Parsing the Paperless Push: A Study of the Latest Efforts to Automate the Veterans' Claims Process

Emily Woodward Deutsch and Terrence T. Griffin[1]

INTRODUCTION

As the first decade of the 21st century draws to a close, the majority of Americans, including current United States service members and veterans, have grown accustomed to applying information technology in virtually every aspect of their lives. Indeed, young people entering the service today are likely to have become computer-literate before they actually learned to read. They may never have used traditional mail to send a letter or pay a bill, opting instead to conduct all such exchanges online. Moreover, even a great many older service members and veterans are now adept at surfing the internet and can no longer imagine a world without e-mail or text messaging.

In this era where the lines between "virtual reality" and the "real world" are increasingly blurred, the impetus has never been greater to update information systems that remain mired in legacy technology. One such system is the Department of Veterans Affairs' (VA's) model for processing veterans' claims for benefits. Though still largely dependent on hard copies of claims and supporting evidence, this model is being updated to incorporate new information technology platforms that will operate in a paperless environment. In making this transition, VA's ultimate goal is to produce more efficient and consistent decisions on veterans' claims while safeguarding the integrity of their sensitive information.

An article in the first edition of the Veterans Law Review offered an overview of the process for filing and adjudicating

[1] The authors are Associate Counsel at the Board of Veterans' Appeals (BVA), an organization within the U.S. Department of Veterans Affairs (VA) in Washington, D.C.

veterans' claims through the Veterans Benefits Administration[2] and summarized general proposals for streamlining and expediting that process through automation and the use of artificial intelligence tools.[3] This article focuses on specific efforts taking place at various levels throughout the claims process, and including the service departments, VA – comprised of VBA and the Board of Veterans Appeals (BVA)[4] – and the Court of Appeals for Veterans Claims (CAVC)[5] to transition from a disjointed, paper-based approach toward storing service and VA health care records and processing claims to a streamlined, paperless platform for health-care records storage and claims processing.

Part I of this article provides an overview of historic and current efforts to convert hard-copy service department and VA health records to electronic form. This move towards an integrated electronic records storage system is a vital first step in the transition to a paperless veterans claims processing system, which is the focus of Parts II, III, and IV. Specifically, Part II addresses the legal and policy considerations driving VA's efforts to move from a largely paper-based system to a completely paperless claims processing system. Part III details the current state of those efforts at the VA Regional Offices (ROs), the BVA and the CAVC. Finally, part IV identifies various legal and policy challenges posed by the transition to a paperless claims model and VA's plans for addressing those hurdles.

---

[2] The Veterans Benefits Administration (VBA) is the division of VA to which veterans submit initial claims for benefits. It consists of 57 Regional Offices (ROs) nationwide. *See* Regional Office Web Sites, http://www.vba.va.gov/VBA/benefits/offices.asp.

[3] Emily Woodward Deutsch & Michael Donohue, *The Role of New Media in the Veterans Benefits Arena*, 1 Veterans L. Rev. 183 (2009) [hereinafter *2009 VLR Article*].

[4] BVA is the arm of VA charged with reviewing and issuing determinations on VBA rating actions in which veterans have filed formal appeals. Office of Human Res. and Admin., U.S. Dep't of Veterans Affairs, Organizational Briefing Book 42 (2009), *available at* http://www.va.gov/ofcadmin/docs/vaorgbb.pdf.

[5] The United States Court of Appeals for Veterans Claims (CAVC) is the Federal court where claimants can file appeals of any claim denied by the BVA. *Id*.

PART I

The importance and urgency of transitioning to a paperless system for storing service and VA health-care records and processing veterans' claims was recently underscored by President Barack Obama in his announcement of the Joint Virtual Lifetime Electronic Record project.[6] Aimed at today's service members – and tomorrow's veterans – this initiative would create a single electronic repository containing the complete medical histories of men and women in uniform from the day they enter the military.[7] Moreover, after those service members had left the service, their medical histories would be retained for use by VA, which would share access to the Joint Virtual Lifetime Electronic Record.[8] In this way, as the president emphasized, the cumbersome and costly process of transferring service members' records to VA would be eliminated.[9] New veterans would enjoy immediate access to VA services without having to fill out additional paperwork or submit to VA examinations addressing health-care issues that were already covered by their service treatment records. In the event that these new veterans filed for disability benefits, their combined service medical histories would be easily accessible to VA adjudicators, thereby eliminating the extra time required to obtain service records and expediting the overall claims process.

The Joint Virtual Lifetime Electronic Record project is a new initiative and its timetable for completion remains uncertain. Nevertheless, its vision of complete automation and integration of current active service members' and future veterans' health care records is hardly novel. Indeed, the service departments have long faced pressure to convert their existing stockpiles of paper-based service treatment records into a paperless format and to establish a mechanism for seamlessly transferring those records to VA. These next pages provide a look at how service health-care records have been traditionally stored and how the service departments have

[6] Donna Miles, *Obama Announces Joint Virtual Lifetime Electronic Record*, Am. Forces Press Serv., Apr. 9, 2009, *available at* http://www.defenselink.mil/news/newsarticle.aspx?id=53857.
[7] *Id.*
[8] *Id.*
[9] *Id.*

responded to Congressional pressure to automate those records and ease their transfer to VA.

At the outset, it is important to note that there are two types of medical records maintained by the various service departments: individual health records and hospitalization records. Individual health records, commonly called service treatment records, generally contain service members' outpatient treatment and dental treatment records, as well as their induction and separation examination reports. In contrast, hospitalization records contain in-patient treatment the service members undergo while on active duty. Though both service treatment records and hospitalization records document the service members' medical histories while on active duty, the two types of records traditionally were not maintained in the same fashion.

Service treatment records for active duty military personnel historically were housed at the medical facility at their assigned duty station.[10] Upon being transferred to another duty station, service personnel were often given their service treatment records and ordered to provide them to the medical facility at their next duty station.[11]

When service members left the military, their service treatment records were combined with their service personnel record and retired to the National Personnel Records Center (NPRC) in St. Louis, Missouri.[12] In October 1992, however, the Army discontinued the

---

[10] U.S. Dep't of Army, Reg. 40-66, Medical Records and Quality Assurance Administration 17 (Apr. 1, 1987) [hereinafter Army Reg. 40-66]; U.S. Dep't of Navy, Medical Command Instruction 6150.1, Health Care and Treatment Records 15-16 (Feb. 25, 1987) [hereinafter Navy Instruction 6150.1]; U.S. Dep't of Air Force, Reg. 168-4, Air Force Administration of Medical Activities 339 (Apr. 27, 1990) [hereinafter Air Force Reg. 168-4].

[11] Army Reg. 40-66, *supra* note 10, at 17; Navy Instruction 6150.1, *supra* note 10, at 15-16; Air Force Reg. 168-4, *supra* note 10, at 339.

[12] U.S. Dep't of Army, Reg. 640-10, Individual Military Personnel Records 5, 22 (Aug. 31, 1989); U.S. Dep't of Navy, Instruction 5212.5C, Navy and Marine Corps Records Disposition Manual III-6-9 (July 11, 1985) [hereinafter Navy Instruction 5212.5C]; U.S. Dep't of Air Force, Reg. 12-50, 2 Disposition of Air Force Records 320 (Oct. 30, 1987) [hereinafter Air Force Reg. 12-50].

policy of sending service treatment records to the NPRC and began sending these documents to VA's Veterans Records Management Center.[13] Eventually all other branches of military followed suit and the Veterans Records Management Center became the primary repository for veterans' service treatment records.[14] This transfer of service treatment records to the Veterans Records Management Center was significant in that it permitted VA to respond in a more rapid manner to the applications of veterans applying for benefits.[15] Indeed, as noted in an August 1994 Department of Defense report, when service treatment records were first transferred to the NPRC, the amount of time required to transfer documents to VA in response to veterans' benefit applications ranged from 37 to 132 days.[16] By 1994, however, transferring these treatment records directly to VA the response time decreased to 10 to 16 days.[17]

Unlike outpatient service treatment records, inpatient records for active duty service members were traditionally maintained at the facility where the service member received treatment, even after the service member left this duty station.[18] After the period of time prescribed by each service branch, the inpatient records maintained at each military facility were retired to the NPRC, but were not associated with the veteran's service treatment or service personnel records.[19]

The separation of service treatment and service medical records, in paper format, remained the general policy of the branches

---

[13] U.S. Dep't of Army, Reg. 600-8-104, Military Personnel Information Management/ Records 156 (June 22, 2004).

[14] The U.S. Nat'l Archives & Records Admin., Military Medical and Health Records, http://www.archives.gov/veterans/military-service-records/medical.html (last visited Sept. 5, 2009).

[15] U.S. Dep't of Def., Report to Congress on the Transfer of Service Medical Records (Aug. 5, 1994).

[16] *Id*.

[17] *Id*.

[18] U.S. Dep't of Army, Reg. 25-400-2, The Modern Army Record Keeping System 96 (Oct. 15, 1986) [hereinafter Army Reg. 25-400-2]; Navy Instruction 5212.5C, *supra* note 12, at III-6-9; Air Force Reg.12-50, *supra* note 12, at 318.

[19] Army Reg. 25-400-2, *supra* note 18, at 96; Navy Instruction 5212.5C, *supra* note 12, at III-6-9; Air Force Reg. 12-50, *supra* note 12, at 318.

of the military until the Pentagon began larger scale deployments around the globe, which made such a system cumbersome and inefficient. Recognizing the added burden on the respective medical records repositories and the need for life-long care for service members, Congress endorsed a more modern system for storing service members' medical records. In this vein, lawmakers expressed their disdain for the antiquated system of maintaining service members' medical records, stating:

> In our investigation, we were shocked to learn that the Pentagon would spend thousands of dollars training and equipping each soldier, but fail to spend any money in developing a system that would track their health status. Therefore, we would recommend the implementation of a baseline health evaluation prior to deployment; the development of a computerized central database for medical records during deployment and the use of a standardized system of recordkeeping among military branches.[20]

By calling for the automation of health-care records, Congress was in effect urging the service departments – and, by extension, VA – to take a more active role in maintaining accurate medical records and minimizing the risk that those documents might be lost.

So resolute was Congress in its desire to update the service departments' health-care records storage systems that in 1997 it passed 10 U.S.C. § 1074f.[21] This bill mandated that the service departments ensure more uniform documentation of the medical condition of service personnel prior to and after deployment in a combat or peacekeeping capacity. The Pentagon implemented this law with the Department of Defense Directive 6490.2 and

[20] H.R. Rep. No. 105-388, at 132-33 (1997).
[21] 10 U.S.C. § 1074f (1997), *amended by* Pub. L. No. 109-364, § 738(a)-(d), 120 Stat. 2303 (2006) (codified as amended at 10 U.S.C. § 1074).

the Department of Defense Instruction 6490.3.[22] These efforts began to establish some uniformity across the branches of service. Moreover, Gary A. Christopherson, the Acting Principal Deputy Assistant Secretary for Health Affairs of the Department of Defense, made it clear that the Pentagon was working with VA to establish computer-based service health-care records to promote uniformity of record keeping and make such records accessible across agency lines.[23]

Though recognizing the progress that the Department of Defense and VA had made, Congress urged these departments to cooperate further in the development and sharing of electronic-health care records. In a January 1999 report, a bipartisan Congressional commission emphasized that "Servicemembers (sic) and veterans obtain medical care from both the military healthcare system and the VA healthcare system. Commission recommendations seek to expand and improve partnership between the systems and establish an environment fostering increased efficiency."[24] Congress also made it clear that neither department could adequately serve the needs of veterans and service members if there was no cooperation and urged them to work together "[t]o create information systems that facilitate data exchange…[and the] joint procurement of future technology by [their respective] healthcare systems."[25]

An ongoing lack of cooperation between the service departments and VA was not the only stumbling block to the maintenance of accurate service health-care records and the effective delivery of those records to VA. As noted by the General Accounting Office (GAO), permitting active duty service personnel to hand carry

---

[22] U.S. Dep't of Def., Directive 6490.2, Joint Medical Surveillance para. 4.1-4.5 (Aug. 30, 1997); U.S. Dep't of Def., Instruction 6490.3, Implementation and Application of Joint Medical Surveillance for Deployments (Aug. 7, 1997).

[23] *Hearing on War-Related Illnesses and on the VA's Sexual Trauma Counseling Program Before the Subcomm. on Health of the H. Comm. on Veterans' Affairs*, 105th Cong. 2 (1998) (statement of Gary A. Christopherson, Acting Principal Deputy Assistant Secretary for Health Affairs, Department of Defense).

[24] Cong. Comm'n on Servicemembers and Veterans Transition Assistance, Final Report 7 (1999), http://www.vetbiz.gov/library/Transition%20Commission%20Report.pdf.

[25] *Id*.

treatment documents and maintaining inpatient treatment records at multiple locations jeopardizes the security of those records.[26] In response to GAO criticism, the Pentagon announced its intention to develop "computerized digital dog tags" that would store service members' inpatient treatment records in an electronic format and prevent those records from being lost or destroyed.[27]

Prodded by Congress, the service departments' move to a paperless computerized medical records system has already yielded great benefits. An example of the improvement in medical care and accuracy of medical records can be found in the Army's Medical Communications for Combat Casualty Care, or MC4, which was a unit first deployed in 2003.[28] MC4 is divided into five levels of care:

> **Level I:** Medics record patient care on a MC4 handheld device. This handheld device allows the military care provider to record, store, retrieve and transfer "essential elements of patient encounters." This information then becomes part of the service member's electronic service treatment record and is transferred to the next level of care.
>
> **Level II:** Utilizing laptops, medical care providers record vital medical information, document performed medical procedures and treatment and share patient records, while in transit to the medical facility.

---

[26] *See* U.S. Gen. Accounting Office, Medical Records Control 1 (May 4, 1994), *available at* http://archive.gao.gov/t2pbat3/151601.pdf (noting that the possibility of misplacing records continues to be a problem).

[27] Linda D. Kozaryn, *DoD Moves Ahead on Digital Dog Tags*, Am. Forces Press Serv., Oct. 19, 1999, *available at* http://www.defenselink.mil/news/newsarticle.aspx?id=42185. Digital dog tags are more formally known as Personal Information Carriers (PICs). *Id.* Plastic PICs would be worn with the traditional aluminum dog tags and would provide military medical personnel access to a service member's medical records, including information related to allergies and surgeries. *Id.*

[28] U.S. Dep't of Army, Medical Communications for Combat Casualty Care (MC4), About MC4, http://www.mc4.army.mil/about.asp (last visited Sept. 6, 2009).

Level III: Combat support hospital providers use handheld devices and laptops to document inpatient and outpatient care, as well as lab tests, and pharmacy or radiology orders.

Level IV and V: Military medical facilities, such as Landstuhl Regional Medical Center and Walter Reed Army Medical Center, digitally record and retrieve patient information, including combat treatment records.[29]

In the context of VA claims and medical treatment, the MC4 system allows the veterans' electronic service treatment records to be transferred securely and accurately to VA. This electronic system eliminates many of the problems of lost or illegible records related to combat and general in service treatment records handwritten on paper.

For its part, VA has assisted the service departments in developing electronic service health-care records that it can access once the service member leaves the military. In addition, VA has adopted its own computerized systems for storing medical records for veterans in its care, facilitating the rapid exchange of veterans' healthcare information across VA facilities, and allowing veterans to have access to their records and manage their health care needs online.[30] In this regard, veterans have acquired access to "trusted health information, links to federal and VA benefits and resources, [a] personal health journal, [and] online prescription refill[s]."[31] In time, they will also be able to view their appointments, co-payment balances, and portions of their VA medical records electronically.[32]

---

[29] *Id*.

[30] Jonathan B. Perlin, et al., *The Veterans Health Administration: Quality, Value, Accountability, and Information as Transforming Strategies for Patient-Centered Care*, 10 Am. J. Managed Care 828, 832-33 (2004); *see* U.S. Dep't of Veterans Affairs, VistA, http://www.innovations.va.gov/innovations/docs/InnovationsVistAInfoPackage.pdf (last visited Sept. 6, 2009) (providing an overview of VA's electronic health record system); *see also* U.S. Dep't of Veterans Affairs, My HealtheVet, http://www.myhealth.va.gov/ (last visited Sept. 6, 2009) (explaining how veterans can use the My HealtheVet system).

[31] My HealtheVet, *supra* note 30.

[32] *Id.*

Finally, VA has implemented a platform, known as the VA Compensation and Pension Records Interchange (CAPRI), which allows veterans' service-department and VA health-care records to be accessed by personnel charged with adjudicating their claims for VA disability benefits. Currently under CAPRI, claims adjudicators can not only access veterans' electronic service and VA health records but also use that system to develop clinical evidence that would support veterans' claims (such as requesting a VA medical examination).[33] In this way, CAPRI functions as a critical gateway between veterans' electronically stored service records and VA health-care records and the initial adjudicatory stage of the VA claims process, which is the focus of the remainder of this article.

PART II

Veterans' advocates, both within and outside VA, have sounded the call for a completely paperless system for processing VA claims.[34] Their recommendations arise in part from a desire to accommodate increasingly tech-savvy veterans, many of whom balk at having to use "snail mail" to file claims and supporting evidence, as well as receive correspondence and rating decisions.[35] Indeed, other major factors behind the push toward automated claims processing include the growing backlog of claims.[36] The backlog, which has for years been one of VA's chief causes of criticism, is exacerbated by delays in obtaining hard-copy service and VA medical

[33] E-mail from Charles Sener, VA Office of Information Technology, to Emily Deutsch, Associate Counsel, VA Board of Veterans' Appeals (Apr. l 7, 2008, 15:04 EST) (on file with author) [hereinafter Sener E-mail].

[34] Rick Maze, *Senators Push VA to Automate Claims Processing*, FederalTimes.com, Mar. 25, 2009, http://www.federaltimes.com/index.php?S=4006474.

[35] *See* Interview with Michael F. Palmer, Procedures Analyst, VA Compensation and Pension Service, in Wash., D.C. (June 5, 2009) [hereinafter Palmer Interview] (discussing how young veterans, particularly those under age 30, have grown up in a world where all personal and commercial transactions take place online rather than through "snail mail," which is a colloquialism for correspondence sent through the United States Postal Service).

[36] *See The State of the U.S. Department of Veterans Affairs: Hearings Before the H. Comm. on Veterans' Affairs*, 111th Cong. 7 (2009) [hereinafter *February 2009 House Hearings*] (statement of Eric K. Shinseki, Secretary, U.S. Dep't of Veterans Affairs) (noting that VA plans to hire 1,100 rating specialists in 2009 to address the claims backlog problem).

records and other pertinent information as well as by concerns over rating inconsistencies and errors (which are apt to occur when time-pressed VA adjudicators are met with paper claims folders containing hundreds, if not thousands, of pages of clinical and lay evidence).[37]

Yet another driving factor of the paperless push is concern over the accidental or deliberate mishandling of veterans' claims information. A particularly egregious example of this occurred at one RO where certain VA representatives willfully misdated claims applications and shredded pertinent evidence in an effort to reduce the apparent time it took to process those claims.[38] The fraudulent practice was discovered in an internal VA audit, which also revealed multiple incidents of document mishandling at other ROs.[39] During a congressional hearing on the matter, one veteran's advocate suggested that the problem could best be remedied by a move to paperless claims processing, which would require the creation of permanent electronic claims record databases that could be protected using encryption software, thus eliminating the opportunity for tampering with or loss of veterans' claims information.[40] Moreover, an electronic claims record database, which could be backed up on multiple servers, would also reduce the likelihood that such records could be accidentally destroyed, as occurred on a massive scale in the 1973 conflagration at the NPRC.[41]

---

[37] *See Document Tampering and Mishandling at the Veterans Benefits Administration: Hearing Before the Subcomm. on Disability Assistance and Memorial of the H. Comm. on Veterans' Affairs*, 111th Cong. (2009) [hereinafter *March 2009 House Hearings*] (statement of Kerry Baker, Assistant National Legis. Director, Disabled American Veterans).

[38] *See id*. (statement of Rep. John J. Hall, Chairman, H. Subcomm. on Disability Assistance and Memorial Affairs) (noting that he and other members of Congress had "tracked the problems brought to our attention with misdating of claims at the New York Regional Office, documents wrongly placed in shredder bins, and denying widows their survivor benefits").

[39] *See id*. (statement of Belinda J. Finn, Assistant Inspector General for Auditing, Office of Inspector General, U.S. Dep't of Veterans Affairs) (describing specific findings of inappropriately handled VA claims documents at Regional Offices in Detroit, Michigan; St. Petersburg, Florida; St. Louis, Missouri; and Waco, Texas).

[40] *Id*. (statement of Kerry Baker).

[41] *See* The U.S. Nat'l Archives & Records Admin., The 1973 Fire at the National Personnel Records Center (St. Louis, MO), http://www.archives.gov/st-louis/military-personnel/fire-1973.html (last visited Sept. 9, 2009) (noting that on "July 12, 1973, a disastrous fire at the NPRC . . . destroyed approximately 16-18 million Official Military Personnel Files").

Even before many of these underlying policy reasons for automating the VA claims process became clear, then–acting VA Secretary Gordon Mansfield announced plans to "create a fully paperless environment for all aspects of [VA's] benefits mission before the end of 2012."[42] That goal has since been affirmed by the current VA Secretary Eric K. Shinseki, although he has cautioned against setting an ironclad date for the establishment of a completely paperless electronic benefits claim system.[43] In recent testimony before the House Veterans Affairs Committee, Shinseki emphasized his intention to move away from a claims processing system in which VA claims adjudicators sit "at a desk with stacks of paper that go up halfway to the ceiling," to an "IT format that allows [VA adjudicators] to do timely, accurate, consistent decision making on behalf of our veterans."[44]

As discussed in further detail, below, pilot efforts have already launched at various VA Regional Offices to transition from the paper-based files currently used to process the majority of veterans' claims to streamlined electronic records, or e-files.[45] In support of these growing efforts, former VA Secretary James B. Peake included as part of the President's 2009 VA budget proposal a request for $17.4 million to expand the use of electronic imaging and scanning of claims evidence to allow for more veterans' claims to be processed in a paperless e-folder format. The current VA budget proposal for 2010 sets aside more than $3.3 billion to upgrade the department's IT infrastructure, including $360 million for the development and implementation of a next-generation electronic VA health-care records and $144 million specifically for the creation of a paperless claims processing system.[46]

---

[42] Memorandum from Gordon H. Mansfield, Acting Sec'y, U.S. Dep't of Veterans Affairs, to Undersec'y for Benefits and Assistant Sec'y for Info. and Tech., U.S. Dep't of Veterans Affairs (Nov. 8, 2007) (on file with author).

[43] *See February 2009 House Hearings*, *supra* note 36 (statement of Eric K. Shinseki).

[44] *Id.*

[45] *See The Use of Artificial Intelligence to Improve the U.S. Dep't of Veterans Affairs' Claims Processing System: Hearing Before the H. Subcomm. on Disability Assistance and Memorial Affairs of the H. Comm. on Veterans' Affairs*, 110th Cong. (2008) (statement of Marjie Shahani, M.D., Senior Vice President of Operations, QTC Medical Services).

[46] U.S. Dep't of Veterans Affairs, VA Budget Fast Facts, http://www.va.gov/budget/summary/2010/Fast_Facts_VA_Budget_Highlights.pdf (last visited Sept. 9, 2009).

Additional funding for the processing of paperless claims is provided under the American Recovery and Reinvestment Act of 2009, which President Obama signed into law in February 2009.[47] Specifically, that Act provides $1.5 million in support of the Paperless Delivery of Veterans Benefits Initiative, VA's prime effort to develop and implement enhanced technologies to support paperless processing of veterans' claims across each of VA's five main benefits areas: Compensation and Pension (C&P), Education, Vocational Rehabilitation and Employment, Insurance, and Loan Guaranty.[48]

As noted in the previous *Veterans Law Review* article, the Paperless Initiative is intended to create a unified system for storing veterans' electronic claims information and allowing that information to be accessed and processed by members of VA and the service branches, as well as by individual veterans and their representatives.[49] Though currently focused at the RO level, the Paperless Initiative is ultimately expected to extend throughout VA and to other entities such as DOD and private service organizations.[50] The current status of the Paperless Initiative is explored in detail in the next section, following a discussion of incremental efforts now underway to automate the processing of certain veterans' claims.

PART III

In advance of its 2012 target date for transitioning to paperless claims processing, VA has launched several pilot programs to electronically develop and adjudicate certain types of veterans' claims. Such initiatives include the Benefits Delivery at Discharge program, the Disability Evaluation System paperless pilot, the Western Area Fiduciary Hub program, and the Post-9/11 GI Bill.

---

47 American Recovery and Reinvestment Act (ARRA) of 2009, Pub. L. No. 111-5, 123 Stat. 115, 199 (2009). This Act grants an additional $50 million to the Veterans Benefits Administration Information Technology Systems. *Id.*

48 U.S. Dep't of Veterans Affairs, Executive Summary of the Paperless Delivery of Veterans Benefits (Apr. 4, 2008) (on file with author); 2 Office of Budget, U.S. Dep't of Veterans Affairs, Congressional Submission, FY 2010 4A-4-5 (2009), *available at* http://www.va.gov/budget/summary/2010/Volume_2-Medical_Programs_and_Information_Technology.pdf [hereinafter FY 2010 Budget Submission].

49 *2009 VLR Article*, *supra* note 3, at 194-95; Sener E-mail, *supra* note 33.

50 Palmer Interview, *supra* note 35.

Benefits Delivery at Discharge (BDD) – The BDD program is designed to expedite the processing of claims for exiting service members beginning before their separation from active duty.[51] Specifically, this program allows eligible service members to apply for VA disability benefits 60-180 days prior to their discharge date.[52] Such service members can then use the clinical findings noted on their service separation physical examinations as evidence in support of their claims, rather than having to undergo additional post-discharge examinations by VA medical staff.[53]

Since August 14, 2008, all BDD claims and accompanying evidence have been filed and processed electronically, with rating decisions and awards letters also issued in a completely paperless environment.[54] All processing and adjudication of BDD claims is currently handled by VBA personnel at the ROs in Winston-Salem, North Carolina, and Salt Lake City, Utah.[55]

Specifically, BDD claims information is uploaded, stored, and processed in electronic folders, known as "Efolders."[56] The latter form the centerpiece of the "Virtual VA" suite of applications intended to replace the department's legacy system of manual, paper-based, claim processing and eliminate the need for storage of hardcopy claims folders by providing secure and efficient electronic storage of data.[57]

---

[51] U.S. Dep't of Veterans Affairs, VA Pamphlet 21-08-1: Benefits Delivery at Discharge (BDD) (Dec. 2008), *available at* http://www.vba.va.gov/VBA/benefits/factsheets/general/bdd_brochure.pdf.

[52] *Id.*

[53] *Id.*

[54] Office of Bus. Process Integration, U.S. Dep't of Veterans Affairs, Paperless Delivery of Veterans Benefits Initiative (Dec. 4, 2008) (on file with author) [hereinafter Paperless Delivery].

[55] *Id.*

[56] *See* System of Records, 74 Fed. Reg. 14865, 14866 (Apr. 1, 2009) (noting that "[t]he electronic folder (eFolder) is an application within the Virtual VA Suite of Applications that replaces manual paper transfer, and eliminates the need for storage of paper claims folders by providing secure and efficient electronic storage of data").

[57] *Id.*

In the first six months of BDD's inception as a paperless system, 23.9 million BDD claims records were uploaded and processed through the system's Virtual VA platform.[58] It has been estimated that at least half of participating veterans and their service representatives in the program currently log into that platform on a regular basis to check the status of pending BDD claims.[59]

Disability Evaluation System (DES) – Like BDD, DES is intended to expedite the process for disabled veterans to obtain VA benefits, though in a procedurally different fashion. In essence, DES affords exiting service members with injuries or other disabilities serious enough to warrant Medical Evaluation and Physical Evaluation Boards, pending discharge, to opt instead for examinations by VA medical personnel.[60] Those examinations can then be used to assign an initial disability rating for VA benefits purposes.[61] While DES is currently available only to exiting service members in the national capital region, plans are in place to expand the program nationally.[62]

Since October 2008, all DES claims information has been uploaded and processed electronically through Virtual VA.[63] Evidentiary records existing only in hard-copy form have been scanned into the electronic platform at the RO in St. Paul, Minnesota.[64]

---

[58] Paperless Delivery, *supra* note 54.

[59] *Id.*

[60] U.S. Dep't of Veterans Affairs, Disability Evaluation System (DES), http://www.vba.va.gov/bln/21/Topics/predischarge/des.htm. When service members have a medical condition (including a mental health condition) which renders them unable to perform their required duties, they may be separated from the military for medical reasons. 10 U.S.C. §§ 1201-1222 (2006). The process to determine medical fitness for continued duty involves two boards - the Medical Evaluation Board and the Physical Evaluation Board – that are charged with making a formal finding that a servicemember is unfit to perform military duties because of physical disability. U.S. Dep't of Def., Instruction 1332.38 Physical Disability Evaluation 14-15 (Nov. 14, 1996); U.S. Dep't of Def., Directive 1332.18, Separation or Retirement for Physical Disability 2-4 (Nov. 4, 1996).

[61] Disability Evaluation System, *supra* note 60.

[62] *See* Palmer Interview, *supra* note 35.

[63] Paperless Delivery, *supra* note 54.

[64] *Id.*

Western Fiduciary Hub Pilot – This initiative involves VA's fiduciary program, which "oversees VA benefits paid to beneficiaries who are incapable of handling their funds either because they are minors or because of injury, disease, or the infirmities of age."[65] Specifically, the program allows VA benefits to be paid to another individual or entity -- known as "the fiduciary" -- that is recognized as responsible for managing the beneficiary's financial affairs.[66] As part of its management of the program, VA relies on trained field examiners to visit beneficiaries at their residences to ensure that they are receiving the benefits they deserve from their appointed fiduciaries and to otherwise guard against fraud.

Launched in January 2008, the Western Fiduciary Hub Pilot is specifically intended to centralize the processing of all veterans' fiduciary claims filed in VA's Western Area, which encompasses the ROs of Albuquerque, New Mexico; Anchorage, Alaska; Boise, Idaho; Cheyenne, Wyoming; Denver, Colorado; Fort Harrison, Montana; Honolulu, Hawaii; Los Angeles, California; Manila, Philippines; Oakland, California; Phoenix, Arizona; Portland, Oregon; Reno, Nevada; Salt Lake City, Utah; San Diego, California; and Seattle, Washington.[67] All pension claims at these ROs are now processed at a single fiduciary "hub site" in Salt Lake City. In so doing, VA's goal is to maximize the efficiency and consistency and minimize the risk of error in processing claims for pension benefits by assigning these claims to a cadre of specially trained VBA personnel at a single location.

---

[65] *Oversight Hearing on the Veterans Benefits Administration's Fiduciary Program: Hearing Before the Subcomm. on Disability Assistance and Memorial Affairs of the H. Comm. on Veterans' Affairs*, 109th Cong. (2006) (prepared remarks of Renée L. Szybala, Director, VBA's Compensation and Pension Service).

[66] *Id.*

[67] 3 FY 2010 Budget Submission, *supra* note 48, at 4B-18, *available at* http://www.va.gov/budget/summary/2010/Volume_3-Benefits_and_Burial_and_Dept_Admin.pdf; *see* U.S. Dep't of Veterans Affairs, Western Area Office Locations, http://www2.va.gov/directory/guide/region.asp?ID=1053 (last visited Sept. 7, 2009) (showing the regional offices that are part of the Western Area Office).

The paperless component of this program is still very much in the pilot stage and is more limited than the other initiatives discussed above. It applies principally to field examiners who interview and assess the status of veterans currently receiving VA pension benefits by visiting them at their homes. Specifically, under the paperless pilot, field examiners are afforded access to the VA beneficiaries' medical records and related claims information through Virtual VA. In this way, the examiners can check those records remotely during their periodic at-home visits and update their e-files with their assessments in "real time," thus reducing the risk that such assessments will be premised on inaccurate information or that they will not be properly associated with the rest of the veterans' claims information.[68]

Post-9/11 GI Bill – The Post-9/11 GI bill has been widely hailed as the most ambitious education program for veterans since the post-World War II era GI Bill of Rights.[69] Enacted in June 2008 and scheduled to take effect in August 2009, the Post-9/11 GI Bill is intended to provide veterans, service members, and members of the National Guard and Selected Reserve serving on active duty in the Armed Forces on or after September 11, 2001, with educational and vocational assistance, as well as civilian readjustment support.[70] The benefits afforded to such service members under the bill are expected to vastly exceed those available to them under the legacy Montgomery GI bill.[71]

---

[68] *See* Palmer Interview, *supra* note 35.

[69] Officially known as the Servicemen's Readjustment Act of 1944, this landmark legislation was designed to provide greater opportunities to returning war veterans of World War II. Servicemen's Readjustment Act of 1944 (G.I. Bill of Rights), Pub. L. No. 78-346, 58 Stat. 284. Enacted in June 1944, the bill provided federal aid to help veterans adjust to civilian life in the areas of hospitalization, purchase of homes and businesses, and especially, education. U.S. Dep't of Veterans Affairs, GI-Bill History, http://www.gibill.va.gov/GI_Bill_Info/history.htm (last visited Sept. 7, 2009).

[70] Post-9/11 Veterans Educational Assistance Act of 2008, Pub. L. No. 110-252, 122 Stat. 2357 (codified in scattered sections of 38 U.S.C.); *see generally* Katherine Kiemle Buckley and Bridgid Cleary, *The Restoration and Modernization of Education Benefits under the Post-9/11 Veterans Assistance Act of 2008*, 2 Veterans L. Rev. __ (2010) (discussing the history of the original GI Bill, the benefits afforded under the Post-9/11 GI Bill, and the challenges faced in implementing the Post-9/11 GI Bill).

[71] Enacted in October 1984, the Montgomery GI Bill provides up to 36 months of educational and technical training to active duty and reserve service personnel. 38 U.S.C. § 3013(d) (2006); GI Bill History, *supra* note 69.

VA officials charged with implementing the Post-9/11 GI Bill have told lawmakers that, while components of it will be initially paper-based, a fully automated system is expected to be in place by December 2010.[72] Indeed, as noted by Keith M. Wilson, Director of VBA's Education Service, the department is taking steps, in partnership with the Space and Naval Warfare Center, to upgrade its existing infrastructure "to design, develop, and deploy an end-to-end solution that utilizes rules-based, industry-standard technologies, for the delivery of education benefits."[73] Moreover, once the post-9/11 GI Bill is converted to a completely paperless platform, that next-generation infrastructure is slated to be modified to apply to other veterans' educational benefits programs. According to Stephen W. Warren, Acting Assistant Secretary for Information and Technology, Department of Veterans Affairs, "[t]his will ensure that all Veterans, from the Generation of WWII Veterans to the latest generation now beneficiaries of the Post 9-11 GI Bill, will benefit from this technological advancement."[74]

In order for the pilot projects summarized above to evolve into a consolidated system that allows for the paperless processing of claims across all five VA business lines – the ultimate objective of the Paperless Initiative – a strategy for integrating and expanding these diverse programs must be devised. To meet this challenge, VA tapped Electronic Data Systems Corporation (EDS), a Plano, Texas-based subsidiary of Hewlett Packard Inc., to serve as the lead systems integrator contractor (LSIC) in the Paperless Initiative.[75] Under the initial LSIC contract, valued at approximately $18 million, EDS was charged with designing a technology solution to support enhanced paperless claims processing capabilities across VA.[76]

---

[72] *State-of-the-Art IT Solutions for VA Benefits Delivery: Hearings Before the S. Comm. on Veterans' Affairs*, 111th Cong. (2009) [hereinafter *March 2009 Senate Hearings*] (statement of Keith M. Wilson, Director, Education Service, Veterans Benefits Administration).

[73] *Id.*

[74] *Id.* (statement of Stephen W. Warren, Acting Assistant Secretary for Information and Technology, U.S. Dep't of Veterans Affairs).

[75] *Id.* VA awarded the LSI contract for the Paperless Initiative to EDS in September 2008. *Id.*

[76] E-mail from Michael F. Palmer, Procedures Analyst, VA Compensation and Pension Service in Wash., D.C., to Emily Deutsch, Associate Counsel, VA Board of Veterans' Appeals

Scott A. Gaydos, an application services executive at EDS, described his firm's role as LSIC in his March 2009 testimony before the Senate Committee on Veterans' Affairs, as follows:

> As the LSIC for the Paperless Delivery of Veterans Benefits Initiative, EDS is assisting VA in defining the overall system solution, developing functional requirements, developing Program Office planning and guidance, and defining systems architecture. As system components are developed, the LSIC will assist in installing and integrating components into the solution, as well as testing, operating, maintaining, and transitioning the system solution to the Government.[77]

Although VA has since decided not to continue its LSIC contract with EDS, the agency remains committed to the overarching goal of integrating the discrete components of VA's automated claims infrastructure.[78] Those components include the CAPRI application, which, as noted in Part I, allows VA adjudicators at the RO level to access veterans' electronic service and VA health records, as well as the Veterans Services Network (VETSNET), VA's electronic platform for administering compensation and pension benefits.[79] Indeed, for the Paperless Initiative to succeed, it is essential that these and other discrete VA electronic platforms become fully interoperable so that claims information may be seamlessly transferred from one platform to

---

(Aug. 18, 2009, 09:07 EST) (on file with author) [hereinafter Palmer E-mail]; *see March 2009 Senate Hearings*, *supra* note 72 (statement of Kim A. Graves, Director, VBA Office of Business Process Integration).

[77] *March 2009 Senate Hearings*, *supra* note 72 (statement of Scott A. Gaydos, Application Services Executive, EDS).

[78] *See* Palmer E-mail, *supra* note 76.

[79] *March 2009 Senate Hearings*, *supra* note 72 (statement of Kim A. Graves) (noting that CAPRI "assists in a seamless share of relevant, but necessary information between" VA health-care providers and VBA adjudicators and explaining that VETSNET is a suite of five interrelated software applications that support end-to-end compensation and pension claims processing); *see also* Sener E-mail, *supra* note 33 (discussing CAPRI as a repository of in-service as well as VA medical information).

another.[80] In this way, a veteran who files any type of claim for benefits can have his or her in-service and VA health-care records, as well as any other related evidence, inputted and associated with that claim in his or her e-file.[81] Then, VA adjudicators can process and rate the claim without first having to print out and organize the veteran's information in a hard-copy claims folder, a process that wastes time and presents the opportunity for the loss of or tampering with records, which, as discussed above, are among the key problems VA seeks to address through its transition to a paperless claims model.[82]

According to EDS's Gaydos, the specific components of a fully integrated, interoperable electronic VA claims processing system would include the following:

> **Veteran Facing Portal** to enable veterans and veteran representatives to conduct benefits activities via the Internet.
>
> **Internal Facing Portal** to enable VBA employees to process benefits through electronic access to necessary information (e.g., electronic images, or electronic data) for claims processing.
>
> **Enterprise Content Management (ECM)** to provide a reliable, cost-effective, computer-based utility and the necessary network services for managing the extremely large numbers of electronic images to be captured and accessed anywhere they are needed.
>
> **Correspondence Processing** to provide a simple, accessible, computer-based utility for creating and managing form letters and generating output fulfillment packages.[83]

---

[80] *See* Palmer Interview, *supra* note 35.
[81] *See id.*
[82] *See id.*
[83] *March 2009 Senate Hearings*, *supra* note 72 (statement of Scott A. Gaydos).

In addition to the above components, VA's paperless claims system would contain adjudication support tools to help VBA personnel manage workflow and ensure quality control at various stages of the rating process. For example, such tools might send an electronic alert to specific VBA rating specialists every time new evidence was added to a veteran's e-file in support of a pending claim. Other tools might help VBA personnel ensure that their determinations fully accounted for all evidence of record and were consistent with both past evidentiary findings and current rating criteria.[84] Examples of these adjudication support tools, which would incorporate aspects of Artificial Intelligence, were the topic of a prior Veterans Law Review article.[85]

In developing its fully integrated paperless claims model, VA has drawn on lessons learned from similar initiatives in government and industry. As noted by Kim Graves in her testimony before the Senate Committee on Veterans Affairs:

> On January 14 and 23, 2009, we visited the Social Security Administration (SSA) and received a demonstration of their paperless processing capabilities. SSA has been very helpful in sharing information about their business process and technology transformation. We also visited United Services Automobile Association (USAA) Headquarters in San Antonio. USAA's use of today's technologies has helped to form our vision of how we need to serve and communicate with today's Veterans.[86]

In her testimony before the House Committee on Veterans Affairs, Kerry Baker concurred that, in its move toward an integrated paperless claims system:

---

[84] *See id.* (noting that a fully paperless VA claims system would include workflow and rule-based decision support).

[85] *See generally 2009 VLR Article*, *supra* note 3, at 197-207 (discussing different types of adjudication support tools that use Artificial Intelligence).

[86] *March 2009 Senate Hearings*, *supra* note 72 (statement of Kim A. Graves).

The VA would not have to invent the wheel for such an ambitious task—successful examples already exist. For example, an Electronic Disability (eDIB) was a major Social Security Administration (SSA) initiative to automate and improve its disability claims process. Under eDIB, an electronic claims folder was created for individuals applying for Disability Insurance benefits.

Before the implementation of eDIB, the disability claims process involved gathering paper evidence and assembling the documents into a paper-based disability claims folder, exactly like VA's process. The paper folder was then mailed to the SSA components responsible for processing the claim.

Using eDIB, SSA captures disability evidence electronically and stores it in an electronic claims folder. The electronic folder can be easily and instantly accessed by all components involved in processing a disability claim, thereby eliminating the delay involved with mailing paper folders between components.

Under eDIB, any paper medical and non-medical evidence received to support a disability decision is converted to a digital image. To aid in this process, in August 2005, SSA entered into a 5-year Blanket Purchase Agreement (BPA) with Lockheed for nationwide scanning services. Under the BPA, Lockheed scans paper documents, creates digital images, and securely transmits the images to SSA. Lockheed also stores and destroys the imaged paper documents and protects the confidentiality of both the electronic images and the paper documents in its custody. The cost of the scanning service over the 5-year period was estimated at about $124 million.

The SSA contract with Lockheed is only one example of success in transforming large paper-based systems to electronic format. There are many others of varying scale. The required

> technology is more cost effective now than ever. Therefore, the VA could likely reduce costs further by managing such a task internally. Nonetheless, initial contractual agreements are an option at the government's disposal. [87]

While the extent to which VA and its industry partners adopt the SSA-Lockheed model for paperless claims processing remains unclear, there is reasonable confidence that a "large-scale expansion of the Paperless Initiative" will take place by 2010.[88] Moreover, the expectation is that by 2012, that effort should be, if not fully complete, then substantially so. Indeed, by that time it is hoped that veterans should at the very least be able to file any type of VA claim electronically, access the status of that claim in "real time," and receive and exchange correspondence and rating determinations with respect to that claim in a completely paperless environment.[89]

As noted above, efforts to shift to a fully automated VA claims process within the context of the Paperless Initiative have principally taken place at the RO level. With that effort coming closer to fruition, however, VA is now taking steps to automate the adjudication of claims that reach the appellate stage.

Beginning in Fall 2008, BVA launched a pilot program to adjudicate a handful of appeals that were originally developed in a paperless format as part of the BDD pilot effort, described above.[90] A select number of Veterans Law Judges, attorneys, and administrative support personnel at BVA have been trained to use the "Virtual VA" platform to access the documentation underlying the appealed BDD claims – including all service and post-service medical records, RO correspondence, rating actions, and statements of the case.[91] Additionally, if veterans with pending BDD appeals

---

[87] *March 2009 House Hearings*, *supra* note 37 (statement of Kerry Baker).
[88] *March 2009 Senate Hearings*, *supra* note 72 (statement of Kim A. Graves).
[89] *See* Interview with John J. Crowley, Veterans Law Judge, Board of Veterans' Appeals, in Wash., DC (May 5, 2009) [hereinafter Crowley Interview].
[90] *Id.*
[91] *Id.*

submit additional evidence directly to BVA, there is a mechanism in place for scanning in that evidence and uploading it as part of the paperless record.[92] Moreover, the BVA adjudicators trained in Virtual VA are now able to issue decisions on BDD appeals that become part of the paperless record. However, it appears that pursuant to current federal regulations, those decisions must be still printed out and signed with a "wet signature" in order to become official; they are then scanned into the paperless record.[93]

While BVA's program for adjudicating paperless appeals remains modest in scale, plans are underway to expand the effort by training more Judges and attorneys in the Virtual VA platform. Approximately 75 Judges, attorneys, and support personnel, or roughly 15-20 percent of BVA, are expected to be trained in this platform by the end of 2010.[94] Moreover, it is a foregone conclusion that the entire BVA workforce will need to receive this training by the time that the transition to paperless claims environment is complete at the RO level. Indeed, it would undermine the spirit of the Paperless Initiative if 100 percent of VA claims were processed electronically at the RO-level, but then had to be printed out and organized in paper-based claims folders once they reached the appellate stage.

In a similar vein, VA is taking steps to achieve interoperability between its paperless claims infrastructure and that of the CAVC. As a federal court, CAVC requires that all appeals documentation be scanned into an electronic record. At present, however, all appeals involving claims that were developed paperlessly within VA must still be printed out and rescanned into a separate electronic record for

---

[92] *See id.*

[93] *Id.*; *see* 38 C.F.R. § 18b.21 (2008) ("The signature of a party, authorized officer, employee, or attorney constitutes a certificate that one of them has read the document, that to the best of that person's knowledge, information, and belief there is good ground to support it, and that it is not interposed for delay. If a document is not signed or is signed with intent to defeat the purpose of this section, it may be stricken as sham and false and the proceeding may proceed as though the document had not been filed. Similar action may be taken if scandalous or indecent matter is inserted.").

[94] *See* Crowley Interview, *supra* note 89.

use by CAVC adjudicators.[95] Obviously, this requirement poses an additional burden on administrative resources that VA is working to address. Specifically, efforts are underway to make VA's paperless platform compatible with CAVC's electronic records system.[96]

PART IV

Notwithstanding the ongoing push towards a completely paperless system for filing, processing, and adjudicating VA claims at the RO, BVA, and CAVC, significant legal and policy hurdles remain to complicate this effort.

For example, as previously noted, it appears that current federal regulations require that BVA decisions have "wet" signatures in order to take effect, thereby preventing the completely paperless processing of claims that reach the appellate stage.[97] In an effort to address this and other regulatory impediments to a fully paperless claims system, VA has convened a working group to review the federal regulations pertaining to veterans' claims -- Titles 38 of the Code of Federal Regulations and the United States Code -- as well as VBA's internal manual for the adjudication of claims for compensation, pension, dependency and indemnity compensation, accrued benefits and burial allowances. The working group is tasked first with identifying any impediments to going paperless found in the above federal regulations and VBA guidelines and thereafter providing potential solutions for the problem areas. This effort is projected to be completed by Winter 2010.[98]

In addition to the federal regulations themselves, more generalized policy considerations appear to stand in the way of or, at the very least, raise questions about the prudence of a completely

---

[95] *See* Palmer Interview, *supra* note 35.
[96] *Id*.
[97] Crowley Interview, *supra* note 89.
[98] E-mail from Barbara Morton, Associate Counsel, Appellate Team, VA Board of Veterans' Appeals, to Emily Deutsch, Associate Counsel, VA Board of Veterans' Appeals (June 10, 2009 13:03 EST) (on file with author).

paperless VA claims environment. These include concerns over the security of an automated system. On the one hand, such concerns run counter to one of the major tenets guiding the push for a paperless VA, namely, that the transition to a fully automated claim platform is more secure than a paper-based system. Nevertheless, it is at the very least conceivable that a security breach involving an automated system– while less likely to occur—would almost surely have greater repercussions than one in which records were confined to paper. Indeed, the infamous May 2006 theft of a VA laptop containing electronic data regarding up to 26.5 million veterans underscores the heightened vulnerability VA faces by moving to a platform in which millions of medical records and other sensitive documentation would be made available to an exponentially greater number of parties than would ever have access to records available only in hard-copy form.[99] Such parties could potentially include not only VA adjudicatory personnel, veterans, and their representatives, but also military and civilian defense personnel, legislative officials, and others having a legitimate interest in accessing and reviewing veterans' claims.

Another related policy concern is whether VA should provide veterans and other parties seeking VA benefits with the opportunity to opt out of a paperless claims processing system. Given that the ultimate goal of the Paperless Initiative is for 100 percent of claims to be processed electronically, it would not appear that claimants would have the right to file for benefits in a legacy, paper-based environment. Whether their inability to do so would pose a violation of their civil liberties is a question that has been implicitly raised in other contexts involving electronic health-care records.[100] Indeed, privacy advocates have argued that all U.S. health care recipients, a population that would presumably include veterans, should have the opportunity

[99] *See* Grant Gross, *Agency Loses Data Containing Veterans' IDs*, PCWorld, May 23, 2006, *available at* http://www.pcworld.com/article/125844.

[100] *See* Declan McCullagh, *U.S. Stimulus Bill Pushes E-Health Records for All*, CNET News, Feb. 10, 2009, http://news.cnet.com/8301-13578_3-10161233-38.html?tag=mncol (discussing potential issues involved with the government's plan to create electronic medical records for all Americans).

to provide their informed consent before their patient records are processed electronically.[101]

CONCLUSION

Notwithstanding the legal and policy hurdles confronting VA's paperless initiative, it appears that, for the reasons discussed above, this effort is on course to achieve its stated goals in the relatively near future. Indeed, the creation of interoperable electronic storage systems for service and VA health-care records, described in Part I, has paved the way for the complete automation of the VA claims system. Nevertheless, as this article has purported to show, the transition from a legacy claims processing system toward a fully paperless one has proven to be neither seamless nor risk-free. Only in contemplating the reasons for this seismic transition, and the challenges it presents, is VA likely to achieve the best possible outcome for its claimants and all concerned parties.

[101] *Id.*