



INTEGRATED CLAIMS MANAGEMENT SYSTEM (ICMS)

How To File Attachments That Are Non-Form Documents?



State Board of Workers' Compensation
270 Peachtree Street, N.W.
Atlanta, GA 30303-1299
<http://sbwc.georgia.gov>

404-656-3818

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Creating A New Claim

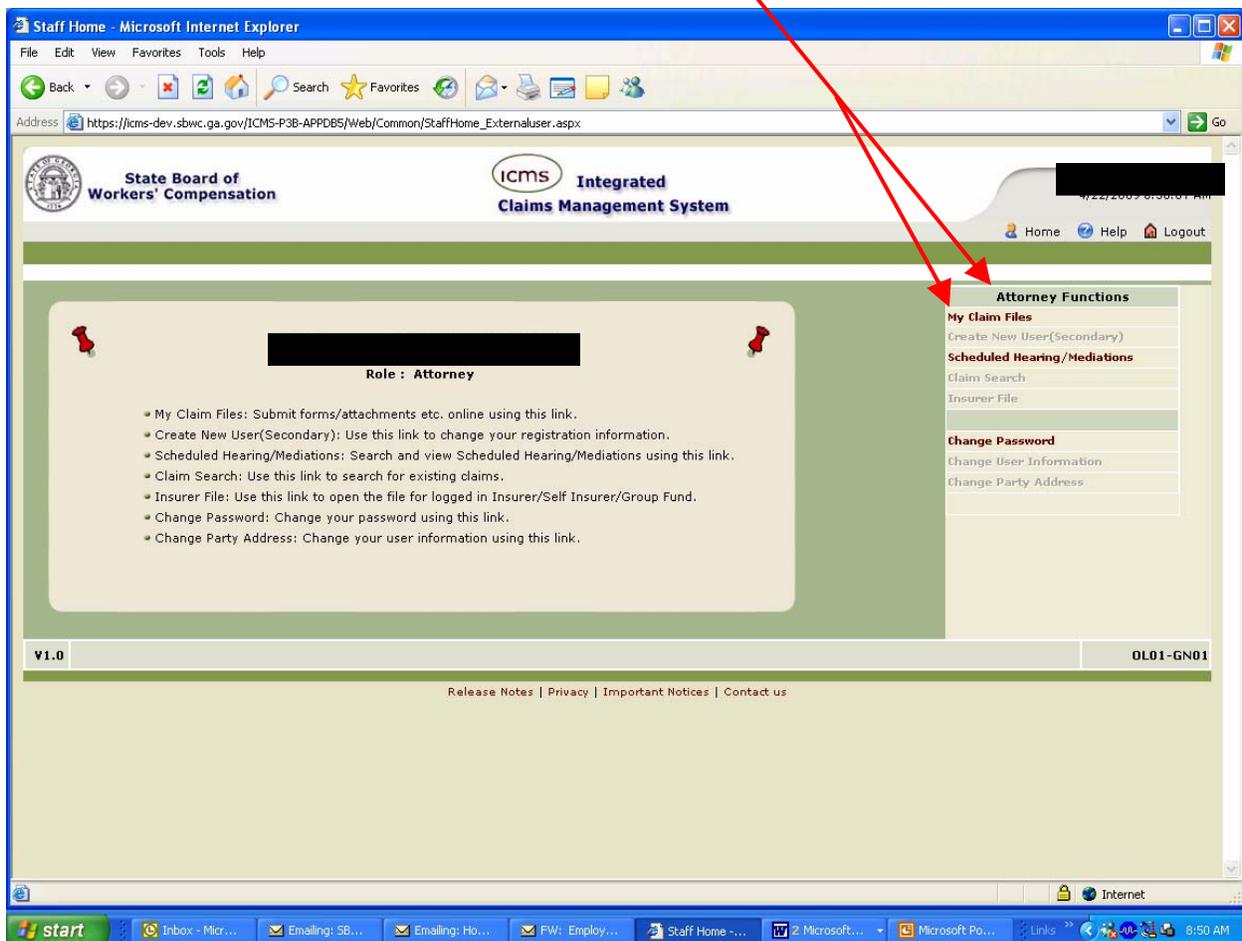
A claim is created by filing a WC-1 or a WC14. The following information is needed to file a claim online:

- First and Last Name
- Social Security Number
- Date of Injury
- Employer
- Insurer/Claims Office or SBWC ID Number

If there is no SSN call our Call Center at 404-656-3818 or 1-800-533-0682 to verify whether or not there are any existing claims for claimant. If there are no priors and a SSN is needed, mail in the paper form. The Board will process the claim. Once a SSN and claim number have been assigned you will be able to file online. Also, if coverage is unknown call our Call Center and verify whether or not there is coverage. The steps are as follows:

1. Under **Attorney Functions** select **My Claim Files** on the home page.

Step 1



CREATING A NEW CLAIM

2. Click the tab **Submit New Claim**.
3. Select appropriate form to file a new claim WC-1 or WC-14.

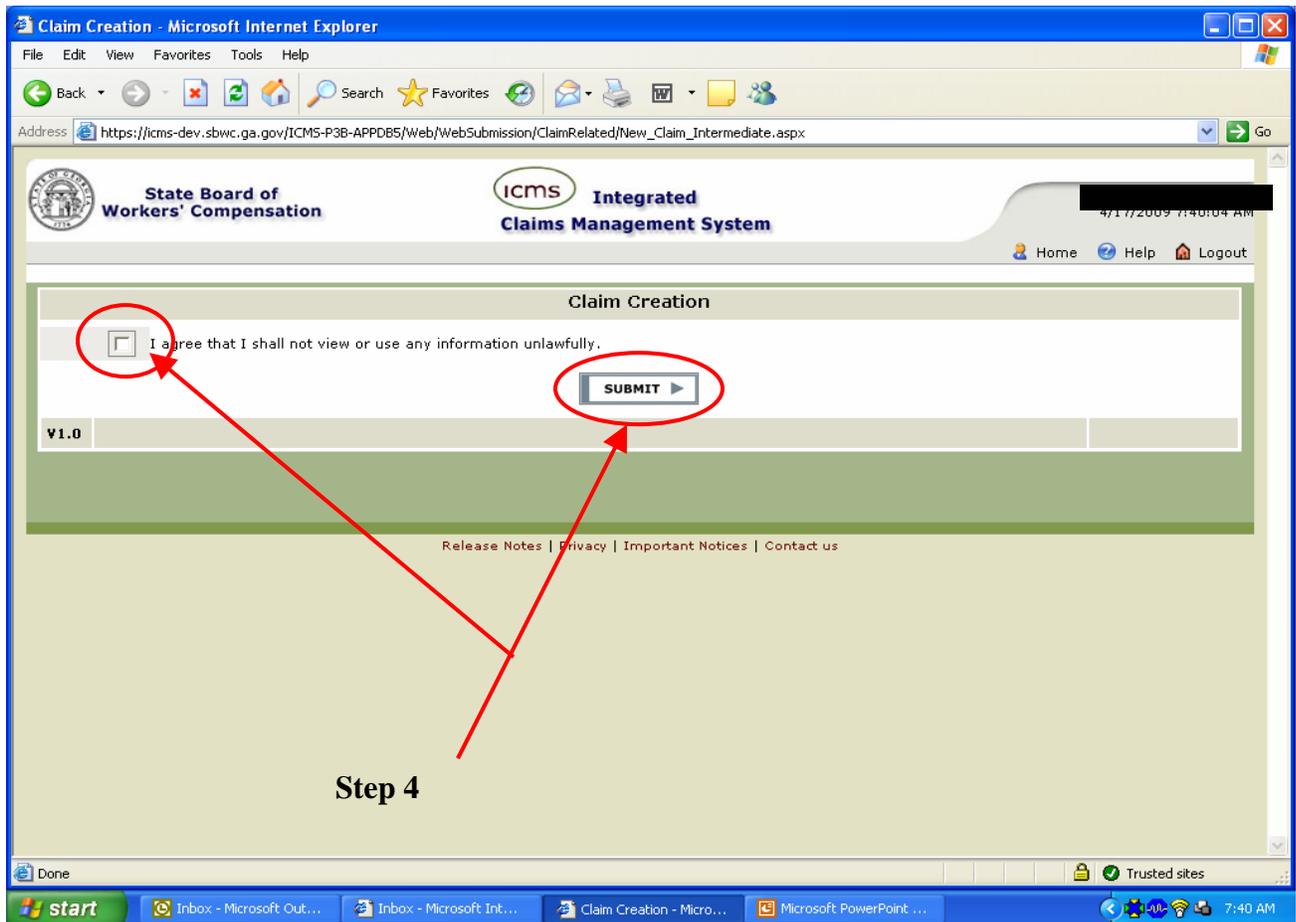
The screenshot shows the 'New Claim' page in the ICMS Integrated Claims Management System. The page has a header with the State Board of Workers' Compensation logo and the system name. Below the header, there are several tabs: 'Existing Filed Claims', 'Submit New Claim', 'Submit Non Claim Documents', 'Attorney Documents', and 'Pending Forms'. The 'Submit New Claim' tab is highlighted with a red circle and labeled 'Step 2'. Below the tabs, there is a table with the following data:

#	Form #	Title
1	WC-1	Employer's First Report of Injury
2	WC-14	Notice of Claim/Request for Hearing/Request for Mediation

The 'Form #' column of the table is highlighted with a red circle and labeled 'Step 3'. Below the table, there is a version number 'V1.0'. At the bottom of the page, there are links for 'Release Notes', 'Privacy', 'Important Notices', and 'Contact us'. The Windows taskbar at the bottom shows the Start button and several open applications: 'Inbox - Microsoft Out...', 'Inbox - Microsoft Int...', 'New Claim - Microsoft...', and 'Microsoft PowerPoint...'. The system clock shows 7:38 AM.

CREATING A NEW CLAIM

4. Agree to the terms by clicking the box and select **Submit**.



CREATING A NEW CLAIM

5. Fill in all mandatory fields.
6. Select **Search**.
7. If the claimant has any prior claims they will appear under **Matching Claim-Result**. If a date of injury appears click **File In Existing Claim** if it doesn't appear click **Create a New Claim**.

Claim Creation - Microsoft Internet Explorer

Address: https://icms-dev.sbwcc.ga.gov/ICMS-P3B-APPDB5/Web/WebSubmission/ClaimRelated/New_Claim_Intermediate.aspx

State Board of Workers' Compensation
ICMS Integrated Claims Management System

Home Help Logout

Claim Creation

I agree that I shall not view or use any information unlawfully.

Step 6

*First Name : Chance
*Last Name : chihuahua
*SSN : 888 -15 -2212
*Date of Injury : 01/05/2009 (mm/dd/yyyy)

SEARCH CLEAR BACK

Matching Claim - Result

1 To 1 of 1

#	ClaimNumber	Claimant	SSN	County Of Injury	Date Of Injury	Claim Status	Primary Employer
1	2008-000048	CHIHUAHUA, CHANCE C	[REDACTED]	COBB	09/28/2007	Open	BALSA WOOD AIRCRAFT

FILE IN EXISTING CLAIM CREATE NEW CLAIM RESET BACK

V1.0

Release Notes | Privacy | Important Notices | Contact us

Done

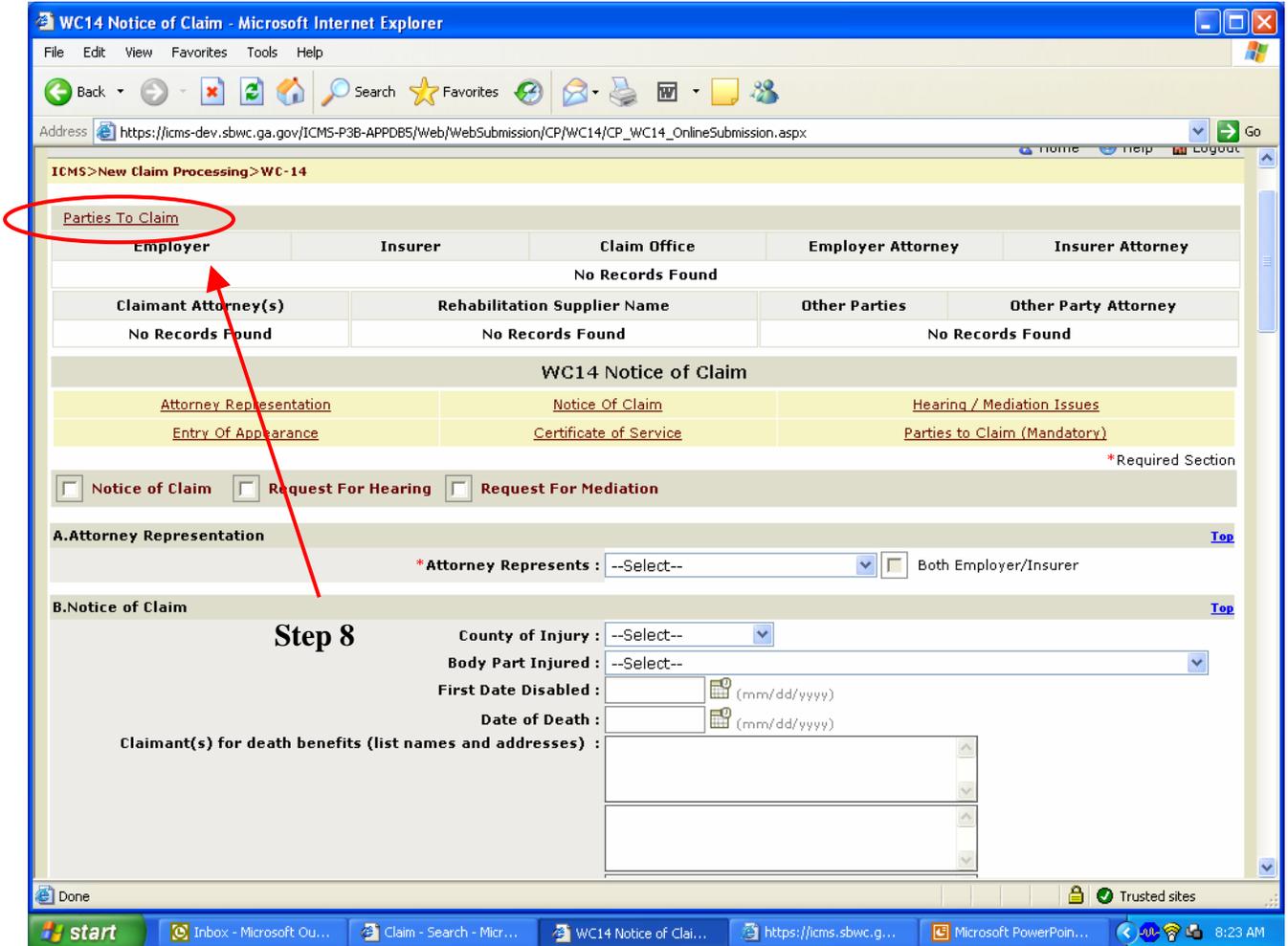
start | Inboxes | Claim Creation - Micro... | Microsoft PowerPoint ... | 7:41 AM

Existing
Claim Appears
Here

Step 7

Click here for
existing claim.

8. Enter parties to the claim first by clicking on [Parties to the Claim](#) link.



Entering Parties to Claim

- Click [Edit](#) to enter the claimant's address, phone number, etc.
- Click [Employer Search/New](#) link and search for the employer and select appropriate employer. Then click **Select and Continue**. If the employer is not located click [New](#) link. If [New](#) link is selected this will allow you to enter the employer's name, address and phone number. Then click **Submit and Back**. Please do not use [New](#) unless you have exhausted all possibilities to search for the employer.
- Click [Insurer/Self Insurer Search](#) or [Group Self-Insurer Search](#) link whichever one applies to list insurer. Once link has been selected, the option to enter SBWC ID number will be provided. Enter SBWC ID number if known and click **Search** button. Either option selected will route to another screen to select a claims office. Select Claims Office link and then select the appropriate claims office.
- Click [Attorney Search](#) link and locate the attorney. Then select and associate attorney with the appropriate party that he/she is representing. Then click **Select and Continue**. This should take you back to the **Parties to Claim** screen.
- Then click **Back** and the form screen should reappear.

The screenshot shows the 'Parties To Claim' screen in the ICMS Integrated Claims Management System. The browser window title is 'Parties To Claim - Microsoft Internet Explorer'. The address bar shows the URL: https://icms-dev.sbcw.ga.gov/ICMS-P3B-APPDB5/Web/CP/Common/CP_PartiesToClaim.aspx. The page header includes the State Board of Workers' Compensation logo and the ICMS Integrated Claims Management System logo. The main content area displays a table with the following data:

#	Party	Party Type	Primary Employer	Parent Party	Form Type	Edit	Delete	Actions
1	CHIHUAHUA, CHANCE	Claimant			WC-14	Edit		Employer Search /New Insurer/Self Insurer Search Attorney Search Group Self-Insurer Search

Below the table are buttons for **SAVE**, **DELETE**, and **BACK**. The version number 'V1.0' and the identifier 'CP27-S01' are also visible. The footer contains links for Release Notes, Privacy, Important Notices, and Contact us.

9. Select **Notice of Claim**, **Request for Hearing** or **Request for Mediation**.
10. Enter all required fields, issues (if there is a hearing or a mediation request) and county of injury. This will determine where the claim will be assigned.
11. After completing the form select **Submit** and a message will generate with the claimant's claim number.

