



WebFile Guide for

Claimants

How to Navigate through WebFile

WELCOME



Welcome to the Virginia Workers' Compensation Commission's WebFile application.

The Commission created WebFile to assist its customers in easily accessing, viewing and managing their claim record.

This guide provides the information and instructions necessary for navigating this web-based claim management tool.

While the guide may be printed, it is recommended that the guide be utilized electronically due to updates and revisions.

Questions regarding WebFile processes should be directed to the Commission at 877-664-2566 or please visit workcomp.virginia.gov/webfile/webfile-support and complete a WebFile Support Request.

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WebFile OVERVIEW

“Filing a Claim” in WebFile is an important responsibility for claimants. Filing is necessary to protect a claimant’s rights under the Virginia Workers’ Compensation Act.

With the access to WebFile, claimants can:

- ✓ *View claim information and transaction history on a claim.*
- ✓ *Verify which claim administrator is handling their claim.*
- ✓ *File a Claim Form/Request for Hearing online.*

GENERAL FLOW OF A CLAIM



WebFile SECURITY

The WebFile system uses a variety of security protocols to help ensure that case records remain confidential. A key component of this structure (which governs access rights) is username and password.

USERNAMES

All WebFile users will have individual usernames. The username cannot be changed after the registration and activation process is complete.

Username Criteria

- ✓ Username has a minimum length of 6.
- ✓ Username has a maximum length of 50.
- ✓ Username cannot be an existing username of another user.
 - The user should receive a “Username already exists” message if they entered a taken username.
- ✓ Username may have any of the following characters
 - Letters
 - Digits
 - Allowed special characters (i.e., @, #).

PASSWORDS

All users are required to use a password along with the username. The initial password will be set up by the Commission. The user will then set up a new password at the time of registration.

Password Criteria

- ✓ May not be any previous 24 passwords.
- ✓ If the password has been updated within the last 24 hours (excluding temporary passwords created by admins), do not allow the user to proceed.
- ✓ Minimum 8 characters.
- ✓ At least one special character (i.e., @, #).
- ✓ At least one digit.
- ✓ At least one lowercase character.
- ✓ Password may not be the same as their e-mail.
- ✓ Password may not be the same as their username.

TWO-FACTOR AUTHENTICATION (2FA)

2FA is used to help secure stakeholder accounts from the growing number of cyber threats. It will require WebFile users to provide two different forms of identification before accessing the application.

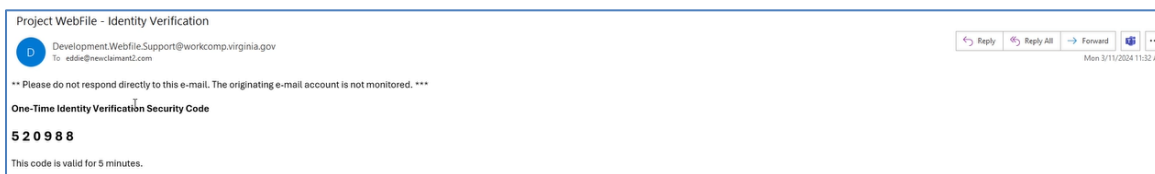
What to expect from 2FA:

- **Easy Setup:** Log in or register your WebFile account. The first factor is entering the current WebFile username and password. After entering the correct password, WebFile will then prompt the user for a second form of verification as the second factor of authentication. This is a six-digit code sent to the user's email address registered with the WebFile account.
- **Enhanced Security:** 2FA reduces the risk of unauthorized access, giving important documents and systems greater security from cyber threats.
- **Remember Me Feature:** 2FA remembers your browser on your device for 30 days. This means users using the same device and browser won't be prompted for 2FA until after 30 days provided the user doesn't clear the cache on their browser.

Steps to Login to WebFile with 2FA are as follows:

Enter your username and password. See [Change Password](#) for more details.

An email will be sent to the address indicated which contains a one-time two factor authentication code. **This code will expire in 5 minutes.** The email could also be in a spam or junk folder.



Enter your 6-digit access code in WebFile as shown below.

ACCOUNT LOCK

After three failed login attempts, the user will enter a “cool-down” time before they can attempt to log into WebFile again.

TIMEOUT FEATURE

The system has been set up with a 45-minute timeout feature. If there is no activity within 45 minutes, the user will receive a message notifying them that they will need to extend the session in WebFile to continue their session.

IMPORTANT



Entering data is still viewed by the system as being idle—users who take longer than 45 minutes to submit data or to conduct other transactions will be automatically logged off of the system, and all information not saved or submitted will be lost.

WebFile REGISTRATION

This section covers the online registration within WebFile as the claimant.

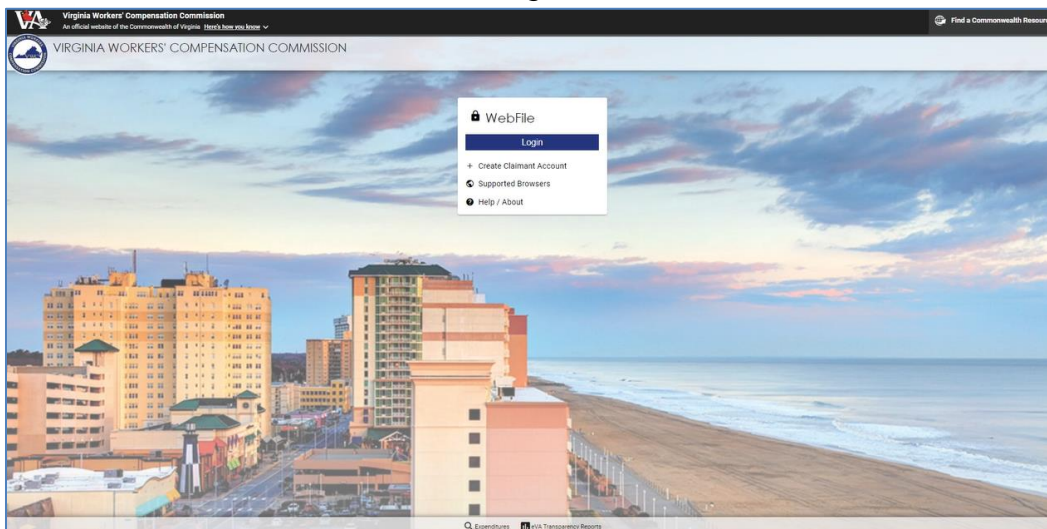


STEPS TO COMPLETE

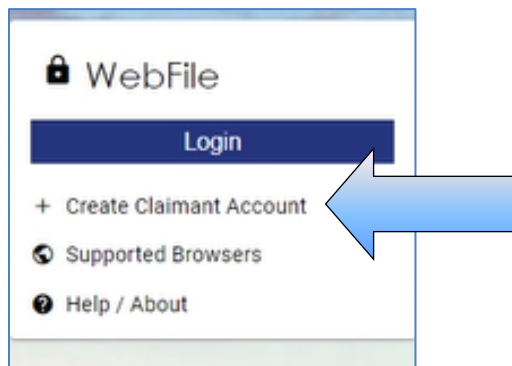
1. Go to the WebFile website at:

webfile.workcomp.virginia.gov/.

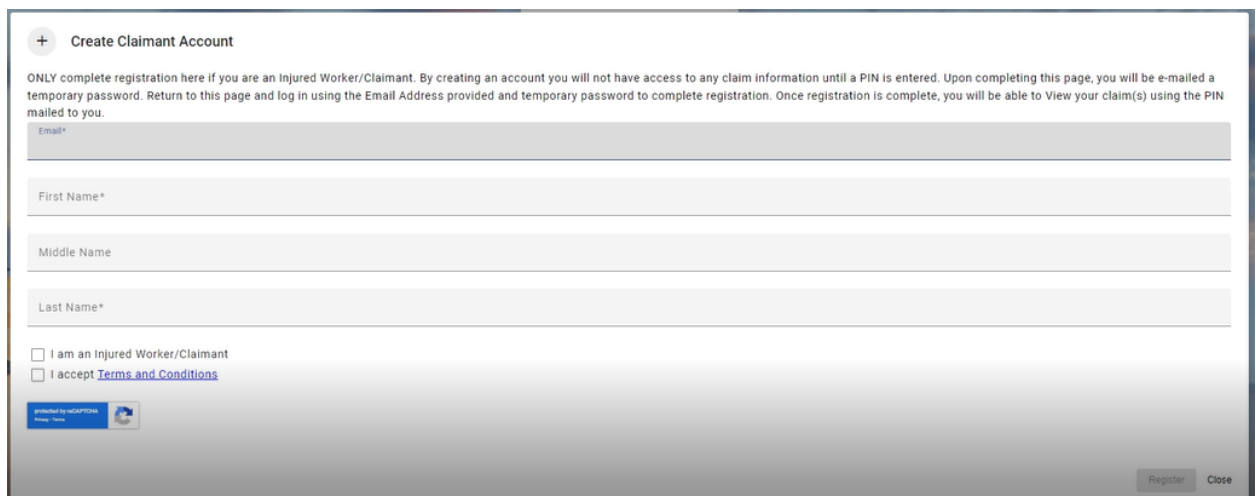
WebFile Login Interface



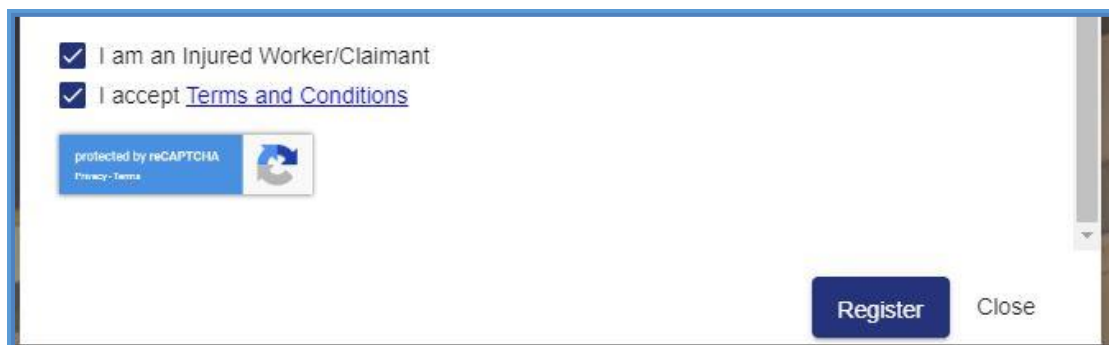
2. Select the “Create Claimant Account” button.



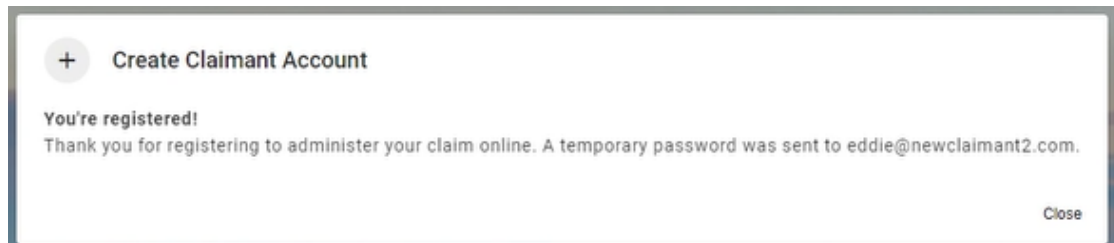
3. Enter a valid email address and first, middle and last name.

A screenshot of the "Create Claimant Account" registration form. The form has a title bar with a plus icon and the text "Create Claimant Account". Below the title bar, there is a paragraph of text: "ONLY complete registration here if you are an Injured Worker/Claimant. By creating an account you will not have access to any claim information until a PIN is entered. Upon completing this page, you will be e-mailed a temporary password. Return to this page and log in using the Email Address provided and temporary password to complete registration. Once registration is complete, you will be able to View your claim(s) using the PIN mailed to you." Below this text are four input fields: "Email*", "First Name*", "Middle Name", and "Last Name*". At the bottom of the form, there are two checkboxes: "I am an Injured Worker/Claimant" and "I accept Terms and Conditions". Below the checkboxes is a reCAPTCHA widget with the text "protected by reCAPTCHA" and a "Privacy - Terms" link. In the bottom right corner, there are two buttons: "Register" and "Close".

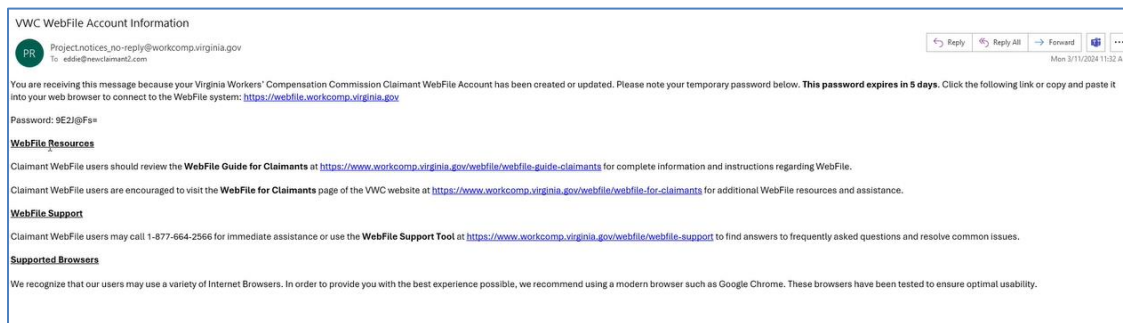
4. Check the box if indicating you are an injured worker/claimant.
5. Review the Terms and Conditions by clicking on the link.
6. Check the box to accept the Terms and Conditions.
7. Click the “Register” button to complete this first step.

A screenshot of the "Create Claimant Account" registration form, showing the state after steps 4, 5, and 6. The checkboxes "I am an Injured Worker/Claimant" and "I accept Terms and Conditions" are now checked. The reCAPTCHA widget is still present. The "Register" button is highlighted with a yellow glow. The "Close" button is also visible.

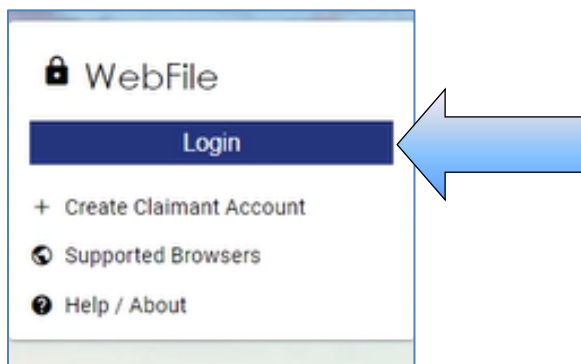
8. A confirmation message will appear.



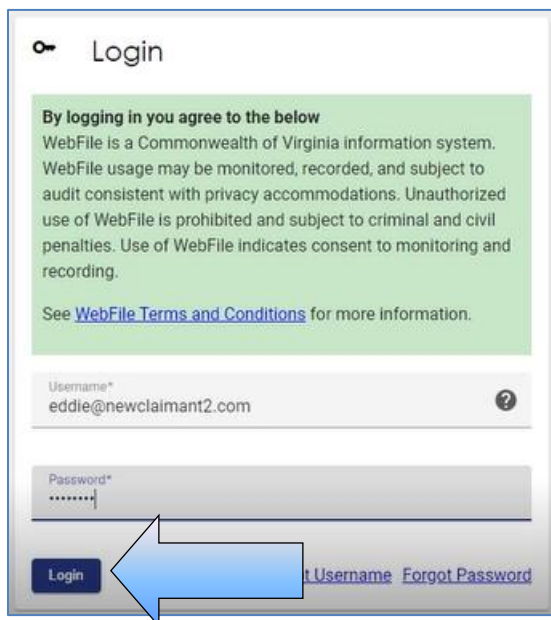
9. An email will be sent to the address indicated which contains a temporary password. **This password will expire in 5 days.** The email could also be in a spam or junk folder.



10. Once you have received the temporary password email, go to the WebFile website.
11. Click the "Login" button.



12. Since this is the first time logging into WebFile, enter the registered email address (as your username) and the temporary password.



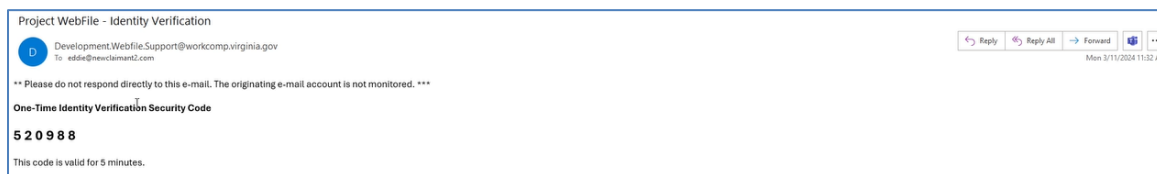
The image shows the WebFile login interface. At the top, there is a 'Login' header with a key icon. Below this is a green box containing a disclaimer: 'By logging in you agree to the below. WebFile is a Commonwealth of Virginia information system. WebFile usage may be monitored, recorded, and subject to audit consistent with privacy accommodations. Unauthorized use of WebFile is prohibited and subject to criminal and civil penalties. Use of WebFile indicates consent to monitoring and recording. See [WebFile Terms and Conditions](#) for more information.' Below the disclaimer are two input fields: 'Username*' with the value 'eddie@newclaimant2.com' and a help icon, and 'Password*' with masked characters. A large blue arrow points to the 'Login' button. To the right of the button are links for 'Forgot Username' and 'Forgot Password'.



QUICK TIPS

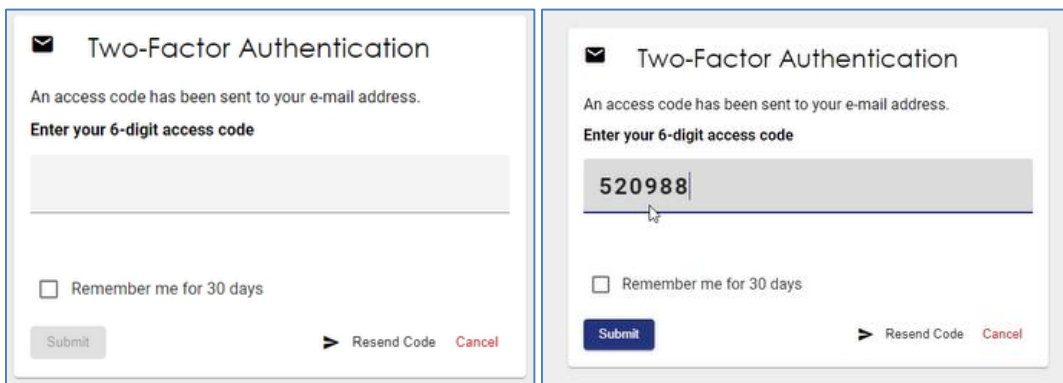
You can still create an account and file a claim even if your injury has not been reported and you do not have a Jurisdiction Claim Number (JCN) or PIN.

13. An email will be sent to the address indicated which contains a one-time two factor authentication code. **This code will expire in 5 minutes.** The email could also be in a spam or junk folder.



The image is a screenshot of an email titled 'Project WebFile - Identity Verification'. The sender is 'Development.WebFile.Support@workcomp.virginia.gov' with a sub-address 'To: eddie@newclaimant2.com'. The email body contains a warning: '** Please do not respond directly to this e-mail. The originating e-mail account is not monitored. **'. Below this is the heading 'One-Time Identity Verification Security Code' followed by the code '520988'. At the bottom, it states 'This code is valid for 5 minutes.' The email interface includes standard actions like 'Reply', 'Reply All', 'Forward', and a date/time stamp 'Mon 3/11/2024 11:32 AM'.

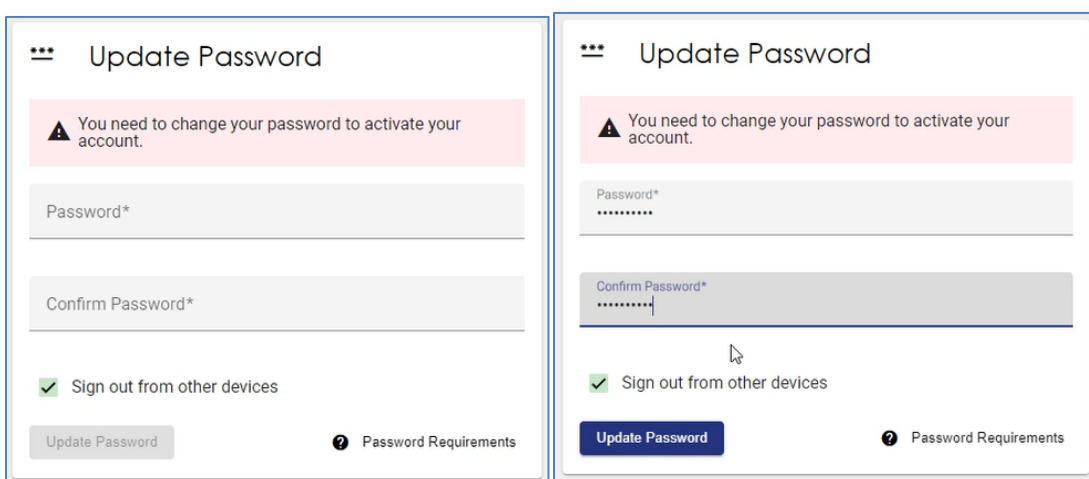
14. Enter your 6-digit access code in WebFile as shown below.



The image shows two side-by-side screenshots of a web form titled "Two-Factor Authentication". Both screens display the message "An access code has been sent to your e-mail address." and "Enter your 6-digit access code". Below this is a text input field. In the left screenshot, the field is empty. In the right screenshot, the field contains the text "520988". Below the input field is a checkbox labeled "Remember me for 30 days". At the bottom, there are three buttons: "Submit", "Resend Code", and "Cancel".

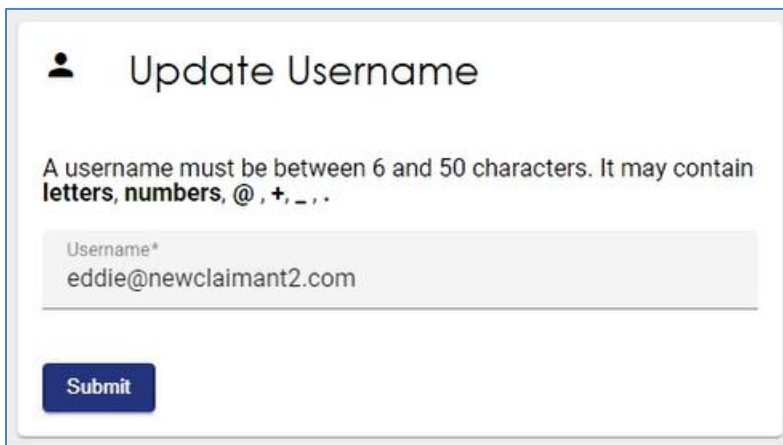
For more information, see [Two-factor authentication \(2FA\)](#).

15. The current password on this screen is the temporary password that was just sent. Create a new password based on the following criteria:
- ✓ May not be any previous 24 passwords.
 - ✓ If the password has been updated within the last 24 hours (excluding temporary passwords created by admins), do not allow the user to proceed.
 - ✓ Minimum 8 characters.
 - ✓ At least one special character (i.e., @, #).
 - ✓ At least one digit.
 - ✓ At least one lowercase character.
 - ✓ Password may not be the same as their e-mail.
 - ✓ Password may not be the same as their username.



The image shows two side-by-side screenshots of a web form titled "Update Password". Both screens display a warning message: "You need to change your password to activate your account." Below this are two text input fields: "Password*" and "Confirm Password*". In the left screenshot, both fields are empty. In the right screenshot, both fields are filled with asterisks. Below the input fields is a checkbox labeled "Sign out from other devices". At the bottom, there are two buttons: "Update Password" and "Password Requirements".

16. Create a username based on the following criteria:
- ✓ Username has a minimum length of 6.
 - ✓ Username has a maximum length of 50.
 - ✓ Username cannot be an existing username of another user.
 - The user should receive a “Username already exists” message if they entered a taken username.
 - ✓ Username may have any of the following characters
 - Letters
 - Digits
 - Allowed special characters (i.e., @, #).
17. Click “Submit” to complete your registration.



The screenshot shows a web form titled "Update Username" with a person icon. Below the title, a message states: "A username must be between 6 and 50 characters. It may contain letters, numbers, @, +, _ , .". There is a text input field labeled "Username*" containing the text "eddie@newclaimant2.com". At the bottom left of the form is a blue "Submit" button.

18. You can now log into WebFile with the new username and password.

CHANGE PASSWORD

This section covers changing a password after a profile has been created.

BEFORE YOU GET STARTED

Remember the WebFile Password Criteria:

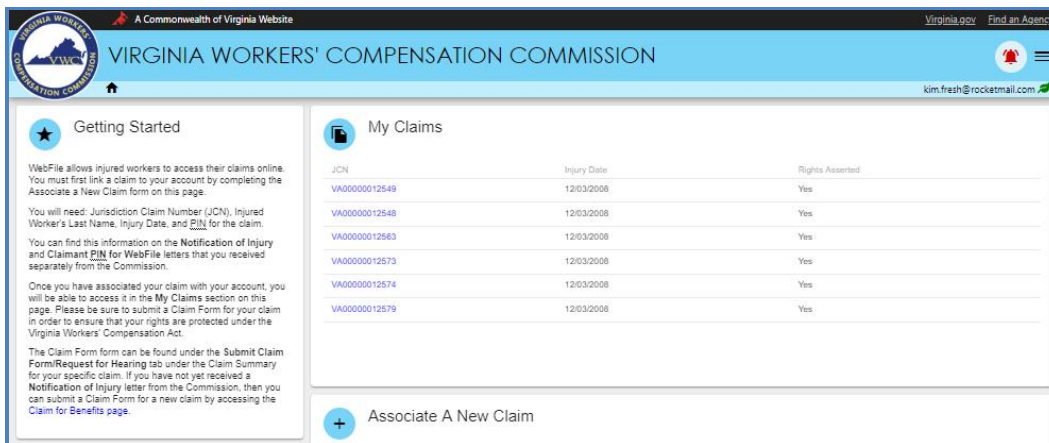
- ✓ May not be any previous 24 passwords.
- ✓ If the password has been updated within the last 24 hours (excluding temporary passwords created by admins), do not allow the user to proceed.
- ✓ Minimum 8 characters.
- ✓ At least one special character (i.e., @, #).
- ✓ At least one digit.
- ✓ At least one lowercase character.
- ✓ Password may not be the same their e-mail.
- ✓ Password may not be the same as their username.

STEPS TO COMPLETE

1. Go to the WebFile website at:

webfile.workcomp.virginia.gov
2. Enter username and password.
3. Click the “Login” button.

WebFile Home Interface



Getting Started

WebFile allows injured workers to access their claims online. You must first link a claim to your account by completing the Associate a New Claim form on this page.

You will need: Jurisdiction Claim Number (JCN), Injured Worker's Last Name, Injury Date, and PIN for the claim.

You can find this information on the Notification of Injury and Claimant PIN for WebFile letters that you received separately from the Commission.

Once you have associated your claim with your account, you will be able to access it in the My Claims section on this page. Please be sure to submit a Claim Form for your claim in order to ensure that your rights are protected under the Virginia Workers' Compensation Act.

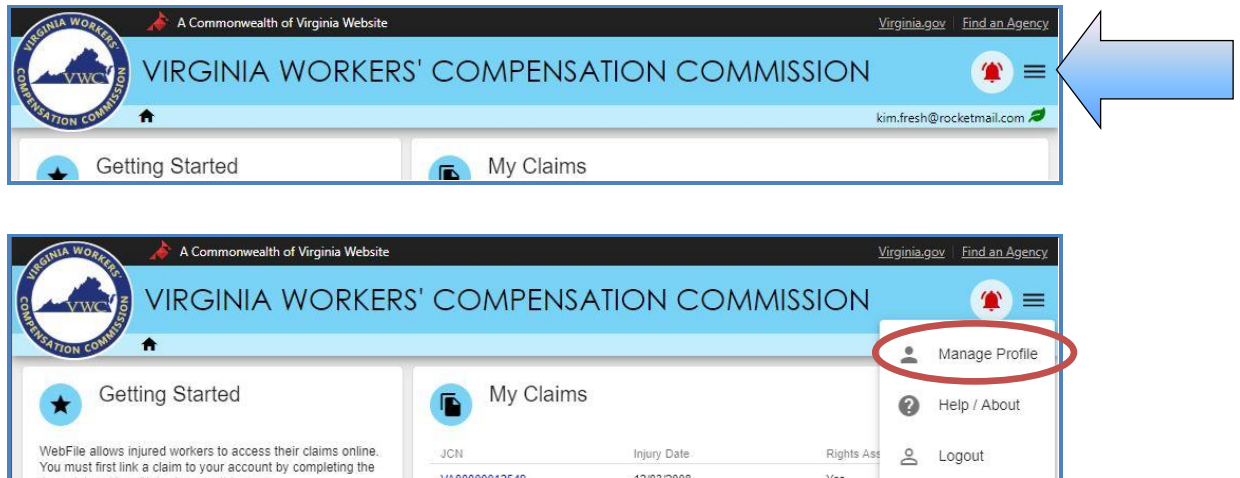
The Claim Form form can be found under the Submit Claim Form/Request for Hearing tab under the Claim Summary for your specific claim. If you have not yet received a Notification of Injury letter from the Commission, then you can submit a Claim Form for a new claim by accessing the Claim for Benefits page.

My Claims

JCN	Injury Date	Rights Asserted
VA00000012549	12/03/2008	Yes
VA00000012548	12/03/2008	Yes
VA00000012563	12/03/2008	Yes
VA00000012573	12/03/2008	Yes
VA00000012574	12/03/2008	Yes
VA00000012579	12/03/2008	Yes

+ Associate A New Claim

- Click the menu dropdown (≡) in the top right and select “Manage Profile.”



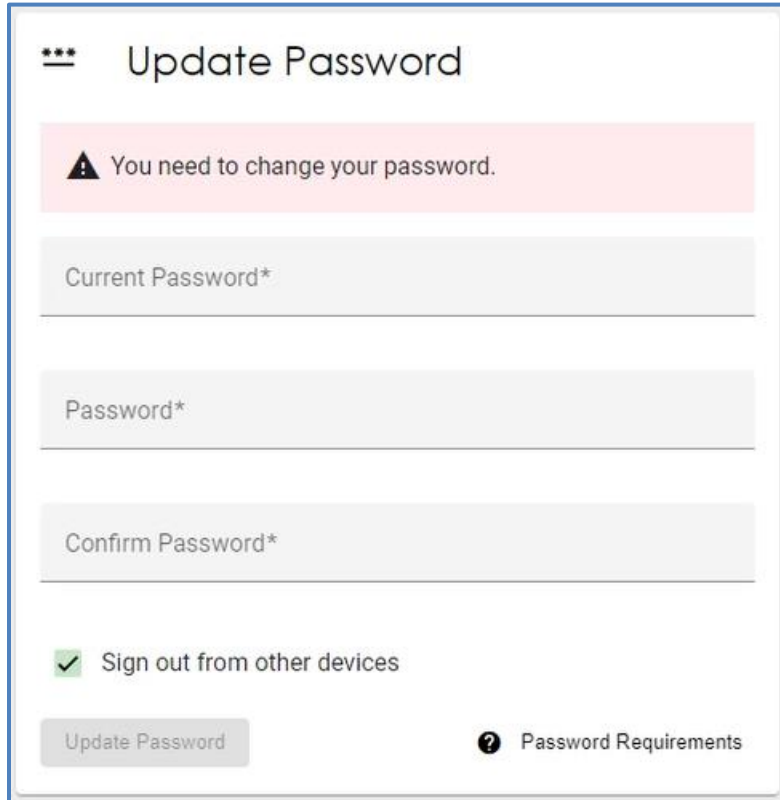
Manage Profile Interface

The 'Manage Profile' interface is divided into two main sections. The left section, titled 'Change Email Address', contains fields for 'Current E-mail' (kim.fresh@rocketmail.com), 'Current Password', 'New E-mail' (kim.fresh@rocketmail.com), and 'Confirm New E-mail'. There is an 'Update Email' button at the bottom. The right section, titled 'Correspondence Preferences', contains a note about the 'Paperless Option' and two radio button options: 'Receive printed notifications via mail' and 'Receive paperless notifications via email'. There is an 'Update Correspondence Preferences' button at the bottom.

- Go to the “Change Password” section.
- Click the “Change My Password” link.

The 'Change Password' section features a lock icon, the title 'Change Password', and a message: 'You will be redirected to the Webfile Authentication system to complete this action.' Below this is a blue link labeled 'Change My Password'.

7. Enter your current password and confirm the new password.



*** Update Password

⚠ You need to change your password.

Current Password*

Password*

Confirm Password*

✓ Sign out from other devices

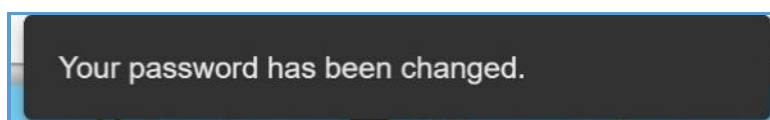
Update Password

? Password Requirements

8. Click the “Update Password” button.



9. A confirmation message will appear.



Questions regarding WebFile processes should be directed to the Commission at 877-664-2566 or please visit workcomp.virginia.gov/webfile/webfile-support and complete a WebFile Support Request.

FORGOT USERNAME

This section covers how to retrieve a forgotten username.



STEPS TO COMPLETE

On the log in screen, you have the option to retrieve your WebFile username.

1. Click on the “Forgot Username” link.

Login

By logging in you agree to the below
WebFile is a Commonwealth of Virginia information system. WebFile usage may be monitored, recorded, and subject to audit consistent with privacy accommodations. Unauthorized use of WebFile is prohibited and subject to criminal and civil penalties. Use of WebFile indicates consent to monitoring and recording.
See [WebFile Terms and Conditions](#) for more information.

Too many invalid attempts. Try again later.

Username*
vwclaimant@hotmail.com

Password*

Required Field

Login [Forgot Username](#)

2. Enter your email address and click the “Submit” button.

A screenshot of a web form titled "Forgot Username". At the top left is a person icon. Below the title is a text input field with the placeholder text "Email*" and a vertical cursor. Below the input field is a grey "Submit" button. To the right of the button is a blue hyperlink that says "Back to Login".

 **Forgot Username**

Email*

Submit [Back to Login](#)

3. A confirmation message will appear and an email will be sent.
4. Retrieve the email from notices_no-reply@workcomp.virginia.gov containing your username.

PASSWORD RESET

This section covers how to reset a password.

BEFORE YOU GET STARTED

Remember the WebFile Password Criteria:

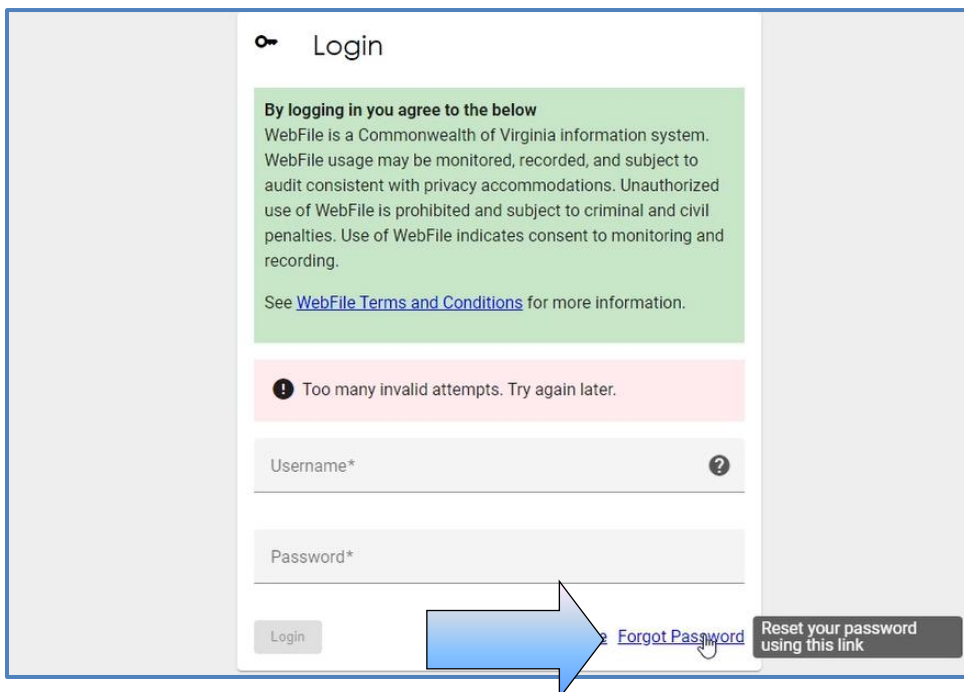
- ✓ May not be any previous 24 passwords.
- ✓ If the password has been updated within the last 24 hours (excluding temporary passwords created by admins), do not allow the user to proceed.
- ✓ Minimum 8 characters.
- ✓ At least one special character (i.e., @, #).
- ✓ At least one digit.
- ✓ At least one lowercase character.
- ✓ Password may not be the same as their e-mail.
- ✓ Password may not be the same as their username.



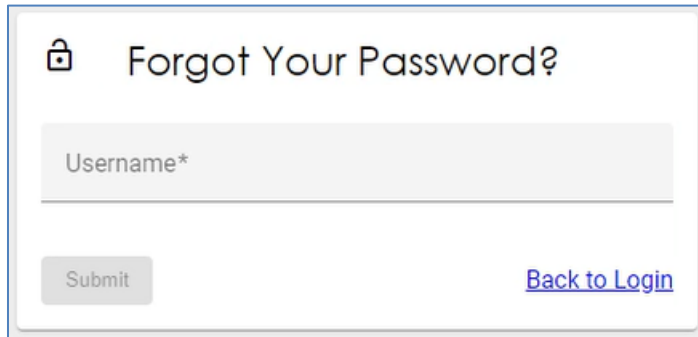
STEPS TO COMPLETE

On the log in screen, you have the option to request a new password.

1. Click on the “Forgot Password” link.



2. Enter your username and click the “Submit” button.

A screenshot of a web form titled "Forgot Your Password?". The form has a light gray background and a blue border. At the top left is a lock icon. Below the title is a text input field labeled "Username*". At the bottom left is a gray "Submit" button. At the bottom right is a blue hyperlink labeled "Back to Login".

Forgot Your Password?

Username*

Submit

[Back to Login](#)

3. A confirmation message will appear and an email will be sent.
4. Retrieve the email from notices_no-reply@workcomp.virginia.gov containing a link to reset your current password. **This link will expire in 15 minutes.** The email could also be in a spam or junk folder.
5. Upon clicking the email link, you will be required to create a new permanent password as outlined in [Change Password](#).

CHANGE EMAIL ADDRESS

This section covers changing an email address after a profile has been created.



STEPS TO COMPLETE

1. Click the menu dropdown in the top right and select “Manage Profile.”
2. Go to the “Change Email Address” section.
3. Enter the current password.
4. Enter and confirm the new email address.
5. Click the “Update Email” button.

The screenshot shows a web form titled "Change Email Address" with a mail icon. It contains the following fields and elements:

- Current E-mail:** kim.fresh@rocketmail.com
- Current Password:** A password field with a star icon and a toggle icon for visibility.
- New E-mail:** A text field containing "newemail@gmail.com".
- Confirm New E-mail:** A text field containing "newemail@gmail.com".
- Update Email:** A blue button at the bottom.

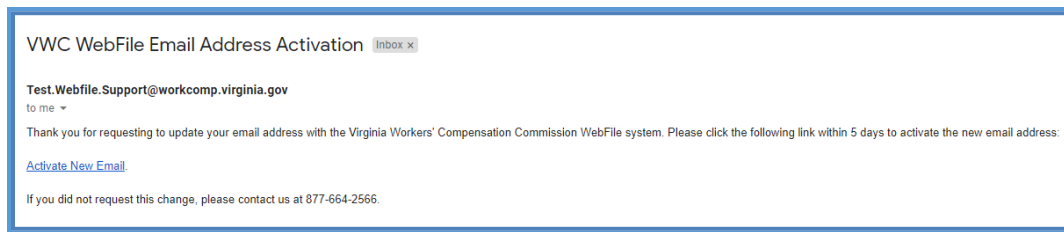
6. A confirmation message will appear and will provide instructions to complete the email change.

The screenshot shows a confirmation message box titled "Change Email Address" with a mail icon. The message text is:

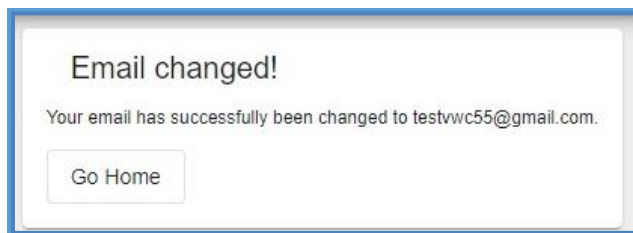
You have requested to change your email address. Please check your email for a link to activate the new email address. Until the link is activated, notifications will continue to be sent to the current email address, which is displayed below.

Current E-mail: webfilelawyer5@yahoo.com

7. Open the email from webfile.support@workcomp.virginia.gov with a subject of “VWC WebFile Email Address Activation.”
8. Click the “Activate New Email” link.



9. Access WebFile and verify that the email address has changed.



Questions regarding WebFile processes should be directed to the Commission at 877-664-2566 or please visit workcomp.virginia.gov/webfile/webfile-support and complete a WebFile Support Request.

FILING A CLAIM WITHOUT A JCN OR PIN

This section covers the procedure for filing a claim before receiving a Jurisdiction Claim Number (JCN) or Personal Identification Number (PIN).

info

BEFORE YOU GET STARTED

Once your injury has been reported you will then receive correspondence that references your JCN and PIN.

Once the Commission creates a JCN you will receive these two letters:



Notification of Injury

This letter contains the Jurisdiction Claim number (JCN) assigned to the claim and also lists the Injury Date.



Claimant PIN for WebFile

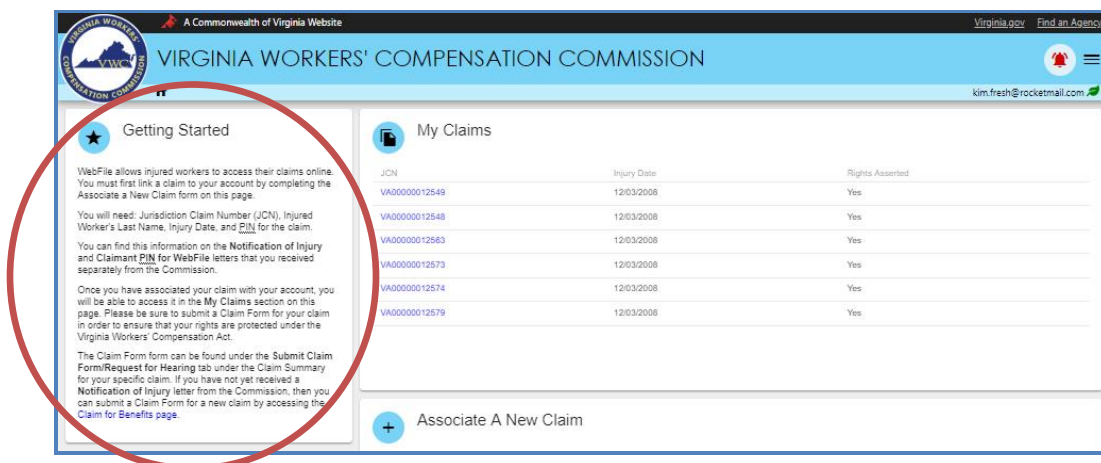
This letter contains a Personal Identification Number (PIN) a claimant will use to access the claim record within WebFile.

Both letters are necessary to validate claimant access to WebFile.

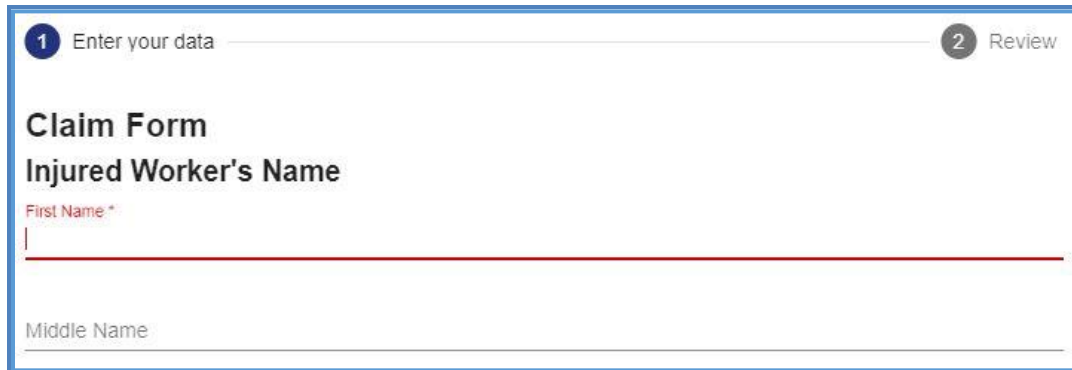


STEPS TO COMPLETE

1. Go to the WebFile website at: webfile.workcomp.virginia.gov.
2. Navigate to the “Getting Started” section.
3. Click the “Claim for Benefits page” hyperlink.

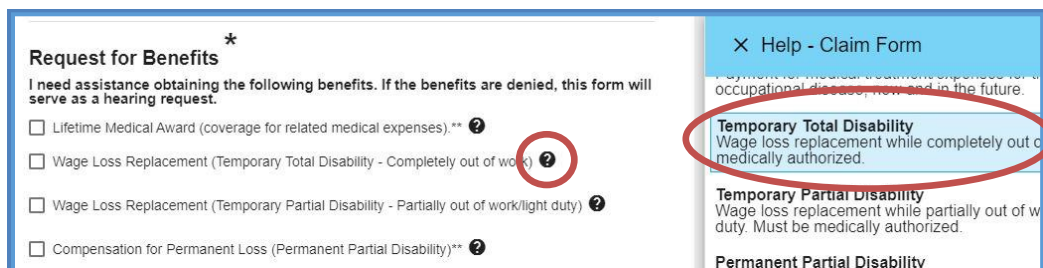
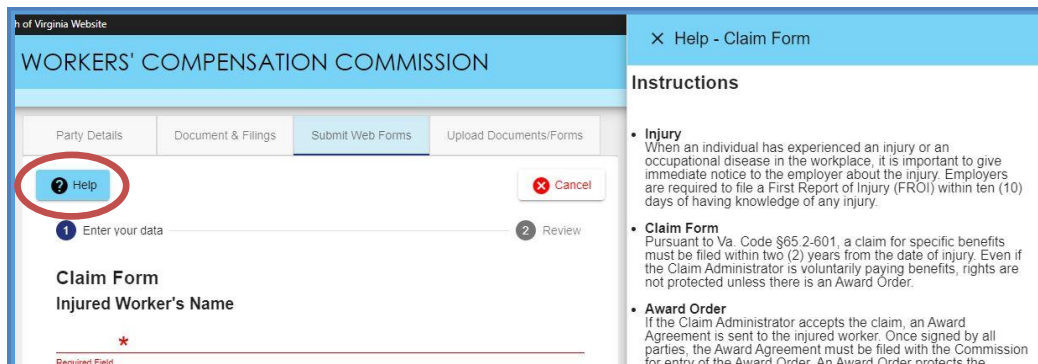


4. Complete the blank fields and make sure all required fields marked with an asterisk (*) are complete.



QUICK TIPS

Click the Help icon (?) to find additional information on how to complete a chosen Web Form.

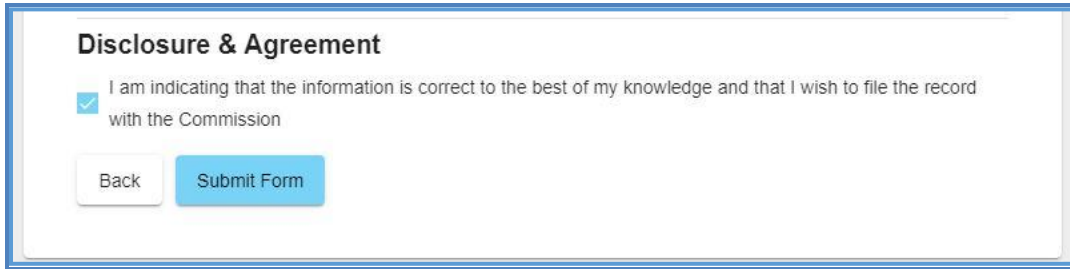


5. Attach supporting PDF documents.

Note: Keep in mind that the total size of PDF attachments cannot exceed 15 MB.

6. Click the “Next” button.
7. Review the content of the Web Form.

8. Read the “Disclosure & Agreement” statement and click the check box to accept.
9. Click the “Submit Form” button.



Disclosure & Agreement

☒ I am indicating that the information is correct to the best of my knowledge and that I wish to file the record with the Commission

10. Review the success message generated by the system.

Note: A Notification of Injury and Claimant PIN for WebFile letter will be mailed out by the Commission after the successful form submission.

- The Notification of Injury letter contains the Jurisdiction Claim number (JCN) assigned to the claim and also lists the injury date.
- The Claimant PIN for WebFile letter contains a Personal Identification Number (PIN) which a claimant will use to access the claim record within WebFile.

ACCESSING A CLAIM

This section covers the procedure for gaining access to your claim information through WebFile. Claims with injury dates prior to *October 1, 2008* are not viewable in WebFile.

BEFORE YOU GET STARTED

An injured worker will receive two letters from the Commission after a claim is established.



Notification of Injury

This letter contains the Jurisdiction Claim number (JCN) assigned to the claim and also lists the Injury Date.



Claimant PIN for WebFile

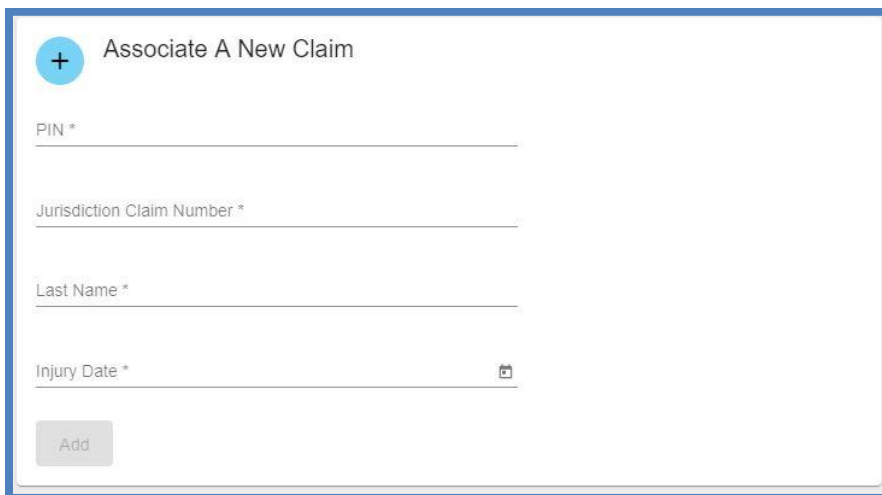
This letter contains a Personal Identification Number (PIN) a claimant will use to access the claim record within WebFile.

Both letters are necessary to validate claimant access to WebFile.



STEPS TO COMPLETE

1. Go to the WebFile website at: webfile.workcomp.virginia.gov.
2. Enter username and password.
3. Click the “Login” button.
4. Navigate to the bottom right of the screen to the “Associate a New Claim” section.



The screenshot shows a web form titled "Associate A New Claim" with a blue plus icon in a circle at the top left. The form contains four text input fields, each with an asterisk indicating it is required: "PIN *", "Jurisdiction Claim Number *", "Last Name *", and "Injury Date *". The "Injury Date" field includes a small calendar icon on the right. At the bottom left of the form is a grey button labeled "Add".

5. If this is the first time a claim has been added to WebFile, enter the following information:
 - a. Personal Identification Number (PIN)
 - b. Jurisdiction Claim Number (JCN)
 - c. Last Name
 - d. Injury Date
6. Click the “Add” button.

Associate A New Claim

PIN *
12345

Jurisdiction Claim Number *
VA00000012549

Last Name *
Last Name

Injury Date *
4/1/2019

Add

7. After the above information has been validated, a JCN link will be visible under the “My Claims” section.
8. Click the JCN link to open the claim.

JCN	Injury Date	Rights Asserted
VA00000012549	12/03/2008	Yes

9. Review the information available.

VIRGINIA WORKERS' COMPENSATION COMMISSION

Claim Summary

Kim Fresh Fresh
VA00000012549

Employee Green Card: 837204711
Claim Administration Claim Number: EW03
Date of Injury: 12/03/2008
Claim Type: Lost Time/Indemnity
Employer: Seasons Restaurant
Insurer: Frank's Insurance Co.
Claim Status Overview
☒ Claim for Benefits Filed

Claimant
Kim Fresh
Employee Green Card: 837204711
Date of Birth: 11/05/4400000
Gender: Male
Address: 9660 Brook Rd, Glen Allen, 23059-4529

Employer
Seasons Restaurant
FEIN: 928605309
Policy Number: AB21131
Mailing Address: 1518 Main St, Clifton Forge, 24422-1904

Claim Administrator
CHAP ADMIN INC
Claim Administrator FEIN: 867530906
Adjuster Name: No Adjuster Specified
Address: 8402 Old Keene Mill Rd, Springfield, Virginia 22152-2302, United States

Insurance Carrier
CHESTER INS CO

Insurance Carrier Designated Representative

Additional Party
Attorney representin WFY

PARTY DETAILS

The Party Details tab is the default view and is pre-selected.

Party Details Interface

The screenshot shows the 'Party Details' tab selected. The left sidebar contains 'Incident Details' and 'Claim Summary' sections. The main content area is divided into three columns: Claimant, Claimant's Attorney (Primary), and Employer's Attorney (Primary). Each column displays contact information for the respective party, including name, law firm, FEIN, address, and email. The Claimant's section also includes a 'Claim Status Overview' with checkboxes for various claim actions.

The chart below lists information available to claimants within the “Party Details” tab.

Incident Details	General information regarding the reported incident such as dates, description and location.
Claimant	The party who sustained an injury or occupational disease on the job.
Employer	The person or entity with control over your work activities.
Claim Administrator	The organization responsible for administering a workers' compensation claims.
Insurance Carrier Designated Representative	Each insurance carrier licensed to write workers' compensation coverage in the Commonwealth of Virginia, each employer certified as a self-insurer by the Virginia Workers' Compensation Commission, and each group association licensed as a self-insurer by the State Corporation Commission is hereby ordered to designate and maintain a representative in Virginia.
Insurance Carrier	A company licensed to write workers' compensation coverage in Virginia.
Additional Parties	Parties to a claim include the injured worker, employer, carrier, claim administrator, and attorneys of record for the injured worker, employer, or carrier. Typically, family members are not considered a party to the claim unless the Commission has authorization from the injured worker. This may also include health care providers who have filed a claim, and their attorneys of record.

*Attorneys that represent both Employer and Insurance Carrier are listed under the “Claim Administrator” section.

VIEW ELECTRONIC NOTIFICATIONS

This section covers the steps for viewing the summary of electronic notifications.



STEPS TO COMPLETE

1. View email announcing electronic notification.

Email Inbox View

<input type="checkbox"/> ☆ WebFileSupport	New Notification - You have received a new notification from the Virginia Workers' Compensation Commission: JCN ..	11:29 am
<input type="checkbox"/> ☆ WebFileSupport (5)	New Notification - You have received a new notification from the Virginia Workers' Compensation Commission: JCN ..	Oct 24
<input type="checkbox"/> ☆ WebFileSupport	New Notification - You have received a new notification from the Virginia Workers' Compensation Commission: JCN ..	Oct 23

Individual Email View

New Notification Inbox | X

☆ WebFileSupport@vwc.state.va.us to me [show details](#) Oct 23 (3 days ago) Reply

You have received a new notification from the Virginia Workers' Compensation Commission:
JCN: VA00000009092
You can view this notification by logging into the commission's WebFile system at <https://webfile.workcomp.virginia.gov/portal/vwc-portal?doLoginDialog=1>.
Virginia Workers' Compensation Commission

2. Click the link in your email from WebFile Support to view the new notification.
3. Log in to WebFile.

BEFORE YOU GET STARTED





Notification Icon

This icon is where all notifications for your claims are housed.



New Notification Icon

This icon indicates you have a new notification.

4. Click the alert icon ( if the notifications are old,  if the notifications are new) in the top right.



Getting Started

WebFile allows injured workers to access their claims online. You must first link a claim to your account by completing the Associate a New Claim form on this page.

You will need: Jurisdiction Claim Number (JCN), Injured Worker's Last Name, Injury Date, and PIN for the claim.

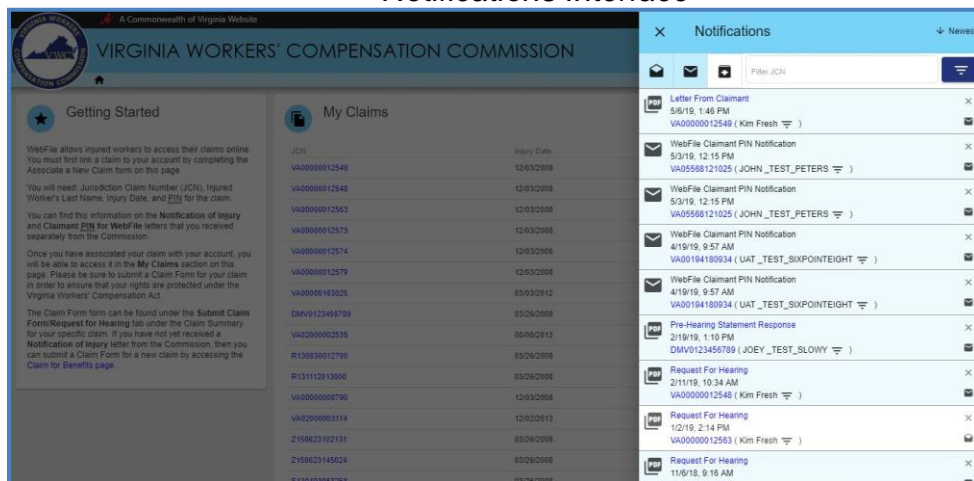
You can find this information on the Notification of Injury and Claimant PIN for WebFile letters that you received separately from the Commission.

Once you have associated your claim with your account, you will be able to access it in the My Claims section on this page.

My Claims

JCN	Injury Date	Rights Asserted
VA00000012549	12/03/2008	Yes
VA00000012548	12/03/2008	Yes
VA00000012563	12/03/2008	Yes
VA00000012573	12/03/2008	Yes
VA00000012574	12/03/2008	Yes

Notifications Interface



Getting Started

WebFile allows injured workers to access their claims online. You must first link a claim to your account by completing the Associate a New Claim form on this page.

You will need: Jurisdiction Claim Number (JCN), Injured Worker's Last Name, Injury Date, and PIN for the claim.

You can find this information on the Notification of Injury and Claimant PIN for WebFile letters that you received separately from the Commission.

Once you have associated your claim with your account, you will be able to access it in the My Claims section on this page. Please be sure to submit a Claim Form for your claim in order to ensure that your rights are protected under the Virginia Workers' Compensation Act.

The Claim Form can be found under the Subnet Claim Form/Request for Hearing tab under the Claim Summary for your specific claim. If you have not yet received a Notification of Injury letter from the Commission, then you can submit a Claim Form for a new claim by accessing the Claim for Benefits page.

My Claims

JCN	Injury Date
VA00000012549	12/03/2008
VA00000012548	12/03/2008
VA00000012563	12/03/2008
VA00000012573	12/03/2008
VA00000012574	12/03/2008
VA00000012579	03/03/2012
DMV0123456789	03/26/2008
VA02000002535	06/06/2013
R130630012760	03/26/2008
R131112013600	03/26/2008
VA00000008790	12/03/2008
VA02000003114	12/03/2013
2150623102131	03/26/2008
2150623145024	03/26/2008
R130630012760	03/26/2008

Notifications

Filter JCN

- Letter From Claimant
5/6/19, 1:46 PM
VA00000012549 (Kim Fresh)
- WebFile Claimant PIN Notification
5/3/19, 12:15 PM
VA05568121025 (JOHN_TEST_PETERS)
- WebFile Claimant PIN Notification
5/3/19, 12:15 PM
VA05568121025 (JOHN_TEST_PETERS)
- WebFile Claimant PIN Notification
4/19/19, 9:57 AM
VA00194180934 (UAT_TEST_SIXPOINTEIGHT)
- WebFile Claimant PIN Notification
4/19/19, 9:57 AM
VA00194180934 (UAT_TEST_SIXPOINTEIGHT)
- Pre-Hearing Statement Response
2/11/19, 1:10 PM
DMV0123456789 (JOEY_TEST_SLOWY)
- Request For Hearing
2/11/19, 10:34 AM
VA00000012548 (Kim Fresh)
- Request For Hearing
1/2/19, 2:14 PM
VA00000012563 (Kim Fresh)
- Request For Hearing
11/6/18, 9:16 AM
VA00000012548 (Kim Fresh)



QUICK TIPS

The Notifications Interface contains the list of all notifications received over the past two years.

5. Review the list of notifications.
 - a. Click on the document type to view a document
 - b. Click the Jurisdiction Claim Number link to view the claim associated with the notification.



CHANGE A NOTIFICATION STATUS

Once a notification is viewed, the system automatically changes it to “Read” status. The status can be changed to “Unread” or “Archive” at any time.

Options to change the status:

- a. Clicking the “x” icon will “archive” the notification.
- b. Clicking the unopened mail icon (✉) will mark the notification as “read.”
- c. Clicking the opened mail icon (📧) will mark the notification as “unread.”

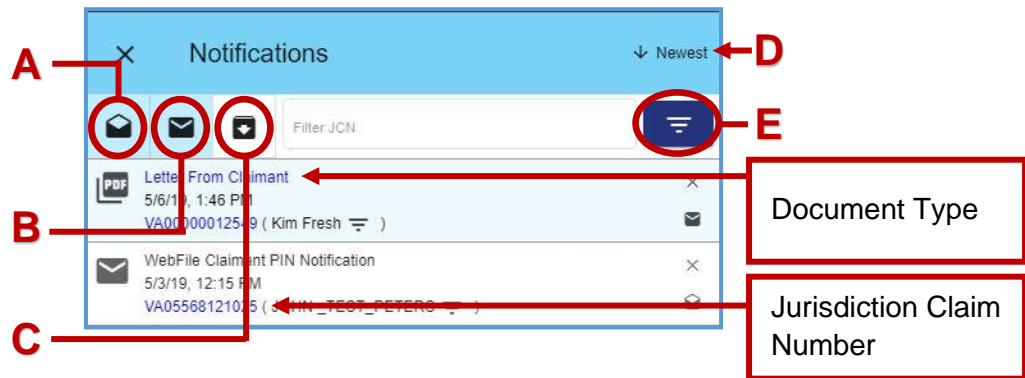







QUICK TIPS

As the list of notifications grows over time, users are encouraged to use the archived folder option. Click the “x” icon to the right of the notification you wish to archive.

NOTIFICATION VIEW CUSTOMIZATION

Here are some options that may make it easier to view notifications.



- A. **View Read ()**: Clicking the “**View Read**” toggle with display **only** “read” notifications.
- B. **View Unread ()**: Clicking the “**View Unread**” toggle with display **only** “unread” notifications.
- C. **View Archived ()**: Clicking the “**View Archived**” toggle with display **only** “archived” notifications.
- D. **Sort Button ()**: displays events in ascending or descending order.
- E. **Filters ()**: Typing in the “Filter JCN” field can be used to display certain notifications on the claim associated with the JCN searched.



QUICK TIPS

Multiple toggles can be selected at once. To return to the standard view, be sure to unselect all toggles.

DOCUMENT & FILINGS

The “Document & Filings” tab allows claimants to view documents and upload filings associated with a claim.



STEPS TO COMPLETE

1. Log in to WebFile.
2. Navigate to the “My Claims” section.

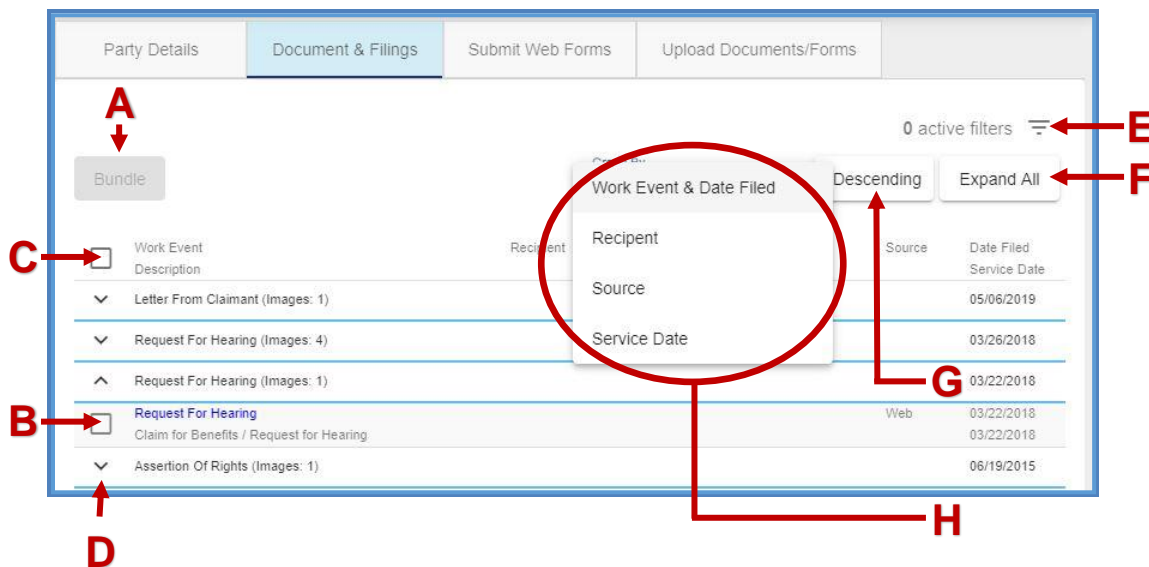
JCN	Injury Date	Rights Asserted
VA00000012549	12/03/2008	Yes
VA00000012548	12/03/2008	Yes
VA00000012563	12/03/2008	Yes
VA00000012573	12/03/2008	Yes
VA00000012574	12/03/2008	Yes
VA00000012579	12/03/2008	Yes

3. Click on the desired JCN.
4. Select the “Document & Filings” tab.

Work Event	Recipient	Source	Date Filed/Service Date
Letter From Claimant (Images: 1)			05/06/2019
Request For Hearing (Images: 4)			03/26/2018
Request For Hearing (Images: 1)			03/22/2018
Assertion Of Rights (Images: 1)			06/19/2015
Acknowledgment of Filing - Claimant (Images: 3)			06/19/2015
Acknowledgment of Filing (Images: 7)			06/19/2015
Request For Hearing (Images: 1)			03/10/2014
Claim for COLA Rejected - Combined (Images: 19)			12/03/2013

DOCUMENT & FILINGS VIEW CUSTOMIZATION

Here are some options that may make it easier to view documents and filings.



- A. **Bundle Button:** creates a PDF combining all selected work events.
- B. **Check Toggle:** select/deselect a work event.
- C. **Check/Uncheck All Toggle:** selects/deselects all work events.
- D. **Expand:** displays the selected work event details.
- E. **Filter Button (≡):** displays fields that can be used to narrow view details.

Filter Interface

The 'Filter Interface' shows a form with the following fields:

- Work Event
- Recipient
- Description
- Service Date (Before) [calendar icon]
- Service Date (On) [calendar icon]
- Service Date (After) [calendar icon]
- Date Filed (Before) [calendar icon]
- Date Filed (After) [calendar icon]

 At the bottom right are 'Apply' and 'Clear' buttons.

- F. **Expand/Collapse All Button:** displays all work event details.
- G. **Sort Button:** displays events in ascending or descending order.
- H. **Group By Button:** displays the selected work event details.

SUBMITTING A CLAIM FORM/REQUEST FOR HEARING

This section covers the online submission of the Claim Form. The injured worker should submit a Claim Form to the Commission as soon as possible. If you are requesting a hearing, you must file medical reports supporting your request with the Commission.

IMPORTANT



Even if you have been paid by your employer or claim administrator for time missed from work because of your injury or for medical treatment for your injury, you should file a claim with the VWC to protect your right to benefits under Virginia Law.



STEPS TO COMPLETE

1. Log in to WebFile.
2. Navigate to the “My Claims” section. Notice that the JCN does not have a Claim for Benefits associated and there is an alert message.

JCN	Injury Date	Rights Asserted
VA00194180934	04/01/2019	No (Assert)
VA05568121025	03/26/2017	No (Assert)
VA00000012549	12/03/2008	Yes

3. If an injury has been reported to the Commission, initiate a Claim Form submission by clicking on the “Assert” link in the “My Claims” section.

VA00194180934	04/01/2019	No (Assert)
VA05568121025	03/26/2017	No (Assert)

4. Choose "Claim Form" from the "Submit Web Forms" tab.

The screenshot shows a web interface with four tabs: "Party Details", "Document & Filings", "Submit Web Forms" (which is selected and highlighted in blue), and "Upload Documents/Forms". Below the tabs is a section titled "Select a Web Form". Under this title, there is a list of form types: "Claim Form", "Pre-Hearing Statement - Claimant's Claim", "Pre-Hearing Statement - Employer's App", "Pre-Hearing Statement - Medical Provider's App", and "Request for Mediation". The "Claim Form" option is highlighted with a light gray background.

5. Complete the blank fields and make sure all required fields marked with an asterisk (*) are complete.

The screenshot shows the "Claim Form" submission page. At the top left is a blue "Help" button with a question mark icon. At the top right is a red "Cancel" button with an 'X' icon. Below these buttons is a progress bar with two steps: "1 Enter your data" (active) and "2 Review". The main heading is "Claim Form". Below it is the section "Injured Worker's Name". There are four input fields: "First Name *" with the value "Kim", "Middle Name" with the value "L", "Last Name *" with the value "Fresh", and "Suffix (Sr, Jr, etc)". The asterisk (*) indicates required fields.



QUICK TIPS

Click the Help icon (?) to find additional information on how to complete a chosen Web Form.

6. Attach supporting non-encrypted PDF documents.

Note: Keep in mind that the total size of PDF attachments cannot exceed 15 MB.

7. Click the “Next” button.

Supporting Documents

You can attach documents that support your request here. Your request will be processed more quickly if you attach them now. If you are unable to attach them now, please go ahead and file your claim and mail the supporting documents to the Commission at 333 E Franklin St, Richmond, VA 23219, and write your Jurisdiction Claim Number, or JCN, on the top of the first page. Please contact the Commission at 877-664-2566 if you need assistance.

Supporting documents may include medical treatment records, work excuse slips, and job search lists if you are partially disabled. Please do not submit billing records or doctors invoices.

VA00000012549 Request For Hearing.pdf

Choose a non-encrypted PDF

Upload PDF

Choose a non-encrypted PDF

Upload PDF

Choose a non-encrypted PDF

Upload PDF

Choose a non-encrypted PDF

Upload PDF

Choose a non-encrypted PDF

8. Review the content of the Claim Form.
9. Click the Disclosure & Agreement Form box.
10. Click the “Submit” button.

Disclosure & Agreement

☒ I am indicating that the information is correct to the best of my knowledge and that I wish to file the record with the Commission

11. Confirmation note will be displayed.

Your submission was successful!

Your Claim Form submission was received, please refer to the "Documents & Filings" panel to confirm that the form has been added.

You can review the form submitted to the Commission immediately by clicking [here](#).

SUBMIT WEB FORMS

This section covers the process for submitting a new filing via a Web Form. This filing creates and posts a new PDF document to the record.



STEPS TO COMPLETE

1. Log in to WebFile.
2. Navigate to the “My Claims” section.
3. Click on the desired JCN.

JCN	Injury Date	Rights Asserted
VA00000012549	12/03/2008	Yes

4. Select the “Submit Web Forms” tab.

Party Details | Document & Filings | **Submit Web Forms** | Upload Documents/Forms

Select a Web Form

Form Type ▼

5. Choose the Web Form from the drop down menu.

Party Details | Document & Filings | **Submit Web Forms** | Upload Documents/Forms

Select a Web Form

Form Type ▼

- Claim Form
- Pre-Hearing Statement - Claimant's Claim
- Pre-Hearing Statement - Employer's App
- Pre-Hearing Statement - Medical Provider's App
- Request for Mediation

6. Complete the blank fields and make sure all required fields marked with an asterisk (*) are complete.

1 Enter your data 2 Review

Claim Form

Injured Worker's Name

First Name *

Middle Name



QUICK TIPS

Click the Help icon (?) to find additional information on how to complete a chosen Web Form.

WORKERS' COMPENSATION COMMISSION

Party Details Document & Filings Submit Web Forms Upload Documents/Forms

Help Cancel

1 Enter your data 2 Review

Claim Form

Injured Worker's Name

*

Required Field

Help - Claim Form

Instructions

- Injury**
When an individual has experienced an injury or an occupational disease in the workplace, it is important to give immediate notice to the employer about the injury. Employers are required to file a First Report of Injury (FROI) within ten (10) days of having knowledge of any injury.
- Claim Form**
Pursuant to Va. Code §65.2-601, a claim for specific benefits must be filed within two (2) years from the date of injury. Even if the Claim Administrator is voluntarily paying benefits, rights are not protected unless there is an Award Order.
- Award Order**
If the Claim Administrator accepts the claim, an Award Agreement is sent to the injured worker. Once signed by all parties, the Award Agreement must be filed with the Commission for entry of the Award Order. An Award Order protects the

Request for Benefits *

I need assistance obtaining the following benefits. If the benefits are denied, this form will serve as a hearing request.

☐ Lifetime Medical Award (coverage for related medical expenses)** ?

☐ Wage Loss Replacement (Temporary Total Disability - Completely out of work) ?

☐ Wage Loss Replacement (Temporary Partial Disability - Partially out of work/light duty) ?

☐ Compensation for Permanent Loss (Permanent Partial Disability)** ?

Help - Claim Form

Temporary Total Disability

Wage loss replacement while completely out of work and medically authorized.

Temporary Partial Disability

Wage loss replacement while partially out of work and medically authorized. Must be medically authorized.

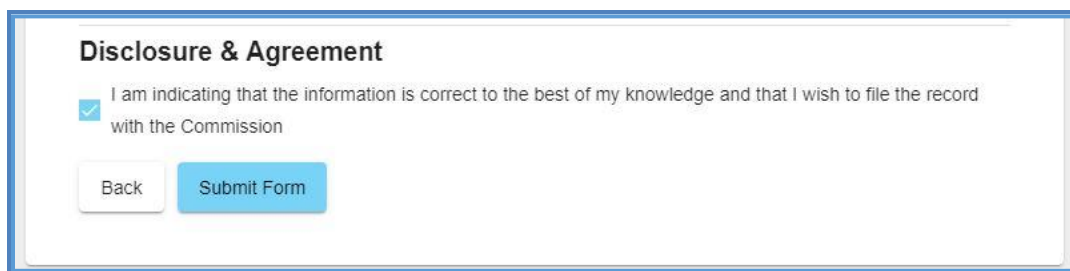
Permanent Partial Disability

7. Attach supporting PDF documents.

Note: Keep in mind that the total size of PDF attachments cannot exceed 15 MB.

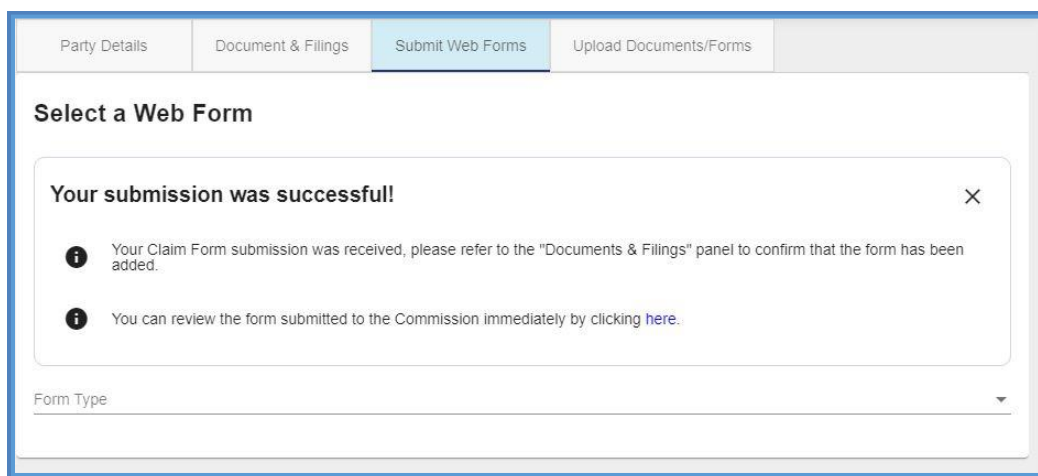
8. Click the “Next” button.
9. Review the content of the Web Form.

10. Read the “Disclosure & Agreement” statement and click the check box to accept.
11. Click the “Submit Form” button.



The screenshot shows a form titled "Disclosure & Agreement". It contains a checkbox that is checked, with the text "I am indicating that the information is correct to the best of my knowledge and that I wish to file the record with the Commission". Below the checkbox are two buttons: "Back" and "Submit Form".

12. Review the success message generated by the system.



The screenshot shows a web interface with a navigation bar at the top containing "Party Details", "Document & Filings", "Submit Web Forms" (which is highlighted), and "Upload Documents/Forms". Below the navigation bar is a section titled "Select a Web Form". Inside this section is a success message box that says "Your submission was successful!" and includes two informational messages: "Your Claim Form submission was received, please refer to the 'Documents & Filings' panel to confirm that the form has been added." and "You can review the form submitted to the Commission immediately by clicking [here](#)." Below the success message is a "Form Type" dropdown menu.

13. Verify that a new PDF has been added to the record by selecting the link in the success message to open the PDF.



QUICK TIPS

Clicking on the “Documents & Filings” tab and then selecting the appropriate link will also open the submitted web form.

UPLOADING DOCUMENTS TO A CLAIM

This section covers the steps for uploading PDF documents to a claim record. WebFile can only accept documents in PDF format.

BEFORE YOU GET STARTED

Remember the **WebFile** Password Criteria:

- ✓ Document to be saved in PDF format.
- ✓ Document must be non-encrypted PDF.
- ✓ The total size of PDF attachments cannot exceed 15 MB.

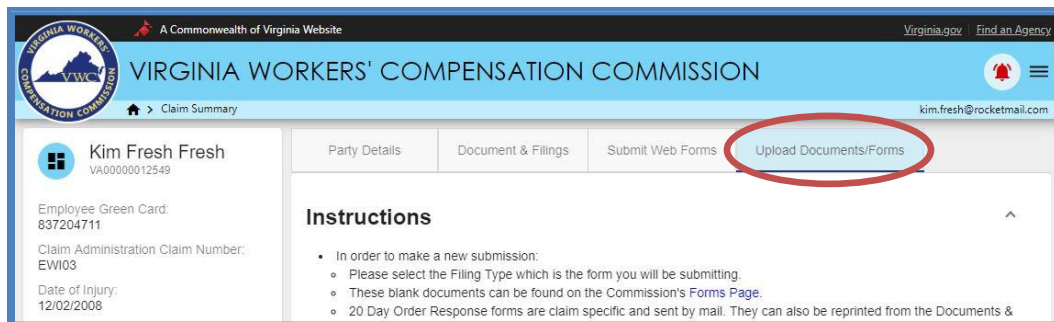
STEPS TO COMPLETE

1. Log in to WebFile.
2. Navigate to the “My Claims” section.
3. Click on the desired JCN.



JCN	Injury Date	Rights Asserted
VA00000012549	12/03/2008	Yes
VA00000012548	12/03/2008	Yes
VA00000012563	12/03/2008	Yes

4. Select the “Upload Documents/Forms” tab.
5. Review the “Instructions” section.



VIRGINIA WORKERS' COMPENSATION COMMISSION

Claim Summary

Kim Fresh Fresh
VA00000012549

Employee Green Card:
837204711

Claim Administration Claim Number:
EW103

Date of Injury:
12/02/2008

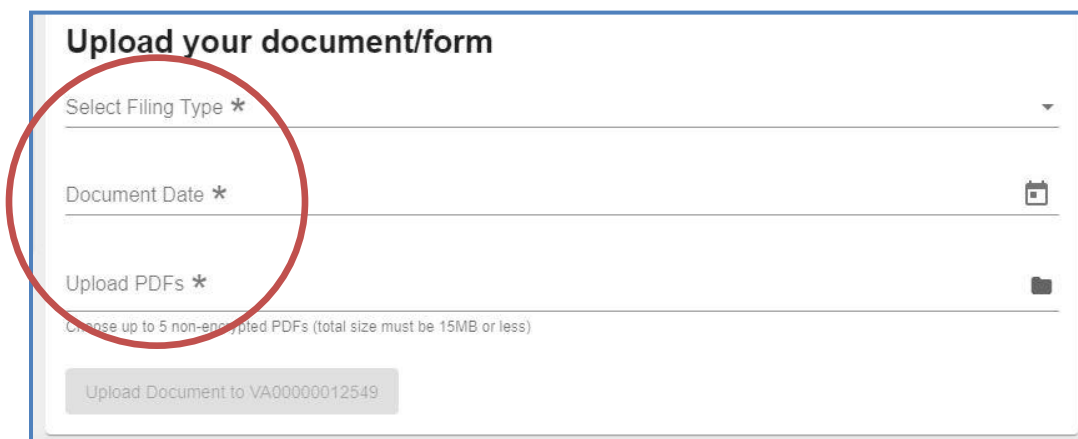
Party Details | Document & Filings | Submit Web Forms | **Upload Documents/Forms**

Instructions

- In order to make a new submission:
 - Please select the Filing Type which is the form you will be submitting.
 - These blank documents can be found on the Commission's Forms Page.
 - 20 Day Order Response forms are claim specific and sent by mail. They can also be reprinted from the Documents &

6. Navigate to the “Upload your document/form” section, which is lower on the page.

7. There are three required areas to be completed.



Upload your document/form

Select Filing Type *

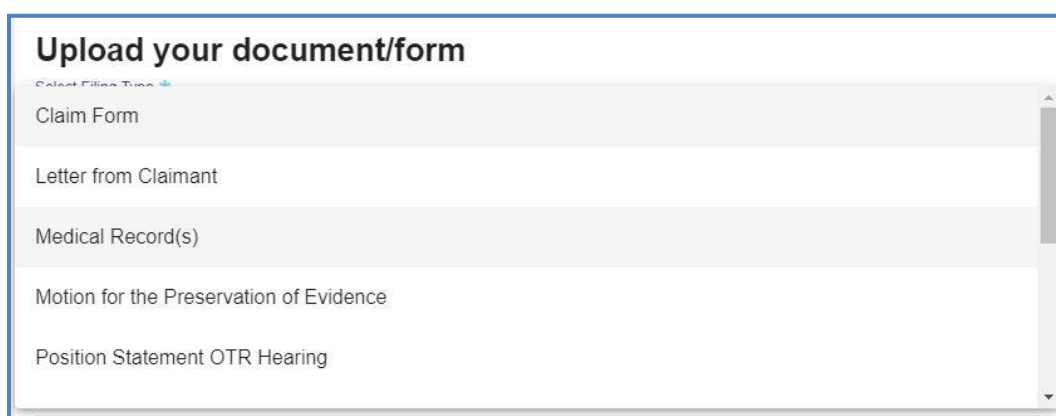
Document Date *

Upload PDFs *

Choose up to 5 non-encrypted PDFs (total size must be 15MB or less)

Upload Document to VA00000012549

8. Select the “Filing Type” that is being uploaded.



Upload your document/form

Select Filing Type

Claim Form

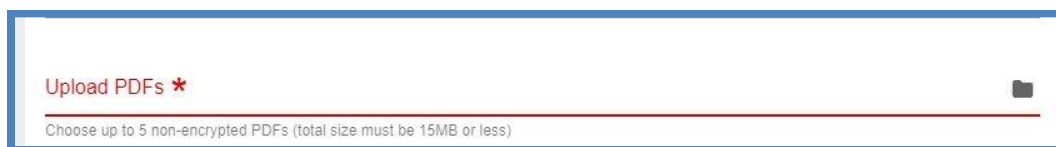
Letter from Claimant

Medical Record(s)

Motion for the Preservation of Evidence

Position Statement OTR Hearing

9. In the “Document Date” field, type or select the correct date by clicking the calendar icon.
10. Click the “Upload PDFs” button to locate the document. The total size of PDF attachments cannot exceed 15 MB.



Upload PDFs *

Choose up to 5 non-encrypted PDFs (total size must be 15MB or less)

11. Check box to signify copies of the document(s) have been sent to all parties.

12. Check box to certify signatures.
13. Click the “Upload Document” button.

☒ I hereby certify that copies of the document(s) have been sent to all applicable non-electronic recipients as identified in the list above.

☒ I certify that the document(s) uploaded do not contain ADR confidential information.

Upload Document to VA00000012549

14. Confirm the successful upload by reviewing the “Documents & Filings” tab.

The screenshot shows the Virginia Workers' Compensation Commission (VWC) web portal. The user is logged in as 'kim.fresh@rocketmail.com'. The page is titled 'TESTING YYPULDKOFPTXDE' with ID 'VA02000002535'. The 'Document & Filings' tab is selected, showing a list of documents. The 'Request For Hearing' document is circled in red.

Work Event Description	Recipient	Source	Date Filed/Service Date
Request For Hearing (Check: 1)			07/19/2018
Request For Hearing		Web	07/19/2018
Request For Hearing			07/19/2018

MEDICAL RECORDS

Medical Records are uploaded in a similar fashion as other claim related documents.

There are a four requirements when uploading Medical Records into WebFile.

1. Select “Medical Record(s)” as the Filing Type.
2. The “Name of Provider” field allows for free-form text, up to 50 characters, which can be used for clarifying descriptions. Example: “Dr. Wilson Medical Records, March 1 – March 10, 2015.”
3. The “Document Date,” enter the date of service with the medical provider. If there is more than one day, please enter the last date within the range of time.
4. Click the “Upload PDFs” button to locate the document. The total size of PDF attachments cannot exceed 15 MB.

The screenshot shows a web form titled "Upload your document/form". It contains the following fields and elements:

- Select Filing Type ***: A dropdown menu with "Medical Record(s)" selected.
- Name of Provider ***: A text input field containing "Medical Provider Name".
- Document Date ***: A date input field showing "5/15/2019" with a calendar icon.
- File Selection**: A section showing a file named "vwc-VA00001038211-RequestForHearing (5).pdf" with a folder icon.
- Instructions**: "Choose up to 5 non-encrypted PDFs (total size must be 15MB or less)".
- Certification 1**: A checked checkbox followed by the text "I hereby certify that copies of the document(s) have been sent to all applicable non-electronic recipients as identified in the list above."
- Certification 2**: A checked checkbox followed by the text "I certify that the document(s) uploaded do not contain ADR confidential information."
- Submit Button**: A blue button labeled "Upload Document to VA00000012549".

IMPORTANT




WebFile automatically indicates today's date under the "Date Filed" column viewable from the "Documents & Filings tab once the record is uploaded.

PAPERLESS OPTIONS

This section covers options regarding the WebFile Paperless feature. Those who elect Paperless will only receive electronic notifications from the Commission. Paper copies of notices and filings will not be sent to users that elect Paperless.

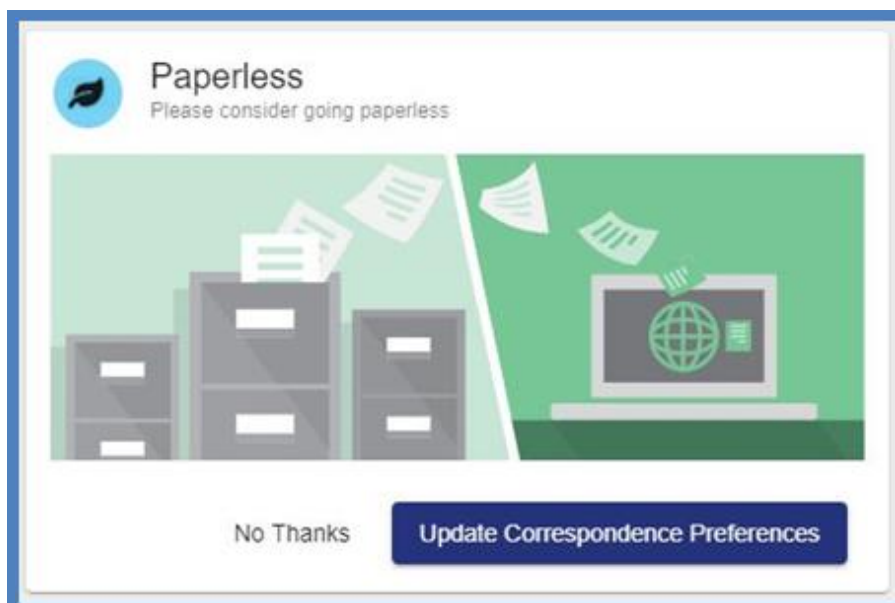
BEFORE YOU GET STARTED

- ✓ *Paperless Option can only be changed once per calendar day.*
- ✓ *People that elect Paperless will appear with the  icon.*

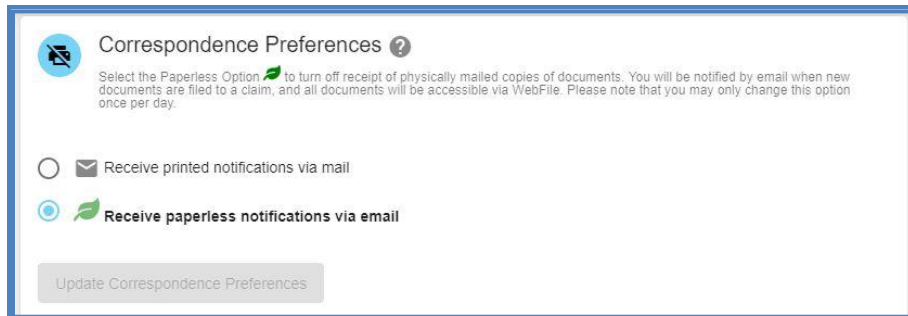
ELECTING PAPERLESS

STEPS TO COMPLETE

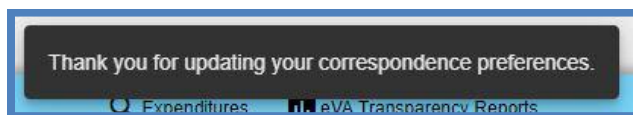
1. Log in to WebFile.
2. If you have not enrolled in paperless, a paperless notification will pop-up.
3. Click the “Update Correspondence preferences” button.



4. Select the “Receive paperless notifications via email.”
5. Click the “Update Correspondence Preferences” button.



6. Confirmation message will appear.



OPT OUT OF PAPERLESS



STEPS TO COMPLETE

1. Click the menu dropdown in the top right and select “Manage Profile.”
2. Go to the “Correspondence Preferences” section.
3. Select the “Receive printed notifications via mail” option.
4. Click the “Update Correspondence Preferences” button.

WebFile SUPPORT

WebFile Support pertains directly to WebFile accounts, transactions, and errors. WebFile users can find answers and solutions to common issues such as creating or unlocking a WebFile account and viewing or managing a claim.

[Click here to use the interactive WebFile Support tool.](#)

WebFile Support

If you are still having issues, or have additional questions after using the WebFile Support tool, please visit workcomp.virginia.gov/webfile/webfile-support-request and complete a WebFile Support Request.

