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The Post-Service Unit (PSU) Health Benefits Express



Team Leader Post-Service Healthcare

Congratulations to Lee Lacy who is the new Team Leader for Post-Service Healthcare. Lee served as a Peace Corps Volunteer in Samoa, Peace Corps Director in Armenia from 2007-2010, and has held multiple management positions in the Agency.

In April 2015 the Director of the Peace Corps created a Post-Service Task Force to identify and address the issues and concerns of Returned Peace Corps Volunteers regarding health care resulting from their Peace Corps service. As the Team Lead, she will work out of the Director's Office to oversee the implementation of 28 recommendations identified by the Task

Force to strengthen the compassionate support and outreach to RPCVs. Lee will continue her collaboration with the Task Force to create an implementation strategy and an outreach/communications plan to keep all stakeholders updated and informed of any changes, developments or other pertinent news relating to health-care reform efforts for Returned Volunteers. Lee is available to any RPCV who feels that his or her service-related healthcare issues have not been addressed.

Additionally, Lee will remain in contact with the National Peace Corps Association, Health Justice for Peace Corps Volunteers, and RPCV groups to demonstrate the Peace Corps' commitment to providing the best quality care to Returned Volunteers. The Agency, the Task Force, and the new Team Leader acknowledge the diligent work of the RPCVs who continue to struggle with health issues, guided by the leadership of Nancy Tongue, as well as the members of the National Peace Corps Association.

Lee invites you to contact her at llacy@peacecorps.gov with your thoughts and ideas concerning health care for the Returned Volunteers.

Peace Corps Office of Health Services' Meeting with Department of Labor (DOL)

On Tuesday, January 12, 2016, members of the Office of Health Services and the Post-Service Task Force held a meeting with senior officials from the U.S. Department of Labor to discuss a number of issues regarding the challenges of Returned Peace Corps Volunteers and their Federal Employees' Compensation Act (FECA) benefits. Enhancing communication, adding medical conditions that could be treated by Peace Corps after service, and adding medical providers to the FECA rolls were some of the topics of discussion. It was a productive and informative meeting. At the conclusion, we all felt optimistic with a renewed sense of interactive partnership with our DOL stakeholders.

We were also provided various listservs for information on the FECA program. The link to the DOL home page is: <http://www.dol.gov/owcp/dfec/> You will note that there is general information about the Division of Federal Employees' Compensation, latest news, laws and related materials and other information on that page. There are also three stakeholder web portals with a link to sign up to receive information about latest happenings in the FECA program.

- Claimants and their representatives: <http://www.dol.gov/owcp/dfec/claimantandrep.htm>
- Federal agencies : <http://www.dol.gov/owcp/dfec/federalagency.htm>
- Medical providers: <http://www.dol.gov/owcp/dfec/medicalprovider.htm>

RPCV Workers' Compensation Milestone



Recently three of our highly esteemed Peace Corps Volunteers were simultaneously struck by an automobile. The impact of the collision caused severe traumatic injuries to all three PCVs, as well as the death of a passenger in the car. Subsequently, all three Volunteers were airlifted to a large medical facility where they could receive specialized medical care for their multiple injuries. They were accompanied by a Peace Corps Medical Officer and a Post-Service Unit member to assure that the best medical care was provided to the PCVs and their families. After spending more than two weeks in the hospital, two of the RPCVs were medically evacuated to their home of record while one was directly admitted to a hospital in the United States. Their medical care continued to be coordinated by the Office of Health Services to ensure continuity of care after medical separation. Eight weeks post-accident, when medically stable, the three Volunteers were medically separated.

The Post-Service Unit assisted the RPCVs in filing claims for FECA benefits which were all subsequently accepted by the Department of Labor (DOL), Office of Workers' Compensation Programs (OWCP). All three Volunteers continued to receive monthly monetary compensation on account of wage loss. DOL assigned registered nurses to coordinate the medical aspects of the Volunteers' care to help during their period of disability and recovery process.

It has been more than a year and a half later and I am pleased to report that our three RPCVs are doing very well. One is employed in the financial industry, and the other RPCV has returned to complete his Peace Corps service. The third Volunteer continues to work on recovery while working part time and attending a local University to become a physical therapist.

Frequently Asked Question of the Month



Question: "Why does the Peace Corps not provide Form CA-16 as issued by the Department of Labor (DOL) instead of Peace Corps Form 127C as used for evaluation purposes? I hear that the CA-16 covers all costs."

Answer: The Post-Service Unit raised this issue again with DOL senior officials in a recent meeting. DOL reiterated that Form CA-16 is used to authorize initial medical treatment for traumatic injury cases only and not for occupational illnesses which accounts for the vast majority of a Volunteer's health care needs. Additionally, Form CA-16 is not accepted overseas. For the purposes of a Volunteer serving overseas, the current Peace Corps medical system of PCMOs and local providers should provide all the care that a PCV needs. Having a CA-16 does not have any bearing on whether a Volunteer's subsequent FECA claim for occupational illness will be accepted. Form CA-16 does not mean an automatic acceptance of the claim but it guarantees the payment of medical bills related to the injury for up to 60 days from the date of injury.