SROI-R22

#	Data Element Name	DN#	Error Code	Error Code Description	02	04	AP	CA	CB	CD	EP	ER	FN	IP
1	Transaction Set ID	0001	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			058	Code/ID invalid	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
2	Maintenance Type Correction Code	0295												
3	Maintenance Type Correction Code Date	0296												
4	Date Claim Administrator Had Knowledge of Lost Time	0298	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
5	Jurisdiction Branch Office Code	0186	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
6	Claim Administratoristrator Claim Number	0015	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			030	Must be A-Z, 0-9, or spaces	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			064	Invalid data relationship	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
7	Claim Administrator FEIN	0187	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			028	All digits must be 0-9	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			039	No match on database	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			040	All digits cannot be the same	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			118	Trading Partner not approved to submit data for Insurer/Claim Admin	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
8	Claim Administrator Name	0188			TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
9	Claim Administrator Claim Representative Name	0140			TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
10	Claim Administrator Claim Representative Business Phone Number	0137	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
11	Claim Administrator Claim Representative Email Address	0138			TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
12	Claim Administrator Claim Representative Fax Number	0139	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
13	Employee ID Type Qualifier	0270	058	Code/ID invalid	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
14	Employee ID													

#	Data Element Name	DN#	Error Code	Error Code Description	02	04	AP	CA	CB	CD	EP	ER	FN	IP
15	Employee SSN	0042	028	All digits must be 0-9	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			039	No match on database	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			040	All digits cannot be the same	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
16	Employee Employment Visa	0152	028	All digits must be 0-9	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
17	Employee Green Card	0153	028	All digits must be 0-9	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
18	Employee ID Assigned by Jurisdiction	0154	040	All digits cannot be the same	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
19	Employee Passport Number	0156	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
20	Employee Last Name	0043	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
21	Employee First Name	0044	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
22	Employee Middle Name/Initial	0045			TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
23	Employee Last Name Suffix	0255			TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
24	Employee Date of Birth	0052	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			033	Must be <= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			037	Must be <= Maintenance Type Code Date	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			055	Must be < Employee Date of Hire	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
25	Employee Marital Status Code	0054	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
26	Employee Education Level	0151	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
27	Employee Number of Entitled Exemptions	0213	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
28	Employee Tax Filing Status Code	0158	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
29	Death Result of Injury Code	0146	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
30	Insured FEIN	0314	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			039	No match on database	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			040	All digits cannot be the same	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
31	Insolvent Insurer FEIN	0292	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			039	No match on database	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			040	All digits cannot be the same	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
32	Employer FEIN	0016	028	All digits must be 0-9	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			039	No match on database	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			040	All digits cannot be the same	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR

#	Data Element Name	DN#	Error Code	Error Code Description	02	04	AP	CA	CB	CD	EP	ER	FN	IP
33	Employer Physical Postal Code	0023	039	No match on database	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			058	Code/ID invalid	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
34	Return to Work with Same Employer Indicator	0228	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
35	Date Employer Had Knowledge of Initial Disability	0281	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
36	Non-Consecutive Period Code	0212	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
37	Estimated Gross Weekly Amount Indicator	0172	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
38	Current Date Last Day Worked	0145	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			037	No match on database	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
39	Current Date Disability Began	0144	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			037	No match on database	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
40	Initial Date Last Day Worked	0065	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
41	Return to Work Type Code	0189	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
42	Physical Restrictions Indicator	0224	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
43	Suspension Effective Date	0193	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			035	Must be >= Initial Date Disability Began	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
44	Full Denial Effective Date	0199	029	Must be a valid date (CCYYMMDD)	TA	TR	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TR	TA	TA	TA	TA	TA	TA	TA	TA
45	Full Denial Rescission Date	0196	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
46	Partial Denial Code	0294	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
47	Calculated Weekly Compensation Amount	0134	028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
48	Wage Effective Date	0256	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
49	Discontinued Fringe Benefits	0149	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
50	Type of Loss Code	0290	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
51	Employment Status Code	0058	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			064	Invalid data relationship	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
52	Permanent Impairment Minimum Payment Indicator	0223	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
53	Initial Return to Work Date	0068	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
54	Full Wages Paid for Date of Injury Indicator	0066	058	Code/ID invalid	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
55	Lump Sum Payment/Settlement Code	0293	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA

#	Data Element Name	DN#	Error Code	Error Code Description	02	04	AP	CA	CB	CD	EP	ER	FN	IP
56	Employer Paid Salary in Lieu of Compensation Indicator	0273	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TR	TA	TA	TA
57	Average Wage	0286	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TR	TA	TA	TA
58	Initial Date of Lost Time	0297	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
59	Award/Order Date	0299	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
	Variable Segment Counters													
60	Number of Benefits	0288	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
61	Number of Payments	0283	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
62	Number of Other Benefits	0282	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
63	Number of Benefit ACR	0289	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
64	Number of Recoveries	0284	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
65	Number of Reduced Earnings	0285	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE

#	Data Element Name	DN#	Error Code	Error Code Description	02	04	AP	CA	CB	CD	EP	ER	FN	IP
66	Number of Concurrent Employers	0275	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
67	Number of Full Denial Reason Codes	0277	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
68	Number of Full Denial Reason Narratives	0276	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
69	Number of Suspension Narratives	0287	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
	Variable Segment Benefits													
70	Benefit Type Code	0085	058	Code/ID invalid	TA	TR	TR	TR	TR	TR	TR	TR	TR	TR
71	Maintenance Type Code	0002	001	Mandatory field not present										
			053	No matching First Report of Injury (148)										
			042	Not statutorily valid										
			050	No matching Subsequent Report (A49)										
			057	Duplicate Batch/Transaction										
			058	Code/ID invalid										
			061	Event Table criteria not met										
			063	Invalid event sequence										
			065	Corresponding report/data not found										
			101	MTC not approved for production										
72	Gross Weekly Amount	0174	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
73	Gross Weekly Amount Effective Date	0175	029	ust be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			035	Must be >= Initial Date Disability Began	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
74	Net Weekly Amount	0087	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA

#	Data Element Name	DN#	Error Code	Error Code Description	02	04	AP	CA	CB	CD	EP	ER	FN	IP
75	Net Weekly Amount Effective Date	0211	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			035	Must be >= Initial Date Disability Began	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
76	Benefit Period Start Date	0088	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			035	Must be >= Initial Date Disability Began	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
77	Benefit Period Through Date	0089	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			038	Must be >= Start Date	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
78	Benefit Type Claim Weeks	0090	028	All digits must be 0-9	TE	TE	TR	TE	TE	TE	TE	TE	TR	TE
79	Benefit Type Claim Days	0091	019	Days must be 0-6	TE	TE	TR	TE	TE	TE	TE	TE	TR	TE
			028	All digits must be 0-9	TE	TE	TR	TE	TE	TE	TE	TE	TR	TE
80	Benefit Type Amount Paid	0086	028	All digits must be 0-9	TE	TE	TR	TE	TE	TE	TE	TE	TR	TE
81	Payment Issue Date	0195	029	Must be a valid date (CCYYMMDD)	TE	TE	TR	TE	TE	TE	TE	TE	TR	TE
			034	Must be >= Date of Injury	TE	TE	TR	TE	TE	TE	TE	TE	TR	TE
	Payments													
82	Payment Reason Code	0222	058	Code/ID invalid	TE	TE	TR	TE	TE	TE	TE	TE	TE	TE
			103	Same code received in multiple variable segments	TE	TE	TR	TE	TE	TE	TE	TE	TE	TE
83	Payee	0217			TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
84	Payment Amount	0218	028	All digits must be 0-9	TE	TE	TR	TE	TE	TE	TE	TE	TE	TE
85	Payment Covers Period Start Date	0219	029	Must be a valid date (CCYYMMDD)	TE	TE	TR	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TR	TE	TE	TE	TE	TE	TE	TE
86	Payment Covers Period Through Date	0220	029	Must be a valid date (CCYYMMDD)	TE	TE	TR	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TR	TE	TE	TE	TE	TE	TE	TE
			038	Must be >= Start Date	TE	TE	TR	TE	TE	TE	TE	TE	TE	TE
87	Payment Issue Date	0195	029	Must be a valid date (CCYYMMDD)	TE	TE	TR	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TR	TE	TE	TE	TE	TE	TE	TE
	Other Benefits													
88	Other Benefit Type Code	0216	058	Code/ID invalid	TE	TE	TR	TE	TE	TE	TE	TE	TE	TE
			103	Same code received in multiple variable segments	TE	TE	TR	TE	TE	TE	TE	TE	TE	TE
89	Other Benefit Type Amount	0215	028	All digits must be 0-9	TE	TE	TR	TE	TE	TE	TE	TE	TE	TE
	Benefit-ACR Segment contains Adjustments, Credits and Redistributions.													
90	Benefit Adjustment Code	0092	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			103	Same code received in multiple variable segments	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
91	Benefit Adjustment Start Date	0094	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
92	Benefit Adjustment End Date	0125	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA

#	Data Element Name	DN#	Error Code	Error Code Description	02	04	AP	CA	CB	CD	EP	ER	FN	IP
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			038	Must be >= Start Date	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
93	Benefit Adjustment Weekly Amount	0093	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
94	Benefit Credit Code	0126	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			103	Same code received in multiple variable segments	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
95	Benefit Credit Start Date	0127	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			035	Must be >= Initial Date Disability Began	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
96	Benefit Credit End Date	0128	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			038	Must be >= Start Date	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
97	Benefit Credit Weekly Amount	0129	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
98	Benefit Redistribution Code	0130	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			103	Same code received in multiple variable segments	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
99	Benefit Redistribution Start Date	0131	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			035	Must be >= Initial Date Disability Began	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
100	Benefit Redistribution End Date	0132	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			038	Must be >= Start Date	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
101	Benefit Redistribution Weekly Amount	0133	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
	Recoveries													
102	Recovery Code	0226	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			103	Same code received in multiple variable segments	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
103	Recovery Amount	0225	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
	Reduced Earnings													
104	Reduced Earnings Week Number	0242	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
105	Actual Reduced Earnings	0124	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
106	Deemed Reduced Earnings	0147	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
	Concurrent Employers													
107	Concurrent Employer Name	0141			TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
108	Concurrent Employer Contact Business Phone	0142	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
109	Concurrent Employer Wage	0143	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
	Denial Reason Code													
110	Full Denial Reason Code	0198	058	Code/ID invalid	TA	TR	TA	TA	TA	TA	TA	TA	TA	TA
	Denial Reasons		103	Same code received in multiple variable segments	TA	TR	TA	TA	TA	TA	TA	TA	TA	TA
111	Full Denial Reason Narrative	0197			TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
	Suspension Narratives													
112	Suspension Narrative	0233			TA	TA	TA	TA	TA	TA	TA	TA	TA	TA

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#	Data Element Name	DN#	Error Code	Error Code Description	PD	PY	RB	RE	S1	S2	S3	S4
1	Transaction Set ID	0001	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR
			058	Code/ID invalid	TR	TR	TR	TR	TR	TR	TR	TR
2	Maintenance Type Correction Code	0295										
3	Maintenance Type Correction Code Date	0296										
4	Date Claim Administrator Had Knowledge of Lost Time	0298	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
5	Jurisdiction Branch Office Code	0186	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
6	Claim Administratoristrator Claim Number	0015	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR
			030	Must be A-Z, 0-9, or spaces	TR	TR	TR	TR	TR	TR	TR	TR
			064	Invalid data relationship	TR	TR	TR	TR	TR	TR	TR	TR
7	Claim Administrator FEIN	0187	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR
			028	All digits must be 0-9	TR	TR	TR	TR	TR	TR	TR	TR
			039	No match on database	TR	TR	TR	TR	TR	TR	TR	TR
			040	All digits cannot be the same	TR	TR	TR	TR	TR	TR	TR	TR
			118	Trading Partner not approved to submit data for Insurer/Claim Admin	TR	TR	TR	TR	TR	TR	TR	TR
8	Claim Administrator Name	0188			TA	TA	TA	TA	TA	TA	TA	TA
9	Claim Administrator Claim Representative Name	0140			TA	TA	TA	TA	TA	TA	TA	TA
10	Claim Administrator Claim Representative Business Phone Number	0137	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
11	Claim Administrator Claim Representative Email Address	0138			TA	TA	TA	TA	TA	TA	TA	TA
12	Claim Administrator Claim Representative Fax Number	0139	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
13	Employee ID Type Qualifier	0270	058	Code/ID invalid	TR	TR	TR	TR	TR	TR	TR	TR
14	Employee ID											

#	Data Element Name	DN#	Error Code	Error Code Description	PD	PY	RB	RE	S1	S2	S3	S4
15	Employee SSN	0042	028	All digits must be 0-9	TR	TR	TR	TR	TR	TR	TR	TR
			039	No match on database	TR	TR	TR	TR	TR	TR	TR	TR
			040	All digits cannot be the same	TR	TR	TR	TR	TR	TR	TR	TR
16	Employee Employment Visa	0152	028	All digits must be 0-9	TR	TR	TR	TR	TR	TR	TR	TR
17	Employee Green Card	0153	028	All digits must be 0-9	TR	TR	TR	TR	TR	TR	TR	TR
18	Employee ID Assigned by Jurisdiction	0154	040	All digits cannot be the same	TR	TR	TR	TR	TR	TR	TR	TR
19	Employee Passport Number	0156	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR
20	Employee Last Name	0043	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR
21	Employee First Name	0044	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR
22	Employee Middle Name/Initial	0045			TA	TA	TA	TA	TA	TA	TA	TA
23	Employee Last Name Suffix	0255			TA	TA	TA	TA	TA	TA	TA	TA
24	Employee Date of Birth	0052	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE
			033	Must be <= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE
			037	Must be <= Maintenance Type Code Date	TE	TE	TE	TE	TE	TE	TE	TE
			055	Must be < Employee Date of Hire	TE	TE	TE	TE	TE	TE	TE	TE
25	Employee Marital Status Code	0054	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
26	Employee Education Level	0151	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
27	Employee Number of Entitled Exemptions	0213	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
28	Employee Tax Filing Status Code	0158	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
29	Death Result of Injury Code	0146	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
30	Insured FEIN	0314	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
			039	No match on database	TA	TA	TA	TA	TA	TA	TA	TA
			040	All digits cannot be the same	TA	TA	TA	TA	TA	TA	TA	TA
31	Insolvent Insurer FEIN	0292	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
			039	No match on database	TA	TA	TA	TA	TA	TA	TA	TA
			040	All digits cannot be the same	TA	TA	TA	TA	TA	TA	TA	TA
32	Employer FEIN	0016	028	All digits must be 0-9	TR	TR	TR	TR	TR	TR	TR	TR
			039	No match on database	TR	TR	TR	TR	TR	TR	TR	TR
			040	All digits cannot be the same	TR	TR	TR	TR	TR	TR	TR	TR

#	Data Element Name	DN#	Error Code	Error Code Description	PD	PY	RB	RE	S1	S2	S3	S4
33	Employer Physical Postal Code	0023	039	No match on database	TR	TR	TR	TR	TR	TR	TR	TR
			058	Code/ID invalid	TR	TR	TR	TR	TR	TR	TR	TR
34	Return to Work with Same Employer Indicator	0228	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
35	Date Employer Had Knowledge of Initial Disability	0281	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE
36	Non-Consecutive Period Code	0212	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
37	Estimated Gross Weekly Amount Indicator	0172	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
38	Current Date Last Day Worked	0145	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
			037	No match on database	TA	TA	TA	TA	TA	TA	TA	TA
39	Current Date Disability Began	0144	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
			037	No match on database	TA	TA	TA	TA	TA	TA	TA	TA
40	Initial Date Last Day Worked	0065	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE
41	Return to Work Type Code	0189	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
42	Physical Restrictions Indicator	0224	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
43	Suspension Effective Date	0193	029	Must be a valid date (CCYYMMDD)	TR	TA	TA	TR	TR	TR	TR	TR
			034	Must be >= Date of Injury	TR	TA	TA	TR	TR	TR	TR	TR
			035	Must be >= Initial Date Disability Began	TR	TA	TA	TR	TR	TR	TR	TR
44	Full Denial Effective Date	0199	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
45	Full Denial Rescission Date	0196	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
46	Partial Denial Code	0294	058	Code/ID invalid	TR	TA	TA	TA	TA	TA	TA	TA
47	Calculated Weekly Compensation Amount	0134	028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
48	Wage Effective Date	0256	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
49	Discontinued Fringe Benefits	0149	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
50	Type of Loss Code	0290	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
51	Employment Status Code	0058	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
			064	Invalid data relationship	TA	TA	TA	TA	TA	TA	TA	TA
52	Permanent Impairment Minimum Payment Indicator	0223	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
53	Initial Return to Work Date	0068	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE
54	Full Wages Paid for Date of Injury Indicator	0066	058	Code/ID invalid	TE	TE	TE	TE	TE	TE	TE	TE
55	Lump Sum Payment/Settlement Code	0293	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA

#	Data Element Name	DN#	Error Code	Error Code Description	PD	PY	RB	RE	S1	S2	S3	S4
56	Employer Paid Salary in Lieu of Compensation Indicator	0273	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
57	Average Wage	0286	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
58	Initial Date of Lost Time	0297	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
59	Award/Order Date	0299	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
	Variable Segment Counters											
60	Number of Benefits	0288	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE
61	Number of Payments	0283	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE
62	Number of Other Benefits	0282	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE
63	Number of Benefit ACR	0289	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE
64	Number of Recoveries	0284	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE
65	Number of Reduced Earnings	0285	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE

#	Data Element Name	DN#	Error Code	Error Code Description	PD	PY	RB	RE	S1	S2	S3	S4
66	Number of Concurrent Employers	0275	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE
67	Number of Full Denial Reason Codes	0277	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE
68	Number of Full Denial Reason Narratives	0276	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE
69	Number of Suspension Narratives	0287	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE
	Variable Segment Benefits											
70	Benefit Type Code	0085	058	Code/ID invalid	TR	TR	TR	TR	TR	TR	TR	TR
71	Maintenance Type Code	0002	001	Mandatory field not present								
			053	No matching First Report of Injury (148)								
			042	Not statutorily valid								
			050	No matching Subsequent Report (A49)								
			057	Duplicate Batch/Transaction								
			058	Code/ID invalid								
			061	Event Table criteria not met								
			063	Invalid event sequence								
			065	Corresponding report/data not found								
			101	MTC not approved for production								
72	Gross Weekly Amount	0174	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
73	Gross Weekly Amount Effective Date	0175	029	ust be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
			035	Must be >= Initial Date Disability Began	TA	TA	TA	TA	TA	TA	TA	TA
74	Net Weekly Amount	0087	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA

#	Data Element Name	DN#	Error Code	Error Code Description	PD	PY	RB	RE	S1	S2	S3	S4
75	Net Weekly Amount Effective Date	0211	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
			035	Must be >= Initial Date Disability Began	TA	TA	TA	TA	TA	TA	TA	TA
76	Benefit Period Start Date	0088	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE
			035	Must be >= Initial Date Disability Began	TE	TE	TE	TE	TE	TE	TE	TE
77	Benefit Period Through Date	0089	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE
			038	Must be >= Start Date	TE	TE	TE	TE	TE	TE	TE	TE
78	Benefit Type Claim Weeks	0090	028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
79	Benefit Type Claim Days	0091	019	Days must be 0-6	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
80	Benefit Type Amount Paid	0086	028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
81	Payment Issue Date	0195	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE
	Payments											
82	Payment Reason Code	0222	058	Code/ID invalid	TE	TE	TE	TE	TE	TE	TE	TE
			103	Same code received in multiple variable segments	TE	TE	TE	TE	TE	TE	TE	TE
83	Payee	0217			TA	TA	TA	TA	TA	TA	TA	TA
84	Payment Amount	0218	028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
85	Payment Covers Period Start Date	0219	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE
86	Payment Covers Period Through Date	0220	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE
			038	Must be >= Start Date	TE	TE	TE	TE	TE	TE	TE	TE
87	Payment Issue Date	0195	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE
	Other Benefits											
88	Other Benefit Type Code	0216	058	Code/ID invalid	TE	TE	TE	TE	TE	TE	TE	TE
			103	Same code received in multiple variable segments	TE	TE	TE	TE	TE	TE	TE	TE
89	Other Benefit Type Amount	0215	028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
	Benefit-ACR Segment contains Adjustments, Credits and Redistributions.											
90	Benefit Adjustment Code	0092	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
			103	Same code received in multiple variable segments	TA	TA	TA	TA	TA	TA	TA	TA
91	Benefit Adjustment Start Date	0094	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
92	Benefit Adjustment End Date	0125	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA

#	Data Element Name	DN#	Error Code	Error Code Description	PD	PY	RB	RE	S1	S2	S3	S4
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
			038	Must be >= Start Date	TA	TA	TA	TA	TA	TA	TA	TA
93	Benefit Adjustment Weekly Amount	0093	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
94	Benefit Credit Code	0126	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
			103	Same code received in multiple variable segments	TA	TA	TA	TA	TA	TA	TA	TA
95	Benefit Credit Start Date	0127	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
			035	Must be >= Initial Date Disability Began	TA	TA	TA	TA	TA	TA	TA	TA
96	Benefit Credit End Date	0128	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			038	Must be >= Start Date	TA	TA	TA	TA	TA	TA	TA	TA
97	Benefit Credit Weekly Amount	0129	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
98	Benefit Redistribution Code	0130	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
			103	Same code received in multiple variable segments	TA	TA	TA	TA	TA	TA	TA	TA
99	Benefit Redistribution Start Date	0131	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
			035	Must be >= Initial Date Disability Began	TA	TA	TA	TA	TA	TA	TA	TA
100	Benefit Redistribution End Date	0132	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			038	Must be >= Start Date	TA	TA	TA	TA	TA	TA	TA	TA
101	Benefit Redistribution Weekly Amount	0133	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
	Recoveries											
102	Recovery Code	0226	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
			103	Same code received in multiple variable segments	TA	TA	TA	TA	TA	TA	TA	TA
103	Recovery Amount	0225	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
	Reduced Earnings											
104	Reduced Earnings Week Number	0242	028	All digits must be 0-9	TA	TA	TA	TR	TA	TA	TA	TA
105	Actual Reduced Earnings	0124	028	All digits must be 0-9	TA	TA	TA	TR	TA	TA	TA	TA
106	Deemed Reduced Earnings	0147	028	All digits must be 0-9	TA	TA	TA	TR	TA	TA	TA	TA
	Concurrent Employers											
107	Concurrent Employer Name	0141			TA	TA	TA	TA	TA	TA	TA	TA
108	Concurrent Employer Contact Business Phone	0142	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
109	Concurrent Employer Wage	0143	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
	Denial Reason Code											
110	Full Denial Reason Code	0198	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
	Denial Reasons		103	Same code received in multiple variable segments	TA	TA	TA	TA	TA	TA	TA	TA
111	Full Denial Reason Narrative	0197			TA	TA	TA	TA	TA	TA	TA	TA
	Suspension Narratives											
112	Suspension Narrative	0233			TA	TA	TA	TA	TA	TA	TA	TA

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#	Data Element Name	DN#	Error Code	Error Code Description	S5	S6	S7	S8	S9	SD	SJ	UR
1	Transaction Set ID	0001	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR
			058	Code/ID invalid	TR	TR	TR	TR	TR	TR	TR	TR
2	Maintenance Type Correction Code	0295										
3	Maintenance Type Correction Code Date	0296										
4	Date Claim Administrator Had Knowledge of Lost Time	0298	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
5	Jurisdiction Branch Office Code	0186	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
6	Claim Administratoristrator Claim Number	0015	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR
			030	Must be A-Z, 0-9, or spaces	TR	TR	TR	TR	TR	TR	TR	TR
			064	Invalid data relationship	TR	TR	TR	TR	TR	TR	TR	TR
7	Claim Administrator FEIN	0187	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR
			028	All digits must be 0-9	TR	TR	TR	TR	TR	TR	TR	TR
			039	No match on database	TR	TR	TR	TR	TR	TR	TR	TR
			040	All digits cannot be the same	TR	TR	TR	TR	TR	TR	TR	TR
			118	Trading Partner not approved to submit data for Insurer/Claim Admin	TR	TR	TR	TR	TR	TR	TR	TR
8	Claim Administrator Name	0188			TA	TA	TA	TA	TA	TA	TA	TA
9	Claim Administrator Claim Representative Name	0140			TA	TA	TA	TA	TA	TA	TA	TA
10	Claim Administrator Claim Representative Business Phone Number	0137	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
11	Claim Administrator Claim Representative Email Address	0138			TA	TA	TA	TA	TA	TA	TA	TA
12	Claim Administrator Claim Representative Fax Number	0139	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
13	Employee ID Type Qualifier	0270	058	Code/ID invalid	TR	TR	TR	TR	TR	TR	TR	TR
14	Employee ID											

#	Data Element Name	DN#	Error Code	Error Code Description	S5	S6	S7	S8	S9	SD	SJ	UR
15	Employee SSN	0042	028	All digits must be 0-9	TR	TR	TR	TR	TR	TR	TR	TR
			039	No match on database	TR	TR	TR	TR	TR	TR	TR	TR
			040	All digits cannot be the same	TR	TR	TR	TR	TR	TR	TR	TR
16	Employee Employment Visa	0152	028	All digits must be 0-9	TR	TR	TR	TR	TR	TR	TR	TR
17	Employee Green Card	0153	028	All digits must be 0-9	TR	TR	TR	TR	TR	TR	TR	TR
18	Employee ID Assigned by Jurisdiction	0154	040	All digits cannot be the same	TR	TR	TR	TR	TR	TR	TR	TR
19	Employee Passport Number	0156	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR
20	Employee Last Name	0043	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR
21	Employee First Name	0044	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR
22	Employee Middle Name/Initial	0045			TA	TA	TA	TA	TA	TA	TA	TA
23	Employee Last Name Suffix	0255			TA	TA	TA	TA	TA	TA	TA	TA
24	Employee Date of Birth	0052	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE
			033	Must be <= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE
			037	Must be <= Maintenance Type Code Date	TE	TE	TE	TE	TE	TE	TE	TE
			055	Must be < Employee Date of Hire	TE	TE	TE	TE	TE	TE	TE	TE
25	Employee Marital Status Code	0054	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
26	Employee Education Level	0151	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
27	Employee Number of Entitled Exemptions	0213	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
28	Employee Tax Filing Status Code	0158	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
29	Death Result of Injury Code	0146	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
30	Insured FEIN	0314	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
			039	No match on database	TA	TA	TA	TA	TA	TA	TA	TA
			040	All digits cannot be the same	TA	TA	TA	TA	TA	TA	TA	TA
31	Insolvent Insurer FEIN	0292	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
			039	No match on database	TA	TA	TA	TA	TA	TA	TA	TA
			040	All digits cannot be the same	TA	TA	TA	TA	TA	TA	TA	TA
32	Employer FEIN	0016	028	All digits must be 0-9	TR	TR	TR	TR	TR	TR	TR	TR
			039	No match on database	TR	TR	TR	TR	TR	TR	TR	TR
			040	All digits cannot be the same	TR	TR	TR	TR	TR	TR	TR	TR

#	Data Element Name	DN#	Error Code	Error Code Description	S5	S6	S7	S8	S9	SD	SJ	UR
33	Employer Physical Postal Code	0023	039	No match on database	TR	TR	TR	TR	TR	TR	TR	TR
			058	Code/ID invalid	TR	TR	TR	TR	TR	TR	TR	TR
34	Return to Work with Same Employer Indicator	0228	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
35	Date Employer Had Knowledge of Initial Disability	0281	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE
36	Non-Consecutive Period Code	0212	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
37	Estimated Gross Weekly Amount Indicator	0172	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
38	Current Date Last Day Worked	0145	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
			037	No match on database	TA	TA	TA	TA	TA	TA	TA	TA
39	Current Date Disability Began	0144	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
			037	No match on database	TA	TA	TA	TA	TA	TA	TA	TA
40	Initial Date Last Day Worked	0065	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE
41	Return to Work Type Code	0189	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
42	Physical Restrictions Indicator	0224	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
43	Suspension Effective Date	0193	029	Must be a valid date (CCYYMMDD)	TR	TR	TR	TR	TR	TR	TR	TA
			034	Must be >= Date of Injury	TR	TR	TR	TR	TR	TR	TR	TA
			035	Must be >= Initial Date Disability Began	TR	TR	TR	TR	TR	TR	TR	TA
44	Full Denial Effective Date	0199	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
45	Full Denial Rescission Date	0196	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
46	Partial Denial Code	0294	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
47	Calculated Weekly Compensation Amount	0134	028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
48	Wage Effective Date	0256	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
49	Discontinued Fringe Benefits	0149	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
50	Type of Loss Code	0290	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
51	Employment Status Code	0058	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
			064	Invalid data relationship	TA	TA	TA	TA	TA	TA	TA	TA
52	Permanent Impairment Minimum Payment Indicator	0223	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
53	Initial Return to Work Date	0068	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE
54	Full Wages Paid for Date of Injury Indicator	0066	058	Code/ID invalid	TE	TE	TE	TE	TE	TE	TE	TE
55	Lump Sum Payment/Settlement Code	0293	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA

#	Data Element Name	DN#	Error Code	Error Code Description	S5	S6	S7	S8	S9	SD	SJ	UR
56	Employer Paid Salary in Lieu of Compensation Indicator	0273	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
57	Average Wage	0286	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
58	Initial Date of Lost Time	0297	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
59	Award/Order Date	0299	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
	Variable Segment Counters											
60	Number of Benefits	0288	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE
61	Number of Payments	0283	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE
62	Number of Other Benefits	0282	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE
63	Number of Benefit ACR	0289	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE
64	Number of Recoveries	0284	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE
65	Number of Reduced Earnings	0285	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE

#	Data Element Name	DN#	Error Code	Error Code Description	S5	S6	S7	S8	S9	SD	SJ	UR
66	Number of Concurrent Employers	0275	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE
67	Number of Full Denial Reason Codes	0277	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE
68	Number of Full Denial Reason Narratives	0276	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE
69	Number of Suspension Narratives	0287	001	Mandatory field not present	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE	TE	TE	TE	TE	TE
			062	Required segment not present	TE	TE	TE	TE	TE	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE	TE
	Variable Segment Benefits											
70	Benefit Type Code	0085	058	Code/ID invalid	TR	TR	TR	TR	TR	TR	TR	TR
71	Maintenance Type Code	0002	001	Mandatory field not present								
			053	No matching First Report of Injury (148)								
			042	Not statutorily valid								
			050	No matching Subsequent Report (A49)								
			057	Duplicate Batch/Transaction								
			058	Code/ID invalid								
			061	Event Table criteria not met								
			063	Invalid event sequence								
			065	Corresponding report/data not found								
			101	MTC not approved for production								
72	Gross Weekly Amount	0174	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
73	Gross Weekly Amount Effective Date	0175	029	ust be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
			035	Must be >= Initial Date Disability Began	TA	TA	TA	TA	TA	TA	TA	TA
74	Net Weekly Amount	0087	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA

#	Data Element Name	DN#	Error Code	Error Code Description	S5	S6	S7	S8	S9	SD	SJ	UR
75	Net Weekly Amount Effective Date	0211	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
			035	Must be >= Initial Date Disability Began	TA	TA	TA	TA	TA	TA	TA	TA
76	Benefit Period Start Date	0088	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE
			035	Must be >= Initial Date Disability Began	TE	TE	TE	TE	TE	TE	TE	TE
77	Benefit Period Through Date	0089	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE
			038	Must be >= Start Date	TE	TE	TE	TE	TE	TE	TE	TE
78	Benefit Type Claim Weeks	0090	028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
79	Benefit Type Claim Days	0091	019	Days must be 0-6	TE	TE	TE	TE	TE	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
80	Benefit Type Amount Paid	0086	028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
81	Payment Issue Date	0195	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE
	Payments											
82	Payment Reason Code	0222	058	Code/ID invalid	TE	TE	TE	TE	TE	TE	TE	TE
			103	Same code received in multiple variable segments	TE	TE	TE	TE	TE	TE	TE	TE
83	Payee	0217			TA	TA	TA	TA	TA	TA	TA	TA
84	Payment Amount	0218	028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
85	Payment Covers Period Start Date	0219	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE
86	Payment Covers Period Through Date	0220	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE
			038	Must be >= Start Date	TE	TE	TE	TE	TE	TE	TE	TE
87	Payment Issue Date	0195	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE	TE
	Other Benefits											
88	Other Benefit Type Code	0216	058	Code/ID invalid	TE	TE	TE	TE	TE	TE	TE	TE
			103	Same code received in multiple variable segments	TE	TE	TE	TE	TE	TE	TE	TE
89	Other Benefit Type Amount	0215	028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE
	Benefit-ACR Segment contains Adjustments, Credits and Redistributions.											
90	Benefit Adjustment Code	0092	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
			103	Same code received in multiple variable segments	TA	TA	TA	TA	TA	TA	TA	TA
91	Benefit Adjustment Start Date	0094	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
92	Benefit Adjustment End Date	0125	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA

#	Data Element Name	DN#	Error Code	Error Code Description	S5	S6	S7	S8	S9	SD	SJ	UR
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
			038	Must be >= Start Date	TA	TA	TA	TA	TA	TA	TA	TA
93	Benefit Adjustment Weekly Amount	0093	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
94	Benefit Credit Code	0126	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
			103	Same code received in multiple variable segments	TA	TA	TA	TA	TA	TA	TA	TA
95	Benefit Credit Start Date	0127	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
			035	Must be >= Initial Date Disability Began	TA	TA	TA	TA	TA	TA	TA	TA
96	Benefit Credit End Date	0128	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			038	Must be >= Start Date	TA	TA	TA	TA	TA	TA	TA	TA
97	Benefit Credit Weekly Amount	0129	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
98	Benefit Redistribution Code	0130	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
			103	Same code received in multiple variable segments	TA	TA	TA	TA	TA	TA	TA	TA
99	Benefit Redistribution Start Date	0131	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA	TA
			035	Must be >= Initial Date Disability Began	TA	TA	TA	TA	TA	TA	TA	TA
100	Benefit Redistribution End Date	0132	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA	TA
			038	Must be >= Start Date	TA	TA	TA	TA	TA	TA	TA	TA
101	Benefit Redistribution Weekly Amount	0133	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
	Recoveries											
102	Recovery Code	0226	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
			103	Same code received in multiple variable segments	TA	TA	TA	TA	TA	TA	TA	TA
103	Recovery Amount	0225	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
	Reduced Earnings											
104	Reduced Earnings Week Number	0242	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
105	Actual Reduced Earnings	0124	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
106	Deemed Reduced Earnings	0147	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
	Concurrent Employers											
107	Concurrent Employer Name	0141			TA	TA	TA	TA	TA	TA	TA	TA
108	Concurrent Employer Contact Business Phone	0142	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
109	Concurrent Employer Wage	0143	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA
	Denial Reason Code											
110	Full Denial Reason Code	0198	058	Code/ID invalid	TA	TA	TA	TA	TA	TA	TA	TA
	Denial Reasons		103	Same code received in multiple variable segments	TA	TA	TA	TA	TA	TA	TA	TA
111	Full Denial Reason Narrative	0197			TA	TA	TA	TA	TA	TA	TA	TA
	Suspension Narratives											
112	Suspension Narrative	0233			TA	TA	TA	TA	TA	TA	TA	TA

	SROI-R22						
#	Data Element Name	DN#	Error Code	Error Code Description	VE	AN	SA
1	Transaction Set ID	0001	001	Mandatory field not present	TR	TR	TR
			058	Code/ID invalid	TR	TR	TR
2	Maintenance Type Correction Code	0295					
3	Maintenance Type Correction Code Date	0296					
4	Date Claim Administrator Had Knowledge of Lost Time	0298	029	Must be a valid date (CCYYMMDD)	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA
5	Jurisdiction Branch Office Code	0186	058	Code/ID invalid	TA	TA	TA
6	Claim Administratoristrator Claim Number	0015	001	Mandatory field not present	TR	TR	TR
			030	Must be A-Z, 0-9, or spaces	TR	TR	TR
			064	Invalid data relationship	TR	TR	TR
7	Claim Administrator FEIN	0187	001	Mandatory field not present	TR	TR	TR
			028	All digits must be 0-9	TR	TR	TR
			039	No match on database	TR	TR	TR
			040	All digits cannot be the same	TR	TR	TR
			118	Trading Partner not approved to submit data for Insurer/Claim Admin	TR	TR	TR
8	Claim Administrator Name	0188			TA	TA	TA
9	Claim Administrator Claim Representative Name	0140			TA	TA	TA
10	Claim Administrator Claim Representative Business Phone Number	0137	028	All digits must be 0-9	TA	TA	TA
11	Claim Administrator Claim Representative Email Address	0138			TA	TA	TA
12	Claim Administrator Claim Representative Fax Number	0139	028	All digits must be 0-9	TA	TA	TA
13	Employee ID Type Qualifier	0270	058	Code/ID invalid	TR	TR	TR
14	Employee ID						

#	Data Element Name	DN#	Error Code	Error Code Description	VE	AN	SA
15	Employee SSN	0042	028	All digits must be 0-9	TR	TR	TR
			039	No match on database	TR	TR	TR
			040	All digits cannot be the same	TR	TR	TR
16	Employee Employment Visa	0152	028	All digits must be 0-9	TR	TR	TR
17	Employee Green Card	0153	028	All digits must be 0-9	TR	TR	TR
18	Employee ID Assigned by Jurisdiction	0154	040	All digits cannot be the same	TR	TR	TR
19	Employee Passport Number	0156	001	Mandatory field not present	TR	TR	TR
20	Employee Last Name	0043	001	Mandatory field not present	TR	TR	TR
21	Employee First Name	0044	001	Mandatory field not present	TR	TR	TR
22	Employee Middle Name/Initial	0045			TA	TA	TA
23	Employee Last Name Suffix	0255			TA	TA	TA
24	Employee Date of Birth	0052	029	Must be a valid date (CCYYMMDD)	TE	TE	TE
			033	Must be <= Date of Injury	TE	TE	TE
			037	Must be <= Maintenance Type Code Date	TE	TE	TE
			055	Must be < Employee Date of Hire	TE	TE	TE
25	Employee Marital Status Code	0054	058	Code/ID invalid	TA	TA	TA
26	Employee Education Level	0151	028	All digits must be 0-9	TA	TA	TA
27	Employee Number of Entitled Exemptions	0213	028	All digits must be 0-9	TA	TA	TA
28	Employee Tax Filing Status Code	0158	058	Code/ID invalid	TA	TA	TA
29	Death Result of Injury Code	0146	058	Code/ID invalid	TA	TA	TA
30	Insured FEIN	0314	028	All digits must be 0-9	TA	TA	TA
			039	No match on database	TA	TA	TA
			040	All digits cannot be the same	TA	TA	TA
31	Insolvent Insurer FEIN	0292	028	All digits must be 0-9	TA	TA	TA
			039	No match on database	TA	TA	TA
			040	All digits cannot be the same	TA	TA	TA
32	Employer FEIN	0016	028	All digits must be 0-9	TR	TR	TR
			039	No match on database	TR	TR	TR
			040	All digits cannot be the same	TR	TR	TR

#	Data Element Name	DN#	Error Code	Error Code Description	VE	AN	SA
33	Employer Physical Postal Code	0023	039	No match on database	TR	TR	TR
			058	Code/ID invalid	TR	TR	TR
34	Return to Work with Same Employer Indicator	0228	058	Code/ID invalid	TA	TA	TA
35	Date Employer Had Knowledge of Initial Disability	0281	029	Must be a valid date (CCYYMMDD)	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE
36	Non-Consecutive Period Code	0212	058	Code/ID invalid	TA	TA	TA
37	Estimated Gross Weekly Amount Indicator	0172	058	Code/ID invalid	TA	TA	TA
38	Current Date Last Day Worked	0145	029	Must be a valid date (CCYYMMDD)	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA
			037	No match on database	TA	TA	TA
39	Current Date Disability Began	0144	029	Must be a valid date (CCYYMMDD)	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA
			037	No match on database	TA	TA	TA
40	Initial Date Last Day Worked	0065	029	Must be a valid date (CCYYMMDD)	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE
41	Return to Work Type Code	0189	058	Code/ID invalid	TA	TA	TA
42	Physical Restrictions Indicator	0224	058	Code/ID invalid	TA	TA	TA
43	Suspension Effective Date	0193	029	Must be a valid date (CCYYMMDD)	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA
			035	Must be >= Initial Date Disability Began	TA	TA	TA
44	Full Denial Effective Date	0199	029	Must be a valid date (CCYYMMDD)	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA
45	Full Denial Rescission Date	0196	029	Must be a valid date (CCYYMMDD)	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA
46	Partial Denial Code	0294	058	Code/ID invalid	TA	TA	TA
47	Calculated Weekly Compensation Amount	0134	028	All digits must be 0-9	TE	TE	TE
48	Wage Effective Date	0256	029	Must be a valid date (CCYYMMDD)	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA
49	Discontinued Fringe Benefits	0149	028	All digits must be 0-9	TA	TA	TA
50	Type of Loss Code	0290	058	Code/ID invalid	TA	TA	TA
51	Employment Status Code	0058	058	Code/ID invalid	TA	TA	TA
			064	Invalid data relationship	TA	TA	TA
52	Permanent Impairment Minimum Payment Indicator	0223	058	Code/ID invalid	TA	TA	TA
53	Initial Return to Work Date	0068	029	Must be a valid date (CCYYMMDD)	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE
54	Full Wages Paid for Date of Injury Indicator	0066	058	Code/ID invalid	TE	TE	TE
55	Lump Sum Payment/Settlement Code	0293	058	Code/ID invalid	TA	TA	TA

#	Data Element Name	DN#	Error Code	Error Code Description	VE	AN	SA
56	Employer Paid Salary in Lieu of Compensation Indicator	0273	058	Code/ID invalid	TA	TA	TA
57	Average Wage	0286	028	All digits must be 0-9	TA	TA	TA
58	Initial Date of Lost Time	0297	029	Must be a valid date (CCYYMMDD)	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA
59	Award/Order Date	0299	029	Must be a valid date (CCYYMMDD)	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA
	Variable Segment Counters						
60	Number of Benefits	0288	001	Mandatory field not present	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE
			062	Required segment not present	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE
61	Number of Payments	0283	001	Mandatory field not present	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE
			062	Required segment not present	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE
62	Number of Other Benefits	0282	001	Mandatory field not present	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE
			062	Required segment not present	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE
63	Number of Benefit ACR	0289	001	Mandatory field not present	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE
			062	Required segment not present	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE
64	Number of Recoveries	0284	001	Mandatory field not present	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE
			062	Required segment not present	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE
65	Number of Reduced Earnings	0285	001	Mandatory field not present	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE
			062	Required segment not present	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE

#	Data Element Name	DN#	Error Code	Error Code Description	VE	AN	SA
66	Number of Concurrent Employers	0275	001	Mandatory field not present	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE
			062	Required segment not present	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE
67	Number of Full Denial Reason Codes	0277	001	Mandatory field not present	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE
			062	Required segment not present	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE
68	Number of Full Denial Reason Narratives	0276	001	Mandatory field not present	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE
			062	Required segment not present	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE
69	Number of Suspension Narratives	0287	001	Mandatory field not present	TE	TE	TE
			028	All digits must be 0-9	TE	TE	TE
			054	Must be valid occurrence for segment	TE	TE	TE
			062	Required segment not present	TE	TE	TE
			107	Variable segment counter > maximum value allowed	TE	TE	TE
	Variable Segment Benefits						
70	Benefit Type Code	0085	058	Code/ID invalid	TR	TR	TR
71	Maintenance Type Code	0002	001	Mandatory field not present			
			053	No matching First Report of Injury (148)			
			042	Not statutorily valid			
			050	No matching Subsequent Report (A49)			
			057	Duplicate Batch/Transaction			
			058	Code/ID invalid			
			061	Event Table criteria not met			
			063	Invalid event sequence			
			065	Corresponding report/data not found			
			101	MTC not approved for production			
72	Gross Weekly Amount	0174	028	All digits must be 0-9	TA	TA	TA
73	Gross Weekly Amount Effective Date	0175	029	ust be a valid date (CCYYMMDD)	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA
			035	Must be >= Initial Date Disability Began	TA	TA	TA
74	Net Weekly Amount	0087	028	All digits must be 0-9	TA	TA	TA

#	Data Element Name	DN#	Error Code	Error Code Description	VE	AN	SA
75	Net Weekly Amount Effective Date	0211	029	Must be a valid date (CCYYMMDD)	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA
			035	Must be >= Initial Date Disability Began	TA	TA	TA
76	Benefit Period Start Date	0088	029	Must be a valid date (CCYYMMDD)	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE
			035	Must be >= Initial Date Disability Began	TE	TE	TE
77	Benefit Period Through Date	0089	029	Must be a valid date (CCYYMMDD)	TE	TE	TE
			038	Must be >= Start Date	TE	TE	TE
78	Benefit Type Claim Weeks	0090	028	All digits must be 0-9	TE	TR	TR
79	Benefit Type Claim Days	0091	019	Days must be 0-6	TE	TR	TR
			028	All digits must be 0-9	TE	TR	TR
80	Benefit Type Amount Paid	0086	028	All digits must be 0-9	TE	TR	TR
81	Payment Issue Date	0195	029	Must be a valid date (CCYYMMDD)	TE	TR	TR
			034	Must be >= Date of Injury	TE	TR	TR
	Payments						
82	Payment Reason Code	0222	058	Code/ID invalid	TE	TE	TE
			103	Same code received in multiple variable segments	TE	TE	TE
83	Payee	0217			TA	TA	TA
84	Payment Amount	0218	028	All digits must be 0-9	TE	TE	TE
85	Payment Covers Period Start Date	0219	029	Must be a valid date (CCYYMMDD)	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE
86	Payment Covers Period Through Date	0220	029	Must be a valid date (CCYYMMDD)	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE
			038	Must be >= Start Date	TE	TE	TE
87	Payment Issue Date	0195	029	Must be a valid date (CCYYMMDD)	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE
	Other Benefits						
88	Other Benefit Type Code	0216	058	Code/ID invalid	TE	TE	TE
			103	Same code received in multiple variable segments	TE	TE	TE
89	Other Benefit Type Amount	0215	028	All digits must be 0-9	TE	TE	TE
	Benefit-ACR Segment contains Adjustments, Credits and Redistributions.						
90	Benefit Adjustment Code	0092	058	Code/ID invalid	TA	TA	TA
			103	Same code received in multiple variable segments	TA	TA	TA
91	Benefit Adjustment Start Date	0094	029	Must be a valid date (CCYYMMDD)	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA
92	Benefit Adjustment End Date	0125	029	Must be a valid date (CCYYMMDD)	TA	TA	TA

#	Data Element Name	DN#	Error Code	Error Code Description	VE	AN	SA
			034	Must be >= Date of Injury	TA	TA	TA
			038	Must be >= Start Date	TA	TA	TA
93	Benefit Adjustment Weekly Amount	0093	028	All digits must be 0-9	TA	TA	TA
94	Benefit Credit Code	0126	058	Code/ID invalid	TA	TA	TA
			103	Same code received in multiple variable segments	TA	TA	TA
95	Benefit Credit Start Date	0127	029	Must be a valid date (CCYYMMDD)	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA
			035	Must be >= Initial Date Disability Began	TA	TA	TA
96	Benefit Credit End Date	0128	029	Must be a valid date (CCYYMMDD)	TA	TA	TA
			038	Must be >= Start Date	TA	TA	TA
97	Benefit Credit Weekly Amount	0129	028	All digits must be 0-9	TA	TA	TA
98	Benefit Redistribution Code	0130	058	Code/ID invalid	TA	TA	TA
			103	Same code received in multiple variable segments	TA	TA	TA
99	Benefit Redistribution Start Date	0131	029	Must be a valid date (CCYYMMDD)	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA
			035	Must be >= Initial Date Disability Began	TA	TA	TA
100	Benefit Redistribution End Date	0132	029	Must be a valid date (CCYYMMDD)	TA	TA	TA
			038	Must be >= Start Date	TA	TA	TA
101	Benefit Redistribution Weekly Amount	0133	028	All digits must be 0-9	TA	TA	TA
	Recoveries						
102	Recovery Code	0226	058	Code/ID invalid	TA	TA	TA
			103	Same code received in multiple variable segments	TA	TA	TA
103	Recovery Amount	0225	028	All digits must be 0-9	TA	TA	TA
	Reduced Earnings						
104	Reduced Earnings Week Number	0242	028	All digits must be 0-9	TA	TA	TA
105	Actual Reduced Earnings	0124	028	All digits must be 0-9	TA	TA	TA
106	Deemed Reduced Earnings	0147	028	All digits must be 0-9	TA	TA	TA
	Concurrent Employers						
107	Concurrent Employer Name	0141			TA	TA	TA
108	Concurrent Employer Contact Business Phone	0142	028	All digits must be 0-9	TA	TA	TA
109	Concurrent Employer Wage	0143	028	All digits must be 0-9	TA	TA	TA
	Denial Reason Code						
110	Full Denial Reason Code	0198	058	Code/ID invalid	TA	TA	TA
	Denial Reasons		103	Same code received in multiple variable segments	TA	TA	TA
111	Full Denial Reason Narrative	0197			TA	TA	TA
	Suspension Narratives						
112	Suspension Narrative	0233			TA	TA	TA