

Idaho Industrial Commission

EDI Claims Release 3.0 Implementation Guide and
Trading Partner Tables

Version 2.6

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

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PREFACE

The Idaho Industrial Commission (IIC) is pleased to introduce its EDI Claims system for receiving claims submissions via Electronic Data Interchange (EDI). This solution provides a means for the State of Idaho to manage its Workers' Compensation Act required reporting efficiently and accurately. EDI Claims for First Report of Injury (FROI) and EDI Claims for Subsequent Report of Injury (SROI) are mandated for all carriers as of November 4, 2017.

EDI itself is not new to Idaho as we have received First Reports of Injury via EDI from some sureties since 1996.

In as much as the IIC is charged with administering the Idaho Workers' Compensation Act and Workers' Compensation Administrative Rules applicable there to, the IIC must maintain information required to be filed with the IIC. Under the law, employers are required to file reports of work-related injuries and corresponding supplemental reports, as may be required, with the IIC in such form and detail as the Commission may require. The law identifies information that must be reported for each injury, by way of data collected on mandated forms to maintain accurate and complete data on those work-related injuries. EDI Claims Release 3.0 provides for the electronic transfer of comprehensive injury data and will provide significant benefits for carriers and IIC stakeholders. The IIC recognizes that some Idaho-authorized carriers may not have either the resources necessary or the Idaho volume to support the development and implementation of a proprietary EDI solution; as such, the IIC will also offer online reporting access directly to its vendor via a web portal. (See IDAPA 17.01.01). The online reporting access is intended for low claim volume trading partners. However, all carriers will be required to enter into a Trading Partner Agreement with the IIC to ensure secure and compliant acceptance of claim data by the IIC vendor.

Accurate and timely information is vital to how the IIC serves the workers' compensation community. EDI Claims will facilitate improvement in both areas. Recognizing that government should tread lightly when imposing new requirements on industry, the data tables and this Implementation Guide have been developed under the guiding principle of ensuring that no data is required via EDI that has not been required previously.

The following sections provide the necessary information for understanding how to conduct EDI business with the IIC as well as references to other important documents.

Thank you for participating with us in maintaining and improving Idaho's efficient and effective Workers' Compensation system.

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I. SECTION ONE: FORWARD

A. IAIABC EDI Claims Release 3.0 Standards and Documentation

1. The IIC has adopted standards developed by the International Association of Industrial Accident Boards & Commissions (IAIABC). The IAIABC is a not-for-profit trade association which neutrally represents the interests of government agencies and the workers' compensation insurance industry.
2. The IIC has designed its EDI Claims Implementation Guide to assist Insurers, Self-Insured Employers and Claims Administrators with the transition from paper filing to EDI reporting. It serves as an information resource for trading partners operating in Idaho and provides Idaho-specific requirements. The IIC Guide should be used in conjunction with the most current version of the IAIABC EDI Implementation Guide for Claims Release 3.0. The IAIABC Guide is the authority on the EDI Claims Release 3.0 standard. The IAIABC holds a copyright on the Guide and while members of the IAIABC may obtain it without cost, non-members must purchase a copy. The IAIABC can be reached at (608) 841-2017 or by visiting their website at www.iaibc.org.
3. In addition to the IAIABC EDI Implementation Guide for Claims Release 3.0, the IAIABC website offers access to several other important EDI coding tables required for implementing the EDI Claims Release 3.0 standard. The coding tables are available for download on the website. The IIC recommends that insurers, self-insured employers and claims administrators get the Guide and coding tables as soon as possible and begin reviewing the materials with internal management and IT staff.

B. EDI Concept

1. Electronic Data Interchange (EDI) is defined as a computer-to-computer exchange of data in a standardized format. EDI enables a commonly understood and standardized format of the relevant data to be transmitted. In order to participate in EDI, each trading partner must agree to use the standardized format and set of rules pursuant to a trading partner agreement executed by the parties.
2. EDI is widely used in many industries to transmit traditional documents, such as invoices and purchase orders, between companies. EDI serves as the backbone for much of the world's electronic commerce. 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.

C. Advantages of EDI

1. The electronic submission of workers' compensation claim information has many advantages over the submission of paper claims. Benefits for both the IIC and its trading partners include:
 - a. Improved reporting performance
 - i. 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 the IIC, the claims administrator, and the injured worker.
 - b. Time savings
 - i. EDI provides an efficient means of reporting the correct workers' compensation claim information to the IIC 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 trading partner and the IIC. Submitting data by EDI also streamlines error reporting by eliminating the phone calls, e-mails, and memos that might otherwise be necessary to ensure that information is reported accurately.
 - c. Cost savings
 - i. 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 greatly reduces the costs of mailing and handling of 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. Record retention costs are also likely to be reduced over time.
 - d. Improved accuracy
 - i. EDI reduces the redundant and error-prone entry of the same data into multiple computer systems. Further, by immediately verifying and validating the data, the electronic acknowledgement process improves efficiency and accuracy, reducing the time it takes for the trading partner to correct invalid or inaccurate information.
 - e. Enhanced flexibility
 - i. 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.

D. The Evolution of the EDI Claims Reporting Standards

1. In the 1970s, various state legislatures began questioning how their workers' compensation systems were working compared to other state systems, and in the 1980s the International Association of Industrial Accident Boards and Commissions (IAIABC) created a Statistics Committee, whose task it was to identify, compare, and standardize injury data across jurisdictional boundaries. As technology boomed in the 1990s, insurance carriers and jurisdictions met in an effort to continue the standardization process in order to develop electronic reporting of injury data. The result was the formulation of the IAIABC Electronic Data Interchange (EDI) Steering Committee, which created technical working groups. These groups focused on defining common data elements used when filing claims and developed a standard format for the electronic transfer of claims data from jurisdiction paper report of injury forms. Participants met under the auspices of the International Association of Industrial Accidents Boards and Commission (IAIABC) to satisfy antitrust requirements.
2. The discussions of this group resulted in the creation of a data element dictionary and a reporting event table that could be used by any state and which was based on the claims administrator claim handling process with consideration for the jurisdictional-required employer reports filing. This utilized existing and widely used data standards to leverage system enhancements implemented by many claims administrators and state administrators.
3. This process took several years to fine tune into the national standards existing today. Idaho implemented EDI Claims Release 1.0 (FROI) in 1996.
4. The standards continue to be reviewed and enhanced by a committee of jurisdictional and insurance industry participants for the benefit of all.

E. Idaho's EDI Partnership

1. The Idaho Industrial Commission (IIC) developed a Request for Proposal (RFP) process to contract for a Vendor (IIC Vendor) to facilitate EDI Claims filing for Idaho's workers' compensation carriers and self-insured employers and/or their claims administrators. In the context of EDI, claims administrators, carriers, self-insured employers, and/or their contracted vendors may be trading partners.

ISO's Workers Compensation Solutions division has been selected as the IIC Vendor. ISO will manage the technical aspects of data submittal, be your main contact for implementation, technical requirements, and other questions you may have. In the near future, you can expect to hear from ISO directly about Claims EDI Reporting.

2. All entities reporting via EDI Claims Release 3.0 must enter into a Trading Partner Agreement with the IIC.
3. Although the IIC does not endorse a particular vendor, the Trading Partner approval

process ensures that only firms with specific EDI Claims Release 3.0 experience are allowed to offer their services to our trading partners. The approved vendors may offer varied services depending on the trading partners' needs. If a carrier, self-insured employer, or claims administrator selects a vendor, that vendor must complete the required testing to be an approved vendor. The approved vendor will be allowed to submit EDI transactions on behalf of the carrier, self-insured employer or claims administrator.

F. EDI Implementation Dates

1. Employers, self-insured employers and insurance carriers (or designated claims administrators) have been required to submit an IC Form 1A-1 Employers First Report of Injury or Illness form to the IC within ten (10) days, or as soon as practical, after the occurrence, the employer's first knowledge of, or the employee's notification of a reportable incident.
2. EDI implementation will replace the IC Form 1A-1 with First Report of Injury (FROI) transactions, and in those instances where call centers utilize the information that is contained on the FROI, require self-insured employers and insurance carriers (or designated claims administrators) to electronically transmit the FROI transactions using the EDI Claims Release 3.0 standards adopted by the IAIABC. To accommodate this change, Trading Partners are required to submit the FROI transaction within ten (10) days after the earlier of the date the Insurance Carrier or its Claims Administrator (or their designated call center), or its designated Trading Partner had knowledge of the injury or manifestation. Upon acceptance of the FROI, the IIC Vendor will assign a jurisdiction claim number to the FROI for tracking and matching purposes. The jurisdiction claim number will then be returned to the trading partner via the electronic acknowledgement.
3. EDI Claims Release 3.0 for FROI and SROI transactions will begin November 4, 2017.
4. All trading partners must complete FROI and SROI testing and be ready for production by close of business November 3, 2017. The IIC will work with the IIC Vendor to provide initial and ongoing training and guidance to trading partners who need assistance regarding the proper reporting of claim information via EDI. It is imperative that trading partners become familiar with the Idaho EDI Claims Release 3.0 Event Table to know what claim events trigger reporting and the timelines in which a FROI or SROI must be transmitted to the IIC.
5. By law, as noted above, injuries are to be reported to IIC within ten (10) days when one of three specific conditions exists. (Please refer to the Event Table). Certain statutory and administrative rule changes were necessary to clarify when carriers and their representatives met the reporting requirements. These included reporting timelines, and those administrative rule changes were completed during the 2016 legislature session. The EDI reporting timelines are referenced in the Event Table and self-insured employers, carriers and claims administrators will need to comply with the established standards.
6. Timely submission of FROIs upon employer reporting the injury to their carrier/claims

administrator/reporting vendor is required to avoid the possibility of duplicate claims submissions. An example would be an injured employee submits a FROI directly to the IIC. The IIC determines the FROI has not been submitted and enters it into the portal. The IIC makes a copy of the FROI and forwards it to the Claims Administrator of record at the Commission. (Any paper IC form 1A-1 is maintained for the purpose of retaining the hardcopy 'filed' date for legal and audit purposes.) The claims administrator then ensures that the FROI is transmitted via EDI to the IIC. As this example shows, a late submission or incorrectly filed submission creates redundant work for all parties involved.

7. Please note that audits and concomitant audit findings relating to timely and complete FROI and SROI filings will be in abeyance until March 1, 2018. This affords carriers, self-insured employers, and claims administrator's ample time to ensure protocols are in place to provide timely filings and avoid possible non-compliance audit findings.

G. Idaho reporting requirements

1. New Claims

A FROI that is filed with the IIC on or after EDI Claims Release 3.0 implementation requires an electronic FROI submission. All SROIs associated with a FROI submitted via EDI Claims Release 3.0 must also be submitted via EDI Claims Release 3.0. See Section Six for technical specifics.

2. Legacy Claims

A legacy claim is one that was filed with the Commission prior to EDI Claims Release 3.0 implementation. EDI transmissions relating to legacy claims will neither be required nor allowed.

3. Lump Sum Settlements pursuant to Idaho Code 72-404

Lump Sum Settlements will continue to be handled via paper. Prior to submitting the settlement to the Commission for review, the Commission must review the benefits paid for all time-loss claims. If benefits have been paid and suspended, the SROI MTC Sx (any suspension code) is sufficient to provide the cumulative figures necessary to conduct such review. If ongoing benefits (PPI/PPD) are being paid and suspended with the balance owed being paid with the settlement, the SROI S9 (Suspended Pending Settlement Approval) may be filed to reflect a suspension of benefits pending settlement approval. *Benefits should only be suspended once all parties have signed the settlement documents and they are now being provided to the Commission for approval; benefits should not be suspended during settlement negotiations.* Once the settlement has been approved, a SROI MTC PY (Payment Report) must be transmitted to the Commission to report payment of the settlement. The SROI MTC PY transaction is expected for every EDIR3.0 claim being settled by lump sum, to include claims where no "consideration" is being paid. *Refer to IA/ABC Business Processing Rules.* The SROI MTC FN (Final) is expected after the PY filing reflecting the claim administrator's closure of the file.

4. Fatality Claims

Interim Summary of Payments shall be filed annually within the first quarter of each calendar

year for fatal claims paying dependent benefits using the SROI MTC AN (Annual). The AN shall be filed annually until the claim is closed by filing of the SROI MTC FN (Final). Copies of death records, marriage records and birth certificates will be provided to the Commission only upon request.

The Affidavit of Due Diligence shall be mailed to the Commission no sooner than one year after death in cases where no dependents were located and no claim for benefits has been made. A SROI MTC FN (Final) will be filed contemporaneously with the Affidavit to report any medical or funeral expenses paid. The Commission will then issue an Order for the \$10,000 payment. Upon receipt of the \$10,000 Order, the SROI MTC PY (Payment Report) will be submitted reporting the \$10,000 payment to the Industrial Special Indemnity Fund.

The SROI MTC PY should include the following to denote payment to the ISIF:

DN0082 Number of Death Dependent/Payee Relationships – 01
DN0097 Dependent/Payee Relationship Code – 80
DN0085 Benefit Type Code – 010 (fatal benefits)
DN0222 Payment Reason Code – 010 (fatal)
DN0217 Payee – Industrial Special Indemnity Fund

The SROI MTC FN is expected after the PY filing reflecting the claim administrator's closure of the file.

5. Total Permanent Disability Claims

Interim Summary of Payments shall be filed annually within the first quarter of each calendar year for total permanent disability claims using the SROI MTC AN (Annual). Upon claimant's death, a SROI MTC S4 (Suspension, Claimant Death) is anticipated followed by the SROI MTC FN (Final) reporting the claim administrator's closure of the file. The Death Date [DN0057] will not be reported unless the death results from the industrial accident/injury.

6. Complaints Received as First Report of Injury

The Commission will file the Complaint as the First Report of Injury through the web based software using the FROI MTC JE (Jurisdiction Entry). The Complaint will be transmitted through the Commission's EDI vendor and a jurisdiction-assigned claim number (JCN) will be returned the following business day. A copy of the Complaint will then be provided to the claims administrator via email, who will then submit a FROI MTC 00, 04 or UI (Original, Denial or Under Investigation) using the JCN, which the Commission will provide, and will assume all filing responsibilities thereafter.

7. Procedure for Recovery of Overpayments

In order to apply an overpayment as a credit against an amount yet due, the Commission must approve the overpayment. Prior approval must be requested by the simultaneous submission of a Notice of Change of Status to the worker and to the Commission. The Commission's copy may be sent as an electronic document to changeofstatus@iic.idaho.gov or sent via US Mail. The request will be deemed approved as a purely ministerial function but subject to subsequent review.

8. Reporting Employee Name with Suffix

Employee's last name (DN0043) shall not include the suffix. If a suffix is reported, DN0255 is to be used for that purpose.

9. Reporting ITIN (Individual Taxpayer Identification Number) as Employee ID Type Qualifier

Social Security Numbers do not begin with the number 9; however, ITINs begin with a 9 and the 4th digit is 7, 8 or 9. These numbers may not be reported as Employee ID Type Qualifier (DN0270) **S** (DN0042) as they will be rejected. If employee has no Employment Visa, Green Card, Passport Number or Social Security Number, an ID Assigned by Jurisdiction (DN0154) should be generated. These instructions are available in the EDI Technical Requirements on page 24. While you may not submit an ITIN as a Social Security Number as indicated above, we will allow the ITIN to be reported in DN0270 as an alternate to the method described in the technical requirements.

10. Reporting Claims which are Deemed "Incident Only"

The initial report may be filed reflecting the Claim Type Code DN0074 **N – Notification of an Incident Only**. The "incident" will only be accepted if the Initial Treatment Code DN0039 is **0 – No Medical Treatment**. If the claim later becomes reportable by meeting the trigger criteria of either: (1) claimant has missed one or more days from work, (2) claimant sought medical treatment, or (3) claimant requires/needs medical care as a result of the work related event, an MTC 02 must be submitted changing the Claim Type Code to either M, W, P, I, B or L.

11. FROI 01 – Cancel Claim

Filing the FROI 01 (Cancel) will cancel the claim; the claim will be immediately closed and no further filings will be accepted. If the cancellation was sent in error, the cancellation cannot be "undone". If the claim needs to be re-established, you will need to re-file all FROI and SROI transactions to recreate the claim. A new JCN (Jurisdiction Claim Number) will be created with the filing of the FROI.

12. Reporting Claimant Death

A claimant's death should be reported when there is an allegation/suggestion/implication that it relates to the industrial event. In every case where DN0057 [Employee Date of Death] is populated, the corresponding DN0146 [Death Result of Injury Code] should be marked "Yes". Populating DN0146 with "Yes" does not imply liability; it simply acknowledges the death and the industrial incident are *reported to be* connected.

To report a claimant's death for a worker with an open claim receiving benefits, file an MTC SROI S4 (Suspension, Claimant Death) and file any appropriate additional reports.

13. Permanent Partial Impairment

The impairment rating should be reported consistent with the WCIO Part of Body Codes found at <https://wcio.org/Document%20Library/InjuryDescriptionTablePage.aspx> and must include the additional alpha character when reporting fingers and toes. The number of weeks and

days must reflect the number of weeks and days due when paying the entire award in a single payment. Example: If the rating is 3% upper extremity, the benefit segment should report a start and through date equal to 9 weeks. [04/01/XX – 6/02/XX *not* 4/01/XX – 4/01/XX]

14. Claim Acceptance

The filing of a FROI MTC 00 (Original) itself does not constitute an accepted claim. The claim is deemed an accepted, compensable workers' compensation claim *absent a subsequent denial* filed as a FROI or SROI MTC 04 (Denial). Filing of a FROI MTC 00 after an initial "UI" (Under Investigation) transmission will indicate an accepted, compensable workers' compensation claim.

15. Summary of Payment Requirement

The Summary of Payment report is required for all indemnity claims to report the cumulative totals of all benefits paid for each benefit type. A SROI Sx (suspension) is required for all claims for which indemnity benefits have been paid, and the SROI FN (closing report) will not be accepted if not preceded by a SROI Sx. The SROI Sx will serve as satisfaction of the carrier's obligation to file a Summary of Payment report. The SROI Sx will provide the total benefits paid until the SROI FN is filed concurrent with the claim administrator's closure of the claim file. A SROI FN will not be required to follow a SROI S8 – Suspension, Jurisdiction Change.

16. Acquiring claims

Reporting takeover claims previously adjusted by another claim administrator should be handled by filing a FROI AQ for each active claim already on file with the Commission. The prior claim administrator should convey to the assuming claim administrator the JCN already assigned to the claim. The JCN must be included in the claim record when the FROI AQ is filed with the Commission to avoid a rejected transaction. The FROI AU should only be filed when it is not known whether the claim was already filed with or accepted by the Commission by the prior claim administrator. The FROI AU or FROI 00 should not be utilized to establish a claim filing without the JCN; this results in a duplicate claim which then must be canceled.

H. Occupation Description

Special Data Population Allowance for DN0060 Occupation Description:

IIC uses the **US Bureau of Labor Statistics 2018 Standard Occupation Classification codes** to classify an injured worker's occupation.

In the EDI Claims R3.0 standard, DN0060 Occupation Description identifies the employee's primary occupation at the time of the accident or injurious exposure. As per the IAIABC EDI Implementation Guide for Claims Release 3.0 January 1, 2016 Publication DP Rule,

“The data that is passed should be sufficient to assign an occupation code. This text can be, but cannot be required to be, the Occupation Code source description. This is not the NCCI class code text description. If a jurisdiction requires both the Occupation Description (DN0060) and Manual Classification

(DN0059), the two elements cannot be edited against each other.”

If your company also uses the **US Bureau of Labor Statistics 2018 Standard Occupation Classification codes** to classify an injured worker’s occupation, you may send the 6 digit SOC code in lieu of a description on the FROI R21 record, in positions 1260 to 1309.

For example, an injured worker’s occupation is Sheet Metal Worker. Your company uses SOC codes, so you may send **472211** in positions 1260 to 1309 in lieu of the Occupation Description “Sheet Metal Worker” in positions 1260 to 1309. If a SOC code is reported, it should be a 2018 code.

II. Section Two: EDI Implementation Management

1. EDI Claims 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 jurisdiction's requirements, compare those requirements to your company's manual and automated claims handling processes to determine the best business solution for your company.
2. The technical side of EDI has three major components:
 - a) The computer based claim processing system where claim data is stored
 - b) An EDI management system or a component that contains jurisdiction requirements:
 - i. The required report types
 - ii. The required time line for each report
 - iii. The Jurisdiction's data requirements
 - iv. The required edits
 - v. The Jurisdictions' response to each report
 - vi. The company's ability to resubmit rejected FROI and SROI transactions
 - c) A system that manages the exchange of reports (FROI, SROI and Acknowledgments) between two or more parties (trading partners, EDI Service Vendors, jurisdictions, etc.)
3. Due to the differences between the claim handling processes and electronic data systems of different Claims Administrators, each administrator may have varying degrees of capability. Each must assess their own capabilities and make a determination whether they will self-handle the EDI process internally, either by developing the software to meet the Idaho requirements or by utilizing the web portal which the IIC vendor will make available, or by engaging their own EDI Service Vendor. In any event they must determine the best way to modify their claim handling process in order to meet the three technical EDI components.
4. 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:
 - a) Determine whether your firm already has EDI programming in place with Idaho or other jurisdictions. If so, several of the steps immediately below may already have been completed by your firm.
 - b) Completely read this implementation guide and review the tables referenced next to ensure your firm's understanding of Idaho's EDI requirements. Identify the IIC reporting requirements for each data element using the provided MTC Event Table, Edit Matrix, Event Table and Element Requirements Table which are incorporated as part of this Guide. These are available on the Idaho Industrial Commission E D I website: <https://iicedi.info>.

- c) Go to www.iaiaabc.org to view a copy of the current IAIABC EDI Claims Release 3.0 Implementation Guide. Reading the Foreword section will help you gain a basic understanding of EDI.
- d) Review the definition of each data element listed in the Idaho tables. Note any difference between these definitions and those of your organization in order to develop a possible crosswalk.
- e) Note any required elements in the Idaho tables not currently captured by your database in case they need to be added to comply with IIC requirements.
- f) Assess your firm's current EDI capabilities (hardware & software).
- g) Monitor the IIC EDI website's Implementation page: <https://iicedi.info> for updates and requirement changes. Attend training sessions when possible. Request to be added to the EDI Claims Implementation email distribution list, send your request to Idaho EDI Support Team at iicedi@iso.com.
- h) Training of technical personnel on their roles and responsibilities will be made available by the IIC Vendor. Dates and times will be posted on Vendor's website, and linked on the IIC website.
- i) Establish a schedule for testing your FROI and SROI transmissions with our IIC Vendor which must be completed no later than November 3, 2017.
- j) You may wish to use industry meetings and other business contacts to identify claims 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.

III. SECTION THREE: REPORTING PROCESSES AND OPTIONS

1. Idaho's EDI reporting process includes:
 - 1) Capturing state required reporting data in the IAIABC EDI Claims Release 3.0 format.
 - 2) Editing for data content and quality.
 - 3) Managing communications (report transmissions- sending & receiving).
 - 4) Managing acknowledgments, replacement reports and corrections.
2. Acceptance and acknowledgement of an EDI Claims Release 3.0 transaction does not mean that the data is in compliance with all adjusting and reporting requirements (i.e., amounts, timeliness, etc.).
3. It is the intent of the IIC to contract with a single vendor who will be the point source for all EDI transmissions from Trading Partners. Transmissions received from Trading Partners in proper Idaho EDI Claims Release 3.0 format will not incur a transmission cost from the IIC vendor.
4. It is important to note that utilization of the IAIABC EDI Claims Release 3.0 Standard requires a license from the IAIABC. Is this accurate as stated here?
5. As noted in Section Two, above, each Trading Partner must evaluate their individual situation and make a determination to either internally program to Idaho EDI Claims Release 3.0, or to retain a third-party to handle their data transmissions. An alternative will be entry of data via the IIC vendor's web portal.

IV. SECTION FOUR: EDI TRADING PARTNER PROCESS

1. 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 EDI Claims Release 3.0, you may find your company has already addressed some of the below steps.
2. 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 iicedi@iso.com.

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

1. A clear understanding of the IAIABC definitions and standards is required to be a successful EDI Trading Partner in Idaho. The IAIABC Claims Release 3.0 Implementation Guide augments this Idaho Industrial Commission EDI Claims Implementation Guide. Visit the IAIABC web site: www.iaabc.org or call them at: (608) 841-2017 to obtain a copy of the current Claims Release 3.0 Implementation Guide and other publications that may assist in implementing Idaho EDI requirements. For Claims Release 3.0 documents, go to: www.iaabc.org.
2. This Idaho Industrial Commission EDI Implementation Guide provides Idaho specific information that is used in conjunction with the IAIABC EDI Claims Release 3.0 Implementation Guide.

B. Designate an EDI Point of Contact

1. Regardless of which reporting format your company qualifies for (reporting via an approved vendor, online or direct reporting) your company must designate an EDI point of contact. Your company is responsible to update IIC if and when the contact changes. This contact person must be able to speak on behalf of your organization and be knowledgeable about:
 - a. Your source data.
 - b. How to retrieve the source data.
 - c. Your business process and support systems.
2. We recommend that your EDI Point of Contact attend all IIC EDI information meetings and applicable training.

C. Review Idaho EDI data requirements and claim events that require reporting

1. Refer to Section Six: Technical Requirements. This detailed section defines the reports required by Idaho and the business events or situations that trigger specific EDI transactions to be filed with IIC.

D. Contact the IIC Vendor to complete the EDI Trading Partner agreement

1. Although EDI Trading Partner Agreements are marshaled through the IIC Vendor, IIC ultimately grants the final approval for a trading partner to submit FROI and SROI.

Note: While the trading partner agreement may identify the out-of-state carrier as the sender of the electronic record, all inquiries regarding the status of EDI filings will be directed to the in-state designated claims administrator for resolution consistent with IDAPA 17.01.01.305, with the exception of EDI technical inquiries.

V. SECTION FIVE: EDI TESTING REQUIREMENTS AND PLANS

1. During the testing period, and until the EDI trading partner is approved for production status and the commencement date for mandated filings has arrived, all IIC Forms required by Idaho Statute and IDAPA Rules must continue to be mailed or emailed to the Commission. The objective of testing is to confirm that all parties are adhering to the requirements documented in the EDI Trading Partner Agreement that the EDI interface is working properly and the data accuracy meets the minimum standard set forth in the trading partner agreement. Testing will continue until the trading partner's submissions meet the standard set forth in the Trading Partner Agreement or until the transmissions are mandated.
2. Monthly EDI Claims Compliance Reports will be made available to the Trading Partners detailing timeliness and error ratio of data submitted.

VI. SECTION SIX: EDI TECHNICAL REQUIREMENTS

Electronic Data Interchange Rules

The Idaho Workers' Compensation Act can be accessed at <https://legislature.idaho.gov/statutesrules/idstat/Title72/>. The rules of the Idaho Industrial Commission can be accessed at <https://adminrules.idaho.gov/rules/current/17/index.html>.

Electronic Data Reporting Format

The Idaho Industrial Commission uses IAIABC Claims Release 3.0 standards for all EDI submissions. The IAIABC Implementation Guide can be found on the IAIABC website. Data format must be in compliance with the standard data format described in the Systems Rules in Section 2 of the Release 3 Implementation guide.

Maintenance Type Codes

An MTC (Maintenance Type Code) is a code indicating the transaction to submit to comply with IIC EDI reporting requirements. The following MTC's are allowed to be submitted to the IIC. Refer to the Event Table for report timeliness.

	MTC	Description
FROI	00	Original
	01	Cancel
	02	Change
	04	Denial
	AQ	Acquired
	AU	Acquired/Unallocated
	UI	Under Investigation
SRO	02	Change

MTC	Description
04	Denial
AB	Add Concurrent Benefit Type
AP	Acquired/Payment
CA	Change in Benefit Amount
CB	Change in Benefit Type
EP	Employer Paid
ER	Employer Reinstatement
FN	Final
IP	Initial Payment
P1	Partial Suspension, RTW or Medically Qualified to RTW
P2	Partial Suspension, Medical Non-Compliance
P3	Partial Suspension, Administrative Non-Compliance
P4	Partial Suspension, Employee Death
P5	Partial Suspension, Incarceration
P7	Partial Suspension, Benefits Exhausted
P9	Partial Suspension, Pending Settlement Approval
PD	Partial Denial

MTC	Description
PY	Payment Report
RB	Reinstatement of Benefits
RE	Reduced Earnings
S1	Suspension, RTW or Medically Determined/Qualified to RTW
S2	Suspension, Medical Non-Compliance
S3	Suspension, Administrative Non-Compliance
S4	Suspension, Claimant Death
S5	Suspension, Incarceration
S7	Suspension, Benefits Exhausted
S8	Suspension, Jurisdiction Change
S9	Suspended Pending Settlement Approval
SD	Suspension, Directed by Jurisdiction
SJ	Suspended Pending Appeal or Judicial Review
UI	Under Investigation
VE	Volunteer
AN	Annual

IIC Forms Required

The Idaho Industrial Commission will focus on the electronic submission of FROI's and SROI's. Some conditions require the submission of additional paper forms. These requirements are defined in IIC's Event Table under the Paper Form(s) column which identifies the form and Receiver column which identifies who the form should be sent to.

Information and Data Reported

Each piece of information for electronic reports is defined as a data element. Please refer to the Section 6 of the IAIABC Claims Release 3 EDI Implementation Guide for definitions of each data element.

Employee ID Assigned by Jurisdiction (DN0154)

The Employee ID Assigned by Jurisdiction (DN0154) should be composed as follows:

If DN0270-Employee ID Type Qualifier is "A", Employee ID Assigned by Jurisdiction DN0154 must be populated as follows:

- First Character of DN0044 Employee First Name followed by
- First Character of DN0043 Employee Last Name followed by
- Up to 13 maximum of the right-most characters of DN0015 Claim Administrator Claim Number.

Example: John Smith, with Claim Administrator Claim Number:
WCA0000000000665A20652

Would be Employee ID Assigned by Jurisdiction = JS0000665A20652

Note: If DN0015 Claim Administrator Claim Number contains less than 13 characters, there is no need to pad with zeroes. So, if DN0015 Claim Administrator Claim Number is 665A20652 (9 characters), then

Employee ID Assigned by Jurisdiction = JS665A20652

IIC also accepts the following which is preferred:

Employee SSN (DN0042)
Employee Green Card (DN0153)
Employee Employment Visa (DN0152)
Employee Passport Number (DN0156)

IIC will accept an ITIN (Individual Taxpayer Identification Number) as an Employee ID Assigned by Jurisdiction option if no other Employee ID value is applicable/available prior to using the derived Employee ID Assigned by Jurisdiction option. The ITIN is a nine digit number that always begins with the number 9 and has a 7, 8 or 9 in the fourth digit.

There is no need to submit an MTC 02 or new value for DN0270-Employee ID Type Qualifier when the DN0044 Employee First Name, DN0043 Employee Last Name or DN0015 Claim Administrator Claim Number changes as the IIC will not compare the value of these Data Elements to the value of DN0270-Employee ID Type Qualifier.

Edit Matrix-Match Data

Match Data elements are used to identify a transaction as a new claim to create, or match to an existing claim for duplicate checking, updating and processing. On a specific claim, a primary "match" data element value may change and prevent a match. When there is no match on one of the primary "match" data elements, secondary "match" data elements are used to match a claim. Refer to the Edit Matrix Match Data table for the application of primary and secondary Match Data elements.

Changes to Match Data elements must be reported on a FROI 02 (Change) transaction before further reporting for the claim will be accepted. Only one Match Data element can be changed on a FROI 02 (Change) unless indicated otherwise on Match Data table on the 'Multiple element changes Category legend'.

When changing from one Employee ID type to another, Employee ID Type Qualifier (DN0270) must be changed as well. For example, if a valid Employee Passport Number (DN0156) is available after a claim is submitted with an Employee Assigned by Jurisdiction (DN0154), the 02 (Change) transactions should be populated with the new Employee ID Type Qualifier (DN0270) of "P" (Employee Passport Number) as well as the employee's Passport Number.

IIC EDI Reporting Requirements

The IIC EDI Reporting Requirement Tables are based on the IAIABC Master Tables format. The tables are located at <https://iicedi.info> and are described below.

Event Table: The Event Table is designed to provide information integral for a Trading Partner to understand the Idaho's EDI reporting requirements. It relates EDI information to the circumstances under which they are initiated as well as the timeframes for sending the information. These circumstances and timeframes reflect Idaho's legislative mandates and specifications relative to reporting requirements based on various criteria.

Element Requirement Table:

The Element Requirement Table is designed to communicate IIC's business data element requirements. Each data element requirement is defined for each report (FROI or SROI), down to the level of Maintenance Type Code based on Report Type criteria established on the Event Table.

Edit Matrix: describes editing that will be applied by the IIC to incoming transactions.

The Edit Matrix is designed to communicate the edits applied by IIC to assist the Trading Partner in understanding the edits that will be applied and the data quality expected. The edits that are applied are based on the IAIABC standards and on IIC's data requirements. They are based on the requirements that are indicated on the IIC Element Requirement Table. The Edit Matrix contains the tables shown below.

- *DN-Error Message* describes editing that will be applied to each data element.
- *Value Table* identifies code values accepted by Idaho.
- *Match Data* describes the data elements that will be used to determine if the report will create a new claim or find an existing claim or transaction in the IIC database
- *Population Restrictions* contains the IIC's restrictions applied to the data element(s).
- *Sequencing* illustrates logical transaction sequencing for IIC. Transaction sequencing refers to the order in which the MTCs must be sent in. For example, an IP will not be accepted by IIC before a 00 original FROI has been accepted.

Requirements for Becoming an EDI Trading Partner

There are two requirements for becoming an EDI Trading Partner:

1. Complete the Trading Partner Registration and receive approval from IIC. To register, go to <https://iicedi.info/register>. IIC requires each entity, including those who plan to use a vendor, to complete the Electronic Trading Partner Registration. The Trading Partner Registration provides pertinent information to IIC about the Sender, Receiver, Insurer and Claim Administrators and transmission protocol.
2. Complete Testing Requirements outlined in section titled Testing Procedures for Trading Partners

Data Delivery-Secure FTP (File Transfer Protocol)

Trading Partners and Vendors will connect to an SFTP (Secure File Transfer Protocol) server hosted by the IIC in order to send FROI and SROI files and receive Acknowledgment files. To obtain a SFTP connection, each Trading Partner must first complete the Trading Partner Registration and be approved by IIC. Once approved as a Trading Partner, IIC will provide the appropriate access information.

Trading Partners may log into the SFTP server using the software or scripting system they have at their disposal and on the platform the Trading Partner is running.

FROI SROI Files: Trading Partners will load their FROI/SROI files into the *specified location* provided by IIC. IIC will pick up the files and delete them from the specified location as they are processed.

Acknowledgment Files: Trading Partners are required to pick up their acknowledgment files from the *specified location* provided by IIC. The Trading Partners are required to delete acknowledgment files from the specified location as soon as they have verified that they have been successfully received. It is important that the Trading Partner delete the file(s) as they will remain in the specified location which may result in multiple downloads of the same files.

Inbound File Names

IIC recommends but does not require that files submitted to the IIC SFTP server should be named using the following convention in order to reduce the potential of files being overwritten.

ST_InterchangeVersionID_SenderFEIN_SenderPC_DateTransSent_TimeTransSent_UniqueSeq
.edi

- ST: State Code = ID
- Interchange Version ID:
 - FROI Files: 14830
 - SROI Files: A4930
- Sender FEIN and Sender PC (Postal Code) will be that of the Trading Partner per the Header Record.
- DateTransSent(YYYYMMDD) and TimeTransSent (HHMMSS) is date and time per the Header Record
- Optionally, Unique Seq (Sequence): The Unique Seq (Sequence) Number For example: Starting with the FROI then SROI; first FROI 0001, then SROI 0002, and if additional files on a given day then FROI 0003, then SROI 0004.

Reporting Timelines

Monday through Friday: The cut-off for receipt of data from IIC Trading Partners will be 11:59 PM EST. IIC Trading Partners will receive acknowledgment files no later than 5:00 AM EST pending any unforeseen processing issues.

Friday (after the cutoff), Saturday and/or Sunday: Trading Partners can connect and upload FROI/SROI files and will receive acknowledgment files no later than 5:00 AM EST on Monday pending any unforeseen processing issues.

If you have not received an Acknowledgement within that time frame and have not received an advisory e-mail, please contact the IIC EDI Support Mailbox at II\Cedi@iso.com.

Acknowledgment Reports

There are two types of Acknowledgments that are sent back to trading partners when First Reports of Injury or Subsequent Reports of Injury batches are processed. One is a batch level AKC and the other is the transaction level AKC.

The first type of AKC record occurs at the batch level only if the batch rejects. One AKC transaction will be sent with the HD level rejection. When a batch rejects, all of its content rejects.

The second type of AKC record occurs when a batch is not rejected. The transactions within the batch are processed and detailed level (transaction level) data is provided indicating whether the transaction has been accepted (TA) or rejected (TR). If the transaction represents the first filing (FROI 00) and is accepted, IIC will return the Jurisdiction Claim Number (JCN) DN0005 on the AKC. The JCN should be captured and recorded for later use for subsequent filings. If a transaction is rejected, detailed error information is provided on the acknowledgment. It is the trading partner's responsibility to use this error information for consideration on next steps.

IIC Acknowledgment files naming convention: ST_YYYYMMDD_HHMMSS_AK.txt

- ST State Code = ID
- YYYYMMDD: Current Date
- HHMMSS: Unique Time Stamp
- AK: Indicates Acknowledgment file
- Txt: indicates a text file.

Example: ID_20161229_131202_AK.txt

Testing Procedures for Trading Partners

IIC EDI Trading Partners submitting data are required to complete the Test Plan.

Exceptions: No testing is required for IIC Web Entry filers. In some cases, if a Trading Partner is using a Vendor, the Vendor will coordinate and/or perform the testing on behalf of the Trading Partner.

The IIC Test Plan can be found at <https://iicedi.info>, select Implementation Info. This Test Plan provides information for the expected results to be approved for production reporting. Please contact the IIC EDI Support Team prior to sending any Test transaction(s), if you have any questions about the test and/or to confirm your testing readiness.

VII. SECTION SEVEN: IMPORTANT TERMINOLOGY AND ACRONYMS

The following applies to this EDI Claims Implementation Guide and Trading Partner Tables posted on our website.

Acknowledgment Record (aka: Response)

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. This is known as an AKC.

Administrator

See: Claims Administrator.

ANSI, ASC, X12

American Standards National Institute, Accredited Standards Committee, X12 is an organization that develops Electronic Data Interchange (EDI) communication standards. The 'X' represents 'Communications' and X12 is the 12th Communication Standards Committee under ASC. This organization is also referred to as ANSI X12, ASC X12 or X12.

Batch

A set of records containing one IAIABC Header record, one or more FROI or SROI transactions, and one Trailer record, ANSI equivalent. Any error in the Header record or the Trailer record will cause the rejection of the entire Batch without further transaction level edits being applied.

Business Rules

The business requirements that dictate when a report is created, edited and when and how it is transmitted.

Claims Administrator

The organization that services workers' compensation claims according to Jurisdiction rules. An administrator may be an Insurer, a Claims Administrator, an Independent Adjuster or a self-administered Self-Insured Employer.

Data Element

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 AIN).

DISA

Data Interchange Standards Association is the Secretariat of X12. DISA manages the EDI standards database, arranges standards development meetings and provides educational conference and seminars.

EDI

Electronic Data Interchange. It is computer-to-computer exchange of data or information in a standardized format. EDI Claims is the electronic transmission of workers' compensation claims information from an authorized Submitter whose clients may be insurers, self-insured employers and claims administrators to a States' Workers' Compensation Regulatory Agency.

Edit Matrix

Identifies the edits to be applied to each data element to ensure data quality expectations are met. The IIC Vendor applies the edits to transaction and submits to IIC only transactions that have passed all edits and are accepted (TA).

Edited Data

A term used to describe the information on a transaction after it has been processed through the IIC system edits and found to contain valid data.

Electronic Format

IIC selected the IAIABC Claims Release 3.0 flat file format for EDI claim reporting. This format was chosen to standardize, simplify and reduce the cost of data exchange.

Element Requirement Table

A tool used to communicate data elements required by the Receiver, specifying which elements are mandatory, expected or ancillary. This allows for data element requirements to be defined for each record layout (FROI or SROI) and down to the level of each Maintenance Type Code (MTC). Further, it provides for element requirements to differ based on Report Type criteria established in the Event Table.

Environment

The boundaries and conditions under which an application runs or in which files are manipulated or processed.

Event

A specific business event; such as the occurrence of an accident, the initial payment of a claim or denial of a claim etc. Events, when entered into a computer system, may be defined as a trigger for a Jurisdiction required report.

Event Table

A table designed to provide information integral for a Sender to understand the Receiver's EDI reporting requirements. It relates EDI information to events and under what circumstances they are initiated.

FEIN

Federal Employers Identification Number, this is the Corporation/Business US Federal Tax ID, or can be an Individual's US Social Security number.

FROI (148 Record)

Based on IAIABC Claims Release 3.0 standards FROI is 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.

FTP

File Transfer Protocol. A communications protocol governing the transfer of files from one computer to another over a network.

Header Record

The record that precedes each batch of EDI transactions. The header record and corresponding trailer record surround each batch of transactions and uniquely identifies the Sender as well as the date/time a batch was created. See also: Trailer Record.

IAIABC

International Association of Industrial Accident Boards and Commissions. A not-for-profit trade association whose members are industrial accident, workers' compensation or other governmental bodies as well as associate members comprised of other industry-related organizations and individuals. The IAIABC has authored EDI standards that cover the transmission of Claims, Proof of Coverage, and Medical Bill Payment information through electronic reporting.

IC FORM 1A-1

The paper form the IIC would ask an injured worker to fill out in order to report a work-related injury or occupational disease when the employer cannot be located or is unwilling to file the work-related injury information or occupational disease to their workers' compensation insurance carrier.

IG

Implementation Guide.

IIC

Idaho Industrial Commission. The regulatory agency overseeing Workers' Compensation laws in Idaho.

IIC Vendor (aka as Submitter or Sender)

For the purposes of this IG, a Vendor is an EDI Service Provider authorized by IIC to provide its products/services to IIC's trading partners. As such it becomes the Sender/Submitter on behalf of the trading partner to IIC.

MTC

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

Production

A designation that the Submitter is sending transactions in a "live" environment after

satisfactory completion of all EDI implementation testing as determined by IIC.

Raw Data

The transaction and its contents as received from a Submitter by IIC and before the data is subjected to IIC's EDI Claims Release 3.0 requirements.

Requester / Receiver

IIC is the Receiver of transactions from the Submitter. The Submitter is also the sender of transaction acknowledgments to the EDI trading partners who are the receivers of the transaction acknowledgments.

Re-Acknowledgment Record (IIC Vendor specific)

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.

Self-Insured Employer

An employer authorized by the IIC to self-insure its workers' compensation risk in accordance with applicable law, rules and regulations.

Sender / Submitter

An entity that submits FROI and SROI information in the IAIABC EDI Claims Release 3.0 format and receives EDI acknowledgments from IIC. This entity is required to complete the Trading Partner Profile forms. In addition please see: Vendor.

SROI (A49 Record)

Based on IAIABC EDI 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

Acknowledgment code indicating that a FROI or SROI has passed all event table, element requirement and edit matrix test for data timeliness and quality.

Testing Period

The initial environment in which the sender/submitter transmits a series of transactions that is analyzed for both technical and business content within a time period specified.

Test Plan

A plan developed by IIC and the Sender/Submitter's EDI Coordinator outlining the events, the time frame, and the responsibilities of each party for testing and evaluating data sent in the test environment.

TP

Trading Partner

TR

Acknowledgment code indicating that a FROI or SROI has failed one or more event table, element requirement and edit matrix tests for data timeliness and quality.

Trading Partners

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

Trailer Record

A record that designates the end of a batch of transactions and provides a count of records/transactions contained within a batch. See Header Record.

Transaction

Submission of a FROI or SROI report that contains data elements as defined in the IAIABC record layouts, which are found in the IAIABC EDI Claims Release 3.0 Implementation Guide and for records specific to Idaho, are found in the IIC EDI tables posted on the IIC's EDI website: <https://iicedi.info>.

Transaction Type

Defines the transaction by the MTC submitted. For example: an initial FROI using MTC 00.

Transmission File

One or more batches shipped together from the sender/submitter to the receiver.

Translator

Software that uses data conversion mapping rules to convert data from one format to another. Related to EDI processing, this term refers to products that convert data between proprietary (outside of a national or industry standard) formats and X12 format.

X12N

X12 Insurance Subcommittee that develops EDI standards for the insurance industry.

Links to EDI Claims related information

Idaho Industrial Commission (IIC) web page: www.iic.idaho.gov.

Idaho Industrial Commission (IIC) EDI web page: <https://iicedi.info>.

Idaho Industrial Commission Implementation Assistance email: iicedi@iso.com.

International Association of Industrial Accident Boards and Commissions (IAIABC): www.iaiabc.org.