Workers Compensation Insurance Organizations, Inc.

**WCIO Workers Compensation Data
Specifications**

**ELECTRONIC TRANSMITTAL RECORD
SPECIFICATIONS**

Summary of Changes: No changes in this version.

TOPIC/ FIELD NAME	SUBJECT HEADING	POSITION
A		
ADDRESS OF CONTACT - CITY	Electronic Transmittal Record	198-227
ADDRESS OF CONTACT - STATE	Electronic Transmittal Record	228-229
ADDRESS OF CONTACT - STREET	Electronic Transmittal Record	138-197
ADDRESS OF CONTACT - ZIP CODE	Electronic Transmittal Record	230-238
D		
DATA PROVIDER CODE	Electronic Transmittal Record	73-77
DATA PROVIDER CONTACT EMAIL ADDRESS	Electronic Transmittal Record	15-45
DATA PROVIDER TYPE CODE	Electronic Transmittal Record	239-239
DATA RECEIVER CODE	Electronic Transmittal Record	51-55
DATA TYPE CODE	Electronic Transmittal Record	48-50
F		
FAX NUMBER	Electronic Transmittal Record	120-129
L		
LABEL	Electronic Transmittal Record	1-14
N		
NAME OF DATA PROVIDER CONTACT	Electronic Transmittal Record	78-102
P		
PHONE NUMBER	Electronic Transmittal Record	104-113
PHONE NUMBER EXTENSION	Electronic Transmittal Record	114-119
PROCESSED DATE	Electronic Transmittal Record	130-137
R		
RECORD TYPE CODE	Electronic Transmittal Record	46-47
RESERVED FOR FUTURE USE	Electronic Transmittal Record	103-103
	Electronic Transmittal Record	249-249
	Electronic Transmittal Record	250-350
S		
SUBMISSION REPLACEMENT IDENTIFIER	Electronic Transmittal Record	65-72
SUBMISSION TYPE CODE	Electronic Transmittal Record	64-64
T		
THIRD PARTY ENTITY (TPE/TPA/MGA) FEDERAL EMPLOYER IDENTIFICATION NUMBER (FEIN)	Electronic Transmittal Record	240-248
TRANSMISSION VERSION IDENTIFIER	Electronic Transmittal Record	56-63

Field No.	Field Title/Description	Class	Position	Bytes

ELECTRONIC TRANSMITTAL RECORD

| 1 | **LABEL** | AN | 1-14 | 14 |

NOT APPLICABLE: NCCI

Report the first 14 characters as $!+WORKCOMP+!$. This is a constant.

This will be used by Value Added Networks to determine that this is a transmittal record for workers compensation.

| 2 | **DATA PROVIDER CONTACT EMAIL ADDRESS** | AN | 15-45 | 31 |

NOT APPLICABLE: NCCI, NY
OPTIONAL: MI, MN, WI

Report the email address of the individual who should be contacted regarding submission or transmission problems and questions and error reports.

For email addresses longer than 31 positions, leave blank and report the email address in positions 138-238, Address of Contact.

| 3 | **RECORD TYPE CODE** | AN | 46-47 | 2 |

NOT APPLICABLE: NCCI

Report "__" (fill with two (2) blanks).

| 4 | **DATA TYPE CODE** | AN | 48-50 | 3 |

NOT APPLICABLE: NCCI

Report the code that defines the type of information contained in the submission.

The first two (2) bytes are always "WC". The third byte defines the type of information contained in the submission.

Code	Description
A	Reserved for Future Use
C	Unit Report Control (WCCNTL) N/A: NCCI
E	Reserved for Future Use
F	Reserved for Future Use
G	WCCRIT for WCPOLS
I	Indemnity Call (WCIND)
L	WCCRIT for WCSTAT
M	WCMED
N	WCNOA

Field No.	Field Title/Description	Class	Position	Bytes

	O	WCCPAP Worksheet (WCCPAP)			
	P	Policy (WCPOLS)			
	R	Experience Rating Worksheet (WCRATING)			
	S	Unit Report (WCSTAT)			

5   **DATA RECEIVER CODE**   N   51-55   5

NOT APPLICABLE: NCCI

Report the state code of the DCO receiving the information.

When used as electronic confirmation of receipt and processing of electronic submission, this field will contain the code assigned to the data provider that originated the submission.

Code	Description
00004	California
00007	Delaware
00020	Massachusetts
00021	Michigan
00022	Minnesota
00029	New Jersey
00031	New York
00032	North Carolina
00037	Pennsylvania
00048	Wisconsin
00099	NCCI

6   **TRANSMISSION VERSION IDENTIFIER**   AN   56-63   8

NOT APPLICABLE: NCCI

Report the series of characters used to sequence file transmissions.

Example: "96281V01" is the first transmission of data on October 7, 1996.

For file transmissions, the Julian date is in the first five positions followed by the constant letter "V" in the sixth position, followed by the version number of the transmission in the seventh and eighth positions.

For each subsequent transmission sent with the same date to the same DCO, the version is incremented by 1 (e.g., "96281V02").

7   **SUBMISSION TYPE CODE**   A   64-64   1

Field No.	Field Title/Description	Class	Position	Bytes

NOT APPLICABLE: NCCI

Report the code describing the type of submission.

Code	Description
R	Resubmission Due to DCO Rejection N/A: CA, DE, MA, MN, NC, NJ, PA
S	Standard Submission
T	Test Submission
V	Replaced - Processed by DCO, but Replaced by Insurer N/A: CA, DE, MA, MN, NC, NJ, NY, PA, WI
W	For Bureau Use Only N/A: CA, DE, MI, MN, NC, NCCI, NJ, NY, PA

8   SUBMISSION REPLACEMENT IDENTIFIER   AN   65-72   8

NOT APPLICABLE: CA, MA, MN, NC, NCCI, NJ

Report the unique identifier belonging to the submission being replaced.

If submission type is an "R" (resubmission), indicate the media identifier number or transmission version identifier of the submission being replaced.

9   DATA PROVIDER CODE   N   73-77   5

NOT APPLICABLE: NCCI

Report the code applicable to the data provider.

For group submissions, report the group code.

For single submissions, report the individual carrier code. When this record is used as electronic confirmation of receipt and processing of electronic submission, this field will contain the state code of the DCO that was the original.

Data Receiver - A table of these codes can be found in positions 51-55 of this record.

10   NAME OF DATA PROVIDER CONTACT   AN   78-102   25

NOT APPLICABLE: NCCI

Report the name of the individual who should be contacted regarding submission or transmission problems and questions and error reports.

If a paper receipt is to be mailed to the Data Provider, this should be the same contact person.

11   RESERVED FOR FUTURE USE   AN   103-103   1

NOT APPLICABLE: NCCI

WCIO Workers Compensation Data Specifications   **ETR**
Effective October 8, 2024
Page 7   **Record 00**

Field No.	Field Title/Description	Class	Position	Bytes
12	**PHONE NUMBER**	N	104-113	10

NOT APPLICABLE: CA, NCCI

Report the phone number of the data provider contact.

13	**PHONE NUMBER EXTENSION**	AN	114-119	6

NOT APPLICABLE: CA, NCCI

Report the phone number extension of the data provider contact.

14	**FAX NUMBER**	N	120-129	10

NOT APPLICABLE: CA, NCCI

Report the fax number of the data provider contact.

15	**PROCESSED DATE**	N	130-137	8

NOT APPLICABLE: NCCI

Report the date the file was created by the data provider or the DCO.

When used as electronic confirmation of receipt and processing of electronic submissions, this is the date the submission was processed by the DCO.

Format CCYYMMDD.

16	**ADDRESS OF CONTACT - STREET**	AN	138-197	60

NOT APPLICABLE: NCCI
OPTIONAL: CA

Report the street number and name, post office box, or other description of the contact person.

This field should only be used to report the continuation of the email address, if too long to fit in the Data Provider Contact Email Address field. N/A: DE, MA, MI, MN, NC, NCCI, NJ, PA, WI

17	**ADDRESS OF CONTACT - CITY**	AN	198-227	30

NOT APPLICABLE: CA, NCCI

Report the name of the city of the contact person.

18	**ADDRESS OF CONTACT - STATE**	AN	228-229	2

NOT APPLICABLE: CA, NCCI

Report the US Postal Service abbreviation for the state or the abbreviation for the Canadian province of the contact person.

19	**ADDRESS OF CONTACT - ZIP CODE**	AN	230-238	9

NOT APPLICABLE: CA, NCCI

Report the zip code of the physical address of the contact

WCIO Workers Compensation Data Specifications   **ETR**
Effective October 8, 2024
Page 8   **Record 00**

Field No.	Field Title/Description	Class	Position	Bytes
	person.			
20	**DATA PROVIDER TYPE CODE**	A	239-239	1
	NOT APPLICABLE: NCCI			

Report the code identifying the data provider type.

Code	Description
C	Data Provider is Insurance Carrier
D	Data Provider is DCO
T	Data Provider is Third Party Entity (TPE/TPA/MGA) (on behalf of the Insurance Carrier)

Field No.	Field Title/Description	Class	Position	Bytes
21	**THIRD PARTY ENTITY (TPE/TPA/MGA) FEDERAL EMPLOYER IDENTIFICATION NUMBER (FEIN)**	N	240-248	9
	NOT APPLICABLE: NCCI			

Report the Federal Employer Identification Number (FEIN) corresponding to the Third Party Entity (TPE/TPA/MGA) Data Provider (on behalf of the Insurance Carrier).

Field No.	Field Title/Description	Class	Position	Bytes
22	**RESERVED FOR FUTURE USE**	AN	249-249	1
	NOT APPLICABLE: NCCI			
23	**RESERVED FOR FUTURE USE**	AN	250-350	101
	NOT APPLICABLE: NCCI			

The length of this "Reserved For Future Use" field will depend on the Data Type Code for which this electronic transmittal is submitted.

In WCPOLS, the length of this field will be 51 bytes in positions 250-300.

In WCSTAT, the length of this field will be 1 byte in position 250.

In WCCRIT, the length of this field will be 151 bytes in positions 250-400

In WCNOA, the length of this field will be 101 bytes in positions 250-350.

In WCRATING, the length of this field will be 71 bytes in positions 250-320.

In WCCNTL, the length of this field will be 101 bytes in positions 250-350.

In WCMED, the length of this field will be 101 bytes in positions 250-350.

In WCIND, the length of this field will be 51 bytes in positions 250 – 300.

Field No.	Field Title/Description	Class	Position	Bytes

In WCCPAP, the length of this field will be 51 bytes in positions 250-300.

In the URC Expected List, the length of this field will be 103 bytes in positions 278-350.

In the URC Overdue List, the length of this field will be 103 bytes in positions 278-350.