IRR CLM949 - Clerical changes for the 2025 Claims R3.1 guide

From IRR CLM946

- Section 2 – FROI and SROI File Record Layouts – fix missing and inconsistent headers on the grid of pages 2.4.2 – 2.4.11.
- Section 2 – Page 2.4.5, DN444 is in the wrong place according to the file layout positions. It should be on page 2.4.4 in part of the existing filler positions.
- Section 2 – Page 2.4.9, DN444 should be above the filler with the correct positions and the filler positions should be adjusted to positions 655-723.

Other clerical change

Page 4.25 – change the yellow highlighted area to: (code "AW")

LUMP SUM PAYMENT/SETTLEMENT RULES

The following rules are used to report a variety of lump sum payments, including settlements, stipulations, awards and advances. All of these payments would require a Lump Sum Payment/Settlement Code as defined below, and this code would only be reported on a "PY" transaction. These are not intended to replace a jurisdiction's adjudication form. If a jurisdiction needs more detailed information regarding these payments (i.e., how many weeks were awarded at a certain rate, if multiple rates were awarded, etc.), then a paper form would still need to be filed. Depending upon the jurisdiction and the type of lump sum payment/settlement, the Award/Order Date (DN0299) may be required.

The use and definition of the word "settlement" may vary from one jurisdiction to another. For purposes of EDI Claims Release 3.1 reporting, the word settlement will be used as defined in the Data Dictionary (section 6) under Lump Sum Payment/Settlement Codes "Settlement Full" and "Settlement Partial". Each jurisdiction should review the definitions and provide clarification to the claim administrators as to the appropriate Lump Sum Payment/Settlement Code to use when reporting a lump sum payment or settlement. For example, a jurisdiction may refer to the lump sum payment of a particular benefit type as an "Award" (code "AD"), but it really meets the Release 3.1 definition of "Settlement Partial" (code "SP").

All lump sum payments/settlements will be reported using the MTC Code "PY" (or its corresponding CO, 02 or UR). If benefits are ongoing, the next applicable transaction should then be filed (i.e., IP, AP, RB, etc.)

Page 6.58 – correct the spelling of "indemnity"

MAINTENANCE TYPE CODE – DN0002 (continued)
IP = Initial Payment
- A claim administrator has issued the first payment of an indemnity benefit, other than a lump sum payment/settlement, or
- An indemnity benefit is due, but the benefit has net to zero (i.e. no indemnity benefit payable to the injured worker) due to a complete offset from an adjustment or credit, or
- Temporary Partial Disability benefits are due, but the injured worker is earning more than his comp rate.

DP Rule:
- The Initial Payment transaction implies that indemnity benefit payments are ongoing, or the benefit type has net to zero due to a complete offset from an adjustment or credit, or the injured worker is earning more than his comp rate when Temporary Partial Disability benefits are due.
- The IP may follow an EP or the suspension (SX) of Employer Paid benefits if the claim administrator is making the initial payment of indeminity benefits other than a lump sum payments/settlement after the employer has been paying salary in lieu of compensation.
- The IP may precede or follow PY if the claim administrator is making the initial payment of indeminity benefits as a result of a lump sum amount other than a settlement full. If the claim administrator's initial payment of ongoing indeminity is issued as part of the lump sum payment, the IP should be triggered when the next indeminity check is issued, but could precede the lump sum payment.
- First indemnity payments by the acquiring claim administrator on acquired claims are reported on the AP transaction.
- If a jurisdiction requires a Payments segment on an IP and more than one check is issued for the same indemnity Benefit Type/Payment Reason Code, all indemnity checks issued should be populated in the Payments segment.

Page 6.59 – correct the spelling of "claimant"

PY = Payment Report – Identifies lump sum payment/settlement reports OR jurisdiction-required reporting of the first payment of Other Benefit Type Codes for medical, funeral, penalty, and attorney fees. This is not to be used for monitoring ongoing payments.

As defined by the Jurisdiction's Event table the PY identifies:
- Lump sum payment/settlement reports and/or
- The first payment of Other Benefit Type Codes for medical, funeral, penalty, and climant attorney fees, and/or
- The reporting of each payment of penalties and/or interest
- The reporting of each payment of:
    - Penalties and/or interest
    - Withheld Attorney Fees (DN0440 Withheld Attorney Fees – Current being reduced) paid to the attorney and/or the employee as 5xx benefits.

Record: A49; R22

DP Rule: If more than one check is issued for the same indemnity Benefit Type/ Payment Reason Code, all indemnity checks issued should be populated in the Payments segment. Refer to Variable Segment Population Rules (Payments Segment) in Section 4. The Steering Committee/EDI Council directed that Payee (DN0217) was established for specified transactions only (IP, AP, PY, RB, or any corresponding 02 or CO for those specified Maintenance Type Codes) and that individual weekly check information would not be reported in Release 3.1. This is a free form text field that cannot be edited by the jurisdiction.