eClaims
Implementation Guide
Revised 4/7/2017

Electronic Data Interchange (EDI)

For Reporting of
First Reports of Injury (FROI) and
Subsequent Reports of Injury (SROI)

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1   Introduction

eClaims is the New York State Workers' Compensation Board's implementation of an electronic claim reporting standard for reports of injury filings.   The WCB has adopted a national standard for claims reporting from the International Association of Industrial Accident Boards and Commissions (IAIABC): Claims Electronic Data Interchange (EDI) Release 3.0. The standard uses Electronic Data Interchange, commonly known as EDI, so that data can be transmitted electronically between the WCB and its EDI Trading Partners quickly, efficiently, and cost-effectively.

In 2001, the WCB adopted a national electronic standard for Proof of Coverage (POC) reporting. To leverage additional electronic efficiencies, the WCB decided to mandate EDI for the filing of claim information (eClaims) as announced on March 5th, 2012 in WCB Subject Number 046-477. All Claim Administrators must transition from paper to eClaims according to the WCB implementation timeline, which begins in June 2013.

This Guide is designed to assist trading partners with the transition from the current paper-based process for filing injury reports to the electronic filing process of First Reports of Injury (FROI) and Subsequent Reports of Injury (SROI) using the IAIABC EDI Claims Release 3.0 standard. The WCB recommends that this Guide be used in conjunction with the IAIABC Claims Release 3.0 Implementation Guide.

In addition to this Implementation Guide, many documentation resources have been published to the eClaims section of the WCB's web site, including New York's Requirement tables and other documents to assist in the implementation of and adherence to the standard. Links to specific documents have been provided where appropriate throughout this Guide.

1.1 Electronic Data Interchange (EDI) Overview

Electronic Data Interchange or EDI is the structured transmission of data between organizations by electronic means. It is an 'electronic handshake' used to transfer electronic documents or business data from one computer system to another computer system without human intervention. EDI is a proven technology and data transmission methodology that has been used by businesses and government agencies since the 1960's. EDI provides a standard protocol for trading partners to automate the processing of transactions, which has resulted in a highly efficient and effective means of conducting business.

1.2 Purpose of EDI

The adoption of EDI improves WCB case management and speed the flow of benefits to injured workers. EDI is used for electronic data transfers between the WCB and claim administrators (insurance carriers, self-insured employers, group self-insurers, and licensed third party administrators). It is a widely used best practice for the reporting of claim information to a jurisdiction.

The IAIABC Claims EDI Release 3.0 standard adopted by the WCB provides for the electronic transfer of First Report of Injury (FROI) and Subsequent Report of Injury (SROI) information. The following paper forms will be replaced by the introduction of the electronic submission of FROI and SROI:

Paper Forms Replaced by EDI	
C-2	Employer's Report of Work Related Injury/Illness
VF-2	Political Subdivision's Report of Injury to Volunteer Firefighter
VAW-2	Political Subdivision's Report of Injury to Volunteer Ambulance Worker
C-7	Notice that Right to Compensation is Controverted
C-669	Notice to Chair of Carrier's Action on Claim for Benefits
C-8/8.6	Notice That Payment of Compensation Has Been Stopped or Modified

The correspondence between the WCB's paper forms and the electronic FROI and SROI reports is shown in the table below:

First Report of Injury FROI	Subsequent Report of Injury SROI
C-2	C-7
VF-2	C-669 (payment/partial denial)
VAW-2	C-8/8.6
C-7	
C-669 (claim acceptance)	

1.3 Advantages of EDI

The electronic transfer of claim information via EDI has many advantages over the submission of paper forms for both the Workers' Compensation Board (WCB) and claim administrators. These advantages include:

- **Improved Speed:** EDI establishes a single, consistent format for data submission, which enables automated communication between trading partners. EDI dramatically improves the speed with which transactions between trading partners take place, decreasing transaction time from days to generally within 24 hours. EDI replaces paper documents, which require time to be mailed and delivered and

contain data elements that must be manually entered—activities that can take weeks depending on an organization's procedures, staffing levels, amount of backlog, etc.

- **Improved Timeliness of Benefits:** Adopting a standardized electronic claim filing process enables the WCB to obtain claim information quickly and streamline the case assembly process. EDI will ultimately provide improvements to all stakeholders, resulting in more timely delivery of benefits to injured workers.

- **Increased Efficiency and Accountability:** EDI improves the efficiency of obtaining accurate data by the use of automated edits to ensure that electronically submitted data is complete. By reducing the need for manual key entry, EDI reduces the potential for data entry errors. Once data has been entered into a computer system it can be seamlessly transferred between computer systems and verified electronically via EDI. Additionally, EDI provides a comprehensive audit trail for transactions, which will allow the monitoring of claim administrator performance by the WCB.

- **Improved Communication:** EDI is a two-way communication process and includes an electronic acknowledgement of transactions back to the claim administrator. The acknowledgement informs the claim administrator immediately whether the data submitted was accepted or rejected, as well as the reason the data was rejected. This electronic acknowledgement provides the claim administrator with a mechanism to automate its own internal workflow, which results in improved efficiencies for both trading partners. With improved communication, there should be a dramatic reduction in "defensive" duplicate filings by claim administrators.

- **Enhanced Performance Monitoring:** EDI enables an organization to better monitor performance via improved access to key data elements that are relevant to core business processes. The data obtained via EDI will improve the analysis that the WCB undertakes for procedural and regulatory reviews and allow for improved, more informed policy decisions.

- **Reduced Overhead:** Use of EDI reduces non-value-added activities such as mailroom sorting, mail charges, and document handling, which over time will reduce overhead and total system costs.

- **Improved Workflow:** EDI can dramatically improve workflow capabilities as it provides the foundation for automated, data-driven workflow, which can replace inefficient, manual review of workflow. This reduces the human errors and lengthy processing times associated with manual review.

1.4 IAIABC EDI Background

The International Association of Industrial Accident Boards and Commissions (IAIABC) is a trade association representing government agencies responsible for the administration of workers' compensation systems. The IAIABC has established national EDI standards for the electronic transmission of information on claims reporting, Proof of Coverage (POC), and medical bill payments. In 2003 the IAIABC introduced Release 3.0 for claim reporting. Over 10 states had adopted or were in the process of adopting Release 3.0, which is regarded as a mature EDI standard and a best practice for claims reporting. Thirty-eight states were utilizing either Release 3.0 or an earlier release of the IAIABC standard for the reporting of claims information at the time of New York's implementation.

More information about the IAIABC and EDI can be found at their website: www.iaiabc.org

1.5 NYS-Specific eClaims Implementation Regulations

The purpose of re-adoption of 12 NYCRR 300.22 was to enable FROI and SROI by removing confusion between differing requirements for employer and carrier filings and payments; to mandate electronic filing on our timetable and on our requirements; and to specify and permit various data filings, including reports of payments, wages, and other items.

The Chair's authority to mandate electronic reporting stems from Workers' Compensation Law (WCL) § 124(3), which provides that "nothing stated above shall preclude the chair from requiring the submission or dissemination of notices or reports in an electronic or typed form, with the exact format to be prescribed by the chair."

Highlights of the proposed regulation, a re-adoption of 300.22, provided as follows, include:

1. Disability event: unifies elements of 110(2) and section 25 to set the timeframe for the filing of the FROI. It is defined as an accident or alleged accident, including death resulting, that meets threshold lost time or medical, or any OD or death from OD.

2. Filed electronically: transmission accepted and acknowledged.

    a) Mandatory FROI and C2: 18 days from disability event, or 10 days from employer knowledge, whichever is greater, carrier obligated to file FROI in the format prescribed by the Chair, and with the data elements defined by the Chair.

b) C-2 filings under §110(2) remain in effect. A timely filing of a FROI satisfies the C-2 filing requirements. In addition, the requirements of §110(1) remain in effect. Thus, the employer and/or the carrier must retain the completed C-2F for production to the claimant upon request. As stated earlier, the C-2F does not need to be filed with the Board when a timely FROI has been filed by a designee.

c) The carrier may controvert a case with the FROI.

d) If the FROI is filed within 10 days of occurrence, it satisfies the C-2 requirement of the employer. However, in no instance will the Board consider a C-2 to satisfy the carrier's obligation to file a separate FROI.

3. Mandatory SROI and initial carrier action: within 18/10 days of the disability event, the carrier must file SROI, indicating initial action taken in the format prescribed by the Chair, and with the data elements fined by the Chair. Must be transmitted to the claimant and his/her attorney within one business day.

   a) Initial controversy

   b) Not controverted; payment has begun

   c) Not controverted; payment has not begun for cases involving compensable lost time.

4. Notice of controversy in the event of indexing: following the rules of 300.37 with respect to indexing of cases, and § 25(2)(b), in the event that the Board indexes the case, the carrier must file the SROI controversy within 25 days of indexing or waive defenses as set forth in § 25(2)(b).

5. SROI reports of payments and periodic summary of payments.

   a) The carrier must file electronically within 16 days of:

   - Where payments are modified

   - Where payments are suspended

   - Acquisition of payments from another carrier or TPA

   - All payments made pursuant to a board award (decision)

   b) The carrier must file electronically within 18 days of a resumption of disability.

c) In all open cases or closed cases with a CCP direction summary of all payments made in prior 180 days. This includes medical care and treatment.

d) When a carrier submits a SROI <u>under a, b, or c above</u>, it must file electronically in the report other types of benefits, including:

- All penalties paid to claimant or the Board or Chair

- All medical expenses

- Attorneys' fees and other legal fees

- Interest paid

e) All penalties paid to the claimant must be reported on the SROI within 10 days of payment.

7. Effective date: April 23, 2014. In order to file electronically, every carrier, Special Fund, TPAs, or their agent, shall have completed an Electronic Trading Partner agreement.

Other proposed regulatory changes include, among others:

300.23: requiring use of SROI with unilateral suspensions and reductions, rather than C8.

300.38: to change to "The written certification may be made at the pre-hearing conference prescribed in subdivision (g) and (h) herein".

Impact of regulatory change on first filings

One of the primary features of the regulation is the definition of disability event. WCL § 110(2) refers to a date that "the *accident occurred*", has a threshold for lost time and medical treatment therefrom, and mandates reporting within 10 days. WCL § 25(1)(b) states that the first payment of compensation is due on "the 14th day of *disability* or within 4 days thereafter." WCL § 25(1)(c) sets forth the process for payment when there is no controversy, due 18 days after *disability*, or 10 days after the *employer first had knowledge of the alleged accident*. The filing requirement for 25(1)(c) is "immediately". WCL § 25(2)(a) discusses controversy, which must occur within *18 days of disability or 10 days of employer knowledge of the alleged accident*. It discusses the employer's knowledge, and then states that where the carrier fails to timely controvert or pay within the prescribed period, or within 10 days of receipt of notice under WCL § 110, it faces a $300 penalty. WCL § 25(2)(b) sets forth the rules for controversy in an indexed case, and measures the time from the indexing.

The definition of disability event is based on an alleged accident, or occupational disease, for which the § 110 threshold of lost time greater than 1 day (beyond day of injury), and/or provision of more than basic first aid. The carrier's obligations to electronically report are measured from the disability event.

Reports of Payments

Suspensions are currently required to be reported pursuant to WCL § 25(1)(d). To be consistent, the 16 day reporting rule is applied to all the enumerated payment types in the regulation. The proposed regulation also expands the type of mandatory reported payments well beyond suspensions. This is consistent with the IAIBC standard for reporting payments. Under the existing 300.23(b)(3), a carrier may suspend or reduce with a C-8 under certain enumerated circumstances. Our C-8 form directs carriers to file the C-8 within 16 days of the date on which benefits payments were stopped or modified, or as notice of termination of temporary payments under WCL § 21-a.

The regulation includes a mandate of reporting of first payment of compensation and medical, suspension, modification (upward or downward), resumption, acquisition, and payments after a Board decision. This report should include any payments made in the form of compensation pursuant to a carrier's obligation to contribute to the cost of claimant's attorney fees in a third-party action of pursuant to a no-fault contribution. The regulation also mandates the summary reports of penalties to the state, medical expenses, attorney's fees, and interest. This is authorized reporting under the Chair's broad authority to mandate that carriers produce reports as directed by the Chair, under § 124. Further, WCL § 141 says the Chair may adopt rules for "receipt, indexing, examining of all notices, claims and reports."

The C-2 and FROI/SROI

The C-2 will be reconfigured to conform to the FROI requirements. Under § 110, the employer is directed to record and report injuries that meet the threshold for workplace injuries. That threshold is described above with respect to the disability event. § 110(2) mandates the following reported elements, on a form prescribed by the Chair:

"Such report shall state the name and nature of the business of the employer, the location of its establishment or place of work, the name, address and occupation of the injured employee, the time, nature and cause of the injury and such other information as may be required by the chair." WCL § 110(2)

WCL § 110 states that the employer or a designated third-party agent may file the report. The proposed regulation leaves intact the injury-report (i.e., C-2) filing requirement, but mandates that the FROI be filed separately as a carrier-filed form. Then, by reconfiguring the C-2 form to be very similar to the FROI, the process is inherently

supportive of the employer reporting directly to the carrier, and if timely the FROI serves as the injury report. The regulation conforms with the statutory requirement for the injury report.

Servable Notices

There is also an obligation on the carrier to serve first reports of injury, notices of controversy, or acceptance, and all reports of payments upon the claimant and his or her representative. Further, § 110(1) provides that a copy of the employer's report of injury be provided to the injured worker upon request. In support of this requirement, the Board has developed a printable report format of the electronic FROI / SROI filing that contains the information regarding acceptance, partial denial, controversy, and payment of the claim. This report must be mailed to claimant and claimant's representative, pursuant to 300.22. Information regarding the generation and mailing requirements for servable paper documents can be found in section 3.6

To accommodate eClaims effectively, each Trading Partner Agreement will contain a provision that the carrier agrees that each Notice of Controversy that is submitted will meet the standard set forth in the certification standard, i.e., that upon knowledge, information and belief, each fact and defense asserted has a good faith basis.

Additionally, the carrier's representative will, by proposed amendment to regulation 300.38, be required to sign a certification on a printed copy of the FROI or SROI.

1.6   Claim Administrator Responsibilities

Claim administrators must develop an understanding of EDI and the process of reporting claim information electronically to the Workers' Compensation Board (WCB). This understanding includes the following key components:

- Data required to report claim information.

- Circumstances, or events in a claim, that require submission of data and their timeframes.

- Correct format of the data.

- Technical specifications for sending and receiving data electronically to and from the WCB

- Electronic acknowledgement process, which includes acceptance and rejection of data.

These components are the foundation for the planning of a successful implementation of EDI.

1.7 eClaims Implementation Plan and Training

The Workers' Compensation Board (WCB) implemented eClaims using a phased approach beginning in the June 2013. The WCB has created a staggered testing and implementation schedule that continued through March 2014. During the implementation period, carriers and TPAs implemented eClaims in groups. Multiple implementation groups were created, and, based on extensive communication with claim administrators, each carrier and TPA were assigned to a group. In general, national carriers and TPAs were assigned to the earliest implementation groups. Claim administrators that conduct business primarily in New York were assigned to later groups. For more information on the 2013-2014 implementation schedule, see Implementation Plan.

The WCB has developed a presentation that provides an overview of electronic claims filing, including the benefits that resulted from the adoption of eClaims. This presentation can be accessed here:

http://www.wcb.ny.gov/content/ebiz/eclaims/Presentations.jsp

An introductory training course is available on the eClaims section of the WCB website: eClaims Training Course 101: Introduction to NYS eClaims using IAIABC Claims EDI Release 3.0. Additional training was scheduled as onsite seminars in November 2012. The NYS WCB training schedule can be found at:

http://www.wcb.ny.gov/content/ebiz/eclaims/Training.jsp

eClaims Contact Information and Resources

Questions and concerns about eClaims can be directed to the Workers' Compensation Board (WCB):

Email: eClaims@wcb.ny.gov

For information about EDI implementations, the IAIABC Claims EDI Release 3.0 Implementation Guide is a key technical resource. It can be obtained from the IAIABC at their website: http://www.iaiabc.org. A fee for the guide is charged to those who are not members of the IAIABC.

2   Preparing for eClaims

There are important steps that a claim administrator or other party must perform to send claim information to the Workers' Compensation Board (WCB) electronically. Successful completion of these steps will allow a party to fulfill the mandate of reporting claim information to the WCB via Electronic Data Interchange (EDI). Each step is summarized below:

- **Understanding Data and Technical Requirements**–Claim administrators must review and analyze the claim data that they currently receive well in advance of their eClaims implementation. This will ensure that there is enough time to make any changes that might be necessary to data collection methods or processes. The claim data should be compared to the data element requirements that the WCB has published on the NYS Data Element Requirement Table. Particular attention should be paid to data elements that are listed as Mandatory (M) or Mandatory Conditional (MC).

- **Becoming an EDI Trading Partner**–Claim administrators will be required to complete a Trading Partner Agreement and a Trading Partner Profile. The WCB is utilizing an online registration system for this requirement. When the registration of a claim administrator has been approved by the WCB, the claim administrator and/or any vendor will then be required to demonstrate the ability to successfully send and receive data from the WCB electronically.

The timeliness and ability of a claim administrator to perform the steps outlined above will guide the WCB in determining to which implementation group a claim administrator will be assigned.

2.1   Understanding Data and Technical Requirements

The claim information that the Workers' Compensation Board (WCB) expects, when it is required, and the format in which it is needed is detailed in the New York Requirement Tables:

- NYS Claim Event Table

- NYS Data Element Requirement Table

- NYS Edit Matrix

The tables are located in the eClaims section of the NYS WCB website, on the NY Requirement Tables page. Claim administrators need to carefully review these tables. Instructions are provided with each table. Further information about the tables can be found in Section 3 of this Implementation Guide.

A claim administrator may submit data to the WCB as a flat file and/or via an eClaims web application. Use of the eClaims web application is primarily for low volume filers, but is not limited solely to that group. Data can be sent either directly to the WCB or through a vendor. More information about data submission is found in Section 3 of this Implementation Guide.

2.2 Becoming an EDI Trading Partner

A trading partner is an entity that enters into an agreement with the Workers' Compensation Board (WCB) to exchange data electronically. A trading partner can be an insurance company, licensed third party administrator or self-insured employer. In order to become a trading partner that is permitted to send claim information to the WCB, the following requirements must be met in the order listed below:

- Complete the NYS Trading Partner Agreement via online registration.

- Designate an EDI Coordinator (Administrator) via the online registration process and complete the NYS Trading Partner Profile.

- Complete data testing requirements as outlined in Section 3 of this Implementation Guide.

Upon completion of these steps, a trading partner will be certified to send claim information to the WCB electronically.

All TPAs must be licensed by the WCB Licensing Unit and have an assigned "T" number in order to be able to submit data electronically. TPAs that do not have a "T" number can learn how to apply here.

http://www.wcb.ny.gov/content/main/Reps/HowToBecomeTPA.jsp

The Trading Partner Agreement establishes the purpose, objectives and responsibilities of parties also known as EDI trading partners. No claim information may be submitted electronically to the WCB from any party that has not registered as a trading partner, completed a Trading Partner Agreement and data testing requirements.

Please use the following link to obtain detailed information about the process and to begin the on-line registration process.

http://www.wcb.ny.gov/content/ebiz/eclaims/Registration/Overview.jsp

2.3 Trading Partner Agreement

The Trading Partner Agreement establishes the purpose, objectives and responsibilities of parties also known as EDI trading partners. No claim information may be submitted

electronically to the WCB from any party that has not registered as a trading partner, completed a Trading Partner Agreement and data testing requirements.

2.4 Trading Partner Profile

All trading partners must complete the Trading Partner Profile using the on-line registration process. The Trading Partner Profile requires a trading partner to specify the type of trading partner they are, i.e., insurance company, licensed third party administrator, self-insured employer, key attributes of the organization registering as a trading partner (i.e. sender tax identification number, FEIN, address with nine-digit postal code) and provide detailed contact information. . Vendors that will submit data on behalf of Claim Administrators must complete the Trading Partner Profile and agreement.

2.5 Designation of an eClaims Coordinator

Every trading partner is expected to designate an eClaims Coordinator and provide his or her contact information to the Workers' Compensation Board (WCB). The eClaims Coordinator will represent a trading partner during the implementation of eClaims and serve as the point of contact for the trading partner during data testing. Post implementation, the WCB expects that the eClaims Coordinator will be utilized for ongoing communication regarding eClaims concerns. The eClaims Coordinator must be designated and his or her contact information received by the Board, prior to data testing.

2.6 Managing an eClaims Implementation

It is most important that claim administrators begin planning for the transition to eClaims prior to the submission of claim information electronically. The following are recommended steps that claim administrators should take to achieve a successful implementation of eClaims:

- Obtain the IAIABC Claims EDI Release 3.0 Implementation Guide.

- Identify and dedicate key business and technical resources.

- Determine data transmission method: flat file or eClaims web application.

- Immediately involve Information Technology and Project Management units to support eClaims implementation.

- Evaluate the data quality that is currently being received and reported.

- Review existing paper-based processes and start to identify the changes that need to be made to support the electronic data filing requirements for eClaims.

- Examine existing Claim Administration software and identify potential integration points for sending claim data to the WCB.

- Evaluate the Information Technology resources that are currently being utilized either internally or with a vendor.

- Analyze and compare current business processes and procedures for collecting claim data to the new data requirements for eClaims.

- Identify the modifications needed to meet the new data filing requirements for eClaims.

- Conduct internal unit testing of data to prepare for testing data with the WCB.

- Develop a post-implementation plan for ongoing monitoring of data quality to ensure that the transaction acceptance rate meets or exceeds 90%.

If applicable, claim administrators should include any licensed third party administrators that they utilize in planning for the transition to eClaims.

3   eClaims Data Preparation and Testing

This section discusses the eClaims technical requirements for submitting data via the EDI and the test plan that all Trading Partners must complete to be approved to submit data electronically.

3.1 Data Submission Options

Claim administrators have two options for the electronic submission of claim information to the Workers' Compensation Board (WCB):

- Flat file via a secure file transfer protocol (sFTP)

- eClaims web application

Claim administrators can use one or both of these options. Flat files can be submitted directly to the WCB or through a vendor. Acknowledgement processing for flat file submissions will be done on a daily basis.

The eClaims web application is primarily for low-volume filers, but it is not limited solely to that group. Acknowledgement processing for submissions via the eClaims web application will be immediate.

3.2 Data Files Delivery Technical Requirements

Trading Partners and Vendors must contact the Workers' Compensation Board (WCB) to be set up as a Submitter for EDI transmission. If the Trading Partner or Vendor does not already have an sFTP user account with the WCB, then they must contact the WCB for instructions to get a new user account for upload and download access.

All Submitters must successfully complete the test process using test data files before they can upload production data files to the sFTP server.

## 3.3 Upload Processing for Data Files

All data files that are uploaded to the sFTP server must follow the file naming convention determined by the WCB. Data files sent via email or other media will not be processed. Data files that are improperly named or formatted will be rejected without being processed. The header record of the data file needs to have its Receiver ID (DN0099) be 146013200   122410019 which is WCB's FEIN and Postal Code separated by 7 spaces.

The file naming convention for data files is as follows:

Data File Name: [TP ID + _ + Date + _ + FROI/SROI + _ + Time + _ + T/P].txt

TP ID	Trading Partner ID is assigned to the Trading Partner by the WCB.
_	Use underscore as node separator for readability.
Date	Date (in the format of CCYYMMDD) of the data file.
FROI/SROI	Static text of "FROI" or "SROI" indicating the type of transactions in the data file.
Time	Time (in the format of HHMMSS) for that data file.
T/P	Static text of "P" or "T" to indicate whether the file is a production or test data file.
txt	The data file must be a standard ANSI/UNICODE text file with a file extension of ".txt".

Example: ABC_20120821_FROI_141000_T.txt

TP ID   Date   FROI/SROI   Time   T/P   txt
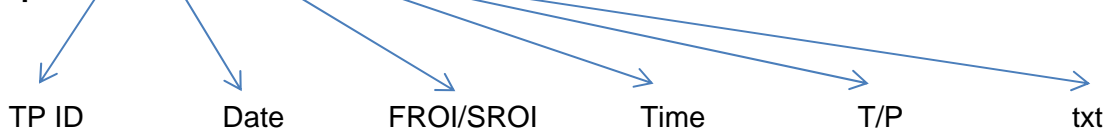
3.3.1 Batch in Data File

The WCB requires that FROIs and SROIs be in separate data files. There is only one batch per data file.

3.3.2 Data File Processing Order

The WCB processes the data files in alphabetical order per Submitter so that all FROIs are processed before SROIs. SROI files are processed in the order in which they are received, according to the time indicated in the filename.

3.3.3 Upload Path

Upload test data files to the following location on the WCB's sFTP server: **/Incoming/Test/Data-Files/**

Upload production data files to the following location on the WCB's sFTP server: **/Incoming/Production/Data-Files/**

3.4 Download Processing for Acknowledgement Files

Once all the transactions within a data file have been processed according to IAIABC and WCB requirements, an Acknowledgement file is placed on the sFTP server for the Submitter. The Submitter is responsible for downloading and reviewing all Acknowledgement files. All rejected transactions must be analyzed so that appropriate transaction(s) can be sent in the next data file. Even accepted transactions need to be reviewed so that future transactions use the appropriate WCB Case ID as the Jurisdiction Claim Number on subsequent transactions.

The file naming convention for Acknowledgement files is as follows:

Acknowledgement File Name: [TP ID + _ + Date + _ + FROI/SROI + _ + Time + _ + T/P + _ + ACK].txt

The Acknowledgement filename uses the same convention as the data filename except that "ACK" is added before the file extension.

Example: ABC_20120821_FROI_141000_T_ACK.txt

3.4.1 Download Path

Test acknowledgment files are downloaded from the following location on the WCB's sFTP server: **/Outgoing/Test/Acknowledgment/**

Production acknowledgment files are downloaded from the following location on the WCB's sFTP server: **/Outgoing/Production/ Acknowledgment/**

3.5 Upload and Download Frequency

The WCB plans to process FROI-SROI flat files five days a week (Monday through Friday) including holidays. Data files uploaded on Monday, Tuesday, Wednesday and Friday before 8pm EST will be processed that night (note that files uploaded by 5:30 PM EST will be processed at that time, but we will still process any additional files that are uploaded by 8 PM EST). Data files uploaded on Thursdays before 6pm EST will be processed that night. Acknowledgement files will be available for download the next day before 9 AM Eastern Time. The acknowledgement file for any flat file sent on Friday will be available Monday morning (even if Monday is a holiday).

Submitters are responsible for verifying that data file uploads are completely successful. Verification should be performed for automated and manual uploads to ensure that data files are received in a timely manner. If an upload fails, the Submitter should retry until the upload is successful. A Submitter can manually review their activity for the past 180 days within the logs provided at https://edi.wcb.ny.gov.

3.6 Generation and Mailing Requirements for FROI / SROI Transaction Reports

As the "Paper Forms" column of the NY Event Table indicates, Claim Administrators are required to notify parties of interest (via paper NY forms) for many FROI and SROI MTC's (events) using the Board prescribed form. The Board prescribed form is a paper copy of the EDI transaction which can be mailed to the parties in the form of a transaction report. The Board will create these reports electronically by extracting the data from accepted FROI/SROI transactions and flooding the data into a printable report format. An electronic copy of the transaction reports will be stored in the WCB's electronic case folder in eCase as well as the Board's internal claims system.

To satisfy the Board's requirement to notify the parties of FROI-SROI events as indicated in the Event Table, Claim Administrators can view and print these reports by using any of the following options:

1. The transaction report can be viewed and printed from eCase.
2. The transaction report can be viewed and printed from the new eClaims Inquiry web application.
3. The transaction report can be viewed and printed immediately upon successful submission of the FROI/SROI transaction using the Board's eClaims Data Entry web application.
4. For trading partners that submit flat files to the Board, the WCB will return a Forms ZIP file (in addition to an Acknowledgement file) for each flat file provided to the Board. The Forms ZIP file will contain all of the transaction reports in PDF format which the trading partner can download and print in bulk for mailing to parties. The

Forms Zip file will only contain PDFs for EDI transactions that are required to be mailed to the parties as indicated in the Event Table. In addition to the PDF files, the Forms Zip file will always include a manifest text file (manifest.txt) that will contain a list of the PDF file names with the total number of PDF files generated. The manifest serves as a cross-check mechanism that allows the trading partner to confirm that the Board included the correct number of PDFs in the ZIP file. When a data file does not contain any transactions that are required to be mailed to the parties, the Forms Zip file will only contain the manifest text file indicating "0 Forms Generated".

3.6.1 Forms Zip File Processing

In accordance with the IAIABC Claims EDI Files Containing Forms Returned by the Jurisdiction Guidelines posted on the IAIABC website on 2/6/2017, New York is changing the naming convention for the zip files effective 10/7/2017 as posted on the eClaims change log on 4/7/2017.

Each Zip file containing FROI/SROI forms (PDFs) is associated to a corresponding Header Record (HD1) within a data file submitted by the trading partner. The Forms Zip file name will not match the data file name nor the acknowledgment file name.   The name will always start "NY" – the Jurisdiction Code (DN0004)

Forms Zip File Name: [NY + _ + Sender FEIN (DN_0098) + _ + F/S + _ + Date Transmission Sent (DN0100) + _ + Time Transmission Sent (DN0101) +_ + T/P + _ + FORMS].zip

Example: NY_123456789_F_20171001_141000_P_FORMS.zip

Each form PDF file within the ZIP will be associated to a specific EDI transaction from the corresponding data file. The PDF file naming convention includes the Jurisdiction Claim Number (DN0005), Maintenance Type Code (DN0002), Claim Administrator Claim Number (DN0015), and the Record Sequence Number (DN0107). These elements provide the necessary linkage to the specific EDI transaction in the data file. The Form ID is not used and will default to "0" and be placed between the Maintenance Type Code and the Claim Number

PDF File Name: [NY + _ + Jurisdiction Claim Number + _ + Maintenance Type Code + _ + 0 + _ + Claim Admin Claim Number + _ + Record Sequence Number].pdf

Example: NY_G0760037_IP_0_9844562X1_000000001.pdf

3.6.2 Forms Zip File Download Path

Forms Zip files are downloaded from the following location on the WCB's sFTP server:

    Test Files: /Outgoing/Test/Forms/
    Prod Files: /Outgoing/Production/Forms/

3.6.3 Business Scenario Illustrating Data File/Acknowledgement/Forms Zip File

On October 10, 2017, Trading Partner "ABC" sends the Board a FROI data file and a SROI data file. The FROI file contains a single batch comprised of two FROI 00 (Original) transactions followed by two FROI 04 (Denial) transactions. The SROI data file contains a single batch comprised of three SROI S1 (Suspension) transactions.

Data Filenames: ABC_20171001_FROI_141000_P.txt

    ABC_20171001_SROI_141000_P.txt

The WCB processes the FROI data file first and then processes the SROI data file. All records from both files are accepted. The Board creates the corresponding Acknowledgement files and the Forms Zip files as follows:

Ack Filenames: ABC_20171001_FROI_141000_P_ACK.txt

    ABC_20171001_SROI_141000_P_ACK.txt

Forms Zips: NY_123456789_F_2017101_141000_P_FORMS.zip

    NY_123456789_S_2017101_141000_P_FORMS.zip

The MANIFEST.txt file in the FROI Forms Zip contains the following records:

NY_G0760905_04_0_K5551101_000000005.pdf

NY_G0760906_04_0_L5551102_000000007.pdf

2 Forms Generated

The FROI Forms Zip contains the following PDF files:

NY_G0760905_04_0_K5551101_000000005.pdf

NY_G0760906_04_0_L5551102_000000007.pdf

The FROI Zip file does NOT contain PDFs for the two FROI 00 (Original) transactions because the FROI-00 does not require the EDI transaction be mailed to the parties.

The MANIFEST.txt file in the SROI Forms Zip contains the following records:

NY_G0760937_S1_S_0_98200_000000001.pdf

NY_G0760937_S1_S_0_9845GGX1_000000003.pdf

NY_G0760933_S1_S_0_554914991_000000005.pdf

3 Forms Generated

The SROI Forms Zip contains the following PDF files:

NY_G0760937_S1_S_0_98200_000000001.pdf

NY_G0760937_S1_S_0_9845GGX1_000000003.pdf

NY_G0760933_S1_S_0_554914991_000000005.pdf

3.6.4 Forms Not Included in Forms Zip File

The "paper forms" column in the NY FROI Event table makes reference to 2 legacy paper forms which are not EDI forms. The C-430S (Statement of Rights), Drug Benefit Card and the DT-1 (Diagnostic Testing Network) form will never be included in the Forms Zip file as they contain very little or no EDI data at all. Claim Administrators should continue to use existing procedures for obtaining/completing/mailing these forms to the parties. These forms can be found at:
http://www.wcb.ny.gov/content/main/forms/Forms_CARRIER.jsp

3.7 Test Plan for Flat Filers

The testing process includes a test plan made up of three mandatory tests and a fourth test that the Submitter completes as needed. All Submitters must complete all mandatory tests described in this section in order to be approved to submit production data files. Completion of these tests ensures that the Submitter has established connectivity with the WCB and is capable of handling all types of MTCs. Vendors do not have to repeat the test plan for every customer. Once a vendor is in production, there is no need to repeat the test plan when implementing additional clients for New York. The exception is if the customer is a pass-thru, then we would need them to test.Each test is listed below:

1. Test A – Single Data File (FROIs only)

2. Test B – Two Data Files (FROIs and SROIs)

3. Test C – Single Data File (SROIs only)

4. Test D – One or Two Data Files (FROIs and or SROIs) (As Needed)

Fifteen business days are allowed for completing the entire test process. On the first day of the scheduled test period, the Submitter uploads the test data file as specified in Test A to the WCB's sFTP server. Once the file is uploaded to the sFTP server, the Submitter must notify the WCB Testing Coordinator (eClaims-Support@wcb.ny.gov) that the file has been uploaded.

In response to the Submitter's email notification, the WCB will process the test file and generate an Acknowledgement file on the sFTP server for the Submitter to download. An acknowledgement to a test data file contains a "T" in the Test/Production Indicator in the Header record.

3.7.1 Basic Tests

For all tests A through D, basic tests will be performed on the test data file to ensure that the file meets connectivity and file structure requirements. If a test data file is rejected during any test, the Submitter is required to correct the test data file and resend it.

All test data files must consist of the following:

1. Header record (with the Test/Production indicator (DN 104) set to "T")

2. Trailer Record

Listed below are the types of basic tests and the results that cause a test data file rejection. Submitters must correct the file and repeat the test if a file is rejected.

Testing Type	Result
File Naming Convention	Invalid
Header Record	Missing/Invalid
Trailer Record	Missing/Invalid
Record Structure	Invalid
Data Type	Mismatch

The WCB will test each FROI/SROI transaction according to the NY Requirement Tables posted on the eClaims section of the New York Workers' Compensation Board website.

The results of each test will be evaluated to determine if the Submitter is ready to proceed to the next step.

3.7.2 Test A – Single Data File (FROIs only)

Test A tests the initial FROI transactions and the integrity of the data file. Once received, the WCB will process and acknowledge the test data file. This step is designed to test:

- File technical content (Fatal Errors)

- FROI transactions

During this phase of the test procedure, the Submitter transmits one test data file of at least 20 but not more than 50 FROI transactions to the WCB. The test data file must consist of the following transactions:

1. At least one each of the following FROI MTCs: "00", "04" and "AU".

2. At least one of the FROI MTC "AQ". This transaction should be rejected since the test database will not have FROIs from a previous claims administrator.

The test data file must not include MTCs other than those listed above.

The WCB will examine the test results to determine if the Submitter is ready for the next step of the testing process. The transaction acceptance rate must be at least 90% to pass the test and proceed to the next step. Transaction rates below 90% are considered a failure of the test. The Submitter must repeat the test by sending a new test file.

3.7.3 Test B – Two Data Files (FROIs and SROIs)

Test B tests previously accepted FROI transactions and initial SROI transactions. Once received, WCB will process and acknowledge the test data files. This step is designed to test:

- Acknowledgement process

- Follow-up FROI transactions on previously accepted transactions from Test A

- MTC Sequencing requirement

- Initial SROI transactions on the previously accepted FROIs from Test A

During this phase of the test procedure, the Submitter transmits two test data files of at least 10 but not more than 50 each of FROI/SROI transactions to WCB. The test data files must consist of the following transactions:

FROI Test Data File

1. At least one MTC "01" for the previously accepted transaction from Test A.

2. At least one MTC "02" for the previously accepted transaction from Test A.

3. At least one MTC "UR" for an existing Legacy case. A file with Legacy Claims will be sent to the Submitter for this test. Please refer to the Legacy Claims Document for more information regarding Legacy Claims.

SROI Test Data File

1. At least one each of the following SROI MTCs: "04", "AP", "CD", "EP", "IP", "PD", "UR" and "PY" from a previously accepted transaction.

All transactions in Test B are expected to include WCB Case IDs (i.e., Jurisdiction Claim Number DN0005) that were returned in the Acknowledgement file in Test A. The test data files must not include MTCs other than those listed above.

The WCB will examine the test results to determine if the Submitter is ready for the next step of the testing process. The transaction acceptance rate must be at least 90% to pass the test and proceed to the next step. Transaction rates below 90% are considered a failure of the test. The Submitter must repeat the test by sending a new test file.

All FROIs are processed before SROIs. If a FROI test file fails, the WCB will not process the SROI test file that was submitted for Test B. If a SROI file fails, only the SROI file will need to be re-submitted for Test B.

3.7.4 Test C – Single Data File (SROIs only)

Test C tests the previously accepted SROI transactions. Once received, WCB will process and acknowledge the test data file. This step is designed to test:

- Acknowledgement process

- Follow-up SROI transactions on previously accepted transactions

- SROI periodic reports

- MTC Sequencing requirement

During this phase of the test procedure, the Submitter transmits one test data file of at least 20 but not more than 50 SROI transactions to the WCB. The test data file must consist of the following transactions:

1. At least one each of the following SROI MTCs: "02", "CA", "CB", "ER", "RB", "RE", "S1", "S2", "S4", "S5", "S7", "SD", "SJ" and "SA" for a previously accepted transaction.

All transactions in Test C are expected to include the WCB Case IDs (i.e., Jurisdiction Claim Number DN0005) that were returned in the Acknowledgement file in Test A or Test B. The test data files must not include MTCs other than those listed above.

The WCB will examine the test results to determine if the Submitter is ready to upload production data files. The transaction acceptance rate must be at least 90% to pass the test and proceed to the next step. Transaction rates below 90% are considered a failure of the test. The Submitter must repeat the test by sending a new test file. Depending on the results of Tests A, B, and C, the Submitter may elect to perform Test D. The WCB may also require the Submitter to perform Test D.

3.7.5 Test D – One or Two Data Files (FROIs and or SROIs) (As Needed)

Test D tests new FROI and SROI transactions for miscellaneous scenarios that the Submitter or the WCB wishes to test. Once received, the WCB will process and acknowledge the test data files.

During this phase of the test procedure, the Submitter transmits a maximum of six files that contain no more than 50 each of FROI/SROI transactions to the WCB. Submitters may include FROIs/SROIs from previously accepted transactions.

The WCB will examine the test results to determine if the Submitter is ready for production data file upload.

3.8 Moving from Test Completion to Production Status

The length of the testing period depends on the Submitter's transaction acceptance rate and data quality. Once the Trading Partner has met the data quality criteria as stated in the Test Plan, the WCB will notify the Trading Partner by email that the Trading Partner has passed the tests and is approved for production Claims EDI reporting of workers' compensation FROI/SROI data with the WCB. The WCB and the Trading Partner can then select a mutually agreed upon date to begin production.

If a need arises for testing after the eClaims implementation date, then the Submitter should contact the WCB to coordinate the testing process.

3.9   Ongoing Monitoring

During production, the WCB will monitor data transmissions for completeness, validity, and accuracy. Trading Partners may be sent quality control reports that measure their data quality. Trading Partners are expected to meet or exceed a 90% accuracy rate for

transaction acceptance. The WCB will automatically monitor the quality of the data received during production from individual Trading Partners. The data quality is determined based upon all errors types and the number of rejections over a period of time.

Trading Partner Profiles must be kept up to date. The WCB must be notified of any changes. If the transmission mode or specifications are changed, re-testing some or all transaction types may be required.

3.10 Transition into EDI

The test period is a transition time for Trading Partners. During the test period, claim administrators will be transmitting their FROI/SROI test data files to the WCB while at the same time still submitting paper forms. The claim administrator's responsibilities during the pre- and post-implementation periods are explained below.

3.10.1 Pre-Implementation

During the testing period, it is the Trading Partner's responsibility to send all paper forms to the WCB within the mandated time period until the claim administrator is approved to upload FROI/SROI production file on the sFTP server.

3.10.2 Post-Implementation

It is the Trading Partner's responsibility to send all FROI/SROI production data files to the WCB within the mandated time period starting on the agreed upon implementation date. After the Claims EDI implementation date, the WCB will not accept paper forms.

3.11 Use of Vendors

The WCB anticipates that, as part of its eClaims implementation, it will authorize experienced Claims EDI Release 3 vendors to submit claims data to the WCB following satisfactory completion of testing with the WCB.

The list below includes known vendors offering a Claims EDI Release 3 related product and/or service for submitting claims data electronically. This listing is in alphabetical order and does not represent an endorsement by the WCB of any vendor listed, or a recommendation of one vendor over another. The WCB does not warrant or represent that this information is current, complete, or accurate. The WCB assumes no responsibility for any errors in the information provided, nor assumes any liability for any damages incurred as a consequence, directly or indirectly, of the use and application of this information, and shall be held harmless against all claims, suits, judgments and/or damages resulting from the disclosure of any of this information, including all costs and fees.

NOTE: If you are a vendor with Claims EDI Release 3 experience and would like to have your company added or removed, please contact eClaims@wcb.ny.gov

- Actec Systems, Inc. (www.actec.net)

- CS Stars (www.csstars.com)

- Ebix/Peak Performance Solutions, Inc. (www.ebix.com)

- HealthTech, Inc. (www.htedi.com)

- Insurance Services Office (www.iso.com)

- Mitchell Workers' Compensation Solutions (www.mitchell.com)

Additional information regarding the use of data vendors may be obtained from the IAIABC at: http://www.iaiabc.org.

3.12 eClaims Web Entry Testing and Instructions

As noted, the eClaims web application is primarily for low-volume filers, but it is not limited solely to that group. Testing and validation must begin on or before an entity is scheduled for testing/go-live in the Implementation Plan found here (http://www.wcb.ny.gov/content/ebiz/eclaims/Implementation.jsp).

Entities may begin filing via the WCB web application earlier than their scheduled go-live date if they have successfully completed the testing requirements

The testing process includes a test plan made up of entering data into the eClaims web entry application. All Submitters must complete all mandatory tests described in this section in order to be approved to submit production data files. Completion of these tests ensures that the Submitter understands a minimum of five scenarios per FROI/SROI type and is capable of handling a representative sample of MTCs.

The FROI/SROI transactions are listed below:

FROI-00
FROI-04/SROI-04
FROI-UR
FROI-02/SROI-02
SROI-IP/SROI-AP/SROI-EP
SROI-CD
SROI-CB
SROI-Sx/SROI-SD/SROI-SJ

SROI-UR
SROI-SA

Note: The 50 transactions to be submitted during the Formal Testing are cumulative among the registered Web Entry Submitter. You are not required to have each individual user that is registered submit 50 transactions as part of the Formal Testing.

The scenarios that can be sampled from are listed in the NYS Business Scenarios, which can be found here: http://www.wcb.ny.gov/content/ebiz/eclaims/ImpGuide.jsp

Once the testing of the transactions listed above is completed, an e-mail should be sent to the NYS Workers Compensation eClaims Workgroup at: eClaimsTradingPartner@wcb.ny.gov . The eClaims work group will verify that all test transactions have been completed and will notify the trading partner that they have been approved for production.

4   EDI Data Requirements

This section explains the EDI data requirements for reporting claims in eClaims, with links to the appropriate part of the eClaims documentation set.

4.1 EDI Reports

Reporting in EDI is driven by events that occur during the life of a claim. Information about these claim events will be communicated to the Workers' Compensation Board (WCB) via Maintenance Type Codes (MTC). Each MTC is an electronic report that is associated with particular claim events.

These are the MTCs that are accepted by the WCB:

First Report of Injury FROI	Subsequent Report of Injury SROI
00 – Original	02 – Change
01 – Cancel	04 – Denial
02 – Change	AP – Acquired/Payment
04 – Denial	CA – Change in Benefit Amount
AQ – Acquired Claim	CB – Change in Benefit Type
AU – Acquired/Unallocated	CD – Compensable Death
UR – Upon Request	EP – Employer Paid
	ER – Employer Reinstatement
	IP – Initial Payment
	PD – Partial Denial

	PY – Payment Report
	RB – Reinstatement of Benefits
	RE – Reduced Earnings
	S1 – Suspension, RTW or Medically Determined/Qualified to RTW
	S2 – Suspension, Medical Noncompliance
	S4 – Suspension, Claimant Death
	S5 – Suspension, Incarceration
	S7 – Suspension, Benefits Exhausted
	SD – Suspension, Directed by Jurisdiction
	SJ – Suspended Pending Appeal of Judicial Review
	UR – Upon Request
	SA – Sub-Annual

Further information about the MTCs can be found in the Forms to MTC Crosswalk, which is part of the NYS Claims Event Table. To view this document, see the Implementation Guide page in the eClaims section of the NYS WCB website.

4.2 Claim Event Table

The NYS Claim Event Table details the claim events that must be reported to the Workers' Compensation Board (WCB). It provides the timeframes for reporting these claim events and the Maintenance Type Codes (MTC) that are expected. Timeframes that are given for the reporting of claim events are those stated in NYS Workers' Compensation Law.

The NYS Claim Event Table is made up of the following components:

- Instructions: The IAIABC instructions for understanding and interpreting the Event Table.

- MTC Crosswalk: Provides information about the Maintenance Type Codes (MTC) that comprise the electronic filings for claim events.

- First Report of Injury Event Table: Details claim events for which a First Report of Injury (FROI) is expected.

- Subsequent Report of Injury Event Table: Details claim events for which a Subsequent Report of Injury (SROI) is expected.

- Periodic Report Event Table: Details when claim administrators are expected to file periodic reports.

For many claim events a concurrent filing of certain paper forms will still be required. The required paper forms are indicated on the NYS Claim Event Table. The WCB will compile the claim data submitted into a document that will be available for printing from eCase. The claim administrator may use this document to satisfy the paper filing requirements listed on the Event Table.

To view the NYS Claim Event Table, see the NY Requirement Tables page in the eClaims section of the NYS WCB website.

Additional information about the reporting and timeframes of claim events is available in the NYS eClaims MTC Filing Instructions. See the Implementation Guide page in the eClaims section of the NYS WCB website.

4.3 Data Element Requirement Table

The NYS Data Element Requirement Table details the data elements that must be reported to the Workers' Compensation Board (WCB). It indicates which data elements must always be reported and gives the conditions under which other data elements are required. The NYS Data Element Requirement Table is made up of the following components:

- Instructions: The IAIABC instructions for understanding and interpreting the Data Element Requirement Table.

- FROI Element Requirements: Provides information about the data element requirements for electronic filings of First Report of Injury (FROI).

- FROI Conditional Requirements: Details the claim conditions for reporting data elements on Maintenance Type Codes (MTC) for First Report of Injury (FROI).

- SROI Element Requirements: Provides information about the data element requirements for electronic filings of Subsequent Report of Injury (SROI).

- SROI Conditional Requirements: Details the claim conditions for reporting data elements on Maintenance Type Codes (MTC) for Subsequent Report of Injury (SROI).

- Event Benefits Segment Element Requirements: Provides information about the data element requirements for the Event Benefits Segment found on SROI MTC.

- Event Benefit Conditional Requirements: Details the claim conditions for reporting data elements on the Event Benefits Segment.

- IAIABC Sweep Benefit Segment Rules: The IAIABC instructions for a sweep benefits segment. A sweep benefits segment is the reporting of aggregate financial information.

- IAIABC BEN Pre-Defined Conditions: The IAIABC instructions for changes to the BEN segment.

Some data elements are listed as Mandatory Conditional (MC) on the NYS Data Element Requirement Table. These conditions are defined in the FROI, SROI and Event Benefit Conditional Requirement components.

To view the NYS Data Element Requirement Table, see the NY Requirement Tables page of the eClaims section of the NYS WCB website.

4.4 Edit Matrix Table

The NYS Edit Matrix Table details which data elements have edits applied to them and the error codes that are associated with those edits. It provides the language of the error codes that may be returned by the Workers' Compensation Board (WCB) in acknowledgments for electronic filings that have been rejected. The NYS Edit Matrix Table is made up of the following components:

- Instructions: The IAIABC instructions for understanding and interpreting the Edit Matrix Table.

- DN – Error Message: Indicates which data elements will have edits applied and details those edits.

- Value Table: Indicates the values that will be accepted by the WCB for the data elements that are listed.

- Match Data Table: Indicates which data elements will be used by the WCB as the primary and secondary data elements for the matching of new and existing claims.

- Population Restrictions: Details the reasons for the error messages associated with data elements and the specific language of error messages in acknowledgments.

- FROI Sequencing: Details the expected sequencing of Maintenance Type Codes (MTC) for First Report of Injury (FROI) for receipt by the WCB.

- SROI Sequencing: Details the expected sequencing of Maintenance Type Codes (MTC) for Subsequent Report of Injury (SROI) for receipt by the WCB.

Matching is the process of determining whether an electronic filing is a new claim or belongs to an existing case. Sequencing is the order in which electronic filings are accepted.

Electronic filings that contain invalid data or have improper sequencing will be rejected by the WCB. An acknowledgment explaining the error or errors will be provided.

To view the NYS Edit Matrix Table, see the NY Requirement Tables page in the eClaims section of the NYS WCB website.

4.5 Data Element Name (DN) Reporting Requirements Specific to New York State

New York State Workers' Compensation Law requires that the Workers' Compensation Board (WCB) obtain certain data to fulfill statutory requirements. These requirements have been documented to assist claim administrators in the electronic reporting of claim information. Claim administrators are expected to report claim information in accordance with these requirements.

To view the DN Reporting Requirements Specific to New York State, see the NY Requirement Tables page in the eClaims section of the NYS WCB website.

Definitions of the data elements can be found in the IAIABC Claims Release 3.0 Implementation Guide.

Data quality is also an integral component of the successful use of EDI. A Data Entry Conventions document has been provided for reference to assist claim administrators. To view this document, see the Implementation Guide page in the eClaims section of the NYS WCB website.

4.6 Legacy Claim Reporting

A legacy claim is any claim that already exists in the WCB database and has been assigned a JCN or WCB# at the time the claim administrator begins the use of EDI. The WCB will provide each insurer with a data file(s) containing their legacy claims, before their EDI implementation date.

The WCB has relaxed conditions for data elements when the claim administrator obtained knowledge of the claim prior to January 1st 2008. Further information about the implementation of eClaims for legacy claims is on the Implementation Guide page in the eClaims section of the NYS WCB website.

4.7 NYS Business Scenarios

Scenarios have been created to provide direction to claim administrators on the proper reporting of claim information. These scenarios detail circumstances that are specific to NYS Workers' Compensation Law. Claim administrators are expected to report claim information to the Workers' Compensation Board (WCB) via the Maintenance Type Codes (MTC) and filing sequences that are specified in the scenarios.

The NYS Business Scenarios can be viewed on the eClaims Implementation Guide page in the eClaims section of the NYS WCB website, located here: Implementation Guide

General business scenarios for the reporting of claim information can be found in the IAIABC Claims Release 3.0 Implementation Guide.

4.8 Form Mapping

To assist claim administrators in the transition to electronic claim reporting, the Workers' Compensation Board has mapped the information in the paper forms it uses as First and Subsequent Reports of Injury to the corresponding data elements in the IAIABC standard. For each form field on the pre-EDI paper forms, the corresponding data element in the IAIABC standard has been identified. If there is no corresponding data element on the form, then there is no direct equivalent in the standard for that form field. Definitions of the data elements can be found in the IAIABC Claims Release 3.0 Implementation Guide.

To view the data element mapping for each of the forms listed below, see the Implementation Guide page in the eClaims section of the NYS WCB web site.

- Form C-2.0

- Form VF-2

- Form VAW-2

- Form C-669

- Form C-7

- Form C-8/8.6

Note: Alternative Dispute Resolution (ADR) claims are not part of eClaims. Claim Administrators must still file Form ADR-1 and ADR-2 for these claims.

4.9 eClaims Change Log

The NYS Workers' Compensation Board eClaims Change Log is a spreadsheet that documents changes to the New York Requirement tables and related documents subsequent to the posting of New York's finalized documentation.

It reports the following information:

- Item #–Number assigned on the Change Log for reference

- Document– Document where the item is located.

- Item–The item that is changing.

- Description of Change–Brief explanation of the change.

- Publish date–Date the change was published in the eClaims change log by New York.

- Implementation Date–Date that New York will begin to enforce change.

Claim administrators should monitor the Change Log on a regular basis to ensure that they're aware of upcoming changes and implementation timeframes. New York may also announce changes using the WCB formal Subject Number process.

To view the eClaims Change Log, see the NY Requirement Tables page in the eClaims section of the NYS WCB website.

5 Important Terminology

The following terminology is important to understanding eClaims and the processes explained in this Implementation Guide.

Acknowledgement Record

An acknowledgment record is an electronic reply sent by the WCB for a First Report of Injury (FROI) or Subsequent Report of Injury (SROI) that was received by the Board. The acknowledgment record will indicate if the FROI or SROI was accepted or rejected. It will provide the Jurisdiction Case Number (JCN) to the claim administrator for FROIs and SROIs that are accepted. When a transaction is rejected, the acknowledgment record will provide the reasons for the rejection. Flat file submitters will receive an acknowledgment record via flat file. Web submitters will receive an acknowledgement record via an immediate confirmation message.

Acquired Claim

An acquired claim is a claim that was previously administered by a different claim administrator. The acquisition of a claim is a claim event that must be reported to the WCB.

Batch

A batch is a set of electronic data records. All batches must contain the correct header and trailer record as specified by the IAIABC Claims Release 3.0 EDI standard and have one or more FROI or SROI transactions. Batches that contain an incorrect header or trailer record will be rejected by the WCB. The WCB only accepts one batch per flat file. Additionally, the WCB requires that FROI and SROI submissions be in separate flat files (batches).

Claim Administrator

The claim administrator is the organization that administers a Workers' Compensation claim. A claim administrator can be an insurer, a licensed third party administrator, a self-insured employer, a self-insured group trust or a guarantee fund.

Claim Event

A claim event is a business circumstance in the life of a claim that must be reported to the WCB. Examples of claim events are changes in data elements, payment of awards, and suspension of payments to a claimant.

Claim Event Table

The Claim Event Table details the claim events that must be reported to the WCB. It provides the timeframes for reporting these claim events and the Maintenance Type Codes (MTC) that are expected.

Data Call

A data call is a specific request for claim information that is made by the WCB to a claim administrator.

Data Element

A data element is a single piece of defined information within a transaction. Every data element is assigned a reference number and has a prescribed format. Some data elements must be sent using certain defined values. An example is Accident Premises Code – DN0249, which must be sent as one alpha numeric character with a value of E, L or X. Data elements are defined in the IAIABC Implementation Guide.

Data Element Requirement Table

The Data Element Requirement Table details the data elements that must be reported to the WCB. It indicates which data elements must be reported and details the conditions under which the data elements are required.

Edit Matrix

The Edit Matrix Table details which data elements have edits applied to them and the error codes that are associated with those edits. It provides the language of the error codes that may be returned by the WCB in acknowledgments for electronic filings that have been rejected.

Electronic Data Interchange (EDI)

EDI is the structured transmission of data between organizations by electronic means. This exchange of data will take place between trading partners and the WCB.

Federal Employer Identification Number (FEIN)

The FEIN is a unique numerical identifier of an employer and is required on initial reports of injury.

First Report of Injury (FROI)

A FROI is an electronic transaction that generally occurs in the early stages of a Workers' Compensation claim. The most common FROI MTC is FROI 00, which is the initial report of injury for a claim. The FROI 00 will replace the paper forms C-2, VF-2, VAW-2, C-7 and C-669 (claim acceptance).

Header Record

The header record is the record that precedes each batch of electronic data that is transmitted. A header record identifies the sender and provides the date and time that a batch was created.

International Association of Industrial Accident Boards and Commissions (IAIABC)

The International Association of Industrial Accident Boards and Commissions (IAIABC) is a trade association representing government agencies responsible for the administration of workers' compensation systems. National EDI standards for electronic transmission of information on claims reporting, Proof of Coverage (POC), and medical bill payments are standards that have been developed by the IAIABC.

IAIABC Implementation Guide

The IAIABC Claims EDI Release 3.0 Implementation Guide is a key technical resource for EDI implementations. It can be obtained from the IAIABC at their website: http://www.iaiabc.org.

Jurisdiction Claim Number (JCN)

A JCN is the case number that is assigned by a jurisdiction for a workers' compensation claim. In New York State the JCN is the same as the WCB#. The JCN or WCB# for a claim will be provided by the WCB in the acknowledgment record for transactions that are accepted.

Legacy Claim

A legacy claim is any claim that already exists in the WCB database and has been assigned a JCN or WCB# at the time the claim administrator begins the use of EDI. The WCB will provide each insurer with a data file(s) containing their legacy claims before their EDI implementation date.

Maintenance Type Codes (MTC)

A Maintenance Type Code (MTC) is a code that identifies the purpose of a transaction. Every FROI and SROI transaction has a MTC. FROI 00 and SROI PY are examples of MTCs.

Record

A record is a defined set of data elements.

Receiver

The receiver is the recipient of data for a transaction in EDI. The receiver of claim data is the WCB and the receiver of acknowledgment records is the sender of claim data.

Report Trigger

A report trigger describes the event that causes a particular report to be due for submission to the WCB. Report triggers are defined by the WCB on the Claim Event Table.

Secure File Transfer Protocol (sFTP)

A Secure File Transfer Protocol (sFTP) is a communications protocol that governs the transfer of files from one computer to another over a network.

Sender

A sender is the originator of data for an EDI transaction. The sender receives acknowledgements for claim data that it sends to the WCB.

Subsequent Report of Injury (SROI)

A SROI is an electronic transaction that generally occurs in the later stages of a workers' compensation claim. SROI transactions typically report the payments that are made to an injured worker. The various SROI MTCs will replace the paper forms C-7, C-669 (payment/partial denial) and C-8/8.6.

Trading Partner

A trading partner is an entity that enters into an agreement with the Workers' Compensation Board (WCB) to exchange data electronically. A trading partner can be an insurance company, licensed third party administrator or self-insured employer.

Transaction

A transaction is a single FROI or SROI MTC submittal.

Trailer Record

A trailer record is the record in a batch file of claim data that indicates the end of the batch. The trailer record indicates how many transactions are in the batch.