



U.S. Department of Veterans Affairs Veterans Benefits Administration (VBA) Veterans Health Administration (VHA)

National Academies of Sciences, Engineering, and Medicine (NASEM) Assessment of
Department of Veterans Affairs Physical and Mental Health Examinations and the
Department's Schedule of Rating Disabilities for Disability Compensation Claims Related
to Military Sexual Trauma (MST)

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Agenda

- General information on **service-connected disability compensation claims**
- Protocols for determining **when a Compensation and Pension (C&P) disability exam is needed**
- Overview of the **C&P disability exam process**
- **Military sexual trauma (MST)-related C&P disability exams**
- Expectations/contract requirements for contractor examiner **provider qualifications**
- Monitoring contract examiner **compliance with training**
- **Monitoring quality performance** among contractors conducting C&P exams

Establishing Service Connection

- Service connection implies many factors but basically means that the facts, shown by evidence, establish that a particular injury or disease resulting in disability was incurred due to service in the military, or if preexisting such service, was aggravated therein.
- Generally, three criteria must be met to support a grant of service-connected disability compensation:
 - Evidence of an in-service event, injury, or disease, and
 - Evidence of a current disability, and
 - A link or nexus between the two, establishing the current disability had its onset or inception in service.
- The claim process starts when a Service member or Veteran files a claim for benefit on a prescribed form that may be submitted electronically through VA's website, in paper form by mail, in person at a VA regional office, or through an accredited representative (e.g., Veterans Service Organization (VSO), attorney, etc.).

Protocols for Determining Whether an Exam is Needed

Providing medical examinations or obtaining medical opinions (38 C.F.R. § 3.159(c)(4))

A claims processor requests a medical examination and/or obtain a medical opinion when the evidence of record does not contain sufficient medical evidence to decide the claim, but the claim:

1. contains competent lay or medical evidence of a diagnosed disability, or persistent or recurring symptoms of disability
2. establishes an in-service event, injury, or disease in service, or has evidence of a presumptive condition, **and**
3. indicates the claimed disability or symptoms may be associated with the in-service event, injury, or disease, or with another service-connected disability.

Protocols for Determining Whether an Exam is Needed

Direct service connection; Posttraumatic Stress Disorder (PTSD) (38 C.F.R. § 3.304(f)(5))

A claims processor requests a medical examination and obtains a medical opinion when the claim for PTSD is based on an in-service personal assault and the evidence of record does not contain sufficient medical evidence to decide the claim, but the claim:

1. shows evidence of possible PTSD symptoms or a diagnosis,
2. contains evidence to corroborate the traumatic event(s), **and**
3. indicates the claimed disability or symptoms may be associated with an in-service personal assault.

Protocols for Determining Whether an Exam is Needed

Direct service connection; Posttraumatic Stress Disorder (PTSD) (continued)

For personal assault due to PTSD, examples of evidence to corroborate the in-service event include alternative sources of evidence and/or behavioral changes, such as:

- A pregnancy test or test for a sexually transmitted disease
- A statement from a family member, roommate, fellow Service member, or clergy
- Increased/decreased use of leave

This list is not all-inclusive. VA will consider any supporting evidence of the traumatic event.

The evidence will be submitted to an appropriate medical or mental health professional for an opinion as to whether it indicates the personal assault occurred.

What are Disability Exams and DBQs?

What is a VA Compensation and Pension (C&P) Disability Exam?

- A **C&P disability exam** is a medical evaluation that occurs after a compensation or pension claim is filed with the VA to document the clinical information needed to properly determine the existence and/or level of service-connected disability
- C&P evaluations differ from traditional medical treatment examinations

What is a C&P Exam Scheduling Request and a Disability Benefits Questionnaire (DBQ)?

- A **C&P Exam Scheduling Request/2507** is initiated by VBA when additional medical evidence is needed to make a rating determination on the condition(s) associated with the Veteran's disability claim
- **Disability Benefits Questionnaires** (DBQs) are condition-specific, standardized exam templates a VA examiner uses during the C&P disability evaluation to document the existence and/or severity of a Veteran's condition
 - DBQs are intended to document in a standardized report format the specific medical evidence required for VBA to make adjudication decisions on claims

Completion of C&P Disability Exams by VHA

- **In-Person C&P Exam**
 - Completed by trained VHA C&P examiner at a VA Facility
- **Acceptable Clinical Evidence (ACE)**
 - Medical Records review (can be conducted by phone)
 - 89 specific DBQs are suitable to be completed by ACE
- **Tele-C&P (VA Video Connect)**
 - Mental Health exams are suitable for DBQs to be completed by VA Video Connect (VA's Tele-Health Application)

Completion of Disability Exams

- **General Evaluation Principles**

- C&P examiners should review the complaints and Veteran statements regarding their beliefs about their illness(es) and injury(ies)
- Remarks about the Veteran's beliefs regarding their illness(es) and injury(ies) should be documented in the History Section and/or specific areas of the DBQ(s), which request information in the Veteran's own words
- The evaluation should rely on currently known medical practices and physical evaluation principles and knowledge of medical causation with respect to the determination of conditions that are medically (causally) linked to the condition(s) in service or determination that such condition(s) exist.
- The disability documented should be consistent with the disease or injury documented.
- If the disability found and documented is not consistent with the claimed in-service injury/illness, alternate cause(s) for the disability should be investigated utilizing a thorough history and review of medical records.
- The examination should attempt to note the difference between disabilities that clearly resulted from in-service injury or illness as opposed to those that are more likely than not associated with in-service injury, illness, treatment, or event whenever possible.

Completion of Disability Exams

- **MST Evaluation Principles**

- VA’s definition of MST comes from 38 U.S.C. 1720D, which refers to “physical assault of a sexual nature, battery of a sexual nature, or sexual harassment which occurred while the former member of the Armed Forces was serving on duty, regardless of duty status or line of duty determination” and is regardless of the location of the event, the sex of the Service member, and the identity of and relationship with the perpetrator.
- MST is a traumatic experience, not a diagnosis, and is associated with a range of health conditions.
- Both men and women can experience MST. Service members and Veterans from all eras of service have reported experiencing MST.
- MST can occur on or off base, while a Service member is on or off duty. Perpetrators can be men or women, military personnel or civilians, superiors or subordinates in the chain of command, strangers, friends, or intimate partners.

Completion of Disability Exams

- **MST Evaluation Principles**

- Examiners are instructed to remember that while the focus for MST is frequently the psychological component, a variety of physical conditions may occur secondary to an experience of MST.
- It is important to document not just the physical findings and the experience of MST but also the relationship between the MST experience and the diagnosis. In addition, not all MST experiences have an associated diagnosis, and even those that do have a diagnosis may not have a compensable disability based on VA regulations.
- A history of sexual assault has also been shown to be associated with an increased risk for several mental health disorders, including these to include posttraumatic stress disorder (PTSD), depressive disorders, substance use disorders, panic disorder and anxiety disorders, schizophrenia, bipolar disorders, and psychoses.

Completion of Disability Exams

- **MST Evaluation Principles**

Sources of records include, but are not limited to:

- Law enforcement authorities
- Rape crisis centers
- Mental health counseling centers
- Hospitals and Physician records (VBMS, CAPRI, private medical records)
- Pregnancy tests
- Tests for sexually transmitted diseases
- Statements from family members, Roommates, Fellow Service members, and Clergy

The Important Role of VHA C&P

- Engaging in the claims process and attending a C&P disability evaluation may be particularly difficult for a Veteran who has experienced MST
 - It can involve confronting painful trauma memories and potential triggers
 - There are power dynamics in interacting with a government agency, which can be especially difficult for a survivor of interpersonal trauma
 - The C&P evaluation may be the first time an MST survivor sees a VHA provider
- Every C&P staff member can play an important role in improving the experience for MST survivors, regardless of whether the Veteran is presenting for an MST-related disability evaluation
 - Every VHA C&P staff member will interact with MST survivors
 - The actions taken are pivotal in conveying that **VHA will help MST survivors to heal**

“If they say they believe you, that’s a big deal, do you know what I mean. If it goes the other way, then why didn’t they believe me.”

Complicating Factors Associated with MST

- MST, compared to other military and civilian traumas, can have a particularly negative impact on a survivor's mental and physical health, relationships, and well-being
- There are many reasons for this, including:
 - **MST is an interpersonal trauma** involving harm from another, often trusted, person, and this can lead survivors to have future difficulty trusting others or trusting themselves
 - **MST may be ongoing**, or there may be repeated interactions with the perpetrator(s)
 - **Survivors are often at a young age** at the time of their experiences of MST and may not have fully developed adaptive coping strategies
 - The military values strength and self-sufficiency – and the experience of victimization may thus be particularly difficult to accept and contribute to strong **feelings of self-blame**
- In addition, many MST survivors have experienced multiple traumas, including childhood trauma, combat exposure, and post-military trauma
 - The effects of trauma are cumulative—more severe or frequent traumas result in worse outcomes

Opportunities of C&P Evaluations for MST Survivors

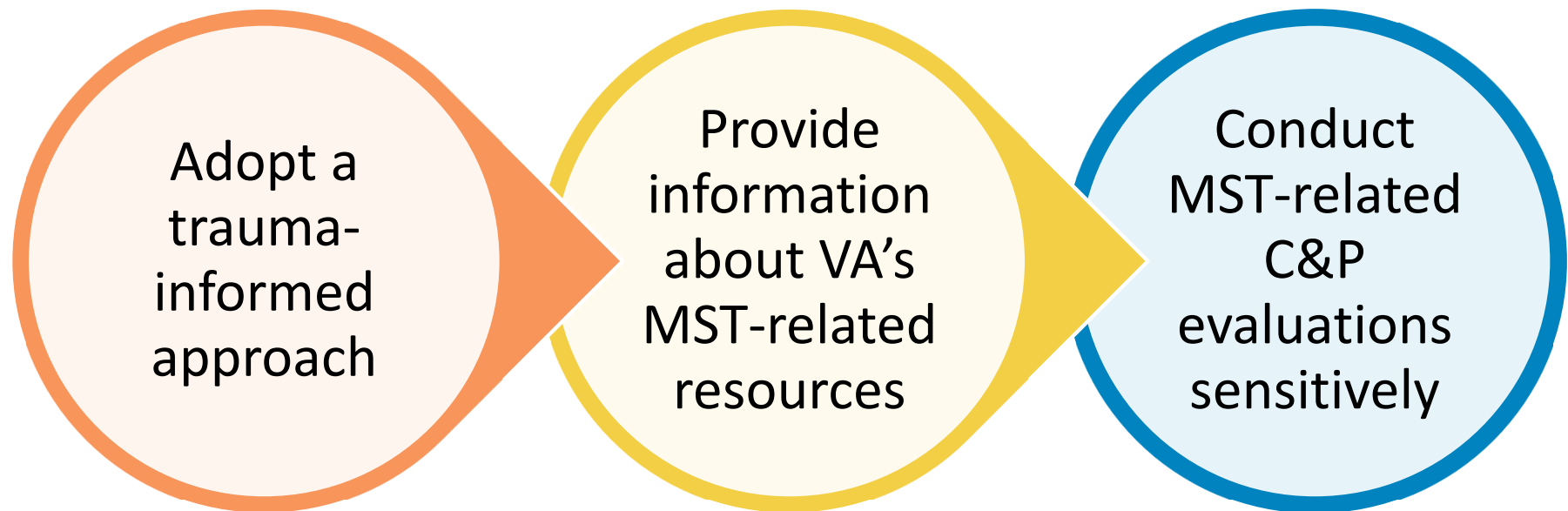
- Engaging in the claims process, and especially attending a C&P evaluation, **presents an important potential for an MST survivor to feel heard and acknowledged**
- A Veteran's experience during the C&P evaluation can help open the door for the Veteran to access VA's MST-related treatment
 - Veterans who experienced MST can receive free VA care for MST-related conditions, regardless of whether they receive disability compensation
- Engaging in the claims process may increase a Veteran's positive feelings about self, like feeling strong, resourceful, or resilient
- Access to financial compensation and resources, when granted, can decrease stress, increase a sense of safety, and expand healing options moving forward

"I'm not even worried about getting benefits from the VA, I just want it documented what happened in the military."

What C&P Examiners Can Do to Improve the Claims Experience for MST Survivors

“When I went to my exam, the examiner gave me an overview of what the appointment was about, very sincere with me. She said, ‘let me know if you need to slow down the pace or gather yourself anytime.’ She was not like a robot. We got through everything and everything was clear. The examiner was considerate and made me want to open up naturally. I didn’t feel judged. I was more relaxed and could be myself – I felt like I could be more honest with them and felt understood.”

What C&P Examiners Can Do To Assist



Adopt a Trauma-Informed Approach



- **A trauma-informed approach can help improve the C&P examination experience for all Veterans, including MST survivors**
- A trauma-informed approach involves maintaining awareness of how widespread the occurrence of military service incurred trauma is, understanding trauma's impacts, and acting in ways that are sensitive to that
- Applying a trauma-informed approach not only helps to “do no harm” to the Veterans you see, but it can also help to provide a positive experience that sets the tone for Veterans’ future interactions with VA

Six Principles of a Trauma-Informed Approach

Safety	Ensure safety in physical settings and interpersonal interactions
Trust	Provide services with transparency, consistency, respect, and fairness
Peer Support	Learn from those with lived experiences of trauma
Collaboration	Partner with Veterans served to help level power differentials
Empowerment	Provide choice, and recognize and build upon individuals' strengths
Cultural Sensitivity	Recognize and move beyond gender, cultural, and historical biases

See [*Practical Guide for Implementing a Trauma-Informed Approach*](#) (SAMHSA, 2023) for more.

Create a Trauma-Informed C&P Environment

ENCOURAGE 	AVOID 
Calm and professional atmosphere	Chaotic atmosphere (loud voices, negative TV, doors slamming, etc.)
Welcoming language on signage	Signs and handouts that over-emphasize rules
Quiet spaces to wait	Crowding (crowds of men may be especially difficult for some MST survivors)
Attention to privacy (e.g., sound-proof rooms, conversations held in private)	Talking about Veterans in public spaces, papers with names visible
Images that reflect all served	Images with only men or combat Veterans
Ready access to personalized assistance	Long lines or wait times, unclear or unavailable points of contact for questions

Ensure Choice of Male or Female Examiner

- Some MST survivors will have a preference about the sex of the examiner conducting their C&P evaluation
- **It is VA policy that a Veteran's request to see a male or female examiner for a gynecological, breast, rectal, mental health, or MST-related C&P evaluation is honored**
 - Veterans are offered this choice during the appointment scheduling process
 - As needed, this process may involve routing examination requests back to VBA with a request to reschedule the Veteran with a male or female contract examiner

Conduct MST-Related Evaluations Sensitive

- MST-related mental health C&P evaluations can be particularly emotionally challenging
 - **Using trauma-informed practices as noted earlier is essential for these evaluations**
 - Veterans are often better able to provide information if they feel emotionally safe

“A concern I told the MST Coordinator – who do I have to tell – it’s not something I like to talk about – in the military you weren’t allowed to talk about it. If I were to tell that someone did something to me, I feared getting kicked out of the military. Those fears are still embedded in my brain 35 years later – you don’t know what’s going to happen with the information you share.”

“I was nervous before the exam because you know you have to relive things you block out.”

Consider Markers Broadly

- Evaluations for MST-related PTSD often require the examiner to opine on whether “markers” to substantiate the occurrence of the MST event can be identified
 - “Marker” means an indicator of the effect or consequences of the MST experience on the Veteran
 - **There is no all-inclusive list of markers** – they can be *any* behavioral change or pattern of behavior by the Veteran around the time of, *or after*, the MST experience

Examples of Potential Markers of an MST Experience

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|---|--|
| <ul style="list-style-type: none">• Increase or decrease in work performance• Disciplinary problems of any type• AWOL, dereliction of duty, court martials• Request to change unit, MOS, or leave military• Changes in eating patterns or weight• Reports of anxiety, depression, panic attacks, sleep difficulties, or other mental health complaints• New or worsening substance use difficulties• Difficulties with concentration and memory• Hypervigilance and concerns about safety• Avoiding certain places or activities | <ul style="list-style-type: none">• Multiple visits to sick call• Vague or shifting health complaints• Tests for sexually transmitted infections or pregnancy• Treatment for physical injuries around time of MST• Avoiding medical appointments• Increased physical health problems like pain, GI distress• Difficulties interacting with people of a certain sex• Relationship changes like sudden marriage, divorce, or break-up – or increased isolation• Increased or decreased sexual behavior• Unexplained social or financial decisions or difficulties |
|---|--|

Provide Information on VHA Resources for Care

- C&P examiners are encouraged to share information about VHA's free MST-related care with all Veterans who have experienced MST
- The C&P examiner may be the first VA representative to see the MST survivor, and many Veterans do not realize the difference between applying for disability benefits and accessing treatment
- Information might be shared during the evaluation or at the conclusion of the evaluation and when the Veteran discloses their MST experience or if the Veteran asks about it
- The C&P examiner might say something like, ***"Many people who have experienced MST have found it helpful to talk with someone about their experiences. The VA offers free care related to MST. Would you be interested in learning more about this? After learning about options, you can decide if you wanted to take it any further."***
- If the Veteran says yes, the C&P examiner can provide the name of a local VHA MST Coordinator and share information and resources.
 - Veterans currently in VHA care can also request a referral from their current VHA provider

VBA Contract Exam Provider Qualifications

General Requirements:

- Have all licenses, permits, accreditation, and certificates required by law
- Graduate of an accredited school
- All licenses shall be current, full, and unrestricted
- Cannot be barred from practicing such health care profession in any State, the District of Columbia, or Commonwealth, territory, or possession of the United States

VBA Contract Exam Provider Qualifications

Specialists are required for the following exam types:

- Audiology
- Dental
- Eye
- Spina Bifida
- Psychological
- Initial Traumatic Brain Injury (TBI)- where a previous diagnosis of Traumatic Brain Injury has not been made by a Neurologist, Neurosurgeon, Physiatrist, or Psychiatrist

VBA Contract Exam Provider Qualifications

Audiology

- Examiners shall hold a full, current, and unrestricted license in audiology.
- Audiologists shall hold an earned master's or doctorate degree from a college or university accredited by either the Accreditation Commission for Audiology Education (ACAE) or the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) of the American Speech-Language-Hearing Association (ASHA) or shall hold the equivalent ACAE/ASHA certifications.
- Under no circumstance will other persons supervised by an Audiologist complete any portion of the Audiology examination (i.e., Audiology trainees, Audiology doctoral externs, hearing instrument specialists, and audiology assistants).

VBA Contract Exam Provider Qualifications

Dental

- Dental exams must be performed by Dentists or Oral Surgeons

Eye

- Eye exams must be performed by Ophthalmologists or licensed Optometrists

Spina Bifida

- Shall be trained in:
 - Physiatry (physical medicine and rehabilitation)
 - Neurology
 - Neurosurgery
 - Occupational Medicine

VBA Contract Exam Provider Qualifications

Psychological

- All psychologists shall hold a full, current, and unrestricted license to practice psychology at the doctoral level.
- All psychologists must have a doctoral degree in psychology (i.e., PhD or PsyD) from a graduate program in psychology accredited by the American Psychological Association (APA).
- The specialty area of the degree must be consistent with the assignment for which the applicant is to be employed (e.g., a child psychologist cannot examine adults).

Provider VBA Contract Exam Provider Qualification

Traumatic Brain Injury (TBI)

- **Initial TBI** exams without a previous diagnosis of TBI will require a diagnosis or confirmation of non-diagnosis of TBI made by one of the following licensed specialists:
 - Psychiatrist
 - Neurosurgeon
 - Neurologist
 - Psychiatrist
- **Review TBI** exams may be conducted by a generalist who is C&P certified and has successfully completed the VA TBI course. A 'generalist' refers to:
 - Physician
 - Physician's Assistant (PA)
 - Nurse Practitioner (NP)

Training Compliance Monitoring

- VBA employs a three-step oversight process to ensure contract examiners comply with training requirements:
 - **Initial Onboarding Review:** Each week, vendors submit a list of new onboarding examiners for VBA's review and certification of training. Using the VBA Medical Disability Examination (MDE) Learning Management System (LMS) TRAIN, VBA reviews the training records of these new examiners. After confirming that all training requirements have been met, VBA certifies whether the examiner is authorized to be scheduled for general and/or specialty examinations.
 - **Random Active Examiner Review:** Through an internal invoice validation process, VBA conducts random reviews of active examiners. This step ensures that examiners who are actively conducting examinations have achieved training compliance prior to performing any examinations during the month.
 - **Annual Comprehensive Review:** Once a year, VBA performs an All-Record review. By comparing the active examiner roster from vendors with the current active profiles in the TRAIN LMS, VBA verifies that all active examiners meet the training compliance requirements.
- This systematic approach ensures strict adherence to training standards and enhances the oversight of training compliance for all contract examiners.

Quality Performance Monitoring

- Medical Disability Exam Office contracts stipulate that vendor quality performance will be evaluated quarterly. This assessment involves calculating quarterly quality scores based on a statistically valid random sample review of completed DBQs. Although the review is random, it will include DBQs for conditions related to MST. If any areas of concern are identified, VBA's Medical Disability Examination Office will address them accordingly.
- This can be completed through a Special Focus Review (SFR) targeting specific types of DBQs, medical conditions, providers, and topics. The primary aim of conducting SFRs is to concentrate on trends or areas requiring improvement.
- The reasons for initiating SFRs are varied and may include:
 - Requests from VBA leadership
 - Inquiries from external stakeholders
 - Planned reviews of subjects that are under scrutiny
 - Identification of error trends through regular DBQ quality reviews

Questions

