

confrontational situations and the position as acting district director required informing employees of the need to take action, handle monthly reports and review case files, which created animosity among coworkers of the same grade level. Appellant began receiving compensation for temporary total disability.

The Office referred appellant, together with a statement of accepted facts and medical records, to Dr. David Harwood, a psychiatrist, for a second opinion examination. In a report dated October 31, 2005, Dr. Harwood provided a history and results on examination. He diagnosed depression and dysthemic disorder. In response to a question as to appellant's current condition and whether it was self-generated, Dr. Harwood stated:

"I think the initial disabling psychiatric event was a direct causation from employment factors. Regarding her current emotional condition, the symptoms would have not initially manifested themselves without the job-related distress, but I am hard pressed to see how the work-related issues continue to fuel the symptoms. At this point, I feel the claimant's condition is self-generated for a variety of reasons including chronic low-grade depression are [sic] possible secondary gain."

In response to a question as to when the effects of the employment factors would be expected to cease and whether appellant's emotional condition would have progressed to its current level without exposure to employment factors, Dr. Harwood stated, "The effects of the employment factors would, in my opinion, have expected to cease. The claimant's emotional condition would not have progressed to its current level without the exposure to compensable federal employment factors, however, they appear to me to be self-sustaining at this point."

In a letter dated December 14, 2005, the Office notified appellant that it proposed to terminate compensation for wage-loss and medical benefits based on the report from Dr. Harwood. By decision dated January 25, 2006, the Office terminated compensation for wage-loss and medical benefits effective February 19, 2006.

Appellant requested reconsideration by letter received on February 2, 2006. The Office denied the request without merit review of the claim in a decision dated March 16, 2006. Appellant again requested reconsideration, which was denied without merit review in a decision dated June 15, 2006.

By letter dated October 18, 2006, appellant again requested reconsideration. Appellant submitted a report dated September 29, 2006 from Dr. Clemmie Palmer, a psychiatrist, who opined that appellant's major depression was causally related to work-related stress.

In a decision dated January 19, 2007, the Office reviewed the case on its merits and denied modification.

LEGAL PRECEDENT

Once the Office has accepted a claim, it has the burden of justifying termination or modification of compensation benefits.¹ The Office may not terminate compensation without establishing that disability ceased or that it was no longer related to the employment.² The right to medical benefits is not limited to the period of entitlement to disability. To terminate authorization for medical treatment, the Office must establish that appellant no longer has residuals of an employment-related condition that require further medical treatment.³

ANALYSIS

The Office based its decision to terminate compensation for wage-loss and medical benefits on the October 31, 2005 report from Dr. Harwood. The accepted condition in this case was depression and it is the Office's burden of proof to terminate compensation. According to the Office, Dr. Harwood provided an opinion that appellant no longer had an employment-related emotional condition.

The report of Dr. Harwood, however, does not provide a reasoned medical opinion that is sufficient to meet the Office's burden of proof. Dr. Harwood stated that he did not see how work-related issues continue to fuel the symptoms and opined that the current condition was self-generated for a "variety of reasons." He does not provide a clear explanation of those reasons, noting only chronic low grade depression and possible secondary gain. The accepted condition in this case was depression, and Dr. Harwood does not explain how a continuing low-grade depression supports an opinion that the condition was self-generated.

In addition, Dr. Harwood stated that appellant's emotional condition would not have progressed to its current level without exposure to compensable work factors. This statement would support a finding that there was some continuing contribution to appellant's condition from federal employment. If Dr. Harwood believed that there was no current contribution from a compensable employment factor, he must explain his opinion in view of his statement regarding the progression of appellant's condition. The October 31, 2005 report does not provide any additional explanation.

The Board therefore finds that the October 31, 2005 report from the second opinion psychiatrist does not provide a reasoned medical opinion on the issues presented. It is the Office's burden of proof and the evidence of record is not sufficient to meet the Office's burden in this case.

¹ *Jorge E. Stotmayor*, 52 ECAB 105, 106 (2000).

² *Mary A. Lowe*, 52 ECAB 223, 224 (2001).

³ *Frederick Justiniano*, 45 ECAB 491 (1994).

CONCLUSION

The Office did not meet its burden of proof to terminate compensation for wage-loss and medical benefits effective February 19, 2006.

ORDER

IT IS HEREBY ORDERED THAT the decision of the Office of Workers' Compensation Programs dated January 19, 2007 is reversed.

Issued: September 5, 2007
Washington, DC

David S. Gerson, Judge
Employees' Compensation Appeals Board

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

James A. Haynes, Alternate Judge
Employees' Compensation Appeals Board