MEMORANDUM OF AGREEMENT
BETWEEN
DEPARTMENT OF VETERANS AFFAIRS (VA)
AND
DEPARTMENT OF DEFENSE (DoD)

SUBJECT: Expansion of the DoD/VA Integrated Pilot Disability Evaluation System (IPDES) – Providing a Single Disability Evaluation/Transition Medical Examination and Single Source Disability Rating

This Memorandum of Agreement (MOA) supersedes a previous MOA, dated November 6, 2007, "Implementation of a Single Disability Evaluation/Transition Medical Examination to be used in the DoD Disability Evaluation System and in VA Disability Compensation and Pension Determinations, in a pilot program in the National Capital Region (NCR)."

1. PURPOSE: Integration of a DoD/VA Single Disability Evaluation/Transition examination into the IPDES is envisioned to be a more transparent and efficient process for Service members who will be separated as part of the Pilot Disability Evaluation System (DES) that was established and implemented in November 2007. The IDPES provides for both a time and cost saving relationship between the DoD and the VA in serving Service members in the disability evaluation and compensation process who will eventually become Veterans. Initial implementation of this process was limited to the NCR. This MOA expands the scope of the IPDES beyond the NCR and outlines the requirements for a single interagency Disability Evaluation/Transition medical examination in the IPDES to improve the timeliness, effectiveness, transparency, and resource utilization in transitioning Service members from the military service to the VA.

2. BACKGROUND:

A. The establishment of the IPDES expands on concepts outlined in the DoD/VA MOA, "Implementation of Cooperative Separation Process/Examinations for the Department of Defense and the Department of Veterans Affairs for Benefits Delivery at Discharge," signed on November 17, 2004. Under the authority of that MOA and through local agreements, VA collaborated with DoD medical treatment facilities through a Cooperative Separation Physical Examination and Benefits Delivery at Discharge (BDD) program. The BDD program does not include members referred to the DoD DES process. The BDD services are performed at multiple sites and are conducted either by VA medical center examiners, VA contract examiners, or DoD examiners following VA disability examination protocols. This MOA supports the model of the BDD program and applies similar concepts to the IPDES.

B. In 2007, four separate panels looked at the DES process and the subsequent awarding of disability benefits. These included the Secretary of Defense-directed Independent Review Group (IRG); Secretary, VA-directed Global War on Terror (GWOT) Returning Heroes Work Group, the President's Commission on the Care of America's Returning Wounded Warriors (Dole/Shalala Commission) and the Veterans Disability Benefits Commission. Each of the aforementioned groups called for changes in the DES system. Recommendations contained in

these various commission reports and studies included a single standardized medical examination designed to meet the needs of both the DoD and VA.

C. In response to those recommendations, DoD/VA began extensive collaboration and designed a pilot DES system that integrated the DoD/VA DES process. To prove viability of the design, a tabletop exercise of the proposed pilot process was conducted. DoD and VA exercise participants were provided Physical Evaluation Board documents with records of proceedings and findings, as well as VA disability compensation records (rating determinations and awards) and the respective examination(s) of former military Service members who had processed through their Service-specific disability evaluation systems and who were subsequently awarded disability compensation by the VA. The consensus among exercise participants was that the VA disability examinations, utilizing VA worksheets (and/or templates), provided a uniform method for the evaluation of a Service member's medical condition(s). The VA examination reports provided complete and standardized documentation. The information from the examination was considered by tabletop participants to be sufficient for use by DoD in the determination of a member's fitness for continued military service and in determining the degree of disability awarded. The DES procedures tested in the Table Top Exercise focused on recommendations that could be implemented without legislative change, but could strategically adapt to changes. The Senior Oversight Committee (SOC) and the Disability Advisory Council (DAC), which provide DoD/VA oversight of the DES, approved the strategic pilot design, with the single disability evaluation/transition concept in October 2007. The approved NCR DES pilot began in November 2007.

3. SCOPE: The IPDES will expand beyond the NCR as approved by the Deputy Secretaries of the VA and DoD in the 25 Sep 08 USD (P&R) memorandum, *Expansion of the Disability Evaluation System (DES) Pilot.*

A. Eligible participants: Active Duty and Reserve Component (RC) Service members at selected sites, who Service medical authorities believe have a duty-related medical impairment(s) that has reached a point where it is unlikely that the member will meet Department medical retention standards in a year (or his/her medical fitness for continued military service is questionable), will be eligible for referral into the IPDES. This MOA does not cover RC personnel unqualified for further service due to civilian employment and/or other non-duty related impairments.

B. Sites: Identification of military treatment facility sites (within and beyond the NCR) for participation in the IPDES will begin as outlined in the 25 Sep 08 USD (P&R) memo, *Expansion of the Disability Evaluation System (DES) Pilot*, approved by the Deputy Secretaries of the VA and DoD, and incorporated in this MOA by reference. Future expansion will be at the discretion of the SOC, the Joint Executive Committee, the DoD and the VA. Incremental expansion will allow for DoD and VA to build a network of qualified disability examiners, develop plans for funding and identify required resources for DoD and VA purposes.

4. IMPLEMENTATION: The two Departments shall strive to provide a unified process that encourages use of health care services during and after transition. For cases referred to the IPDES, DoD and VA agree on the following:

A. Examination Content: Because the examination is the basis for rating the disability, the medical examination will include a complete review of systems and a comprehensive evaluation of medical conditions identified and referred to the IPDES by a military medical provider. Conditions identified by military medical care providers as not meeting Service medical retention standards, and thus potentially unfitting for continued military service, will be evaluated. Other medical conditions identified and claimed by the member as having been incurred in, or aggravated by, military service will also be evaluated.

1) The VA Compensation and Pension (C&P) General Medical examination worksheet plus any applicable VA Automated Medical Information Exchange (AMIE) Examination Worksheets and/or templates will be used, to the extent feasible, based on the military referred conditions as well as any other claimed conditions. VA's C&P AMIE Examination Worksheets and/or automated templates are guides for examiners, which clearly identify the information that must be documented to comply with the VA rating criteria. Any changes to existing worksheets, which may result in changes to templates, may be requested by DoD through the DoD DAC . The VA retains ultimate decision making with regard to the content of VA C&P AMIE worksheets.

2) For those seriously or very seriously injured Service members who are unable to attend a disability examination or have an examination completed in person, a review of medical records developed as part of the member's treatment, as appropriate, may be used.

B. Performance of Examinations: As part of the expansion of the IPDES, the Departments will ensure resources are available. VA will have the initial option to provide the disability examinations. When VA does not exercise the option to provide a disability examination, VA will notify DoD, which will provide the disability examinations. Provision of these disability examinations will generally follow this order of priority: VA Medical Centers, other VA resources, Military Treatment Facilities, the TRICARE Network or other DoD resources. A combination of resources may be required.

Note: DoD and VA timeliness standards will be considered as a basis for determining the most appropriate location/provider for conducting the examination(s). The needs of the Service member are of the top priority and, therefore, resources will be applied, to the extent feasible, to accommodate those needs.

C. Training of Examiners: Designated personnel performing and ordering examinations shall complete training and certification in the conduct of disability examinations. VA will provide VA C&P Disability Examination training course content. Given the importance of a thorough examination to the Service member in terms of future benefits and compensation, it is critical that standards are consistently enforced and applied fairly. As a result, VA and DoD have determined the need for training and certification of all clinicians performing C&P disability examinations, no matter where they are performed. VA certification processes will be used by each Department to document the qualifications of its respective examiners. These courses are available through DoD and VA. While not prohibited, it is discouraged for the treating provider to also perform a C&P exam.

D. Disposition of Completed Examinations:

1) Results of the C&P Disability Examination generated by DoD examiners will be provided to the VA for rating purposes.

2) Results of VA C&P Disability Examination generated by VA examiners will be provided to the representatives of the Military Department concerned to aid in fitness determinations.

3) All examiners understand DoD requires this information in order to determine fitness and disposition of Service members found unfit and VA requires this information to determine a disability rating percentage.

4) A process will be established for clarification, amendment and/or return, as appropriate, of examinations that are insufficient for determinations of fitness and/or assignment of disability evaluation for DoD providers similar to that already in place for VA examiners.

5) Findings of fit or unfit will be made by the Military Department concerned.

E. Other related issues:

1) All current diagnostic results will be used by examiners accomplishing disability evaluation/transition examinations, as deemed current based upon agreed timelines (usually within one year unless clinical changes necessitate new diagnostic workups) to minimize duplication.

2) Quality assurance monitoring of examinations performed will follow VA Compensation Pension Evaluation Program (CPEP) guidelines. Any examinations missing information will be returned to and corrected by the examining provider through the appropriate channels.

5. LOCAL LEVEL IMPLEMENTATION: This MOA stipulates overarching requirements for implementation and authorizes DoD and VA to enter into subsequent policies, guidance, and agreements as necessary for implementation and within their statutory authority. Local VA and DoD staff, in consultation with their respective reporting commands, will cooperatively determine (inclusive of those sites actively involved with the BDD sites), strategies to execute this agreement by evaluating available medical resources needed to conduct examinations considering VA/DoD timeliness standards.

A. Both the VA and DoD will allocate appropriate resources to ensure that examination processes are adequate to meet both agencies' needs for disability evaluation and determination of disability rating.

B. Copies of any subsequent local written agreements implementing this MOA between DoD and VA entities shall be forwarded to the DoD/VA Program Coordination Office and Veterans Health Administration/DoD Resource Sharing Office.

6. ACCOUNTABILITY AND FUNDING: DoD will provide the oversight and administration of Service members referred to the IPDES program. Based on the assumption of the mutual benefit of these examinations to the missions of both Departments, DoD and VA will establish business rules for tracking the costs of this program. The Financial Management Working Group will review and approve reimbursement rates and forward the implementation guidance to the Health Executive Council and Benefits Executive Council for approval.

7. RATING: One of the goals of the IPDES is to have a single rating agency. The VA, based on the results of the C&P disability examinations, determines disability percentage ratings. The VA will provide DoD detailed information on the disability percentage for each potentially unfitting medical condition referred by the DoD provider, for those claimed by the service member, or for those conditions discovered on examination using the VA Schedule for Rating Disabilities (VASRD).

8. TRAINING: Both Departments will collect and share data to measure the success of the IPDES Program, to identify training requirements and to target areas for process improvement. DoD, in coordination with VA, will develop a standardized training program. VA agrees to assist with the development of training on the VASRD and the utilization of any VA worksheets or automated programs used or developed to improve examiners' completion of the VA C&P examination reports, i.e, VA templates.

9. EFFECTIVE DATE, TERMS OF MODIFICATION, TERMINATION:

A. This agreement provides a framework for the implementation of the IPDES and may be augmented by local MOAs, if needed, which will address the specifics needed to implement this program.

B. This MOA will be effective as of the date of the later signature.

C. Requests for modification of this MOA will be addressed in writing from one party to the other, not less than 60 days prior to the desired effective date of such modification.

10. AUTHORITY: This MOA is entered into under the authority of titles 10 and 38, United States Code, including sections 513 and 8111 of title 38 and chapters 55 and 61 of title 10.

Department of Veterans Affairs

Gordon H. Mansfield
Deputy Secretary

DATE: Jan 16 2009

Department of Defense

Gordon England
Deputy Secretary

DATE: JAN 16, 2009