Accountability: GPRA, PART & OWCP

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ACCOUNTABILITY:
GPRA, PART & OWCP

By
Allan Hunt
10 Dec 2003
Plan of Presentation, Part I

Performance Measurement
- Evaluation Models
- Benchmarking WC Systems
  - Work Loss Data Institute
  - AWCBC - Canada
  - WCRI – U.S.
- Continuous Improvement Models
- Assessment of WC Systems
Plan of Presentation, Part II

- GPRA
- PART
- Evaluation of FECA
- ICF Consulting study
  - Purpose
  - Description
  - Analysis
  - Promising Practices

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Evaluation Overview

- Process Evaluation
  - What was done?

- Gross Outcome Evaluation
  - What were the results?

- Net Impact Evaluation
  - Was it worth it?

- GPRA Evaluation
Process Evaluation

- How many accidents?
- How many claims?
- How many medical treatments?
- How many lost days?
- How much litigation?
- How much does it cost?
Outcome Evaluation

- Incidence of claims
- Duration of claims
- Return to work rates
- Service quality measures
- Employee satisfaction measures
- System costs
GPRA Evaluation

- Government Performance and Results Act of 1993 (GPRA)
  - Clinton Administration “reinventing government”
  - Requires federal agencies to establish standards to measure their performance and effectiveness
    - Strategic Plans – revised every three years
    - Performance Plans – revised and released annually
    - Performance Reports – released annually

- Program Assessment Rating Tool - OMB
Value of Benchmarking

- Benchmarking is an accountability tool
- Benchmarking is a way to determine best practice
- Benchmarking is a motivator for improved performance


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Benchmarking WC Systems

- System Report Card
  - Work Loss Data Institute

- Key Statistical Measures
  - Association of Workers’ Compensation Boards of Canada (AWCBC)

- CompScope™ Benchmarks
  - Workers Compensation Research Institute (WCRI)

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Work Loss Data Institute

• State Report Cards for Workers’ Comp
  – Letter grades assigned to 44 U.S. states
  – Based on available OSHA data

• Six factors determine grades
  – 1) Incidence of injuries
    • Varies from 1.2 to 3.4 per 100 employees
  – 2) Percentage of injuries that involve lost workdays
    • Varies from 22 to 77 percent
WLDI, continued

– 3) Median disability duration
  • Varies from 4 to 17 days

– 4) Delayed recovery rate = the percent of long duration (>31 days) cases
  • Varies from 13 to 35 percent

– 5) Low back strain outcomes
  • Incidence and duration

– 6) Carpal tunnel syndrome outcomes
  • Incidence and duration
## WORKERS’ COMPENSATION REPORT CARD

*From Work Loss Data Institute (WLDI)*

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### WORKERS’ COMPENSATION REPORT CARD
From Work Loss Data Institute (WLDI)

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AWCBC PROPOSES BANKRUPTCY AND INSOLVENCY ACT CHANGE TO GIVE WORKERS' COMPENSATION SECURED CREDITOR STATUS

L'ACATC PROPOSE DE MODIFIER LA LOI SUR LA FAILLITE ET L'INSOLVABILITÉ POUR DONNER AUX COMMISSIONS DES ACCIDENTS DU TRAVAIL LE STATUT DE CRÉANCIÈRES GARANTIES
Workplace Injury and Disability

21. Injury Frequency (per 100 workers of assessable employers) - 2000 to 2001

Please refer to the Key Statistical Measures Data Tables or Indicator Ratio Tables for the numerical data.

The following page is important in the interpretation and understanding of this graph. It contains the full definition of the Key Statistical Measure as well as detailed footnotes which explain important jurisdictional difference where necessary.
Workplace Injury and Disability
IR5 (prev. F6). Current Year Average Benefit Cost Per Lost-Time Claim

Please refer to the Key Statistical Measures Data Tables or Indicator Ratio tables for the numerical data.

The following page is important in the interpretation and understanding of this graph as it contains the full definition of the Indicator Ratio.

This Indicator Ratio is created by dividing the two corresponding Key Statistical Measures for each jurisdiction.
Workplace Injury and Disability

24a. Percentage of Lost-Time Claims Receiving Wage-Loss Benefits at the 2nd Year After the Accident Year - 2000 to 2001

Please refer to the Key Statistical Measures Data Tables or Indicator Ratio tables for the numerical data.

The following page is important in the interpretation and understanding of this graph. It contains the full definition of the Key Statistical Measure as well as detailed footnotes which explain important jurisdictional differences where necessary.
Workplace Injury and Disability

24b. Percentage of Lost-Time Claims Receiving Wage-Loss Benefits at the 6th Year After the Accident Year - 2000 to 2001

Please refer to the Key Statistical Measures Data Tables or Indicator Ratio tables for the numerical data.

The following page is important in the interpretation and understanding of this graph. It contains the full definition of the Key Statistical Measure as well as detailed footnotes which explain important jurisdictional differences where necessary.
Workplace Injury and Disability


Please refer to the Key Statistical Measures Data Tables or Indicator Ratio tables for the numerical data.

The following page is important in the interpretation and understanding of this graph. It contains the full definition of the Key Statistical Measure as well as detailed footnotes which explain important jurisdictional differences where necessary.
Client/Customer Service

16. Average Calendar Days from Injury to First Payment - 1998 to 2001

Please refer to the Key Statistical Measures Data Tables or Indicator Ratio tables for the numerical data.

The following page is important in the interpretation and understanding of this graph. It contains the full definition of the Key Statistical Measure as well as detailed footnotes which explain important jurisdictional differences where necessary.
Client/Customer Service

17. Average Calendar Days from Registration to First Payment - 1998 to 2001

Please refer to the Key Statistical Measures Data Tables or Indicator Ratio tables for the numerical data.

The following page is important in the interpretation and understanding of this graph. It contains the full definition of the Key Statistical Measure as well as detailed footnotes which explain important jurisdictional differences where necessary.
Client/Customer Service

IR6 (prev. G7). Administration Costs Per Lost-Time Claim

AWCBC Board/Commission Financial and Statistical Data

Please refer to the Key Statistical Measures Data Tables or Indicator Ratio tables for the numerical data.

The following page is important in the interpretation and understanding of this graph as it contains the full definition of the Indicator Ratio.

This Indicator Ratio is created by dividing the two corresponding Key Statistical Measures for each jurisdiction.
DBE: A Unique and Powerful Database

- Robust sample
  - 10 million claims
  - Accident years 1994 - 2000, as of 2000
  - States represent > 60% of U.S. WC benefits

- Representative
  - Voluntary and residual market
  - Self-insured employers
  - State funds
CompScope™ Data Adjusted to Produce Meaningful Comparisons

- Data shown reflect adjustments for:
  - Injury mix
  - Industry mix
  - Wages

- 7-day waiting period for benefits used in all states

- Results reflect similar set of claims in each state
WCRI Benchmarking Measures

- Benefit amounts
- Timeliness
- Medical costs
- Disability duration
- Defense attorney involvement
- Vocational rehab use
- Benefit delivery expenses
- Medical costs by service/provider type
- Medical prices
- Utilization of services
- Utilization by provider
Temporary Disability Duration: Major Indemnity Cost Driver

Average Weeks of Temporary Disability Payments per Claim > 7 Days Lost Time, 1999/2000

WCRI
Benefit Delivery Expenses as % of Total Cost per Claim

Benefit Delivery Expenses as Percentage of Total Cost per Claim, 1998/2000 Claims with More Than 7 Days of Lost Time Adjusted for Injury and Industry Mix and Wages
Rate of 1st Payment within 21 Days

Percent of Claims w/ First Payment w/ in 21 Days of Injury, 1999/2000 Claims > 7 Days Lost Time
Litigation and Adjusting Expenses

Average Litigation and Adjusting Expenses per Claim with More Than 7 Days Lost Time, 1998/2000
Adjusted for Injury and Industry Mix and Wages
Medical Payments per Claim

Average Medical Payments per Claim, 1999/2000
Adjusted for Injury and Industry Mix and Wages

MA | NC | GA | PA | IN | CT | WI | FL | TN | CA | IL* | TX
PPD Frequency:
Major Indemnity Cost Driver

PPD/LS Claims as Percentage of Claims with More Than 7 Days Lost Time, 1997/2000 Claims

States: WI, IN, CT, TN, GA, FL, NC, CA, TX, IL
What Have We Learned?

- Great Variety in Performance
- Difficult to Measure Performance Accurately
- Does it establish “best practice?”
- Does it motivate improved performance?
- Where do we go from here?
CONTINUOUS IMPROVEMENT

- W. Edwards Deming
  - Guru of manufacturing in 1980’s
- Balanced Scorecard
  - Kaplan and Norton, Harvard 1992
  - Balanced Scorecard Collaborative, Inc.
- Examples

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BALANCED SCORECARD

- Elements of balanced scorecard
  - Financial perspective
  - Customer perspective
  - Internal process perspective
  - Learning and growth perspective

- Strategy map

- Strategic management

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As you can clearly see in slide 397...

GAAAAH!

"PowerPoint" poisoning.
Plan of Presentation, Part II

- GPRA
- PART
- Evaluation of FECA
- ICF Consulting study
  - Purpose
  - Description
  - Analysis
  - Promising Practices

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Program Assessment Rating Tool (PART)

- Developed by Office of Management and Budget (OMB) to implement **GPRA**
  - To establish a systematic, consistent process for developing program performance ratings and then using that information to make budget decisions

- Intention is to evaluate all federal programs
  - 2004 Budget round – FECA program
  - 2005 Budget round – Black Lung Program

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Program Assessment Rating Tool (PART)

- Program Results [59% PART rating]
  1) Has the program demonstrated adequate progress in achieving its long-term outcome goals? [large extent]
  2) Does the program achieve its annual performance goals? [large extent]
  3) Does the program demonstrate improved efficiencies and cost effectiveness in achieving program goals each year? [large extent]
  4) Does the performance of this program compare favorably to other programs with similar purpose and goals? [N/A]
  5) Do independent and quality evaluations of this program indicate that the program is effective and achieving results? [small extent]
Purpose of the ICF Study

To meet the objectives set forth by OWCP, ICF Consulting designed a program evaluation approach to appraise the following:

- The appropriateness of the FECA program design in relation to the mission, and appropriateness of strategic goals to further that mission;
- The success (or likelihood of success) of resources invested and strategies employed to achieve program results;
- The adequacy of systems/approaches for identifying program priorities and issues and correcting program deficiencies;
- The adequacy of performance measurement systems and controls to ensure data validity, reliability, accuracy, and consistency; and
- The potential application of industry promising practices to OWCP programs.
Implementation of the ICF Study

- Draft of research questions developed by ICF Consulting
- Consultation with OWCP on questions
- Major focus of study (limited scope)
  - Wage loss compensation
  - Disability management
- Major challenges
  - Gain a thorough and accurate understanding of the program and factors influencing its operation
  - Get the program data right

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Overview of the ICF Study

• Background
• Feedback and Refinement of Plan
• Data Collection
  • Quantitative data
    • Major challenge due to fragmented data sources
    • Competing with ongoing implementation of IFECS
  • Qualitative data
    • Site visits to 5 District Offices
    • Telephone Interviews
    • Concept Mapping
Overview of the ICF Study (continued)

• Analysis
  • Qualitative and quantitative interaction
  • Benchmarking against other WC systems
  • Promising Practices

• Participatory Review of Results
  • Interim progress report – June
  • Draft final report – January
  • Mapping results to Recommendations

• Final report and briefing – February
Findings

Exhibit 4: QCM Closures, by District Office

- Boston
- Chicago
- Cleveland
- Dallas
- Denver
- Jacksonville
- Kansas City
- NYC
- Philadelphia
- San Francisco
- Seattle
- Wash DC

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Findings

Exhibit 5: QCM Return To Work, by District Office

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Findings

Exhibit 6: QCM Referrals to Vocational Rehabilitation, by District Office

Number of Cases

Year

Boston
Chicago
Cleveland
Dallas
Denver
Jacksonville
Kansas City
NYC
Philadelphia
San Francisco
Seattle
Washington DC
Findings

Exhibit 7: QCM Performance by District Office

- 0.0% - 100.0% of QCM Cases Closed
- 0.0% - 100.0% of QCM Cases with a RTW
- 0.0% - 100.0% of QCM cases referred to VR

Cities: Philad, Kansas, Seattl, Clevel, Washin, Dallas, Denver, Jackso, San Fr, Chicag, Boston, NYC

W. E. Upjohn Institute
Findings

Exhibit 8: Lost Production Days by District Office

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Findings

Exhibit 10: QCM Activity, USPS, 1993-2002

- **Starts**
- **Closures**
- **RTWs**
- **Referrals to VR**

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Findings

Exhibit 12: PRM Resolutions, by District Office

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W. E. Upjohn Institute
Findings

Exhibit 13: PRM Resolutions

- Death: 36%
- RTW, no LWEC: 11%
- RTW with LWEC: 8%
- Constructed LWEC: 8%
- Elected OPM: 9%
- Benefits Terminated (No Continuing Injury): 14%
- Refused Suitable Work: 4%
- Other: 10%
Promising Practices

• Disability Management – consulting model
• Preferential/Subsidized Hiring
  • Oregon Preferred Worker Program
  • Oregon Employer-at-Injury Program
• Additional Incentives
  • Employer
  • Worker
• Performance Measurement and Management
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