



NYS Workers' Compensation Board eCase Document Upload Instructions

To view a case folder, you must be registered to use eCase and be listed as a party of interest for the case or be granted access by an organization that is a party of interest and has access to eCase.

The upload feature provides the user the ability to upload documents directly to the case folder within eCase. The document will be viewable in the case folder within 1 – 10 minutes. This feature will only be enabled for cases with a Case Status of "Hearing Set". The upload functionality will be available for use up until and including the day of the hearing. The intended users of this feature are attorneys (for both claimants and insurance carriers), insurers, TPAs, self-insured employers, and claimants.

Duplicate submissions may be deemed to be raising or continuing an issue without reasonable grounds and will subject the sender to penalties under Workers' Compensation law § 114-a(3). If submitted by the claimant's representative, duplicate submissions will result in reduced attorney's fees in the event of an award. Additionally, a report of Independent Medical Examination (Form IME-4) may not be submitted using eCase upload. Such reports must be submitted to the Board on the same day and in the same manner as the report is submitted to the claimant, insurer, claimant's attorney and treating providers.

Important Tips:

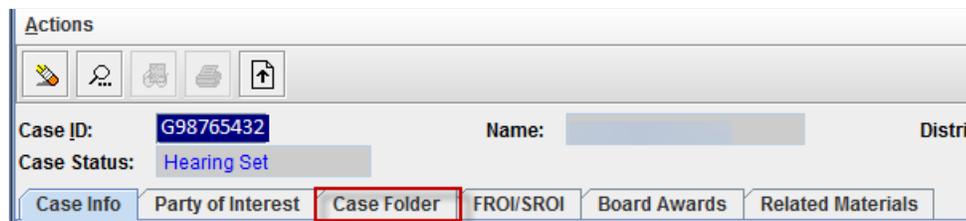
- Verify that the document does not already exist in the case folder. Do not submit a duplicate.
- Ensure you select the correct form ID from the drop-down list.
- Upload each medical service date separately using the correct form ID.
- Uploaded forms using form ID **EXHIBIT** or **ATTY_CORR** are to provide evidence associated for this hearing only; no action will be taken by a Claims Examiner.
- Board forms are limited to the list below.

FORM ID	DESCRIPTION	CLAIMANT ATTY	INSURER/ INSURER ATTY	CLAIMANT
ATTY-CORR	Attorney Correspondence	X		
C-107	EMPLOYERS Request for Reimbursement		X	
C-240	Employer's Statement of Wage Earnings Preceding the Date of Accident		X	
C-256.2	State Insurance Fund - Claim for Reimbursement of Wages Paid		X	
C-257	Claimant's Record of Medical and Travel Expenses and Request for Reimbursement	X		X
C-258	Claimant's Record of Job Search	X	X	X
C-258.1	Injured Worker's Record of Independent Job Search Efforts	X	X	X
C-300.5	Stipulation	X	X	X
C-32	Settlement Agreement - Section 32 WCL Indemnity Only Settlement Agreement	X	X	
C-32.1	Claimant release form/Section 32	X	X	
C-32-I	Section 32 agreement -Indemnity only	X	X	

FORM ID	DESCRIPTION	CLAIMANT ATTY	INSURER/ INSURER ATTY	CLAIMANT
C-4	Doctor's Initial Report	X	X	X
C-4.1	Continuation to Carrier/Employer Billing Section of Form C-4, C-4.2, C-4.3, C-5, PS-4 or OT-PT-4	X	X	X
C-4.2	Doctor's Progress Report	X	X	X
C-4.3	Doctor's Report of MMI/Permanent Impairment	X	X	X
C-4/C-48	Attending Doctor's Report	X	X	X
C-4AMR	Ancillary Medical Report	X	X	X
C-5	Attending Ophthalmologist's Report	X	X	X
C-62	Claim for Compensation in Death Case	X	X	X
C-64	Proof of Death by Physician Last in Attendance on Deceased	X	X	X
C-65	Proof of Burial and Funeral Expenses by Undertaker	X	X	X
CLMT-CORR	Claimant Correspondence			X
CORR	Correspondence		X	
DEATH-CERT	Death Certificate	X	X	X
DEPOSITION	Deposition	X	X	
EXHIBIT	Exhibit (Medical or Other)	X	X	X
FCE-4	Practitioner's Report of Functional Capacity Examination	X	X	X
MED-NARR	Medical Report	X	X	X
MEMO-OF-LAW	Memorandum of Law	X	X	
OC-400.1	Application for a Fee by Claimant's Attorney or Licensed Representative	X		
OT/PT4	Occupational/Physical Therapist's Report	X	X	X
PH-16.2	Pre-Hearing Conference Statement	X	X	
PS-4	Psychologist's Report	X	X	X
REIB-REQUEST	Reimbursement Request		X	

Uploading a Document

1. Log into eCase, or register for an eCase account, by visiting this link:
http://www.wcb.ny.gov/content/ebiz/ecase/ecase_overview.jsp
2. From the eCase – Claims Information System menu, **Select** Case > Case Details. Enter the Case ID and press Enter. **Select** the **Case Folder** tab. For help with using eCase please visit <http://www.wcb.ny.gov/content/ebiz/ecase/using-ecase.jsp>
3. Review the forms to ensure that the document you want to upload does not already exist in the case folder. You do not want to create a duplicate submission.



4. The Case Status, Name, District, and Case Info is displayed. If the Case Status is **Hearing Set**, the **Upload** button will be enabled. Only cases with a status of **Hearing Set** will have the button enabled.



5. Select the **Upload** button to launch the eCase Document Upload page in a new browser tab.
 - a. If using this feature in Safari, you will need to go into the Safari Menu > Preferences and uncheck the block pop-up windows option.
 - b. A pop-up window displays. Please read the bulleted items carefully. Select **Yes, I attest to and acknowledge the above items**. Select the **Continue to Upload** Button.
6. Verify the User & Case Information, and ensure that the Case ID is correct.
 - a. If yes, proceed to step 7.
 - b. If no, go back to the eCase application and enter the correct Case ID number.

eCase Document Upload

eCase Availability ** Any document uploaded will not be addressed until the day of the hearing **

<p style="text-align: center; background-color: #0070c0; color: white; font-weight: bold; font-size: small;">User & Case Information</p> <p>User: Smith, John</p> <p>Hearing Date: 11/24/2018</p> <p>Organization Name: ABC Law Firm, LLC</p>	<p style="text-align: center; background-color: #0070c0; color: white; font-weight: bold; font-size: small;">Document Upload</p> <p>Case ID</p> <input type="text" value="G98765432"/> <p>Form ID ⓘ</p> <div style="border: 1px solid #ccc; padding: 2px; width: 100%;">Please select a Form ID ▾</div> <p>Select a File to Upload ⓘ</p> <input style="width: 90%;" type="text"/> <input type="button" value="Browse..."/> <p style="text-align: center; margin-top: 10px;"><input type="button" value="Upload"/></p> <p style="text-align: center; background-color: #0070c0; color: white; font-weight: bold; font-size: small; margin-top: 10px;">Document Upload Log</p>	<p style="text-align: center; background-color: #0070c0; color: white; font-weight: bold; font-size: small;">Important Information</p> <ul style="list-style-type: none"> Verify that the document does not already exist in the case folder. Do not submit a duplicate. Select the correct form ID from the drop-down list. Upload each medical service date separately using the correct form ID. Uploaded forms using form ID Exhibit or ATTY_CORR is to provide evidence associated for this hearing only; no action will be taken by a Claims Examiner. Allow up to 10 minutes for the document to become viewable in the case folder. Upload only PDF or Word file format with a maximum size of 25 MB. <p style="font-size: x-small; margin-top: 10px;">To upload documents for another WCB Case ID, please go back to the eCase applet and enter another WCB Case ID.</p>
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7. Select a **Form ID** from the drop-down menu. Some form IDs require additional information to be entered. If the form ID requires additional information, complete the required fields and optional fields if the information is known. Ensure that the Medical Service Date selected is the same date of service that is on the medical form.

Note: There is a limited selection of form IDs; if the form ID you are uploading is not listed, please send the document to the Centralized Mailing Address to get the claims-related document into the case folder. If the document is correspondence or will be used as an exhibit, then select the appropriate form ID. Uploaded documents will not be acted upon until the day of the hearing.

Form ID

C-4 - Doctor's Initial Report ▾

Select a File to Upload

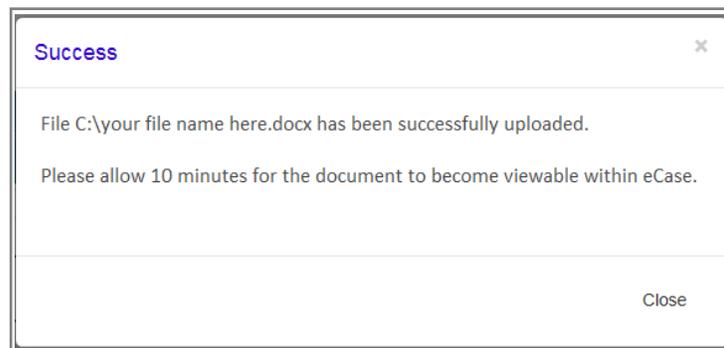
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Additional Information is Needed

* = Required for this form.

*Provider Last Name	First Name
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
*Medical Service Date	
<input style="width: 95%;" type="text"/>	
WCB Authorization Number	
<input style="width: 95%;" type="text"/>	

8. Select the **Browse** button and locate the file on your computer. Click open.
 - a. The file should be either a Word or pdf file and no larger than 25 MB.
 - b. You can only upload one document per form ID.
 - c. Upload each medical service date separately using the correct form ID.
9. Verify that the correct file is displayed in the **Select a File to Upload** field. If you entered additional information, verify that it is correct.
10. Select the **Upload** button.
11. The Success message window displays.



12. Select **Close** or **click the 'X'**. Closing the window will not affect the upload progress. Allow 10 minutes for the document to become viewable within eCase.
13. Once you select Close, you will see the file name listed in the **Document Upload Log** area at the bottom of the page.

Document Upload Log	
<u>Form ID</u>	<u>File Name</u>
ATTY-CORR	Your file name will appear here

14. If you need to upload another document to the **same** Case ID, repeat steps 6 – 13.
15. If you need to upload a document to a **different** Case ID, close out of the eCase Upload tab, go back to the eCase application and repeat steps 2 – 13.

Note: Do not bookmark the eCase Document Upload browser tab.

Questions?

Contact the WCB Customer Support by phone at (844) 337-6305 or by email at WCBCustomerSupport@wcb.ny.gov