

## Release 3.0

### Questions and Answers

Last Updated: September 13, 2011

Below are some of the questions we have received to date regarding Release 3.0. We have had such an abundance of questions that we plan to update this group of questions periodically. Please check back frequently for updates to this list. If your question is not included in this group, please be patient as it should be addressed in a future update.

1. A partial suspension (Pxx) denotes that two benefit types are being paid concurrently. It is my understanding this does not occur in KY. How would concurrent benefits be possible in Kentucky?

**Answer: It is possible for TTD to be paid at the same time as another Benefit Type (DN0085) such as 410 – Vocational Rehabilitation Maintenance. Therefore, one of these benefits could be suspended while the other continues.**

2. Please explain when a follow up transaction would be due following a FROI 00 if the claimant returned to work and benefits were never due. Should a FROI 02 or SROI 02 be filed with reporting a return to work date if benefits were never payable? Do we need to go back on these claims and file a FROI 02 now so you have a return to work date? If so, would this be a “fineable” area for not reporting the data timely?

**Answer: A follow up report would not be due on a NLT claim simply because a NLT is not required to be reported. Regardless if the claim was LT or NLT, a FROI 02 report could be used to report the RTW date if it was not provided in the original FROI, but it is not required. However, when the RTW date is absent from the original FROI, it is helpful to DWC as well as the Carrier for the RTW date to be provided in order to determine LT and NLT relating to timely filing of**

the

original FROI. Fines are assessed according to data provided on the 00, IP and S1.

3. An adjustor is investigating a claim, but can't complete the investigation/compensability determination until med records are received: does he have to file a FROI 00 or 04 within the usual time limits?

Answer: The appropriate reports should be filed within the time limits allowed. However, in this circumstance, a FROI UI could be the initial report filed.

4. How long can the adjustor wait before paying TTD benefits on a claim he is investigating?

Answer: Per KRS 342.040 (1), benefits should be paid no later than the 15th day after the employer has knowledge of disability or death.

5. How can we report TPD (temporary PARTIAL benefits) which are paid voluntarily (not required)?

Would those fall under an IP?

Answer: There is no provision for reporting TPD benefits. Reports that include TPD codes will be

rejected.. We will no longer reject reports with TPD codes. They will be accepted, but are not required to be reported.

6. Are the edits on Accident Site Address fields (120 – 123) two separate edits or two parts of one

edit ('Lessee AND after implementation date' or 'Lessee OR after implementation date')? Also Employer Mailing Address fields (165, 168, 170) are worded similarly as well as 146-Death Result

of Injury and 314-Insured FEIN.

Answer: Per IAIABC standard, if a data element has not always been required to be reported, but is required now, it should be listed as MC. The condition should identify at which date this data element is mandatory. Prior to this date, the data element is NA. Therefore, in all these instances the technical condition applies AND is to be supplied if the claim administrator had knowledge of the injury on or after the implementation of R3.

7. On (DN005) JCN, (DN73) Claim Status and (DN74) Claim Type, the SROI AP is marked IA. Should this be M?

Answer: Per IAIABC standards, M is not valid for these DN#s on the SROI AP. Other match

criteria will be used other than the JCN.

8. Should (DN146) Death Result of Injury be M on SROI CD, P4 and S4? I can't tell if it's always

with (DN057) Date of Death or only with date of death after R3 implementation date.

Answer: Per IAIABC standard, if a data element has not always been required to be reported, but is required now, it should be listed as MC. The condition should identify at which date this data element is mandatory. Prior to this date, the data element is NA. Therefore, in all these instances the technical condition applies AND is to be supplied if the claim administrator had knowledge of the injury on or after the implementation of R3. For these DN#s, they are M if the Employee DOD is present AND if the claim administrator had knowledge of the injury on or after the implementation of R3.

9. Why is (DN016) Employer FEIN IA on the SROI IP? If it's M on all FROIs, it should be available on the SROI.

Answer: This is an internal business practice and is consistent with the IAIABC standard. We are capturing the Employer FEIN on the FROI, not SROIs. This will not be used for matching purposes on the SROIs or overlay prior Employer FEIN if a different number is provided. We assume the Employer FEIN provided on the FROI is correct until it changes as a result of a FROI (02) Change for an erroneous number provided in the original FROI or when the claim is acquired and an AU or AQ is reported.

10. The conditions for the ACR's appear to be missing from your tables. Example: If the counter > 0, if one element is present the others must be ... those types of edits.

Answer: Conditions for these are provided in the SROI Conditional Requirement Tables for DN#s

92, 93, 94, 126, 127, 129, 130, 131 and 133. No conditions are listed for DN#s 125, 128 or 132 as those are not M fields, they are IA.

11. If we provide a SIC Code in the (DN0025) Industry Code field, do you want the "SC" tacked onto

the end of it?

Answer: You may send either SC or blanks at the end of a 4 digit SIC code.

12. What exactly are your class codes? Are they all NCCI or a subset - NCCI plus proprietary?

Answer: The (DN0059) Manual Classification Code List is provided on our website. These are NCCI codes, but the list provided on our website is Kentucky specific and some of the NCCI codes are not included in this list, therefore are not accepted.

13. Does (DN297) Initial Date of Lost Time = 8th day of disability?

New Answer: Yes this would be the 8th day according to the definition in the IAIABC

Implementation Guidebook Data Dictionary which defines DN297 as “The first day qualifying as a

day of disability in the first period of disability after the waiting period requirements have been met.” Therefore, the date that should be provided in the DN297 field would be the 8th day of disability or the first day of “payable lost time”. To clarify Kentucky’s requirements relating to lost

time claims, a FROI is required to be filed with Kentucky DWC per KRS342.185 and 342.200, within one (1) week after the occurrence and knowledge of an injury to an employee causing his absence from work for more than one (1) day. Therefore, the first day of work the employee misses would be the actual first day of “lost time”, which is the Initial Date Disability Began DN0056.

14. Does (DN0298) Date Claim Administrator Had Knowledge of Lost Time = 8th day of disability?

New Answer: Yes this would be the 8th day according to the definition in the IAIABC

Implementation Guidebook Data Dictionary which defines DN298 as “The date the claim administrator was notified or became aware that the employee was disabled beyond the waiting period and/or was entitled to indemnity benefits.” Therefore, the date that should be provided in the DN298 field would be the 8th day of disability or the first day of “payable lost time”. To clarify

Kentucky’s requirements relating lost time claims, a FROI is required to be filed with Kentucky DWC per KRS342.185 and 342.200, within one (1) week after the occurrence and knowledge of an injury to an employee causing his absence from work for more than one (1) day. Therefore, the first day of work the employee misses would be the actual first day of “lost time”, which is

the

Initial Date Disability Began DN0056.

15. Does (DN0192) Benefit Payment Issue Date = day check is mailed?

Answer: Yes mailed or picked up by the employee. According to the definition in the IAIABC Implementation Guidebook, this would be correct.

16. What DN fields and MTCs are used to process timely filing reports?

Answer: The timely filing reports are run on the FROI 00, SROI IP and the Suspension MTCs.

In

Release 3.0, the reports will be run on all Sxx codes, not just S1. The DN #s that are used are as follows:

FROI 00: DN040 Date Employer Had Knowledge of Injury and Date Received by DWC

SROI IP: DN088 Benefit Period Start Date

SROI Sxx: DN089 Benefit Period Thru Date

17. When can we start testing for Release 3.0?

Answer: January 1, 2011

18. Are we required to test?

Answer: You are not required to test with DWC, but it will only be to your benefit to do so.

19. Will we have to update our trading partner agreement and profile?

Answer: We are currently in discussion relating to trading partner agreements and profiles.

Please keep checking our website for updates on this.

20. It appears that if the FROI 04 Denial is filed after the FROI 00, there is no timeframe associated

with when the 04 is due. Is this correct?

Answer: Yes this is correct. The time requirements provided on the FROI Event Table for the FROI 04 Denial applies when the FROI 04 is the original FROI filed. If it follows the FROI 00, there is no time limit for denying the claim.

21. Wage Period code (DN0063) is M on 00, but Wage (DN0062) is MC – both should be M or MC.

Answer: A modification has been made to our tables - these should both be MC. M if first FROI and claim type code = I or L. **See Change Log**

22. On (DN17) Insured Name, should (DN198) Full Denial Reason Code not = 3E (No

Coverage, No

policy in effect) be applied to the MC on the 04 like it is for DN184?

**Answer: Yes – A modification has been made to our tables. The condition has been adjusted to include: If the 04 is the original FROI and the Full Denial Reason Code (DN0198) is not = to 3E, then the Insured Name (DN0017) is M. See Change Log**

23. On (DN19) Employer Physical Primary Address – should this be MC for 00 and AU instead of M

like the other Employer address fields?

**Answer: A modification has been made to our tables that will change these to MC. See Change Log**

24. On (DN15) Claim Admin Claim Number, the AP is marked IA (A49 record). Should this be F?

**Answer: Yes. A modification has been made to our tables to reflect this correction. See Change Log**

25. Why is DN66-Full Wages Paid for DOI Mandatory on the BM (and only the BM)?

**Answer: Modifications have been made to tables to reflect IA for BM. See Change Log**

26. On (DN-299) Award/Order Date is MC for PY, but there is no condition listed.

**Answer: This should be IA. A modification has been made to the tables. See Change Log**

27. On the PY, DN#s 217, 219, 220 and 195 are all MC based on presence of DN# 222 being populated. However, DN # 222 is Mandatory, so shouldn't all of these be M too?

**Answer: Yes they should. We have made modifications to our tables. See Change Log**

28. The Edit Matrix does not reflect 070 and 270 as being grayed out for DN#222 Payment Reason

Code. Also, 570 is not grayed out on DN#222 or DN#85. Is this an oversight?

**Answer: Yes this is an oversight. A modification has been made to our tables. See Question 5 – we will now accept these codes. See Change Log**

29. The (DN064) Number of Days Worked Per Week is M on the FN, but the wage information is not

M. Usually these are “grouped” together. Since you don't require the FN, should DN064 be IA?

**Answer: Yes it should be IA. A modification has been made to our tables. See Change Log**

30. On the FROI Event Table, the AQ/AU has a trigger value for following a UI. Don't you need

the

AQ/AU first from the new TPA?

Answer: The AU or AQ is required when a new claim administrator acquires a claim. However it is possible that a claim be acquired by a new claim administrator after the UI has been filed, but prior to the FROI 00 or 04. If this occurs, the AU should be filed after the UI. However, the AQ cannot immediately follow the UI. A modification has been made to the FROI Event Table to exclude the AQ to be filed immediately following the UI. **See Change Log**

31. Are you expecting the AQ to reject if it is filed prior to AU?

Answer: Yes, the AQ will be rejected if the AU has not previously been filed.

32. On the SROI Event Table, the trigger value for the PD states partial denial of TP or PP benefits.

Is this correct?

Answer: This is an error on the table and should be TT. A modification has been made to our tables. **See Change Log**

33. If a FROI 01 Cancel report is filed in error, should we pick up with the next MTC or do we need to

start back with an original FROI and get a new JCN?

Answer: Once a FROI 01 has been accepted, the claim is cancelled. No other MTCs will be accepted. If the 01 was filed in error, you will need to start all over and file a new FROI 00.

34. What would be the appropriate SROI Sxx code to send in when benefits have been sent in error

on a record that we plan to cancel?

Answer: Consideration has been given to the sequencing table and a modification has been made to the DWC tables to reflect that if benefits have been sent in error and the entire claim is being cancelled, it will be sufficient to send in the FROI 01 Cancel report. By sending the FROI 01, it is assumed that all benefits that may have been reported are cancelled as well. **See Change Log**

35. What would be the appropriate SROI Sxx code to send in when the entire claim is being denied

after benefits have been reported?

Answer: Consideration has been given to the sequencing table and a modification has been

made to the DWC tables to reflect that the appropriate suspension code should be sent prior to sending a SROI 04 when feasible. However, it will be sufficient to send in the SROI 04 Denial report without a prior Sxx MTC on file. By sending the SROI 04, it is assumed that all benefits that may have been reported are suspended or denied in full. **See Change Log**

36. Can anyone send in test data during the month of January 2011 or will you coordinate who can send them?

Answer: Anyone who currently submits files to KY through a vendor or plans to do so for Release

3.0 can send test data through a vendor. Please contact Cam Lawson at [howard.lawson@ky.gov](mailto:howard.lawson@ky.gov) Stephen Mason at [StephenA.Mason@ky.gov](mailto:StephenA.Mason@ky.gov) with your intent to test.

37. Can “live” claims be used for testing or will it corrupt KY claim data? Should “dummy” data be sent?

Answer: Live data can be sent, however by choosing the Test Indicator “T”, your data will not go into live production, so you would also need to send the live data as well choosing the Production Indicator “P”.

38. The Claim Administrator Claim Representative Name (0140) is Mandatory for many of your SROI MTCs. For what purpose is this necessary? Normally our claim adjusters are not the professionals that handle the EDI filings. The actual filings are usually handled by support level staff.

Answer: This is a jurisdiction required field.

39. It was mentioned that P2, P3, P5, P9, and PJ will not be accepted in Release 3.0 as Mr. Lovan stated he did not feel they were justifiable. For instance, the P5, incarceration, he did not feel being incarcerated was a reason to discontinue benefits. Were these meant to be not acceptable as full suspensions (S2, S3, S5, S9 and SJ)?

Answer: Kentucky does not consider incarceration as a legal justification to suspend benefits,



therefore a modification has been made to our tables and we will not be accepting the S5 full suspension code. The other S2, S3, S9 and SJ will continue to be accepted.

### See Change Log

40. In the FROI Event Table, the trigger rules list the FROI 00 to be used to “report injury resulting in

no lost time”. Yet for the data element DN074 Claim Type, you do not accept “M – Medical Only”.

Can you please clarify how we should report medical only claims?

**Answer: We have made allowances for NLT claims to be filed, however we do not require that NLT claims to be reported. There are circumstances when carriers need to report a NLT claim to follow up with another report and we had to utilize a workaround in R1. Therefore, we wanted to make it easier to file these reports in R3 should you wish to do so. We do not collect medical data so there is no need to report medical only claims.**

41. On the FROI Element Table, the DN027 (Insured Location Identifier) is MC for FROI 00, 04, AQ

and AU. Since this is an employer/carrier related data element, it is for our internal use. Per IAIABC standard, this cannot be F, M or MC – it should be NA. What purpose does KY see in using this field? What values are you expecting? What happens when different employers have the same location values? Many employers do not have location identifiers. Why can't the Employer physical and mailing address suffice along with the accident description?

**Answer: We are making modifications to the tables to reflect IA instead of MC.**

42. Does filing the FROI UI (Under Investigation) report satisfy the KY statutory reporting requirements for filing a FROI/14800? Will the UI be excluded from the timely filing process?

**Answer: It does fulfill the statutory reporting requirements; however it must be followed with an 00, 04 or AU in less than 41 calendar days. The UI will not be excluded from the timely filing process.**

43. If we file the UI and it is rejected (TR) and then we file the FROI 00 and it's accepted (TA), is

there any need or expectation from the DWC that we must correct and re-file the rejected UI?

**Answer: If you attempt to file the UI after the 00 has been accepted, it will be rejected. There is no need to file the UI after you have filed the 00. If it is a time issue involved, however, you**

might

choose to file the UI before you file the 00.

44. Will carriers be able to report EDI via a KY website rather than using a Vendor? Will I be able to

submit records directly to DWC?

Answer: No. You will still need to submit your records through an approved Vendor.

45. If a “medical only” claim is being denied, is it still optional to submit the denial?

Answer: It is not necessary to submit the (04) FROI Denial on a medical only unless it becomes LT.

46. Are examples of the letters that are generated by DWC that are sent as a result of a report of termination of benefits, denial or fatality available on the website for viewing?

Answer: We will be modifying these letters to accommodate all the Sxx codes that will now trigger the generation of these letters in R3. Once these have been completed, we will post examples of the letters on our website. Letters have been modified and examples have been placed on the web site, EDI Claims page.

47. My understanding is that KY wants all claims where there is one day of lost time reported, but

many of those claims would never have an indemnity benefit paid (i.e., they don't have lost time beyond the waiting period). So, is KY expecting BM's only on those claims that have indemnity benefits being paid? Or, is there an expectation we send BM's on all claims where a FROI 00 was sent? If so, what date should we use to calculate the 60 days?

Answer: A FROI is due if “more” than one day is missed. The BM would be required when payments are made that exceed 60 days. The IP would need to be filed prior to the BM to report that the initial benefits have started. If the benefits are terminated prior to the 60 days, the appropriate suspension MTC should be filed and the additional benefit information can be included on the suspension report. The BM should only be used to report ongoing payments in bi-monthly intervals (total amount Paid to Date).

48. What address will be used to send a statute letter when a S-6, Suspension, Claimant's Whereabouts Unknown, is filed?

Answer: The letter that is generated by DWC when the S-6 is filed will be mailed to the most recent address filed with DWC.

49. How do you define the Employee ID Assigned by Jurisdiction (DN0154)?

Answer: This number is 999 + Employees Date of Birth. This number can be provided if the SSN

or Green Card number is not available at the time the FROI is transmitted. However, the correct information should be sent in on an FROI (02) Change MTC as soon as possible.

50. Will testing be phased in?

Answer: No

51. Can we continue to send in an FROI (02) Change transaction to report that a different TPA has acquired the claim?

Answer: No. In R3, a FROI AU or AQ must be filed when a new claim administrator acquires the claim. We want the AU/AQ/AP, but in instances where the TPA has changed and ‘**not the carrier**’, the FROI 02 would be accepted.

52. If a claim is closed in R1 and then reopened for processing after the implementation of R3, do these claims need to be reported in R1 format or R3?

Answer: If a claim was initiated in R1, then the claim will continued to be handled under R1 requirements. The R3 data may be provided, but it is not required. The information submitted will be in the R3 format, but contain the R1 requirements.

53. If a NLT claim is filed and accepted, are there any other reports that are expected to be filed?

Answer: Not unless it becomes a LT claim as some point.

54. Can you give an example of when Concurrent Benefits would be reported?

Answer: This would occur when two different types of benefits were being paid at the same time (concurrently). For example, indemnity (TTD) payments may be paid as well as (DN085) 410 – Vocational Rehabilitation Maintenance paid to the injured worker while participating in a vocational rehabilitation program.

55. If only a FROI 04 is filed, do you expect a SROI FN to be filed? Would a BM need to be filed while the claim is open?

Answer: The SROI FN is not required to be filed with DWC. If benefits are ongoing while the

claim is open, the BM report should be filed.

56. Please explain what is allowed to be populated in the DN038 Accident/Injury Description Narrative field?

Answer: Please provide the accident description. Do not provide information in this field as to why the claim is being cancelled or any other documentation about the claim other than the description of the accident. If “Unknown”, “Unk”, “Insufficient Information” or any other nondescriptive data is populated in this field, the transaction will be rejected.

57. The tables indicate that MTC CO (Correction) transactions will no longer be accepted after 6/30/2011. What happens to those “TE” claims requiring the “CO” post 6/30/2011? Will they receive a TA or TR that normally would have resulted in a TE prior to 6/30/2011?

Answer: Kentucky has not been using TE acknowledgements since January, 2009. Therefore, the only transactions that should be sent in during this time period using the CO transaction would be those records that received a TE acknowledgement prior to that date. This timeframe provides ample opportunity for any of those records to be corrected. Kentucky will continue to utilize only TA or TR in Release 3.0. Therefore any CO transactions received after 6/30/2011 will receive a TR acknowledgement.

58. Will DN035 Nature, DN036 Part of Body and DN037 Cause of Injury be used as additional match

data elements in Release 3.0?

Answer: No, the only two that will be used will be Nature and Part of Body.

59. Are there a minimum number of records that will be required when testing?

Answer: No.

60. How will the migration between R1 and R3 work?

Answer: Reports received on claims that were started prior to Kentucky’s Release 3.0 implementation date will continue to be edited according to Release 1.0 requirements. However, when submitting reports for those claims started in R1, Kentucky will accept data for DN#s that that did not exist or were not mandatory in R1, but no edits will be run for those DN#s. Once R3 is implemented, any claims started on or after that date must be submitted according to requirements stated in Kentucky’s R3 tables.

61. Is BM only applicable for reporting TTD benefits?

Answer: The BM periodic MTC can be used to report other ongoing benefits other than TTD such as PPD.

62. Can a PY be submitted if the carrier chooses to issue an advanced award settlement?

Answer: Advanced award settlements are not made in Kentucky.

63. How are reports to be filed for NLT with PPD?

Answer: File the IP, followed by BM.

64. Does the SROI EP in R3 replace the SROI FS in R1?

Answer: Yes

65. Will you accept SIC and NAIC for the industry code DN?

Answer: Yes we accept both

1) Beginning January 1, 2015, we no longer accept SIC codes. We are fully migrating to NAICs for industry code (DN0025). We will accept both 2012 and 2017 NAIC codes.

2) Employee Date of Hire (DN0061) is a mandatory field on the MTC 00 and/or MTC 04.