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# The Monday Morning Workload Report

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### Summary

The Monday Morning Workload Report (MMWR) displays a snapshot of the Veterans Benefits Administration's (VBA) workload as of a specified date, typically the previous Saturday\*. In the event of a Monday holiday, the report will be posted on Tuesday. The report is prepared in Microsoft Excel and includes four worksheets:

- **Transformation tab**: Displays national totals for pending compensation, pension, and education workload. Workload is monitored and controlled by the use of end products (EPs), which are also shown on this tab.
  - **Rating Bundle Measures - SOO**: Displays national, area, and regional office-level data for Rating Bundle claims by Station of Origination. The Station of Origination (SOO) primarily represents pending claims based on geographic boundaries; typically defined by a claimant's state of residence. Only when a claim is permanently transferred from one station to another, will the SOO change.
  - **Rating Bundle Measures - SOJ**: Displays national, area, and regional office-level data for Rating Bundle claims by Station of Jurisdiction. The Station of Jurisdiction represents pending claims at the regional office currently assigned to work the claim.
- **The Traditional Aggregate tab**: Displays national, area, and regional office-level data for different groups of claims, including non-rating bundle, entitlement bundle, award adjustments bundle, program review bundle, other bundle, burial claims, accrued claims and appeals. Claims are reported based on regional office jurisdiction. Because these claim groupings are different from VBA's rating bundle of claims, this worksheet should not be directly compared to other worksheets in the Monday Morning Workload Report. Brokering, or claims processing assistance from other regional offices, is not incorporated in this report.

\*The accuracy data is updated on a monthly basis. The Issue-Based Accuracy is based on a one month lag in reporting, while the Claim-Level accuracy has a three month lag. See the Frequently Asked Questions section for more information on accuracy reporting period.

## Evolution of the Monday Morning Workload Report

This report has evolved over time, with four major modifications:

- On October 5, 2009, significantly redesigned to provide increased transparency
- On April 29, 2013, additional features such as rating bundle timeliness, accuracy, and a clear depiction of rating bundle claims (orange highlights) added to emphasize VBA's core workload performance indicators.
- On July 1, 2013, removal of Compensation and Pension Entitlement top line on the Transformation tab at the recommendation of external stakeholders.
- On October 21, 2013, enhanced to include seven new rating bundle metrics (three quality based, four performance based), increased reporting on VBA's Pre-Discharge Processing, Quick Start and Benefits Delivery at Discharge, and non-rating claim timeliness. The report now allows individuals to track metrics found on VBA's ASPIRE Dashboard on a weekly basis.
- On January 13<sup>th</sup>, 2014, substantially re-designed to include metrics by Station of Jurisdiction (e.g. who is actually working/or worked the claim). Additional changes include the following:
  - Historical bundles from the Transformation tab relocated to the top of the Traditional Aggregate tab.
  - Education claims processing data relocated from Traditional Aggregate tab to Transformation tab.
  - Creation of a Rating Bundle data table on the Transformation tab
    - Creation of "Original" and "Supplemental" Rating Bundle totals.
  - Inclusion of hyperlinks on Transformation page to quickly view Station of Origination or Station of Jurisdiction claims processing metrics.
- On February 20<sup>th</sup>, 2014, several modifications to include:
  - Non-rating inventory on Traditional Aggregate tab.
  - Hover features on the Traditional Aggregate tab next to each bundle name which allows customers to view the end products associated with each claim bundle.
  - Updated VBA Special Mission processing data tables (Rating Bundle Measures – SOO and Rating Bundle Measures – SOJ) to include an "Other" row which shows Special Mission claims processing activities outside of the specialized processing centers.
- On July 28, 2014 a modification of the Traditional Aggregate tab data:
  - Previously, the inventory and backlog counts for "EP 135 - Hospitalization adjustment (non-rating)" under "Award Adjustments" (Cells G25 and H25) matched the same EP count for "Pension Award Adjustments" (Cells M12 and N12). This was incorrect. EP 135 claims that have a regional office station of origination with a Pension Management Center (Philadelphia, Milwaukee and St. Paul) or PMC should be counted under the "Pension Award Adjustments" EP 135 while all other EP 135 claims should be counted under the other "Award Adjustments." Instead, the EP 135 Hospitalization adjustment claims pending at the PMC stations were not displaying properly and were not counted in the total for that category. Those claims were being properly counted in all other sections and totals. The modification adjusted all reports from the January 13, 2014 redesign forward. Reports before that date reported the Pension EP 135s correctly on the "Transformation" tab.

For example: before the adjustment the June 2, 2014 MMWR showed 216 and 158 in cells G25 - H25 and M12 - M13. Now M12 and M13 for that date show 847 and 78. This is a typical example of the scale of the adjustments made to previous reports.

- On July 28, 2014, an addition to the "Traditional Aggregate" tab formatting:
  - Arrows were added to indicate end products which are included in the Rating Bundle.

- On August 11, 2014 “EP 967 - Correction of errors” claims were added to the “Pension Other” section to more accurately reflect the composition of this group as pension utilizes this end product.

## **Types of Workload in the Report**

Compensation and pension workload is comprised of the following groups of claims:

- **Rating Bundle:** Claims for disability compensation, dependency and indemnity compensation, and Veterans’ pension benefits, including both original and supplemental claims. Rating bundle claims may require a rating decision during processing. VA’s goal of eliminating the backlog in 2015 is specific to the rating bundle.
- **Non-Rating:** Claims for disability compensation, dependency and indemnity compensation, and Veterans’ pension benefits, that do not require a rating decision (i.e. claim to add dependent to award).
- **Entitlement:** Claims from the rating bundle as well as other claims to determine eligibility for VA medical treatment and other VA benefits.
- **Award Adjustment:** Claims that involve modification of benefits based upon additional ancillary factors.
- **Program Review:** Work based on internal controls to audit, review, and ensure benefits and entitlements are properly decided in accordance with laws and regulations .
- **Other:** Work that has no effect on entitlement or adjustment to monetary benefits
- **Burial:** Claims associated with burial benefits.
- **Accrued:** Claims related to benefits not paid prior to the death of a Veteran or survivor based upon a claim granted after the applicant’s death.
- **Appeals:** Claims based on a beneficiary’s disagreement with a VBA decision.

## **Metrics in the Report**

### **Transformation Worksheet**

#### **Compensation and Pension Metrics**

- **# Pending:** The number of claims pending at the end of the reporting period .
- **# Pending Over 125:** The number of claims that are pending more than 125 days at the end of a reporting period.
- **Percentage Pending > 125 days:** The percent of claims that are pending more than 125 days at the end of a reporting period. This is calculated by dividing the number of claims pending over 125 days by the total number of claims pending.

#### **Education Metrics**

The MMWR Report includes data on all VA education programs, including the Post-9/11 GI Bill. Education claims are processed at four regional processing offices in Atlanta, Buffalo, Muskogee, and St. Louis. The following metrics are included in the MMWR Report for education claims:

- **Current Work Items Pending:** The number of claims and other work actions pending as of the end of the reporting period
- **Work Items Pending Last Week:** The number of claims and other work actions pending as of the end of the prior reporting period
- **Weekly Change:** The difference between the number of claims/work actions pending for the current reporting period and the previous reporting period
- **Percent Change:** The percent which current number of claims/work actions pending increased or decreased from the previous reporting period

## **Rating Bundle Measure Worksheets**

- **# Pending**: The number of claims pending at the end of the reporting period
- **Avg. Days Pending**: The average number of days from the date a claim is received through the current reporting period for all currently pending claims. It is calculated by dividing the total number of days pending by the total number of pending claims.
- **Percentage Pending > 125 days (Backlog)**: The percent of claims that are pending more than 125 days at the end of a reporting period. This is calculated by dividing the number of claims pending over 125 days by the total number of claims pending. This number represents the number of claims “backlogged.”
- **Claims completed – Month to Date**: The number of completed claims that required a rating decision month to date. (1<sup>st</sup> of current month through file date of the report).
- **Claims completed – Fiscal Year to Date**: The number of completed claims that required a rating decision fiscal year to date (October 1, 2013 through the file date of the report).
- **Avg. Days to Complete – Month to Date**: The average number of days to complete claims that required a rating decision month to date. This is calculated by dividing the total number of days to complete by the total number of claims completed month to date.
- **Avg. Days to Complete – Fiscal Year to Date**: The average number of days to complete claims that required a rating decision fiscal year to date. This is calculated by dividing the total number of days to complete by the total number of claims completed fiscal year to date.
- **3 Month Entitlement Accuracy – Issue Based**: Claims processing accuracy for compensation medical issues adjudicated over a three-month rolling average. This is calculated by dividing the number of medical issues adjudicated with no errors by the total number of medical issues decided.
- **3 Month Entitlement Accuracy – Claim Level**: Claims processing accuracy for compensation claims over a three-month rolling average. This is calculated by dividing the number of claims with no errors by the total number of claims reviewed.
- **12 Month Entitlement Accuracy – Claim Level**: Claims processing accuracy for compensation claims over a 12-month rolling average. This is calculated by dividing the number of claims with no errors by the total number of claims reviewed.
- **12 Month Authorization Accuracy – Claim Level**: Claims processing accuracy for compensation non-rating claims over a 12-month rolling average. This is calculated by dividing the number of claims with no errors by the total number of claims reviewed.

## **Traditional Aggregate Worksheet**

Considered as an alternative to the Rating Bundle aggregate, the Entitlement Bundle metrics are retained due to continued interest.

### **Compensation and Pension Metrics**

- **Avg. Days Pending**: The average number of days from the date a claim is received through the current reporting period for all currently pending claims. It is calculated by dividing the total number of days pending by the total number of pending claims.
- **Claims Pending**: The number of claims pending at the end of the reporting period.
- **Pending Over 125**: The number of claims that are pending more than 125 days at the end of a reporting period.
- **Percentage Pending > 125 days**: The percent of claims that are pending more than 125 days at the end of a reporting period. This is calculated by dividing the number of claims pending over 125 days by the total number of claims pending.

## Appeals Metrics

The MMWR Report includes data on all pending VBA appeals workload. This includes work pending at Regional Offices (RO) and the Appeals Management Center (AMC). Report metrics include:

- Number of Notice of Disagreements (NOD) Pending: The number of claims where the veteran disagrees with the rating decision and submits a letter to the RO indicating his or her dissent.
- Average Days Pending for Notice of Disagreement: The average number of days pending NOD status.
- Number of SOC Pending: The number of claims where an SOC was issued and pending receipt of Form 9.
- Number of Form 9 Pending: The number of claims where the veteran formalized the case through submission of a Form 9 (begins the formal appeals process).
- Average Days Pending for Form 9: The average number of days pending in Form 9 status.
- Number of Remands Returned to the RO: The number of appeals remanded to VBA from the Board of Veterans Appeals (BVA).
- Average Days Pending for Remands at the RO: The average number of days pending remand status.
- Number of Remands sent to the Appeals Management Center: The number of appeals remanded to AMC from BVA.
- Average Days Pending for Remands at the AMC: The average number of days pending remand status.
- Claims Ready for Travel Board: The inventory of claims that are being reviewed by VA's mobile Appellate Adjudication Team.

## Frequently Asked Questions (FAQ)

### Why was the Entitlement Bundle removed from the report?

VBA removed the Entitlement Bundle roll-up (an older, alternative view of VBA workload activity), at the national level, because we felt it was confusing readers. The Rating Bundle inventory has been and continues to be the standard measure for VBA's strategic 2015 targets.

The Entitlement Bundle claims are a set of claims in addition to the Rating Bundle. The claims formerly reported in the Entitlement bundle total are still available at the end product level on the Transformation tab. The end products that are part of the Entitlement Bundle, but not the Rating Bundle are:

- EP095 (Initial entitlement decisions for Vocational Rehabilitation and Employment)
- EP420 (Spina bifida and/or birth defects reconsideration)
- EP410 (Initial claims from children of Veterans with Spina bifida and/or birth defects)
- EP190 (Initial entitlement – Survivor's Pension)

One end product that is in the Rating Bundle but not the Entitlement Bundle is EP 310 (Future Exam for Disabilities).

Entitlement Bundle (Listed separately until 6/24/2013)	EP or Description	Rating Bundle (Continuously listed)
<b>Original Entitlement - Veterans<sup>1</sup></b>		
X	EP 095 - Initial entitlement decisions for Voc Rehab	
X	EP 010 - Initial entitlement for service-connected disability (=>8)	X
X	EP 110 - Initial entitlement for service-connected disability (<=7)	X
<b>Original Entitlement - Survivors<sup>2</sup></b>		
X	EP 140 - Initial claims from surviving spouses, children or parents	X
X	EP 410 - Initial claims from children Veterans with Spina bifida and/or birth defects	
<b>Supplemental Entitlement</b>		
X	EP 020 - Increased evaluation and/or additional claimed conditions	X
X	EP 320 - Increased entitlement due to hospitalization or surgery	X
X	EP 420 - Spina bifida and/or birth defects reconsideration	
X	EP 681 - Reopened or new Agent Orange claims prior to 8/30/10	X
X	EP 687 - Nehmer review cases based upon new Agent Orange presumptives	X
X	EP 405 - Reopened or new Agent Orange claims After 9/01/10	X
X	EP 409 - Agent Orange claims where an interim decision was provided	X
<b>Pension Original Entitlement</b>		
X	EP 180 - Initial entitlement - Veteran	X
X	EP 120 - Increased entitlement and/or reconsideration	X
X	EP 190 - Initial entitlement - Survivor	
<b>Award Adjustments</b>		
	EP 310 - Future examination for disabilities	X
Note EPs 681, 687, 405, 409 were designated as Agent Orange EPs in November 2010. 681, 687 & 405 Added to MMWR on 11/01/2010      EP 409 Added to MMWR on 12/13/2010		

**Where can I find historical copies of the MMWR?**

Historical copies of the MMWR are available back to the 2004 calendar year on the MMWR website directly below the data table with the current year reports.

**What claims are in the “backlog”?**

VBA has defined the “backlog,” as rating claims pending greater than 125 days. Rating claims are considered claims for disability compensation, dependency and indemnity compensation, and Veterans’ pension benefits, including both original and supplemental claims. Rating claims generally require a disability rating decision by a Rating Veteran Service Representative.

**Where can I find the backlog numbers for my Regional Office?**

The percentage of claims backlogged at each Regional Office can be found on the Rating Bundle Aggregate worksheet. The number of claims backlogged nationwide can be found on the Transformation worksheet.

**What’s the difference between Claim-Level Accuracy and Issue-Based Accuracy?**

With Issue-based Accuracy, if a claims processor rates 15 out of 16 medical issues correctly, that’s a 93.7 percent rating. Using the same example with Claims-Level Accuracy, the entire claim is considered incorrect, instead of 93 percent correct.

**Why is the Issue-based accuracy “N/A” for the Pension Rating Claims?**

Pension benefits are needs-based benefit program where eligible Veterans do not file medical conditions related to military service. Therefore, Pension claim processors do not rate medical issues for each pension claim. Instead, they determine whether a claimant meets the basic medical criteria for pension benefits.

**Why are the accuracy numbers not updated every week?**

VBA’s extensive quality review program requires quality assurance specialists to manually review thousands of completed claims each month. These rigorous reviews are time-consuming and are only updated on a monthly basis.

The accuracy values in the MMWR are typically updated by the 3<sup>rd</sup> Monday in each month.