



Oregon

Theodore R. Kulongoski, Governor

Department of Consumer and Business Services
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BULLETIN NO. 162 (Rev.)

May 28, 2009

TO: Workers' compensation insurers

SUBJECT: Oregon workers' compensation proof of coverage (Guaranty Contract)

EFFECTIVE: Immediately

This bulletin provides forms for the notification and filing of workers' compensation coverage information for policies with coverage effective before July 1, 2009. This bulletin replaces Bulletin 162 dated Dec. 18, 2007.

Insurers may only use these forms to make changes to guaranty contracts filed for policies effective before July 1, 2009. For all policies effective on or after July 1, 2009, insurers must report workers' compensation proof of coverage information via electronic data interchange (EDI) under OAR 436-160 [renumbered as OAR 436-162, eff. 1/1/11].

1. Guaranty Contract – Form 440-821

An insurer must file a guaranty contract with the Workers' Compensation Division for policies with coverage effective before July 1, 2009 according to ORS 656.419 and OAR 436-050-0060. Insurers must use Form 821 unless the insurer has received approval from the division to report electronically under OAR 436-160 [renumbered as OAR 436-162, eff. 1/1/11].

2. Guaranty Contract Endorsement – Form 440-3215

An insurer may change information on a guaranty contract, except for a change in legal entity or a change in insurance carrier, by filing an endorsement to the guaranty contract (OAR 436-160-0350) [renumbered as OAR 436-162-0350, eff. 1/1/11]. Insurers may use the attached sample Form 3215 or develop their own endorsement form.

3. Termination of a Guaranty Contract – Form 440-3216

An insurer may terminate liability on its guaranty contract by giving notice as provided under ORS 656.427 and OAR 436-160-0360 [renumbered as OAR 436-162-0360, eff. 1/1/11]. Insurers may use the attached sample Form 3216 or develop their own form for the director's notice.

4. Guaranty Contract Reinstatement Notice – Form 440-3217

An insurer may reinstate its guaranty contract as provided under OAR 436-160-0350 [renumbered as OAR 436-162-0350, eff. 1/1/11] *if coverage has not lapsed and the policy is for coverage effective before July 1, 2009*. Insurers may use the attached sample Form 3217 or develop their own reinstatement notice. If submitting data to the division electronically, follow instructions in OAR 436-160-0350 [renumbered as OAR 436-162-0350, eff. 1/1/11]. If the coverage period has lapsed and the policy is for coverage effective before July 1, 2009, the insurer must file a new guaranty contract.

If you have questions about this bulletin or the attached forms, call 503-947-7810 or send an e-mail request to wcd.employerinfo@state.or.us.

/s/ Jerry Managhan for

John L. Shilts, Administrator
Workers' Compensation Division

Attachments: Form 440-821 (Rev. 5/09)
Form 440-3215 (Rev. 3/04)
Form 440-3216 (Rev. 3/04)
Form 440-3217 (Rev. 7/03)

Distribution: WCD-BT, S0, S2, LY