

CHAPTER 10

FEDERAL EMPLOYEE'S COMPENSATION PROGRAM

10-1. General: This directive has been prepared by the Technician Employee's Services Section of the MSNG Human Resources Office (HRO) as a reference for all supervisors and technicians of the Mississippi National Guard.

10-2. Purpose. To assist the supervisor and the technician in the reporting, preparation and filing of employee compensation claims. This section does not mention all the forms used in adjudicating claims, nor is it intended to be a substitute for the OWCP regulations for the administration of the FECA. This section should, however, be used as a handy guide by all supervisors; and should provide the supervisor with all the information needed to administer the program at user level. Forms not referred to in this section are used for special purposes and will be provided by OWCP when the need arises.

10-3. Management and Administration. The Office of Worker's Compensation (OWCP), U.S. Department of Labor, is responsible for the management of this program. The single point of contact for OWCP claims for the state is located in our Human Resources Office (HRO). The National Guard Bureau has delegated a Liaison Officer in the HRO in Florida to coordinate with OWCP Regional Office, Jacksonville, Florida on all claims for this state and seven (7) other states. OWCP is the final approving authority for all Workers' Compensation Claims.

10-4. General Information/Eligibility.

- a. The Federal Employee's Compensation Act (FECA) provides compensation and medical care for all Federal employees of all branches of the government of the United States for disability due to personal injuries sustained while in the performance of duty. The term "injury" includes, in addition to injury by accident, a disease caused by the employment.
- b. Penalties.
 - (1) Any person who makes a false statement to obtain Federal Employees' Compensation or who accepts compensation payments to which he or she is not entitled is subject to a fine of not more than \$2,000.00 or imprisonment for no more than one year, or both.
 - (2) Any person charged with the responsibility for making reports in connection with an injury who willfully fails, neglects, or refuses to do so; knowingly files a false claim; induces, compels, or directs an injured employee to forgo filing a claim; or willfully retains any notice, report, or paper required in connection with an injury, is subject to a fine of not more than \$500.00 or imprisonment for no more than one year, or both.

10-5. Benefits Available.

- a. The FECA is a conventional piece of worker's compensation legislation in that compensation for wage loss is computed as a percentage of the employee's salary. Federal employees are eligible for four basic types of benefits under the provisions of the FECA program which apply to any disability or death incurred as a result of an employment-related disease or condition, as well as on-the-job injury. The four types of benefits are as follows:
 - (1) Medical benefits including:
 - (a) Hospital bills
 - (b) Doctor bills

- (c) Drug bills
- (2) Disability benefits including:
 - (a) Temporary total
 - (b) Permanent total
 - (c) Partial (incurred as a result of an employment-related disease, condition, or on-the-job injury)
- (3) Other benefits related to disability:
 - (a) Attendant's allowance
 - (b) Schedule Award
 - (c) Vocational Rehabilitation
- (4) Death benefits including:
 - (a) Funeral expenses
 - (b) Survivor's compensation
 - (c) Transportation of remains

b. Medical Benefits.

(1) The FECA provides compensation for any medical service needed to provide treatment to counteract or minimize the effects of any condition diseases or injury judged to be causally related to employment with the Federal Government. There is no limit on the monetary amount of medical expenses paid, nor on the length of time for which they are paid, as long as the need for medical treatment can be substantiated and related to the injury or disease sustained on the job.

(2) Compensation will be paid for first aid, medical treatment, hospitalization, and physician's fees, as well as for any drugs, appliances, or other supplies directed for use by a qualified physician. Only original bills for hospital and related hospital expenses should be submitted (and original Form HCFA 1500 for Doctor's bills) to OWCP for payment. a/ The employee is entitled to the use of Federal medical facilities and physicians, but may also elect to utilize the services of the hospital and physician of his or her choice. b/ One exception to medical care is that OWCP will not pay for any preventative treatment.

----- FOOTNOTES -----

a/ Payment of bills to chiropractors is limited to treatment consisting of manual manipulation of the spine to correct a sub-luxation as demonstrated by x-ray. If insured employee elects to be treated by a chiropractor, such employee must be informed that all chiropractic services not provided for by OWCP (as stated above) will be the responsibility of the injured employee.

b/ The injured employee has the right to select one's own physician, provided that the physician is located within a 25-mile radius of the employee's residence or workstation. The exception to this rule is when emergency treatment is needed. In those instances employees do not have to be given the option of selecting a physician. Employees should also be made aware that chiropractors can not be paid for any services rendered with the exception of actual spinal manipulation. This can be paid for only if there is x-ray evidence verifying that this needs to be done.

If an employee requests a change in physician, prior approval from the OWCP office and justification are required (just because that employee does not like the treatment given, is not sufficient justification.)

c. Disability Benefits.

(1) Federal employees who suffer disabilities, which are casually related to employment, are eligible for one or more of several types of wage loss compensation. Disability benefits are classified on the basis of the nature and extent of disability incurred; and are defined as a temporary total, permanent total, or permanent partial. Each of these categories will be discussed in turn. It should be noted that payment of compensation under the FECA is based on work related disability.

(2) Compensation. If an employee suffers a job-related "traumatic injury", the employee is entitled to a continuation of regular pay for the period in which the employee is disabled, not to exceed 45 days. If the disability exceeds 45 days, the employee is entitled to file for compensation for wages lost. However, if an employee is unable to work as a result of an "Occupational Disease", employment-related disease or condition, the employee is not entitled to a continuation of pay but is entitled the same compensation benefits as the employee who sustained a traumatic injury and can file for compensation for wages loss.

c/

(3) For traumatic injury or disease, the technician who has no dependents is entitled to compensation for wage loss at the rate of 66 2/3% of the employee's regular pay following a 3-day waiting period. The employee who has one or more dependents and/or a spouse who resides in the same household is entitled to compensation for wage loss at the rate of 75% of the employee's regular pay following a 3-day, waiting period. d/ In cases where disability extends more than 14 days, compensation will be paid for the 3-day waiting period. Provided medical evidence substantiates continued disability, compensation may continue for the lifetime of the employee.

(4) Temporary Total Disability. A determination that an employee sustains an employment-related traumatic injury or occupational diseases and the medical evidence shows that the employee is totally disabled to perform any type of work for a certain period of time.

(5) Permanent Total Disability. A determination that an employee whose employment-related injuries are so severe that they leave the employee permanently and totally disabled for any type of work. (Example: Michael Anderson, employed as an inspector, sustained severe external and internal injuries as the result of an employment-related automobile accident. The medical evidence shows that this injury is so severe that the employee will never be able to work again).

(6) Permanent Partial Disability.

(a) An injury, which prevents the employee from performing the job held at the time of injury. However, the injury does not prevent the employee from performing some type of employment consistent with the work limitations imposed by the injury.

(b) The term, permanent partial disability, not only applies to an employee who may or may not be able to return to the job held at the time of injury, but also to an employee who sustained permanent impairment of a member or function of the body.

----- FOOT NOTES -----

c/ NOTE: All OWCP basic compensation benefits are tax-free.

d/ The 3-day waiting period may not be satisfied by using sick or annual leave. The employee must be in a non-pay status. Any day or fractional part of a day in which pay loss occurs can be counted as a waiting day. Saturdays, Sundays, and holidays not falling within a period of leave may also be counted as part of the period.

d. Other Benefits Related to Disability.

(1) Attendant's Allowance. If an injury is so severe that the employee is unable to care for his or her physical needs, such as feeding, bathing, or dressing, an attendant's allowance of up to \$1500.00 per month may be granted. This allowance is supplemental and is paid in addition to compensation for loss of wages. This can be given with all classes of disability

(2) Schedule Awards. In addition to income maintenance benefits such as those described above, the FECA provides for limited term payments in cases where an employee suffers serious disfigurement of the head, face, or neck, or for anatomical loss. Benefits under these provisions are calculated in the same manner as those paid for permanent total disabilities (66 2/3% of the employee's regular pay, or 75% in cases where the employee has a spouse or dependents), but are paid for a specified period of time which is proportional to the severity of loss. In cases where the employee suffers disfigurement of the face, neck, or head, FECA provides that an employee will be paid an award of compensation not to exceed \$3,500.00. A schedule award can be paid even if the employee returns to work. Also employees may receive wage loss compensation and schedule award benefits for the same injury, but not at the same time.

(3) Vocational Rehabilitation. The FECA provides for the cost of OWCP directed vocational rehabilitation necessary to counteract the disabling compensable effects of any permanent illness or injury causally related to Federal employment. Rehabilitation is paid from the Compensation Fund, and rehabilitation is usually administered through State vocational rehabilitation agencies with approval of OWCP. In addition to the cost of rehabilitation, an employee may qualify for a monthly maintenance allowance of up to \$200.00. Vocational rehabilitation benefits are supplemental, and recipients are also entitled to collect total disability payments during the period of their rehabilitation.

e. Death Benefits. The FECA provides a full range of benefits for the survivors of Federal employees who suffer a job-related death. Widows and widowers of deceased employees are eligible for wage loss compensation equal to 50% of the deceased employee's regular pay. If the widow or widower has an eligible child, he or she is eligible for compensation equal to 45% of the employee's regular pay, plus an additional 15% for each child, to a maximum which shall not exceed 75% of the deceased employee's regular pay.

(1) Children who are orphaned by the death of a Federal employee are eligible for compensation equal to 40% of the deceased employee's regular pay, plus 15% for each additional orphan, to a maximum of 75% of the employee's regular pay. Compensation may exceed the regular pay if such excess is created by cost-of-living adjustments; however, it may not exceed 75% of the highest step of the grade GS-15.

(2) If a deceased employee leaves no widows widower, or child; benefits will be paid to the surviving legal dependents of an employee as specified. Contact District Office for percentages.

(3) Benefits are paid to widows and widowers until death or remarriage if the beneficiary is under the age 55. If a widow or widower under age 55 remarries, a lump sum equal to 24 times the monthly compensation he or she is receiving at the time of remarriage is made. If marriage is at the age 55, no change in monthly benefits occurs.

(4) Orphaned children receive benefits until they die, marry, or reach the age of 18. Beyond the age of 18, if a surviving child elects to pursue higher education on a full-time basis (generally 12 semester hours), payments will continue until he or she has completed 4 years of study beyond the high school level, or until he or she is 23 years of age. Payments will in no event extend beyond the semester or enrollment period in which the beneficiary reaches the age of 23, or completes the fourth year of higher education (whichever occurs first).

(5) Funeral expenses are also provided to survivors under the provisions of the FECA. Up to \$800.00 will be paid for Funeral expenses. If the employee dies away from his or her home, the cost of transporting the deceased to place of burial will be paid in full. In addition, a \$200.00 allowance will be paid in consideration of the expense of terminating the Federal employment status of the deceased.

10-6. Traumatic Injuries, Occupational Diseases and Recurrences.

a. Traumatic Injury - is defined as a wound or other condition caused by external factors including physical stress and strain. The injury should be identifiable as to time and place of occurrence and a member of function of the body affected. Further, it must be caused by a specific event or incident or series of events or incidents within a single work shift. It is the last criterion, which sets apart a traumatic injury from an occupational disease.

(1) The CA-1 (Federal Employee's Notice of Traumatic Injury and Claim for Continuance of Pay), is the first form filed in connection with a traumatic injury. And, if there is a need for medical care, the CA-16, (Request for Examination and/or Treatment) and two (2) copies of HCFA 1500, (Health Insurance Claim Form), are given to the employee for completion by the physician. The CA-17 (Duty Status Report) is completed if the treating physician determines that based on the nature of the injury, the technician will not be able to return to work. The supervisor must immediately forward a CA Form 17 and a copy of the technician's position description and performance standards to the treating physician. The CA-17 is used to obtain interim medical reports concerning the technician's medical condition and the earliest date the individual will be able to return to work. Subsequent forms which may be filled are the CA-20 (Attending Physician's Report); CA-7 (Claim for Compensation on Account of Disability); and AGO Form 102 (Continuation of Pay - COP).

(2) In traumatic injury cases, compensation may be claimed for damage to prosthetic devices, medical braces, eyeglasses, contact lenses, and hearing aids, if they were damaged incidental due to a personal injury requiring medical services (Military Personnel and Civilian Employee's Claims Act, 31 U.S.C. 240). If the person does not seek medical treatment, no claim for damaged property can be filed.

b. Occupational Disease - is defined as being produced by systemic infections, continued or repeated stress or strain, exposure to toxins, poison fumes, noise, etc, in the work environment over a longer period of time. In order to qualify as a disease, the injury must be caused by exposure or activities over a period longer than one workday or shift. The first form used in connection with Occupational Disease Claims is the CA-2 (Federal Employees' Notice of Occupational Disease and Claim for Compensation), which is the basic form used to notify OWCP of an Occupational Disease Claim. Subsequent forms used are the CA-7 (Claim for Compensation on Account of Occupational Disease); and CA-20 (Attending Physician's Report).

c. Recurring - (either Traumatic or Occupational Disease) - is defined as a spontaneous return or increase of disability due to a previous injury or occupational disease. Follow-up medical care for a traumatic injury or disease which causes time loss is not considered a recurrence, but part of the original injury. Unless the claimant has been permanently released from further treatment, time loss is attributable to the original injury and claimed as such.

(1) The form used with recurrences is the CA-2a (Notice of Employee's Recurrence of Disability and Claim for Pay/Compensation); CA-7 (Claim for Compensation on Account of Traumatic Injury) (if not previously filed); and CA-20's may be used later.

(2) One important element of recurrences is that if there is a recurrence of a traumatic injury, which causes additional time loss within forty-five (45) days of the first day the employee returns to work following the original injury, and the person has remaining days of Continuation of Pay (COP) available, the person is eligible to use the remaining days. However, once disability stops beyond the forty-five (45) days, employee loses all remaining COP days, but is entitled to claim compensation for time loss.

10-7. (COP) is defined as continuation of an employee's regular pay by the employing agency with no charge to sick or annual leave. It is only given in Traumatic Injury Cases and is given for a maximum of 45 calendar days. In order to qualify for COP, the employee must file a written notice of the claim on a CA-1 or any form approved by the Secretary of Labor, within thirty (30) days of the date of injury. NOTE: Full-time, part-time, and temporary employees are treated alike in instances of COP. e/

a. Dates of Eligibility. (1) In determining dates of eligibility, it is essential to know that the first day of COP is the day following the date of injury (DOI) when there is immediate time loss. If there is immediate time loss on the day of injury and the employee was injured during the official workday, the DOI is considered to be administrative leave. In this case, the first day of COP is the day after the injury. Once the employee has begun taking COP he/she is entitled to a maximum of 45 calendar days of COP. However, they need not be successive days. The law allows forty-five (45) days from the first working day on which the employee returns to work (RTW) to begin using any balance of the full 45 days. However, COP days used must be continuous if COP goes beyond forty-five (45) days. Once disability stops beyond the forty-five (45) days the employee loses all remaining COP days, but is entitled to claim compensation for time loss.

b. Counting COP - in counting COP days, one must use calendar days not work days. This includes holidays and weekends (or days off). Two things are important to remember, (1) only days are counted (e.g. if one hour is used to see a physician and seven hours are worked, it is still counted as one day of COP); and (2) the time loss must be certified by a physician as being a result of the job related injury.

NOTE: In rare instances, an employee may have claims in two (2) separate injuries. COP is calculated for each injury. One COP period is not added to another.

c. Charging Time Loss to Employee Time and Leave Records.

(1) COP cannot be charged until after the Date of Injury (DOI).

(2) COP must be charged in one (1) day increments.

(3) Time Sheet should reflect actual time worked and COP hours taken in remarks.

(4) Time sheet should also reflect 8-hour charges to weekend, holiday or day off to COP days; however, in the total column, a maximum of 80 hours should be listed.

(5) AGO Form 102 - Administrative Leave for Traumatic Injury- Complete in original and four copies; submit original and two copies to NGMS-HRT-ER for approval and signature); one copy with T&A Report; and retain one copy for your records. (Complete each pay period if time lost is involved until employee returns to duty or 45 days administrative leave (COP) is exhausted).

d. Light Duty Assignment.

(1) An employee may be charged COP when assigned to light duty because of a job-related injury if the job is:

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e/ COP is taxable and all regular deductions (health, life insurance, etc) are taken from the normal check. However, if the employee is injured before the official workday begins and if time is lost that day, the first day of COP is the DOI beginning at the start of the official workday. In other words, the first day of COP is the first full day of disability providing it takes place within forty-five (45) days of the injury. In cases where there is no immediate time loss, the first time loss following the DOI, which is due to the injury is the first day of COP. Additionally the regulations state that the first day of COP must be taken within forty-five (45) days from the DOI. Otherwise, the employee would not be eligible to take COP (NOTE: This does not mean that the employee loses eligibility for compensation, but rather just COP entitlement).

- (a) Assigned the employee by personnel action;
- (b) A bonafide position with a job description;
- (c) Classified at lower pay level than the pay level of the job the employee held when injured;
- (d) If the employee is assigned to a lower grade or rate of basic pay by a personnel action, or;
- (e) If the schedule of work is changed, which causes a loss of salary or premium pay (e.g. Sunday pay or night differential) when authorized as a part of employee's normal workweek.

NOTE: An employee may not be charged COP if an agency assigns that employee to limited or light duty in absence of a personnel action.

10-8. Controversion of COP.

a. The Form CA-1 indicates that the official superior of the injured employee has the right to "controvert" COP. Controversion is the option of the employee's supervisor to oppose COP, generally on the basis of at least one of the following nine (9) categories: (See note below)

- (1) Disability results from an occupational disease or illness;
- (2) The employee is excluded by 5 U.S.C. 8101 (1) B or E (unpaid volunteers);
- (3) The employee is neither a citizen nor a resident of the United States or Canada;
- (4) The injury occurred off the employing agency's premises and the employee was not involved in official "off premise" duties;
- (5) The injury was caused by the employee's willful misconduct, intent to bring about injury or death of self or another person, or was proximately caused by employee's intoxication;
- (6) The injury was not reported on Form CA-1, within 30 days following the injury;
- (7) Work stoppage first occurred 45 days or more following the injury;
- (8) The employee initially reported the injury after his/her employment has terminated; or
- (9) The employee is enrolled in the Civil Air Patrol, Peace Corps, Youth Conservation Corps, Work-Study Programs or other similar groups.

NOTE: The Supervisor may only oppose COP; OWCP makes the final determination for eligibility for COP. The OWCP office will accept reasons other than the 9 given in the Federal Regulations only when the agency submits documented facts with sound reasons for recommended action. In the meantime an agency must continue COP. (Reasons for controversion are also listed in the instructions attached to the CA-1 Form).

b. Termination of COP after initially approving COP: When pay is continued after an employee stops work due to a traumatic disabling injury, such pay shall later be terminated if:

- (1) Within 10 calendar days after the date that an employee submits a claim for continuation of Pay (including a recurrence of disability), the agency has not received medical evidence that the employee sustained a job-related traumatic disabling injury. Pay may, however, be continued in the absence of such evidence, if the agency's investigation shows that the employee sustained a disabling traumatic injury.

- (2) The agency receives evidence, which shows that the employee is capable of return to regular duty.
- (3) The agency receives evidence which shows that the employee is capable of performing light duty, and the employee refuses to perform light duty which has been found suitable for him or her and has been offered to the employee in writing.
- (4) The employee's scheduled period of employment expires, and the employee sustains an injury after receiving written notice of the date of termination. In this case, COP would stop on the effective date of termination of employment.
- (5) OWCP tells the agency to stop COP.
- (6) The 45 day maximum period for COP expires.

10-9. Dual Benefits. Civil Service Annuity and Compensation. As a general rule, a person may not concurrently receive compensation from OWCP and retirement or survivor annuity from the Civil Service Commission. The injured employee or beneficiary may elect to receive the more advantageous benefits.

10-10. Compensation.

- a. Compensation based on loss of wages is payable, subject to the waiting days, after the 45th day for traumatic injuries, or from the beginning of pay loss in all other types of injuries.
- b. Compensation may not be paid while an injured employee receives pay for leave. The employee has the right to elect whether to receive pay for leave or to receive compensation.

10-11. Exclusiveness of Remedy. A federal employee who is injured while in the performance of duty has no right to recover damages from the United States for the effects of the injury except through the FECA. The benefit provided by the Act constitutes the exclusive remedy for work-related injuries or death.

10-12. Representation. A claimant may be represented by a Federal Union Official or other individual on any matter pertaining to an injury or death occurring in performance of duty. Such representation should be authorized in writing by the claimant. No claim for legal services or for other services rendered in respect to a cases claim or award of compensation, shall be valid unless approved by OWCP.

10-13. Occupational Disease Cases. The 45 day continuation of pay is not applicable in occupational disease cases. The employee may elect sick or annual leaves pending adjudication of the claim by the OWCP.

ANNEXES A THRU T TO CHAPTER 10

(FEDERAL EMPLOYEE'S COMPENSATION PROGRAM)

- Annex A -How to Handle an On-the-Job Injury
- Annex B - Responsibility of Injured Technician
- Annex C - Responsibility of Supervisor
- Annex D -Disability Compensation/Light Duty Assignment
- Annex E - Basic Forms and Definitions
- Annex F - Type Injury and Source Code
- Annex G -Form CA-1, Federal Employee's Notice of Traumatic Injury and Claim for Continuation of Pay / Compensation
- Annex H -Form CA-2, Notice of Occupational Disease and Claim for Compensation
- Annex I - Form CA-2a, Notice of Employee's Recurrence of Disability and Claim for Pay / Compensation
- Annex J - Form CA-3, Report of Termination of Disability and/or Payment
- Annex K -Form CA-5, Claim of Compensation by Widow, Widower, and/or Children.
- Annex L - Form CA-6, Official Supervisor's Report of Employee's Death
- Annex M- Form CA-7, Claim of Compensation on Account of Traumatic Injury or Occupational Disease
- Annex N -Form Ca-8, Claim For Continuing Compensation On Account Of Disability
- Annex O - Form CA-16, Authorization for Examination and/or Treatment
- Annex P - Form CA-17, Duty Status Report
- Annex Q -Form CA-20, Attending Physician Report
- Annex R -Form CA-20a, Attending Physician Supplemental Report
- Annex S - Health Insurance Claim Form
- Annex T - AGO Form 102, Administrative Leave for Traumatic Injury

HOW TO HANDLE AN ON-THE-JOB INJURY

As a minimum, the following procedures must be used when a technician sustains an on-the-job traumatic disabling injury and elects to use Continuation Of Pay (COP):

- a. When the technician receives an on-the-job injury, the technician must immediately give notice of the injury to his/her supervisor. CA Form 1 is used for this purpose. The notice of injury may be given by someone else if the injured technician is unable to do so.
- b. The supervisor will immediately authorize medical treatment using CA Form 16, and advise the technician of his/her right to use COP, sick, annual or LWOP. For the initial medical evaluation, the technician should be encouraged to use the services of the nearest U.S. medical officer or hospital. If none is available, any duty qualified physician or hospital will be used. NOTE: No leave is charged for the first day of injury if the technician is required to remain off the job.
- c. If a supervisor challenges or refutes a technician's claim of on-the-job injury, the supervisor must attach a narrative statement to the CA Form 1 explaining why he or she believes the claim should be denied. Even though a supervisor may challenge or refute a claim for compensation, the supervisor can not terminate the use of COP unless it fits one of the criteria listed in MSNG SPR section 10-8, the technician returns to light duty, or is found to be medically qualified to perform the full range of his/her assigned duties.
- d. If the treating physician determines that based on the nature of the injury, the technician will not be able to return to work, the supervisor must immediately forward a CA Form 17 (Duty Status Report) and a copy of the technician's position description and performance standards to the treating physician. The CA 17 is used to obtain interim medical reports concerning the technician's medical condition and the earliest date the individual will be able to return to work.
- e. If the treating physician indicates that the technician is physically able to return to work, the supervisor will notify the individual that he or she must report for duty at the next scheduled work day. The technician is to be advised that refusing to do so will result in an overpayment and may lead to a disciplinary or adverse action under the provisions of TPR 752.
- f. If the treating physician determines that the technician can perform limited, light duty work, the supervisor will notify the technician that he or she must return to work at the next scheduled workday. Care must be taken to ensure that the duties being performed are in accordance with the restrictions imposed by the physician.
- g. Supervisors must notify the HRO whenever an injured technician performs military duty (service schools, drills, annual training, etc.) while the individual is on COP or compensation. The HRO is responsible for providing OWCP written notification to this effect.

RESPONSIBILITY OF INJURED TECHNICIAN
(Procedures for Filing Federal Employee's Compensation Claims)

1. Traumatic Injury Case:

- a. When an employee sustains a traumatic, disabling injury in the performance of duty, the employee or someone acting on his/her behalf must give a written report on a Form CA-1 to his/her supervisor within 30 days from the DOI. It must be shown on the form whether the employee wishes to receive sick or annual leave or request continuation of pay (COP) for the period of disability.
- b. Upon reporting the injury, the employee will be authorized to obtain medical treatment if required. If treatment is obtained, the employee must inquire from the treating physician the earliest date that he/she is able to return to work and so advise the supervisor.
- c. If, during the 45 days period, the treating physician indicates the employee is able to return to work but he/she refuses to do so, the continued absence from work will result in an overpayment. The period of absence from the job, which resulted in an overpayment, will be determined by the OWCP in the course of adjudication of the claim. The supervisor and the employee will be notified of the period of disability, which is approved by OWCP and the supervisor may then require the employee to resolve any overpayment.
- d. After 30 days of COP and if medical evidence shows disability is expected to continue beyond 45 days and compensation is desired after expiration of the period, Forms CA-7 and CA-20 must be completed and forwarded to HRO before the expiration of the 45 days.

2. Occupational Disease Cases: For a non-traumatic injury or disease which is alleged to be job related, an injured employee or someone acting on his/her behalf must give notice of injury or disease and file claim for compensation for disability within the time specified by the compensation law. Form CA-2 will be provided by the supervisor for this purpose. The 45 days continuation of pay (COP) is not applicable in non-traumatic injuries. Forms must be filed with the OWCP specialist, NGMS-HRO-ER who will submit the claim to OWCP Regional Office. The employee claiming benefits must therefore submit any other reports and proof that the OWCP may require, thru HRO.

3. Medical Care:

- a. The injured employee has the option to initially select a duly qualified private physician or hospital in the area. This area is defined as within 25 miles of the employing establishment or the employee's home. The physician selected should be contacted by telephone if at all possible to determine if the physician is available and will accept the employee for treatment. If not, the employee must select another qualified physician. Should the employee wish to change physicians after the initial choice, the OWCP must be contacted for approval, through HRO office, prior to treatment.
- b. The term physician includes surgeons, osteopathic practitioners, podiatrists, dentist, clinical psychologists, optometrists, and chiropractors within the scope of their practice as defined by State Law. The term physician includes chiropractors only to the extent that their reimbursable services are limited to treatment consisting of manual manipulation of the spine to correct an abnormal subluxation as demonstrated by x-ray to exist and subject to regulation by the Secretary of Labor. (NOTE: If this cannot be determined, and x-rays have not been utilized the employee is responsible for payment of services, and OWCP will not honor this claim). Naturopaths, faith healers, and other practitioners of the healing arts are not recognized as physicians within the meaning of the law.

4. Emergency Treatment: In cases of Traumatic Injury where emergency treatment is necessary, the supervisor may contact the nearest qualified physician or hospital for initial treatment. Any necessary further treatment shall be obtained as soon as possible at the employee's option from (1) the hospital; (2) the physician who provided the emergency treatment; or (3) another qualified local physician of his/her choice.

RESPONSIBILITY OF SUPERVISOR

(Procedures for Filing Federal Employees' Compensation Claims)

1. Traumatic Injury Cases:

- a. Upon receiving notice that an employee has sustained a job-related traumatic injury, the supervisor will promptly authorize medical care. Form CA-16 (Request for Examination and/or Treatment) should be issued to any duly qualified physician or hospital of the employee's choice. If oral authorization for treatment is given by the supervisor, Form CA-16 should be issued within 48 hours thereafter. The supervisor or employee should request the physician or hospital to complete part "B" of the Form CA-16 as soon as possible and return it to the HRO office for processing. When Form CA-16 is initiated, the HRO office will be furnished a copy.
- b. **Emergency Treatment:** In cases of traumatic injury where emergency treatment is necessary, the supervisor may contact the nearest qualified physician or hospital for initial treatment. Animal bites and eye injuries are among the conditions considered to be medical emergencies. Any necessary further treatment shall be obtained as soon as possible at the employee's option from (1) the hospital, or (2) the physician who provided the emergency treatment or (3) another qualified local physician of his/her choice. It is the duty of the supervisor to authorize initial adequate medical treatment for acute injuries exclusive of disease.
- c. Provide the employee with Form CA-1 for reporting the injury and upon receipt of the completed forms send immediately to the OWCP Specialist, HRO within 10 days.
- d. Advise the employee of the right to elect continuation of regular pay (COP) or use annual or sick leave, if the injury is disabling.
- e. Form CA-1 fully completed by both employee and supervisor together with all other pertinent information and documents must be forwarded to the OWCP Specialist, HRO, not later than ten (10) days after receipt of the form from the employee.
- f. Report all injuries, whether requiring medical attention or not on Form CA-1 within the time limits required. Forms CA-1 on injuries not requiring medical attention will be filed in a Medical Records File for future reference.
- g. **Duty Status Report - CA 17, Duty Status Report,** is completed if the treating physician determines that based on the nature of the injury, the technician will not be able to return to work. The supervisor must immediately forward a CA Form 17 and a copy of the technician's position description and performance standards to the treating physician. The CA-17 is used to obtain interim medical reports concerning the technician's medical condition and the earliest date the individual will be able to return to work. Completed forms should be sent to the HRO.
- h. **Termination of Disability Pay or Return to Work:** The supervisor is required to notify HRO when the injured employee returns to work or disability ceases.
- i. **AGO Form 102 - Administrative Leave for Traumatic Injury -** Completed in original and four copies; submit original and two copies to NGMS-HRT-ER for approval and signature; one copy with T&A Report; and retain one copy for your records. (Complete each pay period if time lost is involved until employee returns to duty or 45 days administrative leave (COP) is exhausted)

2. Recurrence of Disability:

- a. A recurrence of an injury is defined as occurring when the same injury causes additional time loss from the job. Perhaps the best way to distinguish a recurrence from a new injury is to cite two examples: A man who has injured his knee and already claimed for a traumatic injury, returns to work and subsequently falls

down and injures the same knee. This would be a new injury. However, if the man returns to work and subsequently develops pain to the same knee with no apparent reason or cause other than the previous injury or condition this would be classified as a recurrence, if additional time is lost. The important criterion here is that there is no single event, action, or apparent reasons for the pain except the previous injury.

b. It should be clarified that follow-up medical care for a traumatic injury or disease which causes time loss is not considered a recurrence, but part of the original injury. Unless the claimant has been permanently released from further treatment, time loss is attributable to the original injury and claimed as such.

c. The form used with recurrences is the CA-2a and CA-7's (if not previously filed). CA-20's may be used later. New injuries would require the CA-1 or CA-2.

d. One important element of recurrences is if there is a recurrence of a traumatic injury which causes additional time loss within 45 days of the first day the employee returns to work following the original injury and the person has remaining days of Continuation of Pay (COP) available, the person is eligible to use the remaining days.

e. Note: A doctor's statement is needed to verify the recurrence.

3. Occupational Disease Cases:

a. Upon receiving notice that an employee has sustained an Occupational Disease, the supervisor should contact the HRO for instructions.

b. Provide the employee with Form CA-2 for reporting the occupational disease, and upon receipt of the completed form forward it to HRO along with other documents required for that Occupational Disease.

c. NOTE: The 45 day Continuation of Pay (COP) is not applicable in Occupational Disease cases.

DISABILITY COMPENSATION/LIGHT DUTY ASSIGNMENT

When a technician loses wages due to an on-the-job injury or illness, the individual is entitled to compensation. Compensation is payable at the rate of $66 \frac{2}{3}$ percent when there are no dependents and 75 percent of salary if there are dependents. These benefits are paid until the technician is determined to be no longer disabled by OWCP or until death. In order to reduce the charge back cost for compensation claims, the following procedures must be used when a technician files a claim for "compensation."

- a. When medical evidence shows that an injured technician's disability will continue beyond the 45 days of COP and the technician files for compensation (a claim for compensation must be filed within 3 years of the injury) the supervisor must submit a CA Form 17 (Duty Status Report) to the treating physician to obtain a medical evaluation concerning whether the technician is totally disabled or is medically capable of performing limited light duties.
- b. If the physician determines that the technician can perform light duty, the supervisor will immediately contact the HRO to determine the availability of a position within the commuting area. (The position can either be at the same or lower grade). If such a position is available the HRO will notify the technician and OWCP in writing of the availability of the position and make a job offer to the technician. If the job offer is considered to be suitable by OWCP and the technician refuses the offer, the HRO will notify OWCP. OWCP will determine whether the refusal is a basis for terminating compensation benefits.
- c. If a funded position is not available in the commuting area, the supervisor, in cooperation with the HRO and the servicing classification activity, will modify the existing position description to reflect the restrictions imposed by the injury if management determines that restructuring the position description will not adversely impact mission accomplishment. The supervisor, through the HRO, should notify the technician of the availability of the modified position and at the same time notify OWCP. Final determination concerning the suitability of the job offer is the responsibility of OWCP.
- d. If the technician accepts the position, the HRO will notify OWCP at the earliest time possible of the date the technician returned to duty. Compensation benefits will be terminated or adjusted as of the date of return to duty. To avoid overpayment of compensation, the HRO should notify OWCP by telephone no later than close of business on the first day of return to duty.
- e. In all cases regarding a job offer, OWCP must be notified. Upon receipt of the job offer, OWCP will promptly evaluate the position to determine whether it is within the medical restrictions imposed by the technician's physician. If determined to be a suitable offer OWCP will notify the technician and the HRO in writing that the offer is found to be within the medical restrictions imposed and that the technician is expected to accept the position. Failure to accept the position may result in termination of compensation.

BASIC FORMS AND DEFINITIONS

Form No.	Form Name	Person Who Provides Information	Time Frame
CA-1	Notice of Traumatic Injury and Claim for Continuation of Pay/Compensation.	Employee or someone acting on employee's behalf; witness (if any)	<p>1. Within 48 hours of the traumatic injury or justification must be given.</p> <p>2. Within 30 days of the injury, in order to qualify for COP.</p> <p>3. Within 3 years of the date of injury in order to qualify for COP.</p>

		Supervisor	As soon as possible upon receiving form from employee. When COP is involved it should be submitted within 10 days of the date of injury.
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CA-2	Notice of Occupational Disease and Claim for Compensation	Employee or someone acting on employee's behalf; witness (if any)	Within 3 years of the date when employee first became aware that there is a casual relationship between the disease and one's employment or the date of last exposure (whichever is later).

		Supervisor	As soon as possible upon receiving form from employee.

Form No.	Form Name	Person Who Provides Information	Time Frame
CA-2a	Notice of Employee's Recurrence of Disability and Claim for compensation.	Employee or someone acting on employee's behalf; witness (if any).	As long as the original claim was filed within three years of date of injury, there is no time limit in filing for a recurrence.
		Supervisor	As soon as possible upon receiving form from employee.
CA-7	Claim for Compensation on Account of Occupational Disease	Employee or someone acting on employee's behalf; witness (if any).	<p>1. Minimally, the employee must wait until beyond the 3-day waiting period while in LWOP status. The earliest file would be the 4th day in LWOP status.</p> <p>2. There is maximum time limit.</p> <p>3. Usually filed after 14 days has passed, so that 3-day waiting period can be compensated.</p>
CA-4 CHANGED TO CA-7 for both traumatic Injury and Occupational Disease			
		Supervisor	As soon as possible upon receipt of form from employee.
CA-5 (Form issued by OWCP office on case by case bases)		Spouse/Dependent	When there is no previous injury/disease associated with death (death is immediate), the spouse or dependent has 3 years from the date of death to apply.
CA-7	Claim for Compensation on Account of Traumatic Injury		Same as for CA-7.

Form No.	Form Name	Person Who Provides Information	Time Frame
CA-16 or CA-20	Request for Examination and/or Treatment	Physician	No time limit is involved but the employee should be aware that medical certification of disability must be in the hands of the OWCP office before any compensation benefits are awarded (even those on an approved claim).
		Supervisor	Submit within 4 hours of traumatic injury.
CA-17	Duty Status Report	Compensation Office	<p>1. During COP period they should be sent to the physician on the average of every 2 weeks.</p> <p>2. In the case of a doubtful or disputed claim, this can be sent more frequently.</p>
OWCP Form 1500a	Federal Employee's Compensation Program Medical Provider's Claim Form	Physician	No time limit is involved. However, the Physician's must be submitted on this form of payment.

TYPE INJURY AND SOURCE CODES

100 STRUCK

- 110 Struck By
- 111 Struck By Falling Object
- 120 Struck Against

200 FELL, SLIPPED, TRIPPED

- 210 Fell On Same Level
- 220 Fell On Different Level
- 230 Slipped, Tripped (No Fall)

300 CAUGHT

- 310 Caught On
- 320 Caught In
- 330 Caught Between

400 PUNCTURED LACERATED

- 410 Punctured By
- 420 Cut By
- 430 Stung By
- 440 Bitten By

500 CONTACTED

- 510 Contacted With (Injured Person Moving)
- 520 Contacted By (Object Was Moving)

600 EXERTED

- 610 Lifted, Strained By (Single Action)
- 620 Stressed By (Repeated Action)

700 EXPOSED

- 710 Inhaled
- 720 Ingested
- 730 Absorbed

800 TRAVELING IN

999 INSUFFICIENT DATA

TYPE INJURY AND SOURCE CODES

<u>0100</u>	<u>BUILDING OR WORKING AREA</u>	<u>0600</u>	<u>DUST, VAPOR, ETC.</u>
0110	Walking/Working Surface (Floor, Street, Sidewalks, Etc.)	0610	Dust (Silica, Coal, Etc.)
0120	Stairs, Steps	0620	Fibers
0130	Ladder	0621	Asbestos
0140	Furniture, Furnishings, Office Equipment	0630	Gases
0150	Boiler, Pressure Vessel	0631	Carbon Monoxide
0160	Equipment Layout (Ergonomic)	0640	Mist, Steam, Vapor, Fume
0170	Windows, Doors	0650	Particles (Unidentified)
0180	Electricity	<u>0700</u>	<u>CHEMICAL, PLASTIC, ETC.</u>
<u>0200</u>	<u>ENVIRONMENTAL CONDITION</u>	0710	Dry Chemical
0210	Temperature Extreme (Indoor)	0711	Corrosive
0220	Weather (Ice, Rain, Heat, etc)	0712	Toxic
0230	Fire, Flame, Smoke, (Not Tobacco)	0713	Explosive
0240	Noise	0714	Flammable
0250	Radiation	0720	Liquid Chemical
0260	Light	0721	Corrosive
0270	Ventilation	0722	Toxic
0271	Tobacco Smoke	0723	Explosive
0280	Stress (Emotional)	0724	Flammable
0290	Confined Space	0730	Plastic
<u>0300</u>	<u>MACHINE OR TOOL</u>	0740	Water
0310	Hand Tool (Powered: Saw, Grinder, etc)	0750	Medicine
0320	Hand Tool (Non-Powered)	<u>0800</u>	<u>INANIMATE OBJECT</u>
0330	Mechanical Power Transmission Apparatus	0810	Box, Barrel, Etc.
0340	Guard, Shield (Fixed, Moveable, Dead man)	0820	Paper
0350	Video Display Terminal	0830	Metal, Item, Mineral
0360	Pump, Compressor, Air Pressure Tool	0831	Needle
0370	Heating Equipment	0840	Glass
0380	Welding Equipment	0850	Scrap, Trash
<u>0400</u>	<u>VEHICLE</u>	0860	Wood
0410	Privately -Owned (Includes Rental)	0870	Food
0411	As Driver	0880	Clothing, Apparel, Shoes
0412	As Passenger	<u>0900</u>	<u>ANIMATE OBJECT</u>
0420	Government-Owned	0910	Animal
0421	As Driver	0911	Dog
0422	As Passenger	0912	Other
0430	Common Carrier (Airline, Bus, Etc.)	0920	Plant
0440	Aircraft (Not Commercial)	0930	Insect
0450	Boat, Ship, Barge	0940	Human (Violence)
		0950	Human (Communicable Disease)
		0960	Bacteria, Virus (Not Human Contact)

TYPE INJURY AND SOURCE CODES Cont.

<u>0500</u>	<u>MATERIAL HANDLING EQUIPMENT</u>	<u>1000</u>	<u>PERSONAL PROTECTIVE EQUIPMENT</u>
0510	Earthmover (Tractor, Backhoe, etc.)	1010	Protective Clothing, Shoes
0520	Conveyor (For Material and Equip.)		Glasses, Goggles
0530	Elevator, Escalator, Personnel Hoist	1020	Respirator, Mask
0540	Hoist, Sling Chain, Jack	1021	Diving Equipment
0550	Forklift, Crane	1030	Safety Belt, Harness
0560	Hand truck, Dolly	1040	Parachute
		<u>9999</u>	<u>INSUFFICIENT DATA</u>