



Employer –At- Injury Program (EAIP)

Equipment Purchase Request/Form

Employer/Member Information

Date of Request: _____

Member Name:		Member Account #:	
Member Contact:		Phone #:	
Mailing Address:			
City/State/Zip Code:			

Worker/Employee Information

Employee Name:		Date of Injury:	
Claim #:		Social Security Number:	
Regular Job Title:		Modified-Transitional Job Title:	
Modified-Transitional Start Date:		Modified-Transitional End Date:	
Describe Regular Job/Duties:			
Describe Modified-Transitional Job/Duties:			

Equipment Purchase Information (EAIP purchases are separated into two categories)

- (A) Worksite Modifications – equipment program must explain how the purchase enabled the injured worker to work within their modified limitations.
- (B) Return-To-Work- Purchases – tuition/books, clothing, tools and fees must be proven that the purchase is required for the modified job and that anyone would need the item to do the job regardless of the limitations.

Type (A) or (B)	Make	Model	Vendor	Description	Item Cost

Totals: A = \$ _____ B = \$ _____

Employer/Member Signature: _____ Date: _____

Completed by EPRM

Total Allowed: \$ _____

EPRM Signature of Approval: _____

Date of Approval: _____

Purchase and Worksite Modification Checklist

Eligibility Requirement for the Employer-A-Injury-Program

1. Verify that Employer-At-Injury-Program eligibility requirements are met
 - Employee/Worker – Must have an accepted or deferred Oregon workers' compensation claim
 - Employer/Member – Employer at the time of injury and must be re-employing the eligible employee while the workers' claim is open
2. Qualifying medical release
 - A medical release that states the employee's specific restrictions; or
 - A statement by the medical service provider that indicates the employee is not released to regular work accompanied by an approval of a job description, which includes the job duties and physical demands required for the modified-transitional work.
3. Employee must comply within work restrictions
4. The purchase is reasonable, practical, or feasible
5. Verify all purchases have been ordered during the eligible EAIP period
 - (A) Worksite Modifications: Worksite modification means altering a work site by renting, purchasing, modifying or supplementing equipment to enable an employee to perform the modified-transitional work within the employee's limitations. Worksite modification becomes the employer's property upon the end of the EAIP program.
 - (B) Return-To-Work Purchases: Required for the modified –transitional job and not normally provided by the employer. It is not specific to injured employee's restrictions or limitations. Other employees would need the item to do the job. The purchases become the employer's property upon the end of the EAIP program.
6. Items to include with your completed form:
 - Qualifying medical release(s) per OAR436-105-0500 (5) (b) (A) (B)
 - The written acceptance by the employee when skills building is the modified-transitional work OAR 436-105-0500(7)(h).
 - Itemized invoices and/or receipt showing proof of payment, proof of the order date, and proof of the delivery date for all purchases.
 - If the medical service provider gave an hour restriction, time cards showing employee complied must be provided.

Note: EPRM and/or the Workers' Compensation Division has the discretion to deny any reimbursement it determines is not reasonable, practical, or feasible or considers an abuse of the program. Purchases are not guaranteed for reimbursement.