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# **The Longshore and Harbor Workers' Compensation Act (LHWCA): Overview of Workers' Compensation for Certain Private- Sector Maritime Workers**

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September 22, 2015

**Congressional Research Service**

7-5700

[www.crs.gov](http://www.crs.gov)

R41506

## Summary

The Longshore and Harbor Workers' Compensation Act (LHWCA) is a federal workers' compensation program that covers certain private-sector maritime workers. Firms that employ these workers are required to purchase workers' compensation or self-insure and are responsible for providing medical and disability benefits to covered workers who are injured or become ill on the job and survivors benefits to the families of covered workers who die on the job. More than \$1.4 billion in LHWCA benefits were paid in 2013. The LHWCA is administered by the Department of Labor (DOL) and all benefit costs are paid by employers and their insurance carriers.

Congress has extended the provisions of the LHWCA to cover workers outside of the maritime industry, such as overseas government contractors and civilian employees of military post exchanges. As part of the American Recovery and Reinvestment Act of 2009 (ARRA), Congress added to the list of workers exempted from the LHWCA persons who repair recreational vessels of any size.

The LHWCA pays for all medical care associated with a covered injury or illness. Disability benefits are based on a worker's pre-injury wage, and, unlike comparable state workers' compensation benefits, are adjusted annually to reflect national wage growth.

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## Introduction

The Longshore and Harbor Workers' Compensation Act (LHWCA) requires that private-sector firms provide workers' compensation coverage for their employees engaged in longshore, harbor, or other maritime occupations on or adjacent to the navigable waters of the United States.<sup>1</sup> Although the LHWCA program is administered by the Department of Labor (DOL), most benefits are paid either through private insurers or self-insured firms.

The LHWCA is a workers' compensation system and not a federal benefits program. Like other workers' compensation systems in the United States, the LHWCA ensures that all covered workers are provided medical and disability benefits in the event they are injured or become ill in the course of their employment, and it provides benefits to the survivors of covered workers who die on the job.

In 2013, LHWCA insurers and self-insured firms reported 28,129 lost-time injuries to the DOL.<sup>2</sup> That year, the LHWCA paid approximately \$1.47 billion in cash and medical benefits to injured workers and the families of deceased workers.<sup>3</sup>

## Workers' Compensation in the United States

Nearly all private- and public-sector workers in the United States are covered by some form of workers' compensation. For most occupations, workers' compensation is mandated by state laws and administered by state agencies. However, for some classes of workers, including private-sector longshore and harbor workers, workers' compensation is mandated by federal law and administered by the federal government.

There is no federal mandate that states provide workers' compensation. However, every state and the District of Columbia have a workers' compensation system. There are no federal standards for state workers' compensation systems. However, all workers' compensation systems in the United States provide for limited wage replacement and full medical benefits for workers who are injured or become ill as a result of their work and survivors benefits to the families of workers who die on the job.

Workers' compensation in the United States is a no-fault system that pays workers for injuries or illnesses related to employment without considering the culpability of any one party. In exchange for this no-fault protection and the guarantee of benefits in the event of an employment-related injury, illness, or death, workers give up their rights to bring actions against employers in the civil court system and give up their rights to seek damages for injuries and illnesses, including pain and suffering, outside of those provided by the workers' compensation laws.<sup>4</sup> Workers' compensation is mandatory in all states and the District of Columbia, with the exception of Texas. In Texas, employers may, under certain conditions, opt out of the workers' compensation system, but in doing so subject themselves to civil actions brought by injured employees.

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<sup>1</sup> 33 U.S.C. §§ 901 et seq.

<sup>2</sup> Ishita Sengupta and Marjorie L. Baldwin *Workers' Compensation: Benefits Coverage, and Costs, 2013*, National Academy of Social Insurance (Washington, DC, August 2015), p. 56. Hereafter cited as Sengupta and Baldwin, 2015.

<sup>3</sup> *Ibid.*, p. 58.

<sup>4</sup> Under Section 5(b) of the LHWCA [33 U.S.C. § 905(b)], an injured person may bring a civil action under certain circumstances against the owner of a vessel that was the cause of his or her injury.

The federal government has only a limited role in workers' compensation and administers workers' compensation programs for federal employees and several limited classes of private-sector workers, including longshore and harbor workers.<sup>5</sup>

## History of the LHWCA

Prior to the enactment of the LHWCA in 1927, longshore and harbor workers were not covered by any workers' compensation system. Although persons who worked entirely on land were covered by workers' compensation laws in those states that enacted such laws, pursuant to the Supreme Court's decision in *Southern Pacific Co. v. Jensen*, 244 U.S. 205 (1917), state workers' compensation systems did not have jurisdiction over persons working on the "navigable waters" of the United States because the Constitution granted the authority over "matters of admiralty and maritime jurisdiction" to the federal government.<sup>6</sup> The LHWCA, enacted in 1927, created a federal workers' compensation program to cover these workers.<sup>7</sup> In 1972, the zone of coverage of the LHWCA was extended to include areas adjacent to navigable waters that are used for the loading, unloading, repairing, or building vessels.<sup>8</sup>

## Firms and Workers Covered by the LHWCA

### Covered Firms

The provisions of the LHWCA apply to any private firm with any covered employees who work, full- or part-time, on the navigable waters of the United States, including in any of the following adjoining areas: piers; wharfs; dry docks; terminals; building ways; marine railways; or other areas customarily used in the loading, unloading, repairing, or building of vessels.

### Covered Workers

With the exception of workers excluded by statute (listed below), the LHWCA covers any maritime employee of a covered firm including longshore workers and any harbor worker of a covered firm including ship repairmen, ship builders, and ship breakers.

### Workers Excluded by Statute

Sections 2(3) and 3(b) of the LHWCA exclude the following workers from coverage:<sup>9</sup>

- If the worker is covered by a state workers' compensation law:

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<sup>5</sup> The federal government provides workers' compensation for federal employees under the Federal Employees' Compensation Act [5 U.S.C. §§ 8101 et seq.] and also provides limited workers' compensation programs that cover specific illnesses contracted by coal miners under the Black Lung Benefits Act [30 U.S.C. §§ 901 et seq.], and workers involved in the development and testing of atomic weapons under the Energy Employees Occupational Illness Compensation Act [42 U.S.C. §§ 7384] and Radiation Exposure Compensation Act [42 U.S.C. § 2210 note].

<sup>6</sup> In its decision, the Court cited Art. 3 § 2 of the Constitution which extends the judicial authority of the United States to admiralty and maritime matters and Art. 1 § 8 of the Constitution which grants Congress the power to make all laws necessary and proper to execute the powers of the federal government as the basis for its decision.

<sup>7</sup> P.L. 69-803.

<sup>8</sup> Longshoreman's and Harbor Workers, Compensation Amendments of 1972, P.L. 92-576.

<sup>9</sup> 33 U.S.C. §§ 902(3) and 903(b).

- employees exclusively engaged in clerical, secretarial, security, or data processing work;
- persons employed by a club, camp, recreational operation, museum, or retail outlet;
- marina employees not engaged in the construction, replacement, or expansion of the marina;
- suppliers, transporters, and vendors doing business temporarily at the site of a covered employer;
- aquaculture workers; and
- employees who build any recreational vessel under 65 feet in length, or repair any recreational vessel, or dismantle any part of a recreational vessel in connection with the repair of the vessel.<sup>10</sup>
- Regardless of whether the worker is covered by a state workers' compensation law:
  - masters and crew members of vessels;<sup>11</sup>
  - persons engaged by the master of a vessel to unload a vessel weighing under 18 tons net; and
  - employees of the federal government, or any state, local, or foreign government or any subdivision of such a government.

### ***2009 Amendment to the LHWCA***

Section 803 of the American Recovery and Reinvestment Act of 2009 (ARRA) modified one of the excluded classes of workers under the LHWCA by adding additional exclusions for persons who work on recreational vessels over 65 feet in length.<sup>12</sup> Prior to the amendment, Section 2(3)(F) of the LHWCA read:

(3) The term "employee" means...but such term does not include...

(F) individuals employed to build, repair, or dismantle any recreational vessel under sixty-five feet in length.

This section, as amended reads (with additions in italics):

(3) The term "employee" means...but such term does not include...

(F) individuals employed to build any recreational vessel under sixty-five feet in length, *or individuals employed to repair any recreational vessel, or to dismantle any part of a recreational vessel in connection with the repair of such vessel.*<sup>13</sup>

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<sup>10</sup> This provision was amended by Section 803 of the American Recovery and Reinvestment Act of 2009 (ARRA), P.L. 111-5.

<sup>11</sup> Masters and crew members of private vessels on the navigable waters of the United States are not covered by any workers' compensation laws. They can, however, bring civil actions against their employers under the Merchant Marine Act of 1920 [46 U.S.C. §§ 30104 et seq.], commonly referred to as the Jones Act. Civil service mariners working on government owned-ships, such as those of the Military Sealift Command, are federal employees and are covered by the Federal Employees' Compensation Act.

<sup>12</sup> P.L. 111-5.

<sup>13</sup> 33 U.S.C. § 902(3)(F).

By granting an exemption from the LHWCA to persons engaged in the repair of any recreation vessel, regardless of its size, this amendment limits the scope of the LHWCA and increases the types of workers excluded from coverage.

## Extensions of Coverage Under the LHWCA

The LHWCA has been amended four times to extend coverage to occupations outside the original scope of the law. In 1928, coverage was extended to *employees of the District of Columbia*.<sup>14</sup> This provision was repealed, effective for all injuries occurring on or after July 26, 1982, with the enactment by the District of Columbia government of the District of Columbia Workers' Compensation Act of 1982.<sup>15</sup> Benefits for injuries that occurred prior to July 26, 1982, continue to be paid under the LHWCA.

Coverage was extended to *overseas military and public works contractors* in 1941 with the enactment of the Defense Base Act.<sup>16</sup> In 1952, coverage was extended to *civilian employees of nonappropriated fund instrumentalities of the armed forces* such as service clubs and post exchanges.<sup>17</sup> Coverage was extended in 1953 to *employees working on the Outer Continental Shelf in the exploration and the development of natural resources*, such as workers on offshore oil platforms.<sup>18</sup>

## Insurance and Financing

Employers required by the LHWCA to provide workers' compensation coverage to their employees may either purchase private insurance or self-insure. The DOL is responsible for authorizing insurance carriers to provide coverage under the LHWCA program and for authorizing companies to self-insure. However, the DOL does not set or regulate insurance premiums. These insurance arrangements are the primary means of providing LHWCA benefits to injured, sick, and deceased workers and their families. General revenue is not used to pay any LHWCA benefits.

## Special Fund

The DOL operates the Special Fund to provide LHWCA benefits in cases in which the responsible employer or insurance carrier cannot pay or in which benefits must be paid for a second injury under Section 8(f) of the LHWCA.<sup>19</sup> The Special Fund is financed through an

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<sup>14</sup> District of Columbia Workmen's Compensation Act of 1928, P.L. 70-419.

<sup>15</sup> D.C. Code §§ 36-501 et seq.

<sup>16</sup> P.L. 77-208. For additional information on the Defense Base Act see CRS Report RL34670, *The Defense Base Act (DBA): The Federally Mandated Workers' Compensation System for Overseas Government Contractors*, by Valerie Bailey Grasso, Baird Webel, and Scott D. Szymendera.

<sup>17</sup> Nonappropriated Fund Instrumentalities Act, P.L. 82-397.

<sup>18</sup> Outer Continental Shelf Lands Act, P.L. 83-212.

<sup>19</sup> 33 U.S.C. § 908(f). A second injury is covered by Section 8(f) if an employee who was previously partially disabled on the job incurs a subsequent injury that renders him or her totally disabled. The use of special funds for second injuries is designed to lessen the risks associated with hiring partially disabled employees who may become totally disabled from injuries that would not normally totally disable other employees. Recently, states have been closing their second injury funds, in part because of the employment discrimination protections provided by the Americans with Disabilities Act [42 U.S.C. §§ 12101 et seq.] and difficulties in administering and financing the funds. For additional information on second injury funds see Robert K. Briscoe and Robert J. Mayer, "The Rise and Fall of Second Injury Funds," *Risk and Insurance*, vol. 18, no. 11 (2007).

annual assessment charged to employers and insurance carriers based on the previous year's claims, payments required when an employee dies without any survivors, disability payments due to an employee without survivors after his or her death, and penalties and fines assessed for non-compliance with LHWCA program rules.

## **Administrative Costs**

The administrative costs associated with the LHWCA are largely provided by general revenue. General revenue is used to pay for most oversight functions associated with the LHWCA and the processing of LHWCA claims. General revenue is also used to pay legal and investigative costs associated with the DOL Office of the Solicitor and Office of the Inspector General. Revenue from the Special Fund is used to finance oversight activities related to the Special Fund and the program's vocational rehabilitation activities. In 2013, total administrative costs associated with the LHWCA were approximately \$14.5 million, of which \$12.4 million, or 85%, was paid by general revenue and \$2.1 million, or 15%, was paid by the Special Fund.<sup>20</sup>

## **LHWCA Benefits**

The LHWCA provides medical benefits for covered injuries and illnesses disability benefits to partially cover wages lost due to covered injuries or illnesses, and it provides survivors benefits to the families of workers who die on the job.

### **Medical Benefits**

The LHWCA provides medical benefits to fully cover the cost of any medical treatment associated with a covered injury or illness. These medical benefits are provided without any deductibles, copayments, or costs paid by the injured worker. Prescription drugs and medical procedures are fully covered as are costs associated with travelling to and from medical appointments. A covered worker may select his or her own treating physician, provided the physician has not been debarred from the LHWCA program for violating program rules.

### **Vocational Rehabilitation**

Covered workers are entitled to vocational rehabilitation services provided under the LHWCA. Vocational rehabilitation services are designed to assist the covered worker in returning to employment. There is no cost to the covered worker for vocational rehabilitation and workers actively participating in a rehabilitation program are entitled to an additional benefit of \$25 per week. All costs associated with vocational rehabilitation under the LHWCA are paid out of the Special Fund. Vocational rehabilitation services may be provided by public or private rehabilitation agencies.

### **Disability Benefits**

The LHWCA provides disability benefits to covered workers to partially cover wages lost due to the inability to work because of a covered injury or illness. The amount of disability benefits are based on the workers' pre-disability wage, subject to maximum and minimum benefits based on the National Average Weekly Wage (NAWW) as determined by the DOL. The NAWW is updated

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<sup>20</sup> Sengupta and Baldwin, 2015, p. 58.



October 1 of each year and is based on average wages across the United States for the three calendar quarters ending on June 30 of that year. The minimum weekly benefit that can be paid to a covered employee is equal to 50% of the NAWW and the maximum weekly benefit that can be paid is equal to 200% of the NAWW.<sup>21</sup>

Disability benefits under the LHWCA, like all workers' compensation benefits, are not subject to federal income taxes.<sup>22</sup> Unlike most state workers' compensation benefits, however, LHWCA benefits are adjusted annually each October 1 to reflect the change in the NAWW from the previous year, up to a maximum increase of 5%.

### **Total Disability Benefits**

The LHWCA provides benefits in cases of total disability. Under the LHWCA, a worker is considered totally disabled if he or she is unable to earn his or her pre-injury wage because of a covered injury or illness. In addition, a worker is also considered totally disabled if he or she loses both hands, arms, feet, legs, or eyes, or any two of these body systems, such as the loss of one arm and one leg. Total disability benefits under the LHWCA are equal to two-thirds of the covered worker's wage at the time of the injury or illness. Total disability benefits continue until the worker is no longer totally disabled or dies.

### **Partial Disability Benefits**

If a covered worker is able to partially return to work or return to work at a wage level less than his or her wage at the time of injury, then he or she is considered partially disabled. In cases of temporary partial disability, the LHWCA benefit is equal to two-thirds of the difference between the workers' pre-injury wage and his or her current earning capacity or actual earnings.

### ***Permanent Partial Disability Benefits***

Section 8(c) of the LHWCA provides a schedule of benefits to be paid in cases of permanent partial disability (PPD), such as the loss of a limb.<sup>23</sup> The benefit schedule provides the number of weeks of compensation, at two-thirds of the pre-injury wage, for each type of PPD. For example, the LHWCA schedule provides that a worker who loses an arm is entitled to 312 weeks of compensation. Benefits in cases not listed on the schedule are paid at two-thirds of the difference between the pre-injury wage and current earning capacity for the duration of the disability. Schedule benefits for PPD are paid regardless of the current work status or earnings capacity of the employee. Thus, an employee with a PPD can fully return to work and earn his or her wage in addition to the PPD compensation. A copy of the LHWCA PPD schedule can be found in the **Appendix** to this report.

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<sup>21</sup> For additional information on the NAWW, see the website of the DOL at <http://www.dol.gov/owcp/dlhwc/NAWWinfo.htm>.

<sup>22</sup> For additional information on the exclusion from federal income taxes of workers' compensation benefits, see U.S. Congress, Senate Committee on the Budget, *Tax Expenditures: Compendium of Background Material on Individual Provisions*, committee print, prepared by Congressional Research Service, 110<sup>th</sup> Cong., 2<sup>nd</sup> sess., December 2008, S. Prt. 110-667 (Washington: GPO, 2008), pp. 827-831.

<sup>23</sup> 33 U.S.C. § 908(c).

## **Disability After Retirement**

If a worker has an illness that was caused by his or her covered employment but did not manifest itself until after his or her retirement, then he or she is entitled to disability benefits equal to two-thirds of the NAWW multiplied by the percentage of his or her impairment. The percentage of impairment is determined using the current edition of the American Medical Association's *Guides to the Evaluation of Permanent Impairment* (AMA *Guides*), or another professionally recognized source if the condition is not listed in the AMA *Guides*.<sup>24</sup>

## **Survivors Benefits**

The LHWCA provides cash benefits to the surviving spouses and minor children of workers killed on the job. Benefits for a surviving spouse end when the spouse remarries or dies and benefits for surviving children continue until the children reach the age of 18, age 23 if a full-time student, or for the life a child with a disability.<sup>25</sup>

A surviving spouse with no eligible children is entitled to one-half of the deceased worker's wage at the time of death under the LHWCA. A surviving spouse with one or more eligible children is entitled to two-thirds of the deceased worker's wage at the time of death. Once all children become ineligible for benefits because of their ages, the surviving spouse's benefit is reduced to the level of a spouse without any eligible children.

If an eligible spouse becomes ineligible for benefits because of death or remarriage, or if there is no surviving spouse, benefits are still paid to any surviving children. Under the LHWCA, a single surviving eligible child is entitled to one-half of the deceased worker's wage at the time of death whereas two or more surviving children are eligible for a combined two-thirds of the wage at the time of death.

The survivors of a covered worker killed on the job are entitled under the LHWCA to a cash payment to provide for the burial and funeral of the deceased. The burial and funeral allowance is capped by Section 9(a) of the LHWCA at \$3,000 and this cap not adjusted to reflect changes in prices or wages.<sup>26</sup>

If a covered worker who is receiving scheduled PPD benefits dies of a cause unrelated to his or her illness or injury, then the balance of any remaining PPD benefits are paid to his or her survivors. If a covered worker who dies on the job leaves no survivors, his or her employer or the employer's insurance carrier is required to pay \$5,000 into the Special Fund.

## **LHWCA Claims Process**

Although the responsibility for the payment of benefits under the LHWCA rests with the employer or the employer's insurance company, decisions on benefit eligibility and the amount of benefits are made by the DOL. Upon the report of an injury, illness, or death, the LHWCA claims process begins. If the employer or insurance carriers does not controvert the claim, then arrangements are made by the DOL for the claim to be paid.

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<sup>24</sup> For additional information on the AMA *Guides* see *Guides to the Evaluation of Permanent Impairment*, ed. Robert D. Rondinelli, 6<sup>th</sup> ed. (Chicago: American Medical Association, 2008); and Steven Babitsky and James J. Mangraviti, Jr., *Understanding the AMA Guides in Workers' Compensation*, 4<sup>th</sup> ed. (Austin, TX: Aspen Publishers, 2008).

<sup>25</sup> A surviving spouse is entitled to a lump-sum payment equal to two-years of benefits upon remarriage.

<sup>26</sup> 33 U.S.C. § 909(a).

If, however, the employer controverts any part of the claim, then the DOL sets up an informal conference, either in person or by phone, between the employer or insurance carrier and worker with the goal of resolving any disputes over the claim. If this informal conference fails to resolve all outstanding disputes, then a formal hearing before a DOL Administrative Law Judge (ALJ) is scheduled. If the employer or insurance carrier or the worker is dissatisfied with the decision of the ALJ, then this decision may be appealed to the Benefits Review Board (BRB). The BRB is made up of five members appointed by the Secretary of Labor. Either party dissatisfied with the decision of the BRB may file a petition with the U.S. Court of Appeals for the circuit in which the injury occurred praying that the BRB's decision be set aside or modified.

If an employer or insurance carrier fails to pay compensation in accordance with a final decision on a claim, the covered worker or the DOL may request that the U.S. District Court order that payment be made.

## Appendix. Benefits Schedule for LHWCA PPD

**Table A-I. Scheduled Benefits for Permanent Partial Disability Under the Longshore and Harbor Workers' Compensation Act**

| Injury                           | Maximum Duration of Benefits in Weeks |
|----------------------------------|---------------------------------------|
| Loss of arm                      | 312                                   |
| Loss of leg                      | 288                                   |
| Loss of hand                     | 244                                   |
| Loss of foot                     | 205                                   |
| Loss of eye                      | 160                                   |
| Loss of thumb                    | 75                                    |
| Loss of first finger             | 46                                    |
| Loss of second finger            | 30                                    |
| Loss of third finger             | 25                                    |
| Loss of fourth finger            | 15                                    |
| Loss of great toe                | 38                                    |
| Loss of toe other than great toe | 16                                    |
| Loss of hearing in one ear       | 52                                    |
| Loss of hearing in both ears     | 200                                   |
| Disfigurement                    | One-time payment of \$7,500           |

**Source:** 33 U.S.C. § 910(c).

**Notes:** The loss of use of a body system is paid the same as the complete loss of the system. Benefits for a partial loss of a system are paid for a percentage of the maximum duration equal to the percentage of loss.

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