



Oregon

Kate Brown, Governor

Department of Consumer and Business Services
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Bulletin No. 139 May 22, 2015

To: Workers' compensation insurers and self-insured employers
Subject: Claim closure
Effective: May 21, 2015

This bulletin provides forms required for closing a workers' compensation claim under ORS 656.268, OAR 436-030, OAR 436-035, and OAR 436-060. The Workers' Compensation Division is issuing this bulletin to include on the Notice of Closure forms (1644, 1644c, 1644r) the rights of beneficiaries to request reconsideration under Enrolled Senate Bill 371 (2015). Other changes have also been made for clarity and consistency. This bulletin replaces Amended Bulletin No. 139 dated Nov. 16, 2009.

SB 371 applies to all notices of closure issued on or after May 21, 2015. To comply with the law changes, insurers and self-insured employers should use the revised forms for all claims closed on or after May 21, 2015.

Forms for closing a claim are:

- 1644, "Notice of Closure"
- 1644c, "Correcting Notice of Closure"
- 1644p, "Notice of Closure, Permanent Total Disability Reduction"
- 1644r, "Rescinding Notice of Closure"
- 2807, "Notice of Closure Worksheet (Dates of injury prior to Jan. 1, 2005)"
- 2807a, "Notice of Closure Worksheet (Dates of injury on or after Jan. 1, 2005)"
- 1503, "Insurer Notice of Closure Summary"

Required forms and formats

You must use these forms when closing disabling claims. Definitions of terms and general instructions for completing the forms are on the back of some forms.

You may duplicate the forms or download the Microsoft Word® forms from the Workers' Compensation Division's website at: <http://wcd.oregon.gov/forms/Pages/forms.aspx>.

Additional resources:

You may download the following resources from the Workers' Compensation Division's website: <http://wcd.oregon.gov/forms/Pages/bulletins.aspx>:

- Conversion from Percent to Degrees of Disability (chart)
- PPD Benefits (chart, also in Bulletin 111)

- Combining Impairment Values (chart)
- Impairment Combining Calculator (Microsoft Excel®, Excel 97 or later version), *electronic only*
- Body Part Charts (for dates of injury prior to Jan. 1, 2005 and on or after Jan. 1, 2005)

The Federal Poverty Guidelines applicable to Oregon residents for a family of three is accessible at: www.aspe.hhs.gov/poverty/.

If you have questions about this bulletin, contact the Workers' Compensation Division, 350 Winter St. NE, P.O. Box 14480, Salem, Oregon 97309-0405, or call 503-947-7585.

/s/ John L. Shilts

John L. Shilts, Administrator
Workers' Compensation Division

Attachments: Form 440-1644, "Notice of Closure" (Rev. 5/15)
Form 440-1644c, "Correcting Notice of Closure" (Rev. 5/15)
Form 440-1644p, "Notice of Closure, Permanent Total Disability Reduction" (Rev. 1/10)
Form 440-1644r, "Rescinding Notice of Closure" (Rev. 5/15)
Form 440-2807, "Notice of Closure Worksheet (DOI prior to Jan. 1, 2005)" (Rev. 1/10)
Form 440-2807a, "Notice of Closure Worksheet (DOI on or after Jan. 1, 2005)" (Rev. 1/10)
Form 440-1503, "Insurer Notice of Closure Summary" (Rev. 1/10)

Distribution: WCD-LY, PD8903 (insurers), PD8913 (TPAs), electronic mailing lists