United States Department of Labor
Employees' Compensation Appeals Board

L.T., Appellant	)	
and	)	**Docket No. 26-0423**
	)	**Issued: July 20, 2026**
DEPARTMENT OF THE ARMY, WALTER REED ARMY MEDICAL CENTER, Washington, DC, Employer	)	

Appearances:
Appellant, pro se
Office of Solicitor, for the Director

Case Submitted on the Record

DECISION AND ORDER

Before:
PATRICIA H. FITZGERALD, Deputy Chief Judge
JANICE B. ASKIN, Judge
VALERIE D. EVANS-HARRELL, Alternate Judge

JURISDICTION

On April 2, 2026 appellant filed a timely appeal from January 27 and March 3, 2026 merit decisions, and a March 17, 2026 nonmerit decision of the Office of Workers' Compensation Programs (OWCP). Pursuant to the Federal Employees' Compensation Act[1] (FECA) and 20 C.F.R. §§ 501.2(c) and 501.3, the Board has jurisdiction over the merits of this case.

ISSUES

The issues are: (1) whether OWCP has met its burden of proof to terminate appellant's wage-loss compensation and medical benefits, effective January 27, 2026, as she no longer had disability or residuals causally related to her accepted May 21, 2002 employment injury; (2) whether appellant has met her burden of proof to establish continuing disability and/or residuals, on or after January 27, 2026, causally related to the accepted May 21, 2002 employment

[1] 5 U.S.C. § 8101 *et seq*.

injury; and (3) whether OWCP properly denied appellant's request for reconsideration of the merits of her claim, pursuant to 5 U.S.C. § 8128(a).

FACTUAL HISTORY

On June 6, 2002 appellant, then a 39-year-old nursing assistant, filed a traumatic injury claim (Form CA-1) alleging that on May 21, 2002 she sustained a right shoulder injury from moving patient furniture while in the performance of duty. OWCP accepted the claim for right rotator cuff sprain and rotator cuff syndrome with allied disorders. On May 6, 2004 appellant underwent OWCP-authorized arthroscopic surgery to the right shoulder, including synovectomy, chondroplasty, and acromioclavicular (AC) joint Mumford procedure. OWCP paid appellant wage-loss compensation on the supplemental rolls effective May 6, 2004, and on the periodic rolls effective May 15, 2005.[2]

OWCP referred appellant, the case record, and an updated statement of accepted facts (SOAF) to Dr. John C. Barry, a Board-certified orthopedic surgeon, for a second opinion evaluation regarding the nature of her condition, the extent of disability, and appropriate treatment recommendations.

In a report dated June 23, 2022, Dr. Barry reviewed the medical record and SOAF. He performed a physical examination of the right shoulder and observed mildly positive impingement sign and reduced range of motion (ROM), which he noted "indicates that the [appellant's right] shoulder condition has not fully resolved." Dr. Barry opined that appellant had reached maximum medical improvement, that her prognosis was fair, and that her "chance of further recovery [was] minimal." He released her to return to work with restrictions of no lifting greater than 20 pounds due to persistent shoulder pain and loss of ROM. Dr. Barry opined that the restrictions were permanent.

On April 9, 2025 OWCP referred appellant, the case record, and an updated SOAF to Dr. Barry for an updated second opinion evaluation.

In a report dated May 5, 2025, Dr. Barry observed physical examination findings of AC joint tenderness, reduced ROM, and positive impingement sign in the right shoulder. He opined that appellant "no longer suffers from residuals of the accepted condition as a result of the injury that occurred in 2002." Dr. Barry indicated that her current complaints and physical examination findings were due to persistent and progressive subacromial impingement syndrome at the right shoulder unrelated to the original work injury. He opined that appellant was not able to return to work as a nursing assistant "due to progression of her impingement syndrome symptoms, which is a degenerative condition and not the result of her initial work-related injury." In a work capacity evaluation form (Form OWCP-5c) of even date, Dr. Barry released her to return to work with restrictions of no lifting, pushing, or pulling greater than 20 pounds and no overhead reaching. He indicated that the restrictions were permanent.

[2] On January 31, 2025 appellant accepted an offer of a part-time administrative position. By decision dated May 24, 2005, OWCP issued a retroactive loss of wage-earning capacity determination, finding that appellant's part-time position beginning January 31, 2005 fairly and reasonably represented her wage-earning capacity.

In medical reports dated April 14 and May 12, 2025, Dr. Harvinder S. Pabla, a Board-certified orthopedic surgeon, noted appellant's complaints of right shoulder pain, which she attributed to the May 21, 2022 employment injury. He reviewed medical records and diagnostic studies and noted that she had been referred for consideration of further surgical intervention. Dr. Pabla performed a physical examination and observed positive Neer's and Hawkins' tests and limited ROM due to pain. He diagnosed impingement syndrome, adhesive capsulitis, and AC joint arthrosis of the right shoulder due to the May 21, 2002 employment injury. Dr. Pabla recommended additional conservative care and an updated magnetic resonance imaging (MRI) scan of the right shoulder.

In a follow-up report dated June 9, 2025, Dr. Pabla documented an unchanged physical examination and reviewed the May 5, 2025 second opinion evaluation report by Dr. Barry. He indicated that he disagreed with Dr. Barry's opinion that appellant did not require further medical care, noting that she was a candidate for additional conservative treatment and that she should undergo an updated MRI scan.

In a notice dated July 17, 2025, OWCP advised appellant that it proposed to terminate her wage-loss compensation and medical benefits based on Dr. Barry's opinion that the accepted employment-related conditions had ceased without residuals or disability. It afforded her 30 days to submit additional evidence or argument challenging the proposed termination.

In a follow-up report dated July 7, 2025, Dr. Pabla documented unchanged examination findings.

By decision dated January 27, 2026, OWCP terminated appellant's wage-loss compensation and medical benefits, effective that date, finding that Dr. Barry's second opinion constituted the weight of the medical evidence.

OWCP subsequently received follow-up reports by Dr. Pabla dated November 17, 2025 and January 12, 2026. Dr. Pabla noted his review of a right shoulder MRI scan dated November 10, 2025, which demonstrated a superior labral anterior to posterior tear type II and rotator cuff tendinitis with a partial thickness interstitial tear. He diagnosed right shoulder impingement syndrome, adhesive capsulitis, and AC joint arthrosis. Dr. Pabla recommended an intra-articular steroid injection of the right shoulder.

On February 5, 2026 appellant requested reconsideration of OWCP's January 27, 2026 decision and submitted additional evidence.

By decision dated March 3, 2026, OWCP denied modification of the January 27, 2026 decision.

On March 3, 2026 appellant requested reconsideration of OWCP's March 3, 2026 decision. No additional evidence was received.

By decision dated March 17, 2026, OWCP denied appellant's request for reconsideration of the merits of her claim, pursuant to 5 U.S.C. § 8128(a).

LEGAL PRECEDENT -- ISSUE 1

Once OWCP accepts a claim and pays compensation, it has the burden of proof to justify termination or modification of benefits.[3] It may not terminate compensation without establishing either that the disability has ceased or that it is no longer related to the employment.[4] OWCP's burden of proof includes the necessity of furnishing rationalized medical opinion evidence based on a proper factual and medical background.[5]

The right to medical benefits for an accepted condition is not limited to the period of entitlement for disability compensation.[6] To terminate authorization for medical treatment, OWCP must establish that the employee no longer has residuals of an employment-related condition, which require further medical treatment.[7]

ANALYSIS -- ISSUE 1

The Board finds that OWCP failed to meet its burden of proof to terminate appellant's wage-loss compensation and medical benefits, effective March 9, 2026.

In his May 5, 2025 report, Dr. Barry, the second opinion physician, noted his review of the SOAF and appellant's current complaints. He observed the same physical examination findings of right shoulder impingement and reduced ROM due to pain, as noted in his prior report, and offered the same 20-pound permanent lifting restriction. However, Dr. Barry opined that appellant "no longer suffers from residuals of the accepted condition as a result of the injury that occurred in 2002." The Board therefore finds that Dr. Barry's opinion lacked rationale explaining why he now believed the accepted conditions had resolved. The Board has held that a medical report is of limited probative value if it contains a conclusion which is unsupported by sufficient medical rationale.[8]

Dr. Barry's May 5, 2025 opinion is, thus, not of sufficient probative value to constitute the weight of the medical opinion evidence.[9] Accordingly, the Board finds that OWCP failed to meet

[3] *A.D.*, Docket No. 18-0497 (issued July 25, 2018); *S.F.*, 59 ECAB 642 (2008); *Kelly Y. Simpson*, 57 ECAB 197 (2005); *Paul L. Stewart*, 54 ECAB 824 (2003).

[4] *A.G.*, Docket No. 18-0749 (issued November 7, 2018); *see also I.J.*, 59 ECAB 408 (2008); *Elsie L. Price*, 54 ECAB 734 (2003).

[5] *R.R.*, Docket No. 19-0173 (issued May 2, 2019); *T.P.*, 58 ECAB 524 (2007); *Del K. Rykert*, 40 ECAB 284 (1988).

[6] *L.W.*, Docket No. 18-1372 (issued February 27, 2019); *Kathryn E. Demarsh*, 56 ECAB 677 (2005).

[7] *R.P.*, Docket No. 17-1133 (issued January 18, 2018); *A.P.*, Docket No. 08-1822 (issued August 5, 2009).

[8] *J.F.,* Docket No. 26-0068 (issued February 24, 2026); *N.R.,* Docket No. 25-0861 (issued December 23, 2025); *C.G.,* Docket No. 23-0013 (issued April 24, 2023); *C.B.,* Docket No. 20-0629 (issued May 26, 2021); *A.G., id.*; *see J.W., id.*; *S.W., id*.

[9] *See V.D.*, Docket No. 26-0229 (issued May 5, 2026).

its burden of proof to terminate appellant's wage-loss compensation and medical benefits, effective January 27, 2026.[10]

CONCLUSION

The Board finds that OWCP failed to meet its burden of proof to terminate appellant's wage-loss compensation and medical benefits, effective January 27, 2026.

ORDER

IT IS HEREBY ORDERED THAT the January 27, 2026 decision of the Office of Workers' Compensation Programs is reversed. The March 3 and 17, 2026 decisions of the Office of Workers' Compensation are set aside as moot.

Issued: July 20, 2026
Washington, DC

Patricia H. Fitzgerald, Deputy Chief Judge
Employees' Compensation Appeals Board

Janice B. Askin, Judge
Employees' Compensation Appeals Board

Valerie D. Evans-Harrell, Alternate Judge
Employees' Compensation Appeals Board

[10] In light of the Board's disposition of Issue 1, Issues 2 and 3 are rendered moot.