



# WHEN INJURED AT WORK

## A Guide for Fish & Wildlife Service employees

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If you are injured at work, you may be entitled to injury compensation benefits provided under the Federal Employees' Compensation Act (FECA), as administered by the Department of Labor's Office of Workers' Compensation Program (OWCP). Federal employees have certain rights and responsibilities in filing for these benefits. Follow the guide below and contact your Regional/Headquarters (HQ) Injury Compensation Specialist. You can find out who that is by contacting your servicing Human Resources or Safety Office.

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### Report to Supervisor

Report any job-related injury as soon as possible to your supervisor. Injury also means any illness or disease that is caused or aggravated by the employment, as well as damage to medical braces, artificial limbs, and other prosthetic devices.

### Obtain Prompt Medical Care

Before you obtain medical treatment for injuries, ask your supervisor to authorize the treatment on form **CA-16, Authorization for Examination And/Or Treatment** (they fill out the front side). This form is available at your office or from your Regional/HQ Injury Compensation Specialist. You should ask the doctor to complete it (the back side, titled *Attending Physician's Report*) before you leave your first visit with them.

You may seek emergency medical treatment for an injury without prior authorization.

Form CA-16 is not issued for occupational disease claims.

You are entitled to the initial choice of physician for treatment of an injury. You may choose any licensed physician in private practice who is not excluded by OWCP. This may be a private physician or a physician at a Government medical facility.

#### **Form OWCP-1500, Health Insurance Claim Form** (alt. HCFA-1500)

(<http://www.dol.gov/owcp/dfec/regs/compliance/OWCP-1500.pdf>)

This is the billing form physicians must use to submit bills to OWCP-ACS.

#### **Form OWCP-04, Uniform Billing Form**

(<http://www.dol.gov/owcp/dfec/regs/compliance/OWCP-04.pdf>)

This is the form hospitals must use to submit bills to OWCP-ACS.

Pharmacies use their **Electronic Data Exchange**.

**NOTE: Mail all billings directly to ACS, the Department of Labor's Bill Processing Facility, at:**

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

**Do not submit bills before OWCP accepts a claim.**

## File Electronic Notice

**Form [CA-1](#), Federal Notice of Traumatic Injury and Claim for Continuation of Pay/Compensation:** For injuries sustained within a single day or work shift, you must **log on to the Safety Management Information System (SMIS)** (<https://www.smis.doi.gov>) and complete the employee's module of the electronic **form CA-1** as soon as possible, but not later than 30 days following the date of injury. Your supervisor will be notified by the SMIS AUTOMAILER (email) that your module is complete and will then complete his or her module immediately. When both sides are completed and electronically sent to the Regional/HQ Injury Compensation Specialist, the CA-1 is considered filed.

**Form [CA-2](#), Notice of Occupational Disease and Claim for Compensation:** If you develop a condition due to prolonged exposure lasting more than 1 day or shift, **log on to SMIS** and complete **form CA-2** for occupational disease. You and your supervisor must complete the modules within the same time limits as above.

See [SMIS Frequently Asked Questions](#) for more guidance.

You are responsible for:

- Obtaining all substantiating medical evidence (office notes, discharge papers, medical narratives, reports of x-rays, etc.);
- Ensuring that the information adequately addresses how the cause was work-related; and
- Submitting these documents immediately to the Regional/HQ Injury Compensation Specialist.

**NOTE: You must mail a hard copy CA-1 or CA-2 with original signatures to your Regional/HQ Injury Compensation Specialist.**

Your supervisor will give you the original portion of the CA-1 or CA-2 titled "Return of Receipt of Notice" to verify that both parties completed the form as required, and he/she will send a copy to the Regional/HQ Injury Compensation Specialist.

## Submit Claim for COP/Leave or Compensation For Wage Loss, or Both

If you are disabled due to an injury, you may claim Continuation of Pay (COP), not to exceed 45 calendar days, or use leave. You must submit a claim for COP no later than *30 days* following the date of injury (the form CA-1 is designed to serve as a claim for COP). If disabled and claiming COP, you must submit substantiating medical evidence that you sustained a disabling work-related injury to the Regional/HQ Injury Compensation Specialist within *10 work days*.

If disabled beyond the COP period, or if you are not entitled to COP, you may claim wage loss compensation on form CA-7 and CA-7a, along with substantiating medical evidence, or you may use leave. If disabled due to occupational disease, you may claim wage loss compensation in the same manner. You should submit a claim for wage loss compensation for disability as soon as possible after it is apparent that you are disabled and will enter a leave-without-pay status.