CORVEL + VERMONT

Workers' Compensation Incident Reporting Guide

Preface

Incident Reporting in Care[mc]includes three different types of reports – medical and non-medical Incident Reports of Injury/Illness and Initial Treatment Guides – to close the gap between the incident and the First Notice of Loss (FNOL), potentially preventing minor injuries from becoming complex claims and improving return to work results.

Benefits

- Reduces lag time between incident and processing/reporting thereby reducing overall claim costs
- Provides a guided process for employers and their employees
- Pharmacy info and First Fill Card included in Initial Treatment Guide
- Ease of Use and Functionality – single process application reduces duplicate records while new features provide flexibility
- PPO search and selection pre-fills subsequent forms and reports

Intake Reports

Incident Reporting includes three reports:

1. A medical Incident Report of Injury/Illness includes information about a workplace incident occurrence that requires immediate medical treatment or there is an expectation of medical treatment in the future.
2. A non-medical Incident Report of Injury/Illness includes information about a workplace incident occurring without medical treatment and with no expectation of medical treatment in the future.
3. You can create an Initial Treatment Guide to make an initial report of a workplace injury, and provide the injured worker with an authorization form to take to the physician's office for initial treatment, and fill an initial prescription.

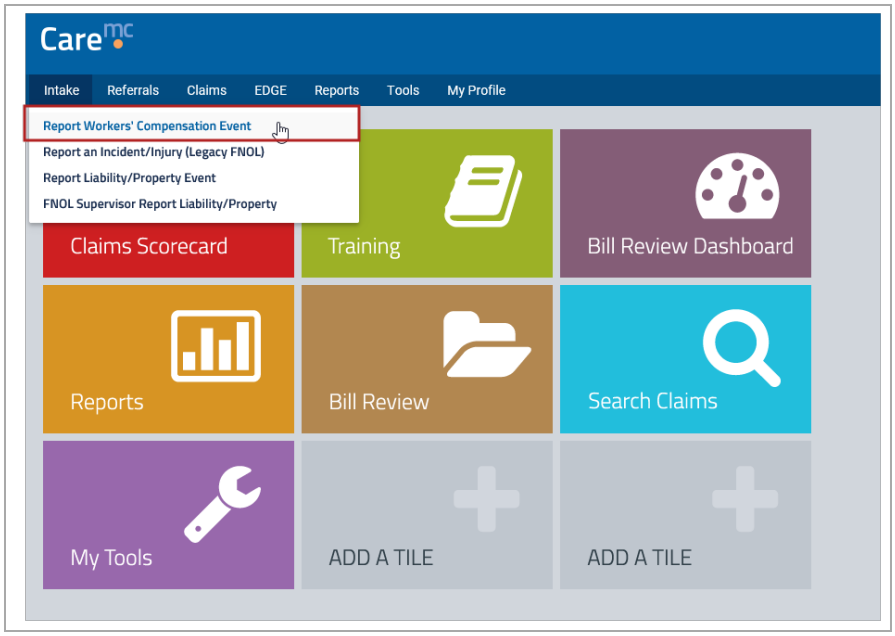
Terms Used in this Guide

Incident reports commonly referred to as First Report of Injury (FROI) are also called First Notice of Loss (FNOL). Caremc uses the term FNOL.

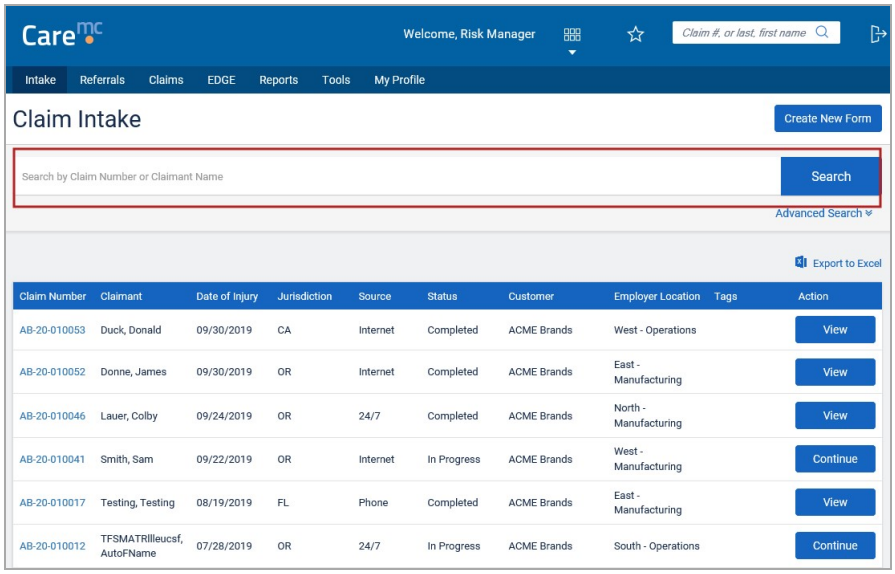
Claimant, Injured Worker (IW), or Employee all refer to the injured person involved in the incident you are reporting.

Getting Started

To create a new Intake form, click Intake > Report Workers' Compensation Event



The Claim Intake screen appears.



Search

When you enter the Claim Intake screen, a list will generate including intake forms in all status types. To narrow the results, you may run a search using the claim number or claimant's name.

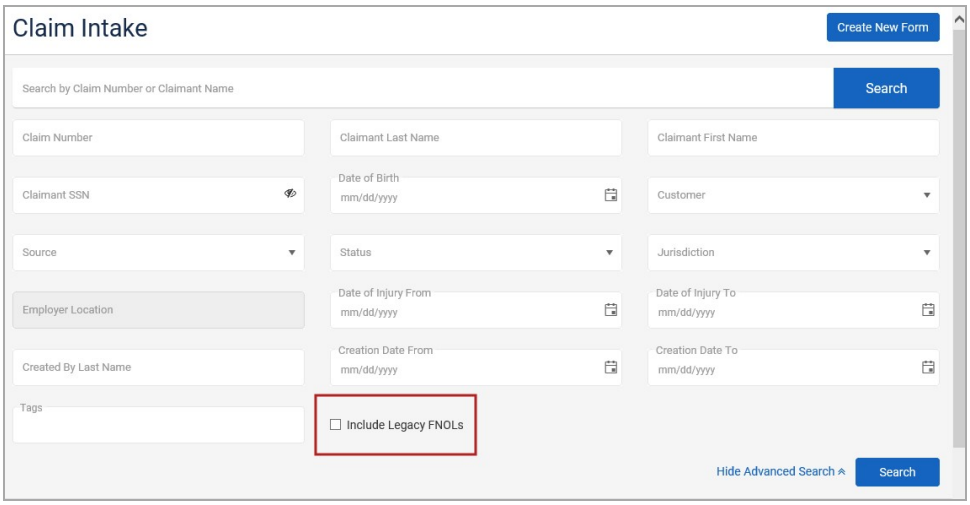
If the Search does not narrow the results enough, click on Advanced Search to bring up other filter options you may use.

Advanced Search

Use Advanced Search to search by additional criteria.

From the Claim Intake screen, click Advanced Search. The Advanced Search screen appears. If you would like intake forms completed through the Legacy FNOL process, click the Include Legacy FNOLs box.

The Legacy FNOLs are read only and cannot be edited or changed.



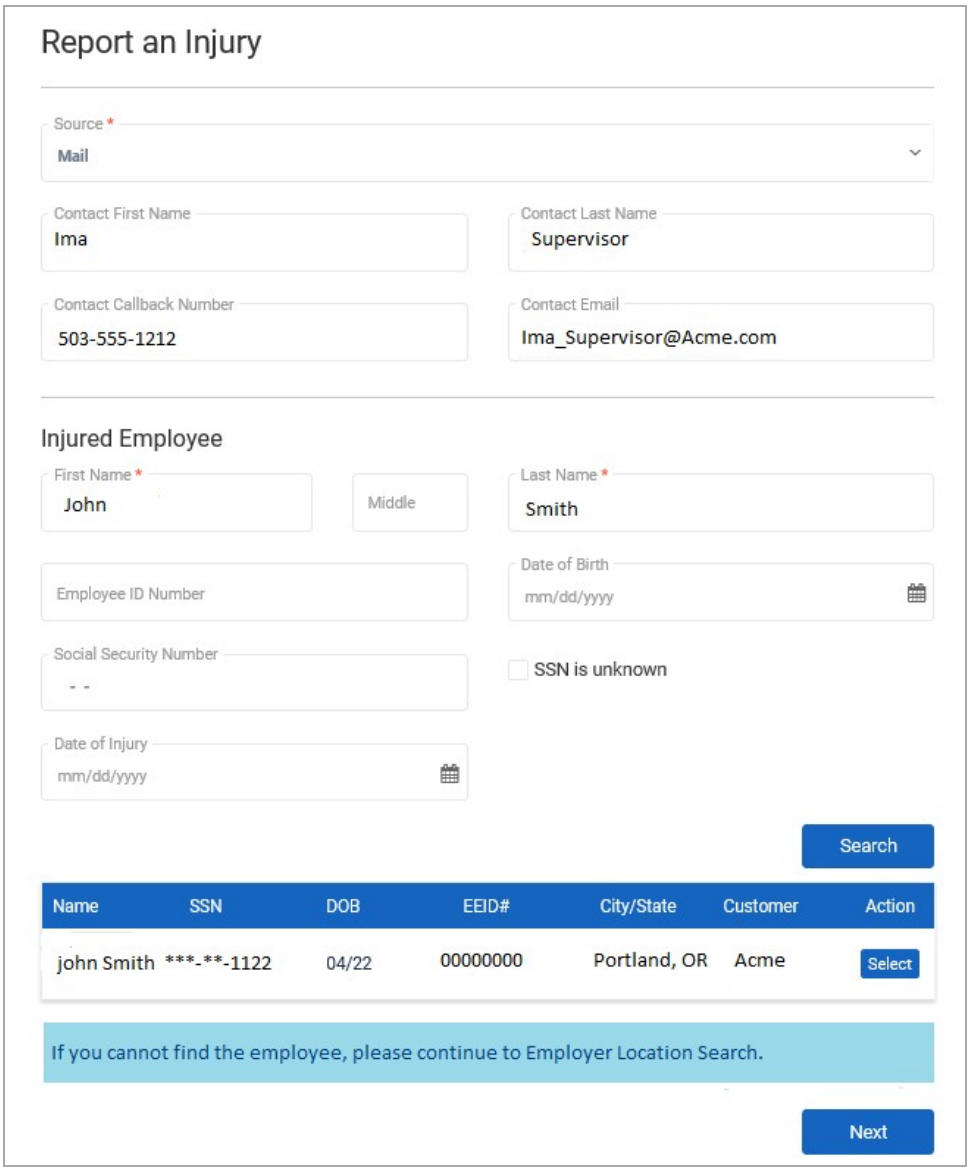
Advanced Search Fields

Source	Description
Claim Number	Starts with
Claimant Last Name	Starts with

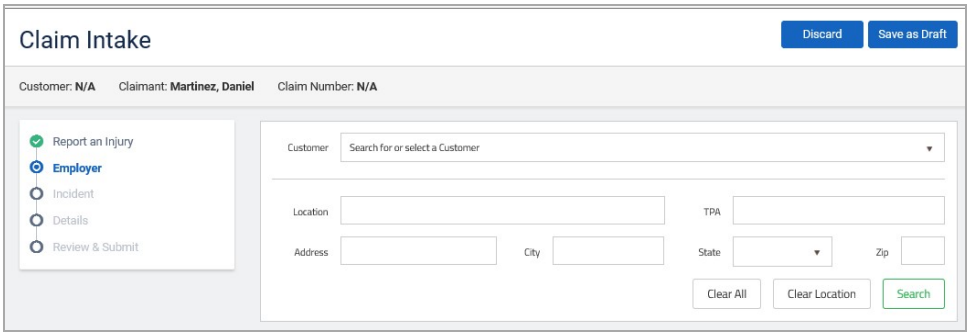
Claimant First Name	Starts with
Claimant SSN	Full or last four (4)
Date of Birth	Equals
Customer	Pick-list
Source	Pick - list
Status	Pick-list
Jurisdiction	Pick-list
Employer Location	Starts with
Date To Date From	Equals
Date of Injury To	Equals
Created by Last Name	Starts with
Creation Date From	Equals
Creation Date To	Equals

Payroll Feed

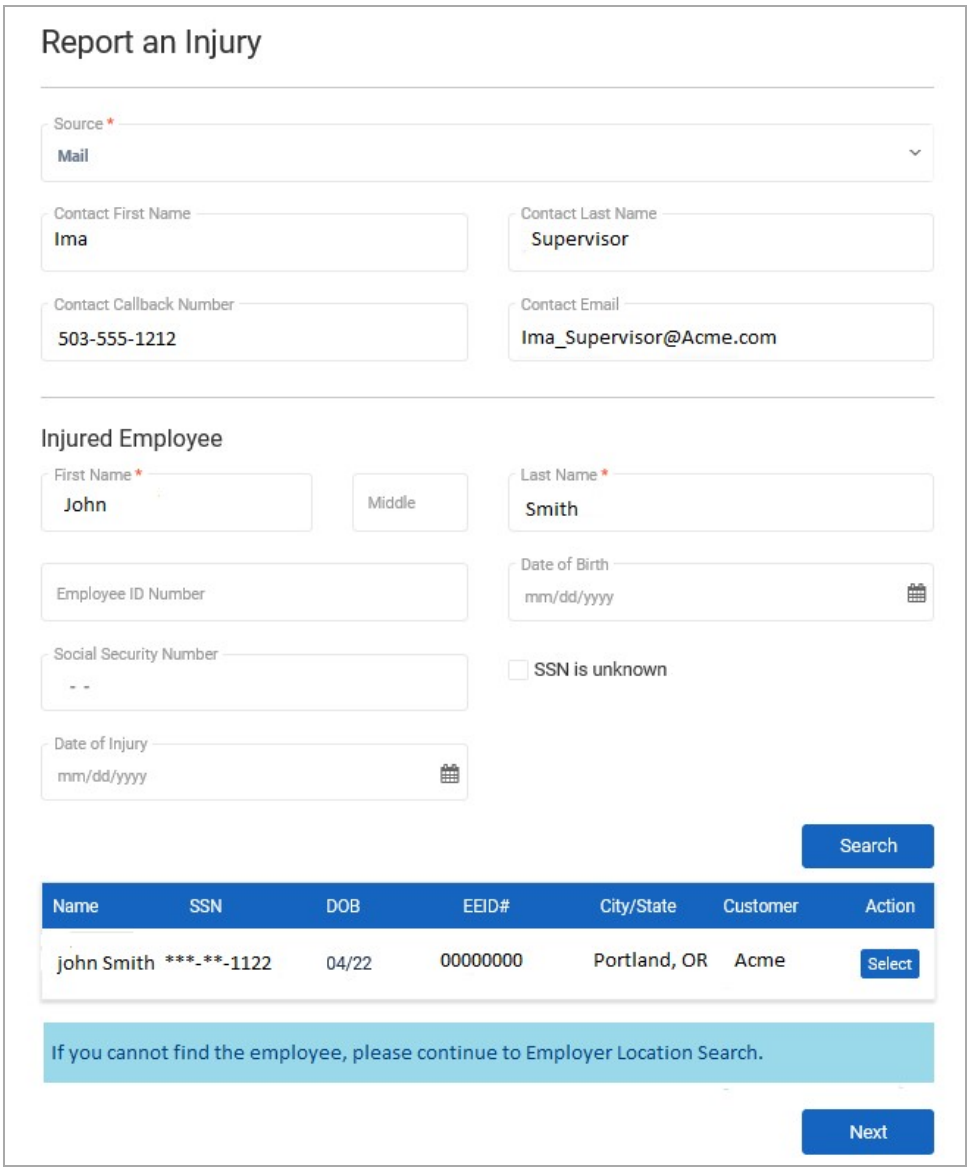
If a customer currently has a payroll feed set up with CorVel, a payroll feed check is automatically completed. If a match is found and selected the information populates the appropriate fields.



1. Select Next.

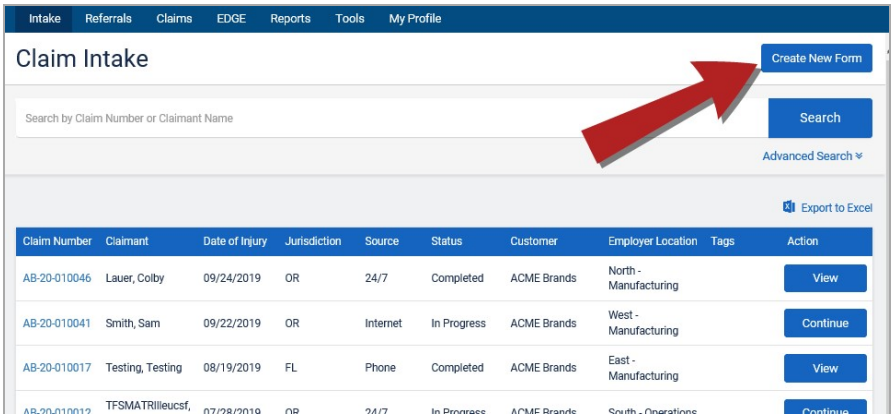


When a payroll feed finds the employee and the SSN is a match, you click Select to choose that employee. If the employee is not on the list, click Next without selecting anything to move to the Employer Location search.



Create a New Claim Intake Form

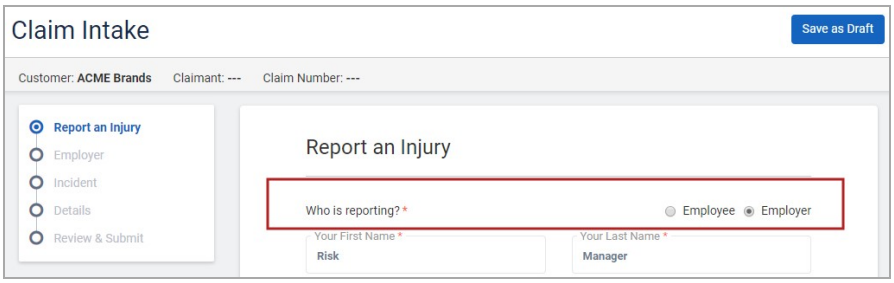
The Claim Intake screen displays a list of claims currently in process or completed. To report an injury click the Create New Form.



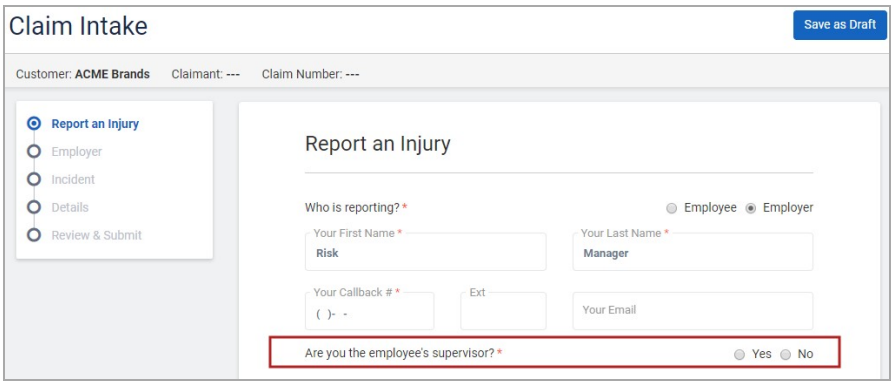
The Report an Injury window will open. The boxes containing a red asterisk are required. Any additional information you are able to complete will help speed up the process.

If there is an information icon next to the box, float over the icon for help in choosing the correct option.

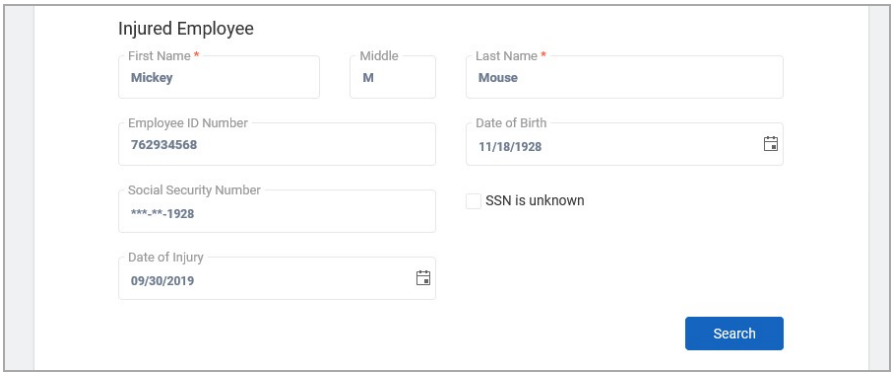
Select the applicable option of Employee or Employer, reflecting whom is entering the report.



If the name or phone number is not correct update the information. Indicate who is providing the information, if it is not the supervisor obtain their title.

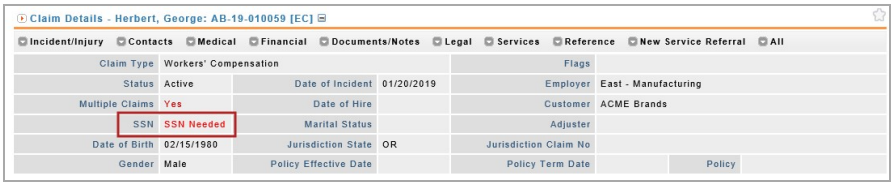


Provide the injured employee's information. In order to move forward, the information with a red asterisk must be completed.



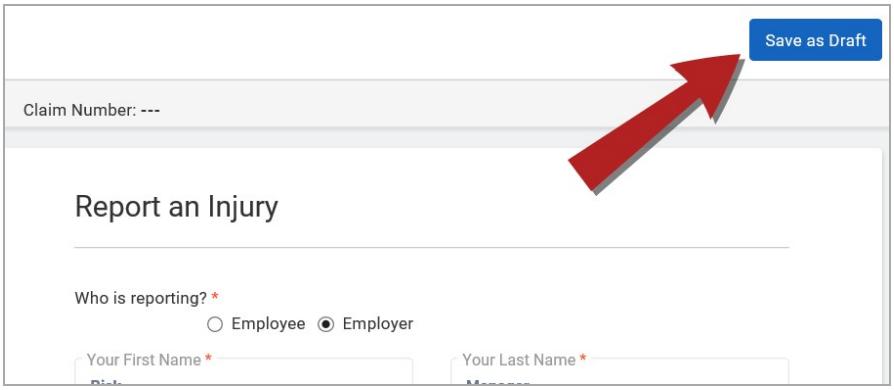
If the Social Security Number is unknown click the box next to SSN is unknown.

When the SSN is unknown is checked the SSN in the claim profile screen will show SSN Needed as a reminder to update the social security number when obtained.



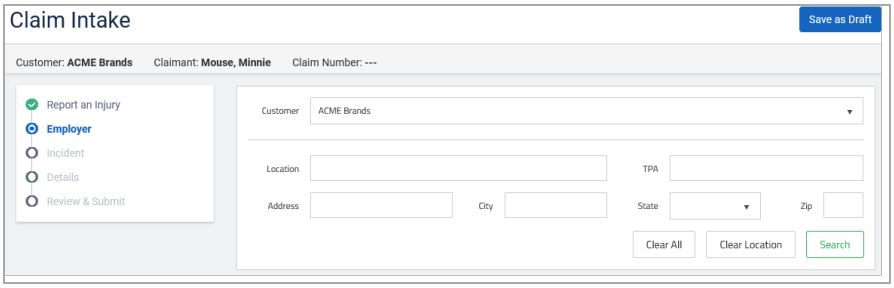
When all known information is input click Search. Care^{mc} system searches for duplicate claims and the form automatically saves as a Draft.

Until the form is completed, the system will automatically save as a draft while the form is in process. You are also able to click on Save as Draft to manually save the information.

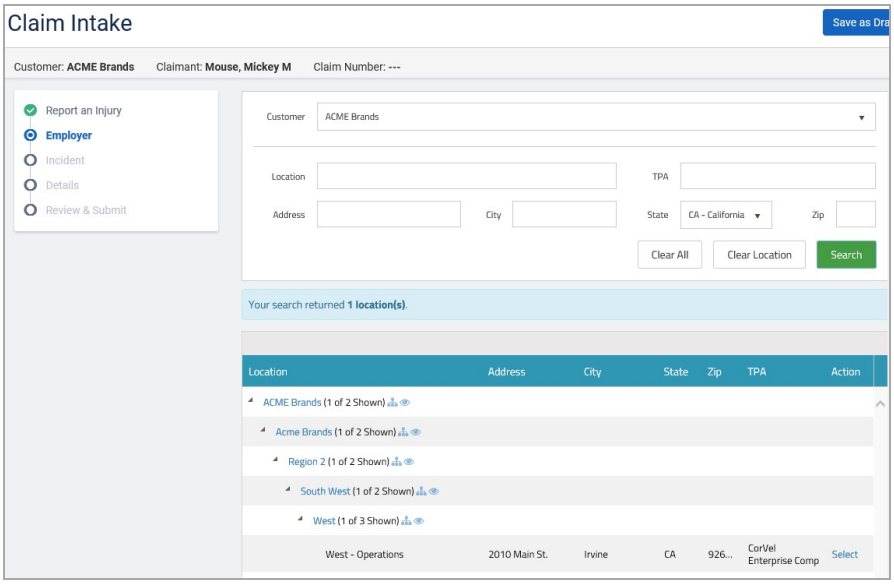


Employer

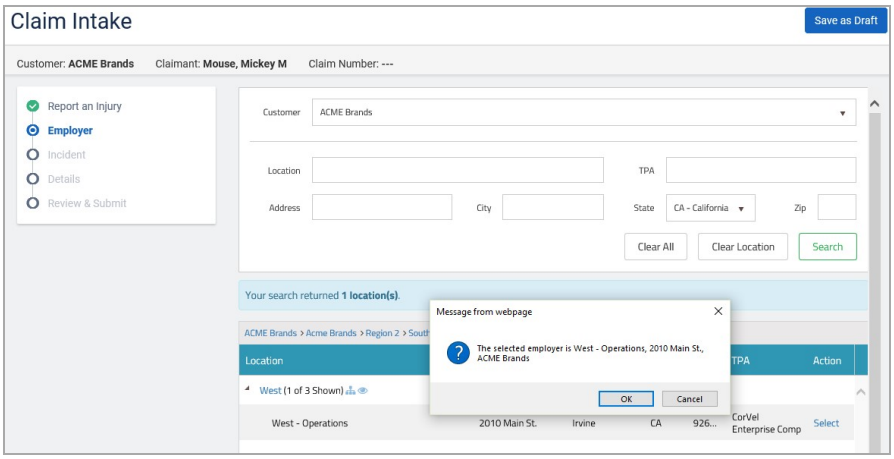
Confirm the Customer information is correct. If not, choose the correct Customer from the list.



Enter any other known information to narrow the results of the Employer Search. Once all known information is input, click Search. Depending on the information provided the results will show levels of locations for the Customer chosen.

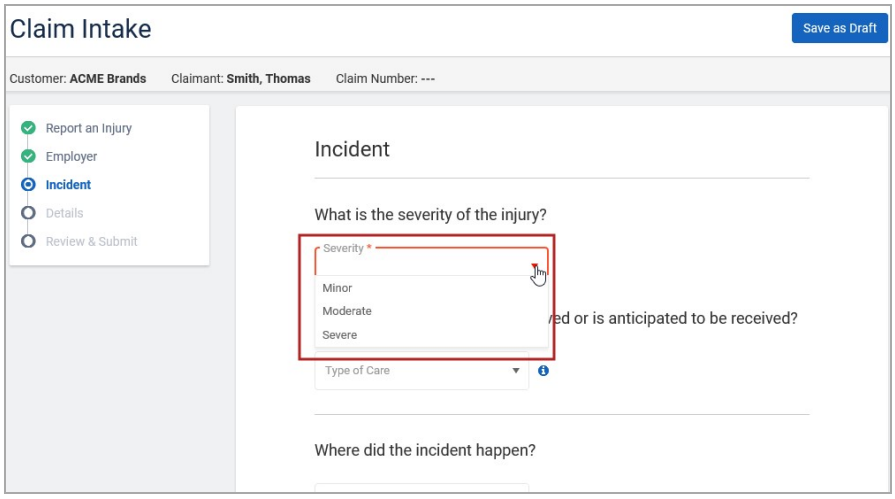


Review the location choices and click Select for the location applicable for the claim. Care^{mc}provides a message asking for verification the selected location is accurate. Click OK to proceed.



Incident Summary

Using the drop down menus, complete the questions with all known information.

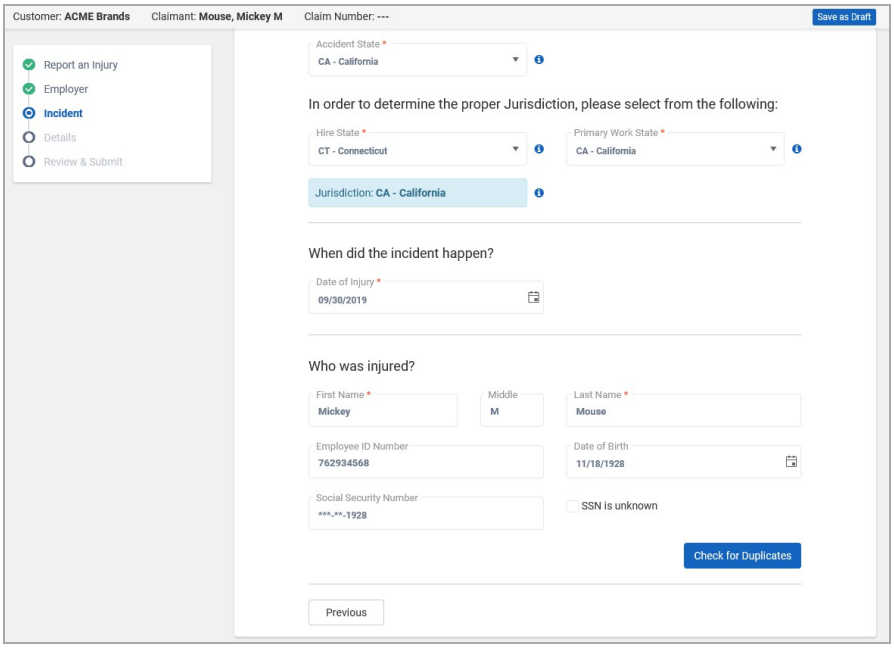


The following will provide definitions of the Severity of Injury to help you choose the correct severity level:

Severity	Type of Care
Severe	Emergency Fatality Hospitalized <24 Hrs Initial & Major Med/Lost Time & Perm. Disb. Anticipated In-Patient Out-Patient
Moderate	Clinic Emergency Hospitalized < 24 Hrs Initial & Major Med/Lost Time & Perm.Disb.Anticipated Office Visit

Severity	Type of Care
Minor	1st Aid Clinic Emergency Minor: By Employer Minor: Clinic / Hospital No Medical Treatment Office Visit

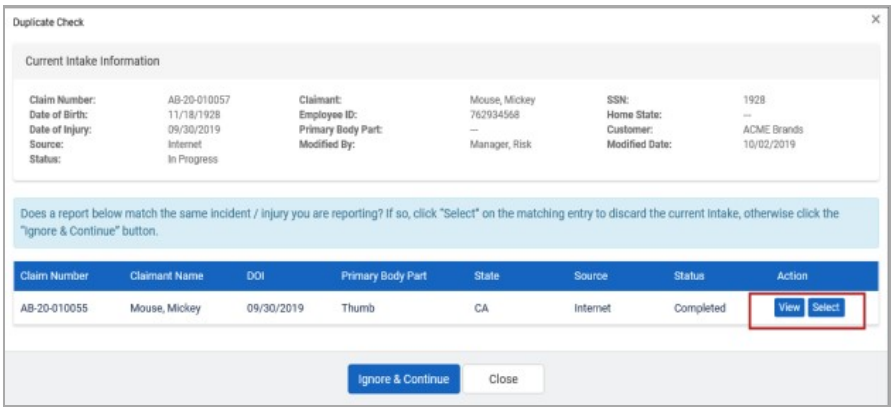
When all the questions are complete Click Check for Duplicates



If the system does not find any duplicates, the following message displays:

No matches found based on criteria. Please add/revise criteria or continue to Employer Location Search.

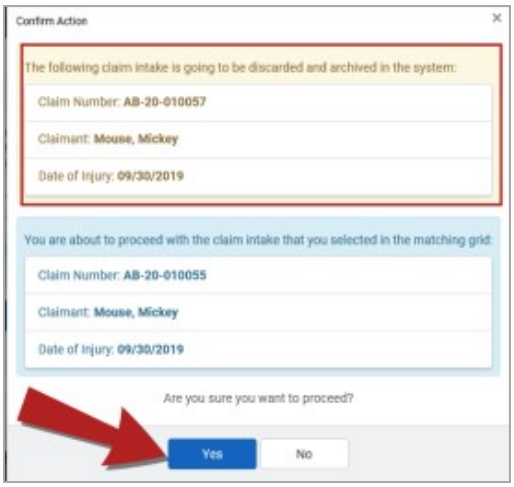
If duplicates are found, a screen displays the possible matching claims:



From this screen, you can click:

- View - takes you to the details of the possible duplicate. The claim displays as read-only.
- Select - if you want to continue the intake process on the chosen incident. The current intake process will stop and will be automatically archived.

A confirmation screen appears and indicates the new form will be archived and the existing intake claim will be selected. Click Yes.

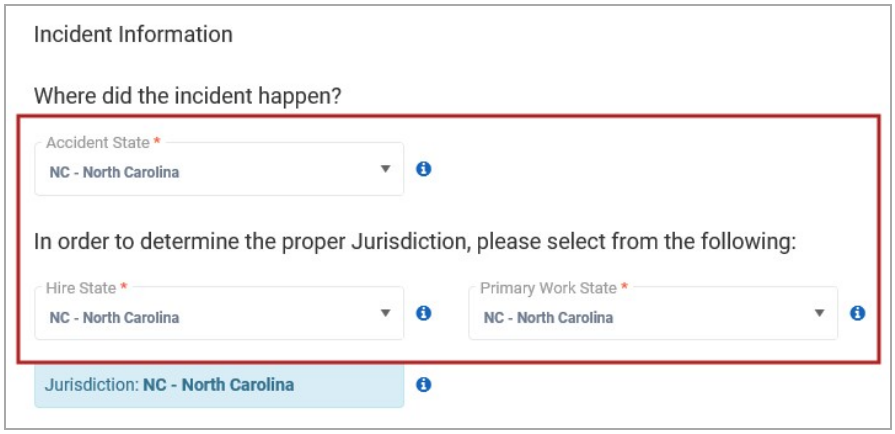


To continue to work on the current intake, click Ignore & Continue.

Edit Incident Summary

If you need to edit Accident State, Hire State or Primary Work State within the Incident Summary screen once you have saved and moved onto Details, click on Incident Summary on the side menu and click on Edit Incident Summary. This may only be completed if the intake form has not been saved and submitted.

You will then be able to change any of the state qualifiers for the jurisdiction.

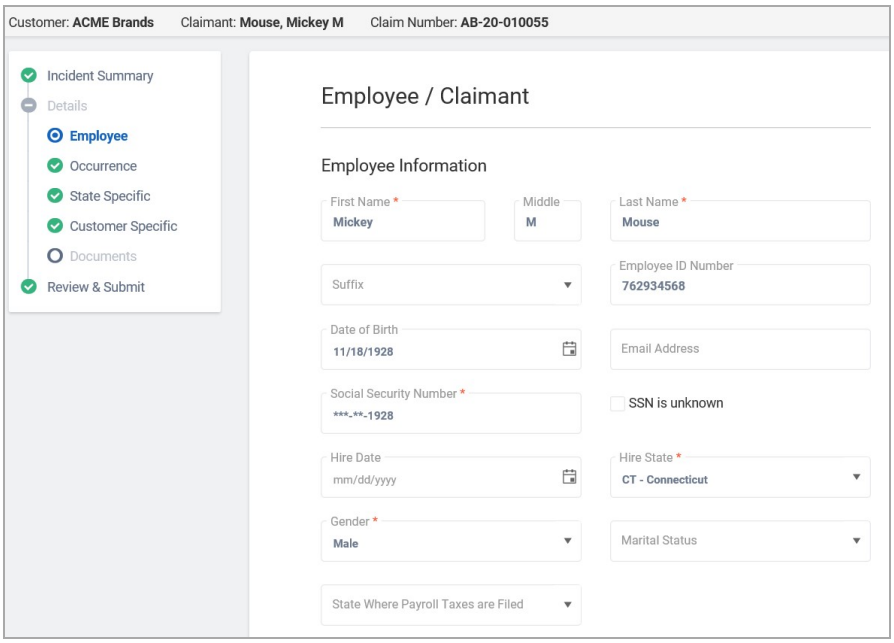


> 💣 Warning! If more than one of the chosen States are changed, this may change the Jurisdiction for the claim. Once all changes are complete, make sure the Jurisdiction is set to the correct State.

Details

Employee / Claimant

Now the Intake form is ready to enter the employee/claimant information.



Required fields are marked by a red asterisk *

Using the Drop Down Menu to make a selection appropriate to the Employee's information. Select the Body Part and Body Part Side and click on Add Body Part. All intake reports must have at least one body part listed. Up to 14 body parts made be added during the intake process. Once all information is provided Click Next.

Address *
123 Main Street

Suite, Apt., Box

City *
Hollywood

State *
CA - California

Zip *
12345

Zip + 4

Home Phone *
(443)-555-1212

Employment Related Information

Occupation/Job *
Operator

Alternative Phone Type

Alternative Phone
( )- -

Ext

Employment Status
Regular/Full-Time Employee

Hours Per Day Worked
10

Days Per Week Worked
5

Work Week Type
Standard

Wage Amount
$200.00

Wage Period
Weekly

Full pay for the date of injury? Yes No

Body Parts

Body Part

Body Part Side

Add Body Part

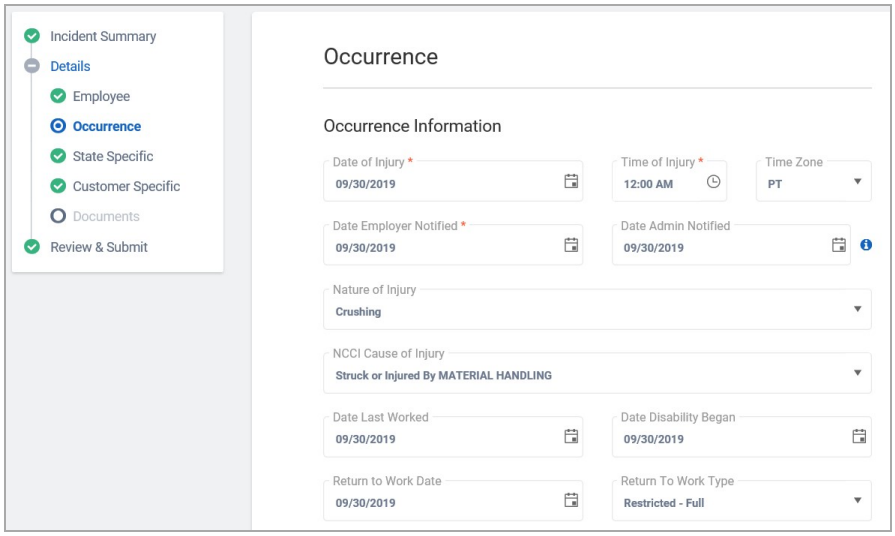
Body Part	Body Part Side
Hand	Right

Previous

Next

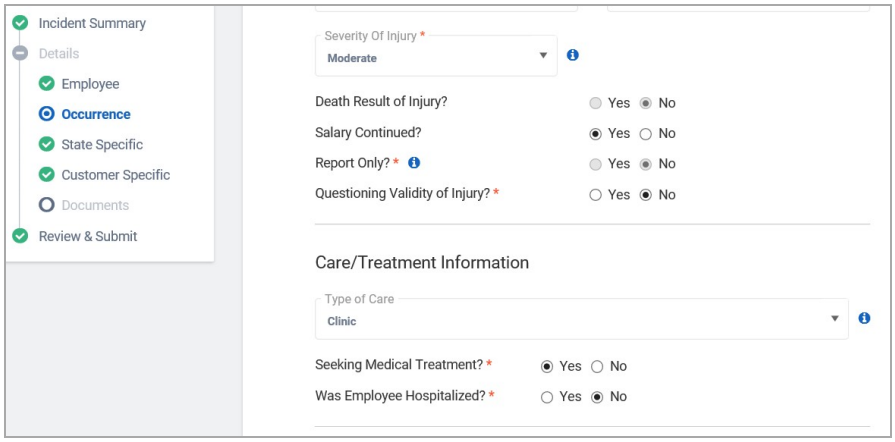
Occurrence

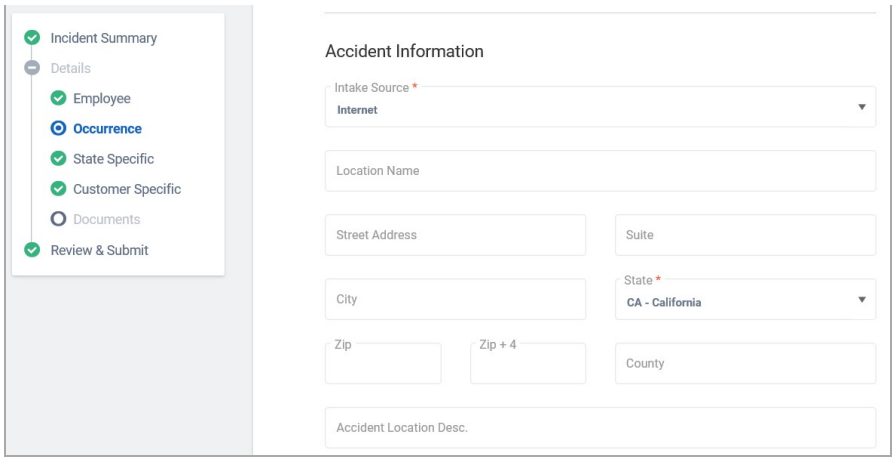
Enter information about the injury.



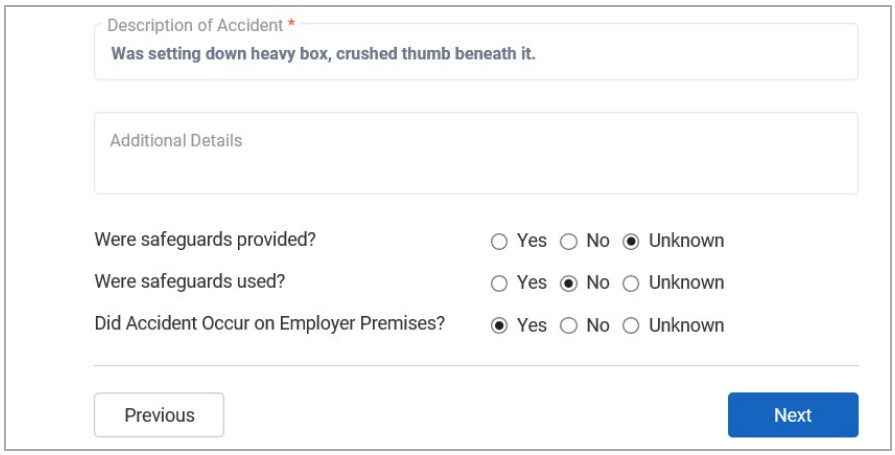
Required fields are marked by a red asterisk *

Using the Drop Down Menus, select the appropriate options reflecting the information about the occurrence.





Once all information is provided Click Next.

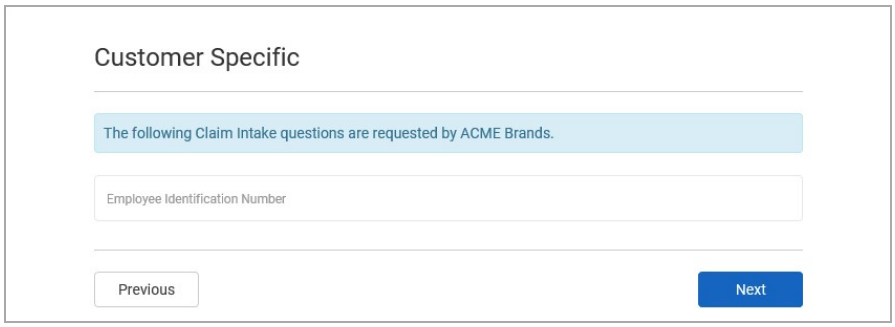


State Specific

The next screen to appear is the State Specific screen. If the jurisdiction requires specific information you will enter that information here. If there is no required information click Next.

Customer Specific

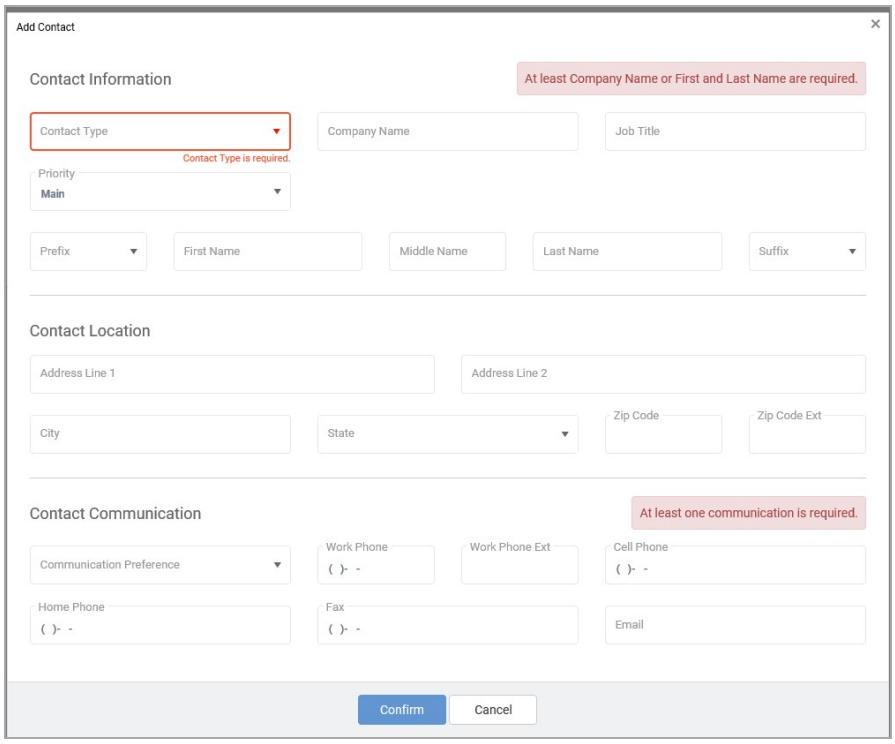
The next screen to appear is the Customer Specific screen. If the customer requires anything specific, the information will be requested and input here. Once complete, or if there are no customer specific requirements, click Next.



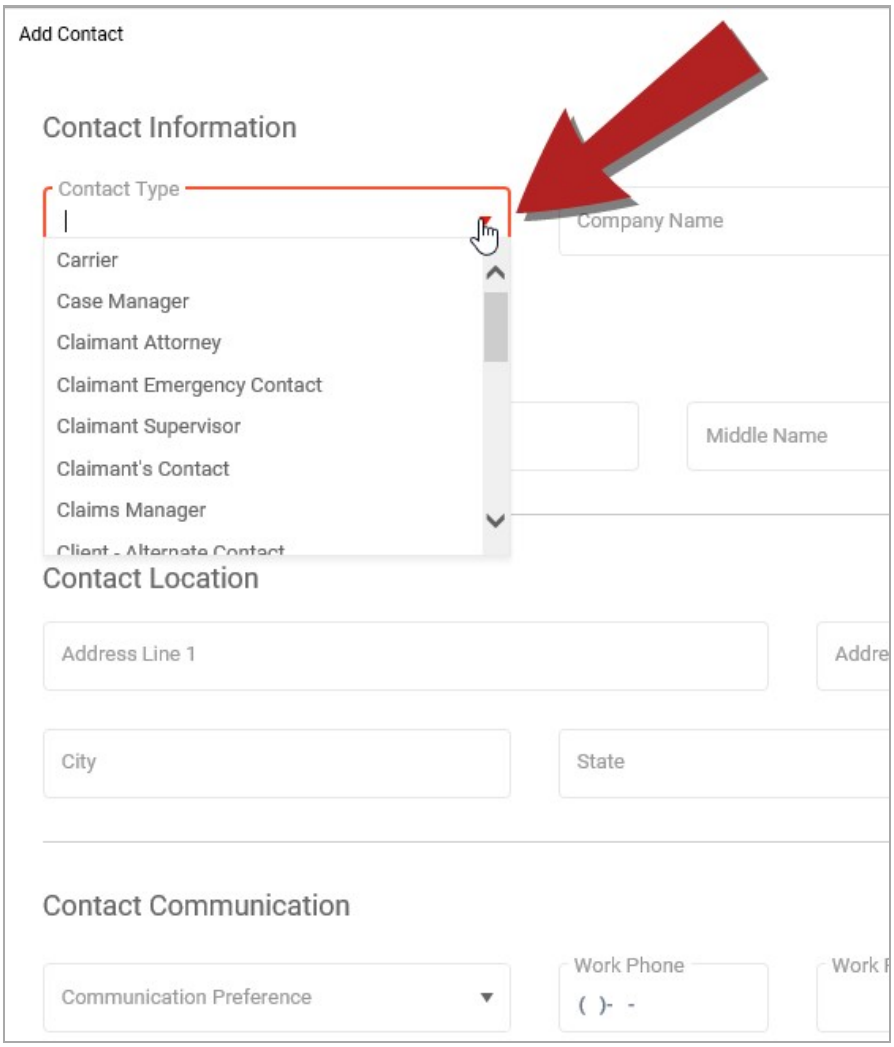
Enter the information and click Next.

Contacts

All of the previously entered contact information is provided in this view. Additional contacts may also be entered by clicking Add Contact.

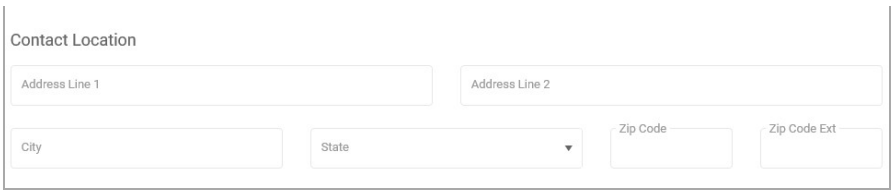


Select the Contact Type from the drop down menu.

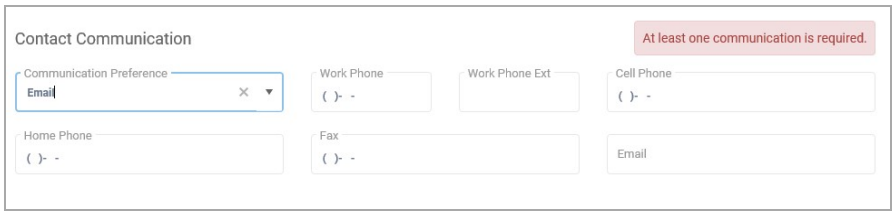


Providing either a Company Name or First and Last Name of the contact are required.

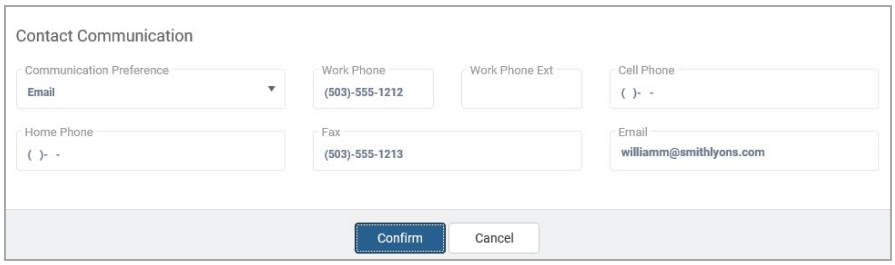
Provide any Address information you have on the contact.



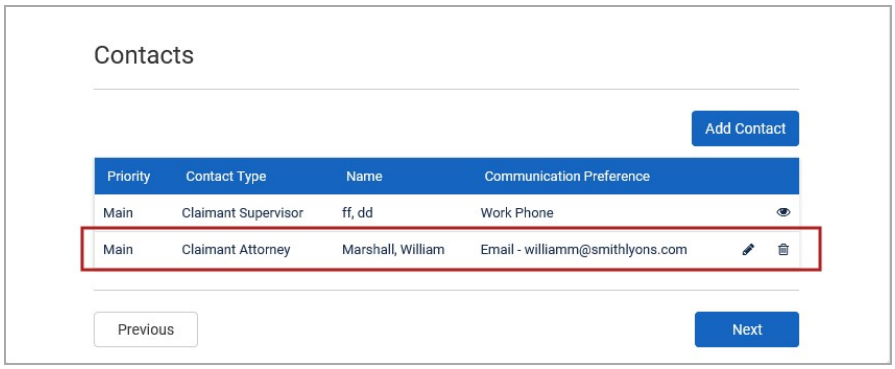
A communication preference is required. Select one option for the Communication Preference drop down menu. Additional phone, fax and e-mail information may also be provided in the Contact Communication section.



Once all known contact information is complete, click Confirm to return to the Contacts list.

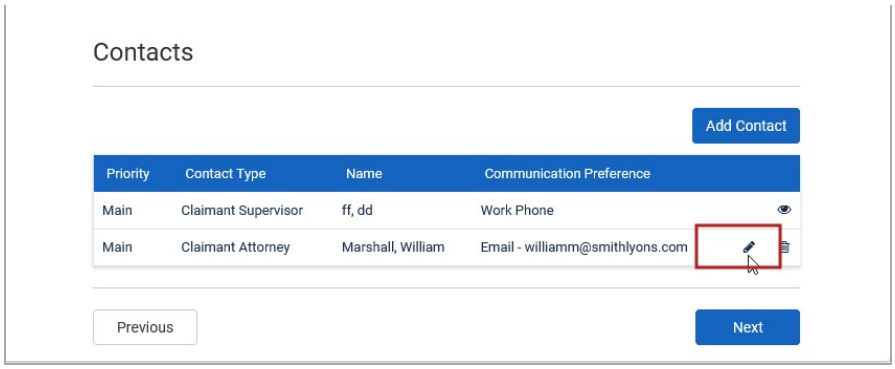


At this point, you may continue to add another contact or click Next to move forward in the intake completion process.



Edit a Contact

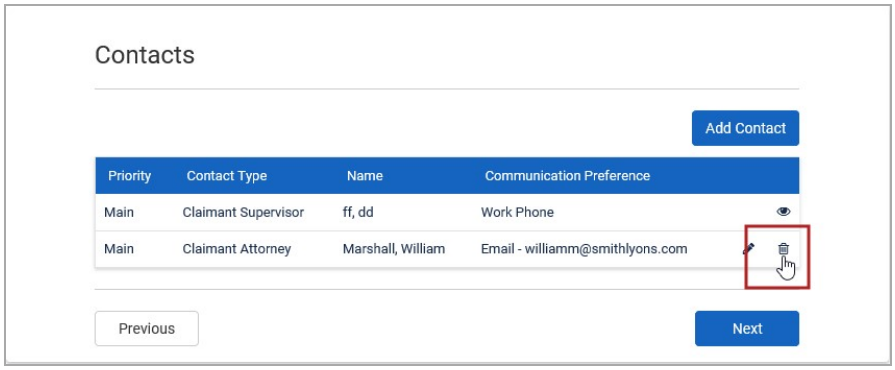
If a contact is manually added to the intake it may be edited through the intake process. Click on the Edit icon.



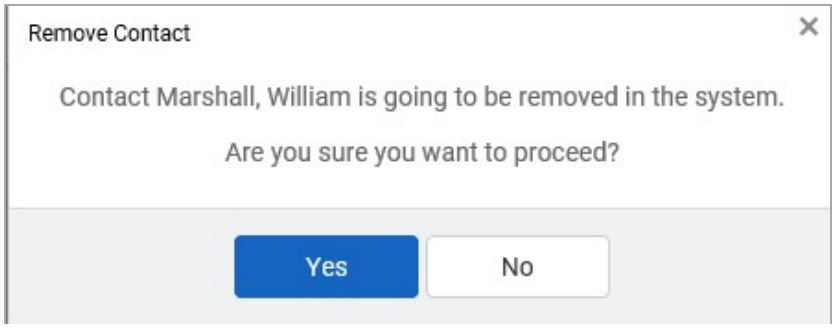
This opens the contact information in an edit mode and additional information or correcting existing information may be completed. Once Complete click Confirm to save changes.

Delete a Contact

If a contact is manually input the contact may be deleted from the Contacts list during the intake process. To delete the contact click the Delete icon.



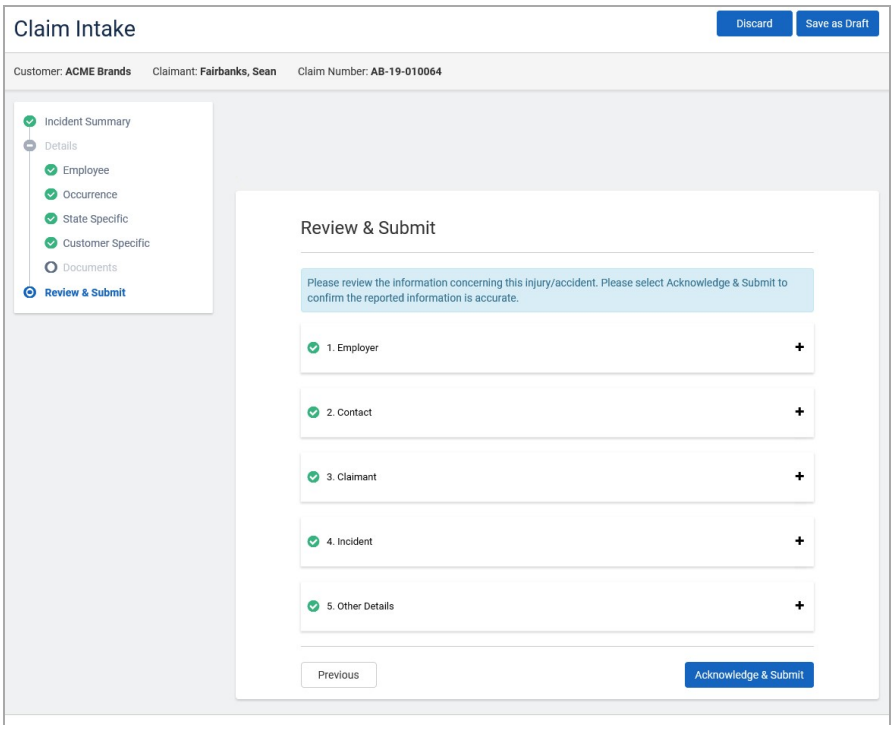
The system will ask you to confirm you wish to remove the contact from the system. Click Yes to delete the contact.



Review & Submit

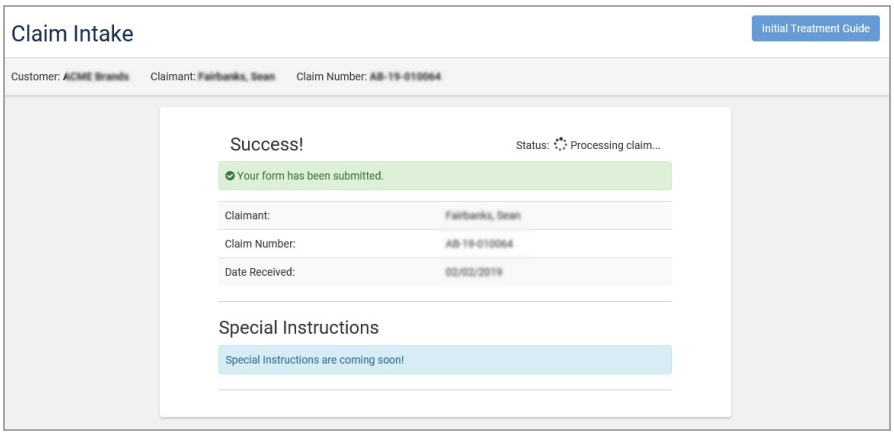
The last step in the Detail section is Documents. This will allow documents to be uploaded to the intake process. Those documents will be uploaded to the claim upon it's creation.

After clicking next on the Customer Specific page will bring you to the Review & Submit window.



Click + in each section to review the information. When you are through, click Acknowledge & Submit. There is a check for duplicates.

When your form is successfully submitted, you will see a confirmation screen:



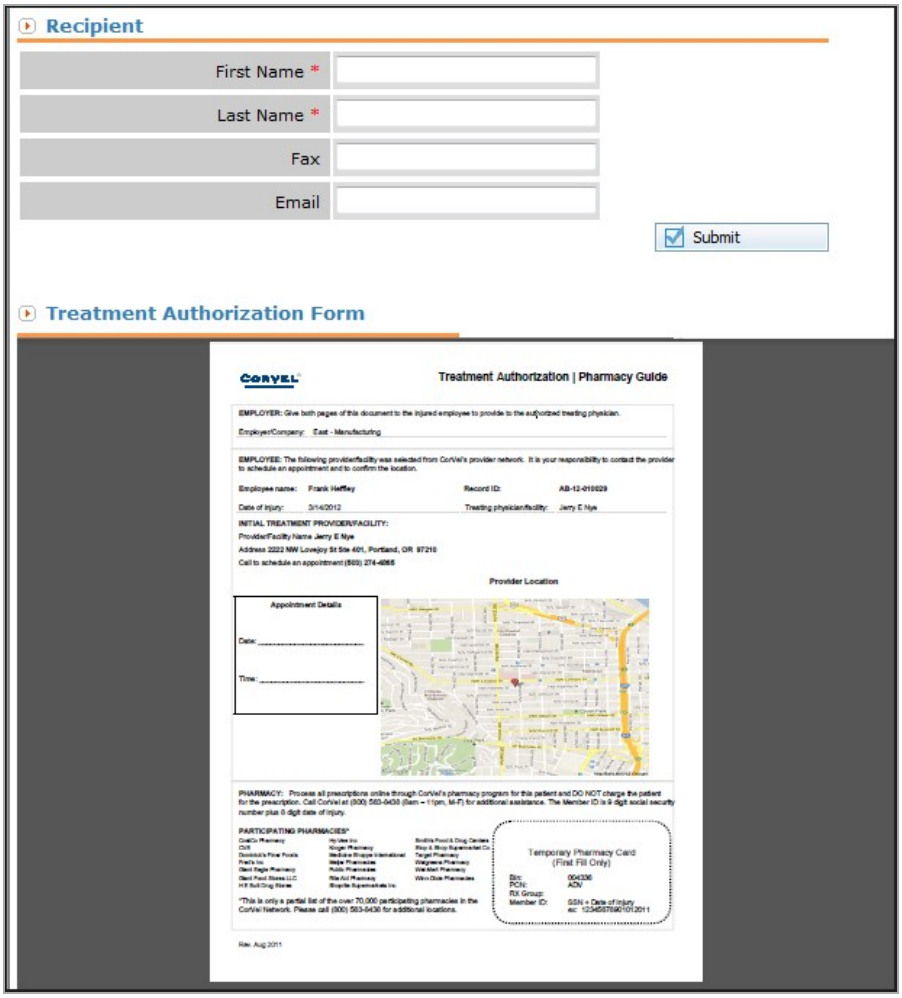
Initial Treatment Guide

The Initial Treatment Guide is comprised of a Treatment Authorization, Pharmacy Guide and a Physician's Report page. A copy of the Initial Treatment Guide may be generated as a PDFand printed or sent to recipients via e-mail or fax.

Pharmacy Guide

Recipient: Fill out the form and Click Submit to Email or Fax the Initial Treatment Guide to the recipient of your choice.

Initial Treatment Provider/Facility: Includes a provider location map and Call to Schedule Appointment: info space.

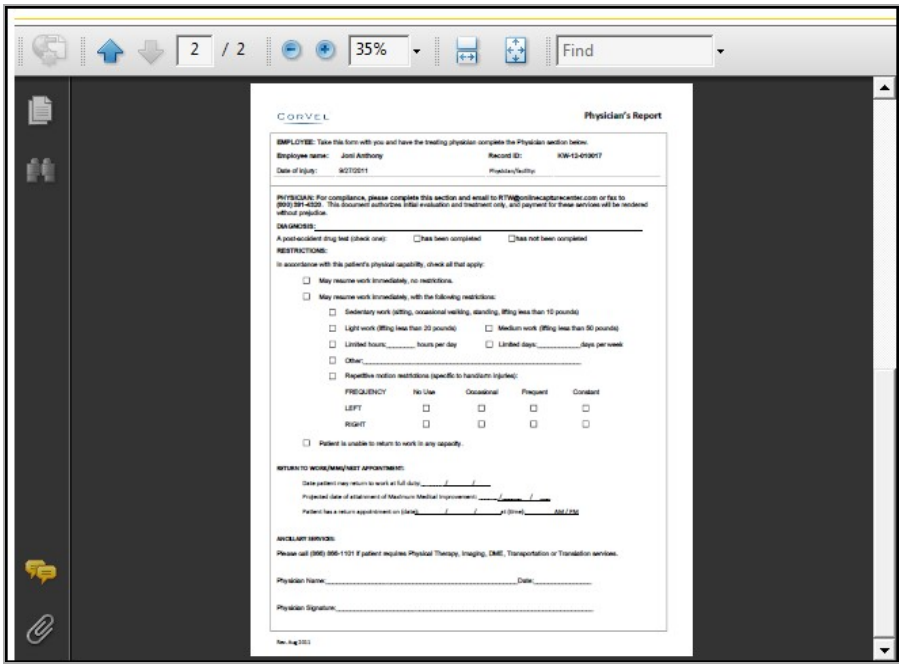


Temporary Pharmacy Card: Enables the Injured Worker to quickly fill a prescription. Card is only valid for the First Fill Only.

Physician's Report

Physician's Report includes:

- Physician and Patient Information
- Diagnosis
- Restrictions
- Return to Work, MMI and Next Appointment dates
- Ancillary Services contact info

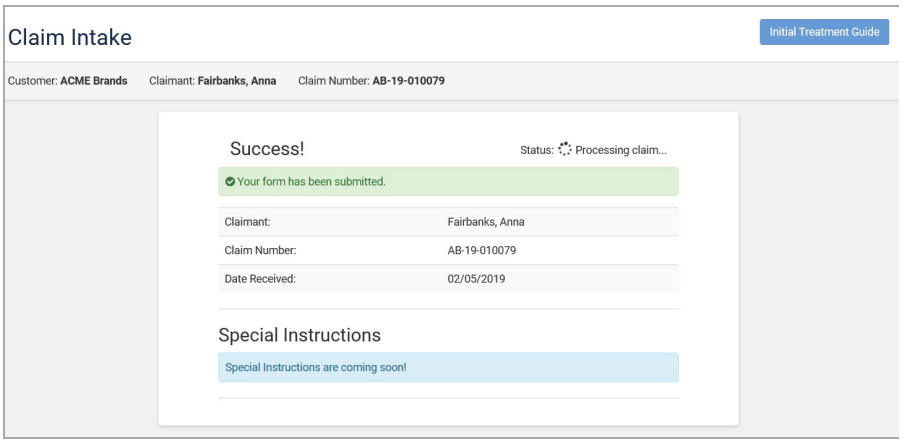


When you are finished with the Initial Treatment Guide form, click Submit.

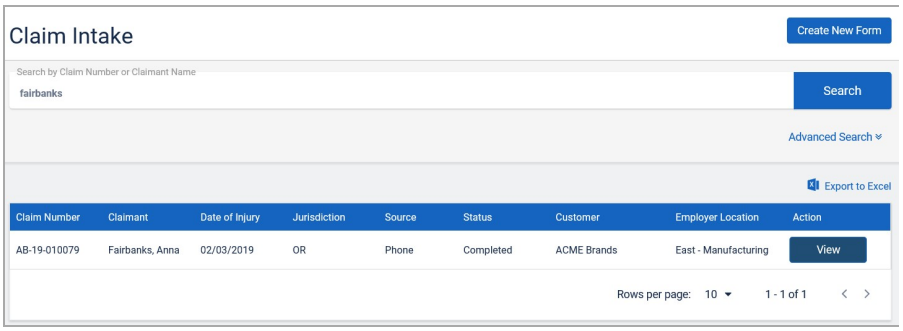
Additional access to the Initial Treatment Guide

Once the Initial Treatment Guide has been created, you can access it from:

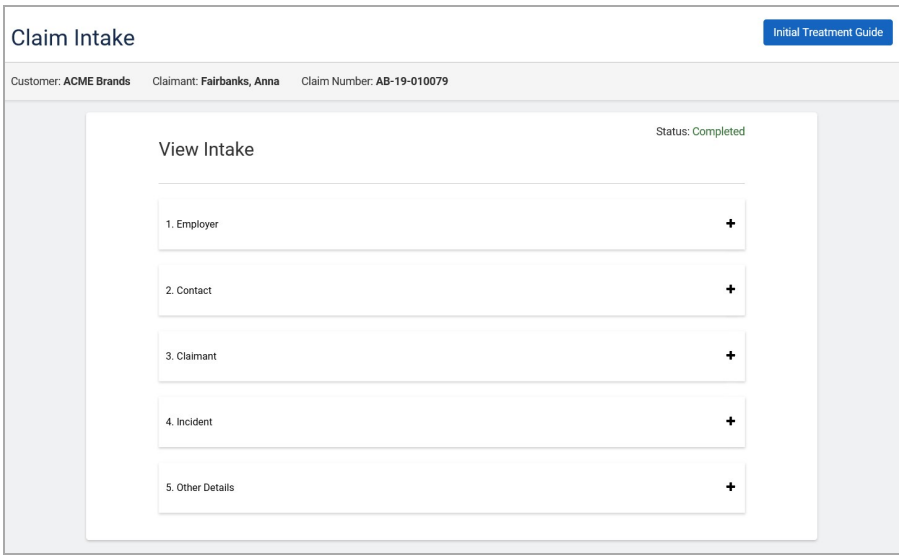
- Intake Submittal Success screen



- From the Intake list, click View on the claim intake.

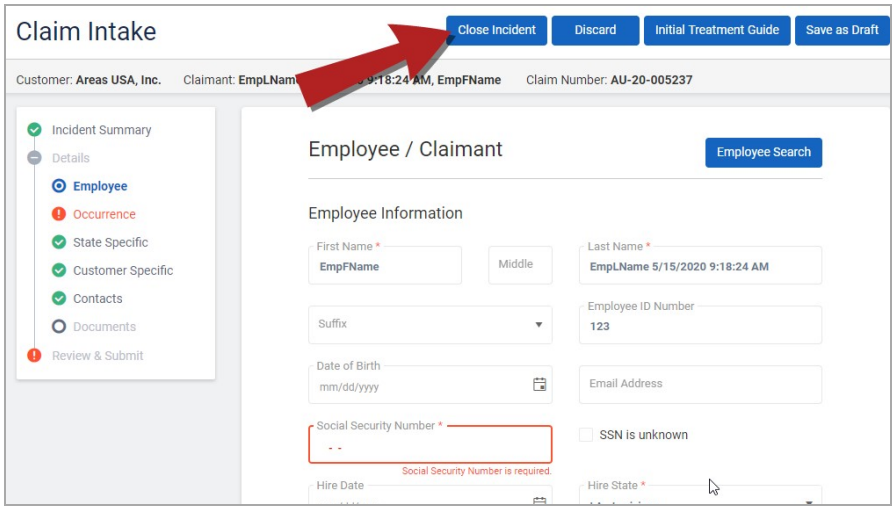


- Click Initial Treatment Guide.

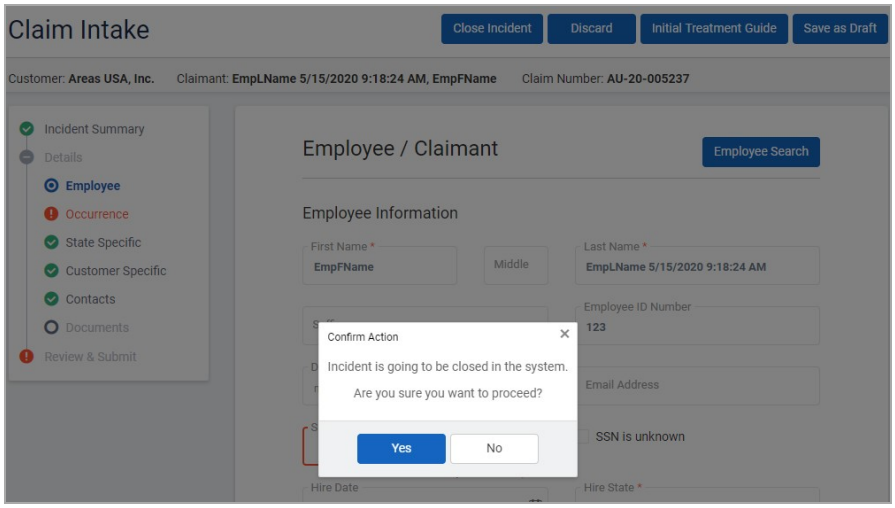


Close Incident

If the severity of the injury will require no medical treatment or first aid, you can close the incident before it is submitted. This function requires permissions within your CareMC security settings. The Close Incident option is available while creating a new claim intake or a claim intake that is in the status of In Progress. Prior to submitting the intake, click on Close Incident to proceed with the incident closure process.



Click on Close Incident to close the intake process.



After clicking Yes, there will be a notice of closure of the intake in a pop-up which will automatically close.