THE VETERANS’ JUDICIAL REVIEW ACT
TWENTY YEARS LATER:
CONFRONTING THE NEW COMPLEXITIES
OF THE VETERANS BENEFITS SYSTEM

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INTRODUCTION

Since Congress passed the Veterans’ Judicial Review Act1 (VJRA) twenty-two years ago, judges and scholars alike have characterized the Department of Veterans Affairs’ (VA) claims adjudication system as a search for balance between a paternalistic charitable model and an adversarial entitlement model. In the paternalistic charitable model, there is “no legally enforceable . . . duty to provide benefits, which are given out of a sense of moral obligation” based upon discretionary judgment.2 In contrast, in an adversarial entitlement model, “benefits provided [are] not mere gratuities to be distributed in an ad hoc and discretionary manner.”3 Unfortunately, this false dichotomy obscures the true conflict afflicting veterans claims adjudication. A closer inspection reveals that the VA system is a paternalistic entitlement system, a hybrid of both characterizations. It is paternalistic because claimants receive significant procedural assistance. It is also an entitlement system because claimants pursue non-discretionary benefits.

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3. Id. at 306. For specific examples of this type of analysis, see Bailey v. West, 160 F.3d 1360, 1365 (Fed. Cir. 1998) (“Since the [VJRA], it appears the system has changed from a nonadversarial, ex parte, paternalistic system for adjudicating veterans’ claims, to one in which veterans like Bailey must satisfy formal legal requirements, often without the benefit of legal counsel, before they are entitled to administrative and judicial review.”) (internal quotation marks omitted); Steven Reiss & Matthew Tenner, Effects of Representation by Attorneys in Cases Before VA: The New Paternalism, 1 VETERANS L. REV. 2 (2009); Levy, supra note 2, at 306. See also Kenneth M. Carpenter, Why Paternalism in Review of the Denial of Veterans Benefits Claims is Detrimental to Claimants, 13 KAN. J.L. & PUB. POL’y 285 (2004); Theda Skocpol, America’s First Social Security System: The Expansion of Benefits for Civil War Veterans, 108 POL. SCI. Q. 85 (1993).
By incorporating both paternalism and entitlement, the VA system suffers from internal conflict: it seeks to comprehensively cover all deserving claimants through substantively and procedurally complex rules intended to address all possible fact patterns, yet it also seeks to be informal so as to avoid denying claims on technicalities or requiring applicants to bear the expense of expert attorneys.

Although the motivations behind these two aspects of the VA adjudication system are laudable, independent judicial review under the VJRA has illuminated the core tension between complexity and informality. After Congress authorized judicial review of veterans benefits claims decisions by federal courts, those courts imposed new requirements and standards on the VA system, increasing both transparency and accountability. However, this increase in turn pushed the system toward both complexity and informality, two distinctly different directions, with little introspection regarding the larger effects on the system generally. Compounding the complications brought about by judicial review, both Congress and VA have been altering the system in reaction to these judicial interpretations. As a result, the VA adjudication system today is very different from the one that existed prior to the VJRA, but the adjudication system has not necessarily improved. The challenge for the future will be integrating complexity and informality to produce satisfactory results in an acceptable amount of time.

4. See, for example, 38 C.F.R. § 3.7 (2009), which lists over fifty classes and subclasses of military service, including “[t]hree scouts/guides, Miguel Tenorio, Penedicto Taisacan, and Cristino Dela Cruz, who assisted the United States Marines in the offensive operations against the Japanese on the Northern Mariana Islands from June 19, 1944, through September 2, 1945,” 38 C.F.R. § 3.7(x)(32) (2008), and 38 C.F.R. Part 4, which contains thousands of diagnostic codes used to rate nearly all possible physical and mental disabilities. Schedule for Rating Disabilities, 38 C.F.R. pt. 4 (2008).

5. Walters v. Nat’l Ass’n of Radiation Survivors, 473 U.S. 305, 321 (1985) (observing that Congress intended for VA system to be “managed in a sufficiently informal way” so as to eliminate need for “an attorney to obtain benefits to which a claimant was entitled, so that the claimant would receive the entirety of the award without having to divide it with a lawyer”).

6. See infra Parts III and IV.

7. See infra Part VI.

8. Prior retrospectives on the VJRA have focused on the federal courts’ effect upon and relationship with VA. See Lawrence B. Hagel & Michael P. Horan, Five Years under the Veterans’ Judicial Review Act: The VA is Brought Kicking and Screaming into the World of Meaningful Due Process, 46 ME. L. REV. 43 (1994); Bill Russo, Ten Years After the Battle for Veterans Judicial Review: An Assessment, FED. LAWYER, June 1999. As will be seen, the purpose of this retrospective is to examine the courts’ direct and indirect effects upon veterans law itself.
Part I of this Article reviews the nature of the VA system prior to the Act’s passage in 1988, and explains how the VJRA, although designed to have a limited impact, actually contained the seeds of a drastic overhaul. Part II examines how the efficiency and accuracy of the VA adjudication system has changed since the VJRA. Part III discusses the most significant changes in the decisionmaking process caused by judicial review. Part IV compares these changes in the decisionmaking process to the role courts have defined for claimant participation in the process. This comparison reveals that, although the process has grown more complex, the courts have shielded claimants from the need to understand the process. Part V examines the significant impact congressional and agency reactions to judicial review have had in shaping the development of the process since the VJRA. In conclusion, this Article assesses the current dynamic of the VA system and contemplates the challenges presented by the paternalistic entitlement model. Ultimately, both complexity and informality are characteristics intended to benefit veterans, but none of the stakeholders involved has developed a strategy for reconciling the inherent tension between the two.

I. THE VJRA AND THE END OF THE VETERANS ADMINISTRATION’S NOT-SO-SPLENDID ISOLATION

A. The Veterans Administration Adjudication System Prior to the VJRA

There can be no doubt that the veterans benefits system has moved from a charitable model to an entitlement model.\textsuperscript{9} The bulk of this transformation occurred during the period of “splendid isolation”\textsuperscript{10} prior to the VJRA. During this 200-year period, various offices within the Departments of War, the Interior, and the Treasury made decisions on veterans benefits before VA was created in 1921;\textsuperscript{11} and the decisions of these agencies were not subject to judicial review by federal courts.\textsuperscript{12} This occurred because the first Congress refused to cede final authority over such claims to the judiciary.\textsuperscript{13}

\textsuperscript{9} See Levy, supra note 2, at 307–15 (discussing history of system).
\textsuperscript{11} DEPT. OF VETERANS AFFAIRS, VA HISTORY IN BRIEF 3–8, available at http://www1.va.gov/opa/feature/history/docs/histbrf.pdf (last updated June 10, 2010).
ans to file benefits claims in the federal courts, it granted the Secretary of War and itself the authority to reject decisions of the courts if either suspected “imposition or mistake.” The Supreme Court invalidated this review scheme on the grounds that the judiciary was a co-equal branch that could not issue opinions that the executive and legislature could treat as merely advisory. Rather than accept decisions of the federal courts as binding, Congress replaced the invalid statute with a scheme that excluded judicial review altogether. This immunity from judicial review continued even after the Economy Act of 1933 laid the foundation for the system we know today by abolishing the prior patchwork of benefits laws pertaining to veterans of different wars and conflicts, and giving the President the power to establish a new, unified system through executive orders.

The two levels of the modern veterans claims adjudication system—the regional VA offices (ROs) throughout the country, at which veterans initially file claims, and the Board of Veterans Appeals (BVA) in Washington, D.C., which decides appeals from RO decisions—were established by the end of World War II. Despite the lack of judicial review, pressure from veterans groups shaped

15. Hayburn’s Case, 2 U.S. 409, 410 (1792). Notably, although Marbury v. Madison, 5 U.S. 137 (1803), is commonly cited as the case that established the Supreme Court’s authority to declare a statute unconstitutional, Marbury actually relies upon the Court’s prior decision in Hayburn’s Case:

It must be well recollected that in 1792, an act passed, directing the secretary at war to place on the pension list such disabled officers and soldiers as should be reported to him, by the circuit courts, which act, so far as the duty was imposed on the courts, was deemed unconstitutional.

Marbury, 5 U.S. at 171.
16. See Glasson, supra note 13, at 60–61; Fox, supra note 12, at 4–5.
17. Economy Act of 1933, Pub. L. No. 73-2, 48 Stat. 8, Title I.
18. Id. at §§ 1 (general authority), 3 (power to create disability rating system), 4 (power to define periods of war), 7 (power to define authority of VA), 9 (power to create adjudication system).
the system long before Congress considered the VJRA. For example, although RO decisions originally required no explanation, Congress added the “Statement of the Case” procedure in 1962, which required an RO to explain its decision in detail if a veteran disputed it. Pressure to provide veterans more procedural reforms continued to mount, and VA later adopted by regulation its first formal duty to assist claimants in 1972. This duty to assist requires VA to “assist a claimant in developing the facts pertinent to his claim and to render a decision which grants him every benefit that can be supported in law.” Furthermore, by the time of the VJRA’s enactment, VA had been battling significant calls for judicial review for well over two decades.

Aside from procedure, prior to the VJRA, oversight offices discussed the quality of VA decisions from an entitlement perspective. In 1982, VA’s Office of Inspector General concluded that the rate of errors in benefits decisions was at least fifty percent higher than that documented by the internal reporting system of the adjudication division. Following this finding was a Government Accounta-


22. *Due Process and Appellate Rights*, 37 Fed. Reg. 14,780 (July 25, 1972) (amending 38 C.F.R. § 3.103(a)). This is not to say that VA was unhelpful prior to 1972. Rather, relevant policies were promulgated by directive and not organized or generally available to claimants. *See Due Process and Appellate Rights: Disability, Death Benefits and Related Relief*, 37 Fed. Reg. 10,745 (May 27, 1972) (notice of proposed rulemaking).

23. *Due Process and Appellate Rights*, 37 Fed. Reg. 147,80 (July 25, 1972) (amending 38 C.F.R. § 3.103(a)).

24. Donald Ivers, Judge (ret.), U.S. Court of Appeals for Veterans Claims, Remarks at the Tenth Judicial Conference of the Court of Appeals for Veterans Claims (Apr. 14–15, 2008), in 22 Vet. App. at XLV (2008) [hereinafter Judge Ivers Remarks]. Judge Ivers was General Counsel of VA from 1985 until he was appointed as one of the original judges of the CAVC. Bills concerning judicial review passed the Senate four times, but each died in the House. *See S. 330, 96th Cong. (1979); S. 349, 97th Cong. (1982); S. 636, 98th Cong. (1983); S. 367, 99th Cong. (1985).*

25. *See U.S. Gen. Accounting Office, Improved Productivity Can Reduce the Cost of Administering Veterans Benefits Programs*, GAO-83-12, 6 (1982) [hereinafter Publ’n No. GAO-83-12] (citing VA Office of Inspector General, Dep’t of Veterans Benefits Statistical Quality Control For Benefits Authorizations (1982)). The Author requested a copy of the Inspector General’s report pursuant to the Freedom of Information Act, but was informed that it had been destroyed pursuant to VA’s records retention policy. Letter from Shirley J. Landes,
bility Office (GAO) report questioning the productivity and staffing practices at the VA regional offices.\textsuperscript{26} Several years later, the GAO found a number of “significant problems” in claims development, adjudication, and notice procedures in its efforts to calculate the extent of errors in VA claims processing.\textsuperscript{27} Many of these reports assumed that each veteran’s benefits claim has an objectively correct outcome, consistent with an entitlement perspective. Thus, by the time of the VJRA, veterans benefits were not considered discretionary or subjective.\textsuperscript{28}

\section*{B. \textit{The Many Facets of the VJRA}}

In 1989, the unified front presented by VA, the congressional veterans affairs committees and the major veterans groups that had blocked past pushes for judicial review\textsuperscript{29} finally broke down,\textsuperscript{30} and Congress added judicial review to the system.\textsuperscript{31} However, accountability, not transformation, was the goal. Congress had “little inter-

\textsuperscript{26} See \textit{PUBL'N NO. GAO-83-12}, supra note 25.


\textsuperscript{28} Arguably, the shift to an entitlement mentality began in 1919 when Congress deliberately used “compensation” in Public Law 66-104 (Dec. 24, 1919), rather than “pension.” See \textit{DAVIS R.B. ROSS, PREPARING FOR ULYSSES: POLITICS AND VETERANS DURING WORLD WAR II} 21 (1969). However, the purpose of this semantic change was to limit benefits by linking them to a veteran’s proven loss rather than the nation’s generosity. \textit{Id.}

\textsuperscript{29} See Judge Ivers Remarks, supra note 24, at XLVI (noting that these three groups were collectively known as the “Iron Triangle”). See \textit{generally PAUL C. LIGHT, FORGING LEGISLATION} (1992).

\textsuperscript{30} One commentator described this breakdown as a successful insurgency by the upstart Vietnam Veterans of America against the older, established veterans service organizations. Heller, supra note 20, at 162–64. One Senate staff member has written a comprehensive account of the legislative process that led to the passage of the VJRA, which largely confirms this view. See \textit{Light}, supra note 29 (detailing interplay between judicial review movement and efforts to elevate VA to cabinet department).

\textsuperscript{31} Veterans’ Judicial Review Act of 1988, Pub. L. No. 100-687, 102 Stat. 4105 (codified as amended in scattered sections of 38 U.S.C.). A few commentators would refer to this as a “republican moment,” at which dramatic change was brought to an administrative system by a wave of public sentiment that was able to transcend the entrenched resistance of the established interests. See \textit{James Gray Pope, Republican Moments: The Role of Direct Popular Power in the American Constitutional Order}, 139 U. PA. L. REV. 287, 291–93 (1990).
est . . . in a comprehensive overhaul of . . . VA itself.”

Nonetheless, even though Congress intended the VJRA to be “a fine-tuning process with particular emphasis placed on the format for judicial review,” the VJRA did much more.

1. Two Layers of Judicial Review

The VJRA created two layers of judicial review. The first layer and major innovation of the VJRA was the creation of the U.S. Court of Appeals for Veterans Claims (CAVC), a traditional appellate court that reviews BVA decisions deferentially based on the record at the time of the decision. The CAVC is an Article I court whose judges are appointed for fifteen-year terms. It may decide cases either by non-precedential, single-judge decisions or precedential, panel opinions. Whereas the VA system is non-adversarial and claimant-friendly, the CAVC is an adversarial forum that favors neither side in a case. However, because only claimants may appeal to the CAVC, the court acts as a one-way ratchet that tends to add rules favoring claimants—it is usually confronted with either affirming the status quo (under which the claimant lost before the BVA) or ruling in favor of the petitioner claimants by expanding substance or procedure in their favor. Rarely would a case present the option of creating rules further restricting claimants’ interests. For this reason, rulings can expand the procedural and substantive rights of claimants beyond the Secretary of Veterans Affairs’ original understanding of a statute or regulation, but the rulings are not needed when the Secretary is already providing the

32. Fox, supra note 12, at 16.

33. Id. This description is somewhat of an understatement. There was a contentious debate over the form that review would take and how intrusive the resulting supervision would be. See Light, supra note 29, at 224–27 (discussing major positions and compromises that resulted in judicial review in its current form).


37. Id. § 7254.

38. Id. § 7252(a).
assistance or benefits requested.\footnote{In the second layer of judicial review added by the VJRA, Congress gave the Federal Circuit limited jurisdiction to hear appeals as of right from the decisions of the CAVC.\footnote{Although either side may appeal from a decision of the CAVC, the Federal Circuit can only review questions of law.}}

The dual levels of appellate review burden the system by adding uncertainty. This is because every interpretation of law by the CAVC is de facto tentative.\footnote{If the CAVC’s decision is directly appealed, it ordinarily adds a year or more of waiting before the Secretary knows what the final rule will be so that he or she can adjust the agency process accordingly if the rule requires such an alteration.\footnote{If it is not directly appealed, it may still be challenged in the appeal of a later case, sometimes years later. Whether or not the appeal is direct, the Federal Circuit can prolong the uncertainty if it

\footnote{The Chief Judge of the CAVC has told Congress that “because jurisdiction exists in another Federal appeals court, parties have less incentive to negotiate settlement in the USCAVC; a losing party can once again argue its case in the Federal Circuit.” Battling the Backlog Part II: Challenges Facing U.S. Court of Appeals for Veterans Claims: Hearing Before the S. Comm. on Veterans’ Affairs, 109th Cong. 17 (2006) (statement of William P. Greene).}}

disapproves of the CAVC’s ruling on a procedural issue and remands for further proceedings without explaining what the correct procedure should have been,44 which can add many years before a final ruling is provided.

Given that the Federal Circuit decides “only a small number of its appeals on the merits,”45 it often takes years before the court weighs in, and its opinions, as noted above, can result in traumatic change or great uncertainty that trickles down through the system.46 For example, in Vazquez-Flores v. Peake,47 the CAVC held that VA’s notice duty under 38 U.S.C. § 5103(a) was substantially more demanding than VA had interpreted it to be.48 In his annual report for fiscal year 2008, the Chairman of the BVA noted how significant the CAVC ruling was, and commented that “[t]he Board [had] worked with [the rest of the VA adjudication system] to develop procedures that would provide the necessary notice with the least possible disruption to the processing of current claims and appeals.”49 Subsequently, the Federal Circuit reversed the CAVC decision and nullified the need for the changes developed by the Board.50 This kind of traumatic change and corresponding uncertainty have resulted in friction between the two courts’ decisions.51 This is not to say that the Federal Circuit has no regard for CAVC rulings or that it is oblivious to these potential effects,52 but it is

45. Id. at 220.
46. See id. at 222–24; see also James D. Ridgway, Why So Many Remands?: A Comparative Analysis of Appellate Review by the United States Court of Appeals for Veterans Claims, 1 Veterans L. Rev. 113, 144–45 [hereinafter Ridgway, Why So Many Remands] (discussing numerous Federal Circuit decisions over six years disapproving CAVC’s attempts to formulate rule of prejudicial error notice violations under 38 U.S.C. § 5103(a) (2002)).
51. See Allen, Significant Developments, supra note 35, at 523–24 (observing that opinions of CAVC and Federal Circuit convey “a certain sense of distrust between them” and “tension” that contributes to “the sometimes odd interaction between them”).
52. See Emenaker v. Peake, 551 F.3d 1332, 1339 (2008) (“[B]ecause it would be imprudent for us to address the issue without the benefit of its having been properly presented to, and decided by, the Veterans Court, we decline to address the issue in the first instance.”). Recently, the Supreme Court reversed the Federal
inevitable from the dual layers of appellate review chosen by Congress that the VA adjudication system is often charting a course through a suddenly shifting landscape of precedential case law.53

2. Attorney Involvement

One change that flowed naturally from the advent of judicial review was the revision of a Civil War-era statute that severely limited compensation of attorneys assisting in veterans benefits claims.54 Although a small number of powerful claims agents had dominated the landscape of veterans benefits claims in the post-Civil War era,55 by the time of the VJRA, a vast network of pro bono non-attorney representatives sponsored by veterans service organizations had replaced them.56 The VJRA changed this setup by permitting appellants at the CAVC and Federal Circuit to hire attorneys and, if the matter were remanded, to keep them before all levels of VA.57

Although Congress opened the door to attorneys, it could not force them through it. The statute’s design may have contributed to the slow increase in attorney participation. The VJRA restricted attorney compensation58 and allowed non-attorney practitioners such as veterans service officers (VSOs) employed by the major veterans organizations, who practiced before the BVA, to appear

Circuit’s decision in Sanders v. Nicholson, 487 F.3d 881 (2007). The Court noted that the Federal Circuit’s jurisdiction was limited, and that “the Veterans Court, which has exclusive jurisdiction over these cases, is likely better able than is the Federal Circuit to exercise an informed judgment” about the correct outcome of fact-specific problems. Shinseki v. Sanders, 129 S. Ct. 1696, 1707 (2009).


55. Richard Severo & Lewis Milford, The Wages of War: When America’s Soldiers Came Home—From Valley Forge to Vietnam 171 (1989) (stating that one observer in 1880 estimated that over 85% of all pending pension claims filed were controlled by fewer than 100 lawyers).


58. Id.
before the CAVC. One scholar, recounting the history of the VJRA, asserted that Congress intentionally designed the Act to be hostile to attorney involvement in the system, which had been dominated by non-attorney service officers from the major veteran service organizations for most of the twentieth century. Additionally, it is not clear that any veterans organizations actively encouraged attorneys to practice veterans law after the VJRA. Furthermore, many attorneys may have doubted whether developing a veterans law practice would be lucrative enough to justify having to learn an unfamiliar area of the law.

Unsurprisingly, in the first decade of the CAVC, appellants were overwhelmingly pro se. Initially, attorneys appeared in fewer than a quarter of the first 5117 cases decided by the CAVC. In fiscal year 1992 (the first year for which the BVA published statistics), attorneys appeared in only sixty-three of the 33,483 cases decided by the BVA. Even today, there are fewer than 500 attorneys nationwide whose practices are primarily in veterans law, despite the fact that the number of veterans benefits claims is more than twice the total of all cases filed in the federal district

60. See Heller, supra note 20, at 169–70. See generally Davis R.B. Ross, Preparing for Ulysses: Politics and Veterans During World War II 10–11 (1969) (describing how American Legion built influence prior to World War II by developing network of “service officers” to assist both members and non-members in pursuing claims).
61. See infra note 199.
62. See e.g., Richard L. Revesz, Specialized Courts and the Administrative Lawmaking System, 138 U. Pa. L. Rev. 1111, 1164 (1990) (“When a court’s procedures are not common to those of other courts, the high cost of becoming familiar with such procedures provides serious disincentives for lawyers to practice before the specialized court only occasionally.”).
63. Fox, supra note 12, at 229–30. See U.S. COURT OF APPEALS FOR VETERANS CLAIMS, ANNUAL REPORTS, 1999–2008, http://uscourts.cavc.gov/documents/Annual_Report_-_20081.pdf. However, in fiscal year 2008, attorneys appeared in 76% of the cases by the time of resolution by the CAVC. Id. That same year, the number of cases handled by attorneys at the BVA had risen to 3467. BVA CHAIRMAN’S REPORT FOR FISCAL YEAR 2008, supra note 49, at 23. That is still only 7.9% of the cases before the BVA. Id.
As a result, even after twenty-two years of judicial review, cases involving claimants without attorney representation dominate the landscape of veterans law.68

Despite the prevalence of pro se litigants, the reintroduction of attorneys is a primary cause of more complex procedures for two reasons. First, by allowing attorneys to become involved only after the record on appeal is closed, the VJRA facilitates the complication of claim adjudication procedure.69 On appeal, although attorneys can argue for reversal, in most situations it makes tactical sense to focus on arguing that procedural errors require a remand, so the case returns to the BVA where the record is reopened and issues can be fully developed.70 For example, a lawyer who becomes involved at the CAVC level may realize that the veteran did not previously understand that his medical evidence was legally inadequate for some reason, such as his or her doctor’s failure to state any rationale for the conclusion in the opinion. In this situation, ultimately prevailing on the merits depends on obtaining a remand from the CAVC on procedural grounds so that the attorney can introduce a new opinion to remedy the problem, regardless of the basis of the remand. Thus, the VJRA implicitly encourages attorneys to use the one-way ratchet of judicial review to expand the
procedural complexity of the system in the interest of generating remands.

Second, attorneys have taken a legislative advocacy role. For example, the National Organization for Veterans Advocates (NOVA), founded in 1993 and composed primarily of attorneys, has become a significant force in Congress on issues relating to the VA adjudication system. In this role, NOVA often promotes additional procedures in the name of protecting veterans. For example, NOVA Executive Director Richard Cohen recently advocated legislation to create a class-action procedure for veterans claims, in order to manage what issues the CAVC decides and to make the notice requirements of 38 U.S.C. § 5103(a) in a more detailed manner. Although its motives are laudable, such policies also have an inherent tendency to promote complexity.

3. Statutory Duty to Assist

Another watershed aspect of the VJRA was a codified general duty for the Secretary to assist claimants. Prior to the VJRA, Congress required the Secretary to furnish applications to claimants and to inform them when an application was incomplete. The Secretary’s duty to provide more general assistance—such as gathering service medical records and other supporting documents—existed only in regulations. In contrast, the VJRA requires the

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73. See, e.g., Legislative Hearing on H.R. 952, the “Compensation Owed for Mental Health Based on Activities in Theater Post-Traumatic Stress Disorder Act”: Hearing Before the H. Comm. on Veterans’ Affairs, 111th Cong. 11 (2009) (testimony of Richard Paul Cohen, Executive Director of NOVA) (equating incorrect denial of veterans benefit claim with conviction of innocent criminal defendant).
78. 38 C.F.R. §§ 3.102 (stating Secretary’s duty to decide claims based upon all “procurable” evidence), 3.103 (“It is the obligation of the [VA] to assist a claim-
Secretary to assist a claimant “in developing the facts pertinent to the claim.”

The Senate Committee report on the Act indicates that Congress intended the section to “[c]odify . . . VA’s present practices of providing claimants all reasonable assistance in the development of claims and construing the evidence liberally in favor of the claimant [so that they] are not lost in reaction to the provision . . . authorizing judicial review of final decisions denying claims.” At the very least, elevating the duty to assist from a regulatory requirement to a statutory requirement lowered the level of deference owed by the courts to the Secretary’s interpretation. In practice, the Secretary’s duty to assist, particularly by providing medical examinations of claimants, became a central—if not the central—battleground in the CAVC’s jurisprudence. Nonetheless, as will be shown, the central cause of this duty-to-assist litigation—the expulsion of staff physicians from VA’s adjudication process—did not occur until later.

4. Other Important Changes

The VJRA added other elements to the system as well. First, the VJRA imposed a statutory requirement on the BVA to provide hearings at ROs by a “traveling section” of the BVA. Previously, the BVA provided such hearings on an ad hoc and discretionary basis, so the new law dramatically increased the workload on the BVA. In fact, the BVA held 880 hearings in fiscal year 1991 as compared

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82. For a comprehensive review of the court’s case law relating to the duty to assist, see Veterans Benefits Manual 933–41 (Barton F. Stichman & Ronald B. Abrams eds., 2009); see also Fox, supra note 12, at 92–102.

83. See infra Part III.B.

to the 10,652 hearings it held in fiscal year 2008. Second, the VJRA abolishes the presumption that an appellant before the BVA agreed with any determination by the RO that was not explicitly contested, which broadens the scope of issues the BVA is required to address. Third, the VJRA subjects VA’s rulemaking to the notice and comment procedures of the Administrative Procedure Act (APA). Fourth, the VJRA introduced a new level of legislative oversight of VA’s adjudication system by mandating that the BVA Chairman prepare a detailed report for Congress each year. Finally, the VJRA required more detailed decisions by the BVA.

With these profound changes, the VJRA ended the isolation of VA in myriad ways. After its passage, there has been a substantial increase in the interaction between different levels of VA, as well as more interaction with outside actors such as Congress, the federal courts, and attorneys. At its core, it provided a set of tools to review and expand almost every aspect of the adjudication process, including individual decisions, regulations and statutory interpretations, and VA’s internal management issues. Rather than changing the established paternalistic entitlement model of the system, the VJRA brought numerous forms of transparency and accountability to bear upon it, which pushed towards increased complexity.

II.
OUTPUT OF THE VETERANS BENEFITS ADJUDICATION SYSTEM BEFORE AND AFTER THE VJRA

The changes brought by the VJRA have had a radical impact on the efficiency and accuracy of VA’s ability to adjudicate claims. A consortium of the leading veterans organizations recently concluded that “[j]udicial review of VA decisions has, in large part, lived up to the positive expectations of its proponents,” and a leading academic authority on veterans law opined that “[b]y most

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89. See infra Part III.C.
90. INDEPENDENT BUDGET FOR FISCAL YEAR 2010, supra note 66, at 33.
measurements, the CAVC is doing a good job.” 91 This praise is based on favorable results for veterans.

First, after the passage of the VJRA, VA grants a higher percentage of veterans claims. In the decade prior to the VJRA, VA denied approximately half of the 800,000 benefits claims received each year. 92 Of those 400,000 annual denials, veterans contested an average of 60,000 such denials. 93 The BVA heard 36,000 appeals of these denials, 94 granting 12% and remanding 13% for further proceedings. 95 Twenty-two years after the passage of the VJRA, the numbers—to the extent they are comparable 96—are substantially different. The number of annual “claims” is now near 840,000. 97 Moreover, VA grants roughly 88% of claims for disability compensation 98 as to at least one disabling condition. 99 During fiscal year

91. Fox, supra note 12, at 251. Even more recently, another law professor who has studied the CAVC commented that judicial review has been successful, particularly in increasing the uniformity and predictability of VA decision making, enhancing the actual and perceived fairness of the system, and improving the overall quality of VA decisions. Veterans’ Disability Compensation: Forging a Path Forward: Hearing Before the S. Comm. on Veterans’ Affairs, 111th Cong. (2009) [hereinafter Forging a Path Forward Hearing] (testimony of Professor Michael P. Allen, Stetson University College of Law).

92. Fox, supra note 12, at 13.

93. Id.

94. An appeal may not result in a BVA decision for several reasons. In particular, benefits may be granted by the RO on review before the appeal is certified, or the appellant may fail to complete the appeal by filing a Substantive Appeal alleging specific allegations of error. See Ridgway, Why So Many Remands, supra note 46, at 148–49.

95. Fox, supra note 12, at 14.

96. Although VA reports statistics on “claims,” it uses the term to refer to applications received instead of individual claims for benefits. Ridgway, Why So Many Remands, supra note 46, at 145–47. Recent trends show that the number of individual benefits claims per application has been rising in recent years. See Veterans for Common Sense v. Peake, 563 F. Supp. 2d 1049, 1070 (N.D. Cal. 2008); Institute of Medicine, supra note 67, at 169. Moreover, between ten and twenty percent of all applications have new claims raised during the processing of the initial claims. Veterans for Common Sense, 563 F. Supp. 2d at 1072. Hence, the available numbers tend to obscure a more substantial increase in the number of individual benefits decisions that VA makes each year.


98. In fiscal year 2006, 654,000 of the 806,000 claims received by VA were claims for compensation. Institute of Medicine, supra note 67, at 169.

2007, the BVA granted 21% of the claims appealed to it and re-
manded over 35%.100

Second, in addition to the increased approval rates, the am-
ount of compensation awarded has also risen. VA can rate a vet-
eran’s disabilities anywhere between non-compensable to 100%
compensable, in 10% increments.101 “In fiscal year 1987, [VA] paid
about $14.3 billion [$26.8 billion in 2008 dollars102] in disability
benefits to 3.8 million veterans.”103 That is an average of $7,060 per
recipient in 2008 dollars. In fiscal year 2008, VA paid approximately
$38 billion to 3.4 million veterans.104 That is an average of
$11,200 per recipient: an increase of 59%.105 Accordingly, twenty-
two years after the passage of the VJRA, a veteran applying for ben-
fits has a substantially higher chance of at least partial success and is
also likely to receive substantially more compensation.106 In this

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100. JAMES P. TERRY, FISCAL YEAR 2007 REPORT OF THE CHAIRMAN, Bd. of Vet-
erans’ Appeals 19 (2008) [hereinafter BVA CHAIRMAN’S REPORT FOR FISCAL YEAR
2007]. These numbers have been relatively stable. In the 2006 fiscal year, 19%
were granted and 32% were remanded. JAMES P. TERRY, FISCAL YEAR 2006 REPORT
OF THE CHAIRMAN, Bd. of Veterans’ Appeals 19 (2007) [hereinafter BVA CHAIR-
MAN’S REPORT FOR FISCAL YEAR 2006]. In fiscal year 2005, 21% were granted and
39% were remanded. JAMES P. TERRY, FISCAL YEAR 2005 REPORT OF THE CHAIRMAN,
Bd. of Veterans’ Appeals 17 (2006).


102. See ROBERT C. SAHR, CONSUMER PRICE INDEX (CPI) CONVERSION FACTORS
1774 TO ESTIMATED 2019 TO CONVERT TO DOLLARS OF 2008, http://oregon-
state.edu/cla/polisci/faculty-research/sahr/cv2008.pdf (presenting CPI conver-
sion table) (last visited Jul. 3, 2010).

103. PUBL’N NO. GAO-89-9, supra note 27, at 8.

104. Veterans for Common Sense, 563 F. Supp. 2d at 1069.

105. This actually understates the increase because the real value of compen-
sation rates has declined. For example, in 1987 the compensation for a total disa-
bility rating was $1411 per month ($2647 per month in 2008 dollars). 38 U.S.C.
§ 314 (1987). By 2008, that rate had declined 6.6% in real value to $2471. 38
U.S.C.A. § 1114 (West 2008). Thus, the increase has occurred despite a decline in the
real value of compensation rates. Although it is not entirely clear why the
number of recipients has declined by 400,000, it seems likely due to the declining
population of World War II veterans. Between 1994 and 2007, the number of liv-
ing WWII veterans declined from 7.8 million to 2.9 million. Compare U.S. Census
gov/prod/1/gen/95statab/defense.pdf, with U.S. Census Bureau, 1995 Statis-
tical Abstract of the U.S., Table 576, http://www.census.gov/prod/1/gen/95
statab/defense.pdf.

106. This is not to say that these are attributable entirely to the VJRA. Fur-
thermore, it can be debated whether this is a positive development. See generally
Michael Waterstone, Returning Veterans and Disability Law, 85 NOTRE DAME L. REV.
1081 (2010). Some have argued that the system is fundamentally flawed because
“[t]he entire system seems designed to encourage chronic disability.” David
sense, judicial review has had the effect desired by veterans advocates: it has preserved and enhanced the entitlement system.

However, the overall value of judicial review has also been questioned, primarily because the adjudication process takes dramatically longer to complete without a corresponding increase in accuracy. Prior to the VJRA, VA took an average of 106 days to adjudicate a claim for benefits. As of the fiscal year 2008, that time had risen to 183 days. Although that change is substantial, it is dwarfed by the increase in appellate processing time within the agency. Between the fiscal years 1991 and 2008, the average time to process an appeal has more than doubled from 462 days to almost three years. As noted above, it is increasingly likely that an agency appeal will lead to a remand and even more delay before a final decision is reached. This problem is not a recent development. For example, in 2000 the GAO reported that VA’s backlog of veterans getting PTSD treatment from the VA report worsening symptoms until they are designated 100 disabled—at which point their use of VA mental health services drops by 82 percent). In this view, the system encourages veterans to focus—consciously or unconsciously—on their disabilities, rather than on trying to reintegrate with normal life.


109. Veterans for Common Sense, 563 F. Supp. 2d at 1070. By way of comparison, the average time for an initial decision in a social security disability claim currently hovers around 120 days. See SOC. SEC. ADVISORY BD., DISABILITY DECISION MAKING: DATA AND MATERIALS 84 (2006) [hereinafter DISABILITY DECISION MAKING], available at http://www.ssa.gov/sumrDisabilityChartbook.shtml.


111. BVA CHAIRMAN’S REPORT FOR FISCAL YEAR 2008, supra note 49, at 19. The VA adjudication system is not the only one so afflicted. In the twenty years between 1985 and 2005, the processing time for an administrative appeal of a social security disability claim nearly tripled from approximately 160 days to 422 days. DISABILITY DECISION MAKING, supra note 109, at 85. This has prompted similar criticisms of that system. See Paul R. Verkuil & Jeffrey S. Lubbers, Alternative Approaches to Judicial Review of Social Security Disability Cases, 55 ADMIN. L. REV. 731, 768 (2003).

112. See supra notes 96 and 100 and accompanying text.
claims had been growing since 1996, and that "problems with large backlogs and long waits for decisions have not yet improved, despite years of studying these problems."\textsuperscript{113}

In fairness to VA, the number of compensation claims—the most difficult to adjudicate\textsuperscript{114}—received each year has increased about 53\% over the last decade, from 468,000 to 719,000,\textsuperscript{115} and VA's output has actually increased at a slightly faster pace over that time.\textsuperscript{116} Furthermore, although the adjudication times for appeals are extreme, they affect only a minority of claims. Claimants dispute only a little over 10\% of RO decisions, and the BVA reviews only about 5\% of claims.\textsuperscript{117} Beyond that, only about 0.5\% of cases are appealed to the CAVC,\textsuperscript{118} often resulting in remands and further delay,\textsuperscript{119} and the number of veterans appeals that the Federal

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\textsuperscript{114} Compensation claims are difficult because they often raise complicated issues of medical diagnosis and causation, while most other benefits, such as educational benefits and home loan benefits, are based upon objective criteria that are usually easy to document. As a result, 94.4\% of the appeals decided by the BVA each year involve compensation claims. See BVA CHAIRMAN’S REPORT FOR FISCAL YEAR 2008, supra note 49, at 22; BVA CHAIRMAN’S REPORT FOR FISCAL YEAR 2007, supra note 100, at 19; BVA CHAIRMAN’S REPORT FOR FISCAL YEAR 2006, supra note 100, at 19.
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\textsuperscript{115} U.S. Gov’t Accountability Office, GAO-09-910T, Preliminary Findings on Claims Processing Trends and Improvement Efforts 7 (2009) [hereinafter PUBL’N NO. GAO-09-910T].
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\textsuperscript{116} Id. at 4.
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\textsuperscript{117} See BVA CHAIRMAN’S REPORT FOR FISCAL YEAR 2008, supra note 49, at 18, 21 (analyzing statistics for VA in 2006, in which there were 806,000 applications for benefits filed, 101,000 administrative appeals filed, and 39,000 administrative appeals prosecuted to the issuance of a BVA decision). There are several reasons why an appeal might be terminated before reaching the BVA, including the possibility that further development and review at the RO level will lead to a grant of benefits without reaching the BVA. See Ridgway, Why So Many Remands, supra note 47, at 148–49.
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\textsuperscript{118} Ridgway, Why So Many Remands, supra note 46, at 151.
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\textsuperscript{119} See id. at 152–57.
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Circuit hears on the merits is negligible compared to the overall volume of claims.\textsuperscript{120} Accordingly, although troubling delays plague the appeals process, the overwhelming majority of veterans do not experience them.

Ultimately, the best measure of how well the system is performing is the accuracy of the decisionmaking. One commentator cautioned that "in any large scale benefit program that must make complex factual and legal determinations for a large number of cases, [i]t is easy to focus on the relatively small percentage of cases that are problematic and overlook the majority of cases in which the system works relatively well."\textsuperscript{121} However, the small sample of cases appealed to the CAVC suggests agency errors are frequent, as the CAVC fully affirms fewer than 35\% of the BVA decisions that it addresses on the merits.\textsuperscript{122} On a wider scale, VA’s Office of Inspector General released a report in March 2009 concluding that VA’s internal quality control system was under-reporting errors, and estimated that 203,000 of the 882,000 (24\%) compensation claims decided over a one-year period contained non-technical errors that affected the amount of benefits paid.\textsuperscript{123} This report followed a previous one that found disturbing variances in the treatment of claims between different ROs,\textsuperscript{124} and a 2000 GAO report stating that stricter quality review measures implemented in 1999 showed that initial RO decisions were correct only 68\% of the time.\textsuperscript{125} Thus, there is ample reason to be concerned about how well the current VA adjudication process works.

\textsuperscript{120} See U.S. Court of Appeals for the Federal Circuit, Appeals Filed in Major Origins, available at http://www.cafc.uscourts.gov/pdf/10yrHistCaseldBy-Origin99-08.pdf (showing that Federal Circuit has been receiving about 200 appeals from CAVC each year); Allen, Significant Developments, supra note 35, at 492 (noting that Federal Circuit issued only 63 written opinions on the merits in two years covered by study).

\textsuperscript{121} Levy, supra note 2, at 323.

\textsuperscript{122} See Ridgway, Why So Many Remands, supra note 46, at 154. It is difficult to extrapolate the results from CAVC appeals because there is no basis for determining whether these self-selected, largely pro se appeals are a representative sample of claims decided at the RO or BVA level.

\textsuperscript{123} VA Office of Inspector Gen., Dep’t of Veterans Affairs, Rep. No. 08-02073-96, Audit of Veterans Benefits Administration Compensation Rating Accuracy and Consistency Review ii (2009) (analyzing claims in the twelve months ending in February 2008). The report does not suggest that the errors systematically over- or under-paid claimants. See also U.S. Gov’t Accountability Office, GAO-08-473T, Claims Processing Challenges Persist, while VA Continues to Take Steps to Address Them (2008).


\textsuperscript{125} See GAO Rep. No. GAO/T-HEHS/AIMD-00-146, supra note 113, at 5–6.
In summary, after twenty-two years of judicial review, claims are taking longer for VA to adjudicate, but are producing more favorable results for claimants. Unfortunately, empirical data suggests that a substantial portion of the decisions are unreliable. This raises the question of how the VJRA directly or indirectly caused this situation.

III. JUDICIAL REVIEW AND THE DECISIONMAKING PROCESS

A. Prelude: The Appellate Judges

One of the first steps in implementing the VJRA was for the President to nominate the judges for the newly formed CAVC. Article III appellate judges are frequently drawn from the ranks of the trial judges who, in turn, are often former trial attorneys. It has been argued that this osmosis of experience between levels is a major contributing factor to the rate of affirmances by the appellate courts, due to the tendency of those judges to identify with their brethren “in the judicial trenches.” In contrast, none of the original members of the CAVC, an Article I court, had any direct experience with adjudicating individual claims. Currently, only two of the seven judges have any direct experience litigating veterans claims. Consistent with this trend, none of the judges appointed to the Federal Circuit since Congress passed the VJRA have had any veterans law experience. Thus, the judges conducting judicial review of the VA adjudication system have added new perspectives to the process rather than merely conducting deferential reviews of claims. This characteristic is neither completely positive nor negative, but it does increase the likelihood that such review will alter the status quo and lead to changes in the system, which ultimately leads to less predictability and a longer process for claimants.

128. See Fox, supra note 12, at 260–63 (“Appendix C: Biographies of the Judges of the [CAVC]”).
B. Colvin v. Derwinski and the Separation of Medical and Legal Issues

One major effect not explicit in the VJRA was a makeover of the BVA by removing its staff physicians from the claims adjudication process. Prior to the VJRA, the BVA contained both lawyers and doctors, who reviewed cases in panels of three.131 Although this setup facilitated detailed discussions of medical and legal principles, the BVA did not record those discussions, and its decisions often rejected favorable medical evidence in the claims file while citing only “sound medical principles.”132 The CAVC quickly recognized that continuing this procedure would make judicial review a practical impossibility. Accordingly, in one of its earliest decisions, Colvin v. Derwinski,133 the CAVC declared that the BVA must base its decisions upon “independent medical evidence.”134

The practical effect of this decision was that VA decided to eliminate the physicians on the BVA and the RO rating teams.135 As a result, the BVA and the RO now lack the medical expertise necessary to resolve claims (either favorably or unfavorably) if the medical evidence in the file was inadequate to resolve every medical issue,136 and inadequate medical evidence accounts for about a third of all cases remanded by the BVA.137 The importance of this

132. Id. at 25.
134. Id. at 175.
135. Cragin, The Impact of Judicial Review, supra note 54, at 26. Shortly after Colvin was decided, the Chairman of the BVA publicly discussed how the BVA was having difficulty in deciding how to utilize the physician members of the BVA in light of the CAVC’s decision. See Cragin, supra note 19, at 501–04.
change is difficult to overstate. Prior to the VJRA, the adjudication process was streamlined to gather medical records and put them before a panel of legal and medical specialists for a collaborative decision. After Colvin, VA splintered the process into separate procedures for analyzing medical evidence and then applying legal standards to it. Although the duty to assist was relatively straightforward when it focused on gathering records, Colvin completely changed its focus to generating independent medical opinions.\footnote{This change took a little time to develop. It was not until three years after Colvin that the CAVC explicitly held that the duty to assist “may, under appropriate circumstances, include a duty to conduct a thorough and contemporaneous medical examination.” Caffrey v. Brown, 6 Vet. App. 377, 381 (1994). See generally Fox, supra note 12, at 92–102 (discussing development of CAVC’s duty-to-assist case law). Although VA’s duty to assist has been a statutory and regulatory issue for the last twenty-two years, the Federal Circuit may be on the verge of elevating many of the disputes to the constitutional due process level. See Gambill v. Shinseki, No. 2008-7120, slip op. at 1 (Fed. Cir. Aug. 13, 2009) (Moore, J., concurring) (arguing that claimants may have due process right to “confront” VA doctors who provide medical opinions on their claims, including right to serve them with interrogatories). But see id. (Bryson, J., concurring) (rejecting existence of such right under due process).} In other words, the VJRA indirectly caused the separation of legal and medical expertise within the system, and required the development of a more robust duty to assist to reconnect these halves.\footnote{For a comprehensive review of the role of medical evidence in VA adjudications before and after Colvin, see Ridgway, Lessons the Veterans Benefits System Must Learn, supra note 136.} Thus, it is not surprising that the duty to assist has been subjected to so much litigation, thereby increasing the cost and time of claim adjudication.\footnote{The “selective re-litigation” model would suggest that persistent litigation is a sign that the current rules are inefficient and that litigation will continue until the underlying rules are refined. See E. Donald Elliott, Law and Biology: The New Synthesis?, 41 ST. LOUIS U. L.J. 595, 600–01 (1997).}

C. The Reasons or Bases Requirement

In addition to forcing a remake of the BVA, the CAVC also quickly developed one of the most demanding rubrics of appellate review known in the American legal system. Prior to the VJRA, the BVA’s jurisdictional statute required only that “[t]he decisions of the [BVA] shall be in writing and shall contain findings of fact and conclusions of law separately stated.”\footnote{38 U.S.C. § 4004(d) (West 1979).} The VJRA added a further requirement that the BVA state “the reasons or bases for those findings and conclusions, on all material issues of fact and law}
presented on the record." 142 The early case law of the CAVC quickly turned this standard into an extremely probing form of review. The CAVC did not adopt the traditional appellate rule that a decision below be affirmed if there was any view of the evidence that supported the conclusion.143 Instead the CAVC held that a reasons or bases error "frustrates judicial review," and will ordinarily not reach the merits of an issue in such cases unless the BVA explicitly has made all the relevant findings of fact and explained why any unfavorable findings were resolved against the veteran; in such cases the CAVC remands without addressing the merits.144 As a result of this requirement, the CAVC functionally required the BVA to earn deference before it would substantively review the matter.145 Therefore, "[i]n practice, [the reasons or bases] requirement means that it is not enough that there be sufficient evidence of record to support a BVA decision. Instead, the decision must affirmatively discuss all the relevant evidence and law, and articulate a valid and comprehensive basis for denying benefits."146 This stern standard has been applied by the court "continuously and unremittingly since the Court began deciding cases in 1989."147 Both the BVA and veterans groups have asserted that this standard substantially increased the amount of work and length of time it takes to produce BVA decisions.148 Thus, this standard has added a substantial layer of formality to a once highly informal system.

In retrospect, the development of this standard is not surprising. The original judges of the court had no direct experience with the adjudication of individual claims, they reviewed decisions by BVA members accustomed to announcing conclusions with little explanation, and they handled appeals that were overwhelmingly pro se.149 These circumstances often put the CAVC in the "some-


143. See Gilbert v. Derwinski, 1 Vet. App. 49, 57 (1990) ("[T]he Board must identify those findings it deems crucial to its decision and account for the evidence which it finds to be persuasive or unpersuasive. These decisions must contain clear analysis and succinct but complete explanations. A bare conclusory statement, without both supporting analysis and explanation, is neither helpful to the veteran, nor clear enough to permit effective judicial review, nor in compliance with statutory requirements.") (internal quotation marks omitted).

144. See, e.g., McNeely v. Principi, 3 Vet. App. 357, 364 (1992) (relying on Gilbert to remand matter for Board to rule on issues raised by Court).

145. See Ridgway, Why So Many Remands, supra note 46, at 137.

146. Id. at 136.

147. Fox, supra note 12, at 108.

148. Id. at 109.

149. See supra note 56 and accompanying text.
what awkward position [of] handling review of a pro se appeal
where the appellant [was] totally incapable of articulating, in terms
[the court could] understand, what he or she [didn’t] like about
the decision of the [BVA].”150 Faced with trained VA attorneys
dismantling the arguments made in unsophisticated, informal
b briefs,151 the court developed this aggressive standard to ensure
that the issues were presented in a meaningful way despite the dis-
parity in the skills of the advocates, thereby providing meaningful
review for the mostly pro se appellants.152 “This is not to say that the
CAVC has not been impartial. Rather, to provide meaningful judi-
cial review, the court needed a tool to make sure that issues were
presented to it in a meaningful way despite the disparity in skill of
the advocates before it.153 “The heightened standard for the conclu-
sions of the BVA made its reasoning more transparent, thereby
sharply reducing the BVA’s ability to avoid complex issues with
vague statements and conclusory findings.

150. Nebeker, supra note 64, at XXXIII.
151. In the first “State of the Court” speech for the CAVC, then-Chief Judge
Nebeker compared reviewing such cases to watching “a good tennis player who’s
pitted against a novice. Can’t play worth a damn.” Id. at XXX.
152. The Court also took an active interest in growing the veterans bar. Shortly after the court opened, Chief Judge Nebeker recommended to Congress
that the unspent portion of the CAVC’s budget be used “[t]o develop a pro bono
representation program.” Departments of Veterans Affairs and Housing and Urban De-
velopment and Independent Agencies Appropriations for Fiscal Year 1993: Hearing Before
the H. Comm. on Veterans’ Affairs, 102nd Cong. (1992) (testimony of Chief Judge
Frank Q. Nebeker) (describing recommendation and results). The Veterans Pro
Bono Consortium was created in 1992. See Dire Emergency Supplemental Appropri-
a tions and Transfers for Relief from the Effects of Natural Disasters, for Other Urgent Needs,
L. No. 102-229, 105 Stat. 1701, 1710 (1991); VETERANS CONSORTIUM PRO BONO
org/pdf/ProBono_AR06.pdf.
153. This raises the interesting issue of whether the uniform application of
the reasons or bases requirement continues to be appropriate as more claims are
presented with the full assistance of counsel below. The courts have struggled with
this issue. Compare Comer v. Peake, 552 F.3d 1362, 1368–69 (Fed. Cir. 2009) (“A
liberal and sympathetic reading of appeal submissions is necessary because a pro se
veteran may lack a complete understanding of the subtle differences in various
forms of VA disability benefits and of the sometimes arcane terminology used to
(“[T]he Secretary concede[s] that all pleadings are read sympathetically regardless
of any type of representation.”). See generally Reiss & Tenner, supra note 3.
D. The Right to “One Review on Appeal”

The reasons or bases standard was not the most dramatic constraint on the BVA’s decisionmaking authority. Prior to the VJRA, the BVA consisted of a group of legal and medical professionals who reviewed the decisions of lay RO adjudicators de novo.\footnote{See Cragin, The Impact of Judicial Review, supra note 54, at 24.} The advent of the VJRA’s judicial review limited the ability of the BVA to re-analyze claims when the CAVC held that “fair process” required the BVA to notify a claimant of any authorities that it intended to rely upon that had not been previously raised.\footnote{Thurber v. Brown, 5 Vet. App. 119, 126 (1993).}

Nonetheless, VA continued to look for ways for the BVA to minimize remands and bring finality to claims. In 2002, it proposed to allow the BVA to develop new evidence and consider that evidence in the first instance.\footnote{38 C.F.R. §§ 19.9(b)(2), 20.901(a) (2002).} However, the BVA’s jurisdictional statute provides that “[a]ll questions in a matter . . . subject to decision by the Secretary shall be subject to one review on appeal” by the BVA.\footnote{38 U.S.C. § 7104(a) (2006).} In \textit{Disabled American Veterans v. Secretary of Veterans Affairs (DAV)}, the Federal Circuit concluded that this provision generally prohibits the BVA from considering new evidence.\footnote{Disabled American Veterans v. Secretary of Veterans Affairs, 327 F.3d 1339, 1346–68 (Fed. Cir. 2003).} The \textit{DAV} decision forced VA to disband the BVA’s Evidence Development Unit and cede direct control to the ROs over correcting development problems, such as gathering relevant records and obtaining a comprehensive medical opinion based upon an accurate factual history.\footnote{VETERANS BENEFITS MANUAL, supra note 82, § 13.5.4, at 1040–41.} Subsequently, VA promulgated regulations in response to \textit{DAV} requiring remand of cases not only for consideration of new evidence developed by VA, but also of new evidence submitted by claimants during the appellate process.\footnote{38 C.F.R. § 20.1304(c) (2009); see also 69 Fed. Reg. 53807 (Sept. 3, 2004) (noting that regulation had been modified from version issued in 67 Fed. Reg. 3105 (Jan. 21, 2002) “to conform to a recent decision from the United States Court of Appeals for the Federal Circuit”).} As a result, the BVA’s role shifted from that of a superior trial court toward that of an inferior appellate court. In turn, procedural issues frequently arise when BVA decisions vary from the rationale stated by the RO so as to suggest it considered some piece of evidence or legal authority in the first instance.\footnote{See, e.g., Gardner v. Shinseki, 22 Vet. App. 415, 418 n.2 (2009) (questioning whether \textit{DAV} permits BVA to address merits of claim after reversing RO deci-}
In conclusion, a survey of a few of the key changes demonstrates that judicial review has been about much more than micromanaging specific aspects of the process that existed in 1989. Judicial review has fundamentally reinvented the process in a way that requires many more steps to complete and that demands VA show each step was completed properly. For example, the CAVC helped formalize detailed requirements based upon existing VA authorities in many areas of benefits adjudication with special procedures, including post-traumatic stress disorder claims, the rating of mental disabilities, lost service records, undiagnosed illnesses related to the first Gulf War, exposure to chemical


164. See, e.g., Russo v. Brown, 9 Vet. App. 46, 51 (1996) (holding that court’s case law establishes “heightened duty” to assist when appellant’s medical records have been lost or destroyed); Cuevas v. Principi, 3 Vet. App. 542, 548 (1999) (holding that BVA’s duty to assist claimant in cases in which his service medical records are lost or destroyed “includes the obligation to search for alternate medical records”).

agents\textsuperscript{166} and exposure to radiation\textsuperscript{167}. Increased complexity, such as these new requirements, has become a major issue for the adjudication system, as acknowledged by VA management\textsuperscript{168}, VA adjudicators\textsuperscript{169}, the major veterans service organizations\textsuperscript{170}, and the GAO\textsuperscript{171}.

IV.

JUDICIAL REVIEW AND CLAIMANT RESPONSIBILITY

The increased complexity of the adjudication process stands in contrast to the relaxation of the procedural burdens on claimants. As in other areas of law that are receptive to simplified procedural requirements, such as relaxed pleading requirements for pro se liti-

\textsuperscript{166} See, e.g., Stefl v. Nicholson, 21 Vet. App. 120, 124 (2007) (holding that VA doctor cannot summarily conclude that condition is not related to Agent Orange merely because National Institute of Health has not recognized significant statistical correlation).


\textsuperscript{168} See, e.g., Battling the Backlog Part II: Challenges Facing U.S. Court of Appeals for Veterans Claims: Hearing Before the S. Comm. on Veterans’ Affairs, 109th Cong. 36 (2006) (statement of James P. Terry, Chairman of the BVA) (“[A]ll of us involved in the adjudication system agree that cases have grown more complex, with more numerous issues and much larger records to review and consider. Even a case with just a few simple issues takes more time to process, when, as is increasingly common, the record on appeal may constitute thousands and thousands of pages.”).

\textsuperscript{169} Addressing the Backlog: Can the U.S. Department of Veterans Affairs Manage One Million Claims?: Hearing Before the Subcomm. on Disability Assistance & Memorial Affairs of the H. Comm. on Veterans’ Affairs, 111th Cong. 67 (2009) [hereinafter Addressing the Backlog Hearing] (statement of Michael Ratajczak, Decision Review Officer, VA Cleveland Regional Office on Behalf of the American Federation of Government Employees, AFL-CIO) (acknowledging increased complexity of claims and recommending additional training).

\textsuperscript{170} See, e.g., INDEPENDENT BUDGET FOR FISCAL YEAR 2010, supra note 66, at 30 (“It is vital . . . that Congress recognize that the backlog will not go away overnight: it developed through years of increasing complexity of the claims development process with an overlay of judicial review.”); Examining the Backlog and the U.S. Department of Veterans Affairs’ Claims Processing System: Hearing Before the H. Comm. on Veterans’ Affairs, 110th Cong. 101 (2008) (statement of Gerald T. Manar, Deputy Director, National Veterans Service, Veterans of Foreign Wars of the United States) (testifying that “as we have seen, increased complexity extends the time it takes to resolve claims and increases the opportunity for error”).

\textsuperscript{171} See PUBL’N NO. GAO-09-910T, supra note 115, at 8 (“Another factor impacting VA’s claims workloads—particularly the average time to complete a claim—is the complexity of claims received.”).
gants, the VA system was intended to be informal and claimant-friendly. For example, in another early ruling, the CAVC established that it would interpret pro se arguments liberally. However, the relaxed procedure in the veterans benefits adjudication system extends beyond reading pleadings liberally.

A. Informal Claims and Appeals

One set of procedural rules involves determining when a claim has been raised. Although VA has a formal application for benefits, any “informal communication in writing requesting a determination of entitlement or evidencing a belief in entitlement, to a benefit” constitutes a claim. A veteran is not required to “specify with precision the statutory provisions or the corresponding regulations under which he is seeking benefits.” As the CAVC explained:

It is the pro se claimant who knows what symptoms he is experiencing that are causing him disability . . . . [and] it is the Secretary who knows the provisions of title 38 and can evaluate whether there is potential under the law to compensate an averred disability based on a sympathetic reading of the material in a pro se submission.

Moreover, the Federal Circuit has ruled that it is the responsibility of VA to determine when an informal claim has been filed. Thus, any correspondence to VA that mentions a condition or a

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172. See, e.g., Hughes v. Rowe, 449 U.S. 5, 15 (1980) (“An unrepresented litigant should not be punished for his failure to recognize subtle factual or legal deficiencies in his claims.”).

173. See Hodge v. West, 155 F.3d 1356, 1362 (Fed. Cir. 1998) (stating that courts have “long recognized that the character of the veterans’ benefits statutes is strongly and uniquely pro-claimant”).


176. 38 C.F.R. § 3.1(p) (2009). See also 38 C.F.R. § 3.155(a) (2009) (defining “informal claim” as “[a]ny communication or action, indicating an intent to apply for . . . benefits under the laws administered by the [VA].”)


179. See Moody v. Principi, 360 F.3d 1306, 1310 (Fed. Cir. 2004).
symptom can potentially raise an informal claim, even if the claimant is unaware of it.

Similarly, the CAVC has held that any expression of disagreement with an RO decision will put a claim into appellate status. In *Anderson v. Principi*, the CAVC held appellant’s correspondence stating that he “wonder[ed] why [his claim] wasn’t allowed back in 1985” was sufficient to put his claim into appellate status because it should have been “[l]iberally interpreted” by VA as a Notice of Disagreement with the effective date assigned to his award of benefits. Hence, VA must construe any correspondence expressing dissatisfaction with a decision as initiating an appeal. Notably, these rules have the effect of aiding claimants by expanding the scope and tenure of their claims, while simultaneously increasing the length and cost of adjudication for claimants.

**B. Weak Abandonment**

These generous rules of interpretation are particularly important because the veterans benefits adjudication system has a very weak concept of abandonment. The applicable provision of the Code of Federal Regulations declares claims abandoned when the claimant fails to respond to a VA request for evidence or an order to cooperate with a VA medical technician. However, the CAVC has limited this regulation by holding that a claimant who refuses to cooperate with a VA medical examination ordered in relation to an original claim for benefits is still entitled to a decision on the merits of the claim based upon the evidence in the record. In addition, the CAVC has held that if a claim is put into appellate status by a statement of disagreement with a decision, the appeal remains pending indefinitely. Even subsequent denials of the same claim by an RO will not resolve the appeal if the claim does not reach the BVA. The CAVC later held in *Norris v. West* that if a claim were raised, but not adjudicated, then it would also remain pending indefinitely. Ultimately, the CAVC explained, when an appellant submits a claim or takes an action on a claim that puts the ball into the Secretary’s court, it remains

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181. Id. at 375 (quotations omitted).
there—possibly for years—until the Secretary takes appropriate action to return the onus to the claimant to act within the time periods specified by statute and regulation.187

Moreover, even if a claimant were to receive a final decision from VA, the Federal Circuit has recently indicated that the claimant may still challenge it decades later on due process grounds, regardless of any intervening rulings on the claim.188 Thus, issues and appeals are easy to raise and very hard to abandon, which lengthens the time and cost of the claims process.

C. Sua Sponte Development

The CAVC and the Federal Circuit have set forth very generous standards as to the Secretary’s obligations after a claim has been raised. In *EF v. Derwinski*,189 decided just three years after the passage of the VJRA, the CAVC built upon the liberal pleading standard established in *Myers* by holding that the Secretary’s statutory duty to assist required VA to develop all issues raised in “all documents or oral testimony submitted prior to [a] BVA decision.”190 The CAVC has emphasized this point by frequently reiterating the duty in its published opinions.191 Thus, although *Myers* required the Secretary to address all theories raised by the appellant regardless of how inarticulately they were expressed, *EF* extended this duty to all theories of entitlement raised by the record, even if the claimant was never aware of them. The Federal Circuit endorsed this position in *Schroeder v. West*,192 when it held that the Secretary’s duty to assist claimants “attaches to the investigation of all possible in-service causes of [a] current disability, including those unknown to

188. See Cushman v. Shinseki, 576 F.3d 1290, 1300 (Fed. Cir. 2009) (ruling that VA’s original 1980 decision violated due process, and remanding matter for BVA to make de novo ruling on claimant’s 1977 claim). However, the decision in *Cushman* was quickly criticized by another judge of the Federal Circuit. See Edwards v. Shinseki, 582 F.3d 1351, 1356–58 (Fed. Cir. 2009) (Rader, J., concurring) (“invit[ing] further inquiry” about *Cushman* and arguing that it was wrongly decided).
190. Id. at 326.
191. See, e.g., Urban v. Principi, 18 Vet. App. 143, 145 (2004) (“When reviewing [the appellant’s] claim, the Board was obligated to consider all reasonably raised matters regarding the issue on appeal.”); Brannon v. West, 12 Vet. App. 32, 34 (1998) (concluding that Board must “adjudicate all issues reasonably raised by a liberal reading of the appellant’s substantive appeal, including all documents and oral testimony in the record prior to the Board’s decision”).
192. 212 F.3d 1265 (Fed. Cir. 2000).
the veteran.”193 Re-emphasizing this principle, the court later defined the broad breadth of VA’s duties in *Roberson v. Principi* by holding that VA must “fully and sympathetically develop the veteran’s claim to its optimum before deciding it on the merits.”194 Hence, in practice, the courts have interpreted the VA system as one in which claimants are absolved of any responsibility other than to report their complaints and may often raise procedural errors by the Secretary years, if not decades, after the fact.

Recently, the courts have retreated slightly from this standard. In *Robinson v. Mansfield*195 (Robinson I), the CAVC again acknowledged that “[a]s a nonadversarial adjudicator, the Board’s obligation to analyze claims goes beyond the arguments explicitly made,” but concluded, “it does not require the Board to assume the impossible task of inventing and rejecting every conceivable argument in order to produce a valid decision.”196 This seemingly reasonable boundary provoked a dissent arguing that the Secretary’s duty was not limited to those theories raised by the claimant or the evidence, but rather extended to all “possible” theories.197 Nonetheless, the Federal Circuit affirmed the majority decision in Robinson I, and agreed that “where a fully developed record is presented to the Board with no evidentiary support for a particular theory of recovery, there is no reason for the Board to address or consider such a theory.”198

The *Robinson* decisions are particularly noteworthy because the appellant was not pro se before VA.199 In fact, he had been assisted by an attorney for six years during the agency proceedings.200 Both courts acknowledged the participation of the attorney, but concluded that it did not alter the Secretary’s duty to scour the evidence for theories of entitlement that the attorney failed to present.201 That conclusion in the *Robinson* decisions was not without precedent. VA had previously conceded that its policy is to

193. *Id.* at 1271.
196. *Id.* at 553.
197. *Id.* at 559 (Schoelen, J., dissenting).
200. *Id.*
read all pleadings sympathetically, including those submitted by attorneys. The CAVC has also concluded that if VA fails in its duty to notify a claimant of what general types of evidence are necessary to prove a claim, the fact that the claimant was represented by an attorney is not alone sufficient to rebut the presumption that such a notice error is prejudicial. Thus, the limited increase in attorney involvement in the system has done nothing to ease the procedural burdens on VA.

D. Informality in Context

Although these rules of informality are important, it is more important to understand the context in which they operate. The CAVC has noted that “VA ROs do not operate under any form of a claim docket number system” and that “[v]eterans benefits litigation is frequently piecemeal.” Often, the process is characterized by “a continuous stream of evidence and correspondence” from the veteran. Rather than a neatly organized docket that clearly defines the state of any given claim, all the paperwork pertaining to every claim filed by a single veteran ends up in a single pile. As a result, a veteran’s claim file will frequently be a disorganized “puzzle box.” Thus, it can be extraordinarily challenging to interpret any given document either when it arrives or when it is reviewed in retrospect.

More importantly, the non-attorney staff at VA’s ROs bear the initial responsibility for noticing every informal claim raised, every theory of entitlement suggested by any of the evidence received, and every less-than-articulate appeal that arose during the unstructured correspondence. This, however, is not to say that the sys-
tem has reached a point at which only attorneys have the sophistication to handle all of the duties imposed upon the Secretary. Nonetheless, as one union leader representing VA adjudicators has said, RO employees who are “expected to decide and evaluate [complex claims], in less than two hours, are generally not brain surgeons with law degrees.”209 Furthermore, as one VA attorney has written, the non-attorney staff at the ROs often brings a perspective to the job that is different from that ingrained in lawyers.210 Even if they were to have both law and medical degrees, the RO staff is notoriously overworked and pressured to handle cases quickly.211

It is no mystery that VA’s regional offices are simply not set up to handle the procedural burdens placed upon them. It can be debated what combination of management, personnel, information technology, procedural, and other changes should be made to allow VA’s front lines to perform as intended.212 However, until changes are made, the appellate litigation will continue to follow a predictable pattern of focusing on issues overlooked below.


210. Jeffery Parker, Two Perspectives on Legal Authority Within the Department of Veterans Affairs Adjudication, 1 VETERANS L. REV. 208, 211–212 (2009) (arguing that non-attorney staff at ROs focus on decisionmaking rules articulated in sub-regulatory authorities because they are not trained in legal analysis of general rules and do not find higher authorities useful in communicating with lay veterans).

211. See, e.g., INDEPENDENT BUDGET FOR FISCAL YEAR 2010, supra note 66, at 21 (describing VA adjudicators as “[i]nadequately trained and overworked”). In 2008, a leader of the union representing VA adjudicators commented that the proposed regulation to rate traumatic brain injuries as “a difficult, burdensome regulation will be subverted by VA managers which will further pressure employees to take shortcuts on the case based on the threat of their livelihood.” American Federation of Government Employees, supra note 209, at 1.

212. See, e.g., INDEPENDENT BUDGET FOR FISCAL YEAR 2011, supra note 161, at 23–36 (containing reform recommendations from consortium of veterans groups); Forging a Path Forward Hearing, supra note 91 (Senate hearing on reform proposals); Addressing the Backlog Hearing, supra note 169 (House hearing on reform proposals).
E. Informality Rules and Litigation Incentives

Although the CAVC has held that VA has the responsibility to “review all the communications in the file”\textsuperscript{213} to discover any “that could be interpreted as a formal or informal claim,”\textsuperscript{214} in practice it is the attorneys who first become involved at the CAVC level who have the time and the training to mine a veteran’s file for issues that were not properly developed. Unfortunately, by the time an attorney raises a potential claim or an appeal that was missed below, it is likely that many years have passed.\textsuperscript{215} At that point, it is possible that the relevant substantive or procedural law has changed, maybe multiple times, and that the procedural posture will be muddled by years of intervening developments, re-openings, or collateral attacks based upon a different view of the claim’s status.\textsuperscript{216} Thus, the focus often becomes how to reassemble a procedural Humpty Dumpty. Moreover, there is often little evidence concerning the veterans’ conditions in the distant past and there may be other factual uncertainties complicating the claim.\textsuperscript{217}

Not only are the resulting procedural and factual issues difficult, but they are also attractive to attorneys. Because the broad duties to recognize claims and appeals have been applied retroactively,\textsuperscript{218} they are among the most lucrative that an attorney can raise. Most paid attorneys in veterans cases work on a contingency fee basis based upon the amount of past due benefits awarded when a claim is granted.\textsuperscript{219} The longer the gap between when a veteran

\begin{itemize}
  \item \textsuperscript{213} Lalonde v. West, 12 Vet. App. 377, 381 (1999).
  \item \textsuperscript{214} Id.
  \item \textsuperscript{215} See supra notes 107–113 (discussing length of time it takes to process claim at agency level).
  \item \textsuperscript{216} See, e.g., Savitz v. Peake, 519 F.3d 1312, 1313–16 (Fed. Cir. 2008) (remanding for determination as to whether appellant’s 1946 claim remained pending due to court’s determination that common law mailbox rule should be applied); Young v. Shinseki, 22 Vet. App. 461, 468–70 (2009) (accepting appellant’s argument that BVA had misconstrued status of his claims after decade of adjudications, and remanding for potential application of pre-1996 law).
  \item \textsuperscript{217} See, e.g., Chotta v. Peake, 22 Vet. App. 80, 85–86 (2008) (remanding claim for consideration of obtaining retrospective medical opinion on veteran’s condition from 1947 to 1999).
first files a claim and when VA finally grants it, the larger the amount of past due benefits awarded. If a claim remains pending for decades before a court grants it, the potential award—and fee—can be quite large. Therefore, when an attorney becomes involved in a case, there is a strong incentive to comb the appellant’s file for old claims or appeals that VA should have recognized based upon a sympathetic reading of the file but failed to do so. Accordingly, the VJRA has inadvertently brought a new focus to the operation of the adjudication system. Rather than turning a new page on the adjudication system, it has invited close reexamination and reinterpretation of many VA decisions made in the era prior to the VJRA.

V. REACTIONS TO JUDICIAL REVIEW

As much as judicial review and the interpretation of established statutes and regulations have shaped the VA adjudication process, case law tells only the beginning of the story of the VJRA. Both Congress and VA have actively responded to the courts’ decisions and the effects thereof.

A. Congressional Involvement

Since the VJRA, Congress has become more active in managing the claims adjudication system. First, there has been a marked increase in congressionally commissioned examinations of the process. Although the GAO had regularly reviewed VA prior to the

pay contingent fee directly to attorney from award of benefits so long as it did not exceed twenty percent). The major veterans groups deliberately advocated for the significant restrictions on fee agreements in veterans cases in order to provide opportunities for non-attorneys from those organizations to practice before the CAVC. See Helfer, supra note 20, at 169–70.


221. For example, in 2009, a veteran rated as totally disabled was entitled to benefits of $2527 per month. 38 U.S.C.A. § 1114 (West 2009). Although the rate has been increased slightly every year, an award of a decade of back benefits can be worth a quarter million dollars, which translates to a $50,000 fee if the veteran had agreed to the 20% contingency fee that VA had defined as presumptively reasonable under its authority to invalidate unreasonable fee agreements. 38 C.F.R. § 20.609(f) (2007). However, the period of time in question can amount to much more than a decade. See, e.g., Ingram, 21 Vet. App. at 257 (remanding in 2007 for determination of whether appellant’s claim was first raised in 1986); Criswell, 20 Vet. App. at 503 (involving appellant in 2006 who argued claim had been pending since 1947).
THE VETERANS’ JUDICIAL REVIEW ACT 287

the last two decades have witnessed numerous special, independent reviews requested by Congress.

Second, Congress passed laws in response to appellate court rulings on the VA system, made possible by judicial review. Although the first decade of judicial review included some congressional alterations of the adjudication process, such as allowing the BVA to issue single-member decisions, requiring the ROs to include more detail in their decisions, and eliminating the requirement that private medical evidence be corroborated by a VA medical examination, Congress’s most dramatic intervention occurred in 2000 with the passage of the Veterans Claims Assistance Act (VCAA). The immediate catalyst for the VCAA was the CAVC’s ruling in Morton v. West that the Secretary did not have statutory authority to provide a medical opinion for a claim that did not meet the threshold of being well grounded. Thus, a claimant had to submit “a well grounded claim” before the Secretary was obligated under the duty to assist to obtain further medical evi-

222. See, e.g., Publ’n No. GAO-89-9, supra note 27; Publ’n No. GAO-83-12, supra note 25.


229. Id. at 481.
In effect, claimants could not obtain a medical opinion from VA unless they first submitted a private medical opinion. The CAVC opinion recognized that Congress had probably not intended to add this threshold condition that claimants must satisfy when it created a statutory duty to assist in the VJRA and invited Congress to revise the statute.

Congress responded, but did not limit its response to the issue decided in Morton. In addition to giving the Secretary broad authority to provide assistance to claimants, the VCAA required VA to seek government or private records in enumerated specific situations. The VCAA created the first explicit statutory duty to provide claimants with a medical opinion, and lowered the threshold from requiring a “well grounded claim” to requiring only evidence that “indicates” the claim might have merit. More importantly, Congress added an entirely new duty. Pursuant to the VCAA, the Secretary must provide claimants notice “of any information and any medical or lay evidence . . . necessary to substantiate” the claims made. Although this notice duty sounds straightforward in principle, in practice it has been subject to tremendous litigation and friction between the Secretary, who sought to satisfy this duty with generic notice letters, and veterans groups that wanted every notice letter tailored to the specific evidence already in the claims file.

Congress followed the VCAA with mostly minor interventions and waded back into the thick of the adjudication system

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231. This is not to say that Morton reached an absurd result. The well-grounded-claim threshold was still lower than that required to grant the claim. In many cases, claimants still needed a VA opinion because the private opinion that they submitted lacked sufficient detail to allow VA to grant the claim.


235. The Federal Circuit ultimately agreed with the CAVC that the notice requirement did not require the Secretary to pre-adjudicate the claim in order to provide notice. Wilson v. Mansfield, 506 F.3d 1055, 1062 (Fed. Cir. 2007) (reaching same conclusion as CAVC’s decision in Locklear v. Nicholson, 20 Vet. App. 410, 415 (2006)). However, the Federal Circuit has held that notice must be tailored to the specific type of claim, Wilson, 506 F.3d at 1062, and the CAVC has held that notice must also be tailored to any factual findings made in a prior adjudication. Kent v. Nicholson, 20 Vet. App. 1, 9–10 (2006). See generally Veterans Benefits Manual, supra note 82, at § 12.5.3 (detailing years of litigation involving notice requirement).

with the Veterans Benefits Improvement Act of 2008 (VBIA).\textsuperscript{237} The VBIA addressed the increasing length of the adjudication process by creating a mechanism for assigning a temporary disability rating during the pendency of certain types of claims and permitting substitution of a surviving spouse or dependant in cases where the veteran died before a claim was final.\textsuperscript{238} However, perhaps wary of the litigation over the VCAA,\textsuperscript{239} its chief provisions required the establishment of pilot programs to experiment with specified changes to the process.\textsuperscript{240} The VBIA appears to represent a more cautious approach to intervention. Congress thus seems no less determined to tinker with the system, but has gained a new appreciation of how difficult it can be to translate abstract ideals into practice in such a complex yet informal system.

\section*{B. The Department of Veterans Affairs’ Reaction}

\subsection*{1. Management Strategy}

Although VA has recognized the need to make changes to handle the developments brought about by judicial review, it has struggled to do so effectively. Like Congress, VA has repeatedly examined its processes.\textsuperscript{241} For example, in June 1993, VA formed a “blue ribbon panel” to develop recommendations for revising the

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  \item See supra note 235 and accompanying text (discussing litigation over substance of VCAA notice requirement) and note 46 (discussing years of litigation over how CAVC should consider whether VCAA notice error was prejudicial).
  \item See VA Claims Processing Task Force, supra note 137; Office of Inspector Gen., Rep. No. 5D2-B01-013, supra note 108; Blue Ribbon Panel on Claims Processing, Proposals to Improve Disability Claims Processing in the Veterans Benefits Administration (Nov. 1993) [hereinafter VA Blue Ribbon Panel]. Furthermore, “[i]n September 2008, VA contracted with Booz Allen Hamilton to conduct a review of the rating-related claim development process to provide recommendations to improve the process,” although it does not appear that a for-
\end{itemize}
\end{footnotesize}
The panel made numerous recommendations, but focused on replacing “the current assembly-line process[ ]” with one that would bring “ownership and accountability” to the RO system. Despite this recommendation, VA overhauled its procedures in 2001 at the RO level by adopting the more assembly-line driven “claims process improvement” (CPI) model. The essence of the model is that VA breaks up the initial adjudication of claims into steps and a specialized team handles each step. Not surprisingly, veterans groups have criticized the current system as suffering from a lack of accountability. The fundamental problem is that it is difficult, if not impossible, to assign blame when different teams performed their task correctly based upon their subjective interpretation of which evidence in the file was credible and persuasive, but the final outcome was defective because of differences between the teams in how the evidence was evaluated. As a result, there is a strong perception both outside and within VA that there is too much emphasis on productivity and too little emphasis on quality.

The creation of the appeals management center (AMC) in 2003 was another change to the process made by VA that has since been criticized by veterans groups. The original concept of the AMC was to manage as many remands as possible in a single location that concentrated resources and expertise. It was designed
to operate as a specialized RO, whose staff would have expertise in interpreting BVA remand orders and developing the medical evidence needed to properly adjudicate remanded claims.250

Unfortunately, the AMC had difficulty in quickly meeting its goals due in large part to the steep learning curve for the new employees it hired.251 Furthermore, a past president of the National Organization for Veterans Advocates (NOVA) noted in 2005 that more cases were being referred to the AMC than it was intended to handle and called it a “parking lot.”252 At a recent hearing, the Disabled American Veterans organization argued for the elimination of the AMC because of its unacceptably high twenty-five percent rate of errors requiring a remand for further notice or evidentiary development.253 At the same hearing, NOVA added that the AMC operates as a “black hole” from which veterans can obtain no information about the status of their claims.254 Furthermore, Disabled American Veterans has argued that even if the AMC worked as intended, it would still have the undesirable effect of relieving the ROs from the responsibility of correcting their past mistakes.255 Accordingly, the current verdict on the AMC from veterans groups seems entirely negative.

The CPI model and the AMC may be the two most significant management changes in recent years, but they are far from the only practices of note. VA has also experimented with distributing hundreds of thousands of claims between regional offices in the last three years.256 However, the GAO has criticized VA’s implementa-

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250. Id. at 28 (response of Arnold Russo, Director, AMC to question from Subcommittee Chairman John Hall).

251. Id. at 28–29.


255. Baker Testimony, supra note 253. In theoretical terms, this is a leverage problem. If only a small portion of an agency’s decisions are being reviewed, then each error found must result in strong negative reinforcement if review is to affect behavior. See James Salzman et al., Regulatory Traffic Jams, 2 Wyo. L. Rev. 253, 258 (2002). If review does not result in any feedback, it cannot affect behavior.

tion of this program for its inability to measure the timeliness and consistency of decisions in such claims. VA has also established “Tiger Teams” to deal with claims that are over one year old and a Benefits Delivery at Discharge program for veterans that have recently concluded their active duty service. Unfortunately, none of these initiatives have achieved breakthrough success.

Most of VA’s management choices are manifestations of its desire to deal with the increased burdens on the adjudication system through increases in productivity rather than staffing. From 2000 to 2007, the staffing of VA’s adjudicative branch “remained essentially flat” despite the backlog of claims rising seventy-five percent. However, in 2007, VA abandoned the strategy of focusing exclusively on productivity and hired 3000 new full-time employees to handle the backlog. In April 2009, VA announced its intent to

257. Forging a Path Forward Hearing, supra note 91 (testimony of Daniel Bertoni, Director Education, Workforce, and Income Security for GAO). The lack of good metrics is not unique to brokered claims. As a consortium of veterans groups has recognized, “claims are so complex, with so many potential variables, that meaningful trend analysis is difficult. As a consequence, [VA] rarely obtains data of sufficient quality to allow it to reform processes, procedures, or policies.” INDEPENDENT BUDGET FOR FISCAL YEAR 2010, supra note 66, at 26.

258. Forging a Path Forward Hearing, supra note 91 (testimony of Patrick W. Dunne, Under Secretary for Benefits).


260. See supra Part II (detailing problems that continue to plague system). Nonetheless, VA continues to look ways to improve the process. Very recently, VA Secretary Shinseki announced that an effort to seek innovation ideas from VA employees had produced ten suggestions for improving the claims adjudication process. See Press Release, VA Office of Public and Intergovernmental Affairs, Shinseki Announces Winners of Innovation Competition for Improving Claims Processing (Feb. 19, 2010), available at http://www1.va.gov/opa/pressrel/pressrelease.cfm?id=1852.


262. The Independent Budget, Critical Issues Report for Fiscal Year 2009, at 27 (2008), available at http://www.independentbudget.org/pdf/CL_FY09.pdf. These staffing problems were not unanticipated. In 1997, the National Academy of Public Administration reported that “[t]he bipartisan drive to reduce the deficit has put great pressure on administrative budgets government wide, and this pressure has resulted in planned reductions by FY 2002 of over 31 percent from levels of VBA staff allocated to adjudication in FY 1996.” NAT’L ACADEMY OF PUB. ADMIN., MANAGEMENT OF COMPENSATION AND PENSION BENEFITS CLAIM PROCESSES FOR VETERANS x (1997).

263. The Fiscal Year 2010 Budget for Veterans’ Programs: Hearing Before the S. Comm. on Veterans’ Affairs, 111th Cong. (2009) (statement of Eric K. Shinseki, Sec-
hire an additional 1500 “temporary claims processors.”264 This hiring spree has been slow to dent the backlog due to the years of training and experience it takes for a new employee to become familiar with the complex procedures and substance of veterans law.265 Shortly after his confirmation, VA Secretary Shinseki referred to this as a “brute force” approach to the backlog, but promised to supplement this strategy by completing long-overdue initiatives in modernizing VA’s recordkeeping system and other procedures.266 It remains to be seen whether this shift in strategy will have appreciable results in terms of claims backlog or veterans satisfaction. However, it demonstrates that the state of the VA adjudication system cannot be understood by looking at the law alone.

2. Procedural Initiatives

VA is also working on several other initiatives in response to judicial review. The VJRA gave the CAVC the power to review the validity of VA rules and regulations.267 The CAVC soon concluded that in many situations, the authorities regulating the Secretary’s duties presented “a confusing tapestry.”268 Shortly thereafter, the VA Blue Ribbon Panel observed:

Potential problems with the applicable regulations and implementing manuals and directive may be pervasive. It appears

retary of Veterans Affairs) [hereinafter Shinseki Testimony]. In 2004, VA had 12,000 adjudicators. Levy, supra note 2, at 319. See also Hearing on Review of Veterans’ Disability Compensation: Undue Delay in Claims Processing: Hearing Before the S. Comm. on Veterans’ Affairs, 110th Cong. 7 (2008) (statement of Patrick W. Dunne, Acting Under Secretary for Benefits) [hereinafter Dunne Statement].


265. See PUBL’N NO. GAO-09-910T, supra note 115, at 12 (“[I]t takes about 3 to 5 years for newly hired rating specialists to become proficient given the complexity of the job.”); Dunne Statement, supra note 263. See generally OFFICE OF AUDIT, VA OFFICE OF INSPECTOR GEN., VETERANS BENEFITS ADMINISTRATION: REVIEW OF NEW HIRE PRODUCTIVITY AND THE AMERICAN RECOVERY AND REINVESTMENT ACT HIRING INITIATIVE (2010).

266. See Shinseki Testimony, supra note 263. VA’s Under Secretary for Benefits has recently testified that information technology is the chief roadblock to productivity improvements. Forging a Path Forward Hearing, supra note 91 (testimony of Patrick W. Dunne, Under Secretary for Benefits).


that VA regulations never have been subject to broad-based re-
view to determine whether they are legally valid, consistent
with each other, and provide the most effective means to af-
ford claimants all the benefits to which they are entitled.269

The Panel cautioned that if VA did not comprehensively revise
its rules and regulations, “it will be accomplished in a piecemeal
fashion by the Courts through the litigation process.”270 Despite
this warning, VA has been slow to conduct such a revision.271 It was
not until 2001 that VA began an organized effort to comprehen-
sively rewrite its regulations.272 Eight years later, the revised regu-
lations still have not been issued.273

A more controversial initiative has been the Expedited Claims
Adjudication Initiative (ECA).274 Under ECA, the Secretary has
sought to speed up processing time by seeking waivers of certain
procedural rights by claimants, such as the right to submit addi-
tional evidence for up to a year after receiving a request for infor-
mation, the right to a hearing prior to each decision, and the right

269. VA BLUE RIBBON PANEL, supra note 241, at 22.
270. Id.
271. This delay is not a complete surprise. See Thomas O. McGarity, Some
(discussing how close judicial review can discourage agencies from revising even
clearly outdated and inefficient rules); Peter H. Schuck & E. Donald Elliott, Study-
ADMIN. L. REV. 519, 532 (1990) (suggesting that data indicates that judicial review
of rulemaking “may have had the perverse effect of discouraging its use”). See
generally Sidney A. Shapiro & Richard W. Murphy, Eight Things Americans Can’t Fig-
ure Out About Controlling Administrative Power, 61 ADMIN. L. REV. 5 (2009) (discuss-
ing several sources of tension that arise when courts conduct judicial review of
agency rulemaking).

272. William A. Moorman & William F. Russo, Serving our Veterans Through
Regulation Rewrite Project, 61 ADMIN. L. REV. 407, 410 (2009). This is not to say that
no rulemaking has occurred. The Secretary has repeatedly rewritten or eliminated
regulations after receiving an adverse interpretation. See, e.g., Definition of Service
in the Republic of Vietnam, 73 Fed. Reg. 20,566, 20,566–67 (proposed Apr. 16,
App. 257 (2006)); Notice and Assistance Requirements and Technical Correction,
Pelegrini v. Principi, 18 Vet. App. 112 (2004)); DIC Benefits for Survivors of Cer-
tain Veterans Rated Totally Disabled at Time of Death, 65 Fed. Reg. 3588 (Jan. 21,
111 (1997)).

274. Board of Veterans’ Appeals: Expedited Claims Adjudication Initiative—
Pilot Program, 73 Fed. Reg. 20,571 (proposed Apr. 16, 2008) (to be codified at 38
to have all evidence considered first by an RO.\textsuperscript{275} The reaction of veterans groups has been mixed. The comments on the rulemaking proposal were overwhelmingly negative.\textsuperscript{276} However, Disabled American Veterans has recently supported a presumed waiver of certain rights so as to avoid having claims trapped at the RO, where a veteran submits a constant stream of correspondence that requires repetitive remands from the BVA to the RO for consideration of new material.\textsuperscript{277}

Overall, VA’s reactions to judicial review demonstrate that the VJRA has pressured it to rethink every aspect of the adjudication system. However, many of these initiatives have added more complexity and have not been implemented smoothly due to pushback from veterans groups and advocates who view them as inconsistent with the broad rights of veterans.

VI.
THE FUTURE OF THE PATERNALISTIC ENTITLEMENT MODEL

The VJRA reinvented the adjudication process with the purpose of increasing transparency and making its promise of informality enforceable. After twenty-two years, the idea of a paternalistic entitlement model remains, but adding judicial review has highlighted the fundamental conflict between complexity and informality. On one hand, the system continues to add rules and procedures to achieve the “right” outcome in each claimant’s case. On the other hand, both the courts and Congress have stressed that there is no requirement that claimants know these rules. Ironically, the mechanisms created to enforce informality have added more layers of procedural complexity, which make it very difficult for VA to produce decisions that withstand review. The net result is a process that can seem interminable for those who diligently pursue


\textsuperscript{276} Board of Veterans’ Appeals: Expedited Claims Adjudication Initiative—Pilot Program, 73 Fed. Reg. at 65,727 (summarizing comments as expressing seven criticisms).

\textsuperscript{277} Baker Testimony, supra note 253. See supra Part III.D (discussing evolution of right to “one review on appeal”).
their appellate rights. Twenty-two years of increasing the number of claimant-friendly rules appears to be producing a system that in some respects is more claimant-friendly—as more claims are adjudicated and more are approved—but in other respects is paradoxically less claimant-friendly—at least as measured by the length of the process and the expressions of dissatisfaction.278

The intent of this Article is to highlight the tension between complexity and informality279 so that the stakeholders can thoughtfully examine the issue to discuss potential improvements or trade-offs. There are no easy solutions to the conflict between complexity and informality. Both have been built into the system in the name of providing just outcomes across the near-limitless spectrum of service, medical, and legal fact patterns.

Scaling back can be characterized as unfriendly to claimants. Yet, emerging theories of administrative law suggest that, even if every component rule were perfectly clear and efficient, there is a limit to the number of rules that any regulatory system can apply efficiently.280 Eventually, the rules of an administrative system can reach a point at which even skilled and conscientious practitioners cannot keep track of all the rules or grasp their interactions.281 Given that the National Veterans Legal Services Program’s guide and reference materials for adjudication of veterans claims run

278. See, e.g., Dole-Shalala Report, supra note 223, at 6 (stating that only “38 percent of retired/separated service members are ‘very’ or ‘somewhat’ satisfied with [VA’s] disability evaluation system,” and only 42 percent “report that they ‘completely’ or ‘mostly understand the VA claims process’); Fox, supra note 107, at 339 (“There are few persons who believe that the current system for administering these benefits is working properly.”).

279. At this point, it could be argued that the informality rules that have developed are merely another form of complexity facing the system. Even though that may be semantically true, it would obscure the fundamental point that the system needs to consciously address the tension between the increasing number of rules focused on achieving correct outcomes and those focused on reducing claimant responsibility. Although each set of rules has grown, there has been little effort to understand or address the interaction between the two.

280. See generally J.B. Ruhl & James Salzman, Mozart and the Red Queen: The Problem of Regulatory Accretion in the Administrative State, 91 Geo. L.J. 757 (2003). In 2000, the GAO reported that the RO process for making an initial decision on a compensation claim “contains as many as 66 decision points and 39 queues (or waiting points).” GAO Rep. No. GAO/T-HEHS/AIMD-00-146, supra note 113, at 6. The report included a flow chart diagramming the initial claim decision process. It covers eight full pages. Id. at 12–20.

4000 pages, \textsuperscript{282} is it possible for lay adjudicators on the front line to decide claims quickly and accurately even if they were adequately staffed and supported? \textsuperscript{283} “Unlimited good intentions and money to back them up” are not enough if the system reaches a critical mass of complexity. \textsuperscript{284} How much truer must this be in a system that wants to remain informal and absolve claimants of the responsibility of understanding the complexities that govern their claims? Even a representative of the Veterans of Foreign Wars has dared to suggest to Congress that “the world in which the VA operates has changed and it may no longer be realistic to expect accurate benefit decisions in a short period of time.” \textsuperscript{285}

Developing management systems for an agency that wants to be both complex and informal is a huge challenge. On top of that, the VA adjudication process continues to evolve. Twenty-two years after the VJRA, it is now clear that Congress, VA management, VA adjudicators, the courts, veterans groups, and veterans attorneys will each have a role in the debate and use different tools in different places to effect change.

With so many players pulling so many levers in so many places, the VA adjudication system is now “complex” in a formal, academic sense as well. In other words, the interactions have reached the point at which the effects of each change are difficult to predict, especially with so many changes happening concurrently. \textsuperscript{286} In such a system, an ex ante analysis of proposed changes is unlikely to

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\textsuperscript{283} The Chief Executive Officer of a company that was consulted about computerizing the decisionmaking process testified before Congress that VA’s regulations are “so complicated that no human being can be expected to accurately negotiate its byzantine, sometimes conflicted, and ever changing rules in a timely and consistent manner.” Hearing on Review of Veterans’ Disability Compensation: Undue Delay in Claims Processing: Hearing Before the S. Comm. on Veterans’ Affairs, 110th Cong. 47 (2008) (statement of Howard Pierce, Chief Executive Officer, PKC Corporation). Cf. The Federalist No. 62 (James Madison) (“It will be of little avail to the people that the laws are made by men of their own choice, if the laws be so voluminous that they cannot be read, or so incoherent that they cannot be understood . . . .”).

\textsuperscript{284} Salzman et al., supra note 255, at 273.

\textsuperscript{285} Addressing the Backlog Hearing, supra note 169, at 57 (statement of Robert Jackson, Assistant Director, National Legislative Service, Veterans of Foreign Wars of the United States).

accurately predict system costs, benefits, or unintended consequences. This means that improvement will often be difficult and not every wrong turn will necessarily be anyone’s fault. Nonetheless, there is a deep and abiding belief that the system should remain informal and claimant-friendly.

Two decades of transparency brought about by judicial review has illuminated the problem. Only time will tell if informality and complexity can be harmonized to create a system capable of finally producing timely, consistent, and accurate decisions.
