

Common Error Message Dictionary and Instructions

The Error Message Dictionary provides definitions of IAIABC standard error messages for all Transaction Types/Products. Jurisdictions should use this dictionary, in conjunction with the IAIABC Edit Matrix for the Release/Version of the product being used, when reviewing data elements to determine what edit(s) should be applied. Error message descriptions may have changed from a previous product; however, the error message number and its use have remained constant.

ERROR MESSAGE RULES:

- Only the error messages listed on the Edit Matrix for a specific Release/Version may be used, as all error messages are **not** applicable to all products.
- Jurisdictions should use these definitions when determining edits to be performed in their systems.
- Trading partners will be using the definitions for the error message numbers below to interpret errors received via the Acknowledgement transaction.
- Adherence to these definitions will avoid reconciliation problems and expedite response(s) to error(s) received.
- Messages identified as “Release 1.0 Only” are obsolete and have been replaced. Replacement error message codes are indicated, when applicable. It is recommended that new jurisdictions implementing Release 1.0 not utilize Error Messages that are identified as “Release 1.0 Only”. It is also recommended that Jurisdictions that are currently using these codes should map their edits to the new error messages indicated.
- Messages identified as “Claims Release 3.1 Only” apply only to Claims Release 3.1 only. The data being compared is only available in Claims Release 3.1.

001 – Mandatory field not present

A data element identified as mandatory in the Element Requirement Table is missing. The data element must be present and be a valid format or the transaction will be rejected.

002 – Transaction Set ID Invalid (Claims Release 1.0 Only)

The code indicating the transaction being sent was not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

003 – MTC Invalid for 148 (Claims Release 1.0 Only)

The code that is sent was not valid for the First Report of Injury (FROI) record layout. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

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004 – MTC Invalid for A49 (Claims Release 1.0 Only)

The code that is sent was not valid for the Subsequent Report of Injury (SROI) record layout. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

005 – State Code Invalid (Claims Release 1.0 Only)

The state code (DN0013 – Claim Administrator State, DN0022 – Employer State, DN0049 Employee State) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

006 – NCCI Nature Code Invalid (Claims Release 1.0 Only)

The Nature of Injury Code (DN0035) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

007 – NCCI Part of Body Code Invalid (Claims Release 1.0 Only)

The Part of Body Injured Code (DN0036) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

008 – NCCI Cause of Injury Code Invalid (Claims Release 1.0 Only)

The Cause of Injury Code (DN0037) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

009 – Gender Code Invalid (Claims Release 1.0 Only)

The Gender Code (DN0053) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

010 – Marital Status Code Invalid (Claims Release 1.0 Only)

The Marital Status Code (DN0054) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

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011 – Wage Period Code Invalid (Claims Release 1.0 Only)

The Wage Period (DN0063) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

012 – Indicator Invalid (Claims Release 1.0 Only)

The value sent in an indicator field (DN0024 – Self Insured Indicator, DN0034 – Employer Premises Indicator, DN0066 – Full Wages Paid for Date of Injury Indicator, DN0067 – Salary Continued Indicator) is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

013 – Employment Status Code Invalid (Claims Release 1.0 Only)

The Employment Status Code (DN0058) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

014 – Class Code (NCCI or State Spec) Invalid (Claims Release 1.0 Only)

The Class Code (DN0059) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

015 – Industry Code (NCCI or State Spec) Invalid (Claims Release 1.0 Only)

The Industry Code (DN0025) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

016 – Initial Treatment Code Invalid (Claims Release 1.0 Only)

The Initial Treatment Code (DN0039) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

017 – Claim Status Code Invalid (Claims Release 1.0 Only)

The Claim Status (DN0073) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

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018 – Number of Days Worked must be 0-7

If data is present, all digits must be 0-7 (numeric).

Claims Example: DN0064 – Number of Days Worked Per Week must be 0-7

019 – Days must be 0-6

If data is present, all digits must be 0-6 (numeric); else all positions must be “blank” (alphanumeric).

Claims Example: DN0091 – Benefit Type Claim Days must be 0-6

020 – Return to Work Qualifier Code Invalid (Claims Release 1.0 Only)

The Return to Work Qualifier (DN0071) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

021 – Claim Type Code Invalid (Claims Release 1.0 Only)

The Claim Type (DN0074) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

022 – Agreement to Compensate Code Invalid (Claims Release 1.0 Only)

The Agreement to Compensation Code (DN0075) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

023 – Late Reason Code Invalid (Claims Release 1.0 Only)

The Late Reason Code (DN0077) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

024 – Payment/Adjustment Code Invalid (Claims Release 1.0 Only)

The Payment/Adjustment Code (DN0085) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

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025 – Benefit/Adjustment Code Invalid (Claims Release 1.0 Only)

The Benefit Adjustment Code (DN0092) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

026 – PTD/RE/Recovery Code Invalid (Claims Release 1.0 Only)

The Paid To Date/Reduced Earnings/Recoveries Code (DN0095) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

027 – Dep/Payee Relationship Code Invalid (Claims Release 1.0 Only)

The Dependent/Payee Relationship (DN0097) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

028 – All digits must be 0 – 9

If data is present, all digits must be 0-9 (numeric); else all positions must be “blank” (alphanumeric).

Claims Example: DN0006 – Insurer FEIN must be 0-9

029 – Must be a valid date (CCYYMMDD)

A date is invalid. Format must be in the exact order of CCYYMMDD where CC = Century, YY = Year, MM = Month, and DD = Day. YYYY is also accepted for CCYY, e.g. YYYY=CCYY.

Valid values:

Century = 19 or 20
Year = 00 - 99
Month = 01 - 12
Day = 01 - 31 depending on month

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030 – Must be A-Z, 0-9, or spaces

A data element contains special characters that do not meet the criteria of A-Z, 0-9, or spaces.

031 – Must be a valid time

A time is invalid. Format must be HHMM or HHMMSS, based on data element format, where HH = Hours, MM = Minutes, and SS = Seconds. This field must contain a valid military time in 00-24 hour format (for example: 1:00:00 PM is 1300 or 130000) or all spaces. All zeros are valid and equivalent to 2400 or 240000 (midnight).

032 – Must be valid zip code (Claims Release 1.0 Only)

A zip code value is invalid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

033 – Must be <= Date of Injury

The date is either > (greater than) or = (equal to) DN0031 – Date of Injury. A jurisdiction may use this message if either condition (> or =) is true.

034 – Must be >= Date of Injury

The date is either < (less than) or = (equal to) DN0031 – Date of Injury. A jurisdiction may use this message if either condition (< or =) is true.

035 – Must be >= Initial Date Disability Began

The date is either < (less than) or = (equal to) DN0056 – Initial Date Disability Began. A jurisdiction may use this message if either condition (< or =) is true.

036 – Must be <= Employee Date of Death

The date is either > (greater than) or = (equal to) DN0057 – Employee Date of Death. A jurisdiction may use this message if either condition (> or =) is true.

037 – Must be <= Maintenance Type Code Date

The date is either > (greater than) or = (equal to) DN0003 Maintenance Type Code Date. A Jurisdiction may use this message if either condition (> or =) is true.

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038 – Must be >= Start Date

The End or Through Date is either < (less than) or = (equal to) one of the following:

- DN0088 – Benefit Period Start Date
- DN0094 – Benefit Adjustment Start Date
- DN0127 – Benefit Credit Start Date
- DN0131 – Benefit Redistribution Start Date
- DN0219 – Payment Covers Period Start Date

A jurisdiction may use this message if either condition (< or =) is true.

039 – No match on database

A data element value (excluding Match Data elements) is sent that does not match a value in the jurisdiction's database tables. Error message 117 is applied to Match Data elements (i.e. SSN, Date of Injury).

040 – All digits cannot be the same

A data element is sent that contains all the same numeric characters (for example, 999999999).

041 – Must be <= current date

The date is either > (greater than) or = (equal to) the current date. A jurisdiction may use this message if either condition (> or =) is true.

042 – Not statutorily valid

A data element value or transaction is sent that does not meet the jurisdiction's statutes or EDI filing requirements. This error message should be used when the transaction contains a code that is valid for the applicable data element, but is not one that is accepted by the jurisdiction.

Claims Examples:

- DN0002 – Maintenance Type Code is not accepted by the receiving jurisdiction or filing of medical-only claims in a jurisdiction when the event table requires lost-time claims only.

POC Example:

Transaction indicates Employee Leasing, which does not need to be reported electronically to jurisdiction per statute/rule.

Edit Matrix Note: Jurisdictions should indicate the specific conditions for the generation of these error messages in the *Population Restriction table* (tab in Edit Matrix excel spreadsheet). See Edit Matrix instructions for further details in populating this table. *On the DN Error Table, the jurisdiction should add a 'P' in the Population Restrictions Indicator column and also add an 'L' to the applicable DN(s)'.*

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043 – Receiver ID Invalid (Claims Release 1.0 Only)

The Receiver ID (DN0099) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

044 – Value is > required by jurisdiction

A data element value is sent that is greater than that allowed by jurisdiction.

Claims Example: DN0134 – Calculated Weekly Compensation Rate is greater than statutorily allowed.

Edit Matrix Note: Jurisdictions should indicate the specific conditions for the generation of these error messages in the *Population Restriction table* (tab in Edit Matrix excel spreadsheet). See Edit Matrix instructions for further details in populating this table. *On the DN Error Table, the jurisdiction should add a 'P' in the Population Restrictions Indicator column and also add an 'L' to the applicable DN(s).*

045 – Value is < required by jurisdiction

A data element value is sent that is less than that allowed by jurisdiction.

Claims Examples:

- DN0086 – Benefit Type Amount Paid is less than statutorily required.
- *Claims Example:* A jurisdiction editing a flat file R22 transaction may require a value of at least 1 in DN0288 – Number of Benefits when MTC IP is transmitted.
- The edit may be applied to the *Number of Permanent Impairments* when the Benefit Type Code is 030 (Permanent Impairment and a Permanent Impairment Segment is expected).

Edit Matrix Note: Jurisdictions should indicate the specific conditions for the generation of these error messages in the *Population Restriction table* (tab in Edit Matrix Excel spreadsheet). See Edit Matrix instructions for further details in populating this table. *On the DN Error Table, the jurisdiction should add a 'P' in the Population Restrictions Indicator column and also add an 'L' to the applicable DN(s).*

046 – Interchange Version ID Invalid (Claims Release 1.0 Only)

The Interchange Version ID (DN0105) that was sent is not valid. This message has been replaced by error message 058 - Code/ID invalid. Validity of the value sent can be derived when message 058 is paired with the DN in error.

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047 – Reinstated but not suspended (Claims Release 1.0 Only)

Benefits were reinstated, but no prior suspension was received/accepted by the jurisdiction. This message has been replaced by error message 063 – Invalid event sequence.

048 – Duplicate First Report (148) (Claims Release 1.0 Only)

One or more FROI transactions from the same sender, in the same or different batch, communicate an event that was previously accepted by the jurisdiction. This message has been replaced by error message 057 – Duplicate Batch/Transaction.

049 – Duplicate Initial Payment (A49) (Claims Release 1.0 Only)

A SROI initial payment (IP) transaction from the same sender, in the same or different batch, was previously accepted by the jurisdiction. This message has been replaced by error message 057 – Duplicate Batch/Transaction.

050 – No matching Subsequent Report (A49)

A First Report of Injury (FROI) is sent and no corresponding Subsequent Report of Injury (SROI) is transmitted at the same time or an MTC 02 Change SROI has been received and no prior SROI has been accepted (with or without errors).

Example: Some jurisdictions require the corresponding SROI (EX: MTC IP – Initial Payment, EP - Employer Paid, CD - Compensable Death, VE - Volunteer) to be filed when the FROI (MTC 00 - Original) is transmitted.

051 – Reduced earning prior to initial payment (Claims Release 1.0 Only)

A reduced earnings effective date is prior to the date of initial payment. This message has been replaced by error message 064 – Invalid data/sequence relationship. Each segment of the acknowledgement transaction (AKC) includes an error message text field to allow further clarifications of errors generated.

052 – Suspension prior to initial payment (Claims Release 1.0 Only)

A suspension effective date is prior to the date of initial payment. This message has been replaced by error message 064 – Invalid data/sequence relationship. Each segment of the acknowledgement transaction (AKC) includes an error message text field to allow further clarifications of errors generated.

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053 - No matching First Report of Injury (148)

A jurisdiction receives a report and no establishing First Report of Injury (FROI) has been accepted (with or without errors).

Example: Some jurisdictions require the original FROI (MTC 00 - Original) to be filed when certain SROI transactions are transmitted (EX: MTC IP - Initial Payment, EP - Employer Paid, CD - Compensable Death, VE - Volunteer).

Example: A FROI (MTC AQ Acquired Claim) is filed by the acquiring claim administrator and the claim does not exist on the jurisdictions database necessitating the filing of a FROI (MTC AU Acquired/Unallocated).

054 – Must be valid occurrence for segment

The number of variable segments included in the transaction is greater than the Variable Segment Counter or the segment does not meet the length requirements defined in the standard.

Claims Example: The Number of Permanent Impairments indicated a value of 2, but the transaction included three occurrences of the Permanent Impairments variable segment.

Claims Example: The Variable Segment Counter indicates one accident description that should be 50 bytes based on the standard record layout. When the segment has less than the defined length of the field this error could be used on the applicable segment counter field.

055 – Must be < Employee Date of Hire

A date is greater than DN0061 – Employee Date of Hire.

Claims Example: DN0052 – Employee Date of Birth is greater than or equal to DN0061 – Employee Date of Hire.

056 – Detail record count not = # records recv'd (Claims Release 1.0 only)

The number of detail records included in the batch is inconsistent with the Detail Record Count in the Trailer record. This message has been replaced by error message 066 - Invalid record/transaction count.

057 – Duplicate Batch/Transaction

Duplicate Batch: One or more batches in the same or different transmission contain the same key header information (Sender ID, Date Transmission Sent, Time Transmission Sent, Interchange Version ID) that was previously accepted by the jurisdiction.

Duplicate Transaction: One or more transactions from the same sender, in the same or different batch, communicate an event that was previously accepted by the jurisdiction.

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058 – Code/ID Invalid

The code that is sent is not included in the adopted standard for the IAIABC EDI product.

059 – Non-match data value not consistent with value previously reported

A data element does not match information previously reported

Claims Note: Excludes elements listed in the Match Data Rules.

POC Example: Legal Status value sent is not the same on the cancellation as reported on the last transaction sent.

060 – Previous paper documentation not received

A transaction is sent without required paper documentation.

Edit Matrix Note: Jurisdictions should indicate the specific conditions for the generation of these error messages in the *Population Restriction table* (tab in Edit Matrix excel spreadsheet). See Edit Matrix instructions for further details in populating this table. *On the DN Error Table, the jurisdiction should add a 'P' in the Population Restrictions Indicator column and also add an 'L' to the applicable DN(s).*

Claims Example: Death Dependent Jurisdiction Form not received by a Jurisdiction prior to claim administrator submitting Fatal Benefits payments.

061 – Event Table criteria not met

The triggers for the event have not been met.

Claims Example: medical payments reported are less than value specified by jurisdiction in their Event Table.

POC Example: Used to identify carrier having written a policy after their license has been suspended/revoked

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062 – Required segment not present

A variable segment is missing. The Element Error Number in the Acknowledgment Record should point to the data element number that determines a variable segment is required.

Claims Example: A jurisdiction may require a benefit segment with benefit type code 240 (salary continued by employer) on a MTC EP (employer paid) transaction. In this example, Number of Benefits DN0288 – is the data element that determines that the Benefits variable segment is needed.

Claims Example: The Number of Benefits indicated a value of 3, but the transaction included two occurrences of the *Benefits* variable segment.

063 – Invalid event sequence

A Claim Event (MTC) or POC Event (Transaction Set Type Code) is submitted out of sequence.

064 – Invalid data relationship

An improper relationship exists between the current data and other data sent in the same or previous report.

Claims Example: The Claim Administrator Claim Number (DN0015) on the companion record (Transaction Set ID R21 or R22) does not match the Claim Administrator Claim Number (DN0015) on the base transaction (Transaction Set ID 148 or A49).

Claims Example: An Employment Status Code (DN0058) value of “1” (full-time “regular employee”) is not valid on a MTC Code VE (volunteer) transaction.

Claims Example: A “salary continued in lieu of compensation indicator” value of “Y” is not valid when reporting Claim Administrator paid benefits.

Claims Example: Benefit Type Claim Weeks or Benefit Type Claim Days cannot both be zero if Start and End dates reflect a period of time greater than or equal to one day.

- DN0090 Benefit Type Claim Weeks: Must be greater than 0 if DN0091 Benefit Type Claim Days is = 0 and DN0085 (Benefit Type Code) = 010, 020, 030, 040, 050, 070 or 410 (Optional Error Text: Must be greater than zero)
- DN0091 Benefit Type Claim Days: Must be greater than 0 if DN0090 Benefit Type Claim Weeks is = 0 and DN0085 (Benefit Type Code) = 010, 020, 030, 040, 050, 070 or 410 (Optional Error Text: Must be greater than zero)

Claims Example: DN0066 Full Wages Paid for Date of Injury Indicator. The record reflected that the employer paid wages for the DOI but the date disability began was reported the same as DOI.

Claims Example: Accident Site Location Narrative (DN0119) may be required if Accident Site Postal Code (DN0033) is not present or vice versa. This error message would be applied to both fields. Jurisdictions should indicate ‘P’ in the Population Restriction Indicator on the Edit Matrix-DN-Error Message Table and define that the population restriction for each of these elements must be present if the other is not.

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Claims Example: A Lump Sum Payment/Settlement Code (DN0293) cannot be “changed” on an 02 Change transaction unless a PY transaction was previously accepted by the jurisdiction.

Claims Release 3.1 example: Gross Weekly Amount Effective Date (DN0175) is in the Benefits segment. DN0288 (Number of Benefits) should be reported in DN0412 Change Data Element/Segment Number when any data within the segment is being changed. Specific DNs within the segment should not be reported in the Change Data Elements Segment per 02 Change Processing Rules in Section 4 of the Implementation guide. Refer to FROI and SROI record layouts in Section 2 of the implementation guide to determine which DNs reside within a variable segment.

POC Example: If an error is found on any record in paired transactions, the whole paired transaction grouping is rejected.

POC Example: Employee Leasing Policy Identification Code received on a policy transaction must be a jurisdiction approved value for the Business Market Value reported for that policy. The valid relationship crosswalk between the Employee Leasing Policy Identification Code and the Business Market Value Code will vary by Jurisdiction

065 – Corresponding report/data not found

Data contained within a report requires additional information to be reported (a report or data) and it is not present.

Claims Example: If Maintenance Type Code is AB (Add Concurrent Benefit Type), P7 (Partial Suspension, Benefits Exhausted) or CB (Change in Benefit Type), a minimum of 2 *Event* Benefit segments should be present.

POC Example: Insured record (PC1), DN328 Number of Employers does not match the number of Employer Records (PC2) sent.

066 – Invalid record/transaction count

The record or transaction count is not valid for the number of detail records required at the record level or in the batch.

Claims Example: The value sent in DN0106 – Detail Record Count or DN0191 – Transaction Count does not equal the actual number of records/transactions received or is equal to 0.

POC Examples:

- Invalid submission criteria: When a transaction requires that a specific number records be sent and the Number of Employers sent does not meet the requirements, e.g. Cancelled by Insured transaction requires no Employer Records and Employer Records are sent.
- The value sent in DN0106 – Detail Record Count does not equal the actual number of records/transactions received or is equal to 0.

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067 – Must be >= Policy Effective Date

The date is either < (less than) or = (equal to) DN0029 – Policy Effective Date. A jurisdiction may use this message if either condition (< or =) is true.

068 – Must be <= Policy Expiration Date

The date is either > (greater than) or = (equal to) DN0030 – Policy Expiration Date. A jurisdiction may use this message if either condition (> or =) is true.

100 – No leading/embedded spaces

A data element value is sent with leading or embedded spaces. Per the definition of Alphanumeric data elements in the Systems Rules, A/N fields are always left justified, the first position must always be greater than space.

For example,

- Policy Number (DN0028) does not allow embedded or leading spaces (per WCIO Standards).
- Claim Administrator Claim Number (DN0015) does not allow leading spaces, but embedded spaces are allowed.

101 – MTC not approved for production

Trading Partner not authorized to send transaction.

Claims Example: Trading partner not authorized to send DN0002 – Maintenance Type Code value. For example, a trading partner may be authorized to file production First Report of Injury MTC's, but has not been approved to send production Subsequent Report MTC's.

102 - Must be <= Initial Date Disability Began

The date is either > (greater than) or = (equal to) DN0056 – Initial Date Disability Began. A jurisdiction may use this message if either condition (> or =) is true.

Claims Example: DN0031 – Date of Injury – must be <= Initial Date Disability Began.

103 - Same code received in multiple variable segments

Multiple occurrences of the same variable segment type contain duplicate code values.

Claims Example: Two (2) benefit segments contain benefit type code 050 (TT).

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104 – Must be >= Current Date Disability Began

The date is either < (less than) or = (equal to) DN0144 – Current Date Disability Began. A jurisdiction may use this message if either condition (< or =) is true.

Claims Example: Gross Weekly Amount Effective Date (DN0175) should not be prior to the Current Date Disability Began.

105 – Must be <= Current Date Disability Began

The date is either > (greater than) or = (equal to) DN0144 – Current Date Disability Began. A jurisdiction may use this message if either condition (> or =) is true.

Claims Example: The Initial Date Last Day Worked should not be after the Current Date Disability Began (DN0065).

106 – Invalid batch structure

A batch is improperly formatted. A batch must contain a header record, one or more detail records and a trailer record. Detail record requirements must meet the requirements of the IAIABC EDI product. Any other sequence of records within the batch would be considered invalid structure.

Claims Release 3: each FROI transaction should have a companion record (Transaction Set ID = R21) and each SROI transaction should have a companion record (Transaction Set ID = R22). Each batch should be edited for correct structure. Correct structure would be determined by verifying that each 148 transaction is followed by its companion R21 record, and each A49 transaction is followed by its companion R22 record. Any other sequence of detail records within the batch would be considered invalid structure.

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107 – Variable segment counter > maximum value allowed

A variable segment counter contains a value greater than the maximum allowed (see Release 3 Record Layouts for maximum values).

Claims Example: the maximum number of Benefit segments allowed on the R22 transactions is 10. If the Number of Benefits (DN0288) contains 15 this error message would be used.

108 – Expected field not present

The data element is expected on the transaction, yet the transaction will be accepted with errors should it fail the requirement edit.

Claims Example: Jurisdictions could choose to accept a transaction without a required Date of Birth with the expectation that the sender would forward the information in response to the TE acknowledgment.

109 – Must be >= Employee Date of Hire

The date is either < (less than) or = (equal to) DN0061 Employee Date of Hire. A jurisdiction may use this message if either condition (< or =) is true.

Claims Example: DN0031 – Date of Injury is less than or equal to DN0061 – Employee Date of Hire.

110 – Date Must be >= Jurisdiction Implementation Date

The date is either < (less than) or = (equal to) Jurisdiction Implementation Date. A jurisdiction may use this message if either condition (< or =) is true.

Claims Example: DN0031 – Date of Injury is less than Jurisdiction's Implementation date for the MTC.

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111 – Must be valid content

A data element contains value(s) that are not accepted by the jurisdiction.

Edit Matrix Note: Jurisdictions should indicate the specific conditions for the generation of these error messages in the *Population Restriction table* (tab in Edit Matrix excel spreadsheet). See Edit Matrix instructions for further details in populating this table. *On the DN Error Table, the jurisdiction should add a 'P' in the Population Restrictions Indicator column and also add an 'L' to the applicable DN(s).*

Claims	Example
Amount fields	Value must be greater than zero
Employee SSN (DN0042)	Must not equal "123456789"
Name, Address Line 1& 2, City, Descriptions & Narratives Fields	Must not consist solely of any the following non-case sensitive strings: "unk", "unknown", "dk", "don't know", "na", "n/a", etc
Narrative DN's: Edit for XML: Nonprintable characters: & and " or CRLF/CR should not be included in narrative text.	Must not contain nonprintable characters including XML escape sequences (E.g. & and ") or CRLF/CR
Permanent Impairment Percentage (DN0084)	Value must be less than or equal to 100%
POC	Example
Name, Address Line 1& 2, City, Descriptions & Narratives Fields	Must not consist solely of any of the following non-case sensitive strings: "unk", "unknown", "dk", "don't know", "na", "n/a", d.b.a, a.k.a, no physical location, etc
FEIN Fields	Must not equal "123456789" Must not equal "987654321"

112 – Must be >= Initial Date Last Day Worked

A date is less than DN0065 - Initial Date Last Day Worked.

The date is either < (less than) or = (equal to) DN0065 - Initial Date Last Day Worked. A jurisdiction may use this message if either condition (< or =) is true.

Claims Example: DN0056 – Initial Date Disability Began is less than DN0065 - Initial Date Last Day Worked

113 – Must be >= Initial Return to Work Date

The date is either < (less than) or = (equal to) DN0068 - Initial Return to Work Date. A jurisdiction may use this message if either condition (< or =) is true.

Claims Example: DN0072 – Current Return to Work Date is less than DN0068 - Initial Return to Work Date

Common Error Message Dictionary and Instructions

114 – Must be >= Current Date Last Day Worked

The date is either < (less than) or = (equal to) DN0145 - Current Last Day Worked. A jurisdiction may use this message if either condition (< or =) is true.

Claims Example: DN0072 – Current Return to Work Date is less than DN0145 – Current Date Last Day Worked

115 – Must be <= Transaction Set Type Effective Date

A date is greater than the Transaction Set Type Effective Date.

The date is either > (greater than) or = (equal to) DN0304 Transaction Set Type Effective Date. A Jurisdiction may use this message if either condition (> or =) is true.

116 – Transaction not approved for production

Trading Partner not authorized to send transaction.

POC Example: Trading partner not authorized to send DN334 Transaction Set Type Code. For example (POC), a trading partner may be authorized to send production New Business Transactions (10) but has not been approved to send production Binder (05) transactions.

117 – Match Data value not consistent with value previously reported

A primary or secondary data element used under Match Data Rules does not match information previously reported.

118 – Trading Partner not approved to submit data for Insurer/Claim Admin

The sender is not authorized by the jurisdiction to submit EDI reports for the insurer/claim administrator indicated in the transaction.

119 – All digits must be 0 – 9 or decimal

If data is present, all digits must be 0-9 (numeric) and a decimal is allowed; else all positions must be “blank” (alphanumeric).

Medical Example: To allow 0-9 and a decimal to be reported if applicable in DN's such as DN0516 Total Amount Paid Per Bill.

Common Error Message Dictionary and Instructions

120 – No embedded spaces

A data element value is sent with embedded spaces.

Claims and POC Example:

- *Policy Number Identifier (DN0028) does not allow embedded spaces (per WCIO Standard),*

121 – No leading spaces

A data element value is sent with leading spaces. Per the definition of alphanumeric data elements in the Systems Rules, A/N fields are always left justified, the first position must always be greater than space.

Claims example:

Claim Administrator Claim Number (DN0015) does not allow leading spaces, but embedded spaces are allowed.

Exception: Narrative segments imply continuation of text; leading spaces are allowed on 2nd or subsequent variable narrative segments when the previous narrative segment ends with a character other than space.

Narrative:

DN	Variable Segment Counters	Value	Notes:
0274	Number of Accident/Injury Description Narratives	02	2 occurrences
	Variable Segments	Accident/Injury Description Narratives	
0038	Accident/Injury Description Narrative	MR. SMITH WAS STEPPING OFF THE ROOF, MISSED HIS	
0038	Accident/Injury Description Narrative	FOOTING, FELL FROM LADDER.	<i>This occ presents a leading space. Space followed by FOOTING, FELL FROM LADDER.</i>

122 – Must be >= Reduced Earnings Week Start Date (Claims Release 3.1 Only)

The date is < (less than) DN0414 Reduced Earnings Week Start Date. A jurisdiction may use this message if condition (<) is true.

Claims Example:

- *DN0415 Reduced Earnings Week End Date is less than DN0414 Reduced Earnings Week Start Date.*

Common Error Message Dictionary and Instructions

123 – Invalid Change Reason Code (Claims Release 3.1 Only)

For DN0412 Change Data Element/Segment Number, Change Reason Code is not allowed per the Element Requirement Table Value *for MTC 02 (Change)*.

Claims Example:

- For MTC 02 (Change) DN0413 Change Reason Code = D (Delete) is Restricted for DN0006 Insurer FEIN. Per the Element Requirement Table Instructions: Restricted indicates that the Change Reason Code is not applicable to the Data Element - does not apply to the Change Reason Code based on 02 Change Processing Rules
- DN0053 Employee Gender Code has a Reportable Change Code under U (Update) = Y and under R (Remove) = N. If data is sent such as DN0412 Change Data Element/Segment Number = 0053 and DN0413 Change Reason Code = R then error will be returned as a MTC 02 is not allowed. If data is sent such as DN0412 Change Data Element/Segment Number = 0053 and DN0413 Change Reason Code = U then no error will be returned as a MTC 02 is allowed.
- If Reportable Change Code under the A (Add), U (Update), R (Remove) or D (Delete) = K or KG then SROI MTC 02 Change is not allowed.
- If Reportable Change Code under the A (Add), U (Update), R (Remove) or D (Delete) = J or JG and any SROI MTC is in TA or TE Status then FROI MTC 02 Change is not allowed.

124 – No Recognizable Change Found (Claims Release 3.1 Only)

A MTC 02 (Change) report has no recognizable change found.

Claims Example:

- *For MTC 02 (Change)* DN0412 Change Data Element/Segment Number is used to reject an 02 Change transaction if:
 - Jurisdiction cannot recognize the value of at least one of the data elements indicated in DN0412 Change Data Element/Segment Number has changed.
 - A FROI only Data Number should not be identified on a SROI 02 Change. A SROI only Data Number should not be identified on a FROI 02 Change.
 - If Reportable Change Code = R (Remove) for any DN in a non-Variable Segment then the value for the DN on the incoming MTC 02 report must be blank/null
- DN0411 Number of Change Data Elements: Must be > 00 if FROI MTC = 02 (Change) or SROI MTC = 02 (Change)

125 – Must be > 00 for D Delete (Claims Release 3.1 Only)

A MTC 02 (Change) report, in order to delete a segment, the value of the DN must be > 00 for DN0413 Change Reason Code = value = D Delete (Note: Only applies to the Number of DN's with exception: Edit cannot be applied to DN0411, DN0434, DN0285 or DN0430 which are greyed on the DN Error Message table.)

Claims Example:

- *DN0279 Number of Witnesses must be > 00 if DN0413 Change Reason Code = D Delete*
- *DN0274 Number of Accident/Injury Description Narratives must be > 00 if DN0413 Change Reason Code = D Delete. This edit may be used if DN0038 Accident/Injury Description Narrative is not allowed to be deleted entirely.*
- *DN0277 Number of Full Denial Reason Codes must be > 00 if DN0413 Change Reason Code = D Delete. This edit may be used if DN0198 Full Denial Reason Code is not allowed to be deleted entirely on a MTC 04.*

Common Error Message Dictionary and Instructions

126 – Number of Occurrences < or > Previously Reported for DN0413 Change Reason Code (Claims Release 3.1 Only)

A MTC 02 (Change) report has no recognizable change found. Number of occurrence < or > previously reported for DN0413 Change Reason Code and DN0412 Change Data Element/Segment Number combination.

This edit is applicable to all 'Number of' DN's except DN0411 Number of Change Data Elements when DN0413 Change Reason Code = A (Add), U (Update), D (Delete).

Per IG, when a Variable Segment is changed, all applicable occurrences of the segment shall be present on the transaction in order to give the Jurisdiction a complete picture of the segment.

Claims Example:

If DN0413 Change Reason Code = A (Add): Must be > Previously Reported:

- *Three Witness segment occurrences were present on the FROI 00 Original. Later another witness is added. A FROI 02 Change should be sent with all four witness occurrences populated.*

If DN0413 Change Reason Code = U (Update): Must be = Previously Reported:

- *Three Witness segment occurrences were present on the FROI 00 Original. Later the phone number is updated for the third witness. A FROI 02 Change should be sent with all three witness occurrences populated.*

If DN0413 Change Reason Code = D (Delete): Must be < Previously Reported

- *Three Witness segment occurrences were present on the FROI 00 Original. Later a witness was deleted. A FROI 02 Change should be sent with the two remaining witness occurrences populated.*