

7. Definitions of Pay Status Codes. Every case file acquires a pay status code (or case status code) when it is created and retains such a status throughout its existence. Before the case is adjudicated, the pay status code reflects whether it has been reviewed, and afterwards it reflects whether and what benefits are being paid or are payable. Of the 22 two-character pay status codes in the system, 21 are still in use. Only certain codes are compatible with payment through ACPS and BPS. Brief definitions are indicated below.

UN: Case created, not reviewed. This status is automatically generated at the time of case create, and should not be changed unless the case has been reviewed by a CE or a bill for treatment authorized by Form CA-16 has been filed. UN changed to any status generates "review date."

UD: Under development. Used whenever further development is needed before pay status or closure status can be assigned. Assigned without an adjudication code, after initial review if there is not enough evidence for acceptance or denial. Assigned with "DO" if a case in D status is remanded for development by the Employees' Compensation Appeals Board (ECAB) or Branch of Hearings and Review (H&R), or is under reconsideration.

MC: Entitled for the time being to medical treatment only. (May be used temporarily to ensure payment of an authorized procedure on a denied or unadjudicated case.) Only used in combination with "A" adjudication code.

DR: Entitled to payment on daily roll; permits payment through ACPS. Used for finite period of wage loss or repurchase of leave; not used for schedule award paid in lump sum or for initial or final supplemental payment where the case is or will be on the periodic roll.

PR: Entitled to payment on periodic roll; re-employment or earning capacity not yet determined. Used with "AP" in early stages of extending disability.

PS: Entitled to payment for schedule award, whether periodic or lump sum. Assigned with "AP" to effect payment through ACPS. Payments made every 28-day cycle. Code **LS** is used for schedule awards that are paid in a "lump-sum" payment as opposed to the traditional 28-day cycle.

PN: Entitled to payment on periodic roll; formally determined to have no wage-earning capacity or re-employment potential for indefinite future. Used with "AP."

PW: Entitled to reduced compensation reflecting a partial wage-earning capacity or actual earnings. Used with "AP."

DE: Monthly payments are being made to at least one beneficiary of a deceased Federal employee. Used with "AF." Also required to pay burial, transportation and administrative costs through ACPS.

ON: Overpayment exists; final decision made on issues of fault and waiver. Claimant not on periodic roll.

OP: Overpayment exists; final decision made on issues of fault and waiver; claimant on periodic roll.

C1: Closed, accepted, no further payments anticipated; no time lost from work. Assigned only with "AM."

C2: Closed, accepted, no further payments anticipated, time lost covered by leave, leave not repurchased. Used with "AL" adjudication code

C3: Closed, benefits denied. Assigned with "D" adjudication code

C4: Closed, entitlement to continued pay accepted, pay was continued for time lost from work; no further payments anticipated. Assigned only with "AC."

C5: Closed, previously accepted for benefits, all benefits paid.

CL: Administrative closure.

RT: Retired or awaiting retirement

XX: Awaits destruction