VIRGINIA WORKERS' COMPENSATION COMMISSION



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WELCOME



Welcome to the Virginia Workers' Compensation Commission's WebFile application.

WebFile allows all EDI Filers to view and manage their portfolio of claims. Claim administrators may view claim history, review accepted transactions, and upload relevant documents such as Agreement Forms and 20-Day Order Responses.

WebFile has been set up to facilitate, through an organization's Site Administrator and its Claim Managers, the assignment and administration of an organization's full set of claims.

This WebFile Guide for Claim Administrators contains all the information and instructions needed to take full advantage of the claim-management functions in this web-based tool.

While the guide may be printed, it is recommended that the guide be utilized electronically due to updates and revisions.

Questions regarding WebFile processes should be directed to the Commission at 1-877-664-2566 or <u>webfile.support@workcomp.virginia.gov</u>.

WebFile ACRONYMS

The following terms are up	sed throughout this c	wide and within the	- WebFile system
	. /	/	/

CA	Claim Administrator	Carrier, third party administrator, or self-insured party which manages workers compensation claims
EDI	Electronic Data Interchange	A general term used to describe the method and standards for transferring data via electronic transmission; VWC follows IAIABC Release 3.0 EDI standards for accepting claim data
FEIN	Federal Employer Identification Number	A business IJS Federal Tax ID. The FEIN is a primary data element used to link parties to claims data in WebFile
FROI	First Report of Injury	Claim record submitted to the VWC in accordance with First Report of Injury requirements
SROI	Subsequent Report of Injury	Claim report submitted to the VWC describing subsequent transactions, such as a payment, suspension, denial, etc.
JCN	Jurisdiction Claim Number	A unique identifier assigned to a claim by the VWC once a FROI submission has been accepted
VWC	Virginia Workers Compensation Commission	The state agency which administers the Virginia Workers' Compensation Act

WebFile ACCESS

The WebFile system is set up with two levels of permissions. Review the descriptions below to determine which access role applies to you.

CLAIM ADMINISTRATOR

Claim Administrator is an organization which is recognized by the Commission as legally able to access and view, Workers' Compensation Claim records. A Claim Administrator may be an Insurance Carrier, Third Party Administrator, or a Self-Insured Employer. Self-Administered entities act as their own Claim Administrator (organization).

- i At least one member of the Claim Administrator organization must serve as a Site Administrator.
- i Employees of the Claim Administrator's organization are "users" under the Claim Administrator's account.

WebFile profiles set up as Claim Administrators are able to:

- ✓ Access and view claim records via WebFile
- ✓ Upload relevant documentation
- ✓ Submit relevant Web Forms

SITE ADMINISTRATOR

The WebFile Site Administrator is an employee of an approved Claim Administrator who is accountable for managing access to the Commission's WebFile system.

The responsibilities of the Site Administrator include:

- ✓ Manage all access requests from within own organization, and agree not to grant access to non-employees (access requests from third parties must be managed by the approved Site Administrator from each organization desiring access).
- ✓ Manage the user list (add, delete, modify), including password resets.
- Communicate with the Commission to ensure current WebFile access matches approvals granted by Site Administrator.
- Serve as the primary point-of-contact between the Commission and own organization on all matters related to WebFile.
- ✓ Designate a backup Site Administrator.
- Use the Commission's dedicated e-mail channel, <u>WebFile.Support@workcomp.virginia.gov</u>, as the means to send questions and comments related to WebFile.

REQUESTING ACCESS

If you need to be set up as a Site Administrator, send an e-mail to <u>WebFile.Support@workcomp.virginia.gov</u> and include the following information:

- i Justification for request
- i E-mail address
- i Your first and last name
- i Your phone number
- i List of Claim Administrator FEINs on whose behalf you will be submitting claims (this list must match the FEINs submitted on your EDI Trading Partner documents)

WebFile SUPPORT

All Claim Administrator WebFile users are required to contact their organization's WebFile Site Administrator for support requests. The WebFile Site Administrator can provide support to users for the following needs:

- i WebFile account creation and updates
- i WebFile password resets
- i WebFile Manager role configuration

WebFile Site Administrators may contact the Commission for WebFile support by emailing <u>WebFile.Support@workcomp.virginia.gov</u>.

Claim Administrators may contact the Commission for EDI-related support by emailing <u>EDI.Support@workcomp.virginia.gov</u>.



Within **WebFile**, names and addresses are associated with FEINs. If the information that displays in **WebFile** is incorrect, or if you need to update your organization's list of FEINs, submit a request via e-mail with the correct information to <u>WebFile.Support@workcomp.virginia.gov</u>. This request will be forwarded to the appropriate department within VWC and additional information may be requested before updates are made.

WebFile SECURITY

The WebFile system uses a variety of security protocols to help ensure that case records remain confidential. A key component of this structure (which governs access rights) is username and password.

USERNAMES

All WebFile users will have individual usernames. The username cannot be changed after the registration and activation process is complete.

PASSWORDS

All users are required to use a password along with the username. The initial password will be set up by the Commission. The user will then set up a new password at the time of registration.

Password Criteria

- ✓ Must be at least 8 characters in length.
- ✓ Must have at least one number.
- ✓ Must have at least one letter.
- ✓ Must contain one special character (i.e., @, #).
- Must not have been used within the previous 12 months.

TIMEOUT FEATURE

The system has been set up with a 45-minute timeout feature. If there is no activity within 45 minutes, the user will receive a message notifying them that they need to log back in to WebFile.

IMPORTANT

Entering data is still viewed by the system as being idle – users who take longer than 45 minutes to submit data or to conduct other transactions will be automatically logged off of the system, and all information not saved or submitted will be lost.

LOGIN AND REGISTRATION

Registration is only required the first time a user logs in.

Access the WebFile website at: <u>https://webfile.workcomp.virginia.gov/</u>

1. Click the "Login" link.

GINIA WORKA	Commonwealth of Virginia Governor	Claimant Registration Login
	VWC	
VWC' o	Virginia Workers' Compensation Commission	
ENSATION COMM	Welcome to WebFile	

2. Enter Username and temporary password received from <u>webfile.support@workcomp.virginia.gov</u> address.

The symbol 🔍 indicates a required field.

- 3. Create a Username.
- 4. Create a new password and confirm.

Usernam	rmation e: 🕕	
Please cha Current I	nge your password Password: 🕕	
New Pas	sword: 🕕	
Confirm	New Password: 🕕	

5. Select and answer three security questions. These questions will assist you in case you are ever locked out of the system or forget your password. Answers are case sensitive.

Security Question.	
Select a Security Question	~
Answer: 🕕	
Security Question: 🕕	
Select a Security Question	*
Answer: 🕕	
Security Question: 🕕	
Select a Security Question	
Answer: 🕕	
nswer: 🕕	

- 6. Review the Terms and Conditions by clicking on the "Terms and Conditions" link in the bottom left hand corner.
- 7. After reviewing, check the box to accept the Terms and Conditions.
- 8. Click "Save" to complete your registration.



- 9. Confirmation message verifying your successful registration is displayed.
- 10. Click the "OK" button.

Password Updated	×
Your account information has been updated. Please re-login to gain	access to WebFile.
4	
UK	

11. Log back in to WebFile with the new Username and permanent password.

PASSWORD RESET

This section covers how to reset a password. There are two methods that can be used in WebFile. One is to reset a forgotten password and the other is to elect a password reset.



Remember the WebFile Password Criteria:

- ✓ Must be at least 8 characters in length.
- ✓ Must have at least one number.
- ✓ Must have at least one letter.
- ✓ Must contain one special character (i.e., @, #).
- ✓ Must not have been used within the previous 12 months.

RESET A FORGOTTEN PASSWORD



When the log in screen displays, you have the option to request a new password yourself.

1. Click on the "Forgot Password" link.

Portal Log	gin
Username:	
	(Please log in with your email address if this is your first time logging in or if you have not yet created a username.)
Password:	
	Forgot Username/Forgot Password
	Login Close

2. Enter a username and click the "Submit" button.

Forgot Password
Forgot Password Enter your username to display your security questions
Username:
Submit

3. Answer the three security questions from initial registration and click the "Submit" button. Answers are case sensitive.

Forgot Password
Security Question: What is the name of your favorite pet? Answer:
Security Question: In what city were you born? Answer:
Security Question: What is your mother's maiden name? Answer:
Submit

4. A confirmation message will appear and an email will be sent.



5. Retrieve the email from <u>noreply@workcomp.virginia.gov</u> containing the new, temporary password. This temporary password will expire after five (5) days. Email could be in a Junk/Spam folder.

6. After logging in with Username and new/temporary password, you will be required to re-register.

If you cannot remember the answers to your security questions, contact the Commission at 1-877-664-2566 or <u>webfile.support@workcomp.virginia.gov</u>.

ELECT TO RESET A PASSWORD



1. From the main WebFile menu, click on "Manage Profile".

GINIA WORKS	Commonwealth of Virginia Governor Welcome,	Manage Profile Mar
So VWC'S	Virginia Workers' Compensation Commission Welcome to WebEile Mr. WebEile Tools Halp and Support	
NSATION COMP		

- 2. Scroll down to the Reset Password section.
- 3. Enter current password and new password as prompted.
- 4. Click the "Reset" button.

Check this box to accept Terms and Conditions Save
Reset Password
Password is case sensitive, must be at least 8 characters long, contain at least 1 number, 1 letter and 1 special character. Password will expire every 90 days and wil
Current Password:
New Password:
Confirm New Password:
Reset

5. Click "OK" to return to the main WebFile page.



6. Log in with the new password.

EMAIL ADDRESS CHANGE

This section covers how to change an email address after a profile has been created.



1. Click on the "Manage Profile" link.

GINIA WORKS	Commonwealth of Virginia Governor	Welcome, Test Lettercase	(cl@im4nt2)	Manage Profile	Manage Paperless Opti
g vwc g	VWC Virginia Workers' Compensation Commission				
PTUSATION COMMES	WebFile User Resources My WebFile Tools Help and Support				
Maria Incastante MA	W.LFS. T. I.				

2. Click the "Change Email" button.

GINIA WORKA	Commonwealth of Virginia Governor			Welcon	ne, Landry Phillips (claimadminuser1)	Manage Profile	Logo
C VWC Z	VWC Virginia Workers' Compensati	on Commission						
ENSATION COMME	WebFile User Resources My W	/ebFile Tools - H	Help and Support					
Your location: My V	VebFile Account							
				_				
User Profile				_ •	Manage Email	Address	-	. 🗆
Your Profile Detail	;				Current Email A paperlesstestingca Change Email	ldress: a@gmail.com		

- 3. Enter and confirm the new email address.
- Enter the current profile password. Click the "Save" button. 4.
- 5.

Manage Email Address	_ □
Current Email Address: paperlesstestin	igca@gmail.com
New Email Address:	
example: abc@xyz.com	
Confirm New Email Address:	
example: abc@xyz.com	
Account Password:	
•••••	
Save Cancel Reset	

6. A confirmation message will appear and will provide instructions to complete the email change.



- 7. Log in to the inbox of the new email address.
- 8. Open the email from <u>webfile.support@workcomp.virginia.gov</u> with a subject of "VWC WebFile Email Address Activation."
- 9. Click the "Activate New Email" link.



10. Access WebFile and verify that the email address has changed.

Success 🗵
Your new email is successfully validated.
ОК

If you have any questions, contact the Commission at 1-877-664-2566 or webfile.support@workcomp.virginia.gov.

WebFile USER RELATIONSHIPS

This module outlines recommendations for how Site Administrators may choose to structure Claim Manager - Claim Administrator Employee relationships within WebFile. These recommendations may or may not mirror the actual organizational structure and reporting relationships.



GEOGRAPHICALLY DISPERSED ORGANIZATION MODEL

Within this organization Claim Managers run independent units which may be in different geographic locations. This design enables Managers in each unit to manage and view a discrete set of Claim Administrator Employee claims.



WebFile Claim Administrator Manager/Non Manager Association

Manager One

SHARED FLOOR MODEL

Within this organization, managers run partially shared units. Managers can view and manage those claims for their direct employees as well as employees of other managers, as appropriate.



IMPORTANT In this scenario, the model allows the claims of some Claim Administrators to be viewed by both Claim Managers, while others cannot be viewed (based on how they have been associated).

WebFile Claim Administrator Manager/Non Manager Association

Available Employees	- Assigned Employees	Available Employees	Assigned Employees
Employee, Six	Employee, Five	Employee, One	Employee, Five
Manager, Two	Employee, One	Employee, Two	Employee, Four
Manager, Three	Employee, Three	Manager, One	Employee, Six
Employee, Four	Employee, Two	Manager, Three	Employee, Three
			E
6	5		

Manager One

SMALL SHOP MODEL

Within this organization, all Claim Managers share ownership of all claims. Any manager can view and manage all claims within the organization.



This model allows all claims to be viewed by all Claim Managers. Also, Manager 2 can also see Manager 3's claims, since Manager 3 is also a Claim Administrator. Though not pictured here, neither Manager 1 nor Manager 2 would be able to view the claims of Manager 3's Employees, unless each Employee was assigned to Manager 1 and Manager 2 as well.

WebFile Claim Administrator Manager/Non Manager Association

Manager One

Available Employees Assigned Employees		Available Employees		- Assigned Employees
Manager, Two	Employee, Five	Manager, One		Employee, Five
	Employee, Four			Employee, Four
	Employee, One			Employee, One
	Employee, Six		∍	Employee, Six
	Employee, Three		(+)	Employee, Three
	Employee, Two			Employee, Two
	Manager, Three			Manager, Three

SUPERVISING MANAGER MODEL

Within this organization, there is a multi-tier Claim Management structure where a Supervising Manager can view his managers' claims. In effect, his managers are, from WebFile perspective, considered Claim Administrator Employees just as with other non-manager employees.



This model allows Manager 1 to view all claims within the organization. Manager 2 and Manager 3 can only see claims for their employees.

WebFile Claim Administrator Manager/Non Manager Association



Manager Three





ADDITIONAL THINGS TO CONSIDER

- Claim Manager Claim Administrator Employee relationships can be changed temporarily in WebFile (to accommodate vacations or temporary leave), or permanently (to handle changes in your organization).
- Users can alter the "viewing rights" of a Claim Administrator by filing an EDI transaction, and updating the Claim Administrator user name (e-mail address), which may alter a Manager's viewing rights, based on how it has been structured.

CREATE A NEW USER

New WebFile Claim Administrator users must be created by the organization's WebFile Site Administrator.

1. Click the drop-down arrow to the right of "My WebFile Tools" and click "User Administration" on the drop-down menu.

GINIA WORKS	ommonwealth of Virginia 0	Governor		
Be VWC' B	VWC Virginia Workers' Co	mpensation Commis	ssion	
PLAN OMMS	Welcome to WebFile	My WebFile Tools	Help and Support	$\overline{\mathbf{x}}$
Your location: My W	User Administra Paperless Admin	tion		

2. Click the "New" button on the "User Management" screen.

User Manageme	nt
Search for WebFile	User:
Login:	
Last Name:	
User Status:	All 🔻
Search View A	II New

 Enter the new user's information, assign the "Manager" role if necessary, and assign an existing Manager to the user if necessary.
 Click the "Save" button.

lame		Address	
Email: 🕕		Address 1: 🕕	
First Name: 🕕		City: 🕕	
Middle Name:		State: 🕕	
Hudie Name.		Virginia	~
Last Name: 🕕		Zip Code: 🕕	
		Country: 1	
		United States	~
Manager Status: Curre Available Managers	ent User Assigned I	Managers	
Janager Status: Curre Available Managers Phillips, Landry Green, Ethan	ent User Assigned I	Managers	
Aanager Status: Curre Available Managers Phillips, Landry Green, Ethan Todd, Jason	Assigned I	Managers	
Anager Status: Curre Available Managers Phillips, Landry Green, Ethan Todd, Jason Storm, Erika	Assigned I	Managers	
Manager Status: Curre Available Managers Phillips, Landry Green, Ethan Todd, Jason Storm, Erika Gresham, Pam	Assigned f	Managers	

ACCESS AND UPDATE USER PROFILE

A Claim Administrator organization's WebFile Site Administrator is responsible for maintaining their users' WebFile profiles. User Profile maintenance includes:

- ✓ Keeping contact information current
- ✓ Assign or unassign the "Manager" role
- ✓ Assign or unassign employees to managers
- ✓ Resetting user passwords
- ✓ Deactivating users WebFile access as necessary
- 1. Click the drop-down arrow to the right of "My WebFile Tools" and click "User Administration" on the drop-down menu.

GINIA WORKA	ommonwealth of Virginia C	Governor		
S	VWC Virginia Workers' Co	mpensation Commissic	n	
FLST COMMS	Welcome to WebFile	My WebFile Tools	Help and Support	*
Your location: My W	ebFile Paperless Admin	tion		

2. To search for an individual user, enter their login or last name. To view all users, click the "View All" button in the "User Management" window.

User Management				
Search for WebFile User:				
Login:				
Last Name:				
User Status:	All			
Search View All New				

3. Click "Edit" next to the user to update.

User Management								
WebFile User Search R	esults:							
Login 🔺	Name	Role	Status	Manager?	Locked?	Registered?	Site Admin?	
alorton157	Al Orton	Claim Administrator	Current User	N	N	Y	Y	Edit
claimadminuser1	Landry Phillips	Claim Administrator	Current User	Y	Ν	Y	Y	Edit
erikastorm	Erika Storm	Claim Administrator	Current User	Y	N	Y	N	Edit
ethg400	Ethan Green	Claim Administrator	Current User	Y	N	Y		Edit
jasontodd507@yahoo.c	Jason Todd	Claim Administrator	Current User	Y	N	Y	Y V	Edit
· · · · · ·	· · · · · -							

- Update user's account as necessary. Click the "Save" button. 4.
- 5.

amo		Addr	200	
anie		Auun	555	
ogin:		Add	ress 1: 🕕	
ethg400			11732 W Broad St	
irst Name: 🕕		City	: 🕕	
Ethan			Richmond	
Aiddle Name:		Stat	e: 🕕	
			Virginia	~
act Name:		Zip (Code: 🕕	
			23233-1005	
Green		Cou	ntry: 🕕	
				2003
			United States	*
anager Status: Current User Available Employees Phillips, Landry Buford, Sean Storm, Erika Gresham, Pam Zang, Jebidiah	Assigned Employe Todd, Jason	ees		×

ASSIGN MANAGERS TO EMPLOYEES OR EMPLOYEES TO MANAGERS

On the "User Management" screen, use the arrow buttons to move available Managers or Employees to assigned Managers or Employees.

vailable Managers	Assigned Managers
illips, <mark>Landry</mark>	
reen, Ethan	
odd, Jason	
torm, Erika	
resham, Pam	

The image below shows that Employee AI Orton has been assigned to the Manager Jason Todd. As a Manager, Jason Todd will be able to view all claims assigned to AI Orton and assign new claims to him as-needed.

		Aut	Address 1. U			
alorton157			11732 W Broad St			
First Name: 🕕		Cit	/: 🕕			
Al			Richmond			
Middle Name:		Sta	te: 🕕			
			Virginia	~		
ast Name: 🚯		Zip	Zip Code: 🕕			
Orton		-	23233			
		Co	Country: 🕕			
			United States	*		
Available Managers	Assigned I	Managers				
Philling Landry	Touu, Juse					
Phillips, Landry Green, Ethan						
Phillips, Landry Green, Ethan Storm, Erika						
Phillips, Landry Green, Ethan Storm, Erika Gresham, Pam	•					

SEARCH AND VIEW CLAIMS

Claims that are assigned to a Claim Administrator organization within the Commissions system may be viewed by the organization's WebFile users. WebFile users with the Manager role may view all unassigned claims and all claims assigned to themselves and their assigned employees. WebFile users without the Manager role may only view claims that have been assigned to them in WebFile by their Manager(s).

Users may access the search tool and view their list of claims by clicking "My WebFile Tools" at any time.

SEARCHING FOR CLAIMS

The "Search for Claims" portlets are divided into two sections: "Claim Filter Criteria" and "Results." Enter any combination of the search criteria to search for a particular claim. The percentage sign (%) can be used as a search wildcard.

Claim Filter Criteria			Resul	Results						
Unassigned:			Assign	ssign selected daims to: Search for a user De Assign Remove Assignment						
Assigned To:	Search for a user	me	JC	CN	Claimant First Name	Claimant Last Name -	Employer	Injury Date	Assigned To	
			E I	150318150504	John	Smith	_TEST_RED SHIRT RETI	03/26/2008	Storm, Erika	
JCN:			B	R08282015925	Sean	Morris	_TEST_GELATO FARMS	03/26/2008	Storm, Erika	
Claimant First Name:			B	R02202014125	JOHN	_TEST_PETERS	_TEST_GELATO FARMS	03/26/2008	Unassigned	
Claimant Last Name:			B	R04142015255	JOHN	_TEST_PETERS	_TEST_GELATO FARMS	03/26/2008	Phillips, Landry	
Employer			B	R07242015142	JOHN	_TEST_PETERS	_TEST_GELATO FARMS	03/26/2008	Phillips, Landry	
			B	R08312015909	JOHN	_TEST_PETERS	_TEST_GELATO FARMS	03/26/2008	Phillips, Landry	
Date of Injury: From:	MM/dd/yyyy		B	R31720161032	JOHN	_TEST_PETERS	_TEST_GELATO FARMS	03/26/2008	Storm, Erika	
To:	MM/dd/yyyy		B	R52020151018	JOHN	_TEST_PETERS	_TEST_GELATO FARMS	03/26/2008	Storm, Erika	
earch				PAPR12400001	JOHN	_TEST_PETERS	_TEST_GELATO FARMS	03/26/2008	Storm, Erika	
				A0200001817	JOHN	TEST PETERS	TEST GELATO FARMS	03/26/2008	Unassigned	

Search Examples:

- i Checking the "Unassigned" box will show all unassigned claims in the Results area.
- i Entering Smith into the "Last Name" field will show all claims for claimants with the last name Smith in the Results area.
- i Entering Smit% into the "Last Name field will show all claims for claimants whose last name begins with Smit. These might include the last names Smith, Smithson, Smitt, and Smitts.
- i Entering John into the "First Name" field and Smith into the "Last Name" field will show all claims for claimants with the first name John AND the last name Smith.

Possible reasons a claim might not appear:

- i The claim does not yet exist in the Commission's database.
- i The claim is assigned within WebFile to another user.
- i The claim is unassigned in WebFile but the user does not have the Manager role (only Managers may view unassigned claims).
- i The claim exists in the Commission's database but an EDI FROI with the Claim Administrator FEIN has not been accepted for that JCN.

VIEWING CLAIMS

1. Click the link in the "JCN" column of the "Results" section.

Re	sults						
Ass	ign selected claims to: Search	n for a user	<u>me</u> Assign Rer	me Assign Remove Assignment			
	JCN	Claimant First Name	Claimant Last Name 🗸	Employer	Injury Date		
	T150318150504	John	Smith	_TEST_RED SHIRT RETI	03/26/2008		
	BR08282015925	Sean	Morris	_TEST_GELATO FARMS	03/26/2008		
	BR02202014125	JOHN	_TEST_PETERS	_TEST_GELATO FARMS	03/26/2008		
	BR04142015255	JOHN	_TEST_PETERS	_TEST_GELATO FARMS	03/26/2008		
	BR07242015142	JOHN	_TEST_PETERS	_TEST_GELATO FARMS	03/26/2008		
	BR08312015909	JOHN	_TEST_PETERS	_TEST_GELATO FARMS	03/26/2008		
	BR31720161032	JOHN	_TEST_PETERS	_TEST_GELATO FARMS	03/26/2008		
	BR52020151018	JOHN	_TEST_PETERS	_TEST_GELATO FARMS	03/26/2008		
	TPAPR12400001	JOHN	_TEST_PETERS	_TEST_GELATO FARMS	03/26/2008		
	VA0200001817	JOHN	_TEST_PETERS	_TEST_GELATO FARMS	03/26/2008		
	4 Page 1 of 4	N 2					

2. The Claim Summary will display.

Your location: My WebFile Tools » Claim Summary	
Claim Summary	
Claimant: PETER DILLARD Jurisdiction Claim Number: 0169570 Date of Injury: 3/15/1971 Employer: _TEST_METAL SHAPERS	Employee ID Assigned by Jurisdiction: 000911 Claim Administration Claim Number: TCURN3 Claim Type: Notification Only S INC Insurer: CHESTER INS CO
Claim Status Overview	
 Claim for Benefits Filed Claim Denied by Insurer 	 Payments Reported Average Weekly Wage: \$0.00 Award Entered by Commission

CLAIM DETAILS TAB

The "Claim Details" tab is selected by default.

Claim Details	Document & Filings	Make New Submission	Submit Web Forms			
Instructions						
Please conta	act the Claim Adjuste	er if there is any incorrec	t information in this o	claim.		
Incident Details	5					
Claimant Details						
Employer Details						
Claim Administrator Details						
Insurance Carri	er Details					
Additional Parti	es					

The claim details can be viewed by expanding desired sections.

- i Pressing the button will display the information for the corresponding section.
- i Pressing the button will hide the information for the corresponding section.

Claim Details Tab

Incident Details	Provides general information regarding the reported incident such as dates,				
	description and location.				
Claimant Dotails	Provides general personal and contact information on the Claimant. There is a				
	separate section that identifies Attorney contact information.				
Employer Datails	Provides general information about the Employer of the Claimant. There is a				
Employer Details	separate section that identifies Attorney contact information.*				
Chaine Administration Details	Provides general information about the company in the Claim Administrator				
Claim Administrator Details	role. There is a separate section that identifies Attorney contact information.				
	Provides general information about the Insurance Carrier. There is a separate				
Insurance Carrier Details	section with designated contact information. There is also a section that				
	identifies Attorney contact information .*				
	Can be used to indicate medical provider involvement as well as next of kin				
Additional Parties	information should the incident be fatal. Use of the Uninsured Employer's				
	Fund can also be noted in this section.				

DOCUMENTS AND FILINGS TAB

The "Documents and Filings" tab displays all documents and filings for the claim. Individual documents may be viewed by clicking the "+" icon to the left of the Work Event for the document.

Claim Details	Document & Filings	Make New Submission	Submit Web Forms					
Documents & F	ilings: Documents and	filings related to this claim	are shown in the table	e below.				
Instructions								
 You may be computer. Imaged do 	oundle documents by You may select items ocuments require a co	checking the boxes to t s on multiple pages. ompatible Adobe PDF v	he left of the docum	ent name and clicking Create Dc int. If you do not have compatible	c Bundle at the bottom which will create a singl a Adobe PDF software you may download and i	e PDF containing all selected iten nstall it at no charge by visiting th	ns to view on y e Adobe webs	our ite.
Imaged Docu	iments: All imaged do	ocuments for this Claim	are displayed below	v. Click the Document Type to vi	ew the document.			
Work Ever	nt(s)		Seal Recipient		Description	Source	Service D	Date Filed 👻
Work Even	t: Claim Related Doci	ument for Compliance (1 File)				Date Filed:	02/04/2016
🔲 🔎 Claim	Related Document for	Compliance	No			Web	02/04/2016	02/04/2016
Work Even	t: Agreement Form (L File)					Date Filed:	02/04/2016
Work Even	t: Awards Related Co	rrespondence (1 File)					Date Filed:	01/28/2016
B Work Event: Exhibit (1 File) Date Filed: 01/07/2016							01/07/2016	
B Work Event: Letter from Attorney - Claim Related (1 File) Date Filed: 01/05/2016							01/05/2016	
B Work Event: Request for Benefits Related Correspondence (1 File)							12/14/2015	
Work Even	Work Event: Awards Related Correspondence (1 File) Date Filed: 08/31/2015 Date Filed: 08/31/2015							08/31/2015
Work Even	t: Written Statement	(1 File)					Date Filed:	08/31/2015
Work Even	t: Agreement Form (1	L File)					Date Filed:	07/31/2015
Work Even	t: Dispute Form (1 Fi	le)					Date Filed:	07/31/2015
B Work Even	t: Sealed document C	laimant (1 File)					Date Filed:	03/18/2015
Work Even	t: Notification of Inju	ry All Parties (3 Files)					Date Filed:	03/18/2015
🥭 Expand G	roups Select a Doc	ument 🗸	Apply to selected				Re	sults 1 - 14 of 14

MAKE NEW SUBMISSION TAB

Users may make filings by uploading documents under the "Make New Submission" tab. The filing must be in PDF format and the user must choose a Filing Type and date for the filing.

Award Agree	ement
ocument Dat	e: 0
MM/dd/yyyy	
ile(s) must be	e Non-Encrypted PDFs 🕕
Choose File	No file chosen

The available Filing Types are:

Award Agreement
Claim for Benefits / Request for Hearing
Claim-Related Correspondence (General)
Employer's Application for Hearing
Medical Record(s)
Motion for the Preservation of Evidence
Position Statement OTR Hearing
Request for Cost of Living Adjustment
Response to an Employer's Application
Termination of Wage Loss Award
Written Statement Review Hearing

SUBMIT WEB FORMS TAB

Users may also make filings under the "Submit Web Forms" tab by selecting the Form Type and completing the form online.

CI	aim Details	Document & Filings	Make New S	Submission	Submit Web Forms			
Instructions: Select Web Form								
Step 1 of 3: Select a Web Form								
Sele	ect Form T	уре						
	Select Form	n Type	~					
	Select Form	n Type						
<<	Employer's	Application for Heari	ng					
_	Order Resp	oonse Form - Claim Fi	ed					
	Order Resp	onse Form - Pavmen	ts Made					

ASSIGN AND UNASSIGN CLAIMS

Users with the Manager role may assign claims to themselves or to employees who are assigned to their group.

ASSIGN A CLAIM

1. Check the box next to the unassigned claim in the "Results" area.

Re	Results								
Ass	Assign selected claims to: Search for a user me Assign Remove Assignment								
	JCN	Claimant First Name	Claimant Last Name	•	Employer	Injury Date	Assigned To		
	T150318150504	John	Smith		_TEST_RED SHIRT RETI	03/26/2008	Storm, Erika		
	BR08282015925	Sean	Morris		_TEST_GELATO FARMS	03/26/2008	Storm, Erika		
-	BR02202014125	JOHN	_TEST_PETERS		_TEST_GELATO FARMS	03/26/2008	Unassigned		
	BR04142015255	JOHN	_TEST_PETERS		_TEST_GELATO FARMS	03/26/2008	Phillips, Landry		

- 2. Type the last name of the user to whom the claim is to be assigned into the field labeled "Assign selected claims to:".
- 3. Click "Assign".

Ass	ign selected claims to:	storm	me	Assign Re	emove Assignment	
	JCN	Storm, Erika erikastorm		lame 👻	Employer	Injury Date
	T150318150504	John	Smith		_TEST_RED SHIRT RETI	03/26/2008
	BR08282015925	Sean	Morris		_TEST_GELATO FARMS	03/26/2008
1	BR02202014125	JOHN	_TEST_PETER	RS	_TEST_GELATO FARMS	03/26/2008
	BR04142015255	JOHN	_TEST_PETER	RS	_TEST_GELATO FARMS	03/26/2008

4. The claim will then be assigned to the user.

Results

Ass	Assign selected claims to: Search for a user De Assign Remove Assignment							
	JCN	Claimant First Name	Claimant Last Name 👻	Employer	Injury Date	Assigned To		
	T150318150504	John	Smith	_TEST_RED SHIRT RETI	03/26/2008	Storm, Erika		
	BR08282015925	Sean	Morris	_TEST_GELATO FARMS	03/26/2008	Storm, Erika		
	BR02202014125	JOHN	_TEST_PETERS	_TEST_GELATO FARMS	03/26/2008	Storm, Erika		
	BR04142015255	JOHN	_TEST_PETERS	_TEST_GELATO FARMS	03/26/2008	Phillips, Landry		

UNASSIGN A CLAIM

- 1.
- 2. 3.
- Check the box next to the assigned claim in the "Results" area. Click "Remove Assignment". Check the box next to the unassigned claim in the "Results" area.

Re	Results									
Assign selected claims to: Search for a user										
	JCN	Claimant First Name	Claimant Last Name 👻	Employer	Injury Da					
1	T150318150504	John	Smith	_TEST_RED SHIRT RETI	03/26/20					
	BR08282015925	Sean	Morris	_TEST_GELATO FARMS	03/26/20					

The claim will be unassigned and able to be viewed and reassigned by any user with the Manager role. 4.

Re	Results								
Assi	ign selected claims to: Searc	n for a user	me Assign Rer	nove Assignment					
	JCN	Claimant First Name	Claimant Last Name 👻	Employer	Injury Date	Assigned To			
	T150318150504	John	Smith	_TEST_RED SHIRT RETI	03/26/2008	Unassigned			
	UAT0002359907	UAT_JOHN	SEAMSTER	PEMBELTON FOREST P	08/21/2007	Unassigned			
	BR08312015854	Todd	Macklin	_TEST_GELATO FARMS	03/26/2008	Unassigned			
	VA0200008278	Jamar	Jones	SANTIAGO ALVAREZ	05/15/2010	Unassigned			
	BR08312015851	Martin	Dean	_TEST_GELATO FARMS	03/26/2008	Unassigned			
	BR08312015846	Oliver	Creed	_TEST_GELATO FARMS	03/26/2008	Unassigned			
	VA0200009053	Sean	Adrian	SANTIAGO ALVAREZ	05/15/2010	Unassigned			
	BR03062016120	WILL	_TEST_WEST	_TEST_NOODLES R US	03/12/2008	Unassigned			
	VA0200001817	JOHN	_TEST_PETERS	_TEST_GELATO FARMS	03/26/2008	Unassigned			
	BR02032015748	JOHN	_TEST_PETERS	_TEST_GELATO FARMS	03/26/2008	Unassigned			
14	4 Page 1 of 3 🕨	M 2				Claim 1 - 10 of 24			

PAPERLESS OPTION

Claim Administrator organizations that use WebFile have the option to enroll in the Commission's paperless program which eliminates the receipt of mail from the Commission regarding claims on which the Claim Administrator is noted.

The paperless program applies to <u>all</u> claims, <u>all</u> users, and <u>all</u> organizations listed for the Claim Administrator organization. The paperless option cannot be applied to selected claims, Claim Administrator personnel, or selected Claim Administrator organizations if more than one exists in their group.

WebFile Site Administrators and users with the Manager role may opt their organization into or out of the paperless program at any time, however the option may only be changed once per business day.

When enrolled in the paperless program, the Claim Administrator organization will receive two types of notifications in lieu of the physical mail they would otherwise receive.

1. An electronic notification will appear in the Notifications section of the user's WebFile screen. Among the details in these notifications are the claimant's name, date and JCN of the filing, description of the filing, and links to the document filed.

Ass	Assigned to Me Unassigned Assigned to others								
The N	The Notifications section displays all documents that have been delivered while opted into Paperless.								
VWC I	Notification	s:You have recei	ved the following notifications cond	erning your represente	ed claims. Click on the notifica	tion name in order to se	e the document image	or click on the JCN to o	pen the claim summary.
St.	atus	Date 🔻	Notification	Description	Jurisdiction Claim Number	Claimant First Name	Claimant Last Name	Assigned To	Claim Admin Claim Number
🔳 Ur	nread	2016-02-22 08	Awards Related Correspondence	test	BR04142015255	JOHN	_TEST_PETERS	Phillips, Landry	TC003N
E Re	ead	2016-01-13 15	Fatal Award Order	test	BR08312015909	JOHN	_TEST_PETERS	Phillips, Landry	TC003N
E Re	ead	2016-01-13 15	Injured Body Parts Update Request	test description	BR07242015142	JOHN	_TEST_PETERS	Phillips, Landry	TC003N
E Re	ead	2016-01-08 09	Request for Benefits Related Correspondence	test	BR04142015255	JOHN	_TEST_PETERS	Phillips, Landry	TC003N
14 4	Page 1	of 1 🕨 🕅	æ ∣ Select an Item	✓ Apply Action					Results 1 - 4 of 4

2. An email notification will be sent to the email address provided upon enrollment into the paperless program. Among the details in these emails are the claimant's name, date of injury, date and JCN of the filing, and links to the document filed. When the link to the document is clicked the document will display if the user is already logged into WebFile. If the user is not logged in the WebFile login screen will open.



OPT INTO PAPERLESS

WebFile Site Administrators and users with the Manager role may opt their organization into the Paperless program by clicking on "My WebFile Tools" and clicking the "Opt In Now" link.

GINIA WORKS	Commonwealth of Virginia Governor						
OF WC S	VWC Virginia Workers' Compensation Commission						
The ALION COMME	Welcome to WebFile My WebFile Tools - Help and Support -						
Your location: My WebFile Tools							
Your Paperless	Option V						
Notice : Paperless	Option now available! Opt In Now to stop receiving physical mail.						

The "Paperless Administration" window will open where the user will opt into paperless, provide the email address where all email notifications from the Commission will be received, and choose whether to receive no mail or continue to receive mail for six months in addition to the electronic notices from the Commission.

Your location: My WebFile Tools » Paperless Administration
Paperless Administration
Select the Paperless Option to stop receiving physical mail from the Virginia Workers' Compensation Commission. Users will be notified via a group email address when new documents are filed to a claim, and all documents will be accessible in WebFile. For a limited time, users will be able to opt in to a 6 month trial and continue to receive the physical mail in addition to the email notifications. After 6 months, the company will move to Paperless unless you opt out.
You are receiving mailed notifications.
Opt Into Paperless Opt Out Of Paperless
Company Notification Email Address: companyemail@company.com
Confirm Company Notification Email Address: companyemail@company.com
Select one:
Opt into Paperless: Receive Email Notifications and no physical mail Opt into Paperless Trial: Receive Email Notifications and also physical mail
VWC WebFile Paperless Option Terms and Conditions
By choosing the Paperless Option, the user agrees to be bound by and adhere to the following terms
and conditions:
✓ I acknowledge that I have read and understood the above Paperless Option terms and conditions.
Unders Panadas preferance Canad
opudie napeliess pielelelikos – Galikel

COMPANY NOTIFICATION EMAIL ADDRESS

The email address provided in this field will receive all email notifications from the Commission regarding filings on the organization's claims. It is the sole responsibility of the Claim Administrator organization to monitor and distribute the emails in this account as-needed.

The Commission can send and troubleshoot any issues with emails that leave our server. However, delivery of emails to outside servers is beyond the control of the Commission. The user agrees the responsibility and troubleshooting of their email server is their responsibility.

SIX MONTH TRIAL

During the opt-in process, the user must choose whether to immediately stop physical mail from the Commission and rely solely on the electronic and email notifications <u>OR</u> to begin receiving the electronic and email notifications in addition to the physical mail for six months. Choosing to enroll in the six-month trial allows the organization to continue their physical mail processing while becoming familiar with and accustomed to the electronic and email notices. If the six-month trial option is chosen, the physical mail will automatically stop when the trial period ends unless the organization opts out of the paperless program before that date.

OPT OUT OF PAPERLESS

WebFile Site Administrators and users with the Manager role may opt their organization out of the Paperless program by clicking on "My WebFile Tools" and choosing "Paperless Administration".

GINIA WORKA CO	ommonwealth of Virginia C	Governor	
Se www.	VWC Virginia Workers' Co	mpensation Commis	ssion
FLSA COMMIS	Welcome to WebFile	My WebFile Tools	Help and Support
Your location: My We	User Administration Paperless Admin	tion nistration	
Your Paperless C	Option		
Thank you for choos	ing to be Paperless!		

Choose the option "Opt Out of Paperless" to turn off electronic notices and emails and resume receiving physical mail from the Commission.

