

Reporting A Claim Online

Go To our website www.tnrmt.com

Select the **Claims Reporting tab** – upper right of web page

On the claims reporting page - **Select Report A Claim – Report a New Claim Online**

In the Pop-up box – **Click to Report A Claim**

In the new window – **Select Worker’s Compensation Click Start**

Complete the form

Incident Information – Social Security Number, date of injury, injury location and description of injury

Employer Lookup - Click on Insured Lookup

In the box for Insured’s Name: enter school system name Example: Marshall County School

In the box for Location/School Name: enter the first word of the school Example: Chapel
Click Search

Scroll through the list until you find the correct Department Example: Maintenance
Click the box on the left

Click Select and Review

Then you will be returned to the form to complete it

How Injury or Illness Occurred has a limit of 254 characters. Please include the injuries **

Contacts Plural is for the injured employee’s information and accident location information

Employer Contact is the person the TNRMT Claims Representative will contact at the school system.

General Information - Preparers contact information is the person who is entering the claim online. Sometimes the employer contact and the preparer contact are the same.

Claimant Information is additional information about the injured employee.

Analysis is additional information about the injury and time of injury.

Physician and Hospital – The physician’s name or hospital site can be entered. **Initial Treatment** – select one option. If the person is **planning** to go to the doctor, please select Minor Clinic/Hospital Remedies/Diagnostic.

OSHA Information is the wage information and numbers ow weekly hours.

Complete form and Select Preview

Print - Top right

Submit – Immediately an EV# will be provided. *If the EV# is not provided the claim is NOT submitted*

** This section will be updated soon and will require specific information about all injuries**