How to Report an Employee’s Injury online

Accessing the Electronic Employee First Report of Injury Form

1. Visit the Workers’ Compensation website: [http://www.yale.edu/workerscomp](http://www.yale.edu/workerscomp).

2. Click on the **Employee First Report of Injury** link located in the related links section of this workers compensation website.

3. Log in using your Yale **Net ID** and **Password**, then click **Login**.

4. A **Security Information** window may appear. If so, click **Yes**.

5. Ensure that you have the minimum information listed in step 1, write down the FutureComp **Username** and **Password** listed in step 2, then click on the **FutureComp Online** link in step 3.

6. Log in using the FutureComp **Username** and **Password**, then click **Login**.
7. Click the **Next to Employer Details page** button as shown below to start the process for entering in a new Workers’ Compensation claim.

8. Once on the Employer Details page it will prefill all applicable fields except for the Jurisdiction and Locations fields. You must select from the drop down menu is the Jurisdiction state. At the bottom of the page highlighted in blue select from the drop down menu the Location.

****Important you must TAB through the fields Don’t use the Enter key****

Click on the **Next to Employee/Wage Details page** button to proceed.
9. Once you enter in the Employee UPI Number, the fields will be fully populated with the employee information just click the Next to Occurrence/Treatment Details page button.

****Important you must TAB through the fields Don’t use the Enter key****

Click on a yellow question mark (?) button to view help on that data field.

An asterisk (*) indicates required information
10. On the Occurrence /Treatment Details enter in all required fields and click on the Next to Special Instructions page button. Enter the dates and times in the following formats:

**Important you must TAB through the fields Don’t use the Enter key**

**Dates:** 01/01/2001 or 01-01-2001 or 01012001

**Times:** 09:00 (select AM or PM)
Almost finished! Please tell us if you have any special instructions. These items are not shown on the first report of injury.

* Designates required items

**Send first report of injury to:** lisa.sudbury@yorksg.com

Note: You may enter multiple email addresses separated by commas

**Check this box to alert the adjuster to contact you prior to any investigation.**

Any message for the adjuster:

Place a message for the claims examiner here.

Would you like an investigator involved:

Based upon the information provided, a new Indemnity claim will be opened momentarily. If you believe that this is an incorrect decision, change this decision by selecting one of:

- [ ] No Change
- [ ] Other

This is your last chance, press "Cancel" now if you want to abandon this claim opening. Otherwise, press "Next to Completion page" to submit the claim and generate the first report of injury.
At this point, you have 2 choices:

Open another Claim, Log Out