

The Short Form Closure: an open-and-shut case?



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Letter carriers can and should take a lot of pride in their work. We have delivered mail through wars, pandemics and natural disasters. Our customers love us for delivering to their homes, offices and businesses six days a week, rain or shine. In 2020, one of our most challenging years, letter carriers delivered a record number of election ballots. We delivered democracy.

Every now and then, a day on the route doesn't turn out the way we'd like. It could be a dog, a car or an icy step that suddenly turns a good day

into a life-changing event—a traumatic injury. The disorienting shock of an injury is often compounded when the injury is reported and a claim is filed. While suffering a traumatic on-the-job injury can ruin your whole day, it should not ruin your whole life.

When a traumatic injury claim is filed with the Office of Workers' Compensation Programs (OWCP), many processes are set in motion.

First, there's the Postal Service. The minute a letter carrier reports an injury, supervisors have certain requirements under federal law and postal regulations. While the laws and regulations are straightforward, many supervisors are not well trained in what actions need to be taken. Aid is not swiftly given, important information is not provided, claims are delayed and injured workers suffer.

The most significant error occurs when the Postal Service fails to give the injured worker Form CA-16, which is a payment voucher used to cover the first 60 days of medical treatment. Without the CA-16, injured workers may end up getting billed by hospitals, emergency rooms or health clinics. That should never happen.

OWCP claims examiners think the Postal Service routinely follows proper procedures and issues CA-16s in every case. Assuming the CA-16 was issued and seeing no evidence of a serious injury, OWCP claims examiners may simultaneously open and close a claim when:

- the claim involves a traumatic injury,
- the claim was not controverted by the Postal Service,
- the claim was created within six months of the injury,
- the claim does not involve a fatality, and
- the claim does not involve a claim for wage-loss compensation.

OWCP refers to this as a Short Form Closure. OWCP designates a Short Form Closure claim as closed/all benefits paid. Claimants often are surprised when they

find out that the claim they just filed has been administratively closed using the Short Form Closure.

If your claim is converted to a Short Form Closure, your doctor may think that he or she cannot treat you because the claim has been closed. That would not be an issue if a CA-16 was issued.

Short Form Closures will be reopened and adjudicated when one of the following occurs:

- The total amount of medical bills exceeds \$1,500.
- Form CA-7, Form CA-2a, or other indication of work stoppage beyond the COP period is received.
- The case is reopened based upon evidence received, such as a request for surgery or employer challenge.

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If your doctor tells you that he or she cannot treat you because your new claim has been closed, you need to take the following steps:

1. Call OWCP at 202-513-6860 and ask to speak with your claims examiner.
2. Explain that you continue to need medical treatment and ask that the claim be opened.
3. If you run into any resistance in getting the claim reopened, call your national business agent's office and ask for a referral to a regional workers' compensation assistant.

OWCP continues to move away from handling paper forms and toward an electronic platform. Claims should be filed electronically via OWCP's ECOMP web portal. You can file a claim from your smartphone, tablet or computer; if you don't have a computer, the Postal Service is required to give you access to a postal computer to file a claim.

In a recent policy change, claims filed electronically via ECOMP will generate both emails and letters to the claimant. Letters requiring a response will appear on the claimant's ECOMP dashboard. Claimants should make it a habit to check their ECOMP dashboard daily so that OWCP letters can be responded to promptly.

The burden of proof in every OWCP claim has always been borne by the injured worker. OWCP's move to electronic communication will streamline the process of claim development if every injured worker actively monitors the status of his or her claim—same as it ever was.