

Appendix A – Historic Policy Data File Requirements

Background

EDI reporting expects transactions to arrive in a particular sequence. For example, a cancellation cannot be sent before a transaction that establishes the policy. Therefore, the EDI system rejects transactions that do not come in the expected order. Much of the current information on file with the department is based on guaranty contracts and not policies. This means the department does not have a record of each active policy or its recent transaction history.

What kind of policy data?

All insurers need to submit two years of historical policy data. The historic file should contain all transactions for all policies in effect at any time between July 1, 2007, and June 30, 2009, regardless of the policy's current status (active or cancelled). This is to ensure the department's system contains an accurate sequence of transactions, including:

- Binder
- New policy
- Policy renewal
- Endorsement
- Cancellation
- Non-renewal
- Reinstatement
- Rewrite or reissue

The historic policy file should include all transactions reported to NCCI through WCPOLS (Workers Compensation Policy Reporting Specifications).

What is the data format?

The department uses standard data elements from the IAIABC as defined in OAR 436-160-0310 (Appendix A). A copy of the required and optional data elements is on the next page.

Who submits the file?

Either the insurer or vendor can provide the historic file to the department. Vendors have indicated they will provide the two-year historic for an insurer that registers with the vendor by Dec. 31, 2008.

When is the file due?

The historic policy file should be submitted in two parts:

Deadline 1: Feb. 10, 2009 (all transactions for policies in effect between July 1, 2007, and Jan. 31, 2009, regardless of the policy's current status).

Deadline 2: July 6, 2009 (all transactions for policies in effect between Feb. 1, 2009, and June 30, 2009, regardless of the policy's current status).

Where is the file sent?

Vendors and insurers should contact the department to obtain the file transfer protocol (FTP) server, upload, and download directory information.

Questions?

Contact the Workers' Compensation Division's EDI coordinator at 503-947-7626 or visit the division's Web site at <http://www.cbs.state.or.us/wcd/communications/sb559.html>.

Proposed OAR 436-160-0310 (Appendix A) – July 2008

Data element	Data Element Number	Establishing document transactions	Endorsement	Cancellation or Nonrenewal by Insurer	Cancellation or Nonrenewal by Insured	Reinstatement
INSURED RECORD						
Transaction Set ID	DN001	M	M	M	M	M
Record Sequence Number	DN107	M	M	M	M	M
Transaction Set Purpose Code	DN300	M	M	M	M	M
Jurisdiction Designee Received Date	DN302	M	M	M	M	M
Transaction Set Type Code	DN002	M	M	M	M	M
Transaction Reason Code	DN303	M	M	M	M	M
Transaction Set Type Effective Date	DN304	M	M	M	M	M
Insurer FEIN	DN006	M	M	M	M	M
Insurer Name	DN007	M	O	O	O	O
Issuing Office Name	DN305	O	O	O	O	O
Issuing Office Address Line 1	DN306	O	O	O	O	O
Issuing Office Address Line 2	DN307	O	O	O	O	O
Issuing Office City	DN308	O	O	O	O	O
Issuing Office State	DN309	O	O	O	O	O
Issuing Office Postal Code	DN310	O	O	O	O	O
Issuing Agency Name	DN311	O	O	O	O	O
Issuing Agency City	DN312	O	O	O	O	O
Issuing Agency State	DN313	O	O	O	O	O
Insured FEIN	DN314	M	M	M	M	M
Insured Name	DN017	M	M	M	M	M
Insured Address Line 1	DN315	M	O	O	O	O
Insured Address Line 2	DN316	O	O	O	O	O
Insured City	DN317	M	O	O	O	O
Insured State	DN318	M	O	O	O	O
Insured Postal Code	DN319	M	O	O	O	O
Insured Telephone Number	DN320	O	O	O	O	O
Business Market	DN321	M	M	M	O	O
Wrap-Up Indicator	DN322	M	M	M	O	O
Insured Legal Status	DN323	M	O	O	O	O
Employee Leasing Policy Identification	DN333	M	O	O	O	O
Policy Number	DN028	M	M	M	M	M
Policy Effective Date	DN029	M	M	M	O	M
Policy Expiration Date	DN030	M	M	M	O	O
Prior Policy Number	DN324	C	O	O	O	O
Assignment Date	DN325	O	O	O	O	O
Jurisdiction	DN004	M	M	M	M	M
Governing Class	DN326	M	O	O	O	O
Total Payroll	DN327	O	O	O	O	O
Number of Employers	DN328	C	C	C	C	C
Number of Employers Expanded	DN336	C	C	C	C	C
EMPLOYER RECORD						
Transaction Set ID	DN001	M	M	M		
Record Sequence Number	DN107	M	M	M		
Employer FEIN	DN016	M	M	M		
Employer UI Code	DN329	O	O	O		
Employer Name	DN018	M	M	O		
Employer Address Line 1	DN019	M	O	O		
Employer Address Line 2	DN020	O	O	O		
Employer City	DN021	M	O	O		
Employer State	DN022	M	O	O		
Employer Postal Code	DN023	M	O	O		
Industry Code	DN025	O	O	O		
Number of Employees	DN330	O	O	O		
Employer Notification Date	DN331	O	O	O		