## **General Information on the FECA Program**

The following provides general information to employees, supervisors and managers on the AOC Worker's Compensation Program and the FECA.

**Choice of Physician:** An employee has the right to an initial choice of physician. After that, the employee must have pre-authorized approval from the Office of Worker's Compensation Programs (OWCP). If an employee is dissatisfied with their physician, he/she must state the reasons in writing to the OWCP and request permission to change physicians. He/she needs to provide the name, address and specialty of the new physician. The employee may be held liable for any bills incurred without prior approval. The OWCP will honor written referrals to an appropriate specialist by the employee's approved treating physician as long as they relate to the accepted work-related injury.

**Medical Reports/Records:** Complete medical records are extremely important for an evaluation of a claim and bill payments. It is necessary to have all examining physicians send copies of their record(s) and test(s) to the Workers' Compensation Program Unit (WCPU). This should include hospitalization records, radiology reports, nerve condition tests, etc. In cases involving long-term disability, regular medical reports are required for the WCPU and OWCP to keep current on the progress of the employee's treatment program, medications for employee's accepted condition, etc.

**Surgery Approval:** An employee (claimant) must obtain prior approval from the OWCP for any surgical procedure other than emergency surgery. Emergency surgery is defined as any procedure which needs to be performed promptly after the onset of a condition in order to preserve life or function of an organ or body part. A claimant should have his/her doctor submit a report stating the name of the surgical procedure and estimated recovery time. If tests were performed, copies of the test results, radiology reports, etc. must be provided to the WCPU. OWCP may conduct a medical review at any time, and in some cases a second opinion will be necessary.

**Physical Therapy:** To obtain approval, the primary treating physician should submit a request for authorization.

**Fitness Centers:** Fitness Centers do not have qualified/certified personnel to provide therapy for employees who suffered a work-related injury or occupational illness/disease for which a physician has prescribed physical therapy. Therefore, fitness centers should not be used to provide therapy for employees who have suffered a work-related injury or illness/disease.

**Long-Term Disability:** In cases of long-term disability, injured workers will be placed on OWCP's periodic rolls, where compensation will be paid every 28 days.

**Change of Address:** If a claimant's mailing address changes, he/she should notify the OWCP and WCPU promptly in writing of the change; these notices must have the claimant's signature.

**Missing Checks:** Payments are processed by the OWCP. All payments are issued by the U.S. Treasury Department every Friday. If a claimant does not receive a payment, the claimant should wait 10 days, and then request a tracer action on the missing check to the OWCP in writing.

**Health Benefits:** In cases involving long-term disability, health benefits will be transferred to the OWCP. Open season for changes to health benefit plans normally occurs in November of each year. Claimants need to look for changes in deductions for health benefits the first pay period in January of each year. The information that will be sent to the claimants by their health providers will advise them of new rates and effective dates if they must make a change, Any questions regarding health and life insurance benefits should be directed to the Human Capital Management Division - Employee Benefits and Services Branch. They can be reached at 202.226.2548.

**Cost of Living Increases:** Cost of living increases may be authorized based on the Consumer Price Index (CPI). Normally, the increases are given each March 1<sup>st</sup>. A claimant must be disabled for at least one year to be eligible for any cost of living increase.

**Bills:** To facilitate prompt and accurate processing of employee bills, please submit bills to the AQS, P.O. Box 8300, London, KY, 40742-8300, with the claimant's OWCP case file number on the right hand side of the bill.

**Fee Schedule:** OWCP uses a schedule of maximum allowable medical changes. The rates are determined based on geographic locations as a result of agreements with the Federal government. Employees are <u>not</u> responsible for charges in excess of the medical fee schedule.

**Forms:** Bills for treatment of an employee's accepted condition need to be submitted on Standard AMA billing form, HCFA-1500. Most doctors have this form or can obtain it through the Medicare carrier of the area. The medical provider must itemize services for each date separately, using AMA (not state) CPT codes for services performed; provide tax identification number, and sign and date the bill. The same holds for claimants' paid deductible charges for which the claimant is seeking reimbursement.

**Hospital Bills:** Should be submitted on a form UB-92, itemized fully, and submitted with admissions and discharge medical summaries and dates.

**Pharmacy Bills and Medical Reimbursements:** Must be submitted on form OWCP 915, "Claim for Reimbursement Form," and must be accompanied by original receipts. Tax identification numbers may be written in above the pharmacy's name. Please do not submit bills on small pieces of paper. If the receipt is small, tape (not staple) it to a full size sheet of paper with claimant's name and case file number indicated in the upper right hand corner.

**Chiropractic Care:** Charges for chiropractic care are limited to charges for manual manipulation of the spine for correction of a subluxation demonstrated by X-ray. Other modes of treatment will not be covered and are the claimant's responsibility.

**True Limitations:** Bills must be submitted within one year of the date of service or the acceptance of the claim.

**Nurse Intervention:** OWCP offers nurse care managers to facilitate cases that are processed through the Quality Case Management Unit.

**Fees for Attorney/Representative Service:** Claimants are solely responsible for paying fees and other charges. OWCP will not reimburse the claimant, nor is OWCP in any way liable for the amounts charged.