



GOVERNMENT OF THE DISTRICT OF COLUMBIA
OFFICE OF RISK MANAGEMENT



Jed Ross
Chief Risk Officer

February 23, 2016

The Honorable Vincent Orange
Chairman
Committee on Business, Consumer and Regulatory Affairs
Council of the District of Columbia
John A. Wilson Building
1350 Pennsylvania Avenue, NW, Suite 107
Washington, DC 20004

Dear Chairman Orange:

I am writing in response to your letter of February 3, 2016, in which you requested responses to questions in preparation for the Committee on Business, Consumer and Regulatory Affairs' oversight hearing on the Fiscal Year 2015 and Fiscal Year 2016 to date performance of the Office of the Risk Management.

I hope that the attached answers are fully responsive to your questions. If you need any additional information, please do not hesitate to contact me.

Sincerely,

/signed/

Jed Ross
Chief Risk Officer

Attachment

I. Agency Organization

1. Please provide a complete, up-to-date organizational chart for each division within the agency including and, either attached or separately, an explanation of the roles and responsibilities for each division and subdivision.
 - Please include a list of the employees (name and title) for each subdivision and the number of vacant positions; and
 - Please provide a narrative explanation of any organizational changes made during the previous year.

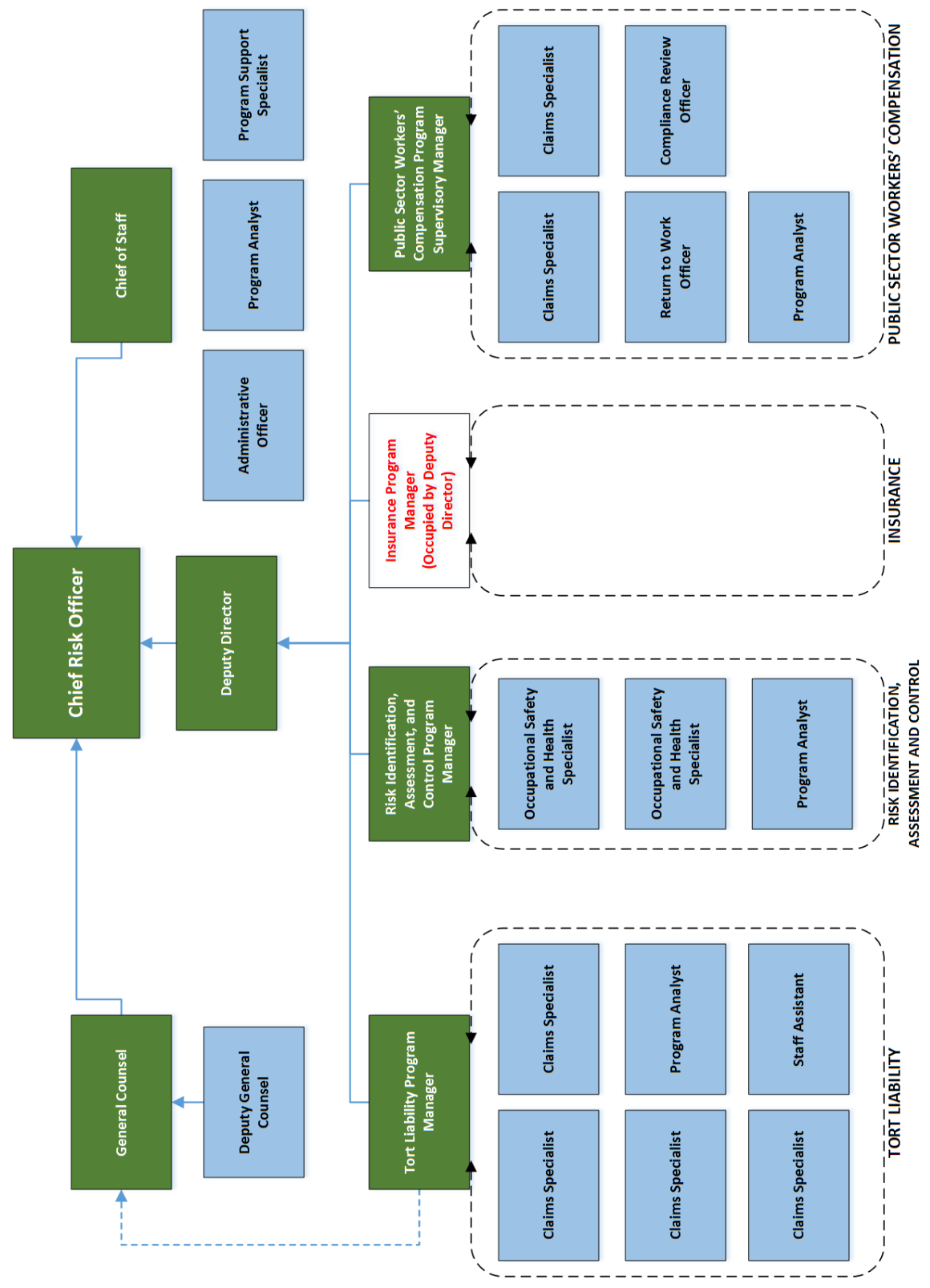
AGENCY RESPONSE

A copy of the Office of Risk Management (ORM) organizational chart, along with a description of the roles and responsibilities of each division, are provided on the following pages. Changes to the current organizational structure include the addition of one position; Deputy Director. The addition of this position within the division of Agency Management enhances operational efficiency through additional management expertise. A listing of the employees for each subdivision and the number of vacant positions is provided under the response to the Committee's Question No. 2.



OFFICE OF RISK MANAGEMENT

(Organizational Chart – As of January 2016)



ORGANIZATIONAL DIVISIONS AND RESPONSIBILITIES	
Division /Program	Description of Responsibilities
Agency Management	Provides operational management, legal support and administrative support to the agency for operational effectiveness to achieve positive operational and programmatic results.
Risk Identification, Assessment, and Control (RIAC)	Coordinates the work of Agency Risk Management Representatives (ARMRs) who systematically identify, measure, analyze, and document the District Government's exposure to risk. The program also reviews and guides the activities of agency Risk Assessment Control Committees (RACC) relative to risk management plans. The purpose of the RACC is to maintain, in cooperation with ORM, a proactive and comprehensive program of risk assessment and control for agencies that minimizes the frequency, severity, and probability of losses to which agencies are exposed. It also provides training to increase District employees' knowledge of risk prevention, including the creation of Emergency Response Plans (ERPs). ERPs include agency evacuation plans and responses to various hazards, including the threat of terrorism.
Insurance	Administers the Captive Insurance Agency, which provides medical malpractice insurance to non-profit community health clinics in the District, as well as property insurance for risks to District government real property assets for various hazards. In addition, it works closely with the Office of Contracting and Procurement (OCP) to ensure that contracts over \$100,000 have the appropriate insurance requirements. The Insurance program also serves as a general resource to all District agencies wishing to obtain policy and other guidance on protecting the District through insurance and other contractual risk management techniques.

ORGANIZATIONAL DIVISIONS AND RESPONSIBILITIES	
Division /Program	Description of Responsibilities
Public Sector Workers' Compensation	<p>Responds to workplace injuries with the best, most appropriate medical care at a reasonable cost, and to return employees back to work as soon as medically possible. Workers' Compensation is a system of benefits provided by law for workers who have job-related injuries or illnesses. The Office of Risk Management oversees the management of the Public Sector Workers' Compensation Program (PSWCP) through a third-party administrator. Benefits include medical services, vocational rehabilitation, and compensation for permanent loss of use of a body part or function, and death benefits for beneficiaries. Employees are eligible for benefits when an injury or illness arises out of and in the course and scope of his or her employment. The program also oversees a Return-to-Work initiative, which helps employees get back to work as soon as possible after a job-related injury or illness. Return-to-Work is successful when there is communication between the injured worker and his or her agency, a key factor in his or her recovery.</p>
Tort Liability	<p>Investigates and resolves tort liability claims filed against the District of Columbia. Effective January 20, 2004, the Mayor delegated to the Office of Risk Management the authority to accept notice of claim letters under D.C. Official Code § 12-309. As such, individuals can file claims against the District of Columbia for loss, damage, or injury. An action may not be maintained against the District of Columbia for unliquidated damages to person or property unless, within six months after the injury or damage was sustained, the claimant, his agent, or attorney has given notice in writing to the Mayor of the District of Columbia of the approximate time, place, cause, and circumstances of the injury or damage. Under certain circumstances, reports of the Metropolitan Police Department may also satisfy the notice requirement provided that they contain all of the information required by the statute. The Tort Liability program also pursues subrogation claims against third parties whose acts of negligence have resulted in damage to District government property.</p>

2. Please provide a complete, up-to-date position listing for your agency, which includes the following information:
- Title of position;
 - Name of employee or statement that the position is vacant, unfunded, or proposed;
 - Date employee began in position;
 - Salary and fringe benefits, including the specific grade, series, and step of position; and
 - Job status (continuing/term/temporary/contract).



Please list this information by program and activity

AGENCY RESPONSE

An up-to-date position listing for ORM is provided in the chart on the proceeding page.

<i>Name of Employee or Vacancy</i>	<i>Title of Position</i>	<i>Position Start Date</i>	<i>Salary</i>	<i>Fringe</i>	<i>Grade, Step</i>	<i>Job Status (continuing/term/temporary)</i>
<i>DIVISION/PROGRAM</i>	<i>Agency Management Division</i>					
Jed I. Ross	Chief Risk Officer	6/10/2015	\$165,830	\$36,980	E4, Step 0	Continuing
Alex Bako	Chief of Staff	4/6/2015	\$124,630	\$27,792	MS 15, Step 0	Continuing
Michael Krainak	General Counsel	8/31/2015	\$140,080	\$31,238	LX 1 , Step 0	Continuing
Steven Blivess	Supervisory Attorney Advisor	1/14/2013	\$112,769	\$25,148	LX 1 , Step 0	Continuing
Valerie Evans	Administrative Officer	6/8/2008	\$91,297	\$20,359	CS 13, Step 6	Continuing
<i>DIVISION/PROGRAM</i>	<i>Insurance Program</i>					
Sing Chuen (Sam) Yeung	Insurance Program Officer	8/16/2015	\$125,008	\$27,877	MS14, Step 0	Continuing
<i>DIVISION/PROGRAM</i>	<i>Public Sector Workers' Compensation Program</i>					
Cara Pearson	Supv. Disability Comp Claims Examiner	6/19/2011	\$95,067	\$21,200	MS 13, Step 0	Continuing
Augustina Ammah	Claims Specialist	12/7/2009	\$83,039	\$18,518	CS 12, Step 5	Continuing
Kurt Davis	Claims Specialist	10/11/2011	\$92,211	\$20,563	CS 12, Step 9	Continuing
Tammy L. Hagin	Compliance Review Officer	5/7/2012	\$91,297	\$20,359	CS 13, Step 6	Continuing
Susana Suarez	Program Analyst	11/16/2003	\$87,625	\$19,540	CS 12, Step 7	Continuing
Nicole Rice	Program Analyst	8/16/2015	\$68,294	\$15,230	CS 12, Step 1	Term
Jocelia Rancy	Return To Work Coordinator	9/8/2014	\$78,687	\$17,547	CS 13, Step 1	Term
<i>DIVISION/PROGRAM</i>	<i>Risk Identification, Assessment and Control (RIAC)</i>					
Kim Nimmo	Safety and Occupational Health Manager	2/24/2014	\$106,090	\$23,658	MS 14 Step 0	Term
Brian Cook	Program Analyst	12/7/2015	\$49,551	\$11,050	CS 9, Step 1	Term
Thomas Herbert	Safety and Occupational Health Spec	9/29/2008	\$80,746	\$18,006	CS 12, Step 4	Continuing
<i>Vacant*</i>	Safety and Occupational Health Spec.	1/15/2016	\$59,698	\$13,313	CS 11, Step 1	Term

**ORM is currently advertising to fill this position.*

<i>Name of Employee or Vacancy</i>	<i>Title of Position</i>	<i>Position Start Date</i>	<i>Salary</i>	<i>Fringe</i>	<i>Grade, Step</i>	<i>Job Status (continuing/term/temporary)</i>
<i>DIVISION/PROGRAM</i>	<i>Tort Liability Program</i>					
Soriya Chhe	Supv. Legal Adm. Spec (Tort Claims)	7/31/2015	\$109,180	\$24,347	MS 13, Step 0	Continuing
Robert Carter	Claims Specialist	10/31/2005	\$87,625	\$19,540	CS 12, Step 7	Continuing
Charlotte Fisher	Claims Specialist	3/6/2006	\$85,332	\$19,029	CS 12, Step 6	Continuing
LaShonda Wright	Claims Specialist	11/20/2011	\$87,625	\$19,540	CS 12, Step 7	Continuing
Janice Stokes	Claims Specialist	9/9/2013	\$78,453	\$17,495	CS 12, Step 3	Term
Lana Craven	Program Analyst	10/2/2005	\$71,212	\$15,880	CS 11, Step 7	Continuing
<i>Vacant*</i>	Program Analyst	1/29/2016	\$49,551	\$11,050	CS 7, Step 1	Continuing
Marcia Pezoa	Pgm Support Assistant OA	10/1/2007	\$45,295	\$10,101	CS 7, Step 4	Continuing

****ORM is currently advertising to fill this position.***

3. Does the agency conduct annual performance evaluations of all its employees? Who conducts such evaluations? What steps are taken to ensure that all agency employees are meeting individual job requirements? Has all of your staff participated in ethics training?

AGENCY RESPONSE

ORM conducts annual performance evaluation of its employees. In FY 15, the agency completed 19 performance evaluations. ORM supervisors met with their employees to set expectations and goals and meet job requirements. Each week, supervisors meet with their staff to discuss work related issues and topics. Individual employee performance counseling is conducted as needed.

In addition to conducting performance evaluation, the agency ensures all employees have attended the District's ethics training. Currently all employees with the exception of three recent hires have completed the ethics training. They are registered to attend on March 8, 2016.

II. *Personnel*

4. Please list all employees detailed to or from your agency, if any. Please provide the reason for the detail, the detailed employee's date of detail, and the detailed employee's projected date of return.

AGENCY RESPONSE

Currently, ORM does not have any employees detailed to/from the agency.

5. Please provide the Committee with:
- A list of all employees who receive cellphones, personal digital assistants, or similar communications devices at agency expense;
 - A list of all vehicles owned, leased, or otherwise used by the agency and to whom the vehicle is assigned;
 - A list of employee bonuses or special award pay granted in FY15 and FY16, to date
 - A list of travel expenses, arranged by employee; and
 - A list of the total overtime and workman's compensation payments paid in FY15 and FY16, to date.

AGENCY RESPONSE

- The following chart provides a list of ORM employees with government-issued telecommunications devices:

Name	Device Type
Jed Ross	Galaxy s4, Surface Pro 3
Steven Blivess	Galaxy s4, Surface Pro 3
Michael Krainak	Galaxy s5, Surface Pro3
Sam Yeung	iPhone 5, Surface Pro 3
Alex Bako	Galaxy s4
Cara Pearson	Galaxy s4, Galaxy Tab 4 (8.0)
Valerie Evans	Galaxy s4
Kim Nimmo	Galaxy s5
Soriya Chhe	Galaxy s4, Surface Pro 3
Charlotte Fisher	iPhone 5
Thomas Herbert	iPhone 5, Galaxy Tab 4 (8.0)
Brian Cook	Dell Latitude 14 5000 series

- The following chart list the vehicles used by the agency:

Vehicle	Owned, leased, etc..	Assigned
2015 Dodge Caravan	Owned, purchased by agency	The vehicles are assigned to the RIAC department for use primarily by safety inspectors. It is occasionally used by other staff that are authorized to drive the vehicle.
2011 Dodge Caravan	Owned, obtained through DPW Fleet share	

- At the end of FY15, the following is a list of ORM employees that were awarded employee appreciation/incentive award gift cards in the amount of \$50 each:

Alex Bako	Michael Krainak
Augustina Ammah	Nicole Rice
Brian Larman	Robert Carter
Cara Pearson	Sam Yeung
Charlotte Fisher	Soriya Chhe
Janice Stokes	Steven Blivess
Jocelia Rancy	Susana Suarez
Kim Nimmo	Tammy L. Hagin
Kurt Davis	Thomas Herbert
Lana Craven	Valerie Evans
LaShonda Wright	William Clyde Thomas
Marcia Pezoa	

- In FY15 and FY16 to date, no travel expenses were incurred or arranged by ORM employees.
- In FY15 and FY16 to date, no overtime or workman's compensation payments were paid to ORM employees.

Budget

6. Please provide a chart showing your agency's approved budget and actual spending, by division, for FY15 and FY16, to date. In addition, please describe any variance between fiscal year appropriations and actual expenditures.

AGENCY RESPONSE

Please see the charts on the following page showing the agency's approved budget and actual spending, by division, for FY15 and FY16, to date.



GOVERNMENT OF THE DISTRICT OF COLUMBIA
OFFICE OF RISK MANAGEMENT



Jed Ross
Chief Risk Officer

Employees' Compensation Fund (BG0)

Program	Program Name	FY15 Revised Budget	FY15 Expenditures	FY16 Revised Budget	FY16 Expenditures (YTD)	Variances	Explanation
1000	Disability Compensation Fund	22,594,636.26	19,886,297.69	22,929,340.57	10,712,079.40	12,217,261.17	BG0's FY15 Budget vs Actual variance was rolled over to FY15, as the fund is a non-lapsing fund. The FY15 \$10.7 million YTD expenditures consists of all payments related to the DC prepay expenses (20-Medical supplies, 50-Indemnity payments, 40-professional medical/hospital services); Health/Life benefit payments; TPA & Actuarial Study costs.
Totals		22,594,636.26	19,886,297.69	22,929,340.57	10,712,079.40	12,217,261.17	



Captive Insurance Agency (RJ0)

Program	Program Name	FY15 Revised Budget	FY15 Expenditures	FY16 Revised Budget	FY16 Expenditures (YTD)	Variances	Explanation
2001	Oversight	7,159,062.56	2,211,274.47	6,369,320.94	2,010,933.62	4,358,387.32	RJ0's FY15 Budget vs Actual variance was rolled over to FY16, as the fund is a non-lapsing fund. RJ0 is also projected to end FY16 within budget. The FY16 YTD expenses consists of p-card expenses & payments to Aon for the District's Property Insurance. It should be noted that the agency is required to maintain a reserve of three (3) million dollars in the event of a claim being filed against the medical malpractice insurance.
2002	Growth & Income Strategy & Mgt.	55,000.00	-	67,000.16	-	67,000.16	RJ0's O-type budget is a formulated projection of expected revenue that will be generated within a Fiscal Year. During FY15 & FY16, RJ0 had no expenditures within its O-type budget, & all unused revenue will remain in RJ0's O-type fund balance until it is expended.
Totals		7,214,062.56	2,211,274.47	6,436,321.10	2,010,933.62	4,425,387.48	

Office of Risk Management (RK0)

Program	Program Name	FY15 Revised Budget	FY15 Expenditures	FY16 Revised Budget	FY16 Expenditures (YTD)	Variances	Explanation
1010	Personnel	106,564.46	106,947.60	111,655.14	34,317.50	77,337.64	The Office of Risk Management ended FY15 with a \$198K surplus. The FY15 surplus is attributed to vacancy savings and the remaining funding from NPS program initiatives. We are currently one quarter into FY16, & RK0 is projected to complete the fiscal year with an estimated surplus of \$89K due to recent vacancy savings.
1055	Risk Management	263,312.42	167,172.04	150,000.00	97,918.04	52,081.96	
1085	Customer Service	53,914.39	54,889.38	55,396.13	17,825.31	37,570.82	
1090	Performance Management	490,138.80	527,846.22	746,393.27	216,134.29	530,258.98	
2110	Risk Inspections and Coordination of ARMRS	176,991.26	179,074.80	185,755.12	57,143.37	128,611.75	
2120	Risk Analysis	134,175.89	114,304.53	204,748.07	37,817.75	166,930.32	
3110	Insurance Analysis	51,334.22	17,447.08	113,739.93	44,625.70	69,114.23	
4110	Claims Examination & MGT	1,121,146.75	1,120,589.94	1,645,298.83	253,951.02	1,391,347.81	
4120	Return to Work	509,778.27	492,978.48	319,289.02	94,085.01	225,204.01	
6110	Claims Examination	671,079.96	598,806.58	722,532.42	216,541.32	505,991.10	
Totals		3,578,436.42	3,380,056.65	4,254,807.93	1,070,359.31	3,184,448.62	

7. Please list any reprogramming, in or out, which occurred in FY15 or FY16, to date. For each reprogramming, please list the total amount of the reprogramming, the original purposes for which the funds were dedicated, and the reprogrammed use of funds.

AGENCY RESPONSE

Please see the charts below for reprogramming, in or out, which occurred in FY15 or FY16, to date.

Employees' Compensation Fund (BG0)

Reprogramming (Fiscal Year)	Total Amount	Comments
FY15	\$486,000.00	BG0 NPS Reprogramming (CSG 50 TO CSG 40) to cover projected deficit in CSG 40
FY16	-	

Captive Insurance Agency (RJ0)

Reprogramming (Fiscal Year)	Total Amount	Comments
FY15	-	
FY16	-	

Office of Risk Management (RK0)

Reprogramming (Fiscal Year)	Total Amount	Comments
FY15	\$90,000.00	PS surplus reprogrammed to CSG 20 & 70 to cover RK0's projected costs associated with supplies & safety training.
	\$100,000.00	RK0 NPS Reprogramming (CSG 40 TO CSG 70) to cover costs associated with safety & IT equipment.
FY16	-	

8. Please provide a complete accounting for all intra-District transfers received by or transferred from the agency during FY15 or FY16, to date.

AGENCY RESPONSE

Please see the charts below for a complete accounting for all intra-District transfers received by or transferred from the agency during FY15 or FY16, to date.

Office of Risk Management (RK0) – FY15 MOUS

No.	Buyer/Seller	Seller Agency	Service Description	Service Period	Fund	PS Amount	NPS Amount	Total Amount
1	Buyer	AA0	Telecommunications, Transportation, & Courier Services	10/01/14-09/30/15	0100	-	\$ 6,000	\$ 6,000
2	Buyer	BE0	DCHR Services	10/01/14-09/30/15	0100	-	\$ 110,000	\$ 110,000
Total FY 15 MOU Services								\$ 116,000



Office of Risk Management (RK0) – FY16 MOUS

No.	Buyer/ Seller	Seller Agency	Service Description	Service Period	Fund	PS Amount	NPS Amount	Total Amount
1	Buyer	AA0	Telecommunications, Transportation, & Courier Services	10/01/15- 09/30/16	0100	-	\$ 6,000	\$ 6,000
2	Buyer	BE0	DCHR Services	10/01/15- 09/30/16	0100	-	\$ 113,000	\$ 113,000
3	Buyer	BE0	DCHR Services - Chapter 4	10/01/15- 09/30/16	0100	-	\$ 804	\$ 804
Total FY 16 MOU Services								\$ 119,804

9. Please provide a complete breakdown of each expenditure for FY15 and FY16, to date within the Employers Compensation Fund and Medical Liability Captive Insurance Fund.
Please provide this information broken down by fund and year.

AGENCY RESPONSE

Please see the charts below for a complete accounting breakdown of each expenditure for FY15 and FY16, to date within the Employees' Compensation Fund and Medical Liability Captive Insurance Fund.

Employees' Compensation Fund (BG0)

Fund Detail	CSG	FY15 Revised Budget	FY15 Expenditures	FY16 Revised Budget	FY16 Expenditures
0100	20 - Supplies	1,360,431.89	1,264,720.00	1,264,720.00	677,591.73
0100	40 - Other Services & Charges	5,991,800.00	5,294,861.75	8,366,056.90	5,194,739.31
0100	50 - Subsidies & Transfers	15,242,404.53	13,326,716.09	13,298,563.67	4,839,126.19
Total		22,594,636.42	19,886,297.84	22,929,340.57	10,711,457.23

Captive Insurance Agency (RJ0)

Fund Detail	CSG	FY15 Revised Budget	FY15 Expenditures	FY16 Revised Budget	FY16 Expenditures
<i>LOCAL:</i>					
0100	20 - Supplies	25,741.68	4,949.47	30,792.21	5,600.00
0100	40- Other Services & Charges	7,133,320.73	2,206,325.00	6,338,528.73	2,005,333.62
<i>OTYPE:</i>					
0600	40- Other Services & Charges	55,000.00	-	67,000.16	-
Total		7,214,062.41	2,211,274.47	6,436,321.10	2,010,933.62

10. Please identify any special purpose revenue accounts maintained by, used by, or available for use by your agency during FY15 or FY16, to date. For each account, please list the following:
- The revenue source name and code;
 - The source of funding;
 - A description of the program that generates the funds;
 - The amount of funds generated by each source or program in FY15 and FY16, to date; and
 - Expenditures of funds, including the purpose of each expenditure, for FY15 and FY16, to date.

AGENCY RESPONSE

The agency maintained and used the Captive Insurance Fund during FY15 and FY16, to date.

FUND	1240		
Revenue Source Name	Captive Insurance Fund		
Description	Medical Captive is created to provide malpractice liability coverage for non-profit community health centers in the District of Columbia.		
FY15 Revenue	\$ 105,993.95	FY15 Expenditures	-
FY16 Revenue (Projected)	\$ 67,000.16	FY16 Expenditures	-

11. Please provide a complete accounting of all federal grants received for FY15 and FY16, to date.

AGENCY RESPONSE

For FY15 and FY16 to date, ORM did not receive federal grants.

12. Please identify any legislative requirements that the agency lacks sufficient resources to properly implement.

AGENCY RESPONSE

The agency is working with the Office of the City Administrator to ensure the agency is able to properly administer its insurance oversight and meet any requirements it must meet.

III. Programs and Policies

13. Please list all regulations for which the agency is responsible for oversight or implementation. Please list by chapter and subject heading, including the date of the most recent revision.

AGENCY RESPONSE

- Public Sector Workers' Compensation Program Regulations: Title 7, Chapter 1. These regulations were the subject of a comprehensive revision in FY 2012. The final version was published in July 2012.
- Occupational Safety and Health Program Regulations: Title 7, Chapter 20. These regulations were published by Final Rulemaking on January 28, 1983 and became effective upon publication in the D.C. Register.

14. Please list each new program implemented by the agency during FY15 and FY16, to date. For each initiative please provide:
- a. A description of the initiative;
 - b. The funding required to implement to the initiative;
 - c. Any documented results of the initiative; and
 - d. The number of FTE's assigned to the initiative.

AGENCY RESPONSE

The Office of Risk Management implemented three new programs during FY15 and FY16, to date. The three programs include the following:

- Return-to-Work Program Job Fairs: ORM began in FY15 and is continuing in FY16 a series of Job Fairs focused on matching injured workers, mostly those with permanent restrictions, with suitable employers. So far, two such sessions have been held. The most recent session in December 2015 drew more than 20 employers with available employment positions. The fairs have proven to be a successful method of finding alternate employment for injured workers whose permanent work restrictions prevent them from returning to their pre-injury positions. ORM's Return-to-Work Officer is responsible for organizing the job fairs. Moving forward through FY16, ORM is planning to hold additional Job Fairs on a quarterly basis, each occurring approximately one month following the quarterly Return-to-Work Orientation sessions.
- Subrogation Task Force: ORM plans to further improve the collection of subrogation revenue through three initiatives (approaches). First, ORM is in the process of creating a subrogation task force for the purpose of pursuing claims against third parties, who cause loss, injury or damage to the District Government. In doing so, ORM will develop and implement a uniform policy, procedure and process for its subrogation arm. Second, ORM also looks to launch a District-wide online incident report system that would capture all incidents involving DC employees and property. This system will allow ORM to automatically receive notice of incidents involving

District property, so the subrogation adjuster can evaluate the incident for subrogation. Lastly, ORM has requested for all crash reports from September 2012 – 2015 involving District vehicles (with the exception of MPD and DDOT) from MPD, so they can be evaluated for subrogation. Because the statute of limitations does not apply to the District, the goal is to work in three-year increments backwards to capture all claims that can be pursued for subrogation.

- Environmental Differential Pay Worksite Inspections: ORM’s Risk Identification, Analysis and Control (RIAC) Division began participating in joint site assessments with DCHR to identify workplaces and work activities that might qualify employees for Environmental Differential Pay. Per Chapter 11B of the District Personnel Manual, employees who are officially assigned to a position for which local environment pay is authorized, or who is temporarily assigned to perform work involved in these position, shall be paid local environment pay when performing duties that expose him or her to an applicable environmental situation. In FYI 15, the RIAC Division began, at the request of DCHR, to assess workplaces and work duties to determine whether the requesting District agency employee(s) is/are eligible for such pay. The program is unfunded and the work is performed by ORM safety inspectors as an additional duty under the direction of the RIAC Division Manager.

15. Please provide a list of all studies, research papers, and analyses (“studies”) the agency requested, prepared, or contracted for during FY15 and FY16, to date. Please state the status and purpose of each study.

AGENCY RESPONSE

The following are three studies the agency prepared or contracted for during FY15 and FY16, to date:

- Tort Trend Analysis: Beginning in FY15 and continuing into FY16, the ORM Tort Division began performing statistical analyses on data compiled by the program. This enabled ORM, for the first time, to identify trends related to tort claims filed in the District. The program can now quantitatively define the types of claims and associated costs incurred by the District. The trend analysis is continuing, and data will be used to create dashboard metrics in FY16, and will ultimately be used to create a Risk Map for the District.
- Cost of Risk Trend Analysis: In FY15, ORM for the first time collected and compiled Cost of Risk information from each District agency. This included all costs that agencies incurred as a result of implementing security, surveillance equipment, personal protective equipment, training, and other factors. Currently, this data is being analyzed for trends and baseline benchmarking. The goal of the trend analysis is to identify how much agencies are paying to control risk, and then measuring over time to determine if the control efforts have succeeded in lowering the numbers and severity of incidents of accidents, injuries, and other security related incidents.



- Actuarial Study 2015: This report is conducted each year and examines the overall management and financial feasibility of the workers' compensation and tort liability programs.

16. Please explain the impact on your agency of any legislation passed at the federal level during FY 15 and FY16, to date that significantly affect agency operations.

AGENCY RESPONSE

To our direct knowledge, no legislation passed at the federal level during FY 15 and FY16, to date that significantly affect agency operations

17. Please provide a list of all MOU's in place currently in place, all MOU's entered into within the last year, and any MOU's planned for the coming year.

AGENCY RESPONSE

Please see response to Question No. 8 for a list of all MOU's in currently in place and all MOUs' entered into within the last year.

Other MOUs contemplated for the upcoming year includes:

- DC Fire and Emergency Services and Metropolitan Police Department re: Police Fire Clinic
- Office of the Attorney General re: Litigation costs for workers' compensation cases

18. Please list each contract, procurement, lease, and grant ("contract") awarded, entered into, extended and option years exercised, by your agency during FY15 and FY16, to date. For each contract, please provide the following information, where applicable:

- a. The name of the contracting party;
- e. The nature of the contract, including the end product or service;
- b. The dollar amount of the contract, including budgeted amount and actually spent;
- c. The term of the contract;
- d. Whether the contract was competitively bid or not;
- e. The name of the agency's contract monitor and the results of any monitoring activity;
- f. The funding source; and
- g. Whether the contractor is a CBE.

AGENCY RESPONSE

Please see **Attachment 1** for list of contracts awarded, entered into, extended and option years exercised, by ORM during FY15 and FY16, to date.

19. Please list and describe any ongoing investigations, audits, or reports on your agency or any employee of your agency, or any investigations, studies, audits, or reports on your



agency or any employee of your agency that were completed during FY15 or FY16, to date.

AGENCY RESPONSE

On December 21, 2015, ORM received the results of its annual actuarial study as part of the District-wide CAFR. The report is entitled “Actuarial Study of the Self-Insured Workers’ Compensation, General Liability and Automobile Liability Programs as of September 30, 2015.” The study, performed by PRM Consulting, Inc., is a financial audit of the workers’ compensation and tort liability programs.

The Office of the Inspector General is in the process of performing a re- audit, which was a follow-up investigation of the public sector workers’ compensation program from 2007.

20. Please identify all recommendations identified by the Office of the Inspector General, D.C. Auditor, or other federal or local oversight entities during the previous 3 years. Please provide an update on what actions have been taken to address these recommendations.

AGENCY RESPONSE

The final District Fiscal Year 2014 Management Letter Report, submitted by KPMG LLP, was released in April 2015. The report contained a finding that the ORM Tort Division, related to FY14, sometimes did not properly enter information into the American Technical System (ATS) database, which is the District’s third-party claims administration system. The result of this finding was that without adequate internal controls over the reporting process, reports submitted to the actuary for the calculation of the liability may not be properly prepared or reviewed to detect and correct errors in a timely manner.

ORM implemented an internal control program in 2015 and this matter was fully addressed. Management met with claims examiners and discussed the importance of completely and accurately entering claims data into the ATS system. To measure performance, the Tort Division manager routinely performs random claims reviews on a monthly basis to ensure that proper protocols are followed.

21. Please identify all electronic databases maintained by your agency, including the following:
- A detailed description of the information tracked within each system;
 - The age of the system and any discussion of substantial upgrades that have been made or are planned to the system; and
 - Whether the public can be granted access to all or part of each system.

AGENCY RESPONSE

The agency maintains two electronic databases. The first database is the audit recommendation tracking database created in Quickbase and implemented in FY14. The



audit recommendations database tracks how agencies are responding to outstanding audit recommendations throughout the government. The agency is reviewing the accuracy and completeness of the database to determine if the database should be made open to the public. Though the audit tracking database is not made public at this time, the public may still review the audits from the DC Auditor or Office of the Inspector General websites.

The second database maintained by ORM is the American Technical Services, Inc. (ATS) database system. ORM's Tort Liability Program utilizes ATS to track tort claims filed against the District. When a new claim is received, all relevant information (i.e. claimant's name, incident date/location, claim reserve amount and claim type) is entered into the system. The claim is then updated in the system as ORM receives more information. ATS has been in use by ORM since 2008. Due to the personal and potentially sensitive nature of claimant information that may be housed in the system, the public does not have access to the system.

22. What has the agency done in the past year to make the activities of the agency more transparent to the public? In addition, please identify ways in which the activities of the agency and information retained by the agency could be made more transparent.

AGENCY RESPONSE

Twice per year, ORM invites tort claimants and their attorney representatives to an on-site settlement conference. During the conference, ORM's claim examiners explain to the claimants the claim investigation process and the basis for determinations of liability. They review the evidence collected during the investigation with the claimants and the basis for the settlement offer. This has proven to be a successful method for quickly and efficiently settling claims in a proactive and prompt manner.

The Public Sector Workers' Compensation Program conducts a bi-monthly Workers' Compensation Orientation for employees who have sustained a work-related injury. The presentation includes an overview of ORM, an introduction to the Workers' Compensation Program and third-party administrator (TPA) staff; and an opportunity for the employees to address any question or concerns related to the claims process and what to expect.

In FY15, ORM began updating all website information related to agency programs, focusing on making the information friendlier, more useful, and more transparent to the public.

23. Please identify any statutory or regulatory impediments to your agency's operations.

AGENCY RESPONSE

ORM is in the process of reviewing its statutory and regulatory frameworks. ORM will be working with the Office of Policy and Legislative Affairs to address any legislative



concerns which may need to be addressed. Moreover, ORM looks forward to working with the Committee to help ensure customer service and other operational concerns are being addressed.

24. How does the agency solicit feedback from customers? Please describe:
- What has the agency learned from this feedback; and
 - How has the agency changed its practices as a result of such feedback?

AGENCY RESPONSE

ORM's website contains an online survey that tort claimants can access and rate their experience with the tort program.

During settlement conferences that ORM holds twice a year, claims examiners provide each claimant and their attorney with a copy of a survey that they can complete to evaluate the claims examiner who conferenced their claim and the settlement conference overall. The results of the surveys from the settlement conferences have been overwhelmingly positive.

The Public Sector Workers' Compensation Program obtains feedback from claimants through surveys regarding the quality of service that they receive from the TPA and the agency. The program also solicits and receives feedback from claimants at bi-monthly orientation sessions and also from employment agency personnel.

To some degree, customer feedback with the current TPA has at times been less than favorable. To address this, ORM developed and is in the process of implementing an ORM Customer Service Policy and Manual that contains specific guidelines for interacting with customers via telephone, internet, in-person, and through written correspondence. Guidelines for dealing with difficult and angry customers are also included, as are program-specific instructions for dealing with stressful situations.

Overall, the manual stresses the Mayor's statement in her 6-month progress report, released last year, that transparency and accountability will be hallmarks of this Administration. Performance of ORM and TPA staff will be measured by compliance with the Customer Service Manual, and non-compliance will be tied to annual Performance Reviews.

ORM has also developed a Customer Complaint Log, a cloud-based Google Doc in which ORM staff can enter any complaints or feedback received by customers. TPA staff and managers cannot edit, but only comment on entries contained in the log. This has ensured that, not only are complaints resolved in a more timely manner, but trends can be tracked on individual performers in the program who receive a higher proportion of complaints. By implementing a formal Complaint Log, ORM anticipates that the number of complaints and the time required to resolve complaints will be reduced. Similarly, individuals receiving multiple complaints can be counseled, retrained, and given the opportunity to improve.



Finally, ORM anticipates in FY16 to implement a: 1) Customer Satisfaction Survey; 2) Customer Complaint Button; and 3) Suggestion Box on the agency website. We hope to make these links user friendly and will provide customers with unlimited opportunities to provide input to ORM's programs.

25. Please describe the Office's efforts to minimize waste, fraud and abuse within your office.

AGENCY RESPONSE

ORM has been working to systematically address fraud, waste, and abuse. Specifically, in FY15 ORM began discussions with CorVel in order to implement processes and controls for investigating cases where fraud and abuse may be occurring. Moreover, ORM staff continued reviewing cases in order to catch waste and defective performance. In FY16 ORM expects to have a more robust review of claims and have implemented protocols to both investigate and have annual checks amongst individuals who may not be in compliance with program protocols.

26. Please provide a list of any contractors or consultants performing work within your office, including job description, salary, and length of contract.

AGENCY RESPONSE

The following is a list of contractors or consultants (not including the Third Party Administrator employees) performing work contracted by the agency.

Name	Job Description	Salary	Length of Contract
Anica Lawrence	Contract Attorneys to provide review and analysis of claimant files in litigation for a civil class action suit under ORM's Public Sector's Workers' Compensation Program.	\$43,680.00	5 months
Adrienne Lawrence		\$43,680.00	5 months
Kwenta Anderson		\$43,680.00	5 months
Morgan Dowe		\$43,680.00	5 months
Cynthia Fauntleroy	General Clerk II	\$21,070.40	1 month
Keona Spuril	Accounting Clerk II	\$21,777.60	5 months

27. Please provide a copy of the Office's FY15 and FY16 Performance Accountability Report.

AGENCY RESPONSE

Please see **Attachment 2** for FY 15 PAR and FY 16 Performance Plan.



IV. *Risk Identification, Analysis and Control Division*

28. How does the Risk Identification, Analysis and Control Division identify, analyze, and control risk?

AGENCY RESPONSE

The primary goal of the Risk, Identification, Analysis and Control (RIAC) program is to identify, measure, analyze and reduce/control the District government's exposure to risk. RIAC accomplishes these tasks in the following manner:

- ORM's safety inspectors conduct annual environmental health and safety inspections of District government buildings to ensure the safety and health of District employees in the workplace and to ensure that agencies adhere to occupational, safety and health administration guidelines. ORM also investigates occupational accidents, illnesses, injuries and fatalities to identify potential and existing risks, determine causes of injury/loss and to investigate reports of unsafe work environments. Additionally, RIAC ensures that each Mayoral agency is provided with the guidance necessary to implement an effective occupational safety and health program within the agency, and informs the ORM Director on the progress being made through evaluations, reports and studies of agencies' occupational safety and health programs.
- The RIAC Division works with Agency Risk Management Representatives (ARMRs) on emergency evacuation planning in cooperation with the DC Fire and Emergency Services Department (FEMS). Every District government office is required to have an updated Emergency Response Plan in place, which is submitted to ORM and FEMS for approval. ORM works with DGS to implement and update building emergency response plans.
- RIAC obtains and analyzes the risk costs incurred by the District in various areas and will assess the areas in which the District is paying the most to mitigate risks. ORM has created a Cost of Risk report that will provide an analysis and overview of agency workers compensation and tort liability losses and total cost of risk expenses. RIAC also recommends preventative measures to reduce the incidence and cost of these injuries.
- RIAC oversees the "How Am I Driving?" program which is designed to promote a safe driving culture for District government employees through reporting instances of safe and unsafe driving practices, and mitigating exposures of risk, while ensuring the safety of motorists and District government employees. ORM tracks the number of complaints and compliments, and communicates the results to District agencies for recommendations on defensive driving training and necessary disciplinary actions. ORM also works with agencies to ensure that they enforce the District's vehicle accountability policy.
- In an effort to identify and control risk, and share risk information between government agencies and officials, the Chief Risk Officer, with the support of



RIAC, chairs the Risk Management Council, which is comprised of ARMRS for each subordinate agency, and which meets bi-monthly to discuss risk and safety issues that concern the government. Agency Risk Management Representatives and ORM share information and develop strategies to address all types of risks.

- The audit recommendation database developed in Quickbase, was implemented in FY14. The database assists ORM to track of how agencies are responding to outstanding audit recommendations.

29. Does the Office maintain a District risk assessment or risk control plan? If yes, please provide. If not, please explain.

AGENCY RESPONSE

Prior to the establishment of ORM, the District in 2002 retained the services of Aon Corporation, a risk consulting and risk management services organization, to provide professional assistance with conducting a comprehensive risk assessment and analysis of all District agencies. The outcome of this project was a District-wide and agency-specific risk maps that provided a summary graphic view of risk exposures identified on a prioritized basis. After the establishment of ORM, it appears that agency officials decided that it was cost effective to utilize ORM's statutory scheme and agency risk management representative structure to require agencies, with the assistance of ORM staff, to develop specific agency Risk Management Plans and Emergency Response Plans, which provide the same type of information, or more detailed information, than what was contained in the 2002 District report.

30. Please provide a copy of the District's most recent trend analysis.

AGENCY RESPONSE

A copy of the Tort Trend Analysis, FY 15 is provided under **Attachment 3**.

31. How many risk management assessments were conducted in FY15 and FY16, to date? Please list each assessment conducted and the date of completion.

AGENCY RESPONSE

In FY 15, ORM conducted 615 OSH inspections of government buildings and responded to 55 agency complaints at government sites. In FY 16, ORM has conducted 166 OSH inspections and responded to 11 agency complaints to date. For a list of the inspections, please see **Attachment 4**.

32. Please identify all training provided in FY15 and FY16, to date, including attendance at each training event.



AGENCY RESPONSE

ORM sponsored several training events at its Risk Management Council meetings in FY15 on a wide range of subjects. A list of those training is provided below:

Month/Yr	No of Attendees	Training Event
November 2014	34 Attendees	Department of Health - Infectious Diseases in the Workplace
		Office of the Chief Medical Examiner – Cost of Risk
		Office of Risk Management - Building Response Plan
January 2015	42 Attendees	Office of the Attorney General – Managing Whistle Blower Claims
		Office of Risk Management – Fire Safety Awareness
March 2015	46 Attendees	Metropolitan Police Department – Active Shooter Training
		Office of Risk Management – Managing Tort Liability Claims
June 2015	41 Attendees	Metropolitan Police Employee Assistance Program – Trauma in the Workplace: Best Practices
		Office of Risk Management – Vehicle Accountability Policy
August 2015	32 Attendees	Department of Public Works – Vehicle Repairs
		Department of General Services/Public Safety Division – Barring Policy
		Department of Public Libraries – Driver Training Programs

In addition, the Office of Risk Management conducted training on Emergency Response Plans to tenants of the Wilson Building. There were 23 attendees at the April and July 2015 meetings.

V. Risk Insurance Division

33. Which Agencies received advice from the Office on risk and insurance policies and practices?
- a. Were each of the recommendations implemented? Please explain.

AGENCY RESPONSE

Nearly every government agency receives advice on risk and insurance policies. Agencies consult with ORM for contracts over \$100,000 to determine insurance sufficiency. ORM advises every Mayoral agency and some independent agencies on workplace safety, workers' compensation and special events planning. All agencies must request self-insurance letters from ORM, which requires risk advice and risk assessments. Risk assessments are done prior to issuance of self-insurance letters. Recommendations were generally given and followed in order to receive self-insurance letters.

In general, insurance advice was generally followed and incorporated into contracts and/or agreements. Advice can include additional coverage or increases in coverage limits.

34. How many assessments of insurance requirements for District contracts were provided in FY15 and FY16, to date?

AGENCY RESPONSE

In FY15 and FY16, to date, there were 823 assessments performed by ORM.

35. Has the Office developed a trend analysis of worker's compensation claims?

AGENCY RESPONSE

Yes. The TPA is responsible for providing ORM detailed charts with statistical information regarding frequency of injuries and total amount paid to date. Please see **Attachment 5** for a copy of the trend analysis of worker's compensation claims. Based on the data collected to date, ORM is reviewing the information that is impacting the top agencies with occurrences, as well as the severity of the cases in order to reduce their exposure. ORM is also reviewing the severity of cases to provide a Cost of Risk report that will detail the cost analysis and trend data for the workers' compensation program.

36. Has the Office provided contract vendor loss information to OCP to assist in monitoring vendor performance.

AGENCY RESPONSE

ORM does not monitor vendor performance nor collect vendor loss information. ORM's responsibility under OCP Policy 3002.00 is to review the insurance clauses in contracts to ensure that they are consistent with the policy. ORM does not have access to vendor loss or performance information. ORM reviews contracts for insurance legal sufficiency.

VI. MLCIA

37. Has the Office established procedures for the administration of the Medical Liability Captive Insurance Agency?
- a. If so, please provide a copy of all guidance documents for this program.

AGENCY RESPONSE

The Medical Liability Captive Insurance Agency (now known as the “District of Columbia Captive Insurance Agency”¹) or the “Captive” established a *Plan of Operation of the DC Medical Liability Captive Insurance* and a procurement, policies and procedures guide in 2011. Copies of both are attached under **Attachment 6**. The Captive is in the process of updating the procurement, policies and procedures guide to reflect the expanded scope of its authority.

38. Does the Office have any recommendations for improving the administration of the Medical Liability Captive Insurance Agency?

AGENCY RESPONSE

ORM is in the process of reviewing its Captive program so that we can better improve the administration of the Captive. In FY16 ORM has inspected the facilities of the several health clinics within its program. Inspection for the one remaining clinic will be completed by mid-March. This effort will assist ORM in improving its administration of the Captive.

39. What conclusions has the Office reached on the use of reinsurance for the Medical Liability Captive Insurance Agency?

AGENCY RESPONSE

ORM researched and investigated whether the Captive should purchase reinsurance in 2011 and 2012. The research revealed that reinsurance companies charge a premium to *indemnify* another insurance company making it a contract of indemnity – meaning that it becomes effective only when the insurance company has made payment on behalf of the policyholder. In the case of the Captive, ORM consulted with AON in 2010 and 2011, who verified that in the event the Captive purchased insurance, it would not only have to pay an upfront premium but that it would also have to pay up-front, any losses and then submit to the reinsurer for re-imbursement. The reinsurer would have the right to scrutinize the loss to determine whether the loss is payable. The structure of the Captive has not changed since the 2010 and 2011 inquiry. Consequently, ORM maintains the position that reinsurance is not structured in a way that would be beneficial to the District

¹ Subtitle D of Bill 20-0199 (the Fiscal Year 2014 Budget Support Act of 2013), approved by the Council on June 26, 2013, changed the name of the Medical Liability Captive Insurance Agency to the “District of Columbia Captive Insurance Agency.”

or the Captive at this time. ORM also concluded that using a reinsurance process would be too expensive and cost prohibitive.

40. Has the Office developed risk standards to which Medical Liability Captive Insurance Agency health clinics must adhere? Please explain.

AGENCY RESPONSE

Yes. In 2008, to continue providing exemplary services to their patient population and to assist in the underwriting process for the District of Columbia Captive Insurance Company, ORM engaged Aon Risk Services to conduct risk assessments of several of the eligible health centers located in the District. The assessment focused on a review of the internal operations at each health center with an emphasis on those policies, procedures, practices, guidelines, and protocols that can identify, prevent or mitigate medical professional liability risks. The results of the risk assessment were utilized as a basis for risk control program enhancements. As well, “best practices” were identified so that they may be shared with other clinics with the hope that the clinics would consider adopting these practices to enhance quality care while minimizing the potential for loss. The results of the risk assessment were very good and required no specific immediate corrective action. The average score for all locations surveyed was 94% in compliance.

On-site inspections were conducted in FY16 to determine whether risk standards have changed. As of the 2015 renewal, each clinic insured by the Captive maintains high risk standards. ORM also looks at the claims history and claims types and work with the experts in the field to develop recommendations to clinics to prevent risks from occurring at the clinics.

VII. Tort Liability Division

41. What steps did the Office take in FY15 and FY16, to date, to limit tort liability for the District?

AGENCY RESPONSE

The Tort Liability Program has been working to limit the District's tort liability by improving its data collection, analysis and sharing process, in addition to performing its core function of claims management.

Consistent with past practices, at the end of each fiscal year, the Office of Risk Management's (ORM's) Tort Liability Program drafted a trend report which tracks the amount the agency spent settling claims against the District and analyzes the agencies and claim types that have subjected the District to the most liability and costs. For FY 16, the Tort Liability Program has expanded the data collected for future trend reports to track all claims that are filed against the District, regardless of whether the claims settled. The Program achieved this by implementing new procedures on data collection in ATS. This will allow ORM to track the trend of actual and potential liability the District faces. Under the administration of the Chief Risk Officer, the Tort Liability Program began generating monthly dashboards to capture real time claim trends by agency. Dashboard information has been shared with agencies that account for higher volumes of claims handled by ORM, including DDOT and DPW.

The Tort Liability Program's limits the District tort liability through its core function of claims management. Specifically, when the Program receives a new claim, it contacts the relevant District agency regarding the incident. This puts the agency on notice of potential defective conditions or negligent employee action that may expose the District to liability. This allows agencies to take corrective measures to limit the District's exposure to tort liability arising out of known defective conditions or negligent employee conduct.

The Tort Liability Program has continued to identify District drivers whose negligent driving exposed the District to liability and cost. Once a driver is involved in two motor vehicle accidents, ORM sends a letter describing the accidents to the driver's agency's director recommending that corrective action be taken. The Tort Liability Program also tracks claims involving extreme and outrageous conduct by District employees that expose the District to liability and costs. Upon identifying these claims, the District immediately contacts with the relevant agency's director and advises them of the employees' actions and recommends corrective action.

For FY 16, the Tort Liability Manager has been meeting with Agency Risk Managers and Human Resources representatives from various agencies to discuss the importance of having completing and reporting accident/incident reports to ORM. The Tort Liability Manager is working in collaboration with ORM's RIAC Division Manager and Deputy Director to develop an online incident reporting form that Agencies may use to report accidents/incidents to ORM. The form will be designed to capture key information that

the Tort Liability Program can use to assess the merits of incoming claims against the District and pursue subrogation claims on behalf of the District.

ORM's Tort Liability Program Manager regularly receives and responds to telephone calls and emails from various District agency General Counsels, Attorney Advisors, ARMJs and HR personal regarding risk assessment for their respective agencies. ORM's Tort Liability Program Manager, General Counsel and Director meet monthly with the D.C. Office of the Attorney General's Senior Staff, to discuss and analyze potential high exposure claims/lawsuit against the District in an effort to develop law strategies for their defense.

Lastly, ORM is working on implementing new procedures on data entry to allow for the generation of a risk map through use of a GIS mapping software. This will allow the Tort Liability Program to map the District's risk exposure to identify potential liabilities and develop a plan of action to address such liabilities.

42. Please provide a report from the Tort Liability ATS system to highlight claims filed, types, timing, and disposition.

AGENCY RESPONSE

Please see **Attachment 7** for a report from the Tort Liability ATS system highlighting claims filed, types, timing, and disposition.

VIII. Public Sector Workers Compensation Program

43. How does the agency solicit feedback from customers of the Disability Compensation Program? Please describe:
- What has the agency learned from this feedback?
 - How has the agency changed its practices as a result of such feedback?

AGENCY RESPONSE

In 2011, ORM began to survey Public Sector Workers' Compensation Program claimants to obtain feedback about the quality of service that they receive. The program also solicits and receives feedback from claimants at orientation sessions and also from employment agency personnel. In 2015, the feedback from 110 respondents of the customer service surveys collected revealed the following: in the category of claims service, 56% of the claimants surveyed indicated that they are satisfied with the overall TPA service and 68% are highly satisfied with their treating physician. Approximately 64% of the claimants were highly satisfied with the claim representative's professionalism. Moreover, of the 110 respondents, approximately 64% were satisfied with the TPA and ORM responsiveness to phone calls. Overall, 47% of respondents were satisfied with the service provided by the Program.

Also, ORM analyzed the feedback from the customer services surveys collected in 2016 to date. Overall, 44% of the respondents were satisfied with the Program. 75% of the respondents agree the service they receive from their treating physician and 58% of claimants were highly satisfied or satisfied with ORM and TPA responsiveness to calls. According to claimants, the Program was also successful in terms of overall satisfaction with the claim representative professionalism. 54% of the respondents gave an affirmative response. According to responses from the 44 claimants surveyed in FY 2016, the Program should continue to address improve in areas the timeliness of benefits and issuing a decision within thirty (30) days. Based on the feedback, ORM's priorities for improvement are in the areas of the timeliness of decisions and timeliness of payments for benefits. ORM provides ongoing management oversight counseling and training to PSWCP TPA employees on both of these issues.

44. Please describe the performance of the District's current third party administrator (TPA). Please provide a copy of the contract between the District and the current TPA.
- Does the agency perform regular performance audits of the TPA? Please explain this process and provide the results of the most recent review;
 - How does the agency track employee satisfaction of the performance of the TPA; and
 - Please provide any manuals or guidance provided by the TPA in administering the DCP.

AGENCY RESPONSE

As part of the government's managerial oversight role of CorVel, the office performs a quarterly audit of the TPA. The audit is performed by two Claims Specialists who are District of Columbia Government employees. Each quarter, five (5%) of the total



number of opened claims are randomly selected for review. The TPA is audited on investigation, claims management, medical management, litigation, reserves and supervision. According to the existing contract, the TPA is required to achieve a score of 85% in order to pass the audit. Of the four audits conducted for fiscal year 2015, the TPA has averaged a score of 62.54%.

ORM conducts a bi-monthly Workers Compensation Orientation for employees that have sustained a new injury. The goal of the orientation is to provide information to the employee and obtain feedback from the employee. The employee is also requested to complete a customer service evaluation survey during the orientation. The survey, as described in answer 43.

The TPA is also required to follow the PSWCP's statute, regulations, and the contract they entered into with the District (See Attachment 8).

CorVel hired a new head of Operations who started in October of 2015. He is currently working on a comprehensive Operations Manual that outlines the Standard Operating Procedures (SOPs) of each workflow to be performed by each staff member in their administering of claims, as well as providing detailed instructions on how to use CorVel's proprietary database, CareMC.

45. The agency has changed third-party administrators several times over the past decade, often due to performance issues. Please explain:
- What those performance issues were;
 - Whether there would be administrative efficiencies to bringing the claims review process back in-house; and
 - If so, what timeline would be feasible for accomplishing that?

AGENCY RESPONSE

Historically, the agency has experienced multiple third-party administrators (TPAs) over the past decade. Since the current Chief Risk Officer began in June of 2015, the current TPA has begun investing more resources and recently made additional efforts to improve the Program. While the TPA's efforts are currently appreciated, we are reviewing performance regularly and believe the TPA has a lot of work to accomplish to get to a normal baseline. The performance issues have been abundant and have included many issues from customer service to feckless management by the TPA.

The performances of the TPAs have been less than stellar and have impacted the agency's ability to reach annual goals. ORM is reviewing options to resolve the concerns outlined and is seeking collaboration with other agencies to address the setbacks that have resulted from this and prior TPA's performance. ORM is looking at a multi-year timeline to accomplish changes needed to derive a new method of delivery with a better focus on customer service.

46. How does the Office monitor the adequacy and effectiveness of medical services in accordance with §1-623.02b (9) of the D.C. Code.

AGENCY RESPONSE

DC Official Code §1-623.02b(9) requires ORM to “[m]onitor the adequacy and effectiveness of medical services under this section, and development guidelines for the determination of disabilities and professional fees.” ORM PSWCP staff fulfills this requirement by regularly reviewing medical reports and services provided for each claim and by charting the medical progress of each injured worker. The TPA manages the claim by scheduling the appointment at the most appropriate location to the injured worker, sending confirmation letters of the scheduled appointment to all involved parties and confirming the service was provided. Once the service has been completed the associated reports are obtained, generally within 24 – 48 hours.

The staff often consults with program medical personnel to ascertain whether the treatment is given to an injured worker comports with medical guidelines. If staff questions the need for medical treatment, the question about the need for medical treatment can be submitted to utilization review (See DC Official Code §1-623.23 and 7 DCMR 126). As part of the utilization review process, a panel of healthcare professionals assesses the need for the treatment and either approves it, denies it or recommends alternative treatment. ORM can also request that the injured worker submit to an Additional Medical Examination so that an independent doctor can review the record and examine the patient to assess whether the employee’s treatment is appropriate, as well as whether the employee can return to work (See 7 DCMR 124).

Also, two registered nurses are on-site at ORM to provide advice and guidance to all staff.

47. How does the Office review open claims to ensure all rules are being followed? When was the last full review of open claims to identify cases where additional case management efforts could return employees to work or otherwise remove them from the DCP?

AGENCY RESPONSE

Claims are assigned to claims adjusters by Agency to ensure that each District agency has one or two claims adjusters as contacts for the administering of workers’ compensation claims. Each adjuster is assigned a claims supervisor who reports to the District Vice President of Operations, providing a system of checks and balances to ensure that the tasks assigned to each person’s role are performed accordingly.

Once an adjuster is assigned to a claim, the adjuster conducts an initial investigation of the claim and sets up a diary (i.e. a future review date) for ongoing reviews of the claim file to ensure that action plans are implemented. CorVel’s claims database (CareMC) performs system-generated diaries to serve as task reminders to staff so that appropriate time-sensitive action is taken on a file, and is equipped with flexible features to allow



adjusting staff to create diaries to adhere to specific time-sensitive demands of a given customer.

Additionally, the TPA and the ORM's contract require that each supervisor perform a review of the adjuster's work every thirty days, including monitoring claim activity to ensure it complies with legislative and Program requirements. CorVel also performs independent audits of its own claim files to ensure that each CorVel office honors both client and CorVel standards. The CorVel audit reviews a sampling of all claims (open and closed) to verify that all time-sensitive tasks are performed, including but not limited to: (i) frequent claimant contact, (ii) form receipt and/or filing, (iii) timely and accurate issuance of payments, and (iv) the prompt issuance of determinations.

Further, roundtables are conducted twice a month where a rotating adjuster presents assigned claims to a panel of CorVel and ORM supervisors. The purpose of the roundtables is to ensure the claims are being managed appropriately with the ultimate goal of returning employees who have reached either a light duty or full duty capacity (maximum medical improvement) back to the workplace.

Finally, the adjusters and their supervisors are required to timely process any incoming medical records to assess whether an injured worker's treating physician has released the injured worker to return to work in either a modified or full-duty capacity. The Program may then return the employee back to work in a light duty capacity to reintegrate them back into the workplace. The Program also provides the injured worker with an array of work reintegration resources such as vocational training and work hardening programs, whenever warranted.

48. Please describe in detail the performance of the "Return to Work Program."
- Provide the number of participants currently in the program;
 - Provide the number of participants in the program in FY15 and FY16, to date; and
 - What percentage of eligible workers in the "Return to Work Program" was successfully returned to work in FY 15 and FY16 to date?

AGENCY RESPONSE

The goal of the Return to Work Program (RTW) is to return all injured employees to work within a medically reasonable period of time after the date of the employees' injuries, as long as a health care professional provides evidence that the employees can work some capacity. The initiative was implemented to reduce the cost expended on injured workers who have received workers' compensation benefits for two or more years and have had demonstrated medical improvement.

The RTW Program has been successful as a result of diligent review of claim activity including review of medical reports, vocational rehabilitation progress reports, and consistent communication with agency human resources personnel. The overall goal of the program is to return employees back to their employing agencies in a full duty capacity. If the employee is unable to return to full duty, an attempt is made to return



them to their agency in a modified position to perform duties within their medical limitations. If the employing agency is unable to accommodate the medical restrictions or limitations, the employee is offered a modified position within another agency. ORM also provides vocational rehabilitation for employees who cannot return to their full duty position when it has been medically determined that the employee has permanent restrictions.

The current Return to Work Officer was hired in September of 2014 and significant successes have been noted with the RTW program. The Public Sector Workers' Compensation Program currently has 2722 employees enrolled and the RTW Officer has returned 770 employees back to the work in FY15, which constitutes 28% and doubles the amount averaged in FY14. The RTW Officer has established a working relationship with the employing agencies of the injured workers, and routinely engages in conference calls with various agencies' management teams to discuss the RTW initiative. Most agencies have been very receptive to the initiative after gaining a clear understanding of the RTW program. The agencies have been contacting the program seeking assistance with filling temporary and long term positions

The RTW program conducted its first job fair on September 28, 2015. The job fair consisted of ten employers (six from the District government and four from outside of the District). On-site interviews were conducted with several workers' compensation claimants that were medically able to return to the workforce. As a result of the job fair, ORM has received several requests from various agencies particularly driven by ORM's ability to provide full-time employees (FTE). The Department of Behavior Health (DBH) has hired one employee through the RTW program, and is in the process of hiring a second employee. The DC Office on Aging (DCOA) is in the process of creating eight new positions, and is currently reviewing resumes, to accommodate workers' compensation employees returning to work. Resumes were also circulated to various District Government and outside agencies to consider for possible employment. The Department of Health (DOH) has reviewed resumes and has expressed interest in five of the injured workers. One employee has already been assigned to DOH. The Office of Disability Rights (ODR) is currently seeking assistance from the RTW program for a long term project. The agency continues to review resumes for suitable employment. The RTW Officer has also encouraged injured workers to submit online applications for positions within their restrictions. The RTW Officer follows up with the various agencies requesting that priority consideration be given to those who have exceeded their two year retention period. The agencies are also encouraged to create positions within the injured workers.

49. What steps has the Office taken to increase the number of participants in the "Return to Work Program." How does the Office ensure that modified work assignments are available for those claimants able to perform such work?

AGENCY RESPONSE



Every employee who is able to work in a modified duty capacity is part of the Program's RTW effort. Weekly roundtable meetings are held to review claims and develop strategies to return employees to work once there is sufficient medical evidence to do so. The RTW officer receives referrals from the claims adjusters and nurse case managers and also reviews open claims to determine if permanent restrictions exist that warrant a referral for vocational rehabilitation. The RTW officer contacts the assigned agencies to determine whether modified work assignments are available. Agencies are also encouraged to modify or create positions within the claimants' restrictions. Assignments are requested from other agencies if the assigned agency cannot accommodate modified assignments.

The Return to Work Program has made significant improvement in returning the injured employees back into the workforce. The Program continues to focus on file reviews, vocational rehabilitation, and collaboration with various agencies and organizations for resources that are beneficial to the return to work process. The file reviews focus, primarily, on claims that have exceeded the two year restoration period. Additional Medical Evaluations (AME) are routinely conducted to determine medical necessity, maximum medical improvement, and work ability status. When medical evidence indicates the injured worker is at maximum medical improvement (MMI) and are able to work in a full duty capacity, Notices of Determinations (NOD) terminating workers' compensation benefits are issued for those claims with full duty/MMI status.

50. Has ORM worked with any other District agencies to coordinate efforts to return participants to work?
- If so, what agencies have participated;
 - Have these efforts been formally established? If so, for how long; and
 - Is there a mechanism in place to evaluate effectiveness of this joint effort? If so, please provide any supporting documentation evaluating the effectiveness of intra-agency coordination in returning WCP participants to work.

AGENCY RESPONSE

In FY 15, ORM has conducted meetings with many of the agencies that have a high population of worker's compensation claims and/or challenging populations, such as the Department of Public Works (DPW), the Department of Youth and Rehabilitation Services (DYRS), the Office of the Superintendent for State Education (OSSE), and the Department of Transportation (DDOT). ORM has also hosted "meet and greet" with most of the agencies. The meetings are designed to discuss return to work strategies and how to overcome budgetary issues in order to aid employees to return back into the workplace. As a result of these meetings, ORM has received requests from District of Columbia Office of Aging (DCOA) to assist with filling the eight positions they are creating. The Department of Health (DOH) also expressed interest in creating five positions. The meetings have proven to provide a clear understanding of the RTW process as well as the mutual benefits for all engaged entities.



The RTW program has partnered with District of Columbia Human Resources (DCHR), Department of Employment Services (DOES) and DCOA to provide training and employment opportunities. The RTW participants are enrolled in DCHR Center for Learning and Development (CLD). The CLD conducts free classes every other Thursday that provide employment readiness training. The classes consist of concept of a resume, interview skills and new job science. The new job science project teaches the individuals about today's technology and how to maneuver through the DCHR website. These classes guide individuals regarding preparation for re-entry into the workforce. The RTW Officer has collaborated with DCHR to provide training. Upon the completion of the 90 day training, DCHR will explore the possibility of hiring these employees.

The injured workers are also enrolled in most of the services at DOES. The injured workers are required to complete the DOES Orientation which provides an overview of the American Job Centers (AJC). The injured workers are then registered for the Microsoft digital alliance. The computer courses are four week intervals. This class is essential to the employment process as most of the employers are requiring basic knowledge of Microsoft Word. DOES provides monthly updates to ensure compliance with the RTW program. ORM has collaborated with DOES who also solicits employers for the RTW Job Fair. The collaboration consists of DOES staff attending the RTW Orientation to provide an overview of DOES services, registering injured workers at the AJC, assigning facilitators for the different programs. The facilitators provide a monthly update to the RTW officer regarding attendance and class participation. This information is provided for compliance purposes.

The Program has partnered with DCOA for volunteer and internship opportunities in order to benefit from of DCOA collaborations with various agencies and organizations. Based on the resources provided by DCOA, the RTW program has enrolled injured workers into the volunteer initiatives which could lead to permanent employment within the District and outside of the District.

DCOA has also introduced the RTW programs to National Caucus for Black Aging (NCBA). This organization focuses on citizens that are 55 years of age and older, DC resident and unemployed. DCOA continues to review resumes received from the job fair as the agency is in need of eight employees to expand their services.

Office of the Chief Medical Examiner (OCME) has hired two injured workers through the FTE process.

Department of Behavioral Health (DBH) has hired one injured worker through the FTE process.

51. Please describe in detail what the "Vocational Rehabilitation Program" entails:
 - a. Provide the number of participants currently in the program; and
 - b. Provide the number of participants in the program in FY15 and FY16, to date?



AGENCY RESPONSE

Vocational Rehabilitation is a process which enables persons with functional, psychological, developmental, cognitive and emotional impairments or health disabilities to overcome barriers to accessing, maintaining or returning to employment or other useful occupation. The current TPA (CorVel) refers files indicating permanent restrictions and RTW Officer reviews the files for vocational rehabilitation referral. The injured workers are referred to vocational rehabilitation once permanent restrictions are indicated and the two year retention period to return to their pre-injury position has expired. The injured workers meet once a week with the vocational rehabilitation counselors. CorVel has integrated vocational rehabilitation in their services, whereby two vocational rehabilitation counselors are designated to the District of Columbia who will provide the following services:

- Vocational Assessment
- Job Analysis
- Job Placement

A weekly update is provided to the Return to Work Officer to track progress and compliance.

There are currently seven (7) participants in the Vocational Rehab Program and twenty-four (24) referrals for FY15 – FY16.

52. What percentage of eligible workers in the “Vocational Rehabilitation Program” was successfully returned to work in FY15 and FY16, to date?
- a. Please provide a list of participants’ original District government positions and the positions they were returned to as a result of the return to work program in FY15 and FY16, to date.

AGENCY RESPONSE

The participants in the Vocational Rehabilitation Program are injured workers that have been released with permanent restrictions and have been out of work for more than two years. In FY15 - FY16, there were five (5) listed eligible injured workers in the Vocational Rehabilitation Program that were referred to the TPA for job placement. Four (4) of the five (5) participants were actually placed by the Return to Work Officer. The TPA was only successful with one (1) job placement for the Program. Therefore, 16.13% of eligible workers in the Program were successfully returned to work. The challenge with vocational rehabilitation is due partly to non-compliance by the injured workers, educational barriers and the type of limitations/restrictions given by their physician. The Program is currently reviewing additional methods for vocational rehabilitation based on the mentioned status.

A list of the Vocational Rehabilitation Program participants is provided is provided in the chart below:



Original Agency	Original Position	Return to Work Agency	Return to Work Position
DBH	Nurse	OCME	Staff Assistant
CFSA	Social Worker	DBH	Compliance Specialist
FEMS	EMS	OCME	Staff Assistant
CFSA	Social Worker	CFSA	Resource Dev. Specialist
DOC	Detention Officer	ODS Security Solutions	Security Officer

53. Please complete the following chart:

AGENCY RESPONSE

Disability Compensation Program Statistics

	FY2015	FY2016 (to date)
Number of Injuries Noticed	1277*	517*
Number of Claims for Continuation of Pay	162	26
Continuation of Pay Claims Approved	n/a	n/a
Continuation of Pay Claims Disapproved	n/a	n/a
Number of Claims for Benefits	1177	432
Claims for Benefits Approved	451	153
Claims for Benefits Disapproved*	79	80
Number of Requests for Hearing	81	18
Number of Determinations Affirmed	8	2
Number of Determinations Modified	1	0
Number of Determinations Reversed	1	0
Number of Determinations Remanded	9	1
Number of Orders for Physical Examination Made by DCP	10	2
Orders for Claimants Seeking Compensation	20	6
Orders for Claimants Awarded Compensation	11	2
Total Cost of Examinations	\$11,852.12	\$1,360.00
Number of Requests for Review of Reward Made to DCP (Reconsideration)	12	7
By the Office of the Attorney General	0	0
By the Program	0	0
By the Claimant	11	8
Results of Reconsideration		
Orders Increasing Award	0	0
Orders Decreasing Award	0	0
Orders Suspending Award	1	1
Orders Forfeiting Award	0	0

*Note: Due to a policy change, the number of injuries noticed has increased. The total includes claims reported for record only, as well as claims pursued for benefits.



54. How are WCP participants notified of appointments, doctor's visits, or other requirements mandated by the program?

AGENCY RESPONSE

At the onset of an injury, a PSWCP claimant may seek treatment with a physician of his or her choosing and/or a local emergency room. Upon reporting the claim to CorVel, the nurse triage provides an assessment and recommendation for a physician. The TPA manages the claim by scheduling the appointment at the most appropriate location to the injured worker, sending confirmation letters of the scheduled appointment to all involved parties, and confirming that the service was provided. Once the service has been completed, the associated reports are obtained, generally within 24 to 48 hours.

When required, CorVel schedules Additional Medical Exams ("AMEs") to ensure appropriate medical action is taken in the course of an injured worker's treatment. In these scenarios, an injured worker is sent an "AME letter" advising them of the date and time of their AME appointment well in advance of the scheduled event. Additionally, CorVel has two onsite Telephonic Case Nurses (as well as Field Case Nurses by request) to help coordinate medical care and provide on the spot medical guidance.

Moreover, it is always the expectation that claims adjusters reach out to injured workers via phone and email to provide injured workers with status updates on their claims and to follow through on requests for additional information, wherever warranted.

55. When was the last time the Office performed verification checks of DCP recipients by reviewing Office of Pay and Retirement Services payroll records? What were the results of the most recent review?

AGENCY RESPONSE

The Office of Risk Management (ORM) receives reports from the Office of Pay and Retirement Services (OPRS) that identifies DC government employees who received pay through their agency and received wage replacement resulting from a compensable workplace injury for the same pay period(s). ORM conducted a comprehensive review of the OPRS report in November 2015 that covers the final quarter of FY15. Twenty-eight (28) employees found to potentially have received contemporaneous payroll and wage replacement payments for one or more pay periods. Further review and analysis of the data found no evidence of overlapping payments for eighteen (18) employees. They received pay from both entities within a single pay period due to their wage replacement eligibility date falling within the pay period; they were entitled to regular pay under their continuation of pay period and wage replacement for the remaining days within that pay period. Three (3) employees received concurrent payments as result of partial wage replacement. The remaining seven (7) employees received overlapping payments for one or more pay periods reviewed.

Based upon ORM's review of pay stubs, continuation of pay end dates, and TTD payments for the seven employees, one employee received pay for holiday and scheduled annual leave for one pay period, and regular pay for a second pay period, both overlapping wage replacement payments, resulting in an overpayment based upon Third Party Administrator (TPA) error. The second employee received regular pay and wage replacement concurrently for two pay periods. The employee was entitled to the wage replacement payment; therefore, the overpayment was issued by the employing agency. The third employee appears to have been paid, by the agency, for a protracted continuation of pay covering two pay periods. He was entitled to wage replacement during those pay periods as the continuation of pay period would have ended during the prior pay period; therefore, the error has to be corrected by the agency. The fourth employee used annual and sick leave across four pay periods and received wage replacement for the same pay periods. The employee was entitled to wage replacement for those periods and must exercise his right to leave buy back to resolve the issue. The final three employees received regular pay across two to four pay periods during their documented eligibility for wage replacement. ORM has requested additional documentation from these employees' agency time keepers and supervisors to further audit the payments to determine if the employees actually reported to work while alleging to be unable to work.

Once ORM has received all requested information and documentation, the final analysis will be completed and appropriate actions will be taken including recoup of overpaid funds to which the employee was not entitled and referral to the Office of the Attorney General and/or Office of the Inspector General, as warranted.

56. How does the Office track the timeliness of claim resolution, including all statutory or regulatory requirements? What has the Office determined?
 - a. How does the office track the timeliness of responses for payments, hearings, decisions, etc.

AGENCY RESPONSE

CorVel's claims system provides a claims diary management feature to effectively manage, review, and update claims statuses at regular intervals. Following an initial claim review, the claims adjuster develops a diary based on the investigation, facts of the claim, disability, prognosis, and probable outcome. The diary system reminds claims adjusters and supervisors to review claims at various intervals but for no longer than 30 days from the initial review.

The claim system allows all supporting documentation to be stored electronically, and readily accessible to all involved parties. Reports can be run by management to track responsiveness. ORM also maintains a log of scheduled hearings that tracks the date of the hearing, the issue being litigated, the assigned attorney, the decision of the ALJ, the status of ORM's compliance with any orders, and the status of appeals. Also, ORM reviews the status of claims through quarterly audits. CorVel recently provided on-site



training for all adjusters and supervisors to assist in their understanding of the system functionality, and reinforce the need for full utilization going forward.

Additionally, CorVel is continually updating functionality of his claim system, in order to better support claims analysis. CareMC, is equipped with a “Litigation Tab” that reveals the following on a given claim: (i) whether an injured worker is represented; (ii) when a hearing is scheduled and/or pending; (iii) the findings revealed in a decision; and (iv) ruling trends among Administrative Law Judges. This feature allows an adjuster or litigation support staff to populate the database with findings from a particular decision and to set diaries to cue action based on a court’s ruling, such as the reinstatement of benefits.

57. What is the Office’s process when instances of improperly receiving dual payments are found? Are cases referred to the Office of the Inspector General and the Office of the Attorney General? How many cases were referred to each of these offices in FY15 and FY16, to date?

AGENCY RESPONSE

In cases where the employee received pay through use of leave which eligible for workers’ compensation benefits, the leave buy back process will be exercised. For employees found to have received workers’ compensation benefits after returning to work and there is evidence that the program was notified timely, the payments will be deemed an overpayment due to Third Party Administrator (TPA) error and ORM will recoup the overpayment from the TPA in accordance with contract provision C.5.15.1.7.1. Employees found to have received workers’ compensation benefits after returning to work and they failed to notify the program a notice of overpayment will be issued to allowing the employee the opportunity to voluntarily repay the program in accordance with regulation 142. If the employee does not establish an acceptable repayment plan but continue to receive wage replacement compensation, the program will reduce their biweekly compensation to recover the overpayment. If the employee is no longer receiving wage replacement compensation, a referral will be made to the Office of the Attorney General for legal intervention. If there is compelling evidence that the employee willfully and intentionally committed fraud, the matter will be referred to the Office of the Inspector General.

During FY15, ORM worked diligently with the current TPA and OCTO to identify and implement data feed processes that would generate a payroll contrast report to identify potential dual payments. Resultantly, during the last quarter of FY15 the Disability Data Match Report was successfully generated and ORM resumed monitoring the data. ORM did not make any referrals to the Office of the Attorney General or Office of the Inspector General during FY15 as the data feed issue was not resolved until the final quarter of the fiscal year. ORM’s review of the current data may result in referrals once the pay audits have been completed.



58. How does the Office calculate the liability for the DCP? How does the Office determine the needed allotment to the DCP and the Disability Compensation Fund?

AGENCY RESPONSE

ORM contracts with a consulting/actuarial firm on an annual basis to determine an actuarial estimate of the loss and loss expense reserve for the workers compensation, general (non-auto) liability, and automobile liability programs. The estimated reserves developed by the actuarial study are required to be included in the District's CAFR. ORM determines the needed allotment of funds for the Employment Compensation Fund by reviewing past expenditures and budgets and in concert with the OCFO and Mayor's budget office.

59. Is the Disability Compensation Fund adequately funded?

AGENCY RESPONSE

The Disability Compensation Fund program expenditures are volatile and fluctuate based on the claimant population. If the current burn rate remains steady, ORM will work with the Mayor's Office of Budget and Finance to ensure the agency meets its obligations.

60. Please list any pending claims against the District in the administration of DCP in Superior Court or U.S. District Court.

AGENCY RESPONSE

The following are a list of pending claims against the District in the administration of the Public Sector Workers' Compensation Program in the U.S. Superior Court or U.S. District Court:

- *Jones v. District of Columbia*, Civil Action No. 07-CV-01206 (U.S. District Court)
- *Barryman-Turner v. District of Columbia*, Civil Action No. 14-CV-00035 (U.S. District Court)
- *Nicholas v. D.C. Office of Risk Management*, No. 2015 CA 008335 (D.C. Superior Court)
- *Robinson v. District of Columbia*, Civil Action No. 15-CV-02218 (U.S. District Court)

61. Please provide the number of claims in administrative litigation before the Department of Employment Services' Administrative Hearings Division in FY15 and FY16, to date.

AGENCY RESPONSE

Based upon information provided by the Office of the Attorney General, forty-one requests for hearings were filed in FY15 and eighteen requests for hearings were filed in FY16.

62. How many cases in FY15 and FY16, to date has the Office of Risk Management requested an order to stay enforcement of a decision by a Department of Employment Services Administrative Hearings Judge. What was the result of the ruling by the Compensation Review Board?

AGENCY RESPONSE

Based upon information provided by the Office of the Attorney General, one request for a stay was filed with the Compensation Review Board in FY15. It was not granted. No stay requests have been filed in FY16.

63. What has the Office learned from claim requests regarding safety issues for District employees?

AGENCY RESPONSE

In FY15, ORM did a regular analysis of the PSWCP claims data and determined that the most common work place injured that resulted in the year were slip and falls, as well as injuries caused by a patient. Through recurrent inspections of agencies conducted by RIAC personnel, ARMR trainings and Risk Prevention and Safety Council meetings, ORM is able to identify trends in order to proactively address safety concerns which in turn will minimize the exposure of claims.

64. With respect to the Utilization Review Accreditation Commission:
- Please identify the current members;
 - Please identify all certified utilization review organizations or individuals; and
 - Please identify the number of reviews undertaken by the Commission in FY15 and FY16, to date and the results of those reviews.

AGENCY RESPONSE

CorVel is Utilization Review Accreditation Commission (URAC) certified for Utilization Review. URAC is an independent, nonprofit organization that strives to promote continuous improvement in the quality and efficiency of health care management through processes of accreditation, education, and measurement.

CorVel has six Utilization Review URAC accredited hubs. Each hub handles a number of assigned states. Likewise, each hub is responsible for ensuring that Utilization Review Organization certification is obtained and maintained in accordance with the particular jurisdictional requirements of a given customer.

The number of reviews for FY15 was 126. The number of review for FY15 to date is 34. The results of those reviews are provided in the chart below:



Utilization Reviews

Fiscal Year	Certified	Partially-certified (modified)	Non-certified	Cases Currently Pending	Requests withdrawn /canceled	Total
2015	66	6	47	3	4	126
2016	18	3	11	1	1	34
Total	84	9	58	4	5	160

65. Please provide any addition information, feedback, or requests to the Committee that ORM deems necessary.

AGENCY RESPONSE

At this time, ORM believes the above questions have outlined most all information which may be helpful to the Committee.