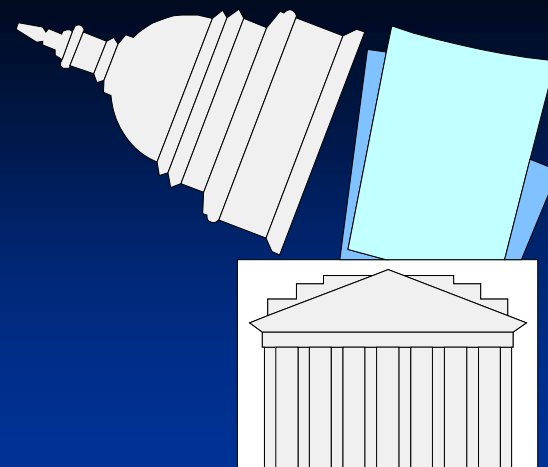
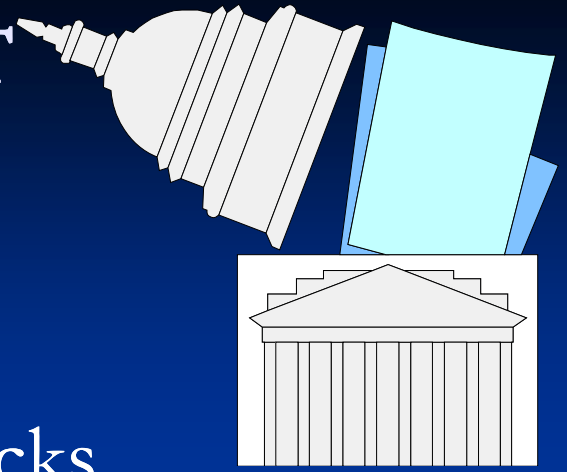


THE FEDERAL GOVERNMENT IS SELF-INSURED



- The program is non-adversarial. Therefore, the benefit of the doubt ALWAYS goes to the claimant.
- No one may require an employee or other claimant to waive her/his right to claim compensation under the FECA
- Unlike state workers' compensation programs, our claimants don't need an attorney.
 - If they do retain an attorney, the claimant is responsible to pay, but OWCP has to approve the fee.

THE FEDERAL GOVERNMENT IS SELF-INSURED



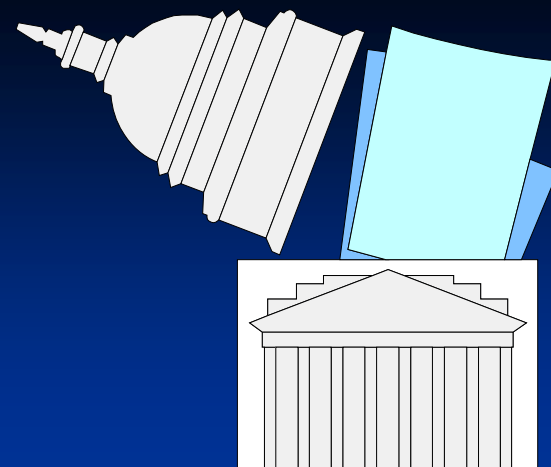
- **Funded through agency chargebacks**

When an employee is injured the payments are made from a compensation fund controlled by the Department of Labor. On a quarterly basis, those costs are then “charged back” to the employing agency who must deduct them from their payroll budget. In effect, OWCP writes a check for these costs that is drawn on the employer’s account!

- **Exclusive remedy –a federal employee or surviving dependent is not entitled to sue the U.S. or recover damages for injury or death under any other law**



THE FEDERAL GOVERNMENT IS SELF-INSURED



- Once the claimed **MEDICAL CONDITION** has been accepted, the Department of Labor has the **BURDEN OF PROOF** to prove that the claimant no longer has the medical condition, prior to terminating medical benefits.
- Once the claimed **DISABILITY** has been accepted, the Department of Labor has the **BURDEN OF PROOF** of proving that the claimant is no longer disabled, prior to terminating compensation benefits.

***OWCP'S NY
DISTRICT OFFICE
HANDLES 11,000
NEW CLAIMS
EACH YEAR***

THE NEW YORK DISTRICT
OFFICE COVERS ALL FEDERAL
EMPLOYEES WITHIN:

- NEW YORK
- NEW JERSEY
- PUERTO RICO
- U.S. VIRGIN ISLANDS

Federal Employees Compensation

Benefits Overview

- Continuation of Pay (COP)
- Medical Benefits
 - Emergency Treatment Authorization for Traumatic Injuries
 - Preventive care is not authorized
 - Treatment Suites
- Wage-Loss Benefits
 - 2/3 or 3/4's (w/dependent or spouse) of weekly salary, tax free.
- Survivor Benefits
- Schedule Award for Permanent Impairment

TRAUMATIC VS. OCCUPATIONAL INJURIES

TRAUMATIC INJURY – FORM CA-1

- SPECIFIC EVENT OR SEVERAL EVENTS WHICH OCCUR OVER ONE DUTY SHIFT
- *EXAMPLES:*
 - SLIPPING ON AN ICY SIDEWALK
 - LIFTING BOXES ALL DAY
 - HARASSMENT FROM SUPERVISOR - 1 SHIFT



TRAUMATIC INJURY - Supervisor's/ICS' Role

- Employee (or someone on her/his behalf, including supervisor) completes front of Form CA-1
- Supervisor completes back
- Must be submitted to employing agency within 30 days of date of injury to be eligible for COP –however the CA-1 can be submitted up to three years after the injury
- Must be transmitted to OWCP within 14 calendar days from date agency received form – therefore, do NOT hold the CA-1 for wage calculations, supporting documentation, etc.



TRAUMATIC INJURY -

Supervisor's/ICS' Role



Review CA-1 for completeness and assist employee in completing it

- Complete and sign back of CA-1 (Provide good contact info!!)
- If doubt as to whether employee's condition is related to employment, note this on the form
- Authorize medical care if needed by completing a Medical Treatment Form CA-16 within four hours of request whenever possible
- May refuse to issue a CA-16 if more than a week has passed since the injury since the need for immediate treatment would have become apparent in that period
- Advise employee of the right to elect COP, rather than use leave
- Advise employee of her/his responsibility to submit medical evidence of disability within ten calendar days or risk termination of COP

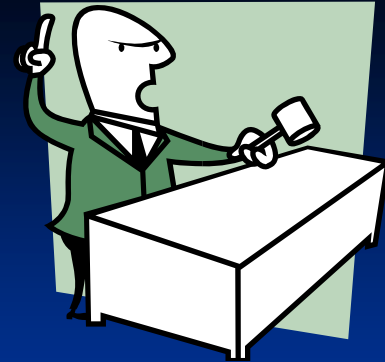
CONTINUATION OF PAY (COP)

- Continuation of regular pay for up to 45 calendar days of wage loss due to disability and/or medical treatment after a traumatic injury
- Intent is to avoid interruption of pay while the claim is being adjudicated
- Subject to usual deductions from pay, such as income tax, retirement allotment, etc.



NINE REASONS FOR CONTROVERSION

1. Not Traumatic Injury.
2. Not citizen of U.S. or Canada.
3. Claim not filed within 30 days of D.O.I.
4. Injury not reported until after employment terminated.
5. Injury occurred off premises, and not in performance of duty.
6. Injury caused by employee's willful misconduct, intent to injure or kill his/herself or other, or was directly cause by intoxication due to alcohol or illegal drugs.
7. Work did not stop within 45 days of D.O.I.
8. The employee is a volunteer.
9. The employee is enrolled in Civil Air Patrol, Peace Corps, Youth Conservation Group, Work Study Program, or other similar groups.



EMERGENCY TREATMENT FORM CA-16



- Used for Traumatic Injuries Only. (Unless authorized by OWCP)
- Must be issued within 4 hours of claimed injury.
 - If verbal approval of medical care is given, CA-16 may be issued within 48 hours.
- Agency is not required to issue CA-16 more than one week after date of injury.
- Should be issued even if you are controverting the claim.

EMERGENCY TREATMENT FORM CA-16



- Form CA-16 is effective for 60 days from date of issuance, unless terminated by OWCP.
- Employee has right to choose initial physician.
- Designated Physician should be entered on CA-16
- Designated Physician may refer claimant for further examination or medical care.

ONLY ONE CA-16 TO A CUSTOMER!

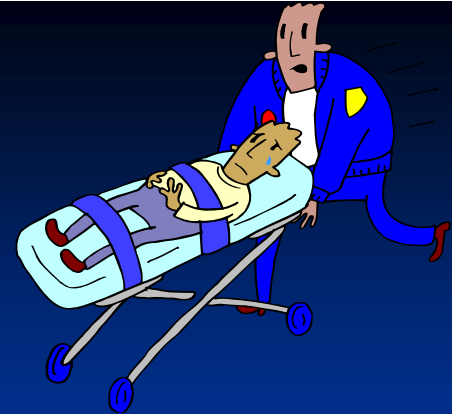
EMERGENCY TREATMENT FORM CA-16

■ WILL COVER:

- Braces, splints, casts, canes, etc.
- Prescriptions.
- Physical therapy
- Hospitalization.

■ WILL NOT COVER:

- Surgery
- Home exercise equipment, whirlpools or mattresses
- Spa/gym membership
- Work hardening programs and/or functional capacity evaluations



Admin-closures

Case Status: C1, C4

OWCP will accept without review:

Traumatic Injury

Filed within 30 days.

Un-Controverted Claim

No 3rd Party Issue

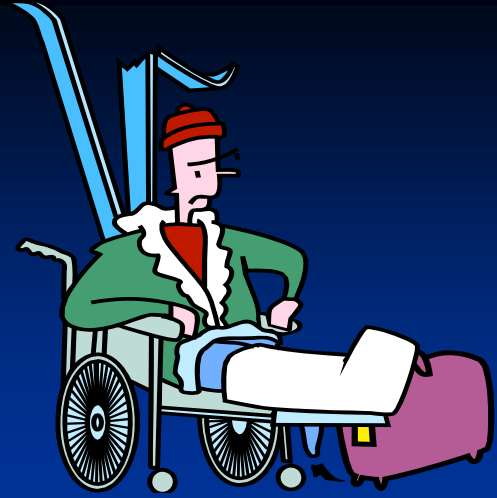
OWCP authorizes:

- Up to 45 days of COP
- Up to \$1500.00 of medical bills
 - (except where there is a CA-16 Medical Authorization).
- Medical visits are authorized
- PT is authorized for 120 days after injury



Admin-closures*

*aka C-closures, Short-form closures



Admin Closures “Flip” Open and require adjudication when one of the following happens...

- Medical bills exceed \$1500 where there’s no CA-16 authorization.
- Claimant files a CA-7.
- OWCP manually flips it open on own initiative or at employing agency’s request.

TRAUMATIC VS. OCCUPATIONAL INJURIES

OCCUPATIONAL INJURY – FORM CA-2



INJURY OVER A PERIOD OF TIME

EXAMPLES:

- CARPAL TUNNEL FROM DATA-ENTRY FOR 5 YEARS.
- LIFTING BOXES OVER SEVERAL DAYS
- HARASSMENT FROM SUPERVISOR - LAST 3 MONTHS

OCCUPATIONAL DISEASE



- COP is not provided for occupational diseases
- CA-16 is not issued for occupational diseases

Form CA-2

- Must be transmitted to OWCP within 14 calendar days from date agency received form –do NOT hold for receipt of supporting documentation

OCCUPATIONAL DISEASE – SUPERVISOR'S/ICS' ROLE



- If doubt as to whether employee's condition is related to employment, note this on the form
- Review the employee's portion of the form and provide comments concerning the employee's statement
- Goal is to have the claim submitted to OWCP within 14 calendar days from date of notification
- Prepare a supporting statement to include exposure data, test results, copies of previous medical reports, and/or witness statements –depending on the nature of the case
- Advise employee of the right to elect sick or annual leave or LWOP, pending adjudication of the claim

RECURRENCE OF INJURY

What constitutes a recurrence of injury?



Recurrence of Disability

- Spontaneous reappearance of disability not related to new work factors
- Activities of daily living that result in exacerbation of employment condition, resulting in disability.
- Consequential condition arising out of the employment injury

Recurrence of Medical Condition

RECURRENCE OF INJURY

VS.

NEW INJURY



NEW WORK FACTORS = NEW INJURY

Medical Benefits



■ TYPES OF CAUSAL RELATIONSHIP:

Direct Cause

Aggravation

Acceleration

Precipitation

Consequential

Unlike State workers' compensation, there is no apportionment. Any causal relationship creates a burden on the government to make the claimant whole.



Medical Benefits

Treatment Suites

ACS

Central Medical Authorization/
Bill Payment



Federal Employees Compensation

Wage-Loss Compensation Benefits

Temporary Total Disability

- Continues as long as medical evidence supports total disability
- Injured worker who returns to work can receive compensation for time lost due to medical appointments, physical therapy, and/or reduced work hours based on medical restrictions.
 - LWEC'S – Loss of Wage Earning Capacity



Compensation for Wage Loss – Form CA-7



- Supervisor provides Form CA-7 at end of COP or as soon as wage loss occurs
- Employee (or someone on her/his behalf, including supervisor) completes front
- Supervisor completes back and submits with any new medical evidence to OWCP **within 7 calendar days of receipt** –do NOT hold for receipt of documentation
- Dates of compensation claimed should represent the period of disability supported by the medical evidence or the interval until the employee's next medical appointment
- A new CA-7 should be submitted every two weeks during periods of continued disability and wage loss (no prospective claims, please!)

Other Functions of the CA-7



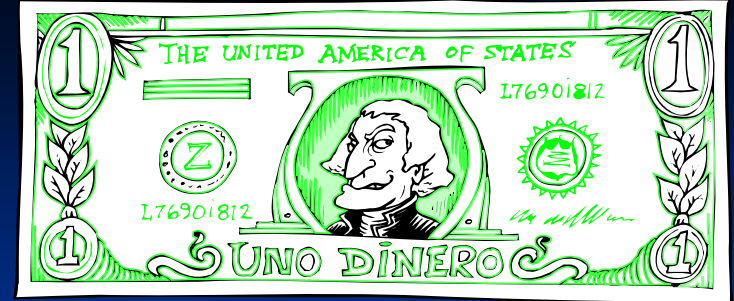
- An employee who uses annual or sick leave to avoid interruption of income may repurchase that leave, subject to agency concurrence, if the claim is approved
- Schedule awards for permanent impairment

Survivor Benefits



- Survivors of federal employee whose death is work-related are entitled to benefits including compensation payments, funeral expenses, and transportation expenses for the remains
- Eligible survivors
 - Widow or widower
 - Unmarried child under 18 or over 18 if incapable of self support due to disability
 - Child 18 –23 who has not completed four years of post-high school education and is regularly pursuing full time course of study
 - Parent, sibling, grandparent, or grandchild who was wholly or partially dependent on deceased

SCHEDULE AWARD



What is a Schedule Award?

Payment of compensation for loss or loss of use of an organ or extremity

When is a Schedule Award payable?

Schedule awards are only payable after the claimant's condition has reached Maximum Medical Improvement - MMI

A CLAIMANT CANNOT GET REGULAR COMPENSATION AT THE SAME TIME AS OPM BENEFITS, BUT CAN GET A SCHEDULE AWARD AT THE SAME TIME AS OPM BENEFITS.

OWCP FORMS



- CA-1** Notice of Traumatic Injury and Claim for Continuation of Pay/Compensation
- CA-2** Notice of Occupational Disease and Claim for Compensation
- CA-2a** Notice of Recurrence
- CA-3** Report of Termination of Disability and/or Payment
- CA-5** Claim for Compensation by Widow, Widower, and/or Children
- CA-5b** Claim for Compensation by Parents, Brothers, Sisters, Grandparents, or Grandchildren
- CA-6** Official Supervisor's Report of Employee's Death

OWCP FORMS



CA-7 Claim for Compensation

CA-7a Time Analysis Form, used for claiming intermittent compensation, including repurchase of paid leave

CA-7b Leave Buy Back (LBB)
Worksheet/Certification and Election

OWCP FORMS



CA-16 Authorization for Examination and/or
Treatment

CA-17 Duty Status Report

Privacy Act – Personally Identifiable Information (PII)



Individual case files protected under Privacy Act

- Only employee and representative (if any) may routinely have access to a file.
- Agency file is also OWCP's – so all requests for access should be directed to OWCP.
- HIPAA doesn't apply to OWCP or employing agencies

Federal Employees Compensation

Functions of Claims Examiners

■ All Initial Decisions:

- Development
- Acceptance
- Denials
- Approvals
- Payments
- Reconsideration Requests (Sr. Claims Examiners)

■ Disability Management

■ Fraud Referrals

Federal Employees Compensation

Adjudication Goals

- Traumatic Injuries – 45 days
- Basic Occupational Disease Claims – 90 days
- Extended Occupational Disease Claims – 180 days
- Administratively Reopened Cases (“Flips”) – 45 days
- Recurrences – 90 days
- Reconsideration Requests – 90 days
- Compensation Claims – 14 days
- Hearings
 - Remands/Reversals before Hearing 93 days
 - Hearings 225 days
 - Reviews of the Record 105 days

Federal Employees Compensation

Medical Benefits

- Bill Payment – 30 days
- Authorization Requests – 3 days
- Treatment Suites

Communications

- Telephone Responses: 73% same day
 92% within 2 work days
- Correspondence:
 - Review Mail – 3 days
 - Respond to Priority Inquiries – 14 days
 - Respond to Correspondence – 30 days

PERFORMANCE OF DUTY

ISSUES

Common Law (Larson's)

- Premises Doctrine
 - Fixed place of employment
- Recreation
 - formal/organized/
sponsored
- Union Duties
 - not for “internal union
business”
- Horseplay
 - employees working side
by side

- Emergencies
 - if step outside of duties for
emergency
- To & From Work
 - not usually covered
- Idiopathic Falls
 - KNOWN pathology
 - intervening object
- Travel Status
 - reasonably incidental
- Special Hazard

PERFORMANCE OF DUTY PRINCIPLES



- Does the activity serve the employer?
- Is the activity a condition of employment?



FECA THIRD PARTY REQUIREMENTS

1. Under § 8131, claimants are required to initiate a suit if the circumstances of their injury or death created a legal liability on a person other than the United States. This requirement in certain limited circumstances can be waived.
2. Under § 8132, if there is a recovery, claimants are required to reimburse the United States for the benefits paid. This requirement can never be waived.



New York District Office Contact Information

Customer Service Hotline: (646) 264-3000

New Claims Fax: (646) 264-3123

Main Fax: (646) 264-3006/Alternate Main: 3004

DFEC Website: <http://www.dol.gov/owcp/dfec/>

ACS Fax Authorization Requests: (800) 215-4901

ACS Customer Service Representative Call Center: (800) 558-1818

ACS Interactive Voice Response – Medical Auth/Bill Inquiry: (866) 335-8319

ACS Website: <http://owcp.dol.acs-inc.com/portal/main.do>