

# **CHAPTER 13**

# **FEDERAL EMPLOYEES**

# **COMPENSATION ACT**

NOTE: This chapter should be read in conjunction with local activity instructions and with any negotiated agreements between your activity and an exclusively recognized labor organization. Contract language will take precedence over conflicting provisions in this manual. Areas of uncertainty should be discussed with the Human Resources Office.

## INJURY COMPENSATION PROGRAM

### 1. PURPOSE

The Federal Employees' Compensation Act (FECA) provides compensation for wage loss and medical expenses for employees who suffer work-related injuries or illnesses (e.g., back injuries, hearing loss, strained muscles). Federal workers have no other administrative means to recover damages from the government for the effects of an injury except through the FECA. The U. S. Department of Labor, Office of Workers' Compensation Program (OWCP) administers the FECA. The OWCP adjudicates all claims, pays wage loss compensation benefits directly to employees and pays medical bills to the providers. These costs are then billed to activity heads via Navy headquarters commands each year. Activity heads can control these costs by reducing the number of workplace accidents through enhanced safety awareness and by returning injured employees to work.

### 2. DEFINITIONS

#### **CONSEQUENTIAL INJURY**

An injury which occurs as a consequence of the claimed occupational traumatic injury or occupational disease. (For example, injuries resulting from an automobile accident on the way to or from medical treatment for the occupational disease or traumatic injury would be considered a consequence of the initial injury.)

#### **CONTINUATION OF PAY (COP)**

A period of 45 calendar days during which an employee who sustained a traumatic injury is entitled to the continuation of their regular pay with a doctor's medical note.

#### **CONTROVERSION**

An action by the employer to dispute an employee's claim for Continuation of Pay (COP).

#### **DEPENDENT**

The following are considered dependents for compensation purposes:

- A wife or husband residing with the employee or receiving regular support payments from him or her, whether court-ordered or not.
- An unmarried child who is under the age of 18 and who lives with the employee or who receives regular contributions of support from him or her.
- An unmarried child who is over the age of 18 and incapable of self-support due to physical or mental disability.
- An unmarried child between 18 and 23 years of age, who is a student and who has not completed four years of post-high school education, and who is regularly pursuing a full-time course of study.
- A parent who is wholly dependent upon and supported by the employee.

#### **OCCUPATIONAL ILLNESS OR DISEASE**

A condition produced by systemic infections, continued or repeated stress or strain, exposure to toxins, poisons, fumes, etc., or other repeated exposures to conditions of the work environment (e.g., hearing loss).

#### **PRIVATE MEDICAL DOCTORS**

Surgeons, podiatrists, dentists, clinical psychologists, optometrists, chiropractors and osteopathic practitioners within the scope of the practice as defined by state law. Chiropractic services, however,

are limited to treatment consisting of manual manipulations of the spine to correct a sub-luxation (incomplete or partial dislocations) as demonstrated by x-ray to exist.

### **RECURRENCE**

The spontaneous return or increase of disability due to a previous injury or occupational disease without intervening cause, or a return or increase of disability due to a consequential injury.

### **SCHEDULE AWARD**

Compensation for the permanent loss of or loss of use of specified parts of the body when such loss is caused by an on the job injury accepted by OWCP. A schedule award is paid when the medical evidence shows that the scheduled part of the body has reached maximum medical improvement. Like wage loss compensation, the award is paid at two-thirds or three-quarters of the employee's pay rate. No other wage loss compensation can be paid during the period of the schedule award.

### **TRAUMATIC INJURY**

A wound or other condition of the body caused by external force, including stresses or strain. The injury must be identifiable as to time/place of occurrence and member or function of the body affected and be caused by a specific event or incident or series of events or incidents within a single day or work shift.

### **WAGE LOSS COMPENSATION**

The money paid to employees or their dependents for lost wages due to occupational injury/disease or death.

## **3. RETURN TO WORK PROGRAM**

- a. It is the Navy's policy to control occupational injury costs by employing injured workers. Partially disabled employees are required to return to duty when possible.
- b. **Light Duty**
  - 1) Although it is the responsibility of the physician to determine an employee's physical limitations and to advise management with regard to the types of duties an employee can perform, supervisors are responsible for determining whether an employee can be offered light duty.
  - 2) All possible efforts must be made to accommodate injured workers in a position or assignment compatible with medical restrictions. If no light duty is available within the work unit, another suitable assignment may be sought within or outside the activity in the same commuting area.
  - 3) Injured employees are responsible for cooperating with accommodation efforts throughout all phases. This includes:
    - a) Providing to the private treating physician the limited duty availability letter. The letter to be completed by the physician is provided by the HRO Employee Services Office which includes a CA-17 and CA-20 form.
    - b) Providing appropriate medical information to the Branch Clinic when care is provided by a private treating physician, which would include an employee's diagnosis, prognosis, and/or work limitations.

- c) Reporting to the shop or code after each visit to the Branch Clinic.
  - d) Accepting limited duty, as assigned, when determined to be within physical limitations established by the Branch Clinic.
  - e) Informing supervisor when assigned limited duty task is beyond designated physical limitation.
  - f) Returning to the Branch Clinic for re-examination upon the expiration of limitations indicated on the Report of Physical Limitations, NH BREM 6100/1 (Ref. 8-85), or when physical limitations change.
- 4) The Injury Compensation Program Administrator, HRO, will be notified when an employee is denied light duty. If medical restrictions are not due to a job-related incident, the employee may be placed on leave or leave without pay, if requested, following activity policy for such a requested absence.

**c. Pipeline Program (A reemployment initiative designed to re-employ disabled employees by providing over hire and civilian pay authority to immediately reemploy partially recovered employees)** should also be considered if an injured worker is on 6 months or more medical restrictions. A job search should be done and a written job offer should be presented to employee.

- 1) Pipeline is funded by the Civilian Personnel Management Service (CPMS) for a period of one year and position can also be funded on work share between 2 employees, 4 hours per day.
- 2) Command should consider a permanent position after 1 year of pipeline funding.

#### 4. BENEFITS

Benefits available to employees who sustain work-related injury or disease are as follows:

a. Initially, claimant is seen by a federal medical facility, and then has the option to choose the federal medical facility or private physician who is licensed to treat the reported injury. If the claimant needs a second option or wants to change his private physician, the employee must apply to OWCP for permission.

**b. Compensation Based on Loss of Wages**

- 1) Subject to a three-day waiting period if absence due to injury is less than 14 days
- 2) Available after expiration of eligibility for Continuation of Pay (COP), or from the beginning of pay loss for occupational disease claims, if incapacitated for duty.
- 3) Amount of compensation payable
  - Two thirds of the compensable pay rate.
  - Three-fourths of compensable pay rate to injured workers with at least one eligible dependent.

- c. **Medical expenses** and other benefits are provided under the FECA. These are paid by OWCP upon acceptance of claim and authorization of medical procedures.
- d. **Continuation of regular pay**
  - 1) Pay continuation up to 45 calendar days for wage loss due to disability and/or medical treatment following traumatic injury.
  - 2) Provision does not apply to disease claims unless it is due to exposure during one day or work shift.
  - 3) **COP Eligibility**
    - Injured employee must report the traumatic injury (form CA-1) within 30 days after the trauma occurred.
    - The injured worker must also provide the employer with medical evidence to support disability from work within 10 workdays after filing the claim.
    - COP is subject to regulatory time limits and all deductions taken from regular pay.
- e. **Buy-back of Leave**
  - An employee who decides to use Sick and/or Annual Leave for injury-related absences may arrange to buy back the used leave and to have it reinstated to their leave account.
  - The costs associated with buying back leave are partially paid by the amount of compensation to which the employee is entitled.
  - The employee pays the balance of the cost of buying back leave. The injured worker or the supervisor of the injured worker should contact the Injury Compensation Program Administrator (ICPA) for further instructions on buying back leave.

## 5. FORMS

There are many forms used in the injury compensation process. Most forms are available on-line at <http://www.dol.gov/esa/regs/compliance/owcp/forms.htm>. Each serves a different purpose as explained below:

- a. **CA-1, Notification of Traumatic Injury**

Should be issued by the supervisor at the time an employee reports a traumatic injury (see definitions, above). Forms can be obtained from the Supervisor, the Customer Services Representative (HRO), or the Safety Office. A receipt for the CA-1 should be given to the employee at the time the form is completed.
- b. **CA-2, Federal Employee's Notice of Occupational Disease and Claim for Compensation**

Is necessary for employees filing an occupational disease or illness claim (e.g. hearing loss, carpal tunnel syndrome). The form CA-2 must be accompanied by supporting documentation outlined on the appropriate CA-35 form. A receipt for the CA-2 should be given to the employee at the time the form is completed.
- c. **CA-2a. Notice of Recurrence of Disability**

If an employee sustains additional disability after returning to work following an initial period of disability, the employee should file a form CA-2a along with the factual and medical evidence noted in the instructions on the form.

- d. CA-7, Claim for Compensation on Account of Traumatic Injury or Occupational Disease**  
Is used to apply for lost wages following the expiration of the COP period, for a schedule award for loss of use of a body member, for leave buyback or for lost elements of wages (such as night shift differential).
- e. CA-16, Authorization for Examination and/or Treatment**  
Can be used to authorize up to 60 days of treatment by the physician of the injured worker's choice. It cannot be used to authorize treatment retroactively nor can it be used to authorize treatment of an occupational disease.
- f. CA-17, Duty Status Report**  
Can be used by the supervisor to tell the treating physician what the actual physical requirements of the employee's job are. The physician can then advise the supervisor whether or not the employee can return to full duty or partial duty with specified work restrictions. This information allows the supervisor to locate suitable work within the appropriate restrictions.
- g. CA-20, Attending Physician's Report**  
Asks the physician for their medical opinion, diagnosis and prognosis.
  - 1) CA-35 a-h, Occupational Disease Checklists**  
Describes detailed medical and factual information to be submitted with the CA-2 by the claimant. Information assists the claims examiner at OWCP develop the claim for adjudication.
  - 2) Dispensary Permit, OPNAV 5100 series**  
If used by the activity, must accompany an employee for all visits to the branch clinic medical facilities. However, in emergencies, do not wait for the form.
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Used by the activity and must accompany an employee for all visits to the branch clinic medical facilities. However, in emergencies do not wait for the form.

## 6. RESPONSIBILITIES

- a. Activity Heads**  
Must reduce compensation and COP costs by returning injured employees to duty as soon as possible. An active Return-to-Work Program, which finds light duty work and/or accommodation of physical and mental handicapping conditions resulting from workplace injuries, is an effective means of achieving this reduction.
- b. Supervisors**
  - 1) Must ensure employees reporting non-traumatic occupational disease/illness conditions contact the Injury Compensation Program Administrator, HRO for filing instructions.
  - 2) Supervisor actions required when dealing with traumatic injuries.
    - a) Get immediate medical attention for injured employee. In emergencies, the supervisor should follow appropriate methods to expedite medical treatment.

- b) Complete the Dispensary Permit form and send the injured employee to a federal medical facility (e.g. Branch Clinic or Naval Hospital emergency room if available) or to a private physician, if requested by the employee, for initial medical review. Following this initial review, the employee may choose treatment by a private physician or hospital, or treatment by the federal medical facility.
  - c) Ensure the injured employee is provided the opportunity to complete form CA-1 as soon as possible after the injury. If the employee is unable, the supervisor or a witness should fill out CA-1 for reporting purposes. Inform the employee of right to elect COP or use leave for absences resulting from the injury. Process the CA-1 in accordance with activity directives. Absent activity directives, the forms should be sent to HRO via the cognizant safety office.
  - d) Investigate all claims of injury or disease and provide information to the Injury Compensation Program Administrator, HRO for potential controversion (opposition) of any unsupportable COP claim.
  - e) Require injured employees to be examined by an activity-designated physician to determine whether continued absence is warranted. See Medical Examinations of Civilian Employees in Chapter 4 Employment for further instructions.
  - f) **Leave Without Pay (LWOP)**
    - (1) If COP is exhausted, and the employee is unable to return to duty, the employee may elect Leave Without Pay (LWOP) to cover the absences. (Sick/Annual Leave may be requested in lieu of LWOP.)
    - (2) If the employee wishes to be carried on LWOP and draw compensation, they must follow the leave procedures (see Chapter 9 Leave) or local instructions issued for granting LWOP for an on-the-job injury. Also, the employee must complete form CA-7 and forward the form to the Injury Compensation Program Administrator, HRO according to policy within the employing activity.
  - g) **Notify the Injury Compensation Program Administrator, HR) when the employee returns to work.** The Program Administrator is required to notify the OWCP of the employee's return to duty.
- c. **Employees**
- 1) Must report any occupational disease/illness to their supervisor. The Injury Compensation Program Administrator, HRO will then provide employees with filing instructions.
  - 2) Employee Responsibilities for reporting traumatic injuries**
    - a) Report the injury to their supervisor immediately.
    - b) In non-emergencies, report to the Branch Medical Clinic or to a private physician for initial treatment/assessment. Following initial review, employees may elect to be treated by a private physician, or elect treatment by a federal medical facility. However, once this choice is made, employees must obtain written approval from the OWCP before a change in physicians may be made, in order for bills to be paid by the Department of Labor.

- c) Complete form CA-1 and process it in accordance with activity instructions. Absent any activity instructions, the form should be given to the employee's supervisor for processing.
- d) Follow leave request procedures (see Chapter 9 Leave) or any local procedures for notifying supervisors of any absences due to the injury.
- e) Report for all scheduled doctor's visits. Make the treating physician aware that limited duty is available at the activity and, unless totally disabled (e.g. bedridden), return to work with any clearly defined medical limitations. Absences for doctor's appointments are limited up to and not to exceed 4 hours per appointment. Absences for a full eight-hour work shift will generally not be authorized, unless the medical facility location is distant and or the doctor authorizes the time loss. Either way, a medical note is required.
- f) Notify the supervisor of their status following each medical appointment. Return to work as soon as released by their treating physician to perform limited or full duty on a part-time or full-time basis. If unable to return to work, notify the Injury Compensation Program Administrator in the Human Resources Office and their supervisor.
- g) If the treating physician indicates that the disability will exceed the eligibility period for COP, notify the supervisor and the Injury Compensation Program Administrator (HRO) immediately. Elect to use either sick or annual leave to cover any absences beyond the 45-day period or elect LWOP and apply for wage loss compensation from OWCP (see Chapter 9 Leave for procedures for requesting LWOP). If LWOP is elected, obtain and complete Sections 1 through 6 of the Form CA-7 and submit the completed form to the immediate supervisor **before the COP expiration** to avoid compensation payment delays.

### **d. The HRO Injury Compensation Program Administrator Responsibilities**

- 1) Process claims within regulatory time frames and assisting injured workers and management to better understand the technical requirements of FECA laws and regulations.
- 2) Review FECA claim cases during the initial post-injury phase to monitor the use of COP and to prevent, where warranted, an injured worker from going onto OWCP compensation rolls.
- 3) Work with managers and supervisors to controvert those claims that in the opinion of management are unjustified in accordance with applicable regulations and OWCP appeals decisions.
- 4) Determine the current status of all injured or disabled workers listed on the quarterly charge-back reports regardless of whether they are on leave without pay or on OWCP compensation rolls.
- 5) Coordinate with managers and supervisors in developing light-duty assignments to permit injured workers to remain on duty.
- 6) Ensure that medical information is current and complete, and that Navy physicians, when obtainable, are effectively involved in all aspects of injury compensation case management including whether any employment-related restrictions are valid.
- 7) Coordinate with medical officers to identify injured workers who are sufficiently rehabilitated to return to meaningful work and coordinating with supervisors/managers to hire them into regular jobs.

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- 8) Create a harmonious working relationship with district OWCP staff to facilitate easy exchange of information and technical assistance.
- 9) Coordinate safety/injury/first-aid data with the OSH Manager to facilitate the prompt investigation of mishaps and the meeting of mishap reporting requirements by the OSH Manager.
- 10) Initiate action to correct errors identified in DOL quarterly compensation rolls
- 11) Advise and coordinate managers, the OSH manager, and comptroller on quarterly FECA claims, costs and trends.