



UNITED STATES DEPARTMENT OF LABOR

# **Interagency Meeting: PEER in FY2022 & COVID-19 FECA Claims**

Office of Workers' Compensation Programs (OWCP)  
Division of Federal Employees', Longshore and Harbor  
Workers' Compensation (DFELHWC)

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March 17, 2021

FECA Program



# Antonio Rios

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Director, Division of Federal Employees', Longshore and Harbor Workers' Compensation



## Meeting Logistics

- Everyone is muted during the presentation due to the large number of attendees.
- There will be an opportunity to ask questions:
  - A few slides before the presentation is over, we will open the chat feature which you can use to submit questions to the presenters. I will let you all know during the presentation when the chat feature is available to start typing in your questions, I will finish the presentation, and then at the end of the presentation we will address the questions we receive via the chat.

# Agenda


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## Agenda

- Protecting Employees, Ensuring Reemployment (PEER)
  - 2021/2022 Performance
  - Proportional Agency Impact
  - Underperforming Goals 2022 (Goals 1, 2, 3, 4, 6)
    - Goals 1 & 2 (OSHA)
    - Goal 3 Explained / Impact Agencies Failing
    - Goal 4 Explained / Impact Agencies Failing
    - Goal 6 Explained / Impact Agencies Failing
- COVID-19 Claims



# **PEER: 2021/2022 Performance**

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## FY 2021 PEER Performance

Goal	Result
Goal 1 – Total Case Rate	1.78
Goal 2 – Total Lost Time Case Rate	1.2
Goal 3 – Timely filing of Injury and Illness Notices (CA-1/2 forms)	✓ 99%
Goal 4 – Timely filing of Wage Loss Claims (CA-7 forms)	✓ 98%
Goal 5 – Return to Work (initial 45 day post-injury period) – COP	✓ 71%
Goal 6 – Return to Work (two-year period)	✓ 93%
Goal 7 – File ALL notices of injury and compensation claims in ECOMP	✓ 100%



# UNITED STATES DEPARTMENT OF LABOR

## FY 2022

Goal 1 – Total Case Rate	X 1.96
Goal 2 – Total Lost Time Case Rate	X 1.35
Goal 3 – Timely filing of Injury and Illness Notices (CA-1/2 forms)	X 97%
Goal 4 – Timely filing of Wage Loss Claims (CA-7 forms)	X 96%
Goal 5 – Return to Work (initial 45 day post-injury period) – COP	✓ 75%
Goal 6 – Return to Work (two-year period)	X 91%
Goal 7 – File ALL notices of injury and compensation claims in ECOMP	✓ 100%

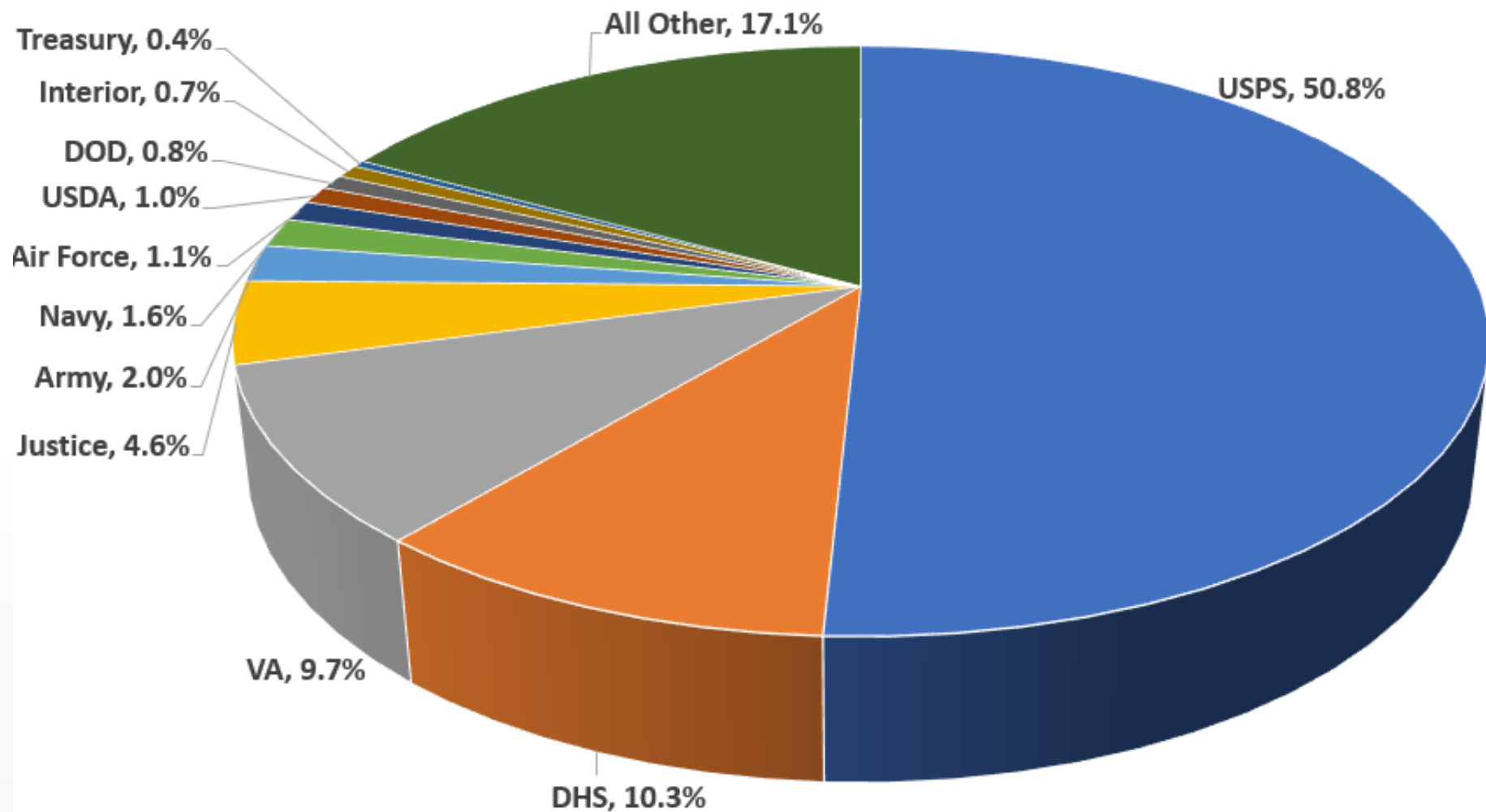
Agency	Goal 1	Goal 2	Goal 3	Goal 4	Goal 5	Goal 6	Goal 7*
All Government	1.96 / 1.53	1.36 / 1.00	97% / 98%	96% / 98%	75% / 69%	91% / 93%	100% / 100%
United States Postal Service	N/A	N/A	95% / 98%	97% / 98%	72% / 66%	92% / 93%	100% / 100%
Department of Veterans Affairs	2.04 / 1.69	1.52 / 1.12	100% / 98%	99% / 98%	88% / 73%	91% / 93%	100% / 100%
Department of Homeland Security	7.16 / 4.02	4.80 / 2.18	97% / 96%	93% / 92%	61% / 69%	90% / 91%	100% / 100%
Department of Justice	4.56 / 3.05	3.56 / 2.14	100% / 98%	94% / 98%	79% / 66%	92% / 90%	100% / 100%
Department of the Army	1.24 / 1.09	0.80 / 1.00	98% / 98%	96% / 93%	90% / 78%	91% / 92%	100% / 100%
Department of the Navy	1.08 / 1.07	0.36 / 1.00	99% / 99%	97% / 98%	77% / 77%	94% / 95%	100% / 100%
Department of Agriculture	2.64 / 3.16	1.48 / 1.97	99% / 94%	99% / 98%	81% / 64%	91% / 92%	100% / 100%
Department of the Air Force	1.12 / 1.00	0.88 / 1.00	100% / 99%	100% / 98%	90% / 95%	82% / 92%	100% / 100%
Department of the Interior	2.24 / 2.58	0.96 / 1.02	98% / 98%	95% / 92%	64% / 75%	86% / 87%	99% / 100%
Department of Defense (excluding Air...	0.92 / 1.00	0.72 / 1.00	94% / 98%	97% / 98%	87% / 79%	90% / 90%	100% / 100%
Department of Treasury	0.28 / 1.00	0.16 / 1.00	98% / 98%	87% / 92%	77% / 74%	91% / 90%	100% / 100%
All Other Agencies	0.67 / 1.53	0.39 / 1.00	98% / 98%	90% / 98%	82% / 69%	N/A	99% / 100%



# PEER: Proportional Agency Impact



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# PEER: Underperforming Targets 2022 (Goals 1 & 2)

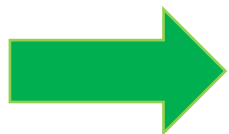
Mikki Holmes, OSHA  
Office of Federal Agency Programs

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## What's Impacting Injury & Illness Rates?

- More employees working from home



Decreased Filings?

- COVID-19



Increased Filings?



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## Non-COVID Cases vs. COVID Cases

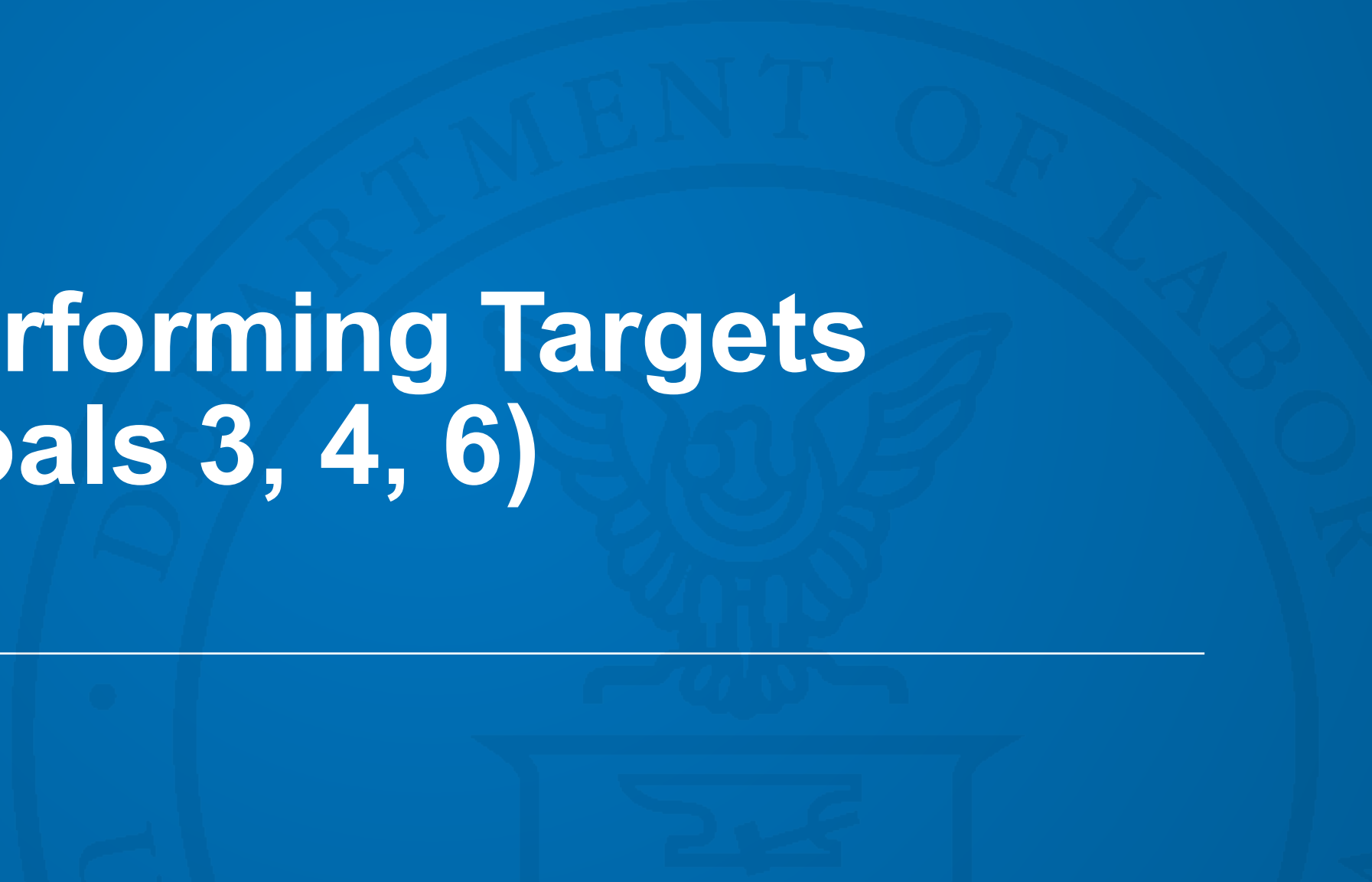
\*For cases/agencies considered in OSHA rate calculations

Fiscal Year	# Non-COVID Cases	# COVID Cases	Total Cases
2016	45,905	-	45,905
2017	43,876	-	43,876
2018	42,210	-	42,210
2019	34,067	-	34,067
2020	29,980	5,097	35,077
2021	28,915	11,226	40,141
2022 (Q1)	7,535	3,641	11,176



## How to Move Forward with Goals 1 & 2?

- Survey agencies on what factors are impacting their rates?
- Look at OSHA inspections/notices?
- Lessons learned from pandemic?
- New measurements to assess agencies OSH programs?

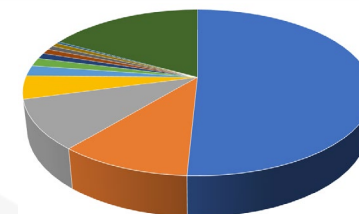


# **PEER: Underperforming Targets 2022 (Goals 3, 4, 6)**

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## PEER: Underperforming Goals 2022



Agency	Goal 1	Goal 2	Goal 3	Goal 4	Goal 5	Goal 6	Goal 7*
All Government	1.96 / 1.53	1.36 / 1.00	97% / 98%	96% / 98%	75% / 69%	91% / 93%	100% / 100%
United States Postal Service	N/A	N/A	95% / 98%	97% / 98%	72% / 66%	92% / 93%	100% / 100%
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Department of Homeland Security	7.16 / 4.02	4.80 / 2.18	97% / 96%	93% / 92%	61% / 69%	90% / 91%	100% / 100%
Department of Justice	4.56 / 3.05	3.56 / 2.14	100% / 98%	94% / 98%	79% / 66%	92% / 90%	100% / 100%
Department of the Army	1.24 / 1.09	0.80 / 1.00	98% / 98%	96% / 93%	90% / 78%	91% / 92%	100% / 100%
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Department of Defense (excluding Air...	0.92 / 1.00	0.72 / 1.00	94% / 98%	97% / 98%	87% / 79%	90% / 90%	100% / 100%
Department of Treasury	0.28 / 1.00	0.16 / 1.00	98% / 98%	87% / 92%	77% / 74%	91% / 90%	100% / 100%



## PEER Underperforming Goals: Planning for Success

- The Branch of Technical Assistance will assist in bi-monthly meetings (instead of monthly) with any agency not meeting the goals we're about to cover.
  - FECA Program Senior Leadership Attending
  - Your Senior Leadership's Attendance Requested
- The DOL Deputy Secretary may send a letter to the Deputy Secretary of agencies identifying PEER goals not being met and noting their importance.

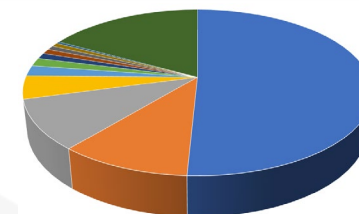
# **PEER: Underperforming Goals 2022 (Goals 3)**

**Goal 3 Explained / Impact Agencies  
Underperforming**

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## PEER: Underperforming Goals 2022



Agency	Goal 1	Goal 2	Goal 3	Goal 4	Goal 5	Goal 6	Goal 7*
All Government	1.96 / 1.53	1.36 / 1.00	97% / 98%	96% / 98%	75% / 69%	91% / 93%	100% / 100%
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Department of Treasury	0.28 / 1.00	0.16 / 1.00	98% / 98%	87% / 92%	77% / 74%	91% / 90%	100% / 100%



# UNITED STATES DEPARTMENT OF LABOR

## PEER Goal 3: Timely Filing of CA-1/2 (10 days)

- CA-1: The filing employee's date provided in block 15 or when clicking "SIGN AND FILE" is used to determine the timeliness of the claim.

17 I certify, under penalty of law, that the injury described above was sustained in performance of duty as an employee of the United States Government and that it was not caused by my willful misconduct, intent to injure myself or another person, nor by my intoxication.

I hereby claim medical treatment, if needed, and the following, as checked below, while disabled for work:

☐ A. Continuation of Regular Pay (COP) ②  
not to exceed 45 days and compensation for wage loss if disability for work continues beyond 45 days. If my claim is denied, I understand that the continuation of my regular pay shall be charged to sick or annual leave, or be deemed an overpayment within the meaning of 5 USC 5584.

☐ B. Sick and/or Annual Leave

I hereby authorize any physician or hospital (or any other person, institution, corporation, or government agency) to furnish any desired information to the U.S. Department of Labor, Office of Workers' Compensation Programs (or to its official representative). This authorization also permits any official representative of the Office to examine and to copy any records concerning me.

Submitting this form is considered the same as signing it.

ECN 120824 | CA-1 Pending Review by FECA Agency Reviewer

Employee Rory Sean Date of Event 11/04/2019  
Organization OFFICE OF ECOMP TESTING Initiated 11/04/2019

[View](#) [Upload Attachments](#) [Get PDF](#)

FORM LOCKED

15. I certify, under penalty of law, that the injury described above was sustained in performance of duty as an employee of the United States Government and that it was not caused by my willful misconduct, intent to injure myself or another person, nor by my intoxication. I hereby claim medical treatment, if needed, and the following, as checked below, while disabled for work:

☐ a. Continuation of regular pay (COP) not to exceed 45 days and compensation for wage loss if disability for work continues beyond 45 days. If my claim is denied, I understand that the continuation of my regular pay shall be charged to sick or annual leave, or be deemed an over payment within the meaning of 5 USC 5584.

☐ b. Sick and/or Annual Leave

I hereby authorize any physician or hospital (or any other person, institution, corporation, or government agency) to furnish any desired information to the U.S. Department of Labor, Office of Workers' Compensation Programs (or to its official representative). This authorization also permits any official representative of the Office to examine and to copy any records concerning me.

Signature of employee or person acting on his/her behalf \_\_\_\_\_ Date 11/04/2019

[EXIT](#) [SIGN AND FILE](#)



# UNITED STATES DEPARTMENT OF LABOR

## PEER Goal 3: Timely Filing of CA-1/2 (10 days)

- CA-2: The filing employee's date provided in block 18 or when clicking "SIGN AND FILE" is used to determine the timeliness of the claim.

### SIGN & FILE FORM

18 I certify, under penalty of law, that the disease or illness described above was the result of my employment with the United States Government, and that it was not caused by my willful misconduct, intent to injure myself or another person, nor by my intoxication.

I hereby claim medical treatment, if needed and other benefits provided but the Federal Employee's Compensation Act.

I hereby authorize any physician or hospital (or any other person, institution, or government agency to furnish any desired information to the U.S. Department of Labor, Office of Workers' Compensation Programs (or to its official representative). This authorization also permits any official representative of the Office to examine and to copy any records concerning me.

Submitting this form is considered the same as signing it.

 FORM LOCKED	ECN 5993132   CA-2	Pending Review by FECA Agency Reviewer	
	Employee Celine Hoa Organization OWCP TEST ONLY	Date of Event Initiated	11/04/2019 11/04/2019
		<a href="#">View</a>	<a href="#">Upload Attachments</a>
		<a href="#">Get PDF</a>	

#### Employee Signature

18. I certify, under penalty of law, that the disease or illness described above was the result of my employment with the United States Government, and that it was not caused by my willful misconduct, intent to injure myself or another person, nor by my intoxication. I hereby claim medical treatment, if needed, and other benefits provided by the Federal Employees' Compensation Act.

I hereby authorize any physician or hospital (or any other person, institution, corporation, or government, agency) to furnish any desired information to the U.S. Department of Labor, Office of Workers' Compensation Programs (or to its official representative). This authorization also permits any official representative of the Office to examine and to copy any records concerning me.

Signature of employee or person acting on his/her behalf \_\_\_\_\_ Date 11/04/2019

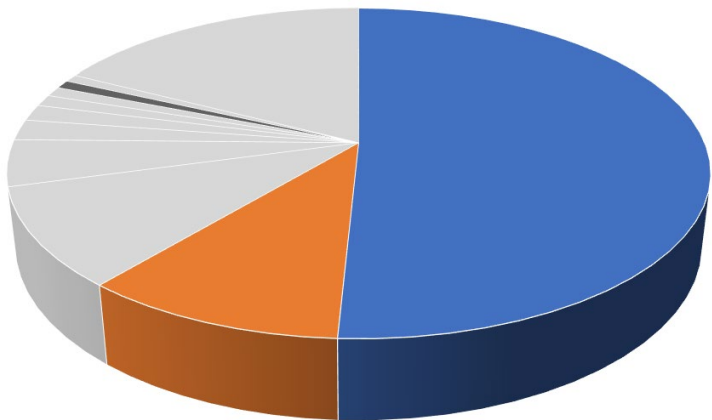
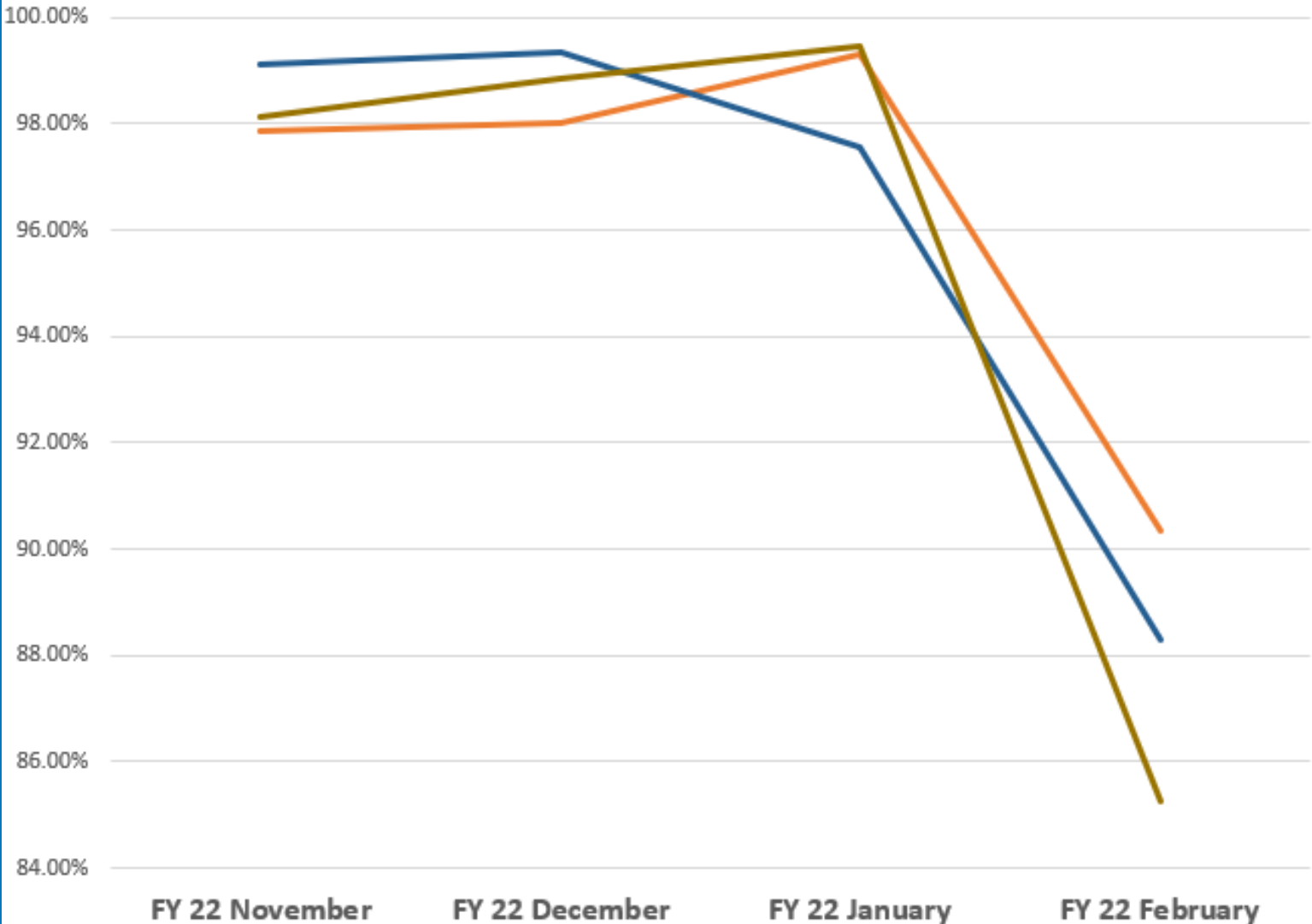
Have your supervisor complete the receipt attached to this form and return it to you for your records.

Any person who knowingly makes any false statement, misrepresentation, concealment of fact or any other act of fraud to obtain compensation as provided by the FECA or who knowingly accepts compensation to which that person is not entitled is subject to civil or administrative remedies as well as to any criminal prosecution and may, under appropriate criminal provisions, be punished by a fine or imprisonment or both.



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PEER Goal 3 - Timely Filing of CA-1/2s:  
Impact Agencies Failing



- Department of Homeland Security
- United States Postal Service
- DoD excl. Air Force, Army, Navy

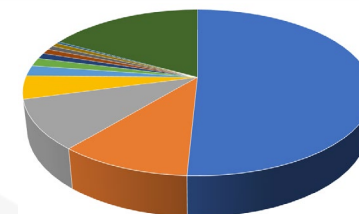
# **PEER: Underperforming Goals 2022 (Goal 4)**

**Goal 4 Explained / Impact Agencies  
Underperforming**

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## PEER: Underperforming Goals 2022





Agency	Goal 1	Goal 2	Goal 3	Goal 4	Goal 5	Goal 6	Goal 7*
All Government	1.96 / 1.53	1.36 / 1.00	97% / 98%	96% / 98%	75% / 69%	91% / 93%	100% / 100%
United States Postal Service	N/A	N/A	95% / 98%	97% / 98%	72% / 66%	92% / 93%	100% / 100%
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Department of Homeland Security	7.16 / 4.02	4.80 / 2.18	97% / 96%	93% / 92%	61% / 69%	90% / 91%	100% / 100%
Department of Justice	4.56 / 3.05	3.56 / 2.14	100% / 98%	94% / 98%	79% / 66%	92% / 90%	100% / 100%
Department of the Army	1.24 / 1.09	0.80 / 1.00	98% / 98%	96% / 93%	90% / 78%	91% / 92%	100% / 100%
Department of the Navy	1.08 / 1.07	0.36 / 1.00	99% / 99%	97% / 98%	77% / 77%	94% / 95%	100% / 100%
Department of Agriculture	2.64 / 3.16	1.48 / 1.97	99% / 94%	99% / 98%	81% / 64%	91% / 92%	100% / 100%
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Department of Defense (excluding Air...	0.92 / 1.00	0.72 / 1.00	94% / 98%	97% / 98%	87% / 79%	90% / 90%	100% / 100%
Department of Treasury	0.28 / 1.00	0.16 / 1.00	98% / 98%	87% / 92%	77% / 74%	91% / 90%	100% / 100%



## PEER Goal 4: Timely Filing of CA-7

- The date the claimant submitted the claim by clicking the “SIGN AND FILE” button is used to measure the timeliness of the claim.

COMPENSATION IS CLAIMED FOR

 FORM LOCKED	CASE 254000204   ECN 5999686   CA-7		Pending Review by FECA Agency Reviewer	
	Employee Organization	 OWCP TEST ONLY	Date of Event Initiated	10/18/2018 <b>11/05/2019</b>
		<a href="#">View</a>	<a href="#">Upload Attachments</a>	<a href="#">Get PDE</a>

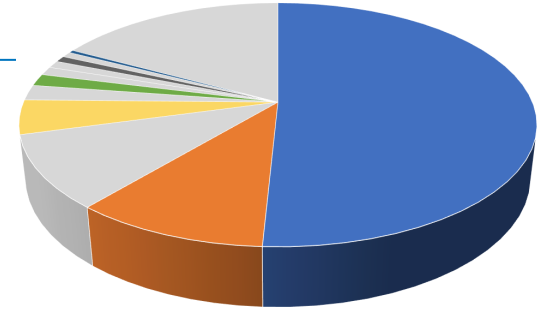
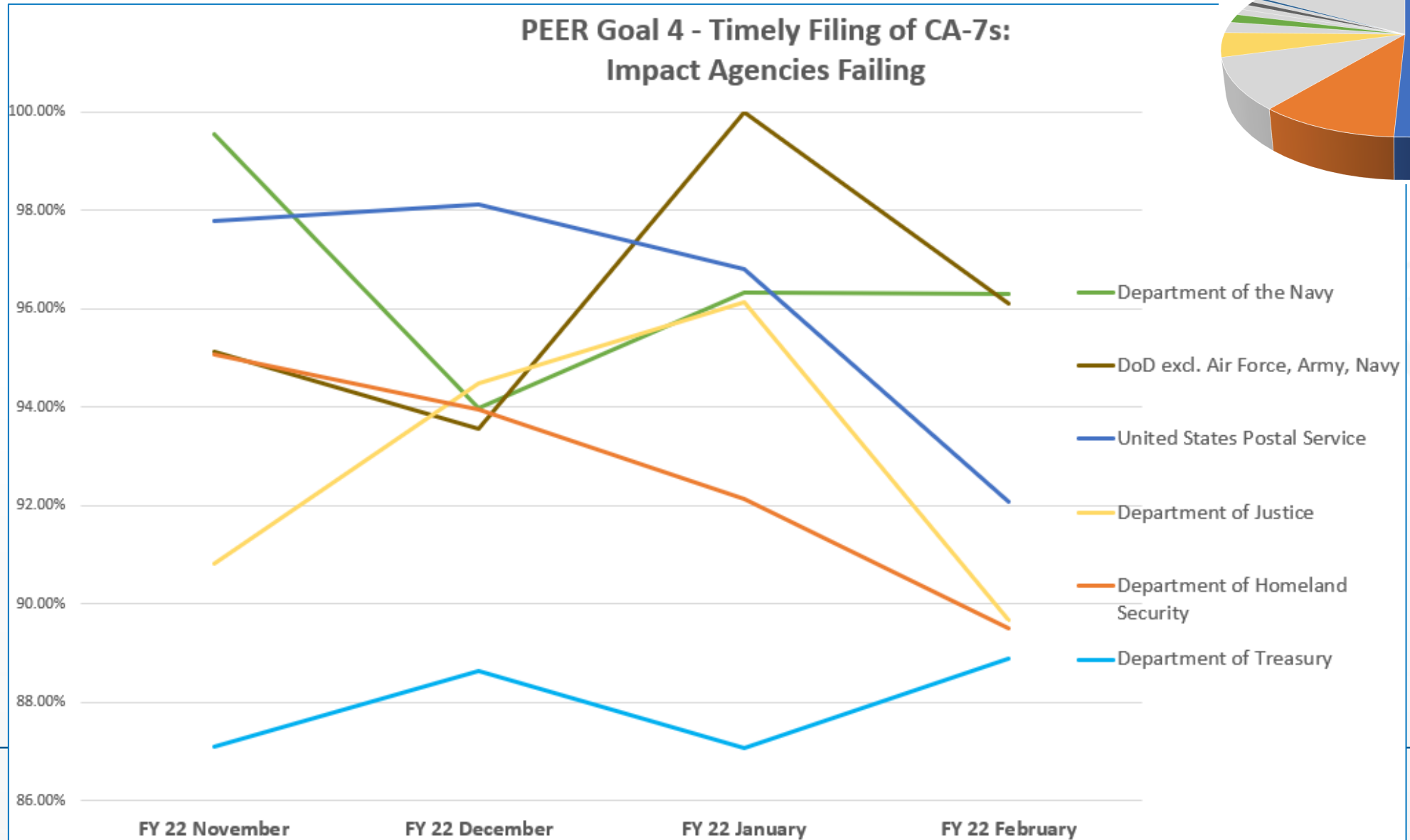
- 7 I hereby make claim for compensation because of the injury sustained by me while in the performance of my duty for the United States. I certify that the information provided above is true and accurate to the best of my knowledge and belief.

Submitting this form is considered the same as signing it.





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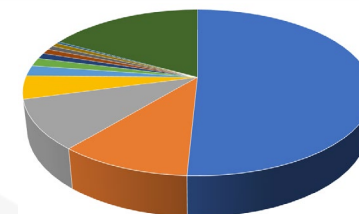
# **PEER: Underperforming Goals 2022 (Goals 6)**

**Goal 6 Explained / Impact Agencies  
Underperforming**

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## PEER: Underperforming Goals 2022



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Department of Treasury	0.28 / 1.00	0.16 / 1.00	98% / 98%	87% / 92%	77% / 74%	91% / 90%	100% / 100%



## PEER Goal 6: RTW after Disability (11 agencies)

Why only 11 agencies?

- Without a sufficient volume of new serious injury cases, individual cases can make meeting a goal difficult despite agency best efforts.

How are cases scored?

- The goal measures return-to-work outcomes within a 2-year period, so the cases scored for FY2022 were initiated in FY2020.



## PEER Goal 6: RTW after Disability (11 agencies)

- Only cases where an injured employee actually returns to some form of gainful employment (federal or non-federal) are scored as successes. Cases **included** in the performance rating are:
  - Cases entered into OWCP's Disability Management (DM) tracking in Employees Compensation Operations and Management Portal (ECOMP).
  - When injured worker returns to the employing agency within the 2 year tracking period from DM start date.
  - RTW status is determined by DM coding entered by OWCP.
- Cases where benefits were terminated, suspended, or simply not claimed by the employee, are **excluded** (see next slide).



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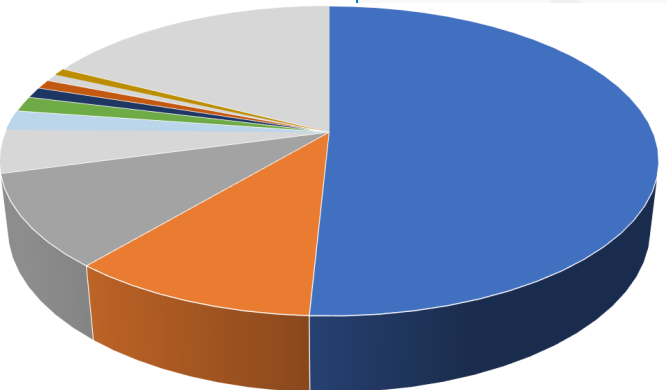
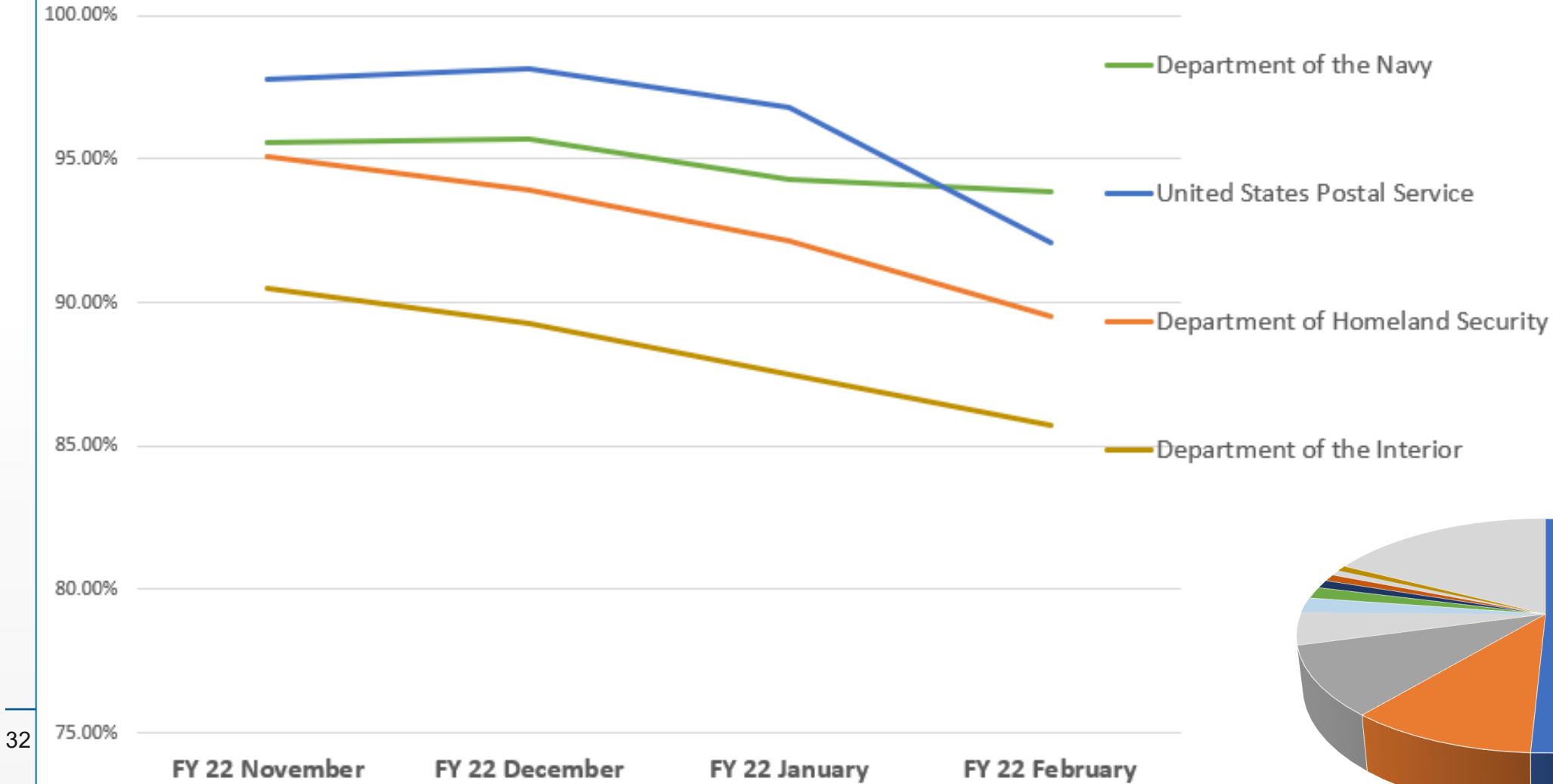
## PEER Goal 6: RTW after Disability (11 agencies) DM Tracking Closure Exclusion from Scoring

CCO	Benefits Terminated, no continuing injury-related disability
CFC	Fraud Termination, against OWCP/US Government
CRC	Reduction – Incarcerated due to Felony
CSB	Compensation Not Claimed
DEA	Death of Claimant
TTD	Continuing Total Disability per Second Opinion/Referee
TNX	Comp reduced/declined temp LD-10.500
CCT	Comp terminated/declined temp LD-10.500
CPN	Permanent Total Disability Determination
SUM	Suspension of Compensation for Obstruction of Medical Examination (if code SRO (Suspension Reopened) is subsequently entered, the case will be removed from exclusion and again tracked for RTW)
SUC	Suspension of Compensation for Rehab Non-Cooperation, but only if preceded by one of the following codes: <ul style="list-style-type: none"><li>• RHN (Placement Previous Employer - Without Other Services)</li><li>• RHW (Placement Previous Employer - With Other Services)</li></ul> If code SRO (Suspension Reopened) is subsequently entered, the case will be removed from exclusion and again tracked for RTW
RMV	Remove from DM - unless followed by a DM code of PFP, PL\$, PLF or PLP within two years of the DM start date



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## PEER Goal 6 - Return to Work (2 Year): Impact Agencies Failing





# COVID-19 FECA Claims

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## FECA Bulletin 21-09, issued April 28, 2021

(Processing FECA Claims for COVID-19 under the American Rescue Plan Act of 2021)

### Covered Exposure

The employee is deemed to have had exposure if, during the covered exposure period, he or she carries out (1) **duties that require a physical interaction with at least one other person** (a patient, a member of the public, or a co-worker) in the course of employment duties, or (2) duties that otherwise include a risk of exposure to COVID-19.

- **The interaction does not have to be direct physical contact.**
- **Nor is there a specified time for such interaction, any duration qualifies. General office contact and interaction is sufficient.**

This includes but is not limited to **interaction in shared workspaces such as lunchrooms, break areas and common restrooms.**

- *FECA previously used High-Risk determinations to make adjudication decisions – no longer necessary under ARPA.*



# UNITED STATES DEPARTMENT OF LABOR

## FECA Bulletin 21-09

### **Covered Exposure Period**

The evidence should establish manifestation of COVID-19 symptoms (or positive test result) **within 21 days of the covered exposure**.

*Existing medical literature suggests that the incubation period of COVID-19 is between 2 and 14 days; however, the use of 21 days acknowledges an employee's potential delay in seeking professional medical evaluation and treatment.*

### **Teleworking Employees**

An employee that is exclusively teleworking during a covered exposure period is not considered a "covered employee" under the ARPA.

- Routine FECA case handling procedures apply.



# UNITED STATES DEPARTMENT OF LABOR

## FECA Bulletin 21-10 (08/18/2021)

### Update to Accepted Diagnostic Criteria

Antigen Tests (sometimes referred to as rapid diagnostic tests) became more prevalent so the program stopped requiring contemporaneous medical evidence with them; submission of the antigen test alone became sufficient to establish the medical component of a claim.

In order to establish a diagnosis of COVID-19, an employee (or survivor) should submit:

- A positive Polymerase Chain Reaction (PCR) or Antigen COVID-19 test result; or
- A positive Antibody test result, together with contemporaneous medical evidence that the claimant had documented symptoms of and/or was treated for COVID-19 by a physician (a notice to quarantine is not sufficient if there was no evidence of illness); or
- If no positive laboratory test is available, a COVID-19 diagnosis from a physician together with rationalized medical opinion supporting the diagnosis and an explanation as to why a positive test result is not available.



# UNITED STATES DEPARTMENT OF LABOR

## FECA Bulletin 22-06 (02/16/2022)

### Updates to COVID-19 Claims Processing Guidelines Relating to Reinfections and Home Tests

1. Self-administered COVID-19 tests (“home tests”) are insufficient to establish a diagnosis of COVID-19 under the FECA, unless physician monitored and verified.
  - This is because there is no way for FECA claims staff to affirmatively establish (1) the date and time the sample was collected and (2) that the sample collected is that of the injured Federal employee making the claim.
2. A claim for COVID-19 will be considered a new injury when the employee tests positive for COVID-19 90 days or more from the date of the employee’s previous positive COVID-19 test.
  - This had previously been one year between diagnoses and for shorter timeframes between diagnoses it was treated as a recurrence or consequential condition.



# UNITED STATES DEPARTMENT OF LABOR

## COVID-19 FAQs on COP (2/15/22)

Easy-to-understand information on COP, including the type of evidence required during the first 10 days of COP, and thereafter.

<https://www.dol.gov/agencies/owcp/FECA/InfoFECACoverageCoronavirus>

Continuation of Pay (COP) is payable under the FECA **but only if**:

- 1) You can demonstrate **you have COVID-19 via a positive test result** (excluding home tests) or a medical professional. A notice to quarantine for exposure without a COVID-19 diagnosis as described above is **not** sufficient.
- 2) You file your **CA-1 form within 30 days of the date of the injury** (the last date you were exposed at work, prior to the positive test result). **See 20 CFR 10.205.**

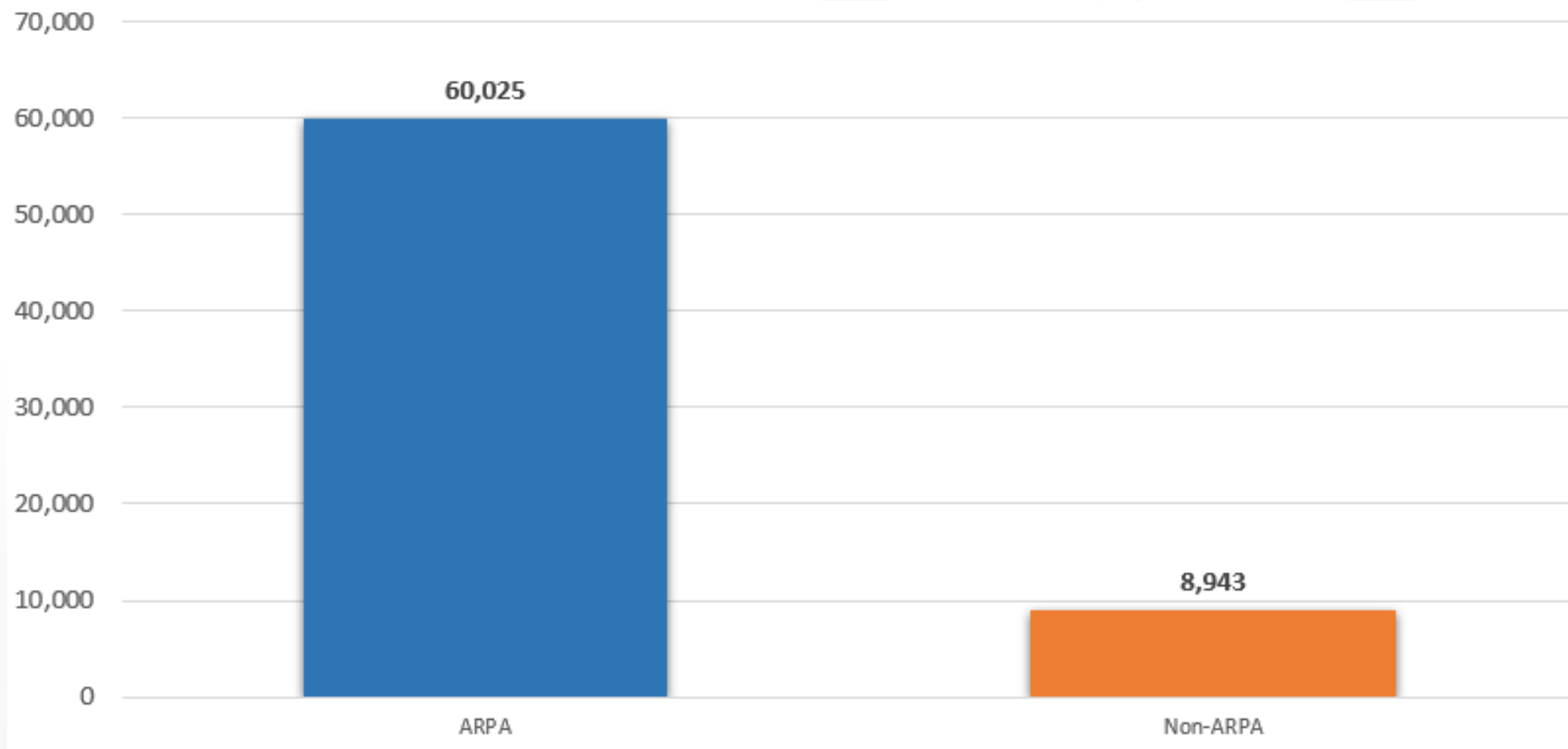
If you are disabled and must be out of work beyond that initial 10-day period, you must submit medical evidence to your employer supporting **disability** resulting from COVID-19.



# UNITED STATES DEPARTMENT OF LABOR

## COVID-19 Cases Created

02/01/20 – 03/11/22

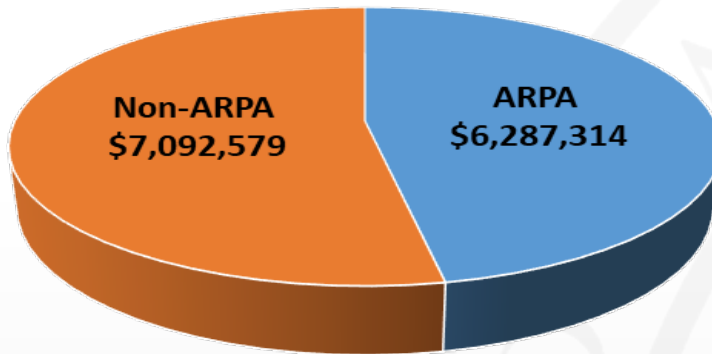




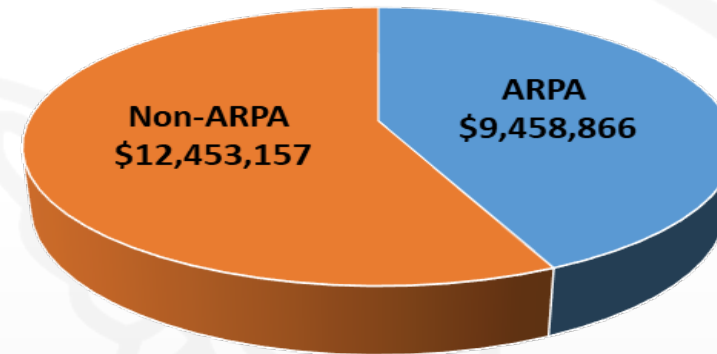
# UNITED STATES DEPARTMENT OF LABOR

## COVID-19 Case Spend

**Total Medical, \$13,379,893**



**Total Compensation, \$21,912,022**





# **Q&A Session Prep Pause**

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## Meeting Logistics

- We will now make the chat feature available to start typing in your questions.
- I will finish the presentation, and then at the end of the presentation we will address the questions we receive via the chat.



# **Continued: COVID-19 FECA Claims**

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## - Updated on February 15, 2022 -

### COVID-19 and Federal Workers' Compensation

The American Rescue Plan Act of 2021 (ARPA) makes it much easier for federal workers diagnosed with COVID-19 to establish coverage under the Federal Employees' Compensation Act (FECA). To establish a COVID-19 claim, you simply need to establish:

- You were diagnosed with COVID-19 via a positive test result (*excluding home tests*) or medical professional<sup>1</sup>; **and**
- Within 21 days of your diagnosis of COVID-19, you carried out duties that required contact with patients, members of the public, or co-workers<sup>1</sup>.

#### [Expand All](#)

› Will I get paid if I miss time from work for isolation after a COVID-19 positive test? Do I qualify for Continuation of Pay (COP)?

› How many days of pay (COP) can I receive during isolation if I have COVID-19?

› What if I file a FECA claim but cannot demonstrate I had COVID-19?

› What if I need to quarantine for exposure and cannot demonstrate I had COVID-19?

#### Important Note:

In preparation for filing your Notice of Traumatic Injury, you should [view this instructional video](#) to learn how to register and verify your identity, [and this video](#) to learn how to file a claim. Doing so now will speed the process when you are ready to file your claim.

#### Social media toolkit

Use our [social media toolkit and graphics](#) to raise awareness of the benefits available to federal employees injured at work, including COVID-19 workers' compensation claims.

### Did you hear it's Easier to File a FECA Claim for COVID-19 now?

The American Rescue Plan Act of 2021 that President Biden signed on March 11, 2021, makes it much easier for federal workers diagnosed with COVID-19 to establish coverage under the Federal Employees' Compensation Act. To establish a COVID-19 claim, you simply need to establish that you are a "covered employee," meaning that:

1. You were diagnosed with COVID-19. Specifically, you were diagnosed with COVID-19 while employed in the Federal service at any time during the period of January 27, 2020 to January 27, 2023; and,
2. Your duties include any risk of exposure. Specifically, within 21 days of your diagnosis of COVID-19, you carried out duties that—
  - a. required contact with patients, members of the public, or co-workers; or
  - b. included a risk of exposure to the novel coronavirus.



What Does the Change



What to Do:



Why File Now?

✓ Will I get paid if I miss time from work for isolation after a COVID-19 positive test? Do I qualify for Continuation of Pay (COP)?

Yes, Continuation of Pay (COP) is payable under the FECA but only if:

- 1) You can demonstrate you have COVID-19 via a positive test result (excluding home tests) or a medical professional. A notice to quarantine for exposure without a COVID-19 diagnosis as described above is not sufficient.
- 2) You file your CA-1 form within 30 days of the date of the injury (the last date you were exposed at work, prior to the positive test result). [See 20 CFR 10.205](#).

If you file a CA-1 and elect to use COP, you must ensure that medical evidence substantiating you have COVID-19 via a positive test result is provided to your employer within 10 calendar days after filing the CA-1. If a qualifying positive test result is on file, you are eligible for COP during that period.

If you are disabled and must be out of work beyond that initial 10-day period, you must submit medical evidence to your employer supporting disability resulting from COVID-19. If evidence supporting disability due to COVID-19 is not submitted, your employer can stop COP after that initial 10-day period. You should also submit/upload proof of your COVID-19 diagnosis and inability to work into your OWCP case file.

✓ How many days of pay (COP) can I receive during isolation if I have COVID-19?

If you meet the two requirements noted above, the Centers for Disease Control (CDC) as of this date recommends a period of isolation of at least 5 days following your symptoms and/or positive test. Therefore, if your file contains a COVID-19 diagnosis via a positive test result (excluding home tests) or medical professional, OWCP will not intervene during the first 10 days of COP since isolation following a positive test result is akin to disability.

OWCP acknowledges that the current recommendation for isolation is 5 days, but because that timeframe has varied and is dependent on symptomology onset, if your file contains a COVID-19 diagnosis via a positive test result (excluding home tests) or medical professional, OWCP will not intervene until the 10-day regulatory timeframe provided for in [20 CFR 10.222](#) has passed.

### ▼ What if I file a FECA claim but cannot demonstrate I had COVID-19?

If you do not submit evidence you had COVID-19 via a positive test result (excluding home tests) or a medical professional within 10 days, and your employing agency requests that OWCP make a formal determination on your claim, OWCP will formally adjudicate your claim and make a determination on COP. If your claim is denied because you cannot demonstrate your COVID-19 diagnosis via a positive test result (excluding home test) or a medical professional, your employing agency can recover any COP previously paid to you.

### ▼ What if I need to quarantine for exposure and cannot demonstrate I had COVID-19?

**If you do not have COVID-19 but cannot work because you must quarantine, consider the following:**

Quarantine periods are for when you have been exposed to COVID-19, but there is no evidence that you have COVID-19. Quarantine recommendations vary based on vaccine status, whether you have had COVID-19 in the last 90 days, and other factors. Visit the Centers for Disease Control (CDC) [COVID-19 website](#) for more detail on quarantine recommendations.

OWCP cannot accept a worker's compensation claim based solely on quarantine or exposure, and COP is not payable solely for quarantine or exposure.

Consult your employing agency for leave options that may be available if you must quarantine. You can also visit the [Safer Federal Workforce website](#) for the most up to date information pertaining to available leave options to include potential weather and safety leave. The Safer Federal Workforce Task Force is led by the White House COVID-19 Response Team, the General Services Administration (GSA), and the Office of Personnel Management (OPM) and provides valuable information for federal employees regarding the federal response to COVID-19 and how the federal government is responding to keep its workforce safe.

# Did you hear it's Easier to File a FECA Claim for COVID-19 now?

The American Rescue Plan Act of 2021 that President Biden signed on March 11, 2021, makes it **much easier** for federal workers diagnosed with COVID-19 to establish coverage under the Federal Employees' Compensation Act. To establish a COVID-19 claim, you simply need to establish that you are a "covered employee," meaning that:

1. **You were diagnosed with COVID-19.** Specifically, you were diagnosed with COVID-19 while employed in the Federal service at any time during the period of January 27, 2020 to January 27, 2023; and,
2. **Your duties include any risk of exposure.** Specifically, within 21 days of your diagnosis of COVID-19, you carried out duties that—
  - a. required contact with patients, members of the public, or co-workers; or
  - b. included a risk of exposure to the novel coronavirus.



## What Does the Change in the Law Mean?

1. **You are only required to establish that your duties included a risk of exposure to COVID-19.** You do not have to prove you were engaged in high-risk employment; that you were actually exposed to the virus; or that you were exposed to someone who had the virus while performing your duties.
2. **If you establish that you are a "covered employee," any diagnosed COVID-19 will be deemed to have been proximately caused by your Federal employment.** You no longer have to establish a causal link between your employment and your COVID-19 diagnosis.



## What to Do:

You can quickly and easily file a **CA-1** Claim for COVID-19 through the Employees' Compensation Operations and Management Portal (ECOMP). You can access ECOMP at [ecomp.dol.gov](https://ecomp.dol.gov). If you have never used ECOMP, you can [view this instructional video](#) to learn how to register for an ECOMP account, [and this video](#) to learn how to file a COVID-19 claim. If you don't have access to a computer, contact your supervisor.



## Why File Now? What if I Think I Am OK?

If you were previously diagnosed with COVID-19 or even if you believe you just have a mild case of COVID-19, you should consider filing a COVID-19 FECA claim **now** even if you have fully recovered and/or had an asymptomatic infection.

- In the event you develop a consequential injury, impairment or illness later as a result of your COVID-19 diagnosis, timely filing your claim **now** will facilitate the processing of any future claim for any such consequential condition or impairment.
- If you wait until you experience a consequential injury or illness to file your COVID-19 claim, your claim may be subject to time limitation and you will have to establish **both** the initial COVID-19 claim and the consequential condition claim before benefits can begin.



OFFICE OF WORKERS' COMPENSATION PROGRAMS  
UNITED STATES DEPARTMENT OF LABOR



## Welcome to your ECOMP Dashboard

To file a new injury/illness claim, click on the "New Claim" link above.

If you are filling a claim for COVID-19, use FORM CA-1 COVID-19.

Documents upload and management may be accessed in the "Documents" link above.

Each existing injury/illness claim you have initiated can be found in the Cases tab of the table below. If you have any forms in Draft Status, they will be listed in the Draft Forms tab of the table. The Action Required tab shows if additional information is required in order to process your claim. This includes returned claim forms. If you do not respond, your entitlement to benefits may be delayed or suspended. If your Action Required tab is empty there is nothing required of you at this time.

By clicking anywhere in the row of an injury/illness claim in the table below, you will be taken to its Case Review page where you can:

- Finish filing any injury/illness claims that are in Draft status.
- View case details including the injury claim information; forms associated with the case; claim status; compensation payment tracking; compensation payment history; and from within the payment period details you may also access the compensation amount, health benefit and life insurance details, payee information, and the formula for compensation. You can also access additional billing information through the "Bill Pay Inquiry" link. Pharmacy information is available through the "Pharmacy Benefit" link.
- File associated claim forms, such as a CA-7 Claim for Compensation, using the "New Case Form" drop down button within the Forms tab of the Case Review page.
- Review and respond to case letters and requests for information. If OWCP needs information to process your claim, the request letter will appear in the Response Required tab. If the request is overdue it will appear in the Overdue Request tab. If you do not respond to these items, your entitlement to benefits may be delayed or suspended. Letters that are informative and require no response appear in the Informational Letters tab.

## To file a form for injury or illness:

- 1 Claim benefits using either form **CA-1 (for Traumatic Injury)** or form **CA-2 (for Occupational Disease)**. Pending review of your claim, you may receive a FECA Case Number. If you are filling a claim for COVID-19, use FORM CA-1 COVID-19. (?)

FILE CA-1 OR CA-2

FILE CA-1 COVID-19

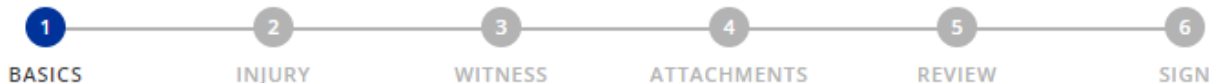


UNITED STATES DEPARTMENT OF LABOR

ECOMP

MY DASHBOARD

[HOME](#) / [EMPLOYEE HOME](#) / CA-1-COVID-19



## CA-1 COVID-19 Claim

[CA1 filing Help](#)

ECN 172231 | Draft

Welcome to CA-1. The steps in this form are listed in the navigator above. Unless otherwise noted, you must complete all fields. Start by filling out your basic information below.

### EMPLOYEE BASICS

Employee First Name

Middle Name (optional)

Last Name

1

# Q&A Session

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