

Changes to PWP processing and benefits

Rule	Description	Summary of change
<p>Employer at injury use of the Preferred Worker Program <u>Job offer</u> OAR 436-110-0290(4)(d)</p>	<p>Previously, the PWP job offer letter was required to include a description of job duties, but did not require that the physical requirements be included.</p>	<p>The job offer letter will need to reference, and be accompanied by, a PWP job description. The existing regular job description template should be used for this purpose, changing the title to “PWP Job Description.”</p>
<p>Premium exemption <u>Division notification</u> OAR 436-110-0325(4)</p>	<p>Previously, in order to qualify for premium exemption the employer was required to notify its insurer within 90 days of eligibility or the date of hire of a preferred worker.</p> <p>Now, the employer must notify the (WCD) division within 90 days of eligibility or the date of hire of a preferred worker.</p>	<p>Employers must provide the preferred worker’s name, the date of hire, and the employer’s information to WCD when requesting premium exemption.</p> <p>Information should be submitted to: Preferred Worker Program, 800.445.3948 or 503.947.7588, or by email PWP.Oregon@oregon.gov</p> <p>If premium exemption is approved, WCD will notify via letter the worker, employer, and insurer.</p> <p>The insurer letter will be alerted to the PWP coordinator to manage the appropriate internal and external (agent) notifications.</p>
<p>Wage subsidy general provisions <u>Reimbursement requests</u> OAR 436-110-0335(9)</p>	<p>Previously, reimbursement requests for wages paid to a preferred worker did not have specific requirements as to what the payroll records must include. The rule simply stated that payroll records be legible.</p> <p>Now the employer must submit specific information when requesting PWP wage subsidy.</p>	<p>New requirements:</p> <p>(a) A completed and signed Form 2968, “Preferred Worker Program Wage Subsidy Reimbursement Request,” must be submitted to the division with a legible copy of the worker’s payroll records.</p> <p>(b) Payroll records must include:</p> <ul style="list-style-type: none"> (A) The date of payment (B) The dates of work covered by the payment (C) The rate or rates of pay (D) Gross wages (E) The regular hourly rate or rates of pay, the number of regular hours worked, and pay for those hours (F) The number of overtime hours worked, if any, and pay for those hours; and (G) The overtime rate or rates of pay <p>(c) All requests for reimbursement must be made within one year of the wage subsidy agreement end date.</p>

<p>Wage subsidy – worker activated OAR 436-110-0337(2)</p>	<p>Previously, the administrative rule did not specify a maximum amount for this reimbursement.</p>	<p>A preferred worker may use the wage subsidy benefit as many times as needed, up to a maximum total reimbursement of \$40,000. A worker with an exceptional disability may use the wage subsidy twice with no maximum total.</p>
<p>Employment purchases <u>Types of purchases</u> OAR 436-110-0345(2)</p>	<p>Purchase benefits associated with the PWP program have increased.</p>	<p>Purchase benefit increases:</p> <ul style="list-style-type: none"> • Tuition, books and fees: \$2,000 • Temporary lodging, meals, and mileage: \$1,000 • Tools and equipment: \$5,000 • Clothing: \$1,000 maximum, each use limited to \$500 • Initiation fees, or back dues and one month’s current dues required by a labor union: \$1,000 • Occupational certification, licenses, and related testing costs, drug screen testing, physical examinations, or membership fees required for the job: \$1,000 maximum, each use limited to \$500 • Worksite creation: \$10,000 maximum, each use limited to \$5,000
<p>Worksite modification – general provisions <u>Conditions for use</u> OAR 436-110-0350(2)(c)</p>	<p>Previously, worksite modifications were limited to a maximum of \$25,000 for each job for employers who are not the employer at injury.</p> <p>The amount has increased to a maximum of \$50,000.</p>	<p>Worksite modifications are now available up to a maximum of \$50,000 for employers who are not the employer at injury. Each use is limited to \$35,000, with a possible increase when the worker has an exceptional disability.</p> <p>An additional \$2,500 may be made available to prevent further injury or exacerbation of the compensable injury or occupational disease.</p>
<p>Worksite modification – Employer-at-injury activated OAR 436-110-0351(2)</p>	<p>Previously, employer-at-injury worksite modifications were limited to a maximum of \$25,000.</p> <p>The amount has increased to a maximum of \$35,000.</p>	<p>Worksite modifications are now available to the employer at injury up to a maximum of \$35,000. A possible increase may be available when the worker has an exceptional disability.</p>
<p>Worksite modification – worker activated OAR 436-110-0352</p>	<p>Previously, a preferred worker had limits on the number of program activations during the three-year eligibility period.</p> <p>Now the worker may use the modification assistance as often as necessary, but only once per employer.</p>	<p>Each use of modification assistance is limited to \$35,000.</p> <p>A worker can use a second worksite modification with the same employer for a new job if a majority of the job duties have changes.</p>

Changes to claim processing

Rule	Description	Summary of change
<p>Insurer participation in the Preferred Worker Program <u>Notice of assistance available</u> OAR 436-110-0240(2)(a)</p>	<p>Previously, insurers were required to provide written notice of the Preferred Worker Program at the time the worker was released to work and/or at the time a CDA was approved.</p> <p>Now, instead of sending the PWP notice once the worker has returned to work, we are required to send it at the time the attending physician declares a worker medically stationary.</p>	<p>Adjusters will need to create an activity for their claims assistant to send the appropriate preferred worker notification upon receipt of the initial med stat declaration from the attending physician.</p>
<p>Insurer participation in the Preferred Worker Program <u>Reporting information to the division</u> OAR 436-110-0240(4)(b)</p>	<p>This rule addresses the time frame an insurer has to provide preferred worker information to WCD. Previously, the insurer had 30 days from “receipt” of certain orders that grant initial permanent disability after the latest opening of the worker’s claim.</p> <p>The time frame is still 30 days, but is measured from the date of the order, not the insurer’s receipt of the order.</p>	<p>This will shorten our time frame to provide preferred worker information to WCD.</p>
<p>Insurer participation in the Preferred Worker Program <u>Reporting information to the division</u> OAR 436-110-0240(4)(c)</p>	<p>Previously, an insurer was required to provide preferred worker information to the department upon approval of a preclosure CDA if permanent restrictions existed and the worker was unable to return to regular work.</p> <p>This requirement has been expanded and will require the insurer to obtain medical information to determine the worker’s permanent work restrictions if not known at the time the CDA was approved.</p>	<p>Adjusters will need to follow-up with the attending physician to obtain permanent work restrictions if not known at the time the CDA was approved.</p> <p>The stated purpose is for the Preferred Worker Program to determine a worker’s eligibility for PWP benefits.</p>