Commonwealth of Pennsylvania

Department of Labor & Industry

Bureau of Workers' Compensation

EDI Error Code Description

December 2023

Document History

Version	Date	Status	Notes
1.0	10/29/2013	Initial Release	Initial version published
2.0	12/1/16	Draft	Comprehensive update due to Forms Solution. Now that process is automated, defining errors allows filers to more easily resolve rejections and update coding in filing system to prevent rejections going forward.
3.0	3/31/2017	Draft	Addition of new MTCs- SROI EP and SROI ER
3.0	6/1/2017	Final	Addition of new MTCs- SROI EP and SROI ER
4.0	12/11/2017	Final	Web Portal Batch Error
4.1	11/26/19	Final	Adding SROI RB Sequencing Rejection when claim is Suspended
4.2	11/29/23	Final	Clarifying language on "Transaction not requested by BWC" sequencing rejections

Table of Contents

1. Introduction

This addendum describes the detail description of the EDI errors that are being shared in the ACK files and/or WCAIS EDI Web portal application. This document provides an insight to errors as well as next steps to resolve these errors. This document is used in tandem with the PA EDI Element Table & the PA EDI Edit Matrix.

2. EDI Error Descriptions

The table below details the description of errors reported in the EDI ACK file and/or WCAIS EDI Web portal application and how to correct the error.

EDI Error Text	What it means	What to do	Notes
Code/ID Invalid, Not Statutorily Valid, Must be Valid Content, or Must be>=Date of Injury etc….	Filer has submitted either an MTC or DN (Data Element) isn't accepted in Pa -or- filer has submitted an incorrect or invalid character or amount of characters in the transaction. If the error is relating to a date, then the order is off (i.e. Date of Birth is after Date of Injury etc...).	Review the data the filer submitted in the field mentioned in the Error Element Name and correct to match MTCs and DNs accepted in Pa along with field characters/amounts of characters accepted per Value table.	Refer to the DN-Error Message table for additional information. SROI PD may not have Claim Type code "I". SROI IP/AP may not have Claim Type codes "M" or "B". 02s submitted while claim is in Medical Only or temporary (medical) status may not have Claim Type code "I" unless SROI IP has already been reported because benefit data is required to populate an NCP or NTCP.

Duplicate Batch Transaction	The Filer will receive this error when submitting a FROI 00 or FROI 04 where a claim already exists in WCAIS. Either EDI has already been submitted to create the claim and assign a claim status or there are multiple claims in WCAIS for this DOI and, without a JCN, WCAIS doesn't know which claim to which to match the transaction.	Review submitted transactions in filing system to verify that a FROI 00 or FROI 04 was already submitted (once one of these two types of transactions has been submitted no other FROI 00 or FROI 04 is acceptable). If the filer submitted an accepted FROI, move on to the next logical SROI transaction. If the filer has not submitted a FROI 00 or FROI 04, a question may be submitted through the Customer Service Center in WCAIS (Category= EDI Sub-category= Rejections) for us to research the claim and help the filer determine what caused the rejection and provide the filer with options on how to proceed.	
Mandatory Field Not Present	Filer will receive this message when the transaction is missing a mandatory field. The Error Element Name in the TR will provide the filer with the missing element.	Please refer to the Element table to determine if this field is required for the MTC that was submitted. If the filer has any questions, inquiries may be submitted through the Customer Service Center in WCAIS (Category= EDI Sub-category= Rejections)	Refer to the PA Element table for additional information on required fields. ==For example, beginning in June 2024, rejections for missing Claim Admin Claim Rep email address.==

Invalid Data Relationship, Match Data Value Not Consistent With Value Previously Reported, and No Match on Database	Claimant's name, DOI, SSN, DOB, Employer FEIN, Insurer FEIN, Claim Admin FEIN, JCN, or Claim Admin Postal Code either doesn't match a previously submitted transaction, doesn't match an existing profile, or doesn't match an existing claim.	Use the Error Element Name to identify which element is rejecting, re-verify the information the filer has submitted by checking with the claimant, the insured and/or the PCRB interface on the DLI website, or previous transactions submitted on this claim. Also refer to section 3 of this document for next steps.	Refer the DN-Error Message table in the Event table for additional information
Invalid Event Sequence	Filer has submitted a transaction outside Pa sequencing guidelines.	Check the claim in WCAIS or the last ACK received to determine the current claim status then use the Relaxed Rules document, Claim Status Reference Sheet, and the Event table for further sequencing rules. Also refer to section 4 of this document for next steps.	Filer should always consult the WCAIS claim status prior to submitting a transaction to be sure the transaction will accept. The claim status returned to the filer within the ACK upon acceptance of a transaction.

Refer to the PA Event table, Claim Status Reference Sheet, and Relaxed Rules document for additional information |

3. Invalid Data Relationship, Match Data Value Not Consistent With Value Previously Reported, and No Match on Database

Definitions:

Profile- Each party in WCAIS has a single profile which is associated to all claims on which that entity is an interested party (claimant, employer, insurer, TPA, etc…). Party information in EDI transactions is edited against the content of the profile in WCAIS. The system relies upon exact matches for the claimant's name, DOI, SSN, the Employer FEIN, the Insurer FEIN, and the Claim Administrator FEIN. Profiles are are created in WCAIS when:
   a. An insurer or TPA is registered in PA
   b. A new employer or claimant is used in an EDI transaction, a petition, or a Med-Fee.

Invalid Data Relationship- Data isn't in a valid format or the different data elements conflict with each other.

Match Data Not Consistent with Value Previously Reported- Claim is already on file and the previously accepted EDI transaction or a previous claim had different data provided.

No Match on Database- The data supplied doesn't match any profile or claim in WCAIS.

EDI Error Text	EDI Error Element Name	Steps to Take
Invalid Data Relationship, Match Data Not Consistent With Value Previously Reported, or No Match on Database	Employee ID Assigned By Jurisdiction	The Employee ID Assigned By Jurisdiction field is only used when a WC-ID has been issued by BWC because the claimant does not have or will not supply the claim administrator with an SSN. If the claim representative received this error, it is either because there is a typo or because an invalid number was supplied. Claim administrators should verify the data entered to ensure the number provided by BWC was correctly typed into the field. If the claim representative did not receive a number from BWC, a question may be submitted through the Customer Service Center (Category= WCAIS, Sub-category= Miscellaneous) in WCAIS to the Bureau's Helpline (the claimant's full legal name, address, and date of birth are required to create a profile).

	Employer FEIN	This error results when:
		1. The employer profile matching the FEIN is listed as inactive or out of business on the date of injury provided.
		To remedy the error, Claim Administrators should verify the correct FEIN and insurer information was supplied. Employer FEINs (and the correct carrier for the employer on the date of injury) may be researched on the Bureau's website at http://www.dli.pa.gov/Businesses/Compensation/WC/insurance/Pages/Workers-Compensation-Insurance-Search-Form.aspx.
		2. The Insurer FEIN belongs to a Self-Insured Employer and the FEIN in the Insurer FEIN field doesn't match the one in the Employer FEIN field.
		Ensure both the Insurer FEIN and Employer FEIN match before resubmitting.
		3. A Group Fund FEIN is used in the Insurer FEIN field and the profile associated to the Employer FEIN isn't listed as an active member of the Group Fund for that date of injury.
		Group Funds are responsible for ensuring all applications for new members are approved by the Bureau's Self-Insurance Division prior to submitting any transactions on behalf of the new employer. Transactions may only be submitted on behalf of inactive members if the employer was an active member on the date of injury.
	Insurer FEIN	This error occurs when
		1. The Insurer FEIN doesn't match that of an insurer licensed for Workers' Compensation in PA. Claim Administrators may verify insurers licensed in PA at the following hyperlink: http://www.dli.pa.gov/Businesses/Compensation/WC/insurance/Pages/Bureau-Code-Listings.aspx.
		If the insurer isn't licensed in PA and the employer is located outside PA then verification of an "All States Endorsement" must be supplied. Call (717)772-0621 for information on how to provide the "All States Endorsement" to BWC.
		2. Or when the Insurer FEIN and Claim Administrator FEIN were the same in a previous accepted transaction but the Insurer FEIN is changing in the latest transaction.
		Claim Administrators should update the Claim Administrator FEIN prior to updating the Insurer

		FEIN *or* should update both the Insurer and Claim Administrator FEINs simultaneously and then update the Claim Administrator FEIN if there are now two parties rather than one. 3. When the profile associated to the Insurer FEIN has been inactivated and is not a valid insurer on the date of injury. Claim Administrators should research the correct insurer for the employer on that date of injury at: http://www.dli.pa.gov/Businesses/Compensation/WC/insurance/Pages/Workers-Compensation-Insurance-Search-Form.aspx.

	Claim Administrator FEIN	This error occurs when
		   1. The Claim Administrator FEIN provided doesn't match an existing TPA (Third Party Administrator) registered in PA. Insurers must be registered in PA as a TPA to administrate claims on behalf of other insurers.
		The FEIN should be verified for typos. If no typo has occurred then either the correct TPA FEIN must be submitted or the Claim Administrator may contact BWC at (717)772-0621 to begin the registration process to become a TPA.
		   2. The Claim Administrator profile is inactive on the date of injury.
		Claim Administrators should research the correct insurer for the employer on that date of injury at: http://www.dli.pa.gov/Businesses/Compensation/WC/insurance/Pages/Workers-Compensation-Insurance-Search-Form.aspx. Insurers are responsible for ensuring their TPA is active and registered in PA.

	Date of Injury	This error occurs when
		   1. The date of injury supplied on a previously accepted transaction for this claim is different from the one supplied in the current transaction.
		A FROI 02 should be submitted to update the date of injury before any other transaction may be reported with the date of injury.
		   2. The date of injury isn't in a valid format.
		Valid formatting for date fields is: CCYYMMDD

	Employee SSN	This error occurs when: 1. The Social Security Number is in an invalid format. SSN must be 9 digits, must be all numeric and may not contain alpha characters or symbols, the numbers may not all be the same (example= 111-

		11-1111), may not begin with 9, 000, or 666, or have the middle group of two digits as 00 (xxx-00-xxxx) or the last group of four (xxx-xx-0000), or be 123-45-6789. If the Claim Administrator does not have a valid SSN, a question may be submitted through the Customer Service Center (Category= WCAIS, Sub-category= Miscellaneous) in WCAIS to the Bureau's Helpline (the claimant's full legal name, address, and date of birth are required to create a profile) to acquire a WC-ID placeholder number.
		   2. The SSN doesn't match the previously accepted transaction on this claim.
		A FROI 02 should be submitted to update the date of injury before any other transaction may be reported using the new SSN.
		   3. The SSN supplied on a FROI 00, AU, or 04 doesn't match an existing profile for the claimant.
		Claim Administrators should first verify the SSN with the claimant and then again verify it in their own system in case they had another claim for this claimant for a different date of injury with a conflicting SSN (if so, a FROI 02 must be submitted on the old claim prior to resubmitting the FROI for the new claim). If the FROI had the correct information, a question may be submitted through the Customer Service Center in WCAIS (Category= EDI & Sub-category= Rejections) for further troubleshooting by BWC EDI staff.

	Employee First Name	This error occurs when:
		   1. The name provided doesn't match an existing profile for the claimant.
		Claim Administrators should first verify the full legal first name with the claimant and then again verify it in their own system in case they had another claim for this claimant for a different date of injury with a conflicting first name reported. Claim Administrators should not use nicknames or first initials and instead should use the full legal name as it appears on the claimant's driver's license. If the FROI had the correct information, a question may be submitted through the Customer Service Center in WCAIS (Category= EDI & Sub-category= Rejections) for further troubleshooting by BWC EDI staff.
		   2. The name provided doesn't match the previously accepted transaction on this claim or the existing profile.

		A FROI 02 should be submitted to update the claimant's first name before any other transaction may be reported using the new first name. Note: A common error is transposition of the claimant's first and last name. Claim Administrators should be aware that if a claimant's name is submitted backwards on the FROI 00, two FROI 02 transactions are needed to correct the claimant's profile because only one match data element may be updated per 02.
	Employee Last Name	This error occurs when the name provided doesn't match the previously accepted transaction on this claim. This may be resolved via submission of a FROI 02 to update the claimant's last name before any other transaction may be reported using the new last name. Note: A common error is transposition of the claimant's first and last name. Claim Administrators should be aware that if a claimant's name is submitted backwards on the FROI 00, two FROI 02 transactions are needed to correct the claimant's profile because only one match data element may be updated per 02.

	Employee Date of Birth	This error occurs when:
		   1. The date of birth isn't in a valid format.
		Valid formatting for date fields is: CCYYMMDD
		   2. The date of birth is after the date of injury. Claim Administrators must verify the claimant's correct date of birth prior to resubmitting the transaction.
		   3. The date of birth supplied on a previously accepted transaction or the one in the profile is different from the one supplied in the current transaction.
		A FROI 02 should be submitted to update the date of birth before any other transaction may be reported with the date of birth.

	Jurisdiction Claim Number	This error occurs when: 1. A UR is submitted with a JCN and the other match data elements don't match the JCN provided. Claim Administrators must log into WCAIS to verify the information prior to resubmitting the UR transaction.

		2. Claims are combined and the Claim Administrator failed to update the JCN in their database after receiving the letter informing all interested parties of the correct JCN to use going forward. The Claim Administrator must correct the JCN listed in their system. No 02 transaction is necessary to report the updated JCN. 3. An invalid or inactive JCN is used. JCNs cannot be more than 7 digits. JCN must match an existing claim in WCAIS. Claim Administrators must log into WCAIS to verify the JCN prior to submitting a subsequent EDI transaction.

Additional notes:

- Only one match data element may be updated at a time on a FROI or SROI 02. Claim Administrators are responsible for ensuring only one match data element is updated per 02 transaction.

- An error on one of the fields in a claimant's profile (SSN, DOB, First or Last Name) should be reviewed as though the error is with all the fields. Claim Administrators should verify the claimant's name is in the correct order, there are no additional spaces or unnecessary characters or numbers, and that the SSN matches the claimant name provided. Edits are applied to the claimant profile as a whole so if the SSN is in WCAIS under a different claimant name or a different spelling of the claimant's name, the error may state the claimant's name is incorrect but adjusters should be aware to check the name, the SSN, *and* the DOB to ensure they have the correct combination of name, SSN, and DOB.

4. Sequencing rejections

The Claim Administrator should always consult the WCAIS claim status prior to submitting a transaction to be sure the transaction will accept. The WCAIS claim status is returned to the filer within the ACK (electronic acknowledgement) upon acceptance of an EDI transaction.

Error Message	Reason for current claim status	Common Transactions this error results from	Reason for error	Steps to correct
MTC not allowed when claim status is Closed	Either the claim is a legacy claim and was closed (both indemnity and medical are done) in the legacy system or the claim was closed by a SROI FN or FROI/SROI UR already	SROI IP	An adjuster should never file a SROI IP to re-open a closed claim.	Once a claim is closed, if an adjuster wishes to re-open the claim, a SROI RB should be submitted.
		SROI EP	An adjuster should never file a SROI EP to report the employer has resumed payments on a closed claim.	Once a claim is closed, if an adjuster wishes to report the employer has re-opened the claim, a SROI ER should be submitted.
		SROI 04	If a claim is closed in WCAIS, it would have previously had either indemnity or medical accepted so a full denial won't accept.	There is no applicable transaction to correct the claim status.

		SROI Sx	The Sx should be submitted before the FN. Sometimes an adjuster will have attempted to submit a SROI RB to re-open the claim but may have left the Agreement to Compensate code blank which would leave the claim closed.	If the claim is already closed then a suspension isn't necessary. If an RB was submitted but was missing the Agreement to Compensate code, the adjuster may either leave the claim closed or may submit another RB with the Agreement to Compensate code and then the Sx.
		SROI FN	A SROI FN will not accept on a claim that has already been closed.	There is no applicable transaction to correct the claim status.
MTC not allowed when claim status is Suspended	Either the claim is a legacy claim and was suspended (both indemnity and medical were liable but indemnity was suspended and medical remains) in the legacy system or the claim was suspended by a SROI Sx already	SROI IP	A SROI IP may not be used to reopen a claim.	Once a claim is suspended, a SROI RB should be submitted to reopen it.

		SROI EP	An adjuster should never file a SROI EP to report the employer has resumed payments on a closed claim.	Once a claim is suspended, if an adjuster wishes to report the employer has re-opened the claim, a SROI ER should be submitted.
		SROI 04	If a claim is Suspended in WCAIS, it would have previously had indemnity accepted so a full denial will not accept.	There is no applicable transaction to correct the claim status.
		SROI RB	A rejection will occur on a previously Compensable claim if the adjuster is using Temporary or medical coding because you can't go back once you've accepted indemnity	The SROI RB will need to have benefits, an AOD (dependent on the form it matches), Claim Type code "I" and Agreement to Compensate code of "L" in order for the form to accept.
		SROI Sx	A SROI Sx will not accept on a claim that is already in Suspended status.	There is no applicable transaction to correct the claim status.

MTC not allowed when claim status is Compensable	Either the claim is a legacy claim and was compensable (indemnity and medical are both liable) in the legacy system or the claim was made compensable when a SROI IP/AP "I" "L" was received, a SROI 02 "I" "L" (after Temporary), or when a SROI IP/AP "I" "W" or SROI 02 "I" "W" converted	SROI IP	Only one SROI IP will accept per claim.	Report the payment on a SROI PY with the Agreement to Compensate code "L".
		SROI EP	Only one SROI EP will accept per claim	Report the payment on a SROI PY with the Agreement to Compensate code "L" and the Employer Paid Salary in Lieu of Comp indicator (DN0273) set to "Yes".

		SROI ER	Indemnity that has been ongoing without a break cannot be reestablished	There is no applicable transaction to correct the claim status.
		SROI 04	Once indemnity and medical have been accepted, a full denial will not accept.	There is no applicable transaction to correct the claim status.
		SROI FN	Claim may not be closed while in compensable status.	Claim must be suspended with a SROI Sx before the SROI FN will accept.
		SROI PD	Once indemnity and medical have been accepted, a partial denial will not accept.	There is no applicable transaction to correct the claim status.
		SROI PY with Agreement to Compensate code "W"	Once indemnity and medical have been accepted, a claim may not go back to temporary.	There is no applicable transaction to correct the claim status.
		SROI RB	Indemnity that has been ongoing without a break cannot be reestablished	There is no applicable transaction to correct the claim status.

MTC not allowed when claim status is Temporary	The claim was made temporary when a SROI IP, SROI PD, or SROI PY was received with the Agreement to Compensate code "W".	SROI FN	While on temporary the adjuster may amend the wage information, switch back and forth between medical and indemnity, and accept or stop and deny the claim but filer may not suspend or close a claim that hasn't yet been accepted.	The adjuster may either accept the claim with an NCP/Agreement and a SROI IP "I" "L" or SROI PY "L" "M" or the adjuster may deny the claim with a Stopping Notice + NCD and SROI 04.
		<mark>SROI ER</mark>	<mark>Indemnity that has been ongoing without a break cannot be reestablished</mark>	<mark>There is no applicable transaction to correct the claim status.</mark>
		SROI Sx	While on temporary the adjuster may amend the wage information, switch back and forth between medical and indemnity, and accept or stop and deny the claim but filer may not suspend or close a claim that hasn't yet been accepted.	The adjuster may either accept the claim with an NCP/Agreement and a SROI IP "I" "L" or SROI PY "L" "M" or the adjuster may deny the claim with a Stopping Notice + NCD and SROI 04.

MTC not allowed when claim status is Medical Only	Either the claim is a legacy claim and was medical only (only medical is liable) in the legacy system or the claim was made medical only when a SROI PY "M" "L" or SROI 02 "M" "L" (after a Temporary) was received or when a SROI PY "M" "W" or SROI 02 "M" "W" converted	SROI Sx	Suspension is only for suspended indemnity so if indemnity wasn't accepted, it can't be suspended.	If no medical bills remain outstanding, the adjuster may submit a SROI FN to close the claim.
		SROI PY with Agreement to Compensate code "W"	Once medical has been accepted, it cannot be made temporary medical again.	There is no applicable transaction to correct the claim status.
		SROI 04	Once a medical only claim has been accepted, the claim may not be fully denied.	There is no applicable transaction to correct the claim status.
		SROI PD	Once a claim has already been updated to Medical Only status, filer cannot issue a second PD transaction	A SROI PY "L" "M" may be submitted with the payment information.

MTC not allowed when Claim Status is Comp Denied	A FROI 04, SROI 04, or a FROI UR or SROI UR with Denial Reason Codes was accepted on the claim.	FROI or SROI 04	Once a claim has already been updated to Comp Denied status, filer cannot issue a second 04 transaction	Updates to an existing NCD must be submitted on a FROI 02 or a SROI 02.
Invalid Event Sequence-Transaction not requested by the Bureau	Either a UR was already received or the claim is not a legacy claim.	FROI or SROI UR	The UR will only accept on legacy claims (claims filed on or before 8/17/13 or claims filed between 9/9/13 and 9/16/16 where an LIBC 495, 496, 501, or 502 was submitted but no SROI was filed). Only one UR is acceptable per claim.	==Adjuster should review the claim to determine claim status and submit the next applicable EDI, as per business needs.==
Invalid Event Sequence-Transaction not requested by the Bureau	Either claim is in Duplicate status or the SROI UR flag is applied	Any transaction other than SROI or FROI UR	If a UR is expected, only a UR can accept.	Adjuster should either submit the SROI UR or should reach out to BWC to remove the UR flag, if applicable.

5. **Web Portal Batch Error**

If you are using the WCAIS EDI Web Portal to submit an EDI transaction and you receive the following error, you will need to go back and resubmit the transaction again:

"Your transaction is unable to be processed due to a technical issue. Please resubmit your transaction."