

Fiscal Accuracy (FA) Instrument

Question	Compliance		
<u>Supporting Documentation</u>			
1. Were required documents signed, dated, and filed correctly?	Yes	No	NA
A. The entitlement decision was not documented on 28-1902b as required.	<input type="checkbox"/>		
B. 28-1902b, was not signed by the VRC as required.	<input type="checkbox"/>		
C. Rehabilitation plan was not present in the VR&E record.	<input type="checkbox"/>		
D. Rehabilitation plan was not signed by the Veteran.	<input type="checkbox"/>		
E. Rehabilitation plan was not signed by the VRC.	<input type="checkbox"/>		
F. Anticipated completion date on the plan was expired when services were authorized.	<input type="checkbox"/>		
G. Duration of services dates for the applicable plan objective were expired when services were authorized.	<input type="checkbox"/>		
H. Services (including training or provision of equipment or supplies) required to meet the overall goal were not outlined on the rehabilitation plan.	<input type="checkbox"/>		
I. The record did not contain justification for purchase or reimbursement of required supplies or equipment.	<input type="checkbox"/>		
J. 28-1905m was not present and/or complete for supplies or equipment purchased outside a training facility.	<input type="checkbox"/>		
K. No documented justification for high cost facility was present.	<input type="checkbox"/>		
2. Was required concurrence documented prior to expenditure?	Yes	No	NA
A. VREO concurrence was not documented when required.	<input type="checkbox"/>		
B. RO Director concurrence was not documented when required.	<input type="checkbox"/>		
C. VR&E Service Director concurrence was not documented when required.	<input type="checkbox"/>		
3. Were rate election and effective date documented?	Yes	No	NA
A. P911SA rate election was not documented.	<input type="checkbox"/>		
B. P911SA rate effective date was not documented.	<input type="checkbox"/>		
C. Regular CH31 rate re-election was not documented.	<input type="checkbox"/>		
D. Chapter 30 rate election was not documented.	<input type="checkbox"/>		
<input type="checkbox"/> <u>Subsistence Allowance</u>			
4. Was a valid 28-1905 documented in the record to authorize services?	Yes	No	NA
A. 28-1905 was not present to authorize the enrollment period.	<input type="checkbox"/>		
B. 28-1905 was not present to authorize the school bookstore purchase, if required.	<input type="checkbox"/>		
C. 28-1905 was not signed by the case manager.	<input type="checkbox"/>		
D. 28-1905 listed the incorrect facility code.	<input type="checkbox"/>		
E. 28-1905 authorized a period in excess of one academic year.	<input type="checkbox"/>		

5. Did documentation support enrollment and/or attendance when subsistence was paid?	Yes	No	NA
A. Enrollment was not certified by the training facility, for the period in which subsistence was paid.	<input type="checkbox"/>		
B. There was no 28-1905c, Monthly Report of Training and Wages, (or 28-1917 if appropriate) for the period in which subsistence was paid.	<input type="checkbox"/>		
6. Was each facility listed on the rehabilitation plan, with the primary facility identified, when the Veteran is training at two or more facilities?	Yes	No	NA
7. Was the Veteran qualified to receive Subsistence Allowance when it was paid?	Yes	No	NA
A. The individual was on Active Duty.	<input type="checkbox"/>		
B. The Veteran was participating in an OJT less than full-time.	<input type="checkbox"/>		
C. The Veteran was participating at less than ½ time and received subsistence without the proper documentation.	<input type="checkbox"/>		
D. The duration of undergraduate training was less than one week.	<input type="checkbox"/>		
8. Was the beginning and ending date of the award/enrollment period correct?	Yes	No	NA
A. The incorrect start date was used on the award.	<input type="checkbox"/>		
B. The incorrect end date was used on the award.	<input type="checkbox"/>		
9. Was the subsistence allowance paid using the correct rate of pursuit?	Yes	No	NA
A. Standard term: The correct rate of pursuit was not paid.	<input type="checkbox"/>		
B. Non-standard term: The correct rate of pursuit was not paid.	<input type="checkbox"/>		
C. Overlapping period when two or more standard terms overlap: The correct rate of pursuit was not paid.	<input type="checkbox"/>		
D. Overlapping period when two or more non-standard terms overlap: The correct rate of pursuit was not paid.	<input type="checkbox"/>		
E. Overlapping period when two or more standard and non-standard terms overlap: The correct rate of pursuit was not paid.	<input type="checkbox"/>		
F. Overlapping period when clock hour training and credit hour training overlap: The correct rate of pursuit was not paid.	<input type="checkbox"/>		
G. Clock hour training: The correct rate of pursuit was not paid.	<input type="checkbox"/>		
H. Graduate or advanced professional training: The correct rate of pursuit was not paid.	<input type="checkbox"/>		
I. The customary vacation/holiday of 7 days or more was not deducted when calculating the length of the term, which resulted in an incorrect rate of pursuit.	<input type="checkbox"/>		
10. Was the subsistence allowance award paid for the correct fiscal year (FY)/calendar year (CY)?	Yes	No	NA
A. Regular CH31 rate was paid for the incorrect FY.	<input type="checkbox"/>		
B. P911SA rate was paid for the incorrect CY.	<input type="checkbox"/>		
C. P911SA rate was incorrectly protected, or not protected when appropriate.	<input type="checkbox"/>		

11. Did the award reflect the correct number of dependents?	Yes	No	NA
A. Number of dependents on award was inconsistent with documentation.	<input type="checkbox"/>		
B. The dependent(s) was added to the award on the incorrect date.	<input type="checkbox"/>		
C. The dependent(s) was removed from the award on the incorrect date.	<input type="checkbox"/>		
12. Was the P911SA rate based on the correct BAH rate?	Yes	No	NA
A. The P911SA rate was not paid at the rate for E-5 with dependents for the zip code of the authorized facility.	<input type="checkbox"/>		
B. Online: The P911SA rate was not paid at the correct rate when training was solely in-home or online.	<input type="checkbox"/>		
C. More than one facility: The P911SA was not paid at the correct rate when the Veteran attended more than one facility.	<input type="checkbox"/>		
D. OHA: The P911SA was not paid at the correct rate when the Veteran attended a facility in a US Territory.	<input type="checkbox"/>		
E. Foreign institution: The P911SA was not paid at the correct rate when the Veteran is attending a foreign institution with no assigned zip code.	<input type="checkbox"/>		
13. Was the P911SA rate paid correctly based on the first use of CH31 entitlement?	Yes	No	NA
A. The Uncapped P911SA rate was incorrectly paid.	<input type="checkbox"/>		
B. The Capped P911SA rate was incorrectly paid.	<input type="checkbox"/>		
14. Was subsistence allowance paid at the correct rate for an OJT/Apprenticeship?	Yes	No	NA
15. Was subsistence allowance correctly adjusted for enrollment changes (reductions/withdrawals/additions)?	Yes	No	NA
A. Mitigating circumstances were not correctly developed.	<input type="checkbox"/>		
B. The award was not correctly amended when mitigating circumstances were established.	<input type="checkbox"/>		
C. The award was not correctly amended when mitigating circumstances were not established.	<input type="checkbox"/>		
D. The Six Credit Exclusion was not applied or was applied incorrectly.	<input type="checkbox"/>		
E. Punitive grades were assigned and the award was not adjusted effective the last date of attendance.	<input type="checkbox"/>		
F. When the award was adjusted, the correct rate of pursuit was not applied.	<input type="checkbox"/>		
G. When the award was adjusted, the correct dates were not used.	<input type="checkbox"/>		
16. When non-payment of subsistence allowance occurred, was a valid justification provided and was the Veteran notified?	Yes	No	NA
A. No justification was documented.	<input type="checkbox"/>		
B. Veteran was not notified of non-payment.	<input type="checkbox"/>		
17. Was subsistence allowance processed timely?	Yes	No	N/A
<input type="checkbox"/> Employment Adjustment Allowance			
18. Was the Veteran eligible to receive EAA when authorized and paid?	Yes	No	NA
A. The Veteran did not participate in training at a VA approved facility while in RTE status.	<input type="checkbox"/>		

B. The Job Ready Decision was not documented.	<input type="checkbox"/>		
C. A valid IEAP or IWRP/IEAP was not included in the record.	<input type="checkbox"/>		
D. Contact was not established with the Veteran and documented to verify participation in planned employment services for a period of at least 30 days.	<input type="checkbox"/>		
E. The Veteran's case was not in JR status.	<input type="checkbox"/>		
19. Was the correct amount paid for each EAA award?	Yes	No	NA
A. CH31 rate: Incorrect fiscal year.	<input type="checkbox"/>		
B. CH31 rate: Incorrect number of dependents.	<input type="checkbox"/>		
C. P911SA rate: Inconsistent with rate paid for the type of training the Veteran was last pursuing (zip code, locality pay, capped vs. uncapped, etc.).	<input type="checkbox"/>		
D. P911SA rate: Incorrect rate paid when the Veteran last pursued training solely online.	<input type="checkbox"/>		
E. P911SA rate: incorrect rate for the CY or protected rate.	<input type="checkbox"/>		
20. Was EAA authorized timely?	Yes	No	N/A
21. When a denial of EAA occurred, was a valid justification provided and was the Veteran notified?	Yes	No	NA
A. No justification was documented.	<input type="checkbox"/>		
B. Veteran was not notified of non-payment.	<input type="checkbox"/>		
22. When the Veteran received additional payments of EAA, did documentation support this payment?	Yes	No	NA
A. Plan was not redeveloped with a new vocational goal.	<input type="checkbox"/>		
B. Documentation did not support payment of additional EAA due to natural disaster.	<input type="checkbox"/>		

Other Expenditures

23. Were criteria for Retroactive Induction payment met?	Yes	No	NA
24. Were criteria for Retroactive Reimbursement met?	Yes	No	NA
25. Was Revolving Fund Loan authorized and paid correctly?	Yes	No	NA
A. The individual was not eligible to receive an RFL.	<input type="checkbox"/>		
B. Required documentation was not present to support authorization of RFL.	<input type="checkbox"/>		
26. Was beneficiary travel authorized and paid correctly?	Yes	No	NA
27. Were expenditures allowable?	Yes	No	NA
A. The Veteran was receiving benefits under Chapter 31 and another VA Education program (duplication of benefits occurred).	<input type="checkbox"/>		
B. Purchased items or services were not allowed.	<input type="checkbox"/>		
C. Duplicate payment, purchase, or reimbursement.	<input type="checkbox"/>		

Reviews (For tracking only. Not included in score calculation. Answering No does not result in an error.)

28. Was the requested Higher-Level Review completed in an accurate and timely manner?	Yes	No	N/A
A. The requested review was not completed accurately.	<input type="checkbox"/>		

B. The review was not completed in a timely manner (90 days or less from date of request).	<input type="checkbox"/>		
C. The review was not completed by a more experienced VRC than the individual who made the decision.	<input type="checkbox"/>		
D. The review indicated a Duty to Assist error, but a Supplemental Claim Review was not initiated.	<input type="checkbox"/>		
E. The requested informal conference was not provided.	<input type="checkbox"/>		
29. Was the requested Supplemental Review completed in an accurate and timely manner?	Yes	No	N/A
A. The requested review was not completed accurately.	<input type="checkbox"/>		
B. The review was not completed in a timely manner (125 days or less from date of request or identification of a Duty to Assist error).	<input type="checkbox"/>		

<input type="checkbox"/> IPERA (For tracking only. Not included in score. Answering No <u>does not</u> result in a fiscal error.)			
30. Was the correct amount paid?	Yes	No	N/A
A. An overpayment was made requiring correction or documentation of an Admin Error if appropriate. List amount if known.	<input type="checkbox"/>		
B. An overpayment was made as a result of an Admin Error, which is correctly documented. List amount if known.	<input type="checkbox"/>		
C. An underpayment was made requiring correction. List amount if known.	<input type="checkbox"/>		

<input type="checkbox"/> General Comments: