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Chapter 2

QUALITY ASSURANCE PROGRAM

# Introduction

(Change Date November 26, 2013)

Public Law 106-117, The Veterans Millennium Health Care and Benefits Act, mandates that the Veterans Benefits Administration (VBA) establish and execute a Quality Assurance (QA) program. This program must meet applicable governmental standards for independent and internal controls for the performance of quality reviews in compliance with the Government Performance and Results Act (GPRA). The QA reviews focus on assessing the required legal provisions of service delivery, and ensures that actions are documented in accordance with statutes, Department of Veterans Affairs (VA) regulations, manual procedures, circulars, and other directives.

This chapter provides the processes and procedures in executing the Vocational Rehabilitation and Employment (VR&E) Quality Assurance program at the national and local levels. Additional guidelines are provided in the appendices for the review instruments and the Standards of Practice (SOP).

# References and Resources

(Change Date November 30, 2017)

Laws: Public Law 106-117, The Veterans Millennium Health Care and Benefits Act

Government Performance and Results Act

Regulations: 38 Code of Federal Regulations (CFR) 21.412

38 CFR 21.414

38 CFR 21.420

Web Sites: [vbaw.vba.va.gov/bl/28/vrcintra.htm](file:///C:/Users/vrechell/AppData/Local/Microsoft/Windows/Temporary%20Internet%20Files/Content.Outlook/RFMJZ0IU/vbaw.vba.va.gov/bl/28/vrcintra.htm)

[vaww.vashare.vba.va.gov/sites/ROQ](https://vaww.vashare.vba.va.gov/sites/ROQ)

[vreqa@va.gov](mailto:vreqa@va.gov)

# Objectives of the QA Program

(Change Date November 26, 2013)

The QA program is designed to achieve the following:

* Measure VR&E office’s quality and accuracy in administering Chapter 31 and Chapter 36 benefits in accordance with statutes, VA regulations, manual procedures, circulars and other directives.
* Ensure that VR&E staff meets required standards of practice and ethical standards for the delivery of vocational rehabilitation services.
* Assess vocational rehabilitation activities that affect Servicemembers, Veterans, and their dependents.
* Provide data for quality improvement by identifying trends that can be used to evaluate management, resource, system, and training needs.
* Ensure Veterans receive quality services.
* Ensure consistent provision of services program-wide.
* Provide constructive feedback.
* Provide a mechanism to identify training needs at the national and local levels.
* Provide instruction on how to improve or correct performance.
* Initiate policy clarification.

# QA Review Procedures

## Scope of the QA Reviews

(Change Date November 26, 2013)

QA case reviews evaluate VR&E case management activities contained in the Counseling/Evaluation/Rehabilitation (CER) folder and CWINRS.

During a QA review, the work of the Vocational Rehabilitation Counselor (VRC), or Employment Coordinator (EC), who determines entitlement and/or, is responsible for providing direct rehabilitation services, is reviewed.

## Levels of Case Reviews

QA reviews are conducted in two levels:

### Systematic Technical Accuracy Review (STAR) or National Level

(Change Date November 26, 2013)

The STAR Team members conduct case reviews of all Regional Offices (RO). The team is comprised of VR&E Service staff members. The national or STAR reviews are conducted monthly. The results are used to evaluate the performance of individual RO.

### Regional Office or Local Level

(Change Date November 26, 2013)

The VR&E Officer (VREO), and/or his/her designee, conducts case reviews for their particular offices. The Local QA reviews are conducted monthly or quarterly. The results are used to evaluate the performance of individual case managers.

NOTE: The STAR Team is responsible for the administration and oversight of the STAR and Local QA reviews.

## QA Review Websites

### QAWeb

(Change Date November 30, 2017)

#### STAR or National QA Review

The QAWeb is an intranet application specifically developed for the STAR Team to provide the means to enter national review findings into a database system. This database requires unique log-on identification for each STAR Team member. The results of case reviews are entered into the system, including any error cited with the applicable reasons and explanation for the error.

#### Report Function

QAWeb provides reports to assist in analyzing data from STAR reviews. Reports are available for an individual RO or at the national level. Reports are posted to the STAR Team SharePoint site on a monthly or quarterly basis. Individual review results with the rolling 12-month scores are posted monthly. Other reports are posted quarterly, or as needed.

### Review of Quality (ROQ) SharePoint site

(Change Date November 30, 2017)

#### Local QA Reviews

The ROQ SharePoint site enables the VR&E Officers or their designee(s) to enter local review findings into a database system.

#### Logon Instructions

Logon instructions and a link to the ROQ SharePoint are located in the STAR Team SharePoint site at [vaww.vashare.vba.va.gov/sites/VREService/OAO/STAR/SitePages/Home.aspx](https://vaww.vashare.vba.va.gov/sites/VREService/OAO/STAR/SitePages/Home.aspx).

The ROQ SharePoint may also be accessed at [vaww.vashare.vba.va.gov/sites/ROQ/](https://v/).

1. Obtaining Access

To obtain access to the ROQ SharePoint site, the VR&E Officer should send an email to the QA mailbox at [vreqa@va.gov](mailto:vreqa@va.gov).

# QA Review Schedule

## STAR or National QA Review

(Change Date November 30, 2017)

The schedule for STAR reviews is developed prior to the beginning of the fiscal year. Each fiscal year is composed of 12 monthly review sessions. The office of Performance Analysis and Integrity (PA&I) selects the cases to be reviewed based on specific business rules. As soon as the list of selected cases is made available, the list is posted to the VR&E STAR Team SharePoint site. The CER folders must be submitted for STAR review by the specified due date each month.

Once a case has been selected for STAR review, no changes are allowed on activities or documentation that was completed or should have been completed prior to selection. Adding and/or deleting information or documentation in the CER folder after any case has been identified for a STAR review is considered a change, which is not allowable. Provision of services should continue in the case, and information from the date of selection forward may be added.

## RO or Local QA Review

(Change Date November 30, 2017)

PA&I selects a list of cases to be reviewed for Local QA each month. This list is posted to the VR&E STAR Team SharePoint site at the same time as the STAR review list. VREOs or their designees must conduct reviews of the selected cases and accurately enter them into the ROQ SharePoint site. The STAR Team validates the completion of the Local QA reviews in the ROQ SharePoint on a quarterly basis, and reports the number of reviews completed by each RO to the Office of Field Operations (OFO).

# Chapter 31 Case Selection

(Change Date November 30, 2017)

PA&I randomly selects all cases for the STAR and Local QA reviews. VR&E Service posts the lists of the selected cases on the VR&E STAR Team SharePoint site.

## Case Types

(Change Date November 30, 2017)

The cases for review are selected by the following case types:

* + Entitlement Determination and Rehabilitation Planning (EDRP)
  + Rehabilitation Services Delivery (RSD)
  + Outcome – Rehabilitated (OR)
  + Outcome – Discontinued (OD)
  + Chapter 36 (CH36)

NOTE: OR, OD, and CH36 case types are not included in the list of cases selected for the Local QA reviews.

## Case Type Selection Criteria

(Change Date November 30, 2017)

The standards for selecting Chapter 31 case review are provided below:

### Entitlement Determination/Rehabilitation Planning (EDRP)

* + Case must have an entitlement decision documenting whether the Veteran has an Employment Handicap (EH) and/or Serious Employment Handicap (SEH).
  + Case must have exited Evaluation and Planning (EP) status within the 12-month period prior to the selection.

### Rehabilitation Services Delivery (RSD)

Services must have been provided in one or more of the following case statuses for at least six months prior to the review:

* Extended Evaluation (EE) Status
* Independent Living (IL) Status
* Rehabilitation to the Point of Employability (RTE) Status
* Job Ready (JR) Status
* Interrupted (INT) Status

### Outcome – Rehabilitated (OR)

* Case must have been closed as Rehabilitated (REH) within the 12-month period prior to the review.
* Case must have been closed as Rehabilitated after entering either IL or JR status.

### Outcome – Discontinued (OD)

* Case must have been closed as Discontinued (DIS) within the 12-month period prior to the review.
* Case must have been closed as DIS from Interrupted (INT) status that was previously in EE, IL, RTE, or JR status.

NOTE: OD also includes cases closed using Maximum Rehabilitation Gain (MRG) code.

1. Chapter 36 (CH36)

Case must have been closed Completed with Counseling or Closed without Counseling within the 12-month period prior to review.

# QA Review Rating

## QA Review Instruments

(Change Date November 30, 2017)

Each review type is assessed using specific review forms, referred to as QA Review Instruments.

The STAR and Local QA Review Instruments contain the same questions. STAR is conducted in the QAWeb, while Local QA reviews are conducted in the ROQ SharePoint site.

Guidelines for conducting the reviews are provided in the following appendices:

* Appendix CC. EDRP Review Instrument and Standards of Practice
* Appendix CD. RSD Review Instrument and Standards of Practice
* Appendix CE. OD Review Instrument and Standards of Practice
* Appendix CS. OR Review Instrument and Standards of Practice
* Appendix CT. CH36 Review Instrument and Standards of Practice

NOTE: The appendices include the review instrument and Standards of Practice (SOP) for each case type.

## Casework Review

(Change Date November 30, 2017)

Each review focuses on decisions and provision of services in accordance with regulation, policies, and procedures, and is based on the documentation found in the CER folder, CWINRS, SAM, and Share. Reviews are conducted using the following guidelines:

1. EDRPreviews are conducted on casework performed from receipt of application until the case exits EP status.
2. RSD reviews are conducted on all activities related to the provision of services outlined in the rehabilitation plan, i.e., Individualized Extended Evaluation Plan (IEEP), Individualized Independent Living Plan (IILP), Individualized Written Rehabilitation Plan (IWRP), or Individualized Employment Assistance Plan (IEAP), and case management activity during any period of interruption, for the 12-month period prior to case selection for review.
3. OD reviews are conducted on all activities related to the provision of rehabilitation services outlined in the rehabilitation plan, i.e. IILP, IWRP, or IEAP, for the 12-month period prior to the decision to place the case in Discontinued status.

NOTE: OD reviews include cases closed using Maximum Rehabilitation Gain (MRG) code.

1. OR reviews are conducted on all activities related to the provision of rehabilitation services outlined in the rehabilitation plan, i.e., IILP, IWRP, or IEAP, for the 12-month period prior to the decision to place the case in Rehabilitated status.
2. Chapter 36 reviews are conducted on all activities from application until closure as Completed with Counseling or Closed without Counseling.

## Scoring the QA Instrument

(Change Date November 30, 2017)

The STAR and Local QA reviews use the same QA Review Instruments. Each QA Review Instrument contains questions, with explanations that can be selected to provide more specific information for any error cited on a question. Additionally, the reviewer can type in notes to provide more specific detail about the error.

NOTE: The QA SOPs in Appendices CC, CD, CE, CS, CT, are designed to assist the reviewer in answering each question on a review instrument.

Questions on both STAR and Local QA reviews are answered with a “Yes” or “No”.

## Response Criteria

(Change Date November 30, 2017)

1. The evaluation of the QA review responses are explained below:
2. If the QA reviewer’s response is “Yes”, he/she has determined that the VA actions and decisions meet the intent of VA laws, regulations, manual procedures, circulars, and other directives.
3. If the QA reviewer’s response is “No”, he/she has determined that VA actions and decisions do not meet the intent of VA laws, regulations, manual procedures, circulars, and other directives.
4. The next steps after assigning a response are described below:

### If the QA reviewer’s response is “Yes”, then he/she:

* May not select any of the sub-items.
* May make a comment on the item being reviewed.
* May provide additional comments in the General Comments section.

### If the QA reviewer’s response is “No”, then he/she:

• Must select one or more sub-items to explain the response.

• May provide additional comments/notes on the item being reviewed.

• May provide additional comments in the General Comments section.

* Must provide a corrective action in the General Comments section when the identified error is significant.

## Citing an Error

(Change Date November 30, 2017)

The reviewers must guard against making assumptions or imposing personal judgment regarding the decisions made by the VRC or EC. The reviewer must find a clear violation of a law, regulation, manual, or other directive to establish that an error exists.

Additionally, the reviewer must cite the law, regulation, manual, or other directive that supports the decision for the error. M28R citations may only be cited to the chapter level. This is due to the fact that sections may change with updates to the procedures manual. A key word search can be used to find the exact section within a chapter. There are also times when multiple sections within a chapter provide guidance on a particular issue.

## Filing QA Review Results in the Counseling/Evaluation/Rehabilitation (CER) Folder

(Change Date November 26, 2013)

A printed copy of the completed QA review results must be filed in chronological order in the middle section of the CER folder.

# VR&E Service Responsibilities

## Overview

(Change Date November 26, 2013)

VR&E Service is responsible for conducting case reviews at the national level by reviewing a sample of cases from each RO during each fiscal year.

VR&E Service is also responsible for establishing the criteria to identify cases to be reviewed at the national and local levels.

## Systematic Technical Accuracy Review (STAR) Team

(Change Date November 30, 2017)

The STAR Team conducts the reviews at the national level. The team is comprised of trained VRCs at the journeyman level who have gained the required experience from working in an RO.

The STAR Team members are VA Central Office (CO) employees assigned to VR&E Service. They conduct and enter reviews into the QAWeb as described in section 2.04.c.1 of this chapter.

## Review of Quality (ROQ) SharePoint site

(Change Date November 30, 2017)

VR&E Service provides the Local QA Review User’s Guide that explains the log-on procedures for the ROQ SharePoint. This User’s Guide is available on the STAR Team SharePoint site at: [vaww.vashare.vba.va.gov/sites/VREService/OAO/STAR/SitePages/Home.aspx](https://vaww.vashare.vba.va.gov/sites/VREService/OAO/STAR/SitePages/Home.aspx).

The ROQ SharePoint site is located at: [vaww.vashare.vba.va.gov/sites/ROQ/](https://vaww.vashare.vba.va.gov/sites/ROQ/).

The STAR Team is responsible for validating the completion of Local QA reviews in the ROQ SharePoint site on a quarterly basis and providing a report to OFO on the number of Local QA reviews completed.

## Scope of STAR Review

(Change Date November 26, 2013)

The national or STAR review includes both Chapter 31 and Chapter 36 casework. Special reviews of other cases may be conducted, as needed.

## Sampling Procedures

(Change Date November 26, 2013)

The Office of Performance Analysis and Integrity (PA&I) makes the selection of the random sample of cases for each of the ROs. The selection is based on the selection criteria established by VR&E Service.

# STAR or National QA Review Procedures

## Request for Cases

(Change Date November 30, 2017)

PA&I provides VR&E Service with a list of cases selected for STAR reviews. VR&E Service posts this list to the STAR Team SharePoint site, alerts the ROs that the list has been posted, and provides the date that the cases are due for submission.

### Case Selection List

(Change Date November 30, 2017)

A list of cases selected for review is posted on the STAR Team SharePoint site. This list includes all Chapter 31 and Chapter 36 cases selected for STAR review.

Cases selected for review should be shipped to:

VR&E STAR Team at:

3401 West End Ave, Suite 610E

Nashville, TN 37203

### Missing or Unavailable CER Folders

(Change Date November 30, 2017)

If the selected case is lost or missing, the RO must reconstruct the CER folder and submit it for review. If the selected case is unavailable due to VBA Appeals review, etc., the RO must inform the STAR Team of the unavailability of the case and the reason for the unavailability via the QA mailbox at [vreqa@va.gov](mailto:vreqa@va.gov).

If the selected case has been removed for scanning, the VR&E Office must complete the “Completed to Pending” request form and indicate that the file has been selected for National QA review. The Scanning Inquiry Request Form can be accessed and completed at [vaww.infoshare.va.gov/sites/OBPI/VCIP/SD/OBPI%20Issue%20Tracker/\_layouts/FormServer.aspx?XsnLocation=/sites/obpi/vcip/sd/obpi%20issue%20tracker/scanning%20inquiries/forms/template.xsn](http://vaww.infoshare.va.gov/sites/OBPI/VCIP/SD/OBPI%20Issue%20Tracker/_layouts/FormServer.aspx?XsnLocation=/sites/obpi/vcip/sd/obpi%20issue%20tracker/scanning%20inquiries/forms/template.xsn). On the “Additional Details” of the form, indicate that the file has been selected for National QA Review.

The list of selected cases that have been removed for scanning must be sent to the QA mailbox at [vreqa@va.gov](mailto:vreqa@va.gov) by due date established by the STAR Team each month.

### Transferred Cases

(Change Date November 30, 2017)

If a case identified for review has been transferred to another RO, the office being reviewed will request that the current RO forward it to the STAR Team. The office being reviewed must e-mail a copy of the request to the QA mailbox at [vreqa@va.gov](mailto:vreqa@va.gov).

NOTE: A QA review will not be conducted on casework that has been completed by another RO such as entitlement determination, case management, or case closure. If the casework was completed by an RO other than the one for which it was selected, the selected RO should contact the STAR Team via the QA mailbox at [vreqa@va.gov](mailto:vreqa@va.gov) for guidance.

## Correction of Errors after Selection for STAR Review

### Addition or Deletion on Requested CER Folders

(Change Date November 30, 2017)

Once an RO receives notification of cases selected for review, no additions or deletions may be made related to work or activities that were or should have been completed prior to the date selected for review. Case management and service delivery should continue in the case.

NOTE: A case should not be moved to Discontinued or Rehabilitated status without the VR&E Officer’s review of the CER folder. If a case is undergoing STAR review, and the RO needs to move the case to Discontinued or Rehabilitated status, the RO must send an email to the QA mailbox, at [vreqa@va.gov](mailto:vreqa@va.gov), so that the review of that case can be expedited and the CER folder returned to the RO.

### Corrections after Notification of Case Selection

(Change Date November 26, 2013)

An error is cited for any issue found and corrected after the date of the STAR notification letter. The review is intended to assess the accuracy of decisions and quality of services at the time the benefits are being administered to the Veterans. An error corrected after the case is selected for review is considered a ‘correction’ in response to the case selection.

### Corrections Prior to Notification of Case Selection

(Change Date November 26, 2013)

An error is not cited for any issue found and corrected prior to the case being selected for the STAR review.

### Required Corrections

(Change Date November 30, 2017)

An identified error that negatively affects a Veteran’s benefits, such as errors resulting in an overpayment or underpayment, must be corrected immediately.

Additionally, errors including, but not limited to, a missing or unsigned rehabilitation plan, a plan which has expired or has not been amended as appropriate, or a missing entitlement narrative must also be corrected.

### Uncorrectable Errors

(Change Date November 26, 2013)

An error that cannot be corrected, such as failure to maintain required follow-up contact with the Veteran or an untimely provision of due process, may be explained in CWINRS Notes, if identified prior to selection for STAR review.

## The STAR Review Process

### Grace Period for Implementation of New or Revised Policy

(Change Date November 26, 2013)

All VREOs must ensure that appropriate training is provided to staff members within 90 calendar days of implementation to ensure effective application of the new or revised policies. The ROs are provided a grace period of 90 calendar days from the effective date of each new or revised policy. The effective date may be the date of the letter or the date of implementation as specified in the letter.

Within the grace period, the STAR Team will not cite any errors on the issue(s) related to the new or revised policy. However, the identified issue will be marked as “Notice of Future Error”. In addition, feedback for training purposes is marked as “Comments Only”.

### Dual Reviews

(Change Date November 26, 2013)

Dual reviews are conducted on a random selection of cases to ensure consistency in review processes and results. Two STAR Team members conduct the dual reviews independently on each case. The QA Supervisor or designee reviews the results to resolve any disagreements.

### Corrective Actions

(Change Date November 30, 2017)

When a significant error is found during the review, the reviewer must specify the corresponding corrective action(s). A Corrective Action Report is posted to the SharePoint site at the end of each monthly review session. The Corrective Action Report will list corrective actions for each case review, or will indicate that no corrective actions are required. The Corrective Actions Report is posted in a Microsoft Excel document. The RO must explain the corrective action taken to correct the error. This explanation should be made on the Corrective Action Report, and the completed report should be saved to the STAR Team SharePoint site within 30 days of the completion of the STAR review session in which the Corrective Action was cited. Due dates for Corrective Action Reports are posted to the calendar on the main page of the SharePoint site.

An action is not required if Corrective Actions are not cited during a review session.

NOTE: The STAR Team monitors each RO’s compliance with the corrective actions. Notifications are sent to ROs that have not submitted their Corrective Action Report.

1. Case Substitutions

(Change Date November 30, 2017)

Currently, substitutions cannot be made for cases identified for STAR review.

1. Local QA Review Procedures

## Purpose

(Change Date November 30, 2017)

The Local QA review evaluates the decisions and service delivery completed by the Case Manager. The review results may identify individual training needs, deficiencies in staff competencies, resource issues, management concerns, etc., and may serve as a basis for planning actions to improve quality of services.

## VR&E Officer’s Responsibilities

(Change Date November 26, 2013)

The VREO is responsible for ensuring the quality of service delivery in the VR&E Division. The responsibilities include reviewing and assessing the quality of work performed by VR&E employees and contract service providers, and using the data gathered during the local reviews as part of an overall program of quality review and improvement.

## Delegation of Local QA Reviews

(Change Date November 26, 2013)

The VREO or his/her designee conducts the Local QA reviews. A designated reviewer must be qualified to perform the Local QA reviews and enter the appropriate reviews in the ROQ SharePoint site.

A qualified reviewer is defined as a VRC at the journeyman level, who has supervisory role, or whose performance level is outstanding or excellent.

NOTE: A designated reviewer cannot review any of his/her assigned cases.

## Review Schedule

(Change Date November 26, 2013)

Local QA reviews may be conducted monthly upon receipt of the list of cases for review. However, all Local QA reviews must be completed prior to the end of each quarter. The VREO must ensure that reviews are entered accurately and timely in the ROQ SharePoint site.

## Case Selection

(Change Date November 26, 2013)

Cases for review at the local level are selected in the same manner as those selected for the STAR reviews. VR&E Service determines the number of cases to be reviewed for each RO. The number of cases varies by RO, as it is based on the size of each RO’s workload.

## Sampling Procedures and Criteria

(Change Date November 30, 2017)

For Local QA review, cases are selected for EDRP and RSD review types only. The criteria for the case selection is the same as for EDRP and RSD cases selected for STAR reviews as discussed in section 2.06 of this chapter.

## Case Substitutions

(Change Date November 30, 2017)

For Local QA review, the VREO or his/her designee may select another case for the review. The VREO or his/her designee must inform the STAR Team of the substitution via the QA mailbox at [vreqa@va.gov](mailto:vreqa@va.gov). The following information must be included when informing the STAR Team of the substitution:

• Name, claim number and review type of Veteran on original list

• Name, claim number and review type of substituted case

• Month in which substitution is taking place

NOTE: A Local QA review will not be conducted on casework that has been completed by another RO such as entitlement determination, case management, or case closure.

## Identified Errors with Corrective Actions

(Change Date November 26, 2013)

At the local level, the VREO will evaluate identified problems to plan corrective actions, which may include training, process improvement, or other management action.

### Entitlement Determinations and Outcome Decisions

(Change Date November 26, 2013)

1. If an error is identified on entitlement determinations or outcome decisions, the VREO refers the case to the responsible case manager to make the corrective action.
2. If the case manager disagrees with the VREO’s decision of error, the VREO will request an administrative review by the Director of VR&E Service through the RO Director.

* If a positive entitlement determination or outcome determination is reversed, the Veteran will be provided required due process, and will be referred to other service providers to ensure that negative consequences to the Veteran are minimized.
* If a negative entitlement determination or outcome determination is reversed, the Veteran must be rescheduled for re-evaluation.

NOTE: Adverse decisions for entitlement to rehabilitation services may be appealed to the Board of Veterans Appeals or the United States Court of Appeals for Veterans Claims. However, a Veteran or an accredited representative may request an administrative review prior to filing an appeal to BVA.

### Fiscal Activities

(Change Date March 31, 2014)

The VREO must ensure that errors identified in fiscal activities are corrected immediately. Appropriate due process must be provided to the Veteran when the review results in an adverse action.

NOTE: A clear and unmistakable error may be identified through the STAR or Local QA review. In any of these instances, the case manager must make the request for revision of decision and submit the request to the VREO for concurrence.

1. Reconsideration Process

## QA Review Board

(Change Date November 26, 2013)

A standard process to address the ROs’ disagreements with the STAR review results is established to ensure consistency within the review process. This process also assists in identifying prevalent errors that may be addressed through nationwide and/or local training.

The QA Review Board (QARB) consists of members from the STAR Team and selected VREOs, Assistant VREOs, or Supervisory VRCs acting in an AVREO capacity.

## Request for Reconsideration

(Change Date November 30, 2017)

To request reconsideration for STAR review decision(s), the VR&E Officer or designee must:

1. Complete the request for reconsideration in a memorandum format and provide an explanation of specific issue(s) of the disagreement.

2. Include the applicable statutory, regulatory, or manual guidelines, procedural advisories, or email guidance related to the disagreement. The full text of the citations do not need to be included. Citing the reference is sufficient.

3. Complete a separate reconsideration request memorandum for each case, though multiple issues within a case may be submitted in the same memorandum.

1. Submit the reconsideration request, with the CER folder and the original STAR review instrument via trackable mail to:

VR&E STAR Team

3401 West End Ave, Suite 610E

Nashville, TN 37203

1. Upload the reconsideration request memorandum to the STAR Team SharePoint site under the RO’s page by selecting Reconsideration Requests and then selecting the appropriate fiscal year and QARB session.

## The Reconsideration Process

(Change Date November 26, 2013)

1. A dual review is conducted for each request submitted for reconsideration. Two QARB members, one from the STAR Team and one from the field, conduct the review for reconsideration independently.
2. If a disagreement occurs from the two QARB members’ review, the issue is presented to the Board for deliberation and resolution.
3. Upon completion of the reconsideration process, each office is notified in writing with the final decision. The decision notification is sent to the RO with the CER folder.
4. The decisions of the QARB are final and are not subject to further reviews.
5. Variance in the QA Review Results

## Definition of Variance

(Change Date November 26, 2013)

For the purpose of the QA reviews, variance is defined as a measure of the difference in the scores obtained from the STAR and Local QA reviews.

## Methodology

(Change Date November 26, 2013)

The STAR composite scores are compared with the local composite scores. The variance in these scores is evaluated to determine congruency between the STAR and local review results. The validation is conducted after completion of the QA reviews for the STAR and local level for each fiscal year. If the variance between the STAR review score and the local review score for any indicator does not fall within the assigned standard value, VR&E Service will indicate that the scores are not congruent.

1. QA Accuracy Scores

## QA Score Indicators

(Change Date February 13, 2015)

Some of the QA review results are used as score indicators for the performance standards on Accuracy Measures. These measures are:

* + - Entitlement Determination Accuracy (EDA)
    - Fiscal Accuracy (FA)
    - Evaluation, Planning & Services Accuracy (EPRSA)
    - Program Outcome Accuracy (POA)

• Chapter 36 Accuracy (CH36A)

## Source Data

(Change Date November 30, 2017)

The data generated for the scores are derived from the STAR reviews entered into QAWeb. The scores from the reviews are posted monthly on the Tableau Dashboard under the QA Accuracy scores, with the exception of the Entitlement Determination Accuracy (EDA) score which is not posted on the Dashboard. The scores are displayed based on a rolling 12-month period. These scores are also available on the STAR Team SharePoint site.

## QA Scores Calculation

(Change Date November 30, 2017)

The table below provides the case type and the question number(s) used for calculating each accuracy measure. The formula used to calculate accuracy scores is: the number of “Yes” responses divided by the total number of possible responses (Yes/Yes+No).

|  |  |
| --- | --- |
| **Accuracy Measure** | **Source (QA Review Instruments)** |
| Entitlement Determination Accuracy (EDA) | EDRP (Entitlement Determination/ Rehabilitation Planning) – Question #1 |
| Fiscal Accuracy (FA) | * RSD (Rehabilitation Services Delivery) – Question #2 * OD (Outcome-Discontinued) – Question #3 * OR (Outcome-Rehabilitated) – Question #3 |
| Evaluation, Planning, and Rehabilitation Services Accuracy (EPRSA) | * EDRP (Entitlement Determination/Rehabilitation Planning) – Questions1 through 6 * RSD (Rehabilitation Services Delivery) – Questions 1 through 4 * OD (Outcome-Discontinued) – Questions 1 through 5 * OR (Outcome-Rehabilitated) – Questions 1 through 5 |
| Program Outcome Accuracy (POA) | * OD (Outcome-Discontinued) – Question #1 * OR (Outcome-Rehabilitated) – Question #1 |
| Chapter 36 Accuracy (CH36A) | • CH36 – Question #1 |

## Use of the QA Review Scores

(Change Date November 26, 2013)

The QA review scores provide management with the data necessary to improve each office’s program operation and quality of service delivery. The scores may be used to identify areas that require improvement, provide information to develop effective national and local staff training, and provide appropriate resource allocation. The scores may also identify best practices in the office.

STAR results are used to evaluate performance of each office at the national level. Conversely, the Local QA review results are used to evaluate performance of each case manager in a local office.