

1 change?

2 DR. MELIUS: So moved.

3 MR. PRESLEY: Second.

4 DR. ZIEMER: And seconded. All in favor of
5 approval of the minutes, say aye.

6 (Affirmative responses)

7 DR. ZIEMER: Any opposed, no?

8 (No responses)

9 DR. ZIEMER: Any abstentions? Roy, I'm
10 sorry, I missed -- did you have a comment or...

11 DR. DEHART: Not at this point. I was going
12 to ask a general question about minutes generally,
13 not these particular minutes.

14 DR. ZIEMER: Okay. You may proceed.

15 DR. DEHART: I would find, I think, with the
16 number of pages that we review, that at the end of
17 the minutes, action items drawn from the minutes
18 be listed.

19 DR. ZIEMER: You're asking for a summary --
20 just a summary page of action items?

21 DR. DEHART: That's correct. Thank you.

22 DR. ZIEMER: I think we can agree to do that,
23 and we'll ask our recorder to help us pull those
24 together. Thank you. Good point.

25 I would like to point out to the Board that

1 for our closed sessions there are generated -- for
2 the *Federal Register* actually -- what is called a
3 summary. We're required to get those back in to
4 the *Federal Register* within two weeks of our
5 closed session. Generally what happens is -- and
6 these are very brief -- is that Cori generates
7 those. They come to me for signature and then
8 they appear in the *Federal Register*. They don't
9 come back to the Board for action. I simply want
10 to let you know that. The summary of those closed
11 sessions simply reiterates when -- when we met,
12 who was there and the subject of the closed
13 session, and affirms that that is the only item
14 that was discussed. So unless the Board wishes to
15 take formal action on those, do you agree that the
16 Chair can simply sign those and send them back?
17 There's no detail, of course, on the content -- or
18 the actual discussions.

19 (No responses)

20 Thank you. We're now ready to move to the
21 Program Status Report. Martha DiMuzio is going to
22 make the presentation today. Martha?

23 And you should have a handout on this, as
24 well.

25 **PROGRAM STATUS REPORT**

1 MS. DIMUZIO: Good morning, everyone. I'm
2 going to give you the program report for OCAS and
3 what we've been doing since the last Board meeting
4 we had in Las Vegas in December.

5 Since that meeting we've received
6 approximately -- well, for this year we've
7 received approximately 216 requests from the
8 Department of Labor. We are seeing a gradual
9 decline in the responses that we have received.
10 You can see there the number of cases that are AWE
11 and the number of cases that are non-AWE. The
12 number of cases in process is 13,550. That
13 represents the numbers that are actually in OCAS's
14 hands that are requiring some type of dose
15 reconstruction.

16 Here's a graph that's showing by quarter --
17 fiscal year quarter the number of cases that we
18 received from the Department of Labor. The 216
19 for the second quarter of FY '04, that represents
20 just the month of January since that's when the
21 quarter started, so as you can see, there has been
22 a cyclical decline in the number of cases
23 received.

24 To date, as of January 30th, we've requested
25 14,453 exposure requests to the Department of

1 Energy, which represents 13,148 cases. So
2 obviously if an individual worked at various
3 sites, we would be sending multiple requests to
4 the Department of Energy, to the appropriate
5 office. And to date we've received 23,000
6 responses. And again, that represents 12,000
7 cases.

8 The age of the outstanding requests greater
9 than 60 days, 126; greater than 90 days, 156; 120,
10 97; and then greater than 150 days, 230.

11 This represents the eight largest sites that
12 have requests, and I would like to make one update
13 on -- for the Savannah River Site for greater than
14 60 days. We received a large bolus of responses
15 earlier this week, so the number that's greater
16 than 60 days has been reduced to 50, and the
17 number greater than 150 days has been reduced to
18 11. And that's a result of information we
19 received earlier this week, so that number has
20 been significantly reduced.

21 We have been working with the Department of
22 Energy on getting in the responses correctly and
23 the type of information that we require to
24 complete the dose reconstruction, and we send them
25 monthly updates on each of the cases that we're

1 still waiting for a response on. And we attend
2 all major meetings with the Department of Energy
3 when they're talking about their records and so
4 forth, and we're really beginning to develop a
5 really good relationship with the Department of
6 Energy and beginning to see more of the type of
7 information that we need to complete the dose
8 reconstruction on the first pass through of
9 requesting information, so...

10 This is our CATI information. Again, we've
11 completed case interviews for at least 10,830 --
12 excuse me, not completed, but we've conducted at
13 least one interview for 10,830 cases, and summary
14 reports sent to all claimants. The reason that
15 number's higher is because you can have multiple
16 claimants per case. Again, they're handling about
17 200 to 300 per week, and the CATI operation runs
18 very well. They're very quick in conducting
19 interviews and so forth, so this is a very good
20 process that's been moving along very well.

21 Cases staged for dose reconstruction, that
22 number represents a case where ORAU has sent a
23 letter providing them a listing of potential dose
24 reconstructionists who may be assigned to their
25 case. And then the claimant is given the

1 opportunity to either select someone or -- from
2 that list.

3 DR -- DR's that are assigned, 679, those are
4 actual cases that have actually been given to a
5 dose reconstructionist and they've started work on
6 the dose reconstruction.

7 325 claims are currently with claimants.
8 They've received a draft of the report and we're
9 waiting the OCAS-1 from them. And final DR's that
10 have been sent -- dose reconstructions that have
11 been sent to the Department of Labor for
12 adjudication is 1,502. And also that -- that
13 1,502, that represents a 50 percent increase from
14 when we reported to you in December, so we are
15 getting more and more out every day.

16 And this graph shows the numbers by month
17 that we have submitted to the Department of Labor.
18 As you can see, we're continuing each month to
19 send more, and this should continue.

20 DR. ZIEMER: Martha, is -- could you go back
21 on that slide? Is the last month on the right
22 then January?

23 MS. DIMUZIO: Yes. I might be able to go
24 back. Yes, so you go back -- the 284 was for
25 January, the 241 was December, 211 November, 237

1 October.

2 This chart here represents the number of
3 claims that -- the blue line represents the number
4 of claims that we received from the Department of
5 Labor. The pink line is the number of drafts that
6 have been sent to claimants, and the yellow is the
7 finals that we have sent the Department of Labor.
8 So you can see we're finally starting to address
9 the backlog, and we are now sending out more dose
10 reconstructions than requests that we're
11 receiving. In the month of December we sent out
12 17 percent more claims to claimants than we
13 received from the Department of Labor, and in
14 January we sent out 44 percent more. So we are
15 beginning to handle the backlog and get those
16 issues resolved.

17 Phone calls, we continue to receive many
18 phone calls from our claimants. We respond to
19 those calls, both NIOSH and ORAU, and we also
20 continue to receive e-mails from claimants, so
21 we're using all of the communication methods
22 available.

23 Recent accomplishments, we've appointed 167
24 physicians to the panels. That's an increase of
25 eight appointments since we last met in December.

1 We're continuing to recruit actively for
2 additional physicians.

3 And again, as I said, for the months of
4 December and January, more claims were forwarded
5 to the Department of Labor for decision than
6 claims received from the Department of Labor.

7 Additional site profile documents have been
8 posted on our web site for review by claimants,
9 and NIOSH -- in October we initiated a quarterly
10 communication with our claimants. We send each
11 claimant an update on their specific case, and we
12 also provide them with a three-page activity
13 report which gives them an update on what's
14 happening within the program.

15 Like I said, our first communication was in
16 October. From that communication we received
17 phone calls from claimants asking questions about
18 what was contained in the activity report, or
19 questions about the information that was provided
20 in a specific -- in their specific update. As a
21 result of those questions, for the January mass
22 mailing we were able to answer their questions,
23 one of their questions being -- in the October
24 report where it said have we received a response
25 from the Department of Energy, it may say no, that

1 we had not received a response, so they wanted to
2 know what the ans-- they didn't understand the
3 word "no", so they wanted us to explain what "no"
4 was. So in our January mailing we had a topic of
5 conversation, what "no" means, so that they could
6 have an understanding.

7 As a result of the January mailing, we've
8 received additional questions about what does
9 "pending" mean, so in the update that we send out
10 in March we'll be telling them about what
11 "pending" means and explaining that to them.

12 We've received many compliments from the
13 claimants that they're getting this information,
14 and so they're very happy about that. We've also
15 had, you know, responses saying please don't send
16 this to me again; I don't want that. And we're
17 taking the steps necessary to, you know,
18 accommodate their wishes.

19 So that's all I have. Does anyone have
20 questions?

21 **DR. ZIEMER:** Okay, thank you. We'll start
22 with Roy.

23 **DR. DEHART:** The web site for the site
24 profiles, you may not be aware that DOL has just
25 put together a CD that incorporates all site

1 profiles that they currently have, and those will
2 be mailed to each physician who's participating in
3 the program.

4 MS. DIMUZIO: Oh, okay.

5 DR. ZIEMER: Thank you. Other comments?
6 Yes, Jim?

7 DR. MELIUS: I would -- number of questions.
8 First, it would be helpful for the slides, the
9 handouts that we get, to make sure that the things
10 are labeled, 'cause when we -- on the page here
11 all I have is bars and no axes, labels or anything
12 and I may be able to see them now and remember
13 them now, but when I look at this two months from
14 now or something, I'll have no idea what I'm
15 looking at. So I know it's -- it's tricky to do
16 'cause you want it to look good on the screen and
17 it doesn't print out in black and white as well,
18 but anyway, it would be helpful.

19 MS. DIMUZIO: Sure.

20 DR. MELIUS: Secondly, I think I've -- may
21 have talked about this before, but on the DOE
22 requests, it's clear that you're getting multiple
23 responses for each request for information from --
24 from DOE and -- but I'm assuming that when you get
25 back an aknowled-- I mean can you sort of describe

1 that process so that we can understand what these
2 statistics are? Are you getting back more than an
3 acknowledgement from them when you say that you
4 have a response? Is it actual information that's
5 useful and then describe a little bit of why
6 there'd be more than one response per person. Is
7 that worked at different sites or is it adding
8 additional information?

9 MR. ELLIOTT: It's a variety of those
10 different circumstances. A person could have
11 worked at more than one site, so we request for
12 all sites that they worked at so we get response
13 in that regard. We can also get a response that
14 says we're still looking and we count that as a
15 response. We could get a response that says we
16 don't believe we have any data at all. That's a
17 response, as well, so that's counted in that
18 number. We -- we -- as we -- as we go through and
19 screen the responses we have, if there are data
20 quality issues or if the information that was
21 provided is not in the right format, we send
22 another request back with more specific detail on
23 what we need and why we need it again, and so
24 there's another -- hopefully another response
25 comes back that provides the right information.

1 So there's a variety of reasons as to why that
2 number is inflated more than just the single cases
3 we've received.

4 DR. MELIUS: I know it's hard to summarize
5 that complicated a process, but I think it's --
6 you know, what I believe and I -- that you have a
7 process in place that keeps track of those that
8 when you don't have the information, you know
9 that. And I think it's important to make sure
10 that what's being portrayed to us reflects that to
11 some extent, particularly if -- if you're having a
12 site that just responds yeah, we got your request,
13 and then you don't hear from them for a year, that
14 we're not portraying as saying that they've been --
15 -- they've been responsive. And so, you know, if
16 there's -- there's a way of sort of having some
17 sort of a date on -- keeping track of if a site's
18 not really giving you meaningful information and --
19 -- I assume from what I'm hearing that you're
20 getting it, realizing that for individual cases
21 there are going to be, you know, difficulties in
22 getting complete information.

23 DR. NETON: I'd like to offer --

24 DR. ZIEMER: Jim Neton.

25 DR. NETON: (Off microphone) Jim Neton from

1 NIOSH. I'd offer some -- a little clarification
2 on what Larry said. It's rare that we do get a
3 response (Inaudible) we got your request
4 (Inaudible). Most of the additional response
5 we've received are -- we ask for a number of
6 different types of information -- internal
7 dosimetry results, film badge TLD results, medical
8 X-ray results -- and oftentime (sic) they don't
9 come over in a package. I mean they come in
10 different pieces (Inaudible) organization, so we
11 may get two or three individual responses to one
12 request (Inaudible).

13 DR. ZIEMER: Thank you. Let's get Tony, then
14 we'll come back. Tony?

15 DR. ANDRADE: I just wanted to mention that
16 -- a couple of points. Number one is I certainly
17 appreciate your concern, and it would probably be
18 good to differentiate between responses that
19 really have no data and those that -- that do send
20 in pertinent data. However, two points for
21 clarification and for just the general knowledge.
22 By law in CFR 830, sites are supposed to make a
23 reasonable effort to collect dose data from all
24 previous employers. And I know that we certainly
25 make a wholehearted effort to do that, and so that

1 information is also collected. And as a matter of
2 efficiency when we used to be doing this, we would
3 send in several responses for several people at
4 one time.

5 DR. ZIEMER: Well, does that count as one
6 response, though? If it's several people at one
7 time, you count those -- a response for each
8 person.

9 MS. DIMUZIO: No, it counts as a response for
10 each person. We load it up that way and it
11 matches up to the claim number.

12 DR. ZIEMER: Back to Jim.

13 DR. MELIUS: And acknowledging it's a
14 complicated situation, there may be situations
15 where the initial response provides enough
16 information to, you know -- that NIOSH doesn't
17 need more, so -- you know, sort of -- may -- I
18 don't -- some kind of a system telling you we --
19 you know, we really don't need to keep looking for
20 that missing information, but -- but again, just
21 so we're not in a situation where, you know, a lot
22 of cases can't be dealt with because there's just
23 no information or not adequate information. That
24 --

25 Like to obviously congratulate you on several

1 things. One, getting the -- the communication to
2 the claimants. I think that's -- I think that
3 will be helpful. Again, it's going to raise
4 questions to -- that you have to answer, but I
5 think that people usually appreciate knowing
6 what's going on, even if, you know, it isn't --
7 they're going to be delay that -- has there been -
8 - we had received a communication and -- about
9 updates to the web site in terms of how you're
10 going to track the status of the claims. And I
11 know I sent in comments, I don't know if other
12 people did, but I was just curious in terms of the
13 implementation of that and particularly I --
14 again, my comment mainly addressed the issue of
15 can you have site information on there so people
16 know the general status of how things are --
17 claims are being handled at Savannah River, for
18 example.

19 MR. ELLIOTT: We are -- we have your comments
20 and we appreciate those. Also solicited comments
21 from DOL and DOE on this piece and we are working
22 to revamp our web site. There's a number of new
23 things that we are putting together to place on
24 the web site. And it's not as -- you know, I
25 would think it's just straightforward, let's just