What GAO Found

While policies concerning compensation for deployed civilians are generally comparable, GAO found some issues that can lead to differences in the amount of compensation and the accuracy, timeliness, and completeness of this compensation. For example, two comparable 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 civilians deployed to war zones and recommend enabling legislation, at the time of GAO’s 2009 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. In June 2009, GAO recommended, among other things, that OPM oversee an executive agency working group on compensation to address differences and, if necessary, make legislative recommendations. OPM generally concurred with this recommendation and recently informed GAO that an interagency group is in the process of developing proposals for needed legislation.

Although agency policies on medical benefits are similar, GAO found some issues with medical care following deployment and post-deployment medical screenings. Specifically, while DOD allows its treatment facilities to care for non-DOD civilians after deployment in some cases, the circumstances are not clearly defined and some agencies were unaware of DOD’s policy. 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. GAO recommended, among other things, that State establish post-deployment screening requirements and that DOD establish procedures to ensure its post-deployment screening requirements are completed. While DOD and State agreed, DOD has developed guidance establishing procedures for post-deployment screenings; but, as of April 2010, State had not provided documentation that it established such requirements.

Each agency provided GAO with a list of deployed civilians, but none had fully implemented policies to identify and track these civilians. DOD had procedures to identify and track civilians but concluded that its guidance was not consistently implemented. Some agencies 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. While DOD and four agencies concurred with the recommendations and are now in various stages of implementation, U.S. Agency for International Development disagreed stating that its current system is adequate. GAO continues to disagree with this agency’s position.