

Highlights of GAO-09-562, a report to the Subcommittee on Oversight and Investigations, Committee on Armed Services, House of Representatives

## Why GAO Did This Study

The Department of Defense (DOD) and other executive agencies increasingly deploy civilians in support of contingency operations in Iraq and Afghanistan. Prior GAO reports show that the use of deployed civilians has raised questions about the potential for differences in policies on compensation and medical benefits. GAO was asked to compare agency policies and to identify any issues in policy or implementation regarding (1) compensation, (2) medical benefits, and (3) identification and tracking of deployed civilians. GAO reviewed laws and agency policies; interviewed officials responsible for governmentwide guidance at the Office of Personnel Management (OPM) and for policy at six selected agencies, including DOD and State; reviewed all workers' compensation claims filed by deployed civilians from January 1, 2006 through April 30, 2008 at the Department of Labor; and conducted a generalizeable survey of civilians deployed from the six agencies during this same period.

### **What GAO Recommends**

GAO makes ten recommendations to the agencies included in this review to take actions such as clarifying guidance regarding non-DOD civilian's eligibility for treatment at DOD facilities and creating mechanisms to assist and track deployed civilians. Seven of the agencies generally agreed with these recommendations; one agency did not—for example it stated that it already had mechanisms to assist and track deployed civilians.

View GAO-09-562 or key components. For more information, contact Brenda S. Farrell at (202) 512-3604 or farrellb@gao.gov.

## **HUMAN CAPITAL**

# Actions Needed to Better Track and Provide Timely and Accurate Compensation and Medical Benefits to Deployed Federal Civilians

#### What GAO Found

Although policies concerning compensation for deployed civilians are generally comparable across agencies, GAO found some issues that affect the amount of compensation—depending on such things as the agency's pay system or the employee's grade/band—and the accuracy, timeliness, and completeness of this compensation. For example, two civilian supervisors with comparable salaries who deploy under different pay systems receive different overtime pay because the overtime rate is determined by the employee's pay system and grade/band level. While a congressional subcommittee asked OPM to develop a benefits package for all deployed civilians to war zones and to recommend enabling legislation, OPM has not yet developed such a package or provided legislation. Also, implementation of some policies may not always be accurate or timely. For example, GAO estimates that approximately 40 percent of the deployed civilians in its survey reported experiencing problems with compensation—including not receiving danger pay—in part because they did not know where to go for assistance. Moreover, in January 2008, Congress gave agency heads discretion to apply the death gratuity provision retroactively for deaths connected with operations in Iraq or Afghanistan on or after October 7, 2001. At the time of GAO's review, agencies had not yet issued formal policy to implement this benefit.

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 identified in guidance and some agencies were unaware of DOD's policy. Civilians who deploy also may be eligible for medical benefits through worker's compensation. GAO's analysis of 188 such claims filed with Labor revealed some significant processing delays resulting in part from lack of clarity about the documentation required to support claims. Without clear information on what documents to submit to support a claim, applicants may continue to experience delays. Further, while DOD requires medical screening before and following deployment for civilians, State requires medical 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.

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 deployed 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, as GAO has previously reported.