RATEMYVSO RESEARCH

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PTSD GRANT RATE BY CLAIM THEORY

RESEARCH

Published Board issues coded for PTSD produced different descriptive grant rates across direct, secondary, and aggravation theories. The samples are not equal or interchangeable.

METRIC DEFINITION

GRANTED ÷ GRANTED PLUS DENIED

Remands, dismissals, and other outcomes are excluded from these theory-specific rates. Each bar uses its own displayed sample size.

SAME 0% TO 100% SCALE

OBSERVED BOARD GRANT RATE

0% 25% 50% 75% 100%

01

DIRECT SERVICE CONNECTION

PTSD claimed as directly related to an event, injury, or disease during service.

SAMPLE
n = 63,924

02

SECONDARY SERVICE CONNECTION

PTSD claimed as caused or worsened by a separate service-connected disability.

SAMPLE
n = 9,644

03

AGGRAVATION

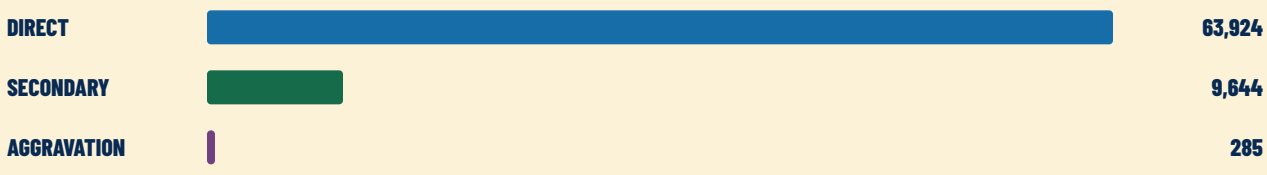
A pre-service disability claimed as made worse by military service.

SMALL SAMPLE
n = 285
USE CAUTION

WHY SAMPLE SIZE MATTERS

THE AGGRAVATION SAMPLE IS MUCH SMALLER

These strips show sample size relative to the direct-service-connection group.



DO NOT RANK CLAIM STRATEGIES FROM THESE BARS

A HIGHER OBSERVED RATE DOES NOT MEAN A THEORY IS EASIER OR BETTER

Theory selection follows the facts and law. Differences may reflect case selection, procedural history, evidence quality, claim complexity, time period, and other characteristics of the Board population.

WHAT THE NUMBERS SUPPORT

NARROW CONCLUSIONS ONLY

CAN SAY

Within these coded, decided Board issues, the observed grant rate differed by classified theory.

CANNOT SAY

Changing the theory would have changed the outcome of the same claim.

CANNOT SAY

An individual claimant has the displayed probability of success.

RESEARCH BOUNDARIES

BOARD APPEALS, NOT ALL VA CLAIMS

Population: Published BVA issues coded under PTSD diagnostic code 9411.

Time coverage: Source records span 1992 through 2026.

Unit: Coded issues, which may differ from unique Veterans or decisions.

Data build: Generated September 23, 2026.

USE THE LEGALLY SUPPORTED THEORY. The evidence and procedural record determine which theory applies. A descriptive chart should never replace case-specific analysis.

Source: RateMyVSO analysis of published BVA decisions. Chart-specific samples are shown above. Educational use only. Not legal or medical advice.