

# IAIABC CLAIMS RELEASE 3 STANDARDS: EVENT TABLE INSTRUCTIONS

The Event Table is designed to provide information integral for a sender to understand the receiver'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 jurisdictions' legislative mandates and specifications relative to reporting requirements based on various criteria. The Event Table is used and controlled by the Receiver to convey the level of EDI reporting currently accepted. When a jurisdiction makes changes to its Claims Event Table, consideration should be given to the suggested implementation dates established in the *EDI IG Publication Standards* on the [IAIABC EDI](#) web page.

## Step by Step Event Table Population

The following steps are involved in populating an Event Table:

1. IAIABC Claims Release number
2. Determine MTCs to be received electronically
3. Specify Event Rules
4. Define trigger criteria and values
5. Define when the report is due
6. Define follow-up paper Form and the Receiver of the form (if applicable)
7. Define Periodic reporting requirements (if applicable)

### 1. Release

Indicate IAIABC Claims Release number. Jurisdictions migrating from previous IAIABC Claims releases refer to *Migrating From Previous Release Scenario* in the **Event Table Scenarios & Examples** section of these instructions.

### 2. Determine Maintenance Type Codes (MTCs) to be received electronically

The first decision in populating the event table is to determine which MTCs will be processed electronically. **Form to MTC Crosswalk** worksheet will assist in this determination. This paper form column will also assist trading partners in the transition from paper report to electronic reports. The worksheet contains a quick reference including the definitions for each MTC and a column to note the paper form that was formerly used to convey the information that will now be sent electronically. A "Comment" column is provided in case additional details describing form-to-EDI MTC migration is necessary. Yes/No column should be completed to indicate whether the MTC will be accepted electronically. Using the completed worksheet, hide rows in the Event Table containing MTCs that will not be accepted under any circumstances.

MTC UR (FROI or SROI): When consistent UR reporting requirements can be defined, jurisdictions should indicate their UR reporting requirements. Jurisdictions that may have varying UR requirements should reserve the right to define the requirements when the request for a UR report is made.

### 3. Event Rules

Rule dates are used to express differences in reporting requirement based on dates of injury, EDI implementation dates, or other jurisdiction workers compensation reporting laws and rules. For each of the MTCs from Step One that will be accepted by the jurisdiction electronically, consult the governing documents for the jurisdiction and determine whether there are differing rules based on dates. If so, enter one line for each date period. In cases where multiple rules exist, each must be expressed on the Event Table for the applicable report type (FROI, SROI or Periodic report table) as a separate row.

Event Rule Criteria: The Criteria used to define the Event Rule that causes the report to be required by the jurisdiction for the FROM and THRU dates. Insert the appropriate Criteria code.

1. Date of Injury
2. EDI Mandate Date
3. Jurisdiction defined (if this code is used, a definition of jurisdiction's requirement must be provided)

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Event Rule “From”: The first date that a claim meeting the Report Trigger Criteria must be reported for a specific report. Insert the date that the rule went into effect

Event Rule “Thru”: The last date that a report for a claim meeting the Report Trigger Criteria must be reported. The Thru date should only be included when a new rule replaces the current rule. Insert the end date for the rule, when applicable. For MTCs where the rules are the same regardless of dates, only populate the From Date.

#### 4. Define Report Trigger Criteria and Values

Report Trigger *Criteria Codes* describe the events that cause a report to be due for submission to the jurisdiction on a claim that occurred within the Event Rule Effective Dates. Trigger values further define the reporting requirements by describing the specific values associated with *Criteria code*.

For each MTC and Event Rule, insert the applicable Trigger *Criteria Code* and compose a *Trigger Value* description. In order for senders to understand the filing requirements for the *Criteria Code*, at a minimum the *Trigger Value* description(s) should include the following:

<i>Criteria code:</i>	<i>Trigger Value:</i>
A = New Claim	Consideration should be given to conditions related to the filing requirement. i.e. 04 (Denial), UI (Under Investigation) or 00 (Original) may meet the “first report” filing requirement. The <i>Trigger Value</i> for the 00 (Original First Report) might be expressed as: “All claims that are not under investigation or being denied”
B = Cumulative Medical \$	Description should include the cumulative amount that makes the report due
C = Lost Time	Description should include the length of time in <i>Trigger Value</i> description
D = Cumulative Wage Replacement	Description should include the cumulative amount that makes the report due
E = Days Open	Description should include the length of time in <i>Trigger Value</i> description
F = Formula	Describe the formula
J = Jurisdiction Defined	Describe the “jurisdiction specific” condition. i.e. UR MTC: Due to the dynamic nature of the UR MTC, jurisdictions may wish to reserve the right to define the due dates, element requirements, etc when the jurisdiction deems the UR report necessary.
L = Determination of Compensable Death	
M = MTC Defined	Describe the “MTC” condition. I.e. a CO (Correction) report might be expressed as: “Correction of errors in response to a FROI TE acknowledgment”
N = Cumulative Indemnity \$	Description should include the cumulative amount that makes the report due
Q = Employee Death	

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### 5. When the Report is Due?

Expressing the regulations that meet the jurisdiction's filing deadlines may be described with the *Value*, *Type* and *From*, as needed. For each MTC and Event Rule Effective Dates, insert the number of days in the *Value* column, "B" for business days or "C" for calendar days for the applicable *From* code

<i>Value</i>	<i>Type</i>	<i>From</i>
represents the last date/days a jurisdiction will consider this MTC to be timely filed, and not the date on which it is recommended the transaction be initially triggered.	indicates whether the <i>Value</i> is measured in business or calendar days	represents the beginning point for the <i>Value</i>  <u>Report Due From Code</u> A = From Date of Accident/Injury B = From Date of Disability C = From Employer Notification D = From Claim Administrator Notification E = From Jurisdiction Notification F = From Carrier Notification G = From Initial Payment (IP) H = Immediate I = From Date of Death J = From Report Trigger Value K = Prior to Final Report (FN)
<b>Example:</b>		
5	Business days	D = From Claim Administrator

### 6. Paper Form(s) and the Receiver

The final columns on the FROI and SROI event tables are used to convey to the sender any paper reports that are required to be filed at the same time as the EDI transmission is sent. For each MTC and Event Rule insert the form number that is required. When a form is entered, indicate the *Receiver* to whom the form is to be sent. If paper forms are not required, insert "NA" in the cells.

#### Receiver Codes

EE = Employee

ER = Employer

PR = Provider

Others as defined by jurisdiction

# IAIABC CLAIMS RELEASE 3 STANDARDS: EVENT TABLE INSTRUCTIONS

## 7. Periodic Reports

- a. Using the completed Step 1 worksheet, hide rows containing MTCs that will not be accepted under any circumstances
- b. *Event Rules* described Step 2
- c. *Define Report Trigger Criteria and Trigger Values*  
Report Trigger Criteria describes the condition that causes a report to be triggered to the jurisdiction based on the Trigger Value. Trigger Value further defines the timing of the report requirements.
- d. *Periodic Qualifiers*
  - Status indicate the claim status to be selected and reported
    - 1 = Open (If claim is open at time of Report Trigger)
    - 2 = Closed (If claim has closed since the last periodic report)
    - 3 = Either (if claim is open or has closed since the last periodic report)
  - Activity indicate the claim activity to be selected and reported
    - E = Either (either IL or MB)
    - IL = Indemnity (If Claim Type Code = Indemnity or Became Lost Time)
    - J = Jurisdiction defined (define details in column)
    - MB = Medical Only (If Claim Type Code = Medical Only or Became Medical Only)
- e. *Periodic Report Due*. Expressing the regulations that meet the jurisdiction's filing deadlines may be described with the *Value*, *Due Type* and *From*, as needed. For each MTC and Event Rule Effective Dates, insert Report Due as follows:

<i>Value</i>	<i>Due Type</i>	<i>From</i>
represents the last date/days a jurisdiction will consider this MTC to be timely filed, and not the date on which it is recommended the transaction be initially triggered.	indicates whether the <i>Value</i> is measured in business or calendar days when a specific date is not otherwise expressed	represents the beginning point for the <i>Value</i>  <u>Report Due From Code</u> A = From Date of Accident/Injury J = From Report Trigger Value L = Jurisdiction Defined
<b>Example:</b>		
180	Calendar days	J – Report Trigger value

# IAIABC CLAIMS RELEASE 3 STANDARDS: EVENT TABLE INSTRUCTIONS

## Event Table Scenarios & Examples

### FROI 00 Event Rules Scenario One

On 01/01/1996, The State of Jurisdiction imposed a new rule requiring the submission of a FROI 00 on injury dates on or after January 1, 1996 when lost time is greater than three (3) days. The former rule required the FROI submission after only one (1) lost day. In both cases, the report is due 14 business days from the date the claim administrator had knowledge of the injury. Additionally, a Form WC-1 must be sent to the employee at the time that the FROI 00 is filed.

Maintenance Type		Event Rule Date			What triggers the report?		When is the Report Due?			Paper Form	Receiver
Code	Description	Criteria	From	Thru	Criteria	Trigger Value	Value	Type	From		
00	Original	1 = Date of Injury	01/01/1990	12/31/1995	C = Lost Time	Lost time > 1 day	14 days	B	D = Claim Administrator Notification	WC-1	EE
00	Original	1= Date of Injury	01/01/1996		C = Lost Time	Lost time >3 days	14 days	B	D = Claim Administrator Notification	WC-1	EE

### FROI 00 Event Rules Scenario Two

The State of Jurisdiction requires the submission of a FROI 00 on injury dates on or after January 1, 1996 when lost time is greater than three (3) days **or** when medical expenses have exceeded \$1500. The report must be received within 14 calendar days of the claim administrator's knowledge, and there are no follow-up forms required.

Maintenance Type		Event Rule Date			What triggers the report?		When is the Report Due?			Paper Form	Receiver
Code	Description	Criteria	From	Thru	Criteria	Trigger Value	Value	Type	From		
00	Original	1 = Date of Injury	01/01/1996		C = Lost Time	Lost time > 3 days	14 days	C	D = Claim Administrator Notification	NA	
00	Original	1= Date of Injury	01/01/1996		B = Cumulative Medical \$	>\$1500	14 days	C	D = Claim Administrator Notification	NA	

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## FROI CO Event Rules Scenario One

When the jurisdiction has responded to a filing with an injury date on or after January 1, 1990 with an acknowledgment code of TE (Accepted with Errors), the Correction report, FROI CO, is required to be submitted before the Final (SROI FN) is filed.

Maintenance Type		Event Rule Date			What triggers the report?		When is the Report Due?			Paper Form	Receiver
Code	Description	Criteria	From	Thru	Criteria	Trigger Value	Value	Type	From		
CO	Correction	1 = Date of Injury	01/01/1990		Response to TE				J = Prior to Final filing	NA	

## FROI CO Event Rules Scenario Two

When the jurisdiction has responded to a filing with an acknowledgment code of TE (Accepted with Errors), the Correction report, FROI CO, is required to be submitted within 30 calendar days.

Maintenance Type		Event Rule Date			What triggers the report?		When is the Report Due?			Paper Form	Receiver
Code	Description	Criteria	From	Thru	Criteria	Trigger Value	Value	Type	From		
CO	Correction	1 = Date of Injury	01/01/1990		Response to TE		30 days		D = Claim Administrator Notification	NA	

## SROI IP Event Rules Scenario One

The State of Jurisdiction requires notification of the first indemnity payment on each claim whose injury date is on or after January 1, 1990. In other words, the report is triggered when cumulative indemnity costs are greater than zero. The SROI IP is due within 21 business days of the issuance of the payment. There are no paper follow-up forms required.

Maintenance Type		Event Rule Date			What triggers the report?		When is the Report Due?			Paper Form	Receiver
Code	Description	Criteria	From	Thru	Criteria	Trigger Value	Value	Type	From		
IP	Initial Payment	1 = Date of Injury	01/01/1990		N = Cumulative Indemnity	>\$0	21 days	B	D = Claim Administrator Notification	NA	

## IAIABC CLAIMS RELEASE 3 STANDARDS: EVENT TABLE INSTRUCTIONS

### SROI IP Event Rules Scenario Two

The State of Jurisdiction requires notification of the first indemnity payment on each claim. Prior to 07/01/1999, the filing was only required when cumulative indemnity was greater than \$1000. In either case, the SROI IP is due within 21 business days of the issuance of the payment. There are no paper follow-up forms required.

Maintenance Type		Event Rule Date			What triggers the report?		When is the Report Due?			Paper Form	Receiver
Code	Description	Criteria	From	Thru	Criteria	Trigger Value	Value	Type	From		
IP	Initial Payment	1 = Date of Injury	01/01/1990	06/30/1999	N = Cumulative Indemnity	>\$1000	21 days	B	D = Claim Administrator Notification	NA	
IP	Initial Payment	1 = Date of Injury	07/01/1999		N = Cumulative Indemnity	>\$0	21 days	B	D = Claim Administrator Notification	NA	

### SROI MN Event Rules Scenario

The State of Jurisdiction requires that a monthly report be filed for every indemnity or medical only claim where indemnity and/or medical benefits were paid during the reporting month. The report is triggered on the 1<sup>st</sup> day of the month following the reporting month until the final report (SROI FN) is sent. The MN reports are due to the jurisdiction by the 15<sup>th</sup> day of the month following the reporting month.

Report Type	Maintenance Type		Event Rule			Report Trigger		Periodic Qualifiers		Periodic Report Due		
	Code	Description	Criteria	From	Thru	Criteria	Trigger Value	Status	Activity	Value	Due Type	From
SROI	MN	Monthly	2 - EDI Mandate Date	1/1/1996		Last day of month	1 <sup>st</sup> day of the following month	1 - (claim is open at time of Report Trigger)	E - Either (either Indemnity or Medical Only)	15 <sup>th</sup> day		Of the following month

### SROI AN Event Rules Scenario

The State of Jurisdiction requires that an Annual report be filed for every indemnity or medical only claim where indemnity and/or medical benefits were paid during the reporting year. The report is triggered at 365 day intervals from the date of injury until the final report (SROI FN) is sent. The AN reports are due to the jurisdiction within 30 calendar days of the anniversary of the date of injury.

Report Type	Maintenance Type		Event Rule			Report Trigger		Periodic Qualifiers		Periodic Report Due		
	Code	Description	Criteria	From	Thru	Criteria	Trigger Value	Status	Activity	Value	Due Type	From
SROI	AN	Annual	2 - EDI Mandate Date	1/1/1996			Anniversary of DOI	1 - (claim is open at time of Report Trigger)	E - Either (either Indemnity or Medical Only)	30	C - Calendar Days	J - Report trigger value

# IAIABC CLAIMS RELEASE 3 STANDARDS: EVENT TABLE INSTRUCTIONS

## SROI SA Event Rules Scenario

The State of Jurisdiction requires one periodic report 180 days from the date of injury for claims that have not been closed with a final report (FN). The report is triggered 180 days from the date of injury. The SA report is due to the jurisdiction within 30 calendar days of the Report Trigger Value.

Report Type	Maintenance Type		Event Rule			Report Trigger		Periodic Qualifiers		Periodic Report Due		
	Code	Description	Criteria	From	Thru	Criteria	Trigger Value	Status	Activity	Value	Due Type	From
SROI	SA	Sub-Annual	2 - EDI Mandate Date	1/01/1996		Days from DOI	180 days	1 - open	IL (Indemnity or Became Lost Time)	30 Days	Calendar Days	J- Report trigger value

## Migrating From Previous Release Scenario

The state of Jurisdiction migrates from Claims Release 1 to Claims Release 3 effective August 1, 2008. Jurisdiction will accept Claims EDI reporting in Release 1 format up to July 31, 2008. All Claims electronic filings must be in Release 3 format beginning August 1, 2008. Report trigger criteria do not change with the new mandatory filing requirements. Jurisdiction indicates *Thru* date indicating when Release 1 filing requirements end and *From* date for new Release 3 filing requirements must begin.

Release	Report Type	Maintenance Type		Event Rule			Report Trigger		When is the Report Due?		
		Code	Description	Criteria	From	Thru	Criteria	Trigger Value	Value	Due Type	From
1.0	FROI	00	Original	2 - EDI Mandate Date	1-1-90	7/31/08	A = New Claim, C = Lost Time	All claims including Indemnity and Medical, that are not being denied	21 Days*	C	D = Days <b>after</b> Claim Admin. Notified of <b>Injury</b>
3.0	FROI	00	Original	2 - EDI Mandate Date	8/1/08		A = New Claim, C = Lost Time	All claims including Indemnity and Medical, that are not being denied	21 Days*	C	D = Days <b>after</b> Claim Admin. Notified of <b>Injury</b>

**First Report of Injury (FROI - 148 & R21)  
Refer to Systems Rules - Transmissions**

<b>Paper Equivalent Form(s)</b>	<b>Comments</b>	<b>MTC</b>	<b>MTC Description</b>	<b>MTC Definition</b>	<b>Will this report be accepted electronically? (Yes/No)</b>
SF1 IA1	SF1 - <1996 IA1 - submitted to carrier	00	Original	The original/initial first report transmitted between partners, including the re-transmission of a first report that was rejected due to a critical error.	Yes
N/A	EDI Release 1	01	Cancel	The original first report was sent in error.	Yes
N/A	EDI Release 1	02	Change	The claim administrator initiates a Change MTC when it identifies a change in a data element designated on the Element Requirement Table.	Yes
N/A	EDI Release 1	04	Denial	The entire claim is being denied.	Yes
N/A	EDI Release 3	AQ	Acquired Claim	Minimal data sent to report that a new claim administrator has acquired the claim.	Yes
N/A	EDI Release 1	AU	Acquired/ Unallocated	The equivalent of an initial first report (MTC 00) filed by a new claim administrator in response to an AQ transaction that has been rejected because of no claim match on database or when an AU is sent in lieu of an AQ based on the Jurisdiction's Event Table.	Yes
N/A	EDI Release 1 for legacy purposes only. - TE acknowledgement received prior to 1/16/09.	CO	Correction	Corrected data element values are transmitted in response to an acknowledgment containing non-critical errors.	Yes
N/A	EDI Release 3	UI	Under Investigation	A determination has not yet been made as to whether this is a compensable claim. This MTC may be sent as the First Report.	Yes
N/A	N/A	UR	Upon Request	Submitted in response to a specific request from the Jurisdiction, and manually triggered by the Claim Administrator.	No

**Subsequent Report of Injury (SROI A49 & R22)  
Refer to Systems Rules - Transmissions**

<b>Paper Equivalent</b>	<b>Comments</b>	<b>MTC</b>	<b>MTC Description</b>	<b>MTC Definition</b>	<b>Will the Receiver accept this report through EDI?</b>
N/A	EDI Release 1	02	Change	The claim administrator initiates a Change MTC when it identifies a change in a data element designated on the Element Requirement Table.	Yes
N/A	EDI Release 1	04	Denial	The entire claim is being denied.	Yes
N/A	EDI Release 3	AB	Add Concurrent Benefit Type	Indemnity benefits are currently being paid and concurrent benefit type is being added.	Yes
N/A	EDI Release 1	AP	Acquired/ Payment	The claim administrator who acquired the claim has processed AP Acquired/Payment – the first payment of indemnity benefits.	Yes

N/A	EDI Release 1	CA	Change in Benefit Amount	The Net Weekly Amount (DN0087) for this benefit type has changed from the previously reported Net Weekly Amount (DN0087).	Yes
N/A	EDI Release 1	CB	Change in Benefit Type	A benefit type being paid has changed and payments are being continued under a different benefit type without a break in continuity of benefits.	Yes
N/A	EDI Release 1	CD	Compensable Death	The injured employee has died as a result of a covered injury and no payment(s) of indemnity benefits have been made pending further beneficiary investigation.	Yes
N/A	EDI Release 1	CO	Correction	Corrected data element values are transmitted in response to an acknowledgment containing non-critical errors.	No
N/A	EDI Release 3	EP	Employer Paid	The employer is paying the injured employee's salary in lieu of compensation, and the claim administrator is not paying any indemnity benefits at this time.	Yes
N/A	EDI Release 3	ER	Employer Reinstatement	The employer has resumed paying the injured employee's salary in lieu of compensation, and the claim administrator is not paying any indemnity benefits at this time.	Yes
N/A	EDI Release 1	FN	Final	Closed claim, no further payments of any kind anticipated.	Yes
N/A	EDI Release 1	IP	Initial Payment	The first payment for an indemnity benefit other than a settlement has been issued by a claim administrator.	Yes
N/A	EDI Release 1	P1	Partial Suspension, RTW, or Medically Determined/Qualified RTW	Payment(s) of one concurrent indemnity benefit have stopped because the injured employee has returned to work, and payment(s) of other indemnity benefits continues.	Yes
N/A	EDI Release 1	P2	Partial Suspension, Medical Non-compliance	Payment(s) of one concurrent indemnity benefit have stopped because of medical non-compliance, and payment(s) of other indemnity benefits continues.	No
N/A	EDI Release 1	P3	Partial Suspension, Administrative Non-compliance	Payment(s) of one concurrent indemnity benefit have stopped because of administrative non-compliance, and payment(s) of other indemnity benefits continues.	No
N/A	EDI Release 1	P4	Partial Suspension, Claimant Death	Payment(s) of one concurrent indemnity benefit have stopped because of employee death, and payment(s) of other indemnity benefits continues.	Yes
N/A	EDI Release 1	P5	Partial Suspension, Incarceration	Payment(s) of one concurrent indemnity benefit have stopped because the employee has been incarcerated, and payment(s) of other indemnity benefits continues.	No
N/A	EDI Release 1	P7	Partially Suspension, Benefits Exhausted	Payment(s) of one concurrent indemnity benefit have stopped because limits of benefit or entitlement have been reached, and payment(s) of other indemnity benefits continues.	Yes

N/A	EDI Release 1	P9	Partial Suspended Pending Settlement Approval	Payment(s) of one concurrent indemnity benefit have stopped pending settlement approval, and payment(s) of other indemnity benefits continues.	No
N/A	EDI Release 3	PD	Partial Denial	A specific benefit(s) has been denied.	Yes
N/A	EDI Release 1	PJ	Partially Suspended Pending Appeal or Judicial Review	Payment(s) of one concurrent indemnity benefit have stopped pending appeal or judicial review, and payment(s) of other indemnity benefits continues.	No
N/A	EDI Release 1	PY	Payment Report	Identifies payment information for which reporting is required by the jurisdiction.	Yes
N/A	EDI Release 1	RB	Reinstatement of Benefits	Indemnity payments have been resumed, but the reinstated benefit type may or may not have been paid previously.	Yes
N/A	EDI Release 1	RE	Reduced Earnings	The injured employee has returned/been released to return to work and actual or deemed earnings for each reduced earnings week is reported.	No
N/A	EDI Release 1	S1	Suspension, RTW, or Medically Determined/Qualified RTW	All payments of indemnity benefits have stopped because the employee has returned to work or has been medically determined qualified to return to work.	Yes
N/A	EDI Release 1	S2	Suspension, Medical Non-compliance	All payments of indemnity benefits have stopped because of medical non-compliance.	Yes
N/A	EDI Release 1	S3	Suspension, Administrative Non-compliance	All payments of indemnity benefits have stopped because of administrative non-compliance.	Yes
N/A	EDI Release 1	S4	Suspension, Claimant Death	All payments of indemnity benefits have stopped because the employee has died.	Yes
N/A	EDI Release 1	S5	Suspension, Incarceration	All payments of indemnity benefits have stopped because the employee has been incarcerated.	Yes
N/A	EDI Release 1	S6	Suspension, Claimant's Whereabouts Unknown	All payments of indemnity benefits have stopped because the employee's whereabouts are unknown.	Yes
N/A	EDI Release 1	S7	Suspension, Benefits Exhausted	All payments of indemnity benefits have stopped because limits of benefit or entitlement have been reached.	Yes
N/A	EDI Release 1	S8	Suspension, Jurisdiction Change	All payments of indemnity benefits have stopped because the jurisdiction has been changed.	Yes
N/A	EDI Release 1	S9	Suspended Pending Settlement Approval	All payments of indemnity benefits have stopped pending settlement approval.	Yes

N/A	EDI Release 3	SD	Suspension, Directed by Jurisdiction	All payments of indemnity benefits have stopped per jurisdiction order.	Yes
N/A	EDI Release 1	SJ	Suspended Pending Appeal or Judicial Review	All payments of indemnity benefits have stopped pending appeal or judicial review.	No
N/A	N/A	UI	Under Investigation	A determination has not yet been made as to whether this is a compensable claim.	No
N/A	N/A	UR	Upon Request	Submitted in response to a specific request from the Jurisdiction, and manually triggered by the Claim Administrator.	No
N/A	EDI Release 1	VE	Volunteer	The employee is a volunteer for the covered employer, and the claim administrator will make no indemnity payments.	Yes

**Kentucky Department of Workers' Claims**  
**IAIABC Claims Release 3**  
**First Report of Injury Event Table**

The First Report of Injury (FROI) Event Table is designed to provide information integral for a sender to understand the receiver's EDI reporting requirements. It relates EDI information to the circumstances under which they are initiated as timeframes for sending the information. These circumstances and timeframes reflect legislative mandates and specifications relative to reporting requirements based on various criteria.

**Interpreting the jurisdiction's requirements:** For a (Report Type) (Maintenance Type-Code) meeting (Event Rule Criteria) within (Event Rule Date range - FROM/THRU) where the (Trigger Criteria-Trigger Value), the Report is due (Rep Value-Type) from the (Report Due-From). If the Event Rule Thru date is blank, reporting requirements apply until further notice. When a Paper Form(s) is indicated, this implies that in addition to the EDI transaction, this form(s) must be received by the Receiver indicated.

Release	Report Type	Maintenance Type		Event Rule			Report Trigger		When is the Report Due?			Paper Form(s)
		Code	Description	Criteria		Thru	Criteria	Trigger Value	Value	Due Type	From	
R1	FROI	00	Original	1=Date of Injury	1996	Implementation of R3	C = Lost Time	Used to report injury resulting in lost time of more than 1 day.	<8 days	C = Calendar Days	D = From Administrator Notification	N/A
R3	FROI	00	Original	1=Date of Injury	2010		C = Lost Time	Used to report injury resulting in lost time of more than 1 day.	<8 days	C = Calendar Days	D = From Administrator Notification	N/A
R3	FROI	00	Original	1=Date of Injury	2010		C = Lost Time	Used to report injury resulting in lost time of more than one day and immediately follows UI filed with jurisdiction.	<38 days	C = Calendar Days	D = From Administrator Notification	N/A
R3	FROI	00	Original	1=Date of Injury	2010		A = New Claim	Used to report injury resulting in no lost time.	<8 days	C = Calendar Days	D = From Administrator Notification	N/A
R3	FROI	00	Original	1=Date of Injury	2010		A = New Claim	Used to report injury resulting in no lost time and immediately follows UI filed with jurisdiction.	<38 days	C = Calendar Days	D = From Administrator Notification	N/A
R1	FROI	01	Cancel	2=EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	A previously established claim is now being cancelled.	N/A	N/A	H = Immediate	N/A
R3	FROI	01	Cancel	2=EDI Mandate Date	2010		M = MTC Defined	A previously established claim is now being cancelled.	N/A	N/A	H = Immediate	N/A
R1	FROI	02	Change	3=Jurisdiction defined	1996	Implementation of R3	M = MTC Defined	Change of FROI data elements, based on Element Requirement Table, initiated by the administrator. If data element is on both FROI and SROI, change should be sent on FROI.	N/A	N/A	H = Immediate	N/A
R3	FROI	02	Change	3=Jurisdiction defined	2010		M = MTC Defined	* Change of FROI data elements, based on Element Requirement Table, initiated by the administrator. If data element is on both FROI and SROI, change should be sent on FROI.	N/A	N/A	H = Immediate	N/A
R1	FROI	02	Change	3=Jurisdiction defined	1996	Implementation of R3	J = Jurisdiction Defined	Change of FROI data elements, Date of Injury, Nature, SSN and Date of Death reported in error initiated by the administrator.	N/A	N/A	J = From Report Trigger (Manual Change Form)	N/A
R1	FROI	04	Denial	1=Date of Injury	1996	Implementation of R3	C = Lost Time	Administrator denied claim of injury resulting in lost time of more than 1 day.	<8 days	C = Calendar Days	D = From Administrator Notification	N/A
R3	FROI	04	Denial	1=Date of Injury	2010		C = Lost Time	Administrator denied claim of injury resulting in lost time of more than 1 day.	<8 days	C = Calendar Days	D = From Administrator Notification	N/A

**Kentucky Department of Workers' Claims  
IAIABC Claims Release 3  
First Report of Injury Event Table**

The First Report of Injury (FROI) Event Table is designed to provide information integral for a sender to understand the receiver's EDI reporting requirements. It relates EDI information to the circumstances under which they are initiated as timeframes for sending the information. These circumstances and timeframes reflect legislative mandates and specifications relative to reporting requirements based on various criteria.

**Interpreting the jurisdiction's requirements:** For a (Report Type) (Maintenance Type-Code) meeting (Event Rule Criteria) within (Event Rule Date range - FROM/THRU) where the (Trigger Criteria-Trigger Value), the Report is due (Rep Value-Type) from the (Report Due-From). If the Event Rule Thru date is blank, reporting requirements apply until further notice. When a Paper Form(s) is indicated, this implies that in addition to the EDI transaction, this form(s) must be sent to the Receiver indicated.

Release	Report Type	Maintenance Type		Event Rule			Report Trigger		When is the Report Due?			Paper Form(s)
		Code	Description	Criteria		Thru	Criteria	Trigger Value	Value	Due Type	From	
R3	FROI	04	Denial	1=Date of Injury	2010		C = Lost Time	Administrator denied claim of injury resulting in lost time of more than 1 day and immediately follows a UI filed with jurisdiction.	<38 days	C = Calendar Days	D = From Administrator Notification	N/A
R1	FROI	04	Denial	1=Date of Injury	1996	Implementation of R3	A = New Claim	Administrator denied claim of injury resulting in <u>no</u> lost time.	<8 days	C = Calendar Days	D = From Administrator Notification	N/A
R3	FROI	04	Denial	1=Date of Injury	2010		A = New Claim	Administrator denied claim of injury resulting in <u>no</u> lost time.	<8 days	C = Calendar Days	D = From Administrator Notification	N/A
R3	FROI	04	Denial	1=Date of Injury	2010		A = New Claim	Administrator denied claim of injury resulting in <u>no</u> lost time and immediately follows a UI filed with jurisdiction.	<38 days	C = Calendar Days	D = From Administrator Notification	N/A

**Kentucky Department of Workers' Claims**  
**IAIABC Claims Release 3**  
**First Report of Injury Event Table**

The First Report of Injury (FROI) Event Table is designed to provide information integral for a sender to understand the receiver's EDI reporting requirements. It relates EDI information to the circumstances under which they are initiated as timeframes for sending the information. These circumstances and timeframes reflect legislative mandates and specifications relative to reporting requirements based on various criteria.

**Interpreting the jurisdiction's requirements:** For a (Report Type) (Maintenance Type-Code) meeting (Event Rule Criteria) within (Event Rule Date range - FROM/THRU) where the (Trigger Criteria-Trigger Value), the Report is due (Rep Value-Type) from the (Report Due-From). If the Event Rule Thru date is blank, reporting requirements apply until further notice. When a Paper Form(s) is indicated, this implies that in addition to the EDI transaction, this form(s) must be received indicated.

Release	Report Type	Maintenance Type		Event Rule			Report Trigger		When is the Report Due?			Paper Form(s)
		Code	Description	Criteria		Thru	Criteria	Trigger Value	Value	Due Type	From	
R1	FROI	04	Denial	1=Date of Injury	1996	Implementation of R3	M = MTC Defined	Administrator denied claim following 00 previously filed.	N/A	N/A	N/A	N/A
R3	FROI	04	Denial	1=Date of Injury	2010		M = MTC Defined	Administrator denied claim following 00 previously filed.	N/A	N/A	N/A	N/A
R3	FROI	AQ	Acquired Claim	1=Date of Injury	2010		C = Lost Time	Possession of claim from another administrator used to report minimal information of an injury resulting in lost time of more than 1 day.	<8 days	C = Calendar Days	D = From Administrator Notification	N/A
R3	FROI	AQ	Acquired Claim	1=Date of Injury	2010	-	C = Lost Time	<del>Possession of claim from another administrator used to report minimal information of an injury resulting in lost time of more than 1 day and immediately following an UI filing with jurisdiction.</del>	<38 days	C = Calendar Days	D = From Administrator Notification	N/A
R3	FROI	AQ	Acquired Claim	1=Date of Injury	2010		A = New Claim	Possession of claim from another administrator used to report minimal information of an injury resulting in no lost time.	<8 days	C = Calendar Days	D = From Administrator Notification	N/A
R3	FROI	AQ	Acquired Claim	1=Date of Injury	2010	-	A = New Claim	<del>Possession of claim from another administrator used to report minimal information of an injury resulting in no lost time and immediately following an UI filing with jurisdiction.</del>	<38 days	C = Calendar Days	D = From Administrator Notification	N/A
R1	FROI	AU	Acquired/ Unallocated	1=Date of Injury	1996	Implementation of R3	C = Lost Time	Possession of claim from another administrator used to report injury resulting in lost time of more than 1 day.	<8 days	C = Calendar Days	D = From Administrator Notification	N/A
R3	FROI	AU	Acquired/ Unallocated	1=Date of Injury	2010		C = Lost Time	Possession of claim from another administrator used to report injury resulting in lost time of more than 1 day.	<8 days	C = Calendar Days	D = From Administrator Notification	N/A
R3	FROI	AU	Acquired/ Unallocated	1=Date of Injury	2010		C = Lost Time	Possession of claim from another administrator used to report injury resulting in lost time of more than 1 day and immediately following an UI filing with jurisdiction.	<38 days	C = Calendar Days	D = From Administrator Notification	N/A
R3	FROI	AU	Acquired/ Unallocated	1=Date of Injury	2010		A = New Claim	Possession of claim from another administrator used to report injury resulting in no lost time.	<8 days	C = Calendar Days	D = From Administrator Notification	N/A

**Kentucky Department of Workers' Claims  
IAIABC Claims Release 3  
First Report of Injury Event Table**

The First Report of Injury (FROI) Event Table is designed to provide information integral for a sender to understand the receiver's EDI reporting requirements. It relates EDI information to the circumstances under which they are initiated as timeframes for sending the information. These circumstances and timeframes reflect legislative mandates and specifications relative to reporting requirements based on various criteria.

**Interpreting the jurisdiction's requirements:** For a (Report Type) (Maintenance Type-Code) meeting (Event Rule Criteria) within (Event Rule Date range - FROM/THRU) where the (Trigger Criteria-Trigger Value), the Report is due (Rep Value-Type) from the (Report Due-From). If the Event Rule Thru date is blank, reporting requirements apply until further notice. When a Paper Form(s) is indicated, this implies that in addition to the EDI transaction, this form(s) must be sent to the Receiver indicated.

Release	Report Type	Maintenance Type		Event Rule			Report Trigger		When is the Report Due?			Paper Form(s)
		Code	Description	Criteria		Thru	Criteria	Trigger Value	Value	Due Type	From	
R3	FROI	AU	Acquired/ Unallocated	1=Date of Injury	2010		A = New Claim	Possession of claim from another administrator used to report injury resulting in no lost time and immediately following an UI filing with jurisdiction.	<38 days	C = Calendar Days	D = From Administrator Notification	N/A
R3	FROI	UI	Under Investigation	1=Date of Injury	2010		A = New Claim	Claim is under investigation.	<8 days	C = Calendar Days	D = From Administrator Notification	N/A
R1	FROI	CO	Correction	3=Jurisdiction defined	1996	1/15/2009	M = MTC Defined	Correction of errors in response to a FROI TE acknowledgment.	N/A	N/A	N/A	N/A
R1	FROI	CO	Correction	3=Jurisdiction defined	1/16/2009	Implementation of R3	M = MTC Defined	Correction of errors in response to a ** legacy FROI TE acknowledgment.	N/A	N/A	N/A	N/A
R3	FROI	CO	Correction	3=Jurisdiction defined	2010	6/30/2011	M = MTC Defined	Correction of errors in response to a ** legacy FROI TE acknowledgment.	N/A	N/A	N/A	N/A

**Kentucky does not accept the following MTC Code: UR.**

**MTC Code: 04 will generate a statute letter.**

**If a date of death is reported a statute letter will be generated.**

**\* If changing match data elements (DN0031, DN0035, DN0036, DN0042, DN0153, DN0154) only one can be changed per 02 transaction.**

**\*\* Legacy -TE's prior to 1/16/09**

<b>Release</b> IAIABC Claims Release number	<b>Event Rule Criteria</b> 1=Date of Injury 2=EDI Mandate Date 3=Jurisdiction defined	<b>Report Trigger Criteria Codes</b> A = New Claim B = Cumulative Medical \$ Paid C = Lost Time D = Cumulative Wage Replacement E = Days Open F = Formula J = Jurisdiction Defined L = Determination of Compensable Death M = MTC Defined N = Cumulative Indemnity \$ Paid Q = Employee Death	<b>Report Due Type</b> B = Business Days C = Calendar Days	<b>Report Due From Code</b> A = From Date of Accident/Injury B = From Date of Disability C = From Employer Notification D = From Administrator Notification E = From Jurisdiction Notification F = From Carrier Notification G = From Initial Payment (IP) H = Immediate I = From Date of Death J = From Report Trigger K = Prior to Final Report (FN)	<b>Receiver Cod</b> EE = Employee ER = Employee PR = Provider Others as defi
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Kentucky Department of Workers' Claims  
IAIABC Claims Release 3  
First Report of Injury Event Table

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Kentucky Department of Workers' Claims  
IAIABC Claims Release 3  
First Report of Injury Event Table

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Kentucky Department of Workers' Claims  
IAIABC Claims Release 3  
First Report of Injury Event Table

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Kentucky Department of Workers' Claims  
IAIABC Claims Release 3  
First Report of Injury Event Table

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## IAIABC Claims Release 3 Subsequent Report of Injury Event Table

The Subsequent Report of Injury (SROI) Event Table is designed to provide information integral for a sender to understand the receiver's EDI reporting requirements. It relates EDI in circumstances under which they are initiated as well as the timeframes for sending the information. These circumstances and timeframes reflect legislative mandates and specification requirements based on various criteria.

**Interpreting the jurisdiction's requirements:** For a (Report Type) (Maintenance Type-Code) meeting (Event Rule Criteria) within (Event Rule Date range - FROM/THRU) where the (Value), the Report is due (Report Due Value-Type) from the (Report Due-From) If the Event Rule Thru date is blank, reporting requirements apply until further notice. When a Paper implies that in addition to the EDI transaction, this form(s) must be sent to the Receiver indicated.

Release	Report Type	Maintenance Type		Event Rule			Report Trigger		When is the Report Due?		
		Code	Description	Criteria	From	Thru	Criteria	Trigger Value	Value	Due Type	From
R1	SROI	02	Change	3=Jurisdiction defined	1996	Implementation of R3	M = MTC Defined	Change of SROI data elements, based on Element Requirement Table, initiated by the administrator.	N/A	N/A	H = Immediate
R3	SROI	02	Change	3=Jurisdiction defined	2010		M = MTC Defined	Change of SROI data elements, based on Element Requirement Table, initiated by the administrator.	N/A	N/A	H = Immediate
R1	SROI	02	Change	3=Jurisdiction defined	1996	Implementation of R3	J = Jurisdiction Defined	Change of SROI data elements, Date of Injury, Nature, SSN and Date of Death reported in error initiated by the administrator must be submitted on a FROI 02	N/A	N/A	H = Immediate
R3	SROI	02	Change	3=Jurisdiction defined	2010		J = Jurisdiction Defined	Change of SROI match data elements reported in error initiated by the administrator must be submitted on a FROI 02	N/A	N/A	H = Immediate
R1	SROI	04	Denial	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	Denial of entire claim after indemnity payments have started	N/A	N/A	H = Immediate
R3	SROI	04	Denial	2 = EDI Mandate Date	2010		M = MTC Defined	Denial of entire claim after indemnity payments have started	N/A	N/A	H = Immediate
R3	SROI	AB	Add Concurrent Benefit Type	2 = EDI Mandate Date	2010		M = MTC Defined	Concurrent-TP & PP-payments	N/A	N/A	H = Immediate

**IAIABC Claims Release 3**  
**Subsequent Report of Injury Event Table**

Release	Report Type	Maintenance Type		Event Rule			Report Trigger		When is the Report Due?		
		Code	Description	Criteria	From	Thru	Criteria	Trigger Value	Value	Due Type	From
R1	SROI	AP	Acquired/Payment	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	The claim administrator who acquired the claim has processed their first payment of indemnity benefits.	<8 Days	C = Calendar Days	J = Payments began
R3	SROI	AP	Acquired/Payment	2 = EDI Mandate Date	2010		M = MTC Defined	The claim administrator who acquired the claim has processed their first payment of indemnity benefits.	<8 Days	C = Calendar Days	J = Payments began
R1	SROI	CA	Change in Benefit Amount	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	Changed from the previously reported Net Weekly Amount (DN0087).	N/A	N/A	H = Immediate
R3	SROI	CA	Change in Benefit Amount	2 = EDI Mandate Date	2010		M = MTC Defined	Changed from the previously reported Net Weekly Amount (DN0087).	N/A	N/A	H = Immediate
R1	SROI	CB	Change in Benefit Type	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	Changed from the previously reported Benefit Type Code (DN0085).	N/A	N/A	H = Immediate
R3	SROI	CB	Change in Benefit Type	2 = EDI Mandate Date	2010		M = MTC Defined	Changed from the previously reported Benefit Type Code (DN0085).	N/A	N/A	H = Immediate
R1	SROI	CD	Compensable Death	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	The injured employee has died as a result of a covered injury and no payment(s) have been made.	N/A	N/A	H = Immediate
R3	SROI	CD	Compensable Death	2 = EDI Mandate Date	2010		M = MTC Defined	The injured employee has died as a result of a covered injury and no payment(s) have been made.	N/A	N/A	H = Immediate
R3	SROI	EP	Employer Paid	2 = EDI Mandate Date	2010		M = MTC Defined	Employer paying benefits	N/A	N/A	H = Immediate

**IAIABC Claims Release 3**  
**Subsequent Report of Injury Event Table**

Release	Report Type	Maintenance Type		Event Rule			Report Trigger		When is the Report Due?		
		Code	Description	Criteria	From	Thru	Criteria	Trigger Value	Value	Due Type	From
R3	SROI	ER	Employer Reinstatement	2 = EDI Mandate Date	2010		M = MTC Defined	Employer has resumed paying the injured employee's salary in lieu of compensation	N/A	N/A	H = Immediate
R1	SROI	FN	Final	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	Closed claim, no further payments of any kind anticipated. Does not generate Statute letter.	730 days	C = Calendar Days	J = DOI
R1	SROI	FN	Final	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	Closed claim, no further payments of any kind anticipated. Does not generate Statute letter.	Last TTD payment made.	N/A	H = Immediate
R3	SROI	FN	Final	2 = EDI Mandate Date	2010		M = MTC Defined	Closed claim, no further payments of any kind anticipated. Does not generate Statute letter.	Last TTD payment made.	N/A	H = Immediate
R1	SROI	IP	Initial Payment	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	The first payment of an indemnity benefit other than a lump sum payment/settlement.	<8 Days	C = Calendar Days	J = Payments began
R3	SROI	IP	Initial Payment	2 = EDI Mandate Date	2010		M = MTC Defined	The first payment of an indemnity benefit other than a lump sum payment/settlement.	<8 Days	C = Calendar Days	J = Payments began
R1	SROI	P1	Partial Suspension, RTW, or Medically Determined/Qualified RTW	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	Payment(s) of one concurrent indemnity benefit have stopped because the injured employee has returned to work or medically determined/qualified RTW, and payment(s) of other indemnity benefits continues.	N/A	N/A	H = Immediate

**IAIABC Claims Release 3**  
**Subsequent Report of Injury Event Table**

Release	Report Type	Maintenance Type		Event Rule			Report Trigger		When is the Report Due?		
		Code	Description	Criteria	From	Thru	Criteria	Trigger Value	Value	Due Type	From
R3	SROI	P1	Partial Suspension, RTW, or Medically Determined/Qualified RTW	2 = EDI Mandate Date	2010		M = MTC Defined	Payment(s) of one concurrent indemnity benefit have stopped because the injured employee has returned to work or medically determined/qualified RTW, and payment(s) of other indemnity benefits continues.	N/A	N/A	H = Immediate
R1	SROI	P4	Partial Suspension, Claimant Death	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	Payment(s) of one concurrent indemnity benefit have stopped because of employee death, and payment(s) of other indemnity benefits continues.	N/A	N/A	H = Immediate
R3	SROI	P4	Partial Suspension, Claimant Death	2 = EDI Mandate Date	2010		M = MTC Defined	Payment(s) of one concurrent indemnity benefit have stopped because of employee death, and payment(s) of other indemnity benefits continues.	N/A	N/A	H = Immediate
R1	SROI	P7	Partial Suspension, Benefits Exhausted	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	Payment(s) of one concurrent indemnity benefit have stopped because limits of benefit or entitlement have been reached, and payment(s) of other indemnity benefits continues.	N/A	N/A	H = Immediate

**IAIABC Claims Release 3**  
**Subsequent Report of Injury Event Table**

Release	Report Type	Maintenance Type		Event Rule			Report Trigger		When is the Report Due?		
		Code	Description	Criteria	From	Thru	Criteria	Trigger Value	Value	Due Type	From
R3	SROI	P7	Partial Suspension, Benefits Exhausted	2 = EDI Mandate Date	2010		M = MTC Defined	Payment(s) of one concurrent indemnity benefit have stopped because limits of benefit or entitlement have been reached, and payment(s) of other indemnity benefits continues.	N/A	N/A	H = Immediate
R3	SROI	PD	Partial Denial	2 = EDI Mandate Date	2010		M = MTC Defined	Partial denial of TP or PP benefits	N/A	N/A	H = Immediate
R1	SROI	PY	Payment Report	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	Identifies payment information for which reporting is required by the Jurisdiction other than indemnity payments.	N/A	N/A	H = Immediate
R3	SROI	PY	Payment Report	2 = EDI Mandate Date	2010		M = MTC Defined	Identifies lump sum payment information for which reporting is required by the Jurisdiction including lump sum indemnity payments.	N/A	N/A	H = Immediate
R1	SROI	RB	Reinstatement of Benefits	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	Reinstatement of benefits subsequent to previous suspension	N/A	N/A	H = Immediate
R3	SROI	RB	Reinstatement of Benefits	2 = EDI Mandate Date	2010		M = MTC Defined	Reinstatement of benefits subsequent to previous suspension	N/A	N/A	H = Immediate

**IAIABC Claims Release 3**  
**Subsequent Report of Injury Event Table**

Release	Report Type	Maintenance Type		Event Rule			Report Trigger		When is the Report Due?		
		Code	Description	Criteria	From	Thru	Criteria	Trigger Value	Value	Due Type	From
R1	SROI	S1	Suspension, RTW, or Medically Determined/Qualified RTW	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	All payments of indemnity benefits have stopped because the employee has returned to work or has been medically determined qualified to return to work.	<8 Days	C = Calendar Days	J = Date of Final Indemnity Payment
R3	SROI	S1	Suspension, RTW, or Medically Determined/Qualified RTW	2 = EDI Mandate Date	2010		M = MTC Defined	All payments of indemnity benefits have stopped because the employee has returned to work or has been medically determined qualified to return to work.	<8 Days	C = Calendar Days	J = Date of Final Indemnity Payment
R1	SROI	S2	Suspension, Medical Non-compliance	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	All payments of indemnity benefits have stopped because of medical non-compliance.	N/A	N/A	H = Immediate
R3	SROI	S2	Suspension, Medical Non-compliance	2 = EDI Mandate Date	2010		M = MTC Defined	All payments of indemnity benefits have stopped because of medical non-compliance.	<8 Days	C = Calendar Days	J = Date of Final Indemnity Payment
R1	SROI	S3	Suspension, Administrative Non-compliance	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	All payments of indemnity benefits have stopped because of administrative non-compliance.	N/A	N/A	H = Immediate
R3	SROI	S3	Suspension, Administrative Non-compliance	2 = EDI Mandate Date	2010		M = MTC Defined	All payments of indemnity benefits have stopped because of administrative non-compliance.	<8 Days	C = Calendar Days	J = Date of Final Indemnity Payment

**IAIABC Claims Release 3**  
**Subsequent Report of Injury Event Table**

Release	Report Type	Maintenance Type		Event Rule			Report Trigger		When is the Report Due?		
		Code	Description	Criteria	From	Thru	Criteria	Trigger Value	Value	Due Type	From
R1	SROI	S4	Suspension, Claimant Death	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	All payments of indemnity benefits have stopped because the employee has died.	N/A	N/A	H = Immediate
R3	SROI	S4	Suspension, Claimant Death	2 = EDI Mandate Date	2010		M = MTC Defined	All payments of indemnity benefits have stopped because the employee has died.	<8 Days	C = Calendar Days	J = Date of Final Indemnity Payment
R1	SROI	S5	Suspension, Incarceration	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	All payments of indemnity benefits have stopped because the employee has been	N/A	N/A	H = Immediate
R3	SROI	S5	Suspension, Incarceration	2 = EDI Mandate Date	2010		M = MTC Defined	All payments of indemnity benefits have stopped because the employee has been incarcerated.	<8 Days	C = Calendar Days	J = Date of Final Indemnity Payment
R1	SROI	S6	Suspension, Claimant's Whereabouts Unknown	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	All payments of indemnity benefits have stopped because the employee's whereabouts are unknown.	N/A	N/A	H = Immediate
R3	SROI	S6	Suspension, Claimant's Whereabouts Unknown	2 = EDI Mandate Date	2010		M = MTC Defined	All payments of indemnity benefits have stopped because the employee's whereabouts are unknown.	<8 Days	C = Calendar Days	J = Date of Final Indemnity Payment
R1	SROI	S7	Suspension, Benefits Exhausted	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	All payments of indemnity benefits have stopped because limits of benefit or entitlement have been reached.	N/A	N/A	H = Immediate

**IAIABC Claims Release 3**  
**Subsequent Report of Injury Event Table**

Release	Report Type	Maintenance Type		Event Rule			Report Trigger		When is the Report Due?		
		Code	Description	Criteria	From	Thru	Criteria	Trigger Value	Value	Due Type	From
R3	SROI	S7	Suspension, Benefits Exhausted	2 = EDI Mandate Date	2010		M = MTC Defined	All payments of indemnity benefits have stopped because limits of benefit or entitlement have been reached.	<8 Days	C = Calendar Days	J = Date of Final Indemnity Payment
R1	SROI	S8	Suspension, Jurisdiction Change	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	All payments of benefits for the jurisdiction receiving the S8 have stopped because the jurisdiction has been changed. The jurisdiction receiving the S8 should mark their claim as closed.	N/A	N/A	H = Immediate
R3	SROI	S8	Suspension, Jurisdiction Change	2 = EDI Mandate Date	2010		M = MTC Defined	All payments of benefits for the jurisdiction receiving the S8 have stopped because the jurisdiction has been changed. The jurisdiction receiving the S8 should mark their claim as closed.	<8 Days	C = Calendar Days	J = Date of Final Indemnity Payment
R1	SROI	S9	Suspended Pending Settlement Approval	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	All payments of indemnity benefits have stopped pending settlement approval.	N/A	N/A	H = Immediate
R3	SROI	S9	Suspended Pending Settlement Approval	2 = EDI Mandate Date	2010		M = MTC Defined	All payments of indemnity benefits have stopped pending settlement approval.	<8 Days	C = Calendar Days	J = Date of Final Indemnity Payment
R3	SROI	SD	Suspension, Directed by Jurisdiction	2 = EDI Mandate Date	2010		M = MTC Defined	Suspension ordered by jurisdiction.	N/A	N/A	H = Immediate

**IAIABC Claims Release 3  
Subsequent Report of Injury Event Table**

Release	Report Type	Maintenance Type		Event Rule			Report Trigger		When is the Report Due?		
		Code	Description	Criteria	From	Thru	Criteria	Trigger Value	Value	Due Type	From
R1	SROI	VE	Volunteer	2 = EDI Mandate Date	1996	Implementation of R3	M = MTC Defined	No indemnity payments made to employee with Volunteer status.	N/A	N/A	H = Immediate
R3	SROI	VE	Volunteer	2 = EDI Mandate Date	2010		M = MTC Defined	No indemnity payments made to employee with Volunteer status.	N/A	N/A	H = Immediate

**Kentucky does not accept the following MTC Codes: CO, P2, P3, P5, P9, PJ, RE, SJ, UI and UR.**

**MTC Codes: 04, CD, S1 - S9, SD will generate a statute letter.**

**If a date of death is reported a statute letter will be generated.**

**Release**

IAIABC Claims Release number

**Rule Date Criteria**

1=Date of Injury  
2=EDI Mandate Date  
3=Jurisdiction defined

**Report Trigger Criteria Codes**

A = New Claim  
B = Cumulative Medical \$ Paid  
C = Lost Time  
D = Cumulative Wage Replacement Paid  
E = Days Open  
F = Formula  
J = Jurisdiction Defined  
L = Determination of Compensable Death  
M = MTC Defined  
N = Cumulative Indemnity \$ Paid  
Q = Employee Death

**Report Due Type**

B = Business Days  
C = Calendar Days

**Report Due From Codes**

A = From Date of Accident/Injury  
B = From Date of Disability  
C = From Employer Notification  
D = From Claim Administrator Notification  
E = From Jurisdiction Notification  
F = From Carrier Notification  
G = From Initial Payment (IP)  
H = Immediate  
I = From Date of Death  
J = From Report Trigger  
K = Prior to Final Report (FN)

**IAIABC Claims Release 3**  
**Subsequent Report of Injury Event Table**

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Form(s) is indicated, this

Paper Form(s)	Receiver
N/A	N/A

**IAIABC Claims Release 3**  
**Subsequent Report of Injury Event Table**

<b>Paper Form(s)</b>	<b>Receiver</b>
N/A	N/A

**IAIABC Claims Release 3**  
**Subsequent Report of Injury Event Table**

<b>Paper Form(s)</b>	<b>Receiver</b>
N/A	N/A

**IAIABC Claims Release 3**  
**Subsequent Report of Injury Event Table**

Paper Form(s)	Receiver
N/A	N/A

**IAIABC Claims Release 3  
Subsequent Report of Injury Event Table**

<b>Paper Form(s)</b>	<b>Receiver</b>
N/A	N/A

**IAIABC Claims Release 3**  
**Subsequent Report of Injury Event Table**

<b>Paper Form(s)</b>	<b>Receiver</b>
N/A	N/A

**IAIABC Claims Release 3**  
**Subsequent Report of Injury Event Table**

<b>Paper Form(s)</b>	<b>Receiver</b>
N/A	N/A

**IAIABC Claims Release 3**  
**Subsequent Report of Injury Event Table**

<b>Paper Form(s)</b>	<b>Receiver</b>
N/A	N/A

**IAIABC Claims Release 3  
Subsequent Report of Injury Event Table**

<b>Paper Form(s)</b>	<b>Receiver</b>
N/A	N/A
N/A	N/A

**Receiver Codes**

- EE = Employee
- ER = Employer
- PR = Provider
- Others as defined by jurisdiction

## IAIABC Claims Release 3 Periodic Report Event Table

The Periodic Subsequent Report of Injury (SROI) Event Table is designed to provide information integral for a sender to understand the receiver'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 legislative mandates and specifications relative to reporting requirements based on various criteria.

**Interpreting the jurisdiction's requirements:** A (Report Type) (Maintenance Type-Code) must be filed based on the (Event Rule Criteria) within (Event Rule Date range) on Claims that meet the Report Trigger (Criteria and Trigger Value), meets the Periodic Qualifier (Status and Activity) and must be filed by the Periodic Report Due indicated (Value, Due Type, From).

\* If the Event Rule Thru date is blank, reporting requirements apply until further notice.

\* Periodic Report Due indicated (Value, Due Type, From) is the last day a claim administrator has to receive a "Transaction Accepted" or "Transaction Accepted with Errors" for that MTC, and not just the date on which that transaction must be triggered regardless of errors. It was suggested that the Claim Administrator trigger the reports prior to this date in order to allow time for correcting errors.

Release	Report Type	Maintenance Type		Event Rule		Report Trigger		Periodic Qualifiers		Periodic Report Due		
		Code	Description	From	Thru	Criteria	Trigger Value	Status	Activity	Value	Due Type	From
R1	SROI	BM	Bi-Monthly	1996	Implementation of R3	M = MTC Defined	If claimant continues to draw benefits, must be reported every 60 days while claim is ongoing.	1 = Open (If claim is open at time of Report Trigger)	IL = Indemnity (If Claim Type Code = Indemnity or Became Lost Time)	60	C = Calendar Days	J = Payments Began
R3	SROI	BM	Bi-Monthly	2010		M = MTC Defined	If claimant continues to draw benefits, must be reported every 60 days while claim is ongoing.	1 = Open (If claim is open at time of Report Trigger)	IL = Indemnity (If Claim Type Code = Indemnity or Became Lost Time)	60	C = Calendar Days	J = Payments Began

**Release**

IAIABC Claims Release number

**Status Qualifier**

- 1 = Open (If claim is open at time of Report Trigger)
- 2 = Closed (If claim has closed since the last periodic report)
- 3 = Either (if claim is open or has closed since the last periodic report)

**Activity Qualifier**

- E = Either (either IL or MB)
- IL = Indemnity (If Claim Type Code = Indemnity or Became Lost Time)
- J = Jurisdiction defined (define details in column)
- MB = Medical Only (If Claim Type Code = Medical Only or Became Medical Only)

**Due Type**

- B = Business Days
- C = Calendar Days