

**PROPRIETARY EDI
FIRST REPORT OF INJURY
ERROR MESSAGE TABLE**

**** Mandatory Fields :** (please refer to the Proprietary EDI FROI Element Requirement List for a listing of Mandatory and Expected elements ******

An edit error on these fields means the entire First Report record is rejected, and no data from this record is entered into the system.

00105 ***MANDATORY*** Invalid or no match of WCBN

If a WCBN is sent with a First Report, the edi program processes the First Report as a modify. The program looks for the First Report to modify by matching WCBN's. If no match is found, an error message is written and the entire First Report record is rejected. No data from this report is entered into the system.

0049 ***MANDATORY*** If correction reason is yes, WCBN must be included

If the first report is sent in as a correction, the WCBN of the original record must be included. To be a correction, the First Report record must have the reason correction as "y" and the WCBN field completed and matching the WCBN of a First Report already on the system.

0049 ***MANDATORY*** Only Correction Reports must have a WCBN

If the "reason correction" field is no, and a WCBN is included with the First Report data, an error is returned. The entire First Report record is then rejected.

0011 ***MANDATORY*** If lost time, include incapacity dte & incapacity notice date

If the reason "lost time" is yes, and the incapacity date is blank or null, and The incapacity notice data is blank or null, an error is returned and the First Report record is rejected.

0048 ***MANDATORY*** At least one reason field must have an y

At least one reason for filing the First Report must be yes. These reasons include : Lost Time, Lost Earnings but no lost time, Occupational, Medical, Death, Correction.

0106 ***MANDATORY*** Field should contain only integers : UIAN

The UIAN field must be only numbers or the entire First Report claim is rejected.

0018 ***MANDATORY*** UIAN REQUIRED

The UIAN field must not be blank or all zeroes. The entire First Report record is rejected if the UIAN is blank or all zeroes.

0091 *MANDATORY* No Match of employer number with WCB file

The UIAN must match with an employer currently on the WCB's employer file.

0017 *MANDATORY* Employer name is blank

The employer name field cannot be blank. The First Report record is rejected if the employer name is blank.

0038 *MANDATORY* Date of injury/illness is mandatory

The date of injury or illness must be included with the First Report, if it is not the whole First Report record is rejected.

0030 *MANDATORY* Employee name is not complete

Either the employee's first name, last name, or both is missing. No First Report claim record can be created without this information.

0042 *MANDATORY* Employee SSN missing

The First Report claim must include the SSN of the injured/sick worker. If the claim does not have this information, it is rejected.

0035 *MANDATORY* Employee date of birth is missing or in error

The employee date of birth must be included in the First Report claim. If it is not, then the claim is rejected.

0112 *MANDATORY* Possible duplicate claim

A claim may have been previously filed for this employee and injury, please check your files. No new claim will be started with this information.

0108 *MANDATORY* missing employee gender

The employee gender field must be completed. It must contain either "m" for male or "f" for female. If this field is not completed the whole claim is rejected.

Checks for "numeric only" fields

The following fields are zero filled if the "numeric only" edit fails, but First Report processing continues.

0106 Field should contain only integers: WEEKLY WAGE

The weekly wage field should contain only numbers. It should not contain dollar signs, commas, or periods. If this field does contain a character that is not a number, the program zero fills the field, and issues the error.

0106 Field should contain only integers:FEDERAL ID

The federal ID field should contain only numbers. No alphabetical characters are allowed. If this field does not contain nine numbers, the error message is written to the error file, and the field is zero filled.

0106 Field should contain only integers:SSN

The ssn field should contain only numbers. It should not contain hyphens or other character separators. If the field has anything other than numbers in it, the error is written to the error file, and the field is zero filled. of the

0106 Field should have integers only:Time employee began work

The "time employee began work" field should have only numbers. Do not put colons or other alphabetical characters into the field. If this field does not contain only numbers, an error is written and the field is zeroed filled.

0106 Field should contain only integers:Time of injury

Time of injury field should contain only numbers. Colons or other alphabetical characters are not allowed. If this field does not contain only numbers, an error is written and the field is zero filled.

Edits on Reason Fields

0010 Lost Earnings/No Lost Time & Lost Time Reasons cannot both be yes

If field "Reason Lost Time" (position 9 in record) is "y" and the field "Lost Earnings/ No Lost Time (position 10 in record) is "y" then this error message is written.

0016 If the employee has died, a date of death must be entered

If the reason "Death" (position 13) is "y" then "Date of Death" (postions 14-21) must be completed.

0017 Date of death is not valid without reason death = yes

If the "date of death" field is completed then the reason "Death" field must be "y".

0014 If time lost from work then paid for 1/2 day must be y or n

If the field "reason lost time" is "y" then reason "Employee Paid for 1/2 Day" must be completed also.

0051 Lost Time Reason must be yes if incapacity date is valid

If the "Date of Incapacity" field is completed, then the "Reason Lost Time" field must be "y".

0052 Lost Time But No Incapacity Date

If "Reason Lost Time" is "y" then the field "Incapacity Date" must be completed.

0053 Paid half day but lost time reason is no

If Reason "Employee Paid for 1/2 Day or More" is "y" Then "Reason Lost Time" must be "y".

0054 If return to work is yes, then lost time reason must be yes

If field "Has employee returned to work" is "y" then, "Reason Lost Time" must be "y".

0055 If valid return to work date, then lost time reason must be yes

If the "Date Returned to Work" field is completed then "Reason Lost Time" must be "y".

0056 If employee died then lost time reason must be yes

If Reason "Death" is "y" then "Reason Lost Time" must be "y".

0057 If employee died, the date of death must be valid

If the Reason Death is "y", then the "Date of Death" field must be completed.

0058 IF valid date of death, employee reason of death must be yes

IF "Date of Death" is completed, the Reason Death must be "y".

0059 The date of death is later than today's date

The "Date of Death" cannot be later than the date the file is processed at WCB

0060 Death cannot occur before the injury

The "Date of Death" cannot be earlier than the "Date of injury or illness".

0061 Death occurred before the date of incapacity

The "Date of Death" cannot be earlier than the "Incapacity Date".

0062 Death date is earlier than the return to work date

The "Date of death" cannot be earlier than the "Date Returned to Work".

0063 Death date cannot be later than the date report was sent to WCB

The "Date of death" cannot be later than the "Date sent to WCB" (last field on record)

0064 If occupational disease field is yes, must have a valid last exp dte

IF the field reason "Occupational Disease" is "y" then the "Date of Last Exposure" must be "y".

0065 The last exposure should not be later than today's date

The field "Date of Last Exposure" should not be greater than the date the First Report is processed at WCB.

0066 The date of last exposure should not be later than report sent date

The "Date of Last Exposure" should not be greater than the date the report was sent to WCB.

0067 The date of diagnosis should not be later than report sent date

The field "Date of Diagnosis" should not be greater than the date the report was sent to WCB (last field on the First Report record).

0068 If occupational disease field is no, last exp date must be empty

If the reason field "Occupational Disease" is "n" then the "Date of Last Exposure" must be empty.

0069 Diagnosis date must be blank if no occupational disease reason

The "Date of Diagnosis" must be blank if the reason field "Occupational Disease" is "n".

Employer Edits

0019 REQUIRED Federal ID

The Federal ID field is required but not mandatory. This means a First Report record will be created if this field is blank, but you must send in the Federal ID to complete the First Report filing as soon as possible.

0021 Complete Employer Address required

If the employer name, both employer addresses, employer city, employer state or employer zip is blank, you will see this error message.

0095 Injury not in Maine and employee did not work for Maine employer

If the Location State is blank and the employer state is not Maine, this error will print.

0106 UIAN Should be a 10 digit number

The UIAN should include 10 digits. No hyphens or other characters should be included with the number.

Insurer Information Edits

0028 NCCI required

The NCCI number is required, but not mandatory if the insurer is a type 1 or a type 2. If this field is blank and the insurer is a type 1 or 2, and there are no mandatory errors on the report, a First Report record will be created. The insurer must supply the NCCI number in order to complete the filing of the First Report.

0089 No match of NCCI on WCB insurer record

WCB has no insurer record on file with the NCCI equal to the NCCI sent with the First Report data.

Employee Information Edits

0071 First Report shows employee works for another employer, EDI does not

When a First Report is being modified and a match is found on the WCB system. The field "Does employee work for another employer" is yes on the WCB system, but the First Report being edited has a "n" in that field.

Claim Information Edits

0073 Injury date is later than current date

The "Date of Injury or Illness" is later than the date the First Report is processed on the WCB system.

0074 Injury date is later than date information was sent to WCB

The "Date of Injury or Illness" is later than the date the First Report was sent to WCB (last field on the First Report record)

0075 Injury date is earlier than hire date

The "Date of Injury or Illness" is later than the "Date of Hire". An employee cannot be injured on the job he has not been hired for yet.

0076 If injury occurred on the premise, injury address info should be blank

If the injury occurred on the premise field is "y" than all injury address fields should be blank.

0077 If injury did not occur on the premise,complete all injury addr fields

If the field "Did injury occur on the premise?" field is "n", then the injury address fields must be completed. This edit has changed from the beginning of the new edi process from : all injury address fields should be completed to any injury address field should be completed. This allows for injury locations that are not true addresses.

0078 Injury location is out of state

If the field "Did injury occur on the premise?" is "n" and the injury state is not equal to ME, and the location state is blank or the location state is not equal to "ME" and the employer state is not equal to "Me".

0036 Specific Injury field is required

The specific injury field must be completed. If this field is blank, a First Report record will be created. You must send the specific injury information at a later date in order to complete the First Report process.

0110 Body parts affected are required

The parts of the worker's body that were injured must be part of the filing of the First Report. If this field is blank, a First Report will be created. To complete the First Report filing process you must send the affected body parts information as soon as possible.

0111 Injury events are required

The events that took place at the time of the injury must be included with the First Report filing. If this field is blank, a First Report record will be created, but the First Report process will not be completed until the required information is received.

0033 Date the insurer was notified is required

The date the insurer was notified of the injury/illness must be included in the filing of the First Report. If it is not, a First Report record will be created but not completed. You must send the date the insurer was notified to complete the First Report process.

0079a Injury Notice Date is later than today's date

The date the employer was notified of the illness or injury must be before the date the First Report claim was processed at WCB.

0079b Incapacity Notice Date is later than today's date

The date the employer was notified of the worker's incapacity must not be later than the date the First Report claim is processed at WCB.

0079c Insurer Notice Date is later than today's date

The date the employer notified the insurance company should not be later than the date the First Report claim was processed at WCB.

0080a Injury Notice Date is earlier than injury date

The date the employer was notified of the injury/illness cannot be earlier than the injury date. The actual injury must occur before the notification.

0080d Date employer notified is later than date employer notified insurer

The employer is notified of the injury and then the employer notifies the insurance company of the injury, in that order. If the First Report shows the employer notified the insurance company before the employer was notified of the injury, one of the dates is in error.

0080b Incapacity Notice Date is earlier than injury date

If the incapacity notice data is earlier than the injury date, one of the dates is in error. The injury date is the first data in the claim process.

0080c Insurer Notice Date is earlier than injury date

The injury date must be the first date in the First Report claim process. If the insurer notice date is earlier than the injury date, one date must be in error.

0081a Injury Notice Date is after the date report sent

The injury notice date must be before the date the First Report claim is sent to WCB.

0081b Incapacity Notice Date is after the date report sent

The incapacity notice date cannot be later than the date the report is sent to WCB. The incapacity notice cannot occur after the First Report is sent to WCB.

0081c Insurer Notice Date is after the date report sent

The insurer notification cannot occur after the First Report claim is sent to WCB.

0082 Incapacity date cannot be earlier than the injury date

The injury date must be prior to the incapacity date.

0083 Incapacity date cannot be later than date report was sent

The incapacity date must be prior to the date the First Report is sent to WCB.

0083b Incapacity date is after incapacity notice date

The actual incapacity must occur first, and then the notification process takes place.

0084 Return to work date cannot be later than the date report was sent

The return to work date is not valid if it is after the date the First Report Claim was sent to WCB.

0085 Return to work date cannot be earlier than incapacity date

The incapacity occurs first, and then the worker returns to work. If the return to work date is earlier than the incapacity date, one of the dates is in error.

0087 Return to work date is not valid if return to work is no

If the answer to the question "Has the employer returned to work?" is no, then a return to work date is not valid.

0088 The send date is after the date the report was processed at WCB

The date the First Report claim is sent to WCB cannot be later than the date the claim was processed at WCB.

0032 Time employee began work is required

The actual time the employee began work is needed to complete the First Report claim filing.

0034 Time of injury is required

The time the injury took place is required to complete the First Report process.

0113 Invalid Injury Time

Any numbers in injury time after 24 are not valid. Ex) 1224 is not valid, it should be 0024. 0000 should be 2400.

0114 Invalid Time Began Work

Any numbers in time began work after 24 are not valid. 0000 is not a valid time. Ex) 1224 is not valid, it should be 0024. 0000 should be 2400.

0115 Possible Error: Time began work = Injury Time

It is highly unlikely that the injury time is exactly the same as the time began work Please re-check your data.

0041 IF employee returned to work, return date required

If the answer to the question "Has the employee returned to work?" is yes, then the return to work date is required.

0040 If Lost Time then return to work section must be completed

If the reason loss time is yes, then the answer to the question "Has the employee returned to work?" must be either yes or no.

0094 Inactive employer on report

The First Report claim has an employer listed that is inactive according to the WCB.

0096 No Match of employee ssn on WCB file

The claimant's ssn number does not appear on the WCB employee file.

0031 Complete employee address required

The employee's street address, city, state, and zip must all be included in the First Report claim.

0097 No date of birth match on WCB's employee file

The employee's date of birth on file in the WCB records is different than the date of birth sent with the First Report information. One of the dates is incorrect.

0098 No match of employee gender on WCB employee file and EDI Data

The employee in the First Report claim is listed on the WCB files with a different gender than reported in the First Report. Either the new First Report filing or the old data at WCB is incorrect.

0099 Employee last name on edi data does not match WCB file

The employee in the First Report claim does have a record on the WCB files, but the last name is different. Either the last name of the claim sent is incorrect or the WCB files are incorrect.

0100 The employee city and zip do not match with WCB employee file

The WCB files contain a prior record of the employee on the First Report claim. However, the employee city and zip do not match on this prior record.

0101 WCB employee table does not have edi state on file

The employee's state on the current First Report does not match the state already on file at WCB.

0102 Employee is under 10

The employee on the First Report is under 10 years old. The date of birth sent on the First Report claim must be incorrect.

0103 Employee is over 70

The employee on the First Report claim is over 70 years old. Is the date of birth on the First Report claim in error?

0104 Employee was hired before the age of 10

If the employee's hire date and the employee's date of birth is compared, the employee was hired before he was 10 years old. One or both dates must be in error.

0037 Does the employee work for another employer? must be answered

The question "Does the employee work for another employer? must be answered either yes or no. ("y" or "n")

Preparer Information

0045 Preparer name is required

You must include the name of the person who prepared the First Report claim for the company and the employee. If this field is blank, a First Report record will be written, but the First Report claim cannot be completed until this information is sent to WCB.

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