Workers' Compensation Division
Department of Consumer and Business Services

Preferred Worker Program
Placement Payment Request

See OAR 436-110-0345(4) for more information. If you have questions or need more help, contact the Preferred Worker Program by phone 503-947-7588 or 800-445-3948 (toll-free); fax 503-947-7581.

Worker name: _____
WCD no.: _____
Person completing form: _____
Phone: _____
Fax: _____

Counselor/contractor name: _____
Federal Tax ID no. _____
Mailing address: _____
City, state, ZIP: _____

Instructions (see page 2 for helpful information)

1) Refer to the Placement Assistance Agreement for relevant information.
2) Attach a legible, detailed invoice for services provided.
3) List travel time as a separate line item.
4) All requests must be made within one year of end date of Placement Assistance Agreement.
5) Fax a copy of this request and all supporting documents to 503-947-7581, or mail to Preferred Worker Program, Workers' Compensation Division, P.O. Box 14480, Salem, OR 97309-0405.

I am requesting payment for the following services provided:

☐ Placement assistance services listed on the attached invoice

☐ Employment placement $500 (subject to verification)

☐ 30-day employment retention incentive $500 (subject to verification)

If request is for employment placement payment or 30-day employment retention incentive payment, provide the following:

Hire date: _____

Employer name: _____

Contact person: _____

Phone number: _____

By my signature, I agree that the above information and supplemental documentation is correct to the best of my knowledge.

Counselor/contractor signature	**Certification no., if applicable**	**Date**

How do I get paid?

There is an end date listed at the bottom of the Placement Assistance Agreement. You must request all of your reimbursements no later than one year after that end date.

Invoices submitted for placement assistance services must include specific services provided and time spent working directly with the worker. Travel time must be listed separately.

Payment for placement assistance services are based on a billable hourly rate of $85. Payment for travel is $42.50 per hour.

The 30-day employment retention incentive payment only applies if the worker maintains employment for 30 or more days with the same employer where the job placement was made.

The Workers' Compensation Division will verify the services provided, hire date, and employer eligibility. The more complete the information you provide, the quicker payment can be made.

You may submit all requests and documentation by fax to 503-947-7581, or mail to:

Preferred Worker Program
Workers' Compensation Division
P.O. Box 14480
Salem OR 97309-0405