

## **NOTICE OF MODIFICATION TO TEXT OF PROPOSED REGULATIONS**

### **Subject Matter of Regulations: Workers' Compensation – Workers' Compensation Information System**

### **TITLE 8, CALIFORNIA CODE OF REGULATIONS, SECTIONS 9701 – 9702**

**NOTICE IS HEREBY GIVEN** that the Acting Administrative Director of the Division of Workers' Compensation (hereinafter "Acting Administrative Director") pursuant to the authority vested in her by Labor Code Sections 133, 138.6, and 138.7, proposes to modify existing regulations, by amending Article 1.1, Subchapter 1 to Chapter 4.5 of California Code of Regulations, title 8, sections 9701 and 9702, relating to the Workers' Compensation Information System:

Amended section 9701    Definitions  
Amended section 9702    Electronic Data Reporting

### **PRESENTATION OF WRITTEN COMMENTS AND DEADLINE FOR SUBMISSION OF WRITTEN COMMENTS**

Members of the public are invited to present written comments regarding these proposed modifications. **Only comments directly concerning the proposed modifications to the text of the regulations will be considered and responded to in the Final Statement of Reasons.**

Written comments should be addressed to:

Maureen Gray  
Regulations Coordinator  
Department of Industrial Relations  
P.O. Box 420603  
San Francisco, CA 94612

The Division's contact person must receive all written comments concerning the proposed modifications to the regulations no later than 5:00 p.m. on January 13, 2015. Written comments may be submitted via facsimile transmission (FAX), addressed to the above-named contact person at (510) 286-0687. Written comments may also be sent electronically (via e-mail) using the following e-mail address: [dwcrules@dir.ca.gov](mailto:dwcrules@dir.ca.gov).

Due to the inherent risks of non-delivery by facsimile transmission, the Acting Administrative Director suggests, but does not require, that a copy of any comments transmitted by facsimile transmission also be submitted by regular mail.

**Comments sent to other e-mail addresses or facsimile numbers will not be accepted. Comments sent by e-mail or facsimile are subject to the deadline set forth above for written comments.**

## AVAILABILITY OF TEXT OF REGULATIONS AND RULEMAKING FILE

Copies of the original text and modified text with modifications clearly indicated, and the entire rulemaking file, are currently available for inspection at the Department of Industrial Relations, Division of Workers' Compensation, 1515 Clay Street, 17<sup>th</sup> Floor, Oakland, California 94612, between 9:00 A.M. and 4:30 P.M., Monday through Friday. Please contact the Division's regulations coordinator, Ms. Maureen Gray, at (510) 286-7100 to arrange to inspect the rulemaking file.

## FORMAT OF PROPOSED MODIFICATIONS

### Proposed Text Noticed for 45-Day Comment Period:

The proposed text was indicated by underlining, thus: added language. Deletions are indicated by strikeout, thus: ~~deleted language~~.

### Proposed Text Noticed for 15-Day Comment Period on Modified Text:

The proposed text was indicated by double underlining, thus: added language. Deletions are indicated by double strikeout, thus: ~~~~deleted language~~~~.

### Proposed Text Noticed for 2<sup>nd</sup> 15-Day Comment Period on Modified Text:

The proposed text was indicated by bold underlining, thus: **added language**. Deletions are indicated by bold strike-through, thus: ~~**deleted language**~~.

### Proposed Text Noticed for 3<sup>rd</sup> 15-Day Comment Period on Modified Text:

The proposed text was indicated by **bold double underlining**, thus: **added language**. Deletions are indicated by ~~**bold double strike through**~~, thus: ~~**deleted language**~~.

## SUMMARY OF PROPOSED CHANGES

### § 9702, subdivision (e):

Data element DN0586 (Rendering Line Provider FEIN) is deleted from the table.

### California EDI Implementation Guide, Version 2.0

- On page ii, in the first paragraph, "IABC" was changed to "IAIABC."
- On page 1-2, the following language was added: "Medical bill records shall be transmitted to the DWC within 90 calendar days of the medical bill payment or the date of the final determination that payment is denied."

- On page 2, following the language above, “The medical services” was changed to “Medical services.”
- On page 3, the WCIS e-news archive website was added (<http://www.dir.ca.gov/dwc/wcis.htm>).
- On page 4, the word “the” was added to the first paragraph.
- On page 6, the language “To be provided by WCIS contact.” was added to the User Name and Password fields.
- On page 8, the following language was deleted from the section regarding Postal Code: “This field, along with the Trading Partner FEIN, will be used to uniquely identify a trading partner.”
- On page 10, the language “To be provided by WCIS contact.” was added to the User Name and Password fields.
- On page 11, in the section on Date/Time ISA Information, the word “Sent” was capitalized, “Transmission: 837” was changed to “837 Transmission”, and “must be identical to the time” was changed to “must be identical to the date.”
- On page 12, the language “SSH key exchange” was added to the first paragraph.
- On page 12, under Step 2, the language, “creates a user account and password for access in section C2 of the Trading Partner Profile form” was replaced with the following language: “will be provided a user account and password by the WCIS.”
- On page 13, the language, “The 5<sup>th</sup> through 13<sup>th</sup> character Trading Partner/Sender FEIN followed by an underscore” was changed to “The 5<sup>th</sup> through 13<sup>th</sup> characters are the Trading Partner/Sender FEIN followed by an underscore ‘\_’.”
- On page 13, the following language was added: “The 15<sup>th</sup> through 23<sup>rd</sup> characters are the Trading Partner’s 9 digit zip code followed by an underscore ‘\_’. When the 4 digit extension for a zip code is not available use ‘0000’.”
- On page 13, the language, “The 15<sup>th</sup> through 22<sup>nd</sup> characters are Date Stamp of 837, 999, or 824 file (8-digit date, CCYYMMDD) followed by an underscore ‘\_’” was changed to: “The 25<sup>th</sup> through 32<sup>nd</sup> characters are the Date Stamp of the 837, 999, or 824 file (8-digit date, CCYYMMDD) followed by an underscore ‘\_’.”
- On page 13, the language, “The 24<sup>rd</sup> through 29<sup>th</sup> characters Time Stamp of 837, 999, or 824 file (6-digit time, HHMMSS) followed by an underscore ‘\_’” was changed to: “The 34<sup>th</sup> through 39<sup>th</sup> characters are the Time Stamp of 837, 999, or 824 file (6-digit time, HHMMSS) followed by an underscore ‘\_’.”
- On page 13, the “31<sup>st</sup>” was changed to “41<sup>st</sup>.”
- On page 13, “33<sup>rd</sup> through 35<sup>th</sup>” was changed to “43<sup>rd</sup> through 45<sup>th</sup>” and “digits” was changed to “digit.”
- On page 13, the language, “837 file example, 837\_123456789\_20140113\_135012\_T\_001” was changed to: “837 file example, 837\_123456789\_946125698\_20140113\_135012\_T\_001.”

- On page 13, the language, “999 file example, 999\_123456789\_20140113\_135012\_T\_001” was changed to: “999 file example, 999\_123456789\_946125698\_20140113\_135012\_T\_001.”
- On page 13, the language, “824 file example, 824\_123456789\_20140113\_135012\_T\_001” was changed to: “824 file example, 824\_123456789\_946125698\_20140113\_135012\_T\_001.”
- On page 13, the following language was moved to the bottom of the page: “An error will occur when a file of the same name is submitted while a file of the same name still exists in the directory of the WCIS.”
- On page 20, error code 7 was removed for Data Element DN0557 (Diagnosis Pointer).
- On page 30, Data Element DN0042 (Employee Social Security Number) was moved from the REF segment to the NM1 segment.
- On page 32, the language “Billing Provider Primary Address” appeared twice, so it was deleted once.
- On page 46, the following language was added for Data Element DN0042 (Employee Social Security Number): “If the employee does not have a SSN, use the default value of ‘000000006’.”
- On page 49, the requirement for Data Element DN0528 (Billing Provider Last/Group Name) reporting of cancellation was changed from “NA” to “M.”
- On page 49, the requirement for Data Element DN0547 (Line Number) reporting of cancellation was changed from “MC” to “NA.”
- On page 67, the word “with” was added to the second to last paragraph prior to “AK901” and “List” was changed to “list” in the last sentence.
- On page 68, parentheses were added around the names of Data Elements DN0006 (Insurer FEIN) and DN0050 (Unique Bill ID Number). In addition, “Fein” was changed to “FEIN” in the description of Data Element DN0006.
- On page 72, the word “accepted” was added under the heading, “Matching injured worker claims between the FROI and medical bill.”
- On page 73, the word “the” was deleted before “117-Match” in the second paragraph.
- On page 76, a hyphen was added between “DWC” and “WCAB” before “Form 6,” and the following language was added regarding Data Element DN0512 (Date Insurer Paid Bill): “use the date final payment was made.”