

# Had COVID-19? File an OWCP claim



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**A**s I write this, more than 15,000 letter carriers have tested positive for COVID-19. A small fraction of that number has filed workers' compensation claims. The small number of claims may be due to the fact that most people suffered light symptoms, used the coronavirus leave and then returned to work. And while many feel just fine today, very little is known of the long-term effects of a COVID-19 infection.

As I wrote in my April *Postal Record* column, the American Rescue Plan Act (ARPA) gave presumptive exposure to federal and postal employees who tested positive for COVID-19 and had contact of any duration with co-workers and the general public while on duty.

In response to the ARPA, the Office of Workers' Compensation Programs (OWCP) released new guidance for federal and postal employees who may have contracted COVID-19 in the workplace.

**Any COVID-19 claim filed that was accepted for COVID-19** prior to March 12 is not affected by the ARPA, as OWCP benefits had already been extended. COVID-19 claims accepted on or before March 11 (the date of enactment) are not ARPA cases and have been processed through normal OWCP procedures.

OWCP has been reviewing all COVID-19 claims previously denied based on a lack of work exposure or a lack of medical evidence establishing causal relationship to determine if the claim can now be accepted under the ARPA. The review happens automatically; you do not need to request a review.

If OWCP determines that the case can now be accepted under the ARPA, the case will be reopened and the case will be accepted. If this occurs, you will be notified. Thus far, more than 400 previously denied cases have been accepted.

No action is being taken based on the ARPA on COVID-19 cases that already are administratively closed. The claimant remains eligible for Continuation of Pay (COP) if a CA-1 was timely filed, and medical bills for basic treatment incurred for COVID-19, to include any testing, are still payable up to \$1,500.

**The long-term effects of COVID-19 are unknown.** If you tested positive for COVID-19, suffered symptoms and missed some work, you should consider filing a claim. OWCP has streamlined the COVID-19 claims processing, making it easier to file a claim and get it accepted.

COVID-19 claims should be filed via the Employees' Compensation and Management Portal (ECOMP). The form filing process in ECOMP has been updated to assist claimants with filing claims for COVID-19 on a CA-1. The CA-1 for COVID-19 claims has been modified and the claimant now is provided with specific instructions to supplement the routine claim filing questions.

OWCP considers COVID-19 to be a traumatic injury since it is contracted during a single workday or shift. Since the precise time of transmission may not always be known due to the nature of the virus, OWCP considers the date of injury to be the last day worked prior to the medical evidence establishing the COVID-19 diagnosis.

You must have worked within 21 days prior to becoming symptomatic or testing positive for the virus. Existing medical literature suggests that the incubation period of COVID-19 is between two and 14 days; however, the use of 21 days acknowledges a potential delay in seeking professional medical evaluation and treatment.

**To establish a diagnosis of COVID-19, you must** submit a positive polymerase chain reaction COVID-19 test result (better known as a PCR test), or a positive antibody or antigen COVID-19 test result, together with contemporaneous medical evidence that you had documented symptoms of and/or were treated for COVID-19 by a physician (a notice to quarantine is not sufficient if there was no evidence of illness).

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

In certain rare instances, a physician may provide an opinion with supporting factual and medical background as to why you were diagnosed with COVID-19, even if you have a negative or series of negative COVID-19 test results. Medical reports from nurses or physician assistants are acceptable if a licensed physician cosigns the report.

Getting a COVID-19 claim accepted under the ARPA is not difficult. In addition to the medical evidence, you need a short explanation that you physically interacted with at least one other person at work or on the route.

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 the workroom floor, break areas and common restrooms.

**The bottom line is that an accepted claim for COVID-19** will provide long-term benefits for you and your family. If you've been infected, file a claim.

## FILING A CA-1 FOR COVID-19

To file a claim for COVID-19, first register at [ECOMP.dol.gov](https://ecomp.dol.gov) unless you have already done so. Enter your name, telephone number, and email address. You may use either your government email address or any personal email address. This email address will be used to send notifications to you about your workers' compensation claim file in ECOMP.

Enter your date of birth, sex, home telephone number, level and step as of the date of injury, home mailing address, dependent information, and your supervisor's email address.

Click the NEW CLAIM located on the top menu of your ECOMP Dashboard page. Select your government organization and click the FILE CA-1 COVID-19 button to proceed.

Next, provide the place where the injury occurred, the date and time the injury occurred, as well as your occupation. *The date and time the injury occurred are the last date and the time that you worked and were exposed to other people in the work setting prior to the onset of COVID-19 symptoms or a positive COVID-19 test result.* Describe the cause of injury and the nature of injury. Next, if there was a witness to your injury, you may enter their name and address. This step is optional. If you have a statement from a witness, you may enter the date of the statement and then electronically upload it in the next step.

Next, you may upload any attachments that you wish to submit in support of your claim, such as positive COVID-19 test result, statements by you or any witnesses, or medical reports. To upload a document, click the CHOOSE A FILE button. Please note that medical bills and reimbursement claims may not be uploaded via ECOMP. Please also note that you may upload supporting documents at a later time.

Next, a summary of the information you have entered for the CA-1 COVID-19 claim is displayed. If changes are needed, you may click the "Edit" link on the right-hand side of each section to return

to that portion of the form. Finally, you must indicate whether you want to claim either Continuation of Pay or Sick and/or Annual leave for any disability resulting from your injury. After making your selection and reading the displayed certification and authorization statements, click SIGN AND FILE button and I AGREE button to submit your claim. A confirmation message will then be displayed notifying you that your claim has been forwarded to your supervisor for review. The ECN which has been assigned to your claim is also displayed. You may use this number to track status of your claim. You may also view or save a PDF copy of your CA-1 using the “View” or “Get PDF” links. If you have documents you wish to upload, you may click the “Upload Attachments” link. You may also upload supporting documents at a later time. You will receive an email from ECOMP with the status of the ECN for your claim.

After your supervisor has reviewed the claim, it will be forwarded to your employing agency’s ECOMP Agency Reviewer (AR). The AR will perform a final review of the CA-1 COVID-19 claim and forward it to OWCP for creation of a case as needed. The AR will also print the form and contact you and your supervisor to obtain signatures on the form. The Form CA-1 with original signatures will be maintained by your employing agency.

When your CA-1 COVID-19 claim is forwarded to OWCP, you will receive an email from ECOMP with the case file number.

If you leave a form without completing it, the form will be maintained in a draft status for 30 days under the “Draft Forms” tab on your ECOMP Dashboard.

A CA-1 COVID-19 claim which has been filed but has not yet been forwarded to OWCP may be withdrawn. First, locate the ECN under the “Cases” tab or search for the ECN. Click the “Next Steps” drop-down menu and select “Withdraw Claim.” You may also upload supporting documents for your claim by selecting “Upload Documents.”

For further help, refer to the FECA Claimant User Guides: <https://www.ecomp.dol.gov/#/help/userguide/claimant>

**Subject: Processing FECA Claims for COVID-19 under the American Rescue Plan Act of 2021**

**Background:** The Federal Employees' Compensation Act (FECA) covers injury in the performance of duty; injury includes a disease proximately caused by federal employment. The U.S. Department of Labor's (DOL) Office of Workers' Compensation Programs (OWCP) Division of Federal Employees', Longshore and Harbor Workers' Compensation (DFELHWC) administers the FECA. The FECA provides to an employee injured while in the performance of duty, the services, appliances, and supplies prescribed or recommended by a qualified physician, which OWCP considers "likely to cure, give relief, reduce the degree or the period of disability, or aid in lessening the amount of the monthly compensation." See 5 U.S.C. 8103. The FECA pays compensation for the disability or death of an employee resulting from injury in the performance of duty.

On March 11, 2021, the American Rescue Plan Act of 2021 (ARPA) was signed into law. This new legislation streamlines the process for federal workers diagnosed with COVID-19 to establish coverage under the FECA. Specifically, Section 4016 of the ARPA provides that a "covered employee" as defined below shall, with respect to any claim made by or on behalf of the covered employee for benefits under the FECA, be deemed to have an injury proximately caused by exposure to COVID-19 arising out of the nature of the covered employee's employment.

Under Section 4016 of the ARPA, the term "covered employee" means an individual:

- Who is an employee under Section 8101(1) of title 5, United States Code, employed in the Federal service at any time during the period **beginning on January 27, 2020**, and ending on January 27, 2023;
- Who is diagnosed with COVID-19 during such 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.

Previously, COVID-19 claims under the FECA were processed under the guidelines provided by FECA Bulletin No. 20-05 (released March 31, 2020) and FECA Bulletin No. 21-01 (released October 21, 2020). This Bulletin supersedes FECA Bulletins 20-05 and 21-01.

With respect to all COVID-19 cases processed under the ARPA, no benefits are payable after September 30, 2030. This statutory limitation on benefits does not apply to COVID-19 claims accepted prior to March 12, 2021.

**Purpose:** To provide guidance regarding the processing of COVID-19 FECA claims as set forth in the ARPA.

**Actions:**

**I. Cases Processed Prior to the American Rescue Plan Act of 2021.**

1. **Previously Accepted Cases.** Any COVID-19 claim filed under the FECA that was accepted for COVID-19 prior to March 12, 2021 is **not** impacted because coverage for benefits had already been extended. Any case accepted on or before March 11, 2021 (the date of enactment) is not an ARPA case; such cases are not subject to Section 4016's limitation that no benefits may be paid after September 30, 2030.
2. **Previously Denied Cases.** The FECA program will review all COVID-19 claims previously denied based on a lack of federal exposure or a lack of medical evidence establishing causal relationship to determine if the claim can now be accepted under the ARPA. This will occur without a request from the claimant. If the FECA program determines that the case can now be accepted under the ARPA, the case will be reopened under the Director's own motion under Section 8128(a) of the FECA, and the case will be accepted. If this occurs, the claimant and Employing agency will be notified. The case will be converted to a "19" prefix case and the C19 indicator will be added as addressed in paragraph III below.
3. **Previously Administratively Closed Cases.** No action will be taken based on the ARPA on COVID-19 cases already administratively closed. The claimant remains eligible for Continuation of Pay (COP) pursuant to 20 CFR 10.205 - 224, if Form CA-1 was timely filed, and medical bills for basic treatment incurred for COVID-19, to include any testing, are still payable up to \$1500. However, any future actions, if necessary, will be taken in accordance with the ARPA since the claim had not been formally accepted, so each of these cases has been converted to a "19" prefix case, and the C19 indicator will be added as addressed in paragraph III below.

## II. Filing of Cases under the American Rescue Plan Act of 2021

1. **Form Filing Process.** The Employees' Compensation and Management Portal (ECOMP) should be used to file new claims as the form filing process in ECOMP has been updated to assist claimants and employing agencies with filing claims for COVID-19 on a CA-1.
2. **Use of the CA-1.** The FECA program considers COVID-19 to be a traumatic injury since it is contracted during a single workday or shift (see 20 CFR 10.5(ee)), and considers the date of last exposure prior to the medical evidence establishing the COVID-19 diagnosis as the Date of Injury since the precise time of transmission may not always be known due to the nature of the virus.
3. **Update to the CA-1 in ECOMP.** To assist the FECA Program with collecting necessary information to make determinations under the ARPA, the claimant and agency are provided with specific instructions that are intended to supplement the routine claim filing questions. These instructions are documented in the attachment to this Bulletin.

## III. Creation of Cases under the American Rescue Plan Act of 2021

1. **Creation and Administrative Closure of Cases.** Consistent with PM 1-0400.4, cases not expected to involve large medical expenses or extended disability may be administratively closed without formal adjudication by claims staff. COVID-19 cases filed under the ARPA will administratively close like other cases, and assignment of Triage Nurses will occur using the same criteria as other cases.
2. **Nature of Injury, Cause of Injury and Location of Injury Codes.** All cases filed after March 11, 2021 for COVID-19 will use the following codes:

Nature of Injury- COVID-19 (T9)  
Cause of Injury- Exposure to COVID-19 (9C)  
Location of Injury- COVID-19 (ZZ)

3. **Case Indicator.** For COVID-19 claims filed after March 11, 2021, a new internal special tracking indicator (C19 - COVID-19) will be assigned. This replaces the previous indicator (COR). Cases received on and prior to March 11, 2021 that were pending adjudication will have their case indicator changed from COR to C19.
4. **Case Prefix.** All cases filed after March 11, 2021 for COVID-19 will have a prefix "19" rather than the current prefix "55" used in other new FECA claims. Cases received on or prior to

March 11, 2021, that were pending adjudication will have their case number changed such that the prefix is "19."

5. **Case Number Conversion Notification.** In all instances where a case number is changed to a "19" prefix, regardless of the reason, a letter will be sent to the claimant and agency notifying them of the change.

#### **IV. Case Adjudication Procedures under the American Rescue Plan Act of 2021**

1. **Employee.** The claims examiner should make a determination as to whether the employee is an employee under 5 U.S.C. 8101(1) of the FECA and whether he or she was diagnosed with COVID-19 (in accordance with paragraph 2 below) between January 27, 2020, and January 27, 2023. If it is determined that the employee was an employee under Section 8101(1) but diagnosed with COVID-19 outside of the period of January 27, 2020, through January 27, 2023, routine FECA case handling procedures apply.

Individuals otherwise covered under FECA but not covered under Section 8101(1) of title 5, United States Code are not covered under the ARPA and routine FECA case handling procedures apply. Examples include state or local law enforcement officers not employed by the United States who are covered under 5 U.S.C. 8191-8193.

2. **Diagnosis of COVID-19.** In order to establish a diagnosis of COVID-19, an employee (or survivor) should submit:

- 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.

In certain rare instances, a physician may provide a rationalized opinion with supporting factual and medical background as to why the employee has a diagnosis of COVID-19 notwithstanding a negative or series of negative COVID-19 test results.

**Medical reports from nurses or physician assistants are acceptable if a licensed physician cosigns the report.**

3. **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.
4. **Covered Exposure Period.** The evidence should establish manifestation of COVID-19 symptoms (or positive test result) within 21 days of the covered exposure described in paragraph 3 above.

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

5. **Teleworking Employees.** An employee that is exclusively teleworking during a covered exposure period is not considered a "covered employee" under the ARPA. For such cases, routine FECA case handling procedures apply.
6. **Adjudication and Disposition of Claims.**
- a. Claim Acceptances: If, following any appropriate development, the evidence establishes that the employee meets the definition of "covered employee" under Section 4016 of the ARPA, the employee's COVID-19 will be deemed proximately caused by Federal employment and the claim will be accepted for COVID-19.
- b. Claim Denials: If, following appropriate development, the evidence fails to establish that the employee was diagnosed with COVID-19, the claim will generally be denied on that basis. If, following appropriate development, the evidence fails to establish any covered exposure during a covered exposure period as defined in paragraphs 1, 3, 4 and 5 above, the claim will generally be denied based upon the failure to establish exposure to COVID-

19 occurred in the performance of Federal employment.

d. Withdrawal of Claim: Certain COVID-19 claims may have been filed preventatively for exposure only, due to quarantine, or otherwise filed prematurely. In such circumstances, an employee may decide not to pursue his or her claim. A claimant may withdraw his or her claim in writing (but not the notice of injury) at any time before OWCP determines eligibility for benefits. See 20 CFR 10.100(b)(3). However, any COP granted to an employee after a claim is withdrawn must be charged to sick or annual leave, or considered an overpayment of pay consistent with 5 U.S.C. 5584, at the employee's option.

7. **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. Rather it will be combined with the existing claim and developed as necessary as a consequential or recurrence claim.
  
8. **Claims for Disability.** The ARPA outlines the criteria to determine whether COVID-19 is deemed proximately caused by federal employment. However, acceptance of the claim for work-related COVID-19 does not alter the claimant's burden of proof for establishing disability, the need for ongoing medical treatment and any claim for a consequential condition. See PM 2-0901.5(a)(2).
  
9. **Death Claims.** The criteria to determine whether COVID-19 is deemed proximately caused by federal employment are the same for claims involving death. However, in death cases, the FECA program will also ask for evidence and records to support that the death was the result of COVID-19, or that COVID-19 was a contributing cause of death. This will typically include hospital records showing treatment, a hospital death discharge summary detailing the cause of death, and/or a death certificate but may also include other documentation depending on the circumstances of the case.

## V. Non-Chargeable Flag

In accordance with Section 4016(d) of the American Rescue Plan Act of 2021, all cases flagged as an ARPA case with the "19" prefix will be flagged as non-chargeable in the FECA database, meaning it will not be included in annual chargeback billing.

**Disposition:** This Bulletin is to be retained until incorporated into the FECA Procedure Manual.

**Attachment to FECA Bulletin 21-09**  
**CA-1 ECOMP Prompts for COVID-19 Claims under the ARPA**

**A. Claimant Portion of the CA-1.** Upon selecting to file a new claim in ECOMP, the claimant is provided a new option to file a COVID specific CA-1. If they choose this option, the following prompts will supplement the routine process:

1. **Date and Time Injury Occurred.** The claimant is asked about the last date he or she was exposed to others in the work setting prior to the onset of COVID-19 symptoms or a positive COVID-19 test result.
2. **Cause of Injury.** The claimant is asked to explain what individuals he or she was exposed to in the workplace and the nature and extent of the interaction(s).
3. **Nature of Injury.** The claimant is asked to explain symptoms related to COVID-19, whether he or she has received a positive test result for COVID-19 and whether he or she has consulted with a medical professional.
4. **Upload Attachments Option.** The claimant is asked specifically to upload a copy of a COVID-19 positive test result and any documentation of interactions with a medical professional.

**B. Supervisor Portion of the CA-1.** In COVID-19 claims, agencies are provided with specific questions that deviate from the routine process as outlined below:

1. **Performance of Duty (POD).** The employing agency is advised to only indicate the employee is not in POD if the employee was not working or was teleworking on the date of injury, or if the supervisor disagrees substantively with the employee's description of injury.
2. **Third Party Liability.** The answer to this question will default to no third party liability for COVID-19 cases.
3. **Anatomical Location, Nature of Injury, Cause of Injury.** These responses will be automatically filled in accordance with the codes in section III, part 2 of this Bulletin.
4. **Agreement with the Employee.** The employing agency will be advised to only indicate "no" if the employee was not working or was teleworking on the date of injury, or if the supervisor disagrees substantively with the employee's description of injury.

5. **Controversion of COP.** The employing agency will be advised to only controvert COP if one of the specific nine regulatory reasons applies. That reason must be selected and explained.
6. **CA-16.** The employing agency is prompted to provide a CA-16 if they do not substantively dispute the employee's description of Cause and Nature of Injury, and if the claim was submitted within 1 week of the Date of Injury, or the date the employee had symptoms of COVID-19 or received a positive test result. Issuing the CA-16 will allow the claimant to obtain the necessary test to confirm COVID-19 and receive medical treatment, if indicated.

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**FECA BULLETIN NO. 21-10**

**August 18, 2021**

**Subject: Establishing FECA Claims for COVID-19 under the American Rescue Plan Act of 2021 through Antigen Testing**

**Background:** The Federal Employees' Compensation Act (FECA) covers injury in the performance of duty; injury includes a disease proximately caused by federal employment. The U.S. Department of Labor's (DOL) Office of Workers' Compensation Programs (OWCP) Division of Federal Employees', Longshore and Harbor Workers' Compensation (DFELHWC) administers the FECA. The FECA provides to an employee injured while in the performance of duty, the services, appliances, and supplies prescribed or recommended by a qualified physician, which OWCP considers "likely to cure, give relief, reduce the degree or the period of disability, or aid in lessening the amount of the monthly compensation." See 5 U.S.C. 8103. The FECA pays compensation for the disability or death of an employee resulting from injury in the performance of duty.

On March 11, 2021, the American Rescue Plan Act of 2021 (ARPA) was signed into law. This new legislation streamlined the process for federal workers diagnosed with COVID-19 to establish coverage under the FECA.

On April 28, 2021, the FECA Program issued FECA Bulletin 21-09, which provided detailed processing procedures for claims for COVID-19 filed under the ARPA.

FECA Bulletin 21-09 provided that, in order to establish a diagnosis of COVID-19, an employee (or survivor) should submit:

- 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.

In certain rare instances, a physician may provide a rationalized opinion with supporting factual and medical background as to why the employee has a diagnosis of COVID-19 notwithstanding a negative or series of negative COVID- 19 test results.

Antigen tests detect specific proteins on the surface of the coronavirus. They are sometimes referred to as rapid diagnostic tests because it can take less than an hour to get the test results. Positive antigen test results are highly specific, meaning that if you test positive you are very likely to be infected.<sup>1</sup> As antigen testing has become more prevalent over the course of the COVID-19 pandemic, the FECA Program will no longer require contemporaneous medical evidence submitted together with an antigen test to establish the diagnosis of COVID-19. Submission of an antigen test alone is now sufficient to establish the medical component of a COVID-19 claim.

**Purpose:** To provide amended guidance regarding the processing of COVID-19 FECA claims as set forth in the ARPA.

**Actions:**

1. **Diagnosis of COVID-19.** With respect to Case Adjudication procedures under the ARPA, the following diagnostic criteria now apply:

In order to establish a diagnosis of COVID-19, an employee (or survivor) should submit:

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

In certain rare instances, a physician may provide a rationalized opinion with supporting factual and medical background as to why the employee has a diagnosis of COVID-19 notwithstanding a negative or series of negative COVID-19 test results.

**Medical reports from nurses or physician assistants are acceptable if a licensed physician cosigns the report.**

2. **Previously Denied Cases.** The FECA program will review all COVID-19 claims previously denied in accordance with the guidance provided in FECA Bulletin 21-09 based on the submission of an antigen test without contemporaneous medical to determine if the claim can now be accepted. This will occur without a request from the claimant. If the FECA program determines that the case can now be accepted under the ARPA, the case will be reopened under the Director's own motion under Section 8128(a) of the FECA, and the case will be accepted. If this occurs, the claimant and employing agency will be notified.

**Disposition:** This Bulletin amends FECA Bulletin 21-09 and is to be retained until incorporated into the FECA Procedure Manual.

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1 <https://www.health.harvard.edu/diseases-and-conditions/if-youve-been-exposed-to-the-coronavirus>

# Did you hear it's Easier to File a FECA Claim for COVID-19 now?

The American Rescue Plan Act of 2021 that President Biden signed on March 11, 2021, makes it **much easier** for federal workers diagnosed with COVID-19 to establish coverage under the Federal Employees' Compensation Act. To establish a COVID-19 claim, you simply need to establish that you are a "covered employee," meaning that:

- 1. You were diagnosed with COVID-19.** Specifically, you were diagnosed with COVID-19 while employed in the Federal service at any time during the period of January 27, 2020 to January 27, 2023; and,
- 2. Your duties include any risk of exposure.** Specifically, within **21** days of your diagnosis of COVID-19, you carried out duties that—
  - a. required contact with patients, members of the public, or co-workers; or
  - b. included a risk of exposure to the novel coronavirus.



## What Does the Change in the Law Mean?

- 1. You are only required to establish that your duties included a risk of exposure to COVID-19.** You do not have to prove you were engaged in high-risk employment; that you were actually exposed to the virus; or that you were exposed to someone who had the virus while performing your duties.
- 2. If you establish that you are a "covered employee," any diagnosed COVID-19 will be deemed to have been proximately caused by your Federal employment.** You no longer have to establish a causal link between your employment and your COVID-19 diagnosis.



## What to Do:

You can quickly and easily file a **CA-1** Claim for COVID-19 through the Employees' Compensation Operations and Management Portal (ECOMP). You can access ECOMP at [ecomp.dol.gov](https://ecomp.dol.gov). If you have never used ECOMP, you can [view this instructional video](#) to learn how to register for an ECOMP account, [and this video](#) to learn how to file a COVID-19 claim. If you don't have access to a computer, contact your supervisor.



## Why File Now? What if I Think I Am OK?

If you were previously diagnosed with COVID-19 or even if you believe you just have a mild case of COVID-19, you should consider filing a COVID-19 FECA claim **now** even if you have fully recovered and/or had an asymptomatic infection.

- In the event you develop a consequential injury, impairment or illness later as a result of your COVID-19 diagnosis, timely filing your claim **now** will facilitate the processing of any future claim for any such consequential condition or impairment.
- If you wait until you experience a consequential injury or illness to file your COVID-19 claim, your claim may be subject to time limitation and you will have to establish **both** the initial COVID-19 claim and the consequential condition claim before benefits can begin.

