



Regional Office Action Review

2025 Chicago, IL Report

June 22nd – 24th

The American Legion

National Veterans Affairs & Rehabilitation Division

Washington, D.C

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Background

The Chicago Regional Office Action Review (ROAR) was conducted from June 22nd to June 23rd, 2025, by VA&R Director, Cole Lyle, and Policy Analyst Brandon McClain to assess operational efficiency, training, quality control, productivity, and employee relations. The site was chosen due to its central location, high veteran population, and strategic location in the Midwest. The team met with Executive Director Donna Meyer-Hickel, her management team, key claims processing staff, as well as The Department of Illinois American Legion leadership. This Regional Office (RO) site visit report (or RO leadership -??) specifically highlighted staffing issues, training inconsistencies, high performance demands, and logistical challenges.

Preliminary Findings and Observations

Veterans Affairs Regional Office (VARO) challenges and key areas of concern include:

1. Compensation and Pension (C&P) medical exam inaccuracies
 - a. Attributed to Veterans Service Representatives (VSRs) and Rating Veterans Service Representatives (RVSRs) inexperience and constant requests for clarifications.
2. Effective date errors
3. Procedural and training inconsistencies
 - a. Claims guidance shifted in pursuit of performance metrics over quality.
 - b. Training was virtual or remote and not particularly helpful for claims not seen frequently.
4. Low morale and burnout driven by overtime and staffing constraints.

a. Case Analysis – In June 2025, fifty cases were randomly selected and reviewed by The American Legion. The goal was to assess quality, identify patterns of errors, and provide practical feedback to support improved outcomes for veterans. Our review covered rating decisions involving original claims, increased rating claims, and supplemental claims across a range of service-connected conditions. The top three categories for errors were:

1. Duty to Assist
2. Legal errors that undermined accuracy
3. Incomplete reasoning or ignored evidence.

Overall Quality Observations:

1. Approximately 40% of the decisions reviewed contained one or more significant errors affecting the outcome.

2. Medical opinion adequacy continues to be a major issue. Many examinations lacked clear rationales, failed to address secondary service connection, or disregarded lay reports of symptom history.
3. Effective communication remains a challenge. Several decisions omitted explanations that are necessary to comply with fair notice and informed review.
4. Positive use of favorable findings was inconsistent. In some cases, VA properly acknowledged supportive evidence but failed to apply it to the outcome.

The Chicago VARO has demonstrated areas of improvement but continues to show inconsistency in development, application of legal standards, and quality of medical opinions. These findings reinforce the need for ongoing training in legal accuracy, recognizing parameters which would trigger duty to assist obligations, and the requirement to explain decisions clearly and thoroughly. The American Legion stands ready to support efforts that ensure veterans receive fair, timely, and accurate decisions.

b. Director's Questionnaire - Prior to the visit, a questionnaire was sent to the Regional Office Director.

In response to the questionnaire, the RO Director provided information as follows:

1. The Chicago Regional Office reported no anticipated budget shortfalls for fiscal year (FY) 2025 and confirmed it has been authorized to meet all essential needs and contractual obligations, with a process in place to request additional funding if necessary.
2. The RO maintains full training compliance and even supplements mandated training with monthly station improvement training (SIT) focused on administrative updates, claims challenges, and error trends seen in development.
3. The RO maintains a 93% claims quality rating which includes claims adjudicated under 125 days.
4. There is a rotational return to office plan in place of eighty-six employees mitigating overcrowding due to logistical and operational challenges of the Return to Office (RTO) mandate.
 - a. This had a negative impact on morale amongst the staff.
5. There was an implemented 90-day Mentorship program for new hires.

Interviews

During the visit, the ROAR Team conducted ten interviews with VA employees. The roles of the interviewees were: Veterans Service Representative (VSR), Supervisory Veteran Service Representative Coach (SVSRC), Rating Veterans Service Representative (RVSR), Supervisory RSV Coach, Authorization Veterans Service Representative (AVSR), Authorization Quality Review Specialist (AQRS), Quality Review Team Coach/Supervisor, Assistant Veterans Service Center Manager, Veteran Service Center Manager, and Regional Office Director.

Overall Impressions

The Chicago RO has a healthy work environment in which its employees describe the office as a good place to work that prioritizes its employees' needs. Despite the high praise certain staff expressed concern about return to office difficulties, The hiring freeze, anxiety, stress, and unsustainable performance metrics. Despite the recent changes to the Veterans Affairs (VA); organizational restructure, automation implementation, early retirement submissions, and the hiring freeze, the RO has managed to maintain a 93% quality rating with an average day pending (ADP) of about one hundred days. The claims backlog is manageable and under control, however the wide gap in institutional claims knowledge, the inexperience of the development staff, TERA memo inconsistencies, and the mandatory overtime could have an impact on the RO's productivity and efficiency in the future.

Areas of Improvement

Staffing & Accountability

Staffing levels were reported to have been strained due to the hiring freeze and staff inexperience. While some staff had been hired before the freeze, supervisors reported that rushed onboarding was implemented. The insufficient coaching capacity coupled with the 90-day mentoring structure remains insufficient for the complexity of the work. This has led to knowledge deficits that have compound quality issues and claims rework. Workspace and logistical issues related to return to office (RTO) mandates have also strained productivity.

- *Example – 14 new employees were recently onboarded. The staff development plan consisted of three to six months of training, followed by yearly check-ins on development.*
- *Example – Electronic Service Request (ESR) Tool not being used properly, and staff are not holding others accountable for its lack of use.*
- *Example – Out of one hundred RVSRs, most of them are new and average about three years of experience.*
- *Example – More experienced staff prefer to work from home because they believe their productivity increases. Cites that most meetings or communication are virtual through TEAMS and do not require in person attendance to conduct meetings. This, however, does not represent the sentiment of new hires who believe working in office is crucial to their development.*

Innovations & Process Improvement

Automation tools that were implemented and designed to make claims more efficient are flawed and sometimes create inefficiencies, duplicative work, and procedural and process flow inconsistencies. Routine claims have been automated and improved monotony but was reported as being far away from streamlining a substantial portion of the day-to-day work. Instead, it forces Veterans Service Representatives (VSRs) to reconstruct claims manually.

- *Example – Staff fear mistakes in the claims process will affect their performance review and affect their employment, so staff continuously develop claims to “play it safe.”*
 - *Productivity and volume are prioritized over accuracy in most cases.*
- *Example – Exam clarifications continue to be an issue between staff and medical providers.*
 - *Paid private opinions have been copy and pasted at times.*
- *Example – TERA memos are being ordered even though direct medical opinions reflect diagnosis and medical evidence in the service treatment record.*
 - *VSRs are taking shortcuts and not searching for the most up to date TERA memo.*
- *Example - VA Form 526EZ has fifteen available slots for contentions, and VSRs are reporting that “automation is causing duplicative work.”*
 - *Handwritten lay evidence not being properly captured by automation tools.*

Morale & Burnout

Morale was reported as average to low, with mandatory overtime and rigid return to office policies as the problem. Most of the senior and experienced staff prefer distraction less telework to maximize output, while newer staff preferred in office work. Morale is variable to low. The current policies have also exacerbated low morale and burnout because staff were instructed to prioritize claims adjudication output which would unintentionally sacrifice quality.

- *Example – VA central office established a goal of 250 claims per day.*
 - *One-third of ratings have at least one deferred issue*
 - *When a claim is deferred the station does not receive credit*
 - *Processing goals continue to move, leaving staff to feel shifting goals are becoming unobtainable.*
- *Example – Staff can work up to 35 hours of overtime; most do between 15 and 20 hours from home.*
- *Example – most coaches and training staff are unavailable outside of scheduled teaching blocks.*
 - *An interviewed coach says they manage nineteen employees, while the second coach manages twenty-two.*

Training & Mentorship

Training inconsistencies have plagued all regional offices visited this year, as overreliance on virtual modules became the preferred method of training. This training preference was not suitable for inexperienced staff who had not been suited for more complex claims. Staff mentioned a desire for more case discussions that focused on military sexual trauma (MST), pension, and some toxic exposure claims. This is currently unobtainable due to limited mentorship capacity and high demand for younger staff.

Contractor Exams

Medical examinations from contractors have led to DBQ inconsistencies which required consistent requests for clarification. This often ended in reordered examinations that required redevelopment and delays that impacted veterans. Staff were frustrated with a lack of authority to escalate exam inadequacies.

Recommendations

1. More targeted training
 - a. VA must evaluate the experience of all inexperienced staff and properly identify training needs that will improve workflow and morale. The emergence of digital training has been a valuable tool but has not proved to be the perfect answer for the regional office. Staff would like more in person, live training sessions that mirror real time scenarios to help improve overall confidence. More targeted training should improve staff confidence and improve overall office morale.
2. Mentorship improvement
 - a. The current coach to trainer ratio is imbalanced, which leads to uneven mentorship and training opportunities. The high productivity demand often forces mentors to prioritize claims processing over development, which is an ineffective approach because the average experience for staff is about three years. Prioritizing mentorship in addition reasonable productivity goals should reduce the problems with employee development.
3. Improve exam quality review.
 - a. VA staff have continued to report reoccurring vendor issues that continue to appear year after year, with no clear enforcement mechanisms to disincentivize poor exam quality. To address this, VA must implement clear actionable guidelines to report vendor errors and correct contractor deficiencies. outline mechanisms to report and rectify contractor mistakes. Current inconsistencies in the claims process such as rework, clarification issues, and overlooked medical evidence highlight the need for more consistent application of process guidance that would improve quality.

Conclusion

Chicago VARO has shown systemic challenges that can be fixed, as well as plenty of possibilities for positive change. With training improvements and morale improvements The Chicago regional office could be a place where veterans continue to receive timely, accurate and fair claims processing commensurate with their service.