

Follow-up Items from November 5-6, 2020 ABTSWH Meeting

1. Ms. Hearthway described “an increased focus on individual employee performance through case action sample reviews and the addition of a quality assurance analyst, who will conduct quality reviews on a weekly basis to help guide policy and training management.” What is the status of this effort and of any change in the QA work overall?
2. Ms. Pond said that the program refers most cases that have at least some information about exposure and conditions. What proportion and how many cases get referred to IH’s on new non-impairment claims?
3. Ms. Pond noted that ideally the program would have a research arm to evaluate claims data, but that all current resources are dedicated to adjudication. Is this an idea that the Department is considering?
4. EEOICP has begun implementing the new OHQ, and between July and November completed over 612 OHQ interviews with the new format. The Program would ask the Resource Centers for feedback. What is the feedback from the Resource Centers, claims examiners, IH’s, and CMC?
5. A public commenter requested that the Board “review Dr. Armstrong’s directives, communications, and personal opinions within the claims adjudication process and make recommendations to address issues of undue influence.” Please clarify the roles of the Medical Director and any medical personnel within EEOICP with regard to review of claims. Are their roles entirely described in the Procedure Manual? If not, what is a written description of their roles?
6. A public commenter noted that the importance of bystander exposure seems to be minimized in claims evaluations. How does the EEOICP deal with claimants’ potential bystander exposures, especially since they may not be included in the SEM?