Regional Office Action Reivew

2024 Year End Analysis
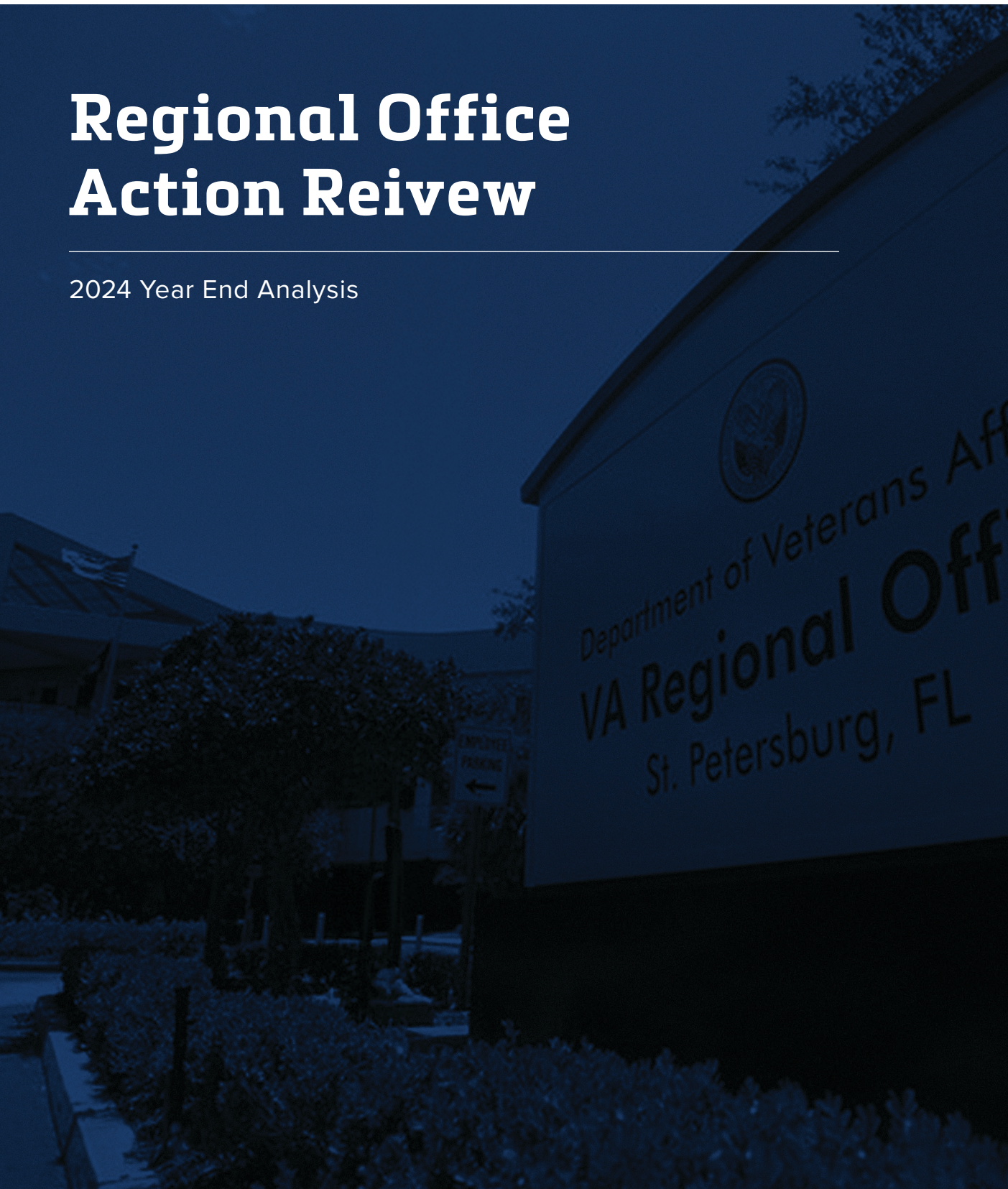
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Executive Summary

In 2024, The American Legion conducted four Regional Office Action Review (ROAR) visits at the St. Petersburg, Phoenix, Albuquerque, and Fort Harrison Veterans Affairs Regional Offices (VAROs). Each visit was preceded by coordination between the Veterans Affairs & Rehabilitation (VA&R) Division and the respective VARO Director to obtain detailed information regarding operational performance and staffing levels. Additionally, American Legion Accredited Representatives conducted independent reviews of approximately 50 randomly selected claims per site, representing veterans for whom The American Legion holds Power of Attorney across the 200 total claims reviewed, the most frequently observed errors included failure to fulfill the duty to assist, oversight of favorable evidence, and inadequacies in VA examinations. Other significant issues involved incorrect assignment of effective dates, inconsistencies with Toxic Exposure Risk Activity (TERA) memoranda, and the failure to recognize inferred claims for Total Disability based on Individual Unemployability (TDIU).

The ROAR team concluded three primary deficiencies are impairing the effectiveness of the VAROs: weaknesses in case development, insufficient and inconsistent training, and procedural shortcomings within the decision review process. The National VA&R Division recommends the following corrective actions:

Training Enhancement: Expand and improve both virtual and in-person training programs to include real-world case scenarios, such as court appeals and complex disability claims. Extending training for new staff through interactive workshops and structured mentorship to ensure personnel are fully equipped to manage challenging claims.

Case Development Improvements: Optimize the process for requesting and conducting Compensation and Pension (C&P) examinations. Reduce unnecessary delays through clearer protocols and improved coordination. Prioritize the use of in-house VA clinicians over contracted examiners to increase the accuracy and timeliness of evaluations.

Decision Review Reform: Address systemic issues within the Decision Review Operations Center (DROC), particularly those related to the misapplication of effective dates in Higher-Level Reviews (HLRs). Correct adjudicative errors that arise from referencing supplemental claims rather than original claim dates.

Background & History

In 2011, The American Legion conducted a nationwide survey which revealed widespread dissatisfaction with the performance of VAROs. Respondents overwhelmingly described the system was "inefficient and untimely."[1] at that time only 6% of claims were completed in 120 days.

To uncover the root causes of these delays, The American Legion's VA&R Division launched the ROAR initiative, deploying National staff to VAROs across the country. By combining on-site evaluations, data collection, and stakeholder interviews, ROAR has become a cornerstone in American Legion's accountability efforts at the local level.[2]

The study required extensive data collection and analysis to determine the factors leading to delayed VA claims at regional offices. The ROAR program serves as the basis for this study through its partnership between TAL and VA. Veterans and families helped with the ROAR study by filling out an online survey to rate the performance of their local VARO. Many respondents expressed frustration about VA's failure to communicate clearly about the status of claims.[3] Recognizing its effectiveness in highlighting claims backlog issues, the ROAR initiative has been established as a permanent, independent component of the System Worth Saving (SWS) Program.[4]

1   American Legion , "Legion Survey Reveals VA Claims Frustration," The American Legion, 2011, **https://www.legion.org/information-center/news/veterans-benefits/2011/july/legion-survey-reveals-va-claims-frustration**.

2   Survey: How Is VA handling your claim? The American Legion Dispatch [Volume 20, No. 5 (January 21, 2011)] | Digital Archive

3   The Dispatch **https://archive.legion.org/node/3873**

4   American Legion. "Legion Survey Reveals VA Claims Frustration." The American Legion, 2011**Legion survey reveals VA claims frustration | The American Legion**

Methodology

The report employs a multi-faceted approach to assessing the operational challenges faced by VAROs. The American Legion's review included a combination of data collection, qualitative case analyses, in-person site visits, and stakeholder interviews, resulting in a comprehensive evaluation of each office's performance.

The four VA Regional Offices selected for the 2024 ROAR program were chosen based on geographic diversity, caseload volume, and historical performance trends. These offices represented a snapshot of challenges and best practices across the VA system.

To ensure the integrity and accuracy of findings, data collected focused on the following sources:

1. Case Reviews – a total of 200 cases were randomly selected across the four sites. These cases included a wide range of claim types, including The Promise to Address Comprehensive Toxics Act (PACT) of 2022, Total Disability Individual Unemployability (TDIU), and other types of disability claims.

2. Performance metrics – key performance indicators such as claims processing times, error rates, and backlog statistics were reviewed.

3. Training program evaluation – training materials, schedules, and feedback from staff were analyzed to evaluate efficiency.

4. Stakeholder Interviews – surveys and interviews were conducted with VA staff, including Veteran Service Representatives (VSRs), Rating Veteran Service Representatives (RVSRs), and leadership to gather insights into operational challenges and training needs.

During each visit, the ROAR team observed daily operations and workflow at the VARO. In addition, the team conducted focus groups with staff to gather information on challenges and impediments to success. The team also reviewed local training programs and mentorship initiatives and, in addition, assessed the implementation of national policies at the VARO level.

Regional Office Performance Overview

Case Analyses

The goal of the ROAR program is to identify systemic and local challenges affecting claims processing and identify issues that affected their overall performance. The 2024 review revealed eight recurring performance trends that emerged:

1. Errors in adjudicating Total Disability based on Individual Unemployability (TDIU)

2. Inconsistent application of PACT Act provisions

3. Failures in Duty to Assist

4. Training inadequacy

5. Training method gaps (virtual/in-person)

6. Inconsistent technology utilization

7. Incorrect effective dates

8. Failure to appropriately utilize lay evidence

Case analyses revealed a mix of procedural errors and operational successes across the four offices.

- In Albuquerque, VSRs frequently failed to include special issues and tracked items, while RVSRs made errors in favorable findings and effective date determinations.

- Of the 50 cases reviewed, 27 had substantial quality issues, including duty to assist errors and overlooked favorable evidence.

- Fort Harrison had errors in 20 out of 47 cases, with system compliance and exam request errors being the most frequent.

- Phoenix had issues in 21 out of 50 cases, with inadequate VA examinations and duty to assist errors being the most common.

- St. Petersburg RO demonstrated 24 out of 50 cases, with inadequate development, duty to assist and overlooked favorable evidence being the most frequent errors.

The most prominent issue was the *duty to assist* category, which appeared in 42% of the sampled cases. Failure to help veterans obtain the necessary evidence to substantiate their claim increases the amount of VBA reviews and appeals, delaying a veteran's favorable outcomes. Overlooking favorable evidence occurred in 30% of cases reviewed resulting in increased appeals or submit additional evidence, further extending the time it takes to resolve claims.

Similarly, in 6% of the cases, VA failed to properly adjudicate TDIU claims, missing the opportunity to award benefits early. The analyses identified errors with implementing PACT Act provisions in 12% cases underscoring the need for continued training on this complicated legislation.

Other notable findings included:

- Inadequate VA examinations (16%)
- Failing to address evidence in a decision (10%)
- Multiple processing errors (14%).

Key Challenges

Case Development Issues

The case development policies have routinely frustrated VA clinicians, particularly with compensation and pension (C&P) examination reports often having inconsistencies that contribute to delays and errors in claims processing. Compounding the issues is incorrect examination requests resulting in incorrect Disability Benefits Questionnaires (DBQs). During the in-person interview, VSRs stated that requests are often inaccurate or redundant, leading to unnecessary appointments and prolonged waiting times for veterans. When claims are deferred for additional medical opinions, veterans are subject to multiple appointments, further delaying this process. Additionally, inadequate medical opinions from private contract examiners are a primary concern, as they often fail to meet the required DBQ standards resulting in additional request for clarification, multiple burdensome appointment scheduling for Veterans. This underscores the need to quality check examination requests and contract examiner compliance to the requests.

. . Current process leads to such requests as: "*Please provide a medical opinion addressing whether there is a loss or loss of use of XXX [service-connected condition*" or "*Please provide a medical opinion addressing whether the claimed condition XXXX [claimed condition] was service-connected.*" Such wording leads clinicians to deliver a legal opinion rather than a medical conclusion forcing VSRs and RVSRs to reprocess the claims, resulting in decreased trust and satisfaction for veterans.

Training Deficiencies

Training programs across VA regional offices are currently struggling to adequately prepare staff for the complexities of claims processing. Many new hires describe the VIP training as a "firehose" of information leaving them feeling overwhelmed and unprepared for their roles. This has contributed to high turnover rates and low morale particularly among Veteran Service Representatives (VSRs) and Rating Veterans Service Representatives (RVSRs), with some employees experiencing "mental meltdowns" due to the lack of adequate preparation.

Fort Harrison was praised for innovative training programs while maintaining a positive work atmosphere. However, training deficiencies were a reoccurring theme across Albuquerque, Phoenix and St. Petersburg, and despite the positive comments from employees, analyses of Fort Harrison cases did not show a higher level of quality than was found at the other three stations.

Training in the current format means staff may be ill-equipped to handle complex claims, such as those related to the PACT Act or specific disabilities like Parkinson's disease along with meeting production standards. Inconsistent training is another problem, as the Albuquerque RO has resorted to supplementing national training with local initiatives. However, this approach has placed additional strain on some staff members. These challenges contribute significantly to the inefficiencies in claims processing that hinder the VA's ability to meet its goal of processing claims within the goal of 120 days.

Decision Review Errors

The Decision Review Operations Center (DROC) continue to face challenges in the higher-level review (HLR) process. A frequent issue arises from applying correct effective dates for claims. Many decision review officers (DROs) reported these errors often occur when the effective date is based on a supplemental claim rather than the original claim date, resulting in incorrect adjudications.

Another challenge is the tendency to order unnecessary C&P exams, further complicating the decision-making process resulting in yet again additional delays.

Also notable is the informal conference (IC) process. While some veterans find the IC as an opportunity to tell their story and submit additional evidence, DROs find the process to be time consuming and inefficient causing needlessly delays in the decision-making process.

Best Practices and Recommendations

Best Practices

The Positive Impact of Automation on the Claims Process

The Phoenix RO has phased automation into its workflow. At VAROs that have implemented automation initiatives, the Automated Data Ingestion (ADI) technology transfers DBQ data into the Veterans Benefits Management System (VBMS) rating calculators. This process integration eliminates manual entry, saving time and improving accuracy.

The Phoenix VARO Director noted that the utilization of automated technologies by the Veterans Benefits Administration (VBA) has resulted in more disability claims processed. The Director also stated that claims processors are equipped with automation tools like Automated Decision Support, Automated Data Ingestion, and Automation Eligible Diagnostic Codes which resulted in an increase in the number of claims processed, a decrease in the length of time for a decision, and an improved accuracy and consistency of claim decisions. The Director said that the staff were encouraged to use automation to expedite the process whenever they encounter eligible contentions.

Post-development teams reported the technology allows them to determine if something is missing. For instance, the post-development team manually enter all the data for grants authorization. Technological advances have provided greater efficiency and accuracy when completed with automation. Also, automated technology flags missing data, helping raters identify overlooked/incomplete information sooner. While authorizers still manually review each case for completeness, they have fewer problems with incomplete claims since usage of automation initiatives became widespread.

Automation has significantly increased production at the St. Petersburg Regional Office. One staff member explained expanded use of automation was crucial for processing more claims, especially following the implementation of the PACT Act. In fiscal year 2023 and 2024, the St. Petersburg VARO processed significantly more claims than previously and is currently processing about 10,000 claims a day.

In addition to increased automation, many new employees were hired over that year to increase its outreach efforts. The St. Petersburg VARO "did the largest outreach in its history," according to an Assistant Director. "We had major events of 5,000+ people and outreach in rural areas." One career fair last February drew a crowd of 600 people.

The manager of the VARO's Veterans Service Center noted that veterans service organizations "are so important to our outreach events," such as an event held last August where "we got overrun. We were there from 10 a.m. to 4 p.m., then we got kicked out of the facility because of another planned event. The VARO distributed one hundred Intent to File forms among the crowd "and we got 100 back."

Recommendations

The ROAR visits conducted by The American Legion and in partnership with VA, provided a comprehensive assessment of the systemic and site-specific operational challenges affecting claims processing. Site visits, staff interviews, and case file reviews identified core barriers including inadequate training, outdated systems, and staffing issues, which contribute to delays and

inaccuracies in decision-making. Critical issues included errors in Total Disability Individual Unemployability (TDIU) claims, inconsistencies in the PACT Act claims process, and frequent problems with compensation and pension (C&P) examinations.

To address these challenges, a multi-faceted reform strategy is needed.

The National VA&R Division recommends the following:

1. Enhance training programs to include virtual and in-person opportunities with a continued emphasis on real-life scenarios, such as legal precedents and complex claims situations. New hires should receive extended onboarding with hands-on workshops and mentorship feedback loops to equip staff with knowledge retention and application.

2. Improve case development procedures, streamline the examination request process, and minimize unnecessary delays through improved coordination and clearer guidelines. Reduce reliance on contract examiners and expand the use of internal VA clinicians.

3. Improve the Decision Review Operations Centers (DROC). Standardize or clarify protocols to identify and apply correct effective dates and clear instructions on how to decide if the evidence of record contains adequate evidence. Ordering examinations in the HLR process should only apply in instances of a duty to assist error.

4. Expand technology and innovation across all VAROs. ADI, ADS and diagnostic code automation are critical to increasing efficiency, minimizing delays, and building trust in the VA claims process. Acceleration of these technologies should be prioritized as a business need.

Appendix

Regional Office Metrics

The Northeast region exhibits a varied performance in claims processing metrics. Baltimore processed 1,514 claims, with 545 claims pending over 125 days (about 4 months), representing 36% of total claims pending. The average days pending is 123.1, and the region completed 860 claims with an average of 118.5 days (about 4 months) to complete, resulting in 3,267 completed fiscal year-to-date (FYTD). Boston received 1,069 claims with 348 pending beyond 125 days (32.6%). The Average days pending is 119.8, and Boston completed 1,320 claims in an average of 119.7 days (about 4 months), contributing to 4,784 completed FYTD. Buffalo managed 2,345 claims, 927 of which were pending beyond 125 days (38.1%), with an average of 114.3 days (about 4 months) pending. They completed 1,700 claims, averaging 132.6 days (about four and a half months), totaling 6,603 claims completed FYTD. Chicago processed 2,295 claims, with 761 pending over 125 days (33.2%), and an average of 109.4 days (about three and a half months) pending. They completed 2,019 claims in 133.9 days (about four and a half months) on average, totaling 7,727 completed claims FYTD. Cleveland received 4,400 claims, 1,630 which were pending over 125 days (37%). The average days pending is 110.8, and 3,665 claims were completed in an average of 133 days (about four and a half months), contributing to 13,668 FYTD completions. Detroit reported 3,719 claims, with 1,365 pending over 125 days (36.7%). The average days pending Is 104.9, and they completed 2,766 claims in 126.5 days (about 4 months) on average, resulting in 10,336 FYTD completions.

Philadelphia reported 9,108 claims, with 5,270 pending over 125 days (about 4 months), which is the highest percentage in the region at 57.9%. The average days pending is 171.1, and the region completed 6,190 claims in 194.8 days (about six and a half months) on average contributing to 24,420 FYTD completions. Pittsburgh managed 3,184 claims, with 1,271 pending over 125 days (39.9%) and an average of 123.8 days (about 4 months) pending. They completed 1,685 claims in 137.5 days (about four and a half months) on average, totaling 6,105 FYTD completions. Providence reported 2,943 claims, with 1,042 pending over 125 days (35.4%), an average of 94.5 days (about 3 months) pending. They completed 2,927 claims in 89.9 days (about 3 months) on average, contributing to 11,538 FYTD completions.

Case Analysis and Internal Findings

The National VA&R's training partner conducts professional legal analysis prior to each ROAR visit. Upon receipt of the fifty file numbers from the RO, the review team will analyze each case and produce a report a shows trends and errors in the adjudication process at each visited site. Many of which contribute to the growing backlog of cases and prolonged processing times, now averaging at minimum four and a half months per case.

The most prominent issue was the *duty to assist* trend, which appeared in twenty-one cases or 42 percent of the sampled cases. This failure to help veterans obtain necessary evidence not only delays claims but also exacerbates the backlog, as cases are often remanded for further development. Another significant finding was the overlooking favorable evidence, which occurred in fifteen cases sampled, or 30 percent. When VA ignores critical evidence, veterans are forced to appeal or submit additional evidence, further extending the time it takes to resolve claims.

Similarly, 6 percent of the cases erred by VA overlooking favorable evidence when adjudicating TDIU cases, highlighting a missed opportunity to award benefits efficiently which can lead to unnecessary appeals and prolonged delays. The analysis related to PACT Act, with six cases or 12 percent involving errors or oversights in accordance with the provisions of the legislation. Errors like this contribute to confusion and delays for veterans seeking benefits for already complicated toxic exposure related conditions.

Other notable findings include inadequate examination in eight cases (16 percent), failed to address evidence in five cases (10%), and multiple errors in seven cases (14 percent). These systemic issues, ranging from insufficient medical evaluations to incomplete adjudications, often result in remands or appeals, further straining the system.

Claims Data

A.

VBA FIELD OPERATIONS TRACKING SYSTEM

Field Operations Dashboard

Region	# of Claims Received	# of Claims Pending > 125 Days	% of Claims Pending > 125 Days	Average Days Pending	# Of Claims Completed	Average Days to Complete	Completed FYTD
Northeast							
Baltimore	1,514	545	36%	123.1	860	118.5	3,267
Boston	1,069	348	32.6%	119.8	1,320	119.7	4,784
Buffalo	2,435	927	38.1%	114.3	1,700	132.6	6,603
Chicago	2,295	761	33.2%	109.4	2,019	133.9	7,727
Cleveland	4,400	1,630	37%	110.8	3,665	133.0	13,668
Detroit	3,719	1,365	36.7%	104.9	2,766	126.5	10,336
Hartford	1,190	411	34.5%	107.9	1,032	129.2	3,599
Indianapolis	1,314	423	32.2%	103.2	2,036	119.7	7,465
Manchester	795	247	31.1%	110.5	606	120.4	2,201
Milwaukee	3,955	1,490	37.7%	119.3	4,123	151.3	14,848
New York	1,297	436	33.6%	107.7	969	124.7	3,233
Newark	763	218	28.6%	98.0	1,159	123.8	4,276
Philadelphia	9,108	5,270	57.9%	171.1	6,190	194.8	24,420
Pittsburgh	3,184	1,271	39.9%	123.8	1,685	137.5	6,105
Providence	2,943	1,042	35.4%	94.5	2,927	89.9	11,538
St. Louis RMC	-	-	-	-	-	-	-
St. Louis	4,223	1,708	40.4%	120.5	3,438	136.8	13,201
Togus	2,240	914	40.8%	120.8	2,538	129.9	9,848
Washington	5	-	0%	1.6	-	-	-
White River Junction	337	95	28.2%	95.9	220	117.6	742
Wilmington	201	34	16.9%	71.2	233	107.7	907
Southeast							
Atlanta	7,408	2,647	35.7%	107.4	5,873	133.2	22,086
Columbia	5,698	2,139	37.5%	103.8	4,671	135.9	17,192
Huntington	3,183	1,200	37.7%	113.3	2,504	128.1	9,642
Jackson	2,333	1,019	43.7%	148.2	1,667	161.0	6,253
Little Rock	2,025	763	37.7%	119.6	1,830	126.0	7,004
Louisville	4,140	2,517	60.8%	181.7	2,721	186.0	10,743

Region	# of Claims Received	# of Claims Pending > 125 Days	% of Claims Pending > 125 Days	Average Days Pending	# Of Claims Completed	Average Days to Complete	Completed FYTD
Montgomery	3,313	1,041	31.4%	102.0	2,743	121.6	10,561
Nashville	3,593	1,546	43.0%	115.0	3,668	142.0	13,371
New Orleans	2,105	680	32.3%	95.3	1,706	132.7	6,107
Roanoke	5,416	3,038	56.1%	161.2	2,958	201.7	10,331
San Juan	6,405	3,907	61.0%	186.5	4,781	193.8	18,114
St. Petersburg	10,650	4,921	46.2%	130.3	8,937	153.5	30,341
Winston-Salem	8,419	3,144	37.3%	107.1	8,188	133.8	30,071
Continental							
Cheyenne	352	105	29.8%	105.3	425	113.5	1,617
Denver	3,262	1,066	32.7%	100.0	2,596	128.6	9,701
Des Moines	1,883	634	33.7%	109.3	1,482	132.4	5,440
Fargo	566	194	34.3%	117.3	559	138.2	2,157
Fort Harrison	1,104	364	33.0%	110.7	1,051	123.0	3,858
Houston	7,349	3,104	42.2%	110.0	5,054	137.0	19,586
Lincoln	3,569	1,441	40.4%	113.3	2,538	135.3	8,893
Muskogee	5,856	2,102	35.9%	106.9	4,280	135.9	16,795
Sioux Falls	1,385	581	41.9%	114.6	987	156.7	3,507
St. Paul	4,539	1,843	40.6%	140.9	4,722	136.7	17,239
Waco	11,136	4,461	40.1%	112.2	10,443	140.5	39,977
Wichita	913	315	34.5%	106.0	833	118.6	2,978
Pacific							
Albuquerque	1,484	537	36.2%	112.6	1,161	131.0	4,365
Anchorage	359	101	28.1%	94.7	348	107.9	1,322
Boise	1,449	496	34.2%	107.9	1,347	119.7	4,710
Honolulu	839	417	49.7%	122.3	781	152.3	2,948
Los Angeles	3,729	1,352	36.3%	99.4	2,583	127.2	9,193
Manila	325	80	22.7%	56.0	606	105.0	2,490
Oakland	2,234	823	36.8%	117.6	2,452	121.7	9,214
Phoenix	5,338	2,345	43.9%	128.4	3,882	138.6	14,400
Portland	1,763	658	37.3%	107.1	1,227	129.2	4,895
Reno	1,356	479	35.3%	119.1	1,343	128.4	4,868
Salt Lake City	3,592	1,269	35.3%	108.0	3,632	135.9	13,706
San Diego	7,924	2,883	36.4%	107.6	5,732	137.4	21,235
Seattle	4,528	1,886	41.7%	122.5	5,646	115.8	20,543

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