



DOD AND VA

Preliminary Observations on Efforts to Improve Care Management and Disability Evaluations for Servicemembers

Highlights of [GAO-08-514T](#), a testimony before the Subcommittee on National Security and Foreign Affairs, Committee on Oversight and Government Reform, House of Representatives

Why GAO Did This Study

In February 2007, a series of *Washington Post* articles about conditions at Walter Reed Army Medical Center highlighted problems in the Army's case management of injured servicemembers and in the military's disability evaluation system. These deficiencies included a confusing disability evaluation process and servicemembers in outpatient status for months and sometimes years without a clear understanding about their plan of care. These reported problems prompted various reviews and commissions to examine the care and services to servicemembers. In response to problems at Walter Reed and subsequent recommendations, the Army took a number of actions and DOD formed a joint DOD-VA Senior Oversight Committee.

This statement updates GAO's September 2007 testimony and is based on ongoing work to (1) assess actions taken by the Army to help ill and injured soldiers obtain health care and navigate its disability evaluation process; and to (2) describe the status, plans, and challenges of DOD and VA efforts to implement a joint disability evaluation system. GAO's observations are based largely on documents obtained from and interviews with Army, DOD, and VA officials. The facts contained in this statement were discussed with representatives from the Army, DOD, and VA.

To view the full product, including the scope and methodology, click on [GAO-08-514T](#). For more information, contact Daniel Bertoni at (202) 512-7215 or bertonid@gao.gov; or John H. Pendleton at (202) 512-7114 or pendletonj@gao.gov.

What GAO Found

Over the past year, the Army significantly increased support for servicemembers undergoing medical treatment and disability evaluations, but challenges remain. To provide a more integrated continuum of care for servicemembers, the Army created a new organizational structure—the Warrior Transition Unit—in which servicemembers are assigned key staff to help manage their recovery. Although the Army has made significant progress in staffing these units, several challenges remain, including hiring medical staff in a competitive market, replacing temporarily borrowed personnel with permanent staff, and getting eligible servicemembers into the units. To help servicemembers navigate the disability evaluation process, the Army is increasing staff in several areas, but gaps and challenges remain. For example, the Army expanded hiring of board liaisons to meet its goal of 30 servicemembers per liaison, but as of February 2008, the Army did not meet this goal at 11 locations that support about half of servicemembers in the process. The Army faces challenges hiring enough liaisons to meet its goals and enough legal personnel to help servicemembers earlier in the process.

To address more systemic issues, DOD and VA promptly designed and are now piloting a streamlined disability evaluation process. In August 2007, DOD and VA conducted an intensive 5-day exercise that simulated alternative pilot approaches using previously-decided cases. This exercise yielded data quickly, but there were trade-offs in the nature and extent of data that could be obtained in that time frame. The pilot began with “live” cases at three treatment facilities in the Washington, D.C. area in November 2007, and DOD and VA may consider expanding the pilot to additional sites around July 2008. However, DOD and VA have not finalized their criteria for expanding the pilot beyond the original sites and may have limited pilot results at that time. Significantly, current evaluation plans lack key elements, such as an approach for measuring the performance of the pilot—in terms of timeliness and accuracy of decisions—against the current process, which would help planners manage for success of further expansion.

Major Differences between Current and Pilot Military Disability Evaluation Processes

| | Current process | Pilot process |
|----------------------|---|---|
| Servicemember | Board liaison provides support Medical Evaluation Board (MEB) | Board liaison and VA staff provide support Medical Evaluation Board (MEB) |
| | Physical performed by military department ↓ Physical Evaluation Board (PEB) | Comprehensive physical performed to VA standards ↓ Physical Evaluation Board (PEB) |
| Separation | Military department determines disability rating for computing DOD disability benefits | VA determines disability rating used for computing DOD disability benefits |
| Veteran | Receives DOD disability benefits AND Develops claim for VA disability benefits - Comprehensive physical performed to VA standards - VA determines disability rating | Receives DOD disability benefits AND Receives VA disability benefits shortly after leaving military |

Source: GAO analysis of DOD documents.