

AR-1

Accountability Review Findings

Dates of Review: June 25, 2018 – June 29, 2018

Office Reviewed: Jacksonville District Office

Review Period: April 1, 2017 – March 31, 2018

Standard:	Category 1: Part B Recommended Decisions
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Number of cases reviewed:	45
Acceptable rating:	90%
Rating for review:	94%

Describe Findings:

The AR review team identified the following general trends or patterns when reviewing the Part B Recommended Decisions category: RD Cover Letters did not address which medical conditions were adjudicated or the types of benefits awarded (ex. monetary award amount). Statement[s] of the Case did not contain information pertaining to key developmental steps critical to the adjudication of the claim. Statement[s] of the Case also contained analyses of the case file evidence including citations of law and DEOIC procedures. Explanation[s] of Findings did not contain a discussion of the underlying program rules and policy germane to the adjudication of the claim. Explanation[s] of Findings did not contain an analysis of the case file evidence. In the Conclusions of Law section, there was a trend toward the use of confusing or extraneous language and a failure to identify which medical conditions were denied.

Overall, the Accountability Review Team found 21 errors when reviewing 45 cases and 360 indicators for Part B Recommended Decisions. There were only 2 errors identified in the cover letters concerning the failure to identify the benefits awarded. There were 10 errors found in the Statement of the Case section mostly involving the inclusion of information which belonged in the Explanation of Findings. There were 5 errors found in the Explanation of Findings and 4 errors found in the Conclusions of Law section with no discernable trends noted.

Other Significant Findings:

REVIEWER(s):	DATE:
William Pridy, Eric Christeson, William Owens, Stephanie Shelton, Teresa Barrington, Yolanda Banks, Andrew Peters, Krista Kozlowski, Rodney Alston, Kristina Green	06/28/2018

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Accountability Review Findings

Dates of Review: June 25, 2018 – June 29, 2018

Office Reviewed: Jacksonville District Office

Review Period: April 1, 2017 – March 31, 2018

Standard:	Category 2: Payment Processing
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Number of cases reviewed:	51
Acceptable rating:	90%
Rating for review:	100%

Describe Findings:

The Payment Processing category identifies specific payments processed during the review period and evaluates whether compensation was paid in accordance with established policy and procedures. Overall, payments were completed with very few errors. All payments were made to the correct payee account and in the amount specified in the final decision and the Form EN-20. As with past years, the review ratings for the four offices were extremely high.

For the Jacksonville District Office there were no payment processing errors found.

Other Significant Findings:

REVIEWER(s):	DATE:
William Pridy, Eric Christeson, William Owens, Stephanie Shelton, Teresa Barrington, Yolanda Banks, Andrew Peters, Krista Kozlowski, Kristina Green, Rodney Alston	06/28/2018

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Accountability Review Findings

Dates of Review: June 25, 2018 – June 29, 2018

Office Reviewed: Jacksonville District Office

Review Period: April 1, 2017 – March 31, 2018

Standard:	Category 3: OIS Indexing (Incoming and Outgoing Correspondence) Element 1: Incoming Correspondence Element 2: Outgoing Correspondence
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Number of cases reviewed	52
Rating for Element #1	82%
Rating for Element #2	100%
Acceptable rating:	90%
Overall Category Rating:	86%

Summarize Category (or Element) Findings:

In this category, the reviewer evaluates specific imaged documents received and indexed by the DO, to ensure that labeling is appropriate based on predetermined categories and subjects. The reviewer also evaluates outgoing correspondence created by the DO, to verify that documents are associated with the appropriate electronic case file and properly indexed in OIS.

Of the Jacksonville cases reviewed there were 36 total errors. Eight of those errors consisted of Requests to Withdraw Claims that were improperly indexed. Six were scientific articles and three were mixed records submitted and not separated and not properly indexed. The majority of the errors were indexed under the "Other" category and "Other" subject line.

In the second category, there were several instances where the claimant submitted scientific journal articles, which should have been indexed under "Other Documents" with a Subject of "Environmental/Scientific Studies Other." In addition, there were

multiple instances where medical, employment, and survivorship documents were uploaded into one PDF file in OIS and the CE neglected to separate them into the proper categories.

Other Significant Findings:

REVIEWER(s):	DATE:
Kristina Green, Rodney Alston	06/28/2018

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Accountability Review Findings

Dates of Review: June 25, 2018 – June 29, 2018

Office Reviewed: Jacksonville District Office

Review Period: April 1, 2017 – March 31, 2018

Standard:	Category 4: ECS Coding Element 1: Recommended Decisions Element 2: Accepted Medical Condition Coding Element 3: Causation Path Coding
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Number of cases reviewed:	52
Rating for Element #1:	98%
Rating for Element #2:	96%
Rating for Element #3:	85%
Acceptable rating:	90%
Overall Category Rating:	94%

Summarize Category (or Element) Findings:

In this category, the reviewer evaluates the accuracy of Energy Compensation System (ECS) coding for cases at the DO, where both claims were filed and a RD was issued during the AR period. The reviewer evaluates the integrity of the data on critical elements related to case disposition, awarding of monetary and medical benefits, and information that was used as the basis for the RD.

Of the Jacksonville cases reviewed, the reviewers found a total of 18 errors. Under the Recommended Decision section, there were 4 errors found. Under the Accepted Medical Condition coding section, there were 5 errors found. Under the Causation Path Coding section, there were 8 errors found. The most significant error trend found was related to eligibility dates for consequential illnesses. One-third of the errors discovered were related to discrepancies in eligibility dates for consequential illnesses.

Other Significant Findings:

REVIEWER(s):	DATE:
William Pridy, Eric Christeson, William Owens, Stephanie Shelton, Teresa Barrington, Yolanda Banks, Andrew Peters, Krista Kozlowski, Kristina Green, Rodney Alston	06/28/2018

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Accountability Review Findings

Dates of Review: August 13 – 17, 2018
Office Reviewed: Jacksonville District Office
Review Period: June 1, 2017 – May 31, 2018

Standard:	Category # 5 – Part E Causation Claims Element #1: Development and Causation Assessment Element #2: Recommended Decision – Outcome and Written Quality
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Number of Cases Reviewed:	43
Rating for Element #1:	98%
Rating for Element #2:	97%
Acceptable Rating:	90%
Overall Category Rating for Review:	97%

Summarize Category (or Element) Findings:

This category evaluated the actions taken for a Part E causation claim filed by an employee or survivor (where acceptance is not based on acceptance under Part B); whether claims were developed appropriately; resulted in the production of probative and reliable evidence to resolve the claim; and arrived at an accurate outcome to accept or deny the claim. The Jacksonville District Office performed exceedingly well in this category, scoring 97.4%.

Element #1 rates Part E Causation development actions. Five (5) errors were identified within Element #1. These included two (2) cases with incorrect or missing information in a development letter, one (1) case in which the Claims Examiner (CE) failed to provide claimant with the opportunity to provide evidence regarding toxic exposure links, and a Statement of Accepted Facts (SOAF) which did not describe findings of exposure.

Element # 2 evaluates Part E Causation recommended decisions (RDs). Ten (10) deficiencies were noted within Element #2. No trend in deficiencies was identified. One case was found in which a survivor was not included in the RD (though he was not eligible, he did file and should have been included in RD). In another case, the Statement of Case (SOC) was found to lack pertinent information related to development, specifically DEEOIC specialist referrals. One (1) error was identified in the Explanation of Finding (EOF) portion of this element, as it lacked discussion of CMC findings related to no causation. Finally, three (3) errors were identified related to Conclusions of Law (COL); one where there was no statement regarding denial of one

of the claimed conditions and two cases which contained COL that were deemed to be unclear and imprecise.

Other Significant Findings:

During the review, it was noted that there were ECS coding errors, in which ECS was coded as an acceptance based on toxic exposure when, in fact, the case was a Part E acceptance based on a Part B acceptance. These cases did not fall into the purview of this review and were not counted as errors.

AR TEAM REVIEWER(S):	DATE:
Curtis Johnson, Karoline Anders, Tony Schwiefert, Matthew Buehrle, Barry Davidson, Daniel Divittorio, Bernadette DeHerrera, Michelle Taylor, Shannon Green, Patrick Omatsu	August 17, 2018

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Accountability Review Findings

Dates of Review: August 13 – 17, 2018
Office Reviewed: Jacksonville District Office
Review Period: June 1, 2017 – May 31, 2018

Standard:	Category # 6 – Impairment and Wage-Loss Claims Element #1: Development of Medical Evidence, Physician Selection and Wage-Loss Calculations Element #2: Recommended Decision – Outcome and Written Quality
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Number of Cases Reviewed:	51
Rating for Element #1:	94%
Rating for Element #2:	98%
Acceptable Rating:	90%
Overall Category Rating for Review:	97%

Summarize Category (or Element) Findings:

This category evaluates the actions taken for a Part E impairment or wage-loss (WL) claims filed by an employee or survivor, reviewing whether claims were developed appropriately; resulted in the production of probative and reliable evidence to resolve the claim; and arrived at an accurate outcome to accept or deny the claim. It also focuses on the sufficiency of the written content of recommended decisions (RDs). The Jacksonville District Office performed well in this category, with an overall rating of 97%.

With regard to Element # 1, no specific trend in deficiencies was identified. In one (1) case, the Claims Examiner (CE) authorized an impairment evaluation even though the claimant had previously received the maximum compensation available. In another, it was determined that the CE failed to ascertain whether the employee-selected physician met program requirements to perform the evaluation. In one (1) instance, it was found that no development was taken following a case being remanded for new medical evidence. Finally, there was one (1) case missing a WL worksheet in OIS.

For Element # 2, deficiencies included several cases in which developmental steps taken by the CE or pertinent evidence was not discussed were not discussed in the Statement of the Case (SOC). Finally, one (1) claim was identified in which the wrong conditions were listed in the introduction of the RD.

Other Significant Findings:

N/A

AR TEAM REVIEWER(S):	DATE:
Curtis Johnson, Tony Schwiefert, Matthew Buehrle, Barry Davidson, Daniel Divittorio, Bernadette DeHerrera, Michelle Taylor, Shannon Green, Patrick Omatsu	August 17, 2018

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Accountability Review Findings

Dates of Review: August 13 – 17, 2018
Office Reviewed: Jacksonville District Office
Review Period: June 1, 2017 – May 31, 2018

Standard:	Category # 7 – Consequential Illnesses/Acceptances Element #1: Development Element #2: Letter Decision – Outcome and Written Quality
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Number of Cases Reviewed:	43
Rating for Element #1:	93%
Rating for Element #2:	96%
Acceptable Rating:	90%
Overall Category Rating for Review:	95%

Summarize Category (or Element) Findings:

This category includes cases where a consequential condition was filed during the Accountability Review (AR) period *and* correspondence accepting that consequential condition was also sent during the AR period. The category evaluates whether claims were developed appropriately; resulted in the production of probative and reliable evidence to resolve the claim; and arrived at an accurate outcome to accept the claim for consequential illness.

Element #1 measures development actions taken in claims for consequential conditions. Three (3) cases, each with two (2) errors in this category were based upon the following: 1) No diagnosis date for the consequential condition; 2) Lack of development on two of multiple conditions claimed; and 3) Development letter for EN-16 was not sent.

Element #2 rates letter decisions for consequential conditions. Seven (7) cases were found to include errors in the letter decision, including the case noted above for the missing diagnosis date. The remaining six (6) cases all were missing one or more ICD codes.

Other Significant Findings:

N/A

AR TEAM REVIEWER(S):	DATE:
Curtis Johnson, Tony Schwiefert, Matthew Buehrle, Barry Davidson, Daniel Divittorio, Bernadette DeHerrera, Michelle Taylor, Shannon Green, Patrick Omatsu	August 17, 2018