



MINNESOTA

WORKERS' COMPENSATION
MODERNIZATION PROGRAM

Campus training for insurers, self-insurers,
third-party administrators, and trading partners



DEPARTMENT OF
LABOR AND INDUSTRY

Agenda

- Entity dashboard
- Entity details page
- Tabs
- Claim view
- Submit filing

Entity dashboard

Dashboard

- Open Claims
- Upcoming Events
- New Documents
- Notifications
- My Queues
- My Events

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Submit a Filing

Cheryl George

My Overview

- 1** Open Claims
View details associated to your claims in the My Queue portal.
- 0** Upcoming Events
View and edit the details of your events in the Events portal.
- 0** New Documents
Review documents in the Notifications panel to ensure accuracy.

Notifications

No notifications.

My Queues

My Claims | My Disputes | My Forms | My SCF Assessment Reports

Include Inactive

Campus File Number	Employee	Employer	Claim Admin	Date of Injury	Status
CL-02-3883-488	Maxamillion Turner	Optics Analysis		1/1/2018	Open

Showing (1-1) of 1 | Items per page 10

My Events

October 2020

Su	Mo	Tu	We	Th	Fr	Sa
27	28	29	30	1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

[Open Calendar](#)

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WORK COMP CAMPUS
Work Comp Campus™ 2019

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Entity details page

Entity details page

- Entity details
- Entity status
- Submit Insurer's Report option
- Tabs

The screenshot shows the 'Entity details page' for 'L & C Insurance' (Insurer: IR-01-6155-670) on the Department of Labor and Industry website. The page features a dark blue header with the logo and user information (Elizabeth Smith). Below the header, there's a breadcrumb trail: 'Dashboard > Insurer: IR-01-6155-670'. The main content area is divided into sections: 'L & C Insurance' with a 'Submit Insurer's Report' button, 'Insurer Details' with fields for Insurer Name, Insurer Type, NAIC, and FEIN, and 'Insurer Status' with fields for Status and Bankrupt. At the bottom, there's a tabbed interface with 'Addresses' selected, showing a table with columns for Address Type, Address 1, City, and Effective Range, and a '+ Add Address' button.

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Elizabeth Smith

Dashboard > Insurer: IR-01-6155-670

L & C Insurance

Insurer: IR-01-6155-670

Submit Insurer's Report

Insurer Details

Insurer Name	Edit	Insurer Type	NAIC	FEIN
L & C Insurance		Insurer	NAIC	00-0220063
NCCI				

Insurer Status

Status: Active

Bankrupt: No

Addresses | Contacts | Insurer's Transaction History | Insurer's Relationships | SCF Assessment History | First Action | Related Claims & Cases

+ Add Address

Address Type	Address 1	City	Effective Range
--------------	-----------	------	-----------------

Addresses tab

The **Addresses** tab displays the addresses associated to the entity.

Addresses can be added to an entity.

Open the Add Address link to submit address information.

Addresses	Contacts	Insurer's Transaction History	Insurer's Relationships	SCF Assessment History	First Action	Related Claims & Cases
+ Add Address						
Address Type	Address 1	City	Effective Range	⌵		
No data found						
Showing (0-0) of 0				Items per page 10		

Add Address ×

Address Type
Primary Address

Address 1 *
Address 1 Address 2

Address 2
Address 2

Outside US

Postal Code * **City *** **County**

State Province **Country**

[Save](#) [Close](#)

Contacts tab

The **Contacts** tab shows all the contacts that have been identified for the entity.

Addresses	Contacts	Insurer's Transaction History	Insurer's Relationships	SCF Assessment History	First Action	Related Claims & Cases
Contacts	Users					
Name	Contact Type	Phone Number	Email Address	Address		
Cheryl George	Claims Supervisor/Manager	(651) 284-5135	CampusCLS+TP@gmail.com	999 Main St, Young America, MN, 55555		
Showing (1-1) of 1					Items per page 10	

Insurer's Transaction History tab

The Insurer's Transaction History tab shows all EDI and eForm transactions submitted for an entity.

JCN	Date Received	Description	Source	Status	Batch ID	
> 023883488	10/6/2020 10:54:35 AM	PY - Payment Report	eForm	Accepted	1462	⋮
> 023883488	10/6/2020 10:44:20 AM	SX - Full Suspension	eForm	Accepted	1461	⋮
> 023883488	10/6/2020 10:13:23 AM	IP - Initial Payment	eForm	Accepted	1460	⋮
> 023883488	10/5/2020 8:14:33 PM	04 - Denial Transaction	eForm	Accepted	1453	⋮
> 023883488	10/5/2020 10:34:17 AM	00 - New First Report of Injury	eForm	Accepted	1432	⋮

Insurer's Relationships tab

The **Insurer's Relationships** tab shows all entities that the insurer is related to.

ID	Name	FEIN	Relationship	Start Date	End Date	Relationship Status
TP-01-6155-672	L & C Trading Partner	00-0000089	Related To	10/5/2020		Active

Showing (1-1) of 1 << < 1 > >> Items per page 10

SCF Assessment History tab

The **SCF Assessment History** tab shows assessments viewable to users who are identified as a designated contact for assessments.

Addresses	Contacts	Insurer's Transaction History	Insurer's Relationships	SCF Assessment History	First Action	Related Claims & Cases
Assessment Id	Assessment Year	Total Amount Due	Assessment Status	Penalty Status		
No data found						
Showing (0-0) of 0				Items per page 10		

First Action tab

The **First Action** tab shows the insurer's reportable lost-time claims and the timeliness of its first action on those claims reported within the fiscal year.

Reporting Year [?]										
	2020		2019		2018		2017		2016	
Total Reportable Claims	1		0		0		0		0	
Timely Claims	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Untimely Claims	1	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%

Reporting Year	Reporting Date	Date of Injury	Claim Admin Claim #	Employee Name	JCN	Timely	MTC	
2020	10/5/2020	1/1/2018	123456789	Maxamillion Turner	23883488	No	04	

Related Claims & Cases tab


The **Related Claims & Cases** tab shows all claims, disputes and other transactions related to the entity.

Addresses	Contacts	Insurer's Transaction History	Insurer's Relationships	SCF Assessment History	First Action	Related Claims & Cases
						<input type="checkbox"/> Include Inactive
Associated ID	Associated Name	Associated Type	Employee Name	Claim Admin Claim Number	Status	
CL-02-3883-488	Maxamillion Turner: Injury on 01/01/2018	Claim	Maxamillion Turner	123456789	Open	
Showing (1-1) of 1						Items per page 10

Claim view

Addresses Contacts Insurer's Transaction History Insurer's Relationships SCF Assessment History First Action **Related Claims & Cases**

Include Inactive

Associated ID	Associated Name	Associated Type	Employee Name	Claim Admin Claim Number	Status	
CL-02-3883-488 	Maxamillion Turner: Injury on 01/01/2018	Claim	Maxamillion Turner	123456789	Open	

Showing (1-1) of 1 << < 1 > >> Items per page 10

Claim view, continued

[Dashboard](#) > [Claim: CL-02-3883-488](#)

Maxamillion Turner: Injury on 1/01/2018

Claim: CL-02-3883-488

Open

+ Submit Filing

+ Submit eFROI eSROI / Webform

Campus File Number ⓘ 023883488	Employee Maxamillion Turner	Date of Injury 1/1/2018	Part of Body Injured
Employer Optics Analysis	Insurer L & C Insurance	Claim Administrator Claim Number ⓘ 123456789	

Claim Overview ▾

Claim Details ▾

Key Dates ▾

Injury Details ▾

Accident Details ▾

Employment Details ▾

Benefits and Payment Details ▾

Claim view, continued

Parties Claim Summary Benefits Documents Related Claims & Cases Reporting History Claim Payments

[✉ Contact Parties](#)

Employee Insured Employer Insurer Claim Admin

Maxamillion Turner

Claim Party Type	ID	Address	Service Method
Employee	EE-01-6155-675	992 Robert St Woodbury, MN 55025	Mail

Submit filing

[Dashboard](#) > **Claim: CL-02-3883-488**

Maxamillion Turner: Injury on 1/01/2018

Claim: CL-02-3883-488

Open



+ Submit Filing

Campus File Number ⓘ

023883488

Employee

Maxamillion Turner

Date of Injury

1/1/2018

Part of Body Injured

Employer

Optics Analysis

Insurer

L & C Insurance

Claim Administrator Claim Number ⓘ

123456789

Claim Overview

Claim Involved in Dispute

Claim Denied by Insurer ✓

Employee Returned To Work

Employee Consulted for Vocational Rehab

Employee Receiving Indemnity Benefits ✓

Suspended ✓

Thank you!