

Claims EDI Implementation Guide Version 3.2

For the reporting of First Report of Injury (FROI) and Subsequent Reports of Injury (SROI)

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Preface

The Utah Labor Commission Industrial Accidents Division is pleased to introduce its Claims EDI system for receiving claims submissions via Electronic Data Interchange. This solution provides a means for the State of Utah to efficiently and accurately manage the Workers' Compensation Act required reporting. Claims EDI for First Report of Injury was mandated for all trading partners on December 31, 2012. Claims EDI for Subsequent Report of Injury trading partner testing will begin on July 3, 2018, with anticipation of the SROI reporting mandate becoming effective July 1, 2019.

This Claims EDI Implementation Guide is designed to assist Insurers, Self-Insurers, and Claim Administrators with the transition from paper filing to EDI reporting. It serves as an information resource for trading partners and/or claim administrators and should be used in conjunction with the IAIABC Claims Release 3.0 Implementation Guide dated January 1, 2017.

If there are any questions about the information provided in Utah's Claims EDI Implementation Guide, please contact:

Erin L. Hanson Deputy Director, Industrial Accidents Division Utah Labor Commission 160 E 300 S, 3rd Floor P.O. Box 146610 Salt Lake City, Utah 84114-6610 Phone: (801) 530-6809 Email: claimsedi@utah.gov

Thank you for doing business in Utah.

Acronyms

The following applies to this Claims EDI Implementation Guide and the EDI tables posted on our website.

AKC - Acknowledgment Record

An EDI file sent from the Jurisdiction to the trading partner's Vendor in response to an EDI report. It contains key data elements to identify the transaction and any technical and/or business issues discovered.

DN - Data Element Number

A single piece of defined information (e.g. Date of Birth) contained within a transaction (i.e. FROI). Each Data Element is assigned a reference number (DN = Data Number) and includes a definition and format (length & data type) and if format is a code will list acceptable values or reference the code source (for example Employer FEIN is 9 A/N).

EDI - Electronic Data Interchange

Computer-to-computer exchange of data or information in a standardized format. Claims EDI is the electronic transmission of workers' compensation claims information from an authorized Submitter whose clients may be insurers, self-administered self-insured employers and third party administrators (TPA) to a States' Workers' Compensation Regulatory Agency.

FEIN – Federal Employer Identification Number

The Corporation/Business US Federal Tax ID, or can be an Individual's US Social Security number.

FROI – First Report of Injury (148 Record)

A group of transactions occurring in the early stages of workers' compensation claim processing that typically report the parties involved and describe the accident and resulting injuries.

IAD – Utah Labor Commission Industrial Accidents Division

The regulatory agency that administers the Utah Workers' Compensation Act and Rules.

IAIABC - International Association of Industrial Accident Boards and Commissions

An association of workers' compensation jurisdictional regulators and industry professionals who find solutions to reduce harm and aid recovery from occupational injuries and illnesses. The IAIABC developed Claims R3.0 that IAD has adopted. https://www.iaiabc.org

IG – Implementation Guide

Unless otherwise stated, IG references this document.

JCN – Jurisdiction Claim Number

When the initial FROI is accepted a JCN is assigned and returned with the ACK file. This will be the primary match DN for the claim going forward.

MTC - Maintenance Transaction Code

A code that identifies the purpose of an EDI transaction and is interchangeable with report type. The two digit MTC is included in all EDI transactions. For example: an initial FROI is MTC 00.

REACK - Re-Acknowledgment Record

An EDI file sent from the Jurisdiction to the trading partner's Vendor as a result of reloading/reprocessing a previously acknowledged transaction as a direct result of error/s found in jurisdiction processing. It contains key data elements to identify the original transaction, transaction status and any technical and/or business issues discovered. Within the EDI transactions these are identified as ARC.

SFTP – Secure File Transfer Protocol

Communications protocol governing the transfer of files from one computer to another over a secure network. Access to SFTPs is granted by IAD.

SROI – Subsequent Report of Injury (A49 Record)

Based on IAIABC Claims Release 3.0 standards SROI is a group of transactions of workers' compensation claim processing that typically report the benefit, payment, return to work and closure data.

TA – Transaction Accepted

ACK returned notifying the TP that IAD has accepted the MTC.

TP - Trading Partners

Two entities exchanging data electronically. For the purpose of this IG, the two entities are the data requester/receiver (IAD) and the data sender/submitter (i.e. claim administrator, self-insured, insurance carrier)

TPA – Third Party Administrator

An entity that provides claim administration services on behalf of Self-Insured's and Carriers.

TR – Transaction Rejected

ACK returned notifying the TP that IAD has rejected the MTC. The ACK will identify what the TP must correct and resubmit to receive the required TA.

Links to Claims EDI Related Information

Utah EDI bulletin(s): https://laborcommission.utah.gov/formsearch.html

IAD Laws and Rules: https://laborcommission.utah.gov/divisions/IndustrialAccidents/iadlaws.html

IAD Claims EDI Implementation Page: https://laborcommission.utah.gov/divisions/IndustrialAccidents/x_edi_implementation.html

IAD Claims Compliance Team (EDI Implementation Assistance) email: claimsedi@utah.gov

IAIBC Web Page: https://www.iaiabc.org/iaiabc/default.asp

Section One: Claims EDI Basics

EDI Concept

EDI enables a commonly understood and standardized format of the relevant data to be transmitted. Transactions are structured for highly automated processing. Each TP must agree to use the standardized format and set of rules in order to participate in EDI.

EDI is widely used for workers' compensation and many states have mandated its use for reporting claims. Standardized transaction sets have been developed so that hundreds of different documents now can be electronically exchanged. The result is a highly efficient means of conducting business.

EDI Advantages

The electronic submission of workers' compensation claim information has many advantages over the submission of paper claims. Benefits for both IAD and TP include:

- Improved reporting performance
 - Electronic submission is a much more efficient way to transmit the legally required information related to workers' compensation claims. Typically, the electronically submitted EDI data is received, processed and acknowledged within hours of its submission, rather than the several days it takes through manual processes such as communicating via the postal system, manual form review, data entry and submission. The timely submission of claim information is of primary importance to both the IAD and the TP.
- Time savings
 - EDI provides an efficient means of reporting the correct workers' compensation claim information to the IAD as quickly as possible. It allows for one time data entry, saving time by eliminating the processing of paper documents that would otherwise be required for both the TP and IAD. Submitting data by EDI also streamlines error reporting by eliminating the phone calls that might otherwise be necessary to ensure that information is reported accurately.
- Cost savings
 - Although there are initial costs involved with designing, developing and implementing a new EDI system, these costs can be recouped and the system can pay for itself many times over by the efficiencies associated with EDI. Sending documents electronically completely eliminates the costs of mailing and handling paper documents. In addition, fewer people are required to monitor and administer the EDI system than are needed to

process paper documents. Thus, personnel at both ends of the electronic transaction who would otherwise be involved in handling paper claims can be assigned to other tasks.

- Improved accuracy
 - EDI reduces the redundant and error-prone entry of the same data into multiple computer systems. Further, by immediately verifying and validating the sender's transaction, the electronic ACK process improves efficiency and accuracy, reducing the time it takes for the TP to correct invalid or inaccurate information.
- Enhanced flexibility
 - Electronic data can be sent anytime, day or night, ensuring the efficient and timely delivery of accurate information. EDI transmissions can be scheduled during non-peak periods when demand for computing resources is lower.

Claims EDI Reporting Standards

This IG is to serve as a tool in assisting our TP in identifying IAD specific requirements. To have a comprehensive understanding of the Claims EDI Standard requirements adopted by IAD, we recommend obtaining and referencing the IAIABC EDI Implementation Guide for Claims: First, Subsequent, Header, Trailer & Acknowledgement Detail Records, Release 3.0, January 1, 2017 Publication. This and other copyrighted standard documents are available through the IAIABC.

IAIABC EDI member organizations can download a copy at:

https://www.iaiabc.org/Document.asp?DocID=5221&MODE=VIEW

Non-member organizations can purchase a copy from the IAIABC at:

https://www.iaiabc.org/Forms.asp?MODE=NEW&Forms_FormTypeID=-811

If you choose to print the IAIABC IG, please be advised that it is set up to print double-sided and is 827 pages long.

Utah's Claims EDI Approved Vendors

Annually, IAD along with the Utah Division of Purchasing and the Utah Department of Technology Services processes a requisition for Claims EDI Vendors to be put on the Approved Vendor List. Through this process EDI Service Vendors are authorized to facilitate Claims EDI filing for Utah's private workers' compensation carriers and self-insured employers and/or their claim administrators (Utah's EDI TP). Although IAD does not endorse a particular vendor, the approval process ensures that only firms with specific Claims Release 3.0 EDI experience are allowed to offer their services to our TP. The approved vendors may offer varied services depending on the TP needs. Once a TP selects a vendor, a trading partner agreement must be signed and submitted to IAD, this designates who will submit EDI transactions on behalf of the TP.

A listing of the authorized Vendors can be found on the IAD Claims EDI Implementation site: <u>https://laborcommission.utah.gov/divisions/IndustrialAccidents/x_edi_implementation.html</u>

EDI Implementation Dates

FROI

Claims EDI R3.0 is **mandatory** as of December 31, 2012. IAD will not process any paper FROI equivalent document received for TP approved in production.

SROI

Voluntary Claims EDI R3.0 reporting as of July 3, 2018. It is anticipated that SROI will be mandatory for all TP reporting effective July 1, 2019. See Section Six: EDI Testing Requirements and Section Seven: SROI Implementation Schedule for additional detail.

Claims EDI Compliance & Penalties

Utah Code Ann. §34A-2-407(5) through (8), §34A-3-108 (4) through (7), indicate failure to file the first report of injury with IAD within the time specified, or failure to provide the employee with a copy of the report, is a Class C misdemeanor and can result in a civil assessment imposed by IAD to the insurer, or self-insured employer, of up to \$500 for each violation.

As noted in our Event Table, injuries shall be reported to IAD within fourteen (14) days of the notice of the injury identified in EDI by Date Claim Administrator Had Knowledge of Injury (DN0041) with an establishing FROI (MTC 00 Original, 04 Denial, or UI Under Investigation).

An insurance carrier, or self-insured claim administrator, has notice of a work injury upon receipt of verbal, or written, information from any source that includes the following:

- i) The name of the employer;
- ii) The name of the employee;
- iii) The date of injury.

If a questionable claim is established with a MTC UI, the TP must complete its investigation of the claim and file either the MTC 00 (acceptance) or MTC 04 (denial) within 45 days of the Date Claim Administrator Had Knowledge of Injury (DN0041) to be considered compliant with the Utah reporting requirements.

On the first business day of each month IAD sends the FROI Compliance Report to the designated contact for the insurer, or self-insured employer, via email that contains untimely Claims EDI filings for the prior month, and the intended penalties. IAD allows 30 days of the report being sent to receive requests for consideration of the penalties assessed.

Upon the consideration period lapsing IAD sends an invoice that reflects the balance owing, providing detail of the waivers issued during the consideration period, along with instructions for remittance.

Please note: This section will be modified upon the Rules being updated to mandate Utah SROI reporting. When implementing SROI, please pay close attention to the required time frames established in our Event Tables.

OSHA Form 301

EDI FROI submission <u>does not</u> substitute reporting of the OSHA Form 301. Employers should be directed to contact Utah Occupational Safety and Health at 801-530-6901, or toll free within Utah at 800-530-5090, to ensure compliance with OSHA Form 301 reporting.

Section Two: EDI Implementation Management

Claims EDI is a method to transmit claims management data to meet jurisdictional reporting requirements. Ideally, EDI converts a manual process into an automated or software-assisted process, to allow computer to computer communication. The initial implementation tasks are to assess the jurisdictions' requirements, compare those requirements to your company's manual and automated claims handling processes to determine the best business solution for your company.

The technical side of EDI has three major components:

- 1) The computer based claim processing system where claim data is stored
- 2) An EDI management system or a component that contains jurisdiction requirements:
 - a. The required report types;
 - b. The required time line for each report;
 - c. The Jurisdictions' data requirements;
 - d. The required edits;
 - e. The Jurisdictions' response to each report
- 3) A system that manages the exchange of reports between two or more parties (TP, EDI Service Vendors, jurisdictions, etc.)

Due to the differences between claim handling processes and computer systems, each TP may have varying degrees of capability. Each must assess, along with their selected EDI Service Vendor, the best way to modify their claim handling process in order to meet the technical EDI components.

If claim volume is miniscule, TPs may apply for access to IAD's reporting alternative. The reporting alternative will only be available to firms whose Utah workers' compensation claim history is a significantly low volume and who do not have the technological capabilities to meet the EDI requirements. Please see the application form found in the back of this IG for eligibility guidelines.

Although the below list is not all inclusive, it will help guide you to key items to consider when evaluating how your firm can comply with this EDI implementation:

- Review your firms' Utah workers' compensation claim history for the past 3 years to determine your average recent claim volume. This average is key in determining your reporting options for Claims EDI: Low to medium volume requires report of Claims EDI through EDI Service Vendor; High volume provides option to apply to directly report Claims EDI through SFTP connection; miniscule volume provides option to apply to report using IAD's reporting alternative.
- 2) Completely read this implementation guide to ensure your firms' understanding of Utah's EDI requirements. Identify the IAD reporting requirements for each data element using the provided Edit Matrix, Event Table and Element Requirements Table. These are available on our

website:

https://laborcommission.utah.gov/divisions/IndustrialAccidents/x_edi_implementation.html

- 3) Have a copy of IAIABC's Claims Release 3.0 Implementation Guide to reference. Reading Section One of this IG will provide you with instructions on how to obtain IAIABC's IG, in addition to helping you gain a basic understanding of EDI.
- 4) Review the definition of each data element located in the Data Dictionary of IAIABC's IG. Note any difference between the standard definitions and those of your organization.
- 5) Note any elements not currently captured by your database in case they need to be added to comply with IAD requirements.
- 6) Verify if your firm already has EDI programming in place as there are approximately 35 states with some form of EDI reporting requirements.
- 7) Assess your firms' current EDI capabilities (hardware & software), and evaluate services offered by the approved vendors to find the best match for your needs.
- 8) Monitor the IAD EDI website's Implementation page: https://laborcommission.utah.gov/divisions/IndustrialAccidents/x_edi_implementation.html for updates and requirement changes. Attend training sessions when possible. Request to be added to the Claims EDI email distribution list by email to: <u>claimsedi@utah.gov</u>
- 9) Train Claim and Technical personnel on their roles and duties. This can be done by ensuring personnel attend IAIABC and/or Utah sponsored EDI trainings. See respective websites.
- 10) Verify your scheduled EDI implementation phase with IAD. If approved for direct reporting, prepare test submissions to fit in your assigned implementation phase. If using an EDI Service Vendor, work with them to ensure successful transition to EDI during your assigned implementation phase.
- 11) Use industry meetings and other business contacts to identify claim administrators that have participated in the development of the standards (IAIABC members), and/or have successfully implemented EDI in other states. Contact these organizations to discuss how best to approach EDI implementation and to check references of approved vendors.
- 12) Share your experience to help those who follow your firm into EDI.

Section Three: Reporting Processes and Options

Utah's EDI reporting process includes:

- Capturing State required reporting data
- Editing for data content and quality
- Translating data into or from IAIABC or ANSI formats
- Managing communications (report transmissions sending & receiving)
- Managing acknowledgments, replacement reports and corrections

Capturing required reporting data

The capture and electronic storage of data required by IAD's EDI implementation can result in a quandary for TP. Although using national standard data elements can simplify TP and state reporting, there can be a gap between IAD's data requirements and the data available through the TP claim handling computer system. If the missing data is identified as "Mandatory" or "Conditional" by IAD, an immediate solution is in order.

Missing data solutions vary and are dependent on several factors. Solutions fall into two categories:

- 1) Modify your claim handling process and computer system to capture the missing data.
- 2) Supplement your current claim handling computer system with an additional data entry and storage capacity for the missing data.

Editing data for content and quality

This requires adherence to the EDI data tables as posted on our website:

https://laborcommission.utah.gov/divisions/IndustrialAccidents/x_edi_implementation.html

Manage communications / transmissions

Success of EDI reporting is dependent on the technical ability to pass data between organizations. Data transfer interruptions may occur and data could be lost.

On behalf of the contracted TP, the approved vendors can/will use a combination of automated software applications and technical operator review of daily transmission results and intervention to identify technical difficulties or reinitiate transmission or recovery operations, which includes:

- Managing TP electronic addresses
- Scheduling transmission sends and receives (daily)
- Recording the success or failure of each attempted send and receive

• Backing up transmission data for a specific period following a successful send or receive

Note: IAD neither endorses nor recommends the products or services of any particular vendor. IAD's authorization of vendors is based solely on their specific Claims EDI experience. Our goal is to provide you, our TP, with competent firms to select from. IAD suggests careful review of vendor products and claims as well as to contact current and past customers prior to contracting a vendors' service.

Manage acknowledgments, replacement reports and corrections

EDI is the reciprocal transfer of data between organizations. In State reporting, the state responds to each submitted report with an acknowledgment that the report was accepted or rejected. The contracted intermediary vendor will communicate these acknowledgments to the TP. It is the responsibility of the TP to replace rejected reports with acceptable reports. It is imperative that rejected reports are corrected and resubmitted as soon as possible - **a rejected report is not considered filed until it has been corrected, retransmitted and accepted**.

In addition to the penalties assessed to the carrier/self-insured employer, **the employer may be assessed a penalty if FROI is not reported, and accepted**, within the 14 days allowed for the establishing EDI to be reported on the claim! Whereas some reports require the prior acceptance of another report, failure to replace rejected reports can cause other reports to be rejected and therefore to be late. This process involves review of IAD acknowledgments one or more times a day, to initiate resolution of the error/s and resubmission of the transaction. Failure to receive an acknowledgment of acceptance may stop additional reports on that claim from being processed until a <u>successful</u> <u>transaction is accepted</u>.

Submitting Options

A review of IAD's data reporting requirements and your current electronic capabilities is key when evaluating the various solutions presented below.

Claim EDI Vendor Reporting Services

There are EDI service vendors experienced with the IAIABC standards that can provide multiple facets to enable TP to meet Claims EDI requirements. IAD used an Approved Vendor List requisition to solicit interested vendors to supply their credentials and pricing schematic for review, IAD then authorized vendors for our TP to select from. When a vendor serves as your EDI submitter, they should perform Utah's EDI reporting process as described above. The details of each service should be worked out with the particular approved vendor the TP selects. **The majority of our trading partners will report via one of the approved vendors.** The approved vendor list is found on our EDI Implementation web page: https://laborcommission.utah.gov/divisions/IndustrialAccidents/x edi implementation.html

Claims EDI reporting requires the EDI Service Vendor be familiar with the following:

• Utah Specific EDI requirements (as per tables posted on our EDI Implementation web page)

• EDI Cause of Injury, Nature of Injury and Body Parts Codes (posted on our EDI Implementation web page)

The following documents are required to be filed with IAD by each TP, or by the EDI service vendor on behalf of the TP:

- Electronic Partnering Agreement
- Electronic Trading Partner Profile
- Electronic Partnering Insurer/Claim Administrator ID List
- Electronic Transmission Profile Receivers Specifications (this is for Sender's benefit)
- Electronic Transmission Profile Sender's Response

These documents may be found on our EDI implementation page: https://laborcommission.utah.gov/divisions/IndustrialAccidents/x_edi_implementation.html

Direct Reporting to IAD

Uses the same SFTP access as vendors allowing the TP to report directly with the IAD, which eliminates the cost of using a vendor. This option is only available to TP that meet certain criteria and claim volume. Please see the Direct Reporting application found in the back of this IG. This requires the TP to be familiar with the following:

- Utah Specific EDI requirements (as per tables posted on our EDI Implementation web page)
- EDI Cause of Injury, Nature of Injury and Body Parts Codes (posted on our EDI Implementation web page)

The following documents are required to be filed by approved direct reporters:

- Electronic Partnering Agreement
- Electronic Trading Partner Profile
- Electronic Partnering Insurer/Claim Administrator ID List
- Electronic Transmission Profile Receivers Specifications
- Electronic Transmission Profile Sender's Response

These documents may be found on our EDI implementation page: https://laborcommission.utah.gov/divisions/IndustrialAccidents/x_edi_implementation.html

IAD EDI Reporting Alternative

TP may apply for access to IAD's reporting alternative. The reporting alternative will only be available to firms whose Utah workers' compensation claim history is a significantly low volume and who do not have the technological capabilities to meet the EDI requirements. Please see the application form found in the back of this IG for eligibility guidelines.

EDI Implementation Assistance

This IG, when used in conjunction with the IAIABC Claims Release 3.0 EDI Implementation Guide provides the business and technical information to meet the IAD EDI submission requirements and includes the data and code requirements for EDI submissions to the IAD.

Section Four: EDI Trading Partner Process

Please note, your business model may require you to take supplemental steps between those suggested below. Or, as an experienced EDI partner, trading with other jurisdictions utilizing Claims EDI Release 3, you may find your company has already addressed some of the below steps.

When forms are referenced in these steps, the location of instructions for completing the forms is also included. If after reviewing the steps you need to discuss them further, please email <u>claimsedi@utah.gov</u> or call 801-530-6809.

1. Contact the IAIABC / Obtain the IAIABC EDI Claims Release 3.0 Implementation Guide

A clear understanding of the IAIABC definitions and standards is required to be a successful EDI TP in Utah. The IAIABC Claims Release 3.0 Implementation Guide augments this IG. Visit the IAIABC web site: <u>https://www.iaiabc.org</u> or call them at: (608) 633-6355 to obtain a copy of the current Claims Release 3.0 Implementation Guide and other publications that may assist in implementing Utah EDI requirements. For Claims Release 3.0 documents, go to: <u>https://www.iaiabc.org/iaiabc/EDI_Claims.asp</u>.

This IG provides Utah specific information that is used in conjunction with the IAIABC EDI Claims Release 3.0 Implementation Guide.

2. Designate an EDI Point of Contact

Regardless of which reporting format your company qualifies for (reporting via an approved vendor, direct reporting or reporting alternative) your company must designate an EDI point of contact. Your company is responsible to update IAD if/when the contact changes. This contact person must be able to speak on behalf of your organization and be knowledgeable about:

- 1. Your source data;
- 2. How to retrieve the source data;
- 3. Your business process and support systems

We recommend that your EDI Point of Contact attend all IAD EDI information meetings and applicable training.

3. Review Utah EDI data requirements and claim events that require reporting

Refer to Section Five: Technical Requirements. This detailed section defines the reports required by Utah and the business events or situations that trigger specific EDI transactions to be filed with IAD. **Determine how Utah EDI Requirements fit with your workers' compensation business processes.**

Section Five: EDI Technical Requirements

All files submitted to the IAD must be in flat (.txt) format. The following section details the possible EDI reports, Claim Event Table, Element Requirements Table and Edit Matrices for EDI submissions.

EDI Reports

The IAIABC EDI standards associate state EDI reporting requirements to claim processing events. Each report or transaction is named for the claim event it represents: Original, Change, Denial, Suspensions, Reinstatements, etc. Each report is also assigned a Maintenance Type Code (MTC) to meet the technical processing requirements. Report name and MTC code may be used interchangeably throughout this guide. The IAD will initially provide for seven claim administration events (MTCs) of the available First Report (FROI) MTCs as listed below.

MTC	Name	Description	IAD Paper Form
00	Original	First Report of Injury	Form 122
01	Cancel Entire Claim	Claim was sent in error and needs to be cancelled. This removes the entire claim (including JCN) from IAD database.	
02	Change	Data element(s) on reported claim need to be changed, removed, or added.	
04	Denial	The claim is being denied in its entirety.	Form 089
AQ	Acquired Claim	Claim previously established by another claim admin. New claim admin notifies IAD of claim acquisition. (JCN required)	
AU	Acquired/Unallocated	This is a 00 equivalent to be sent by claim admin upon acquisition of the claim if it is found that claim not previously sent to IAD via EDI.	
UI	Under Investigation	The claim is being investigated by the TP for compensability.	Form 441

First Reports of Injury

Subsequent Reports of Injury Effective July 3, 2018

MTC	Name	Description	IAD Paper Form
02	Change	Data element(s) on reported claim need to be changed, removed, or added.	
04	Denial	The claim is being denied in its entirety.	
AP	Acquired Payment	The initial benefit payment being made by a claim administrator after acquisition.	Form 141
CA	Change in Benefit Amount	A benefit amount previously reported to IAD on a SROI needs to be updated.	
СВ	Change in Benefit Type	A benefit type previously reported to IAD on a SROI needs to be updated.	
FN	Final	Closed claim, no further payments of any kind expected. FN required on all losses including medical only, compensation, and survivor benefits.	Form 130
IP	Initial Payment	The initial benefit payment is being made.	Form 141
P1	Partial Suspension, Returned to Work or Medically Determined/ Qualified to Return to Work	At least one benefit payment is being suspended for return to work (actual or released) while other benefit payment(s) continue.	
P2	Partial Suspension, Medical Non- Compliance	At least one benefit payment is being suspended for medical non-compliance while other benefit payment(s) continue.	
P3	Partial Suspension, Administrative Non- Compliance	At least one benefit payment is being suspended for administrative non-compliance while other benefit payment(s) continue.	
P7	Partial Suspension, Benefits Exhausted	At least one benefit payment is being suspended because benefit limit has been reached while other benefit payment(s) continue.	
PJ	Partially Suspended Pending Appeal or Judicial Review	At least one benefit payment is being suspended pending Appeal or Judicial Review while other benefit payment(s) continue.	
PD	Partial Denial	At least one benefit payment is being denied, not the entire claim.	Form 089
PY	Payment Report	Payment is being made when Order or Opinion for Advanced Payment or Lump Sum benefits has been issued.	Form 134
RB	Reinstatement of Benefits	Reinstatement of benefits subsequent to previous suspension, denial, or claim closure.	
S1	Suspension, Returned to Work, or Medically Determined/Qualified to Return to Work	All benefit payments are being suspended for return to work (actual or released).	Form 142

S2	Suspension, Medical Non-Compliance	All benefit payments are being suspended for medical non-compliance.	Form 142
S3	Suspension, Administrative Non- Compliance	All benefit payments are being suspended for administrative non-compliance.	Form 142
S6	Suspension, Claimant's Whereabouts Unknown	All benefit payments are being suspended as the claimant's whereabouts are unknown.	Form 142
S7	Suspension, Benefits Exhausted	All benefit payments are being suspended because benefit limit has been reached.	Form 142
SJ	Suspended Pending Appeal or Judicial Review	All benefit payments are being suspended pending Appeal or Judicial Review.	Form 142
UI	Under Investigation	The claim is being investigated by the TP for compensability.	Form 441

Claim Event Table

The Claim Event Table is designed to provide information necessary for the Sender (TP) to understand the Receiver's (IAD) EDI reporting requirements. It associates the required EDI reports to claim events and defines the timing and circumstances for TP to report those events. The claim requirements may include legislative mandates affecting different reporting conditions and may be based on various criteria. IAD uses and controls the table to convey the level of EDI reporting that it currently accepts. The event table contains the following data elements:

- Report Type
- Maintenance Type (Code and Description)
- Event Rule (Criteria, From, Thru)
- Report Trigger (Criteria, Trigger Value)
- When is the Report Due? (Value, Due Type, From)
- Paper Form(s)
- Receiver

A copy of the Utah Claim Event Table may be found on the IAD website.

Element Requirement Table

The list of potential data elements that the IAD requires is listed in the Element Requirement Table. This table lets the TP know the IAD data element requirements. There are separate Element Requirement Tables for FROIs and SROIs. When the respective FROI/SROI tables are effective, the name tab will show individual specific effective dates. Each table lists the data element requirements for each report/record based on the point in time that the data was required by statute, rule, or current version of EDI. The event tables contain the following data elements:

- Record
- DN#
- Data Element Name
- MTC (FROI, SROI)

A copy of the Utah Element Requirement Table may be found on the IAD website.

IAD Requirements to Note

- 1) If a change is needed to a Claim Administrator or TP, it is extremely important to submit updated Insurer/Claim Admin ID List and or Trading Partner Profile as applicable. Simply sending a MTC 02 will not update our system and may result in a TR.
- 2) If the injured employee does not have a social security number or alternate id (see Element Requirement Table), the TP must call the IAD Claims EDI Team at 801-530-6809 to provide the identifying information available (at minimum First and Last Name and Date of Birth are required as these are match data elements that will be edited). An Employee ID Assigned by Jurisdiction (DN0154) will be given to TP for use in reporting First Report of Injury. The Utah JAN is currently 7 numbers and can be up to 9 numbers in the future.
- 3) When injured employee does not have an exact Date of Injury (DN0031) due to basis of the report being an occupational disease, use the diagnosis date as the Date of Injury.
- 4) When location of injury is a rural setting that does not have a cross street reference point, the GPS coordinates are preferred. When GPS is unavailable use the best description available such as mile post number or land survey plot description.
- 5) Concerning Industry Code (DN0025), the definition is the NAICS (North American Industry Classification System) which is accepted in Utah for Proof of Coverage reporting, may be obtained by the policy underwriter.
- 6) If a data element is marked as "Y" in the FROI MTC 02 column a change is allowed, it will be edited against the MTC 00 requirements, meaning if the data element is Mandatory for MTC 00 then it will be Mandatory for FROI MTC 02.
 - a. For further consideration, if the MTC 02 data element being submitted has a conditional requirement for a MTC 00, the same edits apply. Example: if Death Result of Injury Code (DN0146) is changed from "N" to "Y", then Employee Date of Death (DN0057) is Mandatory.
- 7) If a data element is marked as "Y" in the SROI MTC 02 column a change is allowed, it will be edited against the SROI MTC UI requirements, meaning if the data element is Mandatory for SROI MTC UI then it will be Mandatory for SROI MTC 02. IAD does **NOT** allow match data

(with the exception of Insurer FEIN) to be submitted on a SROI MTC 02. If match data is being changed it should be with a FROI MTC 02.

- a. For further consideration, if the MTC 02 data element being submitted has a conditional requirement the same edits apply. Example: if Death Result of Injury Code (DN0146) is changed from "N" to "Y", then Employee Date of Death (DN0057) is Mandatory.
- 8) As shown in our tables a state code is Mandatory, as we use this in validation. We understand this can become an issue for certain outside countries that do not use state codes. To accommodate this, we've relaxed our edits so that entry of ZZ as a state code may be used only if the country code being reported is not the United States.
- 9) In FROI Late Reason Code (DN0077) is triggered off of the Date Claim Administrator had Knowledge of Injury (DN0041). The time frames are listed in IAD Event Table. In SROI DN0077 triggers vary based on the event being reported, please refer to the IAD Event Table.
- 10) First Day of Disability After the Waiting Period (DN0297) is the date injured worker is ordered by a doctor either: a leave of absence from work based on the injury; or is placed on light duty <u>and</u> is not paid full wages.
- 11) The only Permanent Impairment Body Part Code (DN0083) value that IAD accepts is 99 Whole Body.
- 12) Employee SSN (DN0042) is validated for format against numbers allocated by the Social Security Administration. Reference: https://www.ssa.gov/employer/stateweb.htm. SSN have not been assigned greater than 733-xx-xxxx. Additionally, any number beginning with 000 will NEVER be a valid SSN. (Please refer to JAN processing number 2) of this section if employee provides an invalid SSN).
- 13) IAD validates all dates (i.e. Date of Birth, Date Disability Began, etc.) for format (must fall between January 1, 1753 and December 31, 9999) based on known limitations within the Sybase and SQLServer database management systems.
 - If an MTC was originally accepted by IAD with invalid date format and is now rejecting, it is because the transaction was not written to the database due to the system limitation. The MTC should be resubmitted without a JCN as an establishing FROI to allow for further reporting.

Edit Matrix

The Edit Matrix is used by TP to identify which data elements have edits applied to them as well as associated standard error codes. The Edit Matrix consists of five components:

- Data Element Name
- DN#

- Error Code
- Error Code Description
- MTC (FROI, SROI)

The IAD provides Edit Matrices for each of the following reports:

- FROI-148
- FROI-R21
- SROI-A49
- SROI-R22

A copy of the Utah Edit Matrix may be found on the IAD website.

SFTP Requirements

EDI TP and/or their selected EDI Service Provider will be required to submit workers' compensation reports to the IAD using the approved method and are expected to have an SFTP program (or service provider) capable of connecting to the IAD Secure FTP server using FTP/Implicit SSL.

Establish File Properties

EDI files should be transmitted in flat file (.txt) format and should not be compressed or encrypted. The file will have the following format: **Z_V_F_YYYYMMDD_HHMMSS.TXT** where;

Z = Test or production status (T = test, P = production)

V = IAIABC release version (R3)

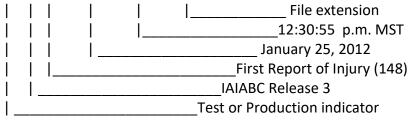
F = form type (F= FROI. When SROI is implemented then will also use S = SROI)

YYYYYMMDD = 4 digit year, 2 digit month, 2 digit day for the date it was transmitted

HHMMSS = hour, minutes and seconds, in military format, the file was transmitted (Valid values: 000000 (midnight) to 235959)

TXT = extension for flat text files

Example of how the file would look: T_R3_F_20120125_123055.TXT



The acknowledgement we return will follow this format:

akc-YYYYMMDD-HHMMSS.txt

Example:

akc-20110824-191800.txt

Section Six: EDI Testing Requirements

The objective of testing is to confirm that the EDI Service Vendors and EDI Direct Reporters are adhering to the requirements documented in the Electronic Partnering Agreement, and the State of Utah Approved Vendor List Master Agreement (Vendors) or Application for Claims EDI Direct Reporting (Direct Reporters), testing will continue until the trading partner's submissions meet these standards.

TP reporting to Utah using an approved EDI Service Vendor will not be subject to complete individual IAD testing, unless if they have failed to maintain the minimum data accuracy level, *defined as less than 10% of submitted production Claims EDI transactions rejecting.* We recommend that TP work with the EDI Service Vendor and IAD's EDI Compliance Team when a Claims EDI results in a TR to ensure that they maintain accuracy above the required minimums.

The EDI Service Vendor testing must be completed before their client companies will be authorized to submit in our production environment. IAD recommends during the SROI implementation period (July 3, 2018 to June 30, 2019) that EDI Service Vendor testing is completed in Phase 1, to allow the client companies access to choose to enter production for Utah SROI during any of the four SROI implementation phases.

The EDI Direct Reporter testing must be completed prior to being approved for reporting in our production environment. Until an EDI Direct Reporter is approved in production, they should continue to submit production claims through an approved EDI Service Vendor, exception is during the SROI implementation phase (July 3, 2018 to June 30, 2019) they should continue to mail in the SROI paper equivalent to IAD. The EDI Direct Reporter testing for SROI must be completed during one of the 4 SROI implementation phases.

Success criteria for testing will include the following:

- Transmission protocols (FTP) are functional for submissions and acknowledgements
- Sender/Receiver identifiers are correct as per the Trading Partner Profiles
- Batch submissions are organized properly
- Claim files are formatted properly and contain accurate data

Visit our website:

<u>https://laborcommission.utah.gov/divisions/IndustrialAccidents/x_edi_implementation.html</u> to follow the below steps.

6.1. Test Preparation

Reference Test Plan in 6.5 for FROI testing and 6.6 for SROI testing to obtain Production Readiness.

At least two weeks prior to the first day of the scheduled FROI test period, the TP must complete and submit the Trading Partner Agreement, Trading Partner Profile, Transmission Profile (Sender's Specification) and Claim Admin ID List to IAD.

IAD's EDI Compliance Team will communicate next steps for submitting data and will coordinate all testing activities with the EDI Service Vendor or EDI Direct Reporter.

Please refer to Section Seven: SROI Implementation Schedule for additional requirements when completing 6.6 SROI Testing during the SROI implementation, July 3, 2018 to June 30, 2019.

6.2. Create a Test File

Use the FROI Test Plan provided in 6.5 and the SROI Test plan provided in 6.6. The sender may use either "real" or "fictitious" data.

Note: If the sender is using "real" data it will <u>not</u> go to the production data base. If the sender is using "fictitious" data, the complete data set must be provided to IAD to load into our system **PRIOR** to testing.

6.3. Submit the Test File

The test file should be sent in accordance with the designated format and EDI transmission requirements.

First Level Test (Batch and Transaction)

The purpose of the First Level Test is to ensure that the trading partner and the IAD are "communicating properly" with each other and in accordance with the Trading Partner Agreement. The test focuses primarily on the transmission of EDI files between both parties as well as the general structure of the files to ensure they can be "read" upon receipt. Testing at the first level encompasses batch and transaction level validation.

Batch Level Validation

• Header Record – Verifies that all mandatory data elements are present and that the Sender ID is appropriate. Further, this test validates the transmission date, time, and interchange version and rejects duplicate batches.

• Batch Structure – The structure of the batch will be interrogated to properly identify the types of transactions contained within the batch (FROI or SROI and Trailer).

• Trailer Record – Verifies that all mandatory data elements are present and contain valid formats and values.

Transaction Level Validation

• Sender/Claim Administrator Relationship – Verifies that the Sender ID is authorized to submit filings on behalf of the carrier in the transaction. If authorization does not exist, the transmission will be rejected.

• Record Relationship – Validates the relationships between the 148 and R21 or A49 and R22.

• Match Data/Duplicate Transactions – Tests to see if a FROI "00" transaction results in a new claim or duplicate of an existing claim. Transactions failing these tests will be rejected.

Second Level Test (Regulatory)

Once the transmission process has been successfully completed, FROIs and SROIs will be tested for data accuracy. For the purpose of this document, data accuracy is defined as EDI transmissions that are complete (all required data is present) and accurate (the data is free from errors and is appropriate for the field in which it resides).

Regulatory Level Testing:

• Format Editing - IAD jurisdiction specific editing will be performed at this level. Mandatory/If Available data elements as indicated in the Element Requirement Table will be interrogated for validity. Edit failure at this level will result in a TR (Transaction Rejected) acknowledgement code depending upon the specified requirement code.

• Data Element Relationship - Some data values may be dependent on the value of another data element. These requirements are presented on the Element Requirement Table and Edit Matrix. Failure of necessary relationship edits may result in errors.

6.4. Acknowledgement Processing

Once all the transactions within a batch have been tested according to IAD jurisdiction requirements an Acknowledgement file will be sent to the Submitter in the format specified. It will be the trading partner's responsibility to monitor the Acknowledgements and take any corrective action.

6.5. FROI Test Plan

Purpose

The purposes of testing are to:

- 1) Ensure that the Sender's transmissions meet technical and business requirements.
- 2) To develop a working relationship between the business contacts for the Trading Partner (sender/submitter) and the Industrial Accidents Division (receiver).

The following are checked during testing:

- ✓ The transmission mode for both transaction and acknowledgment files is functional and acceptable for both Receiver and Sender/Submitter;
- ✓ The Sender/Submitter ID is valid and recognized by the Receiver.

- ✓ The Receiver ID is valid and recognized by the Sender/Submitter;
- ✓ The file format matches the file format specified on the Transmission Profile of the Sender/Submitter;
- ✓ The batch format of files sent by the Sender/Submitter is correct with each batch containing an appropriate header record, one or more records, and a trailer record;
- ✓ The number of records sent matches the number indicated in the trailer; and
- ✓ The quality of the data

Test Requirements (Batch 1-5)

- No errors in the header and trailer records occur.
- Sender/Submitter can receive electronic acknowledgements.
- Sender/Submitter transmits five batches (test files) sequentially of quality First Reports of Injury with MTCs and conditions described as follows:

Batch 1

- ➤ 3 00 Original First Report of Injury
- 2 04 Denial as Establishing First Report of Injury
- 2 UI Under Investigation
- 1 AU Acquired/Unallocated

Batch 2

- 2 00 Original First Report of Injury (One should be a Fatality and the second a lost time Claim Type Code (DN0074) is I (Indemnity for Lost Time))
- 2 04 Denial as Establishing First Report of Injury (One should be untimely as defined the MTC date (DN0003) is greater than 14 days of Date Claim Admin Had Knowledge (DN0041)).
- 2 UI Under Investigation (One should be untimely as defined the MTC date (DN0003) is greater than 14 days of Date Claim Admin Had Knowledge (DN0041)).
- 2 AU Acquired/Unallocated (One should be untimely as defined the MTC date (DN0003) is greater than 14 days of Date Claim Admin Had Knowledge (DN0041)).

Batch 3 (Build off of claims submitted in Batch 1 using assigned JCN from ACK)

- 2 04 Denial following two of the 00 submitted (One should be untimely as defined the MTC date (DN0003) is greater than 21 days of Date Claim Admin Had Knowledge (DN0041)).
- ➤ 1-01 Cancel following the third 00 submitted
- ➤ 1-01 Cancel following one of the 04 submitted
- 1 02 Change modifying match data (i.e. Employee Date of Birth (DN0052)) following the second 04 submitted.
- 2 00 Original First Report of Injury following the UI submitted (One should be untimely as defined the MTC date (DN0003) is greater than 45 days of Date Claim Admin Had Knowledge (DN0041)).
- 1 02 Change modifying non-match data (i.e. Employer Name (DN0018)) following AU.

Batch 4 (Build off of claims submitted in Batch 2 using assigned JCN from ACK)

2 - 02 Change following 00 modifying a different match data element for each (i.e. Date of Injury (DN0031) for one MTC 02 and Employee SSN (DN0042) for the second)

- > 2 00 Original First Report of Injury following the 04 submitted.
- 2 04 Denial following the UI submitted (One should be untimely as defined the MTC date (DN0003) is greater than 45 days of Date Claim Admin Had Knowledge (DN0041)).
- > 2 AQ Acquired Claim following the AU submitted.

Batch 5 (Sequence appropriately following the MTCs contained in Batch 3).

- ➤ 2 01 Cancel following the 04 submitted.
- 1 04 Denial as Establishing First Report of Injury using the same claim information as the 01 Cancel following the third 00 submitted (first 01 Cancel case in batch 3).
- 1 00 First Report of Injury using the same claim information as the 01 Cancel following one of the 04 submitted (second 01 Cancel case in batch 3).
- ➤ 1 00 First Report of Injury following the 02 Change modifying match data.
- > 2 AQ Acquired Claim following the 00 Original First Report of Injury.
- 1 02 change modifying match data (i.e. Employee Date of Birth (DN0052)) following the 02 Change modifying non-match data.
- If Sender/Submitter receives a TR ACK in a test batch, they will take corrective action and resubmit the rejected MTC until all are accepted with TA ACK, before moving on to the next batch.

Move from Testing to Production

The length of testing depends on the Sender/Submitter's transaction rejected rate and data quality. Once the Sender/Submitter has met the testing requirements, as stated above, the Receiver will notify the Sender/Submitter in writing that production data can be transmitted.

6.6. SROI Test Plan

Purpose

The purposes of SROI testing are to ensure that the:

- 1) Sender's transmissions meet technical and business requirements.
- 2) Sender understands the SROI sequencing requirements.

The following are checked during testing:

- ✓ The transmission mode for both transaction and acknowledgment files is functional and acceptable for both Receiver and Sender/Submitter;
- ✓ The Sender/Submitter ID is valid and recognized by the Receiver.
- ✓ The Receiver ID is valid and recognized by the Sender/Submitter;
- ✓ The file format matches the file format specified on the Transmission Profile of the Sender/Submitter;
- ✓ The batch format of files sent by the Sender/Submitter is correct with each batch containing an appropriate header record, one or more records, and a trailer record;
- \checkmark The number of records sent matches the number indicated in the trailer; and
- ✓ The quality of the data

SROI Test Requirements

- No errors in the header and trailer records occur.
- Sender/Submitter can receive electronic acknowledgements.
- Sender/Submitter's SROI test data may build off of the FROI test data submitted in IAD test environment. Using the JCNs issued for accepted test transactions. Please note the number of SROI test transactions may require additional FROI test cases to complete all requirements outlined below.
- Sender/Submitter ability to create and sequence batches of quality Subsequent Reports of Injury resulting in acceptance (TA) sufficient to meet at minimum the test conditions described as follows:
 - IP Initial Payment as Establishing SROI where Claim Type Code is I (Indemnity for Lost Time)
 - IP Initial Payment as Establishing SROI where Claim Type Code is L (Became Indemnity for Lost Time)
 - > IP Initial Payment as Establishing SROI where injury is a fatality.
 - > UI Under Investigation as Establishing SROI
 - PD Partial Denial as Establishing SROI
 - FN Final as Establishing SROI
 - PY Payment Record as Establishing SROI
 - > AP Acquired Payment as Establishing SROI
 - CA Change Amount
 - CB Change Benefit
 - > 02 Change modifying the Insurer FEIN (DN0006)
 - > 02 Change modifying a non-match data element
 - IP Initial Payment (not establishing)
 - PD Partial Denial (not establishing)
 - FN Final (not establishing)
 - PY Payment Record (not establishing)
 - AP Acquired Payment (not establishing)
 - > 04 Denial
 - Two Suspensions (any IAD accepted MTC Sx)
 - Two Partial Suspensions (any IAD accepted MTC Px)
 - > RB Reinstate Benefits that follows a PD Partial Denial
 - > RB Reinstate Benefits that follows a 04 Denial
 - RB Reinstate Benefits that follows a FN Final
 - RB Reinstate Benefits that follows a Sx Suspension
- If Sender/Submitter receives a TR ACK in a test batch, they will take corrective action and resubmit the rejected MTC until all scenarios have been successfully processed with TA ACKS.

Move from Testing to Production

The length of testing depends on the Sender/Submitter's transaction rejection rate and data quality. Once the Sender/Submitter has met the testing requirements, as stated above, the Receiver will notify the Sender/Submitter in writing that production data can be transmitted. All Trading Partners are to be in SROI Production by July 1, 2019 (tentative mandate date).

6.7 TP Corrective Testing

Purpose

When a TP begins sending FROIs and SROIs electronically, it is important to note that **the TP will be** required to maintain the minimum level of data accuracy, defined as less than 10% of submitted transactions rejecting after they are certified production ready. Failure to maintain the minimum accuracy level will result in the trading partner being placed in "Test" status.

Monthly Claims EDI Compliance Reports will be sent to the Insurers detailing timeliness and error ratio of the insurers and the claim administrators submitting data on their behalf. The reports will be sent the 1st business day of the following month.

Test Requirements

TP may be subject to complete the FROI and/or SROI Test Requirements (Batch 1-5) as identified in sections 6.5 and 6.6. However, IAD reserves the option to structure a more lenient corrective test plan based on the type of rejections that led to the TP being required to enter Corrective Testing (i.e. if rejection rate is triggered off of one MTC, or EDI process, TP may be asked to submit test files that specifically address the identified trigger instead of completing the entire FROI and/or SROI Test Requirements).

Move from Testing to Production

The length of testing depends on the Sender/Submitter's transaction rejection rate and data quality. Once the Sender/Submitter has met the testing requirements, the Receiver will notify the Sender/Submitter, and EDI Service Vendor (when applicable), in writing that production data transmission may be resumed.

When production is resumed the carrier is to report any claims information that they received during the corrective testing period to IAD via EDI. There may be resulting timeliness penalties based on the length of period the TP is in corrective testing as IAD will not allow the Maintenance Type Code Date of any production MTC to fall within the corrective testing period.

Section Seven: SROI Implementation Schedule

IAD SROI Implementation Period will run from July 3, 2018 to June 30, 2019. It is anticipated that SROI will be mandated for all claims with a date of injury on, or after, July 1, 2019. All Utah insurers, self-insured employers, and third party administrators that report on behalf of an insurer/self-insured employer should implement SROI in one of the four phases as follows:

- 1) Phase 1: 3Q2018 July 3, 2018 to September 30, 2018
- 2) Phase 2: 4Q2018 October 1, 2018 to December 31, 2018
- 3) Phase 3: 1Q2019 January 1, 2019 to March 31, 2019
- 4) Phase 4: 2Q2019 April 1, 2019 to June 30, 2019.

TP should notify IAD in writing of the phase that they have chosen to implement SROI in by completing the form that immediately follows this section and returning to IAD at <u>claimsedi@utah.gov</u>. Our EDI Compliance Team will send approval of SROI implementation and further instruction in advance of the selected phase.

Please note, upon SROI becoming mandatory any insurance carrier or self-insured employer that has not voluntarily implemented risks being assessed a penalty of up to \$500.00 per required EDI filing. Additionally, IAD may make a referral to the Utah Insurance Department for appropriate disciplinary action against the insurance carrier; or IAD may revoke a self-insured employer's authorization to remain self-insured.



SROI Implementation Phase Application

The Utah SROI Implementation Period will run from July 3, 2018 to June 30, 2019. It is anticipated that SROI will be mandated for all claims with a date of injury on, or after, July 1, 2019. All Utah insurers, self-insured employers, and claim administrators reporting on behalf of an insurer/self-insured employer should provide notice to the Industrial Accidents Division of their intention to implement no less than one month in advance of a phase. Being approved for the selected implementation phase will be contingent on the SROI testing completion of direct reporting entities, or that of the utilized EDI Service Vendor. The final date to commit to an implementation phase is December 1, 2018.

Please return the completed form by email to <u>claimsedi@utah.gov</u>. If you have any questions, please contact the Utah EDI Compliance Team at (801) 530-6809.

Please select from the below implementation phases:

Selection	Phase Number	Implementation Period	Application Due By
	1	July 3, 2018 to September 30, 2018	June 3, 2018
	2	October 1, 2018 to December 31, 2018	September 1, 2018
	3	January 1, 2019 to March 31, 2019	December 1, 2018
	4	April 1, 2019 to June 30, 2019	December 1, 2018

Note: A form should be completed for each entity with an active Utah Trading Partner Agreement. The implementation will apply to all claim administrators listed under the Trading Partner Agreement.

Trading Partner Name: ______

EDI Primary Contact: ______

E-Mail Address:_____

Phone Number:_____



Application for Direct Reporting to IAD

Date:	
Company Name:	
Contact Name:	
Contact Email:	Contact Phone:

We formerly request approval for Secure File Transfer Protocol reporting of workers' compensation claim information. Our company meets the following requirements (mark all that apply):

- Reported Utah workers' compensation claim volume for the past three calendar years has averaged 2,500 or more.
- Our company has reported workers' compensation claim information in the IAIABC Claims Release 3 format for the past three years to at least two jurisdictions. The following jurisdictions can be contacted for reference:

_				
•				
•				

- Our company is a subsidiary of a parent company that has reported workers' compensation claim information in the IAIABC Claims Release 3 format for the past three years to at least two jurisdictions. Our company utilizes the same technology as our parent company and can meet the Claims Release 3 EDI standards. The following jurisdictions can be contacted for reference:
 - _____

• _____

Our company understands that allowance to file workers' compensation claim information directly to IAD's SFTP is predicated on successful testing as described in Utah's Claims EDI Implementation Guide.

Our company understands that if SFTP access is granted, and subsequent submissions fail to meet production standards of less than 10% of submitted transactions rejecting, then access will be revoked and our company will be required to use the services of one of Utah's approved EDI service vendors.

Name and Title of authorized personnel to submit this application



Application for IAD EDI Reporting Alternative

Date:	
Company Name:	
Contact Name:	
Contact Email:	Contact Phone:

We formerly request approval for access to the claim reporting alternative. Our company meets the following requirements (mark all that apply):

- Reported Utah workers' compensation claim volume for the past three calendar years has averaged 5 or less.
- Our company has **not** reported workers' compensation claim information in the IAIABC Claims Release 3 format to any other jurisdiction.
- Our company has reported workers' compensation claim information in the IAIABC Claims Release 3 format to the following jurisdictions for <u>less than</u> three years. The following jurisdictions may be contacted for reference:
 - •
 - _____
 - ۹ _____

- Our company is a subsidiary of a parent company that has **not** reported workers' compensation claim information in the IAIABC Claims Release 3 format to any jurisdiction. Our company utilizes the same technology as our parent company and <u>can</u> <u>not meet</u> the Claims Release 3 EDI standards.
- Our company does not utilize a third party claim administrator (TPA)

Our company understands that allowance to file workers' compensation claim information using the reporting alternative is predicated on the low Utah claim volume and inability to meet Claims Release 3 EDI standards.

Our company understands that if reporting alternative access is granted, and future claim volume exceeds the authorized claim volume or if our company upgrades technology to meet the Claims Release 3 EDI standards, then the alternative access will be revoked and our company will be required to use the services of one of Utah's approved EDI service vendors.

Name and Title of authorized personnel to submit this application