



**U.S. Department of Justice**  
**Federal Bureau of Prisons**

**PROGRAM STATEMENT**

OPI: HSD/OSH

NUMBER: 1601.06

DATE: April 8, 2024

## **Workers' Compensation Program**

/s/

*Approved:* Colette S. Peters

Director, Federal Bureau of Prisons

### **1. PURPOSE AND SCOPE**

To establish procedures for the Bureau's Workers' Compensation Program to ensure compliance by all employees with the Federal Employees' Compensation Act (FECA) (20 CFR Part 10). In addition:

- To provide limited light duty (LLD) assignments to Bureau employees who have incurred job-related injuries or illnesses that temporarily prevent them from performing their assigned duties.

FECA provides compensation benefits to United States civilian employees for disability due to personal injury or disease sustained while in the performance of official duty. It also provides for the payment of benefits to dependents if a work-related injury or disease causes an employee's death. As provided for by Federal regulations and statutes, injured/ill workers will be assisted in returning to work, consistent with their medical condition.

The Department of Labor (DOL), Office of Worker's Compensation Programs (OWCP) administers the FECA. OWCP reviews all medical and factual information presented on behalf of an injured worker (IW) for adjudication of the claim.

A list and description of the forms relating to the Workers' Compensation Program may be found in 20 CFR part 10.7 and may be accessed through [www.dol.gov/owcp/dfec/regs/compliance/forms.htm](http://www.dol.gov/owcp/dfec/regs/compliance/forms.htm). A limited list of forms and their descriptions can be found in Attachment A (Commonly Used DOL Forms).

**a. Summary of Changes.**

*Policy Rescinded*

1601.05 Workers' Compensation Program

- Provides updated list of acronyms and abbreviations.
- Moved the responsibilities of writing and issuance of the LLD letter from the supervisors and Human Resource Department (HRD) to the Centralized Workers' Compensation Unit (CWCU).
- Clarifies the IW's responsibilities, including filing required forms, timeframes, and limited light duty assignments.
- Removed "Employer Responsibilities" and "Institution Responsibilities." Content of both sections has been added to CWCU.
- Minimized OSD responsibilities to include removing/transferring all case management to the CWCU.
- Outlines the expanded roles and responsibilities of the CWCU.
- Clarifies and outlines the expanded role of the Workers' Compensation Committee (WCC) and LLD offer process.
- Attachments reduced from seven to one.
- The terms "staff" and "staff member (s)" have been replaced with the term "employee (s)."

**b. Program Objectives.** The expected results of this program are:

- Claims will be promptly filed, reviewed, and processed in accordance with the FECA.
- The length of employee absence from the job because of worker's compensation claims will be reduced by providing LLD assignments to return injured/ill employees to duty in a manner consistent with their prescribed medical condition/limitations.

**c. Institution Supplement.** None required. Should local facilities make any changes outside the required changes in the national policy or establish any additional local procedures to implement national policy, the local union may invoke to negotiate procedures or appropriate arrangements.

**d. Acronyms and Abbreviations.**

ACA	American Correctional Association
AR	Agency Reviewer
CEO	Chief Executive Officer
CFR	Code of Federal Regulations
COP	Continuation of Pay

CWCU	Centralized Workers' Compensation Unit
DOL	Department of Labor
ECOMP	Employees Compensation Operations & Management Portal
FECA	Federal Employee Compensation Act
HRD	Human Resource Department
IW	Injured Worker LLD Limited Light Duty
LWOP	Leave Without Pay
OSD	Occupational Safety Department
OWCP	Office of Workers' Compensation Programs
SA	Safety Administrator
USC	United States Code
WCC	Workers' Compensation Committee

## 2. CLAIMS PROCESSING PROCEDURES

An outline of claims processing procedures is provided below. Detailed information is available on each applicable form.

- The employee will report any work-related injury to their immediate supervisor without delay.
- CEOs at training locations will designate a local Point of Contact (POC) to provide claims processing guidance to employees that are not permanently assigned.
- To claim benefits under the FECA, an employee who sustains a work-related injury/illness must give notice of the injury on the appropriate form via ECOMP.
- The employer shall issue Form CA-16, "Authorization for Examination And/Or Treatment", within four hours of the claimed injury. If the employer gives verbal authorization for such care, they should issue a Form CA-16 within 48 hours. The employer is not required to issue a Form CA-16 more than one week after the occurrence of the claimed injury.
- The employee, or their designee, will use DOL's electronic transmission system to document the injury/disease, <https://www.ecomp.dol.gov/#/>
- The supervisor and/or CWCU will assist the employee in completing the electronic forms, if necessary.
- The employee submits the completed forms in DOL's electronic transmission system. The system will forward the employee's completed portion of the claim form to the supervisor and agency reviewer (AR).
- The AR ensures the supervisor has completed the forms in its entirety; obtained salary information from the Human Resource Department, if necessary; and processed the forms appropriately (i.e., file or forward to OWCP).

### 3. EMPLOYEE RESPONSIBILITIES

When an employee is injured at work or experiences an occupational exposure due to work-related reasons, they need to report it to their immediate supervisor without delay.

Any employee who will be or is absent due to illness or injury will notify the supervisor, prior to the start of the employee's shift or as soon as possible, of the inability to report to duty and the expected length of absence.

The employee has the right to their initial choice of physician. The employer (supervisor, OSD, or CWCU) must allow the IW to select a qualified physician, after advising them of those physicians excluded under 20 CFR 10.300 (d). A "provider search" is available via DOL's website.

OSD must issue Form CA-16, "Authorization for Examination And/Or Treatment," within four hours of the claimed injury; however, after hours and on weekends, designated employees will issue the CA-16. Where there is no time to complete a Form CA-16, the employer should authorize medical treatment by telephone and send the completed form to the medical facility within 48 hours. The employer is not required to issue a Form CA-16 more than one week after the occurrence of the claimed injury. The employer may not authorize examination or medical or other treatment in any case that OWCP has disallowed. The name and address of the medical provider must be written on CA-16 prior to issuance. Refer to Attachment A (Commonly Used DOL Forms).

Form CA-16," may be used for the initial medical report; Form CA-20, "Attending Physician's Report," may also be used for the initial report. This report may also be provided in narrative form on the physician's letterhead stationery. The report should bear the physician's signature or signature stamp. Mid-level providers/Advanced Practice Providers (nurse practitioners and physician assistants) must be countersigned by a qualified physician. OWCP may require an original signature on the report.

The report must be submitted directly to OWCP, using DOL's electronic transmission system, as soon as possible after medical examination or treatment is received.

To claim benefits under the FECA, an employee who sustains a work-related traumatic injury must give notice of the injury by submitting a Form CA-1, "Federal Employee's Notice of Traumatic Injury and Claim for Continuation of Pay/Compensation," using DOL's electronic transmission system. The person submitting a notice must include the Social Security Number (SSN) of the injured employee. To elect COP, the IW needs to check box 15a on the form CA-1, "Federal Employee's Notice of Traumatic Injury and Claim for Continuation of

Pay/Compensation.”

First time users of DOL’s electronic transmission system are highly encouraged to access the user guides for “FECA Claimant” that include: Introduction, Identity Verification, Registering for an ECOMP account, and filing claim forms. These tutorials are accessible in video format in the “HELP” section of DOL’s electronic transmission system.

If incapacitated, the supervisor, OSD, or any management official will notify CWCU, who may give notice of injury on the employee’s behalf.

The IW verifies the official employer’s email address of the supervisor before submitting forms through DOL’s electronic transmission system. They would then complete and submit the appropriate forms through DOL’s electronic transmission system.

An employee who has an occupational disease/illness they believe to be work-related, must give notice on Form CA-2 (Notice of Occupational Disease and Claim for Compensation) using DOL’s electronic transmission system.

After the COP (Continuation of Pay) period is exhausted, the employee, or someone acting on their behalf, must file Form CA-7 “Claim for Compensation Form” before compensation can be paid. The employee filing a CA-7 is responsible for submitting, or arranging for the submittal of, medical evidence to OWCP which establishes both that disability continues and that the disability is due to the work-related injury.

For periods of disability not covered by COP, the IW may elect to use personal leave or OWCP leave without Pay (LWOP). If LWOP is elected, the IW is required to file a memorandum with their CEO, or designee, requesting OWCP LWOP for time and attendance (T&A) purposes. Pursuant to applicable laws/regulations, this request cannot be denied.

If OWCP/LWOP is elected, the IW must complete and submit Form CA-7, using DOL’s electronic transmission system. The system will forward the employee’s completed portion of the claim form to the supervisor and agency reviewer (AR). DOL’s electronic transmission system will not allow IWs to file a CA-7 for future dates. To ensure timely processing of this form, duplicate dates should not be filed.

To facilitate payment for the initial CA-7, a Direct Deposit form, SF-1199A must be uploaded to DOL’s electronic transmission system. This form may be obtained from the DOL forms link, [www.dol.gov/owcp/dfec/regs/compliance/forms.htm](http://www.dol.gov/owcp/dfec/regs/compliance/forms.htm).

Upon receipt of initial medical documentation, the IW will upload the documentation in

DOL's electronic transmission system and forward a copy to the CWCUC. If this initial medical documentation is not received within 10 calendar days, COP will be terminated, in which the employee will then be keyed sick, annual, AWOL, and/or LWOP. Where the medical evidence is later provided, however, COP shall be reinstated retroactive to the date of termination.

The appropriate documentation being submitted in support of the absence should include the following information:

- Medical diagnosis.
- Prognosis.
- Projected treatment.
- Restrictions.

The IW provides completed CA-17, OWCP-5 (a-c), or the equivalent, to CWCUC along with keeping their supervisor informed of work status and/or restriction(s).

If a LLD assignment has been made, the IW notifies the supervisor and CWCUC when the LLD assignment is no longer necessary (or when medically cleared to return to duty if no LLD assignment) and provides a written release from the physician.

If an IW can resume regular Federal employment, they must do so. No further compensation for wage loss is payable once the IW has recovered from the work-related injury to the extent that they can perform the duties of the position held at the time of injury or earn equivalent wages.

The IW will be afforded the opportunity to attend the WCC meeting telephonically or virtually. If the IW did not attend their WCC meeting, and they object to the LLD assignment, the supervisor and CWCUC will confer as soon as practicable with the IW (to include their representative when applicable) to discuss the IW's objections.

If the IW's objections are not resolved, they will provide their objections in writing. CWCUC will forward these objections to the Workers' Compensation Committee for reconsideration.

In the event the IW's objection(s) to the LLD are not resolved by the Workers' Compensation Committee, the LLD proposal and objection(s) are forwarded to DOL/OWCP/FECA for a determination.

The facility is responsible for identifying areas for potential LLDs. Ordinarily the IW will maintain their regular shift and days off.

An IW who refuses or neglects to work after suitable work has been offered, has the burden to show that this refusal or failure to work was reasonable or justified. Unacceptable refusal may result in OWCP terminating the employee's entitlement to further compensation.

Unacceptable reasons for refusing an LLD offer as determined by OWCP:

- Personal dislike of position offered or work hours scheduled.
- Lack of potential for promotion.

#### **4. SUPERVISOR'S RESPONSIBILITIES**

When an employee reports a work-related injury or illness to their supervisor, the supervisor is required to:

- Ensure the IW is provided the opportunity to receive medical attention immediately (if necessary) and notify OSD and CWCU promptly.
- The supervisor, OSD, or CWCU should advise the IW of the right to their initial choice of physician and allow the IW to select a qualified physician. See 20 CFR §10.300 (d) and 825(b). A "provider search" is available via DOL's website.
- If incapacitated, the supervisor, OSD, or any management official will notify CWCU, who may give notice of injury on the employee's behalf.
- Provide instructions on how to access and use DOL's electronic transmission system, and review forms for completeness and accuracy as soon as possible to ensure proper filing in accordance with DOL regulations.
- Review CA-1 or CA-2, and CA-7 submitted by IW and complete supervisor portion of the form accurately and entirely.
- When completing the CA-7, provide HRD direct contact information in the section titled "If OWCP needs specific pay information, the person who should be contacted is."
- When completing the CA-1, CA-2, or CA-7, obtain salary information, to include additional pay types (differentials, premiums, retentions) and/or benefits, including health insurance, from the HRD.
- Provide the IW with your BOP or UNICOR email address.
- Use DOL's electronic transmission system as follows:
  - Click on the link in the email(s) to access the form in DOL's electronic transmission system.
  - Upload any available evidence pertaining to the IW's reported injury or illness.
- Advise the IW of their responsibility to submit appropriate medical documentation of disability. If initial medical is not received within 10 calendar days, COP will be terminated, in which the employee will then be keyed sick, annual, AWOL, and/or LWOP. Where the medical evidence is later provided, however, COP shall be reinstated

retroactive to the date of termination.

Appropriate medical documentation must include the following:

- Medical diagnosis.
- Prognosis.
- Projected treatment.
- Restrictions.
- Advise the employee of their responsibility to upload medical documentation in DOL's electronic transmission system and forward a copy to the CWCU. Provide the employee with CWCU's contact information, which can be found on BOP's Intranet.
- Explain that an LLD assignment (see Section 8 of this Program Statement) must be made available when documentation regarding medical restriction(s) is available and can be met.
- Meet with the Workers' Compensation Committee (WCC) (see Section 9 of this Program Statement) to discuss the restrictions, including the possibility of a LLD assignment.
- Advise relevant supervisor(s) who have a need to know of the IW's restriction(s).

## **5. HUMAN RESOURCE DEPARTMENT RESPONSIBILITIES**

HRD is the subject matter expert for issues related to pay and benefits; therefore, they review requests for salary information on IWs and provide such information to CWCU and supervisory employees, as necessary, to process claim forms.

HRD will respond to communication from DOL and CWCU promptly, but no later than two business days from the date of request.

HRD employees must:

- Provide guidance to the IW and management about the relationship between OWCP benefits and disability retirement.
- Provide salary, premiums (Sunday pay, night differential, holiday, retention, etc.) and benefits information, to include health insurance, to supervisors as needed, for completion of DOL claims forms promptly, but no later than two business days from the date of request.

OWCP documentation may only be used by HRD if provided by the IW and noted on the document as such.

HRD ensures that personnel actions are forwarded for processing (after notification by CWCU of the employee's placement in compensation status), including:



- Documentation of non-pay status.
- Pay actions.
- Restorations to duty.
- Transfers of health and life insurance benefits to OWCP (SF-2810, “Notice of Change in Health Benefits Enrollment”).

HRD advises and assists the IW regarding the effects of being in a non-pay status, including the impact on:

- Health/Life insurance.
  - Dental, Vision, Flexible Spending, and Long-term Care (Benefeds Programs)
- Thrift Savings Plan accounts/contributions.
- Within-grade increases.
- Leave accrual.
- Retirement.
  - Creditable service
- Buying back annual or sick leave used in lieu of compensation.
- Permanent Disability.

## **6. OSD RESPONSIBILITIES**

OSD must issue Form CA-16, “Authorization for Examination And/Or Treatment,” within four hours of the claimed injury; however, after hours and on weekends, designated employees will issue the CA-16. Where there is no time to complete a Form CA-16, the employer should authorize medical treatment by telephone and send the completed form to the medical facility within 48 hours. The employer is not required to issue a Form CA-16 more than one week after the occurrence of the claimed injury. The employer may not authorize examination or medical or other treatment in any case that OWCP has disallowed. The name and address of the medical provider must be written on CA-16 prior to issuance. Refer to Attachment A (Commonly Used DOL Forms).

OSD, Supervisor, or CWCU should advise the employee of their right to their initial choice of physician. The employer must allow the IW to select a qualified physician, after advising them of those physicians excluded under 20 CFR 10.300 (d). A “provider search” is available via DOL’s website; a list of physicians will not be provided by the employer.

If the IW is incapacitated, the supervisor, OSD, or any management official will notify CWCU, who may give notice of injury on the employee’s behalf.

Upon receipt, documentation received from the DOL must be forwarded to the CWCU promptly,

but no later than two working days.

The local OSD will be available for information and instructions on filing a Federal Workers' Compensation claim.

## **7. CENTRALIZED WORKERS' COMPENSATION UNIT (CWCU) RESPONSIBILITIES**

CWCU will:

- Assume responsibility for all OWCP cases from date of submission.
- Become the agency reviewer (AR) and the primary focal point of contact for the IW and the field.
- When appropriate medical restrictions are available, the CWCU will advise the local WCC Chair to schedule a meeting to discuss a possible LLD assignment.
- CWCU reviews and submits the CA-1, "Federal Employee's Notice of Traumatic Injury and Claim for Continuation of Pay/Compensation," or CA-2, "Notice of Occupational Disease and Claim for Compensation," to OWCP within 10 workdays of the date the employee submitted it (20 C.F.R. §10.110, §10.111).
- Upon receipt of Form CA-7 from the IW, or someone acting on their behalf, the supervisor and CWCU will complete the appropriate portions of the form. As soon as possible, but no more than five working days after receipt from the IW, forward the completed Form CA-7 and any accompanying medical report to OWCP. CWCU will contact management if the supervisor portion is not complete by the fourth business day.
- Maintain contact with the IW and assist both the IW and the field as dictated by Federal Regulations and the Master Agreement.
- Provide basic technical assistance and OWCP procedure guidance to managers and claimants Bureau-wide on assigned cases.
- For Central Office Divisions and Training Locations, CWCU must issue Form CA-16, "Authorization for Examination And/Or Treatment" within four hours of the claimed injury; however, after hours and on weekends, designated employees will issue the CA-16. The employer is not required to issue a Form CA-16 more than one week after the occurrence of the claimed injury. The employer may not authorize examination or medical or other treatment in any case that OWCP has disallowed.
- The supervisor, OSD, or CWCU should advise the employee of their right to their initial choice of physician. The employer must allow the IW to select a qualified physician after advising them of those physicians excluded under 20 CFR 10.300 (d). A "provider search" is available via DOL's website.
- If an LLD assignment is approved by the WCC, CWCU will complete the LLD letter to be signed by the CEO, or designee.

- CWCU will make any LLD offer verbally and provide the LLD letter to the IW within two business days of the verbal LLD offer.
- A copy of any LLD offer made to an IW will be sent to the supervisor for their records. For bargaining unit employees, when approved by the IW, a copy will be sent to the local Union president, or designee.
- DOL form CA-17 or OWCP-5 (a-c) should be used to obtain interim reports concerning the duty status of an IW with a disabling injury or illness.
- To help return an IW to suitable employment, CWCU may also contact the IW's physician in writing concerning the work limitations imposed by the effects of the injury and possible job assignments. However, the employer must not contact the physician by telephone or through a personal visit. When such contact is made, the CWCU must send a copy of any such correspondence to OWCP and the IW, as well as a copy of the physician's response. The employer may also contact the IW at reasonable intervals to request periodic medical reports addressing their ability to return to work. Reasonable intervals are typically at every follow-up appointment.
- CWCU uses DOL's electronic transmission system as follows:
  - CWCU completes the AR portion of the form filed through DOL's electronic transmission system.
  - The AR may edit information entered by the supervisor, but not the employee.
  - When notified by the institution, the AR may also file the CA-1, "Federal Employee's Notice of Traumatic Injury and Claim for Continuation of Pay/Compensation," on behalf of the employee in DOL's electronic transmission system, if the employee is incapacitated.

CWCU maintains contact with the IW and assists both the IW and management as necessary, takes minutes of Committee meetings, and distributes the minutes to relevant institution personnel, including the Union (for bargaining unit employees), when requested.

## **8. LIMITED LIGHT DUTY (LLD)**

LLD is meant to provide a temporary, not permanent, arrangement for an IW to continue working while recovering from an injury/illness.

Examples of LLD assignments may include assignment to a position that does not require interaction with inmates or can include partial (less than eight-hour) workdays, as the needs of the injured/ill employee and the institution indicate. During the time the IW is on LLD, if requested, ample time will be provided for medical and physical therapy appointments. For a routine medical appointment, a maximum of four hours of compensation is usually allowed. More than four hours may be used with DOL's prior approval.

## 9. WORKERS' COMPENSATION COMMITTEE'S RESPONSIBILITIES

When appropriate medical restrictions are available, the CWCU will advise the WCC Chair to schedule a meeting to discuss a possible LLD assignment.

Each institution must establish a WCC to include:

- An Associate Warden (Chair).
- OSD.
- HRD.
- Claimant's supervisor (to be present only during discussion of the subordinate's case).
- Union (for bargaining unit employee cases only).
- Designated Representative (for discussion of the specific case only).
- CWCU.

Non-institution facilities:

- Executive employee or designee (Chair).
- HRD.
- Regional Safety Administrator (for Regional Office employee).
- Claimant's supervisor (to be present only during discussion of the subordinate's case).
- CWCU.
- Union (for bargaining unit employee cases only).
- Designated Representative (for discussion of the specific case only).

All Committee members must maintain confidentiality regarding case discussions whether participating virtually or in person. With regard to the claimant's medical information, the Committee is only authorized access to information needed to discuss the IW's specific limitations and restrictions as set forth by the attending physician and the relationship to the LLD, unless such access by the Committee to information is permissible under the routine use of OWCP case file information under DOL regulations.

### a. Meetings.

The WCC will meet as determined by CWCU to discuss LLD assignments.

The facility is responsible for conducting WCC meetings in a location that provides clear audio communication for CWCU and other Committee members attending virtually.

A WCC can be convened same day if all members are available. If not, meetings can be

scheduled the next working day, or later (but no more than two working days from time notified by CWCU). All Committee members will be provided the same advanced notification as stated in the Master Agreement Article 10, Section a.

CWCU takes minutes of Committee meetings, and distributes the minutes to relevant institution personnel, including the Union (for bargaining unit employees), when requested.

#### **b. Case Responsibilities.**

The Committee will:

- Review and assess the claimant's current and projected medical status. All possibilities for facilitating a return to work must be explored.
- The facility is responsible for identifying the possibilities of LLDs. Ordinarily the IW will maintain their regular shift and days off.
- If an LLD assignment is approved, CWCU will complete the LLD letter to be signed by the CEO, or designee.
- An addendum is appropriate for minimal changes to an existing LLD letter. Any change in job assignment, hours, shift, or day off will require another WCC meeting.

### **10. EXCLUSIVITY OF REMEDY**

Pursuant to Federal statute, benefits provided under the Federal Employee's Compensation Act (FECA) constitute the sole remedy against the United States for work-related injury or death. The FECA holds that a federal employee or surviving dependent is not entitled to sue the U.S. Government or recover damages for such injury or death under any other statute.

### **11. PENALTIES**

The regulations at 20 CFR 10.23 state that any person who knowingly makes, or knowingly certifies, any false statement, misrepresentation, concealment of fact, or any other act of fraud with respect to a claim under the FECA or who knowingly accepts compensation to which that person is not entitled, is subject to criminal prosecution and may, under appropriate provisions of 18 U.S.C., be punished by a fine of not more than \$10,000 or imprisonment for not more than five years, or both.

Any person who knowingly makes or certifies any false statement, misrepresentation, concealment of fact, or any other act of fraud, or impedes a claim under FECA, is subject to criminal and/or civil penalties as referenced under 20 CFR Section 10.16.

Any person who, with respect to a claim under the FECA, enters into any agreement,

combination, or conspiracy to defraud the United States by obtaining or aiding to obtain the payment or allowance of any false, fictitious, or fraudulent claim is subject to criminal prosecution and may, under appropriate provisions of 18 U.S.C., be punished by a fine of not more than \$10,000 or imprisonment for not more than ten years, or both.

Any person charged with the responsibility of making reports in connection with an injury who willfully fails, neglects, or refuses to do so; induces, compels, or directs an injured employee to forego filing a claim; or willfully retains any notice, report, or paper required in connection with an injury is subject to a fine of \$500 or imprisonment for not more than one year, or both.

## **12. RECORDS**

Individual case files are protected under the Privacy Act, and only the IW, their representative (if any), and CWCU can access DOL electronic files. All personnel who are involved with OWCP must comply with DOL/GOVT-1 and Privacy Act and Systems of Records regulations.

## **REFERENCES**

Federal Employee's Compensation Act  
5 CFR Parts 353 and 339  
18 U.S.C  
20 CFR Part 10

Master Agreement Federal Bureau of Prisons and Council of Prison Locals (Extended to May 2026)

### *ACA Standards*

American Correctional Association 5th Adult Correctional Institutions: 5-ACI-1B-17.  
American Correctional Association 4th Edition Standards for Adult Local Detention Facilities: 4-ALDF-7D-14.  
American Correctional Association 2nd Edition Standards for the Administration of Correctional Agencies: 2-CO-1C-05.

### *Records Retention Requirements*

Requirements and retention guidance for records and information applicable to this program are available in the Records and Information Disposition Schedule (RIDS) on Sallyport.

## Attachment A. Commonly Used DOL Forms

Form Number	Form Title	Purpose	Prepared By	When Submitted	Completed Forms Sent To
CA-1	Federal Employee's Notice of Traumatic Injury and Claim for Continuation of Pay/ Compensation	The employee has sustained a traumatic injury during single day or work shift that is likely to result in a medical charge against the compensation fund.	Employee or someone acting on employee's behalf.	By employee or representative within 30 days (but will meet statutory requirements if filed no later than three years after the injury) to the employer. The employer submits completed documents within 10 workdays following receipt of the form from the employee.	Supervisor by employee or someone acting on employee's behalf; then to OWCP by AR.
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 a medical charge against the compensation fund; (2) the employee loses time from work on any day after the injury date, whether the time is charged to leave or leave without 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 requirements if filed no later than three years after last exposure to the conditions causing the disease or awareness of a relationship between the disease and Federal employment); by supervisor within 10 workdays following receipt of the form from the employee.	Supervisor by employee or someone acting on employee's behalf; then to OWCP by AR.
CA-7	Claim 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 workdays of receipt from employee.	Supervisor by employee or someone acting on employee's behalf; then to OWCP by AR.

<b>CA-16</b>	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: Authorizing Official.  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. Completed form sent to OWCP .
<b>CA-17</b>	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: Authorizing Official. Side B: Attending physician.	Promptly upon completion of examination.	Original to employer; copy to OWCP mail address.
<b>CA-20</b>	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 If a narrative medical report or Form CA-16 has been submitted to OWCP within the past 10 days, this form is not needed.	Attending physician.	Promptly upon completion of examination.	OWCP, if attached to form CA-7; OWCP.
<b>OWCP-5 (a-c)</b>	Work Capacity Evaluation (Psych, Cardio/Pulmonary, or Ortho)	Provides supervisor and OWCP with interim medical report containing information on employee's ability to return to work and physical limitations.	Attending physician and or specialist	Promptly upon completion of examination.	Original to employing agency; copy to OWCP.