


**For:** FFAS Employees

**Department of Labor's (DOL's) Office of Workers' Compensation Program (OWCP)  
Processing Procedures**

**Approved by:** Deputy Administrator, Management



**1 Overview**

**A Background**

On January 9, 2004, President Bush announced a new government-wide Safety, Health, and Return-to-Employment Initiative. The President called on Federal agencies to reduce the frequency and severity of work-related injuries and illnesses, increase timeliness of filing workers' compensation claims, and return employees to work.

FSA has contracted with T&T Management, Inc. (T&TM) to provide support for this effort. By implementing a program to effectively use data and automated systems and institute active case management techniques, FFAS should be able to reduce the number of injuries, illnesses, and their corresponding costs and, at the same time, increase work-force productivity by decreasing the amount of missed work because of injury or illness.

T&TM will take over the day-to-day responsibility of processing all new injury or illness claims by serving as a conduit to OWCP. T&TM will provide the Administrative Officers, OWCP managers, injured employees, and their supervisors advice and assistance in successfully processing an OWCP claim.

FFAS's goal is to manage OWCP through T&TM by providing technical assistance and resources to OWCP and instituting an aggressive return-to-work program for individuals who were injured or became ill on the job but have been determined to be medically able to perform some work.

<p><b>Disposal Date</b></p> <p>July 1, 2008</p>	<p><b>Distribution</b></p> <p>All FAS, FSA, and RMA employees; State Offices relay to County Offices</p>
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## Notice PM-2547

### 1 Overview (Continued)

#### B Purpose

This notice announces that effective May 5, 2005, T&TM will begin accepting new OWCP claims. Any new injury or illness claims having occurred **after** January 2, 2005, and have been reported on CA-1 or CA-2, should be FAXed or mailed directly to T&TM at either of the following:

- **FAX to 301-446-6084**
- mail to:

**T&T Management Inc.**  
**Attn: OWCP**  
**7833 Walker Drive, Suite 620**  
**Greenbelt, MD 20770**  
**Telephone: 301-446-6080.**

#### C Labor Management Obligations

Where exclusive representation exists, bargaining may be requested to the extent allowed by applicable statutes. Where contract language already addresses these policies and procedures for bargaining unit employees, contract language prevails.

#### D Contacts

If there are any questions, contact 1 of the following.

<b>Location</b>	<b>Contact</b>
<ul style="list-style-type: none"><li>• Kansas City FSA Complex</li><li>• RMA Kansas City Offices</li><li>• St. Louis Office</li></ul>	<ul style="list-style-type: none"><li>• Dana Candler, KCHRO, ELRS at 816-926-6117</li><li>• Toni Saeben, KCHRO, ELRB at 816-823-3308</li></ul>
<ul style="list-style-type: none"><li>• RMA Regional Service and Compliance Offices (except Kansas City)</li><li>• FFAS National Office</li><li>• FAS Overseas Posts</li></ul>	<ul style="list-style-type: none"><li>• Maria Ruiz, HRD, PMBAB at 202-418-9034</li><li>• Darla Hensley, HRD, PMBAB at 202-418-9021</li></ul>
State and County Office	State Office, Administrative Officer

**1 Overview (Continued)**

**E Disability Accommodations**

Persons with disabilities who require assistance shall contact 1 of the following.

<b>For...</b>	<b>Contact...</b>
Mission area policy	the Disability Employment Program Manager (DEPM).
FSA, FAS, and RMA National Office reasonable accommodation requests	
RMA Field Offices reasonable accommodation requests (except Kansas City)	
FAS Overseas	
Kansas City complex reasonable accommodation requests	Kansas City Reasonable Accommodation Coordinator through DEPM.
State and County Office reasonable accommodation requests	State Office Administrative Officer (Field Disability Coordinator) through DEPM.

**F OWCP Forms and Information**

OWCP forms and information can be found at the following websites.

- [http://hr.ffas.usda.gov/employees/workers\\_compen.htm](http://hr.ffas.usda.gov/employees/workers_compen.htm)
- <http://www.dol.gov/esa/regs/compliance/owcp/forms.htm>
- <http://www.tandtmanagement.com/owcp/owcp.asp>.

**Important:** If an employee does not have access to the Internet, the employee shall contact their Human Resources Office.

2 Procedure for On-the-Job Injuries

A Employee On-the-Job Injury Action

Effective immediately, the employee shall use the following table when on-the-job injury is incurred.

If an employee is injured while in the performance of duty, the employee **must** notify their supervisor **within 24 hours of the date of injury** and request an “Injury Package”.

<b>Immediate Steps To Be Taken</b>	
<b>Step</b>	<b>Action</b>
1	<p>If the supervisor has FAXed the employee <b>CA-16</b>, then the employee <b>must</b> take CA-16 during the initial doctor’s visit and advise that the visit be billed to DOL’s OWCP.</p> <p><b>Important:</b> CA-16 authorizes treatment and is <b>good only for up to 1 week after the date of injury</b>. If more than 1 week has passed since the injury was reported, the supervisor may refuse to issue another CA-16 on the basis that the need for immediate treatment would become apparent in that period of time. Therefore, <b>to avoid problems with the claim, notify the supervisor of any work-related injuries when they occur. In the event of an emergency, seek medical attention immediately and not wait for any forms but request that the supervisor send CA-16 and other relevant forms directly to the physician by FAX.</b></p>
2	<p>Upon receiving the “Injury Package”, <b>immediately:</b></p> <ul style="list-style-type: none"> <li>• complete the appropriate form (CA-1 or CA-2)</li> <li>• FAX or hand-deliver appropriate form to the supervisor:                             <ul style="list-style-type: none"> <li>• <b>within 2 days of the date of injury</b></li> <li>• for <b>Occupational Disease</b>, date first realized that the disease was job related.</li> </ul> </li> </ul> <p>When the form is returned, ask for a signed copy for your records, which includes the completion of the Supervisor’s Report. <b>Do not send forms directly to OWCP.</b></p> <p><b>Important:</b> OWCP requires receiving CA-1 or CA-2 within 10 days of the injury. Failure to comply with these steps could result in a delay in processing the claim and/or in the denial of the claim and/or benefits.</p>
3	<p>Contact the servicing OWCP manager within 3 days of delivering CA-1 or CA-2 to the supervisor, to ensure that a completed copy of the form was received. If not, FAX the servicing OWCP manager a copy of the form.</p>

2 Procedure for On-the-Job Injuries (Continued)

A Employee On-the-Job Injury Action (Continued)

<b>Immediate Steps To Be Taken (Continued)</b>	
<b>Step</b>	<b>Action</b>
4	<p>Take <b>CA-17, if applicable, and CA-20</b> from the “Injury Package” to the initial doctor’s visit.</p> <p><b>Important:</b> Check that the supervisor’s portion of CA-17 is complete before giving it to the doctor. If not, ask the supervisor to complete their portion of CA-17 and submit right away.</p> <p>CA-20 will be used for all subsequent visits to the doctor. The supervisor should provide additional CA-20’s as needed.</p>
<b>IF the...</b>	<b>THEN...</b>
employee has already visited the doctor and provided CA-17 and CA-20	<p>follow-up with the doctor’s office within 5 days from the date CA-17 and CA-20 was provided to ensure that CA-17 and CA-20 were returned to OWCP and the supervisor. If not, request a FAX copy of CA-17 and CA-20 and FAX to the supervisor.</p> <p><b>Important:</b> A medical report is required by OWCP before payment of compensation for loss of wages or permanent disability can be made to injured employees.</p>
doctor recommends physical or occupational therapy	deliver the Physical & Occupational Therapy Authorization Request Form included in the “Injury Package” to the doctor.
doctor recommends surgery or other general medical procedures	deliver the General Medical & Surgery Authorization Request Form, included in the “Injury Package” to the doctor.
doctor recommends special medical equipment	deliver the Durable Medical Equipment Authorization Request Form included in the “Injury Package” to the doctor.

## 2 Procedure for On-the-Job Injuries (Continued)

### A Employee On-the-Job Injury Action (Continued)

Employees shall:

- return to work as soon as medically possible
- call your supervisor and timekeeper on a weekly basis to update on **all** absenteeism relevant to the work-related injury and the status of ability to return to work in a light or full duty status
- continue to submit medical evidence, CA-20, or doctor's narratives to the supervisor, as requested, for **all** absences from work because of the work-related injury
- ensure that copies of all medical documents sent to the supervisor are also received by the servicing OWCP manager
- at the request of the supervisor, contact the doctor's office billing department to resolve billing errors

**Important:** This is necessary because FECA law indicates that the injured employee is the only person with the legal right to contact the doctor by telephone.

- select a physician that meets the definition of "physician" under FECA and who must not have been excluded from payment under OWCP

**Important:** Employees who wish to change physicians after the initial choice, must contact OWCP in writing for approval and include the reasons for wanting to change. See OWCP Publication CA-810, Chapter 6 and/or the OWCP web site at

**<http://www.dol.gov/esa/regs/compliance/owcp/fecacont.htm>**

- verify physician is an enrolled provider with DOL's OWCP
- if a bill is received from the doctor, send it directly to the following:

U.S. Department of Labor  
DFEC Central Mailroom  
P.O. Box 8300  
London, KY 40742-8300

Make sure to include the claim number on **every page** sent. If a claim number has not been assigned, contact T&TM to see if a claim number has been assigned. Once a claim number has been assigned, forward the bill to DOL.

**2 Procedure for On-the-Job Injuries (Continued)**

**B Requirements for Continuation of Pay (COP)**

The following are requirements for COP.

<b>IF...</b>	<b>THEN...</b>
the employee is receiving COP	prima facie medical documentation must be provided that supports the work-related injury to the supervisor within 10 working days from the date of injury or there is a risk of the COP benefits being terminated.
the doctor has returned CA-17 and CA-20	additional medical documentation may be required to be provided to the supervisor during this period of COP.  <b>Important:</b> Submitting the initial prima facie medical documentation is necessary to continue receiving COP. Failure to do so could result in delays and/or termination of your benefits.
it appears that the employee will be disabled beyond the 45 day COP period	CA-7 should be completed and returned within 5 days. Attach current medical documentation and FAX or hand carry to the supervisor. For leave buy back (LBB) information see Notice PM-2415 or web site <a href="http://www.tandtmanagement.com/owcp/owcp.asp">http://www.tandtmanagement.com/owcp/owcp.asp</a> .
the employee does <b>not</b> qualify for COP	complete CA-7 <b>immediately</b> , attach current medical documentation, and FAX or hand-carry to the supervisor. For LBB information, see Notice PM-2415 or web site <a href="http://www.tandtmanagement.com/owcp/owcp.asp">http://www.tandtmanagement.com/owcp/owcp.asp</a> .
you will be claiming a schedule award	you <b>must</b> complete CA-7 and FAX or hand-carry to your supervisor when the doctor determines that you have reached maximum medical improvement.

**Important:** The employee is responsible for the necessary follow-up with the servicing OWCP manager to ensure that CA-7 is received and processed.

## 2 Procedure for On-the-Job Injuries (Continued)

### D Claim Inquiries

Inquire about the status of a bill or claim for reimbursement through any of the following:

- the OWCP website at <http://owcp.dol.acs-inc.com>
- a 24 hour a day Interactive Voice Response (IVR) system at 866-335-8319
- a customer service representative, available Monday through Friday, 8 a.m. to 8 p.m. e.t. at 850-558-1818.

Direct all other inquiries about your claim to either:

- T&TM through e-mail at [owcpinquiry@mail.tandtmanagement.com](mailto:owcpinquiry@mail.tandtmanagement.com)
- Loren Woodson by telephone at 301-446-6080.

**Important:** A number of statutory provisions (20 CFR 10.16) make it a crime to file a false or fraudulent claim or statement with the government in connection with a claim under FECA, or to wrongfully impede a FECA claim.

Administrative proceedings may be initiated under the Program Fraud Civil Remedies Act of 1986 (PFCRA), 31 U.S.C. 3801-12, to impose civil penalties and assessments against persons who make, submit, or present, or cause to be made, submitted or presented, false, fictitious, or fraudulent claims or written statements to OWCP in connection with a claim under FECA.

Several sources describing the provisions of the law and how they are available in printed form are on OWCP's Home Page at <http://www.dol.gov/esa/regs/compliance/owcp/fecacont.htm>.

For additional information visit T&TM's website at <http://www.tandtmanagement.com/owcp/owcp.asp>.



2 Procedure for On-the-Job Injuries (Continued)

E Manager/Supervisor Action

<b>IF an employee is injured while in the performance of duty and...</b>	<b>THEN the manager/supervisor...</b>
the injured employee requires medical treatment for their injury and this is their <b>initial visit</b> to the physician	<b>must</b> notify the servicing OWCP manager within 4 hours of the injury and if appropriate, issue <b>CA-16</b> and provide an <b>“Injury Package”</b> to the injured employee. Complete <b>CA-16, Part A within 4 hours of the injury notification</b> and give it to the injured employee. <b>Remind the injured employee that after 48 hours from injury date, they cannot use CA-16.</b> The injured employee must request a complete narrative from their physician written on the physician’s letterhead instead. Download forms from the T&TM website, prepare an “Injury Package”, and give to the injured employee or person representing the injured employee.
there is no time to complete CA-16	<b>may</b> authorize medical treatment by telephone and FAX the completed CA-16 to the medical facility within 48 hours of the call. <b>Retroactive issuance of CA-16 is usually not permitted under other circumstance.</b>
the employee delayed reporting the injury several days after the fact or did not request medical treatment within 24 hours of the injury	<b>may still authorize medical care</b> using CA-16. Agency personnel are encouraged to use discretion in issuing authorizations for medical care under such circumstances, but employees should not be penalized for short delays in reporting injuries. If unsure about what to do, <b>contact T&amp;TM at 301-446-6080.</b>
the employee delayed reporting the injury for over 1 week after the occurrence	<b>may refuse</b> to issue CA-16 <b>if more than 1 week</b> has passed since the injury, on the basis that the need for immediate treatment would become apparent in that period of time. If unsure about what to do, <b>contact T&amp;TM at 301-446-6080.</b>

**Note:** CA-16 shall be issued only once per injury.

The following shall be given to the injured employee within 24 hours of the injury notification and upon receiving the “Injury Package”.

- A blank CA-1 or CA-2.

**Note:** Do **not** complete the supervisor's portion before sending to the employee.

## 2 Procedure for On-the-Job Injuries (Continued)

### E Manager/Supervisor Action (Continued)

- Before giving “Injury Package” to the injured employee, if applicable, complete CA-17, side A, which describes the physical requirements of the employee’s job and notes the availability of any light or limited duty work. Once completed, give to the employee.

**Important:** CA-17 is used to obtain interim medical reports about the employee’s fitness for duty. It may be issued initially with CA-16.

- A blank CA-20.

**For Occupational Diseases only**, issue the appropriated CA-35 with the following:

- CA-2
- CA-7
- CA-20
- CA-7a
- Leave Buy Back Memo
- Physical & Occupational Therapy Authorization Request Form
- General Medical & Surgery Authorization Request Form
- Durable Medical Equipment Authorization Request Form.

Once the employee receives the “Injury Package”, the manager/supervisor shall:

- counsel the employee about the proper processing of the forms and the implications of not adhering to the forms processing and submission requirements

**Note:** If the employee’s claims are approved by DOL, the employee shall bring the case number to their physician(s) so the medical bills will be paid.

- inform the employee that on “Occupational Diseases” there is no COP.

**Notes:** If the employee is going to be out on because of a disease, then the employee shall elect to use annual leave, sick leave, or LWOP from the agency and receive compensation through DOL instead. T&TM will manage the claim so the employee receives their paycheck on time.

Request that the injured employee FAX or mail the completed CA-2 and re-emphasize the implications of not adhering to submission requirements in a timely fashion. Upon receiving CA-2, the manager/supervisor **must** complete the Supervisor’s Report portion immediately and FAX to T&TM and send hard copy by mail.

2 Procedure for On-the-Job Injuries (Continued)

E Manager/Supervisor Action (Continued)

- **For traumatic injuries only**, once the employee receives the “Injury Package”, the manager/supervisor shall:
  - inform the employee of the right to elect COP, annual, or sick leave if time loss will occur because of the traumatic injury
  - advise the employee whether COP will be controverted, and if so, whether COP will be terminated

**Important:** The basis for the action must be explained to the employee and the reason for controverting the claim must always be shown on CA-1.

- follow-up with the injured employee **within 48 hours of injury notification** to acquire the completed CA-1
- contact the injured employee, **within 1 week of injury notification**, to discuss their ability to return to some form of work, if applicable, and report your findings by documenting your comments onto the Injured Employee Contact Report, then e-mail or FAX the report to the servicing OWCP manager
- request medical documentation from the injured employee for all absences because of the work-related injury and FAX all correspondence directly to T&TM at 301-446-6084
- maintain records of all T&A’s reflecting code 67.

IF...	THEN the supervisor/manager must...
there is doubt as to whether the employee’s condition is from a work-related injury	indicate your comments on CA-1 and CA-16.
the injured employee is treated at the agency’s medical office after the date of injury	add the words “first aid” to the upper right corner of the CA-1 and submit the completed CA-1 directly to T&TM either by FAX or mail.  <b>Important:</b> This rule applies as long as no leave or COP is charged and no medical expenses are incurred.
the injured employee does not obtain medical care, or obtain only agency-sponsored care on the date of injury and no time loss is charged to either leave or COP.	send CA-1 directly to T&TM by either FAX or mail.

## 2 Procedure for On-the-Job Injuries (Continued)

### E Manager/Supervisor Action (Continued)

If it appears that the injured employee will remain disabled beyond the 45 day COP period, then the manager/supervisor shall:

- contact the servicing OWCP manager with any questions about leave options and/or refer to T&TM's web site at <http://www.tandtmanagement.com/owcp/owcp.asp>
- continue to contact the employee on a weekly basis to discuss their ability to return to some form of work, if applicable, and report the findings by documenting comments onto the Injured Employee Contact Report and FAX or e-mail the report to the servicing OWCP manager

**Note:** This must be done until the employee returns to work or OWCP adjudicates the case, whichever comes first.

- request medical documentation (CA-20 or doctor's narrative) from the employee as often as needed for all absenteeism because of the work-related injury

**Note:** This should be done on a weekly basis until the employee returns to work or OWCP adjudicates the case, whichever comes first. OWCP Publication CA-810, Section D states that the supervisor/manager should supply CA-20 to the employee as often as needed.

- at the request of the servicing OWCP manager, initiate and complete the supervisor's section of CA-7 15 days before COP's ends
- contact the injured employee to discuss leave options and request that they complete the employee's section of CA-7 and return it along with medical evidence within 5 days of receiving
- follow-up with the employee to acquire the completed CA-7 and current medical documentation

**Note:** Upon receiving, complete CA-7, Sections 8 through 15, sign, and FAX; along with the current medical evidence, to the servicing OWCP manager. Place the originals in the mail on the same day.

- monitor the injured employee's COP usage and CA-20's for all absenteeism because of the work-related injury.

The following actions shall be taken when the employee returns to work.

- Work with DEPM to handle accommodations on return to work from the long term rolls cases.

## 2 Procedure for On-the-Job Injuries (Continued)

### E Manager/Supervisor Action (Continued)

- Notify T&TM **immediately** when an employee returns to work by calling 301-446-6080.
- Ensure timely claim forms submission and coverage for the injured employees. This specifically relates to timely acquiring and submitting the completed CA-1 or CA-2 from the injured employee to T&TM as well as the timely submission of CA-7 to the servicing OWCP manager to ensure that the injured employee receives timely compensation.

**Important:** Upon notification of case adjudication, the manager/supervisor may discontinue the weekly reporting, however continued contact with the injured employee is still encouraged. The manager/supervisor role will reduce significantly when OWCP adjudicates the case.

### F Servicing OWCP Manager Action

If an employee is injured while in the performance of duty, the servicing OWCP manager is in the State, the injured employee requires medical treatment for their injury and this is their **initial visit** to the physician, FAX the authorized **CA-16** to the manager/supervisor or medical facility upon notification of a work-related Traumatic Injury.

The servicing OWCP manager shall:

- **within 24 hours of receiving an injury notification:**
  - FAX the Injury Notification Report (INR) to the attention of Loren Woodson, T&TM at 301-446-6084
    - INR may also be completed and submitted electronically at <http://www.tandtmanagement.com/owcp/owcp.asp>.
  - telephone T&TM at 301-446-6080 if you do not receive an INR confirmation receipt within 24 hours of submission
- **within 3 days of receiving an injury notification**, contact the manager/supervisor to follow-up on the receipt of a completed **CA-1** or **CA-2**

**Notes:** Request that the supervisor FAX CA-1 or CA-2 directly to T&TM.

If any medical documentation on an injury claim is received, FAX and send originals by mail to T&TM.

## F Servicing OWCP Manager Action (Continued)

- **within 1 week of receiving an injury notification:**

- contact the supervisor to acquire their written comments about the injured employee's ability to return, if applicable, to some form of work and FAX to T&TM

**Note:** Continue to acquire the Injured Employee Contact Report from the supervisor on a weekly basis, to review the status of the employee's ability to return to any form of work and FAX to T&TM.

- review the medical evidence to formulate an opinion of whether the employee will or will not return to work within 45 days of the date of injury.

If it appears that the injured employee will remain disabled beyond the COP 45 day period:

- contact the supervisor to initiate CA-7
- request that the supervisor inform the employee of their leave options under FECA, request that the employee complete CA-7, Sections 1 through 6, once the leave option has been decided

**Note:** The employee should hand-carry or FAX the completed CA-7 and current medical evidence, CA-20, to their supervisor within 5 days. For LBB information, see web site <http://www.tandtmanagement.com/owcp/owcp.asp>.

- contact the supervisor within 5 days from the date that CA-7 was initiated and request a FAX copy of the completed CA-7 for your review

**Note:** Request that the original and the most recent medical evidence is sent by mail.

- review CA-7 for completion and FAX CA-7 and the recent medical evidence to T&TM.

**Note:** Upon receipt of the **original** CA-7, attach any medical documentation and mail to T&TM on the same day of receipt.

Contact T&TM, Loren Woodson by telephone with any inquiries, updates, and/or problems with the claim or direct inquiries through email to [owcpinquiries@mail.tandtmanagement.com](mailto:owcpinquiries@mail.tandtmanagement.com).

## **G Reminder for Timekeepers on Counting the 45 Day Period for COP**

COP is an entitlement and is counted in calendar days including Saturdays, Sundays, and holidays.

**Note:** A workday is a business day of the employing agency during which evidence can be submitted to an authorized official.

COP ends after 45 calendar days are used. A day is charged when 1 hour COP is used. Timekeepers shall record COP using code 67. After COP ends, the employee may elect to use annual leave, sick leave, or LWOP if disability continues beyond the 45 days.

If your case is disapproved by DOL, COP will have to be changed to annual or sick leave.

## **H Time and Attendance for Payroll Purposes**

If the employee uses half of the day for a medical appointment that is related to the on-the-job-injury and then comes into work for the other half of the day, the timekeeper must charge half of the day to code 67 (injury leave). As always, a medical certificate must be provided. The other half of the day must be coded as regular time. However, for the purposes of counting the 45 calendar days of COP, that same half of the day is counted as a full day.

If the employee uses half of the day for a medical appointment that is related to the on-the-job-injury and then does **not** return to work that day, a doctor's certificate excusing you from work because of total disability, inability to perform duties as a result of the on the job injury, must be provided. If the employee does not bring a doctor's certificate stating that they are totally disabled, the other half of the day will be charge to annual leave, sick leave, LWOP, or AWOL, if applicable.

The Servicing Personnel Office shall:

- reproduce, download, and maintain copies of injured employee's packages
- LBB, prepare CA-7a and CA 7b, fax it to NFC for estimate at: (Unit One 504-426-9762)
- after estimate is back from NFC, FAX CA-7 plus all other CA forms on the case plus NFC estimate to T&TM
- work with HR classification specialist to develop light duty positions
- advise timekeepers on injury leave policy
- advise injured employees on OWCP policy and entitlements
- enter all agency chargeback codes and OSHA site codes on CA-1 and CA-2 before FAXing to T&TM
- maintain a log with all CA-1's and CA-2's sent to T&TM.

#### **J T&TM Responsibilities**

T&TM will be the Agency's contact with DOL to find claims status, medical documentation, bill and reimbursement inquiries, correspondence, LBB, etc.