

WORKERS COMPENSATION

Information Guide for Federal Employees When Injured at Work

Introduction

The Federal Employees Compensation Act (FECA) is administered by the Office of Workers' Compensation Program (OWCP) of the U.S. Department of Labor. It provides compensation benefits to civilian employees of the United States for disability due to personal injury sustained while in performance of duty or to employment related disease. The FECA also provides for the payment of benefits to dependents if a work-related injury or disease caused an employee's death. Benefits cannot be paid if the injury or death is caused by willful misconduct.

WHAT TO DO....

- Report the injury to your supervisor even if the injury is minor.
- Seek medical assistance immediately, if necessary
- For traumatic injuries, obtain Form **CA-16** (Authorization for Examination and/or Treatment) from your supervisor or authorized personnel to authorize medical treatment and request a copy of your initial medical documentation from your physician. Ensure all medical documents are signed by a medical doctor. Where there is no time to complete Form CA-16, your supervisor may authorize medical treatment by telephone and send the completed form to the medical facility within 48 hours. The Form CA-16 cannot be used for "Occupational Disease/Illness Claims".

What are the basic rules for authorizing emergency medical care?

*The employer shall issue Form CA-16 within 4 hours of the claimed injury. If the employer gives verbal authorization for such care, he or she should issue a Form CA-16 within 48 hours. The employer is **NOT** required to issue a Form CA-16 more than one week after the occurrence of the claimed injury. Ref: 20 CFR Sec. 10.300 **Note: Only one CA-16 issued per injury***

- In traumatic injuries, initiate Form CA-1 and **MUST** complete the employee's portion electronically thru SMIS at <https://www.smis.doi.gov> as soon as possible

but no later than 30 days from the date the traumatic injury occurred. Use Form CA-2, if disability resulted from an occupational illness/disease.

- If disabled due to a traumatic injury, you may use annual/sick leave or **Continuation of Pay (COP)** for up to 45 calendar days (includes weekends and holidays) of wage loss due to disability and/or medical treatment. **Utilizing COP is intended to avoid interruption of pay while the case is being adjudicated if you are NOT able to return to work. In order to be eligible for COP, you MUST provide medical evidence showing that you are disabled for work because of effects of the injury. YOU ARE RESPONSIBLE FOR ENSURING THAT SUCH MEDICAL EVIDENCE IS SUBMITTED WITHIN 10 CALENDAR DAYS OR COP MAY BE TERMINATED.** Occupational Illness/Disease Claims are NOT eligible to receive COP.
- Where disability continues after COP ends, compensation is claimed on Form CA-7 to be compensated by Department of Labor. Be sure to include medical evidence supporting disability for all periods claimed that you are still disabled for work. **Other option is to use Sick leave (S/L) or Annual leave (A/L).**

Medical Authorization

OWCP must approve in **ADVANCE** any surgery or procedure other than emergency surgery (that is, a procedure which must be performed right away to preserve life, function of an organ or body part) to guarantee payment. Your provider should contact OWCP via telephone @ **1-866-335-8319 for authorization at least 30 days before the intended date of the procedure.** OWCP will advise and determine whether OWCP can pay the requested procedure. To guarantee payment, some form of medical procedures should be approved by OWCP in **ADVANCE.** Your provider can contact OWCP via telephone @ **1-866-335-8319.**

Such forms of procedures include:

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|---------------------------|--|
| (1) Physical therapy | (5) Private hospital bed |
| (2) Non-emergency surgery | (6) Orthopedic appliances and shoes |
| (3) MRI | (7) Hearing aids and lip reading |
| (4) Nursing home care | (8) Hearing and seeing-eye dog service |
| (9) Cortisone shots | |

Physical Therapy

If your injury requires physical therapy, OWCP can authorize it for 120 days from the date of injury. If it goes beyond 120 days, pre-authorization is required.

Changing Physician

If you wish to change physicians from the initial choice, you **MUST** request approval from OWCP. Send letter stating your reasons for wanting this change, along with the name, address and specialty of the physician to whom you wish to change. OWCP will advise you of their decision in this matter.

Chiropractic Care

Ref. 20 C.F.R. Part 10 Sec. 10.311

(a) The services of chiropractors that may be reimbursed are limited by the FECA to treatment to correct a spinal subluxation. The costs of physical and related laboratory tests performed by or required by a chiropractor to diagnose such a subluxation are also payable.

(b) In accordance with 5 U.S.C. 8101(3), a diagnosis of spinal “subluxation as demonstrated by X-ray to exist” must appear in the chiropractor’s report before OWCP can consider payment of a chiropractor’s bill.

(c) A chiropractor may interpret his or her x-rays to the same extent as any other physician. To be given any weight, the medical report must state that x-rays support the finding of spinal subluxation. OWCP will not necessarily require submittal of the x-ray, or a report of the x-ray, but the report must be available for submittal on request.

(d) A chiropractor may also provide services in the nature of physical therapy under the direction of a qualified physician.

The “**subluxation**” is defined as an incomplete dislocation, off-centering, misalignment, fixation or abnormal spacing of the vertebrae anatomically which must be demonstrable on any X-ray film to individuals trained in the reading of X-rays.

If a Form CA-16 is issued to a chiropractor for emergency care and the condition diagnosed is other than a subluxation, OWCP will honor the charges incurred and terminate the authority of Form CA-16. In this situation the employee is entitled to select another attending physician, who will need to submit a report substantiating the condition found in order for the claim to be accepted.

Coding Time Sheets

Day of Injury – use code 060

Weekdays – use code 160

Weekends – use code 161

Note: OWCP will compensate an injured worker for up to 4 hours a day to go to a Doctor's appointment, physical therapy, etc

Please fax any medical documentation to the attention of Annie Banks to Fax number (208) 334-1565 and she will submit the documentation to the DOL. You can reach Annie via email at annabella_banks@ios.doi.gov or by phone (208) 334-1555.