

EDI Filing in Georgia

In Georgia, we accept filings three ways: online via ICMS; via EDI; and in paper.

All information regarding EDI filing in GA may be found on our website at:

<https://sbwc.georgia.gov/organization/about-state-board-workers-compensation/icms/edi-implementation>

This includes the three tables that provide our requirements and filing instructions: Event Table; Element Requirement Table; and the Edit Matrix. The website also includes copies of the data mapping for Board Forms WC-1, WC-2, WC-2A, WC-3 and WC-4 which are created with the transactional data sent through EDI. There are data mapping documents for each EDI transaction (MTC) that we accept in Georgia. Finally, any announcements or documentation that reference EDI are also posted here.

- There are three claim type codes accepted in GA:
 - 1) M (medical only): less than 7 days of lost time; indemnity benefits are not due and have not been controverted.
 - 2) I (indemnity): more than 7 days of lost time; indemnity benefits are due and being paid or controverted.
 - 3) W (lost time with no paid indemnity): more than 7 days of lost time; indemnity benefits are due, but have been controverted.
- When filing a FROI 00, if claim type M is sent, it will generate a complete WC-1 First Report of Injury with Section D checked and will be visible in ICMS immediately.
- If claim type code I or W is sent, the appropriate SROI transaction (SROI EP, IP, PD, 04) must be sent within 21 days of the FROI 00 file date and once the SROI is accepted, it will generate a complete WC-1 with Section B (SROI EP or IP) or Section C (SROI PD or 04) completed. **A FROI 00 sent with claim type code I or W is not a complete WC-1. It does not generate any Board form and is not visible in ICMS.** If the appropriate SROI is not filed within 21 days of the FROI 00 file date, the FROI 00 will expire and the claims office will have to start over with a new FROI 00. The claim type code may not be changed on a FROI 02. If the wrong claim type code is sent, the claims office must wait 21 days for the FROI 00 to expire at which time they may refile the FROI 00 with the correct claim type code.
- We do not use DN0017 INSURED NAME in Georgia. The correct employer name must be sent in DN0018 EMPLOYER NAME.
- **Data quality is very important. Invalid dates of birth, i.e. < 1/1/1921; addresses/names which include UNKNOWN, UNK, or NOT PROVIDED; names sent with numeric characters; and phone numbers sent with all of the same digits will reject for “MUST BE VALID CONTENT.” The Employer/Insurer have 21 days from the employer’s knowledge of disability, injury or death to file a completed WC-1 with the SBWC. Please do not send a FROI 00 or FROI 04 within 1-5 days of the DOI if the required information is not yet available.**
- MTC 02 must be included in the event benefit segment for SROI 02 changes.

- Once an indemnity benefit has been reported and suspended, the claims office can no longer make changes to that benefit period via EDI due to strict sequencing guidelines established by IAIABC. Claims offices must file a WC-2 Amend in paper or on ICMS and then send the correct benefits on the next SROI AN or FN.
- All active benefits must be suspended prior to filing an FN.
- If death/dependency benefits (010) are being paid, a form WC-2A must be filed in paper with the dependent information as we do not receive this information via EDI in R3.0.
- Please do not send abbreviations for street or city names. Do not send SPGS for SPRINGS. Do not send PTREE for Peachtree; DNWDY for Dunwoody; CHBL for Chamblee, etc. Utilize secondary address fields if additional space is needed.
- Please stay consistent with reporting ROAD vs RD; STREET vs ST; PARKWAY vs PKWY; AVENUE vs AVE; CIRCLE vs CIR, etc. We receive a significant number of FROI 02 changes where the only change in the address is one of the above which is not a change.
- There are 6 Georgia cities whose names are longer than the 15 characters allotted: Peachtree Corners; Avondale Estates; Franklin Springs; Chattahoochee Hills; Lookout Mountain; and North High Shoals. Each of these should be sent in 15 characters, i.e. PEACHTREE CORNE; AVONDALE ESTATE; FRANKLIN SPRING; CHATTAHOOCHEE H; LOOKOUT MOUNTAI; and NORTH HIGH SHOA. We are correcting these in our database on a regular basis, so addresses are correct in our claim files.
- If TPD (temporary partial disability) benefits are reported, a form WC-262 Wage Documentation of Temporary Partial Disability Payments is required.
- If TTD (temporary total disability) benefits are being paid at a rate less than the maximum for the date of injury, a WC-6 Wage Statement is required.
- If filing a transaction via EDI that requires an attachment, the appropriate form **MUST BE FILED SIMULTANEOUSLY with the attachment via paper or on ICMS.**
- To reopen a claim file that was previously closed via SROI FN (WC-4 Final), please send a completed WC-4 with reopen checked at the top via paper or on ICMS. Once the WC-4 is filed, then you may trigger an EP/IP/ER/RB via EDI.
- Each claims office must submit a Trading Partner Profile and Insurer ID List when beginning to file via EDI, when a change is requested, or when changing EDI vendors. Please note, the connection between the insurer, self-insurer, or group fund and the claims office is extremely important in GA. It is the insurer, self-insurer or group fund's responsibility to notify the Board any time they want to add or terminate and replace an authorized claims office via WC-121 Notice to Change of Servicing Agent. The Trading Partner documents do not have the authority to make this change. No change will be made in EDI until the WC-121 is accepted and processed by the Board and the ICMS licensure database is updated accordingly.

Any questions regarding EDI filing should be directed to our EDI Department via phone (404) 656-3818 or (800) 533-0682 or email to EDI@sbwc.ga.gov.

EDI Form Crosswalk

First Report of Injury (FROI - 148 & R21) and Subsequent Report of Injury (SROI A49 & R22)						
Refer to Systems Rules - Transmissions						
Report Type	Paper Equivalent Form(s)	Comments	MTC	MTC Description	MTC Definition	Will this report be accepted electronically? (Yes/No)
FROI	N/A	***The WC-1 First Report of Injury is created by the combination of a FROI 00 + appropriate SROI transaction when claim type code is not 'M'.	00	Original	The original/initial first report transmitted between partners, including the re-transmission of a first report that was rejected due to a critical error.	Yes
FROI	WC-1 First Report of Injury	*** WC-1 First Report of Injury is created by FROI 00 in case of claim type code = 'M'. (Medical Only)	00	Original - Medical Only	The original/initial first report transmitted between partners, including the re-transmission of a first report that was rejected due to a critical error.	Yes
FROI	N/A	***There is no method to cancel a claim after 10 days or once a claim has been created in our system by the filing of one of the following: FROI 00 or FROI AU with claim type code M (medical only); FROI 04 (controvert of entire claim); FROI AU + SROI 04 (controvert of entire claim - takeover); FROI 00 + SROI IP/EP (indemnity benefits paid); FROI AU + AP (indemnity benefits paid - takeover claim.	01	Cancel	The original first report was sent in error. If a claim has already been created in our system, you may not cancel it, but must file FN to close.	Yes

FROI	WC-1 First Report of Injury (Amended)		02	Change	The claim administrator initiates a Change MTC when it identifies a change in a data element designated on the Element Requirement Table.	Yes
FROI	WC-1 First Report of Injury		04	Denial	The entire claim is being denied.	Yes
FROI	WC-4 Case Progress Report		AQ	Acquired Claim	Minimal data sent to report that a new claim administrator has acquired the claim.	Yes
FROI	N/A	***The WC-1 First Report of Injury is created by the combination of a FROI AU + appropriate SROI transaction when claim type code is not 'M'.	AU	Acquired/Unallocated	The equivalent of an initial first report (MTC 00) filed by a new claim administrator in response to an AQ transaction that has been rejected because of no claim match on database or when an AU is sent in lieu of an AQ based on the Jurisdiction's Event Table.	Yes
FROI	WC-1 First Report of Injury		AU	Acquired/Unallocated - Medical Only	The equivalent of an initial first report (MTC 00) filed by a new claim administrator in response to an AQ transaction that has been rejected because of no claim match on database or when an AU is sent in lieu of an AQ based on the Jurisdiction's Event Table.	Yes

SROI	WC-2 Notice of Payment or Suspension of Benefits (Amended)		02	Change	The claim administrator initiates a Change MTC when it identifies a change in a data element designated on the Element Requirement Table.	Yes
SROI	WC-3 Notice to Controvert -OR- WC-1 First Report of Injury	***A WC-1 is created by the filing of a FROI 00 and a SROI 04. If a completed WC-1 was already filed through EDI, then the 04 will create a WC-3.	04	Denial	The entire claim is being denied.	Yes
SROI	WC-1 First Report of Injury -OR- WC-2 Notice of Payment or Suspension of Benefits	***A WC-1 is created by the filing of a AU (not claim type M) + SROI AP. If AP follows AQ or AU (M), it will create a WC-2.	AP	Acquired/ Payment	The claim administrator who acquired the claim has processed AP Acquired/Payment – the first payment of indemnity benefits.	Yes
SROI	WC-2 Notice of Payment or Suspension	***When suspending the current benefit and commencing a different type of indemnity with no break in between.	CB	Change in Benefit Type	A benefit type being paid has changed and payments are being continued under a different benefit type without a break in continuity of benefits.	Yes
SROI	WC-1 First Report of Injury -OR- WC-2 Notice of Payment or Suspension of Benefits	***A WC-1 is created by the filing of a FROI 00 and a SROI EP. If a completed WC-1 was already filed through EDI, then the EP will create a WC-2.	EP	Employer Paid	The employer is paying the injured employee's salary in lieu of compensation, and the claim administrator is not paying any indemnity benefits at this time.	Yes
SROI	WC-2 Notice of Payment or Suspension of Benefits		ER	Employer Reinstatement	The employer has resumed paying the injured employee's salary in lieu of	Yes

					compensation, and the claim administrator is not paying any indemnity benefits at this time.	
SROI	WC-4 Case Progress Report		FN	Final	Closed claim, no further payments of any kind anticipated.	Yes
SROI	WC-1 First Report of Injury -OR- WC-2 Notice of Payment or Suspension of Benefits	***A WC-1 is created by the filing of a FROI 00 and a SROI IP. If a completed WC-1 was already filed through EDI, then the IP will create a WC-2.	IP	Initial Payment	The first payment for an indemnity benefit other than a settlement has been issued by a claim administrator.	Yes
SROI	WC-3 Notice to Controvert -OR- WC-1 First Report of Injury	***A WC-1 is created by the filing of a FROI 00 and a SROI PD. If a completed WC-1 was already filed through EDI, then the PD will create a WC-3.	PD	Partial Denial	A specific benefit(s) has been denied.	Yes
SROI	WC-4 Case Progress Report		PY	Payment Report	Identifies payment information for which reporting is required by the jurisdiction.	Yes
SROI	WC-2 Notice of Payment or Suspension of Benefits		RB	Reinstatement of Benefits	Indemnity payments have been resumed, but the reinstated benefit type may or may not have been paid previously.	Yes
SROI	WC-2 Notice of Payment or Suspension of Benefits		S1	Suspension, RTW, or Medically Determined/Qualified RTW	All payments of indemnity benefits have stopped because the employee has returned to work or has been medically determined qualified to return to work.	Yes

SROI	WC-2 Notice of Payment or Suspension of Benefits		S2	Suspension, Medical Non-compliance	All payments of indemnity benefits have stopped because of medical non-compliance.	Yes
SROI	WC-2 Notice of Payment or Suspension of Benefits		S3	Suspension, Administrative Non-compliance	All payments of indemnity benefits have stopped because of administrative non-compliance.	Yes
SROI	WC-2 Notice of Payment or Suspension of Benefits		S4	Suspension, Claimant Death	All payments of indemnity benefits have stopped because the employee has died.	Yes
SROI	WC-2 Notice of Payment or Suspension of Benefits		S5	Suspension, Incarceration	All payments of indemnity benefits have stopped because the employee has been incarcerated.	Yes
SROI	WC-2 Notice of Payment or Suspension of Benefits		S6	Suspension, Claimant's Whereabouts Unknown	All payments of indemnity benefits have stopped because the employee's whereabouts are unknown.	Yes
SROI	WC-2 Notice of Payment or Suspension of Benefits		S7	Suspension, Benefits Exhausted	All payments of indemnity benefits have stopped because limits of benefit or entitlement have been reached.	Yes
SROI	WC-2 Notice of Payment or Suspension of Benefits		S8	Suspension, Jurisdiction Change	All payments of indemnity benefits have stopped because the jurisdiction has been changed.	Yes
SROI	WC-2 Notice of Payment or Suspension of Benefits		SD	Suspension, Directed by Jurisdiction	All payments of indemnity benefits have stopped per jurisdiction order.	Yes

SROI Periodic Report	WC-4 Case Progress Report	*****Per GA Board Rules, a WC-4 Case Progress Report must be filed within a year of the date of injury and within 90 days of a claim takeover and annually from the file date of the last accepted AN.	AN	Annual	Submitted at yearly intervals based on the report trigger criteria column located on the jurisdiction's Event Table.Periodic Reports are subsequent Reports that commence and terminate according to Trading Partner Table options, and repeat at specified intervals during the period.	Yes
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***Any payment or suspension transaction sent with benefit type code 010 (death benefits) will create a WC-2A instead of a WC-2.