

In order to ascertain appellant's current condition, the Office referred her to Dr. Lawrence Blumberg, a Board-certified orthopedic surgeon, for a second opinion examination. In a report dated March 11, 2003, Dr. Blumberg stated that appellant's present complaints were due to her preexisting cervical and lumbosacral degenerative disease. He advised that the injury she sustained on December 16, 2001 resolved within six to eight weeks after the injury. Dr. Blumberg stated that there were no objective findings to substantiate her ongoing complaints and noted that she had full range of motion of the cervical, lumbosacral and right shoulder regions with no neurologic deficits. He concluded that there were no current objective residuals directly attributable to the work injury and no current disability.

By decision dated May 7, 2003, the Office terminated appellant's compensation benefits.

By letter dated May 11, 2003, appellant requested an oral hearing, which was held on February 25, 2004.

By decision dated May 6, 2004, an Office hearing representative affirmed the May 7, 2003 termination decision.

By decision dated August 12, 2004, the Office denied appellant's application for review on the grounds that it neither raised substantive legal questions nor included new and relevant evidence sufficient to require the Office to review its prior decision.

By letter dated May 4, 2005, appellant requested reconsideration.

By decision dated June 21, 2005, the Office denied appellant's application for review on the grounds that it neither raised substantive legal questions nor included new and relevant evidence sufficient to require the Office to review its prior decision.

LEGAL PRECEDENT

Under 20 C.F.R. § 10.606(b), a claimant may obtain review of the merits of his or her claim by showing that the Office erroneously applied or interpreted a specific point of law; by advancing a relevant legal argument not previously considered by the Office; or by submitting relevant and pertinent evidence not previously considered by the Office.¹ Evidence that repeats or duplicates evidence already in the case record has no evidentiary value and does not constitute a basis for reopening a case.²

ANALYSIS

In the present case, appellant has not shown that the Office erroneously applied or interpreted a specific point of law. She did not advance a relevant legal argument not previously considered by the Office. Appellant did not submit any medical evidence in connection with her

¹ 20 C.F.R. § 10.606(b)(1); *see generally* 5 U.S.C. § 8128(a).

² *Howard A. Williams*, 45 ECAB 853 (1994).

May 4, 2005 reconsideration request. Thus, the request did not contain any new and relevant evidence for the Office to review. In addition, appellant's reconsideration request contains arguments that are cumulative and repetitive of contentions that were presented and rejected by the Office in previous decisions. The Board finds that the Office properly refused to reopen appellant's claim for reconsideration.

CONCLUSION

The Board finds that the Office properly refused to reopen appellant's case for reconsideration on the merits of her claim under 5 U.S.C. § 8128(a).

ORDER

IT IS HEREBY ORDERED THAT the June 21, 2005 decision of the Office of Workers' Compensation Programs be affirmed.

Issued: May 16, 2006
Washington, DC

Alec J. Koromilas, Chief Judge
Employees' Compensation Appeals Board

David S. Gerson, Judge
Employees' Compensation Appeals Board

Michael E. Groom, Alternate Judge
Employees' Compensation Appeals Board