

Campus 101 for Organizations

Campus 101 for Organizations

Course Description

High level overview of Campus for External Organizations

Audience

• Organizations using Campus

Course Length -

3 hours



Prerequisites

None

Agenda

Campus Overview & Benefits	5 min
2 Getting Started with Campus	60 min
3 Group Management	20 min
4 Claim Access	40 min
5 Claim Overview	20 min
6 Electronic Service	20 min
7 Requests for Information	20 min
8 Elections	20 min



Campus Overview

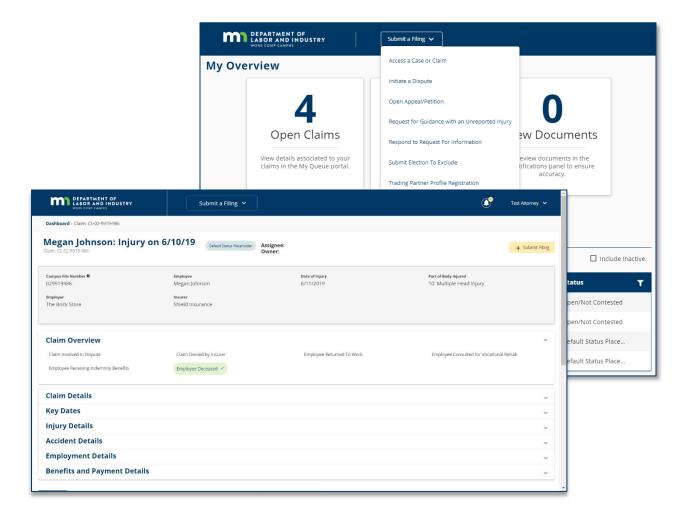
Welcome to the Minnesota Workers' Compensation Campus!

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The Workers' Compensation Campus (Claim Access and Management Platform User System), is your new hub for all workers' compensation claims and filings with the Minnesota Department of Labor & Industry.

Campus allows easy access for all parties to a workers' compensation claim. Quicker access to claim information online will ensure work injuries are reported and compensated in a streamlined process.



Campus will put the workers' compensation claim information you need at your fingertips





Entities vs. Transactions

Entities

Entities are the **parties that exist** in the system to which transactions can be associated

- Injured Worker
- Employer
- Insurer
- Trading Partner

- TPA
- QRC Firm
- Health Care Provider
- State Agency
- Law Firm

Transactions

Transactions are the **"things" that will be worked** on

- Appeal/Petition to
- Vacate
- Claim
- Dispute
- Event
- Reimbursement
- Coverage
 - Investigation
- Election
- Compliance Audit
- Compliance Case

- Penalty
- Rehab Case
- Settlement
- Case Service Funds
- Prepaid Cards
- Receivables
- Medical Policy Violation
- Outgoing Payment
- Payment/Adjustment
- Intervention Case
- Job Placement Case



Details Pages

Details Pages allow internal users to create, view, and edit new entities & transactions and allow external users to view and submit forms to entities & transactions

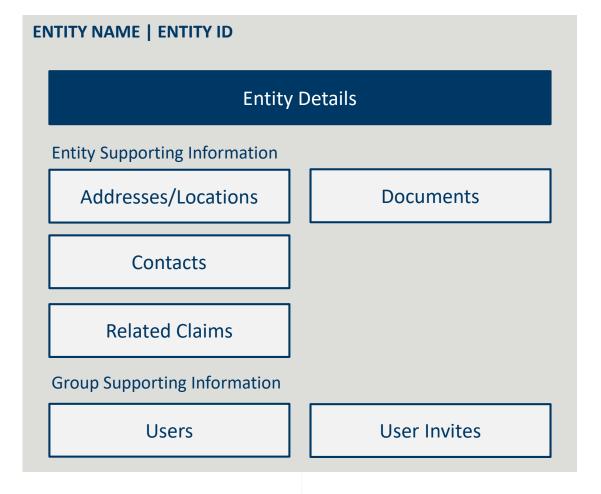
- Each Transaction and Entity has a Details Page
- Some transactions are viewable by external users

Example of a **Details Page**

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Insurer Overview								
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FEIN 93838290430		NCCI 398273		Insur Yes	er Prompt A	Action	SWIFT Sequence Nu 9829209	ımber
Type Insured								
Insurer Status								
Start Date 01/05/2017		Bankrupt No						
Related Transactions	Documents	Contacts	Relationships	Addresses	Notes	Transaction History	Report History	Audit
Employee Employe	er Insurer						+ Add Party	Contact Partie
Name	WC ID	Ph	one Number	Email		Address		Status
David Brown	WC-456-87-9	087 (51	8) 321-4567	dbrown@gma	il.com	123 4th Stree Troy, NY 121		Active



Common Elements of Entity Details Pages



- All entities will receive a systemgenerated unique identifier
 - Format of XX-##-###-### with the prefix dependent on the type of Entity or Transaction
- Entity Names are captured as Legal Name and DBA Name, and name changes are shown in the History Tab
- Related Claims display all the claims where that entity is referenced as a party

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Before we get started...

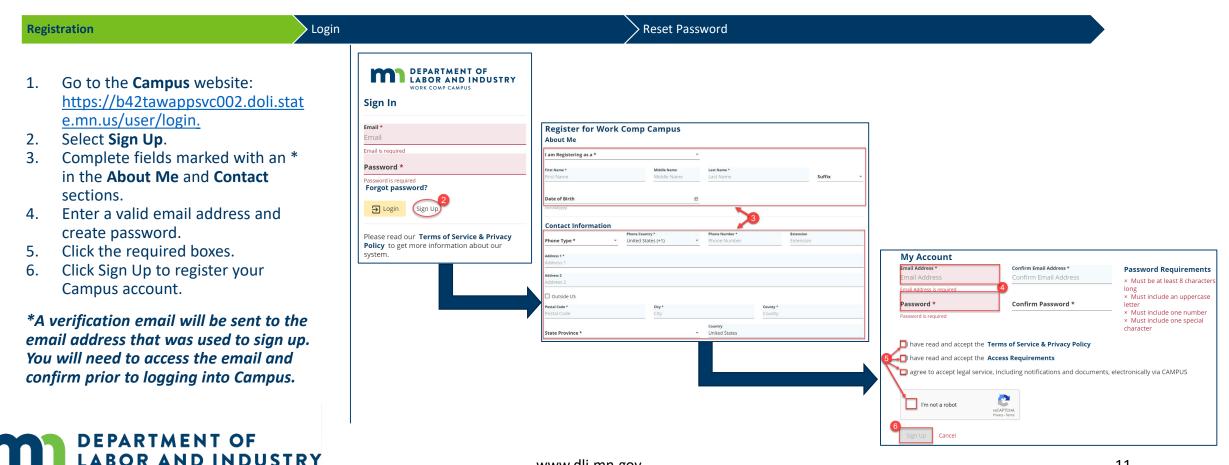
You'll notice that screenshots in this deck are annotated with red numbers and text...

- These are from the User Manuals which are available to you outside of this training.
- After this course, we'll provide these Manuals, which are your step-by-step guides to completing the actions in this presentation



Registering in Campus

As a new user to Campus, you will need to register your account to access the system.



Logging into Campus

If your account is already registered in Campus, follow the steps to log in.

Regi	stration	Login	Reset Pa	assword
1. 2. 3.	Enter the registered email and password. Click Login . Click I Agree .		DEPARTMENT OF LABOR AND INDUSTRY WORK COMP CAMPUS Sign In Email* DLITestExt1+TP90@gmail.com Password* Image: Compass of the second secon	Access Requirements Acknowledgement By using this system, you affirm that: • You are accessing a restricted government information system. • System usage may be monitored, recorded, and subject to audit. • You consent to such monitoring and recording. • Unauthorized use of the system is prohibited and may be subject to criminal and/or civil penalties.



system.

Campus User Profile

You can easily edit required information in Campus via the **Your Profile** page.

Registration	Login	Reset Password
 Click Forgot Password. Enter your email address. Click the reCAPTCHA box. Click Submit to continue. 	DEPARTMENT OF LABOR AND INDUSTRY WORK COMP CAMPUS Sign In Email * DLITestExt1+general15@gmail.com Password * Image: Comp campus Forgot password?	
The email address that you entered will then be sent an email with directions on how to create a new password. Campus passwords expire every 90 days and you will be prompted to reset at login.	E Login Sign Up	DEPARTMENT OF BABOR AND INDUSTRY WORK COMP CAMPUS VORK COMP CAMPUS Please enter the email associated with your account Email DLITestExt1+general15@gmail.com V Im not a robot 3 Very Temal
DEPARTMENT OF LABOR AND INDUSTRY	Y www.dli.mn.g	Submit Cancel

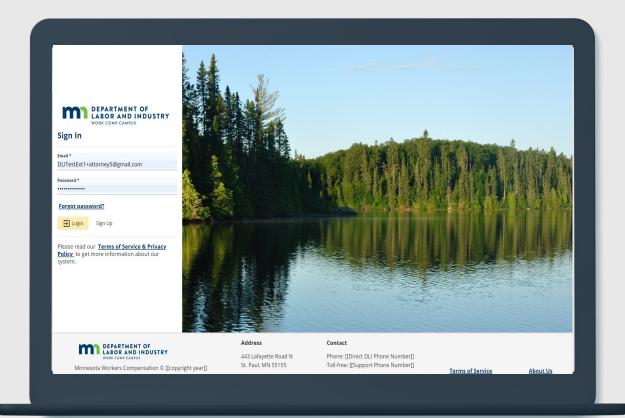
Campus User Profile

You can easily edit required information in Campus via the **Your Profile** page.

User Profile Campu	s Dashboard	Trading Partner Dashboard	
 Click the down arrow on the top navigation. Select Edit Profile. Add or edit About Me and Contact Information as needed. Click Save when finished. 	Submit a Filing V O Upcoming Events New Documents	Philip 1 Image: Contract of the second se	Contact Information Phone Type* Phone Country* Phone Number* Extension Address 1* S55 Fifth st Address 2 Address 2 Address 2 Address 2 Attention Attention Country* Outside US Postal Code* City* S5555 Young America Country* State Province* Country United States
		Save 4 Cancel	



Demo





In this demo, you will see how to...

- Sign up for Campus
- Log in to Campus
- Navigate to and Edit a user profile

Campus Dashboard

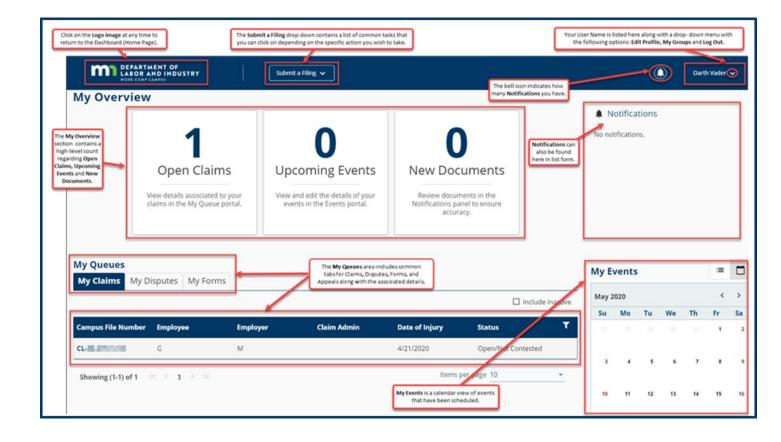
The **Dashboard** is the starting point for users to be able to navigate and perform all necessary job functions.

The Campus Dashboard is where you can see:

- All related claims, upcoming events, and documents
- Queues, which will organize all work to be completed
- Notifications, which provide updates on claims and cases in progress

*When in doubt, navigate to the Dashboard-- what you need next may be there. Click on the MN Logo from anywhere to go to the Dashboard.





Forms Queue

Available at all times on the Dashboard, the Forms Queue will show all forms that you have submitted related to any of the Claims or Cases you have access to. Hardcopy forms are no longer required in relation to a Workers Comp Claim, as you can submit and see the status in Campus.

The Forms Queue is always on the Dashboard, and it will:

- Show all forms submitted to which you have access
- Show relationships between the form filed and the case to which it was filed

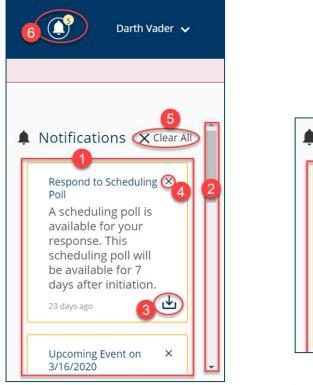
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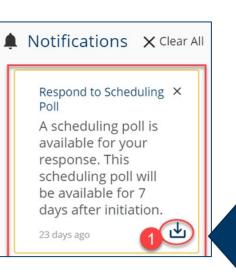
- Show status of any filed form
- Provide access to download copies

My Claims N	ly Disputes	ly Forms My	Appeals		
Form Type	Associated To	Associated ID	Last Updated	Status	Confirmation
	4,06507	IB41280.2%	4/14/2020	Submitted	1699
3 Motion to Interv	Relatives	0141170-108	4/2/2020	Submitted	1557
Claim Access Au	Thereis Dison.	0.411-0007-021	4/2/2020	Submitted	1528
Annual Claim fo	SISB Oaler For.,	AG45-7857-614	4/1/2020	Submitted	1493
Injury Report		Second	3/29/2020	Submitted	1405
Submit Election t	11-01-0107-02-	11-01-0107-007	2/25/2020	Submitted	710
Request For Assis	Metarosput.	11-11-1213-003	2/24/2020	Submitted	618
Request For Assis	Medical Organ.	8545-2525-885	2/21/2020	Submitted	413

Viewing Notifications

Notifications are system generated messages that can either be specific to tasks that need to be completed or simply an informational message.





Notifications are always available on your screen, next to your profile.

You'll get a notification automatically when something happens to a case or claim you're on, like:

- An event is scheduled or upcoming
- A form has been approved
- A scheduling poll has been sent out
- A document is uploaded. In some cases you can download a document right from the notification!



Demo

My Overv	k comp campus												
	1		0)		•	otifica	itions ns.				
	Open Claims	Upcoi	ming Events	New Do	cuments								
	View details associated to you claims in the My Queue porta		dit the details of your n the Events portal.	Notifications	uments in the panel to ensure uracy.								
My Queues	Ĭ						My E	/ents	5				
My Claims	My Disputes My Forms	My Rehab Cases	My Appeals My	SCF Assessment		clude Inactive	July 20)20				<	>
							Su	Мо	Tu	We	Th	Fr	
Campus File Nu	mb Employee	Employer	Claim Admin	Date of Injury	Status	T				1	2	3	
Campus File Nu <u>CL-06-9888-186</u>	mb Employee Peter Parker	Employer Sando's Care Corpor.		Date of Injury 6/18/2020	Status Open	T				1	2	3	Sa
	Peter Parker			6/18/2020		T	28	29	30 7	1	2	3 10	



In this demo, you will see how to...

- Explore the Dashboard
- View Notification Menu
- Submit a Filing

Groups In Campus

View Group Information

- The **My Groups** screen lists the group that you are associated with.
- Each group that you are associated with shows the Permissions, Group Admins, and Date Joined.

Manage Group Information

LABOR AND INDUSTRY		<u> </u>	Darth Vade
Dashboard > My Groups			Edit Profile
Ay Groups			2 My Groups Log Out
Employer 1 Members			
My Permissions	Group Admins	Date Joined	
Group Administrator	Darth Vader (DLITestExt1+general15@gmail.com)	4/14/2020	
Service of Process Designee			
Designated Contact for Information Requests from DLI			
Employer 3 Members	8		1
Employer	3 Group Admins	Date Joined	1
Employer 3 Members		Date Joined 2/19/2020	1
Employer 3 Members My Permissions	Group Admins	-	I
Employer 3 Members My Permissions Group Administrator Service of Process Designee Wilson's Wands 3	Group Admins Darth Vader (DLITestExt1+general15@gmail.com)	-	
Employer 3 Members My Permissions Group Administrator Service of Process Designee	Group Admins Darth Vader (DLITestExt1+general15@gmail.com)	-	
Employer 3 Members: My Permissions Group Administrator Service of Process Designee Wilson's Wands Employer 3	Group Admins Darth Vader (DLITestExt1+general15@gmail.com)	-	:
Employer 3 Members: My Permissions Group Administrator Service of Process Designee Wilson's Wands Employer S Members S Members	Group Admins Darth Vader (DLITestExt1+general15@gmail.com) Iman Attorney (diltestext1+attorney@gmail.com)	2/19/2020	
Employer 3 Members: My Permissions Group Administrator Service of Process Designee Wilson's Wands Employer 3 Members: My Permissions	Group Admins Darth Vader (DLITestExt1+general15@gmail.com) Iman Attorney (diltestext1+attorney@gmail.com) Group Admins	2/19/2020 Date Joined	



Groups In Campus

View Group Information

Manage Group Information

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Dashboard > My Groups

My Groups

A DOMESTIC

- Groups in Campus allow for users • to be associated to claims and cases that they need to access.
- Access to claims and cases will be granted to the Group, and then your membership to that Group will allow you to manage the information as needed.
- If you need to delete a member in • this Group, click the Remove Member icon.

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Employer 7 Members My Permissions Group Administrator Service of Process Designee Designated Contact for Information Requests from DU	Group Admins Darth Vader (DLITestExt1+general15@gmail.com)	Date Joined 2	View Group Manage Group Manage Case/Claim Access Leave Group				
		Group Mana Active Members Name			User Type	Date Joined	+ Add Member
		A Darth Vader Permissions Group Administri Service of Process 		Ext1+general15@gmail Relationships No relationships assigned	General	4/14/2020 3 Items per page 10 Edit Location	Remove Member
	www.dli.mn.gov						21

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Darth Vader 🐱

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Groups In Campus

Groups in Campus allow for users to be associated to claims and cases that they need to access. Access to claims and cases will be granted to the Group, and then your membership to that Group will allow you to view the information as needed.

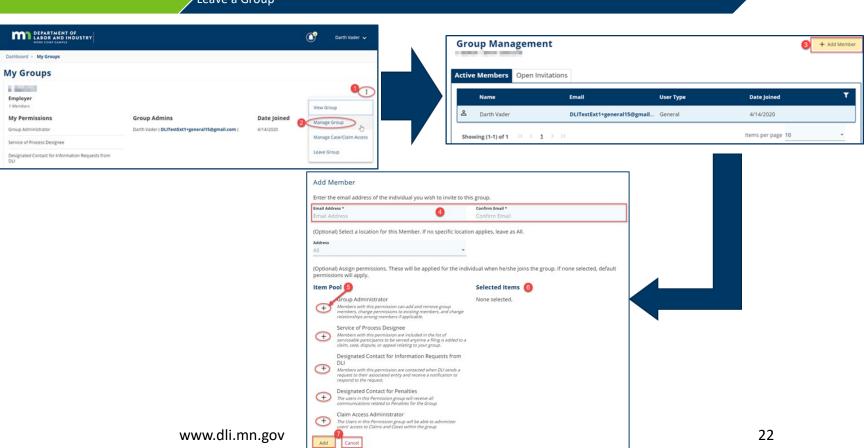
Adding Member(s) to a Group

Leave a Group

- Click the Add Member button to enter a valid Email Address for the new member.
- Permissions are assigned by clicking on the + icons.
- Permissions can be viewed in the **Selected Items** column.
- Click the Add button as needed to save the information.

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Groups In Campus

Adding Member(s) to a Group

 Select Leave Group and click Yes, Leave Group to confirm or Cancel to exit without leaving that group.

	Leave a Group				
nployer Members				-	
ly Permissions	Group Admins	Date Joined	View Group		
roup Administrator	Darth Vader (DLITestExt1+general15@gmail.com)	2/19/2020	Manage Group		
ervice of Process Designee	Iman Attorney (dlitestext1+attorney@gmail.com)		Manage Case/Claim Ad	cess	
-			2 Leave Group	-	
		Employer 3 Members My Permission	Served Colline	192	
		Group Administrator	r [Are you sure you want to leave this Gro	up?
		Service of Process De	esignee	eaving the Group wiggmove your access to the G	Froup's activity in Campus.
				Yes, Leave Group Cancel	
		and the second s			



Agenda

1 Campus Overview & Benefits	5 min
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Group Management |

Group Administration

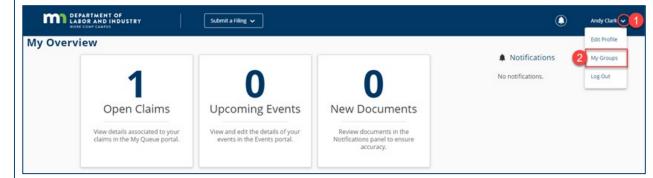
Group Administration

Viewing/ Editing Entity Details

- Group Administration tasks such as adding members, changing permissions, updating addresses, etc. can only be performed as a Group Administrator within Campus.
- To access, at the top right of your User Dashboard, click the dropdown arrow to display the menu.
- The My Groups screen lists the groups that you are associated with.
- Please note that only Group Administrators can manage groups.

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Group Management |

Group Administration

Group Administration

Viewing/ Editing Entity Details

- The **Group Management** page appears displays all Active Members.
- The **Open Invitations** tab will show any pending Members.
- Click the **+Add Member** button to add additional Members.
- Click the Edit icon to change Permissions and Relationships
- The Edit Location icon can be used to update the business address that the Member is associated to.
- Click on the **Remove Member** icon to remove the selected Member from the Group.



DEPARTMENT OF LABOR AND INDUSTRY WORK CONF CAMPUS	Submit a Filing 🗸		Andy Clar	< ~
Dashboard > My Groups > Group Management Group Management Active Members Open Invitations	-3		6 + Add 1	fember
Name	Email	User Type	Date Joined	۲
د Andy Clark	DLITestExt1+QRC90@gmail.com	Qualified Rehab Consultant (QRC)	4/30/2020	
Showing (1-1) of 1 I C 1 > >1 Andy Clark, Qualified Rehab Co Permissions Group Administrator Service of Process Designe Designated Contact for Information Requests from Designated Contact for Penalties Profile Management Designee Claim Access Administrator	7 CEOT Relationships No relationships assigned		Items per page 10	

Group Management

Viewing/ Editing Entity Details

Group Administration

- All Entities (except for Employees • and Employers) can view/edit Entity details.
- To access, at the top right of your User Dashboard, click the dropdown arrow to display the menu.

- The **My Groups** lists the groups • that you are associated with. Click on the hyperlink for the entity that you wish to view/edit.
- The +Add Address button adds additional addresses for the entity.
- A Group Administrator or a Profile Management Designee can only perform these functions.



DEPARTMENT OF LABOR AND INDUSTRY	Submit a Filing 🗸		Andy Clark				
My Overview	Upcoming Events New Documents	Notificat No notification					
		Dashbox	DEPARTMENT OF LABOR AND INDUSTRY with clear Labor rd - Rehab Provider Group: RP-01-6534-537	Submit a filing 🗸	_	۲	Andy Clark 🗸
Deshboard - My Groups My Groups Rehab Provider Group J. Members	Submit a Filing 🗸	Rehal Ratub Pre- serrenzy No	or S Compensation Insurance	Policy Information	eforx. genetion Date	SMMT Customer Number Regionation Status ACD/re	
		Addres	Provider Group Status				+ Add Address
		> pri	dress Type mary Address 1-1) of 1 C < 1 > >:	Address 1 City	-	Effective Range 7/31/2003 - present Items per page 10	

Viewing/ Editing Entity Details



Group Management |

Viewing/ Editing Entity Details

Group Administration

Viewing/ Editing Entity Details

- Information marked with an asterisk (*) is required to continue.
- Click Save to submit the new address request or Close to exit without saving.
- Any edits made to the entity name or address information will be submitted to DLI and require approval prior to saving to the entity.

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Address Type *				80
Address 1 * Address 1				
Address 2 Address 2				
Outside US				
Postal Code * Postal Code	City ★ City		County County	
State Province		Country United States		

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Requesting and Redeeming a Unique Access Code

Requesting and Redeeming a Unique Access Code Claim Access Authorization Webform

> Exporting Documents to Zip File

- To gain Access to a Claim as an Employee (Injured Worker) or a representative of an Employer, you will first need to generate a unique Claim Access Code.
- A code will be sent via Email.
 After receiving the Code, log back on and navigate back to the same webform.
- If successful, you will see a confirmation message and receive a confirmation email. You should now be able to access the Claim on your Dashboard (home page) under the Claims tab.



Who are you?*		
If you are the employee named on a claim, or a representative of an employer named on a claim, the Once you redeem this code, you will have access to all of 4 work comp claims. To request or rede		sota Department of Labor and Industry needs to verify your identity with a custom, one-time-use code. ode, first select the option below that applies to you.
I am the employee named on a claim I am a representative of an er	mploy	er named on a claim
Are you requesting or redeeming an access code?* I have a code I need a code Confirm your social security number or department-provided PIN, date of birth and zip code below. Workers' Compensation Hotline at [Support Phone Number] or email us at [Support Email Address].	The zip	code should be that which your employer has on file for you. If you need assistance, contact the Minnesota
Social Security Number		Department-provided PIN
Ed	lit	123-45-6789
Date of Birth *	6	Preferred Zip Code *
1/1/2000	Ē	12345
(mm/dd/yyyy)		
Confirm		
Attestation		
By checking this box, I confirm that the information on this form is true,	accur	ate, and complete to the best of my knowledge.
Submit Form Cancel		

Request or Redeem an Access Code

Claim Access |

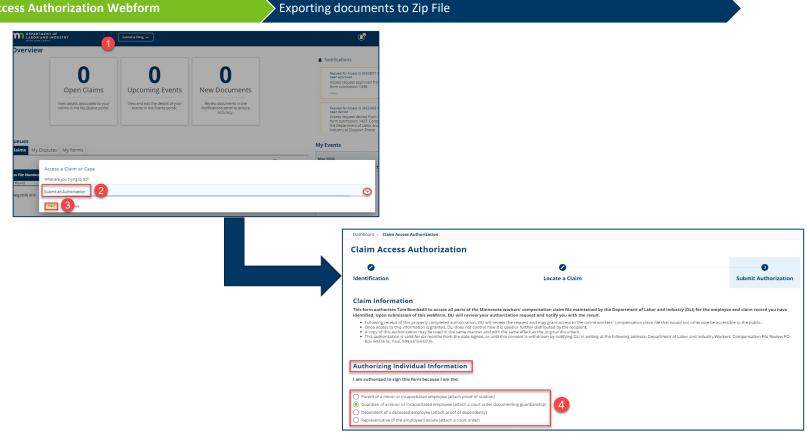
Claim Access Authorization Webform

Requesting and Redeeming a Unique Access Code Claim Access Authorization Webform

- Users who are not parties to the Claim (ex. Spouse of injured worker, QRCs, representative of Employee's Estate, etc.) must submit the Claim Access Authorization webform to DLI.
- DLI will then review the submission and determine whether Claim access will be granted.

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Claim Access |

Claim Access Authorization Webform

Requesting and Redeeming a Unique Access Code Claim Access Authorization Webform

n

Exporting documents to Zip File

- Upon submission you will see a confirmation screen showing a Confirmation Number and the Associated ID. You will also receive a confirmation email.
- A DLI representative will then review your submission, and either accept or reject.
 - If Approved you will receive an email to the account on file informing you of access approval and you will now see the Claim displayed on your My Claims tab.
 - If **Denied** you will receive an email to the account on file informing you of the access denial and providing you with the Campus support hotline information.

*Access will be granted for a 6-month period beginning on the approval date. Once your access expires, you will receive an automated email informing you of your access removal.

**If at any point during a Claim's lifetime your access is removed, you will receive an email indicating your removal.



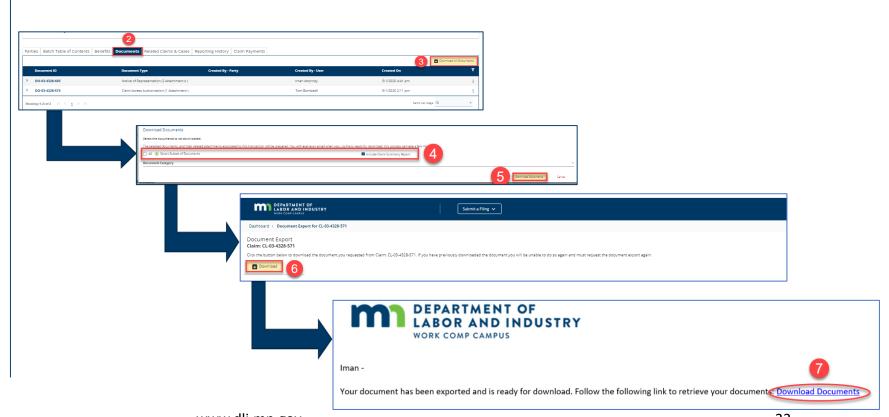
DEPARTMENT OF LABOR AND INDUSTRY WORK COMP CAMPUS	Submit a Filing 🗸	٩	Tom Bomba
	Ø		
	Claim Access Authorization Successfully Submitted!		
	Confirmation Number: 1436		
	Associated ID:CL-03-4328-571		
	A confirmation email has been sent to DLITestExt1+general9@gmail.com for your records. You may view your forms in My Form History .		

Claim Access |

Exporting Documents to a Zip File

Requesting and Redeeming a Unique Access Code Claim Access Authorization Webform

- Documents relating to a Claim or other Case in Campus can be downloaded as a Zip file that will contain all of the files together.
- You will receive an email with a link to download the zip file
- When enacted, the Zip file will begin downloading to your browser.



Exporting Documents to Zip File



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 6 Electronic Service 7 Requests for Information 	20 min 20 min



Claim Overview |

Claim Details Page

The Claim Details page provides additional details about a Claim such as **Key Dates**, **Injury**, **Accident**, **Employment**, **Benefits**, and **Payment**. You can navigate to any of the sections by clicking on the main headers to expand the information.

DEPARTMENT OF LABOR AND INDUSTRY	Submit a Filing 🗸		Darth Vader v
ashboard > Claim: CL-00-2157-418			
en: 0.4052197418	y on 4/21/20 Coerchar Converse Owner:		+ Submit Filing + Submit eFROI eSROI / Web
ampus File Number 🖲	Employee	Date of Injury 4/21/2020	Part of Body Injured 53: Knee
Impinyes	Insurer	Claim Administrator 9	Claim Administrator Claim Number Φ
Claim Overview			
Claim involved in Dispute Employee Receiving indemnity Benefits	Claim Denied by insurer	Employee Returned To Work	Employee Consulted for Vocational Rehab
Claim Details			
ampus File Number 9	Claim Type 😶		
iate of Injury 1/21/2020	Time of Injury 10:25 am		
ngloyee *		Employer *	
	Employer's Insurance Status Not yet implemented		
laim Narrative laim Narrative			
Managed Care Provider vganization Type			
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njury Details		Click on each Title to expand the	
Accident Details		detail for that section	
inprogramment becaus	_		



www.dli.mn.gov

Claim Overview

Parties

Parties

Submitting to a Claim

Uploading Documents to a Claim

- The **Parties** tab shows individuals ٠ and entities related to the claim.
- On the bottom of the **Claim** • Details page, you can find the Parties tab on the far right.
- The only external users with access to the claim are the users listed as Parties to the claim.
- Click on Email All Parties to send • an email to the parties listed or Cancel to exit without sending.

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Parties

Claim Overview |

Submitting to a Claim

Submitting to a Claim

Demo

- There are 2 ways a user can submit a transaction to an existing claim in Campus:
 - 1. Via Electronic Data Interchange (EDI).
 - The other method is by eFORM submission. If the external user has the correct roles they will be able to click the Submit eFROI eSROI / Webform button.
- Depending on the selections, you will be directed to a webform to fill out the remaining information needed to continue.

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DEPARTA	MENT OF AND INDUSTRY	Submit a Filing 🗸		Mr. Electronic I	interchange 🗸
Dashboard > Claim: Cl	L-03-4328-393				1
Payment ET	L: Injury on 4/1/20	Default Status Placenology Owner:		+ Submit Filing + Submit eFRDI	eSRDI / Webform
Campus File Number 9 034328393	_	Employee Payment ETL	Date of Injury 4/1/2020	Part of Body Injuried 35: Hand	
timployer Payment Employer	eFORM Submission				
	What would you like to do? Submit to Existing Claim			<u>A</u>	
Claim Overvie	My Claims CL-03-4328-393 - Payment ETL			2 -	^
Claim Involved in Disc	Next Action CA - Change in Benefit Amount			·	
Employee Receiving In				Next 3 Cancel	
Suspended -					
Claim Details					^
Campus File Number • 034328393		Claim Type M: Medical Only			
Date of Injury		Time of Injury			

Demo

L	DEPARTMENT OF LABOR AND INDUSTRY WORE COMP CAMPUS					Johnnie Coct	hran 🗸
Dasht	board > Insurer/Self-Insurer: IR-02-3836-64	8 Group Case and Claim A	Access Management				
Gro	oup Case and Claim A	ccess Manager	ment				
lou car	n control your insurer/ Self-Insurer Group Mer	nbers' claim and case access fro	om this page. Below are some tips to help you get starte	d:			
• 0 	Control which group members have access to a evel also grants access to any cases that are or	an individual claim by clicking th n that claim. an individual case by clicking the	w. Use the tab navigation to toggle between the list of that appendix to claim row in the table. Then in the claim card that appendix claim row in the table. Then in the case card that appendix of the table. Then in the case card that appendix of the table.	ears under the data table, click			
ORG	SUARD INSURANCE CO						
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laim						<i></i>	ault Erlit
laim		Claim Admin Claim #	Campus File Number	Group Role	Status	* 8	Bulk Edit
	15 Cases	Claim Admin Claim #	Campus File Number CL-05-9191-330	Group Role	Status Default Status		
	Claim Name	Claim Admin Claim #					
laim	Cases Claim Name Luke Danes: Injury on 06/15/2020		CL-05-9191-330	Insurer	Default Status	Placeholder	
show	Cases Claim Name Luke Danes: Injury on 06/15/2020 Peter Parker: Injury on 06/18/2020	MAWC051478002	CL-05-9191-330	Insurer	Default Status Open	Placeholder	

DEPARTMENT OF LABOR AND INDUSTRY In this demo, you will see how to...

- Perform a Bulk Edit to a Claim
- Remove member access to a Claim
- Upload a document to a Claim

Agenda

Campus Overview & Benefits	5 min
2 Getting Started with Campus	60 min
Group Management	20 min
4 Claim Access	40 min
5 Claim Overview	20 min
6 Electronic Service	20 min
7 Requests for Information	20 min
8 Elections	20 min



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Electronic Service

Filing a Form with an Affidavit of Service

LABOR AND INDUSTRY

Filing a Form with an Affidavit of Service Serving Documents **Receiving Service Emails** DEPARTMENT OF Submit a Filing 🗸 Spencer Wilson 💊 **My Overview** Submit a Filing The external user submitting a Motion to Intervene • Notifications X Clear All Please indicate the type of filing you wish to make. on a Dispute must require legal service. 1 Π Respond to Scheduling Poll × A scheduling poll is available for your response. This scheduling poll will be available for 7 Filling Name After selecting the applicable **Dispute ID** hyperlink, **Open Claims** Motion to Intervene Upcoming Events New Documents • days after initiation. you will be taken to the Dispute Details page. View and edit the details of you Review documents in the Notifications panel to ensure accuracy. claims in the My Queue porta Save Back Respond to Scheduling Poll Select Motion to Intervene from the drop-down A scheduling poll is available for your menu and Save. This will take you to the webform, My Queues 0 -My Events where you will go through the steps of filing the My Claims My Disputes My Form June 2020 < > motion. Dispute ID Date of Injury Status Employee Su Mo We Th Fr Sa DEPARTMENT OF Spencer Wilson DS-03-5028-391 2 Medica Pending Review Shawn Snencer FF 1 2 3 4 5 6 In filling out the Intervention details, anything with \$-03-5028-395 Shawn Spencer: EE... 05/04/2020 Pending Review an asterisk (*) is required. Motion to Intervene 0 0 0 Add any Supporting Attachments by clicking the ٠ The applicant is filing this Motion to Intervene in the following disputes: DS-03-5028-39 Locate a Dispute Serve Partie Medical Reque 5/28/2020 +Upload Document button to continue. Which organization do you repres Organization 5 Q Looku End Date My org 6 stion is not listed Cancel Save as Draf The appli First Name Spencer Last Name Wilson Email * (703) 481-994 minhikes Supporting Attachmen + Upload Document File Name File Type Description Remove DEPARTMENT OF Cancel Save as Draft

Serving Documents

Serving documents allows you to serve the intervention to select parties on the dispute.

Filing a Form with an Affidavit of Service	ving Documents		Receiving Service	Emails	
 In the Serve Parties step, all parties on the dispute will be displayed. The user can click the checkbox in the Serve Party column to select who gets served. Each party will set their own preferred Service Method, which is how the motion will be served. You can also manually add service recipients by clicking on the +Add Service Recipient button. 	Locate a Dispute Affidavit of Service Parties Select the parties to serve below. You ma Add Service Recipient Serve Party Name Of Shawn Spencer Shawn Spencer Upon clicking Submit, Campus will: Create and merge an Affidavit of S Send an email to all parties who re To serve parties by mail you must print a Declaration I declare under penalty of perjury tha Electronic Signature	Role Address Employee 123 Main Lone Tree envice with your filed document ceive service via Campus converte via Campus copy of the filed document and your t everything that I have stated in this they appear on your CAMPUS profile they appear	r Details s served via mail. Click the Add Service Recipie Service Method Street t, CO 80124 US Mail Affidavit of Service. document is true and correct. Minn. Stat. § 35 By signing and dating this form, I certify copie	Intervention Details ent button to add parties to the service list. Service Date Choose a date * <u>6/2/2020</u>	Edit Address



Serving Documents

DEPARTMENT OF LABOR AND INDUSTRY

Serving documents allows you to serve the intervention to select parties on the dispute.

Filing a Form with an Affidavit of Service	Serving Documents	Receiving Service En	mails				
 In filling out the information, anything with an asterisk (*) is required. All boxes must be checked to declare and confirm, and your Electronic Signature must be entered exactly as it is in your Campus profile. Once the filing is submitted, you can find a record of it by going to the My Forms queue on the dashboard and clicking on the hyperlink under Form Type. 	to the Case or Claim. Name • Role • Address 1 • Address 1 • Address 2 Outside US Postal Code • City • State Province Save ③ Cancel	recipient must be served via mail. Adding a recipient during this step will not add them as a party recipient must be served via mail. Adding a recipient during this step will not add them as a party County County County United States Adding a recipient during this form, I certify copies of this form and attachments are bein repartment's Vocational Rehabilitation unit (VRU). This electronic form and I confirm that the information on this form is true, accurate, and complete to ument		Orms Associated ID None None None	Last Updated 6/2/2020 5/28/2020 5/28/2020 5/28/2020	Status Submitted Submitted Submitted	Confirmation Nu 2048 2024 2023 2022

Receiving Service Emails

Filing a Form with an Affidavit of Service

Serving Documents

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Receiving Service Emails

- When you are served a document ٠ electronically, you will receive an email indicating that there is a document available for you to view.
- This email will only contain basic information about the document and associated transaction.
- Once you click the hyperlink to log ٠ in and enter your log in credentials, you will be taken to the **Document Details** page in Campus.



		3 of 15		1	~
1	Work Comp Campus: A new document is available 🔉 🔤			•	Ø
	Minnesota Department of Labor and Industry <wcmpsystem@mn.gov> Mon, to me *</wcmpsystem@mn.gov>	Jun 1, 10:49 AM (1 day ago)	☆	*	÷
1					
9	Hello -				
٦	There is new information waiting for you from the Minnesota Department of Labor and Industry (DLI). We keep your information private and p	rotected.			
1	The Request for Mediation relates to the following Dispute details.				
C	Dispute : DS-03-5028-426				
E	Employee WID: EE-*****7510				
Ę	Employee initials: SS 1				
1	To see this information log in to your account. If you need further assistance, contact the Workers' Compensation Hotline at [support phone] of	or [support email].			
١	You are receiving this email message because you have an account with DLI and have elected to receive communications by email.				
1	Thank you,				
1	Minnesota Department of Labor and Industry				
4	Minnesota Department of Labor and Industry 443 Lafayette Road N., St. Paul, MN 55155 Web: www.dli.mn.gov				
1	logo				
	Twitter Logo DSubscriber Logo				
	This email notification is an auto-generated message. Do not reply to the sender. This email may contain confidential or privileged information	n. If you are not the intended r			

Setting up Service of Process Designees

External users will also be served documents.

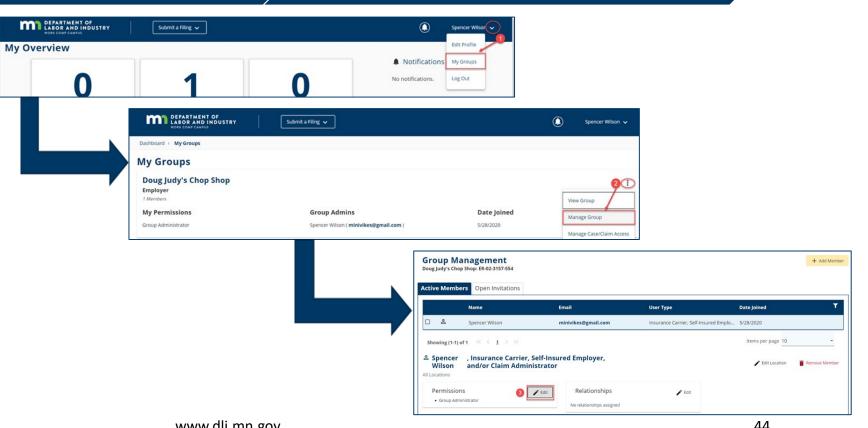
Setting up Service of Process Designees

Document Details Page

Demo

- Each external entity will have an ٠ assigned group admin, and the group admin can assign another user, or themselves, as the Service of Process Designee.
- From the Dashboard, click on your • username on the top right and select My Groups from the dropdown menu.
- To assign a Service of Process ٠ Designee, click the kebab icon and choose Manage Group.
- On this page, it will show all Active ٠ Members and their roles. To assign a role to a user, click the Edit option in the **Permissions** box under their name.





Setting up Service of Process Designees

Setting up Service of Process Designees Document Details Page Demo Manage permissions for Spencer Wilson, Insurance Carrier, Self-Insured Employer, and/or Claim Administrator & Once this is done, if a document Adjust the information below to add or remove permissions for the selected user, and click save to make any changes. Item Pool Selected Items needs to be served on the Service of Process Designee Group Administrator) (+) Members with this permission are included in the list of serviceable participants Members with this permission can add and remove group members, change entity, the user assigned to this to be served anytime a filing is added to a claim, case, dispute, or appeal relating permissions to existing members, and change relationships among members if to your group. Designated Contact for Information Requests from DLI role will receive that document. + Members with this permission are contacted when DU sends a request to their associated entity and receive a notification to respond to the request. Designated Contact for Penalties + The users in this Permission group will receive all communications related to Penalties for the Group Claim Access Administrator The Users in this Permission group will be able to administer users' access to Claims and Cases within the group +Save Cancel Manage permissions for Spencer Wilson, Insurance Carrier, Self-Insured Employer, and/or Claim Administrator 🐣 Adjust the information below to add or remove permissions for the selected user, and click save to make any changes. Selected Items 6 Item Pool Designated Contact for Information Requests from DLI Group Administrator + Members with this permission can add and remove group members, change permissions to existing members, and change relationships among members if Members with this permission are contacted when DLI sends a request to their associated entity and receive a notification to respond to the request. applicable. Designated Contact for Penalties Service of Process Designee + The users in this Permission group will receive all communications related to Penalties for the Group Members with this permission are included in the list of serviceable participant **Î** to be served anytime a filing is added to a claim, case, dispute, or appeal re Claim Access Administrator to your group. + The Users in this Permission group will be able to administer users' access to Claims and Cases within the group 6 Save Cancel





Document Details Page

Document Details Page

 The Document Details page shows additional information about the document along with related links to associated transactions that can be viewed.

- To access the page from the Dashboard, click on the My Forms queue and click on the hyperlink under Form Type.
- The Related Links section is useful and shows any additional transactions associated to the document and can be viewed by clicking on the hyperlink.



\rightarrow	Demo

My Overview

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

My Queues

/ly Dispu🌖 My F	orms				
Associated To	Associated ID	Last Updated	Status	Confirmation Nu	T
ent	None	6/2/2020	Submitted	2048	
rmi	None	5/28/2020	Submitted	2024	
	None	5/28/2020	Submitted	2023	
	7	Associated To Associated ID en: None rm: None	Associated To Associated ID Last Updated ent None 6/2/2020 rmi None 5/28/2020	Associated To Associated ID Last Updated Status ent None 6/2/2020 Submitted rma None 5/28/2020 Submitted	Associated To Associated ID Last Updated Status Confirmation Nu enr None 6/2/2020 Submitted 2048 rmi None 5/28/2020 Submitted 2024

Dashboard > Document: DO-03-5593-769 2 Document: DO-03-5593-769 **Document Details** nent details or the Case/O MN Department of Labor and Ind Vilorians' Compensation Division (851) 284-8032 or 1-800-342-5354 se contact the Department of Labor and lustry at (Support Phone Number) or (S cument Type lotion to Intervene lebform Action To Intervent eated Ry Spencer Wilson 6/2/2020 pdated By Spencer Wilson fated Dat 5/2/2020 Email address minukes@phail.com Telephone onfidentia **Related Links** DS-03-5028-391

Demo

m	LABOR AND INDUSTRY				()	Johnnie Cochran 🗸
Destinant	Initiate Dispute						
	Dispute						
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Galact the part + Acto Se	enica Recipient						
Galact the just	enica Recipient	nice addresses for parties served so real. Click the Add Serves Reck Role Employee	part furtor to add parties to the service liet. Address 21162 Revisit Am Levels Nr 55044005	Service Hethod	Service Date Character & Adde * 7/20/3030		Scit Address
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+ Add Si Sana Party	Name Reser Pustear Anne Other Ander Pustear Sondris Care Consortation	Role Employee Other Representative Employee Insured	Address 215as revisio Aur Latendes Mir 30044838 Unitestiti gen-48 genetation 507est5ct*general/168grad.com	Service Hethod US Mail None US Mail	Decer a date * 7/20/2020		



In this demo, you will see how to...

• Filing a Form with an Affidavit of Service

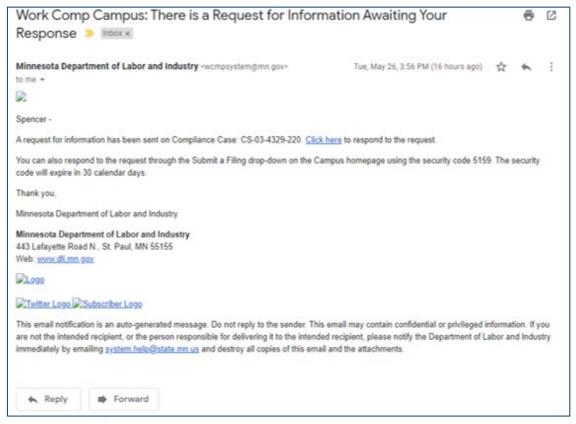
Agenda

1 Campus Overview & Benefits	5 min
2 Getting Started with Campus	60 min
3 Group Management	20 min
4 Claim Access	40 min
5 Claim Overview	20 min
6 Electronic Service	20 min
7 Requests for Information	20 min
8 Elections	20 min



Request for Info Email & Webform

When an internal user sends a Request for Information to an external user, they will receive an email with instructions on how to respond, as well as the number of days they are expected to respond within.

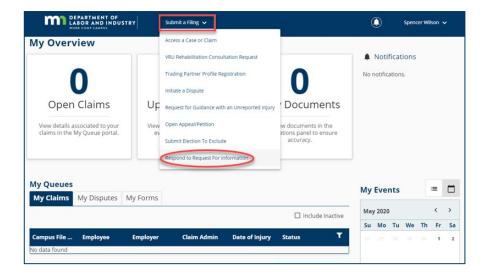




Request for Info Email & Webform

Navigation to the response is possible in two ways:

- 1. Do not navigate from the email link and use the PIN, which was sent in the email.
- 2. Navigate via the Submit a Filing dropdown in the dashboard. (Screenshot below)

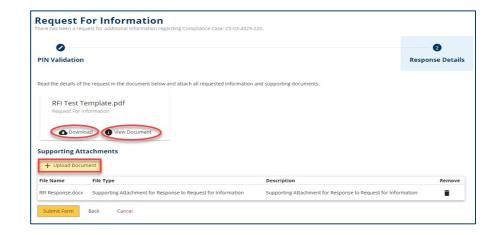


This will prompt to enter a PIN, which will link responses to the correct request for information. Clicking the link in the email, will not require to entering a PIN. The log-in page will display, and from there, directly to the webform submission. If already logged into Campus, the webform will display.

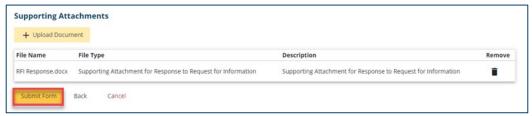


Request for Info Email & Webform

On the next page, there are two buttons: **Download** and **View Document**. The **Download** button will allow the download of the actual request for information, while the **View Document** button will be able to view it in the browser.



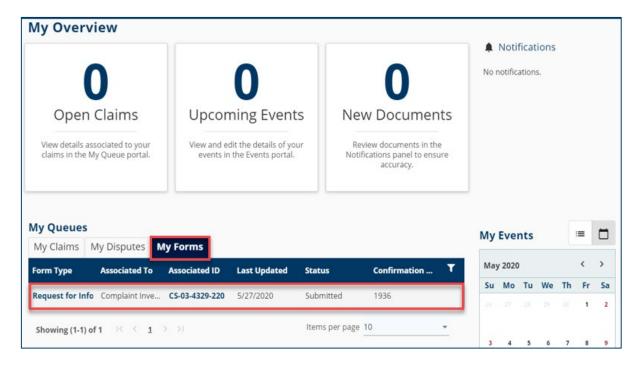
The response cannot be submitted without a document uploaded. Once a document or multiple documents have been uploaded, they click **Submit** to complete the response.





Request for Info Email & Webform

Once a response has been submitted, the process has been completed. The user who submitted the response can view it on the **My Forms Queue** on their dashboard.





Agenda

1 Campus Overview & Benefits	5 min
2 Getting Started with Campus	60 min
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8 Elections	20 min



Elections |

Elections Webform

Request for Info Email & Webform

Elections Webform

Submit a Filing

DEPARTMENT OF

My Overview

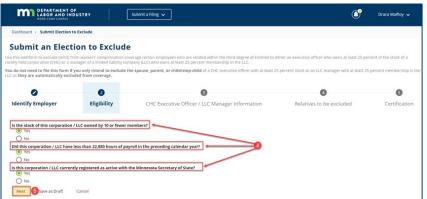
- The Election to Exclude Coverage Webform in Campus is used to enter the required information for exclusion and submit for approval.
- To access, click on the Submit a Filing drop-down and select Submit Election To Exclude.
- The dropdown shows all Employers to which the user is associated. You must select an Employer that is an incorporated entity or an LLC.
- Answer a series of questions to identify if the Employer is able to exclude coverage for certain Employees. "Yes" must be answered for all questions or the ineligibility message will appear.





Dunder Mifflin 🗸

Notifications





Elections |

Elections Webform

Request for Info Email & Webform

- Use the +Add button to add Executive Officers and Managers.
- Enter information for the required fields (Name, Title, Percent Owned).
- You can add one or multiple employees to a single election to exclude coverage form.

Submit an Elect	ion to Exclud	e								
e this webform to exclude (omit) f sely held corporation (CHC) or a n	rom workers' compensation c nanager of a limited liability co	werage certain employees who are related wi mpany (LLC) who owns at least 25 percent me	thin the third degree of kindred to embership in the LLC.	either an executive officer who owns at least 25 per	nt of the stock of a					
u do not need to file this form it as they are automatically excl	you only intend to exclude uded from coverage.	the spouse, parent, or child/step-child of a	CHC executive officer with at least 2	25 percent stock or an LLC manager with at least 25	ercent membership in the					
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Identify Employer	Eligibility	CHC Executive Officer / LLC	Manager Information	Relatives to be excluded	Certification					
List the names of all CHC Executive Of	ficers who own at least 25 percent	f stock in the corporation / all LLC Managers who own	n at least 25 percent membership interes	it in the LLC.						
+ Add 6										
			-							
ubmit an Electio	on to Exclude		-							
e this webform to exclude (omit) from	workers' compensation coverag	contain employees who are related within the thin	 degree of kindred to either an execut title LLC. 	tive officer who owns at least 25 percent of the stock of a	7					
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Elections |

Elections Webform

Request for Info Email & Webform

- Add the Electronic Signature to the form by entering your Full Name, clicking the checkbox to confirm, and enter your Executive Title and Phone Number.
- Add Supporting Attachments.
- Click Submit for final approval.
 *Submit button will highlight after required information is provided.



Elections Webform

DEPARTMENT OF LABOR AND INDUSTR	Y Subm	it a Filing 🗸	٩	Dunder Mifflin 🗸
Dashboard > Submit Election to Exclu	de			
npany (LLC) who owns at least 25 percent	kers' compensation coverage certain employ membership in the LLC.		er who owns at least 25 percent of the stock of a closely held corporation (CHC) or a LC manager with at least 25 percent membership in the LLC as they are automatic	
ldentify Employer	Eligibility	CHC Executive Officer / LLC Manager Information	Relatives to be excluded	5 Certification
Electronic Signature	hey appear on your CAMPUS profile. By signi	knowledge and that have the authority to sign this form for the corporation / LLC named in S ing and dating this form, I certify copies of this form and attachments are being se	tep 1. Int to the employee, insurer, any attorney(s), the Department of Labor and Industry a	and, if required, to the
I understand charby checking this boo Executive Title * Executive Title Phone Number * Phone Number	çıramlegaliysigning tiris electronic form and	Secondimentioner the information on the second s	best of my knowledge.	
	n 4 been notified that this form to ex	cclude them from workers'compensation coverage is being filed? *		•
		If you change insurance companies, submit a copy of this form to the new insura sation insurer if any information in Sections 2, 3, or 4 changes and you still want t		
 form. DLI does not guarantee that this ele for correctly and accurately comple changes, the CHC / LLC or CHC exec 	ction to exclude the relatives listed in Sectio ting this form. DLI will notify you of potential	n 4 from workers' compensation coverage is legally effective. The CHC Executive 0 I defects if they are apparent, but you are encouraged to consult an attorney abou le for workers' compensation injuries of the relatives listed in Section 4.	atutory requirements. If so, then the effective date of this exclusion will be based on Officer / LLC manager signing this form is responsible for determining the CHC's / LLC the legal effect of this election. If the information provided is not accurate and com	s legal obligations and
+ Upload Document	,			
le Name	File Type	Description	Remove	
Submit 12 Save as Draft Previ	ew Cancel			

Congratulations in completing Campus 101 for Organizations!

