

DEPARTMENT OF CONSUMER AND BUSINESS SERVICES
WORKERS' COMPENSATION DIVISION



**Preferred Worker Program
Oregon Administrative Rules
Chapter 436, Division 110**

Effective January 1, 2006

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NOTE: Significant revisions are marked with bold lines in the right margins.

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**BEFORE THE DIRECTOR
DEPARTMENT OF CONSUMER AND BUSINESS SERVICES
WORKERS' COMPENSATION DIVISION**

In the Matter of the Amendment of Oregon Administrative Rules (OAR):

	Order No.	
436-010, Medical Services	05-071)
436-015, Managed Care Organizations	05-072)
436-030, Claim Closure and Reconsideration	05-073)
436-035, Disability Rating Standards	05-074)
436-050, Employer/Insurer Coverage Responsibility ...	05-075)
436-055, Claims Examiner Certification	05-076)
436-060, Claims Administration	05-077)
436-105, Employer-at-Injury Program	05-078)
436-110, Preferred Worker Program	05-079)
436-120, Vocational Assistance to Injured Workers	05-080)

**ORDER OF
ADOPTION**

The Director of the Department of Consumer and Business Services, under the general rulemaking authority in ORS 656.726(4), and in accordance with the procedure provided by ORS 183.335, amends OAR chapter 436.

On September 15, 2005, the Workers' Compensation Division filed with the Secretary of State a *Notice of Proposed Rulemaking/Hearing* and *Statement of Need and Fiscal Impact*. The division mailed copies of the *Notice* and *Statement* to interested persons and legislators in accordance with ORS 183.335 and OAR 436-001-0000, and posted copies to its Web site. The Secretary of State included notice of the public hearing in its October 2005 *Oregon Bulletin*.

On November 1, 2005, a public hearing was held as announced. In addition, the record was held open for written testimony through November 7, 2005. A summary of the public testimony is on file and available for public inspection upon request during regular business hours, 8:00 a.m. to 5:00 p.m., Monday through Friday, in the Administrator's Office, Workers' Compensation Division, Labor & Industries Building, 350 Winter Street NE, PO Box 14480, Salem, Oregon 97309-0405.

RULE SUMMARY

Substantive amendments affect:

- Hearings on workers' compensation matters currently processed by the Office of Administrative Hearings – moved to the Workers' Compensation Board, for all hearings held on or after January 2, 2006.
- Independent medical examinations (IME)s – including a worker's right to contest the location of the exam and associated increase to 90 days for the insurer to accept or deny the claim if the worker prevails; penalty to worker for failure to attend; penalty to medical provider for failure to forward diagnostic records to the IME provider; requirement (effective 7/1/2006) for the director to develop a list of medical providers who are authorized to perform IMEs and for all IMEs to be scheduled with a physician on the list.
- The reporting and processing of aggravation claims;
- Elective surgery notification;

Order of Adoption
OAR 436-110

- Types of care that are reimbursable after the worker becomes medically stationary (clarification only);
- Requirements that managed care organizations submit copies of their treatment standards and protocols to the director for review and approval;
- Closure notice requirements in fatal claims;
- Required procedures when five years of work history are not available;
- Reduced insurer reporting requirements for claims in which workers have no permanent impairment;
- Permanent total disability – including limitations on benefits if the worker incurs a new injury; criteria for re-examination or reduction; required vocational evaluations and suspension of benefits for failure to attend or non-cooperation; appeals of termination; automatic eligibility for vocational assistance upon termination of permanent total disability (by final order);
- The reconsideration record – video recordings, duplicate records;
- Penalties upon reconsideration – limitations;
- Insurer data reporting necessary for the Workers’ Compensation Division to assess the impact of legislative changes on permanent partial disability awards;
- The effect of a regular work release on awards of work disability and social/vocational factors;
- Requirements to round percentages of impairment – hearing and vision no longer taken to the 100th of a percent;
- Rating of impairment for skin disorders – signs and symptoms need not be present upon examination;
- Insurer’s notice to employer of policy cancellation to include a statement that the guaranty contract will terminate;
- Insurers’ reporting of names or positions of key contacts to the Workers’ Compensation Division;
- The right of self-insured public utilities with assets in excess of \$500 million to obtain excess workers’ compensation insurance coverage from an eligible surplus lines insurer;
- Required training for certified claims examiners on interactions with independent medical exam providers;
- Adjustments – up and down – of insurer claims processing compliance thresholds (affecting penalties);
- The dollar amount employers can pay for medical services on non-disabling claims;
- Requirement (effective 7/1/2006) that Worker Requested Medical Examinations be conducted by a medical provider on the list of authorized independent medical examination providers maintained by the director;
- Increase of certain maximum penalty amounts to the \$2,000 statutory maximum;
- Eligibility for Preferred Worker Program benefits – workers must be authorized to work in the United States;
- Reimbursement from the Workers’ Benefit Fund of permanent total disability (PTD) payments made by the insurer during an appeal of termination of PTD – if the insurer prevails;
- For the purposes of reimbursement of wage subsidies under the Employer-at-Injury Program, allowance for supplemental documentation to clarify information not fully explained by the payroll record;
- Provision for direct assistance to workers under ORS 656.622 to promote re-employment;
- Reimbursement from the Workers’ Benefit Fund of the insurer’s vocational assistance costs incurred after the insurer appeals an administrative order to provide such assistance (if the insurer prevails);
- Deletion of the penalty matrix for three types of violations of the vocational assistance rules;
- Provision for the director to impose a civil penalty for violation of ORS chapter 656, in addition to violation of rules and orders of the director.

FINDINGS

Having reviewed and considered the record and being fully informed, I make the following findings:

- a) The applicable rulemaking procedures have been followed.
- b) These rules are within the director's authority.
- c) The rules being adopted are a reasonable administrative interpretation of the statutes and are required to carry out statutory responsibilities.

IT IS THEREFORE ORDERED THAT

- 1) Amendments to OAR chapter 436, as set forth in Exhibit "A", are attached, incorporated by reference, and **adopted on this 5th day of December 2005, to be effective January 1, 2006.**
- 2) A certified copy of the adopted rules will be filed with the Secretary of State.
- 3) A copy of the amended rules with revision marks will be filed with the Legislative Counsel under ORS 183.715 within ten days after filing with the Secretary of State.

DATED this 5th day of December 2005.

DEPARTMENT OF CONSUMER
AND BUSINESS SERVICES

/s/ John L. Shilts

John L. Shilts, Administrator
Workers' Compensation Division

Under the Americans with Disabilities Act guidelines, alternative format copies of the rules will be made available to qualified individuals upon request.

If you have questions about these rules or need them in an alternate format, contact the Workers' Compensation Division at (503) 947-7810.

Distribution: WCD-ID, NM, S0, S1, S2, S3, S4, S5, S6, S7, S8

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**DEPARTMENT OF CONSUMER AND BUSINESS SERVICES
WORKERS' COMPENSATION DIVISION
PREFERRED WORKER PROGRAM**

**EXHIBIT "A"
OREGON ADMINISTRATIVE RULES
CHAPTER 436, DIVISION 110**

436-110-0001 Authority for Rules

The director has adopted OAR Chapter 436, Division 110 under authority of ORS 656.622 and 656.726.

Stat. Auth.: ORS 656.622, 656.726(4)
 Stats. Implemented: ORS 656.622
 Hist: Filed 1/2/73 as WCB Admin. Order 1-1973, eff. 1/15/73
 Amended 3/14/73 by WCB Admin. Order 3-1973, eff. 4/1/73
 Amended 9/29/77 as WCD Admin. Order 2-1977 (Temp.), eff. 10/4/77
 Amended 2/1/78 as WCD Admin. Order 2-1978, eff. 2/1/78
 Amended 12/30/81 as WCD Admin. Order 7-1981, eff. 1/1/82
 Renumbered from OAR 436-63-001, 5/1/85
 Amended 2/20/87 as WCD Admin. Order 1-1987, eff. 3/16/87
 Amended 12/17/87 as WCD Admin. Order 12-1987, eff. 1/1/88
 Amended 6/21/90 as WCD Admin. Order 13-1990 (Temp.), eff. 7/1/90
 Amended 12/10/90 as WCD Admin. Order 30-1990, eff. 12/26/90
 Amended 1/21/93 as WCD Admin. Order 93-050, eff. 3/1/93
 Amended 3/13/96 as WCD Admin. Order 96-056 eff. 4/5/96
 Amended 8/14/01 as WCD Admin. Order 01-056, eff. 10/1/01

436-110-0002 Purpose of Rules

(1) These rules explain what assistance and reimbursements are available from the Preferred Worker Program, who is qualified, and how to receive assistance and reimbursements.

(2) The Preferred Worker Program encourages the reemployment of workers whose on-the-job injuries result in disability which may be a substantial obstacle to employment by providing assistance from the Workers' Benefit Fund to eligible injured workers and to the employers who employ them.

(3) The Preferred Worker Program is a worker and employer-at-injury -activated program.

Stat. Auth.: ORS 656.622, 656.726(4)
 Stats. Implemented: ORS 656.622
 Hist: Filed 2/20/87 as WCD Admin. Order 1-1987, eff. 3/16/87
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 Amended 12/10/90 as WCD Admin. Order 30-1990, eff. 12/26/90
 Amended 1/21/93 as WCD Admin. Order 93-050, eff. 3/1/93
 Amended 3/13/96 as WCD Admin. Order 96-056 eff. 4/5/96
 Amended 8/28/97 as WCD Admin. Order 97-057, eff. 9/12/97
 Amended and renumbered section (3) from OAR 436-110-0300(1st ¶), 8/14/01 as WCD Admin. Order 01-056, eff. 10/1/01
 Amended 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05
 Amended 12/5/05 as WCD Admin. Order 05-079, eff. 1/1/06

436-110-0003 Applicability of Rules

(1) These rules apply to all requests for Preferred Worker Program reemployment assistance received by the division on or after the effective date of these rules. Reemployment assistance received as a result of a request filed and approved between June 30, 1990 and the effective date of these rules counts toward the maximum assistance allowed by these rules.

(2) Applicable to this chapter, the director may, unless otherwise obligated by statute, in the director's discretion waive any procedural rules as justice so requires.

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Stat. Auth.: ORS 656.622, 656.726(4)
 Stats. Implemented: ORS 656.622
 Hist: Filed 1/2/73 as WCB Admin. Order 1-1973, eff. 1/15/73
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 Amended 2/1/78 as WCD Admin. Order 2-1978, eff. 2/1/78
 Amended 12/30/81 WCD Admin. Order 7-1981, eff. 1/1/82
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 Amended 12/10/90 as WCD Admin. Order 30-1990, eff. 12/26/90
 Amended 1/21/93 as WCD Admin. Order 93-050, eff. 3/1/93
 Amended 3/13/96 as WCD Admin. Order 96-056 eff. 4/5/96
 Amended 8/28/97 as WCD Admin Order 97-057, eff. 9/12/97
 Amended 8/14/01 as WCD Admin. Order 01-056, eff. 10/1/01

436-110-0005 Definitions

For the purpose of these rules, unless the context requires otherwise:

- (1) "Administrator" means the Administrator of the Workers' Compensation Division, or the administrator's delegate for the matter.
- (2) "Client" means a person to whom workers are provided under contract and for a fee on a temporary or leased basis.
- (3) "Director" means the Director of the Department of Consumer and Business Services, or the director's delegate for the matter.
- (4) "Disability" means permanent physical or mental restriction(s) or limitation(s) caused by an accepted disabling Oregon workers' compensation claim which limits the worker from performing one or more of the worker's regular job duties.
- (5) "Division" means the Workers' Compensation Division of the Department of Consumer and Business Services.
- (6) "Division approval" means a Preferred Worker agreement signed by an authorized division representative.
- (7) "Employer at injury" means the organization in whose employ the worker sustained the injury or occupational disease.
- (8) "Exceptional disability" means a disability equal to or greater than the complete loss, or loss of use, of both legs. Exceptional disability also includes brain injury which results in impairment equal to or greater than a Class III as defined in OAR 436-035. The division shall determine whether a worker has an exceptional disability based upon the combined effects of all of the worker's Oregon compensable injuries resulting in permanent disability.
- (9) "Fund" means the Workers' Benefit Fund.
- (10) "Hire date" means the date the worker started work for the employer in the employment for which benefits are requested if the request for Preferred Worker Program assistance is sent to the division prior to or within 30 calendar days after the start-work date. In calculating the 30-day period under this section, the hire date is not included, and if the 30th day falls on a Saturday, Sunday, or legal holiday, the next business day will be considered the end of

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the 30-day period. The hire date is 12:01 AM the day following the request if the request is sent to the division more than 30 days after the start-work date.

(11) "Premium" means premium which results from a calculation which takes payroll multiplied by applicable rates of the employer's individual insurer multiplied by the employer's experience rating modification less any discounts, assessments, surcharges, or taxes.

(12) "Regular employment" means the employment the worker held at the time of the injury, claim for aggravation, or own motion opening under ORS 656.278. Regular employment which has been substantially modified as described in OAR 436-110-0380 is not regular employment for purposes of the Preferred Worker Program.

(13) "Reimbursable wages" means the money rate paid a worker for services performed including paid leave, overtime, commission, and reasonable value of board, rent, housing, lodging, and similar advantage received from the employer, as determined by the division in accordance with OAR 436-060. Bonus pay shall be considered reimbursable only when provided as part of the written or verbal employment contract as a means to increase the worker's wages. End-of-the-year and other one-time bonuses paid at the employer's discretion, and safety bonuses, are not reimbursable. Wages do not include tips, discretionary bonuses, paid leave cash-outs, employee insurance or benefits programs, employee discounts, or other forms of remuneration not included as part of the worker's gross wages. Benefits paid as wages or cash, even if reported as part of a worker's gross wages, are not subject to reimbursement.

(14) "Start-work date" means the date the worker started work for the employer in the employment for which benefits are requested.

(15) "Worksite" means a primary work area which is in Oregon, already constructed and available for a worker to use to perform the required job duties. The worksite may be the employer's, worker's, or worker leasing company's client's premises, property, and equipment used to conduct business under the employer's or client's direction and control. A worksite may include a worker's personal property or vehicle if required to perform the job. If the "worksite" is mobile, it must be available in Oregon for inspection and modification.

Stat. Auth.: ORS 656.622, 656.726(4)
 Stats. Implemented: ORS 656.622
 Hist: Filed 1/2/73 as WCB Admin. Order 1-1973, eff. 1/15/73
 Amended 3/14/73 by WCB Admin. Order 3-1973, eff. 4/1/73
 Amended 9/29/77 as WCD Admin. Order 2-1977 (Temp.), eff. 10/4/77
 Amended 2/1/78 as WCD Admin. Order 2-1978, eff. 2/1/78
 Amended 12/30/81 as WCD Admin. Order 7-1981, eff. 1/1/82
 Renumbered from OAR 436-63-010, 5/1/85
 Amended 2/20/87 as WCD Admin. Order 1-1987, eff. 3/16/87
 Amended 12/17/87 as WCD Admin. Order 12-1987, eff. 1/1/88
 Amended 6/21/90 as WCD Admin. Order 13-199 (Temp), eff. 7/1/90
 Amended 12/10/90 as WCD Admin. Order 30-1990, eff. 12/26/90
 Amended 1/21/93 as WCD Admin. Order 93-050, eff. 3/1/93
 Amended 12/7/95 as WCD Admin. Order 95-068 (Temp), eff. 1/1/96
 Amended 3/13/96 as WCD Admin. Order 96-056 eff. 4/5/96
 Amended 8/28/97 as WCD Admin. Order 97-057, eff. 9/12/97
 Amended 8/14/01 as WCD Admin. Order 01-056, eff. 10/1/01
 Amended 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05
 Amended 12/5/05 as WCD Admin. Order 05-079, eff. 1/1/06

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436-110-0006 Administration of Rules

(1) Orders issued by the division to enforce ORS 656.622 or these rules are orders of the director.

(2) The department maintains the financial integrity of the fund and all reimbursement is subject to the availability of funds. If the funds are too low for all reimbursements, the director has final authority to determine how the funds will be disbursed.

(3) The director may use moneys from the fund for activities to provide information about and encourage reemployment of injured workers. A maximum of \$250,000 may be used in a fiscal year, July 1 to June 30. The director must approve all expenditures. Activities include, but are not limited to:

(a) Advertisements and promotion of reemployment assistance programs and associated production costs; and

(b) Public reemployment assistance program conferences and workshops.

Stat. Auth.: ORS 656.622, 656.726(4)

Stats. Implemented: ORS 656.622

Hist: Filed 2/20/87 as WCD Admin. Order 1-1987, eff. 3/16/87

Amended 12/17/87 as WCD Admin. Order 12-1987, eff. 1/1/88

Amended 6/21/90 as WCD Admin. Order 13-1990 (Temp.), eff. 7/1/90

Amended 12/10/90 as WCD Admin. Order 30-1990, eff. 12/26/90

Amended 1/21/93 as WCD Admin. Order 93-050, eff. 3/1/93

Amended 3/13/96 as WCD Admin. Order 96-056 eff. 4/5/96

Amended 8/28/97 as WCD Admin. Order 97-057, eff. 9/12/97

Amended 8/14/01 as WCD Admin. Order 01-056, eff. 10/1/01

436-110-0007 Reconsideration/Appeal to the Director

(1) The division will deny any request for Preferred Worker Program assistance it finds is in violation of these rules. The division has the discretion to deny a request it determines is not reasonable, practical, or feasible, or considers an abuse of the program.

(2) Parties directly affected by a division reemployment assistance decision may request a reconsideration by sending a written request for reconsideration to the administrator no later than 60 days after the date the decision is issued. Facsimiles that are legible and complete are acceptable and will be processed the same as originals. Reconsideration must precede a director's review.

(3) The request for reconsideration shall specify the reasons why the decision is appealed. No reconsideration shall be granted unless the request meets the requirements of this subsection.

(4) The division will reconsider the decision prior to a director's review and will notify all affected parties of its decision upon reconsideration.

(5) If, upon reconsideration, the division upholds the original decision, the director's review shall begin.

(6) The director may require any affected party to provide information or to participate in the director's review. If the party requesting the director's review fails to participate without reasonable cause as determined by the director, the director may dismiss the review.

(7) The director's review decision will be issued in writing. The director's review

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decision is final and not subject to further review by any court or other administrative body.

Stat. Auth.: ORS 656.622, 656.726(4)

Stats. Implemented: ORS 656.622

Hist: Filed 2/20/87 as WCD Admin. Order 1-1987, eff. 3/16/87

Amended 12/17/87 as WCD Admin. Order 12-1987, eff. 1/1/88

Amended 6/21/90 as WCD Admin. Order 13-1990 (Temp), eff. 7/1/90

Amended 12/10/90 as WCD Admin. Order 30-1990, eff. 12/26/90

Renumbered from OAR 436-110-080, 1/21/93, WCD Admin. Order 93-050, eff. 3/1/93

Amended 3/13/96 as WCD Admin. Order 96-056 eff. 4/5/96

Amended 8/28/97 as WCD Admin. Order 97-057, eff. 9/12/97

Amended and renumbered section (1) from OAR 436-110-0540(11), 8/14/01 as WCD Admin. Order 01-056, eff. 10/1/01

436-110-0240 Insurer Participation in the Preferred Worker Program

(1) The insurer of the employer at injury shall be an active participant in providing reemployment assistance. Participation includes issuing notices of the assistance available from the Preferred Worker Program.

(2) The insurer shall notify the worker and employer at injury in writing of the reemployment assistance available from the fund. A notice shall be issued:

(a) Within five days of a worker's release for work after the worker has been declared medically stationary by the attending physician;

(b) Upon determination of eligibility or ineligibility of the worker for vocational assistance under OAR 436-120; and

(c) Upon approval of a Claim Disposition Agreement.

(3) Pursuant to section (2) of this rule, the Notice to the Worker shall appear in bold type and contain the following language:

The Preferred Worker Program helps Oregon's eligible injured workers get back to work. If you have permanent limitations as a result of an Oregon compensable injury, and your medical care provider has determined you will not be able to return to the employment you held at the time of your injury or aggravation because of those limitations, you may qualify as a Preferred Worker and receive reemployment assistance. To find out whether you qualify, contact the Preferred Worker Program at one of the telephone numbers, fax numbers, or addresses listed below.

For the Salem office call: (503) 947-7588, 1-800-445-3948 (toll-free from Oregon only), (503) 947-7993 (TTY), or FAX (503) 947-7581.

For the Medford office call: (541) 776-6032, 1-800-696-7161 (toll-free from Oregon only), or FAX (541) 776-6246.

Or write the Preferred Worker Program at: 350 Winter Street NE, Rm 27, Salem, Oregon 97301-3879; or 1840 Barnett Road, Suite C, Medford, Oregon 97504.

(4) Under section (2) of this rule, the Notice to the Employer shall appear in bold type and contain the following language:

If your worker is unable to return to regular work because of injury-caused

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limitations, you may be eligible for the Preferred Worker Program incentives including Premium Exemption, Claim Cost Reimbursement, Wage Subsidy, and Worksite Modification, which you may use to re-employ your worker. You must request Preferred Worker Program assistance from the Workers' Compensation Division within 180 days of the worker's claim closure date. To find out about the Preferred Worker Program, contact the program at one of the telephone numbers, fax numbers, or addresses listed below.

For the Salem office call: (503) 947-7588, 1-800-445-3948 (toll-free from Oregon only), (503) 947-7993 (TTY), or FAX (503) 947-7581.

For the Medford office call: (541) 776-6032, 1-800-696-7161 (toll-free from Oregon only), or FAX (541) 776-6246.

Or write the Preferred Worker Program at: 350 Winter Street NE, Rm 27, Salem, Oregon 97301-3879; or 1840 Barnett Road, Suite C, Medford, Oregon 97504.

(5) The insurer shall provide the division with Preferred Worker information in the form and format the director prescribes in OAR 436-030, upon the following:

(a) Claim closure according to ORS 656.268;

(b) Within 30 calendar days from the insurer's receipt of the earliest Opinion and Order of an Administrative Law Judge, Order on Reconsideration, Order on Review by the Board, decision of the Court of Appeals, or stipulation which grants initial permanent disability after the latest opening of the worker's claim; and

(c) Approval of a Claim Disposition Agreement according to ORS 656.236 and documented medical evidence indicates permanent disability exists as a result of the injury or disease, and the worker is unable to return to regular employment.

Stat. Auth.: ORS 656.340, 656.622, 656.726(4)
 Stats. Implemented: ORS 656.340(1), (2), (3); 656.622; 656.726(4)
 Hist: Filed 12/10/90 as WCD Admin. Order 30-1990, eff. 12/26/90
 Renumbered from OAR 436-110-017, 1/21/93, WCD Admin. Order 93-050, eff. 3/1/93
 Amended 3/13/96 as WCD Admin. Order 96-056 eff. 4/5/96
 Amended 8/28/97 as WCD Admin. Order 97-057, eff. 9/12/97
 Amended 8/14/01 as WCD Admin. Order 01-056, eff. 10/1/01
 Amended 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05

436-110-0290 Employer at Injury Use of the Preferred Worker Program

The conditions for the employer at injury to activate the Preferred Worker Program include:

(1) The employer at injury must request Preferred Worker Program assistance from the division within 180 days of the worker's claim closure date, with the following exception. When Worksite Modifications are provided, and the modifications are completed and verified by the division more than 150 days after the worker's claim-closure date, the employer at injury will have 30 calendar days from the verification date to request other assistance.

(2) In calculating the 180-day period under this rule, the claim closure date will not be included, and if the 180th day falls on a Saturday, Sunday, or legal holiday, the next business day

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will be considered the end of the 180-day period.

(3) The employment for which benefits are requested must be within the worker's injury-caused restrictions, unless Worksite Modifications are requested to comply with this section. In this case no other Preferred Worker Program benefits will be approved until all the modifications are in place and verified by a representative of the division.

(4) The worker must agree to accept the new or modified regular job in writing. The job offer must include:

- (a) The start date. If the job starts after the modifications are in place, so note;
- (b) Wage and hours;
- (c) Job site location; and
- (d) Description of job duties.

(5) If the employer at injury uses Worksite Modification assistance and the employer or worker later requests additional modifications for the same job, the employer's Worksite Modification benefit will be exhausted before using the worker's Worksite Modification benefits.

(6) All other provisions under OAR 436-110 apply unless otherwise indicated.

Stat. Auth.: ORS 656.726(4), 656.622

Stats. Implemented: ORS 656.622

Hist.: Filed 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05

436-110-0310 Eligibility and End of Eligibility for the Preferred Worker Program

(1) The eligibility requirements for an employer, except as provided in OAR 436-110-0345(1) for Obtained Employment Purchases, are:

- (a) The employer has and maintains Oregon workers' compensation insurance coverage;
- (b) The employer complies with the Oregon Workers' Compensation Law;
- (c) The employer must offer or provide employment to an eligible Preferred Worker who is a subject Oregon worker according to ORS 656.027;
- (d) If the employer is a worker leasing company, it must be licensed with the division; and
- (e) The employer is not currently ineligible for Preferred Worker benefits under OAR 436-110-0900.

(2) The eligibility requirements for a worker are:

(a) The worker has an accepted disabling Oregon compensable injury or occupational disease. Injuries covered by the Injured Inmate Law do not qualify;

(b) Because of injury-caused limitations, medical evidence indicates the worker will not be able to return to regular employment as defined in OAR 436-110-0005 under the most recent disabling claim or claim opening. If the worker is not eligible under the most recent disabling claim or claim opening, eligibility may be based on the most recent disabling claim closure

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where injury-caused permanent restrictions prevented the worker from return to regular employment. If the worker was previously found eligible under that claim, the worker will not be eligible again on that claim closure. Subsequent eligibility determination will be based on claim openings that occur after the date that the most recent *Preferred Worker Identification Card* is issued;

(c) Medical documentation indicates permanent disability exists as a result of the injury or disease, whether or not an order has been issued awarding permanent disability; and

(d) The worker is authorized to work in the United States.

(3) A worker may not use Preferred Worker benefits for self-employment unless the injury which gave rise to the worker's eligibility for the Preferred Worker Program occurred in the course and scope of self-employment. In that case, the worker may use the benefits to return to the same self-employment or for employment other than self-employment.

(4) A worker or employer-at-injury may not use Preferred Worker benefits, except Worksite Modification, for regular employment or substantially similar employment except as specified in OAR 436-110-0380.

(5) Reasons for ending Preferred Worker Program eligibility include, but are not limited to, the following:

(a) Misrepresentation or omission of information by a worker or employer to obtain assistance;

(b) Failure of a worker or employer to provide requested information or cooperate;

(c) Falsification or alteration of a Preferred Worker card or a *Preferred Worker Program Agreement*;

(d) Conviction of fraud in obtaining workers' compensation benefits;

(e) The worker no longer meets the eligibility requirements under section (2) of this rule;

(f) The worker or employer is sanctioned from receiving reemployment assistance in accordance with OAR 436-110-0900;

(g) The employer does not maintain Oregon workers' compensation insurance coverage, except as provided in OAR 436-110-0345(1) for Obtained Employment Purchases;

(h) The current *Preferred Worker Identification Card* expires without being activated, with the following exception. If the worker's card expired and the worker's job modification is determined to be "substantial" under OAR 436-110-0380, the worker can activate Premium Exemption within 30 calendar days from the date the division determines the modification is "substantial," unless any of subsections (a) through (f) apply; or

(i) The current *Preferred Worker Eligibility Card* expires, with the following exception. When Premium Exemption has expired and the worker's job modification is determined to be "substantial" under OAR 436-110-0380, the worker will be eligible to request Wage Subsidy and Obtained Employment Purchases within 30 calendar days from the date the division determines the modification is "substantial," unless any of subsections (a) through (f) apply.

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(6) If there is an active *Preferred Worker Program Agreement*, the division will not end Preferred Worker Program eligibility until termination of the agreement if a Disputed Claim Settlement according to ORS 656.289 settles that portion of the claim from which eligibility arose or the claim is subsequently denied according to ORS 656.262. Under an employer-at-injury activated agreement Premium Exemption ends when the job ends, or three years from the effective date of Premium Exemption, whichever occurs first. Under a worker-activated agreement, Premium Exemption ends either at the expiration date shown on the *Preferred Worker Eligibility Card* or when the job ends, whichever occurs first. When this occurs, the division will issue written notification to the worker if the assistance was worker activated. The worker must notify all affected parties. If the job ends before the expiration date shown on the card, the Preferred Worker card must be surrendered to the division. If the assistance was employer activated, the division will issue written notification to the employer.

(7) The division retains the right to reinstate Preferred Worker Program eligibility if eligibility was ended prematurely or in error, or the employer has reinstated or obtained workers' compensation insurance coverage.

(8) A worker found ineligible because he/she was not authorized to work in the United States may request a redetermination of eligibility after providing the division with documentation that he/she is authorized to work in the United States.

Stat. Auth.: ORS 656.622, 656.726(4)

Stats. Implemented: ORS 656.622

Hist: Filed 1/2/73 as WCB Admin. Order 1-1973, eff. 1/15/73

Amended 3/14/73 by WCB Admin. Order 3-1973, eff. 4/1/73

Amended 9/29/77 as WCD Admin. Order 2-1977 (Temp.), eff. 10/4/77

Amended 2/1/78 as WCD Admin. Order 2-1978, eff. 2/1/78

Amended 12/30/81 as WCD Admin. Order 7-1981, eff. 1/1/82

Renumbered from OAR 436-63-020, 5/1/85

Amended 2/20/87 as WCD Admin. Order 1-1987, eff. 3/16/87

Amended 12/17/87 as WCD Admin. Order 12-1987, eff. 1/1/88

Amended 6/21/90 as WCD Admin. Order 13-1990 (Temp.), eff. 7/1/90

Amended 12/10/90 as WCD Admin. Order 30-1990, eff. 12/26/90

Renumbered from OAR 436-110-020, 1/21/93, WCD Admin. Order 93-050, eff. 3/1/93

Amended 12/7/95 as WCD Admin. Order 95-068 (Temp.), eff. 1/1/96

Amended 3/13/96 as WCD Admin. Order 96-056 eff. 4/5/96

Amended and renumbered from OAR 436-110-0280 and 0400, 8/28/97 as WCD admin. Order 97-057, eff. 9/12/97

Amended 8/14/01 as WCD Admin. Order 01-056, eff. 10/1/01

Amended 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05

Amended 12/5/05 as WCD Admin. Order 05-079, eff. 1/1/06

436-110-0320 Preferred Worker Cards

This rule does not apply to employer-activated assistance.

(1) The division may issue two types of Preferred Worker cards to eligible workers. The cards identify the worker as being eligible to offer an employer Preferred Worker Program assistance. Conditions for using the Preferred Worker cards include:

(a) A worker can have only one valid Preferred Worker card at a time;

(b) A Preferred Worker card is valid for three years from the date of issue. The three-year period cannot be interrupted or extended; and

(c) A Preferred Worker card may be reissued upon loss of the original card during and for the three-year period the original card was issued.

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(2) The first card issued is a *Preferred Worker Identification Card*. The worker and employer use this card to start Premium Exemption by completing the card and returning it to the division. When worker eligibility criteria are met, the division issues this card as follows:

(a) Automatically at the time of claim closure based upon insurer submission of Preferred Worker information as specified in OAR 436-110-0240(5);

(b) Prior to claim closure when the worker has available, immediate employment with an employer who meets the eligibility criteria under OAR 436-110-0310(1). Workers or their representatives may contact the division directly to request an eligibility determination and a Preferred Worker card;

(c) When notified by the worker or their representative that there is a claim closure by a Claim Disposition Agreement, a Board's Own Motion or insurer's own motion;

(d) Upon request by the worker or their representative any time after claim closure; or

(e) If, as a result of a new claim or claim reopening, a Preferred Worker meets the Preferred Worker Program eligibility criteria, the division shall issue a new *Preferred Worker Identification Card*. The later card shall be used for subsequent benefits.

(3) The second card issued is the *Preferred Worker Eligibility Card*. The division sends the Preferred Worker this card upon approval of Premium Exemption. This card shows the three-year Premium Exemption period. The worker may offer other employers Preferred Worker benefits for the remainder of the time shown on this card.

(4) The division may inactivate a Preferred Worker card if:

(a) The Preferred Worker card was issued in error; or

(b) Any reason for ending Preferred Worker Program eligibility as specified in OAR 436-110-0310(5) applies.

(5) If the division finds that a worker who has requested a Preferred Worker card is ineligible, the division shall notify the worker in writing. Such notice shall give the basis for the decision, the relevant rule(s), and the worker's appeal rights as given in OAR 436-110-0007.

Stat. Auth.: ORS 656.622, 656.726(4)

Stats. Implemented: ORS 656.622

Hist: Filed 12/10/90 as WCD Admin. Order 30-1990, eff. 12/26/90

Renumbered from OAR 436-110-022, 1/21/93, WCD Admin. Order 93-050, eff. 3/1/93

Amended 3/13/96 as WCD Admin. Order 96-056 eff. 4/5/96

Amended 8/28/97 as WCD Admin. Order 97-057, eff. 9/12/97

Amended 8/14/01 as WCD Admin. Order 01-056, eff. 10/1/01

Amended 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05

436-110-0325 Premium Exemption General Provisions

(1) Premium Exemption releases an employer from paying workers' compensation insurance premiums and premium assessments on a Preferred Worker during the time Premium Exemption is in effect, up to a maximum of three (3) years. Premium Exemption may not be extended. While actively using Premium Exemption, the employer does not report, and the insurer cannot use, the Preferred Worker's payroll for the calculation of insurance premiums or premium assessments. However, the employer is required to report and pay workers'

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compensation employer assessments and withhold employee contributions as required by OAR 436-070. The employer shall start paying insurance premiums and premium assessments when Premium Exemption ends.

(2) Premium Exemption must be activated in order to use Claim Cost Reimbursement and Wage Subsidy unless OAR 436-110-0310(5)(i) applies. Requirements regarding Premium Exemption and Obtained Employment Purchases are provided in OAR 436-110-0346 and OAR 436-110-0347.

(3) If the division does not approve Premium Exemption, the division will notify the party who requested the assistance in writing. Such notice will provide the basis for the decision, the relevant rule(s), and the appeal rights as given in OAR 436-110-0007.

(4) Upon approval of Premium Exemption, the division will issue a Notice of Premium Exemption to the employer, employer's insurer, and the insurer of the employer at injury.

(5) If a worker covered under Premium Exemption incurs a compensable injury or occupational disease during the Premium Exemption period, the employer must notify its insurer of the injury. If the employer fails to note the Preferred Worker status when the Form 801 was filed with the insurer, the employer must notify the insurer as soon as possible that the injury or disease was incurred by a Preferred Worker.

Stat. Auth.: ORS 656.726(4), 656.622

Stats. Implemented: ORS 656.622

Hist.: Amended and renumbered section (1) from OAR 436-110-0300(1); (2)-(8) from OAR 436-110-0340(1),

8/14/01 as WCD Admin. Order 01-056, eff. 10/1/01

Amended 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05

436-110-0326 Premium Exemption - Employer at Injury Activated

Premium Exemption is activated by the employer at injury as follows:

(1) In order to request Premium Exemption, the employer must send the division a completed and signed *Employer at Injury, Premium Exemption and Wage Subsidy Agreement* within the timelines allowed in OAR 436-110. The worker's agreement in writing to accept the new or modified regular job must accompany the agreement or the request will not be accepted.

(2) When approved by the division, the effective date for Premium Exemption is the "hire date" as defined in OAR 436-110-0005.

(3) If Worksite Modification is needed for the worker to perform all the required job duties within the injury-caused restrictions, the employer at injury is not eligible for Premium Exemption until all modifications are in place and verified by a representative of the division. The date of the verification will be considered the date the worker started work for the employer in employment for which benefits are requested.

(a) If the date of the verification done by the division is more than 150 days after the worker's claim closure, the employer at injury will have 30 days to send the completed and signed agreement to the division; and

(b) If the worker returns to regular or substantially similar employment, the job for which Premium Exemption is requested must meet "substantial modification" criteria as determined by the division in accordance with OAR 436-110-0380.

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Stat. Auth.: ORS 656.726(4), 656.622
 Stats. Implemented: ORS 656.622
 Hist.: Filed 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05
 Amended 12/5/05 as WCD Admin. Order 05-079, eff. 1/1/06

436-110-0327 Premium Exemption – Worker Activated

Premium Exemption is activated by the worker as follows:

(1) When an eligible Preferred Worker issued a *Preferred Worker Identification Card* accepts employment with Premium Exemption requested, the worker and employer must complete the *Preferred Worker Identification Card* and send it to the division within three years of the start-work date. Upon approval by the division the effective date will be the hire date as defined in OAR 436-110-0005.

(2) If the worker returns to regular or substantially similar employment, the job for which Premium Exemption is requested must meet “substantial modification” criteria as determined by the division in accordance with OAR 436-110-0380 before Premium Exemption can be activated.

(3) Upon approval of Premium Exemption, the division will issue the worker a *Preferred Worker Eligibility Card* that shows the Premium Exemption start and end dates.

(4) The worker may use a *Preferred Worker Eligibility Card* to obtain new employment and to provide subsequent employers with Premium Exemption for the remainder of the three-year Premium Exemption period.

(5) Employers who subsequently employ a Preferred Worker must photocopy the *Preferred Worker Eligibility Card* as evidence of Premium Exemption, return the card to the worker, and distribute copies as follows:

(a) Send one copy to its insurer as notice that a Preferred Worker is employed using Premium Exemption; and

(b) Keep one copy on file.

Stat. Auth.: ORS 656.726(4), 656.622
 Stats. Implemented: ORS 656.622
 Hist.: Filed 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05
 Amended 12/5/05 as WCD Admin. Order 05-079, eff. 1/1/06

436-110-0330 Claim Cost Reimbursement

(1) Claim Cost Reimbursement provides reimbursement to the insurer for claim costs when a Preferred Worker files a claim for injury or occupational disease while employed under Premium Exemption as follows:

(a) Reimbursements will be made for the life of the claim;

(b) Reimbursable claim costs include disability benefits, medical benefits, vocational costs in accordance with OAR 436-120-0720, Claim Disposition Agreements in accordance with ORS 656.236, Disputed Claim Settlements in accordance with ORS 656.289, stipulations, as well as attorney fees awarded the worker or the worker’s beneficiaries, and administrative costs;

(c) Reimbursable claims costs for denied claims include costs incurred up to the date of

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denial, but are limited to benefits the insurer is obligated to pay under ORS 656 and diagnostic tests, including insurer medical examinations necessary to determine compensability of the claim;

(d) The administrative cost factor to be applied to claim costs will be as published in *Bulletin 316*; and

(e) The claim shall not be used for ratemaking, individual employer rating, dividend calculations, or in any manner that would affect the employer's insurance premiums or premium assessments with the present or a future insurer. The insurer must be able to document that claim data will not affect the employer's rates or dividend.

(2) The insurer shall request Claim Cost Reimbursement as follows:

(a) All requests for reimbursement shall be made within one year of the quarter within which payment was made;

(b) Quarterly reimbursement requests must be in the format the director prescribes by bulletin; and

(c) Reimbursement documentation shall include, but not be limited to:

(A) Net amounts paid. "Net amounts" means the total compensation paid less any recoveries including, but not limited to, third party recovery or reimbursement from the Retroactive Program, Reopened Claims Program, or the fund;

(B) Payment certification statement; and

(C) Any other information the division deems necessary.

(3) Requests for reimbursement shall not include:

(a) Claim costs for any injury which did not occur while the worker was employed with Premium Exemption;

(b) Costs incurred for conditions completely unrelated to the compensable claim;

(c) Costs incurred due to inaccurate, untimely, unreasonable, or improper processing of the claim;

(d) Penalties, fines or filing fees;

(e) Disposition amounts in accordance with ORS 656.236 (CDA) and 656.289 (DCS) not previously approved by the division;

(f) Costs reimbursed or outstanding requests for reimbursement from the Reopened Claims Program, Retroactive Program, or the fund; or

(g) Reimbursable Employer-at-Injury Program costs.

(4) Periodically, the division will audit the physical file of the insurer to validate the amount reimbursed. Reimbursed amounts shall be refunded to the division and, as applicable, future reimbursements denied if, upon audit, any of the following is found to apply:

(a) Reimbursement has been made for any of the items specified in section (3) of this

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rule;

(b) If claim acceptance as a new injury rather than an aggravation is questionable and the rationale for acceptance has not been reasonably documented;

(c) The separate payments of compensation have not been documented;

(d) The insurer included claim costs in any dividend or retrospective rating or experience rating calculations;

(e) The insurer is unable to provide applicable records relating to experience rating, retrospective rating, or dividend calculations at the time of audit or within 14 working days thereafter.

(5) If the conditions described in subsections (4)(a) through (e) of this rule are corrected and all other criteria of the rules are met, eligibility for reimbursement may be reinstated. If reimbursement eligibility is reinstated, any moneys previously reimbursed and then recovered will be reimbursed again according to these rules.

(6) If an employer fails to notify its insurer of the "Preferred Worker" status when the *Form 801* is submitted or fails to send its insurer a copy of the *Preferred Worker Eligibility Card*, and later notifies its insurer that the injury or disease was incurred by a Preferred Worker, the insurer shall correct all records previously filed which include claim costs in any dividend, retrospective rating, or any claim valuation for experience rating performed.

(7) A Claim Disposition Agreement according to ORS 656.236, a Disputed Claim Settlement according to ORS 656.289, or any stipulation or agreement of a claim subject to claim cost reimbursement from the fund must meet the following requirements for reimbursement:

(a) The insurer must obtain prior written approval of the disposition from the division. The proposed disposition shall be submitted to the division prior to submitting the disposition to the Workers' Compensation Board for approval;

(b) A claim's future liability and the proposed contribution from the fund must be a reasonable projection, as determined by the division, in order to be approved for reimbursement from the fund; and

(c) A request for approval of the proposed disposition shall include:

(A) The original proposed disposition, containing appropriate signatures and appropriate signature lines for division and Workers' Compensation Board approval, which specifies the proposed assistance from the fund;

(B) A written explanation of how the calculations for the amount of assistance from the fund were made; and

(C) Other information as required by the division.

Stat. Auth.: ORS 656.726(4), 656.622

Stats. Implemented: ORS 656.622

Hist.: Amended and renumbered section (1) from OAR 436-110-0300(2); (2)-(7) from OAR 436-110-0260, 8/14/01 as WCD Admin. Order 01-056, eff. 10/1/01

Amended 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05

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436-110-0335 Wage Subsidy General Provisions

Wage Subsidy provides an employer with partial reimbursement of a worker's gross wages for a specified period. Wage Subsidy benefits are subject to the following conditions:

(1) Premium exemption must be activated to use Wage Subsidy, unless OAR 436-110-0310(5)(i) applies;

(2) A Wage Subsidy is limited to a duration of 183 calendar days and a monthly reimbursement rate of 50 percent, except for a worker with an exceptional disability as defined in OAR 436-110-0005. For a worker with an exceptional disability, the Wage Subsidy duration is limited to 365 calendar days and a monthly reimbursement rate of 75 percent;

(3) A *Wage Subsidy Agreement* may be interrupted once for reasonable cause and extended to complete the *Wage Subsidy Agreement* on a whole workday basis. Reasonable cause includes, but is not limited to, personal or family illness, death in the worker's family, pregnancy of the worker or worker's spouse, a compensable injury to the worker, participation in an Employer-at-Injury Program, or layoff. A layoff must be a minimum of 10 consecutive work days. A period of time during which the employer is without workers' compensation insurance coverage is not "reasonable cause," and no extension will be granted;

(4) A Preferred Worker's pay structure must be the same as the pay structure for other workers employed in similar jobs by the employer;

(5) Wages subject to reimbursement must be within the prevailing wage range for that occupation. The prevailing wage range is determined by the following method:

(a) First, examine the wages paid by the employer for other workers doing the same job;

(b) If no other workers are doing the same job, a labor market survey of the local labor market may be conducted; and

(c) If the labor market survey does not support the wage rate requested, the division will determine the wage subject to reimbursement;

(6) Preferred Worker Program Wage Subsidies may not be combined with subsidies from other sources, and a worker-activated and employer at injury-activated wage subsidy can not be used for the same job with the employer at injury;

(7) If the worker's employer changes during the *Wage Subsidy Agreement* period due to a sale of the business, incorporation, or merger, the agreement can be transferred to the new employer by an addendum to the agreement approved by the division as long as the worker's job remains the same and the new employer is eligible under OAR 436-110-0310;

(8) Upon approval of the *Wage Subsidy Agreement*, the division will send a copy of the agreement to the worker if it is worker activated, and will always send a copy of the agreement with a *Wage Subsidy Reimbursement Request* form to the employer;

(9) If the division does not approve the *Wage Subsidy Agreement*, the division will notify the party who made the request, in writing. Such notice will give the basis for the decision, the applicable rule(s), and the appeal rights as given in OAR 436-110-0007;

(10) The employer may request reimbursement of wages paid to the worker, based on the

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amount agreed to on the *Wage Subsidy Agreement* form or the amount paid to the worker, whichever is less. An employer may request reimbursement, interruption, or extension of a Wage Subsidy for a part of a day the worker worked, but the part of the day reimbursed or interrupted will be counted as a whole workday toward the total duration of the Wage Subsidy;

(11) Requests for reimbursement must not be submitted more frequently than once every two weeks. A completed and signed *Wage Subsidy Reimbursement Request* form must be submitted to the division with a copy of the worker's payroll records. The payroll record must state the dates (daily or weekly), hours, wage rate, and the worker's gross wage. Payroll records must be a legible copy and compiled in accordance with generally accepted accounting procedures; and

(12) All requests for reimbursement must be made within one year of the *Wage Subsidy Agreement* termination date.

Stat. Auth.: ORS 656.726(4), 656.622

Stats. Implemented: ORS 656.622

Hist: Amended and renumbered section (1) from OAR 436-110-0300(3); (2) from OAR 436-110-0340(2), 8/14/01 as WCD Admin. Order 01-056, eff. 10/1/01

Hist.: Amended 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05

Amended 12/5/05 as WCD Admin. Order 05-079, eff. 1/1/06

436-110-0336 Wage Subsidy – Employer at Injury Activated

Wage Subsidy is activated by the employer at injury as follows:

- (1) The Wage Subsidy is combined with Premium Exemption.
- (2) When Premium Exemption is approved, Wage Subsidy is also approved and is effective on the same date.
- (3) The employer at injury may use Wage Subsidy once during an eligibility period.

Stat. Auth.: ORS 656.726(4), 656.622

Stats. Implemented: ORS 656.622

Hist: Filed 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05

436-110-0337 Wage Subsidy – Worker Activated

A Wage Subsidy may be requested by a worker and employer and the employer reimbursed as follows:

- (1) The worker must be eligible for Wage Subsidy on the hire date.
- (2) A *Wage Subsidy Agreement* must be completed and signed by the worker and employer and submitted to the division within three years of the start-work date.
- (3) When approved by the division, the effective date for the Wage Subsidy is the "hire date" as defined in OAR 436-110-0005.
- (4) Except as otherwise provided in these rules, a Preferred Worker may use Wage Subsidy twice during an eligibility period, once with one employer and once with a different employer. If the employer at injury uses Wage Subsidy for a job, the worker cannot use Wage Subsidy for the same job.

Stat. Auth.: ORS 656.726(4), 656.622

Stats. Implemented: ORS 656.622

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Hist: Filed 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05
Amended 12/5/05 as WCD Admin. Order 05-079, eff. 1/1/06

436-110-0345 Obtained Employment Purchases – General Provisions

(1) An Obtained Employment Purchase is assistance necessary for a worker to accept a job or to continue employment within three years of the start-work date. If the employer pays for the same assistance for other workers performing the same job, it does not qualify as an Obtained Employment Purchase. These purchases may be provided for a job with a non-subject employer in Oregon, as long as that employer complies with the appropriate workers' compensation law. All purchases become the worker's property upon employment in the job for which they are required.

(2) Obtained Employment Purchases are limited to:

(a) Tuition, books, and fees for instruction provided by an educational entity accredited or licensed by an appropriate body in order to update existing skills or to meet the requirements of an obtained job. Maximum reimbursement is \$1000;

(b) Temporary lodging, meals, and mileage to attend instruction when overnight travel is required. The cost of meals, lodging, public transportation, and use of a personal vehicle shall be reimbursed at the rate of reimbursement for State of Oregon classified employees as published in *Bulletin 112*. Lodging, meals, and mileage are limited to a combined period of one month, and the total maximum reimbursement is \$500;

(c) Tools and equipment mandatory for employment, such as starter sets. Purchases shall not include items the worker possesses, duplicate Worksite Modification items, or vehicles. Maximum reimbursement is \$2,000;

(d) Clothing required for the job, not including clothing the worker already possesses. Clothing does not include accessories such as jewelry, scarves, wallets, purses, or other items which are not basic clothing. Maximum reimbursement is \$400;

(e) Moving expenses for a job if the new worksite is in Oregon and more than 50 miles from the worker's primary residence. When the worker's permanent disability from the injury precludes the worker from commuting the required distance, moving expenses may be provided to move within 50 miles of the worker's primary residence or within the distance the worker commuted for work at claim opening. Moving expenses are limited to one use per eligibility. Reimbursement is limited to:

(A) The cost of moving household goods weighing not more than 10,000 pounds and reasonable costs of meals and lodging for the worker. The cost of meals, lodging, public transportation, and use of a personal vehicle shall be reimbursed at the rate of reimbursement for State of Oregon classified employees as published in *Bulletin 112*. Reimbursement of lodging and meals are limited to a maximum period of two weeks. Reimbursement of mileage for one personal vehicle is limited to a single one-way trip; and

(B) Rental allowance for the worker's primary residence limited to first month's rent as specified in the rental agreement, non-refundable deposit in an amount not to exceed the first month's rent, and a required credit check for that residence;

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(f) Initiation fees, or back dues and one month's current dues, required by a labor union; and

(g) Occupational certification, licenses, and related testing costs, drug screen testing, physical examinations, or membership fees required for the job. Maximum reimbursement is \$500.

(3) Upon division approval, the division will send a copy of the agreement and, if applicable, a completed *Authorization for Payment* form or other instrument of payment.

(4) A worker, employer, vocational assistance provider, or insurer may request reimbursement by submitting to the division a legible copy of an invoice or receipt showing payment has been made for the item(s) purchased. Reimbursement will be made for only those items and costs approved and paid.

(5) If the division does not approve the Obtained Employment Purchase, the division will notify the party who requested the assistance in writing. Such notice will give the basis for the decision, the relevant rule(s), and the appeal rights as given in OAR 436-110-0007.

(6) Costs of Obtained Employment Purchases may be paid by reimbursement, by an *Authorization for Payment*, or by other instrument of payment approved by the director.

(7) The division will not purchase directly or otherwise assume responsibility for Obtained Employment Purchases.

(8) Reimbursed costs will not be charged by the insurer to the employer as claim costs or by any other means.

(9) All requests for reimbursement must be made within one year of the *Obtained Employment Purchase Agreement* end date.

(10) Once the division provides an Obtained Employment Purchase item, the division will not replace that item unless the item was stolen, or destroyed by nature or an act of God, or in the case of clothing for new employment, the clothing previously provided is no longer usable. The loss must be uninsured and the division may require a police report to verify the loss.

Stat. Auth.: ORS 656.726(4), 656.622

Stats. Implemented: ORS 656.622

Hist.: Amended and renumbered sections (1)-(3) from OAR 436-110-0300(4); (4)-(8) from OAR 436-110-0340(3), 8/14/01 as WCD Admin. Order 01-056, eff. 10/1/01

Amended 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05

Amended 12/5/05 as WCD Admin. Order 05-079, eff. 1/1/06

436-110-0346 Obtained Employment Purchases – Employer at Injury Activated

Conditions for use of Obtained Employment Purchases by the employer at injury are as follows:

(1) Premium Exemption must be active on the worker's hire date in order to use Obtained Employment purchases.

(2) The employer must submit a completed *Obtained Employment Purchase Agreement* listing item(s) that are required of all workers performing the job for which the worker is employed. If no other workers are performing the same job, the division may conduct a local

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labor market survey to determine whether similar employers require the items to perform the job. If the labor market survey does not support the Obtained Employment Purchase item(s) requested, the division will determine the appropriate Obtained Employment Purchase item(s).

(3) The employer at injury may use each Obtained Employment Purchase category once during a period of eligibility.

(4) Obtained Employment Purchases will only be provided after the worker's hire date, except as follows:

(a) If purchases are necessary prior to the worker's hire date, the employer at injury must submit the written job acceptance by the worker with the agreement form.

(b) Subsection (a) of this section does not apply to workers receiving vocational assistance under OAR 436-120. If the worker is receiving vocational assistance, the employer at injury may only request Obtained Employment Purchases for purchases made after the worker's hire date.

Stat. Auth.: ORS 656.726(4), 656.622

Stats. Implemented: ORS 656.622

Hist: Filed 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05

436-110-0347 Obtained Employment Purchases – Worker Activated

Conditions for use of Obtained Employment Purchases by a worker are as follows:

(1) Except for moving expenses, the worker and employer must submit a completed *Obtained Employment Purchase Agreement* listing item(s) that are required of all workers performing the job for which the worker is employed. If no other workers are performing the same job, the division may conduct a local labor market survey to determine whether similar employers require the items to perform the job. If the labor market survey does not support the Obtained Employment Purchase item(s) requested, the division will determine the appropriate Obtained Employment Purchase item(s).

(2) Premium Exemption must be active on the worker's hire date in order to use Obtained Employment Purchases, unless OAR 436-110-0310(5)(i) applies. Obtained Employment Purchases will only be provided after the worker's hire date, except as follows:

(a) If purchase(s) are necessary prior to the worker's hire date and prior to activation of Premium Exemption, the worker and employer must submit the completed and signed *Preferred Worker Identification Card* to the division along with the *Obtained Employment Purchase Agreement* form.

(b) If purchase(s) are necessary prior to the worker's hire date and Premium Exemption has previously been activated, the employer may be required to submit a letter of intent to hire along with the *Obtained Employment Purchase Agreement*.

(c) Subsections (a) and (b) of this section do not apply to workers receiving vocational assistance under OAR 436-120. These workers may only request Obtained Employment Purchases for purchases made after the worker's hire date.

(3) If Obtained Employment Purchases are to be used with a non-subject employer in Oregon, Premium Exemption is not activated.

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(4) Except as otherwise provided in these rules, a Preferred Worker may use each Obtained Employment Purchase category twice during a period of eligibility, once with one employer and once with a different employer.

(5) A Preferred Worker who is receiving return-to-work follow-up services under OAR 436-120 may be eligible for Obtained Employment Purchases. This is the only condition under which a worker receiving vocational assistance under OAR 436-120 may be eligible for these purchases.

(6) Obtained Employment Purchases may be requested by a Preferred Worker as follows:

(a) The worker must call or write the division directly for assistance in receiving Obtained Employment Purchases. Requests made beyond three years from the hire date will not be considered.

(b) The *Obtained Employment Purchase Agreement* form must be completed and signed by the worker and employer and submitted to the division. If the request is for moving expenses, only the worker's signature is required.

Stat. Auth.: ORS 656.726(4), 656.622

Stats. Implemented: ORS 656.622

Hist: Filed 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05

436-110-0350 Worksite Modification – General Provisions

(1) Worksite Modification means altering a worksite in Oregon, or available for inspection and modification in Oregon, by purchasing, modifying, or supplementing equipment, or changing the work process, to enable a worker to work within the limitations imposed by compensable injuries or occupational diseases. Worksite Modification may also include the means to protect modifications purchased by the Preferred Worker Program in an amount not to exceed \$2500.

(2) Conditions for the use of Worksite Modification assistance are as follows:

(a) Modifications will be provided to allow the worker to perform the job duties within the worker's injury-caused permanent limitations. In order to determine appropriate Worksite Modifications, the Reemployment Assistance Unit consultants have discretion to use reports by a medical service provider specific to the worker, specific documented "best practices" described by a medical service provider or authority, and their own professional judgement and experience;

(b) A job analysis which includes the duties and physical demands of the job before and after modification may be required to show how the modification will overcome the worker's limitations. The job analysis may be submitted to the attending physician for approval before the modification is performed;

(c) Modifications may be provided to allow a worker to return to regular employment, as described in OAR 436-110-0380;

(d) Modifications are limited to a maximum of \$25,000 for one job. A modification over \$25,000 may be provided if the worker has an exceptional disability as defined in OAR 436-110-0005;

(e) Modifications not to exceed \$1,000 may be provided which would reasonably be

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expected to prevent further injury or exacerbation of the worker's accepted condition. Appropriateness of this type of modification will be determined by a Reemployment Assistance Consultant based upon his or her professional judgment and experience, reports by a medical service provider specific to the worker, or specific documented "best practices" described by a medical service provider or authority. Costs of the modification(s) are included in the calculation of the total Worksite Modification costs;

(f) Modifications limited to a maximum of \$2,500 may be provided for on-the-job training under OAR 436-120 or other similar on-the-job training programs including, but not limited to, those administered by the state of Oregon Employment Department and Department of Human Resources, Vocational Rehabilitation Division, except when the employer at injury is the trainer. When the employer at injury is the trainer, a modification of up to \$25,000 may be provided. A modification will not be approved for any other type of training;

(g) Modifications limited to \$2,500 may be provided to protect the items approved in the *Worksite Modification Agreement* from theft, or damage from the weather. Insurance policy premiums will not be paid;

(h) When a vehicle is being modified, the vehicle owner must provide proof of ownership and insurance coverage. The worker must have a valid driver license;

(i) Rented or leased vehicles and other equipment will not be modified;

(j) Modifications must be reasonable, practical, and feasible, as determined by the division. The director shall have final authority to make Worksite Modification decisions involving the use of the fund;

(k) When the division determines the appropriate form of modification and the worker or employer requests a form of modification equally appropriate but with a greater cost, upon division approval, funds equal to the cost of the form of modification identified by the division may be applied toward the cost of the modification desired by the worker or employer;

(l) A modification may include tools, equipment, fixtures, or furnishings not customarily provided by an employer, installation of equipment or machinery, or alteration of permanent structures;

(m) A modification may include rental of tools, equipment, fixtures, or furnishings to determine the feasibility of a modification, and consultative services consisting of engineering, architectural, ergonomic, and similar services required to determine the feasibility, to recommend, to design, or to perform a Worksite Modification;

(n) Rental of Worksite Modification items and consultative services require division approval and are limited to a cost of up to \$3,500 each. The cost for rental of Worksite Modification items and consultative services does not apply toward the total cost of a Worksite Modification;

(o) Modification equipment shall become the property of the employer, worker, or worker leasing company's client on the "end date" of a *Worksite Modification Agreement* or when the worker's employment ends, whichever occurs first. The division shall determine ownership of Worksite Modification equipment prior to approving an agreement and has the

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final authority to assign property. When assigning ownership of equipment the division will consider several factors including but not limited to the following:

- (A) Whether it is unique to the worker, employer, or client;
- (B) Whether it is mobile, portable, and easily transferable;
- (C) Whether it is integral to the employer's or client's business operation;
- (D) Whether it is attached to the employer's or client's property, premises, or equipment;

and

- (E) Whether it is installed in or on the worker's personal property or premises;

(p) The division may request a physical capacities evaluation, work tolerance screening, or review of a job analysis to quantify the worker's injury-caused permanent limitations. The cost of temporary lodging, meals, public transportation, and use of a personal vehicle necessary for a worker to participate in one or more of these required activities shall be reimbursed at the rate of reimbursement for State of Oregon classified employees as published in *Bulletin 112*. The cost of the services described in this subsection does not apply toward the total cost of a Worksite Modification;

(q) If the property provided for the modification is damaged, in need of repair, or lost, the division will not repair or replace the property;

(r) The employer shall not dispose of the property provided for the modification or reassign it to another worker while the worker is employed in work for which the modification is necessary or prior to the end of the agreement without division and worker approval. Failure to repair or replace the property, or inappropriate disposal or reassignment of the property, may result in sanctions under OAR 436-110-0900; and

(s) The worker shall not dispose of the property provided for the modification while employed in work for which the modification is necessary or prior to the end of the agreement without division approval. Failure to repair or replace the property, or inappropriate disposal of the property, may result in sanctions under OAR 436-110-0900.

(3) A Worksite Modification may be requested by a worker or employer at injury and costs reimbursed as follows:

(a) The worker or employer may develop a Worksite Modification without division assistance or may contact the division directly for Worksite Modification assistance;

(b) Upon contact from the worker or employer, the division will provide instruction on how to proceed with the modification. The division may schedule an on-site visit to assist in identifying appropriate forms of modification;

(c) When the cost of the modification is \$2,500 or less, a *Worksite Modification Agreement (Limited to \$2,500)* form may be completed and sent to the division. The division may request additional support information;

(d) When the cost of the modification is over \$2,500, the division will issue a *Worksite Modification Agreement* form upon determination that the modification is appropriate;

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(e) Upon division approval, the division will send copies of the agreement to the parties to the agreement. The division will send the party purchasing the modification an *Authorization for Payment* form or other instrument of payment approved by the director;

(f) The worker, employer, private rehabilitation organization, or insurer may request reimbursement by submitting to the division proof of payment for the items purchased. Reimbursement will be made for only those items and costs approved and paid; and

(g) If the division does not approve the Worksite Modification, the division shall notify the party who made the request, in writing. Such notice shall give the basis for the decision, the relevant rule(s), and the appeal rights as given in OAR 436-110-0007.

(4) Costs of Worksite Modifications may be paid by reimbursement, an *Authorization for Payment*, or by other instrument of payment approved by the director.

(5) The division shall not purchase directly or otherwise assume responsibility for Worksite Modifications.

(6) Reimbursed costs shall not be charged by the insurer to the employer as claims costs or by any other means.

(7) If the cost for a single item, except for a chair, is over \$2,500, three (3) competitive quotes shall be obtained. If a chair costs over \$1,000, three (3) competitive quotes shall be obtained. Quotes are competitive when they are from three different vendors and the items being quoted meet the same specifications. If three competitive quotes are not available, documentation of efforts to obtain three competitive quotes shall be provided. The lowest quote shall normally be selected. However, other criteria may be considered including, but not limited to, past vendor performance, delivery time, and vendor availability to service or maintain the item.

(8) All requests for reimbursement shall be made within one year of the *Worksite Modification Agreement* termination date.

Stat. Auth.: ORS 656.726(4), 656.622

Stats. Implemented: ORS 656.622

Hist: Amended and renumbered sections (1)-(2) from OAR 436-110-0300(5); (3) from OAR 436-110-0340(4), 8/14/01 as WCD Admin. Order 01-056, eff. 10/1/01

Amended 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05

436-110-0351 Worksite Modification – Employer at Injury Activated

Conditions for use of Worksite Modifications by the employer at injury are as follows:

(1) The employer at injury may use Worksite Modification assistance once for a job provided for their injured worker, or a second time if the worker changes to another job with the employer at injury within allowable timeframes.

(2) Modifications are limited to a maximum of \$25,000 on the claim which qualified the worker for assistance. A modification over \$25,000 may be provided if the worker has an exceptional disability as defined in OAR 436-110-0005.

(3) The division must approve, by authorized signature, a completed and signed *Worksite Modification Agreement* prior to any reimbursement or *Authorization for Payment*.

(4) Modifications may be provided for requests received within 180 days from the

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worker's claim closure date. Additional modifications may be provided under an approved agreement by addendum for requests received within three years from the date the worker started work for the employer in employment for which the Worksite Modification request was made.

Stat. Auth.: ORS 656.726(4), 656.622
Stats. Implemented: ORS 656.622
Hist: Filed 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05

436-110-0352 Worksite Modification – Worker Activated

Conditions for use of Worksite Modification assistance by the worker are as follows:

(1) The division must approve, by authorized signature, a completed and signed *Worksite Modification Agreement* form, prior to any reimbursement or *Authorization for Payment*.

(2) Modifications may be provided for requests received within three years from the following:

(a) The date the worker started work for the employer in employment for which the Worksite Modification request was made;

(b) The date the worker returned to regular employment or substantially similar employment if the employment began prior to claims closure; or

(c) The date of claim closure.

(3) A worker may use Worksite Modification assistance once with one employer and once with a second employer, or twice with the same employer if there is a job change.

(4) Modifications after June 30, 1990, are limited to a maximum of \$25,000 on the claim which qualified the worker for assistance. A modification over \$25,000 may be provided for a worker with an exceptional disability as defined in OAR 436-110-0005. This maximum is not reduced by the use of Worksite Modifications by the employer at injury.

Stat. Auth.: ORS 656.726(4), 656.622
Stats. Implemented: ORS 656.622
Hist: Filed 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05

436-110-0380 Return to Regular Employment

(1) If the worker has an accepted Oregon disabling claim and is unable to return to regular employment as a result of permanent restrictions from the accepted conditions of that claim, Worksite Modification may be provided to allow the worker to return to regular employment or employment substantially similar in nature, duties, and responsibilities, regardless of whether the worker has received a Preferred Worker Card. The employment for which benefits are requested by the worker or employer at injury will not be considered to have started until all necessary modifications are in place and verified by a representative of the division.

(2) The division shall determine a substantial modification based upon the extent of the modifications necessary to accommodate the worker's permanent limitations from compensable Oregon injuries. The modifications provided must be sufficient for the worker to perform all required job duties within these restrictions. The modification is "substantial" if any one of the factors given in subsections (a), (b), and (c) of this rule apply. When making its decision, the

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division may consider other factors in addition to whether the modification significantly impacts the following:

- (a) Changes how the worker performs essential job duties;
- (b) Reduces the physical exertion required; or
- (c) Affects the employer's work process.

(3) The provision of the following Worksite Modification items or similar items by themselves do not constitute a substantial modification:

- (a) Ergonomic chair;
- (b) Anti-fatigue mat;
- (c) Slant board;
- (d) Anti-vibration wrap for tools;
- (e) Special pen or pencil;
- (f) Footrest;
- (g) Wristrest; or
- (h) Changing the height of a work surface.

(4) If the division determines the modification is not substantial as defined in sections (2) and (3) of this rule, Premium Exemption cannot be activated. If the worker does not have a *Preferred Worker Card*, none will be issued.

(5) If the division determines the modification is substantial as defined in sections (2) and (3) of this rule the following will occur:

(a) If the worker does not have a *Preferred Worker Identification Card*, the division will issue a card after the modification is in place.

(b) If the worker already has a *Preferred Worker Identification Card*, it may be activated. The worker will be notified by the division in writing of his or her rights under these rules.

(c) If the employer at injury requested the assistance the division will notify the employer in writing and provide instructions about activating Premium Exemption.

Stat. Auth: ORS 656.622, 656.726(4)

Stats. Implemented: ORS 656.622

Hist: Filed 8/28/97 as WCD Admin. Order 97-057, eff. 9/12/97

Amended 8/14/01 as WCD Admin. Order 01-056, eff. 10/1/01

Amended 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05

436-110-0850 Audits

(1) Insurers and employers are subject to periodic program and fiscal audits by the division. All reimbursements are subject to subsequent audits, and may be disallowed on any of the grounds set forth in these rules. Disallowed reimbursements may be recovered by the division directly or from future reimbursements by way of offset. If the division finds upon audit that procedures which led to disallowed reimbursements are still being used, the division may

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withhold further reimbursements until corrections satisfactory to the division are made.

(2) An insurer or employer shall maintain claim records, notices, worker payroll records, reports, receipts, and documentation of payment supporting reemployment assistance costs for which reimbursement has been requested or expenditure by *Authorization for Payment* has been made. These records shall be maintained for a period of three years after the last reimbursement request or expenditure by *Authorization for Payment*.

(3) The division reserves the right to visit the worksite to determine compliance with the agreement under which reemployment assistance has been provided.

Stat. Auth.: ORS 656.455, 656.622, 656.726(4), 731.475
 Stats. Implemented: ORS 656.455, 656.622, 731.475
 Hist: Filed 2/20/87 as WCD Admin. Order 1-1987, eff. 3/1/87
 Amended 12/17/87 as WCD Admin. Order 12-1987, eff. 1/1/88
 Amended 12/10/90 as WCD Admin. Order 30-1990, eff. 12/26/90
 Renumbered from OAR 436-110-100, 1/21/93, WCD Admin. Order 93-050, eff. 3/1/93
 Amended 3/13/96 as WCD Admin. Order 96-056 eff. 4/5/96
 Renumbered from OAR 436-110-0450, 8/28/97 as WCD Admin. Order 97-057, eff. 9/12/97
 Amended 8/14/01 as WCD Admin. Order 01-056, eff. 10/1/01

436-110-0900 Sanctions

(1) Any person who knowingly makes any false statement or representation to the director or an employee of the director for the purpose of obtaining any benefit or payment from the Preferred Worker Program or who knowingly misrepresents the amount of a payroll, or knowingly submits a false payroll report, is subject to penalties under ORS 656.990.

(2) Reasons for the director to sanction an individual certified under OAR 436-120, a vocational assistance provider authorized under OAR 436-120, an agency of the State of Oregon, an insurer, an employer, or a Preferred Worker include, but are not limited to, the following:

(a) Misrepresenting information in order to obtain reemployment assistance. Two examples of misrepresentation are:

(A) Changing a job description or job title where there are not corresponding job duty changes in order to obtain benefits; and

(B) Obtaining a worker's signature on incomplete, incorrect, or blank agreements or reimbursement requests;

(b) Making a serious error or omission which resulted in the division approving a *Preferred Worker Program Agreement*, issuing a Preferred Worker card, or reimbursing claim costs in error;

(c) Failing to abide by the terms and conditions of a *Preferred Worker Program Agreement*;

(d) Failing to abide by the provisions of these rules or ORS 656.990;

(e) Failing to return required receipts or invoices;

(f) Submitting false reimbursement requests or job analyses;

(g) Altering an *Authorization for Payment* form or purchasing unauthorized items; or

(h) Failing to return a Preferred Worker card if requested by the division.

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(3) Sanctions by the director may include one or more of the following:

(a) Ordering the person being sanctioned to repay the department for reemployment assistance costs incurred, including the department's legal costs;

(b) Prohibiting the person being sanctioned from negotiating or arranging reemployment assistance for such period of time as the director deems appropriate;

(c) Decertifying an individual or vocational assistance provider under the authority of OAR 436-120;

(d) Ordering an employer or worker ineligible for reemployment assistance for a specific period of time; and

(e) Pursuing civil or criminal action against the party.

Stat. Auth.: ORS 656.622, 656.726(4)

Stats. Implemented: ORS 656.622, 656.990

Hist: Filed 12/17/87 as WCD Admin. Order 12-1987, eff. 1/1/88

Amended 12/10/90 as WCD Admin. Order 30-1990, eff. 12/26/90

Renumbered from OAR 436-110-110, 1/21/93, WCD Admin. Order 93-050, eff. 3/1/93

Amended 3/13/96 as WCD Admin. Order 96-056 eff. 4/5/96

Amended and renumbered from OAR 436-110-0500, 8/28/97 as WCD Admin. Order 97-057, eff. 9/12/97

Amended 8/14/01 as WCD Admin. Order 01-056, eff. 10/1/01

Amended 5/24/05 as WCD Admin. Order 05-058, eff. 7/1/05

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Secretary of State
Certificate and Order for Filing
PERMANENT ADMINISTRATIVE RULES

I certify that the attached copies* are true, full and correct copies of the
PERMANENT Rule(s) adopted on

December 5, 2005 by the
Date prior to or same as filing date

Department of Consumer and Business Services
Workers' Compensation Division
Agency and Division

OAR chapter 436
Administrative Rules Chapter No.

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to become effective January 1, 2006 Rulemaking Notice was published in the October 2005 *Oregon Bulletin*.**
Date upon filing or later Month and Year

Amendment of workers' compensation rules affecting injured workers, employers, medical providers, insurers, and others.

Not more than 15 words that reasonably identifies the subject matter of the agency's intended action.

RULEMAKING ACTION

List each rule number separately, 000-000-0000.

ADOPT: OAR 436-055-0085, 436-060-0137, 436-060-0510, 436-120-0755

AMEND: OAR

436-010-0005	436-030-0003	436-035-0008	436-035-0420	436-060-0025	436-060-0510 ^{FB}
436-010-0008	436-030-0005	436-035-0009	436-035-0430	436-060-0030	436-105-0500
436-010-0210	436-030-0007	436-035-0011	436-035-0500	436-060-0035	436-110-0002
436-010-0220	436-030-0009	436-035-0012	436-050-0003	436-060-0040	436-110-0005
436-010-0230	436-030-0015	436-035-0016	436-050-0008	436-060-0055	436-110-0310
436-010-0240	436-030-0020	436-035-0017	436-050-0100	436-060-0060	436-110-0326
436-010-0250	436-030-0023	436-035-0019	436-050-0110	436-060-0095	436-110-0327
436-010-0265	436-030-0034	436-035-0110	436-050-0170	436-060-0105	436-110-0335
436-010-0270	436-030-0055	436-035-0190	436-050-0220	436-060-0135	436-110-0337
436-010-0280	436-030-0065	436-035-0230	436-050-0230	436-060-0137 ^{FB}	436-110-0345
436-010-0290	436-030-0115	436-035-0330	436-055-0070	436-060-0140	436-120-0003
436-010-0300	436-030-0155	436-035-0340	436-055-0100	436-060-0147	436-120-0008
436-010-0340	436-030-0165	436-035-0350	436-060-0002	436-060-0150	436-120-0320
436-015-0008	436-030-0175	436-035-0360	436-060-0008	436-060-0155	436-120-0900
436-015-0030	436-030-0185	436-035-0380	436-060-0009	436-060-0180	
436-015-0040	436-030-0575	436-035-0390	436-060-0010	436-060-0190	
436-015-0070	436-030-0580	436-035-0395	436-060-0015	436-060-0200	
436-015-0080	436-035-0005	436-035-0400	436-060-0017	436-060-0500	
436-015-0110	436-035-0007	436-035-0410	436-060-0020		

REPEAL: None

Certificate and Order for Filing Permanent Administrative Rules

ORS 656.726(4)

Statutory Authority

Other Authority

ORS chapter 656, primarily: ORS 656.704, Enrolled House Bill (HB) 2091 – Oregon Laws (OL) 2005, ch. 26; ORS 656.268, Enrolled HB 2404 – OL 2005, ch. 569; ORS 656.273, Enrolled HB 2405 – OL 2005, ch. 50; ORS 656.726, Enrolled HB 2408 – OL 2005, ch. 653; ORS 656.262, Enrolled HB 2718 – OL 2005, ch. 189; Enrolled HB 3318 – OL 2005, ch. 511; ORS 656.262, 656.313, 656.605, 656.622, Enrolled Senate Bill (SB) 119 – OL 2005, ch. 588; ORS 656.268, 656.745, Enrolled SB 172 – OL 2005, ch. 221; ORS 656.325, Enrolled SB 311 – OL 2005, ch. 675; ORS 656.206, 656.268, 656.319, 656.605, 656.319, Enrolled SB 386 – OL 2005, ch.461; ORS 656.260, Enrolled SB 670 – OL 2005, ch. 364

Statutes being Implemented

RULE SUMMARY

Changes directly related to 2005 legislation are marked with asterisks *. Some changes apply only to injuries that occur on or after 1/1/2006. Substantive amendments affect:

- *Hearings on workers' compensation matters currently processed by the Office of Administrative Hearings – moved to the Workers' Compensation Board, for all hearings held on or after January 2, 2006.
- *Independent medical examinations (IME)s – including a worker's right to contest the location of the exam and associated increase to 90 days for the insurer to accept or deny the claim if the worker prevails; penalty to worker for failure to attend; penalty to medical provider for failure to forward diagnostic records to the IME provider; requirement (effective 7/1/2006) for the director to develop a list of medical providers who are authorized to perform IMEs and for all IMEs to be scheduled with a physician on the list.
- *The reporting and processing of aggravation claims;
- Elective surgery notification;
- Types of care that are reimbursable after the worker becomes medically stationary (clarification only);
- *Requirements that managed care organizations submit copies of their treatment standards and protocols to the director for review and approval;
- Closure notice requirements in fatal claims;
- Required procedures when five years of work history are not available;
- Reduced insurer reporting requirements for claims in which workers have no permanent impairment;
- *Permanent total disability – including limitations on benefits if the worker incurs a new injury; criteria for re-examination or reduction; required vocational evaluations and suspension of benefits for failure to attend or non-cooperation; appeals of termination; automatic eligibility for vocational assistance upon termination of permanent total disability (by final order);
- The reconsideration record – video recordings, duplicate records;
- *Penalties upon reconsideration – limitations;
- *Insurer data reporting necessary for the Workers' Compensation Division to assess the impact of legislative changes on permanent partial disability awards;
- *The effect of a regular work release on awards of work disability and social/vocational factors;
- Requirements to round percentages of impairment – hearing and vision no longer taken to the 100th of a percent;
- Rating of impairment for skin disorders – signs and symptoms need not be present upon examination;
- Insurer's notice to employer of policy cancellation to include a statement that the guaranty contract will terminate;
- Insurers' reporting of names or positions of key contacts to the Workers' Compensation Division;
- *The right of self-insured public utilities with assets in excess of \$500 million to obtain excess workers' compensation insurance coverage from an eligible surplus lines insurer;
- *Required training for certified claims examiners on interactions with independent medical exam providers;
- Adjustments – up and down – of insurer claims processing compliance thresholds (affecting penalties);
- *The dollar amount employers can pay for medical services on non-disabling claims;
- *Requirement (effective 7/1/2006) that Worker Requested Medical Examinations be conducted by a medical provider on the list of authorized independent medical examination providers maintained by the director;
- Increase of certain maximum penalty amounts to the \$2,000 statutory maximum;

Certificate and Order for Filing Permanent Administrative Rules

- Eligibility for Preferred Worker Program benefits – workers must be authorized to work in the United States;
- *Reimbursement from the Workers' Benefit Fund of permanent total disability (PTD) payments made by the insurer during an appeal of termination of PTD – if the insurer prevails;
- For the purposes of reimbursement of wage subsidies under the Employer-at-Injury Program, allowance for supplemental documentation to clarify information not fully explained by the payroll record;
- *Provision for direct assistance to workers under ORS 656.622 to promote re-employment;
- *Reimbursement from the Workers' Benefit Fund of the insurer's vocational assistance costs incurred after the insurer appeals an administrative order to provide such assistance (if the insurer prevails);
- Deletion of the penalty matrix for three types of violations of the vocational assistance rules;
- Provision for the director to impose a civil penalty for violation of ORS chapter 656, in addition to violation of rules and orders of the director.

Direct questions to: Fred Bruvns, Rules Coordinator; phone 503-947-7717; fax 503-947-7581; or e-mail fred.h.bruvns@state.or.us. Rules are available on the internet: <http://www.wcd.oregon.gov/policy/rules/rules.html>

For a copy of the rules, contact Publications at 503-947-7627, Fax 503-947-7630.

/s/ John L. Shilts

Authorized Signer

12/5/05

Date

John L. Shilts, Administrator, Workers' Compensation Division

Printed name

*With this original, file one photocopy of certificate, one paper copy of rules listed in Rulemaking Actions, and electronic copy of rules.

**The *Oregon Bulletin* is published on the 1st of each month and updates the rule text found in the Oregon Administrative Rules Compilation. Notice forms must be submitted to the Administrative Rules Unit, Oregon State Archives, 800 Summer Street NE, Salem, Oregon 97310 by 5:00 pm on the 15th day of the preceding month unless this deadline falls on a Saturday, Sunday or legal holiday when Notice forms are accepted until 5:00 pm on the preceding workday.
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