



Oklahoma School Assurance Group

Attached is a sample *Employer Light/Modified Duty Letter* to use as a guide in assisting to create a school-specific letter of this type. The law helps an employer who offers this accommodation, based on the treating physician's temporary restrictions, to an employee who does not report for the light/modified duty by allowing temporary total disability benefits (TTD) payments to stop. The Workers' Compensation Courts have confirmed this is in accordance with the law.

You will notice it recommends a limited timeframe for the offer. By offering "up to" 120 days, it provides the school district with an out if the employee is released back to full duty by the physician, or if the school district encounters problems with the arrangement and chooses to end the light/modified duty job. The main objective is to prohibit the light/modified duty job from turning into a permanent job.

If your attorney recommends a different letter, defer to it as this is simply meant to be a guide.

Be sure to always provide a copy to your claims adjuster. If you have questions about the light duty letter, call your claims adjuster for assistance.

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Language to include in your letters of light duty offers.

Subject Line: Offer of light duty employment and Notice of Termination of Temporary Total Disability Benefit Payments

Dear Injured Worker:

Enclosed please find a copy of (insert treating physician's name and date of medical report) which finds that you are capable of returning to light duty work with the following restrictions:

(list restrictions here)

Please be advised that we do have a light duty job available, which is within the above restrictions of Dr. _____ which will be **-Insert the job the claimant will be doing here if known. -** This light duty job will be effective up to 120 days in duration from the start date in this letter. You are thereby directed to return to work **- list where they should report, date to report by, and if they should report to any particular person -** Refusal to appear for work by **List date claimant is expected to return to work.** will result in the termination from employment *(if this applies to your company, insert your company policy here regarding failure to report for work or leave out if not applicable)* and your temporary total disability (TTD) benefits will stop **fifteen (15) days after the date of this notice.** *(This part is mandatory and must be in the light duty letter).*

Signed:

Sample letter

September 2, 2015

John Brown
Address

RE: Offer of Light duty employment and Notice of Termination of TTD

Dear Mr. Brown:

Enclosed please find a copy of Dr. Smith's report dated, September 1, 2015, which finds that you are capable of returning to light duty work with the following restrictions: No overhead lifting and no lifting greater than 15 pounds.

Please be advised that we do have a light duty job available, which is within the above restrictions of Dr. Smith, which will be working in the office, answering the phone and other office work. This light duty job will be effective up to 120 days in duration from the start date in this letter. You are thereby directed to return to work at our office located at, 2130 North Jones Street, on or before September 6, 2015. Please report to Susan Lange upon your arrival.

Please be aware that your temporary total disability (TTD) benefits will stop fifteen (15) days after the date of this notice, or on September 17, 2015.

Please contact me immediately if you have any questions or need additional information regarding this notice.

Signed: