

Traumatic Brain Injury (TBI) Fact Sheet DMA-12-003 Frequently Asked Questions - Revised

BACKGROUND

On February 2, 2012, DMA issued a Revised Fact Sheet, TBI Disability Examination Providers, DMA-12-003, clarifying the guidance regarding the initial diagnosis of TBI as part of disability evaluation examinations (Integrated Disability Evaluation System (IDES) or Compensation and Pension (C&P)) for disability benefits claims purposes. The Revised Fact Sheet also clarified which providers may conduct the initial and review of residual TBI disability evaluation examinations and complete the Disability Benefits Questionnaire (DBQ). Fact Sheet DMA-12-003 can be found on the DMA website at: <http://vaww.demo.va.gov/>, in the Publications Library under Fact Sheets.

DMA has received several questions about the guidance in the Fact Sheet. A FAQ document was issued April 13, 2012, addressing those questions. This FAQ document has been revised to update websites for clarification purposes. This Revised FAQ rescinds the DMA FAQ issued April 13, 2012.

QUESTIONS AND ANSWERS

1. In some cases, VBA is using providers under the VES program to do examinations. Can the TBI diagnosis provided by these providers be used?

Yes, if the clinician providing the diagnosis is a member of one of the four specialty groups. See the note as part of the answer to Question #2 on the DMA-12-003 Fact Sheet: NOTE: For purposes of the fact Sheet, VHA physician includes VHA employed physicians, academic affiliated physician, fee basis and VHA contracted physicians.

2. Please clarify who is considered “VHA clinical specialist?” For example, would a C&P Fee-Basis consultant psychiatrist, psychiatrist, neurosurgeon or neurologist who performs C&P exams and is C&P certified and TBI certified be considered a “VHA clinical specialist?” These are not VA employees, but private physicians who are used by C&P to perform specialty examinations and are reimbursed using the VA Fee-Basis Consult service.

Yes, VA fee-based consultant providers are considered “VHA clinical specialists.” See the note as part of the answer to Question #2 on the DMA-12-003 Fact Sheet: NOTE:

For purposes of the fact Sheet, VHA physician includes VHA employed physicians, academic affiliated physician, fee basis and VHA contracted physicians.

3. Please clarify whether a board-certified physiatrist working in C&P can make the initial diagnosis of TBI.

A member of one of the four specialty groups may make the diagnosis of TBI during the C&P examination. The Veteran does not need an additional referral to a specialty service.

4. How does one know if a previous VA examiner/physician is board certified or board eligible? CPRS rarely includes certification in the notes and for the most part, VA does not use letterhead that would indicate this certification?

The National Provider Index maintained by the Department of Health and Human Services provides information regarding clinicians:
<https://nppes.cms.hhs.gov/NPPES/NPIRegistryHome.do> Additionally,
http://healthguideusa.org/medical_license_lookup.htm is a website linking to medical board databases for all 50 states and the District of Columbia. In some cases, this information may be more current than the National Provider Index.

5. If the previous VA examiner is not Board eligible or Board certified, does the Veteran need a TBI initial examination?

The specialist needs to be Board eligible or Board certified.

6. If the Veteran is already service connected for TBI, diagnosed by someone not meeting the criteria, does an initial examination have to be redone?

If this is an examination for an increase or additional residuals, the diagnosis of record, regardless of source, would need to be respected.

7. Would one of the four specialists qualified to diagnose TBI be able to render a diagnosis of TBI through a record review or through some other remote means without a face-to-face appointment to obtain the diagnosis?

There is no guidance forbidding a diagnosis made on the basis of a record review. The specialist must use his or her clinical judgment to make that determination.

8. Can a C&P generalist perform a TBI examination prior to the unconfirmed diagnosis but wait to sign until the diagnosis can be obtained from one of the four specialists?

If the diagnosis of TBI is unconfirmed, the C&P generalist clinician could complete the TBI disability examination and then finalize the report once the diagnosis of TBI is either

confirmed or denied by the specialist. This is not optimal, but for timeliness purposes, this is acceptable.

9. The Fact Sheet states that the diagnosis of TBI must be made by the four specialists listed. It does not specifically address the lack of diagnosis of TBI. Can a generalist C&P examiner determine there is no diagnosis of TBI? There are occasions when a TBI is claimed but the records and the history clearly indicates that the patient has not had a TBI.

It is probably even more important to refer to one of the four specialists when TBI is claimed and it is believed there is no diagnosis of TBI.

10. Most doctors typically sign their names with MD in their signature block. It typically does not indicate their specialty designation. Is there an expedient way to look up MD credentials/board certifications especially for Department of Defense? Even if a TBI is documented in the DoD record, but the doctor's specialty cannot be determined, providing a new examination by one of the four specialist may create a substantial amount of rework. Is there a way to reconsider if the DoD has stipulated a TBI in the record, that it has been confirmed by one of the four specialists?

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Furthermore, if the specialist is in your facility, you can certainly ask for a list of Board certified/Board eligible clinicians in each of these specialties.

11. The Fact Sheet states “If the examining facility has a polytrauma center then the referral can be made to that center.” We have a polytrauma/TBI clinic, but the physician overseeing the program is a family physician, and prior to him an internist was the director. Would a diagnosis made by the polytrauma directors be acceptable?

Yes, the polytrauma centers are overseen by one of the four specialists. Many times there is a team approach to the diagnosis, but ultimately the director is in charge of the team. So a diagnosis by the polytrauma team and concurred with by the director would be acceptable.

12. Where is the TBI training module?

The TBI exam is one of four new training courses added to the Talent Management System (TMS) for compensation and pension (C&P) examiners. The other courses are

updated versions of the General Certification Overview, Musculoskeletal exam, and General Medical exam. These courses have been placed in two new curriculums in the TMS catalog. To locate the courses search: DEMO C&P in TMS. The following curriculums will appear:

DEMO C&P Certification Training
DEMO C&P Examination Training

The first curriculum, DEMO C&P Certification Training, is where to find the mandatory certification courses; currently General certification, TBI, and Musculoskeletal exams.

13. Who should be contacted to arrange “certification” for someone to do TBI examinations?

Contact the local C&P program administrator.

14. If the VHA specialist, i.e. a psychiatrist, is not a certified C&P examiner, however they are a VHA provider, do they need to complete both the General certification as well as the TBI courses in TMS to provide the TBI diagnosis?

No, if the psychiatrist is only providing or confirming the diagnosis, and not completing the full C&P report, they do not have to take the TMS TBI training.

15. Would a VHA provider be required to provide a TBI diagnosis if a person has been diagnosed by a facility specializing in TBI?

On a case by case basis, if it can be documented that the private physician is one of the four specialists, the diagnosis will be acceptable.

**For additional information not covered in this FAQ please contact:
DMA at (727) 540-3800, visit the DMA website at <http://vaww.demo.va.gov>, or send
an inquiry to the DMA Corporate mailbox at CorporateMailbox.DMA@va.gov**