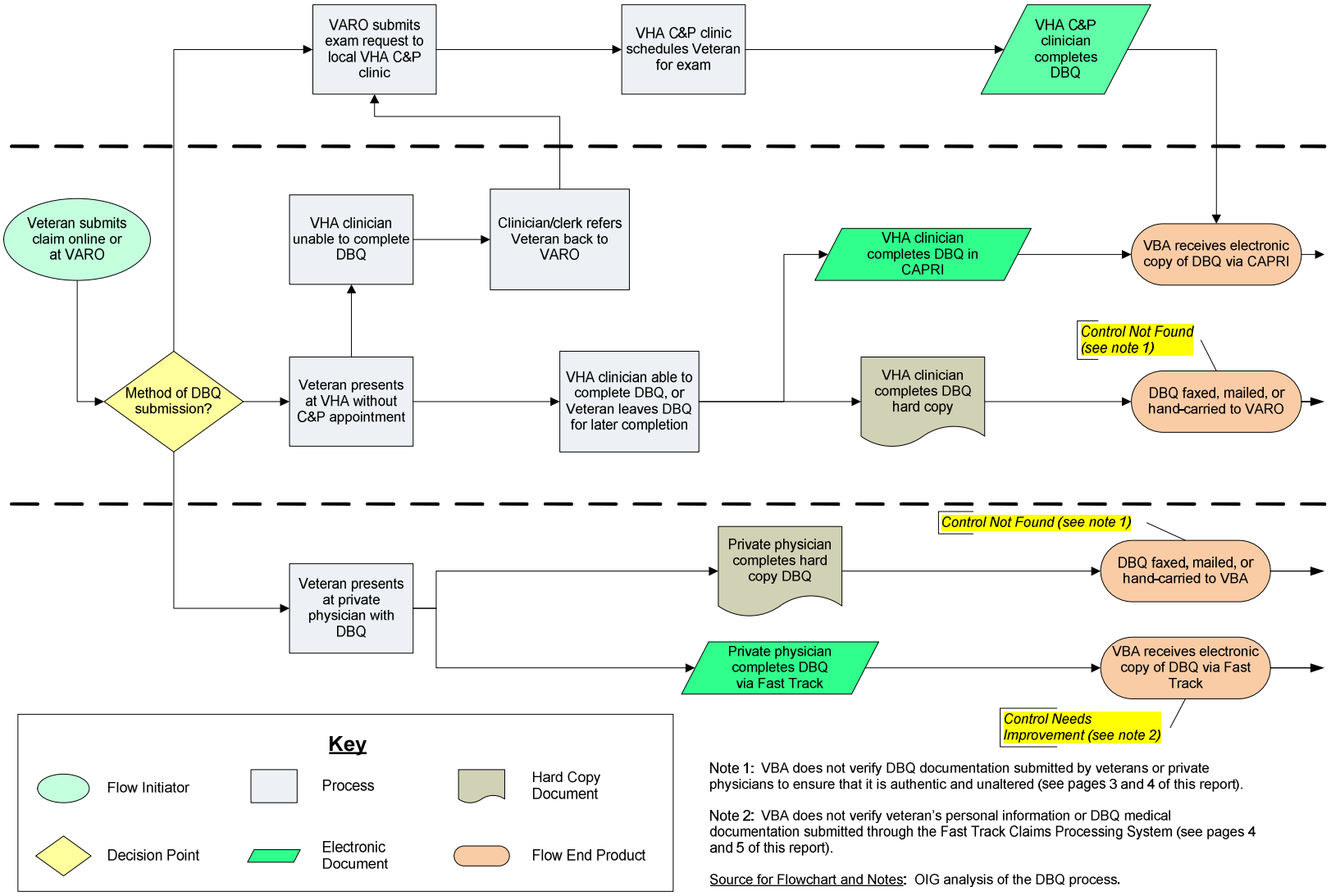
We did not rely on VBA or VHA electronic data as a basis for our findings and conclusions. Therefore, our audit methodology did not include an assessment of the reliability of computer-processed data.

Government Audit Standards

Our assessment of internal controls focused on those controls relating to our audit objectives. We conducted this performance audit in accordance with generally accepted government auditing standards. These standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objective. We believe the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objective.

Appendix C Flow Charts of the Disability Benefits Questionnaire Process

Claim and Disability Benefits Questionnaire Submission

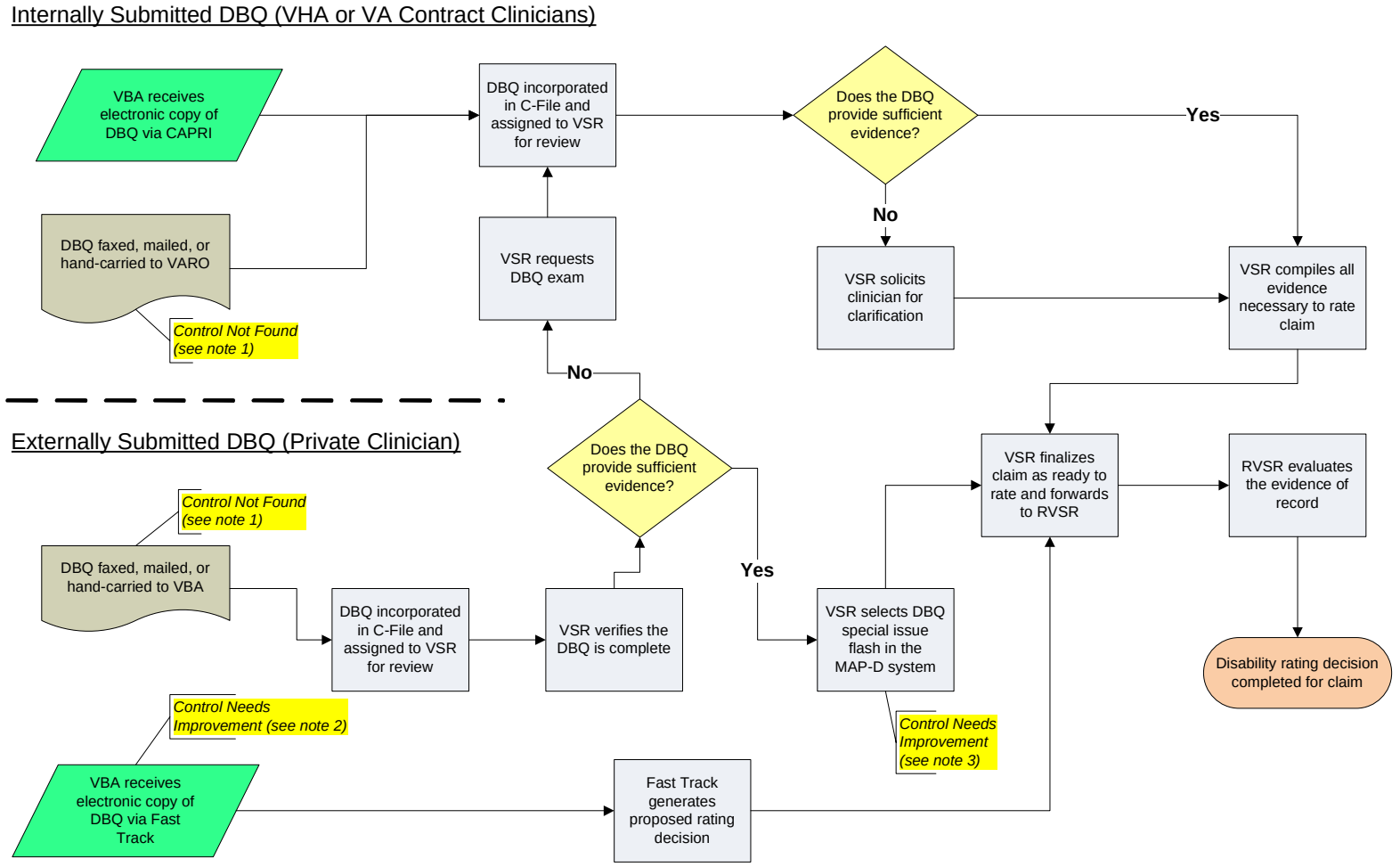


Note 1: VBA does not verify DBQ documentation submitted by veterans or private physicians to ensure that it is authentic and unaltered (see pages 3 and 4 of this report).

Note 2: VBA does not verify veteran's personal information or DBQ medical documentation submitted through the Fast Track Claims Processing System (see pages 4 and 5 of this report).

Source for Flowchart and Notes: OIG analysis of the DBQ process.

Review and Rating



Note 1: VBA does not verify DBQ documentation submitted by veterans or private physicians to ensure that it is authentic and unaltered (see pages 3 and 4 of this report).

Note 2: VBA does not verify veteran's personal information or DBQ medical documentation submitted through the Fast Track Claims Processing System (see pages 4 and 5 of this report).

Note 3: VBA has not uniformly implemented the usage of the DBQ special issue flash (see page 6 of this report).

Source for Flowchart and Notes: OIG analysis of the DBQ process.

Appendix D Under Secretary for Benefits Comments

Department of Veterans Affairs

Memorandum

Date: January 26, 2012

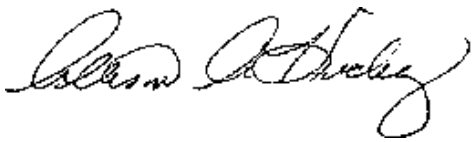
From: Under Secretary for Benefits (20)

Subj: OIG Revised Draft Report—Audit of VA's Internal Controls Over the Use of Disability Benefits Questionnaires (Project No. 2011-00733-R1-0064)—VAIQ 7144900

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

1. Attached is VBA's response to OIG's revised Draft Report— Audit of VA's Internal Controls Over the Use of Disability Benefits Questionnaires.

2. Questions may be referred to Nancy Holly, Program Analyst, at 461-9199.



Allison A. Hickey

Attachments

Attachment

Veterans Benefits Administration (VBA)
Comments on OIG Revised Draft Report
Audit of VA's Internal Controls Over the Use of
Disability Benefits Questionnaires

The Veterans Benefits Administration (VBA) provides the following comments:

VA first began using disability benefits questionnaires (DBQs) in October 2010. In December 2010, OIG stated that it was going to initiate a review of this new initiative although VBA informed OIG that the DBQ process was undergoing changes to ensure that internal controls were considered and implemented. VBA continues to improve these controls.

DBQs are actually an extension of our current claims processes, supporting the receipt and use of private medical evidence to make disability determinations. VA's current disability examination protocols, as well as other forms, are available to the public on the Internet. Once approved by OMB, the DBQs will also be available on the Internet.

VBA believes the OIG Audit Report of VA's Internal Controls Over the Use of Disability Benefits Questionnaires misstates agency actions related to the DBQ process. For instance, on page i, OIG states that VA does "not verify the authenticity of medical information submitted by Veterans and private physicians," but also acknowledges that "VBA has a quality assurance process to verify a limited number of DBQs completed by private physicians." In fact, VBA is now reviewing 100 DBQs per month, or 1,200 per year. VBA was proactive in instituting this review although it is an additional protection that previously did not exist for non-electronic medical reports.

On pages 1, 3, 18, and 19, OIG refers to 54 of 81 DBQs available for use by private physicians. The correct number of DBQs that will be available for use by private physicians is 71 of 81, with the remaining 10 available for VHA and VA-contract clinicians to complete.

On page 14, OIG asserts that the VA Disability Examination Management Office (DEMO) quality assurance review process introduces significant bias into the result of its reviews by allowing VA regional offices a 2-week time period "to select claims folders that are free from error." This is no longer the case as the process has changed. In October 2011, VA revised the DEMO quality review process to require in-office reviews of approximately 1,050 randomly selected examinations per month.

Also on page 14, OIG stated "the sampling methodology does not specifically target claims where VARO staff considered a DBQ as medical evidence in the rating decision process." The DEMO quality review is focused on the C&P examination, for which the output is now predominantly the DBQ. The evaluation of private medical evidence submitted in support of a claim is not within DEMO's purview.

The following comments are submitted in response to the recommendations in the OIG revised Draft Report:

Recommendation 1: We recommend the Under Secretary for Benefits develop internal controls within the Disability Benefits Questionnaire process that will reduce the risk of fraud, such as notifying veterans and physicians that submitted information is subject to verification.

VBA Response: Concur. VBA will revise DBQ notifications, including the Internet website, to inform Veterans and physicians that information submitted on DBQs is subject to verification.

Target Completion Date: March 31, 2012

Recommendation 2: We recommend the Under Secretary for Benefits develop front-end controls for the Disability Benefits Questionnaire process to verify the identity and credentials of private physicians who submit completed disability benefits questionnaires, including those entered into the Fast Track Claims Processing System.

VBA Response: Concur in part. VA is developing its long-term strategy for a secured electronic submission of DBQs received outside the VA examination process, which will provide an improved mechanism for verifying the identity and credentials of private physicians. This electronic portal will allow for ease of verification of identity and credentials of private physicians, and data collection and analysis. In addition, it may obviate the need to verify the identity and credentials of private physicians. The long-term strategy for an electronic portal is managed as part of the VHA Veterans Electronic Health Record Initiative and is targeted for completion in fiscal year (FY) 2013. The business requirements for the electronic portal are scheduled to be complete by June 30, 2012.

The current DBQ validation review conducted by the Compensation Service national Quality Assurance staff verifies the identity and credentials of a statistically valid sample of 1,200 private physicians. VBA believes this review is sufficient as an interim internal control in this area. VBA does not believe that additional controls need to be developed for this purpose at this time in light of the ongoing development of a secure electronic portal.

Recommendation 3: We recommend the Under Secretary for Benefits develop a plan to measure compliance with the guidance contained in Fast Letter 11-36 pertaining to tracking claims where a disability benefits questionnaire was received as medical evidence.

VBA Response: Concur. The revised Fast Letter 11-36 will continue to require that claims processors input claims into the Modern Awards Processing – Development (MAP-D) application with a special issue flash indicating whether a VA or private DBQ was received as medical evidence. The current Compensation Service site visit protocol requires the review of MAP-D compliance, and we will use these guidelines to monitor conformity of applying the DBQ special issue flashes. Deficiencies will be brought to the attention of regional office management, and we will advise offices when additional training is necessary to ensure proper compliance.

Target Completion Date: March 31, 2012

Recommendation 4: We recommend the Under Secretary for Benefits develop controls to electronically capture information contained on completed disability benefits questionnaires.

VBA Response: Concur. VA is developing a secure electronic portal for the electronic submission of the information contained on a DBQ. This will allow greater flexibility for reporting and data mining. While the portal is targeted for completion in FY 2013, the business requirements are scheduled to be complete by June 30, 2012.

Target Completion Date: FY 2013 for the electronic portal.

Recommendation 5: We recommend the Under Secretary for Benefits update the policy manual with information on the disability benefits questionnaire process, to include procedures for verifying information on completed disability benefits questionnaires and tracking and monitoring completed disability benefits questionnaires.

VBA Response: Concur. After the DBQ procedures are finalized and all DBQs are completed and released, VBA will modify the M21-1MR Procedures Manual to include instructions concerning special issue indicators and the validation process.

Target Completion Date: April 30, 2012

Recommendation 6: We recommend the Under Secretary for Benefits take steps to improve quality assurance reviews by focusing reviews on disability benefits questionnaires that pose an increased risk of fraud.

VBA Response: Concur. VBA will review existing data for DBQs completed by private physicians to determine if there are risks for increased fraud. During discussions with VBA in December 2011, OIG further articulated that in their opinion, the most "at risk" population of claims with DBQs are those received in paper from Veterans not currently in receipt of benefits, where the DBQ is the only evidence. VBA will explore this potential "at risk" population in its review.

Target Completion Date: April 30, 2012

Recommendation 7: We recommend the Under Secretary for Benefits establish control mechanisms to ensure that potential cases of fraud identified during the quality assurance review process are immediately forwarded to the Office of Inspector General.

VBA Response: Concur. VBA revised the standard operating procedure (SOP) for validation reviews of DBQs in January 2012 (Attachment A*). The SOP now mandates quality assurance reviewers refer DBQs with potentially fraudulent information to the OIG Hotline Division.

VBA requests closure of this recommendation.

*(*Note: Due to the length of the attachment, it was not included in this report.)*

Appendix E Under Secretary for Health Comments

Department of Veterans Affairs

Memorandum

Date: September 22, 2011

From: Under Secretary for Health (10)

Subj: OIG Draft Report, Audit of VA's Internal Controls Over the Use of Disability Benefits Questionnaires (VAIQ 7155069)

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

1. I have reviewed the draft report and concur with the report's recommendations. Attached is the Veterans Health Administration's (VHA) corrective action plan for the report's recommendations.

2. Thank you for the opportunity to review the draft report. If you have any questions, please contact Linda H. Lutes, Director, Management Review Service (10A4A4) at (202) 461-7014.

Robert A. Petzel, M.D.

Attachment

VETERANS HEALTH ADMINISTRATION (VHA)
Action Plan

OIG Draft Report, Audit of VA's Internal Control Over the Use of Disability Benefits Questionnaires (VAIQ 7155069)

Date of Draft Report: August 10, 2011

Recommendations/ Actions	Status	Completion Date

OIG Recommendations

Recommendation 1: We recommend the Under Secretary for Health identify key components of disability benefits questionnaires that should be reviewed as part of the Disability Examination Management Office's quality assurance review process.

VHA Comments

Concur

The Veterans Health Administration (VHA) Office of Disability and Medical Assessment (DMA) through its Disability Examination Management Office (DEMO) developed an audit review tool that evaluates disability examination reports using criteria developed to measure the quality of all disability examination reports to include the Disability Benefits Questionnaire (DBQ).

Completed

Recommendation 2. We recommend the Under Secretary for Health modify the process used to select claims reviewed by the Disability Examination Management Office's quality assurance staff.

VHA Comments

Concur

VHA's DMA/DEMO has implemented an electronic audit review process that allows for a computer generated random selection of exams and requests.

Completed

Veterans Health Administration

January 2012

Appendix F OIG Contact and Staff Acknowledgments

OIG Contact	For more information about this report, please contact the Office of Inspector General at (202) 461-4720
Acknowledgments	Nick Dahl, Director Stephen Bracci Michael Cannata Shawn Steele

Appendix G Report Distribution

VA Distribution

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