

AGENCY UPDATE FORMS

A guide to completing
forms for updating
Agency information,
Case Manager details
and CIS access



Australian Government

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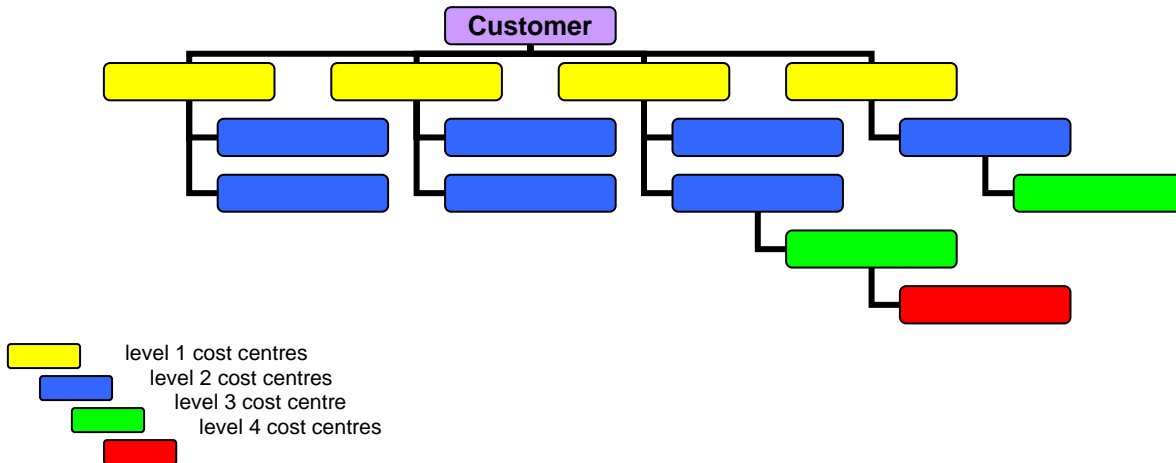
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Creating your Customer Structure

To allow Comcare to register and manage worker's compensation claims for your agency, we need to establish a Customer Structure within our workers' compensation database.

A Customer structure consists of Cost Centres, allowing employers to register claims against meaningful business areas, such as states, branches or sections. This enables Employers to devolve the costs of their claims down to a granular level and to assist with reporting on a large number of claims.

A Customer structure can have up to 4 levels of Cost Centres, and may look like the following:



There are three different types of Cost Centres:

Liable Cost Centre - This is the business area the injured employee was attached to when their compensable injury or illness occurred. Reference is made to this Cost Centre at question 13 under part 2 of the Claim for Workers' Compensation Form SRC16.

Various documentation concerning the claims within this Cost Centre will be directed to the contact of this cost centre. All Liable Cost Centres must be linked to a Payroll Cost Centre. Liable Cost Centres may also be Payroll and/or Cheque Receiving if the contact is to be the same.

Payroll Cost Centre -This is the Cost Centre the injured employee is currently being paid from. Reference is made to this Cost Centre at question 17 of the Claim for Workers' Compensation SRC16. This Cost Centre may change as the employee moves within a department or even between departments.

Various reports relating to incapacity determinations and payments may be sent to the contact of this Cost Centre by Comcare. All Payroll Cost Centres must be linked to a Cheque Receiving Cost Centre. Payroll Cost Centres may also be Liable and/or Cheque Receiving if the contact is to be the same.

Cheque Receiving Cost Centre – The contact on this Cost Centre will receive incapacity reimbursement cheques and incapacity remittance advices. If your agency uses Electronic Funds Transfer (EFT) (Comcare's recommended mode of payment), the bank account details will be attached to this Cost Centre. All EFT accounts must be linked to a Cheque Receiving Cost Centre. Cheque Receiving Cost Centres may also be Liable and/or Payroll if the contact is to be the same.

Creating and Maintaining Customer Records

Form to use: Comcare New Customer Creation Form.

When creating or maintaining a customer record, there are some key details about your agency that Comcare requires.

This form can be used for both creating and updating a customer record. The following table provides some guidance as to the information that you will need to provide to complete this form:

Customer name	This is the full name of your Agency.
Customer short name	Abbreviated name for your Agency. This is used to quickly locate your agency within Comcare's internal systems, however this field is not mandatory.
Portfolio	Ministerial Portfolio that the new Agency falls under (if known).
Parent Customer	The name of the Agency who will be paying the Comcare premium for the Agency (if applicable).
Cheque addressee	The payee name to be printed on incapacity reimbursement cheques for the new Customer (usually the same as the Agency name).
Contact name	Name of the nominated contact person who will receive various reports relating to claims history for the Agency including- <ul style="list-style-type: none"> ▪ Claim profile report ▪ High cost claims reports ▪ Non-Incapacity payment reports ▪ Cancelled cheque reports This person may also be used as a first point of contact for compensation and premium issues.
Contact position	The position that the nominated contact person holds within the agency.
Contact details	<ul style="list-style-type: none"> ▪ Phone ▪ Fax ▪ Email Please provide all three contact methods if available, including area codes for Phone and Fax.
Address Mail and Actual	This is both the actual address where the nominated contact person is located, and a mailing address for correspondence. If they are the same, 'As above' can be written for Mail Address.

Cost Centre Creation or Update

Form to use: Cost Centre Update Form

This form is used when creating or updating a Cost Centre. The following table provides a description of the fields on the form that you will need to complete, and guidance on completing them.

Note: A single Cost Centre can be created which is Cheque Receiving, Payroll and Liable if the contact for all is the same.

Agency	The Agency the Cost Centre is to be created or amended for (your Agency).
Customer number	Comcare's Customer number for the agency (if known).
Cost Centre name	Name of New Cost Centre (max 31 characters).
Cost Centre short name	Abbreviated name for Cost Centre (max 9 characters).
Customer reference	Comcare will assign a Cost Centre number, however the Agency may have an internal reference for the new Cost Centre by which to identify it (not mandatory).
Cost Centre Contact	Name of the nominated contact person who will receive various reports relating to claims, incapacity and payments for the Agency.
Contact details	<ul style="list-style-type: none"> ▪ Phone ▪ Fax ▪ Email <p>Please provide all three contact methods if available, including area codes for Phone and Fax.</p>
Address Mail and Actual	<p>This is both the actual address where the nominated contact person is located, and a mailing address for correspondence.</p> <p>If they are the same, 'As above' can be written for Mail Address.</p>
Payroll tick box	<p>Tick this box if the Cost Centre is to be a Payroll Cost Centre.</p> <p>Incapacity payment authorities will be sent to this Cost Centre contact. All Payroll Cost Centres must be linked to a Cheque Receiving Cost Centre (see Cheque Receiving Cost Centre below).</p>
Cheque Receiving tick box	<p>Tick this box if the Cost Centre is to be a Cheque Receiving Cost Centre. Incapacity Cheques and remittance advice reports will be sent to this Cost Centre contact.</p>
Liable tick box	<p>Tick this box if the Cost Centre is to be a Liable Cost Centre. Liability letters may go to this Cost Centre contact.</p>
Cheque Receiving Cost Centre	<p>All Payroll Cost Centres must be linked to a Cheque Receiving Cost Centre (where incapacity cheques/remittance advice reports will be sent). Please indicate which Cheque Receiving Cost Centre this Payroll Cost Centre is to be linked to.</p>
Incapacity report format	<p>Indicate if you require single or multiple claimants per page on this report.</p>
Payment term	<p>Select the frequency you would like your incapacity payments made.</p>

Creating or updating a Case Manager Record

Form to use: Case Manager Update

Compensation claims are assigned to Case Managers within an agency, for the ongoing rehabilitation and/or management of the claim. They will receive various items of correspondence and reports from Comcare relating to the claims they are managing.

Please note many agencies have their own procedures that need to be followed before a case manager can be created. We advise that you check with the relevant authority within your own agency before completing the "Case Manager Update" form.

The following table provides a description of the fields on the form, and guidance on completing them.

Agency	Name of the Agency the Case Manager is to be assigned to.
Customer Number	Comcare's Customer number for the agency (if known).
Case Manager name	Name of the Case Manager to be created or amended.
Case Manager Position	The position the nominated Case Manager holds within the agency.
Contact details	<ul style="list-style-type: none"> ▪ Phone ▪ Fax ▪ Mobile ▪ Email <p>Please provide all four contact methods if available, including area codes for Phone and Fax.</p>
Address	Please provide a mailing address for correspondence.
Delegation authority	This field is used to Indicate if the new Case Manager has authority to sign forms on behalf of the agency.
Previous Case Manager name	<p>This field should be completed where a new/existing Case Manager will be replacing an existing one. Name of the Case Manager they are replacing (if applicable).</p> <p>All claims still assigned to the existing Case Manager will be transferred to the new Case Manager. If the existing Case Manager is no longer working with the Agency, their Comcare account will also be deactivated.</p>
Requesting Officer Details	Name, signature and title of the Agency employee requesting the Case Manager record creation/amendment.

Requesting access to the Customer Information System (CIS)

Form to use: CIS Access Request Form

When requesting access to CIS, the “CIS Access Request Form” should be completed. All fields on the form should be completed, and the form should be signed by both the applicant and the Agency CIS Administrator prior to submitting the form for processing.

Please note that many agencies have their own procedures that need to be followed before a CIS user can be created. We advise that you check with the relevant authority within your agency before completing the CIS Access form.

Agency	Agency that the person requesting access requires information for, usually one's own agency.
Customer number	Comcare's Customer number for the agency (if known).
Access required	<p>Management level data - will allow access to all reports under the management category. This includes trend and indicator reports. No claim detail, such as claimant names, is included in this level of access.</p> <p>Case Manager data - access will allow access to all reports under the Case Manager category. This level will provide information on the details of the claims being reported on such as the claim number, claimants name and other details about the claimant.</p> <p>Financial level data - is primarily for staff in finance areas and includes access to remittance reports.</p> <p>CIS Administrator access - will grant the ability to amend other CIS user's access within the agency.</p>
Name details	First name and surname of the person requesting access to CIS.
Position	The position that the applicant holds within his or her own agency.
Contact details	<ul style="list-style-type: none"> ▪ Phone ▪ Fax ▪ Email <p>Please provide all four contact methods if available, including area codes for Phone and Fax.</p>
Mail address	Please provide a mailing address for correspondence.
Applicants Signature	Applicant must sign and date the form.
Agency CIS Administrator	The Agency Administrator will need to complete this section to confirm their approval for the CIS Access Request.

Where do I send my completed forms?

If you have any questions about filling in these forms, or simply wish to submit your forms for processing, you can send them to the Comcare CIS Helpdesk by:

Fax: 02 6274 8679, or by email through to agency.updates@comcare.gov.au

The CIS Helpdesk can also assist with further information about these forms - you can contact the CIS Helpdesk on 1300-366-979

About the Customer Information System

Comcare's Customer Information System (CIS) provides customers with access to injury management and claims information through a secure website. The service is provided to Comcare customers free of charge, and you can use it to improve the measurement and monitoring of your agency's injury management and claims performance.

There are several options available for assistance with CIS. Help options include explanations within CIS itself, a comprehensive guidebook and Powerpoint presentation aimed at new users, and a dedicated team available through Comcare's national phone line 1300 366 979 or by email - agency.updates@comcare.gov.au.