

DISABILITY RATINGS FOR GUARD AND RESERVE SERVICEMEMBERS

ROA urges Congress to direct the Department of Defense to establish a centralized repository for hard and electronic copies of the RC state, federal, and civilian medical record.

According to a Military Times article, “New data obtained by Veterans for Common Sense under the Freedom of Information Act shows the denial rate for [VA disability] claims filed by reserve component combat veterans is four times higher than for post-9/11 combat veterans who were active-duty members.” Additionally, the article stated, “. . . while guard and reserve members make up 40 percent of post-9/11 combat veterans, they accounted for 60 percent of claim denials.”

<http://archive.armytimes.com/article/20121023/NEWS/210230310/Reservists-more-likely-VA-claims-denied>

Currently, more than 900,000 Guard and Reserve members have been activated for Operation Noble Eagle and Operation Enduring Freedom. Reserve component members will continue to support the nation’s efforts in Iraq and Afghanistan. While these missions do not automatically translate into a disability rating, it is important that Guard and Reserve members have the same opportunity as their active duty counterparts.

In briefings to the Senate, the Department of Defense (DoD) and the Department of Veterans Affairs (VA) acknowledged that RC decentralized medical records were the cause of delays and problems for RC disability applicants. Decentralization causes great difficulty in assessing medical conditions that are being considered for disability.

“In addition, the Army Reserve and National Guard and the Navy had inefficient procedures in place for transferring STRs. DoD’s failure to consistently make timely and complete STRs available to the VA likely contributed to delays in processing veterans’ benefit claims.”

Audit of the Transfer of DoD Service Treatment Records to the Department of Veterans Affairs, DODIG-2014-097 (Project No. D2014-D000RF-0054.000), page i.

Paper copies of medical records for the RC can be found at local installations, at temporary duty locations, or at civilian medical provider offices. The active component is developing an electronic health record that will help to consolidate some of the RC medical records, but at this time it will not be fully developed and deployed until after 2025. Until DoD has a fully functioning electronic health record that includes the capability of civilian medical providers to add records, one solution would be to centralize records for RC members.

Susan Lukas/ROA/202-646-7713/26 May 2015