

# VETERANS' DISABILITY BENEFITS COMMISSION

## Meeting Minutes

**Date:** Wednesday, May 9, 2007 - Friday, May 11, 2007

**Location:** Doubletree Hotel  
1515 Rhode Island Ave.  
Washington, DC

### Attendees:

#### **Chair:**

Chairman James Terry Scott, LTG, USA (Ret)

#### **Members:**

Nick D. Bacon, 1SG, USA (Ret)  
Larry G. Brown, COL, USA (Ret)  
Jennifer Sandra Carroll, LCDR, USN (Ret)  
Donald M. Cassiday, COL, USAF (Ret)  
John Holland Grady  
Charles "Butch" Joeckel, USMC (Ret)  
Ken Jordan, COL, USMC (Ret)  
James Everett Livingston, MG, USMC (Ret)  
William M. Matz, Jr., MG, USA (Ret)  
Dennis Vincent McGinn, VADM, USN (Ret)  
Rick Surratt (former USA)  
Joe Wynn (former USAF)

#### **Absent:**

William M. Matz, Jr., MG, USA (Ret) – Wednesday and Thursday, May 9 - 10, 2007

#### **Staff:**

Ray Wilburn, Executive Director  
Ed Andersen  
Conrad Anderson  
Jacqueline Garrick  
Kathleen Greve  
John Harlepas  
Steve Riddle  
Dietra Shepherd  
Jim Wear  
Don Zeglin

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Topic	Key Points	Supporting Materials
	<b>May 9, 2007</b>	
<b>Opening Remarks</b> Chairman Scott	The chairman opened the meeting at 8:31 a.m. He acknowledged the military appreciation observances to take place in May and then reviewed the meetings agenda.	
<b>April 19 -20, 2007 Meeting Minutes</b>	Commissioners Carroll (after requesting that she not be listed as absent from the last meeting since she was on the phone) moved and Cassiday seconded the adoption of the minutes, which were approved by unanimous vote.	<a href="#">Minutes</a>
<b>Opening Statements</b>	None	
<b>VA/DoD Information Technology (IT) Update</b>  Mr. Robert Reynolds, Executive Management Officer, VA OPPM  Mr. Michael Lincecum, Chief, Policy Integration & Analysis, OSD  Mr. Cliff Freeman, VA director, IT Sharing  Dr. Steven Rappaport, VHA,  COL Bart Harmon, MD, DoD, MHS  Mr. Craig Luigart, VA, CIO	Mr. Reynolds and Mr. Lincecum provided a briefing specifically on the Benefits Executive Council (BEC) activities regarding information sharing between VA and DoD. They shared the milestones and discussed projects, such as the Veterans Tracking Application (VTA), outreach to DoD Physical Evaluation Boards, and record retrieval. Ultimately information being provided by the service branches is also being used by VA for benefits determination.  Mr. Freeman, COL Harmon and Dr. Rappaport updated the Commission on the status of VA/DoD joint governance, milestones and plans, viewable health information that is now available, effort priorities, computable data exchanges, the collaborative inpatient electronic health record project, DoD and VA electronic health information. COL Harmon also focused on the unique DoD mission needs and Dr. Rappaport on VA's.  Commission discussion focused on areas that still need improvement in order for complete electronic record transfer capabilities to exist between the departments. Additional discussion focused on budget shortfalls and the need for increased funding to expedite the IT development process.	<a href="#">Presentation</a>
<b>Amputee Coalition of America (ACA)</b>  Ms. Paddy Rossbach, RN, President & CEO	According to Ms. Rossbach, the ACA was founded in 1986 to empower people with limb loss through education, support & advocacy. They offer a peer network, programs & publications. Along with Johns Hopkins University, they run a Limb Loss Research & Statistics Program. Ms. Rossbach reported on the results of a survey of 987 adult amputees that included the frequency of secondary medical conditions, pain, ADL limitations, & depression, which also was broken down by age, level of amputation & education. In a 2007 survey of 263 caregivers, ACA found that they experience depression, stress, less time for family, low energy, aches/pain, sleep disturbance, inactive, & caregiver injuries. A 2006 Report from the National	<a href="#">Presentation</a>

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	<p>Caregivers Alliance identified that caregivers need time saving assistance, stress reduction, &amp; support. Ms. Rossbach recommended that peer support be offered to caregivers as well as to the amputees. She also noted that ACA is trying to develop a program for VA similar to the one it offers at Walter Reed.</p>	
<p><b>Issue Paper Status Update</b>  Mr. Ray Wilburn</p>	<p>Mr. Wilburn gave an update on the Commission issue paper process and an overview of the status of each issue and tentative decisions.</p>	
<p><b>Issue Paper Update: Environmental Hazards (AO, PCB, TCE)</b>  Ms. Jacqueline Garrick, LCSWC  Mr. Don Zeglin, Esq.</p>	<p>Ms. Garrick provided a summary &amp; an update on three previously presented issues: Agent Orange exposure and the "Blue Water Navy;" Ft. McClellan; and Camp Lejeune.</p> <p>Regarding Agent Orange, Ms. Garrick reported that since the Commission decided no further action was appropriate, the Solicitor General accepted VA appeal of the Hass decision. All Hass cases will be held under a stay in processing until the appeal is decided.</p> <p>In September 2006, the Commission voted on 4 issues regarding Ft. McClellan, AL, including the creation of a registry. Ms. Garrick reported that since then additional witnesses have come before the Commission regarding their illnesses that they believe are the result of an exposure while stationed in AL. Additionally, VA reported that it has compiled a list of 117 Ft. McClellan veterans &amp; that DoD recently shared an email acknowledging LSD exposure of a group of 195 veterans.</p> <p>Finally, Ms. Garrick discussed the TCE exposure issue at Camp Lejeune that the Marine Corps has been monitoring since the 1980s, which the Commission viewed as sufficient action. All medical studies of the Camp Lejeune-TCE issue remain ongoing. There are preliminary reports on the water-modeling issue, which aims to produce a working model of the contamination pattern in the base's water system. The first results from this study are expected to be released in June, 2007, and will include an interactive website where Camp Lejeune veterans can input where and when they lived on base, and receive the water-model's estimate of their contamination.</p> <p>Commission discussion centered on the need for policies and procedures to be in place to decide these issues.</p>	<p><a href="#">Presentation</a></p>
<p><b>Issue Paper Interim Decision:</b>  <b>Pending Claim Ends with</b></p>	<p>Mr. Wear summarized the feedback from the VSOs at the last Commission meeting. The Legion supported option 2 &amp; the VFW &amp; the DAV</p>	<p><a href="#">Presentation</a></p>



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	<p>Commission discussion &amp; the desire not to just rubber stamp issues. Commissioner Wynn requested staff provide summaries of the other commission's reports and legislation. He is also looking forward to a full review of all benefits. Commissioner Livingston suggested that there be a definition of seamless transition. Commissioner McGinn suggested that the Commission prioritize its issues and adjust time spent on each. Commissioner Grady recommended that an independent entity, such as GAO be brought in to comment on the DoD/VA IT plan. Chairman Scott asked staff to develop a list of 8-10 top issues and to request the Institute of Defense Analyses (IDA) Report.</p>	
<p><b>Chairman's Close</b>  Chairman Scott</p>	<p>The next Commission meeting will be held at the Washington Plaza Hotel at 10 Thomas Circle, NW, in Washington, DC on June 7 and 8. The chairman adjourned the meeting at 4:53 p.m.</p>	

The minutes of the May meeting

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<b>May 10, 2007</b>		
<b>Opening Remarks</b> Chairman Scott	The chairman opened the meeting at 8:32a.m. with welcoming remarks and a review of the agenda.	
<b>Opening Statements</b>	<p>Commissioner Brown (referring to the VA/DoD presentation) reminded the Commission that the physical health assessment done by DoD is not an exam, but a self-report questionnaire.</p> <p>Commissioner Jordon referenced the Commission on National Guard/Reserve Affairs for follow up information on their findings.</p>	
<p><b>Institute of Medicine (IOM) Update on Status</b></p> <p>Mr. Rick Erdtmann, MD: With Study Directors:</p> <p>Mr. David Butler, PhD – PTSD Compensation</p> <p>Ms. Rose Martinez – PTSD Treatment</p>	<p>Dr. Erdtmann reported that the Disability Evaluation study has been completed and the external reviews have also been completed.</p> <p>The Presumption study is also completed and is in external review.</p> <p>Ms. Martinez reported that the PTSD Treatment committee has conducted an immense literature search and now has a body of data. They will not meet their July 31 deadline and have asked VA for an extension. The committee has been meeting weekly by phone and will hold a meeting in June.</p>	(There were no slides)
<p><b>IOM PTSD Compensation Committee Report</b></p> <p>Ms. Nancy Andreasen, MD Committee Chair</p>	<p>Dr. Andreasen reviewed VA's charge to the Committee and background information on PTSD and the VA C&amp;P process. The issues they identified in the C&amp;P process were: use of Global Assessment of Functioning (GAF) scores, distinguishing PTSD &amp; comorbid disorders, psychological testing, timing of diagnosis, PTSD rating criteria, other disability evaluation methods, rater training, PTSD disability claims information, influence of PTSD compensation, reducing disincentives &amp; maximizing incentives to achieve mental health, periodic reexamination, and gender and military sexual assault. The Committee observed that the key to the C&amp;P process is a thorough clinical examination conducted by an experienced professional, and applying proper resources. The report recommends short and long term plans for GAF usage. It also recommends a revision of the VASRD to include specific criteria for PTSD separate from other mental conditions and to coincide more with the Diagnostic &amp; Statistical Manual (DSM) criteria for PTSD. Additionally, VA needs comprehensive data collection, analysis, &amp; publication. She also noted that there are other issues that affect compensation, such as access to other benefits (health care) and internal coordination.</p>	<a href="#">Presentation</a>

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	<p>There was a lengthy Commission discussion with Dr. Andraesen on the report findings and implications for changing how VA rates veterans for PTSD.</p>	
<p><b>CNA Briefing Update:</b>  Ms. Joyce McMahon, PhD</p> <p><b>Preliminary Quality of Life (QOL) Survey Results</b>  Mr. Eric Christensen, PhD</p> <p><b>Preliminary Analysis of Earnings and Survey Results Combined</b>  Mr. Eric Christensen, PhD</p> <p><b>CNA Survivors Concurrent Receipt</b></p>	<p>Dr. McMahon began by updating the Commission on the CNA timeline, information on the cost of providing assistance at home or at a facility, accrual of retirement benefits, preliminary veterans/survivor data, implicit quality of life payments, concurrent receipt and CNA's next steps.</p> <p>Dr. Christensen reviewed the QOL survey results. Over 21,000 responded and reported on their health-related and overall QOL, compliance with medical treatment and their participation in the labor force. He described the US population norms for physical and mental health and then looked at disabled veterans by body system and level of disability. In general CNA found that life satisfaction decreased systematically by severity of rating and was lower for mental health. There was no pattern for their satisfaction with the fairness of their compensation. There was not a significant issue with treatment compliance and disability compensation.</p> <p>Dr. Christensen compared the earnings and survey results. He created scenarios to illustrate how to compute an implicit QOL payment to demonstrate the annuity necessary to replace lifetime average earnings losses.</p> <p>Dr. McMahon stated that Concurrent Receipt is a policy issue not an analytically driven issue. There is limited analytical information on this issue. She compared several different government programs and the data on survivors to illuminate this issue. She suggested that the Commission adapt a strategy to focus on the intent of the programs, their historical perspectives, and to apply rationales consistently.</p>	<p><a href="#">Presentation</a></p>
<p><b>Final Report Section V: Veterans Past, Present, &amp; Future</b>  Ms. Jacqueline Garrick, LCSWC</p>	<p>Ms. Garrick gave a 400-year historical overview of veterans' benefits, a profile of the current veteran population, and projections on future veterans.</p> <p>She reviewed the changes over time to veteran's benefits as they pertained to compensating veterans for their disabilities and how unique periodic issues effected benefits. She explained that the current population is primarily Vietnam-era veterans &amp; that the overall veteran population will decline, but will be more diverse in the future.</p>	<p><a href="#">Presentation</a></p>

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	After a brief Commission discussion, Chairman Scott recommended that an electronic version be distributed to the Commissioners for their comments.	
<b>Chairman's Close</b>  Chairman Scott	He adjourned the meeting at 4:26p.m.	

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	<b>May 11, 2007</b>	
<b>Opening Remarks</b> Chairman Scott	The Chairman opened the meeting at 8:31 a.m.	
<b>Bradley Commission Guiding Principles</b>  Mr. Ray Wilburn	<p>Mr. Wilburn reviewed the 1956 Bradley Commission Guiding Principles previously discussed by the Commission and gave a “then and now” analysis. He also noted the Guiding Principles used by the Independent Budget. Mr. Wilburn presented the Commission with a straw man of Guiding Principles they could adopt as their own.</p> <p>After some Commission discussion, Chairman Scott suggested that staff draft a philosophical document that could be worked into the final report.</p>	
<b>Initial Issue Paper: Ancillary &amp; Special Purpose Benefits</b>  Ms. Jacqueline Garrick, LCSWC	<p>Ms. Garrick discussed a full array of ancillary and special purpose benefits relating to service connected disability and death that are available to veterans and their families. She highlighted such ancillary benefits as auto, adaptive housing &amp; clothing allowances, special monthly compensation, VR&amp;E, aid and attendance/housebound. She also focused on special purpose benefits that included health care, life insurance, home loans, veterans’ preference and burial. She described additional programs unique to survivors/dependents, such as CHAMPVA, education, bereavement counseling, and birth defect allowances. Ms. Garrick concluded that the purposes of these benefits are to mitigate impairments and improve functioning. However, some of these programs have not kept pace with inflation and are outdated. She presented the Commission with seven options.</p> <p>After some Commission discussion, Chairman Scott suggested that the benefits outlined in the paper be presented in a table so that the Commissioners could prioritize each issue.</p>	
<b>Closing Comments</b>	Commissioner McGinn suggested that issues be prioritized. Commissioner Wynn requested that more time be spent on ancillary benefits, transition and claims processing. Commissioner Matz suggested that they concentrate on a top five list and guiding principles. Commissioner Carroll	

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	<p>requested that there be more quality time for Commission discussion. Commissioner Cassidy recommended that issues be prioritized but that resources should also be included in the discussion. Commissioner Surratt expressed his appreciation for the work being done by the staff. Commissioner Joeckel stated that there is not enough the nation can do for disabled veterans &amp; that guiding principles are key. Commissioner Bacon reminded the Commission regarding the burdens that fall to the states. Commissioner Jordan cautioned that the Commission should stay focused on the big issues and make the best possible recommendations and not worry about the funding.</p>	
<p><b>Public Comment</b>  Mr. John Vogel</p>	<p>Chairman Scott called upon Mr. Vogel to discuss his perspective on the relationship between IT and the adjudication process. He reminded the Commission that the previous VA/DoD IT presentation is limited to assisting current transitioning service members, but that the majority of the VA workload and backlog is from re-adjudicated claims and delayed filings. He felt that it is a resource issue involving human resources, technology, and funding. When resources are short, VA has traditionally held back IT and training dollars. He suggested that IT dollars should be fenced.</p>	
<p><b>Chairman's Close</b> Chairman Scott</p>	<p>The chairman announced the next meeting would be June 7-8, 2007 at the Washington Plaza Hotel at 10 Thomas Circle, Washington, DC. He adjourned the meeting at 11:10a.m.</p>	

The minutes of May 9-11, 2007, meeting were unanimously approved by the Commissioners in attendance at the June 7, 2007 meeting in Washington, DC.