



**DEPARTMENT OF VETERANS AFFAIRS
Veteran Benefits Administration
Regional Office**

[REDACTED]

VA File Number
[REDACTED]

**Represented By:
GORDON A GRAHAM
Rating Decision
02/25/2026**

INTRODUCTION

The records reflect that you are a Veteran of the Gulf War Era. You served in the Army from March 17, 2004 to March 16, 2008 and from May 15, 2009 to October 5, 2012. We received your supplemental claim on January 20, 2026. Based on a review of the evidence listed below, we have made the following decision(s) on your claim.

DECISION

1. Evaluation of migraines, which is currently 30 percent disabling, is increased to 50 percent effective February 2, 2026.
 2. Entitlement to special monthly compensation based on aid and attendance criteria being met is granted from February 2, 2026.
 3. Evaluation of lumbosacral strain with degenerative disc disease, which is currently 20 percent disabling, is continued.
 4. Evaluation of left knee anterior cruciate ligament tear s/p surgery, which is currently 10
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percent disabling, is continued.

EVIDENCE

- VA Form 20-0995, Decision Review Request - Supplemental Claims, received January 20, 2026
- VA Form 21-4138, Statement in Support of Claim, received January 20, 2026
- Rating Decision, received November 13, 2025
- VA Form 27-0820, Report of General Information, received January 22, 2026
- VAMC Houston (Veterans Affairs Medical Center) treatment records, received January 27, 2026
- Disability Benefit Questionnaire Headaches, received February 2, 2026
- VA Form 27-0820, Report of General Information, received February 11, 2026
- VA Form 27-0820, Report of General Information, received February 20, 2026
- SMC rate is higher than SMC-L date received on February 24, 2026

REASONS FOR DECISION

1. Evaluation of migraines currently evaluated as 30 percent disabling.

A claimant may file a supplemental claim by submitting or identifying new and relevant evidence. New evidence is evidence not previously part of the actual record before agency adjudicators. Relevant evidence means evidence that tends to prove or disprove a matter at issue in a claim. (38 CFR 3.2501) In support of your claim, new and relevant evidence has been received and your claim is now reconsidered.

The evaluation of migraines is increased to 50 percent disabling effective February 2, 2026. (38 CFR 4.1, 38 CFR 3.400)

The effective date of this grant is February 2, 2026. Entitlement to an increased evaluation has been established from the date the claim was received. When an increased evaluation is granted based on VA medical evidence showing an increase in disability after the date the claim was received, the effective date of the increase is the date the claim was received. (38 CFR 3.400)

We have assigned a 50 percent evaluation for your migraines based on:

- Very frequent completely prostrating and prolonged attacks productive of severe economic inadaptability

This is the highest schedular evaluation allowed under the law for migraines. (38 CFR 4.120, 38 CFR 4.124a)

2. Entitlement to special monthly compensation based on aid and attendance.

Entitlement to special monthly compensation is warranted in this case because criteria regarding aid and attendance have been met. (38 CFR 3.350)

Entitled to special monthly compensation under 38 U.S.C. 1114, subsection (p) and 38 CFR 3.350(f)(3) at the rate intermediate between subsection (l) and subsection (m) on account of entitlement to the rate intermediate between subsection (l) and subsection (m) with additional disability, migraines independently ratable at 50 percent or more from February 2, 2026.

3. Evaluation of lumbosacral strain with degenerative disc disease currently evaluated as 20 percent disabling.

A claimant may file a supplemental claim by submitting or identifying new and relevant evidence. New evidence is evidence not previously part of the actual record before agency adjudicators. Relevant evidence means evidence that tends to prove or disprove a matter at issue in a claim. (38 CFR 3.2501) In support of your claim, new and relevant evidence has been received and your claim is now reconsidered.

We reviewed the evidence received and determined your service-connected condition hasn't increased in severity sufficiently to warrant a higher evaluation.

The evaluation of lumbosacral strain with degenerative disc disease is continued as 20 percent disabling.

We have assigned a 20 percent evaluation for your lumbosacral strain with degenerative disc disease based on:

- Forward flexion of the thoracolumbar spine greater than 30 degrees but not greater than 60 degrees

Additional symptom(s) include:

- Combined range of motion of the thoracolumbar spine greater than 120 degrees but not greater than 235 degrees
- Painful motion
- X-ray evidence of degenerative arthritis

The provisions of 38 CFR §4.40 and §4.45 concerning functional loss due to pain, fatigue, weakness, or lack of endurance, incoordination, and flare-ups, as cited in DeLuca v. Brown and Mitchell v. Shinseki, have been considered and are not warranted.

A higher evaluation of 40 percent is not warranted for diseases and injuries of the thoracolumbar spine unless the evidence shows:

- Favorable ankylosis of the entire thoracolumbar spine; or,
- Forward flexion of the thoracolumbar spine 30 degrees or less. (38 CFR 4.71a)

4. Evaluation of left knee anterior cruciate ligament tear s/p surgery currently evaluated as 10 percent disabling.

A claimant may file a supplemental claim by submitting or identifying new and relevant evidence. New evidence is evidence not previously part of the actual record before agency adjudicators. Relevant evidence means evidence that tends to prove or disprove a matter at issue in a claim. (38 CFR 3.2501) In support of your claim, new and relevant evidence has been received and your claim is now reconsidered.

We reviewed the evidence received and determined your service-connected condition hasn't increased in severity sufficiently to warrant a higher evaluation.

The evaluation of left knee anterior cruciate ligament tear s/p surgery is continued as 10 percent disabling.

We have assigned a 10 percent evaluation for your left knee anterior cruciate ligament tear s/p surgery based on:

- Painful motion of the knee (38 CFR §4.59 allows consideration of functional loss due to painful motion to be rated to at least the minimum compensable rating for a particular joint. Since you demonstrate painful motion of the knee, the minimum compensable evaluation of 10 percent is assigned)

The provisions of 38 CFR §4.40 and §4.45 concerning functional loss due to pain, fatigue, weakness, or lack of endurance, incoordination, and flare-ups, as cited in DeLuca v. Brown and Mitchell v. Shinseki, have been considered and applied under 38 CFR §4.59.

A higher evaluation of 20 percent is not warranted for limitation of flexion of the knee unless the evidence shows:

- Limitation of flexion of 16 to 30 degrees. (38 CFR 4.71a)

Additionally, a higher evaluation of 20 percent is not warranted for limitation of extension of the knee unless the evidence shows:

- Limitation of extension of 15 to 19 degrees. (38 CFR 4.71a)

REFERENCES:

Title 38 of the Code of Federal Regulations, Pensions, Bonuses and Veterans' Relief contains the regulations of the Department of Veterans Affairs which govern entitlement to all Veteran benefits. For additional information regarding applicable laws and regulations, please consult your local library, or visit us at our website, www.va.gov.