

Workers' Compensation Consent and Agreement

Client/customer:	Prime number:	Program:
Employer of record:	Employer of record's phone number:	

About workers' compensation

Workers' compensation is a special kind of insurance that helps people who get hurt at work. Most employers provide workers' compensation for people who work for them. Although you are the employer of your personal support worker, the Oregon Home Care Commission (OHCC) will provide workers' compensation insurance for your worker, beginning January 2011*.

Note: Your employees may also be called "personal support workers" or "domestic employees."

What consent means

When you sign this paper, the OHCC may do certain things. If your worker gets hurt while helping you, the OHCC may:

- Process a workers' compensation claim;
- Fill out forms; and or
- Complete other requirements.

Signing this also means you will talk with the OHCC and/or the insurance company to find out what happened when your worker was hurt. This will help decide if the insurance will pay for your worker's injury claim. Not all claims are approved.

Please read the following carefully. If you have any questions, please talk with your personal agent or case manager.

Your duties

If your personal support worker is hurt while helping you, call your case manager or personal agent as soon as possible to talk to them about the injury.

*See ORS 656.039 9(5)(a)

Client/customer agreement

I understand and agree to the statements below:

1. The OHCC will:
 - Get workers' compensation insurance coverage for my worker(s), and;
 - Handle all parts of any claim if my worker(s) are hurt while working for me.
2. I agree to cooperate with the OHCC and the designated workers' compensation insurance carrier, SAIF.
3. I agree to be interviewed by the:
 - OHCC;
 - SAIF; and
 - Others about my worker(s) injury if she or he is hurt while working for me.

Note: Your employees may also be called "personal support workers" or "domestic employees."

Sign below

Client/customer/representative

Date

Guardian

Date

Employer of record

Date

For office use only

Client/customer name:

Prime number:

Program: