

Justification for Non-material/Non-substantive Change

Claim for Reimbursement of Benefit Payments and Claims Expense Under the War Hazards
Compensation Act (CA-278)

The Office of Workers' Compensation Programs (OWCP) administers the Federal Employees' Compensation Act (FECA), 5 U.S.C. 8147 and the War Hazards Compensation Act (WHCA), 42 U.S.C. 1701. The statutes provide for the reimbursement of payment by insurance carriers and self-insured to workers injured due to a war-risk hazard. The information collected on this form allows OWCP to consider requests filed by insurance carriers and self-insured that have paid benefits to workers injured due to a war-risk hazard to be reimbursed for such benefits out of the Employees' Compensation Fund. Before compensation may be paid, the case file must contain medical evidence showing that the claimant's disability is causally related to the claimant's federal employment.

With regards to the form itself, OWCP requests an address be revised in item 1 of the instructions of the form which requires that the completed form be sent to OWCP. The address currently notes U.S. Department of Labor, Office of Workers' Compensation Programs, 1240 East 9th Street, Room 851, Cleveland, Ohio 44199. Due to the consolidation of the Division of Federal Compensation (DFEC) and the Longshore and Harbor Worker's Compensation Programs (LHWC), which took effect in 2020, the new Division is now noted as OWCP Division of Federal Employees', Longshore and Harbor Workers' Compensation (DFELHWC). The address in item 1 should now be noted as Office of Workers' Compensation Programs, Division of Federal Employees', Longshore and Harbor Workers' Compensation, Federal Employees' Compensation Act, (OWCP/DFELHWC-FECA), PO Box 8311, London, KY 4072-8311.