

HB 3467	OAR 436-060-0010
SECTION 1. (1)(a) An employer shall report any claim or accident that may result in a compensable injury claim to the employer's insurer not later than five days after the employer received notice or otherwise knew or should have known of the claim or accident.	(2) Employer reporting time frame. An employer, except a self-insured employer, must report a claim to its insurer no later than five days after the date the employer has notice or knowledge of any claim or accident that may result in a compensable injury. The date an employer has knowledge of an accident that may result in a compensable injury is the earliest date any supervisor or manager of the employer has enough facts to reasonably conclude that workers' compensation liability is a possibility.
(b) Any accident or injury for which the injured worker receives onsite treatment from a medical service provider described in subsection (6)(c) of this section or an emergency medical service provider requires an employer to report to the employer's insurer in accordance with this section.	(No affirmative reporting spelled out, but see below on when reporting is not required)
(4) An employer is not required to report in accordance with this section if the injured worker requires no medical treatment, or only first aid treatment, from a medical service provider.	The employer is not required to notify the insurer of an accident that does not require the worker to seek treatment from a licensed medical service provider, subject to the following: The employer must report the claim to the insurer under section (2) of this rule, if: - The worker chooses to file a claim; - The worker signs a Form 801; - The worker or employer is billed for treatment; or - The employer learns that the injury has resulted in medical services, disability or death. For the purposes of this paragraph, the date of that knowledge under section (2) of this rule is the date the employer received notice or knowledge of the medical services, disability, or death; and
(2) The employer's report shall include: (a) The date, time, cause and nature of the accident or injury. (b) Whether the accident or injury arose out of and in the course of employment.	Reporting requirements. The report must provide the information requested on Form 801, and include at least: - The worker's name and address; - The employer's legal name and address; and - The date, time, cause and nature of the accident and injuries (ORS 656.262) - Whether the accident arose out of and in the course of employment (ORS 656.262)

<p>(c) Whether the employer recommends or opposes acceptance of the claim, and the reasons for the employer’s recommendation or opposition.</p> <p>(d) The name and address of any health insurance provider for the injured worker.</p> <p>(e) Any other details the insurer may require.</p>	<p>- Whether the employer recommends or opposes acceptance of the claim, and the reasons therefor. (ORS 656.262)</p> <p>- The name and address of any health insurance provider for the injured worker. (ORS 656.262)</p> <p>- Any other details the insurer may require. (ORS 656.262)</p>
<p>(3) Failure to report in accordance with this section subjects the offending employer to a charge for reimbursing the insurer for any penalty the insurer is required to pay under ORS 656.262 (11) because of the failure.</p>	<p>(5) Civil penalty for failure to report claims. The director may assess a civil penalty under OAR 436-060-0200 (Assessment of Civil Penalties) against an employer that:</p> <p>Is late in reporting more than ten percent of its total claims to its insurer during any quarter; or</p> <p>Intentionally or repeatedly pays compensation instead of reporting claims or accidents that may result in a compensable injury to its insurer.</p>
<p>(5) An employer shall inform an injured worker that:</p> <p>(a) The injured worker may seek medical treatment for the accident or injury from a medical service provider of the worker’s choice;</p> <p>(b) The injured worker has the right to file a claim for workers’ compensation; and</p> <p>(c) The injured worker’s choice of medical service provider and right to file a claim for worker’s compensation are protected under ORS 659A.040.</p>	<p>(6) Worker’s right to choose medical service provider. The worker may choose a medical service provider, attending physician or authorized nurse practitioner under <u>ORS 656.245 (Medical services to be provided), 656.260 (Certification procedure for managed health care provider), OAR 436-010 and 436-015.</u> Except as provided under <u>ORS 656.260 (Certification procedure for managed health care provider)</u> and OAR 436-015, if an employer restricts the worker’s choice of medical service provider the director may impose a civil penalty of up to \$2,000.</p>

First Aid

HB 3467	OAR 436-060-0010	Removed in 2017: OAR 436-060-0010(4)
<p>“(4) An employer is not required to report in accordance with this section if the injured worker requires no medical treatment, or only first aid treatment, from a medical service provider.”</p>	<p>“The employer is not required to notify the insurer of an accident that does not require the worker to seek treatment from a licensed medical service provider”</p> <p>→ Implies that first aid treatment from a medical service provider would need to be reported</p>	<p>“If an injured worker requires only first aid, no notice need be given the insurer, unless the worker chooses to file a claim.”</p>

<p>“(a) “First aid” means medical treatment that:</p> <p>(A) Requires an injured worker to be away from work for less than an hour; and</p> <p>(B) Does not require an injured worker to seek medical treatment for the same accident or injury more than once.”</p>		<p>“(4) For the purpose of this section, “first aid” means any treatment provided by a person who does not require a license in order to provide the service.”</p>
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