The Railroad Retirement Board’s Disability Briefing Document Process Was Not Fully Effective

Report No. 21-07

August 16, 2021
What We Found

The Railroad Retirement Board’s (RRB) Disability Briefing Document Program (D-BRIEF) process was not fully effective to ensure that examiner rationales for their decisions were completely documented. As a result, doubt exists regarding whether information recorded in the output of D-BRIEF (Disability Briefing Document) was consistent with supporting documentation in the electronic case file. Although we did not identify any exceptions directly related to consistency, examiners did not always adhere to agency procedure to acknowledge and document discussions of conflicting medical evidence and how they were resolved. Instead, examiners resolved these issues prior to entering responses in the Disability Briefing Document and indicated that there was no conflicting medical evidence. In addition, D-BRIEF was not being fully utilized for its intended purpose and there was a lack of transparency in RRB annuitant disability records that increased the risk for potential fraud in the disability determination process.

What We Did

Due to the high dollar value of annual disability annuities, and previous findings by Office of Inspector General, Government Accountability Office, and our contracted auditors, we conducted this performance audit because it is imperative that the disability decision process is as complete, accurate, and transparent as possible.

The scope of the audit was all initial disability decisions made in fiscal year 2019.

Our audit objectives were to determine if the D-BRIEF process was fully effective to ensure that (1) examiner rationales for their decisions were completely documented and (2) information recorded on the Disability Briefing Document was consistent with supporting documentation in the electronic case file.

In order to complete this work, we considered applicable laws, regulations, guidance and RRB policies and procedures related initial disability decision process in the D BRIEF, conducted sample testing, and reviewed agency documentation, records, and system data. We also conducted walkthroughs and interviewed applicable agency staff.

What We Recommend

To address the weaknesses identified in this audit, we made three recommendations related to (1) updating policies and procedures in the Disability Claims Manual to require that all medical evidence considered in the determination of conflicting medical evidence is entered into D-BRIEF and discussed on the Disability Briefing Document; (2) updating policies and procedures to ensure that all relevant medical evidence and supporting documentation pertaining to the applicant’s claim for disability is documented in D-BRIEF and the electronic case file, prior to the finalization of the initial disability decision; and (3) ensuring that the Disability Benefits Division works with Policy and Systems to implement system modifications to D - BRIEF to ensure that the Disability Briefing Documents do not contain an incorrect statement.

RRB management concurred with recommendations 1 and 2 but did not concur with recommendation 3. Although the RRB did not concur with recommendation 3, they stated that procedure will be revised to improve the accuracy of statements in D-BRIEF.

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INTRODUCTION

This report presents the results of the Office of Inspector General’s (OIG) audit of the Disability Briefing Document Program (D-BRIEF).

Objectives, Scope, and Methodology

Our audit objectives were to determine if the D-BRIEF process was fully effective to ensure that (1) examiner rationales for their decisions were completely documented and (2) information recorded on the Disability Briefing Document was consistent with supporting documentation in the electronic case file.

It should be noted that the objective of our audit did not include making an assessment as to whether or not the initial disability decisions (to allow or deny) were correct, nor did we make an assessment as to the veracity of the submitted documentation.

The scope of the audit was all initial disability decisions made in fiscal year 2019. During fieldwork, the universe consisted of 2,366 initial disability decisions made in fiscal year 2019 and was made up of 4 different categories, as displayed in Table 1.

<table>
<thead>
<tr>
<th>Initial Disability Decision Type</th>
<th>Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Occupational</td>
<td>1,047</td>
</tr>
<tr>
<td>Total and Permanent (T&amp;P)</td>
<td>941</td>
</tr>
<tr>
<td>Widow</td>
<td>137</td>
</tr>
<tr>
<td>Child</td>
<td>241</td>
</tr>
<tr>
<td><strong>Total Initial Disability Decision Universe</strong></td>
<td><strong>2,366</strong></td>
</tr>
</tbody>
</table>

*Source: RRB Fiscal Year 2019 Initial Disability Data.*

To accomplish the audit objectives, we

- identified applicable laws and regulations for the initial disability decision process;
- identified and reviewed Railroad Retirement Board (RRB) policies and procedures for the initial disability decision process in the D-BRIEF;
- determined and documented whether internal control is significant to the audit objectives;
- interviewed appropriate RRB officials and agency staff including management from the Office of Programs;
- conducted walkthroughs of the Disability Benefits Division (DBD)’s D-BRIEF process;
- conducted a walkthrough of Program Evaluation and Management Services’ quality assurance review process;
- developed a test strategy and sampling plan;
- tested a randomly selected nongeneralizable sample of 46 Disability Briefing Documents for consistency and completeness. We considered an attribute accurate if the information on the Disability Briefing Document was consistent with the information recorded in the electronic claim file in WorkDesk;
- developed an additional test strategy and sampling plan for initial occupational disability cases that used Independent Case Evaluations (ICE); and
- tested the Disability Briefing Documents for an additional randomly selected, statistically valid sample of 168 initial occupational disability cases that used ICE, for information related to conflicting medical evidence.

We assessed the data reliability of the fiscal year 2019 initial disability decision data provided by the Office of Programs by: (1) performing electronic testing of required data elements, (2) reviewing existing information about the data, and (3) interviewing agency management and staff knowledgeable about claims processing. In addition, we compared the fiscal year 2019 initial disability decisions in the data extract we received from the Office of Programs with an independent extract from our own OIG, Office of Audit, Data Analytics Team. The data contained no data validity errors, using the Audit Command Language verify command, and the data was complete and sufficiently reliable to answer our audit objectives. This validation did not assess the entirety nor the veracity of the documentation submitted.

Our testing methodology considered the risks inherent with unreliable data and the availability of corroborating evidence in the form of source documents as recommended by Government Accountability Office (GAO). We determined that the computer processed data obtained from the Office of Programs was sufficiently reliable for our testing purposes and do not believe using the data would weaken our analysis of the audit objectives or lead to an incorrect or unintentional conclusion about our findings, conclusions, or recommendations.

We developed a sampling plan and test strategy to support our audit objectives. We initially used (stratified) discovery sampling, which recommended 45 samples out of our total universe of 2,366 cases. We used a stratified sample to ensure a representative selection of each type of initial disability decision was selected which directed a sample of 45. However, we decided to round our sample up to 46. At that point our sample became a nongeneralizable (judgmental) sample.

We tested attributes related to data consistency and completeness in the D-BRIEF process (as it was documented on the Disability Briefing Document and supporting documentation in WorkDesk). To determine if the rationale for the decision was consistent, we compared the information listed on the Disability Briefing Document with the information on the disability application and information contained in WorkDesk. To determine if the rationale was completely documented, we compared the information on the application and in WorkDesk to
see if it was completely discussed on the Disability Briefing Document. Conversely, we looked to see if the information documented on the Disability Briefing Document was supported by evidence in WorkDesk. Because we selected a nongeneralizable sample, we did not project an error rate to the universe, but concluded only on actual errors and observations noted during testing. Again, we did not make an assessment as to whether or not the initial disability decisions (to allow or deny) were correct, nor did we make an assessment as to the veracity of the submitted documentation.

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

We conducted our fieldwork at the RRB’s headquarters in Chicago, Illinois from November 2019 to August 2020, and from December 2020 through June 2021. Our audit was suspended from August 2020 through November 2020 to devote resources to our mandated audits.

Background

The RRB was created in the 1930s by legislation establishing a retirement program for the nation’s railroad workers. The RRB is an independent agency in the executive branch of the Federal Government. The RRB’s mission is to administer retirement/survivor and unemployment/sickness insurance benefit programs for railroad workers and their families under the Railroad Retirement Act (RRA) and the Railroad Unemployment Insurance Act (RUIA). These programs provide income protection during old age and in the event of disability, death, or temporary unemployment and sickness. The RRB’s mission statement says that it will pay benefits to the right people, in the right amounts, in a timely manner, and will take appropriate action to safeguard their customers’ trust funds.

The RRA provides for payment of disability benefits, based on age and service in the railroad industry, to those who are permanently disabled from work in their regular railroad occupation (known as occupational disability annuities), or who are totally disabled from any regular employment (known as total and permanent, or T&P disability annuities).

Under the RRB’s disability program, the RRB handles the full range of disability claims processing in support of T&P and occupational disabilities. A T&P disability annuity is based on permanent disability for all employment and is payable at any age to employees with at least 10 years of railroad service and under certain conditions to employees with 5 years of service after 1995. An occupational disability annuity is based on disability for the employee’s “regular railroad occupation,” which may or may not be the employee’s current occupation, and is payable at age 60 if the employee has 10 years of service, or at any age if the employee has at least 20 years of service. A “current connection with the railroad industry” is also required for an occupational disability annuity. The current connection requirement is normally met if the employee worked for a railroad in at least 12 of the last 30 consecutive months immediately preceding the annuity beginning date.
Annuities are also payable to spouses and divorced spouses of retired workers, widow(er)s, surviving divorced spouses, remarried widow(er)s, children, and parents of deceased railroad workers.

Within the RRB’s Office of Programs, the DBD is responsible for processing all disability claims. For fiscal year 2019, the RRB reported that they paid disability benefits totaling $1.02 billion, including $638 million in occupational disability benefits. The RRB reported that they processed approximately 1,986 initial occupational and T&P disability decisions. The approval rate for occupational disabilities remained close to 100 percent, at 96.9 percent during fiscal year 2019.

The OIG has previously identified deficiencies in the occupational disability program and has made numerous recommendations for improvement in program integrity. While the RRB has taken some actions to address our recommendations, additional improvements are needed. GAO also audited the RRB’s disability program and reported that “a nearly 100 percent approval rate in a federal disability program is troubling, and could indicate lax internal controls in RRB’s decision-making process, weakness in program design, or both.”

The RRB uses D-BRIEF to document disability examiners’ (examiners) rationales for disability decisions. DBD put D-BRIEF into production in September 2003. D-BRIEF is an interactive personal computer program and it contains all of the sequential evaluation questions that are required to make an initial disability annuity decision. It provides space for free form discussion of the medical evidence. Once an examiner completes the initial disability rationale in D-BRIEF, it is reviewed and approved by a post examiner. Once approved, the disability decision is finalized and a Form G-325B (Disability Briefing Document) is created as an output of D-BRIEF.

For occupational disability decisions, the Disability Briefing Document records job information and medical evidence that the examiner considered in determining if the claimant was “disabled from work in their ‘regular’ railroad occupation.” After the Disability Briefing Document is created, it is uploaded into WorkDesk, as support for the disability decision. WorkDesk acts as the electronic disability folder that should include all supporting documentation for disability claims. As soon as the Disability Briefing Document is approved by the authorizer, the decision is recorded in agency systems and RRB can begin to process the annuity that has been granted (allowed). Policy and Systems, within the Office of Programs, is responsible for developing and managing systems, including D-BRIEF, to support bureau operations.

1 After our audit field work was completed, Railroad Retirement Board (RRB) revised their total for occupational disability decisions by 2, from 1047 to 1045. Therefore, there is a difference of 2 between Table 1 and RRB’s reported total for occupational and Total and Permanent cases combined.
3 Form G-325B (The Disability Briefing Document) is an output of Disability Briefing Document Program (D-BRIEF) and it contains the initial disability decision and date of onset, if approved.
4 WorkDesk is used to access documents in the RRB’s imaging system.
As part of the D-BRIEF adjudication process, for occupational disability cases, RRB procedures instruct examiners to document conflicting medical evidence that is relevant to the decision for applications that require an ICE. The RRB uses tables to evaluate evidence provided for disability cases when the medical condition and the railroad job are listed. ICE is required in the following circumstances:

- if the medical condition or the railroad job title is not listed in the table;
- when the job and medical condition are met, but there is no matching disability test;
- when the disability rating has not been made because medical variations make it necessary to look at specific job information and/or specific medical information to make a determination; or
- situations in which the job titles and medical conditions may be covered, but the information is not consistent or cannot be simply clarified.

During fiscal year 2019, the RRB reported that they utilized ICE to adjudicate approximately 75 percent of the occupational disability cases.

In 2019, OIG contracted for a series of audits related to the RRB’s disability process. One of these contracted audits found that the RRB disability decision process lacks preventive controls to adequately address fraud risk indicators. The contractors made three recommendations to address this weakness, however, only one was related to our current audit objectives:

We recommend that the Office of Programs/Disability Benefits Division establish additional supervisory review and documentation protocols to ensure that decisions for higher risk applications are sufficiently reviewed and consistently documented to reflect the basis for the decision.5

Although this recommendation does not directly relate to the D-BRIEF process, it does highlight that our contracted auditors previously identified a need to implement documentation protocols and review procedures in the disability decision process to ensure that decisions for applications at a higher risk for fraud are consistently documented and sufficiently reviewed.

Due to the high dollar value of annual disability annuities, and previous findings by OIG, GAO, and our contracted auditors, it is imperative that the disability decision process is as complete, accurate, and transparent as possible.

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RESULTS OF AUDIT

Our audit determined that the D-BRIEF process was not fully effective to ensure that examiner rationales for their decisions were completely documented. In addition, doubt exists regarding whether information recorded on the Disability Briefing Document was consistent with supporting documentation in the electronic case file. Although we did not identify any exceptions directly related to consistency, examiners did not always adhere to agency procedure to acknowledge and document discussions of conflicting medical evidence and how they were resolved. Instead, examiners resolved these issues prior to entering responses in the Disability Briefing Document and indicated that there was no conflicting medical evidence. As a result, doubt exists regarding the completeness and consistency of responses used as a basis to make disability determinations. In addition, D-BRIEF was not being fully utilized for its intended purpose and there was a lack of transparency in RRB annuitant disability records that increased the risk for potential fraud in the disability determination process.

The details of our audit findings and recommendations for corrective action are provided in this report. The full text of management’s response is provided in Appendix I.

The D BRIEF Process Did Not Always Ensure that Disability Decision Rationales Were Completely Documented and Doubt Exists Regarding the Consistency and Transparency of Some Responses

The D-BRIEF Process Did Not Always Ensure That Disability Rationales Were Completely and Consistently Documented

We determined that the D-BRIEF process did not always ensure the completeness of documented examiner rationales that should have been factored into the disability determination process. We learned that instead of discussing conflicting medical evidence and its resolution, as required by agency procedure, most of the examiners resolved any conflicts prior to recording the response to this question in D-BRIEF and, therefore, they did not document the existence of conflicts or how they were resolved on the Disability Briefing Documents.

We identified a new issue related to the completeness of documentation for some disability decisions during our initial sample testing. Therefore, we performed additional tests for completeness.

During our walkthrough of the D-BRIEF process, an examiner told us that she normally makes her decision to grant or deny a disability prior to entering information into D-BRIEF. Based on our sample results that only 2 of 183 cases (1 percent) discussed conflicting medical evidence, combined with the information obtained during the walkthrough, we decided to poll the examiners who prepared all of our sample cases, to learn how they addressed the conflicting medical evidence question. We learned that 15 of the 19 disability examiners that responded to our survey resolve any conflicting medical evidence prior to entering their responses in D-BRIEF and, therefore, they indicate on the Disability Briefing Document, that there was no conflicting medical evidence. As a result, doubt exists regarding the consistency of some responses.
pertaining to conflicting medical evidence as compared to supporting documentation in the electronic case file.

During our sample testing of 2 separate samples totaling 183 initial occupational disability cases that used ICE, we found that only 2 of the Disability Briefing Documents discussed conflicting medical evidence. The combined sample results are shown in Appendix V. The total for 183 cases was from the sample results separately discussed in Appendices III and IV.

The 183 sample results discussed in this finding resulted from 2 separate samples of occupational disability cases. Our testing began with a nongeneralizable sample during which we tested 15 cases. We found 1 case where the conflicting medical evidence question remained “Unanswered” and 14 cases where the response was that there was no conflicting medical evidence. See Appendix III. Due to the results of that sample, we conducted a separate statistically valid random sample of 168 cases. We found 2 cases where conflicting medical evidence was discussed and 166 cases reflected that there was no conflicting medical evidence. See Appendix IV. See Appendix V for the combined sample results.

For initial occupational disability cases that used ICE, D-BRIEF inserts an automatic statement when the examiner indicates that there is no conflicting medical evidence and also when this question remains “Unanswered.” In both instances, the following statement is documented on the Disability Briefing Document: “There is no conflicting medical evidence in file that is relevant to the decision.” D-BRIEF does not require any additional entries regarding conflicts when the response is “No” or “Unanswered.”

The RRB’s policies and procedures for actions related to disability claims are documented in the online Disability Claims Manual (DCM). D-BRIEF procedures in the DCM explain that the conflicting medical evidence question has three possible answers: “Yes”, “No”, or “Unanswered.” The “Unanswered” response is the system default, until the examiner changes it. Figure 1 displays the question in the D-BRIEF: “Is there conflicting medical evidence in file that is relevant to the decision?”

![Figure 1. Three Possible Answers to Conflicting Medical Evidence Question](source: Screenshot of response to conflicting medical evidence question in D-BRIEF.)

When disability examiners documented the rationale for their decisions in D-BRIEF, the DCM required a description of the supporting documentation used and relied upon when a “Yes” response was chosen to the question: “Is there conflicting medical evidence in file that is relevant to the decision?” In the case of a “Yes” response, the statement: “There is conflicting medical evidence in file that is relevant to the decision.” appears on the Disability Briefing Document, along with a description of the conflicting medical evidence.
Although we learned that examiners make the decision to grant or deny the disability claim prior to entering responses, relevant medical evidence, and supporting documents in D-BRIEF, the DCM states that the examiner can access D-BRIEF at any point in the decision process. This means that the examiner is not required to make the decision prior to or during the process of using D-BRIEF.

Potential conflicting medical evidence relevant to the decision was not always documented on the Disability Briefing Documents because DCM policies and procedures did not require examiners to document conflicts relevant to the decision that had been resolved prior to entry into D-BRIEF.

Due to the “No” and “Unanswered” responses for conflicting medical evidence and D-BRIEF’s automatic insertion of text stating that there was no conflicting medical evidence in file relevant to the decision, the disability examiner’s rationale for their determination that the railroad employee was indeed disabled from their regular railroad occupation, was not fully transparent and was not always consistent with the supporting documentation in the electronic case file.

This lack of transparency in RRB annuitant disability records indicated that D-BRIEF was not being fully utilized for its intended purpose, which increased the risk for potential fraud in the initial disability decision making process, as claim examiners could have prepared cases containing conflicting medical evidence without acknowledging the conflict or documenting how the conflict was resolved. Also, an authorizer may not have recognized the existence of conflicting medical evidence if it was not recorded, and, therefore, was not afforded an opportunity to review and assess those decisions that were made by the examiner.

**Disability Decisions Were Not Always Fully Documented or Supported**

Our disability sample testing identified one exception related to completeness, because the recorded entry was not completely supported, as required by disability procedures. In 1 of 41 cases, the disability decision documented on the Disability Briefing Document, was not completely supported by evidence in the case file maintained in WorkDesk. See Appendix II.

We tested 41 initial disability decisions to determine if statements made on the Disability Briefing Document were supported by documentation in WorkDesk. For this one exception case, we found that although the Disability Briefing Document stated that the Railroad Job Information Report (Form G-251A) was returned from the railroad employer, and a comparison was done between it and the vocational report, we could not find the Form G-251A in WorkDesk. Therefore, we concluded that the decision documented on the Disability Briefing Document was not completely supported.

DCM Part 3.3 outlines the evidence requirements for initial disability annuities. One such requirement is related to the “Job Information” for occupational disability decisions. It states that job information is always required from the employee and will be requested from the railroad employer.
Because most examiners make their disability determinations prior to the entry of information into D-BRIEF, the examiner might have mentioned the Form G-251A on the Disability Briefing Document although it had not been loaded into WorkDesk.

As a result, rationales for disability decisions were not always completely documented or fully supported by evidence in the electronic claim file in WorkDesk.

**The D BRIEF Process Did Not Always Ensure that Information Recorded on the Disability Briefing Document was Consistent With Supporting Documentation**

**Some Disability Briefing Documents Incorrectly Stated That Cases Were Rated Using ICE**

Some T&P disability cases contained entries in the Disability Briefing Document that gave the appearance of being occupational disability cases. As we were in the process of identifying the universe of cases, we identified 16 cases that appeared to be occupational disability cases, but we were informed by DBD that they were T&P cases. These cases were mistaken for occupational disability cases because they contained an inaccurate statement on the Disability Briefing Document that read: “The employee was rated using the Independent Case Evaluation.” The statement is incorrect because it is only applicable to occupational disability cases and not to T&P disability cases. DBD explained that these cases were changed from occupational disability to T&P disability decisions.

The DCM outlines the evidence requirements for initial disability annuities. One such requirement is related to the medical evidence for occupational disability decisions. According to the DCM:

- disability (medical evidence) is always required for an employee disability annuity.

The DCM also outlines that ICE is a three step process used by claims examiners to rate occupational disability decisions where:

- medical information is reviewed to establish diagnosis and to establish an understanding of the condition by the claims examiner;
- job information is evaluated to determine the job demands; and
- medical information regarding relevant impairment is compared to the job demands.

According to DBD, these 16 cases where changed to T&P decisions (from occupational disability decisions) after the examiner changed the disability onset date to an earlier date. D-BRIEF does not allow the examiner to go back and edit the sequential evaluation answers previously given in D-BRIEF. So once the cases are changed from occupational to T&P, examiners could not go back to change the ICE indicator in D BRIEF. Therefore, the Disability Briefing Document contained an incorrect statement and the type of disability decision was not transparent to readers.
As a result, users of D-BRIEF and those that reviewed the Disability Briefing Document may have wrongly concluded that the cases were occupational disability decisions, when in fact, they were T&P disability decisions.

**Recommendations**

We recommend that the Office of Programs

1. update policies and procedures in the Disability Claims Manual to require that all medical evidence considered in the determination of conflicting medical evidence is entered into D-BRIEF, (including potential conflicting medical evidence and how the conflict was resolved) and as a result, discussed on the Disability Briefing Document;

2. update policies and procedures to ensure that all relevant medical evidence and supporting documentation pertaining to the applicant’s claim for disability is documented in D-BRIEF and WorkDesk, prior to the finalization of the initial disability decision; and

3. ensure that the Disability Benefits Division works with Policy and Systems to implement system modifications to D-BRIEF to ensure that the Disability Briefing Documents for decisions changed from occupational to total and permanent disabilities do not contain the incorrect statement that the (railroad) employee (applicant) was rated using Independent Case Evaluation.

**Management’s Comments and Our Response**

The Office of Programs concurred with recommendations 1 and 2. See the full text of management’s response in Appendix I.

For recommendation 3, the Office of Programs nonconcurred and stated,

The Office of Programs does not concur. The scenario described is based on an eligible employee attaining age 60, a critical age for occupational annuities. Based on the age, the final annuity determination is that the annuitant is occupationally disabled; however, in some cases an earlier onset allows for a total annuity before attaining age 60. There is a very small percentage of cases that meet this criteria. The recommended changes to D-Brief require significant updates and programming. In light of the IT Modernization, the Office of Programs is limited in making substantial systems changes. However, to improve the accuracy of statements within D-Brief and the final determination rationale, DCM 12.5.1 will be revised to instruct disability examiners to complete a template of the G-325B, Disability Briefing Document, explaining their decision, including the annuity type being rendered. The G-325B will be imaged. The template will be used until D-Brief is revised or replaced with a new documentation tool.

Although management did not concur with recommendation 3 because they stated that they are limited in making substantial systems changes due to information technology modernization, they stated that they plan to revise their procedures to improve the accuracy of statements within D-BRIEF. We continue to see the need for recommendation 3, and will evaluate whether procedural changes meet the intent of recommendation 3 if and when the procedural revisions as described are implemented.
APPENDIX I: MANAGEMENT COMMENTS

MEMORANDUM

August 6, 2021

TO: Debra Stringfellow-Wheat
Assistant Inspector General for Audit

FROM: Janet M. Hallman
Acting Director of Programs

SUBJECT: Audit of Disability Briefing Document Program (D-BRIEF)

This is in response to your memorandum of July 27, 2021 requesting comments on the Audit of Disability Briefing Document Program (D-Brief) draft report.

The Office of Programs’ comments to the Office of Inspector General’s (OIG) Recommendations #1-3 in the subject report are below.

**OIG FINDING 1:** The D-BRIEF process did not always ensure that Disability rationales were completely and consistently documented.

**Recommendation 1:**
We recommend that the Office of Programs update policies and procedures in the Disability Claims Manual to require that all medical evidence considered in the determination of conflicting medical evidence is entered into D-BRIEF, (including potential conflicting medical evidence and how the conflict was resolved) and as a result, discussed on the Disability Briefing Document.

**Response:**
The Office of Programs concurs. The Disability Claims Manual (DCM) 12.5.5.1 requires conflicting medical evidence be documented. Procedure will be updated to clarify narrative requirements of the free formatted Summary of Medical Findings section. Specifically, examiners will be instructed to discuss all conflicting medical evidence (including what is resolved prior to adjudication) by identifying what evidence is conflicting and how it was resolved before final determination. Procedure updates are expected to be completed by December 31, 2021.

**OIG FINDING 2:** Disability decisions were not always fully documented or supported.

**Recommendation 2:**
We recommend that the Office of Programs update policies and procedures to ensure that all relevant medical evidence and supporting documentation pertaining to the applicant’s claim for disability is documented in D-BRIEF and WorkDesk, prior to the finalization of the initial disability decision.
Response:
The Office of Programs concurs. DCM 3.4.301 provides guidelines for preparing and authorizing disability decisions. These guidelines include reviewing forms; however, the Disability Benefits Division (DBD) will work with Policy and Systems to update DCM 3.4.301 to specify that review of forms includes assuring that all cited forms in D-Brief are imaged on WorkDesk prior to final authorization. Procedure updates are expected to be completed by December 31, 2021.

**OIG FINDING 3:** Some Disability briefing documents incorrectly stated that cases were rated using ICE.

**Recommendation 3:**
We recommend that the Office of Programs ensure that the Disability Benefits Division works with Policy and Systems to implement system modifications to D-BRIEF to ensure that the Disability Briefing Documents for decisions changed from occupational to total and permanent disabilities do not contain the incorrect statement that the (railroad) employee (applicant) was rated using Independent Case Evaluation.

Response:
The Office of Programs does not concur. The scenario described is based on an eligible employee attaining age 60, a critical age for occupational annuities. Based on the age, the final annuity determination is that the annuitant is occupationally disabled; however, in some cases an earlier onset allows for a total annuity before attaining age 60. There is a very small percentage of cases that meet this criteria. The recommended changes to D-Brief require significant updates and programming. In light of the IT Modernization, the Office of Programs is limited in making substantial systems changes. However, to improve the accuracy of statements within D-Brief and the final determination rationale, DCM 12.5.1 will be revised to instruct disability examiners to complete a template of the G-325B, Disability Briefing Document, explaining their decision, including the annuity type being rendered. The G-325B will be imaged. The template will be used until D-Brief is revised or replaced with a new documentation tool. Procedure updates are expected to be completed by December 31, 2021.
APPENDIX II: NONGENERALIZABLE SAMPLE METHODOLOGY AND RESULTS
INITIAL DISABILITY RATIONALES IN THE D-BRIEF PROGRAM
OCTOBER 1, 2018 THROUGH SEPTEMBER 30, 2019

This appendix presents the methodology and results for the sample testing conducted of the initial disability rationales in D-BRIEF.

Sample Objective

Our sample objective was to test for various consistency and completeness test attributes to determine if the D-BRIEF process for initial disability decisions was completely and accurately documented. We considered an attribute accurate if the information on the D-BRIEF was consistent with the information recorded in the electronic clam file in WorkDesk. We did not make an assessment as to whether or not the initial disability decisions (to allow or deny) were correct, nor did we make an assessment as to the veracity of the submitted documentation.

Scope

Our sample was selected from the initial disability decisions for the period of October 1, 2018 through September 30, 2019.

Universe/Sampling Unit

The sampling universe consisted of 2,366 initial disability decisions for the period October 1, 2018 through September 30, 2019. The sampling unit was one initial disability (claim) decision.

Sample Selection Methodology

We used nongeneralizable sampling to test for specific controls (attributes) to determine if the D-BRIEF process was fully effective to ensure that (1) examiner rationales for their decisions were completely documented and (2) information recorded on the Disability Briefing Document was consistent with supporting documentation in the electronic case file. We used a stratified sample to ensure that a representative sample of each type of initial disability decision was selected which directed a sample of 45. However, due to rounding, we judgmentally selected a sample of 46.

Initial disability decision types are categorized by Occupational (O), Total and Permanent (T&P), Widow (W), and Child (C).
Table 2. Universe and Sample for Appendix II

<table>
<thead>
<tr>
<th>Initial Disability Decision Category</th>
<th>Initial Disability Decisions in Universe</th>
<th>Sample Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>Occupational (O)</td>
<td>1,047</td>
<td>20</td>
</tr>
<tr>
<td>Total and Permanent (T&amp;P)</td>
<td>941</td>
<td>18</td>
</tr>
<tr>
<td>Widow (W)</td>
<td>137</td>
<td>3</td>
</tr>
<tr>
<td>Child (C)</td>
<td>241</td>
<td>5</td>
</tr>
<tr>
<td>Total fiscal year 2019 Initial Disability Decisions</td>
<td>2,366</td>
<td>46</td>
</tr>
</tbody>
</table>

Source: RRB OIG generated sample size.

Sample Evaluation Methodology

For each transaction, we obtained and reviewed evidence from various agency mainframe systems including WorkDesk and D-BRIEF, in order to accomplish our sampling objectives.

Results of Review

Our reviews resulted in the following errors (exceptions), as identified by attribute.

Table 3. Sample Test Results for Appendix II

<table>
<thead>
<tr>
<th>Attribute Tests</th>
<th>Attributes Applicable to Decision Categories</th>
<th>Number of Records Tested</th>
<th>Exceptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prepopulated fields from APPLE were properly documented. (consistency)b</td>
<td>O, T&amp;P, W</td>
<td>41</td>
<td>0</td>
</tr>
<tr>
<td>Other eligibility information on the Disability Briefing Document was properly documented. (consistency)c</td>
<td>O, T&amp;P, W</td>
<td>41</td>
<td>0</td>
</tr>
<tr>
<td>If the railroad employer returned Form G-251A, the occupation and work shown agrees with the applicant claimed job information on the application. (Form AA - 1A) (consistency)</td>
<td>O</td>
<td>12d</td>
<td>0e</td>
</tr>
<tr>
<td>Statement regarding medical or job information referred to on the Disability Briefing Document was supported in WorkDesk. (completeness)</td>
<td>O, T&amp;P, W</td>
<td>41</td>
<td>1</td>
</tr>
<tr>
<td>Conflicting medical evidence discussed on Disability Briefing Document was supported in WorkDesk. (completeness)</td>
<td>O, T&amp;P, W</td>
<td>0f</td>
<td>0</td>
</tr>
<tr>
<td>Response entered by the examiner states that there is no conflicting medical evidence relevant to the decision in WorkDesk. (consistency)</td>
<td>O</td>
<td>14</td>
<td>0</td>
</tr>
</tbody>
</table>

See appendix III for further observations.
### Attribute Tests

<table>
<thead>
<tr>
<th>Attribute Tests</th>
<th>Attributes Applicable to Decision Categories</th>
<th>Number of Records Tested (^a)</th>
<th>Exceptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eligibility requirements were met for widow applicants. (consistency)</td>
<td>W</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Disability was granted for widow, based on skills or age, (i.e. vocational rule) and there is supporting documentation. (consistency)</td>
<td>W</td>
<td>3</td>
<td>0</td>
</tr>
</tbody>
</table>

**Total Number of Exceptions** 1

\(^a\) Note: The total sample size was 46, however, the 5 child cases selected were not tested as they were not processed in D-BRIEF. Sample cases for occupational, T&P, and widow cases totaling 41 were tested.

\(^b\) Note: The prepopulated fields are applicant name, applicant social security number, and date of birth.

\(^c\) Note: For this attribute test, auditors were looking for any eligibility information that they noted on the Disability Briefing Document that were inaccurate based on supporting documentation in WorkDesk.

\(^d\) Note: We found evidence in WorkDesk that the railroad employer returned 12 of 20 Forms G-251A for the occupational disability decisions. Therefore, we tested those 12 for this attribute related to consistency and we found no exceptions for consistency. The remaining eight cases could not be tested for consistency, because the Forms G-251A were not returned or were not evidenced in WorkDesk.

\(^e\) Note: Although we found no consistency errors or discrepancies related to the job information, we found one exception related to completeness because the examiner said a Form G-251A was returned and compared, but we found no Form G-251A supporting the statement in WorkDesk. This exception is shown in the evidence test above as a completeness error rather than a consistency error because the auditor could not locate the Form G-251A in WorkDesk, to support the statement in G-251A.

\(^f\) Note: Conflicting medical evidence was not discussed on any of the Disability Briefing Documents, therefore, we did not test for this attribute for completeness.

**Source**: OIG auditor generated sample results.

### Auditor’s Conclusion

Our evaluation of the nongeneralizable sample of 41 initial disability decision rationales identified 1 actual completeness exception. As a result, disability decisions as evidenced on the Disability Briefing Document were not always completely documented or fully supported by evidence in the electronic claim file in WorkDesk.
APPENDIX III: OBSERVATION METHODOLOGY AND RESULTS - SAMPLE REVIEW OF INITIAL OCCUPATIONAL DISABILITY CASES THAT WERE RATED USING INDEPENDENT CASE EVALUATION (ICE) IN D-BRIEF OCTOBER 1, 2018 THROUGH SEPTEMBER 30, 2019

This appendix presents the methodology and results for the observation of initial occupational disability cases that were rated using Independent Case Evaluation (ICE) to determine if the question "Is there conflicting medical evidence in file that is relevant to the decision?" was answered “Yes” in the D-BRIEF program.

Observation Objective

Our testing objective was to determine the number of ICE that were marked “Yes” for containing conflicting medical evidence that is relevant to the decision.

Scope

This sample of 20 was a subset of our original sample 46 initial disability decisions for the period of October 1, 2018 through September 30, 2019. See Table 2 on Appendix II.

Observation Methodology

During our sample testing we observed that conflicting medical evidence was never discussed on the Disability Briefing Document. We subsequently realized that according to Disability Claims Manual 2.5.6.2 for occupational disability ICE, conflicting medical evidence has to be resolved in D-BRIEF only if the question "Is there conflicting medical evidence in file that is relevant to the decision?" on the employee qualifications screen was answered “Yes.” As a result, we expanded our testing to identify if the question "Is there conflicting medical evidence in file that is relevant to the decision?" for ICE cases was ever answered “Yes” in the D-BRIEF program. Of the 20 occupational disability sample cases, 15 of the Disability Briefing Documents stated they were rated using ICE. We tested 100 percent of the 15 ICE cases to determine if the question "Is there conflicting medical evidence in file that is relevant to the decision?" for ICE cases was ever answered “Yes” in the D-BRIEF program.

Observation Evaluation Methodology

For each transaction, we obtained and reviewed evidence from various agency mainframe systems including WorkDesk and D-BRIEF in order to accomplish our sampling objectives.

Results of Review

Our reviews resulted in the following responses.
Table 4. Sample Results for Appendix III

<table>
<thead>
<tr>
<th>Attribute Test</th>
<th>Number of ICE Records Tested</th>
<th>Conflicting Medical Evidence Question with “Yes” Responses</th>
<th>Conflicting Medical Evidence Question with “No” Responses</th>
<th>Conflicting Medical Evidence Questions with “Unanswered” Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conflicting medical evidence button in D-BRIEF.</td>
<td>158</td>
<td>0</td>
<td>14</td>
<td>1</td>
</tr>
</tbody>
</table>

Note: For the 20 occupational cases mentioned in Appendix II, only 15 were rated using Independent Case Evaluation. Source: RRB OIG initial sample results.

Auditor’s Conclusion

Our evaluation of 20 initial occupational disability decisions identified 15 cases that were rated using ICE, of which 0 were marked “Yes” as containing conflicting medical evidence that is relevant to the decision, 14 were marked “No”, and 1 was “Unanswered.” Because the question was either marked “No” or remained “Unanswered” in all 15 cases, the statement, “There is no conflicting medical evidence in file that is relevant to the decision” was documented on all of the 15 Disability Briefing Documents reviewed.

Therefore, we concluded that the D-BRIEF process did not always ensure that disability decisions were completely documented or fully transparent, and doubt exists regarding the consistency of some responses.
APPENDIX IV: STATISTICAL SAMPLE METHODOLOGY AND RESULTS - REVIEW OF INITIAL OCCUPATIONAL DISABILITY CASES THAT WERE RATED USING INDEPENDENT CASE EVALUATION (ICE) IN D-BRIEF
OCTOBER 1, 2018 THROUGH SEPTEMBER 30, 2019

This appendix presents the methodology and results for the additional testing performed of initial occupational disability cases that were rated using Independent Case Evaluation (ICE) to determine if the question "Is there conflicting medical evidence in file that is relevant to the decision?" was answered “Yes,” “No,” or “Unanswered” in the D-Brief.

Sample Objective

Our testing objective was to determine the number of ICE cases that were marked “Yes,” “No,” or “Unanswered” for containing conflicting medical evidence that is relevant to the decision.

Scope

Our sample was selected from a total of 782 initial occupational disability cases that were rated using ICE during the period of October 1, 2018 through September 30, 2019.

Sample Methodology

According to Disability Claims Manual 12.5.6.2 for occupational disability ICE, conflicting medical evidence has to be resolved in D-Brief only if the question "Is there conflicting medical evidence in file that is relevant to the decision?" on the employee qualifications screen was answered “Yes.” As a result, we expanded our testing as provided in Appendix III to identify if the question "Is there conflicting medical evidence in file that is relevant to the decision?" for ICE cases was answered “Yes” in the D-Brief program. We tested an additional 168 ICE cases out of the 782 initial occupational disability ICE decisions made in fiscal year 2019 to determine if the question "Is there conflicting medical evidence in file that is relevant to the decision?" for ICE cases was answered “Yes,” “No,” or “Unanswered” in the D-Brief program.

Sample Evaluation Methodology

For each transaction, we obtained and reviewed evidence from various agency mainframe systems including WorkDesk and D-Brief in order to accomplish our sampling objective.

Results of Review

Our reviews resulted in the following responses.
Table 5. Sample Results for Appendix IV

<table>
<thead>
<tr>
<th>Attribute Test</th>
<th>Number of ICE Records Tested</th>
<th>Conflicting Medical Evidence Question with “Yes” Responses</th>
<th>Conflicting Medical Evidence Question with “No” Responses</th>
<th>Conflicting Medical Evidence Questions with “Unanswered” Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conflicting medical evidence button in D-BRIEF.</td>
<td>168</td>
<td>2</td>
<td>166</td>
<td>0</td>
</tr>
</tbody>
</table>

Source: RRB OIG additional sample results.

Auditor’s Conclusion

The result of our additional tests of 168 cases that used ICE showed that 2 were answered “Yes” as containing conflicting medical evidence that is relevant to the decision, 166 were answered “No,” and 0 were “Unanswered.” These testing results of 2 out of 168 samples containing and discussing conflicting medical evidence that is relevant to the decision, raises concerns that the examiners’ rationales for their initial disability decisions are not always fully transparent or consistent. Because the 166 cases with a response of “No” to the question "Is there conflicting medical evidence in file that is relevant to the decision?" did not explain what medical evidence was considered to make the determination, unlike the 2 with “Yes” responses.

As noted in the body of this report, potential conflicting medical evidence relevant to the decision was not always documented on the Disability Briefing Documents because policies and procedures did not require examiners to document conflicts relevant to the decision that had been resolved prior to entry into D-BRIEF. Therefore, we concluded that the D-BRIEF process did not always ensure that disability decisions were completely documented or fully transparent, and doubt exists regarding the consistency of some responses.
APPENDIX V: METHODOLOGY AND RESULTS - SUMMARY OF TABLES 4 AND 5 FOR INITIAL OCCUPATIONAL DISABILITY CASES THAT WERE RATED USING INDEPENDENT CASE EVALUATION (ICE) IN D-BRIEF
OCTOBER 1, 2018 THROUGH SEPTEMBER 30, 2019

This appendix presents the methodology and results for all testing performed of initial occupational disability cases that were rated using Independent Case Evaluation (ICE) to determine if the question "Is there conflicting medical evidence in file that is relevant to the decision?" was answered “Yes,” “No,” or “Unanswered” in the D-BRIEF.

Sample Objective

Our testing objective was to summarize tables 4 and 5 for the total number of ICE cases that were marked “Yes,” “No,” or “Unanswered” for containing conflicting medical evidence that is relevant to the decision.

Scope

Our sample was selected from a total of 782 initial occupational disability cases that were rated using ICE during the period of October 1, 2018 through September 30, 2019.

Sample Methodology

Per the Disability Claims Manual 12.5.6.2 for occupational disability ICE cases, conflicting medical evidence has to be resolved in D-BRIEF only if the question "Is there conflicting medical evidence in file that is relevant to the decision?" on the employee qualifications screen was answered “Yes.” From the original sample of 20 occupational disability cases, we found that 15 of them were rated using ICE. We tested all 15 cases to determine if the question "Is there conflicting medical evidence in file that is relevant to the decision?" for ICE cases was answered “Yes” in the D-BRIEF program (as provided in Appendix III). As a result, we expanded our testing to identify if the question "Is there conflicting medical evidence in file that is relevant to the decision?" for ICE cases was answered “Yes” in the D-BRIEF program. In addition to the 15 cases tested in appendix III, we tested an additional 168 ICE cases out of the 782 initial occupational disability cases that were rated using ICE made in fiscal year 2019 to determine if the question "Is there conflicting medical evidence in file that is relevant to the decision?" for ICE cases was answered “Yes,” “No,” or “Unanswered” in the D-BRIEF program (as provided in Appendix IV.

Sample Evaluation Methodology

For each transaction, we obtained and reviewed evidence from various agency mainframe systems including WorkDesk and D-BRIEF in order to accomplish our sampling objectives.
Results of Review

Our reviews resulted in the following responses.

Table 6. Sample Results for Appendix V

The following table shows the results of our initial testing of ICE cases, the results of our additional testing, and the totals combined:

<table>
<thead>
<tr>
<th>Attribute Test</th>
<th>Number of ICE Records Tested</th>
<th>Conflicting Medical Evidence Question with “Yes” Responses</th>
<th>Conflicting Medical Evidence Question with “No” Responses</th>
<th>Conflicting Medical Evidence Questions with “Unanswered” Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial Testing Results: Conflicting medical evidence button in D-BRIEF</td>
<td>15</td>
<td>0</td>
<td>14</td>
<td>1</td>
</tr>
<tr>
<td>Additional Testing Results: Conflicting medical evidence button in D-BRIEF</td>
<td>168</td>
<td>2</td>
<td>166</td>
<td>0</td>
</tr>
<tr>
<td>Total Testing Results: Conflicting medical evidence button in D-BRIEF</td>
<td>183</td>
<td>2</td>
<td>180</td>
<td>1</td>
</tr>
</tbody>
</table>

Source: RRB OIG summary of table 4 and table 5.

Auditor’s Conclusion

The results of our testing of 183 Independent Case Evaluations showed that 2 were answered “Yes” as containing conflicting medical evidence that is relevant to the decision, 180 were answered “No,” and 1 was “Unanswered.” The total results of 183 cases shown in Table 6 combined the sample results discussed in Appendices III and IV.

Therefore, for the combined samples of 183 total initial occupational disability cases that used ICE, only 2 of the 183 questions related to conflicting medical evidence were answered “Yes,” and were then discussed on the disability briefing documents. For the remaining 181 cases tested, the statement “There is no conflicting medical evidence in file that is relevant to the decision” was documented, with no further discussion of potential conflicting medical evidence documented on the Disability Briefing Documents.

As noted in the body of this report, potential conflicting medical evidence relevant to the decision was not always documented on the Disability Briefing Documents because policies and procedures did not require examiners to document conflicts relevant to the decision that had been resolved prior to entry into D-BRIEF.

As result, we concluded that the D-BRIEF process did not always ensure that disability decision rationales were completely documented or fully transparent, and doubt exists regarding the consistency of some responses.