

AR-1

Accountability Review Findings

Dates of Review: June 1, 2020 – June 5, 2020

Office Reviewed: Cleveland District Office

Review Period: April 1, 2019 – March 31, 2020

Standard:	Category 1: Payment Processing Element 1: Form EN-20 and AOP Receipt Date
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Number of Cases Reviewed:	50
Acceptable rating:	90%
Rating for Review:	99%

Describe Findings:

The Payment Processing category identifies a random sampling of compensation payments processed within the review period and evaluates whether the district offices processed those payments in accordance with established policy and procedures.

With respect to the Cleveland District Office, the reviewer identified only three errors within this category. These errors consisted of:

(1) An EN-20 received on 1/24/20, but the date stamp was illegible, which should have necessitated a memo being placed in the file; however, this was not completed; (2) A savings account number containing a sub-account number, which again should have necessitated a memo to the file explaining the variance between the EN-20 and the account number in ECS; and (3) A case in which a payment was authorized, but OIS did not contain the final payment documents with the proper identifiers.

REVIEWER(s):	DATE:
David Evans, Amy Derocher, William Pridy, Daniel Divittorio, Paula Heidel, Raymond Murphy, Katina Johnson, Elvin Santiago, Lisa Rasmussen, Darius Radvila, Traci Murphy	June 5, 2020

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Accountability Review Findings

Dates of Review: June 1, 2020 – June 5, 2020

Office Reviewed: Cleveland District Office

Review Period: April 1, 2019 – March 31, 2020

Standard:	Category 2: Part B Recommended Decisions Element 1: Outcome and Written Quality
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Number of Cases Reviewed	45
Rating for Element 1:	96%
Acceptable Rating:	90%
Overall Category Rating:	96%

Summarize Category (or Element) Findings:
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The results of our review revealed that the Cleveland District Office is performing above the acceptable rating in this category, which judges the outcome and written quality of a sample of Part B Recommended Decisions (RDs). Of the 45 cases reviewed, the review team identified 12 total deficiencies.

The team determined that all RDs reviewed within the rating period contained the correct factual information and provided an accurate summary of the decision outcome.

Within the indicator questions looking at the sufficiency of the Statement of the Case (SOC), the team identified two RDs that did not discuss relevant Part B development actions taken by the CE. The team found an additional RD in which the decision outlined that there was no evidence the claimant had been diagnosed with lung cancer; however, the file included the claimant's death certificate that confirmed the claimant's death was related to this illness. Finally, one RD was found not to have communicated information in a logical and/or chronological manner.

The bulk of deficiencies identified within this category were found within indicator questions that judge the sufficiency of the Explanation of Findings (EOF.) A total of four errors were found pertaining to RDs that did not provide adequate narration explaining how the CE arrived at factual findings or applied procedure standards in evaluating evidence. Three additional deficiencies were identified within RDs that did not communicate information in an understandable manner and/or contained substantial grammatical or typographical errors.

The lone remaining error identified by the team was located within the Conclusion of Law (COL) section of an RD that stated the basis of denial was a lack of covered employment; however, the claim was denied due to a Probability of Causation (PoC) below 50%.

AR TEAM REVIEWER(s):	DATE:
Amy Derocher, William Pridy, Daniel Divittorio, Paula Heidel, Raymond Murphy, Katina Johnson, Elvin Santiago, Lisa Rasmussen, Darius Radvila, Traci Murphy	June 5, 2020

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Accountability Review Findings

Dates of Review: June 1, 2020 – June 5, 2020

Office Reviewed: Cleveland District Office

Review Period: April 1, 2019 – March 31, 2020



Standard:	Category 3: Part E Causation Claims Element 1: Development and Causation Assessment Element 2: Outcome and Written Quality
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Number of Cases Reviewed	41
Rating for Element 1:	91%
Rating for Element 2:	87%
Acceptable Rating:	90%
Overall Category Rating:	89%

Summarize Category (or Element) Findings:

This category focuses on the development, causation assessment, and Recommended Decisions (RDs) issued during the rating period in a sample of Part E claims. The Cleveland District Office scored slightly below the acceptable rating in this category, with an overall score of 89%.

With regard to Element 1: Development and Causation Assessment, the review team identified a total of 15 deficiencies. Within these, several trends were identified. These included claims that were found to be underdeveloped, such as CEs not properly developing all claimed conditions, not requesting all necessary evidence; cases in which a Site Exposure Matrices (SEM) search was either not performed or performed incorrectly; cases where the CE should have referred the claim to an Industrial Hygienist (IH), but did not; and cases in which the CE did not seek clarification of speculative medical opinion that lacked sufficient rationale when necessary.

However, the majority of deficiencies within this category were identified within Element 2: Outcome and Written Quality. The review team identified 32 errors. With regard to trends, within the Statement of the Case (SOC), the review team identified several RDs that either were missing the date of filing or provided an incorrect medical benefits acceptance date. Several others were identified that did not properly discuss relevant development actions taken by the CE.

For the Explanation of Findings (EOF) portion of the RDs reviewed by the team, trends were identified within RDs that lacked sufficient discussion regarding programmatic criteria required

for the acceptance of a claim. Moreover, RDs were noted for not discussing all pertinent evidence or providing sufficient written narrative to clearly explain the interpretation of case evidence in justifying the decision outcome. Finally, concerning the Conclusions of Law (COL), several RDs were noted by the team as not properly identifying what benefits were being awarded.

REVIEWER(s):	DATE:
Amy Derocher, William Pridy, Daniel Divittorio, Paula Heidel, Raymond Murphy, Katina Johnson, Elvin Santiago, Lisa Rasmussen, Darius Radvila, Traci Murphy	June 5, 2020

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Accountability Review Findings

Dates of Review: June 1, 2020 – June 5, 2020

Office Reviewed: Cleveland District Office

Review Period: April 1, 2019 – March 31, 2020

Standard:	Category 4: OIS Indexing Element 1: Incoming Correspondence Element 2: Outgoing Correspondence
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Number of Cases Reviewed	52
Rating for Element 1:	94%
Rating for Element 2:	96%
Acceptable Rating:	90%
Overall Category Rating:	94%

Summarize Category (or Element) Findings:

In this category, the review team evaluated imaged correspondence received and created by the district office for clarity and appropriate classification based on pre-determined categories and subjects. The review also ensured that the imaged document reviewed was associated with the correct case file. With regard to the Cleveland District Office, a total of nine errors were identified in this category.

Eight errors were identified within Element 1: Incoming Correspondence. All were incorrectly categorized as: “*Other Documents/Other Documents.*” Two (2) of the documents should have been indexed under the category/subject of: “*Other Documents/Death Records.*”

The remaining six should have been indexed under the category/subject of:

“*Forms/EE-1,*”

“*Forms/EE/EN-16,*”

“*Other Documents/Survivorship Eligibility,*”

“*Other Documents/Returned Mail,*”

“*Medical/Impairment/Wage Loss,*” and,

“*Other Documents/Authorized Representative.*”

One (1) error was identified within the outgoing correspondence element which was incorrectly categorized under: “Forms and Claims/EE/EN-16.” The document should have been indexed under the category/subject of: “Other Documents/Development Letters.”

AR TEAM REVIEWER(s):	DATE:
Curtis Johnson, Angela Eaddy	June 5, 2020

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Accountability Review Findings

Dates of Review: June 15, 2020 - June 19, 2020

Office Reviewed: Cleveland District Office

Review Period: April 1, 2019 — March 31, 2020

Standard:	Category 5: Post Remand/Reopening Adjudication Element 1: Post Remand/ Reopening Development Element 2: Recommended Decisions – Outcome and Written Quality
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Number of cases reviewed	42
Rating for Element 1:	90%
Rating for Element 2:	90%
Acceptable rating:	90%
Overall Category Rating:	90%

Summarize Category (or Element) Findings:

The results of our review revealed that the Cleveland District Office is performing at the acceptable rating in this category, which assesses whether the claims examiner (CE) conducted appropriate actions with respect to development and the writing of a recommended decision following a Remand Order or a Director’s Order that reopened a claim. The review team identified 21 deficiencies.

With regard to Element 1: Development, the review team identified three cases that contained errors. In one case the claims examiner (CE) did not complete updated causation development for a skin cancer remanded for new medical evidence, i.e., an updated Site Exposure Matrices (SEM) search was not conducted as per procedural guidance outlined in the Procedure Manual, Chapter 15.14. In this same case, the reviewers saw ECS coding as “Awaiting NIOSH Part E” but they found no National Institutes of Occupational Safety and Health (NIOSH) memo in OIS.

However, the majority of the deficiencies within this category were identified within Element 2: Outcome and Written Quality. The reviewers found 18 cases containing multiple errors. The reviewers discovered seven of these errors associated with narratives in the Statement of the Case that did not accurately, or sufficiently, describe relevant background evidence. The reviewers also identified six errors pertaining to insufficient written narratives in the Explanation of Findings (EOF) that should clearly explain the CE’s interpretation and analysis, and eight errors stemming from a lack of clarity and typographical errors.

In three cases, the CE did not include the Industrial Hygienist (IH) and/or Contract Medical Consultant (CMC) reports with the RD. In four cases, the reviewers found the Statement of the Case (SOC) did not adequately and/or accurately describe the relevant background evidence, including the development steps taken to collect evidence. In these cases, the SOC did not accurately describe the contents of the IH report which resulted in the case being remanded; the SOC did not adequately address a survivor claim under Part E even though evidence was received establishing his eligibility; and the SOC did not contain discussion of survivorship evidence submitted to support claim.

As it pertains to the Explanation of Findings (EOF) sub-element of Element 2, this is where the Cleveland district office received the majority of the deficiencies. In one case, the reviewers found no discussion of required survivorship criteria or how the claimant in that case met the criteria. Among other errors seen, one case contained an absence of sufficient written narrative that clearly explained the CE’s interpretation of the case evidence that warranted a decision outcome with respect to medical and toxic exposure evidence. Among other errors, in some cases, claims examiners did not clearly explain the SEM search results. In one other case, a claims examiner did not provide a sufficient written narrative to explain the determination of 20 years of significant asbestos exposure, while the associated IH report indicated a period of exposure that was nearly seven years less. Finally, one RD contained two (2) EOF sections, and much of what was in the EOF should have been listed under the SOC.

Additional deficiencies found within this element include the CEs not being clear in their writing. Examples of such include the lack of clarity to include not writing the decision in present tense, previously established employment being written as if establishing for the first time and not thoroughly discussing why more probative value is being assigned to the treating physician’s medical opinion versus the previous CMC’s opinion. In one case, the Conclusion of Law (COL) states that medical benefits are awarded for multiple skin cancer, identifies two different effective dates, but does not specify which eligibility begin date applies to which cancers. In a separate case, in the EOF the CE discusses the eligibility of the survivor twice but makes no mention of the presence of an EN-16.

The overall rating is at the goal of 90%. No specific trends were noted.

Summarize Other Significant Findings:
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There were no other significant findings.

AR TEAM REVIEWER(s):	DATE:
Karoline Anders, Kristina Green, Susan Kellner, Angie Wellborn, Bernadette DeHerrara, Daniel Divittorio, William Pridy, Tammy Evanchik, Betty Gambill, Patricia Padgett, Dante Silveri, Edith Adekoya, Towanda Tunsil,	June 19, 2020

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Accountability Review Findings

Dates of Review: Jun 15, 2020 – June 19, 2020

Office Reviewed: Cleveland District Office

Review Period: April 1, 2019 – March 31, 2020

Standard:	Category 6: ECS Coding Element 1: Recommended Decision Coding Element 2: Accepted Medical Condition Coding Element 3: Causation Path Coding
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Number of cases reviewed	51
Rating for Element #1	96%
Rating for Element #2	92%
Rating for Element #3	96%
Acceptable rating:	90%
Overall Category Rating:	93%

Summarize Category (or Element) Findings:

The results of our review revealed that the Cleveland District Office is performing above the acceptable rating in this category, which judges the accuracy of Energy Compensation System (ECS) coding as it relates to Division of Energy Employee Occupational Illness Compensation (DEEOIC) District Office ECS actions. Of the 51 cases reviewed, the review team identified 15 total deficiencies.

The reviewers found five errors in recommended decision coding, which included missing or incorrect causation paths selected, employment dates in ECS that did not match employment dates in the written RD, and not including all cancers in a written RD that are listed in ECS.

With respect to Accepted Medical Condition Coding, the reviewers found two errors, in which claims examiners did not list the ICD code correctly in ECS.

As it pertains to causation path coding, the reviewers found five errors in which the Part E toxic exposure causation path evidence source does not include the date of the Site Exposure Matrices (SEM) query. The reviewers also note one error in which the Part E toxic exposure causation path was not created for accepted illness included in the written RD based on toxic exposure, and two errors in which the Part E condition in the RD is accepted based on the B acceptance, but the CE did not create a “Part E Based on B” causation path in ECS.

Summarize Other Significant Findings:
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No other significant findings noted.

AR TEAM REVIEWER(s):	DATE:
Carrie Turjan, Debra Howard, Valerie Whittaker, Daniel DiVittorio, William Pridy, Bernadette DeHerrera, Betty Gambill, Patricia Padgett, Tammy Evanchik, Dante Silveri, Edith Adekoya, Towanda Tunsil, Angie Wellborn, Susan Kellner, Kristina Green	June 19, 2020

AR-1
Accountability Review Findings

Dates of Review: June 15, 2020 - June 19, 2020

Office Reviewed: Cleveland District Office

Review Period: April 1, 2019 — March 31, 2020

Standard:	Category 7: Consequential Illness Acceptances Element 1: Development Element 2: Consequential Illness Letter/RD – Outcome and Written Quality
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Number of cases reviewed	41
Rating for Element 1:	94%
Rating for Element 2:	89%
Acceptable rating:	90%
Overall Category Rating:	91%

Summarize Category (or Element) Findings:

The results of our review revealed that the Cleveland District Office is performing above the acceptable rating in this category, which accesses the outcome and written quality of a sample of Consequential Illness Letter Decisions. Of the 41 cases reviewed, the review team identified eight total deficiencies.

Regarding development, in two of the letter decisions one did not contain a well-rationalized physician’s opinion while the other was never bronzed into OIS, though the medical was coded in ECS as an accepted consequential illness. Also, one error resulted from the claimant filing for a consequential illness (thyroidectomy), which is a procedure, but the letter decision accepts hypothyroidism. The CE did not communicate to the claimant that they filed for a procedure and not an illness. In addition, the letter decision did not explain how the CE made the change from thyroidectomy to hypothyroidism. In this same letter decision, the second page discusses filing for impairment for secondary lymph node cancer rather than hypothyroidism.

In reviewing the cases for outcome of written quality of the decisions, we identified one trend which involves signature block issues. Per DEEOIC Procedure Manual guidance, letter decisions should contain two signature blocks. Four errors resulted from only having one signature block. We did not assign an error if a letter decision contained two signature blocks but only the manager’s signature. However, if a letter decision contained only a claim examiner’s signature then we determined that to be in error. In these four errors, all four contained only one signature block, two contained only the claims examiner’s signature and two others contained just the manager’s signature.

Summarize Other Significant Findings:
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No other significant findings.

AR TEAM REVIEWER(s):	DATE:
Charles Bogino, Karoline Anders, Kristina Green, Susan Kellner, Angie Wellborn, Bernadette DeHerrera, Daniel Divittorio, William Pridy, Tammy Evanchik, Betty Gambill, Patricia Padgett, Dante Silveri, Edith Adekoya, Towanda Tunsil,	June 19, 2020