**Fiscal Accuracy (FA) Instrument**

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| **Question** | **Compliance** |
| **Supporting Documentation**  |
| 1. Were required documents signed, dated, and filed correctly?
 | Yes | No | NA |
| 1. The entitlement decision was not documented on 28-1902b as required.
 | [ ]  |
| 1. 28-1902b, was not signed by the VRC as required.
 | [ ]  |
| 1. Rehabilitation plan was not present in the VR&E record.
 | [ ]  |
| 1. Rehabilitation plan was not signed by the Veteran.
 | [ ]  |
| 1. Rehabilitation plan was not signed by the VRC.
 | [ ]  |
| 1. Anticipated completion date on the plan was expired when services were authorized.
 | [ ]  |
| 1. Duration of services dates for the applicable plan objective were expired when services were authorized.
 |[ ]
| 1. Services (including training or provision of equipment or supplies) required to meet the overall goal were not outlined on the rehabilitation plan.
 | [ ]  |
| 1. The record did not contain justification for purchase or reimbursement of required supplies or equipment.
 | [ ]  |
| 1. 28-1905m was not present and/or complete for supplies or equipment purchased outside a training facility.
 | [ ]  |
| 1. No documented justification for high cost facility was present.
 | [ ]  |
| 1. Was required concurrence documented prior to expenditure?
 | Yes | No | NA |
| 1. VREO concurrence was not documented when required.
 |[ ]
| 1. RO Director concurrence was not documented when required.
 |[ ]
| 1. VR&E Service Director concurrence was not documented when required.
 |[ ]
| 1. Were rate election and effective date documented?
 | Yes | No | NA |
| 1. P911SA rate election was not documented.
 | [ ]  |
| 1. P911SA rate effective date was not documented.
 | [ ]  |
| 1. Regular CH31 rate re-election was not documented.
 | [ ]  |
| 1. Chapter 30 rate election was not documented.
 |[ ]
| [ ]  **Subsistence Allowance**  |
| 1. Was a valid 28-1905 documented in the record to authorize services?
 | Yes | No | NA |
| 1. 28-1905 was not present to authorize the enrollment period.
 |[ ]
| 1. 28-1905 was not present to authorize the school bookstore purchase, if required.
 |[ ]
| 1. 28-1905 was not signed by the case manager.
 |[ ]
| 1. 28-1905 listed the incorrect facility code.
 |[ ]
| 1. 28-1905 authorized a period in excess of one academic year.
 |[ ]
| 1. Did documentation support enrollment and/or attendance when subsistence was paid?
 | Yes | No | NA |
| 1. Enrollment was not certified by the training facility, for the period in which subsistence was paid.
 |[ ]
| 1. There was no 28-1905c, Monthly Report of Training and Wages, (or 28-1917 if appropriate) for the period in which subsistence was paid.
 |[ ]
| 1. 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 |
| 1. Was the Veteran qualified to receive Subsistence Allowance when it was paid?
 | Yes | No | NA |
| 1. The individual was on Active Duty.
 |[ ]
| 1. The Veteran was participating in an OJT less than full-time.
 |[ ]
| 1. The Veteran was participating at less than ½ time and received subsistence without the proper documentation.
 |[ ]
| 1. The duration of undergraduate training was less than one week.
 |[ ]
| 1. Was the beginning and ending date of the award/ enrollment period correct?
 | Yes | No | NA |
| 1. The incorrect start date was used on the award.
 |[ ]
| 1. The incorrect end date was used on the award.
 |[ ]
| 1. Was the subsistence allowance paid using the correct rate of pursuit?
 | Yes | No | NA |
| 1. Standard term: The correct rate of pursuit was not paid.
 |[ ]
| 1. Non-standard term: The correct rate of pursuit was not paid.
 |[ ]
| 1. Overlapping period when two or more standard terms overlap: The correct rate of pursuit was not paid.
 |[ ]
| 1. Overlapping period when two or more non-standard terms overlap: The correct rate of pursuit was not paid.
 |[ ]
| 1. Overlapping period when two or more standard and non-standard terms overlap: The correct rate of pursuit was not paid.
 |[ ]
| 1. Overlapping period when clock hour training and credit hour training overlap: The correct rate of pursuit was not paid.
 |[ ]
| 1. Clock hour training: The correct rate of pursuit was not paid.
 |[ ]
| 1. Graduate or advanced professional training: The correct rate of pursuit was not paid.
 |[ ]
| 1. 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.
 |[ ]
| 1. Was the subsistence allowance award paid for the correct fiscal year (FY)/calendar year (CY)?
 | Yes | No | NA |
| 1. Regular CH31 rate was paid for the incorrect FY.
 | [ ]  |
| 1. P911SA rate was paid for the incorrect CY.
 | [ ]  |
| 1. P911SA rate was incorrectly protected, or not protected when appropriate.
 | [ ]  |
| 1. Did the award reflect the correct number of dependents?
 | Yes | No | NA |
| 1. Number of dependents on award was inconsistent with documentation.
 |[ ]
| 1. The dependent(s) was added to the award on the incorrect date.
 |[ ]
| 1. The dependent(s) was removed from the award on the incorrect date.
 |[ ]
| 1. Was the P911SA rate based on the correct BAH rate?
 | Yes | No | NA |
| 1. The P911SA rate was not paid at the rate for E-5 with dependents for the zip code of the authorized facility.
 |[ ]
| 1. Online: The P911SA rate was not paid at the correct rate when training was solely in-home or online.
 |[ ]
| 1. More than one facility: The P911SA was not paid at the correct rate when the Veteran attended more than one facility.
 |[ ]
| 1. OHA: The P911SA was not paid at the correct rate when the Veteran attended a facility in a US Territory.
 |[ ]
| 1. Foreign institution: The P911SA was not paid at the correct rate when the Veteran is attending a foreign institution with no assigned zip code.
 |[ ]
| 1. Was the P911SA rate paid correctly based on the first use of CH31 entitlement?
 | Yes | No  | NA |
| 1. The Uncapped P911SA rate was incorrectly paid.
 |[ ]
| 1. The Capped P911SA rate was incorrectly paid.
 |[ ]
| 1. Was subsistence allowance paid at the correct rate for an OJT/Apprenticeship?
 | Yes | No | NA |
| 1. Was subsistence allowance correctly adjusted for enrollment changes (reductions/withdrawals/additions)?
 | Yes | No | NA |
| 1. Mitigating circumstances were not correctly developed.
 |[ ]
| 1. The award was not correctly amended when mitigating circumstances were established.
 |[ ]
| 1. The award was not correctly amended when mitigating circumstances were not established.
 |[ ]
| 1. The Six Credit Exclusion was not applied or was applied incorrectly.
 |[ ]
| 1. Punitive grades were assigned and the award was not adjusted effective the last date of attendance.
 | [ ]  |
| 1. When the award was adjusted, the correct rate of pursuit was not applied.
 |[ ]
| 1. When the award was adjusted, the correct dates were not used.
 |[ ]
| 1. When non-payment of subsistence allowance occurred, was a valid justification provided and was the Veteran notified?
 | Yes | No | NA |
| 1. No justification was documented.
 |[ ]
| 1. Veteran was not notified of non-payment.
 |[ ]
| 1. Was subsistence allowance processed timely?
 | Yes | No | N/A |
| [ ]  **Employment Adjustment Allowance**  |
| 1. Was the Veteran eligible to receive EAA when authorized and paid?
 | Yes | No | NA |
| 1. The Veteran did not participate in training at a VA approved facility while in RTE status.
 |[ ]
| 1. The Job Ready Decision was not documented.
 |[ ]
| 1. A valid IEAP or IWRP/IEAP was not included in the record.
 |[ ]
| 1. Contact was not established with the Veteran and documented to verify participation in planned employment services for a period of at least 30 days.
 |[ ]
| 1. The Veteran’s case was not in JR status.
 |[ ]
| 1. Was the correct amount paid for each EAA award?
 | Yes | No | NA |
| 1. CH31 rate: Incorrect fiscal year.
 |[ ]
| 1. CH31 rate: Incorrect number of dependents.
 |[ ]
| 1. P911SA rate: Inconsistent with rate paid for the type of training the Veteran was last pursuing (zip code, locality pay, capped vs. uncapped, etc.).
 |[ ]
| 1. P911SA rate: Incorrect rate paid when the Veteran last pursued training solely online.
 |[ ]
| 1. P911SA rate: incorrect rate for the CY or protected rate.
 |[ ]
| 1. Was EAA authorized timely?
 | Yes | No | N/A |
| 1. When a denial of EAA occurred, was a valid justification provided and was the Veteran notified?
 | Yes | No | NA |
| 1. No justification was documented.
 |[ ]
| 1. Veteran was not notified of non-payment.
 |[ ]
| 1. When the Veteran received additional payments of EAA, did documentation support this payment?
 | Yes | No | NA |
| 1. Plan was not redeveloped with a new vocational goal.
 |[ ]
| 1. Documentation did not support payment of additional EAA due to natural disaster.
 |[ ]

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| [ ]  **Other Expenditures**  |
| 1. Were criteria for Retroactive Induction payment met?
 | Yes | No | NA |
| 1. Were criteria for Retroactive Reimbursement met?
 | Yes | No | NA |
| 1. Was Revolving Fund Loan authorized and paid correctly?
 | Yes | No | NA |
| 1. The individual was not eligible to receive an RFL.
 |[ ]
| 1. Required documentation was not present to support authorization of RFL.
 |[ ]
| 1. Was beneficiary travel authorized and paid correctly?
 | Yes | No | NA |
| 1. Were expenditures allowable?
 | Yes | No | NA |
| 1. The Veteran was receiving benefits under Chapter 31 and another VA Education program (duplication of benefits occurred).
 |[ ]
| 1. Purchased items or services were not allowed.
 |[ ]
| 1. Duplicate payment, purchase, or reimbursement.
 |[ ]

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| [ ]  **Reviews (For tracking only. Not included in score calculation. Answering No does not result in an error.)**  |
| 1. Was the requested Higher-Level Review completed in an accurate and timely manner?
 | Yes | No | N/A |
| 1. The requested review was not completed accurately.
 |[ ]
| 1. The review was not completed in a timely manner (90 days or less from date of request).
 |[ ]
| 1. The review was not completed by a more experienced VRC than the individual who made the decision.
 |[ ]
| 1. The review indicated a Duty to Assist error, but a Supplemental Claim Review was not initiated.
 |[ ]
| 1. The requested informal conference was not provided.
 |[ ]
| 1. Was the requested Supplemental Review completed in an accurate and timely manner?
 | Yes | No | N/A |
| 1. The requested review was not completed accurately.
 |[ ]
| 1. 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).
 |[ ]

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| [ ]  **IPERA (For tracking only. Not included in score. Answering No does not result in a fiscal error.)**  |
| 1. Was the correct amount paid?
 | Yes | No | N/A |
| 1. An overpayment was made requiring correction or documentation of an Admin Error if appropriate. List amount if known.
 |[ ]
| 1. An overpayment was made as a result of an Admin Error, which is correctly documented. List amount if known.
 |[ ]
| 1. An underpayment was made requiring correction. List amount if known.
 |[ ]

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| [ ]  **General Comments:**  |
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