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**TESTIMONY BY**

**SHIRLEY MASSEY**

**MARCH 17, 2010**

**BEFORE:**

**COMMITTEE ON GOVERNMENT OPERATIONS**

**AND THE ENVIRONMENT**

**HON. MARY M. CHEH, CHAIRWOMAN**

**RE: OFFICE OF RISK MANAGEMENT (ORM)**

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THANK YOU FOR THE OPPORTUNITY TO TESTIFY TODAY. MY NAME IS SHIRLEY MASSEY, AND I AM A MEMBER OF “INJURED WORKER ADVOCATES.”

I WILL START, BY ASKING FOR AND RENEWING MY REQUEST FOR: “WHISTLE BLOWER PROTECTION”; ORM’S COMPLETE , TOTAL AND TIMELY COMPLIANCE WITH ALL EXISTING “DISABILITY COMPENSATION/D.C. GOVERNMENT EMPLOYEE’S WORKER COMPENSATION PROGRAM”; AND MOST IMPORTANTLY, ENFORCEMENT OF ORM’S COMPLETE COMPLIANCE WITH OR LACK OF COMPLIANCE WITH ALL APPLICABLE LAWS, JUDGE’S ORDERS, TIMELINESS, ETC.; ORM NOT ADMINISTERING “DISABILITY COMPENSATION/D.C. GOV’T WORKERS COMPENSATION – CONFLICT OF INTEREST AND BONUSES FOR TERMINATING CLAIMANTS; ENDING CONTRACTING OUT – CONFLICT OF INTEREST AND CONTRACT BASED ON PROFIT(S) FOR TERMINATING CLAIMANTS.

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I HAVE ATTACHED "CHECK LIST" TO MY TESTIMONY, THAT OUTLINES THE CONTINUING CHRONIC SYSTEMIC AND SYSTEMATIC PROBLEMS THAT HAVE AND STILL EXIST FOR INJURED D.C. GOVERNMENT EMPLOYEES, SINCE THE OFFICE OF RISK MANAGEMENT (ORM) HAS HAD CONTROL OF "DISABILITY COMPENSATION/D.C. GOVERNMENT EMPLOYEE'S WORKER COMPENSATION" PROGRAM; AND THE IMPROVEMENTS NEEDED TO GUARANTEE SUCCESS. FOR THE SAKE OF TIME, I WILL HIGHLIGHT THE FOLLOWING:

1. "COST-OF-LIVING ADJUSTMENTS – (COLAs)" HAVE NOT BEEN PAID, AS REQUIRED BY LAW, TO ELIGIBLE CLAIMANTS, FOR THE PERIOD FOR WHICH THEY WOULD HAVE BEEN OR ARE ELIGIBLE FOR.
2. HEALTH AND/OR LIFE INSURANCE PREMIUM PAYMENTS REACHING THE INSURANCE PROVIDER(S), AND ARE UP-TO-DATE.

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IN ADDITION, I WOULD ASK THAT ORM PROVIDE EACH CLAIMANT AND THIS COMMITTEE WITH THE HEALTH AND/OR LIFE INSURANCE CARRIERS/PROVIDERS NAMES AND ACTUAL POLICY(CIES) – INCLUSIVE OF POLICY NUMBER, EFFECTIVE DATE(S), AND BENEFICIARIES.

3. PENSION/RETIREMENT BENEFITS ACCURACY, I.E., UNDER, OR, TO WHICH PENSION/RETIREMENT SYSTEM DOES CLAIMANT BELONG? IS CLAIMANT'S TO-DATE PENSION/RETIREMENT AMOUNT CORRECT? I WOULD ASK THAT ORM TO PROVIDE EACH CLAIMANT AND THIS COMMITTEE WITH THIS INFORMATION.

IN CLOSING, I WANT TO NOTE THAT, UNFORTUNATELY, ORM'S METHODS AND PREVIOUS TESTIMONY, GIVE THE FALSE IMPRESSION THAT THE SYSTEM HAS BEEN RUNNING SMOOTHLY. HOWEVER, MY TESTIMONY AND EVIDENCE TO THE CONTRARY PAINTS AN ENTIRELY DIFFERENT PICTURE, ONE THAT INDICATES THAT THE CURRENT

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DISABILITY COMPENSATION PROGRAM IS IN FACT COMPLETELY  
BROKEN.

**DRAFT CHECKLIST FOR COMPLIANCE WITH  
DISABILITY COMPENSATION LAWS**

**Medical Care**

Resolve unpaid medical bills that are necessary to, give relief, likely to cure, give relief, reduce the degree or period of disability, or aid in lessening the amount of the monthly compensation.

Pay ongoing medical bills within 30 days of receipt of care.

Provide authorization of medical care necessary to give relief, likely to cure, reduce the degree or period of disability, or aid in lessening the amount of monthly compensation.

Provide authorization within 30 days or begin utilization review within 30 days of the request of authorization. If utilization is performed, it is completed within 60 days.

Payment of transportation and may be furnished necessary and reasonable transportation and expenses incident to the securing of medical services, appliances, and supplies.

Treating physician preference given more weight than IME doctors.

**Return to Work**

Attempt to locate light duty work, where medically appropriate, in the D.C. government.

Vocational rehabilitation matches a workers medical restrictions.

Vocational rehabilitation involves preparation for and placement in an job that is medically appropriate for the worker.

Job preserved at D.C. government and worker afforded the right to return to work upon recovery.

**Approved Claims**

Compensation paid on a biweekly basis.

**For total disability**

Compensation for calculated accurately at the rate of 66 2/3 percent of his or her monthly pay (max 75% of GS-15 or DS-12 Step 10).

Compensation augmented for dependents.

**Partial disability**

- partial disability determinations based on a
  - a job that actually exists
  - the government has been
  - a job that the treating

**Scheduled Awards**

If a workers injury has reached maximum medical improvement, but the injury is permanent worker is paid a scheduled an appropriate scheduled award, in addition to ttd or ppd benefits.

**Initial application for benefits**

Initial application for benefits decided within 30 days if not claim deemed accepted

Reconsideration request decided within 30 days of filing if not claim deemed accepted and benefits payments begin immediately.

Hearing decision made within 30 days of administrative hearing

Payment made of all benefits, including retroactive benefits, to worker within 30 days of the decision

Decision from the Compensation Review Board and/ or Director of DOES within 30 days of application for review.

**I. Termination of benefits**

If the termination or reduction in benefits proposed before April 2005...

Benefits continued at original level until the reconsideration process is complete.

If reconsideration needed benefits continue through the reconsideration process.

Reconsideration decided within 30 days.

Hearing decisions within 30 days.

Decision from the Compensation Review Board and/ or Director of DOES within 30 days of application for review.

**Accurate eligibility decisions**

Benefits only modified if:

- The disability for which compensation was paid has ceased or lessened;
- The disabling condition is no longer causally related to the employment;
- The claimant's condition has changed from a total disability to a partial disability;
- The employee has returned to work on a full-time or part-time basis other than vocational rehabilitation under § 1-623.04; or
- The Mayor or his or her designee determines based upon strong compelling evidence that the initial decision was in error.

Treating physician opinions given more weight than IME doctors

**Cost of living adjustments paid**

**Health and Life insurance deductions accounted for and reflected in paperwork**

Health and life insurance premium payments actually reach the insurance provider and are up to date.