



**ADMINISTRATIVE  
COMMUNICATIONS SYSTEM  
U.S. DEPARTMENT OF EDUCATION**

**DEPARTMENTAL DIRECTIVE**

**OM: 2-107**

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*Distribution:*  
All Department of Education  
Employees

*Signed by* Andrew Jackson  
Assistant Secretary for Management

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**Workers' Compensation Program**

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For technical questions regarding this directive, please contact the Performance Management Branch in Human Capital Client Services via [HCCSvoicemail@ed.gov](mailto:HCCSvoicemail@ed.gov).

Supersedes OM: 2-107 "Workers' Compensation Program" directive dated 05/22/2007.

## I. Purpose

This policy states the authority and selected procedures for providing compensation and benefits to employees who sustain a traumatic injury, occupational disease or illness, or death while in the performance of duty.

## II. Policy

The U.S. Department of Education's (ED) policy is to provide a safe and healthful working environment for employees. In cases of job-related injuries, illnesses or diseases, claims will be investigated and processed in a timely manner. When necessary, management will explore possibilities to accommodate employees who suffer from job-related injuries or diseases, with restricted or limited duty assignments in accordance with the physical limitations recommended by a physician.

## III. Authorization

The authorities for providing compensation for injuries and illnesses sustained in the performance of duty are contained in the Federal Employee's Compensation Act (FECA), Title 5 of the United States Code, Sections 8101-8193 and Title 20 Code of Federal Regulations, parts 1-25.

## IV. Applicability

This policy applies to all ED employees in headquarters and the regions.

## V. Definitions

- A. Benefits or Compensation: The money paid or payable under the FECA to the employee or his/her beneficiaries, including those paid for lost wages and medical treatments (see 20 CFR 10.5).
- B. Claim: A statement in writing of an employee's entitlement to benefits under FECA (see 20 CFR 10.5).
- C. Continuation of Pay (COP): The process by which an agency may continue paying salary to an employee, who is disabled and unable to work due to a traumatic injury, for up to 45 calendar days. COP is not paid in cases of occupational diseases or illnesses. Unlike wage loss benefits, COP is subject to taxes and all other payroll deductions that are made from regular income (see 20 CFR 10.200).
- D. Controversion of COP and/or Claim: The agency's right to challenge or dispute payment of a COP or a claim for compensation for one of the reasons provided by regulation.

- E. Disability: The incapacity, because of an employment injury, to earn the wages the employee was receiving at the time of the injury. It may be partial or total (see 20 CFR 10.5)
- F. Injury: "Injury" includes, in addition to injury by accident, a disease proximately caused by the employment, and damage to or destruction of medical braces, artificial limbs, and other prosthetic devices which shall be replaced or repaired, and such time lost while such device or appliance is being replaced or repaired; except that eyeglasses and hearing aids would not be replaced, repaired, or otherwise compensated for, unless the damages or destruction is incident to a personal injury requiring medical services.
- G. Light Duty: Those duties and responsibilities that are outside an employee's regular position, but that meet the employee's current work capabilities as identified by a physician. They may be performed for a full shift or for shorter time periods. The supervisor can develop a light duty assignment, using the employee's position description as a basis and in conjunction with the worker's compensation specialist (see 20 CFR 10.217).
- H. Limited Duty: Those specific duties and responsibilities of an employee's regular position that meet the employee's current work capabilities as identified by a physician. These duties may constitute all or part of the employee's regular job assignment. They may be performed for a full work shift or for shorter time periods.
- I. Occupational Disease or Illness: A condition produced in the work environment over a period longer than one workday or shift. It may result from systemic infection, repeated stress or strain, exposure to toxins, poisons, or fumes, or other continuing conditions of the work environment (see 20 CFR 10.5).
- J. Office of Workers Compensation Program (OWCP): Office within the U.S. Department of Labor (DOL) functionally responsible for oversight of the Workers' Compensation Program.
- K. Reemployment: When the injured employee resumes Federal employment.
- L. Traumatic Injury: A wound or other condition of the body caused by external force, including stress or strain. The injury must be identified by the time and place of occurrence and member of the body affected; it must be caused by specific events or incidents within a single day or work shift. Injuries also include damage to or destruction of prosthetic devices or appliances, including eyeglasses and hearing aids if they were damaged incidental to a personal injury requiring medical services (see 20 CFR 10.5).

## VI. Responsibilities

- A. The Assistant Secretary for Management (ASM) will:
1. Advise the Secretary of Education and staff officials in planning, developing and implementing policies, programs, and systems to manage workers' compensation program; and
  2. Establish goals for the reduction of the workers' compensation program costs.
- B. The Office of Management's (OM) Director of Human Capital and Client Services (HCCS) will:
1. Advise the ASM and staff officials in planning, developing and implementing policies, programs and systems to manage workers' compensation program and ensure a coordination between the workers' compensation program and safety/health to minimize recurrence and reduce agency cost;
  2. Develop and interpret ED policies and standards for the ED's workers' compensation program; and
  3. Represent ED in rulemaking presentations affecting the workers' compensation program before advisory legislative groups.
- C. The OM HCCS Workers' Compensation Specialists will:
1. At the employee's request, assist all injured employees in completing workers' compensation claim forms in order to reduce errors and omissions that may delay payment of valid claims;
  2. Advise employees of their responsibilities, rights, and benefits including the obligation to submit medical evidence and the obligation to obtain a description of work restrictions, if light or limited duty is available;
  3. Inform employees of his/her rights to elect COP, sick or annual leave for injuries;
  4. Ensure that the OWCP claim forms are processed within the 10 workday timeframe established in Department of Labor regulations so that injured employees may be compensated, when entitled, in a timely manner;
  5. Provide day-to-day case management of the workers' compensation program while providing advice and answers to employees, supervisors, and managers;

6. Coordinate the workers' compensation program with job-injured employees, supervisors, attending physicians, OWCP, payroll liaisons, and the safety officer to ensure that all required actions and/or communications are performed;
7. Controvert claims, when appropriate, and instruct supervisors and managers of effective methods for controverting claims by proper investigations and documentation;
8. Verify that all OWCP forms are properly coded (e.g. chargeback codes, injury codes, occupational codes) so that ED reports accurately track injuries and compensation recipients;
9. Monitor all cases from the time of injury until return to full duty and take appropriate actions to achieve a return to duty as soon as possible;
10. Maintain the current status on all current or former employees receiving compensation, whether or not the individual is still on ED's rolls;
11. Safeguard workers' compensation files;
12. Work with OCP and supervisors, determine which cases involve the potential reemployment; and
13. Conduct periodic reviews of the OWCP, including the monitoring and tracking of COP Benefits. Examples include:
  - a. Tracking claim form submissions, claimants' files, and OWCP time lag reports to ensure timely processing, controversion of claims and return of employees to duty;
  - b. Reviewing and verifying quarterly chargeback reports to monitor cases, identifying discrepancies concerning possible overpayments. This includes cross-checking against the human resources database and making sure the claimant's SSN and Principal Office are accurate as well as actual verification of being an ED employee. Notify the OWCP and Principal Office of discrepancies noted and ensuring that deficiencies are corrected;
  - c. Providing OWCP chargeback information to appropriate Principal Office Executive Officers for review and verification on a routine basis;
  - d. Managing oversight of new and long-term claims;
  - e. Reviewing employees' status during periods of disability and ensuring employees are returned to duty as soon as medically cleared; and

f. Posting information about workers' compensation on connectED.

D. All Managers and Supervisors will:

1. Review all reports of job-related injuries or illnesses and, if there is a reason to disagree with any aspect of a claim:
    - a. Immediately gather pertinent information (fact finding);
    - b. Provide written documentation of findings; and
    - c. Take corrective action as appropriate.
  2. Identify and make available light or limited duty assignments, or other reemployment opportunities, if and when available, that accommodate the medical restrictions of job-injured employees;
  3. Refer employees to the Workers' Compensation Specialist in HCCS for counseling and information on benefits under the Workers' Compensation Program;
  4. Assist in workers' compensation cost reduction efforts by:
    - a. In consultation with the Workers' Compensation Specialist, investigating and reporting all injuries and illnesses and any instances of possible abuse or false claims;
    - b. Correcting or reporting as appropriate, recognized hazards that are causing or are likely to cause death or serious physical harm;
  5. Refer to the Supervisor's Guide for Workers' Compensation available on connectED at [http://connected.ed.gov/doc\\_img/fin\\_sup\\_gde.doc](http://connected.ed.gov/doc_img/fin_sup_gde.doc) for additional information on the process to be followed for the submission and handling of claims under the Workers' Compensation Program along with other information for supervisors
  6. Review COP Reports for accuracy. Ensure that all COP usage is properly tracked and accounted for on the employee official timecard; and
  7. Promptly report unsafe and unhealthy working conditions by calling the OM Help Desk (202) 708-HELP, Option 1.
- E. Executive Officers will review and verify the OWCP Chargeback Report for their specific Principal Office submitted by the ED Workers' Compensation Specialist. Any and all discrepancies must be communicated in writing to the ED's Workers' Compensation Specialist.

## F. Employees will:

1. Exercise safe work practices;
2. Comply with all applicable safety and health rules and regulations in order to prevent injuries and illnesses;
3. Report unsafe or unhealthful working conditions to their immediate supervisor for corrective action or to guard services, if it is after normal working hours for corrective action at (202) 708-HELP, Option 1;
4. Notify their supervisors as soon as possible after a job-related injury/illness or exposure to a hazardous material; that is likely to result in a job-related illness;
5. File claims and furnish necessary information on the appropriate forms by established deadlines to support claims;
6. Keep his/her supervisor well informed of their status including providing the supervisor immediately with acceptable written medical documentation listing specific physical limitations and restrictions. Employees are responsible for returning to duty when offered duties that are consistent with their attending physician's determination of limitations and restrictions, if any;
7. Submit time sheets and request for leave form in accordance with standard procedures to cover all absences necessitated by a work-related injury or illness;
8. Refer to Appendix A, Injury Compensation Forms Description and other referenced guidance about what to do if you suffer a work-related injury or illness. The Description and other guidance discusses mandatory deadlines which an employee must comply, or he/she may lose benefits;
9. If injured on the job, notify his/her supervisor immediately and report to the closest Health Unit that services the employee's building, or report to the guard services if after normal working hours, for first aid and medical care. If additional treatment is needed, the Health Unit staff will recommend the employee seek further treatment at a hospital or by the employee's private physician. Serious injuries should be treated by paramedics immediately and should notify the Health Unit after treatment;
10. If injured while on travel and after seeking medical treatment if appropriate, contact his/her supervisor. The employee should then contact his/her Workers' Compensation Specialist (if in HQ, the

appropriate Human Resource Specialist and if in the regions, the Personnel Specialist) for additional assistance;

11. After the physician or the hospital has completed the medical forms supplied to the employee by the Health Unit, the employee is responsible for returning the appropriate forms to the Workers' Compensation Specialist for processing; and
12. Refer to Appendix A, Injury Compensation Forms Description about what to do if a work-related injury or illness occurs. The descriptions include mandatory deadlines with which employees must comply or he/she may lose benefits.

**Note:** Workers Compensation fraud is a persistent issue across the Federal government. Supervisors and managers should be alert to signs of this type of employee misconduct and refer allegations about such to Office of Inspector General.

## VII. Procedures and Requirements

The Health Unit staff will provide the employee with a Form CA-1, "Federal Employee's Notice of Traumatic Injury and Claim for Continuation of Pay/Compensation", which is the initial form to document the injury or the CA-2, "Notice of Occupational Disease and Claim for Compensation." If the Health Unit is closed, the employee should contact the Workers' Compensation Specialist. If the Workers' Compensation Specialist is unavailable, the employee should contact his/her medical provider immediately.

**Note:** In cases of death, the Supervisor will be instructed by the Workers' Compensation Specialist to complete a CA-6, "Official Supervisor's Report of Employee's Death."

When the employee first visits a physician, the employee is responsible for ensuring that the physician is aware that the employee's injury was sustained on the job and that the work-related injury will require that workers' compensation medical forms be processed. After the physician or the hospital has completed the medical forms supplied to the employee by the Health Unit, the employee is responsible for returning forms to the Workers' Compensation Specialist for processing.

All workers' compensation *forms* are available at:  
<http://www.dol.gov/owcp/dfec/regs/compliance/forms.htm>.

For more complete *information* about workers' compensation, including mandatory deadlines employees must comply with please refer to:  
<http://www.dol.gov/compliance/>.

## **VIII. Injury Compensation Forms Description**

Many of the following deadlines provided in Appendix A – Injury Compensation Forms Description refer to ED’s deadlines for submission to DOL. Employees and Supervisors are **STRONGLY** encouraged to consult with their Worker’s Compensation Specialist for specific internal deadlines, which are typically earlier than those identified in the table.

Appendix A: Injury Compensation Forms Description

Form No.	Form Title	Purpose	Prepared By	When Submitted	Completed Forms sent to
CA-1	Federal Employee's Notice of Injury and Claim for Continuation of Pay/Compensation	Notifies supervisor of traumatic injury and serves as the report to OWCP when: (1) the employee has sustained a traumatic injury that is likely to result in a medical charge against the compensation fund; (2) the employee loses time from work on any day following the injury date, whether the time is charged to leave or to continuation of pay; (3) disability for work may subsequently occur; (4) permanent impairment appears likely; or (5) serious disfigurement of the face, head, or neck is likely to result.	Employee or someone acting on employee's behalf, witness (if any), supervisor.	By employee within 30 days (but will meet statutory time requirements if filed no less than 3 years after the injury); by supervisor within 10 working days following receipt of the form from the employee.	Supervisor by employee or someone acting on employee's behalf, then to the appropriate OWCP office by the supervisor.
CA-2	Notice of Occupational Disease and Claim for Compensation	Notifies supervisor of an occupational disease and serves as the report to OWCP when: (1) the disease is likely to result in medical charge against the compensation fund; (2) the employee loses time from work on any day because of the disease, whether the time is charged to leave or the employee chooses to claim injury compensation; (3) disability for work may subsequently occur; (4) permanent impairment appears likely; or (5) serious disfigurement of the face, head, or neck is likely to result.	Employee or someone acting on employee's behalf, witness (if any), supervisor.	By employee within 30 days (but will meet statutory time requirements if filed no later than 3 years after the last exposure to the conditions causing the disease or awareness of a relationship between the disease and Federal employment); by supervisor within 10 work days, after receipt of the form from the employee.	Supervisor, by employee or someone acting on the employee's behalf, then to the appropriate OWCP office by the supervisor.
CA-2a	Notice of Recurrence	Notifies OWCP that an employee, after returning to work, is again disabled due to a prior injury or occupational disease, or has suffered a recurrence of the accepted medical condition. It also serves as a claim for continuation of pay or compensation based on the recurrence of a previously reported disability.	Employee	Immediately upon awareness that the employee has suffered a recurrence. An employee who stops work as a result of recurring disability shall advise the supervisor whether he/she wishes to continue to receive regular pay (if eligible) or charge the absence to sick or annual leave or leave without pay.	Supervisor by employee or someone acting on employee's behalf; then to appropriate OWCP office by supervisor. An employee no longer employed by the Federal government should complete parts A and C and submit all materials directly to the appropriate OWCP district office.

## Appendix A: Injury Compensation Forms Description

CA-3	Report of Work Status	Notifies OWCP that an employee has returned to work following a period of disability; provides information on the dates the employee stopped and returned to work, the reason for work stoppage and whether the employee has returned to full or modified duty.	Injury compensation specialist with access to the Agency Query System (AQS)	As soon as possible after an employee returns to duty following a period of disability.	Electronically submitted to OWCP via Agency Query System (AQS)
CA-5b	Claim for Compensation by Parents, Brothers, Sisters, Grandparents, or Grandchildren.	Claims compensation for these dependents when injury results in death.	Person claiming (or guardian on behalf of children) and attending physician.	Within 30 days, if possible, but not later than 3 years after death resulted from an injury for which a disability claim was timely filed, the time requirements for filing death claim have been met.	Supervisors by claimant or someone acting on claimant's behalf, then appropriate OWCP district office.
CA-5	Claim for Compensation by Widow, Widower, and/or Children	Claims compensation on behalf of these dependents when injury results in death	Person claiming compensation (for self or on behalf of children) and attending physician	Within 30 days, if possible, but not later than 3 years following date of death. If the death resulted from an injury for which a disability claim was timely filed, the time requirements for filing the death claim have been met	Supervisor, by claimant or someone acting on claimant's behalf; then to appropriate OWCP district office.
CA-6	Official Supervisor's Report of Employee's Death	Notifies OWCP of the work- related death of an employee.	Supervisor.	Within 10 workdays after knowledge by supervisor of an employee's work related death.	Appropriate OWCP district office.
CA-7	Claims for Compensation	Claims compensation for (1) leave without pay due to injury related disability or absence to obtain medical treatment; (2) repurchase of sick or annual leave used due to injury related disability or absence to obtain medical treatment; (3) loss of wage-earning capacity resulting from the work injury; (4) schedule award for permanent impairment resulting from the work injury.	Employee and supervisor or injury compensation specialist	By employee as soon as possible following wage loss or awareness of impairment by supervisor or injury compensation specialist within 5 work days from receipt from employee	Supervisor, by employee or someone acting on employee's behalf, then to the appropriate OWCP office by the supervisor.
CA-8	Claim for Continuing Compensation on Account of Disability.	Claims compensation when loss of pay continues beyond time coverage by the claim on form CA-7.	Employee or someone acting on employee's behalf, supervisor, and attending physician (on attached Form CA-20a).	At least 5 days before the end of the period claimed on form CA-7 or CA-8 for the period of disability supported by medical evidence.	Supervisor, by employee or someone acting on employee's behalf, then to the appropriate OWCP office by the supervisor.

## Appendix A: Injury Compensation Forms Description

CA-16	Authorization for Examination and/or Treatment	Authorizes an injured employee to obtain immediate examination and/or treatment from a physician chosen by the employee for an on-the-job injury and provides OWCP with initial medical report. Treatment may be obtained from a local hospital or physician.	Part A – Supervisor  Part B - Attending Physician	Part A - By supervisor within four hours of a traumatic injury. May be issued up to one week after injury.  Part B - By attending physician or medical facility as promptly as possible after initial examination.	Part A - Given to employee to provide to physician. Completed form sent to appropriate OWCP district office.
CA - 17	Duty Status Report	Provides supervisor and OWCP with interim medical report containing information on employee's ability to return to work and physical limitations.	Side A: Supervisor Side B: Attending physician.	Promptly upon completion of examination.	Original to employing agency; copy to OWCP central mail address.
CA-20	Attending Physician's Report	Provides medical support for claim and is attached to form CA-7 (can also be obtained or submitted separately); provides OWCP with medical information.	Attending Physician.	Promptly upon completion of examination.	Appropriate OWCP office, if attached to form CA-7; OWCP central mail address otherwise
CA-20a	Attending Physicians Supplemental Report	Provides OWCP with additional medical information in connection with supplemental claim filed on attached form CA-8.	Attending Physician.	Promptly upon completion of examination or most recent treatment.	Appropriate OWCP office.
OWCP 1500a	Federal Employees Compensation Program Medical Providers Claim Form.	Provides OWCP with standard billing form to facilitate payment of medical bills. The form should accompany the CA-16 when employee is referred to a physician.	Attending physician, employee must sign on item 12.	Promptly upon completion of examination or treatment, physician may submit in usual billing cycle.	Appropriate OWCP office.