NEW YORK STATE | Workers' Compensation Board

eClaims

Monthly Webinar

OCTOBER 16, 2024

AGENDA

1 Case indexing changes effective 9/26/2024

2 Table changes published on 7/23/2024 and 9/16/2024

3 Most frequent errors returned over past 90 days

4 OnBoard – Claims sender updates for PARs

5 Questions

CASE INDEXING CHANGES EFFECTIVE 9/26/2024

CASE INDEXING CHANGES EFFECTIVE 9/26/2024

To provide clarity and promote efficient resolution of workers' compensation claims, the Board began indexing every complete case effective 9/26/2024.

- This means that every case with an *Employee Claim (Form C-3)* or First Report of Injury (FROI) and a medical report of treatment is indexed by the Board. Following indexing, any denial of the claim must be filed with the Board within 25 days of the date of indexing or defenses listed in Workers' Compensation Law Section 25(2)(b) will be barred.

- In support of this change, relaxed Claims EDI edits were published on the eClaims change log on 7/23/2024 announcing the implementation on 9/26/2024.

- Read more in Case Indexing Bulletin and Subject Number 046-1704

TABLE CHANGES PUBLISHED ON 7/23/2024 AND 9/16/2024

TABLE CHANGES PUBLISHED 7/23/2024 FOR RELAXED EDITS

The following relaxed edits were published on the eClaims change log and became effective on 9/26/2024.

Item #	Document	Item	Description of Change	Publish Date	Implementation date
383	Element Requirements- FROI Element Requirements	DN0075 (Agreement to Compensate Code)	Relaxed FROI Condition on DN0075. Was: Required if Date of Injury is on or after 1/1/2019 unless Claim Type Code = N (Notification of an Incident Only) Now: Required if Date of Injury is on or after 1/1/2019 unless Claim Type Code = N (Notification of an Incident Only) or Claim Type Code = M (Medical Only) for Cases assembled on or after 9/26/2024	7/23/2024	9/26/2024
384	Edit Matrix-Population Restrictions	DN0031 (Date of Injury)	Relaxed Population Restriction on DN0031-064 F) to add an exception in the exception column: Exception: For cases assembled on or after 9/26/2024, edit is relaxed to allow DN0075 (Agreeement to Compensate Code) to be null when DN0074 (Claim Type Code) is M (Medical Only).	7/23/2024	9/26/2024
385	Edit Matrix-Population Restrictions	DN0074 (Claim Type Code)	Relaxed Population Restriction on DN0074-064 H) to add an exception in the exception column: Exception: For cases assembled on or after 9/26/2024 edit is relaxed to allow DN0075 (Agreement to Compensate Code) to be null when changing DN0074 (Claim Type Code) to M (Medical Only).	7/23/2024	9/26/2024
386	Edit Matrix-Population Restrictions	DN0074 (Claim Type Code)	Relaxed Population Restriction on DN0074-064 L) to add an exception in the exception column: Exception: For cases assembled on or after 9/26/2024 edit is relaxed to allow DN0075 (Agreement to Compensate Code) to be null when changing DN0074 (Claim Type Code) to M (Medical Only).	7/23/2024	9/26/2024
387	Edit Matrix-Population Restrictions	DN0075 (Agreement to Compensate Code)	Relaxed Population Restriction on DN0075-064 D) to add an exception in the exception column: Exception: For cases assembled on or after 9/26/2024 edit is relaxed to allow DN0075 (Agreement to Compensate Code) to be null on Medical Only cases.	7/23/2024	9/26/2024
388	Edit Matrix-Population Restrictions	DN0075 (Agreement to Compensate Code)	Element Error text changed on DN0075-064 D) to accommodate the exception in change log item #387 Was: must be L if Claim Type Code is M or W Now: cannot be Without Liability	7/23/2024	9/26/2024

ELEMENT ERROR TEXT MODIFIED EFFECTIVE 9/26/2024

The following element error text was modified on 0075-064D to accommodate the relaxed edit on this Population Restriction:

Item #	Document	Item	Description of Change	Publish Date	Implementation date
388	Edit Matrix-Population Restrictions	DN0075 (Agreement to Compensate Code)	Element Error text changed on DN0075-064 D) to accommodate the exception in change log item #387 **Was:** must be L if Claim Type Code is M or W **Now:** cannot be Without Liability	7/23/2024	9/26/2024

REMOVAL OF 0086-064 PUBLISHED ON 9/16/2024 CHANGE LOG

Based on input from senders, it was determined that this edit was not necessary; therefore, it was removed on 8/28/2024.

Item #	Document	Item	Description of Change	Publish Date	Implementation date
394	Edit Matrix - Population Restrictions Edit Matrix - DN Error Message	DN0086 (Benefit Type Amount Paid)	Removed Population Restriction 0086-064. **Business Need:** It was determined that this Population Restriction was not necessary as a Payment Segment is not always sent on an 02. Removed 0086-064 error from DN Error Message Table.	9/16/2024	8/28/2024

DATE CLAIM ADMINISTRATOR DECISION TO FULLY DENY (DN0444)

IAIABC added this new data element as published in their 1/1/2025 Implementation Guide. This DN has been added to the tables and listed as Severity Ranking "NA" effective 10/17/2024.

Item #	Document	Item	Description of Change	Publish Date	Implementation date
			9/16/2024		
389	Element Requirements -FROI Element Requirements	DN0444 (Date Claim Administrator Decision to Fully Deny)	Added new DN to the FROI Element Requirement table with the following severity rankings: FROI 00/01/AQ/AU = X severity ranking, FROI-04/UR = N/A, FROI-02 Add/Update/Remove = N/A, FROI-02 delete = B IAIABC Change Log ERT236. R21 Position 1024-1031.	9/16/2024	10/17/2024
390	Element Requirements - SROI Element Requirments	DN0444 (Date Claim Administrator Decision to Fully Deny)	Added new DN to the SROI Element Requirement table with the following severity rankings: SROI AC/AP/CA/CB/CD/Ep/ER/IP/PD/PY/RB/SX/SA = X severity ranking, SROI-04/SU/UR =N/A, SROI-02 Add/Update/Remove = N/A, SROI-02 delete = B IAIABC Change Log ERT236. R22 position 647-654.	9/16/2024	10/17/2024
391	Edit Matrix- DN-Error Message	DN0444 (Date Claim Administrator Decision to Fully Deny)	Added new DN to the DN-Error Message table, applying no edits. Greyed out errors 029, 034, 037 and 041 as we will not be applying these edits. Edit Matrix - IAIABC Change Log EM148	9/16/2024	10/17/2024

REPORTING OF WORK SCHEDULE DATA ELEMENTS

A sender brought to our attention that changes were needed for reporting Number of Days Worked per Week (DN0064), Work Week Type Code (DN0204), and Work Days Scheduled Code (DN0205).

- To resolve this issue, we will be modifying some Population Restrictions effective 3/20/2025.

- These changes were posted on the eClaims change log on 9/16/2024 to allow Claim Administrators ample time to modify their coding to avoid rejections.

POPULATION RESTRICTIONS TO BE IMPLEMENTED 3/20/2025

Item #	Document	Item	Description of Change	Publish Date	Implementation date
392	Edit Matrix - Population Restrictions	DN0064 (Number of Days Worked Per Week)	Modified Population Restriction on DN0064-064 A) **Was:** A) If DN0064 (Number of Days Worked per Week) is present, then DN0205 (Work Days Scheduled Code) must have exactly that number of S's (Scheduled) in it. If DN0064 (Number of Days Worked per Week) is not blank or null, and DN0205 (Work Days Scheduled Code) does not have a count of 'S's in it that matches DN0064 (Number of Days Worked per Week) then DN0205 (Work Days Scheduled Code) must be included in the Change Variable Segment. **Now:** A) If DN0064 (Number of Days Worked per Week) is present and the latest value of DN0204 (Work Week Type Code) is equal to Fixed, then DN0205 (Work Days Scheduled Code) must have exactly that number of S's (Scheduled) in it. If DN0064 (Number of Days Worked per Week) is not blank or null, and DN0205 (Work Days Scheduled Code) does not have a count of 'S's in it that matches DN0064 (Number of Days Worked per Week) then DN0205 (Work Days Scheduled Code) must be included in the Change Variable Segment.	9/16/2024	3/20/2025
393	Edit Matrix - Population Restrictions	DN0064 (Number of Days Worked Per Week)	Modified Population Restriction on DN0064-064 B) **Was:** B) If DN0064 (Number of Days Worked per Week) is a value other than 5 and DN0031 (Date of Injury) is on or after 3/1/14 and DN0290 (Type of Loss Code) is either 01 (Traumatic Injury) or is not present and DN0074 (Claim Type Code) is either I (Indemnity) or L (Became Lost Time) and the latest value of DN0204 (Work Week Type Code) is blank or null Then DN0204 (Work Week Type Code) must be included on the Change Variable Segment. **Now:** B) If DN0064 (Number of Days Worked per Week) is a value other than 5 and DN0031 (Date of Injury) is on or after 3/1/14 and DN0290 (Type of Loss Code) is either 01 (Traumatic Injury) or is not present and DN0074 (Claim Type Code) is either I (Indemnity) or L (Became Lost Time) and the latest value of DN0204 (Work Week Type Code) is blank, null or standard Then DN0204 (Work Week Type Code) must be included on the Change Variable Segment.	9/16/2024	3/20/2025
395	Edit Matrix - Population Restrictions	DN0204 (Work Week Type Code)	New Population Restriction DN0204-064 D) D) If DN0204 (Work Week Type Code) is V (Varied), and latest value of DN0205 (Work Days Scheduled Code) is not blank or null Then DN0205 (Work Days Scheduled Code) must be included in the Change Variable Segment This edit is effective on 3/20/2025	9/16/2024	3/20/2025
396	Edit Matrix - Population Restrictions	DN0204 (Work Week Type Code)	New Population Restriction DN0204-064 E) E) If DN0204 (Work Week Type Code) is equal to Standard, and latest value of DN0064 (Number of Days Worked per Week) is not blank or null then DN0064 (Number of Days Worked per Week) must equal 5. If DN0204 (Work Week Type Code) is Standard and DN0064 (Number of Days Worked per Week) is not equal to 5 then DN0064 (Number of Days Worked per Week) must be included in the Change Variable Segment. and equal 5. This edit is effective on 3/20/25	9/16/2024	3/20/2025
397	Edit Matrix - Population Restrictions	DN0205 (Work Days Scheduled Code)	New Population Restriction DN0205-064 C) D) If DN0205 (Work Days Scheduled Code) is present and the number of S's do not equal DN0064 (Number of Days per week) then DN0064 (Number of days work per week) must be included in the change variable segment. This edit is effective on 3/20/25	9/16/2024	3/20/2025

MOST FREQUENT ERRORS RETURNED OVER PAST 90 DAYS

POPULATION RESTRICTION 0085-064A

The most common error over the past 90 days as well as the top error for 2022 and 2023 was a carryover edit from eClaims R3.0.

- The population restriction is intended to prevent a new Benefit Type Code (DN0085) from being introduced as a sweep benefit if not previously submitted as an Event Benefit or a SROI-UR(G)/SA included the Benefit Type Code. This is based on the IAIABC Claims EDI Section 4 rules.

- FTP filers should ensure that their systems are programmed accordingly to avoid further rejections.

DN	Report or MTC	Data Element Name	Population Restriction	Error Message Number	Error Message Text	Element Error Text (DN0291)	Length of G	Length of col H, 50 pos allowed
0085	ALL except UR(G)	Benefit Type Code	A) If DN0002 (Maintenance Type Code) is not UR(G), then DN0085 (Benefit Type Code) other than 2xx or 5xx cannot be sent on a sweep benefit unless previously sent on any prior SROI unless no SROI has been accepted or if there have been only SROI-SA or SROI-UR(G) accepted.	064	Invalid data relationship	Sweep BTC must have event BTC or on UR(G)/SA	25	44

POPULATION RESTRICTION 0075-064C

The second most common error returned in the past 90 days is also an eClaims R3.0 carryover to ensure that the Agreement to Compensate Code (DN0075) is sent as "With Liability" after the Board has issued a Notice that the case has been established with an ANCR/ODNCR finding in accordance with § 21-a.

■ FTP filers should ensure that their systems are programmed accordingly to avoid further rejections.

DN	Report or MTC	Data Element Name	Population Restriction	Exception	Error Message Number	Error Message Text	Element Error Text (DN0291)	Length of G	Length of col H, 50 pos allowed
0075	All SROI except SA	Agreement to Compensation Code	C) SROI (exc SROI-SA) cannot list Agreement to Compensate Code – W if ANCR/DNCR has been established (excluding 25(1)(f) cases or ANCR/ODNCR finding pending appeal). Effective 3/15/2018	Effective 11/17/19, this edit will not be applied if DN0059 (Manual Classification Code) has been accepted as 7711 or 7370.	064	Invalid data relationship	Must be L since ANCR/ODNCR has been established	25	47

POPULATION RESTRICTION 0087-059

The third most common error returned in the past 90 days is another carryover edit from eClaims R3.0 and intended to force senders to only change the Net Weekly Amount (DN0087) on the appropriate Maintenance Type Code (MTC) in accordance with the IAIABC Claims EDI R3.1 standard.

- This is a Population Restriction edit on Net Weekly Amount (DN0087) that states:

DN	Report or MTC	Data Element Name	Population Restriction	Exception	Error Message Number	Error Message Text	Element Error Text (DN0291)
0087	All except AP, CA, ER, IP, PY, RB, SU	Net Weekly Amount	If MTC is not AP/CA/CB/ER/IP/PY/RB/SU then DN0087 (Net Weekly Amount) must match value previously reported for this DN0085 (Benefit Type Code)		059	Non-match data value not consistent with value previously reported	Only changed on SROI-AP/CA/ER/IP/PY/RB/SU

- FTP filers should ensure that their systems are programmed accordingly to avoid further rejections.

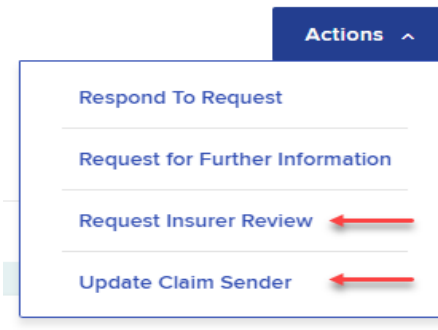# ONBOARD – CLAIMS SENDER UPDATES FOR PARS

ONBOARD PAYER UPDATE

Payer workload administrators now have the ability to have a prior authorization request (PAR) moved to the correct claim administrator for the same WCB case number, eliminating the need to administratively deny the PAR.

■ The new options allow payers to request insurer review or update the claim sender of a PAR if there was a recent change in the third-party administrator (TPA).

■ Two new "Actions" options are available:

▪ "Request Insurer Review"

▪ "Update Claim Sender"

ONBOARD PAYER UPDATE

Reminders for Update Claim Sender option

- Update Claim Sender option should always be the first choice. If the claim administrator is available to choose from, the workload administrator should be reassigning the PAR.

- Keep in mind that some TPAs may be owned by an insurance carrier/carrier group. You may need to select that sender from the dropdown to reassign it to a specific TPA.

- The Board has seen the Insurer Review option used several times when the Update Claims Sender option would have been appropriate. For now, the Board is reassigning the PAR and sending an email to educate the workload administrator regarding the proper use of Update Claims Sender vs. Insurer Review options.

ONBOARD PAYER UPDATE

Reminders for Insurer Review option

- Insurer Review option should not be used if you are going through the Controverted Claim Process. You should continue to use the Administrative Denial – FROI/SROI-04 option.

- Insurer Review option should be used if you are not the insurer on the case and it has not gone through the Controverted claims process yet or been established by the Board. Additionally, you may use Insurer Review option when the claim administrator you wish to assign it to is not an option using Update Claim Sender option.

- WCB has received Insurer Review submissions asking a PAR be moved to a different case. These requests should not be submitted as we are unable to move PARs from one WCB case to another.

THANK YOU

QUESTIONS?

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