HUMAN CAPITAL

Improved Tracking and Additional Actions Needed to Ensure the Timely and Accurate Delivery of Compensation and Medical Benefits to Deployed Civilians

What GAO Found

While policies concerning compensation for deployed civilians are generally comparable, GAO found some issues that affect the amount of compensation—depending on such things as the pay system—and the accuracy, timeliness, and completeness of this compensation. For example, two comparable civilian supervisors who deploy under different pay systems may receive different rates of overtime pay because this rate is set by the employee’s pay system and grade/band. While a congressional subcommittee asked OPM to develop a benefits package for all civilians deployed to war zones and recommend enabling legislation, at the time of GAO’s review, OPM had not yet done so. Also, implementation of some policies may not always be accurate or timely. For example, GAO estimates that about 40 percent of the deployed civilians in its survey reported experiencing problems with compensation, including danger pay. GAO recommended, among other things, that OPM oversee an agency working group on compensation to address differences and, if necessary, make legislative recommendations. OPM generally concurred with this recommendation.

Although agency policies on medical benefits are similar, GAO found some issues with medical care following deployment, workers’ compensation, and post deployment medical screenings that affect the benefits of deployed civilians. Specifically, while DOD allows its treatment facilities to care for non-DOD civilians following deployment in some cases, the circumstances are not clearly defined and some agencies were unaware of DOD’s policy. Civilians who deploy also may be eligible for benefits through workers’ compensation. GAO’s analysis of 188 such claims revealed some significant delays resulting in part from a lack of clarity about the documentation required. Without clear information on what documents to submit, applicants may continue to experience delays. Further, while DOD requires medical screening of civilians before and following deployment, State requires screenings only before deployment. Prior GAO work found that documenting the medical condition of deployed personnel before and following deployment was critical to identifying conditions that may have resulted from deployment. In June 2009, GAO recommended, among other things, that State establish post-deployment screening requirements and that DOD establish procedures to ensure its post-deployment screenings requirements are completed.

Each agency provided GAO with a list of deployed civilians, but none had fully implemented policies to identify and track these civilians. DOD, for example, had procedures to identify and track civilians but concluded that its guidance was not consistently implemented. While the other agencies had some ability to identify and track civilians, some had to manually search their systems. Thus, agencies may lack critical information on the location and movement of personnel, which may hamper their ability to intervene promptly to address emerging health issues. GAO recommended that DOD enforce its tracking requirements and the other five agencies establish tracking procedures. DOD and four agencies concurred with the recommendations; one agency did not.