

Claim Amendment

QuickStart Guide

The Claim Amendment process replaces the C-3 form with a nimble, intuitive, and friendly interface that allows you to change Body Parts listed on a Claim in seconds. This process is found under **Start New Action>Claims>Claim Amendment**.



▼ Claimant Information

Claim Number:	W201508	Creation Date:	06/04/2023		
First Name:	John	Middle Name:		Last Name:	Doe
Email:	devinmaxwell@gmail.com	Address:	10 E BALTIMORE ST BALTIMORE MD 21202-1630		
Phone:	240-304-0342				

▼ Employer & Insurer

Employer	Insurer
7 NORTH PETRO INC DBA ABERDEEN EXXON AKN PETRO INC	HARFORD MUTUAL INSURANCE CO.

▼ Body Parts

Area of body	Major part of body	Specific body part identifier
Trunk	Lungs	

To add a body part, click plus icon. To delete a body part, highlight row below and click the trash can icon.

▼ Body Parts to Add or Delete to this Claim

Area of Body	Major part of body	Specific body part identifier	Change Type
Trunk	Lungs		
Head	Skull		Added
Upper Extremities	Upper Arm	Left Upper Arm	Added

▼ Certifications and Signature

Are you submitting a signed Power of Attorney for this claim? Yes No *Please Add or Delete a body part in above section before generating the document*

If there is no power of attorney on file for this claim, once the claim amendment is submitted, it will be delivered to the claimant.

Before you begin: You must first generate the Claim Amendment form and Medical Authorization form by selecting the "Generate Document" button below.

Claim Amendment and Medical Authorization:

You will then have two options to obtain the necessary signatures for Claim Amendment and Medical Authorization.

(1) You may complete the Claim Amendment and Medical Authorization form online, save it, print the form, and then email, fax or deliver in person to the other parties for signature. Once the document is signed, you should review it to ensure all document is signed correctly. Any incomplete or improperly signed document may delay the processing of the Claim Amendment Request. Upon receipt of all necessary signatures, please select the option below to activate the upload documents feature. Do not select this option until you have all signatures. By selecting the "Save" button below, you will then be able to return to this step later to complete the process. Select "Save" now.

Print Claim Amendment form and get signatures on paper.

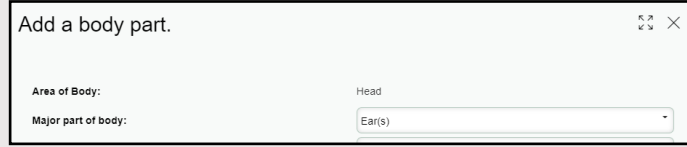
OR


WCC will electronically send the document for electronic signatures.

1 Review the Claimant Information, Employer/Insurer, and Body Parts sections for accuracy.

2 Click the row you would like to delete or add (Note that a selected row will appear a darker shade than the others)

3 Follow the form's instructions to Add/Delete a body part. If you choose to add a body part a subform will appear, allowing you to select body parts using a dropdown menu.



 You may submit this form electronically with a signed power of attorney alternatively you may generate the document, have it signed by the Claimant and return to the process to upload the documentation. Remember to complete Step 3 before generating the Document so that the Template.