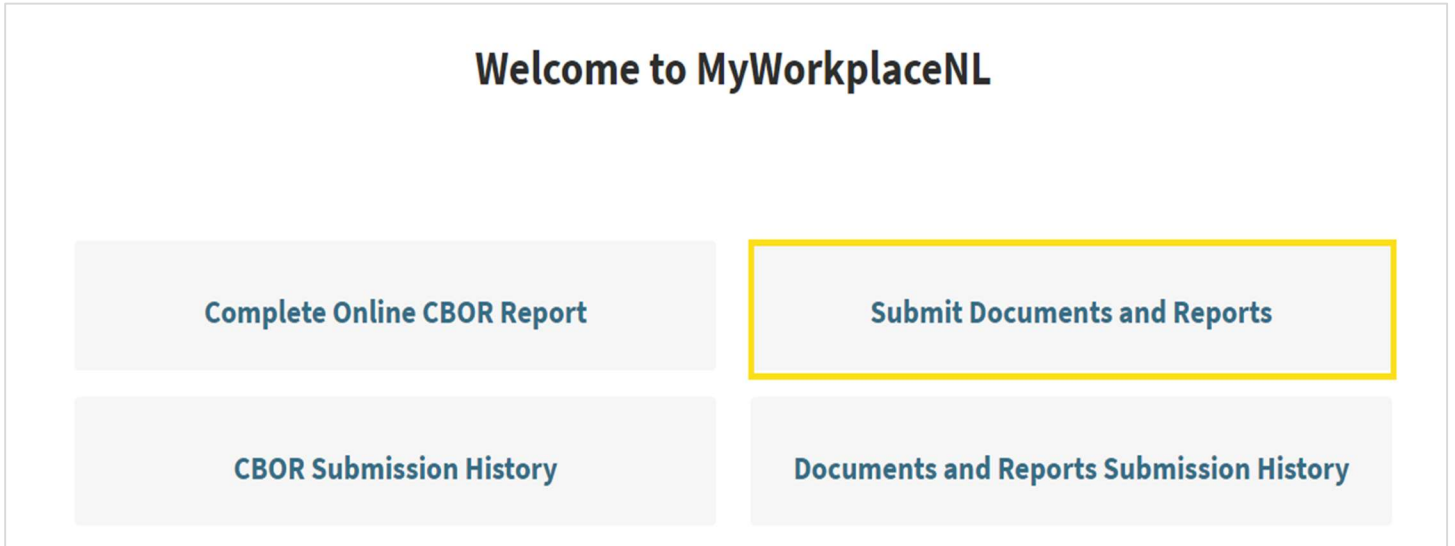
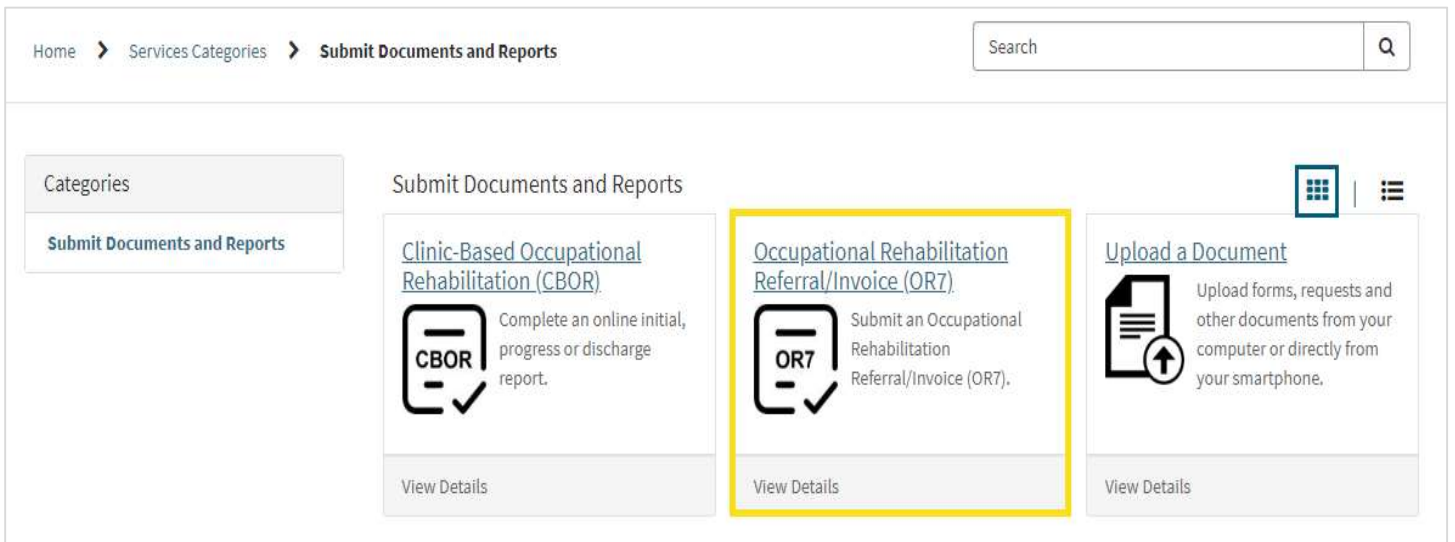


Submitting an Occupational Rehabilitation Referral/Invoice (OR7)

To submit an Occupational Rehabilitation Referral/Invoice (OR7), log in to MyWorkplaceNL and select **Submit Documents and Reports** from the landing page.



Select **Occupational Rehabilitation Referral/Invoice (OR7)**.



To begin, complete the **Client Information** section. Consult the faxed Occupational Rehabilitation Referral/Invoice (OR7) from WorkplaceNL for the Purchase Order (P.O.) referral information you will need to complete this section.


Home > Services Categories > Submit Documents and Reports >

Search Q

Occupational Rehabilitation Referral/Invoice (OR7)

Occupational Rehabilitation Referral/Invoice (OR7)

Submit an Occupational Rehabilitation Referral/Invoice (OR7).



Complete an Occupational Rehabilitation Referral Invoice (Form OR7) whenever a service is completed for an injured worker to initiate payment and draw down on an existing Purchase Order.

Partially completed Referral Invoices are automatically saved for 48 hours. To retrieve, return to this page and select "OK" when asked if you wish to continue using a previous incomplete form.

Submit

Required information

- Last name
- First name
- Claim number
- Invoice number
- Vendor name
- Vendor number
- Total invoice amount

* Indicates required

Client Information

* Last name

* First name

* Claim number

* Invoice number

* Invoice date

* Vendor name

* Vendor number

Case manager

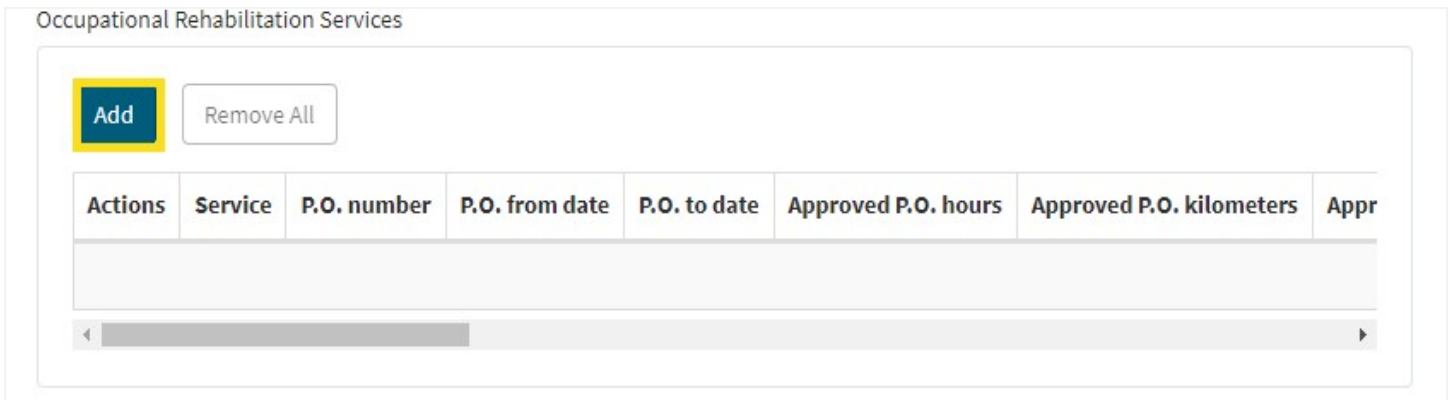
Phone number

Note: The Occupational Rehabilitation Referral/Invoice (OR7) has the **Save and Recall** feature available for partially completed Referral/Invoices for up to 48 hours.

To retrieve a partially completed Referral/Invoice, select **OK** when you return to this page.

Continue using previous incomplete form?

Next, to add the Occupational Rehabilitation Services to your Referral/Invoice, click **Add**.

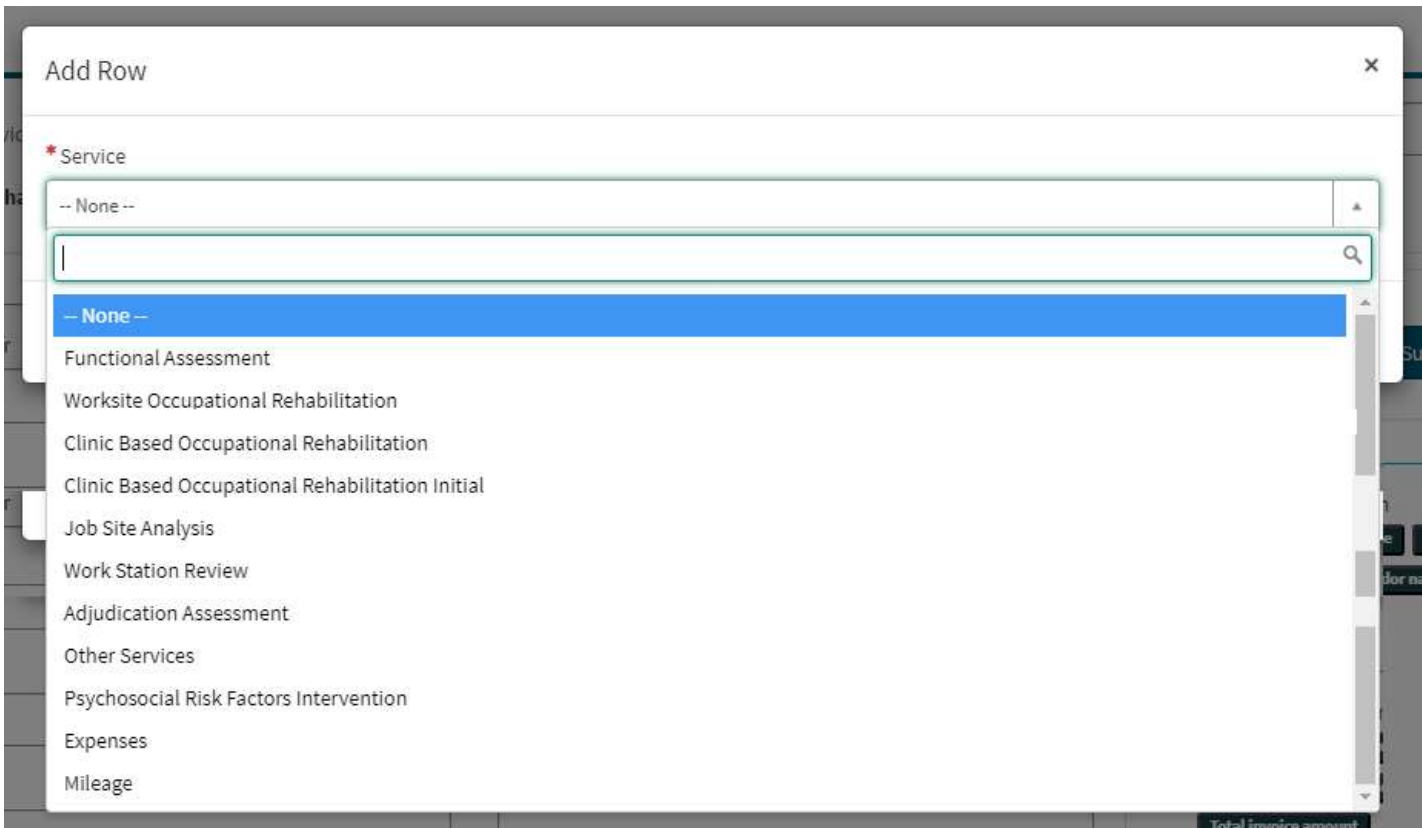


The screenshot shows a table titled "Occupational Rehabilitation Services". At the top left, there are two buttons: "Add" (highlighted with a yellow border) and "Remove All". Below the buttons is a table with the following columns: "Actions", "Service", "P.O. number", "P.O. from date", "P.O. to date", "Approved P.O. hours", "Approved P.O. kilometers", and "Appr". The table body is currently empty, and a horizontal scrollbar is visible at the bottom.

In the **Add Row** pop-up box, select the **Service** rendered from the drop-down list.

The relevant fields for the selected service will appear. Complete the fields and click **Add**.

To submit multiple services on the Referral/Invoice, repeat the steps above.



The screenshot shows the "Add Row" pop-up box. At the top, it says "Add Row" with a close button (X). Below that, there is a field labeled "* Service" with a dropdown menu. The dropdown menu is open, showing a search bar and a list of services. The services listed are: "-- None --", "Functional Assessment", "Worksite Occupational Rehabilitation", "Clinic Based Occupational Rehabilitation", "Clinic Based Occupational Rehabilitation Initial", "Job Site Analysis", "Work Station Review", "Adjudication Assessment", "Other Services", "Psychosocial Risk Factors Intervention", "Expenses", and "Mileage". The "Functional Assessment" option is currently selected and highlighted in blue. At the bottom right of the pop-up, there is a label "Total invoice amount".

The service entered will display in the **Occupational Rehabilitation Services** summary table.

To edit or delete a row, in the **Actions** column select the pencil icon to edit the service rendered information or the X icon to delete the row.

When all services rendered are entered in the summary table, enter the **Total invoice amount**.

If receipts are required to be attached, click the **Add Attachments** button. You will be prompted to browse to the attachment to be added. Select it by clicking on it, then click **Open**. The attachment will appear at the bottom of the **Attachments** section. To edit the attachment name, select the pencil icon. Select the X icon to remove it.

To retain a copy of your Referral/Invoice, right click to display your browser's print options before submitting. Then, click **Submit**.

Occupational Rehabilitation Services

Add Remove All

Actions	Service	P.O. number	P.O. from date	P.O. to date	Approved P.O. hours	Approved P.O. kilometers	#
	Functional Assessment	3456742	2024-07-29	2024-08-02	12		

* Total invoice amount

Acceptable attachment file types: PDF, JPG, and JPEG
Maximum file upload: 50 MB, with a limit of 10 attachments per submission.

Attachments

Drop files here
or
Add attachments

Receipt.pdf (385.7 KB)
1m ago

Submit

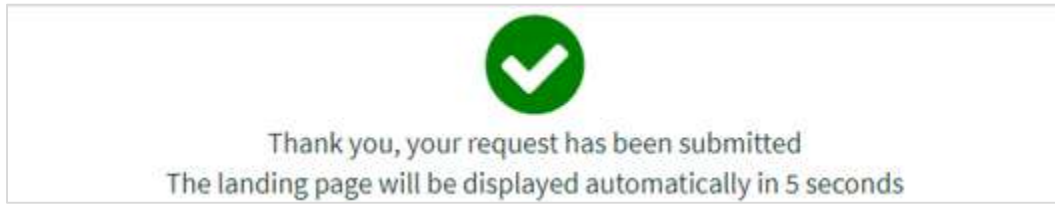
Does your submission include an accommodation expense?

Receipts must be attached if you are billing for an accommodation expense. If you forget to attach your accommodation receipts prior to clicking the submit button, you will receive a system reminder to attach receipts.

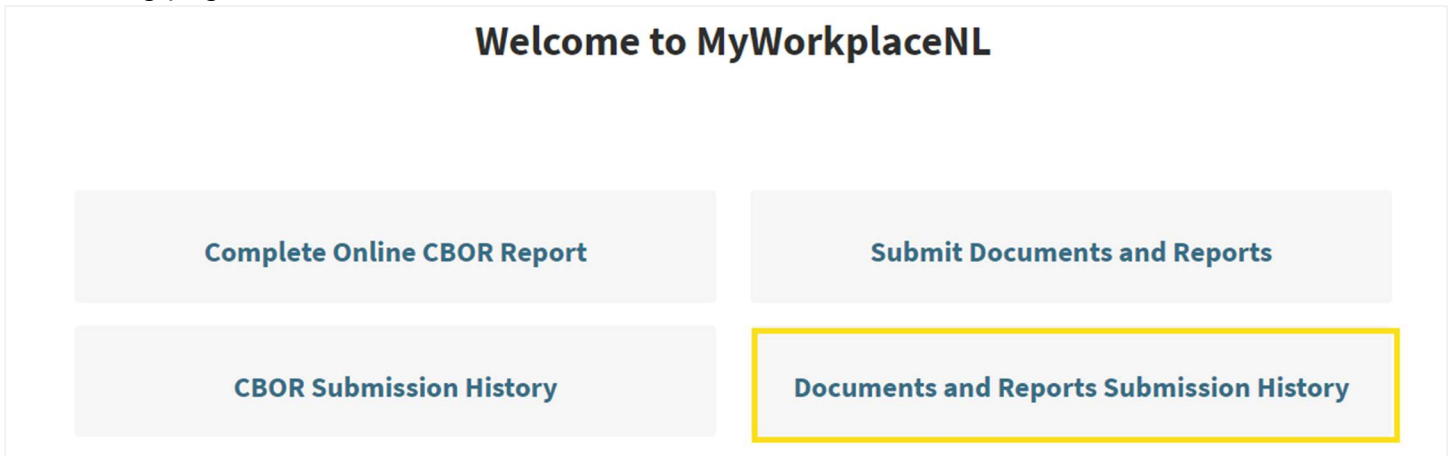
Receipts must be attached

OK

Upon submission, a confirmation screen will display and you are then redirected to the landing page.



You can view a list of all documents uploaded to WorkplaceNL, including the Occupational Rehabilitation Referral Invoice (OR7) by selecting **Documents and Reports Submission History** on the landing page.



A list of documents successfully submitted to WorkplaceNL, including the Occupational Rehabilitation Referral Invoice (OR7), will display and include reference information about the submitted document.

Home > Requests

Forms listed below have been successfully received by WorkplaceNL. Please do not resubmit by mail, email or fax.

My Submissions

Number	Short description	Created
RITM0021546	Occupational Rehabilitation Referral/Invoice (OR7) - Nickle, Back	2024-08-21 03:54:54 PM
RITM0021545	Occupational Rehabilitation Referral/Invoice (OR7) - Shania, Twain	2024-08-21 03:52:36 PM
RITM0021515	Upload a Document - Nickle, Back Type: Functional Assessment	2024-05-24 01:24:45 PM
RITM0021514	Upload a Document - Shania, Twain Type: Work Station Review	2024-05-24 01:23:53 PM
RITM0021513	Upload a Document - Nickle, Back Type: Job Site Analysis	2024-05-24 01:23:07 PM

< 1 2 3 > Rows 1 - 10 of 29

If you have questions or require assistance with submitting an Occupational Rehabilitation Referral Invoice (OR7), contact us by calling 1.800.563.9000, or email us at info@workplacenl.ca