Withdrawal of limited duty based on claim closure

Limited-duty withdrawals by management are nothing new, and management’s reasons for such withdrawals appear to be increasing in number. While management’s basis for the withdrawal of limited duty discussed in this article is not new, and is not as prevalent as some of the other reasons currently being espoused through NRP, it does deserve our attention.

Here’s the scenario: A carrier is injured on duty, has medical restrictions, and has been working limited duty. Out of the blue, management informs the injured carrier that OWCP has closed the claim and therefore the limited-duty job offer is being withdrawn. To support their position, management produces an Agency Query System (AQS) printout that indicates the current case status is indeed “closed.”

Is management right in that scenario? Before that question can be answered, more information is needed. Did OWCP deny the claim or terminate all benefits for the claim? Or, did OWCP administratively close the claim? Prior to answering those questions, let’s briefly analyze OWCP’s denials and terminations, as well as the administrative closing of claims.

Denials and terminations of benefits—When OWCP denies a claim or terminates the benefits of a claim, it must do so by issuing a written decision with appeal rights. Section 5 U.S.C. 8124(a) of the FECA requires the OWCP to make findings of fact with respect to each claim filed and to make an award for or against the payment of compensation. When the outcome is negative, the OWCP must issue a formal decision.

Administrative closings—OWCP’s “closing” of a claim is a purely administrative procedure used to organize cases and does not involve a written notice to the claimant. There are numerous reasons why OWCP will administratively close a claim. Here are a few of the definitions that OWCP uses when closing a claim: 1) No further payments are anticipated and there was no lost time from work, 2) No further payments anticipated and time lost was covered by leave, or 3) Previously accepted for benefits, all benefits paid. As you can see, none of the cited closure codes reference a denial or termination of a claim.

An administrative closure of a claim also does not bar the payment of future benefits. ECAB ruled, “A case closing is an internal and purely administrative procedure that the Office uses to organize its many cases in an orderly manner. It does not foreclose further action in a case, including readjudication or subsequent payment of benefits.” In fact, OWCP procedures state after a claim has been administratively closed, “accepted cases should not be reopened merely to pay medical bills.”

Going back to the earlier questions, OWCP’s administratively “closing” a claim does not magically reduce or eliminate the claimant’s medical work restrictions and also does not affect the claimant’s legal and contractual rights to limited duty.

On the other hand, if the claim is denied or terminated by a formal written decision from OWCP, management may not be obligated to provide limited duty. Of course, that could retroactively change if the claim is eventually accepted on appeal, which means the claimant should be made whole. In the interim, the injured employee may still request light duty under the provisions of Article 13 and possibly pursue a reasonable accommodation under the provisions of the Rehabilitation Act.

There is clearly a vast difference between OWCP administratively closing a claim and OWCP denying a claim or terminating the benefits of an accepted claim. A “closed” status code does not necessarily indicate that a claim was denied or that benefits were terminated. If an AQS printout indicates the claim is “closed,” find out why.

Any withdrawal of limited duty based on management’s contention that an OWCP administrative closure of a claim is sufficient grounds for such action should be investigated and grieved if appropriate.

1. FPM 5-0200-3.c
2. FPM 2-1400-1 Purpose and Scope
3. FPM 2-0401-9
4. Myrtle Russell & USPS, 02-2049
5. FPM 2-0401-9.e.1