

# Request for Continuance - External

## QuickStart Guide

The Request for Continuance process allows the requester to request a continuance given there is a hearing scheduled.



Continuance Request

Claim Basic Information

Claim Number: W403147      Claimant Name: Zoraida Suarez

Employer & Insurer

Employer	Insurer
ABRAMS GAVIN M & MONICA M	ACCEPTANCE INSURANCE CO

Emergency: No

**If continuance is approved, all claims in the "set with group" will automatically be postponed.**

Current set with group

Primary Claim	Claim Number	Claimant Name	Accident/OD Date	Body Parts Affected
<input checked="" type="checkbox"/>	W403147	Zoraida Suarez	05/01/2023	Skull
<input type="checkbox"/>	W403148	Zoraida Suarez	04/04/2023	Multiple Head Injury

Requester Details

First Name: Victoria      Middle Name:      Last Name: Queen  
Email: victoria@wcc.invalid      Address: 1 AVIATION CIR WASHINGTON DC 20001-6000  
Phone: 245-868-5555  
Party: Insurer

Hearing Information

Hearing Date: 10/28/2023  
Location Name: Baltimore

Justification for Continuance

Certifications and Signature

I HEREBY CERTIFY that on June 7, 2023, that service of the foregoing was made in accordance with COMAR 14.09.01.03.

I further certify that the opposing counsel/parties have been contacted and they:

By checking this box, I affirm this is the electronic signature of the submitter for all purposes under Article of the Annotated Code of Maryland and the Maryland Uniform Electronic Transactions Act.

Electronically Signed By:

Victoria Queen  
ACCEPTANCE INSURANCE CO  
Insurer

Consent  
Object  
No Response to Attempted Contact

1 Review the Claim information pulled from the Claim File. Note the Emergency flag in the section noting the status.

Set With Groups are listed on the Request, along with a warning stating that the additional Claims in the group will be automatically postponed.

2 Enter the mandatory "Justification for Continuance" using the textbox provided.

3 One of the required certification statements has a dropdown menu where you requester must enter the results of your correspondence with the other parties.

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Consent  
Object  
No Response to Attempted Contact

# Request for Continuance

## Opposing Party Response

The opposing parties have the ability to 'Consent' or 'Object'



Case Number	Claim Number	Process	Activity	Case Creation Date	Activity Due Date	Case Due Date
RFP-744	W403067	Response to Continuance Request	Response Form	04/04/2023 5:50 pm	04/05/2023 5:50 pm	04/04/2023 5:50 pm
RFP-746	W403083	Response to Continuance Request	Response Form	04/10/2023 4:48 pm	04/13/2023 4:48 pm	04/10/2023 4:48 pm
RFP-862	W403147	Response to Continuance Request	Response Form	06/07/2023 8:54 am	06/08/2023 8:54 am	06/07/2023 8:54 am

Once the request has been filed, an inbox task for the opposing parties will automatically be created.

Response to Continuance Request > Response Form

Continuance Request | Response Form

Response:

Response Details

Claim Number	Response	Objection Reason
W403147	Consent	
W403147	Object	

W403147 Aruna Kamana Insurer Attorney

The user may select 'Consent', which will move the case along the "Happy Path". Selecting 'Object' will initiate one of the processes' alternative flows

Response to Continuance Request > Response Form

Continuance Request | Response Form

Response:

Objection Reason:

Response Details

Claim Number	Name	Party	Response	Objection Reason
W403147	Zoraida Suarez	Claimant		
W403147	Aruna Kamana	Insurer Attorney		

When 'Object' is selected CompHub will dynamically display the Objection textbox. This is a required field.