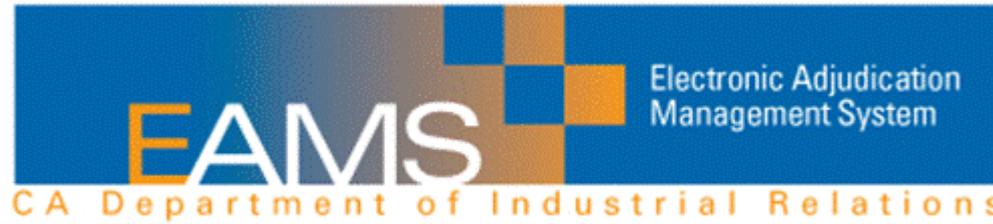
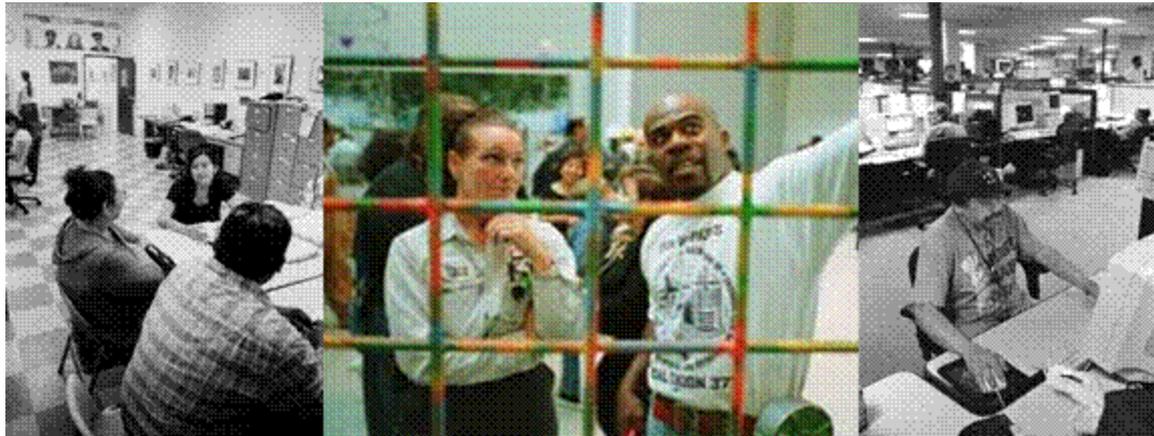


Division of Workers' Compensation



EAMS e-Forms Participant Training 9:00 AM



Agenda

- Send attendance e-mail to EFORMS@DIR.CA.GOV
 - Be sure to include you Uniform Assigned Name(UAN) in the email
- Introduction
- How to e-Form File
- 15 minute BREAK
- EAMS Help Desk
- The Unprocessed Document Queue (UDQ)
- Tips & Tricks from Current e-form Users
- Q&A

Website links

- Main EAMS Page
 - www.dwc.ca.gov/eams
- Uniform Assigned Name (UAN) Online Database
 - http://www.dir.ca.gov/dwc/eams/eams-1c/eams_ClaimsAdmins_Reps.htm
 - Locate the below orange bar with the hyperlinks to search the Database

Click to search [claims administrators' offices](#) or [representatives' offices](#) or [lien claimants](#)
- Public Case Information Search
 - Information
http://www.dir.ca.gov/dwc/eams/EAMS_PublicInformationSearch.htm
 - Search <https://eams.dwc.ca.gov/WebEnhancement/>
- Working In EAMS Page
http://www.dir.ca.gov/dwc/eams/EAMS_GettingReady.htm where you will find the links to the UAN and the EAMS Case Number Lookup Tool as well as other helpful guides and links

Web Case Information Access

- If you have not seen this yet, get going!
- The first place to search to prepare for your filing
- Search case information on all cases
 - Search by Case Number or Injured Worker in Public Search
 - <https://eams.dwc.ca.gov/WebEnhancement/>
 - 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 a Uniform Assigned Name (UAN)
 - Person
 - Primary administrator in EAMS
- User
 - Linked by username and password to allow access to your cases'
- Administrator and Alternate Administrator
 - First level of support in their office
 - Authorized to make changes to the eForms agreement

Logons

- Username
- Password
- When submitting e-forms using your eFiling logon, only 1 person can be logged in at a time

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
 - Help desk
 - UDQ Supervisor
 - Eforms

Uniform Assigned Names

- EAMS regulation section 10205.5 (b)
- Claims administrators' offices
- Representatives' offices
- Lien claimant offices
- Name = name/ physical location combination
- Assigned by DWC
- Posted on Website & updated daily

Uniform Assigned Names – cont'd

- Do not make up your own UAN
- Only use those found on 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 do not have a UAN for an entity that is required, get it before you file – do not leave it blank
- If you have a problem with an entity registering for a UAN, email CRU@DIR.CA.GOV

Registration

- Central Registration Unit (CRU)
- **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
- E-mail CRU@DIR.CA.GOV
- Fax 1-888-822-9309

Searching for UAN's



State of California

Department of Industrial Relations

CA.gov | Contact DIR | Press Room

This Site California

Home

Labor Law

Cal/OSHA - Safety & Health

Workers' Comp

Self Insurance

Apprenticeship

Director's Office

Boards

Division of Workers' Compensation (DWC)

▶ 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](#)

Division of Workers' Compensation (DWC)

★ Quick Links

- ▶ [Search for a workers' comp case](#)
- ▶ [Know my rights](#)
- ▶ [What to do if you get hurt on the job](#)
- ▶ [Find a fact sheet or I&A guide](#)
- ▶ [Forms](#)
- ▶ [Publications](#)
- ▶ [Reports](#)
- ▶ [File a complaint](#)
- ▶ [Pay my bill online](#)

★ About DWC

- ▶ [Contact](#)
- ▶ [Locations](#)



Division of Workers' Compensation (DWC)

DWC EAMS - claims administrators' offices search



Type in search criteria

Division of Workers' Compensation (DWC)

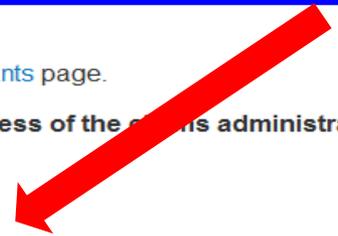
Quick Links

- Search for a workers' comp case
- Know my rights
- What to do if you get hurt on the job
- Find a fact sheet or I&A guide
- Forms
- Publications
- Reports

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

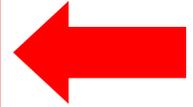


EAMS No	Name	Addr 1	Addr 2	City	State	zip
<input type="text"/>	zenith	<input type="text"/>				

List of claims administrators' offices

EAMS No	Name	Address Line 1	Address Line 2	City	State	ZIP	Phone	Service	Updated
3760076	ZENITH FRESNO	PO BOX 9055		VAN NUYS	CA	91409	(800) 508-9910	US Mail	2/19/2010 11:02:00 AM
5031246	ZENITH ORANGE	PO BOX 9055		VAN NUYS	CA	91409	(714) 705-2300	US Mail	2/19/2010 11:33:00 AM
4395865	ZENITH PLEASANTON	PO BOX 9055		VAN NUYS	CA	91409		US Mail	2/19/2010 11:41:00 AM
4396356	ZENITH SACRAMENTO	PO BOX 9055		VAN NUYS	CA	91409	(877) 280-4701	Fax	2/19/2013 10:49:00 AM

Get results





Division of Workers' Compensation (DWC)

DWC EAMS - representatives' offices search



Type in search criteria

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.

Representative's search criteria

EAMS No	Name	Addr 1	Addr 2	City	State	zip
	hanna					

List of representatives' offices

EAMS No	Name	Address Line 1	Address Line 2	City	State	ZIP	Phone	Service	Updated
4225982	FRANCESCA HANNAN VENTURA	PO BOX 7062		VENTURA	CA	93006	(805) 844-9653	US Mail	11/3/2008 10:22:00 AM
4995983	HANNA BROPHY BAKERSFIELD	PO BOX 12488		OAKLAND	CA	94604	(661) 397-1212	US Mail	9/4/2012 2:15:00 PM
4538047	HANNA BROPHY FRESNO	PO BOX 12488		OAKLAND	CA	94604	(559) 435-9823	US Mail	8/26/2008 11:18:00 AM
4995984	HANNA BROPHY LOS ANGELES	PO BOX 12488		OAKLAND	CA	94604		US Mail	10/15/2012 3:26:00 PM
4435415	HANNA BROPHY OAKLAND	PO BOX 12488		OAKLAND	CA	94604	(510) 839-1180	US Mail	4/3/2009 9:12:00 AM
6592258	HANNA BROPHY ORANGE	PO BOX 12488		OAKLAND	CA	94604	(714) 598-4050	US Mail	12/17/2008 9:50:00 AM
4660719	HANNA BROPHY	PO BOX 12488		OAKLAND	CA	94604	(530) 223-6010	US Mail	8/26/2008 11:19:00



Get results

Division of Workers' Compensation (DWC)

Quick Links

- ▶ [Search for a workers' comp case](#)
- ▶ [Know my rights](#)
- ▶ [What to do if you get hurt on the job](#)
- ▶ [Find a fact sheet or I&A guide](#)
- ▶ [Forms](#)
- ▶ [Publications](#)
- ▶ [Reports](#)

Insurance Carrier Information (if known and if applicable - include even if carrier is adjusted by claims administrator)

Insurance Carrier Name	ZENITH INSURANCE COMPANY	_____	UAN not required here
------------------------	--------------------------	-------	------------------------------

Street Address/PO Box	309 HACIENDA DR STE 200
-----------------------	-------------------------

City	PLEASANTON
------	------------

State	CA
-------	----

Zip Code (Numbers Only)	94588
-------------------------	-------

Claims Administrator Information (if known and if applicable)

Name	ZENITH PLEASANTON	_____	UAN always required here
------	-------------------	-------	---------------------------------

Street Address/PO Box	PO BOX 8002	X
-----------------------	-------------	---

Applicant's Attorney or Authorized Representative: Law Firm/Attorney Non Attorney Representative

First Name

Last Name

Law Firm Number

10585090

Law Firm Name

MARK FUEDEM SANTA ROSA

UAN always required here

Address/PO Box

160 PROMENADE CIR STE 300

City

SACRAMENTO

State

CA

Zipcode (Numbers Only)

95834

Defendant's Attorney or Authorized Representative: Law Firm/Attorney Non Attorney Representative

First Name

Last Name

Law Firm Number

7737609

Law Firm Name

HARTER LAW SACRAMENTO

UAN always required here

x

Address/PO Box

160 PROMENADE CIR STE 300

City

SACRAMENTO

State

CA

Zipcode (Numbers Only)

95834

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
- No middle names, initials, titles or punctuation

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 the S signature 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 Summary Rating – QME**
- **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
- 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

- Two methods to find your case
 - By EAMS Case Number
 - By Person Search

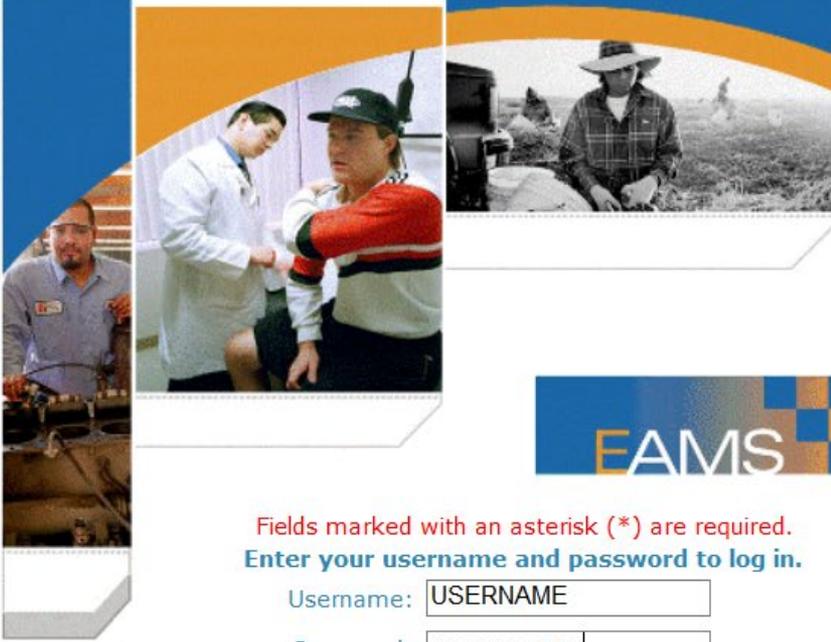
Login Page

Browser window showing the URL: <https://eams.dwc.ca.gov/external/logon.jsp>

Browser tabs: Login page, DIR DWC EAMS representa..., DIR DWC EAMS claims ad..., DIR ca.gov

Browser menu: File Edit View Favorites Tools Help

Browser toolbar: Veri..., Quic..., DIR DWC ..., DIR DWC ..., Case..., Empl..., User..., Regi..., Orga..., DIR DWC ...



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

Username:

Password:



External Home Page

External User Home

External User Search for Information



* required field

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

External User Home

External User Search for Information



* required field

Search Criteria

Case Number Legacy Case Reference
Date Of Injury Participant Type

Search Results

Case Number	Injured Worker	Date Of Injury	Case Type	Date Opened	Status	Archived
-------------	----------------	----------------	-----------	-------------	--------	----------

Enter the EAMS ADJ Case Number

Then Click Search

Search by EAMS Case Number – cont'd

EAMS Electronic Adjudication Management System **Build Number: 0366** Welcome

[Home](#) [Workspace](#) [Inbox](#) [Calendar](#)

External User Home

External User Search for Information * required field

! No case could be found which matched the search criteria.

Search Criteria

Case Number	<input type="text"/>	Legacy Case Reference	<input type="text"/>
Date Of Injury	<input type="text"/>	Participant Type	<input type="text" value="Person"/>

Search Results (Number of Items:)

Case Number	Injured Worker	Date Of Injury	Case Type	Date Opened	Status	Archived
-------------	----------------	----------------	-----------	-------------	--------	----------

If you are not a case participant, you will get this message

Search by EAMS Case Number – cont'd

External User Home

External User Search for Information



* required field

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

Search Criteria

ADJ11385094

 Person

Search Results (Number of Items: 1)

Case Number	Injured Worker	Date Of Injury	Case Type	Date Opened	Status	Archived
ADJ11385094	EDWARD SPAGHETTI		Product Delivery	8/28/2018	Inactive	Active - Not archived

Click on the ADJ Case Number to see case information

See Reference Guide for steps to take If this field says "Archived"

SHORTCUTS >>

Adjudication Product Delivery Home: ADJ11385094

Manage ▼

- | | | | |
|-------------------------------------|---------------------------------|---|--|
| Hearing Case | Inactivate Case | Reject DOR | Transmit to DO: No Judge Action Required |
| Restore to Inactive | Add Applicant | Transmit To Recon | Filenet Documents |
| Close Case | Add Defendant | Transmit to DO: Judge Action Required | Create APP Case |

Case Details ▼

Product Name	ADJ - DWC District Office	Case Reference	ADJ11385094
Primary Client	EDWARD SPAGHETTI	Legacy Case ID	
Start Date	8/28/2018	Status	Inactive
Priority	High	End Date	
Owner	SYSEAMS [Change]...	Occupation	
Occupation Code		Cause Of Injury	
Lien	No	Location	SAC-ADJ [Change]
Pro Per	No	Related Cases	No
Master Case	No	Date Of Settlement	

Applicant and Defendant ▼

Applicant	Role	Action	Defendant	Role	Action
HARTER LAW SACRAMENTO	Law Firm	Delete	SYSTEM TEST	Uninsured Employer	Delete
EDWARD SPAGHETTI	Injured Worker	Delete			

Applicant Dispute Details ▼

Earnings	No
----------	----

Defendant Dispute Details ▼

Earnings	No
----------	----

Search by person

- Three search methods:
 - By Alternate ID – generally SSN
 - By Name alone – best if by name and DOB
 - By EAMS Reference Number (ERN)

Search by person



External User Search for Information



* required field

Search Criteria

Case Number

Legacy Case Reference

Date Of Injury



Participant Type

Person



Search

Reset

Search Results

Case Number	Injured Worker	Date Of Injury	Case Type	Date Opened	Status	Approved
-------------	----------------	----------------	-----------	-------------	--------	----------

Click on the Magnifying Glass

Search by person – by Alternate ID (SSN)

The screenshot shows the EAMS web application interface. A modal window titled "Person Search" is open, displaying search criteria and results. The search criteria include Reference Number, Alternate ID Type (set to Social Security Number), Alternate ID (023456789), Last Name, First Name, and Date of Birth. Below the form are buttons for Search, Reset, and Cancel. The search results section shows one item with Reference Number 12597764, First Name EDWARD, and Last Name SPAGHETTI, with a Select action link.

Reference Number	First Name	Last Name	Action
12597764	EDWARD	SPAGHETTI	Select

- 1-Click on drop down arrow
- 2- Select Social Security Number
- 3-Enter SSN
- 4-Click on search

Search by person – by Alternate ID (SSN) – cont'd

The screenshot shows the EAMS (Employment Assistance Management System) interface. A modal window titled "Person Search" is open, displaying search criteria and results. The search criteria include Reference Number, Alternate ID Type (set to Social Security Number), Alternate ID (023456789), Last Name, First Name, and Date of Birth. Below the search criteria are buttons for Search, Reset, and Cancel. The search results section shows one item with the following details:

Reference Number	First Name	Last Name	Action
12597764	EDWARD	SPAGHETTI	Select

A yellow callout box with a green border points to the "Select" button in the search results table, containing the text: "Then click on Select".

Then click on Select

Search by person – by Alternate ID (SSN) – cont'd

External User Home

External User Search for Information



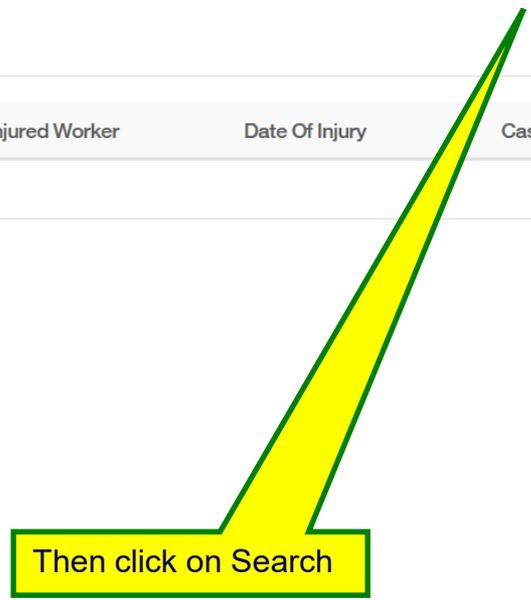
* required field

Search Criteria

Case Number	<input type="text"/>	Legacy Case Reference	<input type="text"/>
Date Of Injury	<input type="text"/>	Participant Type	<input type="text" value="Person"/>
			<input type="text" value="EDWARD SPAGHETTI"/>
		<input type="button" value="Search"/>	<input type="button" value="Reset"/>

Search Results

Case Number	Injured Worker	Date Of Injury	Case Type	Date Opened	Status	Archived
-------------	----------------	----------------	-----------	-------------	--------	----------



Then click on Search

Search by person – by Alternate ID (SSN) – cont'd

External User Home

External User Search for Information



* required field

No case could be found which matched the search criteria.

Search Criteria

Case Number Legacy Case Reference
Date Of Injury Participant Type

Search Reset

Search Results (Number of Items: 0)

Case Number	Injured Worker	Date Of Injury	Case Type	Date Opened	Status	Archived
-------------	----------------	----------------	-----------	-------------	--------	----------

2. If you are not a case participant, you will get this message

1. Then click on Search

Search by person – by Alternate ID (SSN) – cont'd

40



External User Search for Information



* required field

Search Criteria

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

Case Number

Legacy Case Reference

Date Of Injury



Participant Type

Person

EDWARD SPAGHETTI



Search

Reset

Search Results (Number of Items: 1)

Case Number	Injured Worker	Date Of Injury	Case Type	Date Opened	Status	Archived
ADJ11385094	EDWARD SPAGHETTI		Product Delivery	8/28/2018	Inactive	Active - Not archived

Click on the ADJ Case Number to see case information

See Reference Guide for steps to take If this field says "Archived"

SHORTCUTS
External User Search
eForms

Adjudication Product Delivery Home: ADJ11385094

Edit... Refresh Print Help

Manage

- Hearing Case
- Restore to Inactive
- Close Case
- Inactivate Case
- Add Applicant
- Add Defendant
- Reject DOR
- Transmit To Recon
- Transmit to DO: Judge Action Required
- Transmit to DO: No Judge Action Required
- Filenet Documents
- Create APP Case

Case Details

Product Name	ADJ - DWC District Office	Case Reference	ADJ11385094
Primary Client	EDWARD SPAGHETTI	Legacy Case ID	
Start Date	8/28/2018	Status	Inactive
Priority	High	End Date	
Owner	SYSEAMS [Change]...	Occupation	
Occupation Code		Cause Of Injury	
Lien	No	Location	SAC-ADJ [Change]
Pro Per	No	Related Cases	No
Master Case	No	Date Of Settlement	

Applicant and Defendant

Applicant	Role	Action	Defendant	Role	Action
HARTER LAW SACRAMENTO	Law Firm	Delete	SYSTEM TEST	Uninsured Employer	Delete
EDWARD SPAGHETTI	Injured Worker	Delete			

Applicant Dispute Details

Earnings No

Defendant Dispute Details

Earnings No

Search by person

External User Home

External User Search for Information



* required field

Search Criteria

Case Number	<input type="text"/>	Legacy Case Reference	<input type="text"/>
Date Of Injury	<input type="text"/>	Participant Type	<input type="text" value="Person"/>

Search Results

Case Number	Injured Worker	Date Of Injury	Case Type	Date Opened	Status	Archived
-------------	----------------	----------------	-----------	-------------	--------	----------

Click on the Magnifying Glass

Search by person – by Name

The screenshot shows the 'Person Search' form in the FAMS system. The form includes several input fields: Reference Number, Alternate ID Type (dropdown), Alternate ID, Last Name (containing 'spag'), First Name (containing 'ed'), and Date of Birth (with a calendar icon). Below the fields are 'Search', 'Reset', and 'Cancel' buttons. A table below the buttons shows search results with columns for Reference Number, First Name, Last Name, and Action. Two yellow callout boxes with green borders provide instructions: one points to the Last Name and First Name fields, and the other points to the Search button.

Person Search ? ×

* required field

Search Criteria ▼

Reference Number

Alternate ID Type ▼ Alternate ID

Last Name First Name

Date of Birth

Search Results ▼

Reference Number	First Name	Last Name	Action

Enter the person's last name and first name

Then click on Search

Search by person – by Name – cont'd

FAMS External Assessment Management System Build Number: 0366 Enter Reference Number Welcome

Home Workspace Inbox Calendar

External User Home

External User Search for Information

Search Criteria

Case Number

Date Of Injury

Search Results

Case Number Injured Worker

Status Archived

Person Search

* required field

Search Criteria

Reference Number

Alternate ID Type Alternate ID

Last Name First Name

Date of Birth

Search Results (Number of Items: 3)

Reference Number	First Name	Last Name	Action
12597764	EDWARD	SPAGHETTI	Select
12597763	ED	SPAGHETTI	Select
12597763	EDDIE	SPAGHETTI	Select

Search by person – by Name – cont'd

The screenshot shows the FAMS (Financial Accounting Management System) interface. A modal window titled "Person Search" is open, displaying search criteria and results. The search criteria include Reference Number, Alternate ID Type, Last Name (spag), First Name (ed), and Date of Birth (01/01/1970). The search results table shows one entry: Reference Number 12597764, First Name EDWARD, Last Name GHETTI, and Action Select. Two yellow callout boxes with green borders provide instructions: one points to the search criteria fields, and the other points to the "Select" button in the results table.

Search Criteria

Reference Number

Alternate ID Type Alternate ID

Last Name First Name

Date of Birth

Search Results (Number of Items: 1)

Reference Number	First Name	Last Name	Action
12597764	EDWARD	GHETTI	Select

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

External User Home

External User Search for Information



* required field

Search Criteria

Case Number	<input type="text"/>	Legacy Case Reference	<input type="text"/>
Date Of Injury	<input type="text"/>	Participant Type	<input type="text" value="Person"/>
			<input type="text" value="EDWARD SPAGHETTI"/>

Search Reset

Search Results

Case Number	Injured Worker	Date Of Injury	Case Type	Date Opened	Status	Archived
-------------	----------------	----------------	-----------	-------------	--------	----------

Then click on Search

Search by person – by Name – cont'd

External User Home

External User Search for Information



* required field

Search Criteria

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

Case Number

Legacy Case Reference

Date Of Injury



Participant Type

Person

EDWARD SPAGHETTI  

Search

Reset

Search Results (Number of Items: 1)

Case Number	Injured Worker	Date Of Injury	Case Type	Date Opened	Status	Archived
ADJ11385094	EDWARD SPAGHETTI		Product Delivery	8/28/2018	Inactive	Active - Not archived

Click on the ADJ Case Number to see case information

See Reference Guide for steps to take If this field says "Archived"

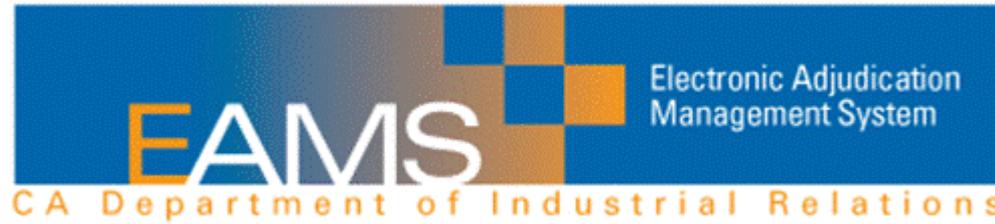
BREAK TIME

- PLEASE RETURN AT:

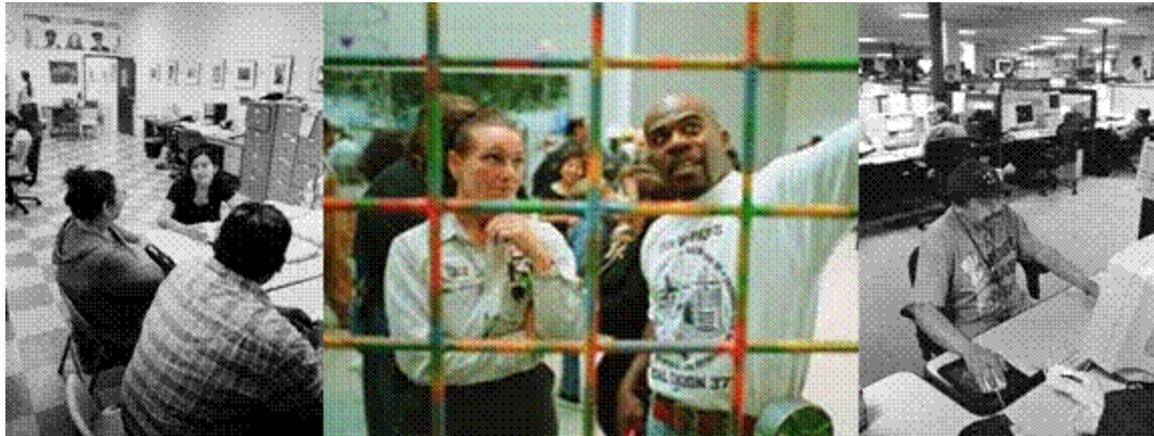
00:00 AM

- If you received a mandatory invitation to attend today's webinar, please send your attendance email to:
 - efirms@dir.ca.gov
 - Include your UAN

Division of Workers' Compensation



Filing e-forms



Login Page

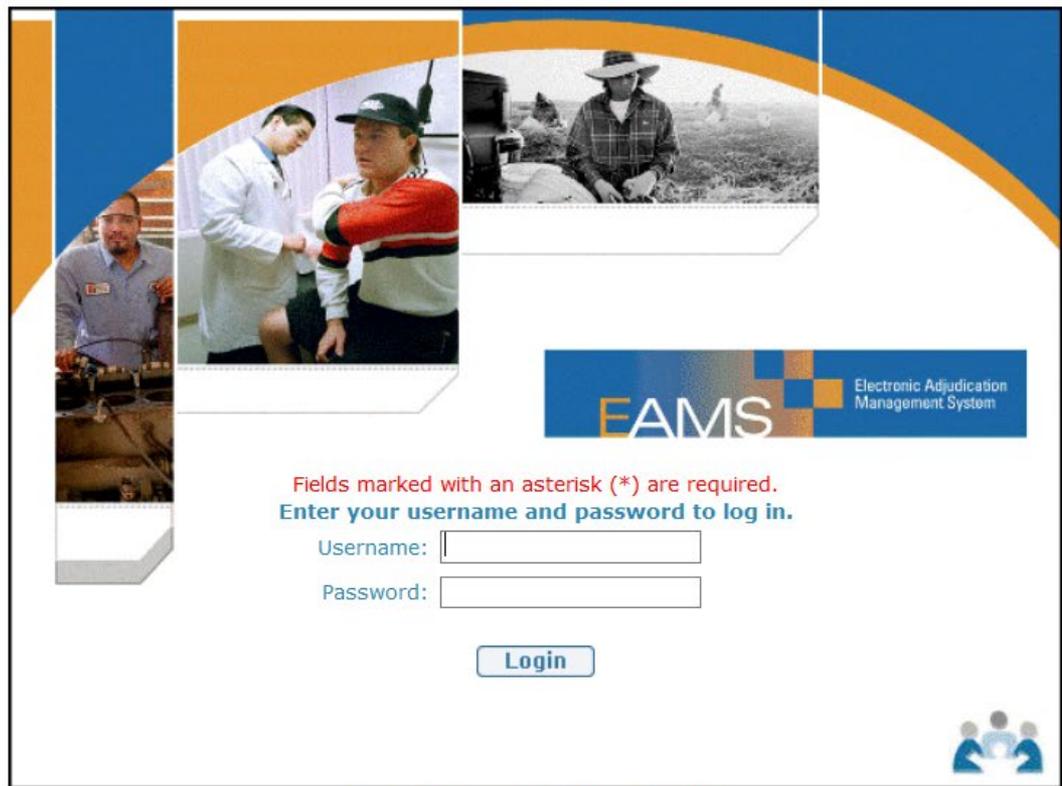
50

Browser address bar: <https://eams.dwc.ca.gov/external/logon.jsp>

Browser tabs: Login page

Browser menu: File Edit View Favorites Tools Help

Browser toolbar: Veri... Quic... DIR DWC ... Case... Empl... User... Regi... Orga... DIR DWC ... Page Safety



The login page features a header with three photographs: a man in a lab coat, a man in a red and white jacket, and a man in a hat in a field. Below the photos is the EAMS logo (Electronic Adjudication Management System). The main content area contains a login form with the following text:

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

Username:

Password:

At the bottom right of the page is a small icon of three people.

[This site requires JRE 1.6.0 or higher](#)
This site best viewed with Microsoft Internet Explorer 6.0+



External Home Page = eForms link

FAMS Electronic Adjudication Management System **Build Number: 0366** Welcome

[Home](#) [Workspace](#) [Inbox](#) [Calendar](#)

External User Home

External User Search for Information Refresh Print Help
* required field

Search Criteria

Case Number Legacy Case Reference

Date Of Injury Participant Type Search Reset

Search Results (Number of Items: 1)

Case Number	Injured Worker	Date Of Injury	Case Type	Date Opened	Status	Archived
ADJ11385094	EDWARD SPAGHETTI		Product Delivery	8/28/2018	Inactive	Active - Not archived

External Home Page = eForms link

EAMS Electronic Adjudication Management System Build Number: 0386

Enter Reference Number

Welcome

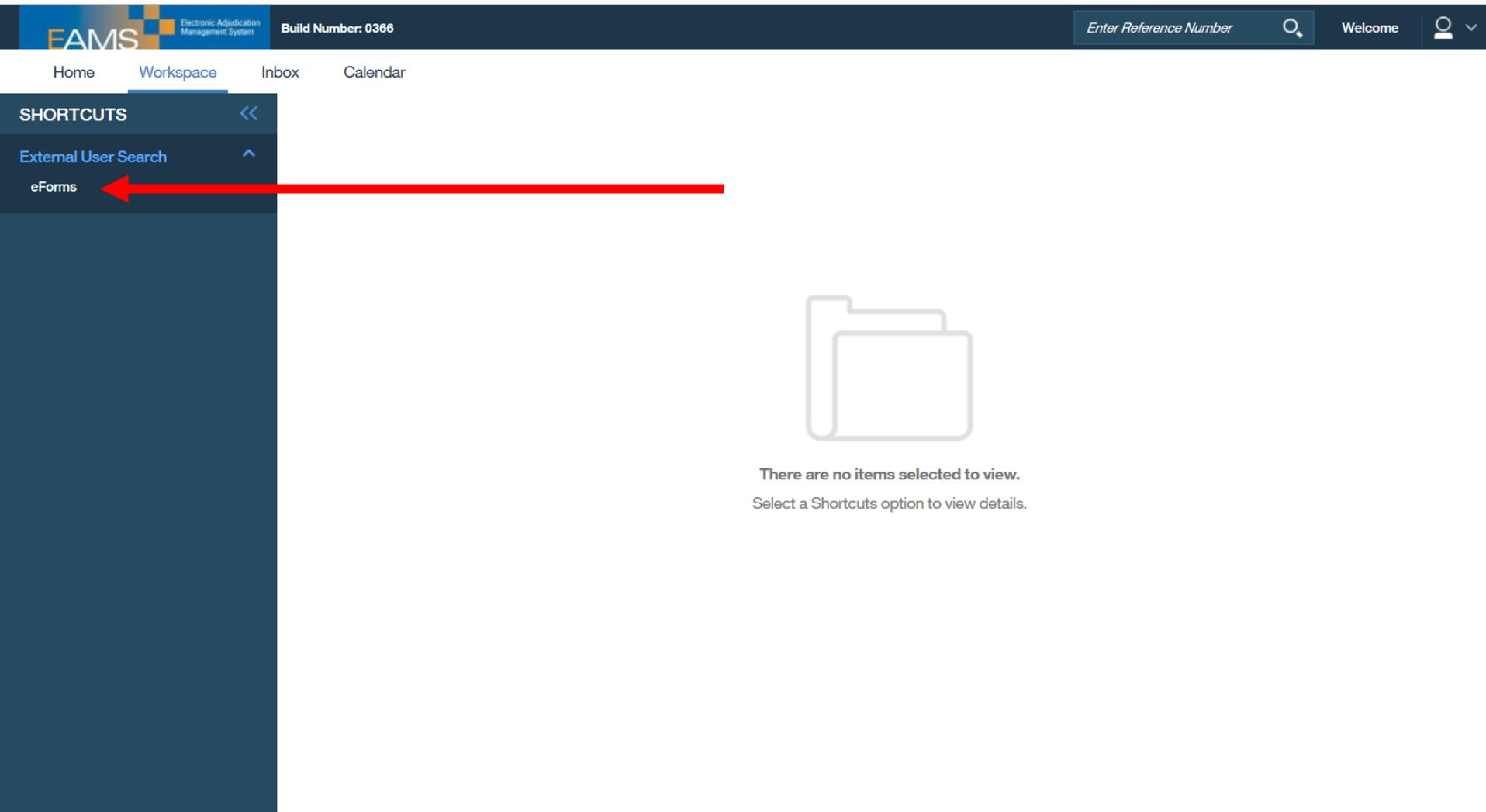
Home Workspace Inbox Calendar

SHORTCUTS >>

Click on the “>>” to open the Shortcuts

There are no items selected to view.
Select a Shortcuts option to view details.

External Home Page = eForms link



FAMS Electronic Adjudication Management System Build Number: 0366

Enter Reference Number

Welcome

Home Workspace Inbox Calendar

SHORTCUTS <<

External User Search ^

eForms ←



There are no items selected to view.
Select a Shortcuts option to view details.

SHORTCUTS <<
External User Search ^
eForms

eForms X

eForms

eForms:   

eForms ▼

Adjudication ▼	Return To Work/Supplemental Job Displacement ▼
APPLICATION FOR ADJUDICATION	DWC-AD-10005 (RTW) REQUEST FOR REIMBURSEMENT OF ACCOMMODATION EXPENSE
ANSWER TO APPLICATION FOR ADJUDICATION OF CLAIM	DWC-AD-10133.53 (SJDB) NOTICE OF OFFER OF MODIFIED OR ALTERNATIVE WORK
APPLICATION FOR SUBSEQUENT INJURIES FUND BENEFITS	DWC-AD-10133.55 (SJDB) REQUEST FOR DISPUTE RESOLUTION BEFORE THE ADMINISTRATIVE DIRECTOR
COMPROMISE RELEASE	DWC-AD-10133.57 (SJDB) VOUCHER
COMPROMISE RELEASE DEPENDENCY CLAIM	NOTICE OF OFFER OF REGULAR WORK
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 DOI pre 1-1-2013	
STIPULATIONS WITH REQUEST FOR AWARD DOI post 1-1-2013	

SHORTCUTS <<

External User Search ^

eForms

eForms X

eForms

eForms:



SECTION WITH REQUEST FOR AWARD

- STIPULATIONS WITH REQUEST FOR AWARD DOI pre 1-1-2013
- STIPULATIONS WITH REQUEST FOR AWARD DOI post 1-1-2013
- SUPPLEMENTAL LIEN FORM AND SECTION 4903.05(c) DECLARATION
- THIRD PARTY COMPROMISE AND RELEASE

Disability Evaluation Unit ▼

- EMPLOYEE'S PERMANENT DISABILITY QUESTIONNAIRE AND REQUEST FOR SUMMARY DETERMINATION - QME 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 - QME REPORT

Special Adjudication Unit ▼

SAU DECLARATION OF READINESS TO PROCEED

Uninsured Employment Fund ▼

APPLICATION FOR DISCRETIONARY PAYMENTS FROM THE UEF

DWC Miscellaneous ▼

GENERAL PUBLIC REQUEST FOR INFORMATION UNSTRUCTURED EFORM

e-form Layout

DECLARATION OF READINESS TO PROCEED - Windows Internet Explorer

https://ieamsdm.dwc.ca.gov/eamseforms/

File Edit View Favorites Tools Help

Links Employer Search DWC EAMS claims administrator and representatives' offices Case Search

DECLARATION OF READINESS TO PROCEED

Attachment | Submit | Help | Print PDF | Search | Search Next

Coversheet -1 Coversheet -2 Coversheet -3 Coversheet -4 Coversheet -5 Form -1 Form -2 Form -3 Form -4

REQUIRED FIELDS SHOWN BY ***

STATE OF CALIFORNIA
DWI DISTRICT OFFICE
E-COVER SHEET

[Attachment](#) | [Submit](#) | [Help](#) | [Print PDF](#)

Coversheet - 1 | Coversheet - 2 | Coversheet - 3 | Coversheet - 4 | Coversheet - 5 | Form - 1 | Form - 2 | Form - 3

**STATE OF CALIFORNIA
DWC DISTRICT OFFICE
E-COVER SHEET**

REQUIRED FIELDS SHOWN BY "*"

Is this a new Case?*	Yes <input type="radio"/>	No <input type="radio"/>	Location:	<input type="text"/>
Companion Cases Exist	<input type="checkbox"/>		Walk Thru	Yes <input type="radio"/> No <input checked="" type="radio"/>
More than 15 Companion Cases	<input type="checkbox"/>			
Date: (MM/DD/YYYY)	<input type="text"/>			
Case Number:*	<input type="text"/>	SSN(Numbers Only)	<input type="text"/>	
<input type="radio"/> Specific Injury	(If Specific Injury, use the start date as the specific date of injury)			
<input type="radio"/> Cumulative Injury	<input type="text"/>	<input type="text"/>		
	(START DATE: MM/DD/YYYY)	(END DATE: MM/DD/YYYY)		
Body Part 1 :	<input type="text"/>	Body Part 2 :	<input type="text"/>	
Body Part 3 :	<input type="text"/>	Body Part 4 :	<input type="text"/>	
Other Body Parts :	<input type="text"/>			

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

ADJ DEU SIF UEF SAU INT RSU

Companion Cases

Case 1:

Specific Injury (If Specific Injury, use the start date as the specific date of injury)

Cumulative Injury

(START DATE: MM/DD/YYYY)

(END DATE: MM/DD/YYYY)

Body Part 1 :

Body Part 2 :

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

The screenshot displays the EAMS (Electronic Adjudication Management System) interface. The top navigation bar includes the EAMS logo, the text "Electronic Adjudication Management System", and the "Build Number: 0366". On the right side of the top bar, there is a search field labeled "Enter Reference Number" and a "Welcome" message with a user profile icon.

The main navigation area contains tabs for "Home", "Workspace", "Inbox", and "Calendar". A "SHORTCUTS" sidebar is visible on the left, with a search bar and a list of shortcuts. One shortcut, "eForms", is selected, and a dropdown menu is open, showing a list of e-forms.

The dropdown menu lists several e-forms, with the following text visible:

- Disability Evaluation Unit
- EMPLOYEE'S PERMANENT DISABILITY QUESTIONNAIRE AND REQUEST FOR SUMMARY DETERMINATION - QME REPORT
- SUPPLEMENTAL APPLICANT FORM AND SECTION 4903.05(a) DECLARATION
- THIRD PARTY COMPROMISE AND RELEASE
- Disability Evaluation Unit
- EMPLOYEE'S PERMANENT DISABILITY QUESTIONNAIRE AND REQUEST FOR SUMMARY DETERMINATION - QME REPORT
- REQUEST FOR CONSULTATIVE HEARING
- REQUEST FOR RECONSIDERATION OF SUMMARY RATING BY THE AD
- REQUEST FOR SUMMARY RATING DETERMINATION - PRIMARY TREATING PHYSICIAN REPORT
- REQUEST FOR SUMMARY RATING DETERMINATION - QME REPORT
- Special Adjudication Unit

On the right side of the dropdown menu, there is a "Uninsured Employment Fund" dropdown menu, which is currently set to "APPLICATION FOR DISCRETIONARY PAYMENTS FROM THE UEF".

Red annotations highlight the "EMPLOYEE'S PERMANENT DISABILITY QUESTIONNAIRE AND REQUEST FOR SUMMARY DETERMINATION - QME REPORT" e-form and the "Disability Evaluation Unit" dropdown menu.

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

EAMS Election Adjudication Management System

Page 1 Page 2 Page 3 Page 4 Page 5 Page 6 Page 7 Page 8 Page 9 Page 10 Page 11 Page 12

**STATE OF CALIFORNIA
DWC DISTRICT OFFICE
E-COVER SHEET**

Is this a new Case?* Yes No

Companion Cases Exist

More than 15 Companion Cases

Date: (MM/DD/YYYY)

Case Number: SSN(Numbers Only)*

Specific Injury

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

Cumulative Injury

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

Companion Cases

Case 1:

Specific Injury

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

Cumulative Injury

Done

SSN(Numbers Only)*

(END DATE: MM/DD/YYYY)
use as the specific date of injury)

Body Part 3:

e-forms: Date Format

Dates MUST be in MM/DD/YYYY format – with leading “0” when a single digit month or day

EAMS Electronic Adjudication Management System

Page 1 Page 2 Page 3 Page 4 Page 5 Page 6 Page 7 Page 8 Page 9 Page 10 Page 11 Page 12

**STATE OF CALIFORNIA
DWC DISTRICT OFFICE
E-COVER SHEET**

Is this a new Case?* Yes No

Companion Cases Exist

More than 15 Companion Cases

Date: (MM/DD/YYYY)

Case Number: SN(Numbers Only)* 123456789

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

Cumulative Injury (If Specific Injury, use the start date as the specific date of injury)

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

Companion Cases

Case 1:

Specific Injury (START DATE: MM/DD/YYYY) (END DATE: MM/DD/YYYY)

Cumulative Injury (If Specific Injury, use the start date as the specific date of injury)

Done

Companion Cases Exist

More than 15 Companion Cases

Date: (MM/DD/YYYY)

Case Number:

Specific Injury

e-forms: No Companion Cases

- If there are no companion cases, fill out Coversheet 1 and then click on Form 1

DECLARATION OF READINESS TO PROCEED - Windows Internet Explorer

https://ieamsdm.dwc.ca.gov/eamseforms/

File Edit View Favorites Tools Help

Links Employer Search DIR DWC EAMS claims administrator and representatives' offices Case Search

DECLARATION OF READINESS TO PROCEED

[Attachment](#) | [Submit](#) | [Help](#) | [Print PDF](#) | [Search](#) | [Search Next](#)

Coversheet -1 | Coversheet- 2 | Coversheet- 3 | Coversheet- 4 | Coversheet- 5 | **Form -1** | Form -2 | Form -3 | Form -4

STATE OF CALIFORNIA
DWC DISTRICT OFFICE
E-COVER SHEET

REQUIRED FIELDS SHOWN BY *

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

[Attachment](#) | [Submit](#) | [Help](#) | [Print PDF](#)

Coversheet - 1 | Coversheet - 2 | Coversheet - 3 | Coversheet - 4 | Coversheet - 5 | Form - 1 | Form - 2 | Form - 3

STATE OF CALIFORNIA
DIVISION OF WORKERS' COMPENSATION
WORKERS' COMPENSATION APPEALS BOARD
APPLICATION FOR ADJUDICATION OF CLAIM

Case Number *Amended Application*

SSN

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

Restore down

Unstructured e-form

Do NOT prepare an OCR Document Coversheet and/or Document Separator Sheets and scan them with the unstructured document you are submitting.

Unstructured e-form



Master Case Number*:

Enter Companion Case Number:

Companion Case Number:

Case Type*:

Document Type*:
(You must select Case Type before selecting Doc Type)

Document Title*:
(You must select Doc Type before selecting Doc Title)

Lien Reservation Number:

Author:

Document Date: *(mm/dd/yyyy)*

File Upload*:

After you click "ADD" the companion case number(s) moves to this field

Unstructured e-form - con't



Master Case Number*:

Enter Companion Case Number:

Companion Case Number:

Case Type*:

Document Type*:
(You must select Case Type before selecting Doc Type)

Document Title*:
(You must select Doc Type before selecting Doc Title)

Lien Reservation Number:

Author:

Document Date: *(mm/dd/yyyy)*

File Upload*:

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

Browser address bar: <https://ieamsdm.dwc.ca.gov/eamseforms/js> Unstructured Eform

File Edit View Favorites Tools Help

DIR ca Case Search Employer Search DWC EAMS representativ... Google DIR Homepage DIR Informational Intranet...

EAMS Electronic Adjudication Management System

Master Case Number*:

Enter Companion Case Number:

Companion Case Number:

Case Type*:

Document Type*:
(You must select Case Type before selecting Doc Type)

Document Title*:
(You must select Doc Type before selecting Doc Title)

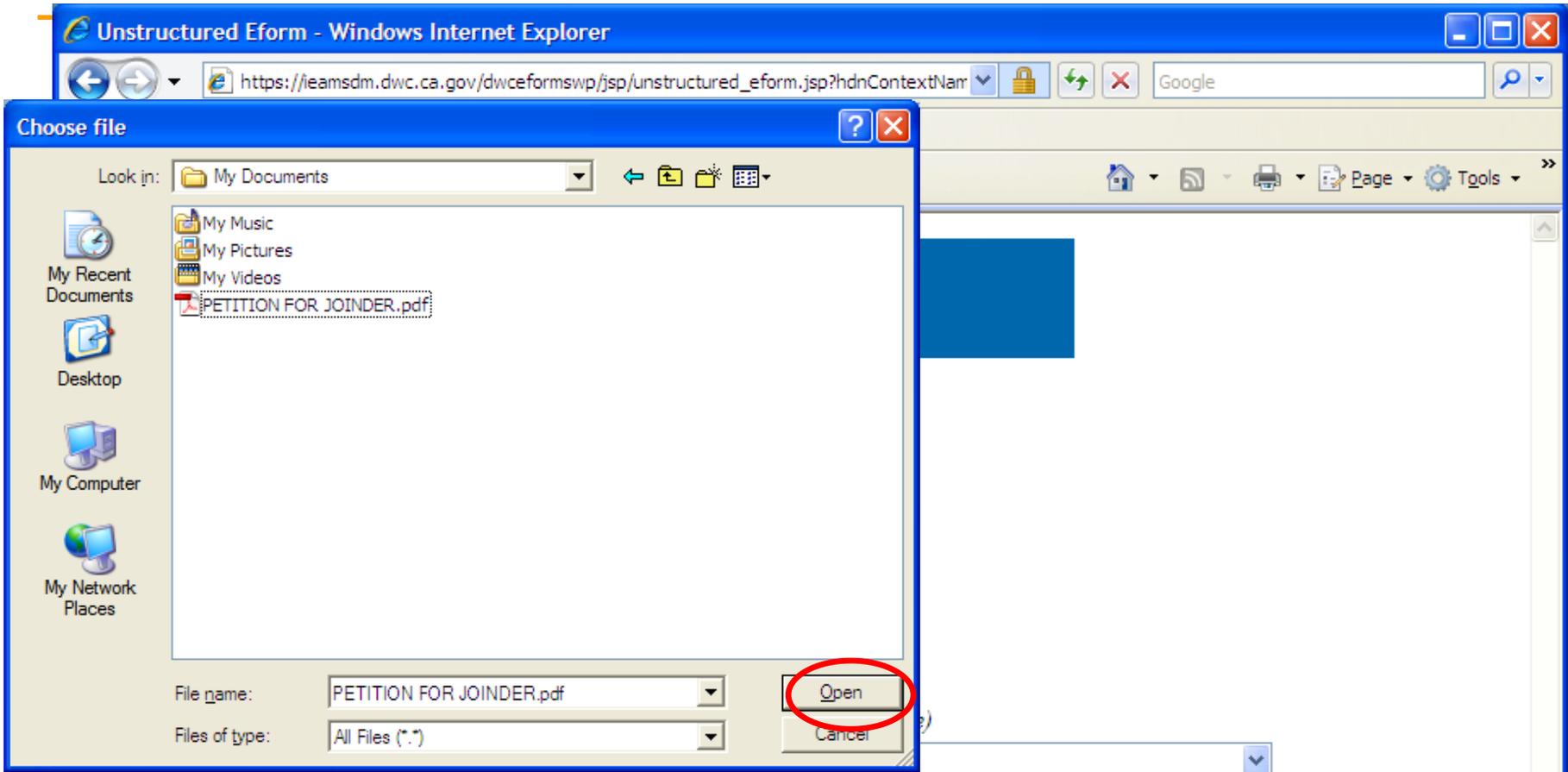
Lien Reservation Number:

Author:

Document Date: *(mm/dd/yyyy)*

File Upload*:

Unstructured e- form - Select File to Attach



Document Title*:

(You must select Doc Type before selecting Doc Title)

Author:

JOE SMITH OAKLAND

Document Date:

10/07/2008 (mm/dd/yyyy)

File Upload*:

Unstructured e-form - Attachment selected 68



Master Case Number*:	<input type="text" value="ADJ1234567"/>
Enter Companion Case Number:	<input type="text"/> <input type="button" value="ADD"/>
Companion Case Number:	<div style="border: 1px solid gray; padding: 5px;"><p>Companion Case Number ADJ3456789</p></div> <input type="button" value="DELETE"/>
Case Type*:	<input type="text" value="ADJ"/>
Document Type*:	<input type="text" value="LEGAL DOCS"/> <i>(You must select Case Type before selecting Doc Type)</i>
Document Title*:	<input type="text" value="PETITION FOR JOINDER"/> <i>(You must select Doc Type before selecting Doc Title)</i>
Lien Reservation Number:	<input type="text"/>
Author:	<input type="text" value="JOE SMITH OAKLAND"/>
Document Date:	<input type="text" value="03/01/2017"/> <i>(mm/dd/yyyy)</i>
File Upload*	<input type="text" value="C:\Users\casandra ortiz\D"/> <input type="button" value="Browse..."/>

Unstructured e- form - Ready to Submit

Master Case Number*:

Case Reference:

Enter Case Reference:

Case Type*:

Document Type*:
(You must select Case Type before selecting Doc Type)

Document Title*:
(You must select Doc Type before selecting Doc Title)

Author:

Document Date: (mm/dd/yyyy)

File Upload*:

Master Case Reference	Case ID	Case Type	Document Type	Document Title	File Name	
ADJ123456789		ADJ	LEGAL DOCS	PETITION FOR JOINDER	C:\Documents and Settings\charles ellison\My Documents\PETITION FOR JOINDER.pdf	<input type="button" value="Delete"/>
<input type="button" value="Submit"/>						

e-forms: Errors

If you enter a future date in a required field, or fail to enter information in a required field you will receive 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 go to the Unprocessed Document Queue (UDQ) where DWC staff will research what went wrong.



e-forms: Document Service

- If 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 where you have filled in data
-
- **PRINT BEFORE YOU CLICK SUBMIT**

Batch ID - Success!

The screenshot shows a Windows Internet Explorer browser window with the title "Success - Windows Internet Explorer". The address bar displays the URL "http://134.186.225.27:9080/convdr5/submit_data". The browser's menu bar includes "File", "Edit", "View", "Favorites", "Tools", and "Help". The toolbar contains "Links", "Customize Links", "EAMS Login page", "Issue Tracker", "CONVDR5", and "DIR DIR Homepage". The main content area features a blue header with the "EAMS" logo and the text "Electronic Adjudication Management System". Below the header, a blue link reads "Submission of this eform through EAMS constitutes service upon any internal DWC unit." A red circle highlights the following text: "Batch ID: 1140", "Date: 10/07/2008 04:14:17", and an "OK" button.

Success - Windows Internet Explorer

http://134.186.225.27:9080/convdr5/submit_data

File Edit View Favorites Tools Help Links Customize Links EAMS Login page Issue Tracker CONVDR5 DIR DIR Homepage

Success

EAMS Electronic Adjudication Management System

[Submission of this eform through EAMS constitutes service upon any internal DWC unit.](#)

Batch ID: 1140
Date: 10/07/2008 04:14:17
OK

View Your Documents in FileNet

- There are 2 ways to access FileNet
 - Option 1.
 - Open the ADJ Home Page
 - Click on “FileNet Document” link in the upper right corner
 - Option 2.
 - Click on “Related Cases” tab in the upper right – this opens the INT Home Page
 - Click on the case Integrate Case, then scroll down 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

CASANDRA ORTIZ | Thursday, October 19, 2017 Search Help | Close

Search View

Selected Search Template: EAMS_OS > **EAMS SEARCH**

Hide Search Criteria Printable View

Find released documents, where:

Case ID	is equal to	<input type="text" value="ADJ9135872"/>
Case Type	is equal to	<input type="text"/>
Admitted	is equal to	<input type="text" value="v"/>
Admitted Prop ID	<input type="text" value="contains"/> v	<input type="text"/>
Proponent	<input type="text" value="contains"/> v	<input type="text"/>
Author	<input type="text" value="contains"/> v	<input type="text"/>
Operator Id	<input type="text" value="contains"/> v	<input type="text"/>
EAMS Doc ID	is equal to	<input type="text"/>
Doc Status	is equal to	<input type="text" value="v"/>
Doc Type	is equal to	<input type="text" value="v"/>
Doc Title	is equal to	<input type="text" value="v"/> <small>(You must select Doc Type before selecting Doc Title)</small>
Doc Date	is less than or equal to	<input type="text"/> Clear (MM/d/yyyy)

FileNet

- To open the document either click on the Title to view in an new tab or window or right click on the Title to download the document

CASANDRA ORTIZ | Thursday, October 19, 2017 Search Help | Close

Search View Printable View

Selected Search Template: **EAMS_OS** > **EAMS SEARCH**

Hide Search Criteria

Find released documents, where:

Case ID	is equal to	<input type="text" value="ADJ9135872"/>
Case Type	is equal to	<input type="text"/>
Admitted	is equal to	<input type="text"/>
Admitted Prop ID	contains	<input type="text"/>
Proponent	contains	<input type="text"/>
Author	contains	<input type="text"/>
Operator Id	contains	<input type="text"/>
EAMS Doc ID	is equal to	<input type="text"/>
Doc Status	is equal to	<input type="text"/>
Doc Type	is equal to	<input type="text"/>
Doc Title	is equal to	<input type="text"/>
<i>(You must select Doc Type before selecting Doc Title)</i>		
Doc Date	is less than or equal to	<input type="text"/> <input type="button" value="Clear (MM/d/yy)"/>
Doc Date	is greater than or equal to	<input type="text"/> <input type="button" value="Clear (MM/d/yy)"/>
Doc Entry Date	is less than or equal to	<input type="text"/> <input type="button" value="Clear (MM/d/yy)"/>
Doc Entry Date	is greater than or equal to	<input type="text"/> <input type="button" value="Clear (MM/d/yy)"/>
Received Date	is less than or equal to	<input type="text"/> <input type="button" value="Clear (MM/d/yy)"/>
Received Date	is greater than or equal to	<input type="text"/> <input type="button" value="Clear (MM/d/yy)"/>
Lien Reservation Number	is equal to	<input type="text"/>

Max Results:

▼ Actions Menu

- Title**
- STIPULATIO
post 1-1-2013
- THIRD PART
- COMPROMIS
- APPLICATIO

Items Found: 4

	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	Lien Reservation Number
<input type="checkbox"/>	STIPULATIONS WITH REQUEST FOR AWARD DOI post 1-1-2013	STIPULATIONS WITH REQUEST FOR AWARD DOI post 1-1-2013	LEGAL DOCS					kathy patterson	kathy patterson	13503883	11/27/14 2:14 PM	12/1/14 8:00 AM	12/1/14 8:00 AM	NO	
<input type="checkbox"/>	THIRD PARTY COMPROMISE AND RELEASE	THIRD PARTY COMPROMISE AND RELEASE	LEGAL DOCS					josh herrera	josh herrera	12310385	5/25/14 12:13 PM	5/27/14 8:00 AM	5/27/14 8:00 AM	NO	
<input type="checkbox"/>			LEGAL								3/29/14 4:58	4/1/14 8:00	4/1/14 8:00		

View: Show Items:

External Home Page

[Home](#) [Workspace](#) [Inbox](#) [Calendar](#)

External User Home

👤 External User Search for Information



* required field

Search Criteria

Case Number	<input type="text"/>	Legacy Case Reference	<input type="text"/>
Date Of Injury	<input type="text"/>	Participant Type	Person
			EDWARD SPAGHETTI
		<input type="button" value="Search"/>	<input type="button" value="Reset"/>

Search Results (Number of Items)

Case Number	Injury Worker	Date Of Injury	Case Type	Date Opened	Status	Archived
ADJ11385094	EDWARD SPAGHETTI		Product Delivery	8/28/2018	Inactive	Active - Not archived

Enter the EAMS ADJ Case Number

Then Click Search

Search by EAMS Case Number – cont'd



[Home](#) [Workspace](#) [Inbox](#) [Calendar](#)

External User Home

External User Search for Information



* required field

Search Criteria

Case Number

Legacy Case Reference

Date Of Injury



Participant Type

Person

EDWARD SPAGHETTI



Search

Reset

Search Results (Number of Items: 1)

Case Number	Injured Worker	Date Of Injury	Case Type	Date Opened	Status	Archived
ADJ11385094	EDWARD SPAGHETTI		Product Delivery	8/28/2018	Inactive	Active - Not archived

Click on the ADJ Case
Number to see case
information

2 ways to access FileNet

FAMS Electronic Adjudicator Management System Build Number: 0366 Enter Reference Number Welcome

Home Workspace Inbox Calendar

SHORTCUTS External User Search eForms

eForms X ADJ X

ADJ

Home Communications Events Financials Liens Notes Orders Penalties PD/TD/Other Benefits Part of Body Related Cases Status History Tasks User Roles External User Request For Action

Adjudication Product Delivery Home: ADJ11385094 Edit...

Manage

- Hearing Case
- Restore to Inactive
- Close Case
- Inactivate Case
- Add Applicant
- Add Defendant
- Reject DOR
- Transmit To Recon
- Transmit to DQ: Judgment Required
- Transmit to DC: No Judge Action Required
- FileNet Documents
- Create APP Case

Case Details

Product Name	ADJ - DWC District Office	Case Reference	ADJ11385094
Primary Client	EDWARD SPAGHETTI	Legacy Case ID	
Start Date	8/28/2018	Status	Inactive
Priority	High	End Date	
Owner	SYSEAMS [Change]...	Occupation	
Occupation Code		Cause Of Injury	
Lien	No	Location	SAC-ADJ [Change]
Pro Per	No	Related Cases	No
Master Case	No	Date Of Settlement	

Applicant and Defendant

Applicant	Role	Action	Defendant	Role	Action
HARTER LAW SACRAMENTO	Law Firm	Delete	SYSTEM TEST	Uninsured Employer	Delete
EDWARD SPAGHETTI	Injured Worker	Delete			

Applicant Dispute Details Earnings No

Defendant Dispute Details Earnings No

Click on "FileNet Documents"

Access FileNet – cont.

FAMS Electronic Adjudication Management System Build Number: 0366 Enter Reference Number Welcome

Home **Workspace** Inbox Calendar

eForms ADJ

ADJ ...

Home Communications Events Financials Liens Notes Orders Penalties PD/TD/Other Benefits Part of Body **Related Cases** Status History Tasks User Roles External User Request For Action

Adjudication Product Delivery Home: ADJ11385094 Edit... Refresh Print Help

Manage

Hearing Case	Inactivate Case	Request DOR	Transmit to DO: No Judge Action Required
Restore to Inactive	Add Applicant	Transmit to Recon	FileNet Documents
Close Case	Add Defendant	Transmit to DO: Judge Action Required	Create APP Case

Case Details

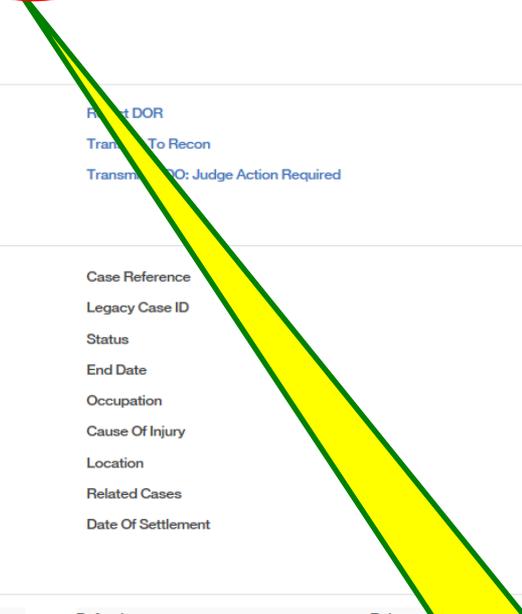
Product Name	ADJ - DWC District Office	Case Reference	ADJ11385094
Primary Client	EDWARD SPAGHETTI	Legacy Case ID	
Start Date	8/28/2018	Status	Inactive
Priority	High	End Date	
Owner	SYSEAMS [Change]...	Occupation	
Occupation Code		Cause Of Injury	
Lien	No	Location	SAC-ADJ [Change]
Pro Per	No	Related Cases	No
Master Case	No	Date Of Settlement	

Applicant and Defendant

Applicant	Role	Action	Defendant
HARTER LAW SACRAMENTO	Law Firm	Delete	SYSTEM TEST
EDWARD SPAGHETTI	Injured Worker	Delete	

Applicant Dispute Details Defendant Dispute Details

Earnings	No	Earnings	No
----------	----	----------	----



Click on
"Related Cases" tab

Access FileNet - INT Home Page

Home Workspace Inbox Calendar

SHORTCUTS <<

External User Search ^

eForms

eForms x ADJ x

ADJ

Home Communications Events Financials Liens Notes Orders Penalties PD/TD/Other Benefits Part of Body Related Cases Status F

Related Cases: ADJ ADJ11385094 - EDWARD SPAGHETTI 12597764

New Task... New Activity... | Refresh Print Help

New...

Related Case Reference	Related Case Type	Relationship Start Date	Relationship End Date	Status	Reason	Master	Action
INT11385094	Integrated Case	8/28/2018		Active		No	View... Edit...
APP11385094	Appeal	8/28/2018		Active	Linked Cases	No	View... Edit...



Click on "INT"

Access FileNet - INT Home Page

EAMS Electronic Adjudication Management System **Build Number: 0366** Welcome

Home Workspace **Inbox** Calendar

SHORTCUTS External User Search eForms

eForms x ADJ x INT11385094 - EDWARD SPAGHETTI x

- EDWARD SPAGHETTI

Open
(0) Items to Verify (1) Appeals
(0) Evidence In Edit
SYSEAMS

Home Case Participants Contact Service Plans Assessments Events Tasks Administration Request for Change of Physician

Integrated Case Home: INT11385094 New Task New Activity Refresh Print Help

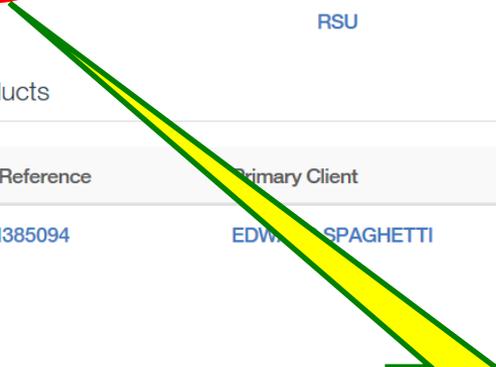
Case Documents

ADJ	VOC	UEBTF	INT
DEU	RSU	SIBTF	SAU

Products

Case Reference	Primary Client	Type	Start Date	Status
ADJ11385094	EDWARD SPAGHETTI	ADJ	8/28/2018	Inactive

ADJ



Click on "ADJ"

FileNet Page

Search View

Selected Search Template: **EAMS_OS** > **EAMS SEARCH**

Hide Search Criteria | Add Document

Printable View

Find released documents, where:

Case ID *is equal to*

Case Type *is equal to*

Admitted *is equal to*

Max Results:

▼ Actions Menu

Items Found: 196

View: Show Items:

<input type="checkbox"/>		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
<input type="checkbox"/>		REQUEST FOR ORDER TAKING OFF CALENDAR	REQUEST FOR ORDER TAKING OFF CALENDAR	LEGAL DOCS	PUBLIC				ALAN FREEMAN OXNARD	MARISOL HALYARD	48781432	6/13/13 1:00 AM	6/19/13 1:00 AM	6/19/13 1:00 AM	NO
<input type="checkbox"/>		COVER SHEET	COVER SHEET	MISC	PUBLIC					MARISOL HALYARD	48781431	6/19/13 1:00 AM	6/19/13 1:00 AM	6/19/13 1:00 AM	NO
<input type="checkbox"/>		DECLARATION OF READINESS TO PROCEED	DECLARATION OF READINESS TO PROCEED	LEGAL DOCS					kathy patterson	kathy patterson	10319130	6/15/13 6:21 AM	6/17/13 8:00 AM	6/17/13 8:00 AM	NO
<input type="checkbox"/>		NOTICE AND REQUEST FOR ALLOWANCE OF LIEN	NOTICE AND REQUEST FOR ALLOWANCE OF LIEN	LIENS AND BILLS					ORTIZCASANDRA	ORTIZCASANDRA	10194051	5/21/13 1:59 PM	5/21/13 1:59 PM	5/21/13 1:59 PM	NO
<input type="checkbox"/>		Confirmation of lien filing fee in June 2004.doc	CONFIRMATION OF PAYMENT 2004-2006	LEGAL DOCS					JOEL HARTER	kathy patterson	9978186	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(h) 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 the unstructured e-form
- ADJ case numbers NEVER have a zero for the first digit
- Do NOT 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

Master Case Number*: Enter Case Reference: Case Reference: Case Type*: Document Type*: *(You must select Case Type before selecting Doc Type)*Document Title*: *(You must select Doc Type before selecting Doc Title)*Author: Document Date: (mm/dd/yyyy)File Upload*: [Uploaded Documents](#)

Master Case Reference	Case ID	Case Type	Document Type	Document Title	File Name	
ADJ1234567		ADJ	MEDICAL DOCS	AME REPORTS	C:\Documents and Settings\Charles Ellison\Desktop\Smith AME 10-1-09.doc	<input type="button" value="Delete"/>
ADJ1234567		ADJ	MEDICAL DOCS	AME REPORTS	C:\Documents and Settings\Charles Ellison\Desktop\Smith Supplemental AME 11-1-09.doc	<input type="button" value="Delete"/>
ADJ1234657		ADJ	MEDICAL DOCS	TREATING PHYSICIAN	C:\Documents and Settings\Charles Ellison\Desktop\Jones PR-2s 9-1-07 thru 4-1-09.doc	<input type="button" value="Delete"/>
ADJ1234567		ADJ	MEDICAL DOCS	P & S REPORT	C:\Documents and Settings\Charles Ellison\Desktop\Jones P&S 6-1-09.doc	<input type="button" value="Delete"/>

Master Case Number*:

Enter Case Reference:

Case Reference:

Case Type*:

Document Type*:
(You must select Case Type before selecting Doc Type)

Document Title*:
(You must select Doc Type before selecting Doc Title)

Author:

Document Date: (mm/dd/yyyy)

File Upload*:

[Uploaded Documents](#)

Master Case Reference	Case ID	Case Type	Document Type	Document Title	File Name	
ADJ1234567		ADJ	MEDICAL DOCS	AME REPORTS	C:\Documents and Settings\Charles Ellison\Desktop\Smith AME 10-1-09.doc	<input type="button" value="Delete"/>
ADJ1234567		ADJ	MEDICAL DOCS	AME REPORTS	C:\Documents and Settings\Charles Ellison\Desktop\Smith Supplemental AME 11-1-09.doc	<input type="button" value="Delete"/>
ADJ1234657		ADJ	MEDICAL DOCS	TREATING PHYSICIAN	C:\Documents and Settings\Charles Ellison\Desktop\Jones PR-2s 9-1-07 thru 4-1-09.doc	<input type="button" value="Delete"/>
ADJ1234567		ADJ	MEDICAL DOCS	P & S REPORT	C:\Documents and Settings\Charles Ellison\Desktop\Jones P&S 6-1-09.doc	<input type="button" value="Delete"/>

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 correct document titles
- Refer to the Doc Type and Title list found on the e-forms website

http://www.dir.ca.gov/dwc/eams/EAMS_EformsFilers.html

Resources:

- E-form Filing Reference Guide  - December 2013
- Document titles list  - June 2017

Note to e-form participants: Use ONLY the document titles found on this list

- **Never** use Exhibit or Evidence Doc Titles
- Scanned settlement documents use ONLY
ADJ – LEGAL DOCS – COMPROMISE AND RELEASE-SIGNED
OR
ADJ – LEGAL DOCS – STIPULATIONS WITH REQUEST FOR
AWARD-SIGNED
*even if you are doing a walk-through of the settlement, the document coversheet is where you select “walk-through” “Yes”

Duplicate Filing

- If you don't see the document in FileNet after the next batch run (~ 2 hours), **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 – cont.

- You have emailed the EAMSHelpDesk...
- If told it is **not** in the UDQ, e-mail the UDQ supervisor, *put UDQ SUPERVISOR in the subject line to get assistance and remember include the batch ID in the body of the e-mail
- EFORMS@DIR.CA.GOV
- Include the Batch ID, IW Name and 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 e-mail you with further instructions.
 - **DO NOT REFILE** unless the e-mail says they were deleted

Duplicate Filing – cont.

- Right after you click “Submit” you realized you made a mistake
- E-mail UDQ supervisor with
 - IW Name
 - Batch ID
 - Case Number
 - Document type
 - **DO NOT REFILE**
- If the Batch processed successfully, the documents may need to be deleted
- Either way, **DO NOT REFILE** – wait for an e-mail

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
 - “LSSPOFS” or “A273458353.pdf” is not clear
 - Some you cannot 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 is not mandatory does not 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 requires the following in the upper left hand corner:
 - Uniform Assigned Name
 - EAMS Administrator's 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 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 e-mail 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
 - http://www.dir.ca.gov/dwc/eams/EAMS_EformsFilers.html

Resources:

- E-form Filing Reference Guide  - December 2013
- Document titles list  - June 2017

Note to e-form participants: Use ONLY the document titles found on this list

- Print out and keep a copy of blank e-forms for reference so you know what information to gather
- Make a checklist of attachments for each type of e-forms packet

Application form package

- Application for Adjudication of Claim e-form
 - All filers
- 4906(h) – ADJ-LEGAL DOCS-4906(h) DECLARATION
 - **If filed by Representative for IW only add:**
- Fee Disclosure Stmt – ADJ-LEGAL DOCS-FEE DISCLOSURE STATEMENT
- Venue Authorization – ADJ-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
- Proof of Service ADJ-LEGAL DOCS
- 4903.8(d) OR 4903.8(a)(b) ADJ-LIENS AND BILLS
- Original Bill ADJ-LIENS AND BILLS
- File the itemized statement of charges with the lien. Remember to serve the other parties all documents.

Lien form package updates

- All lien submissions must include an Original Bill
- Medical liens filed on or after 1/1/2017 that require payment of lien filing fee must provide additional information in the lien form
 - Rendering provider information
 - Billing provider information
 - Declaration under Labor Code Section 4903.05(c)
 - first section must be filled out; additional sections to be used only for additional providers

Lien updates

- Medical liens filed between 1/1/2013 and 12/31/2016 must file a 4903.05(c) Declaration by 7/1/2017
 - New eform created: SUPPLEMENTAL LIEN FORM AND SECTION 4903.05(c) DECLARATION
 - (must include the lien reservation number)
 - Tool tips in each field to help
 - First provider section must be filled out
 - Additional sections to be used only for additional providers

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 – cont.

- 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

Supplemental Job Displacement Benefits (SJDB) Request for Dispute Resolution Before Administrative Director

- **Use RSU Prefix even if this RSU product does not exist (no for case opening)**

Form Package:

- **RSU-SUPPORTING DOCUMENT-MEDICAL REPORT**
- **RSU-SUPPORTING DOCUMENT-VRTWC REPORT (PHYSICIAN'S RETURN TO WORK & VOUCHER REPORT)**
- **RSU-OTHER-OTHER CORRESPONDENCE (copy of settlement and order)**
- **RSU-OTHER-OTHER CORRESPONDENCE (NOTICE OF OFFER OF REG MOD OR ALTERNATIVE WORK)**
- **RSU-OTHER-PROOF OF SERVICE *OCR form has POS however, this Eform doesn't (you can still use the OCR page 4 POS if you modify to include your Eform information)**

DWC-AD-10133.55 (SJDB) Request for Dispute Resolution Before Administrative Director-cont.

- **Optional form Package:**
- RSU-NON-FORM CORRESPONDENCE-LETTER
- RSU-SUPPORTING DOCUMENT-JOB DESCRIPTION
- RSU-SUPPORTING DOCUMENT-POSITION STATEMENT
- RSU-SUPPORTING DOCUMENT SCHOOL & VRTWC INVOICES
- RSU-OTHER-OTHER CORRESPONDENCE (SJDB VOUCHER SIGNED)

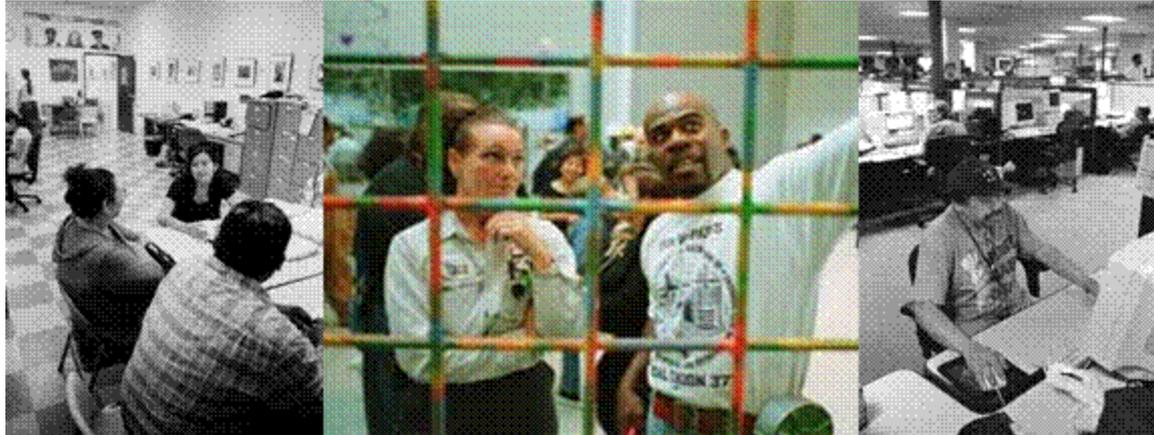
*For questions regarding status? Email

DWCSJDBinquiries@dir.ca.gov

Division of Workers' Compensation



EAMS Help Desk



Contacting the EAMS Help Desk

- e-filers* 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 at 1-888-771-3267

Hours: 8 a.m. to 5 p.m.

 - e-mails after 5 p.m. may be handled the next business day
- *NOTE: Only the primary administrator or alternate administrator may contact the EAMSHelpDesk

e-form Submission

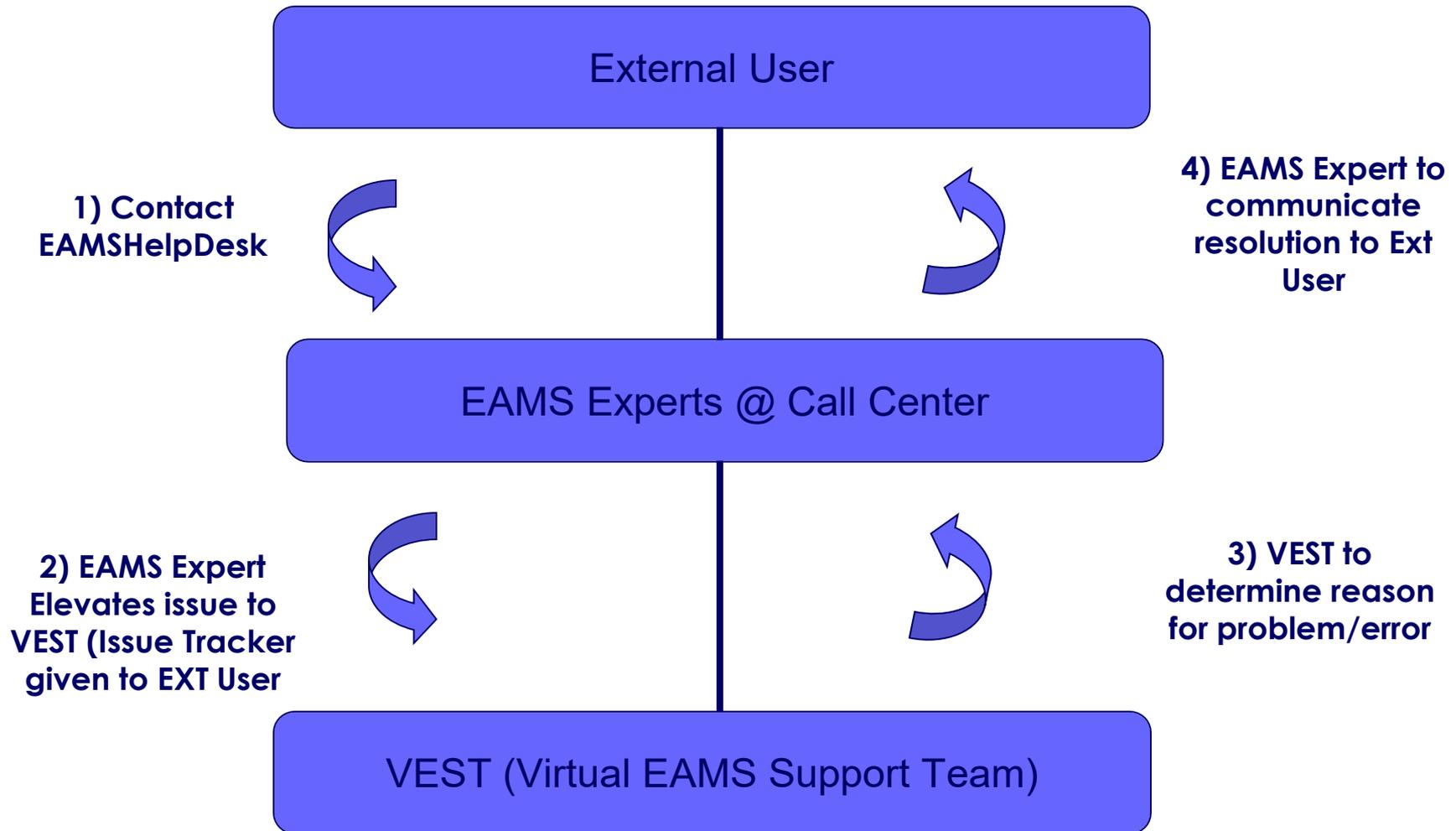
- Completion of e-form submission will generate a batch ID#
- Print batch ID# and keep it for future reference
- Verify next day to see if your e-form was successfully submitted in case
- Don't see it?
- E-mail EAMSHelpDesk@DIR.CA.GOV with the submitted information so we can research what happened to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

(Please include Batch ID #, case #, IW's name, and type of e-form submitted, screenshots, when appropriate, and your contact information including your UAN)

Problem Solving in EAMS

- If EAMS experts are unable to determine the problem after researching it, the 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



Helpful Hints

- Take screenshots 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 and 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 and you will have to start e-form again

e-form Filer Partnership

- Patience and teamwork
- e-form participants help find potential bugs

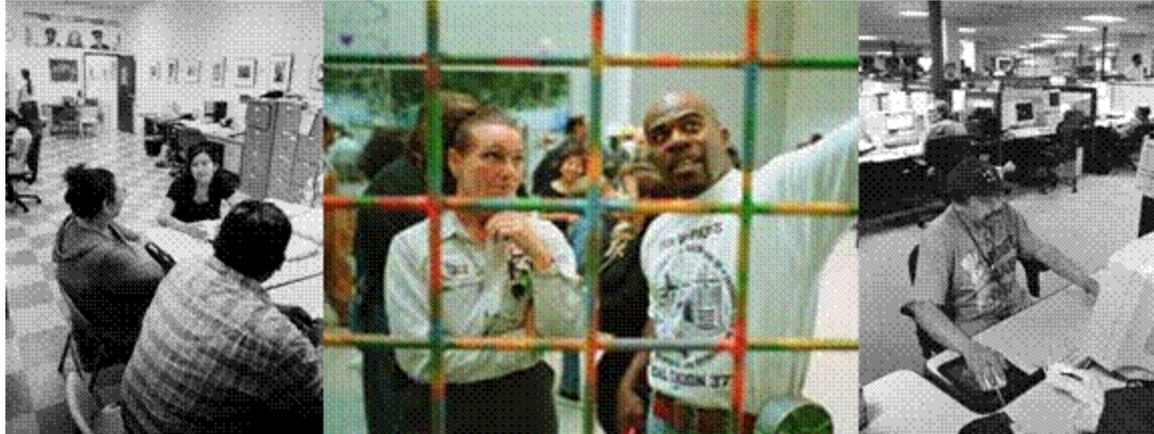
- Thank you!



Division of Workers' Compensation



The UDAQ



What's the UDAQ?

- Unprocessed document queue (UDAQ)
- Where forms with mistakes end up
- Processed centrally
- Currently have three (3) UDAQ Operators

Staying out of the UDAQ

- Review your case in EAMS to get all information needed to file your document BEFORE you file it – check for correct spellings, addresses and dates
- If you are a case participant and cannot 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 UDAQ

- Don't check a box/radio button unless you mean it—you cannot uncheck it, you must 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 UDAQ – 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 UDAQ: 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 and 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 UDAQ: 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 UDAQ: 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 UDAQ: 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
- 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
ADJ – LIENS AND BILLS – REQUEST FOR 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(MMY)

[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.

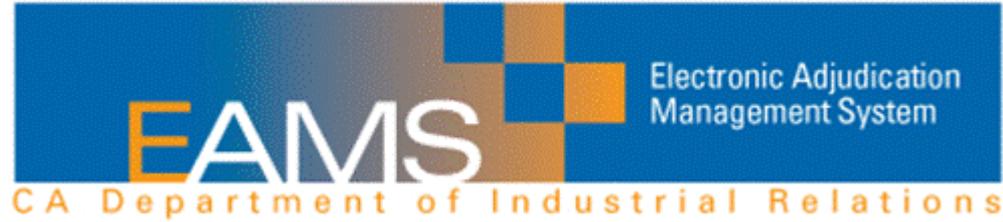
Staying out of the UDAQ: Other Tips

- 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

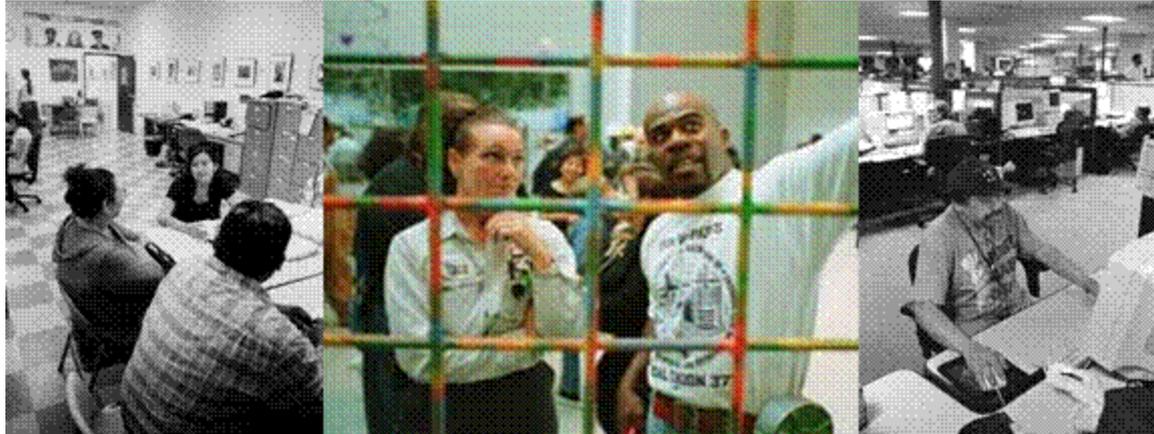
Staying out of the UDAQ: Other Tips

- 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.

Division of Workers' Compensation



Tips & Tricks

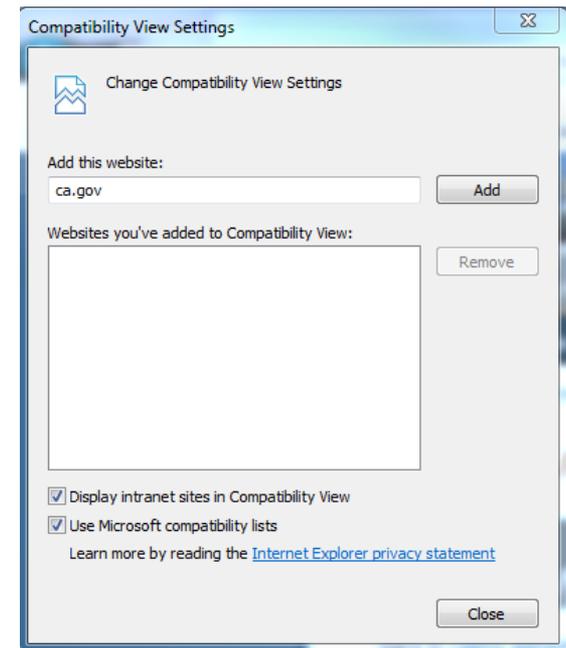


e-forms Tips and Tricks

- 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

The first time you login to EAMS

- Verify that you are using Internet Explorer (IE) 9 through 11
 - No alternate browsers such as MS Edge, Firefox, Chrome, Safari, etc., are compatible
- Please verify that your screen resolution is set to:
 - 1366 x 768 or higher
- Verify that your Java is set to:
 - Version 8 Update 181 (no higher)
- Check your compatibility settings
 - Under the “Tools” menu in IE click on “Compatibility View Settings”
 - **Remove** “ca.gov” from your IE Compatibility View Settings if it is currently there

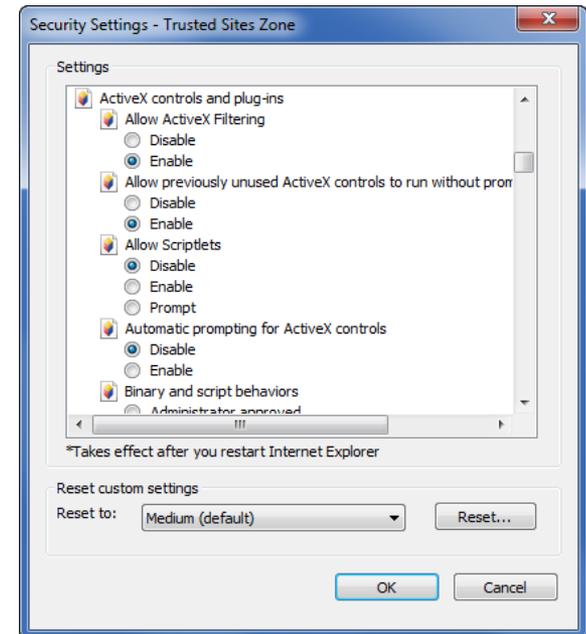


The first time you login to EAMS

- Under the “Tools” menu in Internet Explorer (IE) select “Internet Options”

- Enable ActiveX

- Click on the “Security” tab then “Custom level” to access the ActiveX plugins
- See that “Enable” is selected for the following:
 - Automatic prompting for ActiveX controls
 - Binary and script behaviors
 - Download signed ActiveX controls
 - Run ActiveX controls and plugins
 - Script ActiveX controls marked as safe for scripting

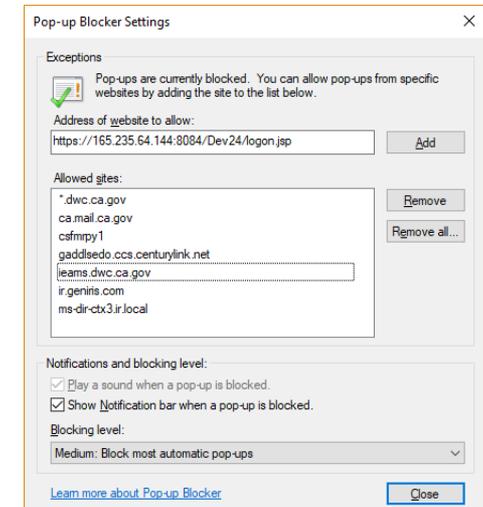
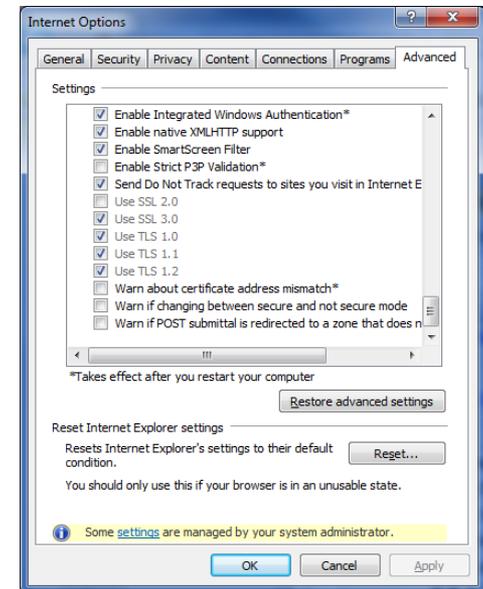


- Add EAMS to your Trusted Sites

- Click on the “Security” tab then on the “Sites” button
- Add “<https://eams.dwc.ca.gov/external/logon.jsp>” to the Trusted Sites dialog box

The first time you login to EAMS

- Under the “Tools” menu in Internet Explorer select “Internet Options”
- IE TLS Settings
 - Click on the ‘Advanced’ tab
 - Scroll down to the Security section
 - Click all TLS options (1.0, 1.1, 1.2)
 - Click Apply then Click OK
- Pop up Blocker
 - Click on the “Privacy” tab
 - If Pop-up blocker is off turn it on
 - Click on “Settings” next to the Pop-up blocker button
 - Add “ieams.dwc.ca.gov” to “Allowed sites”
- Any other errors please remember to take a screenshot and e-mail eforms@dir.ca.gov for assistance



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*.
 - Please make sure they are titled correctly
- LOG OUT - Fill out your e-Forms *without interruptions* to avoid being logged out from EAMS/e-forms
- PRINT your e-Form *before submitting* and 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!

Some common errors in EAMS

- You do not have sufficient privileges to view this page
 - You are limited in what you can view in EAMS. Just hit the back button or link.
- No Suitable Slot Could be Determined
 - This is a conflict in the electronic court calendar in EAMS
 - E-mail Eforms@dir.ca.gov to inform us the “no suitable slot” error populated. Include the ADJ number and any companion case ADJ numbers that should be scheduled for hearing. The eForms team will research and clear the error, so you can eFile your DOR.
- Case is Archived
 - Please e-mail Eforms@dir.ca.gov with the ADJ number(s) so that we can retrieve it for you. Retrieval requires 2 hours to complete.

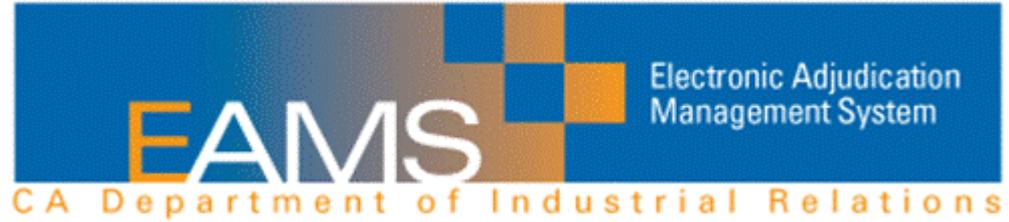
Filling out e-forms by Copy and Paste

- Copy text blocks from your report and paste them into your e-form
 - Please note: sometimes when you use copy and paste a space at the beginning or end of a name, number or address can be added
 - All extra spaces need to be removed as our system reads spaces as a character
- e-forms and mice do not like each other:
 - Trick for right-hand keyboard users: Use <CTRL>c to copy, <CTRL>v to paste
 - Trick for left-hand keyboard 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 information 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

Division of Workers' Compensation



Q&A

