



received compensation for temporary total disability. On May 8, 2007 he was released to limited duty.

Appellant claimed compensation for four hours of wage loss on August 2, 2007. He also claimed compensation for two hours of wage loss on August 14, 2007. In a decision dated January 18, 2008, the Office denied compensation because there was no medical evidence to support appellant's contention that he had medical appointments on those dates for treatment of his work injury.

Appellant requested a review of the written record by an Office hearing representative. He explained that he saw Monica Schwartz, a licensed clinical social worker, on August 2 and 14, 2007 for treatment of his accepted major depression. Appellant submitted a "Client Payment History" showing that he paid \$15.00 cash to a social service organization on August 2 and 14, 2007.

In a decision dated June 19, 2008, an Office hearing representative affirmed the denial of compensation for August 2 and 14, 2007. She found no progress notes for therapy on those dates. The hearing representative noted that the client payment history was unsigned and that appellant had not submitted the charges for consideration of payment in the Office's automated bill pay system. She concluded that it could not be established that appellant was treated on August 2 or 14, 2007 for residuals of an employment-related condition.

On appeal, appellant's attorney contends that the Office's June 19, 2008 decision is contrary to fact and law.

### **LEGAL PRECEDENT**

The United States shall furnish to an employee who is injured while in the performance of duty, the services, appliances and supplies prescribed or recommended by a qualified physician, which the Secretary of Labor considers likely to cure, give relief, reduce the degree of the period of any disability, or aid in lessening the amount of any monthly compensation.<sup>1</sup> The employee need not be disabled to receive such treatment.<sup>2</sup>

An employee who loses wages in undergoing examination or treatment authorized by the Office may be reimbursed for these wages. Lost wages are paid only for the time needed for examination or treatment and travel needed to obtain it.<sup>3</sup> As a rule, no more than four hours of compensation should be allowed for routine medical appointments. Longer periods of time may be allowed when required by the nature of the medical procedure or the need to travel a substantial distance to obtain the medical care.<sup>4</sup>

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<sup>1</sup> 5 U.S.C. § 8103(a).

<sup>2</sup> 20 C.F.R. § 10.310(a) (1999).

<sup>3</sup> Federal (FECA) Procedure Manual, Part 3 -- Medical, *Administrative Matters*, Chapter 3.900.5.c (October 1990).

<sup>4</sup> *Id.* at Chapter 3.900.8 (November 1998).

### ANALYSIS

Appellant's claim for compensation is premised on his allegation that he received medical treatment for his accepted major depression on August 2 and 14, 2007. However, the only evidence appellant submitted to support his claim was a "Client Payment History" from a social service organization showing that he made a \$15.00 cash payment on both dates.<sup>5</sup>

Although the payment history appears consistent with appellant's claim, it fails to establish that he received medical treatment for his accepted major depression on those dates. The payment history does not disclose the reason for or the duration of any appointment or the nature of any services rendered. Appellant was advised by the Office to submit a medical report from a physician supporting his disability for work. Because he did not provide the Office with the evidence necessary to support his claim, the Board will affirm the denial of benefits.

### CONCLUSION

The Board finds that the Office properly denied reimbursement for four hours of wage loss on August 2, 2007 and two hours of wage loss on August 14, 2007.

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<sup>5</sup> The Board has no jurisdiction to review evidence submitted to the record after the Office's June 19, 2008 decision. 20 C.F.R. § 501.2(c).

**ORDER**

**IT IS HEREBY ORDERED THAT** the June 19, 2008 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: April 6, 2009  
Washington, DC

David S. Gerson, Judge  
Employees' Compensation Appeals Board

Colleen Duffy Kiko, Judge  
Employees' Compensation Appeals Board

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