

# Performance Management Plan for Non-Managers and Non-Supervisors



### A. General Information

1. Employee Name (last, first, middle)		2. Organization OWCP/DEEOIC	
3. Title, Series, Grade CLAIMS EXAMINER, GS-0991-		4. Appraisal Cycle (mm/dd/yyyy) 10/01/2021 to 09/30/2022	5. Appraisal Period (mm/dd/yyyy) to
6. Supervisory Status Code 8 – All Other Positions			

### B. Performance Elements and Standards Certification

1. I certify that this performance plan contains accurate performance elements and standards that:	<input checked="" type="checkbox"/>	Link at least one critical results element to the Agency's operating plan.
	<input checked="" type="checkbox"/>	Hold the employee accountable for measurable and/or observable results.
	<input checked="" type="checkbox"/>	Link to the employee's position description and reflect the duties and responsibilities assigned to the employee.
2. Rating Official Signature		Date (mm/dd/yyyy)
3. Rating Official Name (last, first, middle)		4. Rating Official Title Supervisory Claims Examiner
5. Prototype elements and/or standards <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

### C. Position Description Certification

1. Position description is correct? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if No, explain below.)	2. Rating Official Signature	Date (mm/dd/yyyy)
	3. Rating Official Name (last, first, middle)	
	4. Rating Official Title Supervisory Claims Examiner	

### D. Establishment of the Performance Management Plan

1a. I discussed this plan with employee. <input type="checkbox"/> Yes <input type="checkbox"/> No	1b. Employee written comments are attached. <input type="checkbox"/> Yes <input type="checkbox"/> No	2. Employee Signature	Date (mm/dd/yyyy)
3. Rating Official Signature		Date (mm/dd/yyyy)	6. Reviewing Official Signature
4. Rating Official Name (last, first, middle)		7. Reviewing Official Name (last, first, middle)	
5. Rating Official Title Supervisory Claims Examiner		8. Reviewing Official Title	

### E. Mid-Term Progress Review Certification

1. The mid-term progress review has been conducted. <input type="checkbox"/> Yes <input type="checkbox"/> No (if No, explain below.)	3. Rating Official Signature	Date (mm/dd/yyyy)
	4. Rating Official Name (last, first, middle)	
2. Employee Signature	Date (mm/dd/yyyy)	5. Rating Official Title Supervisory Claims Examiner

### F. Performance Appraisal and Rating

1. Indicate performance appraisal and rating below.		2a. I discussed this appraisal with the employee. <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Outstanding	Falls within Summary Rating Points (475-500)	2b. Employee provided timely written comments. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<input type="checkbox"/> Exceeds Fully Successful	Falls within Summary Rating Points (400-474)	
<input type="checkbox"/> Fully Successful	Falls within Summary Rating Points (300-399)	
<input type="checkbox"/> Minimally Successful	Minimally Successful on one or more elements	
<input type="checkbox"/> Unacceptable	Unacceptable on one or more elements	
3. Purpose of Appraisal: <input type="checkbox"/> Interim Rating <input type="checkbox"/> Rating of Record		7. Employee Signature
4. Rating Official Signature		Date (mm/dd/yyyy)
5. Rating Official Name (last, first, middle)		8. Reviewing Official Signature
6. Rating Official Title Supervisory Claims Examiner		Date (mm/dd/yyyy)
		9. Reviewing Official Name (last, first, middle)
		10. Reviewing Official Title



### G. Performance Summary

The rating official must appraise the employee's performance relative to the critical results elements performed. In assigning a rating to each critical results elements, please rate the employee at one of the following five levels and include a written narrative as appropriate:

Elements Rating Level	Rating Points	Description
Outstanding	5	This is a level of rare, high-quality performance. The employee's work under this element <b>substantially exceeds</b> the "Exceeds Fully Successful" standard. <i>(Narrative Required)</i>
Exceeds Fully Successful	4	This is a level of unusually good performance. The employee's work under this element is <b>consistently above average</b> . <i>(Narrative Required)</i>
Fully Successful	3	This is a level of good, sound performance. The employee's work under this element is of a <b>fully competent</b> employee. <i>(Narrative Not Required)</i>
Minimally Successful	2	This is a level of performance below expectations. The employee's work under this element <b>needs improvement</b> in one or more elements. <i>(Narrative Required)</i>
Unacceptable	1	The level of performance is <b>not adequate</b> for the position. <i>(Narrative Required)</i>
Not Rated (NR)	NR	The level of performance is <b>not rated</b> .

  

Critical Element	Critical Element Weight %	Rating Points					NR	Total Element Points
		5	4	3	2	1		
Result #1 TIMELINESS OF DEVELOPMENT AND ADJUDICATION	25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Result #2 QUALITY DEVELOPMENT AND ADJUDICATION	25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Result #3 DATA INTEGRITY	25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Result #4 CASE MANAGEMENT	15	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Result #5 AUDITS	10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Result #6		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Result #7		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Result #8		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Element Pts ->	100	Summary Rating Points						0

### H. Consideration Given to Other Ratings in Rating of Record

1. Any written performance information (including interim ratings and performance information on details or temporary reassignments/promotions) since the last annual rating of record will be taken into account in this rating of record. If these interim performance ratings or information impact the overall rating of record, explain fully in the space below.

### I. Other Significant Accomplishments

### J. Organizational Performance Elements

Critical results-specific elements must include, but are not limited to, as many results elements as are necessary to reflect the employee's specific responsibilities in the implementation of their agency's operating plan / strategic goals. All elements and standards should describe the major results to be achieved during the period of performance covered by the performance plan. Each performance standard must be written at the **Fully Successful** level and include measures of performance such as quality, quantity, timeliness, and cost-effectiveness. Standards should be concise and not include detailed milestones or descriptions of the process and methods used to achieve the results.

Result #1 Title	TIMELINESS OF DEVELOPMENT AND ADJUDICATION	Weight Value	25%
Result #1	<input type="checkbox"/> Outstanding <input type="checkbox"/> Exceeds Fully Successful <input type="checkbox"/> Fully Successful <input type="checkbox"/> Minimally Successful <input type="checkbox"/> Unacceptable <input type="checkbox"/> Not Rated		
The Claims Examiner (CE) develops and adjudicates assigned Part B and Part E cases in support of the FY2022 OWCP Operating Plan.			
<b>Performance Standard</b>			
With consideration of the volume and complexity of the cases, performance is Fully Successful when the CE:			
1. Responds to telephone inquiries within one (1) workday, 93% - 94% of the time 2. Responds to telephone inquiries within two (2) workdays, 95% - 96% of the time. 3. Completes initial processing of Part B and Part E claims, including cases returned from NIOSH, within 145 calendar days from the claim receive date, 90% - 92% of the time. 4. Completes initial processing of Part B and Part E claims, including cases returned from NIOSH, within 275 calendar days from the claim receive date, 94% - 95% of the time. 5. Completes initial processing on all components (medical conditions/employment/survivor) of remands and cases reopened by a Director's Order within 125 calendar days of the date of the remand order or Director's Order, 90% - 92% of the time. 6. Completes initial processing on impairment and wage loss claims within 185 days of receipt, 90% - 92% of the time. 7. Completes initial processing action on consequential conditions and new primary conditions (Med after FD) within 145 calendar days from the claim receipt date, 85% - 87% of the time. 8. Completes initial processing action on consequential conditions and new primary conditions (Med after FD) within 200 calendar days from the claim receipt date, 90% - 92% of the time. 9. When available, answers 25% of incoming Transfer calls from Resource Center personnel.			
<b>Narrative</b>			

Result #2 Title	QUALITY DEVELOPMENT AND ADJUDICATION	Weight Value	25%
Result #2	<input type="checkbox"/> Outstanding <input type="checkbox"/> Exceeds Fully Successful <input type="checkbox"/> Fully Successful <input type="checkbox"/> Minimally Successful <input type="checkbox"/> Unacceptable <input type="checkbox"/> Not Rated		
The CE completes quality development and adjudication of all assigned Part B and Part E cases. The CE implements an efficient case management strategy to provide prompt and accurate claims adjudication.			
<b>Performance Standard</b>			
Performance is Fully Successful when the CE achieves 90% - 92%.			
Did the CE successfully complete the below tasks?			
1. Correspondence and Recommended Decisions (RDs) are clearly written and free of grammatical errors (i.e., typographical, spelling, etc.). 2. Correspondence and RDs are free of substantive errors (i.e., correct medical, correct employment, correct dates, etc.). 3. Reported toxic substance exposures are sufficiently described in the SOAF (i.e., those based on SEM or a well rationalized medical opinion), including any conclusions regarding the extent or duration of exposure. 4. Toxic substances are accurately identified, and an accurate and thorough package is submitted to the IH for review. 5. Employment is properly developed by utilizing program tools and resources as identified in the Procedure Manual. 6. The NRSD/ANSRD is correct. 7. Offset is developed correctly. 8. Survivorship is developed correctly. 9. The claim is properly developed for RECA. 10. Treating physician's opinion is utilized and clarification requested of the treating physician's opinion, CMC report, or DEEOIC specialist's opinion if the opinion is not accurate, complete, or sufficiently rationalized. 11. All accepted conditions are included in the referral for the impairment evaluation. 12. An acceptable impairment report is approved based on applicable policy and procedures and appropriate action taken to resolve outstanding impairment issues when appropriate. 13. The Notice of Recommended Decision portion of the RD and the conclusion of the Recommended Decision accurately includes a proper distinction between Part B/E. 14. The Statement of the Case (SOC) accurately describes the relevant background evidence in accordance with current policy and procedure.			



- 15. The Explanation of Findings (EOF) contains sufficient written narrative to clearly explain the CE's analysis of the case evidence in accordance with current policy and procedure.
- 16. The Conclusion of Law (COL) section communicates a clear finding of recommended acceptance or denial derived from the analysis narrated in the EOF, in accordance with current policy and procedure.
- 17. Medical health science assessments (i.e., CMC/IH/TOX analyses) are included with recommended denials.

Narrative

**Result #3 Title** DATA INTEGRITY **Weight Value** 25%

**Result #3**  Outstanding  Exceeds Fully Successful  Fully Successful  Minimally Successful  Unacceptable  Not Rated

The CE ensures data is correctly and timely entered into electronic information management systems to safeguard claim and fiscal integrity.

**Performance Standard**

Performance is Fully Successful when the CE achieves 90% - 92%.

Did the CE successfully complete the below tasks?

1. Index incoming documents with the appropriate category and subject combination in OIS.
2. Index outgoing documents with the appropriate category and subject combination in OIS on the same day issued.
3. Enter the Author Date of the outgoing document in ECS.
4. Correctly associate documents in OIS with the proper case.
5. Enter declarations for benefits (i.e., words of claim, EE-1, EE-2, EE-3, EE-10, EN-11a, and EN-11b) in ECS or refer if needed to the case create PoC on the same day review completed in OIS.
6. Accurately enter RD coding in ECS consistent with the Conclusions of Law, including all accepted, denied and deferred conditions.
7. Ensure employee and claimant information, including census information, on the claimant information screen in ECS is accurate.
8. Update the medical development tab in ECS to include the appropriate medical condition, ICD code, diagnosis date, eligibility dates, or CMC/Non-CMC referrals.
9. Update the employment development tab in ECS to include the facility identification, dates of employment, and employment classification.
10. Update the survivorship development tab in ECS.
11. Code all causation paths in ECS (including the NIOSH paths) correctly.
12. Enter the correct information in ECS in the wage loss and impairment tabs, including claim dates.
13. Enter the appropriate coding in the Correspondence tab to include the date the requested evidence was received.
14. Initiate changes/corrections of addresses, phone numbers, and authorized representatives/POAs in ECS.
15. Correctly identify the call type in ECS (i.e., Direct, Transfer, Return, etc.).
16. Include a descriptive summary in the ECS telephone call record to include: caller's name, relationship to the claimant, information requested, information provided in the response, and complete ECS coding in accordance with existing program policies and guidelines.

Narrative

**Result #4 Title** CASE MANAGEMENT **Weight Value** 15%

**Result #4**  Outstanding  Exceeds Fully Successful  Fully Successful  Minimally Successful  Unacceptable  Not Rated

The CE performs duties necessary for the accurate and timely development, adjudication, and payment of claims.

**Performance Standard**

Performance is Fully Successful when the CE achieves 90% - 92%.

The CE successfully completed the below tasks when:

1. Timely and properly forwards requests for reopening and/or non-specific correspondence according to current policy.
2. Timely and properly forwards Privacy Act Requests in accordance with current Standard Operating Procedures.
3. Issues documents to the correct individual to protect claimant's PII and prevent disclosure of information.

4. Accurately enters RD coding resulting in no more than one re-build of the decision in ECS per month.
5. Receives no more than one Remand for CE error in a month.
6. Completes initial development action for initial processing, Med after FD, impairment, wage loss, remands, and Director's Orders within fourteen (14) to sixteen (16) days from case create date, claim receipt date, date of remand, or date of issuance of a Director's Order.
7. Takes follow-up development or adjudicatory action within thirty-five (35) to forty (40) days from the last development action where appropriate.
8. Properly develops the claim for wage-loss when the employee's death was prior to the normal SSA retirement age, including obtaining contemporaneous medical evidence when the initial evidence did not support that wage-loss was causally related to the accepted condition.
9. Creates and refers payments to the certifier within 3 work days of notification that the payment was entered into ECS.
10. Reviews incoming documents in OIS and changes to Review Complete within three (3) work days.

Narrative

**Result #5 Title** AUDITS

**Weight Value** 10%

**Result #5**  Outstanding  Exceeds Fully Successful  Fully Successful  Minimally Successful  Unacceptable  Not Rated

The CE completes accurate RDs reviewed prior to issuance under Government Accountability Office audits. The CE completes accurate and quality work products as assessed by the Quality Assurance Team.

**Performance Standard**

Performance is Fully Successful when the CE achieves 90% - 92%.

Did the CE successfully complete the below tasks?

**GAO Audits:**

1. Consistently enter the Employee or Claimant's name in the Recommended Decision.
2. Enter the correct address on the Recommended Decision cover sheet or consequential acceptance letter decision.
3. Consistently enter the Employee's medical condition in the Recommended Decision.
4. Consistently enter the Employee's job title in the Recommended Decision.
5. Consistently reference the SEM search information in the Recommended Decision.
6. Consistently enter the Employee's employment location and dates in the Recommended Decision.
7. Correctly enter the monetary award and calculations in the Recommended Decision.
8. The conclusion of law matches the decision itself.
9. Include the proper documentation with the Recommended Decision.

**Quality Assurance Audits:**

10. Completes an accurate and quality work product as assessed during the QA audits completed by the Performance Management Branch.

Narrative

**Result #6 Title**

**Weight Value**

**Result #6**  Outstanding  Exceeds Fully Successful  Fully Successful  Minimally Successful  Unacceptable  Not Rated

**Performance Standard**

Narrative

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Result #7 Title	Weight Value
Result #7 <input type="checkbox"/> Outstanding <input type="checkbox"/> Exceeds Fully Successful <input type="checkbox"/> Fully Successful <input type="checkbox"/> Minimally Successful <input type="checkbox"/> Unacceptable <input type="checkbox"/> Not Rated	
Performance Standard	
Narrative	

Result #8 Title	Weight Value
Result #8 <input type="checkbox"/> Outstanding <input type="checkbox"/> Exceeds Fully Successful <input type="checkbox"/> Fully Successful <input type="checkbox"/> Minimally Successful <input type="checkbox"/> Unacceptable <input type="checkbox"/> Not Rated	
Performance Standard	
Narrative	