

## PORTLAND PUBLIC SCHOOLS RISK MANAGEMENT

501 North Dixon Street • Portland, OR 97227 Mailing Address: P.O. Box 3107 • Portland, OR 97208-3107 (503) 916-2000 • Fax: (503) 916-3233

Dear Authorized Medical Provider,

If you have received this notice, a Portland Public Schools employee is seeing you for a potential work-related injury or illness. Our legal name is Multnomah County School District # 1J. Portland Public Schools is self-insured, and we contract with a third-party administrator to handle our Workers' Compensation claims.

## **Employer Contact:**

Portland Public Schools Attn: Risk Management Department PO Box 3107 Portland, OR 97208-3107

Phone: (503) 916-3105 or (503) 916-3703

Fax: (503) 916-3233

## TPA Contact (Effective April 1, 2017):

CorVel Corporation PO Box 230608 Portland, OR 97281-0608

Phone: (503) 501-5560 Fax: (866) 734-3599

## **Return-to-Work Policy:**

- Whenever possible, Portland Public Schools will provide modified duty/transitional tasks to employees who have suffered a work-related injury and are temporarily unable to perform their regular job duties.
- Please consider using the State of Oregon's "Release to Return to Work" form, # 440-3245. Employees have access to this form on our website.
- Immediately following each appointment, please fax an updated work status report to PPS Risk Management at (503) 916-3233.

Thank you for your time and assistance. Feel free to contact our office with any questions.