Office of Workers’ Compensation Programs

Federal Employee Program

Interagency Meeting

April 28, 2021
Christopher Godfrey

Director,
Office of Workers’ Compensation Programs
Administration Priorities

• COVID-19—ARPA
• Ending the Opioid Crisis
• Digital Strategy
Ensure federal workers are able to access workers’ compensation and encourage states to do the same. Because it will be difficult for workers to prove that they were exposed to COVID-19 while on the job, the Biden Plan will ensure the Federal Employees’ Compensation Act program presumes they were exposed while on the job if their job put them in direct contact with infected individuals. And, he will encourage states to do the same.
American Rescue Plan Act
Signed March 11, 2021

Ensured coverage for any Federal Employee diagnosed with COVID with covered exposure in the workplace.
Ending the Opioid Crisis

• Make effective prevention, treatment, and recovery services available to all, including through a $125 billion federal investment.

• Stop overprescribing while improving access to effective and needed pain management.

• Provide training to medical personnel in pain management and substance use disorder treatment.
• Expand the effectiveness of monitoring programs designed to prevent inappropriate overprescribing of opioids (Prescription Drug Monitoring Programs).
• Ensure regular updating of the Centers for Disease the Control and Prevention (CDC) prescriber guideline based on the best available evidence.
"Digital communities and online spaces have taken on even more importance in the wake of the pandemic. We're building a team to speak to the lived experiences of all Americans. With much of our lives online, it is critical for this administration's digital efforts to be inclusive and extensive," Vice President Kamala Harris.
Antonio A. Rios
Director,
Division of Federal Employees’,
Longshore and Harbor Workers’ Compensation
Total Periodic Roll

PRM Units Implemented

New Policies
- Nurse @ 2 weeks of TTD
- 2nd Op Exams @ 12 months of TTD
Chargeback Trends
Medical and Comp

Billions

0.5 1 1.5 2 2.5 3 3.5


Total
Medical Chargeback Trend

- Medical
- Medical CPI


Medical CPI

0% 10% 20% 30% 40% 50% 60%

Billions

0.5 0.6 0.7 0.8 0.9 1.0 1.1 1.2 1.3 1.4 1.5


Medical  Medical CPI
Medical Chargeback Declining amid Rising Medical Inflation

Sources: DFEC and BLS
Compensation Chargeback Trend

- Billions on the y-axis
- CPI on the x-axis
Compensation Chargeback Grew Slower than Inflation

Sources: DFEC and BLS
% CA-1s and CA-2s filed in under 10 days

- SHARE
- POWER
- No Active Initiative
- PEER
Protecting Employees, Ensuring Reemployment (PEER)

How are we Doing?
### PEER Performance

<table>
<thead>
<tr>
<th>Goal</th>
<th>Target</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goal 1 - Total Injury and Illness Case Rate</td>
<td>1.48</td>
<td>1.78</td>
</tr>
<tr>
<td>Goal 2 - Lost-Time Injury and Illness Case Rate</td>
<td>1.00</td>
<td>1.28</td>
</tr>
<tr>
<td>Goal 3 - Timely Filing of Injury and Illness Notices (CA-1/CA-2 forms)</td>
<td>98%</td>
<td>99%</td>
</tr>
<tr>
<td>Goal 4 - Timely Filing of Wage Loss Claims (CA-7 forms)</td>
<td>98%</td>
<td>98%</td>
</tr>
<tr>
<td>Goal 5 - Return to Work (initial 45 day post-injury period) - COP</td>
<td>68%</td>
<td>66%</td>
</tr>
<tr>
<td>Goal 6 - Return to Work (two-year period)</td>
<td>92%</td>
<td>89%</td>
</tr>
</tbody>
</table>

Goal 7 – File ALL (100%) notices of injury and compensation claims in ECOMP

Agency listed first followed by its ECOMP Agency Groups

<table>
<thead>
<tr>
<th>All Government</th>
<th>ECOMP Filing % FY21 Q1/YTD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>98%</td>
</tr>
</tbody>
</table>
PEER

Goal 5

Return to Work During COP
March 15, 2021: Memorandum issued by then-Acting Secretary Stewart setting a goal of increasing the rate of return-to-work outcomes during the initial 45-day post-injury period by 1% per year above FY2020 performance.
For cases to be counted, OWCP is notified via:

- FECA Form CA-1;
- OWCP assigned nurse; or
- Agency electronic submission of Form CA-3.
Return to Work during Continuation of Pay (COP) success is defined as a case in which the injured employee both stopped working and returned to work within 45 days from the date of injury. Cases that meet this criteria are scored as successes for the agency.

If an employee stops working within 45 days of the date of injury, but does not return to work within 45 days of the date of injury, these are scored, but not as successes. Cases completely excluded from scoring are cases where the employee stopped working greater than 45 days from the date of injury, denied cases, and non-traumatic injury cases because they are not allowed COP.
### Cases Included

- **Traumatic injury (TI) cases** in which OWCP has been notified that the injured worker (IW) stopped work within 45 days of the date of injury.

- Cases where the IW returned to work within 45 days of the date of injury count positively; those where the IW did not count negatively.

- Cases in which 45 or more days have elapsed since the date of injury, and there has been no return to work.

### Cases Excluded

- TI cases where the IW stopped work more than 45 days following the date of injury.

- Denied claims.

- Non-traumatic injury cases.
PEER GOAL 5 - BY LARGEST AGENCIES (85.43% OF CLAIMS)

- 46.29%, USPS
- 15.36%, DHS
- 12.34%, VA
- 8.34%, DOJ
- 3.10%, ARMY
- 14.57%, ALL OTHER
<table>
<thead>
<tr>
<th>Agency</th>
<th>FY 2021 Target</th>
<th>FY 2021, Q1 Result</th>
<th>FY 2021, Q2 Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>U.S. Postal Service</td>
<td>66%</td>
<td>55%</td>
<td>58%</td>
</tr>
<tr>
<td>Department of Veterans Affairs</td>
<td>73%</td>
<td>74%</td>
<td>77%</td>
</tr>
<tr>
<td>Department of Homeland Security</td>
<td>68%</td>
<td>71%</td>
<td>70%</td>
</tr>
<tr>
<td>Department of Justice</td>
<td>65%</td>
<td>63%</td>
<td>71%</td>
</tr>
<tr>
<td>Department of the Army</td>
<td>77%</td>
<td>73%</td>
<td>76%</td>
</tr>
</tbody>
</table>
PEER

Goal 6
Return to Work
(two-year period)
## Snapshot of PEER Goals for Fiscal Year 2021 YTD (in claim volume order) [Result/Target]

<table>
<thead>
<tr>
<th>Agency</th>
<th>Goal 1</th>
<th>Goal 2</th>
<th>Goal 3</th>
<th>Goal 4</th>
<th>Goal 5</th>
<th>Goal 6</th>
<th>Goal 7*</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Government</td>
<td>1.78 / 1.48</td>
<td>1.28 / 1.00</td>
<td>99% / 98%</td>
<td>98% / 98%</td>
<td>66% / 68%</td>
<td>89% / 92%</td>
<td>98% / 100%</td>
</tr>
<tr>
<td>United States Postal Service</td>
<td>N/A</td>
<td>N/A</td>
<td>100% / 98%</td>
<td>99% / 98%</td>
<td>59% / 56%</td>
<td>89% / 92%</td>
<td>98% / 100%</td>
</tr>
<tr>
<td>Department of Veterans Affairs</td>
<td>2.06 / 1.51</td>
<td>1.54 / 1.00</td>
<td>99% / 97%</td>
<td>97% / 98%</td>
<td>76% / 73%</td>
<td>89% / 92%</td>
<td>99% / 100%</td>
</tr>
<tr>
<td>Department of Homeland Security</td>
<td>5.98 / 3.89</td>
<td>4.18 / 1.9</td>
<td>99% / 93%</td>
<td>92% / 90%</td>
<td>71% / 68%</td>
<td>90% / 90%</td>
<td>100% / 100%</td>
</tr>
<tr>
<td>Department of Justice</td>
<td>5.12 / 2.44</td>
<td>4.16 / 1.54</td>
<td>99% / 98%</td>
<td>94% / 96%</td>
<td>70% / 65%</td>
<td>87% / 89%</td>
<td>100% / 100%</td>
</tr>
<tr>
<td>Department of the Army</td>
<td>1.04 / 1.19</td>
<td>0.66 / 1.00</td>
<td>99% / 98%</td>
<td>97% / 90%</td>
<td>78% / 77%</td>
<td>95% / 92%</td>
<td>100% / 100%</td>
</tr>
<tr>
<td>Department of the Navy</td>
<td>0.98 / 1.31</td>
<td>0.66 / 1.00</td>
<td>99% / 99%</td>
<td>98% / 98%</td>
<td>71% / 76%</td>
<td>92% / 94%</td>
<td>100% / 100%</td>
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<tr>
<td>Department of the Air Force</td>
<td>0.82 / 1.00</td>
<td>0.72 / 1.00</td>
<td>99% / 99%</td>
<td>100% / 98%</td>
<td>89% / 94%</td>
<td>88% / 91%</td>
<td>100% / 100%</td>
</tr>
<tr>
<td>Department of Agriculture</td>
<td>1.96 / 2.92</td>
<td>1.3 / 1.06</td>
<td>100% / 91%</td>
<td>98% / 98%</td>
<td>69% / 64%</td>
<td>89% / 91%</td>
<td>99% / 100%</td>
</tr>
<tr>
<td>Department of the Interior</td>
<td>2.18 / 3.43</td>
<td>0.96 / 1.31</td>
<td>91% / 98%</td>
<td>87% / 90%</td>
<td>67% / 74%</td>
<td>89% / 87%</td>
<td>98% / 100%</td>
</tr>
<tr>
<td>Department of Defense (excluding Air...)</td>
<td>0.62 / 1.00</td>
<td>0.46 / 1.00</td>
<td>97% / 98%</td>
<td>99% / 95%</td>
<td>80% / 79%</td>
<td>98% / 89%</td>
<td>99% / 100%</td>
</tr>
<tr>
<td>Department of Treasury</td>
<td>0.22 / 1.00</td>
<td>0.16 / 1.00</td>
<td>96% / 98%</td>
<td>69% / 90%</td>
<td>74% / 73%</td>
<td>81% / 90%</td>
<td>68% / 100%</td>
</tr>
<tr>
<td>All Other Agencies</td>
<td>-1 / 1.48</td>
<td>0.59 / 1.00</td>
<td>94% / 98%</td>
<td>83% / 98%</td>
<td>73% / 58%</td>
<td>85% / 92%</td>
<td>96% / 100%</td>
</tr>
</tbody>
</table>

*Goal 7 – File ALL (100%) notices of injury and compensation claims in ECOMP. Goal 7 is updated monthly, whereas Goals 1 - 6 are updated quarterly.
The Branch of Technical Assistance will be increasing outreach to the five largest agencies (USPS, DHS, VA, DOJ, and Army) from quarterly to monthly to assist in meeting PEER Goals 5 and 6.
OWCP Responds to the Coronavirus

The Office of Workers' Compensation Programs Responds to the Coronavirus

Learn More

COVID-19
American Rescue Plan Act of 2021 (ARPA)

Makes it easier for federal workers diagnosed with COVID-19 to establish coverage under the FECA.

Under ARPA, the term “covered employee” means an individual:
• Who is an employee under Section 8101(1) and employed in the Federal service at any time during the period 1/27/20-1/27/23;
• Who is diagnosed with COVID–19 during that period; and
• Who, during a covered exposure period prior to such diagnosis, carries out duties that—
  • require contact with patients, members of the public, or co-workers; or
  • include a risk of exposure to the novel coronavirus.
**Covered Exposure**

The employee is deemed to have had exposure if, during the covered exposure period, he or she carries out (1) duties that require a physical interaction with at least one other person (a patient, a member of the public, or a co-worker) in the course of employment duties, or (2) duties that otherwise include a risk of exposure to COVID-19.

The interaction does not have to be direct physical contact.

Nor is there a specified time for such interaction, any duration qualifies. General office contact and interaction is sufficient.

This includes but is not limited to interaction in shared workspaces such as lunchrooms, break areas and common restrooms.

- *FECA previously used High-Risk determinations to make adjudication decisions – no longer necessary under ARPA.*
Covered Exposure Period
The evidence should establish manifestation of COVID-19 symptoms (or positive test result) within 21 days of the covered exposure.

Existing medical literature suggests that the incubation period of COVID-19 is between 2 and 14 days; however, the use of 21 days acknowledges an employee’s potential delay in seeking professional medical evaluation and treatment.

Teleworking Employees
An employee that is exclusively teleworking during a covered exposure period is not considered a “covered employee” under the ARPA.
• Routine FECA case handling procedures apply.
Diagnosis of COVID-19 (3 options)

a. A positive Polymerase Chain Reaction (PCR) COVID-19 test result; or

b. A positive Antibody or Antigen COVID-19 test result, together with contemporaneous medical evidence that the claimant had documented symptoms of and/or was treated for COVID-19 by a physician (a notice to quarantine is not sufficient if there was no evidence of illness); or

c. If no positive laboratory test is available, a COVID-19 diagnosis from a physician together with rationalized medical opinion supporting the diagnosis and an explanation as to why a positive test result is not available.
Duplicate Claims

Generally, a claim for COVID-19 will not be considered a new injury unless the date of injury is more than 1 year from the date of injury of any prior accepted COVID-19 claim for the same employee.

If a new claim is submitted, it will be combined with the prior accepted claim and developed as necessary as a consequential or recurrence claim.
Process Changes- Forms Filing
(Updated 3/26/21)

- New Option for COVID-19 CA-1
- Claimant prompts to collect information needed for ARPA determination - Date of Injury, Cause of Injury and Nature of Injury
- Claimant asked to upload a copy of COVID-19 positive test result and documentation of interactions with medical professionals
- Supervisor prompts for Performance of Duty and Challenges
- Supervisor review has auto-fill for Location, Nature and Cause of Injury, as well as Third Party and Special Event Indicator
Any COVID-19 claim that was accepted for COVID-19 prior to March 12, 2021, is not impacted because coverage for benefits had already been extended.

- Case retains existing case number
- Case retains the COR special event indicator
- Case will be included in chargeback
Any COVID-19 claim filed on or after March 12, 2021, will be reviewed solely under the new ARPA eligibility requirements.

- Case will have case number that starts with “19”
- Case will have new C19 special event indicator
- Case will NOT be included in chargeback
- Case will administratively close without formal adjudication by claims staff, if criteria are met
  - Change from pre-ARPA
- Assignment of COP/Triage Nurse will occur using the same criteria as other cases
  - Change from pre-ARPA
Process Changes - Adjudication
(Began on 3/12/2021)

Any COVID-19 claim filed prior to March 12, 2021 that had not been adjudicated is considered an ARPA case.

- Case converted to case number that starts with “19”
- Special event indicator was updated from COR to C19
- Case will NOT be included in chargeback
- Claimant and agency received letter with case number conversion notification

- 1715 cases filed pre-ARPA have now been accepted under ARPA
FECA proactively reviewed cases that were denied based on a lack of federal exposure or lack of medical evidence establishing causal relationship to work factors under the new ARPA provisions.

- Case converted to case number that starts with “19”
- Special event indicator was updated from COR to C19
- Claimant and agency received letter with case number conversion notification
- If ARPA criteria met, case was reopened under Director’s Own Motion and accepted
- **400 previously denied cases have now been accepted**
Combatting the Opioid Crisis

- Effective Controls
- Tailored Treatment
- Impactful Communications
- Aggressive Fraud Detection
Progress on Opioids:

Protecting Federal Injured Workers

- 52% decline in overall opioid use
- 61% drop in users with a morphine equivalent dose (MED) of 90 or more
- 35% decline in new opioid prescriptions
- 68% decline in new opioid prescriptions that last more than 30 days
- 84% drop in claimants with a morphine equivalent dose (MED) of 500 or more
## FY21 ECOMP Enhancements

<table>
<thead>
<tr>
<th>Features</th>
<th>Release Date</th>
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</thead>
<tbody>
<tr>
<td>CE-Linq Updates</td>
<td>10/15/20</td>
</tr>
<tr>
<td>- Separate tab for No Response Required letters</td>
<td></td>
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<tr>
<td>Password Reset Experience Update (via email)</td>
<td>2/5/21</td>
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<tr>
<td>Case Management</td>
<td>3/4/21</td>
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<tr>
<td>- Real Time Access to Case Documents</td>
<td></td>
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<tr>
<td>CE-Linq Notifications from Different Email</td>
<td>3/4/21</td>
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<tr>
<td>- <a href="mailto:noreply-celinq@ecomp.dol.gov">noreply-celinq@ecomp.dol.gov</a></td>
<td></td>
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<tr>
<td>COVID-19 Forms Filing Updates</td>
<td>3/26/21</td>
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<tr>
<td>Upload Document Button in Case Imaging</td>
<td>4/15/21</td>
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<tr>
<td>- no need to enter 4 pieces of information</td>
<td></td>
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<tr>
<td>CE-Linq Integration in Case View</td>
<td>4/15/21</td>
</tr>
</tbody>
</table>
## What’s Next?

<table>
<thead>
<tr>
<th>Features</th>
<th>Planned Release</th>
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</thead>
<tbody>
<tr>
<td>DMI Option to Request Second Opinion</td>
<td>July 2021</td>
</tr>
<tr>
<td>Claimant Imaging</td>
<td>July 2021</td>
</tr>
<tr>
<td>Help Site Redesign</td>
<td>July 2021</td>
</tr>
<tr>
<td>Entity Access to ECOMP (Attorneys, Unions, Auth Reps)</td>
<td>September 2021</td>
</tr>
<tr>
<td>Pharmacy Benefit Manager (PBM) Integration</td>
<td>September 2021</td>
</tr>
<tr>
<td>Opt Out of Paper Mail – Use CE Linq Only</td>
<td>September 2021</td>
</tr>
<tr>
<td>Real Time Chargeback</td>
<td>October 2021</td>
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<tr>
<td>CA-1032 On-Line Completion</td>
<td>December 2021</td>
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<tr>
<td>Payroll Integration</td>
<td>TBD</td>
</tr>
</tbody>
</table>
Web Chat Now Open
For Submission of Questions
# DMI Option – Request Second Opinion

## REMINDERS

<table>
<thead>
<tr>
<th>Fav</th>
<th>Subject</th>
<th>Author</th>
<th>Received</th>
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<tbody>
<tr>
<td></td>
<td>All Sanctions</td>
<td>05/02/2020</td>
<td>05/03/2020</td>
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<tr>
<td>★</td>
<td>2</td>
<td>04/22/2020</td>
<td>04/25/2020</td>
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<td>04/004/2020</td>
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<tr>
<td>★</td>
<td>CA935</td>
<td>03/29/2020</td>
<td>03/31/2020</td>
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</table>

## DISABILITY MANAGEMENT

- Report Job Offer Refusal
- Request Updated Medical Evidence
- No Response to Prior DMI Reque
- No RTW after 15 day Letter
- No RTW after Job found Suitable
Request Second Opinion

Option will only be available if ALL of the following are met:

- Case file is fully imaged
- Case status is OP, PR, or PN
- There has not been a second opinion report received within the last 6 months
- Case is not currently in active vocational rehabilitation
- No pending termination or reduction decision
# Request Second Opinion

## REASON FOR SECOP

<table>
<thead>
<tr>
<th>Option</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>✔️</td>
<td>Agency questions if this totally disabled claimant is capable of working</td>
</tr>
<tr>
<td></td>
<td>Agency questions this partially disabled claimant’s work capacity</td>
</tr>
<tr>
<td></td>
<td>Agency questions the claimant’s capacity for a return to the regular date of injury position.</td>
</tr>
<tr>
<td></td>
<td>There is no medical evidence within 6 months.</td>
</tr>
<tr>
<td>✔️</td>
<td>There is no medical evidence in 12 months or more.</td>
</tr>
<tr>
<td>✔️</td>
<td>Agency questions if ongoing or continued medical treatment for the accepted condition(s) is necessary.</td>
</tr>
<tr>
<td></td>
<td>Agency requests job offer review for physician concurrence (can the claimant perform the offered job).</td>
</tr>
<tr>
<td></td>
<td>Other (Explain)</td>
</tr>
</tbody>
</table>

Please Explain Other

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Request Second Opinion

What happens after request is submitted?

1. Referral automatically sent through ECOMP to a Field Nurse for a task based assignment to prepare the case for a second opinion.
2. Memo is placed into the file for the CE to see when referral to Field Nurse occurs.
   - CE may object but this should be exceedingly rare.
3. Field Nurse completes DRAFT SOAF and Questions for CE.
4. CE reviews, edits and finalizes both documents as the author, and refers for SECOP scheduling.
Help Site Redesign

How can we help?
The Employees’ Compensation Operations & Management Portal

In order to provide you with the most relevant help please identify your user role to proceed.

- FECA Claimant: Injured Worker
- Agency Reviewer
- Agency Maintenance User
- OSHA Record Keeper
- Law Enforcement
WHAT ARE YOU LOOKING FOR?

Search Term..

FECA CLAIMANT USER GUIDES

User guide videos are a series of videos created to chronologically walk the X-user-type through their ECOMP experience. These videos explain usage expectations, suggestions, and regulations. Below are high level topics to click into specific segments of the content, or you may view the full guide by clicking on the button below to Watch Full User Guides.

User Guides include video and text content explaining all the major milestones within ECOMP. To view text (or PDF) explanations of a given topic you may navigate through the user guide segments by clicking on a topic below or using the left hand navigation within the user guides.

Introduction to ECOMP  Registration  ID Verification
Password Reset  Form Filing  Request Letters
Help Site Redesign

Welcome to ECOMP
The Employees’ Compensation Operations & Management Portal

Have you been hurt on the job?
If you are a Federal Employee or a Contractor and have sustained a work-related injury or illness, use ECOMP to report the incident to your supervisor.

Need to upload a document?
You can upload letters, medical reports, and other supporting documentation. You will need the official FECA case number and other identifying information to use these features.

The following is a step by step walkthrough of the identity verification process for AMUs.
Official Contact Name: MIEASSA GREENE-THOMAS (PROGRAM MANAGER) WORKERS COMPENSATION PROGRAM UNIT FORD HOUSE OFFICE BUILDING H2-280 WASHINGTON, DC 20515 202-226-2544

Subject

Problem Registering or Signing In

Message about your question, concern, feedback or issue:

Comments about my issue

I'm not a robot
Entities & Third Party Groups

Entities are third party individuals or groups who are granted access to case data by claimants. **Entities can be union groups, law firms, attorneys, insurance adjustors, authorized representatives, and more.** Entities have the ability to navigate within OWCP’s online ecosystem to access and manage cases.

To register for an account in OWCP, please click “Register” below. If you have an existing account, please click “Sign In” below or navigate to the site heading and click “Entities”. All individuals requiring access to claimant case information will need to register and identity verify with OWCP.
Entity Deployment

SELECT AN ENTITY ASSOCIATION:

You are now registered as a verified individual entity member within the OWCP system. To be available for claimant assignment you must either create or join an entity.

If you belong to an entity organization which has already been established within the OWCP system, you may click “Request to Join Existing Entity” below.

If your Entity organization (individual or group entities) does not yet exist in the system please click “Request to Create Entity” below. You should request to create an entity if:
- You are an Entity organization with an individual member
- You are a group Entity organization that is new to OWCP

If you are an Employer/Carrier or Third Party Administrator Entity Organization, you will require OWCP approval to join the system.

Once you have requested to join or create an entity organization, you may revoke a request prior to approval.

REQUEST TO JOIN EXISTING ENTITY

REQUEST TO CREATE ENTITY

Revoke Request to Join Entity

Revoke Request to Create Entity
Entity Deployment

<table>
<thead>
<tr>
<th>Agency: 1126-AM - DEPARTMENT OF LAB...</th>
<th>Name: Master:</th>
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<tbody>
<tr>
<td>Adjudication Status: AB - 11/12/2019</td>
<td>SSN: [Redacted]</td>
</tr>
<tr>
<td>Current Case Status: CD - 02/21/2013</td>
<td></td>
</tr>
<tr>
<td>Conditions Accepted: ICD9 - 7883 - Unimplemented: 788... Accepted - MAL NEO SIGMO...</td>
<td></td>
</tr>
</tbody>
</table>

View More +
## Entity Deployment

<table>
<thead>
<tr>
<th>FILTERS</th>
<th>SELECT REPRESENTATION</th>
</tr>
</thead>
<tbody>
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<td><strong>Representation Type</strong></td>
<td><strong>Law Firm/Attorney</strong> 7326 Grant Rd. Roswell, GA 30075 Law Firm</td>
</tr>
<tr>
<td><strong>State</strong></td>
<td>WSP Partners 9248 John Street Alpharetta, GA 30004 Law Firm</td>
</tr>
<tr>
<td><strong>City</strong></td>
<td>Warnaby &amp; Warnaby 1010 Main Street, Athens, GA 30075 Law Firm</td>
</tr>
<tr>
<td><strong>City</strong></td>
<td>Wilbur &amp; Wilbur 96 Indian Spring Ave. Utica, NY 13501 Law Firm</td>
</tr>
<tr>
<td><strong>City</strong></td>
<td>Gimbel Partners, LLC 3 Hickory Road Natick, MA 01760 Law Firm</td>
</tr>
</tbody>
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290 RESULTS

Clear Selection
Entity Deployment
Pharmacy Benefits Manager - PBM
Expectations

• Improve quality of care provided to injured federal workers through added clinical pharmacy personnel.
• Improve safety controls for pharmaceuticals such as a drug formulary.
• Add more modernized functionality for claimants, prescribers, and government staff.
• Assist agencies in reducing chargeback costs.
Phase One—April 1, 2021

PHASE 1: Welcome packets and new, Optum pharmacy cards were mailed to the 4,200 claimants receiving 90 MED or higher. Those cards became effective on April 1, 2021.
PHASE 2: Welcome packets and new, Optum pharmacy cards were mailed to the remaining 200,000 claimants (approximation of numbers). Those PBM cards will become effective on April 30, 2021.
Phase Three—May 1, 2021

**PHASE 3:** All newly accepted claims and newly filed claims which are administratively closed will receive a new benefits card; the effective date will be the Date of Injury.
ECOMP AND PBM

• Our plan is to leverage ECOMP to:
  • Immediately and electronically distribute pharmacy benefit cards and welcome letters for accepted and short form closure (SFC) cases.
  • For SFC cases
    • ECOMP will distribute a PBM card and welcome letter (“Admin Expenses Only”) as soon as the SFC is identified by the system; as previously, bills will pay up to the SFC threshold, after which the case will flip and the claimant will be notified.
    • Once, and if, the claim is accepted, another letter/card is distributed via ECOMP for their accepted injury.
The Program is currently developing a PBM program landing site with program announcements, a pharmacy locator, and access to various portals.

Improvements will be made over time.

Currently claimants can access Optum network pharmacies via the ECOMP home page.

The PBM will be creating portals for:

- Claims Examiners, Medical Benefit Examiners, Agency Representatives, and other government staff
- Claimants
- Providers

Each portal will be slightly different, but will allow individuals to see case specific prescription activity including prior authorizations or letters of medical necessity.

Report functionality will also be improved.
Questions?