

## Federal Employees' Compensation Act (FECA) Program

### Helpful Information for Claimants

We realize that understanding and navigating a federal program is a challenge for our claimants, their families, and medical providers. Now that your claim has been accepted, we wanted to provide you some helpful tips regarding the benefits you are entitled to along with some recommendations to ensure the most expedient handling of your claim. We also provide an abundance of information on our website (<https://www.dol.gov/agencies/owcp/FECA>) and encourage you to visit it to learn more.

#### 1. Register with the Employees' Compensation Operations and Management Portal (ECOMP)

This is critical. If you have not already done so, create an account in our ECOMP web portal. With this account we can communicate with you electronically, and you will have full access to your case record, including compensation claim status, medical billing updates (including reimbursements), the status of medical authorization requests and all documents in your case file. You will also receive correspondence electronically on the date that it is issued by our office, rather than having to wait to receive it via the mail.

- Register for an ECOMP account at: <https://ecomp.dol.gov/>
  - Scroll down to "Need an account? Register"
  - Click on "Register"
  - Fill in the information under "Account Basics" and then continue through the registration steps. ECOMP will then walk you through the "Identity Verification" process, which is required to protect your personal information.
- For help registering for an ECOMP account, click on the "Help" option found in the top right corner of the ECOMP homepage, and then choose "FECA Claimant". You can access helpful videos that walk you through each step of this process. To access these guides:
  - Click on "Account Registration" or
  - After you have selected "FECA Claimant", click on "Watch Full User Guides" and "Identity Verification"

#### 2. Lost Time from Work

If you have lost time from work beyond the Continuation of Pay (COP) period, you can submit Form CA-7, Claim for Compensation, using your ECOMP Dashboard. When you complete the Form CA-7 in ECOMP, it will be immediately routed to your employing agency who will complete its portion of the form and transmit it to OWCP. With ECOMP, you can track the progress of your form through your employing agency and know when it has been submitted to OWCP. You must report any employment or employment activities on this form.

- **Medical Evidence Supporting Lost Time from Work:** Medical documentation from a physician substantiating that the lost time is due to the accepted work-related condition(s) is required prior to payment, so be sure to submit that documentation when you submit the form. We cannot take action on medical reports signed by a Physician's Assistant or Nurse unless the report is countersigned by a physician.
- **Intermittent Wage Loss:** If wage loss is intermittent, Form CA-7a (Time Analysis Form), is also needed.
- **Claims for Leave Buy-Back:** To repurchase sick or annual leave used as the result of this work injury, you must file Form CA-7b (Leave Buy Back (LBB) Worksheet/ Certification and Election) through your employing agency, along with Form CA-7 and Form CA-7a. Reinstatement of leave is subject to the approval of your employing agency.
- **Electronic Payments:** All individuals receiving recurring Federal government payments must receive payments by Electronic Fund Transfer (EFT). Therefore, you must submit Form SF-1199A (Direct Deposit Sign-Up Form) with your initial CA-7.

#### 3. Obtaining Medical Treatment and Communicating with Medical Providers

All medical providers must be enrolled with our Central Bill processing contractor so that services can be authorized, and medical bills can be processed. If you need to find a physician or medical provider, please use the Provider Search function at <http://owcpmed.dol.gov> to find a provider who may accept FECA cases. The tool can be found by clicking the Find a Provider link in the Injured and Ill Workers section found on the home page of the site. Note, however, that this tool only lists those physicians who opted to be included in the look-up, which means it may not



capture every physician in a particular area registered with OWCP, and the appearance of a provider's name in this list does not guarantee that they will accept new FECA claimants as patients.

Please share a copy of this letter with your medical provider(s). It is critical that they have your case number and know what medical conditions (ICD-10 codes) we have accepted as work-related, so that they can obtain necessary authorizations and submit the bills to us. Please also provide them with a copy of the attachment "Caring for a Federal Injured Worker with an Accepted Claim." This guide provides useful information to assist them with obtaining authorizations and billing for services.

#### 4. Prescriptions for Medication

Prescriptions MUST be filled through our FECA Pharmacy Benefits Management (PBM) program. You should use the Optum/FECA pharmacy benefit card, sent under separate cover, for injury-related prescriptions. No other pharmacy benefit card will be recognized for your federal workers' compensation injury. If you do not have your pharmacy card, log into ECOMP and access an electronic copy of the card in the upper right-hand corner of your case page.

- You can find more information about our pharmacy program at <https://feca-pharmacy.dol.gov/home>.
- Pharmacies can obtain information about our pharmacy program by calling 1-833-FECA-PBM (1-833-332-2726).
- Opioid Alert - OWCP will allow no more than one 7-day supply of an on-formulary, immediate release opioid prescription of less than 90 MME per day without prior authorization. If your physician believes additional opioid prescriptions are necessary, they must login to the FECA PBM Portal (<https://feca-pharmacy.dol.gov>) and complete a prior authorization request to justify continued use. Prescribers should also review the formulary in the PBM's Prescriber Portal prior to prescribing additional opioids. Additional information about the FECA Program's PBM and pharmaceutical policy can be found in FECA Bulletin 22-02, which is available in the Laws and Related Materials/Procedure Manual section of our website: <https://www.dol.gov/agencies/owcp/FECA>.

#### 5. Reimbursement for Medical Expenses

If you have paid medical expenses related to your accepted work injury, you may request reimbursement by submitting Form OWCP-915 (Claim for Medical Reimbursement,) and submitting the required documentation described in the instructions attached to that form, including proof of payment such as a cancelled check or receipt. Reimbursements are limited to the fee schedule amount associated with the service/supply claimed. Claimant reimbursements cannot be processed if electronically uploaded. Claims for reimbursement are considered bills and must be mailed to U.S. Department of Labor, OWCP/DFELHWC, P.O. Box 8300, London, KY 40742-8300. If electronic banking information is on file, your reimbursement will be paid via EFT.

You are not responsible for charges over the maximum allowed in the OWCP fee schedule. Our regulations provide that by submitting a bill and/or accepting payment, the provider agrees to comply with all regulations concerning the rendering of treatment and/or the process for seeking reimbursement for medical services, including the limitation imposed on the amount to be paid for such services. If a provider's bill is reduced by OWCP in accordance with its fee schedule, the provider is not allowed to charge you for the remainder of the bill. [20 C.F.R. §10.801 (d)]. If this occurs, please submit the documentation to our office so that we can contact the provider.

If a health benefits carrier has paid medical bills for your accepted condition, the carrier may submit a completed Carrier Reimbursement form with appropriate supporting documentation (HCFA-1500 or UB-04) to OWCP for consideration.

**TIME LIMITATIONS:** There are time limitations for submission of medical and travel reimbursement claims and bills. All reimbursement claims and bills must be submitted within the calendar year following the year in which the medical service was rendered, or the claim was accepted, whichever occurs later.

#### 6. Reimbursement for Out-of-Pocket Travel Expenses

Claims for mileage reimbursement should be submitted on Form OWCP-957A, Medical Travel Refund Request – Mileage. Claims for other travel expenses in addition to or instead of mileage, should be submitted on Form OWCP-957B, Medical Travel Refund Request – Expenses. Instructions for proper completion of these forms are attached to



each form. Please review the instructions carefully before completing the forms to ensure your claims are processed timely. Your claim for reimbursement must be mailed to our bill address: U.S. Department of Labor, OWCP/DFELHWC, P.O. Box 8300, London, KY 40742-8300.

Travel expenses that exceed \$75 must be submitted with an accompanying receipt to support the charges claimed and will be subject to approval. If you need to request reimbursement for flights, hotel, or travel exceeding 100 miles per day, contact your claims examiner to obtain preapproval.

Do not submit the request for travel reimbursement until the medical documentation has been submitted to support the travel reimbursement request.

As with reimbursement for medical expenses, these claims will be paid via EFT if there is electronic banking information on file for you.

## 7. Returning to Work

OWCP may assign a registered nurse or a vocational rehabilitation counselor to contact you to facilitate your recovery and return to work. You are expected to return to work (including light duty or part-time work, if available) as soon as you are able, and it is your responsibility to advise your agency once your physician finds you capable of returning to work in some capacity. Full compensation is payable only while you are unable to perform the duties of your regular job because of your accepted employment-related condition.

- Once you return to work, or obtain new employment, notify us immediately.
- If you receive a compensation check which includes payment for a period you have worked, return it to us immediately to prevent an overpayment of compensation. US Treasury checks may be returned to the following address: US Department of Treasury, PO Box 51320, Philadelphia, PA 19115-6320.
- If you receive compensation via Electronic Funds Transfer (EFT), a notification of the date and amount of payment will appear on the statement from your financial institution. You are expected to monitor your EFT deposits carefully, at least every 2 weeks. If you have worked for any portion of the period for which a deposit was made, advise OWCP immediately so that the overpayment can be collected.
- You are legally obligated to accept work which is within your medical restrictions. OWCP may terminate your benefits if you refuse suitable employment without good cause, and you are required to cooperate with vocational rehabilitation efforts.

## 8. Schedule Award

The FECA provides for the payment of schedule awards when the injury causes a permanent impairment involving total or partial loss, or loss of use, of certain organs or members of the body. The spine and brain are not included unless the condition causes permanent impairment to the extremities. All impairment ratings are evaluated in accordance with the Sixth Edition (2009) of the American Medical Association (AMA) Guides to the Evaluation of Permanent Impairment. A schedule award may be claimed using Form CA-7 after maximum medical improvement has been reached.

## 9. Attorneys and Authorized Representatives

You do not need the services of an attorney or representative to claim benefits under the FECA. However, you may obtain such services if you wish to do so, at your own expense. Before we can release information to, or discuss your case with, any representative, including a family member, we will need a statement signed by you, stating that you designated someone to represent you in your OWCP claim. The contact information for that party is also required. Please also be mindful of the following regarding fees for representative services:

- In each case where a representative's fee is desired, an application for approval of the fee must be submitted to OWCP.
- Fees collected prior to OWCP approval may constitute a misdemeanor under 18 U.S.C. § 292.



- Contingency fees are not allowed in any form. See 20 C.F.R. § 10.702 (a). Further, a fee will not be approved merely on the basis of a percentage of the amount of compensation awarded. All fees claimed for services rendered must be calculated on an hourly basis.
- The ultimate collection of the fee is a matter between the representative and the claimant.

If you have or obtain a representative, you can allow that individual to have access to your electronic case file through ECOMP. From your case page in ECOMP, choose "Do you have a Representative" in the upper right-hand corner. ECOMP will allow you to choose a representative from those who have registered in ECOMP. Once the representative confirms that they are your authorized representative that individual will have full access to your case.

#### 10. Third Party Liability

If your injury was caused by a third party, you may be required to seek damages from the third party, and you must reimburse the government from your recovery in accordance with the statutory formula. See 5 U.S.C. 8131, 8132; 20 CFR §10.705-719.

#### 11. Penalty Notice

Any person who knowingly makes any false statement, misrepresentation, concealment of fact, or any other act of fraud to obtain compensation, or who knowingly accepts compensation to which they are not entitled, is subject to criminal prosecution.

#### 12. Submitting Documents to OWCP

The fastest and most efficient way to submit documents to us is through ECOMP. If you are a registered user in ECOMP, access your case file. From the Forms tab for that case, choose "Upload a Document." Your document will be visible to OWCP staff within just a few hours.

You can also electronically upload documents into your case using the ECOMP portal regardless of whether you are a registered user. When you access the website at <https://ecomp.dol.gov/>, choose the "Upload Documents" option on the page. You will be asked to provide your case number, last name, date of birth and date of injury to upload a document. ECOMP will then provide you with a Tracking Number so that you can verify when OWCP has received your document. For more detailed information about this document submission feature, visit the ECOMP website and click "HELP" on the upper right corner.

You can also submit requested information or other documentation to the address at the top of this letter. Be sure your case number is on every page.

#### 13. Contacting OWCP

If you have any additional questions regarding your claim, contact us in one of the following ways:

##### Phone

Use the phone number at the top of this letter. When you call, you will be prompted to identify your issue so that your call can be routed to the appropriate staff member.

##### ECOMP –

Use the Escalation feature on your case page to electronically submit an inquiry to OWCP. You can electronically submit an inquiry pertaining to the following issues: CA-7/Recurrence status, bill payment or medical treatment authorization, medication issue, overpayment decision issued by OWCP, or a health benefit/life insurance issue. If you do not receive a response within 2 business days, you will be able to escalate that issue to an OWCP supervisor through ECOMP.

If you have a question about a different issue, upload your inquiry via the Document Upload feature described in the section above.

##### Paper Mail

Submit your inquiry to the address listed on the front page of this letter. If you write to us, please put your case file number on each page.

