



BULLETIN NO. 307 (Revised) May 28, 2024

TO: Health care providers, workers' compensation insurers, self-insured employers, service companies, and other interested parties

SUBJECT: Revised Spanish translation, Form 827s

EFFECTIVE: June 6, 2024

This bulletin provides a revised Spanish version of Form 827, "Worker's and Health Care Provider's Report for Workers' Compensation Claims." The division is republishing this bulletin to provide revised forms 827s and 3283s (the last page of Form 827s). We revised the forms to change the term "physician assistant" to "physician associate," as a result of House Bill 4010 (effective June 6, 2024). No other substantive changes have been made to the forms. This bulletin replaces Bulletin No. 307 dated Aug. 24, 2022.

In order to efficiently use state resources and limited funds, the division will use existing supplies of Form 827s on hand to fill orders from health care providers. We encourage providers to use existing supplies of Form 827s before reordering.

Please give this form to workers who may prefer the Spanish version. Use Form 827s in the same way as the English 827. See OAR 436-010-0240 and Bulletin 292.

You can download Form 827s from the division's website: <u>http://wcd.oregon.gov/forms/Pages/forms.aspx</u>, or you can order supplies of the carbonless multi-part form from the division by calling 503-947-7627 or ordering online: <u>https://wcd.oregon.gov/Pages/publication-order-form.aspx</u>.

If you have questions, please contact a benefit consultant by email, workcomp.questions@dcbs.oregon.gov, or phone, 800-452-0288 (toll-free).

Matt West, Interim Administrator Workers' Compensation Division

Attachment: Form 827s (Rev. 6/24 tr 6/24)

Distribution: WCD-LY, GovDelivery electronic mailing lists

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