

The CA-16



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If you suffer a traumatic on-the-job injury, paying the medical bills should be the last thing you need to worry about. Unfortunately, many letter carriers are unclear as to how the federal workers' compensation system works and are hesitant to file claims, fearing a mountain of debt from medical bills. This should never happen.

In traumatic injury cases, the Postal Service is required by federal law and postal regulations to provide a CA-16, Authorization for Examination and/or Treatment, within four hours

of a worker reporting a traumatic injury and seeking medical treatment.

Yet most letter carriers have never heard of a CA-16. When a CA-16 is issued, the injured worker's medical bills will be paid for up to 60 days, even if the claim is denied. The Postal Service avoids those costs when an injured worker never gets a CA-16 in the first place, so CA-16s are tightly controlled.

CA-16s can be approved and provided only by a postal supervisor. A properly issued CA-16 must have the name, title and signature of the authorizing official. CA-16s are not available online—for a very good reason. Only the authorizing agency has the authority to provide the CA-16. Letter carriers never should attempt to fill out a CA-16 that has not been properly provided by, and filled out by, the appropriate postal official.

Letter carriers can now file claims using the ECOMP web portal. When a claim is filed using ECOMP, the letter carrier's supervisor is required to complete the claim form electronically. At the end of the supervisor's section, there is an icon that allows the supervisor to complete and print a CA-16.

Letter carriers who suffer traumatic injuries should immediately request a CA-16 from their supervisor.

The CA-16 is not only a payment voucher; page 2 is a medical report where the attending physician provides initial diagnoses, descriptions of treatments and work restrictions. The completed CA-16 is sent directly to the Office of Workers' Compensation Programs (OWCP), not to the Postal Service Injury Compensation Office.

Ensuring that the injured worker gets the proper claim forms, especially the CA-16, can prevent major claim problems in the future.

The Postal Service is required to tell injured workers that they have the right to choose their doctor. Some postal districts have contracts with medical clinics to provide initial evaluations of injured workers. As only one CA-16 is issued per claim, a CA-16 should not be issued to a postal con-

tract doctor. If the Postal Service sends you to a contract doctor for your initial evaluation, you should request a CA-16 to see your own doctor.

While an injured worker must allow the contract doctor to evaluate him or her, the contract doctor is not allowed to treat the injured worker without the injured worker's approval.

It is very important to understand that OWCP will consider a doctor to be the injured worker's doctor of record after two appointments. There is no obligation to return to the contract doctor after the initial visit. Injured workers usually receive better treatment when they see their own doctor for job-related injuries.

Once a claim has been accepted, doctors need to submit all medical bills and requests for medical authorization through OWCP's web portal. The portal has been administered by a private contractor, Conduent. A new contractor, CNSI, will be processing medical authorization and bills later this year.

If your doctor is not enrolled with the OWCP contractor, he or she must be prior to submitting any bills. Enrollment is accessed at owcp.dol.acs-inc.com. In registering, your doctor agrees to OWCP's fee schedule and is prohibited by federal law from billing you for any difference between the charges and what OWCP pays the doctor.

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To be reimbursed, bills must be received within the calendar year following the year in which the medical service was rendered or the claim was accepted, whichever occurs later. OWCP will pay bills only for the injured workers' accepted conditions. Most problems with getting bills paid are due to the doctor's office billing under the wrong injury code.

If you receive a bill for medical treatment, prescriptions or a doctor's appointment, immediately refer the billing agent to OWCP. Federal regulations require all medical providers to register with OWCP's contractor. Failure to do so prohibits medical providers from directly billing the injured worker or sending the bills to a collection agency. If you receive a bill from a collection agency, call your national business agent's office and request a referral to a regional worker's compensation assistant.