Task Flow: Process Comp Due Request

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Content

- Current Flow (48 *required* clicks)
- Proposed Flow (18 *required* clicks)

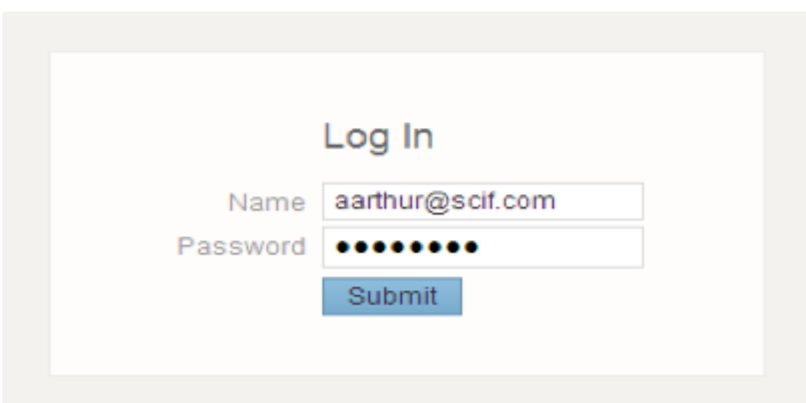
Current Flow

- Log in
    - (1 – 3) Enter name and password, and click **Submit**
- Navigate to **Comp Due** request
    - **Claim Navigator** panel is displayed
    - (4) Double-click on personal **Claim Navigator** link
    - Claim categories are displayed
    - (5) Double-click on **Worklists**
    - Worklist categories are displayed
    - (6) Double-click on **System Defined Worklists**
    - Worklists are displayed
    - (7) Double-click on **Comp Due**
    - List of claims with **Comp Due** requests is displayed
    - (8) Double-click on one claim
    - **Comp Due** queue displays to the right
    - Optionally, Click **Search** to see all **Comp Due** requests in the queue
- View message to see what benefit is due (**Permanent Disability** or **Temporary Disability**)
- (9) Double-click on first request
- **Manage Claim** screen appears to the left
- (10) Select **Benefits** tab ? would like it to auto-select Benefits tab
- Optionally, evaluate medical documents (to determine work status)
    - Click on **Documents** button
    - **Content Viewer** appears to the right
    - Select **Medical Reports** from the **Folder** dropdown and click **Search**
    - Document list is filtered to display only **Medical Reports**
    - Select desired report and click **View**
    - Report is displayed over the **Content Viewer** panel
    - When finished, click **Close**
    - Repeat as necessary
- (11) Verify that **Comp Due** payment is required
    - Compare paid (**Summary** tab) to should pay (**Estimate/Balance** tab)
    - Calculate difference (manual) ? is this necessary? …or can it be based on % paid
- Enter required payment log (tracking what's due)
    - (12) Click on **Balance** button (in **Estimate/Balance** tab)
    - **Balance Worksheet** is displayed to the right
    - (13) Click on appropriate tab (**PD** or **TD**)
    - Enter appropriate data
        - (14 - 16) Enter **PD Advance** or **Lump Sum**
            - **PD Advance**: From Date, Through Date, and Rate
            - **PD Lump Sum**: Date, Description, and Amount
        - (17) Click somewhere else on screen
        - System calculates and displays Weeks, Days and Amount
        - Optionally, select **Death Benefit** option (Determines recipient? Does this work?)
- Add payment log
    - (18) Click on **Payments** tab
    - (19 – 21) Enter payment information: Payee name, Type, Amount
    - Optionally, indicate if a guardian is present
    - Optionally, make a note (just general notation? Where does this show up?)

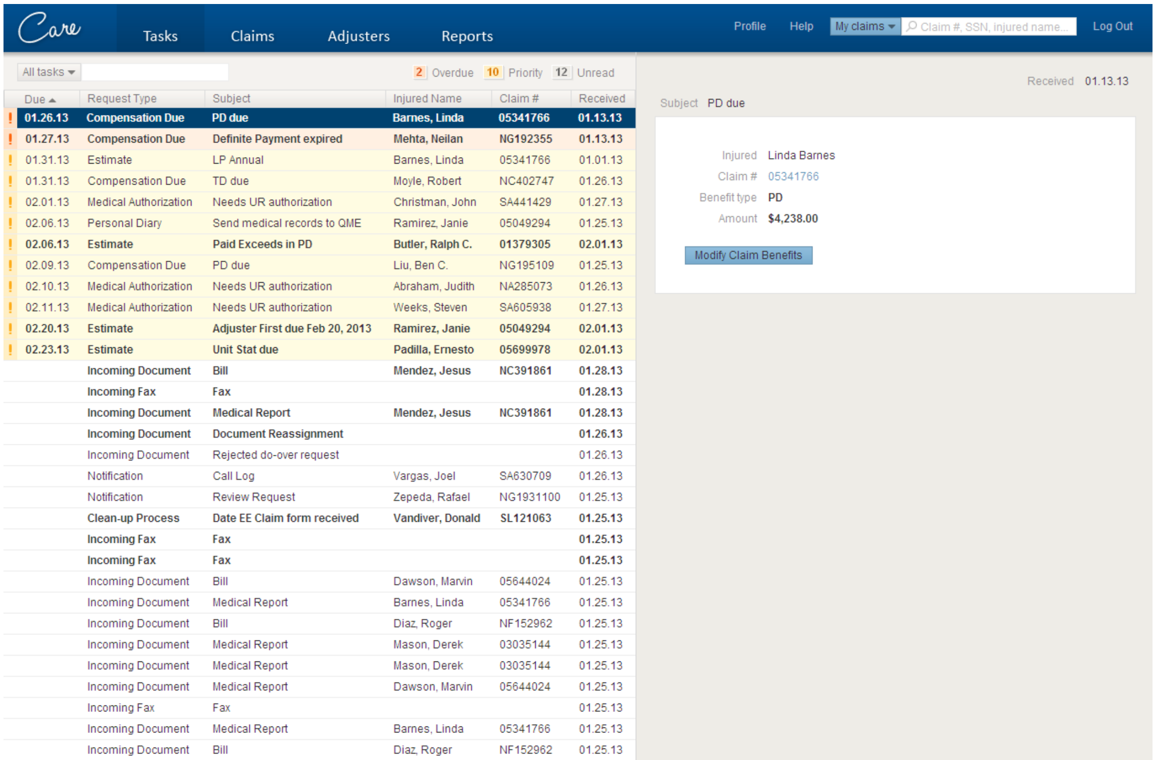
    - Optionally, enter notation to be printed on check (does this work?)
- (22) Click on **Summary** tab and check if 0 balance is achieved (**Grand Total Difference** field on **Summary** screen)
- (23) Click **Save** (or **Post**)
- (24) Open **WISP** system to process payment
    - (25 – 27) Log in: Enter name and password and click **Enter**
    - (28) Select **(PF7) Online Comp / Defpay** to process a payment
    - (29 - 32) Enter authority code, claim #, last name of injured and click **Enter**
    - (33) Select payment recipient (i.e. **1. Injured on File**)
    - Optionally, select a finalization option: **C&R** or **F&A/Stip** (these selections change required data on payment screen)
    - (34 – 35) Select payment type (i.e. **Temp Disability**) and click **Enter** (?)
    - (36 – 38) Enter dates and rate (system calculates weeks, days and total payment)
    - Optionally, enter penalty if due
    - (39 – 40) Enter authorization code and click **Enter** – check is processed ? system should define task as done, if over authorization it should send a request to manager automatically
    - Summary page is displayed (who's getting paid when)
    - (41) Close WISP
- (42) Close **Balance Worksheet**
- If check is over adjuster's authority level, forward claim for review
    - (43) Click **Review Req** button (in **Manage Claim** header panel)
    - **Review Request** popup appears
    - (44 – 46) Enter recipient, desired text (i.e. "I posted a check. Please release it.") and click **Forward** button
    - Optionally, uncheck **Save Comments as Claim Notes**
    - Optionally, **Cancel**
    - Optionally, **Quit** (Dave uses this one)
    - Dialog closes
- (47 – 48) Go back to **Comp Due** request, click **Done** (checkbox next to line item) and click **Trash** (removes from queue)
- Optionally, send letter (If starting or stopping a benefit for any reason, must send a letter)

Proposed Flow

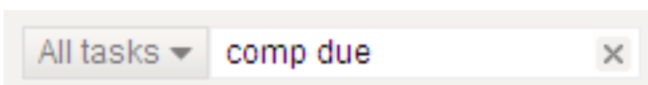
- Log in
    - (1 – 3) Enter name and password, and click **Submit**



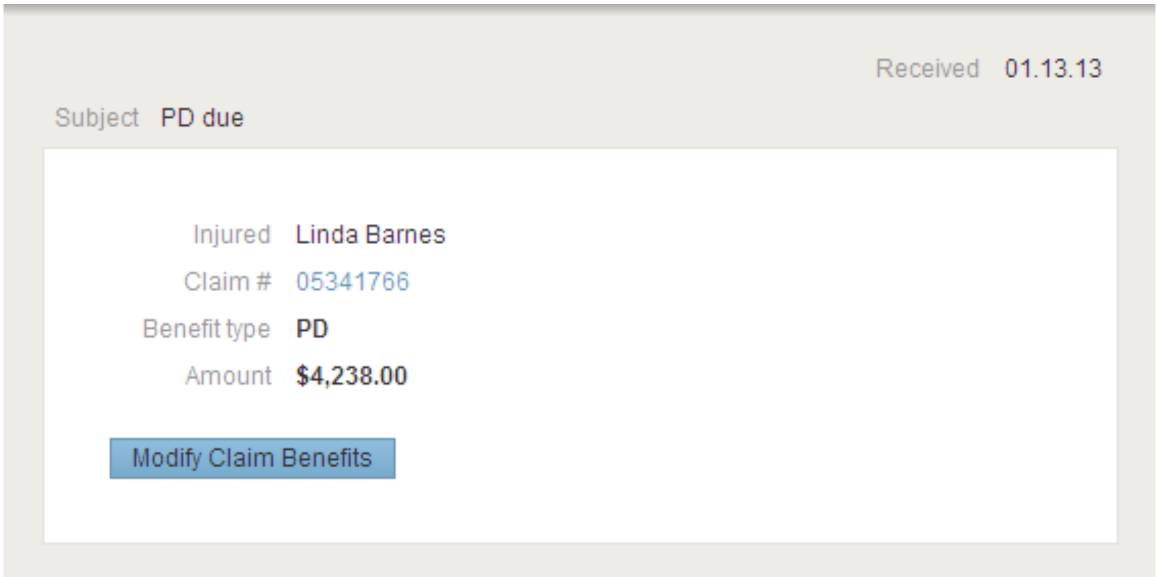
- Personal task queue is displayed (**Tasks** tab)



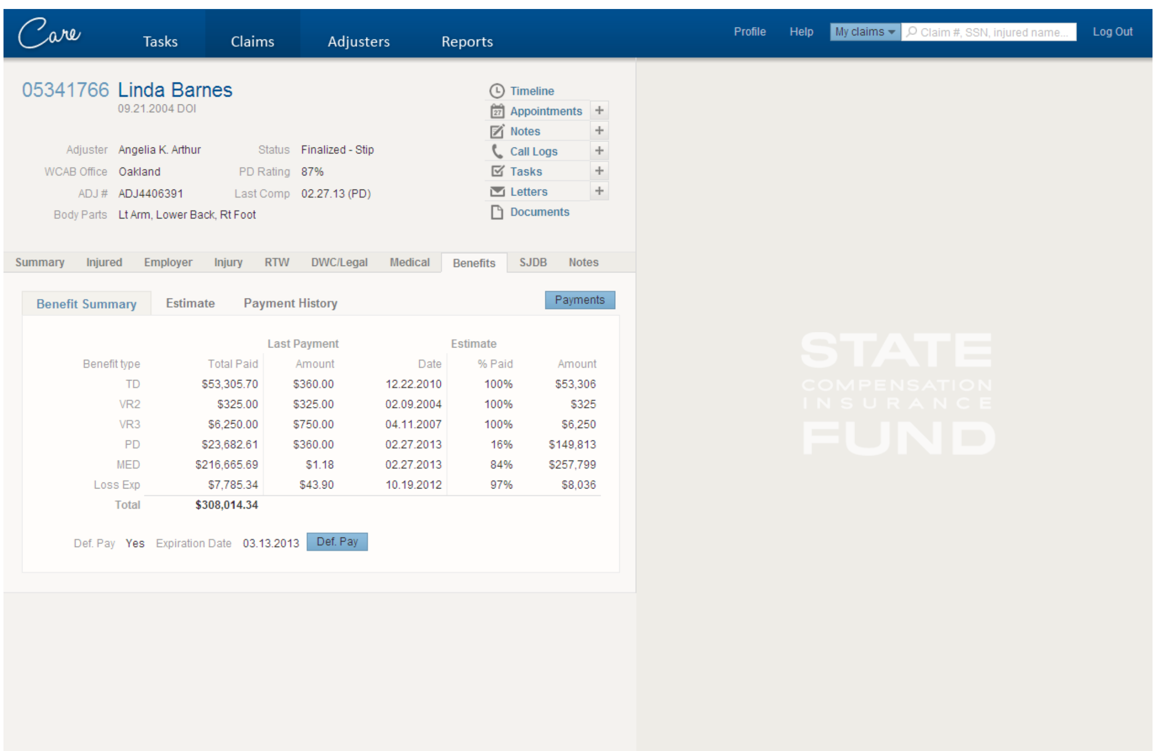
- Optionally, filter the task queue to see all **Comp Due** requests
  - Select **Comp Due** option from filter dropdown
  - Task queue is filtered to display only **Comp Due** requests
  - Optionally, type **comp due** into filter field and hit **Enter** (keyboard)
  - Task queue displays all requests that fit entered criteria and an **x** icon appears in the right-hand side of the text field



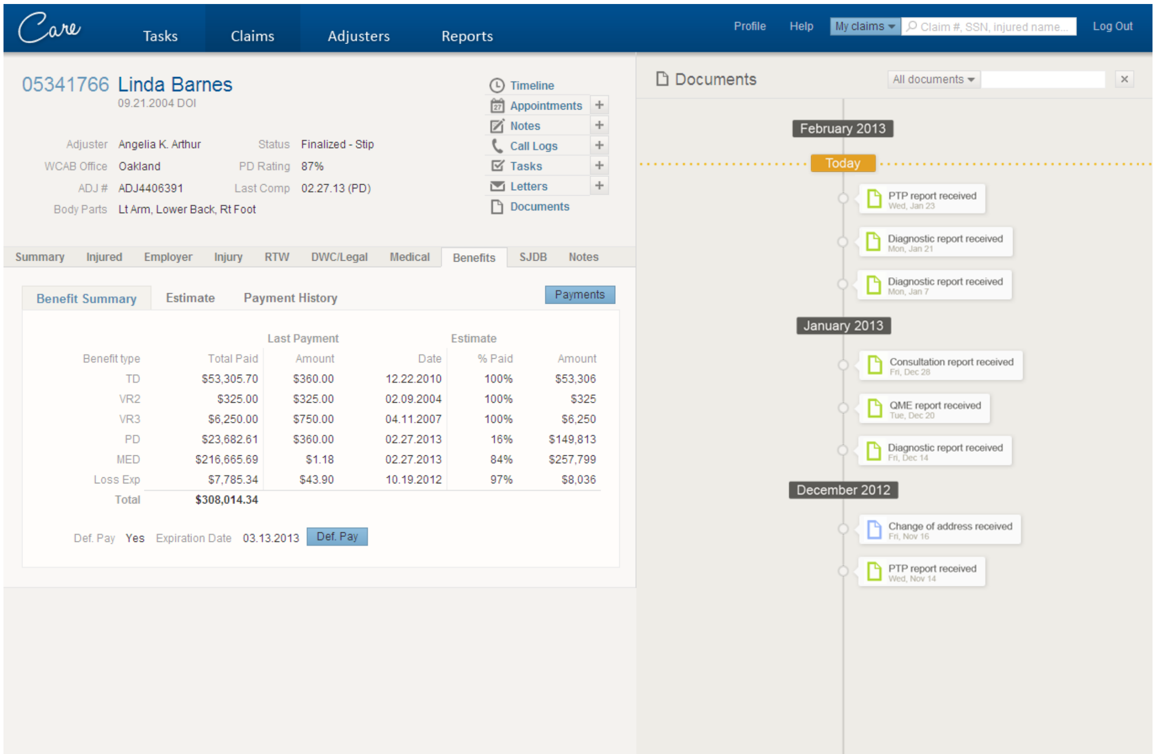
  - Optionally, click on the clear option (**x** icon) to remove the free text filter
- (4) Select **Comp Due** request
- **Comp Due** request message is displayed in the right-hand panel



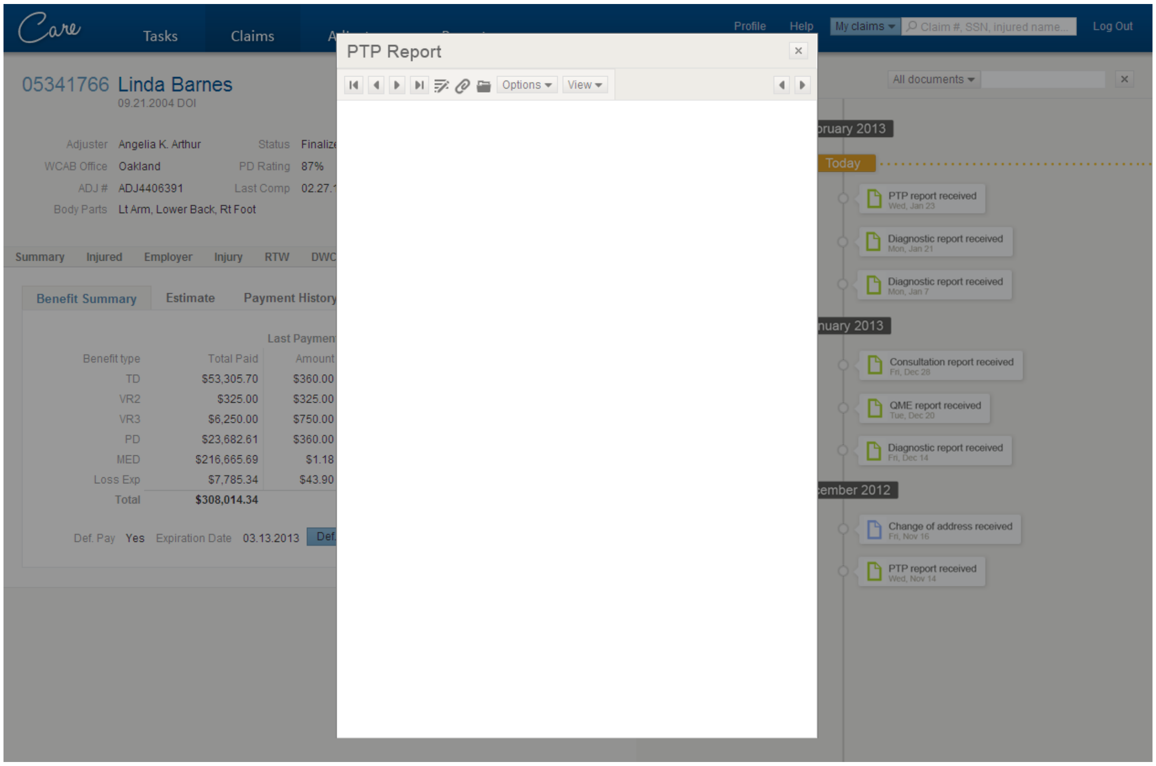
- View message to see what benefit is due (**PD** or **TD**… Viewing this content is not necessary for this particular use-case, but other messages will have information that is not visible in the task queue line item)
- (5) Click the **Modify Claim Benefits** button to begin processing the request
- Screen refreshes to display the appropriate claim (in **Claims** tab), displaying the **Benefits Summary** screen (in **Benefits** sub-section)



- Optionally, evaluate medical documents (to determine work status – more applicable with a TD workflow than a PD workflow)
  - Click on **Documents** button (in claim header)
  - Claim **Documents** appear on the right

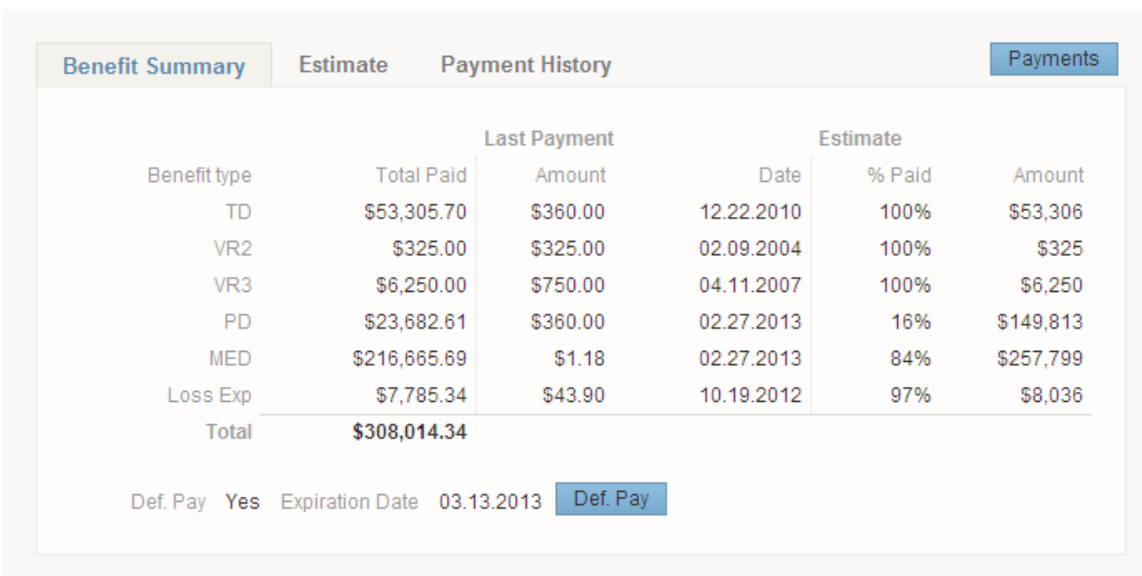


        - Select **Medical** option from **Documents** filter dropdown
    - Document list is filtered to display only medical reports
    - Optionally enter free text to filter further
        - Enter free text and hit **Enter** (keyboard)
        - The list is filtered by the text entered and an **x** icon appears in the right-hand side of the text field
        - Optionally, click on the clear option (**x** icon) to remove the free text filter
    - Click on desired report to view
    - Pop-up opens to display the report



- Optionally, browse reports (click **previous** and **next** arrow icons, located top right)
- When finished, click **Close** button ('x' icon)
- Repeat as necessary

- View **% of Estimate Paid** and **Estimate Amount** on **PD** line item to verify that **Comp Due** payment is required (**Benefit Summary** screen)

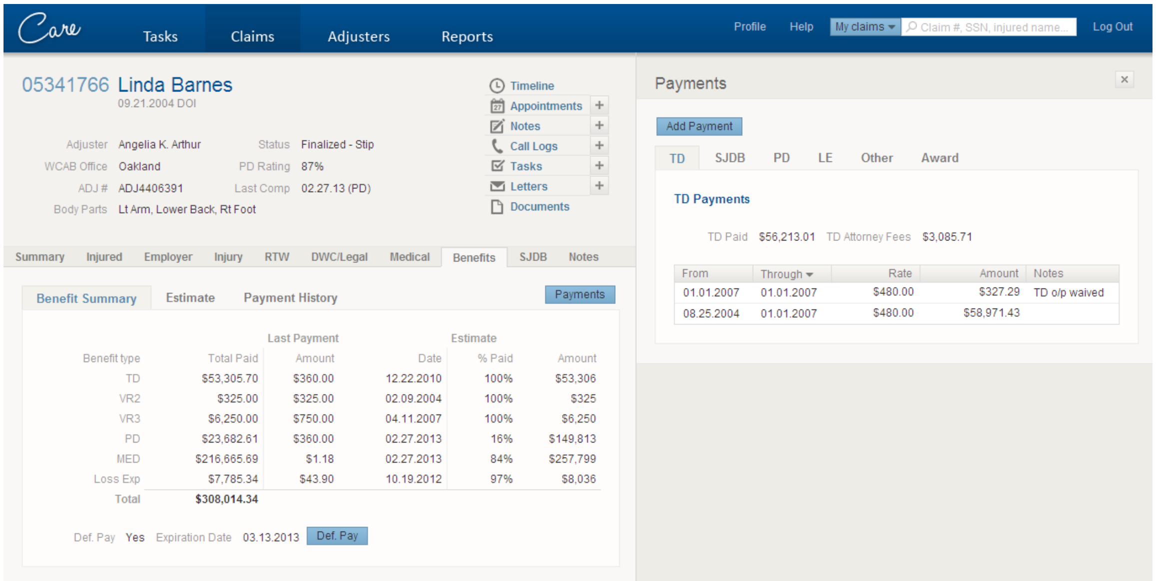


Benefit Summary | Estimate | Payment History | Payments

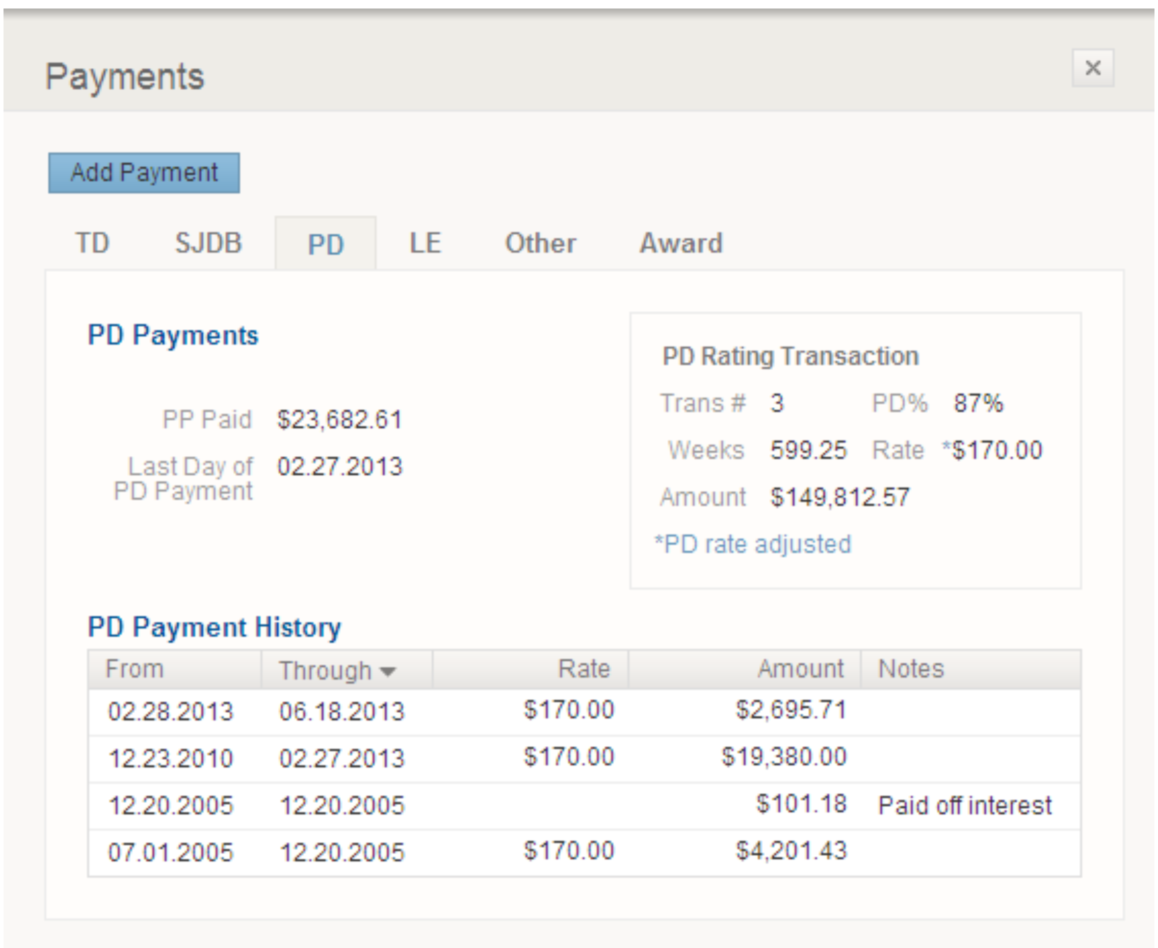
		Last Payment		Estimate	
Benefit type	Total Paid	Amount	Date	% Paid	Amount
TD	$53,305.70	$360.00	12.22.2010	100%	$53,306
VR2	$325.00	$325.00	02.09.2004	100%	$325
VR3	$6,250.00	$750.00	04.11.2007	100%	$6,250
PD	$23,682.61	$360.00	02.27.2013	16%	$149,813
MED	$216,665.69	$1.18	02.27.2013	84%	$257,799
Loss Exp	$7,785.34	$43.90	10.19.2012	97%	$8,036
Total	$308,014.34				

Def. Pay Yes Expiration Date 03.13.2013 Def. Pay

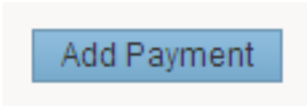
- (6) Click **Payments** button
- **Payments** screen appears in the right-hand panel (replacing claim **Documents**)



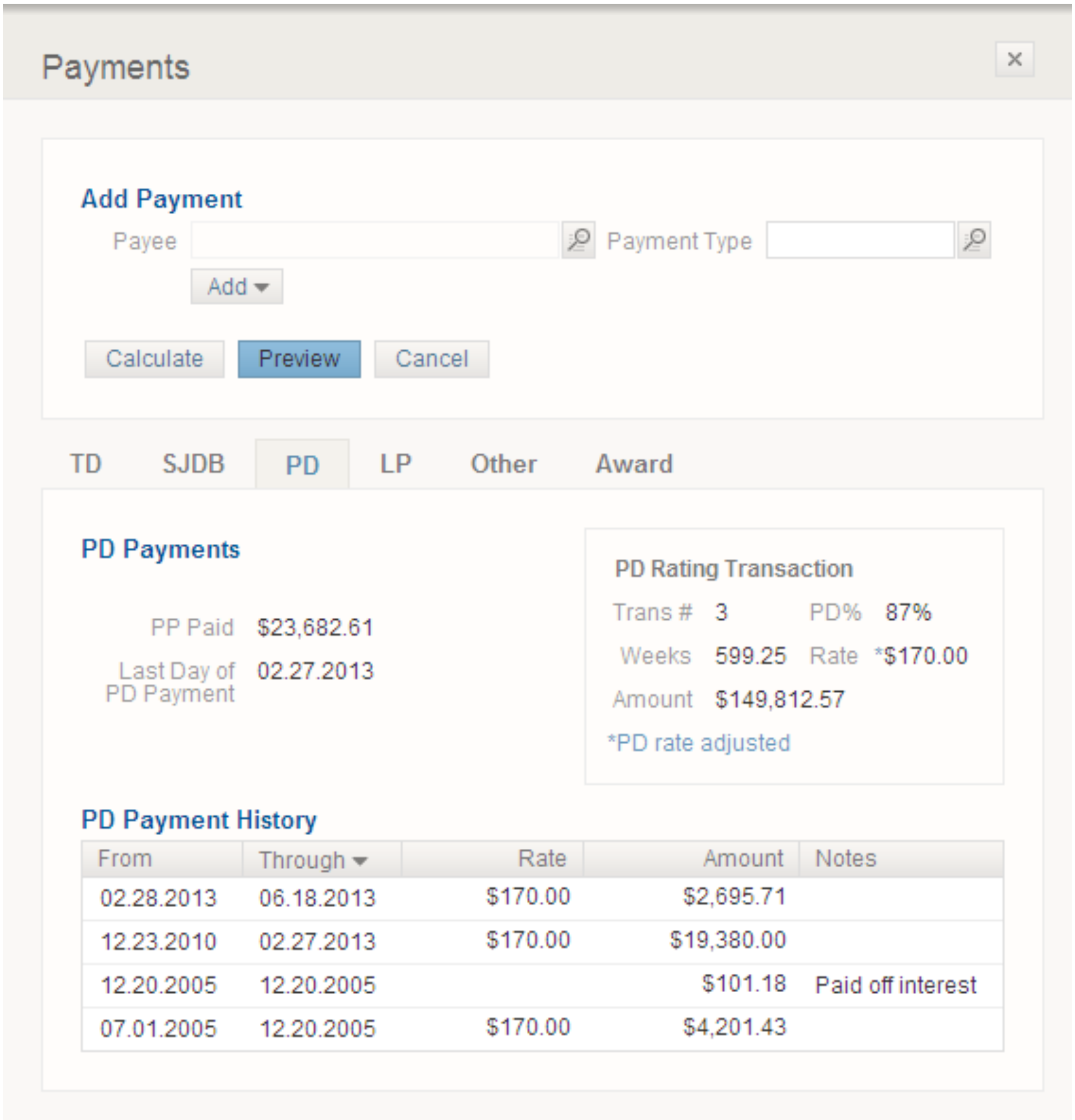
- (7) Select appropriate tab (**TD** or **PD**) to review payment history (to check last payment for correct continuation dates)



- (8) Click **Add Payment** button

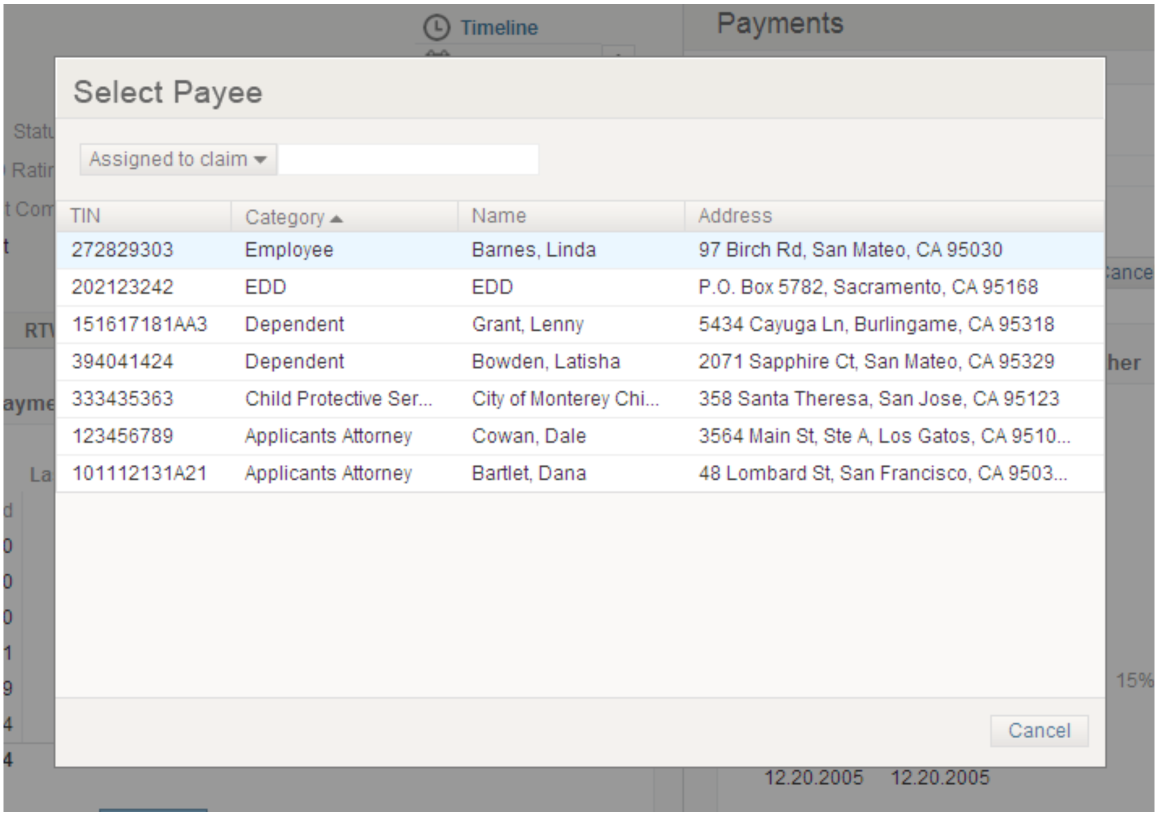


- **Add Payment** form appears (in place of the **Add Payment** button)

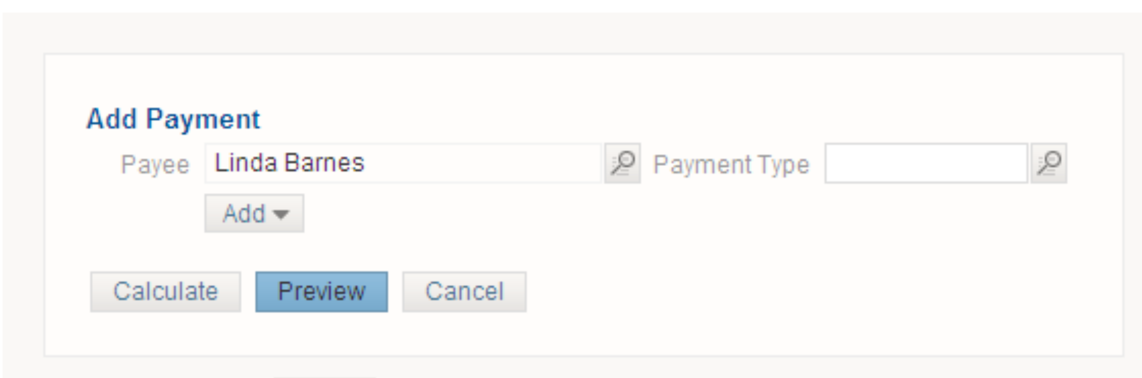


- (9) Click on the **Payee** finder icon (**Payee** field is read-only – transparent/non-white background and light border indicates that text cannot be entered directly, in contrast to the Payment Type field with a white background and darker border)
  - User cannot enter free text for payee. This insures user has selected an individual from the list of valid contacts and has a chance to validate the address and/or TIN # visible in the dialog.
- **Select Payee** dialog appears
  - By default, the list of contacts is filtered by **Assigned to claim**, so only individuals assigned to the claim are displayed

    - Ideally, list would only include contacts that would receive payments (i.e. Employee, Applicants Attorney, Dependent, etc.)

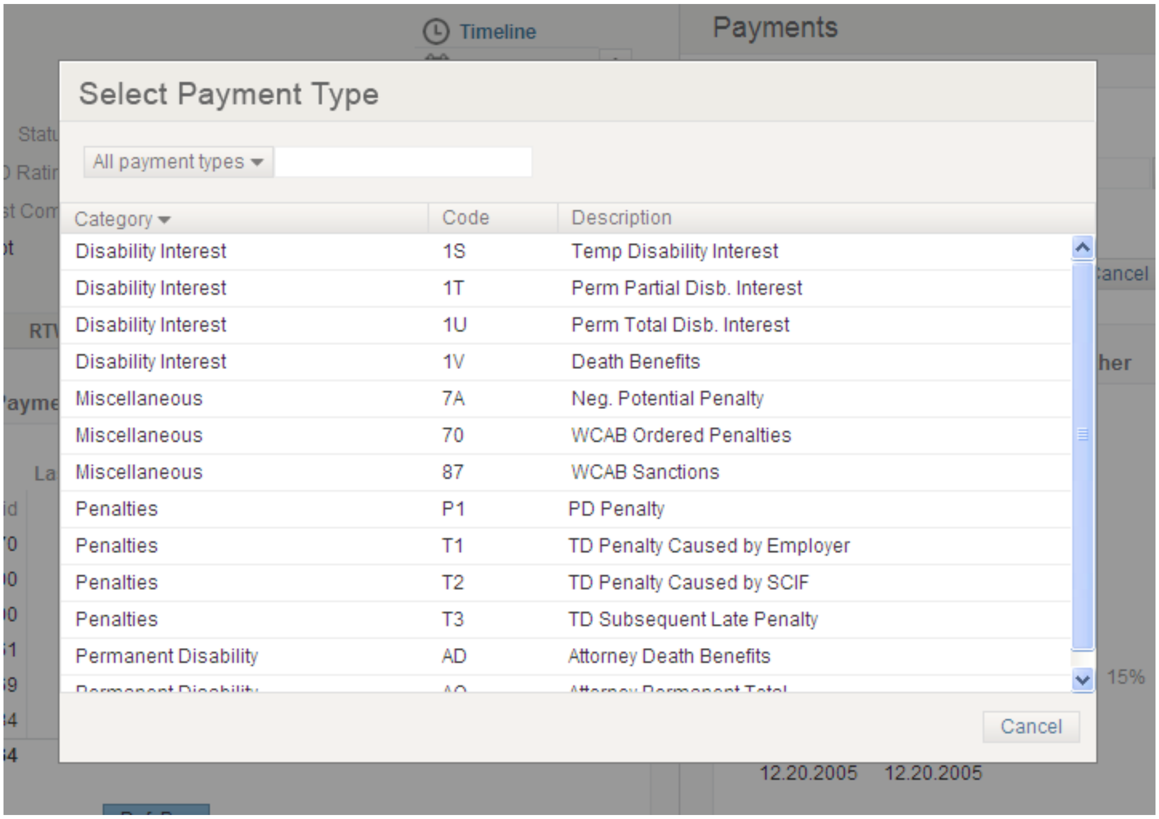


- Optionally, expand the list to find someone not yet associated to the claim
    - Select **All contacts** filter option
    - List refreshes to display all contacts
    - Optionally, filter the list further to find a specific person
        - Enter free text and hit **Enter** (keyboard)
        - List refreshes to display contacts that match the entered criteria and an **x** icon appears in the right-hand side of the text field
        - Optionally, click on the clear option (**x** icon) to remove the free text filter
- Optionally, click **Cancel**
- (10) Click on desired contact
- Dialog closes and the selected payee appears in the form

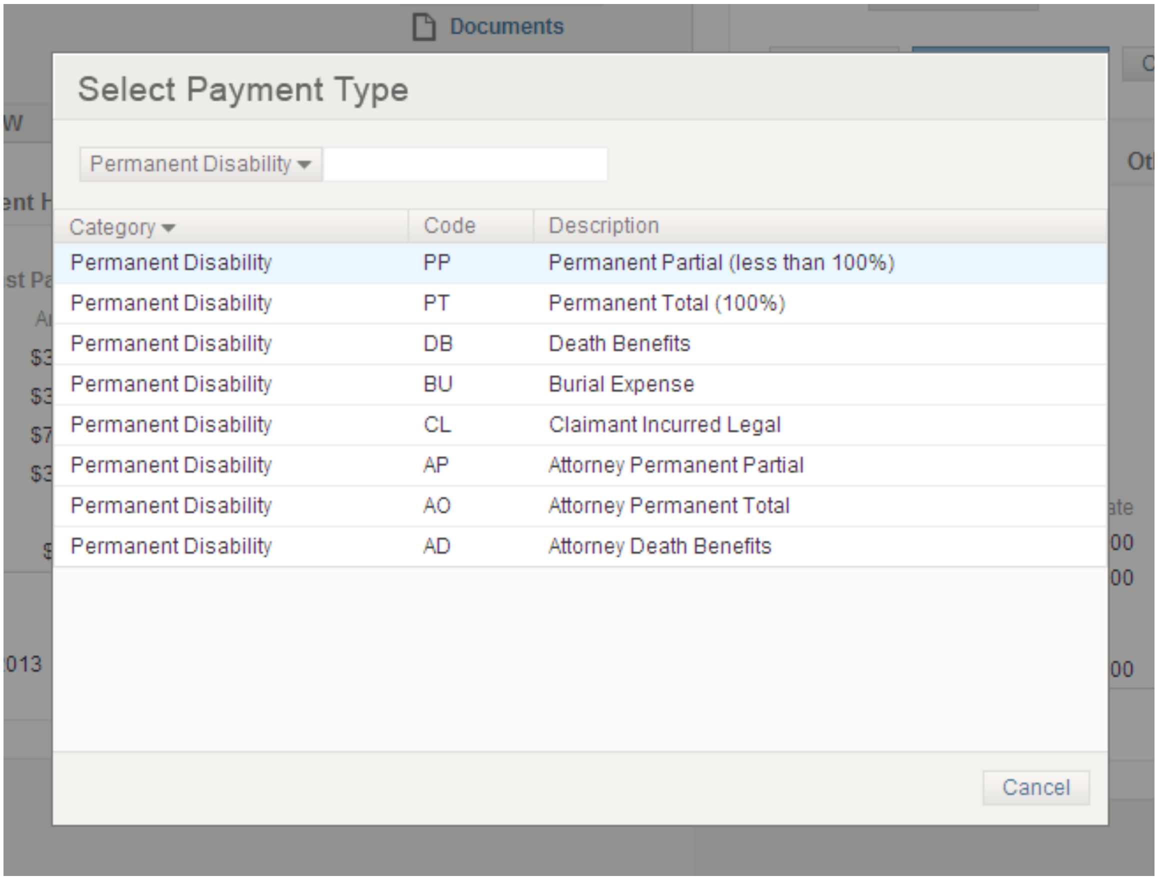


- (11) Enter the desired payment code and click **Enter** (keyboard)
- Optionally, use the **Payment Type** finder to select the appropriate payment code

- Click on the **Payment Type** finder icon
- **Select Payment Type** dialog appears showing all payment types

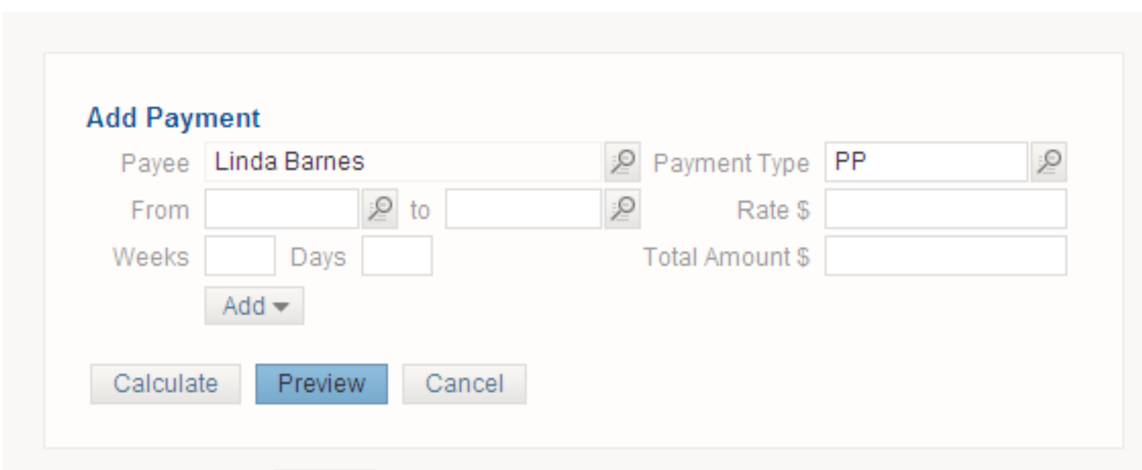


- Optionally, select desired category from the filter dropdown to filter the list (i.e. **Permanent Disability)**
- List is filtered to display only **Permanent Disability** payment types



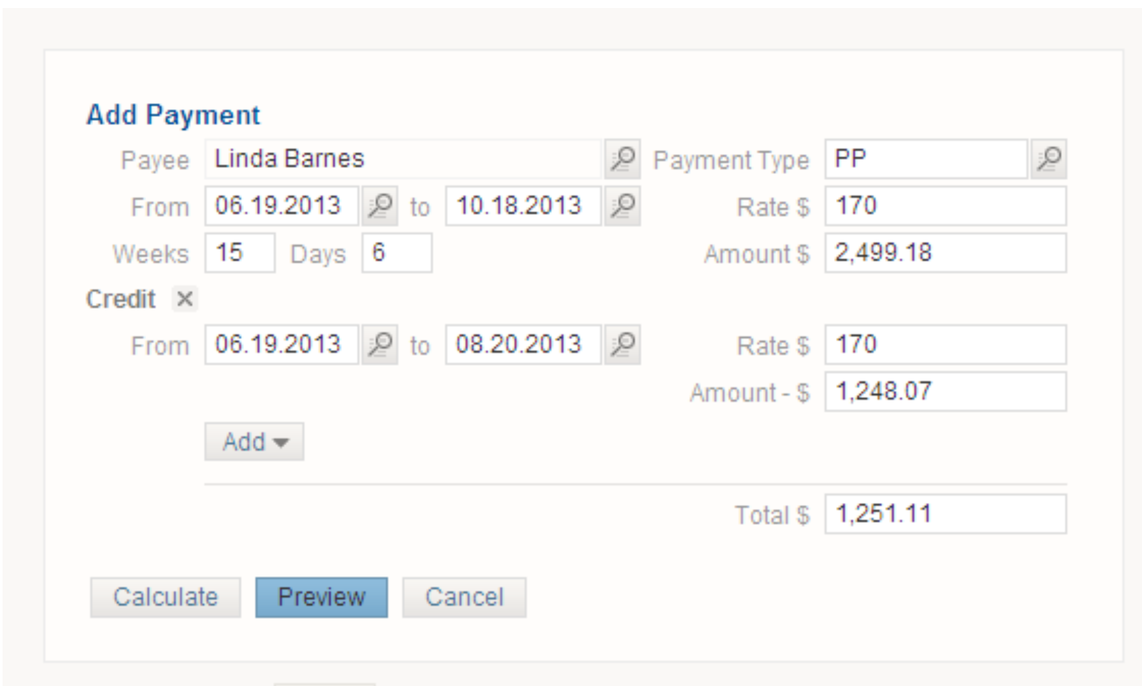
- Optionally, enter free text to further filter the list
    - Enter free text and hit **Enter** (keyboard)
    - The list is filtered by the text entered and an **x** icon appears in the right-hand side of the text field
    - Optionally, click on the clear option (**x** icon) to remove the free text filter
- Optionally, click **Cancel**
- Select desired payment type
- Dialog closes

- Selected payment type appears in the form and appropriate fields are displayed

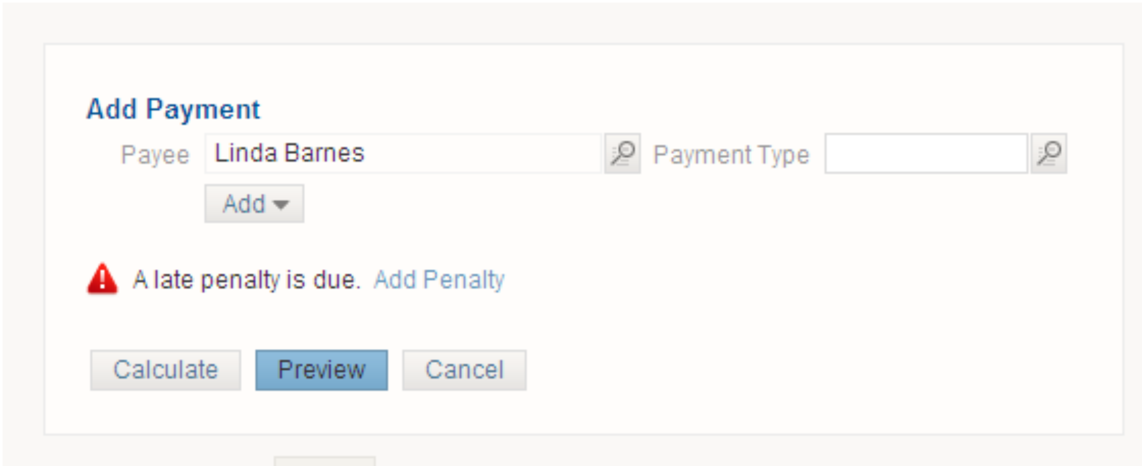


- (12 - 14) Enter payment data: **From** date, **to** date, and **Rate**

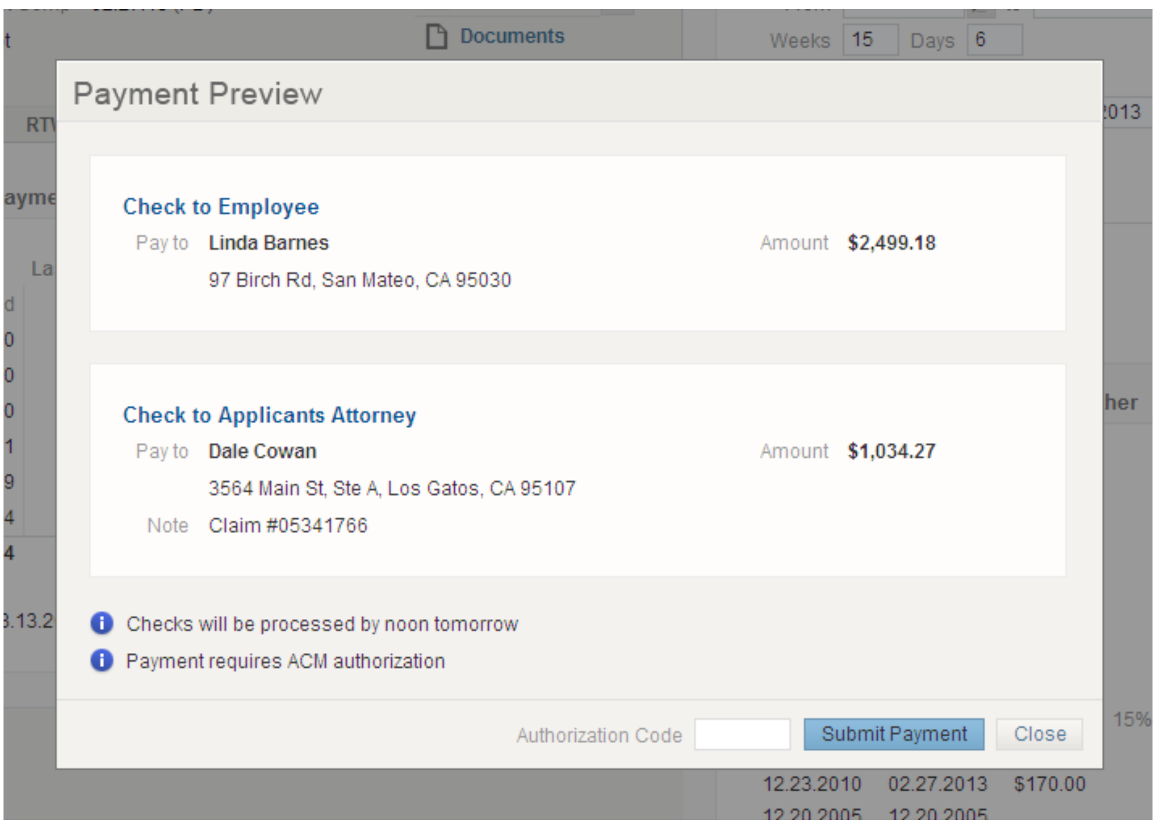
- Optionally, allow the system to calculate **to** date
    - Enter **From** date, **Weeks, Days** and **Rate** and click **Calculate** button
    - System displays the appropriate **to** date
- If lump sum, enter only **From** date and **Amount** [?]Could display a checkbox above the form fields to define if it's a lump sum, then only one date field and amount field would be displayed. User could uncheck this option to display all fields again. …OR could provide lump sum options in the payment types.
- (15) Click **Calculate**
- System displays weeks and days (check they are correct)
- If COLA applies, this should already be defined in **Estimate** screens before payment is processed [?] Is this statement correct?
- Optionally, add another line item (another payment type, credit, etc.)
    - Click **Add** dropdown and select desired option (see **Payment Details** document)
        - If applying a credit, select the appropriate **Credit** option…
        - If subtracting attorney fees, select the **Settlement – Attorney fee** option…
        - If adding a penalty, select the appropriate **Penalty** option…
        - If adding a note on the check, select the **Check note** the option…
        - If designating to pay alone, select the **Pay alone designation** option…
        - If adding a payment processing note, select the **Transaction note** option…
        - Etc.
    - System displays appropriate fields, the option to remove the line item (**x** icon) and applies appropriate calculations when **Calculate** button is clicked
        - Depending on the options selected, this may produce multiple checks (i.e. when subtracting attorney fees – See **Payment Preview** example below)



- If an alert is required, it will display in the screen between the form and the **Preview** button
    - An alert that requires an additional line item, such as a penalty (based on due date), will display a link or button for adding the line item

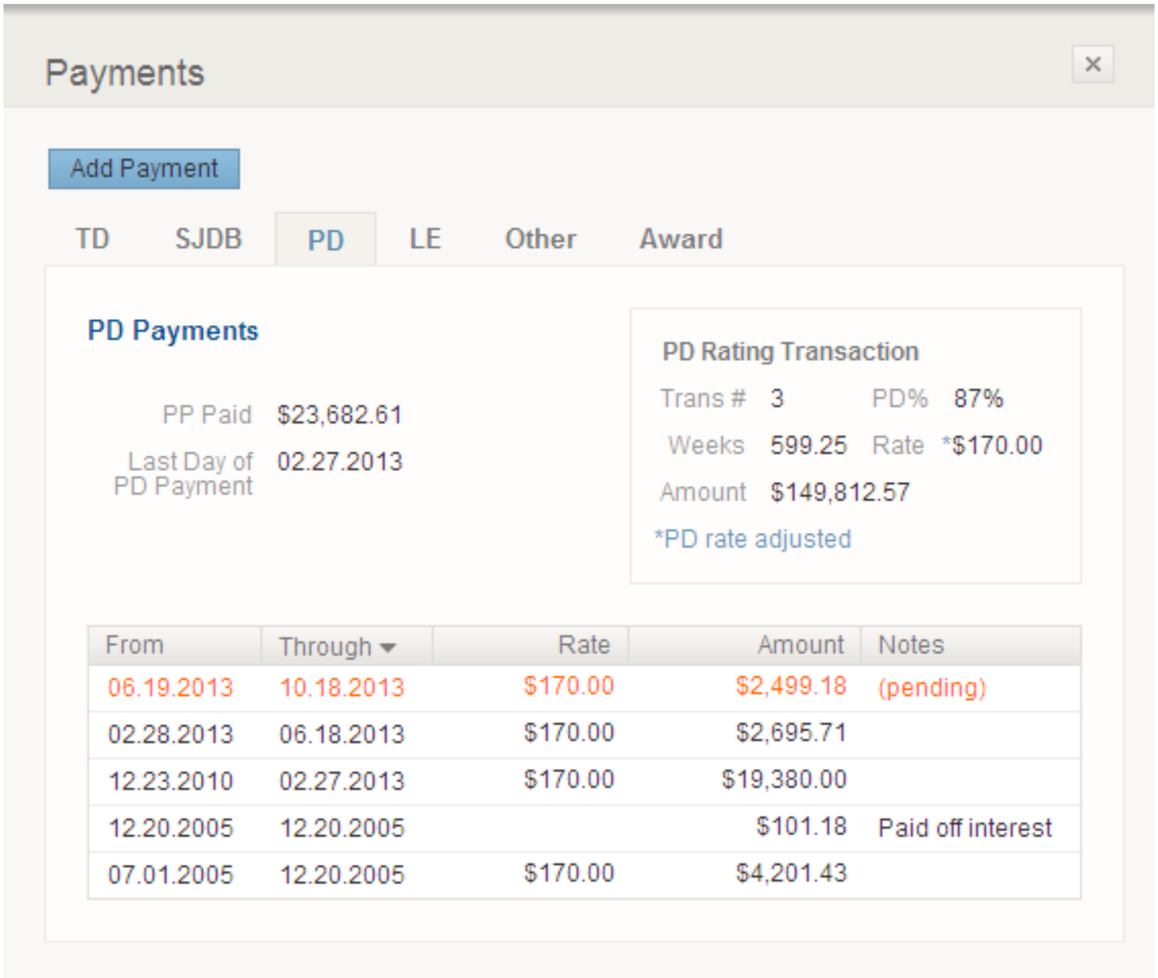


- Optionally, click **Cancel**
- (16) Click **Preview**
- A preview of the payment appears in another window (in printable form) with a **Print** option
    - System displays recipient, recipient address, check amount, date
    - If the claim requires vouchers, verbiage will change (i.e. instead of saying **Check to Employee**, it would say **Voucher to Employee**)
    - If attorney fees were subtracted, the summary will reflect multiple checks (see example)
    - If a note was added to the check, this will appear in the appropriate place (see example)
    - Alert displays when check will be processed (see example)
    - If payment requires higher level authorization, an alert would be displayed (see example)



- (17 - 18) Enter **Authorization Code** and click **Submit Payment**
- Optionally, click **Close** (dialog disappears, form is same as last seen so it can be modified or canceled)

- The payment is sent for processing, a new line item is displayed in the appropriate **Payment Log** in pending state (orange text), and the **Comp Due** task is logged complete (see below for more detail)



  - If two checks were sent, a line item for each payment would display
- Optionally, edit a pending payment (displays the same fields is a pop-up dialog w/Save, Cancel and Delete buttons)
- Optionally, delete a pending payment
- System logs **Comp Due task** as complete
  - The appropriate request is removed from the task queue
  - Trigger: the appropriate payment type is submitted for the appropriate claim
  - Also, the task should disappear from the task queue based on the trigger (above), regardless of whether or not the adjuster viewed the request in the queue
- If check is over adjuster's authority level, system sends a **Review Request** to ACM (based on authority model currently in place)
- Optionally, send a letter – Click new letter icon ('+' icon next to **Letters** link in claim header) to create a letter (If starting or stopping a benefit for any reason, must send a letter)
- System sends a reminder that compensation is due based on the last payment sent (trigger **Comp Due** notice to appear in queue 5 days before it is due – in 2 weeks)