Attendance

- **ONE** email from **EITHER** the PRIMARY or the ALTERNATE administrator. ONLY the NEW e-filers; existing users need not send an email 😊

- **PUT YOUR UAN –**AND YOUR NAME IN THE SUBJECT LINE

- **SEND TO:**  EFORMS@DIR.CA.GOV

- **FAILURE TO DO SO BY 9:25 A.M. WILL PREVENT YOU FROM E-FILING**
Agenda

• Introduction
• How to e-form File
• EAMS Help Desk
• The Unprocessed Document Queue (UDQ)
• Tips & Tricks from Current e-form Users
• Q&A
Q & A Process

• Write down your questions – leave room for answers
• Note your main question – ask it first
• Press *1 if you want to ask a question
  – Our Moderator will be connecting you in order
• Each administrator will be able to ask 1 question initially
  – If you have more, press *1 to get back in the queue
• Listen carefully to each question
  – Many of yours will be answered as we go, if so, press *2 to leave the queue
• If you have more, press *1 to get back in the queue
Website links

• Main EAMS Page
  – www.dwc.ca.gov/eams

• Uniform Assigned Name (UAN) Online Database
  – http://www.dir.ca.gov/dwc/eams/eams-lc/eams_ClaimsAdmins_Reps.htm

• Public Case Information Search
  – Information
    http://www.dir.ca.gov/dwc/eams/EAMS_PublicInformationSearch.htm
  – Search https://eams.dwc.ca.gov/WebEnhancement/

• At the bottom of the EAMS main page is a section titled “Working In EAMS” where you will find the links to the UAN and the EAMS Case Number Lookup Tool as well
Web Case Information Access

• If you haven’t seen this yet, get going!
• First place to look to prepare for your filing
• Search case information on all cases
  – Search by Case Number or Injured Worker
  – Results include:
    • Case Participants with address (not injured worker_)
    • Body Parts
    • Current WCJ, Venue (Case Location), Case Number
    • Next Hearing Date
    • Will show if there is DEU Product and if case is archived
    • Case Events
E-form Registration

• Organization
  – They are assigned either a UAN
  – Person
    • Primary administrator in EAMS

• User
  – Linked by username and password to allow access to your cases

• Administrator and Alternate
  – First level of support in their office
Logons

• Username
• Password
• Only 1 person in your office can be logged in at a time submitting e-forms
Multiple methods of submitting documents

- E-forms
- OCR
- JET
  - This link has more information about the methods above
    http://www.dir.ca.gov/dwc/eams/EAMS_GettingReady.htm

- Except documents completed at District Office or otherwise specified, e.g. DOR for satellite District Office, Regular DOR if e-form filing not successful, DOR for asbestos cases
Civil Code Section 1798 Compliance

• Maintain reasonable security procedures and practices
• Promptly disclose any breach OR potential breach
  – To resident whose information was compromised
  – To DWC
Administrator and Alternate Responsibilities

• Enforce contract conditions
• Security, procedures, training and supervision
• Report and disclose actual or potential breach
• First level support
• Assist and participate with DWC
Uniform Assigned Names

• EAMS regulation section 10205.5 (b)
• Claims administrators’ offices
• Representatives’ offices
• Lien claimant offices
• Name = name/location combination
• Assigned by DWC
• Posted on Website & updated daily
Uniform Assigned Names – cont’d

• Don’t make up your own
• Use only those from the online database list
• Use for ALL case participants that have a UAN
  – LAW FIRMS
    • Including non-attorneys ~ Lien claimant representatives
  – CLAIMS ADMINISTRATORS’ OFFICES
  – LIEN CLAIMANTS

• Must list their address exactly as listed in the database

• If you don’t have a UAN for an entity that should, get it before you file – don’t just leave it blank

• If you have a problem with an entity getting them to register, email CRU@DIR.CA.GOV
Registration

- Central Registration Unit (CRU)
- E-mail CRU@DIR.CA.GOV
- Fax 1-888-822-9309
- **New** offices and **changes** to the office
- Preferred method of service from the WCAB
- Change in **Handling Location**
- Remember, it is not just your UAN, but also the UAN for all other such entities on the e-Form
Searching for UAN’s

Claims administrators' offices, representatives' offices and lien claimants

Click to search claims administrators' offices or representatives' offices or lien claimants

Download tab-separated files for claims administrators' offices or representatives' offices or lien claimants

- UEBTF/SIBTF office locations
- OD legal office locations
- Death Without Dependents Unit
- CalPERS

Uniform assigned names for claims administrators’ offices, representatives’ offices and lien claimants
DWC EAMS - claims administrators' offices search

Back to claims administrators' offices, representatives' offices and lien claimants page.

The best way to search is with the 5-digit ZIP Code for the mailing address of the claims administrator's office.

Claims' administrators' search criteria

<table>
<thead>
<tr>
<th>EAMS No</th>
<th>Name</th>
<th>Addr 1</th>
<th>Addr 2</th>
<th>City</th>
<th>State</th>
<th>zip</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>zenith</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

List of claims administrators' offices

<table>
<thead>
<tr>
<th>EAMS No</th>
<th>Name</th>
<th>Address Line 1</th>
<th>Address Line 2</th>
<th>City</th>
<th>State</th>
<th>ZIP</th>
<th>Phone</th>
<th>Service</th>
<th>Updated</th>
</tr>
</thead>
<tbody>
<tr>
<td>3760076</td>
<td>ZENITH FRESNO</td>
<td>PO BOX 9055</td>
<td></td>
<td>VANY</td>
<td>CA</td>
<td>91409</td>
<td>(800) 508-9910</td>
<td>US Mail</td>
<td>2/19/2010 11:02:00 AM</td>
</tr>
<tr>
<td>5031246</td>
<td>ZENITH ORANGE</td>
<td>PO BOX 9055</td>
<td></td>
<td>VANY</td>
<td>CA</td>
<td>91409</td>
<td>(714) 705-2300</td>
<td>US Mail</td>
<td>2/19/2010 11:33:00 AM</td>
</tr>
<tr>
<td>4395865</td>
<td>ZENITH PLEASANTON</td>
<td>PO BOX 9055</td>
<td></td>
<td>VANY</td>
<td>CA</td>
<td>91409</td>
<td></td>
<td>US Mail</td>
<td>2/19/2010 11:41:00 AM</td>
</tr>
<tr>
<td>4396356</td>
<td>ZENITH SACRAMENTO</td>
<td>PO BOX 9055</td>
<td></td>
<td>VANY</td>
<td>CA</td>
<td>91409</td>
<td>(877) 280-4701</td>
<td>Fax</td>
<td>2/19/2013 10:49:00 AM</td>
</tr>
</tbody>
</table>
### DWC EAMS - representatives' offices search

Back to claims administrators' offices, representatives' offices and lien claimants page.

The best way to search is with the 5-digit ZIP Code for the mailing address of the representative’s office.

**Representatives' search criteria**

<table>
<thead>
<tr>
<th>EAMS No</th>
<th>Name</th>
<th>Addr 1</th>
<th>Addr 2</th>
<th>City</th>
<th>State</th>
<th>zip</th>
</tr>
</thead>
<tbody>
<tr>
<td>4225982</td>
<td>FRANCESCA HANNAN VENTURA</td>
<td>PO BOX 7062</td>
<td></td>
<td>VENTURA</td>
<td>CA</td>
<td>93006</td>
</tr>
<tr>
<td>4995983</td>
<td>HANNA BROPHY BAKERSFIELD</td>
<td>PO BOX 12488</td>
<td></td>
<td>OAKLAND</td>
<td>CA</td>
<td>94604</td>
</tr>
<tr>
<td>4538047</td>
<td>HANNA BROPHY FRESNO</td>
<td>PO BOX 12488</td>
<td></td>
<td>OAKLAND</td>
<td>CA</td>
<td>94604</td>
</tr>
<tr>
<td>4995984</td>
<td>HANNA BROPHY LOS ANGELES</td>
<td>PO BOX 12488</td>
<td></td>
<td>OAKLAND</td>
<td>CA</td>
<td>94604</td>
</tr>
<tr>
<td>4435415</td>
<td>HANNA BROPHY OAKLAND</td>
<td>PO BOX 12488</td>
<td></td>
<td>OAKLAND</td>
<td>CA</td>
<td>94604</td>
</tr>
<tr>
<td>6592258</td>
<td>HANNA BROPHY ORANGE</td>
<td>PO BOX 12486</td>
<td></td>
<td>OAKLAND</td>
<td>CA</td>
<td>94604</td>
</tr>
<tr>
<td>4600719</td>
<td>HANNA BROPHY</td>
<td>PO BOX 12486</td>
<td></td>
<td>OAKLAND</td>
<td>CA</td>
<td>94604</td>
</tr>
</tbody>
</table>

**List of representatives' offices**

- **EAMS No**: The unique identifier for each representative's office.
- **Name**: The name of the representative.
- **Address Line 1**: The primary address line.
- **City**: The city where the office is located.
- **State**: The state where the office is located.
- **ZIP**: The ZIP Code for the office's mailing address.
- **Phone**: The contact phone number for the office.
- **Service**: The primary method of communication (US Mail).
- **Updated**: The date and time the information was last updated.

Type in search criteria and **Submit Search** to find specific representatives' offices. Get results by pressing **Submit Search**.
Insurance Carrier Information (if known and if applicable - include even if carrier is adjusted by claims administrator)

ZENITH INSURANCE COMPANY

309 HACIENDA DR 200

PLEASANTON

City

DWC-CA form 10214 (c) (Rev. 11/2008) (Page 2 of 9)

Claims Administrator Information (if known and if applicable)

ZENITH PLEASANTON

Name (Please leave blank spaces between numbers, names or words)

PO BOX 8002

Street Address/PO Box (Please leave blank spaces between numbers, names or words)
Applicant's Attorney or Authorized Representative:

- Law Firm/Attorney
- Non Attorney Representative

First Name

Last Name

4332459

Law Firm Number

MAL CAMERON PLEASANTON

Law Firm Name

PO BOX 1539

Address/PO Box (Please leave blank spaces between numbers, names or words)

PLEASANTON

City

CA

State

94566

Zip Code

Defendant's Attorney or Authorized Representative:

- Law Firm/Attorney
- Non Attorney Representative
<table>
<thead>
<tr>
<th>Defendant’s Attorney or Authorized Representative:</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Law Firm/Attorney</td>
</tr>
<tr>
<td>[x] Non Attorney Representative</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>First Name</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Last Name</th>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Law Firm Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Law Firm Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>HANNA BROPHY OAKLAND</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address/PO Box</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Please leave blank spaces between numbers, names or words)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OAKLAND</th>
</tr>
</thead>
<tbody>
<tr>
<td>State</td>
</tr>
<tr>
<td>CA</td>
</tr>
<tr>
<td>Zip Code</td>
</tr>
<tr>
<td>94604</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Insurance Carrier Information (if known and if applicable - include even if carrier is adjusted by claims administrator)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ZENITH INSURANCE COMPANY</td>
</tr>
</tbody>
</table>
S Signature

• Proper format:

  S FIRSTNAME LASTNAME

  S JOHN JONES

• Do NOT use any slashes/dashes
• Do NOT forget to type the person’s name
S Signature – cont’d

• Only to be used on e-forms – NEVER on an OCR form

• A representatives’ office filing for the IW or lien claimant, only your S signature goes on the e-form

• Must use on the e-form

• May use on:
  – Proof of Service
  – 10770.5 Verification
  – 10770.6 Verification

• Do not use on e-form settlement documents
Wet Signature

• This is an actual signature on a document

• You CANNOT use a GIF, JPEG, digital signature or a signature stamp – it MUST be an actual signature

• Examples of where a “wet” signature is required:
  – Petitions, Objections
  – Signed OCR Settlement Documents that you scan and attach
  – Documents requiring IW or employer signature
Signatures: Two Versions

• **Version I**: Forms that require only one signature:

- Prepare the e-Form — attach the following to the e-Form:
  - Document(s) per filing package requirements
  - Proof of Service — be sure to use proof of service document title — ADJ — LEGAL DOCS — PROOF OF SERVICE

• **DON’T FORGET THE S SIGNATURE ON THE FORM**

  in the format: S JOHN JONES
E-forms - S signature only

- Application for Adjudication of Claim
- Answer to Application for Adjudication of Claim
- Declaration of Readiness to Proceed
- Declaration of Readiness to Proceed - Expedited
- EDD Golden Rod – 2581
- Notice and Request for Allowance of Lien
- Petition to Terminate Liability for TD
- Request for Reimbursement of Accommodation Expense
- Request for Dispute Resolution before the AD
- Request for Dispute Resolution
- Request for Summary Rating – QME RU-101
- Request for Reconsideration of Summary Rating by AD
- Request for Summary Rating Determination - PTP
Signatures: Two Versions – cont’d

• **Version II**: Forms requiring two or more signatures:

  • Prepare the e-form — attach the following to the e-form
    – Signed version of OCR form
    – Any additional attachments that are necessary
    – Proof of Service

• What about forms requiring only one signature, but not your signature?
  – Use Version II
  – Example: Employee’s disability questionnaire or Notice of Offer of Regular Work, which require the injured worker’s or employer’s signature
E-forms – 2 or more signatures

• Application for Subsequent Injuries Fund Benefits
• Compromise and Release
• Compromise and Release Dependency Claim
• Stipulation with Award (Death)
• Stipulations with Request for Award
• Third Party Compromise and Release
• Notice of Offer of Modified or Alternative Work
• Voucher (IW only)
• Notice of Offer of Regular Work (employer/IW only)
• Employee’s Permanent Disability Questionnaire (IW only)
• Application for Discretionary Payments from the UEBTF (IW only)
e-forms with No signature Line

- Request for Consultative Rating
- General Public Request for Information
- Unstructured e-Form
Search for your case

• There are two methods to find your case
  – By EAMS Case Number
  – By Person Search
External Home Page

[Image Description]

- External User Search
- eForms

Search Criteria:
- Case Number:
- Legacy Case Reference:
- Date Of Injury:
- Participant Type: Person

Search Results:
- Case Number
- Injured Worker
- Date Of Injury
- Case Type
- Date Opened
- Status
- Archived
Search by EAMS Case Number

Enter the EAMS ADJ Case Number

Then Click Search
Search by EAMS Case Number – cont’d

If you are not a case participant, you will get this message.
Search by EAMS Case Number – cont’d

If you are a case participant, you will receive these search results.

Click on the ADJ Case Number to see case information

See Reference Guide for steps to take if this field says “Archived”
Search by person

• There are three methods:

  – By Alternate ID – generally SSN

  – By Name alone – best if by name and DOB

  – By EAMS Reference Number (ERN)
Search by person

Click on the Magnifying Glass
Search by person – by Alternate ID (SSN)

Then click on Social Security Number

Click drop down list arrow
Search by person – by Alternate ID (SSN) – cont’d

Enter the SSN

Then click on Search

<table>
<thead>
<tr>
<th>Reference Number</th>
<th>First Name</th>
<th>Last Name</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Then click on Select
Search by person – by Alternate ID (SSN) – cont’d

Then click on Search
Search by person – by Alternate ID (SSN) – cont’d

1. Then click on Search

2. If you are not a case participant, you will get this message
3. If you are a case participant, you will receive these search results.

Click on the ADJ Case Number to see case information.

See Reference Guide for steps to take if this field says “Archived”.
ADJ Home Page
Search by person

Click on the Magnifying Glass
Search by person – by Name

Enter the person’s last name and first name

Then click on Search
Search by person – by Name – cont’d

![Person Search Webpage Dialog]

### Search Criteria
- **Reference Number:**
- **Alternate ID Type:**
- **Last Name:** estrada
- **Date of Birth:**
- **Alternate ID:**
- **First Name:** dolores

### Search Results (Number of Items: 12)

<table>
<thead>
<tr>
<th>Reference Number</th>
<th>First Name</th>
<th>Last Name</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>993049</td>
<td>DOLORES</td>
<td>ESTRADA</td>
<td>Select</td>
</tr>
<tr>
<td>1118953</td>
<td>DOLORES</td>
<td>ESTRADA</td>
<td>Select</td>
</tr>
<tr>
<td>1302711</td>
<td>DOLORES</td>
<td>ESTRADA</td>
<td>Select</td>
</tr>
<tr>
<td>1435935</td>
<td>DOLORES</td>
<td>ESTRADA</td>
<td>Select</td>
</tr>
<tr>
<td>1528890</td>
<td>DOLORES</td>
<td>ESTRADA</td>
<td>Select</td>
</tr>
<tr>
<td>1703039</td>
<td>DOLORES</td>
<td>ESTRADA</td>
<td>Select</td>
</tr>
<tr>
<td>1789050</td>
<td>DOLORES</td>
<td>ESTRADA</td>
<td>Select</td>
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<td>2050409</td>
<td>DOLORES</td>
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<td>Select</td>
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<tr>
<td>2380088</td>
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<td>ESTRADA</td>
<td>Select</td>
</tr>
<tr>
<td>2685786</td>
<td>DOLORES</td>
<td>ESTRADA</td>
<td>Select</td>
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<tr>
<td>3175607</td>
<td>DOLORES</td>
<td>ESTRADA</td>
<td>Select</td>
</tr>
<tr>
<td>2685786</td>
<td>DOLORES LOLA</td>
<td>ESTRADA MORENO</td>
<td>Select</td>
</tr>
</tbody>
</table>
Here, we entered the DOB with a last and first name to better refine our search.

Then click on Select.
Search by person – by Name – cont’d

Then click on Search
If you are a case participant, you will receive these search results.

Click on the ADJ Case Number to see case information.

See Reference Guide for steps to take if this field says “Archived”
ADJ Home Page
Filing e-forms
Login Page

Fields marked with an asterisk (*) are required.
Enter your username and password to log in.

Username: 
Password: 

This site requires JRE 1.6.0 or higher
This site best viewed with Microsoft Internet Explorer 6.0+
External Home Page = eForms link

Click on eForms
### Adjudication
- APPLICATION FOR ADJUDICATION
- ANSWER TO APPLICATION FOR ADJUDICATION OF CLAIM
- APPLICATION FOR SUBSEQUENT INJURIES FUND BENEFITS
- COMPROMISE RELEASE
- COMPROMISE RELEASE DEPENDENCY CLAIM
- DECLARATION OF READINESS TO PROCEED
- DOR EXPEDITED TRIAL
- GOLDEN ROD LIEN FORM (DE2581)
- NOTICE AND REQUEST FOR ALLOWANCE OF LIEN
- PETITION TO TERMINATE LIABILITY FOR TEMPORARY DISABILITY INDEMNITY
- STIPULATION WITH AWARD/DEATH
- STIPULATIONS WITH REQUEST FOR AWARD
- THIRD PARTY COMPROMISE AND RELEASE

### Disability Evaluation Unit
- EMPLOYEE'S PERMANENT DISABILITY QUESTIONNAIRE AND REQUEST FOR SUMMARY DETERMINATION - OME REPORT
- REQUEST FOR CONSULTATIVE RATING
- REQUEST FOR RECONSIDERATION OF SUMMARY RATING BY THE AD
- REQUEST FOR SUMMARY RATING DETERMINATION - PRIMARY TREATING PHYSICIAN REPORT
- REQUEST FOR SUMMARY RATING DETERMINATION - OME REPORT

### Vocational Rehabilitation
- DWC-AD-10005 (RTW) REQUEST FOR REIMBURSEMENT OF ACCOMMODATION EXPENSE
- DWC-AD-10133.53 (SJOB) NOTICE OF OFFER OF MODIFIED OR ALTERNATIVE WORK
- DWC-AD-10133.55 (SJOB) REQUEST FOR DISPUTE RESOLUTION BEFORE THE ADMINISTRATIVE DIRECTOR
- DWC-AD-10133.57 (SJOB) VOUCHER
- NOTICE OF OFFER OF REGULAR WORK
- NOTICE OF TERMINATION OF VOCATIONAL REHABILITATION
- REQUEST FOR DISPUTE RESOLUTION
- SETTLEMENT OF PROSPECTIVE VOCATIONAL REHABILITATION SERVICES
- VOCATIONAL REHABILITATION PLAN

### Uninsured Employment Fund
- APPLICATION FOR DISCRETIONARY PAYMENTS FROM THE UEF
e-form Layout
### State of California
**DWC District Office**
**E-Cover Sheet**

**Companion Cases Exist**: [ ]

**More than 15 Companion Cases**: [ ]

**Location:**

**Walk Thru**

**Yes**: [ ]

<table>
<thead>
<tr>
<th>Date: (MM/DD/YYYY)</th>
<th>Case Number*</th>
<th>SSN (Numbers Only)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **Specific Injury**
  - (If Specific Injury, use the start date as the specific date of injury)
  - **START DATE**: (MM/DD/YYYY)
  - **END DATE**: (MM/DD/YYYY)

- **Cumulative Injury**
  - **START DATE**: (MM/DD/YYYY)
  - **END DATE**: (MM/DD/YYYY)

- **Body Part 1**
- **Body Part 2**
- **Body Part 3**
- **Body Part 4**
- **Other Body Parts**

---

**Please check unit to be filed on (check only one box)**

- ADJ
- DEU
- SIF
- UEF
- VOC
- INT
- RSU

---

57
e-forms: DEU 101 and DEU 100

DEU-101 (Request for Summary Rating Determination) and DEU-100 (Employee’s Disability Questionnaire) are in “one” e-form
e-forms: Social Security Number

SSN – NOT a required field – but use it on case opening documents if you have it. Do not enter the dashes, just numbers.
e-forms: Date Format

Dates MUST be in MM/DD/YYYY format – with leading “0” when a single digit month or day
e-forms: No Companion Cases

- If there are no companion cases, fill out Coversheet 1 and then click on Form 1
e-forms: Venue Location

When filling out Form 1 (page 1) of the Application for Adjudication of Claim, C&R, or Stips the ZIP Code determines the Venue.

Venue Choice is based upon:

- County of residence of employee (Labor Code section 5501.5(a)(1) or (d))
- County where injury occurred (Labor Code section 5501.5(a)(2) or (d))
- County of principal place of business of employee’s attorney (Labor Code section 5501.5(a)(3) or (d))

* Enter the zipcode for the venue choice designated above, and then tab to Hearing Location Field and choose the corresponding Hearing Location Code.
Unstructured e-form
Unstructured e-form - con’t

Enter **ONLY** Case Numbers Here – Do **NOT** enter IW name – this is where you add companion case number(s)

If it is a document your office prepared, enter your UAN; if a medical report, the practitioner’s name; if subpoenaed records, the name of the facility; if it is a document from a claims administrator office, their UAN; if it is a document from an employer, the employer’s name; if it is a document from an entity with a UAN, their UAN
Unstructured e-form - con’t

After you click “ADD” the companion case number(s) moves to this field.
Unstructured e-form – con’t
Unstructured e-form - Select File to Attach
Unstructured e-form - Attachment selected
Unstructured e-form - Ready to Submit

![Unstructured Eform - Windows Internet Explorer](https://eamsadm.dwc.ca.gov/dwceforms/wip/attachData)

Master Case Number: [ ]
Case Reference:
Enter Case Reference:  
ADD  DELETE
Case Type: ---select---
Document Type: ---select---
Document Title: (You must select Case Type before selecting Doc Type)

Author:
Document Date: (mm/dd/yyyy)
File Upload:  
Attachment  Close

<table>
<thead>
<tr>
<th>Master Case Reference</th>
<th>Case ID</th>
<th>Case Type</th>
<th>Document Type</th>
<th>Document Title</th>
<th>File Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADJ123456789</td>
<td>ADJ</td>
<td>LEGAL DOCS</td>
<td>PETITION FOR JOINDER</td>
<td>C:\Documents and Settings\charles ellison\My Documents\PETITION FOR JOINDER.pdf</td>
<td>Delete</td>
</tr>
</tbody>
</table>

Submit
If you enter a future date in a required field, or fail to enter any information in a required field you’ll get an error message when you click Submit. Click OK and you will be redirected to the specific field to fix the error. HOWEVER, if you misspell names, addresses, etc. in a required field – your document will then go to the unprocessed document queue (UDQ) where a clerk will try to figure out what went wrong.
e-forms: Document Service

- When you have to serve documents to other parties you will need to print your e-form.
- Use the “print PDF” function on the form to print all at once and/or save to your hard drive
- You only need to print the pages on which you have filled in data

- PRINT BEFORE YOU CLICK SUBMIT
Batch ID - Success!

Submission of this eform through EAMS constitutes service upon any internal DWC unit.

Batch ID: 1140
Date: 10/07/2008 04:14:17
View Your Documents in FileNet

• Open the ADJ Home Page
• Click on the “INT” tab in the upper left – this opens the INT Home Page
• Scroll to the Case Documents Section – Click on the INITIALS – “ADJ” (if you click on the case number just below it, you will go back to the ADJ Home Page)
• FileNet opens – follow the directions in the Reference Guide on how to best view the documents
External Home Page

Enter the EAMS ADJ Case Number

Then Click Search
Click on the ADJ Case Number to see case information
2 ways to access Filenet

Click on “Filenet Documents”
Click on “INT” tab
Click on "ADJ"
### Actions Menu

| # | Title                                                                 | Doc Title                                      | Doc Type       | Doc Status | Admitted | Admitted Prop ID | Proponent       | Author         | Operator Id | EAMS Doc ID | Doc Date     | Doc Entry Date | Received Date | Priority Flag |
|---|----------------------------------------------------------------------|------------------------------------------------|----------------|------------|----------|-----------------|----------------|----------------|-------------|-------------|--------------|---------------|---------------|---------------|--------------|
| 1 | REQUEST FOR ORDER TAKING OFF CALENDAR                                | REQUEST FOR ORDER TAKING OFF CALENDAR          | LEGAL DOCS     | PUBLIC     |          |                 | ALAN FREEMAN CINNAMON | MARIES HIGGINS | 48782432 | 6/11/13     | 1:00 AM     | 6/11/13 1:00 AM | 6/11/13 1:00 AM | NO            |
| 2 | COVER SHEET                                                          | COVER SHEET                                    | Misc           | PUBLIC     |          |                 | MARIES HIGGINS | 48781431 | 6/9/13      | 1:00 AM     | 6/9/13 1:00 AM | 6/9/13 1:00 AM | NO            |
| 3 | DECLARATION OF READINESS TO PROCEED                                  | DECLARATION OF READINESS TO PROCEED            | LEGAL DOCS     |            |          |                 | kathy patterson | kathy patterson | 10319130 | 6/15/13     | 6:21 AM     | 6/15/13 6:21 AM | 6/15/13 6:21 AM | NO            |
| 4 | NOTICE AND REQUEST FOR ALLOWANCE OF LIEN                            | NOTICE AND REQUEST FOR ALLOWANCE OF LIEN       | LEGAL DOCS     |            |          |                 | ORTIZ CASANDRA | ORTIZ CASANDRA | 10194051 | 5/21/13     | 1:59 PM     | 5/21/13 1:59 PM | 5/21/13 1:59 PM | NO            |
| 5 | Confirmation of lien filing fee in June 2004.doc                     | CONFIRMATION OF PAYMENT 2004-2006               | LEGAL DOCS     |            |          |                 | JOEL HARTER    | kathy patterson | 9578186   | 4/5/13       | 12:00 AM    | 4/8/13 8:00 AM  | 4/8/13 8:00 AM  | NO            |
Attachments

• Do not file the following separately. Scan them in together as a single document/attachment
  – Benefit Notices – you can separate TTD from PD notices
  – Explanation of Benefits (EOBs)
  – L C 4906(g) statements
  – Medical Management Reports
  – Physical Therapy Notes
  – PR-2 Reports
Attachments to an e-form

• If you are submitting an e-form that will have attachments:
  
  Use the Attachment link at the top of the page

• Do not submit the e-form and then fill out an unstructured e-form
Case Number

- Biggest problem – sloppy typing – especially on unstructured e-form
- ADJ case numbers NEVER have zero for the first digit
- Do NOT just put “ADJ” in front of the Legacy Case Number
- Do NOT enter both the ADJ and Legacy Case Number
  - Example: do NOT put the EAMS ADJ number in the main case field and the corresponding Legacy case number in the companion case field – they are the same case
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<td>ADJ</td>
<td>MEDICAL</td>
<td>DOCS</td>
<td>AME REPORTS</td>
<td>C:\Documents and Settings\Charles Ellison\Desktop\Jones AME 1-1-09.doc</td>
<td>C:\Documents and Settings\Charles Ellison\Desktop\Jones Supplemental AME 11-1-09.doc</td>
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<tr>
<td>ADJ1234657</td>
<td>ADJ</td>
<td>MEDICAL</td>
<td>DOCS</td>
<td>TREATING PHYSICIAN</td>
<td>C:\Documents and Settings\Charles Ellison\Desktop\Jones PR-2s 9-1-07 thru 4-1-09.doc</td>
<td>C:\Documents and Settings\Charles Ellison\Desktop\Jones P&amp;S 6-1-09.doc</td>
</tr>
<tr>
<td>ADJ1234567</td>
<td>ADJ</td>
<td>MEDICAL</td>
<td>DOCS</td>
<td>P &amp; S REPORT</td>
<td>C:\Documents and Settings\Charles Ellison\Desktop\Jones P&amp;S 6-1-09.doc</td>
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<td>ADJ</td>
<td>MEDICAL</td>
<td>AME REPORTS</td>
<td></td>
<td>C:\Documents and Settings\Charles Ellison\Desktop\Smith AME 10-1-09.doc</td>
</tr>
<tr>
<td>ADJ1234567</td>
<td>ADJ</td>
<td>MEDICAL</td>
<td>AME REPORTS</td>
<td></td>
<td>C:\Documents and Settings\Charles Ellison\Desktop\Smith Supplemental AME 11-1-09.doc</td>
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<td>P &amp; S REPORT</td>
<td></td>
<td>C:\Documents and Settings\Charles Ellison\Desktop\Jones P &amp; S 6-1-09.doc</td>
</tr>
</tbody>
</table>

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Companion Cases

• Do NOT select the radio button “Companion Cases Exist” nor enter any companion case numbers for:

  – Application for adjudication of claim
  – Amended application for adjudication of claim
  – Answers
  – Case opening settlement documents
  – Lien claims
Doc Titles

- Use the **only** Correct **EXTERNAL** document titles
- Refer to the Doc Type and Title list found on the OCR forms page and the website
- **Never** use Exhibit or Evidence Doc Titles
- Scanned settlement documents use ONLY
  - ADJ – MISC – CORRESPONDENCE-OTHER – even if you are doing a walk-through of the settlement – The DCS is where you select “walk-through” “Yes” – NOT in the Doc Title
Duplicate Filing

• If you don’t see the document in FileNet after the next batch run, **WAIT**, check the next morning

• If it still is not there, email the EAMSHelpDesk
  – IW name & DOB, Batch ID #, UAN – EAMS case number if used
  – **DO NOT REFILE**

• If told it is in the UDQ, **WAIT** for the email from the UDQ Operator – **DO NOT REFILE**
  – UDQ Operator may have to un-archive a case
  – May fix the problem and reprocess
  – Will email you with the problems
Duplicate Filing – con’t

• You have emailed the EAMSHelpDesk…

• If told it is not in the UDQ, email the UDQ supervisor, *put UDQ in the subject line to get assistance

• EFORMS@DIR.CA.GOV

• with the Batch ID, IW Name & DOB, the type of document, the EAMS case number from the Document Coversheet you filed (incorrect case number may have been entered)
  – The supervisor will email you to advise if the documents were moved to the correct case or deleted.
  – **DO NOT REFILE** unless the email says they were deleted
Duplicate Filing – con’t

- Right after you click “Submit” you realized you made a mistake
- Email UDQ supervisor with
  - IW Name
  - Batch ID
  - Case Number
  - Document type
  - **DO NOT REFILE**
- If the Batch is in the UDQ it will be deleted
- If the Batch processed successfully, the documents will be deleted
- Either way, **DO NOT REFILE** – wait for an email
Fields

• If there is no information to enter in a field, **LEAVE IT BLANK**

• For example:
  – SSN – if not listing, do NOT type “NONE”
  – New case – in the case number field do NOT type “UNASSIGNED”
  – Self-insured employer – in the insurance company name do NOT type “NONE” or “SELF-INSURED”

**LEAVE IT BLANK**
Filing Date

• As you know, if you submit a batch after 5:00 p.m., or on a holiday or Saturday, assuming it is successful, the filing date is on the next DWC business day
Labeling your Documents

• Do **not** use “EXHIBIT”, “EVIDENCE” “APPLICANT 1” etc.

• Abbreviations
  – They must make sense to anyone reading it
  – I don’t know what “LSSPOFS” or “A273458353.pdf” means
  – Some you just can’t abbreviate to make sense to everyone
  – For Example:
    • Signed C&R Compromise and Release
    • Signed Stips Stipulations with Request for Award
    • NOR Notice of Representation
    • Pet 5710 Petition for LC Section 5710 attorney’s fee
    • Pet Recon Petition for Reconsideration
    • Answer-Recon Answer to Petition for Reconsideration
    • Smith AME 1/4/9 Dr. Smith’s AME report of 01/04/2009
    • POS Proof of Service
    • PD Notice Permanent Disability Notice
    • Wage Stmt Wage Statement
Non-mandatory fields

• Filling in just the marked “mandatory” fields is not enough

• Just because it isn’t mandatory doesn’t mean that the information is to be left out – just as it was pre-EAMS, you need to fill in all the information available in order for the form to be complete

• The e-form settlement document fields need to mirror or match the fields on the scanned in signed settlement document
OCR Documents

• Do **not** attach the corresponding OCR form to your e-form
  – Exceptions:
  – Settlement Documents
  – Death Application

• Do **not** prepare OCR Coversheets and Separator Sheets for unstructured documents. The Unstructured e-form takes care of this
Proof of Service

• Use the correct format in the upper left hand corner:

• Your proof of service needs all of the following in the upper left hand corner:
  • Uniform Assigned Name
  • EAMS Administrator Name
  • EAMS Administrator’s Phone – Direct or with Extension
  • EAMS Administrator’s Email
    – See instructions in the Reference Guide
Proof of Service – cont’d

• If you are attaching a list of the case participants you are serving, make it an additional page of the proof of service and scan all the pages together so you only have one document
Reprocessed Batch

• You receive an email that says “Your batch has been reprocessed”

  – This means that the UDQ Operator FIXED what was wrong that caused the batch to err to the UDQ and has re-submitted it

  – After the next batch run, check to see if the document(s) are in FileNet
    • If not, **DO NOT REFILE**
    • Email the UDQ Operator for follow-up
Self-Insured Employers

• In the Employer section, select the radio button “Self Insured”

• Do not enter anything in the Insurance Company section on the form – **LEAVE IT BLANK**

• You **MUST** enter the Claims Administrators’ Office UAN and address
  – If they self administer their claims, enter their UAN and address
  – If they use a TPA, enter the TPA’s UAN and address
Form Specifics

• Get your forms and form packages correct
• Use the reference guide for instructions
Application form package

• Application for Adjudication of Claim e-form
  – All filers

• 4906(g) – ADJ-LEGAL DOCS-4906(g) DECLARATION
  – If filed by Representative for IW only add:

• Fee Disclosure Stmt – ADJ-LEGAL DOCS-FEE DISCLOSURE STATEMENT

• Venue Authorization – ADJ-MISC-LEGAL DOCS-VENUE VERIFICATION
  – If filed by/on behalf of Lien Claimant add

• 10770.5 Verification – ADJ-LEGAL DOCS-10770.5 VERIFICATION
  – All Filers add

• Proof of Service – ADJ-LEGAL DOCS-PROOF OF SERVICE
DOR form package

- Declaration of Readiness to Proceed e-form

- Medical Report – file one, select from below:
  - ADJ-MEDICAL DOCS-QME
  - ADJ-MEDICAL DOCS-AME
  - ADJ-MEDICAL DOCS-P & S REPORT
  - ADJ-MEDICAL DOCS-TREATING PHYSICIAN
  - If the issue is non-medical, attach one document addressing the issue using ADJ – MISC – CORRESPONDENCE-OTHER

  - If filed by/on behalf of Lien Claimant add

- 10770.6 Verification – ADJ-LEGAL DOCS-10770.6 VERIFICATION

- Proof of Service (all filers) – ADJ-LEGAL DOCS-PROOF OF SERVICE
Lien form package

- **Notice and Request for Allowance of Lien e-form**

- **10770.5 Verification** – ADJ-LEGAL DOCS-10770.5 VERIFICATION
- **Proof of Service** – ADJ-LEGAL DOCS-PROOF OF SERVICE
- **4903.8(d) OR 4903.8(a)(b)** – ADJ-LIENS AND BILLS-

- Do not file the itemized statement of charges with the lien to the board. Remember to serve the other parties all documents
Ratings

• Pro Per (unrepresented)
  Use only these e-forms:

  – EMPLOYEE’S PERMANENT DISABILITY QUESTIONNAIRE
    AND REQUEST FOR SUMMARY RATING-QME REPORT
  or
  – REQUEST FOR SUMMARY RATING DETERMINATION-PRIMARY
    TREATING PHYSICIAN REPORT

• If you do not have an DEU case number, file it as a NEW CASE

• If you attach a proof of service use the attachment link on
  the e-form and use DEU-MISC–PROOF OF SERVICE
Ratings – con’t

• Represented IW
  – Use DEU Prefix even if DEU PDU does not exist – Guide page 54-55
    Use only this e-form:
• REQUEST FOR CONSULTATIVE RATING

• When you attach a proof of service use the attachment link on the e-form and use DEU-MISC–PROOF OF SERVICE
EAMS Help Desk
Contacting the EAMS Help Desk

• e-form users to contact EAMS Help Desk when you have question(s)/problem(s)

• Preferred method of contact is:
  1) Send an e-mail to EAMSHelpDesk@DIR.CA.GOV
  2) Call the Call Center @ 1-888-771-3267
    Hours: 7 a.m. to 6 p.m.
• e-mails after 5 p.m. may be handled the next business day

• NOTE: Only the administrator or alternate may contact the EAMSHelpDesk
e-form Submission

• Completion of e-form submission will generate a batch ID#
• Print batch ID# and keep for future reference
• Verify next day to see if your e-form was successfully submitted in case
• Don’t see it???
• E-mail information to EAMSHelpDesk@DIR.CA.GOV so we can research to see what happened to the e-form – remember, only the primary or alternate administrator can email the EAMSHelpDesk

(Please include Batch ID #, case #, IW’s name, and the type of e-form submitted, screen shots when appropriate, your contact information including your UAN)
Problem Solving in EAMS

• If EAMS expert is unable to determine problem after researching issue will be submitted to “issue tracker”
• What is issue tracker?
  – Additional team of EAMS experts who investigate and resolve issues
  – Issue tracker ID# will be given to external user as a reference number to track status
  – Upon response from issue tracker, external user will be contacted and notified of outcome
Problem Solving Chain of Command

1) Contact EAMSHelpDesk

2) EAMS Expert Elevates issue to VEST (Issue Tracker given to Ext User)

3) VEST to determine reason for problem/error

4) EAMS Expert to communicate resolution to Ext User
Helpful Hints

• Take screen shots of error messages

• How? **ALT + Print Screen** then save into a Word document and attach to your e-mail for EAMS Help Desk to view & possibly submit to issue tracker

• 15 minutes of **inactivity** on EAMS will time you out

• 30 minutes of **inactivity** on e-form will time you out & you will have to start e-form all over
e-form Filer Partnership

- Patience & teamwork

- e-form participants help find potential bugs

- Thank you!!!
The UDQ
What’s the UDQ?

• Unprocessed document queue
• Where forms with mistakes end up
• Processed centrally
• Currently have three (3) UDQ Operators
Staying out of the UDQ

- Review your case in EAMS to get all information you need to file your document BEFORE you file it – check for correct spellings, addresses and dates.

- If you are a case participant and can’t see your case in EAMS, E-mail the EAMS Help Desk before you file your document.

- Please use the EAMS case number, not the legacy case number on your documents. Use the case number lookup tool on the Web site.
Staying out of the UDQ

- Don’t check a box/radio button unless you mean it—you can’t uncheck, you will have to exit and start from scratch
- Leave fields blank where they do not apply: If there is no applicant or defense attorney, leave the fields blank. Do **NOT** type N/A, NONE, IN PRO PER or anything else in the field
- If filing a case opening document, application, C&R, Stips, do **NOT** type "unassigned" in the case number field: Leave it blank; when filing new or amended applications, answers, liens do **NOT** include companion case numbers on the Cover Sheet, even if they exist
Staying out of the UDQ – Amended Application

• Filing an amended Application for Adjudication: make sure the amended box is checked!

• You must enter the DOI on the Document Coversheet – failure to do so results in a default DOI being assigned.

• In paragraph 2 or in an addendum, please identify what is being amended, such as DOI, DOB, Name, Body Parts, etc.– for example, “Amending DOI to 01/01/2010.” We have to manually make the change so we need to know what you are changing.

• If you are changing the claims administrator in an amended Application, enter the new one in that section on the e-form, noting the change in paragraph 2 or an addendum.
Staying out of the UDQ: Use of the UAN

• Make sure you have your own Uniform Assigned Name (UAN) and everyone else's *exactly right*
• Make sure the UAN — **NOT** the claims adjuster’s name—is in the claims administrator name field. Unless the employer is uninsured, this field must always have an UAN
• If the employer is self-insured, Do **NOT** put a name and address in the insurance company fields – they are not given the role of insurance company
• Claims administrators & lien claimants filing applications: You are the “applicant” in this instance; if there is an attorney representing the defendant or lien claimant, their UAN goes in the applicant attorney field
Staying out of the UDQ: Document Titles

• Use the proper document title for attachments:
  – The drop down list contains DWC external users titles only
  – You will need to refer to the external document title list that accompanies the OCR document separator sheet for external document titles and **ONLY** use those

• What if there is no document title for your attachment?
  – First question: Does the document require immediate review and action by a Judge?
  – If no, it will be filed under ADJ – MISC - CORRESPONDENCE – OTHER
  – If yes, the document is filed ADJ – MISC - TYPED OR WRITTEN LETTER
Staying out of the UDQ: Document Titles cont’d

• Examples:
  – A QME Notice – yes, it is a letter, but does not need to go to the *immediate* attention of the judge
  – Use ADJ – MISC – CORRESPONDENCE-OTHER
  – Cross-examination of Rater (see Reference Guide)
  – File DOR requesting Conference
  – File LETTER requesting case be set for testimony
  – Use ADJ – MISC – TYPED OR WRITTEN LETTER

• It is extremely rare that you would use TYPED OR WRITTEN LETTER
Staying out of the UDQ: LIEN FILING

• **ALL LIENS MUST BE FILED AS ORIGINAL** – Enter the date you prepare the lien in the field “DATE OF ORIGINAL LIEN” – this is the same date as entered on the Document Cover Sheet

• No amended liens can be filed with the board!

• Proof of service and 10770.5 verification are attached separately *note the new attachments for exempt liens

  If something on your lien has changed, do not file amended lien with the board; however, you must serve the other parties with the amended lien.
  
  – To Withdraw a lien, the drop down you will use is (external titles to use is incorrect)

  **ADJ-LIENS AND BILLS-REQUEST FOR/NOTICE OF WITHDRAWAL OF LIEN**
New Lien procedures for 2013

INTERNAL FileNet eForms First Data payment

Review Your Order

You are paying case reference #: ADJ7944713
You are paying lien reservation #: 0010300863
Total Amount: USD 150.00

« Return to INTERNAL FileNet eForms First Data payment

Pay With Your Credit Card

Cardholder Name

Credit Card Number

Expiry Date (MMYY)

Pay With Your Credit Card

Your private information is secured using SSL (Secure Sockets Layer), the leading security protocol on the Internet. Information is encrypted and exchanged with an https server.

We respect your privacy. We will pass your name, address or e-mail address on only to the merchant.

Secure Payment provided by First Data Corp.
Staying out of the UDQ: Other Tips

• Please do **NOT** file cover letters. They are not needed
• Do **NOT** file copies of prior MOH/Awards/Orders; they are already in the District Office file
• If an e-form was filed and the attachments or proof of service were not filed; Do **NOT** file the same e-form again; just file the attachments/proof of service using the unstructured e-form
• Filing to do a walk-through: **BEFORE** going to the District Office you **MUST** verify that the documents are in EAMS
Staying out of the UDQ: Other Tips

• When entering EAMS case numbers on the Cover Sheet, the DOI field can be blank, and ensure that none of the boxes are checked for specific or cumulative trauma; this also applies to companion cases; but, make sure the case numbers are correct and belong to the correct injured worker.

• Please be sure to enter your UAN on the Notice of Representation or Substitution of Attorney; e.g. “Please enter our appearance for XXXXXXXX. Our UAN is XXXXXXXX”

• If you are filing a Dismissal of Attorney with a Substitution of Attorney, scan them together as a single multi-page document.
Tips & Tricks
e-forms Tips and Tricks

• Take advantage of the available tools and resources!
  • EAMS Web site
  • EAMS Help Desk

• Administrator and alternate
  • Managing the login and password
  • Training
  • Problem solving
  • Contacting the EAMS Help Desk

• Provide feedback!
  • Report problems
  • Report useful tips
e-forms Tips and Tricks

• Use Internet Explorer
  – Compatibility issues
  – Trusted Sites
e-forms Tips and Tricks

• ORDER: Gather all pertinent info AHEAD OF TIME
  • EAMS case numbers
  • Uniform assigned names
  • Addresses for parties
  • Body parts, etc.
• PREPARE, SIGN and SCAN all documents to be submitted with your e-form ahead of time.
• LOG-OUT - Fill out your e-Forms without interruptions to avoid being logged out from EAMS/e-forms
• PRINT your e-Form before submitting & serve on parties
e-forms Tips and Tricks

- E-filing allows for:
  - Accurate, faster submission time for you
  - Faster document processing at the District Office
  - Immediate submission status check

*Overall efficiency and timely results*

AND IT’S EASIER!
Filling out e-forms by Copy and Paste

• Copy text blocks from your report and paste them into your e-form

• e-forms and mice don’t like each other:
  – Trick for right-hand mouse users: Use <CTRL>c to copy, <CTRL>v to paste
  – Trick for left-hand mouse users: Use <CTRL><Insert> to copy, <SHIFT><Insert> to paste
Copy and Paste your Batch ID Info

• Highlight your Batch ID number, date and time
• To copy, press Ctrl + c
• Open your Batch ID spreadsheet
• Paste this info into the proper field
• You can add the IW name, case number and the type of document filed
• This provides a central list of the batches submitted
Q & A Process

• Write down your questions – leave room for answers
• Note your main question – ask it first
• Press *1 if you want to ask a question
  – Our Moderator will be connecting you in order
• Each administrator will be able to ask 1 question initially
  – If you have more, press *1 to get back in the queue
• Listen carefully to each question
  – Many of yours will be answered as we go
• If you have more, press *1 to get back in the queue