



iRISK Instructions

Completing the Initial Incident Report and Submitting the
Incident to the Workers' Compensation Program
Step 2

June 21, 2013

Completing and Submitting the Initial Incident Report to Workers' Compensation

The claim information used in these instructions is made up and do not reflect any employee or agency.

Overview

When an incident/first report of injury is reported and saved through the online incident report form (please see Incident Reporting – Internet-based First Report of Injury) an email is sent by iRISK to the designated agency Workers' Compensation Coordinator (WCC) notifying them that an incident has been reported.

Once an incident is reported, the agency's Workers' Compensation Coordinator must access the incident in iRISK to complete the incident details and make a determination as to whether the incident is a potential workers' compensation claim requiring a determination of liability and management by the Workers' Compensation Program.

Definitions

Agency Workers' Compensation Coordinator (WCC) – this is the designated agency representative for workers' compensation.

Determination of liability – any incident where an employee has missed time from work because of the incident or has sought and received medical care from a provider must be submitted to the Workers' Compensation Program for a determination of liability.

Incident – any event that has resulted in or could have resulted in personal injury or physical damage or loss.

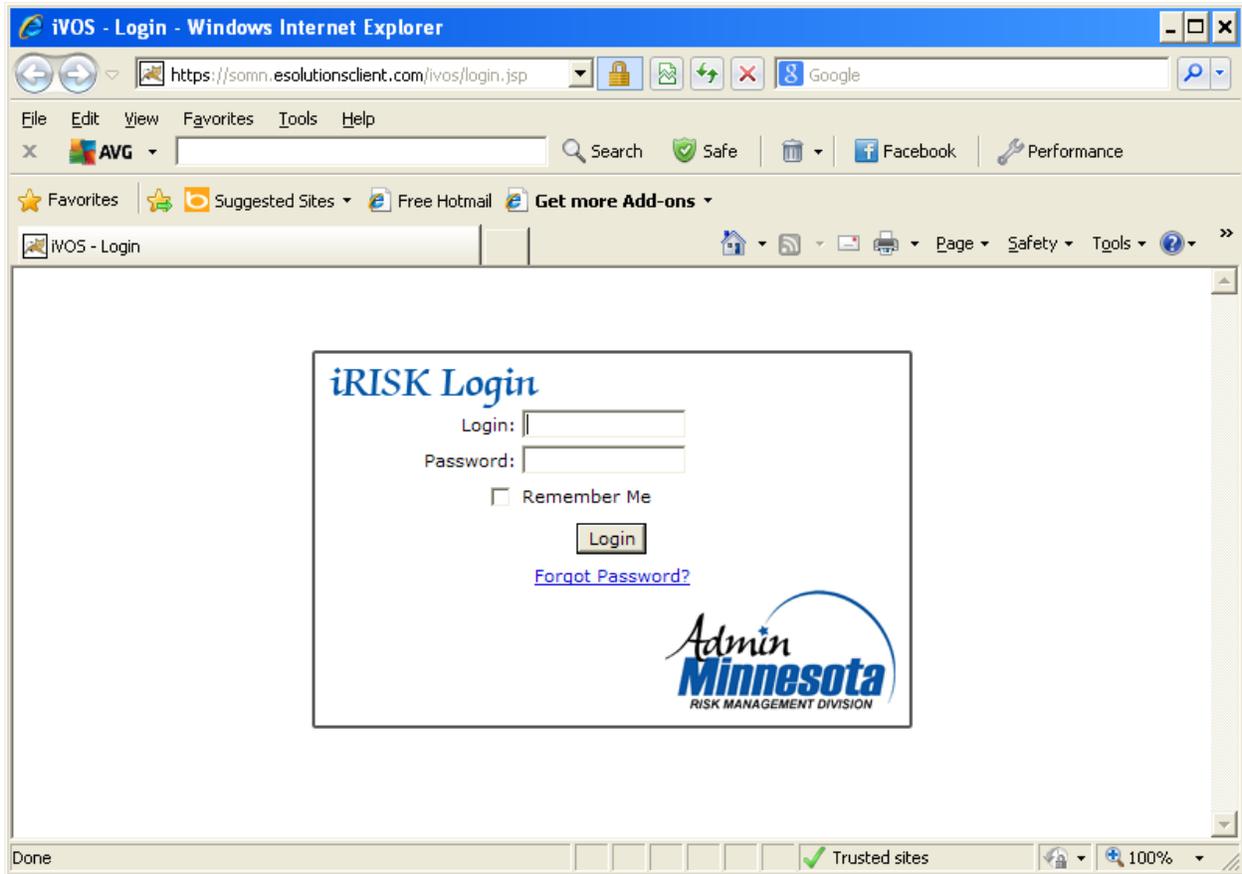
Workers' compensation claim – any incident where an employee is claiming that they will miss or will be missing time from work or that they will or have sought medical treatment for a work-related incident.

Requirements

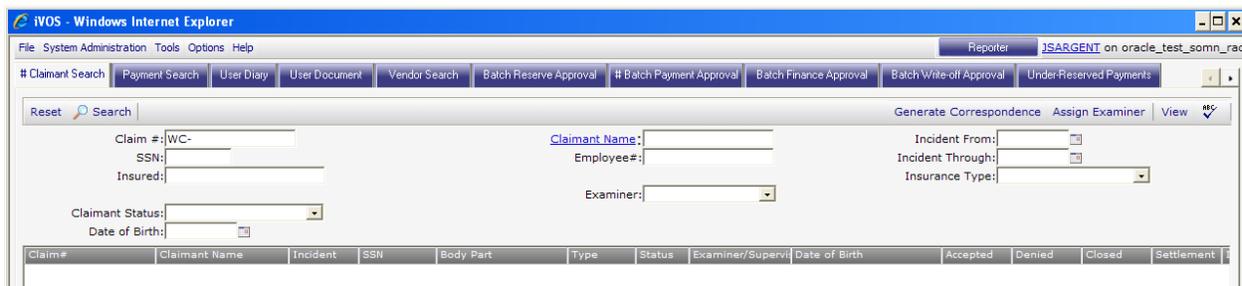
The Agency Workers' Compensation Coordinator (WCC) must have a valid iRISK login ID and password, computer with internet access, Internet Explorer web browser (version 7.0 or later with applicable settings), and email access. The WCC must also know the claim number of the incident that has been reported (will be provided within an email). For iRISK access, please contact John Sargent via email at john.sargent@state.mn.us. Or call John Sargent at 651-201-3031.

Procedure Summary

1. Log Into iRISK.
 - A. Open Internet Explorer and proceed to: <https://somn.esolutionsclient.com/ivos/login.jsp>.



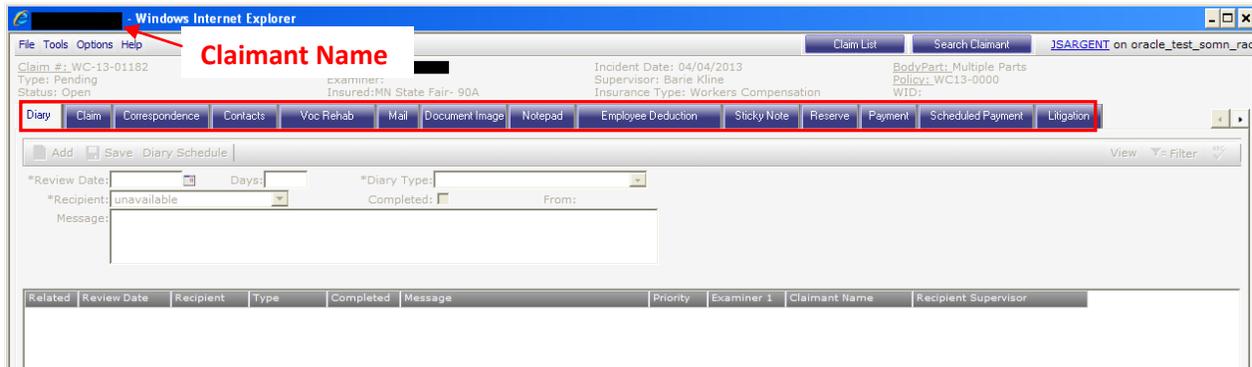
- B. Type in your Login ID.
- C. Type in your Password.
- D. Hit the **Enter** key or click on **Login**.
- E. The iRISK **Claimant Search** tab will open.



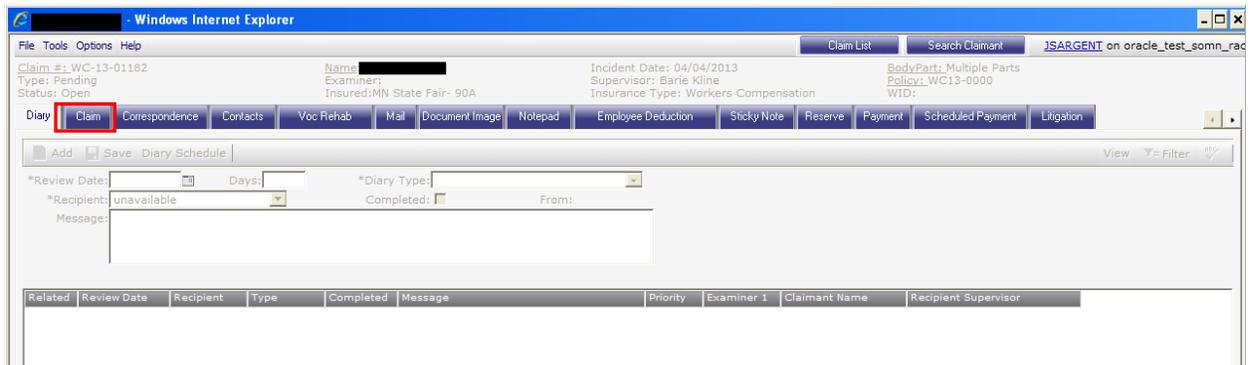
2. Enter the full claim number formatted as **WC-xx-xxxxx** in the **Claim #** field.
Note: the claim number field will default with the WC.
3. Click on the Search button. The desired claim will be displayed in the Overview table.



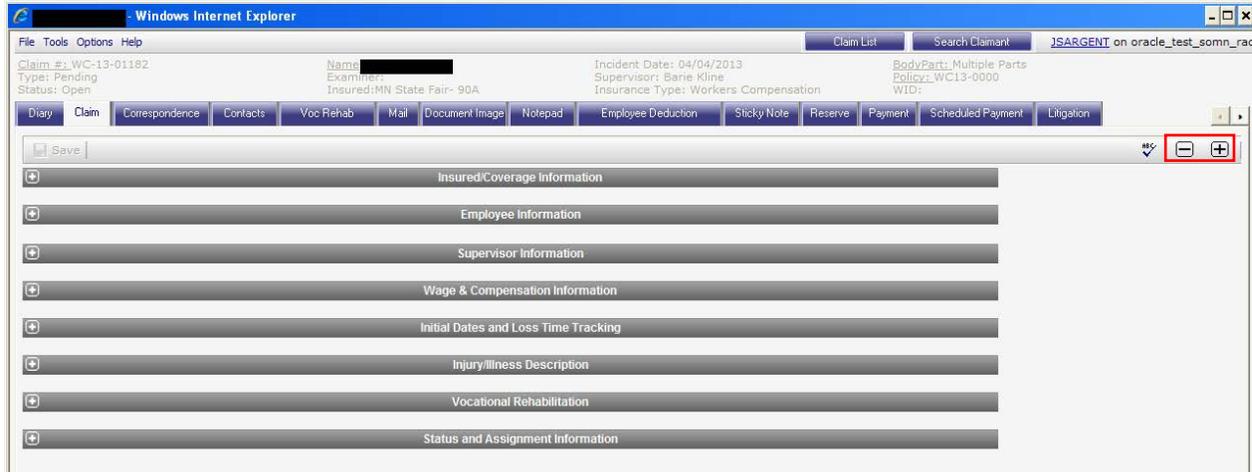
- Select the desired claim by double clicking on the claim. A new browser window will open with the claimant name. The Claim Tabs will be displayed in the newly opened window.



- Click on the **Claim** tab.



- The Claim tab will open. Click on the "+" sign to expand all of the Claim Tab data fields. Clicking the "-" will collapse the data fields.



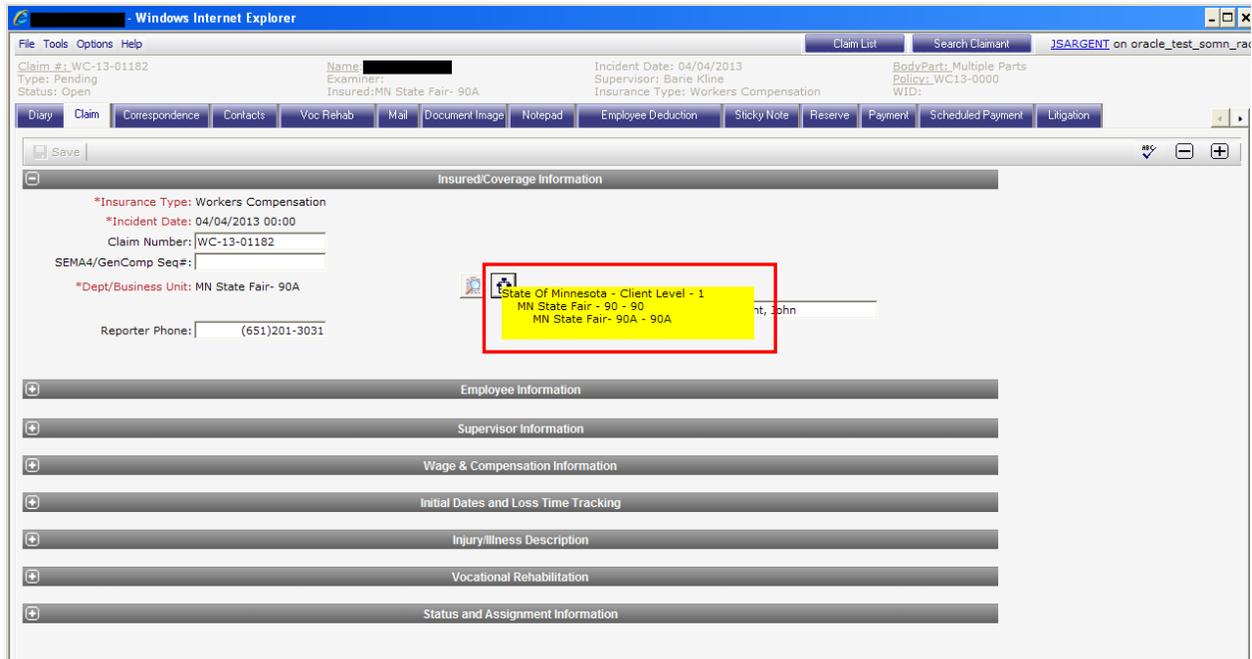
7. Review the incident data submitted in the "Incident Reporting - Internet-based First Report of Injury Step 1" process for accuracy. Make any changes needed.
8. Assign the 6 character Workers' Comp Organizational Code.

Note: you must enter the 6 character Organization Code or you will receive the following error and you will not be able to save the claim.

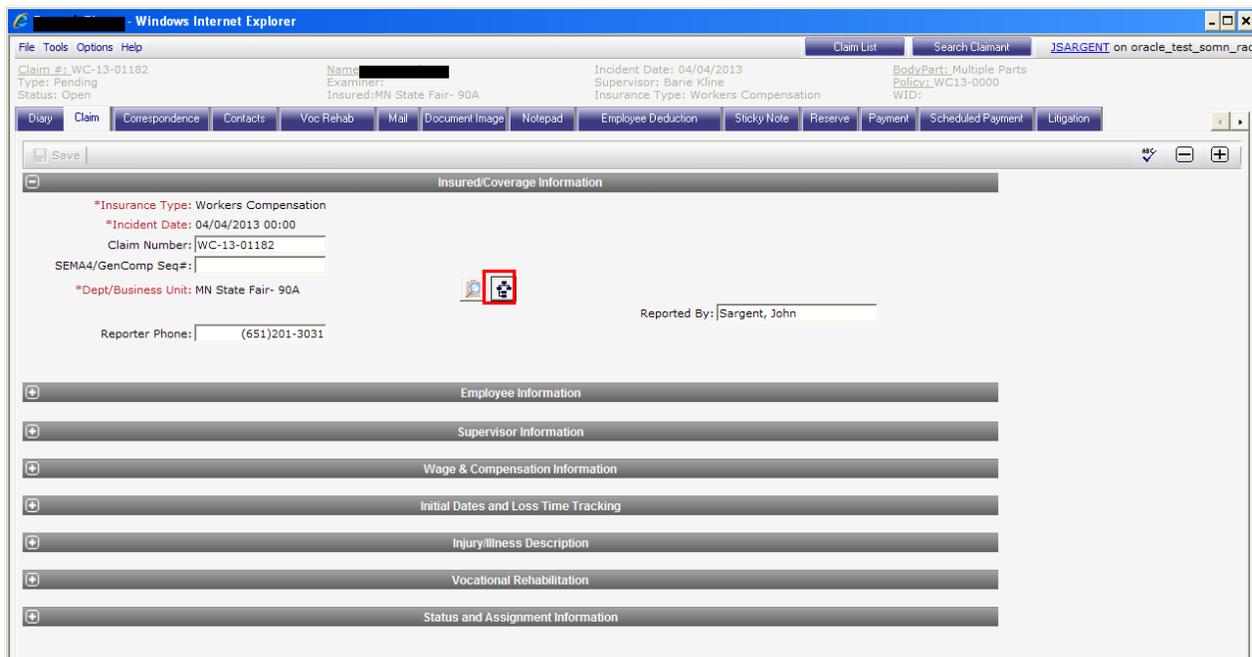


Note: if an incorrect Organization Code has been entered, please contact John Sargent (651) 201-3031: john.sargent@state.mn.us.

- A. If you hover your mouse over the  in the middle of Insured and Coverage Information section. You will see the current Organization Code assigned to the claim that was entered during the "Incident Reporting – Internet-based First Report of Injury Step 1" process

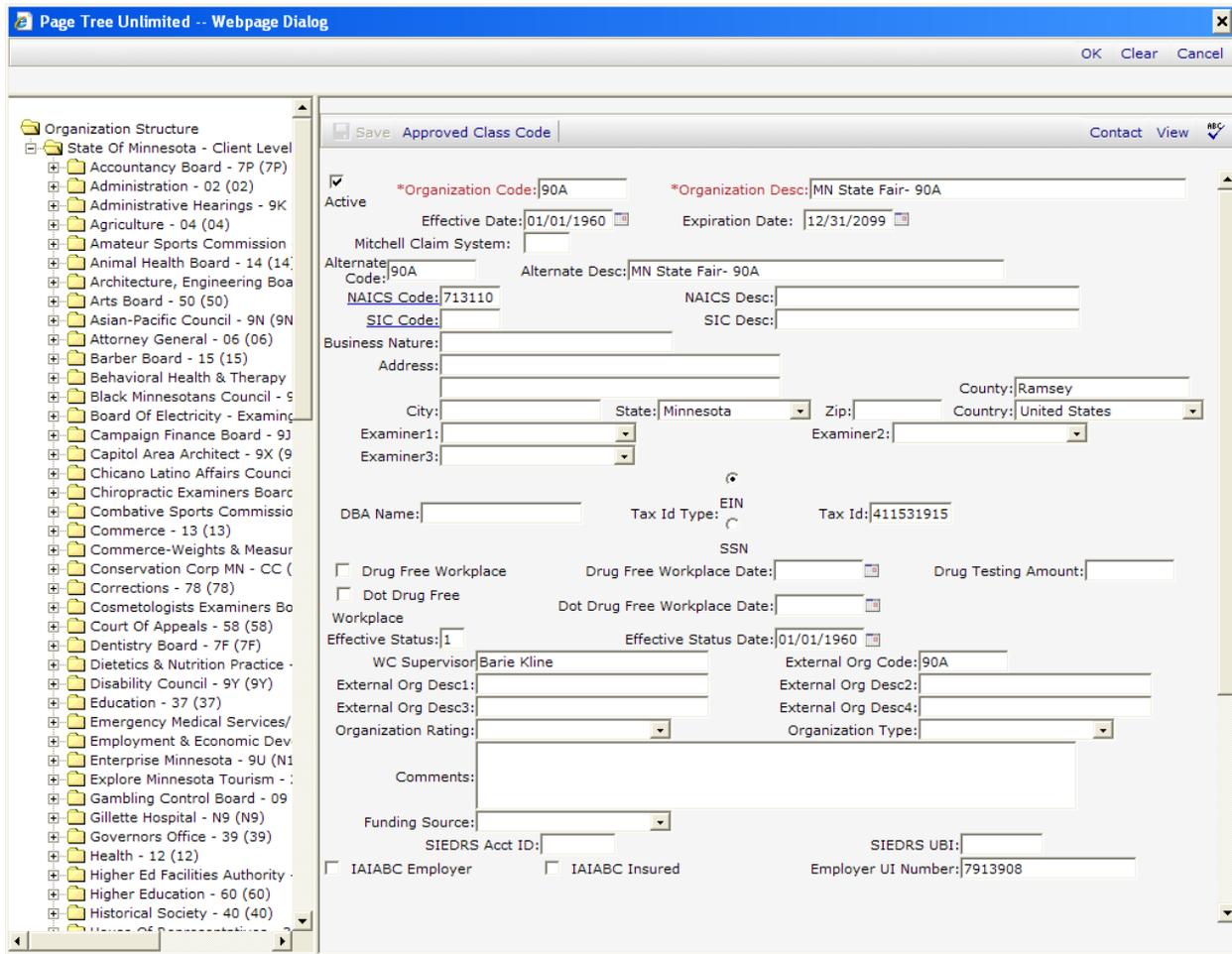


B. To select the 6 character Organization Code, click on the  in the middle of Insured and Coverage Information section.



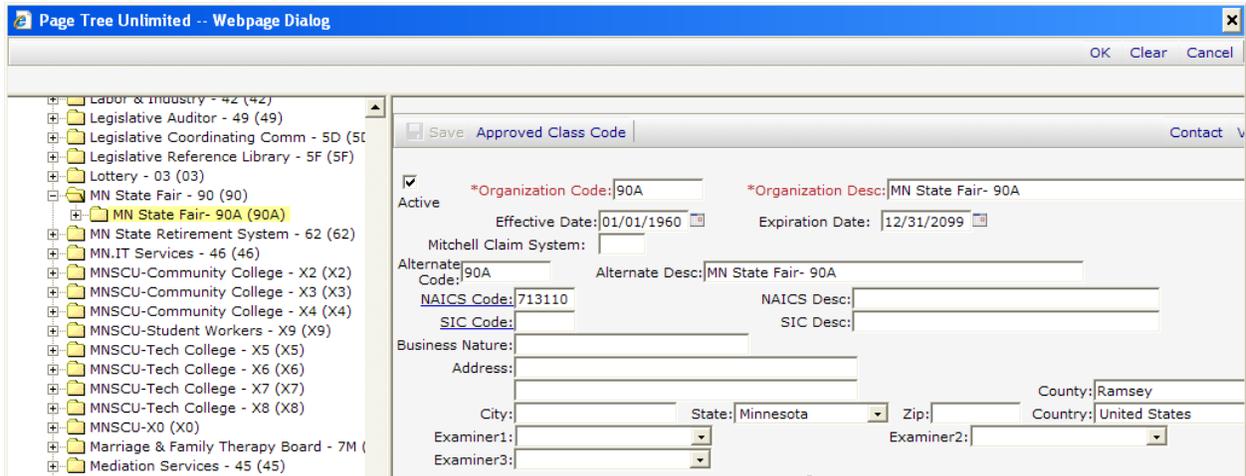
C. You will receive the following Page Tree screen with the Organization Code information that was selected during the Incident Reporting – Internet-based First Report of Injury Step 1 process displayed on the right hand side of the screen.

Note: drag the center scroll bar to the right to view the full Organization Code description in the tree.

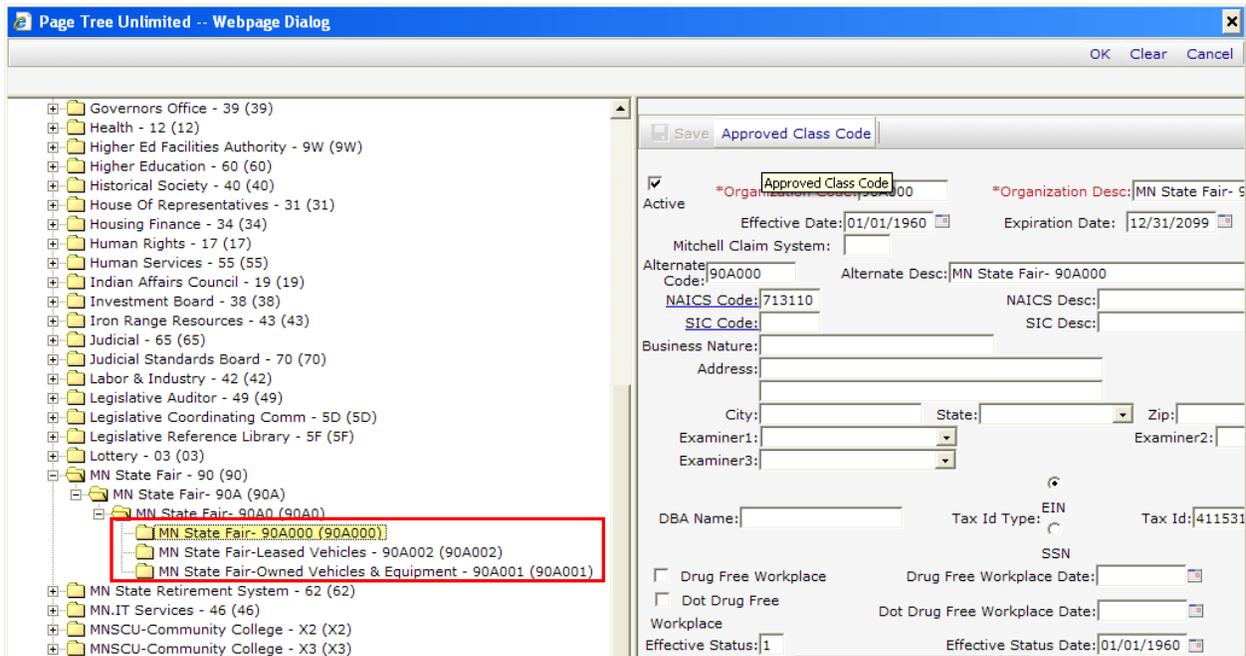


D. Use the scroll bar on the left section of the screen and scroll down until you see the Organization Code highlighted in yellow. See following example.

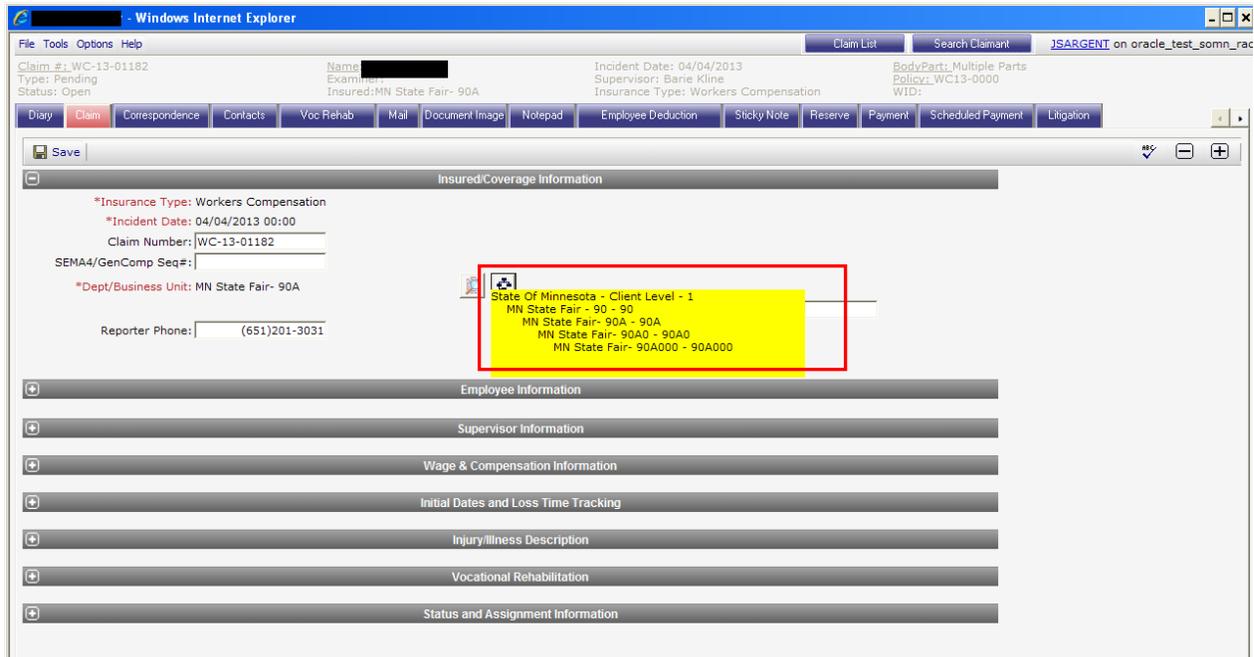
Note: this is the 3 character Organization Code entered during the Incident Reporting – Internet-based First Report of Injury Step 1 process.



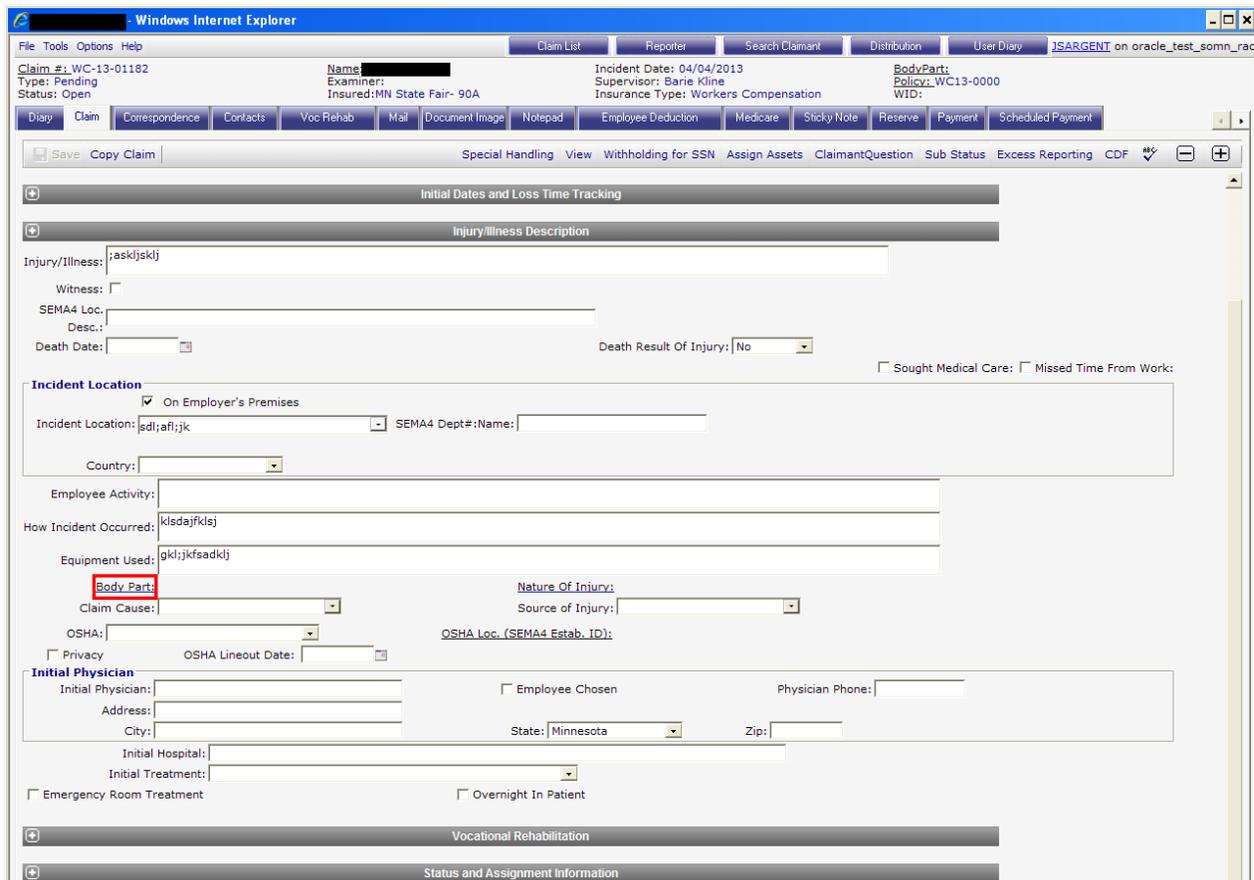
E. Click on the  to expand the Organization Code down the tree. Continue to expand the Organization Code tree to the lowest level, which will be when there are no more  signs.



F. Click on the proper 6 character Organization Code to highlight it and to populate the right side of the screen. Click the OK button in the upper right of the screen. The Organization Code will populate back into the main screen. Hover your mouse over the  to confirm your entry.

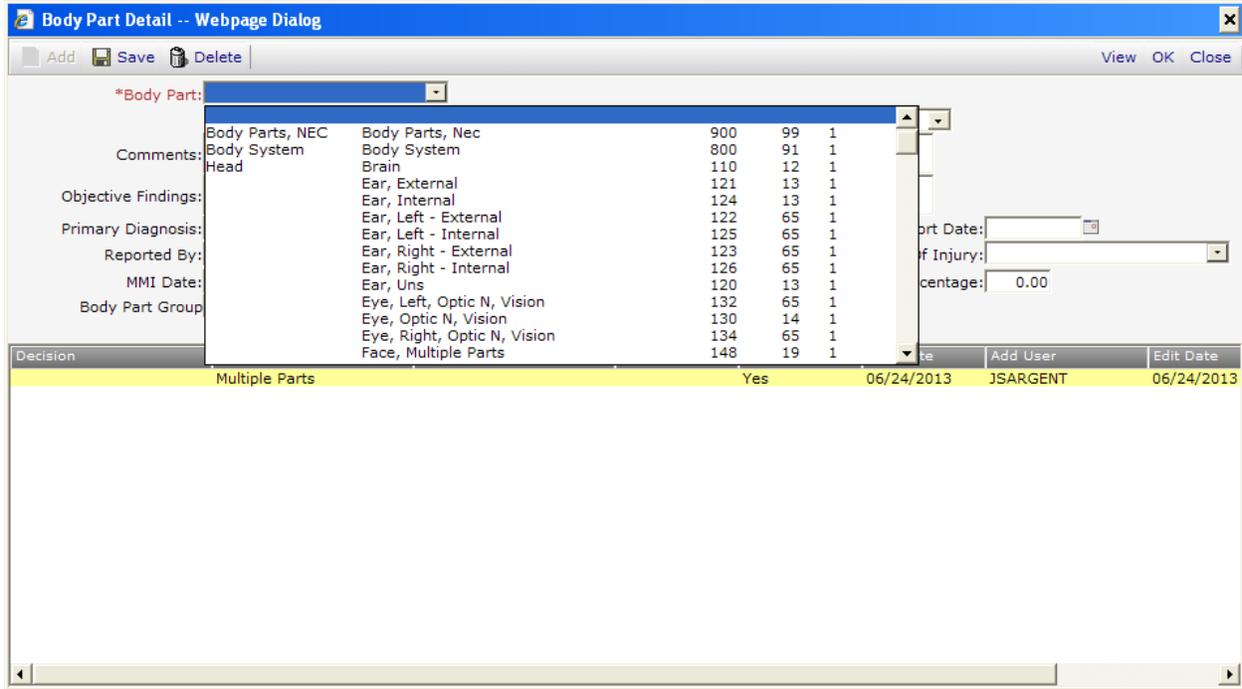


9. Complete the Injury Coding (Body Part, Nature, Cause and Source) in the Injury/Illness Description section.
 - A. Click on Body Part link highlighted in the following picture.

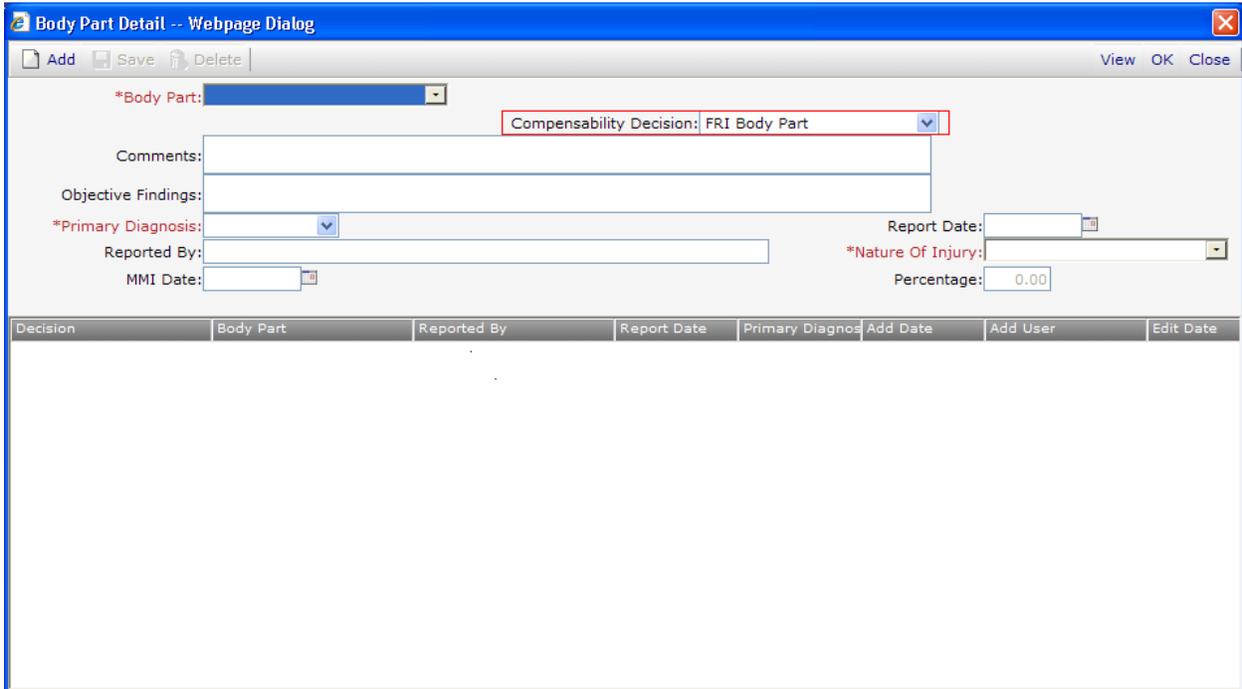


- B. Click on the drop down menu for the Body Part and select the body part by clicking once on one of the body parts in the menu. You can scroll up or down in the drop down menu using your mouse.

Note: to add multiple Body Parts complete steps C thru F.



- C. Click on the drop down menu for the Compensability Decision and select FRI Body Part.



- D. Click on the drop down menu for the Primary Diagnosis. This must be set to Yes by selecting that answer using the drop down menu.

Note: when entering Multiple Parts, you must select this as the Primary Diagnosis before you can add any individual Body Part codes.

The screenshot shows a web application dialog box titled "Body Part Detail -- Webpage Dialog". The dialog has a menu bar with "Add", "Save", and "Delete" options, and a toolbar with "View", "OK", and "Close" buttons. The main form area contains several fields:

- *Body Part: A dropdown menu.
- Compensability Decision: A dropdown menu currently showing "FRI Body Part".
- Comments: A text input field.
- Objective Findings: A text input field.
- *Primary Diagnosis: A dropdown menu with "Yes" selected.
- Reported By: A text input field.
- MMI Date: A dropdown menu with "No" selected.
- Report Date: A date input field.
- *Nature Of Injury: A dropdown menu.
- Percentage: A numeric input field showing "0.00".

 At the bottom of the dialog is a table with the following columns: Decision, Body Part, Reported By, Report Date, Primary Diagnosis, Add Date, Add User, and Edit Date. The table is currently empty.

- E. Click on the drop down menu for the Nature of Injury. Select the most appropriate Nature of Injury code by clicking once on your selection in the menu. You can scroll up or down in the drop down menu using your mouse.

F. To SAVE the data that you have entered (Body Part, Compensability Decision, Primary Diagnosis and Nature of Injury), click on the **SAVE** button at the top of the screen. If you do not click on **SAVE**, the data you have entered will not be saved.

G. If Multiple Parts was entered, you can now add any additional individual Body Parts. Click on the **Add** button.

Note: you only have to complete the Body Part field for each additional Body Part. Click on Save after each Body Part entered.

Decision	Body Part	Reported By	Report Date	Primary Diagnosis	Add Date	Add User	Edit Date
FRI Body Part	Multiple Parts			Yes	06/24/2013	JSARGENT	06/24/2013

H. When you have completed the entry of data on the Body Part screen, click on **OK** and you will return to the Claim tab.

10. Assign the incident cause by clicking on the drop down menu for Claim Cause. You can scroll up or down in the menu using your mouse. Click once on the Claim Cause that you want to select.

The screenshot shows a web browser window with a form for an incident report. The form is titled 'Initial Incident Report' and contains several sections. A red box highlights the 'Source of Injury' dropdown menu, which is open to show a list of injury codes and descriptions. The list includes codes such as 899, 063, 064, 062, 061, 069, 060, 610, 620, 325, 321, 322, and 320, along with their corresponding descriptions like 'ACCIDENT TYPE NEC', 'CAUGHT IN 2 OR MORE MOVING OBJ', 'CAUGHT IN COLLAPSING MATERIALS', etc.

- Assign incident source by clicking on the drop down menu for the Source of Injury. You can scroll up or down in the menu using your mouse. Click once on the Source of Injury that you want to select.

The screenshot shows a web browser window with a form for reporting an incident. The browser title is "Windows Internet Explorer". The form has several tabs at the top: "Diary", "Claim", "Correspondence", "Contacts", "Voc Rehab", "Mail", "Document Image", "Notepad", "Employee Deduction", "Sticky Note", "Reserve", "Payment", "Scheduled Payment", and "Litigation". The "Claim" tab is active. The form contains the following fields and sections:

- Claim Information:** Claim #: WC-13-01182, Type: Pending, Status: Open. Name: [redacted], Examiner: [redacted], Insured: MN State Fair- 90A. Incident Date: 04/04/2013, Supervisor: Barie Kline, Insurance Type: Workers Compensation. Body Part: Multiple Parts, Policy: WC13-0000, WID: [redacted].
- Wage & Compensation Information:** (Collapsed)
- Initial Dates and Loss Time Tracking:** (Collapsed)
- Injury/Illness Description:** Injury/Illness: [askljsklj], SEMA4 Loc. Desc.: [redacted], Death Date: [redacted], Death Result Of Injury: No.
- Incident Location:** On Employer's Premises. Incident Location: [sdj;afj;jk], SEMA4 Dept#:Name: [redacted], Country: [redacted].
- Employee Activity:** [redacted]
- How Incident Occurred:** [klsdajfklj]
- Equipment Used:** [gkl;jkfsadklj]
- Body Part:** Multiple Parts
- Claim Cause:** [redacted]
- OSHA:** [redacted], OSHA Lineout Date: [redacted]. Privacy.
- Initial Physician:** Initial Physician: [redacted], Address: [redacted], City: [redacted]. Employee Chosen.
- Initial Hospital:** Initial Hospital: [redacted], Initial Treatment: [redacted]. Emergency Room Treatment, Overnight In Patient.
- Vocational Rehabilitation:** (Collapsed)
- Status and Assignment Information:** (Collapsed)

A red box highlights the "Source of Injury" dropdown menu, which is open to show a list of injury types and their corresponding OSHA codes:

Source of Injury	OSHA Code
Air Pressure, High	0101
Air Pressure, Low	0120
Air Pressure, Uns	0100
Animal Products	0399
Animal Products, Nec	0300
Animal Products, Not Food, Uns	0301
Bone(s), Leather	0330
Animal, Reptile Or Fish - Dead	0202
Animal/Insect/Bird/Reptile, Ne	0275
Animals, Live	0201
Animals, Insect, Bird, Reptile, Un	0200
Bees Only	0253
Bird(s), Live	0230
Deer Ticks Only	0251

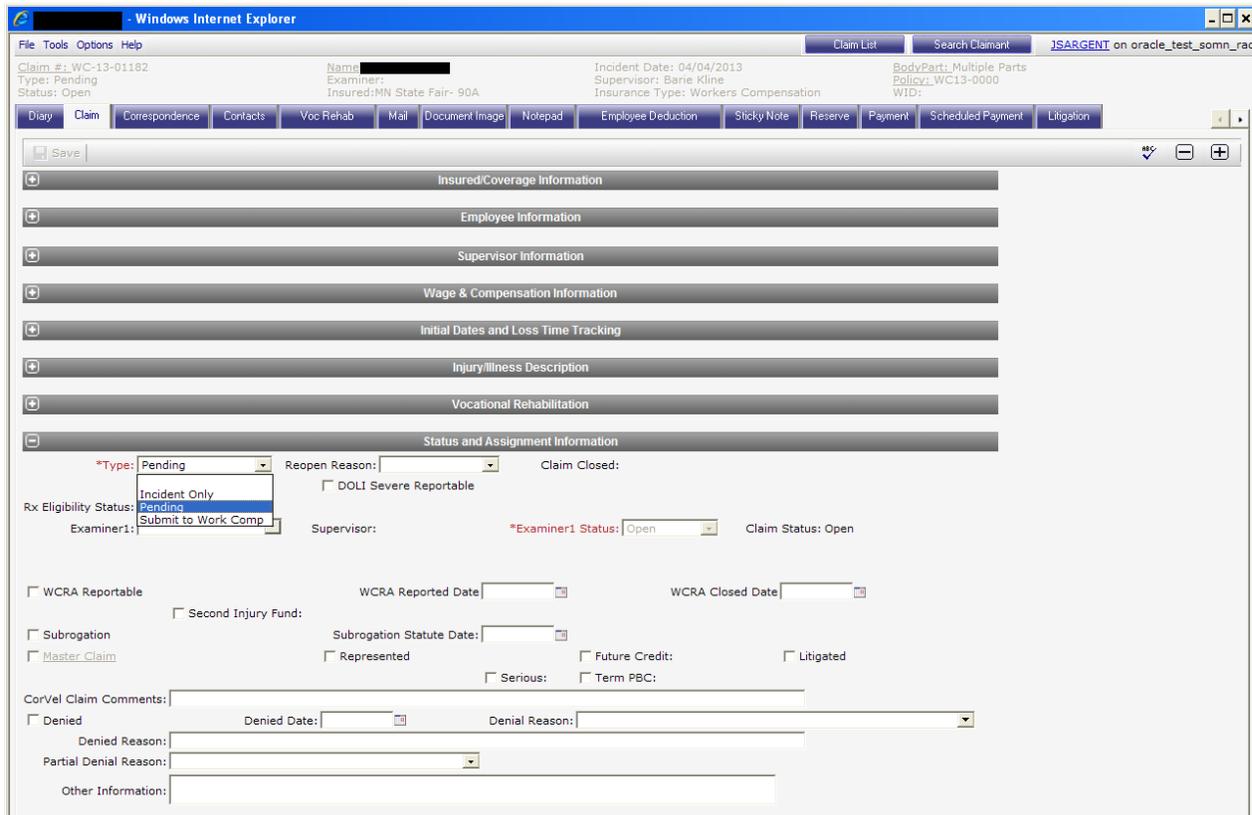
12. Enter any Employee Activity (optional). What the employee was doing at the time of the incident.
13. Initial Treatment (optional). If there is no information showing in the Initial Physician and medical treatment displays, you can enter the information. If known during the initial reporting of the incident in iRISK (Incident Reporting – Internet-based First Report of Injury Step 1), it is likely that it will have been entered then. If not, this is another opportunity to enter the information. It is helpful to the claims specialist if you can complete this information.

14. You must click on the **SAVE** button to save the Claim Cause, Claim Source, Employee Activity and Initial Treatment.

Submitting the Claim

1. If the Status and Assignment section isn't expanded, click on the **+** to expand it.

2. Click on the drop down menu for the Type field and select the appropriate Type.
 - A. Incident Only – this can be selected if there is No Lost Time or medical treatment as a result of the incident.
 - B. Pending – all claims entered thru the Incident Reporting – Internet-based First Report of Injury process are assigned this Type. No claim should sit in Pending for more than 3 calendar days with the exception of holiday weekends.
 - C. Submit to Work Comp – if there is Lost Time or medical treatment caused by the incident then the Type should be changed to Submit to Work Comp.



3. Click on the **Save** button.

Note: once the Type on the claim is saved with the Submit to Work Comp, most of the tabs and fields will become Read Only. Any fields associated with OSHA recordkeeping, Incident Investigation and tracking will remain active for management by the agency.

4. Click on **Exit Claim** in the File drop down on the Tool Bar.
5. Click on **IRISK Log Out** in the File drop down to exit IRISK.