



**Instructions**

Complete this form or an equivalent form for every offer of transitional work made to an employee who returns to work with restrictions with a date of injury during the bonus period. Submit the completed form to your managed care organization (MCO). Use the MCO fax number below.

Managed care organization	Phone number	Fax number	Email address
Minute Men OhioComp	216-426-0651	888-644-7339	<a href="mailto:10041-1-888-ohiocomp@exchange.state.oh.us">10041-1-888-ohiocomp@exchange.state.oh.us</a>
3-HAB	800-869-1871 x3206	513-985-1381	<a href="mailto:info@3hab.com">info@3hab.com</a>
Ault Comp MCO Inc.	330-830-4900	877-738-0058	<a href="mailto:aultcompmco@aultcompmco.com">aultcompmco@aultcompmco.com</a>
Sedgwick MCO		888-627-0074	<a href="mailto:Injury_incident@sedgwickmco.com">Injury_incident@sedgwickmco.com</a>
CorVel Ohio MCO, Inc.		877-677-6756	
GENEX Care for Ohio		888-275-9719	<a href="mailto:genexcareforohio@genexservices.com">genexcareforohio@genexservices.com</a>
ProMedica Medical Management	614-799-0869	888-303-6294	
Occupational Health Link	614-825-1459	888-240-6381	
Sheakley UniComp	513-618-1249	888-626-2667	<a href="mailto:mco@sheakley.com">mco@sheakley.com</a>
Spooner Medical Administrators, Inc.	440-899-2411	800-542-9480	<a href="mailto:clientservices@spoonermai.com">clientservices@spoonermai.com</a>