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#	Data Element Name	DN#	Error Code	Error Code Description	02	04	AP	CA	CB	CD	EP	ER	FN	IP	PD	PY
1	Transaction Set ID	0001	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			058	Code/ID invalid	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
2	Maintenance Type Code	0002	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			053	No matching First Report (148)	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			042	Not statutorily valid	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			050	No matching Subsequent Report (A49)	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			057	Duplicate transmission / transaction	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			058	Code/ID invalid	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			061	Event Table criteria not met	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			063	Invalid event sequence	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			065	Corresponding report/data not found	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			101	MTC not approved for production	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
3	Maintenance Type Code Date	0003	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			029	Must be a valid date (CCYYMMDD)	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			034	Must be >= Date of Injury	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			041	Must be <= current date	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			045	Value is less than required by the Jurisdiction	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
4	Jurisdiction Code	0004	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			058	Invalid Code, ID or Value	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
5	Insurer FEIN	0006	001	Mandatory field not present	TR	TR	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	TR	TR
			040	All digits cannot be the same	TR	TR	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	TR	TR
6	Claim Administrator Mailing Postal Code	0014	001	Mandatory field not present	TR	TR	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	TR	TR
			040	All digits cannot be same	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			058	Invalid Code, ID or Value	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
7	Employee Number of Dependents	0055	028	Must be Numeric (0 - 9)	TE	TE	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	PD	PY
8	Pre-existing Disability Code	0069	058	Invalid Code, ID or Value	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
9	Initial Date Disability Began	0056	029	Must be a valid date (CCYYMMDD)	TE	TE	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	TE	TE
			037	Must be less than equal to MTC date	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			041	Must be <= current date	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			036	Must be <= Employee Date of Death	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			105	Must be <= Current Date Disability Began	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			112	Must be >=Initial Date Last Day Worked	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
10	Date of Maximum Medical Improvement	0070	029	Must be a valid date (CCYYMMDD)	TA	TA	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	TA	TA
11	Current Return to Work Date	0072	029	Must be a valid date (CCYYMMDD)	TE	TE	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	TE	TE
			113	Must be >= Initial Return to Work Date	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			114	Must be >= Current Date Last Day Worked	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
12	Employee Date of Death	0057	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TR	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TR	TE	TE	TE	TE	TE	TE
			037	Must be <= Maintenance Type Code Date	TE	TE	TE	TE	TE	TR	TE	TE	TE	TE	TE	TE
13	Wage Period Code	0063	058	Invalid Code, ID or Value	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
14	Number of Days Worked Per Week	0064	018	Number of Days Worked must be 0-7	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			028	Must be Numeric (0 - 9)	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
15	Date of Injury	0031	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			029	Must be a valid date (CCYYMMDD)	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			036	Must be <= Employee Date of Death	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			037	Must be less than or equal to MTC Date	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			041	Must be less than or equal to current date	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			102	Must be <= Initial Date Disability Began	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			105	Must be <= Current Date Disability Began	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			109	Must be >=Employee Date of Hire	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			110	Date Must be >= Jurisdiction Implementation Date	TR	TR	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	PD	PY
16	Insured Report Number	0026	030	Must be A-Z, 0-9, or spaces	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
17	Claim Administrator Claim Number	0015	001	Mandatory field not present	TR	TR	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	TR	TR
			064	Invalid data relationship	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
18	Jurisdiction Claim Number	0005	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			028	Must be numeric (0 - 9)	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			058	Invalid Code, ID or Value	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
19	Claim Status Code	0073	058	Invalid Code, ID or Value	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
20	Claim Type Code	0074	058	Invalid Code, ID or Value	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
21	Agreement to Compensate Code	0075	058	Invalid Code, ID or Value	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
22	Date Claim Administrator Notified of Employee Representation	0076	029	Must be a valid date (CCYYMMDD)	TA	TA	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	TA	TA
			037	Must be <= Maintenance Type Code Date	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
23	Late Reason Code	0077	058	Invalid Code, ID or Value	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
	Variable Segment Counters															
23	Number of Permanent Impairments	0078	001	Mandatory field not present	TR	TR	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	TR	TR
24	Number of Death Dependent/Payee Relationships	0082	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			054	Must be valid occurrence for segment	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			062	Required segment not present	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			107	Variable segment counter > maximum value allowed	TE	TE	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	PD	PY
	Variable Segments-Permanent Impairments															
25	Permanent Impairment Body Part Code	0083	058	Invalid Code, ID or Value	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			103	Same code received in multiple variable segments	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
26	Permanent Impairment Percentage	0084	028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
	Death/Dependent/Payee Relationship															
27	Dependent/Payee Relationship Code	0097	058	Invalid Code, ID or Value	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA

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#	Data Element Name	DN#	Error Code	Error Code Description	RB	RE	S1	S2	S3	S4	S5	S6	S7	S8
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 Code	0002	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			053	No matching First Report (148)	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			042	Not statutorily valid	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			050	No matching Subsequent Report (A49)	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			057	Duplicate transmission / transaction	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			058	Code/ID invalid	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			061	Event Table criteria not met	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			063	Invalid event sequence	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			065	Corresponding report/data not found	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			101	MTC not approved for production	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
3	Maintenance Type Code Date	0003	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			029	Must be a valid date (CCYYMMDD)	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			034	Must be >= Date of Injury	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			041	Must be <= current date	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			045	Value is less than required by the Jurisdiction	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
4	Jurisdiction Code	0004	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			058	Invalid Code, ID or Value	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
5	Insurer FEIN	0006	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
			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
6	Claim Administrator Mailing Postal Code	0014	001	Mandatory field not present	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 same	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			058	Invalid Code, ID or Value	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
7	Employee Number of Dependents	0055	028	Must be Numeric (0 - 9)	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE

#	Data Element Name	DN#	Error Code	Error Code Description	RB	RE	S1	S2	S3	S4	S5	S6	S7	S8
8	Pre-existing Disability Code	0069	058	Invalid Code, ID or Value	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
9	Initial Date Disability Began	0056	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
			037	Must be less than equal to MTC date	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			041	Must be <= current date	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			036	Must be <= Employee Date of Death	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			105	Must be <= Current Date Disability Began	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			112	Must be >=Initial Date Last Day Worked	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
10	Date of Maximum Medical Improvement	0070	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
11	Current Return to Work Date	0072	029	Must be a valid date (CCYYMMDD)	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
			113	Must be >= Initial Return to Work Date	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			114	Must be >= Current Date Last Day Worked	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
12	Employee Date of Death	0057	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
			037	Must be <= Maintenance Type Code Date	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
13	Wage Period Code	0063	058	Invalid Code, ID or Value	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
14	Number of Days Worked Per Week	0064	018	Number of Days Worked must be 0-7	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			028	Must be Numeric (0 - 9)	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
15	Date of Injury	0031	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			029	Must be a valid date (CCYYMMDD)	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			036	Must be <= Employee Date of Death	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			037	Must be less than or equal to MTC Date	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			041	Must be less than or equal to current date	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			102	Must be <= Initial Date Disability Began	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			105	Must be <= Current Date Disability Began	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			109	Must be >=Employee Date of Hire	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			110	Date Must be >= Jurisdiction Implementation Date	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR

#	Data Element Name	DN#	Error Code	Error Code Description	RB	RE	S1	S2	S3	S4	S5	S6	S7	S8
16	Insured Report Number	0026	030	Must be A-Z, 0-9, or spaces	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
17	Claim Administrator 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
18	Jurisdiction Claim Number	0005	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			028	Must be numeric (0 - 9)	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
			058	Invalid Code, ID or Value	TR	TR	TR	TR	TR	TR	TR	TR	TR	TR
19	Claim Status Code	0073	058	Invalid Code, ID or Value	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
20	Claim Type Code	0074	058	Invalid Code, ID or Value	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
21	Agreement to Compensate Code	0075	058	Invalid Code, ID or Value	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
22	Date Claim Administrator Notified of Employee Representation	0076	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	Must be <= Maintenance Type Code Date	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
23	Late Reason Code	0077	058	Invalid Code, ID or Value	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
	Variable Segment Counters													
23	Number of Permanent Impairments	0078	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
24	Number of Death Dependent/Payee Relationships	0082	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			054	Must be valid occurrence for segment	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			062	Required segment not present	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA
			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	RB	RE	S1	S2	S3	S4	S5	S6	S7	S8
	Variable Segments-Permanent Impairments													
25	Permanent Impairment Body Part Code	0083	058	Invalid Code, ID or Value	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
			103	Same code received in multiple variable segments	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
26	Permanent Impairment Percentage	0084	028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE	TE	TE	TE
	Death/Dependent/Payee Relationship													
27	Dependent/Payee Relationship Code	0097	058	Invalid Code, ID or Value	TA	TA	TA	TA	TA	TA	TA	TA	TA	TA

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#	Data Element Name	DN#	Error Code	Error Code Description	S9	SD	SJ	UR	VE	AN	SA
1	Transaction Set ID	0001	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR
			058	Code/ID invalid	TR	TR	TR	TR	TR	TR	TR
2	Maintenance Type Code	0002	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR
			053	No matching First Report (148)	TR	TR	TR	TR	TR	TR	TR
			042	Not statutorily valid	TR	TR	TR	TR	TR	TR	TR
			050	No matching Subsequent Report (A49)	TR	TR	TR	TR	TR	TR	TR
			057	Duplicate transmission / transaction	TR	TR	TR	TR	TR	TR	TR
			058	Code/ID invalid	TR	TR	TR	TR	TR	TR	TR
			061	Event Table criteria not met	TR	TR	TR	TR	TR	TR	TR
			063	Invalid event sequence	TR	TR	TR	TR	TR	TR	TR
			065	Corresponding report/data not found	TR	TR	TR	TR	TR	TR	TR
			101	MTC not approved for production	TR	TR	TR	TR	TR	TR	TR
3	Maintenance Type Code Date	0003	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR
			029	Must be a valid date (CCYYMMDD)	TR	TR	TR	TR	TR	TR	TR
			034	Must be >= Date of Injury	TR	TR	TR	TR	TR	TR	TR
			041	Must be <= current date	TR	TR	TR	TR	TR	TR	TR
			045	Value is less than required by the Jurisdiction	TR	TR	TR	TR	TR	TR	TR
4	Jurisdiction Code	0004	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR
			058	Invalid Code, ID or Value	TR	TR	TR	TR	TR	TR	TR
5	Insurer FEIN	0006	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR
			028	All digits must be 0-9	TR	TR	TR	TR	TR	TR	TR
			040	All digits cannot be the same	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
6	Claim Administrator Mailing Postal Code	0014	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR
			039	No Match on database	TR	TR	TR	TR	TR	TR	TR
			040	All digits cannot be same	TR	TR	TR	TR	TR	TR	TR
			058	Invalid Code, ID or Value	TR	TR	TR	TR	TR	TR	TR
7	Employee Number of Dependents	0055	028	Must be Numeric (0 - 9)	TE	TE	TE	TE	TE	TE	TE

#	Data Element Name	DN#	Error Code	Error Code Description	S9	SD	SJ	UR	VE	AN	SA
8	Pre-existing Disability Code	0069	058	Invalid Code, ID or Value	TA	TA	TA	TA	TA	TA	TA
9	Initial Date Disability Began	0056	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE
			037	Must be less than equal to MTC date	TE	TE	TE	TE	TE	TE	TE
			041	Must be <= current date	TE	TE	TE	TE	TE	TE	TE
			036	Must be <= Employee Date of Death	TE	TE	TE	TE	TE	TE	TE
			105	Must be <= Current Date Disability Began	TE	TE	TE	TE	TE	TE	TE
			112	Must be >=Initial Date Last Day Worked	TE	TE	TE	TE	TE	TE	TE
10	Date of Maximum Medical Improvement	0070	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA
11	Current Return to Work Date	0072	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE
			035	Must be >= Initial Date Disability Began	TE	TE	TE	TE	TE	TE	TE
			113	Must be >= Initial Return to Work Date	TE	TE	TE	TE	TE	TE	TE
			114	Must be >= Current Date Last Day Worked	TE	TE	TE	TE	TE	TE	TE
12	Employee Date of Death	0057	029	Must be a valid date (CCYYMMDD)	TE	TE	TE	TE	TE	TE	TE
			034	Must be >= Date of Injury	TE	TE	TE	TE	TE	TE	TE
			037	Must be <= Maintenance Type Code Date	TE	TE	TE	TE	TE	TE	TE
13	Wage Period Code	0063	058	Invalid Code, ID or Value	TR	TR	TR	TR	TR	TR	TR
14	Number of Days Worked Per Week	0064	018	Number of Days Worked must be 0-7	TE	TE	TE	TE	TE	TE	TE
			028	Must be Numeric (0 - 9)	TE	TE	TE	TE	TE	TE	TE
15	Date of Injury	0031	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR
			029	Must be a valid date (CCYYMMDD)	TR	TR	TR	TR	TR	TR	TR
			036	Must be <= Employee Date of Death	TR	TR	TR	TR	TR	TR	TR
			037	Must be less than or equal to MTC Date	TR	TR	TR	TR	TR	TR	TR
			041	Must be less than or equal to current date	TR	TR	TR	TR	TR	TR	TR
			102	Must be <= Initial Date Disability Began	TR	TR	TR	TR	TR	TR	TR
			105	Must be <= Current Date Disability Began	TR	TR	TR	TR	TR	TR	TR
			109	Must be >=Employee Date of Hire	TR	TR	TR	TR	TR	TR	TR
			110	Date Must be >= Jurisdiction Implementation Date	TR	TR	TR	TR	TR	TR	TR

#	Data Element Name	DN#	Error Code	Error Code Description	S9	SD	SJ	UR	VE	AN	SA
16	Insured Report Number	0026	030	Must be A-Z, 0-9, or spaces	TA	TA	TA	TA	TA	TA	TA
17	Claim Administrator Claim Number	0015	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR
			030	Must be A-Z, 0-9, or spaces	TR	TR	TR	TR	TR	TR	TR
			064	Invalid data relationship	TR	TR	TR	TR	TR	TR	TR
18	Jurisdiction Claim Number	0005	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR
			028	Must be numeric (0 - 9)	TR	TR	TR	TR	TR	TR	TR
			058	Invalid Code, ID or Value	TR	TR	TR	TR	TR	TR	TR
19	Claim Status Code	0073	058	Invalid Code, ID or Value	TE	TE	TE	TE	TE	TE	TE
20	Claim Type Code	0074	058	Invalid Code, ID or Value	TE	TE	TE	TE	TE	TE	TE
21	Agreement to Compensate Code	0075	058	Invalid Code, ID or Value	TA	TA	TA	TA	TA	TA	TA
22	Date Claim Administrator Notified of Employee Representation	0076	029	Must be a valid date (CCYYMMDD)	TA	TA	TA	TA	TA	TA	TA
			034	Must be >= Date of Injury	TA	TA	TA	TA	TA	TA	TA
			037	Must be <= Maintenance Type Code Date	TA	TA	TA	TA	TA	TA	TA
23	Late Reason Code	0077	058	Invalid Code, ID or Value	TA	TA	TA	TA	TA	TA	TA
	Variable Segment Counters										
23	Number of Permanent Impairments	0078	001	Mandatory field not present	TR	TR	TR	TR	TR	TR	TR
			028	All digits must be 0-9	TR	TR	TR	TR	TR	TR	TR
24	Number of Death Dependent/Payee Relationships	0082	028	All digits must be 0-9	TA	TA	TA	TA	TA	TA	TA
			054	Must be valid occurrence for segment	TA	TA	TA	TA	TA	TA	TA
			062	Required segment not present	TA	TA	TA	TA	TA	TA	TA
			107	Variable segment counter > maximum value allowed	TE	TE	TE	TE	TE	TE	TE

#	Data Element Name	DN#	Error Code	Error Code Description	S9	SD	SJ	UR	VE	AN	SA
	Variable Segments-Permanent Impairments										
25	Permanent Impairment Body Part Code	0083	058	Invalid Code, ID or Value	TE	TE	TE	TE	TE	TE	TE
			103	Same code received in multiple variable segments	TE	TE	TE	TE	TE	TE	TE
26	Permanent Impairment Percentage	0084	028	All digits must be 0-9	TE	TE	TE	TE	TE	TE	TE
	Death/Dependent/Payee Relationship										
27	Dependent/Payee Relationship Code	0097	058	Invalid Code, ID or Value	TA	TA	TA	TA	TA	TA	TA