Complete Massachusetts Statistical Edit List

Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000000	Problem with edit engine processing this USR.	This edit will not be called, it is used for problems with the edit engine processing a USR.	Internal Edit. If carrier action is needed, WCRIBMA staff will contact the carrier.	4		Failed	
000001	USR has more than 1 header record.	USR must have 1 and only 1 header record.	Submit a correction or replacement report with only one header record. See the Massachusetts Statstical Plan, Part I - Unit Statistical Reporting, Section IV - Header Information, item No. 8 - Replacement Report Code for more information regarding the reporting of a replacement report.	2	Header	Reject	
000002	USR may only have 1 and only 1 name record	USR may only have 1 and only 1 name record.	Submit a correction or replacement report with only one or that does not include a name record. See the Massachusetts Statstical Plan, Part I - Unit Statistical Reporting, Section IV - Header Information, item No. 8 - Replacement Report Code for more information regarding the reporting of a replacement report.	2	Header	Reject	

Complete Massachusetts Statistical Edit List

Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000003	USR may only have 1 and only 1 total record.	USR may have 1 and only 1 totals record.	Submit a correction or replacement report with only one or that does not include a totals record. See the Massachusetts Statstical Plan, Part I - Unit Statistical Reporting, Section IV - Header Information, item No. 8 - Replacement Report Code for more information regarding the reporting of a replacement report.	2	Total	Reject	
000004	Exposure class code is invalid or expired.	The class code that the carrier is reporting must be a valid class code (in the class table and not expired). Some classes become effective after the policy effective date of the USR. In this case the system will use the mod effective date of the class for the split period to validate the effective date of the class.	Submit a E (Exposure) correction deleting the incorrect class code by reporting a P update type only for that class or a replacement report. See the Massachusetts Statistical Plan, Part I - Unit Statisical Reporting, Section V - Exposure Record Data, item No. 1 - Classification Code (Class Code) for additional reporting information.	2	Exposure	Reject	
000007	Injury Code (Injury Type) is invalid.	USR was reported with an unacceptable injury code.	Submit a L (Loss) correction with the incorrect injury code reported on the P update type row and the correct injury code reported on the R update type row or a replacement report. See the Massachusetts Statistical Plan, Part I - Unit Statisical Reporting, Section VI - Loss Record Data, item No. 6 - Injury Type Code for a list of acceptable codes.	2	Loss	Reject	

Complete Massachusetts Statistical Edit List

Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000008	State code is not acceptable.	USR was reported with an unacceptable state code.	Submit a H (Header) correction or replacement report with state code 20 (Massachusetts) reported in the Exposure State field. See Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section IV - Header Information, item No. 3 - Exposure State Code for more reporting information.	2	Header	Reject	
000009	Policy Type Identification Code Type of Coverage - is invalid.	USR was reported with an unacceptable type of coverage code (policy type ID).	Submit a H (Header) correction or replacement report changing the type of coverage code to a valid code. See the Massachusetts Statistical Plan, Part 1 - Unit Statistical Reporting, Section IV - Header Information, item No. 19 - Type of Coverage ID Code for a list of acceptable codes.	1	Header	Accepted with Warnings	
000010	Policy Type Identification Code - Plan Indicator - is invalid.	USR was reported with an unacceptable plan indicator code (policy type ID).	Submit a H (Header) correction or replacement report changing the plan indicator to a valid code. See the Massachusetts Statistical Plan, Part 1 - Unit Statistical Reporting, Section IV - Header Information, item No. 20 - Type of Plan ID Code for a list of acceptable codes.	2	Header	Reject	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000011	Non-Standard type (policy type id code) is not acceptable.	USR was reported with an unacceptable Non-Standard Type Code.	Submit a H (Header) correction or replacement report changing the non-standard ID code to a valid code. See the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section IV - Header Information, item No. 21 - Type of Non-Standard ID Code for a list of acceptable codes.	1	Header	Accepted with Warnings	
000012	Deductible type - 1st 2 positions - is invalid.	USR was reported with an unacceptable deductible type (first two positions).	Submit a H (Header) correction or replacement report changing the deductible type (first two positions) to a valid code. See the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section IV - Header Information, item No. 22 - Losses Subject to Deductible Code for a list of acceptable codes.	2	Header	Reject	
000013	Deductible type - 2nd 2 positions - is invalid.	USR was reported with an unacceptable deductible type (second two positions).	Submit a H (Header) correction or replacement report changing the deductible type (second two positions) to a valid code. See the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section IV - Header Information, item No. 23 - Basis of Deductible Calculation Code for a list of valid codes.	2	Header	Reject	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000027	Policy Condition - Multistate Policy - is invalid.	USR was reported with an unacceptable multistate indicator.	Submit a H (Header) correction or replacement report changing the Multistate Policy Indicator to either Y or N as defined in the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section IV - Header Information, item No. 14 - Multistate Policy Indicator. Please note that this indicator should match what is reported on the matching policy.	2	Header	Failed	
000028	Policy Condition - Interstate Policy - is invalid.	USR was reported with an unacceptable interstate rated indicator.	Submit a H (Header) correction or replacement report changing the Interstate Rated Policy Indicator to either Y or N as defined in the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section IV - Header Information, item No. 15 - Intestate Rated Policy Indicator. Please note that this indicator should match what is reported on the matching policy.	2	Header	Failed	
000029	Policy Condition - Estimated Audit Code - is invalid.	USR was reported with an unacceptable estimated audit code.	Submit a H (Header) correction or replacement report changing the Estimated Audit Code to Y, N or U as defined in the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section IV - Header Information, item No. 16 - Estimated Audit Code.	2	Header	Failed	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000030	Policy Condition - Retrospective Rated Policy - is invalid.	USR was reported with an unacceptable retrospective rated indicator.	Submit a H (Header) correction or replacement report changing the Retrospective Rated Policy indicator to either Y or N as defined in the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section IV - Header Information, item No. 17 - Retrospective Rated Policy Indicator.	2	Header	Failed	
000031	Policy Condition - Canceled Mid-Term Policy - is invalid.	USR was reported with an unacceptable cancelled mid term indicator.	Submit a H (Header) correction or replacement report changing the Canceled Mid-term indicator to either Y or N as defined in the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section IV - Header Information, item No. 18 - Canceled Mid-Term Policy Indicator Indicator.	2	Header	Failed	
000034	Exposure Update type is invalid.	Exposure update type is unacceptable.	Submit an E (Exposure) correction or replacement report with a valid update type for each class code reported on the exposure record. Refer to the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section V - Exposure Record Information, item No. 9 - Update Type Code for the acceptable codes.	4	Exposure	Reject	

Complete Massachusetts Statistical Edit List

Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000035	Exposure Coverage Code (ACT) is invalid.	USR was reported with an unacceptable exposure coverage code (ACT).	Submit an E (Exposure) correction or replacement report with a valid Exposure Coverage Act code. Refer to the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section V - Exposure Record Information, item No. 10 - Exposure Act/Exposure Coverage Code for additional reporting information.	2	Exposure	Reject	
000037	Loss Update Type is invalid.	USR was reported with an unacceptable loss update type.	Submit a L (Loss) correction or replacement report with a valid update type for each claim reported on the Loss record. See the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section VI - Loss Record Data, item No. 11 - Update Type Code for additional information.	4	Loss	Reject	
000038	Claim Status is invalid.	USR was reported with an unacceptable claim status.	Submit a L (Loss) correction or replacement report with either a status code of 0 (Open) or 1 (Closed) for each claim reported on the Loss record. See the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section VI - Loss Record Data, item No. 5 - Status Code for valid claim status codes.	2	Loss	Reject	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000039	Loss Condition - Type of Loss - is invalid.	USR was reported with an unacceptable loss type.	Submit a L (Loss) correction or replacement report with a valid Type of Loss code for each claim reported on the Loss record. See the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section VI - Loss Record Data, item No. 13 - Type of Loss Code for additional information.	2	Loss	Reject	
000040	Loss Condition - Type of Recovery - is invalid.	USR was reported with an unacceptable loss recovery type.	Submit a L (Loss) correction or replacement report with a valid Type of Recovery code for each claim reported on the Loss record. See the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section VI - Loss Record Data, item No. 15 - Type of Recovery Code for additional information.	2	Loss	Reject	
000041	Loss Condition - Type of Coverage - is invalid.	USR was reported with an unacceptable loss coverage type.	Submit a L (Loss) correction or replacement report with a valid Type of Claim code for each claim reported on the Loss record. See the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section VI - Loss Record Data, item No. 15 - Type of Claim Code for additional information.	2	Loss	Reject	

Complete Massachusetts Statistical Edit List

Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000042	Loss Condition - Type of Settlement - is invalid.	USR was reported with an unacceptable loss settlement type.	Submit a L (Loss) correction or replacement report with a valid Type of Settlement code for each claim reported on the Loss record. See the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section VI - Loss Record Data, item No. 16 - Type of Settlement Code for additional information.	2	Loss	Reject	
000043	Loss Condition - ACT - is invalid.	USR was reported with an unacceptable loss act type.	Submit a L (Loss) correction or replacement report with a valid Loss Act code for each claim reported on the Loss record. See the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section VI - Loss Record Data, item No. 12 - Loss Coverage Act Code for additional information.	2	Loss	Reject	
000045	Injury Description Code (Part) is invalid.	USR was reported with an unacceptable injury part code.	Submit a L (Loss) correction or replacement report with a valid injury Part code for each claim reported on the Loss record. See the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section VI - Loss Record Data, item No. 18 - Part of Body Code for additional information.	2	Loss	Reject	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000046	Injury Description Code (Nature) is invalid.	USR was reported with an unacceptable injury nature code.	Submit a L (Loss) correction or replacement report with a valid Nature of injury code for each claim reported on the Loss record. See the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section VI - Loss Record Data, item No. 19 - Nature of Injury Code for additional information.	2	Loss	Reject	
000047	Injury Description Code (Cause) is invalid.	USR was reported with an unacceptable injury cause code.	Submit a L (Loss) correction or replacement report with a valid Cause of injury code for each claim reported on the Loss record. See the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section VI - Loss Record Data, item No. 20 - Cause of Injury Code for additional information.	2	Loss	Reject	
000048	Exposure amount must be zero for statistical codes.	Exposure amount must be zero or blank when the class cannot have exposure in accordance to the class table.	Submit an E (Exposure) correction or replacement report changing the exposure amount to zero for the statistical code(s) listed on the error report. Refer to the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section V - Exposure Record Information, item No. 5 - Exposure Amount as well as Part VI - Appendices, Appendix II - Statistical Class for additional reporting information.	2	Exposure	Reject	

Complete Massachusetts Statistical Edit List

Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000051	Exposure amount must be zero for this Class Code.	Exposure is not allowed for this class code in accordance to the class table.	Submit an E (Exposure) correction or replacement report changing the exposure amount to zero for the class code(s) listed on the error report. Refer to the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section V - Exposure Record Information, item No. 5 - Exposure Amount for additional reporting information.	2	Exposure	Reject	
000052	Loss record is not allowed for this class code.	A loss record cannot be allowed for this class code, in accordance to the class table.	Submit a L (Loss) correction or replacement report changing the claim class code to a valid class code. See the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section VI - Loss Record Data, item No. 1 - Classification Code (Class Code) as well as the MA WC and EL Insurance Manual located on the WCRIBMA website for additional information.	2	Loss	Reject	

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Complete Massachusetts Statistical Edit List

Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000053	Premium amount is invalid.	Check the premium calculation for this expo record. Manual rate(as percentage) times exposure amount should = premium. For classes with Exposure Act = 02, premium must be within + or - 50 or + or - 2.5% of calculated premium.	Submit an E (Exposure) correction or replacement report with the correct premium amount reported for each class code and statistical code reported on the Exposure record. Refer to the Massachusetts Statistical Plan, Part I - Unit Statistical Reporting, Section V - Exposure Record Information, item No.6 - Premium Amount for additional information.	2	Exposure	Reject	
000056	ASWG Unit Submission Indicator is invalid.	USR was reported with an unacceptable ASWG (Advisory Statistical Work Group) indicator.	Submit a H (Header) correction or replacement report with the appropriate ASWG indicator reported on the header record.	4	Header	Failed	
000057	Vocational rehabilitation indicator is not acceptable.	USR was reported with an unacceptable vocational rehabilitation indicator.	Submit a L (Loss) correction with a valid vocational rehabilitation indicator of "Y" or "N" as defined in the Massachusetts Statistical Plan. Refer to Part 1 - Unit Statistical Reporting, Section VI - Loss Record Data, item No.22 - Vocational Rehabilitation Indicator for more information.	2	Loss	Reject	
000058	Exposure Class Code - Codes 0063 and 0064 should not be on the same policy.	Premium discount class codes 0063 and 0064 should not be on the same policy. Each licensed carrier is required to designate either a stock (0063) or non-stock (0064) selection when writing workers' compensation.	Submit an E (Exposure) correction or replacement report removing either the 0063 or 0064 class code from the exposure. Both codes should not be reported on the same policy, unless there is a change in the discount selection type and the codes are on separate splits.	3	Exposure	Accepted with Errors	

Complete Massachusetts Statistical Edit List

Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000059	Effective Date of Rate is not within policy period dates.	Rate effective date must be less than the policy expiration date, or be blank or zeros.	Submit an E (Exposure) correction or replacement report with the appropriate rate effective date.	3	Exposure	Accepted with Errors	
000060	Multiple Effective Date of Rate values supplied within the same split period.	The rate date should be the same for all revised exposure records for a given split.	Submit an E (Exposure) correction or replacement report with the correct rate date for each exposure record.	2	Exposure	Reject	
000064	Accident Date is outside of policy period.	Accident date of the loss must fall within the policy period dates. The accident date cannot be the policy expiration date.	Submit a L (Loss) correction or replacement report changing the accident date or submit a reinstatement to the existing cancelled policy to allow the claim to fall within the policy periods.	2	Loss/ Policy	Reject	
000065	Claim Number is invalid.	If the claim number is less than 12 positions, it must be reported as right-justified and with leading blanks. No embedded spaces or special characters allowed and must consist of only capital letters and numbers.	Submit a L (Loss) correction or replacement report with the appropriate claim number. Exclude blanks, punctuation marks, or special characters.	2	Loss	Reject	
000066	Duplicate Claim Number is not allowed.	No duplicate claim numbers allowed; must check all reporting levels.	Submit a L (Loss) correction or replacement report, checking to make sure that there are no duplicate claim numbers.	2	Loss	Reject	
000067	Warning - Injury code of 01 (death) should be subject to reasonableness checks.	If the loss is a death claim, then the incurred indemnity must be greater than $4,000.	If required, submit a L (Loss) correction or replacement report with the appropriate incurred indemnity amount. The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Loss	Accepted with Warnings	

Complete Massachusetts Statistical Edit List

Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000068	Incurred Indemnity amount cannot be 0 when Incurred Medical amount is > 0 for this Injury Code.	If the injury code is 1, 2, 5 or 9 and incurred medical is > 0, then incurred indemnity must also be > 0.	Check the injury code and incurred amounts and submit a L (Loss) correction or replacement report with the appropriate codes/amounts.	2	Loss	Reject	
000069	Incurred indemnity must be zero for this injury code.	If the injury code is 6 or 7, then the incurred indemnity and paid indemnity amounts must be zero.	Submit a L (Loss) correction or replacement report with the correct incurred and paid indemnity amounts.	2	Loss	Reject	
000070	Group Claim is not allowed for Injury Code 07.	If injury code is 7 then the claim must be a single (not group) claim.	Submit a L (Loss) correction or replacement report with the correct injury code and corresponding claim number. Refer to the Massachusetts Statistical Plan - Part 1, Section II.	3	Loss	Accepted with Errors	
000071	There must be 2 or more claims for each distinct catastrophe.	All claims (must be two or more) resulting from a single catastrophe must be identified with the same catastrophe number. Pass for catastrophe codes 12, 48, 87.	Submit a L (Loss) correction report with the appropriate catastrophe code. Refer to the Massachusetts Statistical Plan - Part 1, Section VII.	3	Loss	Accepted with Errors	
000072	Catastrophe codes are not in sequence.	The number for each succeeding catastrophe must be incremented by 1 beginning with '01'. Pass for catastrophe codes 12, 48, 87.	Submit a L (Loss) correction report with the correct sequencing for the catastrophe codes. Refer to the Massachusetts Statistical Plan - Part 1, Section VI.	3	Loss	Accepted with Errors	
000074	The accident date must be the same for every loss included in the catastrophe.	The accident date must be the same for every loss included in the catastrophe. Pass for catastrophe codes 12, 48, 87.	Submit a L (Loss) correction or replacement report with the appropriate accident date. Refer to the Massachusetts Statistical Plan - Part 1, Section VI.	3	Loss	Accepted with Errors	Y

Complete Massachusetts Statistical Edit List

Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000075	Group claims may be not included in a catastrophe.	No group claims may be included in a catastrophe. If a catastrophe is < or > '00' then the claim number must not be blank.	Submit a L (Loss) correction or replacement report with the appropriate claim number. Refer to the Massachusetts Statistical Plan - Part 1, Section VI.	3	Loss	Accepted with Errors	
000077	Claim number is required when Total Claim Amount for a loss is greather than $2000.	The total loss amount for the claims that the carrier placed in a group claim cannot exceed $2000.	Submit correction or replacement report with the correct claim amounts and corresponding claim number. Refer to the Massachusetts Statistical Plan - Part 1, Section II.	2	Loss	Reject	
000079	Lump sum indicator is not acceptable.	USR reported with an unacceptable lump sum indicator.	Submit correction or replacement report with a valid lump sum indicator as defined in the Massachusetts Statistical Plan - Part 1, Section VI.	2	Loss	Reject	
000080	Jurisdiction state is invalid.	Must be a valid state code.	Submit correction or replacement report with the appropriate state code. Refer to the Massachusetts Statistical Plan - Part 1, Section VI.	2	Loss	Reject	
000081	MCO Type is either invalid, or not compatible with the Policy Condition.	If the MCO type is a '01' through '06' then the MCO indicator in the header record must be a "Y".	Submit correction or replacement report with the correct MCO type and corresponding values, as well as the appropriate MCO type indicator. Refer to the Massachusetts Statistical Plan - Part 1, Section VI.	2	Loss	Reject	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000082	Paid Indemnity cannot be greater than Incurred Indemnity, unless recovery is expected and coded.	Paid indemnity cannot be greater than incurred indemnity, unless the claim is closed and recovery is expected.	Submit correction or replacement report with the correct indemnity amounts. Refer to the Massachusetts Statistical Plan - Part 1, Section VI.	3	Loss	Accepted with Errors	
000083	Paid medical cannot be greater than incurred medical, unless recovery is expected and coded.	Paid medical cannot be greater than incurred medical, unless the claim is closed and recovery is expected.	Submit correction or replacement report with the correct incurred and paid medical amounts. Refer to Massachusetts Statistical Plan - Part 1, Section VI.	2	Loss	Reject	
000084	Carrier Code is invalid.	The carrier ID must be a valid carrier ID in the carrier table.	Submit correction or replacement report with a valid carrier ID number. Refer to the Massachusetts Statistical Plan - Part 1, Section IV.	2	Header	Reject	
000085	Matching policy not found.	Policy does not exist. Checks key fields (carrier ID, policy number, policy effective date) to find a matching policy within the Spectrum operating system.	Submit a copy of the matching policy showing Massachusetts coverage or notify the WCRIBMA if the unit was sent in error.	4	Header/ Policy	Reject	
000086	Exposure State is not the bureau state code.	The two digit numeric code that represents the state in which coverage has been provided. The state code for Massachusetts is 20.	Submit correction or replacement report with the appropriate state code (20). Refer to the Massachusetts Statistical Plan - Part 1, Section IV.	2	Header	Reject	
000087	Report is too early for policy entered.	USR was reported too early for the policy entered.	USR will be removed from the database. Resubmit report at the appropriate time as defined in the Massachusetts Statistical Plan - Part 1, Section II.	2	Header	Reject	
000089	Report received was out of sequence.	Checks if a more recent USR has already been received and entered.	Internal Edit. If carrier action is needed, WCRIBMA staff will contact the carrier.	4	Header / Link	Failed	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000090	Policy Condition - Assigned Risk - is not consistent with the reported policy.	The plan indicator on the USR does not match the plan indicator on the policy.	Submit a H (Header) correction or replacement report with the appropriate plan indicator.Refer to the Massachusetts Statistical Plan - Part 1, Section IV.	2	Header/ Policy	Reject	
000091	Policy Expiration or Cancellation date does not match the expiration date of the reported policy.	Reported expiration date must match the expiration date or cancellation date of the policy in Spectrum.	Submit correction or replacement report or policy coverage (cancellation or reinstatement) to match the expiration dates. The cancelled mid-term indicator must also be reported on the USR header, ("Y"- policy is cancelled midterm, or "N"- policy is not cancelled), as defined in the Massachusetts Statistical Plan - Part 1, Section IV.	2	Header/ Policy	Reject	
000092	Correction type must be compatible with actual data changed.	H (Header); E (Exposure); L (Loss); T (Total); M (Multiple); A (Aggravated Inequity). Correction type must be compatible with actual data changed.	Submit correction or replacement report with the appropriate correction type as defined in the Massachusetts Statistical Plan - Part 1, Section IV.	2	Header	Reject	
000093	State effective date is invalid.	Endorsement effective date if state coverage was endorsed mid-term, otherwise blank. Must fit within policy effective period.	Submit correction or replacement report with the correct state effective date or leave blank. Refer to the Massachusetts Statistical Plan - Part 1, Section IV.	2	Header	Reject	
000094	Policy condition - Cancelled Mid-Term Policy - is not consistent with policy.	If cancelled mid term policy condition is "Y", then policy must contain a cancelled in order to match USR.	If required, submit correction or replacement report changing cancelled mid term policy condition or submit cancellation to the policy in order to match the policy to the USR.	3	Header/ Policy	Accepted with Errors	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000101	Name of Insured is either blank or contains non-printable characters.	Name field can not be blank on tape.	If required, submit correction or replacement report adding the appropriate name record. The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Header	Accepted with Warnings	
000103	Multiple revised exposure records in the same split period with the same non-standard class code.	It is not acceptable to have multiple revised non-standard exposure records in the same split with the same non-standard class codes.	Submit a E (Exposure) correction or replacement report with the appropriate number of revised exposure records of each non-standard class code per split.	2	Exposure	Reject	
000104	Paid indemnity should match incurred indemnity if claim is closed.	Paid indemnity should match incurred indemnity if closed (claim status 1 indicates closed), unless recovery is expected.	Submit correction or replacement report with equal incurred and paid indemnity amounts or change status of claim. If the claim has recovery, report with recovery type of '02', '03', '04' or '05' as defined in the Massachusetts Statistical Plan - Part 1, Section VI.	2	Loss	Reject	
000105	Paid medical should match incurred medical if claim is closed.	Paid medical should match incurred medical if closed (claim status 1 indicates closed), unless recovery is expected.	Submit correction or replacement report with equal incurred and paid medical amounts or change status of claim. Refer to the Massachusetts Statistical Plan - Part 1, Section VI.	2	Loss	Reject	
000106	Multiple exposure records in same split period with same class code and exposure act for this USR.	It is not acceptable to have multiple exposure records on the same USR in the same split period with the same class code and exposure act.	Submit a E (Exposure) correction or replacement report with only one exposure record per split with a designated class code and exposure act.	2	Exposure	Reject	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000108	Exposure Previously Reported Indicator - Exposure record is either a duplicate or the previous record is missing.	Checks all fields in accepted to see if this previous record exists. Check P records and match on split dates, split indicators, class, and exposure coverage act.	Submit a E (Exposure) correction or replacement report checking all fields so previous line matches exactly to revised line on the exposure of the previous report. Refer to the Massachusetts Statistical Plan - Part 1, Section III.	2	Exposure	Reject	
000109	Claim either duplicates previously reported claim, or previously reported claim cannot be found.	Checks all fields in accepted to see if this previous record exists. Check P records and check using claim numbers and accident dates.	Submit correction or replacement report checking all fields so previous line matches exactly to revised line on the loss of the previous report. Refer to the Massachusetts Statistical Plan - Part 1, Section III.	2	Loss	Reject	
000114	Total subject premium exceeds $500 and there are exposure records with class code 0990 with premium > 0.	Total subject premium exceeds $500 and there are exposure records with code 0990 with premium > 0.	Submit a E (Exposure) correction or replacement report with the correct premium amount for class 0990.	2	Exposure	Reject	
000121	Previous totals record is not acceptable.	NCCI Only. Note that ACCCT accepts revised records only; previous totals records should NOT be submitted.	No carrier action required. WCRIBMA system defaults to calculated totals.	1		Accepted with Warnings	
000124	USR must have at least one Exposure Record on a Report 01 Correction 00.	If it is report 01 correction 00 then it must have at least one exposure record.	If the USR was submitted in error or if the USR was submitted with an incorrect report level, a written deletion request must be sent to the WCRIBMA. If the USR was submitted without an exposure record, in error, submit a replacement report, by reporting the R indicator in the Replacement Indicator field on the Header record and adding the exposure record data.	2	Header/ Exposure	Reject	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000125	There must be at least one exposure record and no loss records on this USR.	If correction type = 'E' then USR must be a correction to the first report and the USR must have at least one exposure record and no loss records.	Submit a replacement report, by reporting the R indicator in the Replacement Indicator field on the Header record, with the appropriate correction type and corresponding report and correction numbers.	2	Header/ Exposure/ Loss	Reject	
000126	Exposure Update Type is invalid for 1st Report.	There should be no previous records on a report 01 correction 00.	If incorrect correction sequence or report level was reported, a written deletion request must be sent to WCRIBMA. If report 01 00 is correct and previous records were submitted in error, submit a replacement report by reporting the R indicator in the Replacemetn Indicator field on the Header record and eliminating all previous exposure records.	2	Header/ Exposure/ Loss	Reject	
000130	Accident Date is invalid.	An invalid number or date was reported on the loss record.	Submit correction or replacement report with the appropriate numbers or dates in the loss records.	2	Loss	Reject	
000131	Policy expiration or cancellation date is invalid.	An invalid number or date was reported on the header record.	Submit correction or replacement report with the appropriate numbers or dates in the header record.	2	Header	Reject	
000132	Policy effective date is invalid.	An invalid number or date field was reported on the link record.	Submit correction or replacement report with the appropriate numbers or dates in the link records.	2	Header	Reject	
000133	Calculated loss amount or premium amount is invalid.	An invalid number or date field was reported on the totals record.	Submit correction or replacement report with the appropriate numbers or dates in the total records.	2	Total	Reject	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000134	Invalid numeric or date field in exposure record.	An invalid number or date field was reported on the exposure record.	Submit correction or replacement report with the appropriate numbers or dates in the exposure records.	2	Exposure	Reject	
000135	Class code not reported on exposure card.	A matching class code and exposure act must be reported on the exposure card with an exposure >0.	Submit correction or replacement report either changing the class code on the loss record to a class reported on the exposure or by adding the class to the exposure record. On USRs that have exposure splits, the loss class code is compared to the exposure records that are within the split that would include the loss's accident date.	2	Loss/ Exposure	Reject	
000137	Record Type is invalid or unexpected.	Record type code must be 1-7 to be accepted.	Refer to the WCIO Workers Compensation Data Specifications Manual.	2	Electronic	Reject	
000138	Below the line exposure class code should have zero experience modification.	If an exposure record has a class code that is not an above the line class code, then the experience modification should be zero.	Submit correction report with a zero experience modification for all below the line class codes.	3	Exposure	Accepted with Errors	
000139	Correction report reduced total payroll, non-payroll and standard premium to zero.	If a correction reduces payroll, non payroll and standard premium to zero then print a warning.	If required, submit correction report or verify change of payroll, non payroll and standard premium. The WCRIBMA will assume the information was correct as reported if there is no carrier response.	1	Exposure	Accepted with Warnings	
000141	Split indicator must start with zero and the reported split periods must be in chronological order.	The reported split periods must be in chronological order. Also the split indicators must start with zero and have no gaps.	Submit correction or replacement report with the correct split information.	2	Exposure	Reject	

Complete Massachusetts Statistical Edit List

Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000142	Exposure coverage code (ACT) is invalid for class code.	If exposure act is blank or '00' then the class code must be a stat code.	Submit correction or replacement report with the appropriate exposure act and/or stat code.	2	Exposure	Reject	
000148	Error matching previous and revised exposure records.	Checks for duplicate matched record IDs within the same USR.	Submit correction or replacement report with the correct exposure data.	4	Exposure	Reject	
000149	Error matching previous and revised loss records.	Checks for duplicate matched record IDs within the same USR.	Submit correction or replacement report with the correct loss data.	4	Loss	Reject	
000150	Policy is canceled flat.	Checks if policy is cancelled flat. If so, then USR is rejected.	If policy should not be cancelled flat, Submit reinstatement. If policy should be cancelled flat, notify WCRIBMA and USR will be deleted.	2	Header/ Policy	Reject	
000153	Correction to a USR that has not been received.	Checks if a report is a correction, if it does then check to see if the one we are correcting exists.	Internal Edit. If carrier action is needed, WCRIBMA staff will contact the carrier.	4	Header / Link	Failed	
000154	Unit Level previously processed - advise correct filing.	This edit checks if a USR has already been entered.	Resubmit USR using the "R" replacement indicator.	4	Header	Reject	
000155	Multiple Effective Date of Modification values supplied within the same split period.	This edit checks if there are multiple (different) modification dates supplied within the same split period. Each split period can only contain one modification date.	Submit correction or replacement report with only one modification date per split period.	2	Exposure	Reject	
000156	Multiple Experience Modification values supplied within the same split period.	This edit checks if multiple (different) exposure modification values are supplied within the same split period. Each split period can only contain one exposure modification value.	Submit correction or replacement report with only one exposure modification value per split period.	2	Exposure	Reject	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000158	Loss declared - There are loss records in accepted with this class code.	If an exposure record is being deleted and there is a corresponding loss record with the same class code, then the USR is rejected.	Submit correction or replacement report either changing the class code on the loss record to another class reported on the exposure or add the loss class code to the exposure records.	2	Loss/ Exposure	Reject	
000161	Report out of sequence with prior reports.	If there is an open claim on a previous report, then that claim must be reported at the next valuation (reporting level).	Submit missing unit report. Refer to the Massachusetts Statistical Plan - Part 1, Section II.	4	Header	Reject	
000162	Zero exposure card submitted incorrectly.	If the class code of 1111 is reported on a USR, then any other exposure records should have zero premium and zero exposure. The edit is executed on each split separately. Certain class codes are allowed to be reported with 1111, and can have premium but no exposure. For MA, the exceptions are: 0032, 0063, 0064, 0277, 0887, 0900, 0930, 0931, 0990, 9046, 9663, 9664, 9740, 9803, 9804, 9805, 9806, 9807, 9808, 9809, 9810, 9811, 9812, 9813, 9814, 9815, 9816, 9848, 9819, 9880, 9885, 9886, 9887.	Submit correction or replacement report removing any unacceptable class codes from the exposure record. Refer to the Massachusetts Statistical Plan - Part 1, Section IV.	3	Exposure	Accepted with Errors	Y
000163	Loss declared and Premium Amount for Class Code is zero.	Exposure record is being revised to zero and there are corresponding loss records with this class code.	Submit correction or replacement report either changing the premium amount on the revised exposure record or changing the class on the loss record.	2	Loss/ Exposure	Reject	
000164	Contract medical losses identified by injury code of '07' are not valid.	USR was reported with an unacceptable injury code. Injury code of '07' not applicable in MA.	Submit correction or replacement report with the correct injury code.	3	Loss	Accepted with Errors	Y

Complete Massachusetts Statistical Edit List

Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000165	Link data in submission control record must be filled with '9's.	Link data in the submission control record must be filled with '9's.	Refer to the WCIO Workers Compensation Data Specifications Manual - WCSTAT - Record 9.	2	Electronic	Reject	
000167	Total Unit Reports Submitted in the submission control record is incorrect.	The count of USRs included on the tape submission is incorrect.	Refer to the WCIO Workers Compensation Data Specifications Manual - WCSTAT - Record 9. The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Electronic	Accepted with Warnings	
000168	The ASWG indicator in the control record is incorrect and/or the carrier is not approved to submit this tape.	The ASWG tape submission indicator must be blank for non-ASWG tapes, a 'T' for test, or a 'P' for production. The carrier must also be approved to submit this tape.	Refer to the WCIO Workers Compensation Data Specifications Manual - WCSTAT - Record 9.	2	Electronic	Reject	
000169	The tape must contain a submission control record.	The tape must contain a submission control record.	Refer to the WCIO Workers Compensation Data Specifications Manual - Workers Compensation Statistical Reporting Specifications (WCSTAT).	2	Electronic	Reject	
000170	The letter of transmittal detail record count must match the actual detail record count on tape.	The letter of transmittal record count must match the actual record count.	Refer to the WCIO Data Specifications Manual - Electronic Transmittal Record Specifications (ETR). The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Electronic	Accepted with Warnings	

Complete Massachusetts Statistical Edit List

Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000171	The letter of transmittal total unit reports submitted must match the actual USR count on tape.	The letter of transmittal USR count must match the actual USR count.	Refer to the WCIO Data Specifications Manual - Electronic Transmittal Record Specifications (ETR). The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Electronic	Accepted with Warnings	
000176	Open claim(s) on previous report not reported on this subsequent report.	Check for open claims on previous reports that are not submitted on this report.	Submit correction or replacement report with all of the open claims on previous reporting levels. Refer to the Massachusetts Statistical Plan - Part 1, Section III.	2	Loss	Reject	
000192	Correction report reduced standard premium total to zero.	Correction reduces the standard premium to zero and the previous standard premium is greater than or equal to 50,000.	If required, submit correction report with the appropriate standard premium amount. The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Exposure	Accepted with Warnings	
000194	Data receiver code in transmittal record on tape does not match current state code.	This edit checks if the data receiver code is equal to the current state.	Correct ETR and submit file to the appropriate state.	2	Header	Reject	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000204	Expense constant amount too large.	This edit only runs for USRs effective prior to 9/1/2008. USRs effective 9/1/2008 and after, refer to edit 561. If the policy effective date, mod date or rate date is < 9/1/05, the expense constant amount cannot exceed $264. If the policy eff date, mod date or rate date is > = 9/1/05 but < 09/01/07, then the expense constant amount cannot exceed $284. If the policy effective date, mod date or rate date is 9/1/07 or > then the expense constant amount cannot exceed $318.	Submit an E (Exposure) correction or replacement report with the appropriate premium amount for the expense constant class code (0900).	3	Exposure	Accepted with Errors	
000206	Premium discount too large.	Premium discount (non standard class codes 0063 and 0064) amount must be less than 20% of the total standard premium for carriers and less than 24% for SIGs (self insured groups). Edit passes if premium is less than $100.	Submit an E (Exposure) correction or replacement report with the appropriate premium discount amount.	2	Exposure	Reject	
000207	Deductible amount per claim/accident is invalid for deductible type.	If the deductible type (2nd position) is 3, 4, 5, or 6 per claim/accident can be zero or blank. If both the deductible types are zero, the deductible per claim/accident amount must equal zero or blank.	Submit a H (Header) correction report with the appropriate deductible amount or deductible type as defined on the Massachusetts Workers' Compensation web site - Helpful Info; Program Overviews; Deductible Programs.	3	Header	Accepted with Errors	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000208	Deductible amount is not reasonable.	For policies effective prior to 1/1/2008. If the deductible amount is < 5,000 then the deductible credit amount must be < 12% of total standard premium. If the deductible amount is > 100,000 then the credit amount should be between 5% and 99.5% of total standard premium +ARAP (The MA ARAP factor is on the ER mod sheet and is applied to standard premium. The premium that results from the ARAP factor is reported with stat class code 0277. Example: If standard premium is $500 and the ARAP factor is 1.25, then on the unit report stat class code 0277 is reported with $125.) The deductible credit amount is the premium amount reported for class 9663. Only will edit if the premium for 9663 is greater than $500.	Submit a H (Header) correction report with the appropriate deductible amount or deductible type as defined on the Massachusetts Workers' Compensation web site - Helpful Info; Program Overviews; Deductible Programs.	3	Header	Accepted with Errors	
000209	Rate deviation premium credit amount is too large.	The premium amount associated with class codes 9037 and 9034 must be less than 40% of manual premium.	Submit an E (Exposure) correction or replacement report with the appropriate premium amount for the rate deviation premium credit.	3	Exposure	Accepted with Errors	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000212	Verify the large premium amount.	Identify all premium amounts more than 500,000.	If required, submit an E (Exposure) correction or replacement report with the correct premium amount for the specified class. The WCRIBMA will assume the information was correct as reported if there is no carrier response.	1	Exposure	Accepted with Warnings	
000213	The coding for the deductible program is missing or the deductible credit amount is missing.	If class codes 9663 or 9664 appear, then there must be either a claim deductible or an aggregate deductible amount.	Submit an E (Exposure) correction or replacement report with either the deductible coding or the deductible credit amount. Refer to the Massachusetts Statistical Plan - Part 1, Section IV.	2	Exposure/ Header	Reject	
000214	Deductible amount aggregate is invalid.	The deductible Amount aggregate must be > = 10,000 or 0.	Submit a H (Header) correction or replacement report with the appropriate deductible amount aggregate as defined in the Massachusetts Statistical Plan - Part 1, Section IV.	2	Header	Reject	
000215	"F" (Federal class) classification without appropriate exposure coverage act.	If the class code is 6801, 6824, 6826, 6843, 6872, 6874, 7309, 7313, 7317, 7327, 7350, 8709, 8726 or 9077 then exposure coverage act must not be '01'.	Submit correction or replacement report with the appropriate exposure coverage act as defined in the Massachusetts Statistical Plan - Part 1, Section V. Also see the Mass Workers Compensation and Employers Liability Insurance Manual - Part 1, Rule XII, Page R-50.	2	Exposure	Reject	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000216	Exposure coverage act indicates that manual rate should reflect USL&H (U.S. Longshore & Harbor) factor.	If a class code is NOT code 6801, 6824, 6826, 6843, 6872, 6874, 7309, 7313, 7317, 7327,7350, 8709, 8726 or 9077, the exposure coverage act is '02' and the industry group is no 04, 07 or 08 then the reported rate must be the manual rate x the USL&H Factor, with a tolerance of +/- one penny.	Submit an E (Exposure) correction or replacement report with the appropriate manual rate as defined in the Massachusetts Statistical Plan - Part 1, Section V. Also see the Mass Workers Compensation and Employers Liability Insurance Manual - Part 1, Rule XII, Page R-44.	3	Exposure	Accepted with Errors	Y
000218	Verify the reported scheduled rating credit amount.	The premium amount associated with class codes 9887 and 0887 must be less than 50% of the total standard premium.	Submit an E (Exposure) correction or replacement report with the appropriate premium amount for the scheduled rating credit. If the amount is correct, submit Edit Verfication explaining why the amount is correct.	3	Exposure	Accepted with Errors	
000219	The merit rating debit amount is not10% of subject premium.	The premium amount associated with class code 9886 must be less than 10% of the subject premium. Edit only applies if the premium amount associated with class 9886 is greater than $200.	Submit an E (Exposure) correction or replacement report with the appropriate premium amount for the merit rating debit.	2	Exposure	Reject	
000220	The merit rating credit amount is not 10% of subject premium.	The premium amount associated with class code 9885 must be less than 10% of the subject premium. Edit only applies if the premium amount associated with class 9885 is greater $200.	Submit an E (Exposure) correction or replacement report with the appropriate premium amount for the merit rating credit.	2	Exposure	Reject	
000221	ARAP amount is too large.	The premium associated with class code 0277 must be < 50% of standard prior to 9/1/07 and 26% as of 9/1/07.	Submit an (E) Exposure correction or replacement report with the appropriate amount of premium for ARAP (0277).	3	Exposure	Accepted with Errors	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000222	Employers liability amount is not reasonable.	The premium associated with class codes 9803 thru 9816, and 9848 should be between $0 and 7% of manual premium.	Submit an E (Exposure) correction or replacement report with the appropriate employers liability amount.	3	Exposure	Accepted with Errors	
000223	QLMP credit amount is not reasonable.	QLMP credit amount (class code 9880) must be less than 20% of standard premium + ARAP (0277).	Submit an E (Exposure) correction or replacement report with appropriate QLMP credit amount (9880).	3	Exposure	Accepted with Errors	
000227	This carrier code is not an assigned risk carrier.	If the plan type is '02' the carrier code must be a servicing carrier. If the plan type is '05' the carrier code must be a Voluntary Direct Assigned Risk Carrier (VDAC).	Submit a H (Header) correction or replacement report with the appropriate plan type and/or carrier code.	2	Header	Reject	
000228	Assigned risk policies can not have premium discount.	If the plan type is '02' or '05' there cannot be premium associated with class 0063 or 0064.	Submit an E (Exposure) correction or replacement report removing the premium discount class.	2	Header/ Exposure	Reject	
000229	Assigned risk policies can not have retro provisions.	If the plan type is '02' or '05' there the retro indicator must be "N".	Submit a H (Header) correction or replacement report changing the retro indicator to "N".	3	Header	Accepted with Errors	Y
000230	Assigned risk policies must be single state.	If the plan type is '02' or '05' then the multi state indicator must be "N".	Submit a H (Header) correction or replacement report changing the multi state indicator to "N".	3	Header	Accepted with Errors	Y

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000231	Assigned risk policies can not have deductible provisions.	For policies effective prior to 1/1/2008. If the plan type is '02' or '05' then only small deductible provisions are allowed. Edit will first check if the following class codes are reported: 9663 reported on USR with any policy effective year. Class codes 9784, 9785, 9786, 9787 or 9788 reported on USR with policy effective date prior to 01/01/99. Then the edit will check: if the plan type is '02' or '05', that the deductible type 1/deductive type 2 is 0000, 0301 or 0309, the deductible amount per claim/accident is less than or equal to $5000, and the deductible amount aggregate is greater than or equal to $10000.	Submit a H (Header) correction report with the appropriate deductible provisions as defined in the edit description.	3	Header	Accepted with Errors	
000232	Premium on this single state policy appears to be too small for retrospective rating provisions.	If the retro indicator is "Y" and the multi-state indicator is "N", then the total standard premium must be > = 25,000.	If required, submit a correction or replacement report with the appropriate total standard premium amount. The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Exposure	Accepted with Warnings	
000236	Incurred indemnity is too large for a claim coded as temporary.	Claim has an injury kind of 5 (temporary) and indemnity incurred > 300,000.	Submit a L (Loss) correction report either decreasing the incurred indemnity amount or changing the injury kind.	3	Loss	Accepted with Errors	

Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000237	Verify large indemnity incurred.	Claim with incurred indemnity > 750,000.	If required, submit an L (Loss) correction or replacement report with the appropriate incurred indemnity amount. The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Loss	Accepted with Warnings	
000238	Verify large medical incurred.	Claim with incurred medical > 750,000.	If required, submit a L (Loss) correction or replacement report with the appropriate incurred medical amount. The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Loss	Accepted with Warnings	
000239	Verify large indemnity paid.	Claim with paid indemnity > 750,000.	If required, submit a L (Loss) correction or replacement report with the appropriate paid indemnity amount. The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Loss	Accepted with Warnings	
000240	Verify large medical paid.	Claim with paid medical > 750,000.	If required, submit a L (Loss) correction or replacement report with the appropriate paid medical amount. The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Loss	Accepted with Warnings	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000241	Loss amounts conflict with lump sum indicator.	If lump sum indicator is "Y" then the paid indemnity must equal the incurred indemnity.	Submit a L (Loss) correction or replacement report either setting the paid indemnity amount equal to the incurred indemnity or change the lump sum indicator to "N".	3	Loss	Accepted with Errors	
000242	Type of settlement conflicts with the lump sum indicator.	If lump sum indicator is "Y" then the type of settlement must be '09'.	Submit a L (Loss) correction or replacement report either changing the type of settlement to '09' or change the lump sum indicator to "N".	3	Loss	Accepted with Errors	Y
000245	Verify the lack of ALAE (Allocated Loss Adjustment Expense) on this large claim.	If incurred indemnity is greater than 100,000, then ALAE should be greater than 0.	Submit a L (Loss) correction or replacement report with the appropriate incurred indemnity and ALAE amounts.	3	Loss	Accepted with Errors	
000246	The employers attorney fees reported on this claim must also be recorded as ALAE.	If employers attorney fees are greater than 0 and claim is closed then the ALAE paid must be greater than 0.	Submit a L (Loss) correction or replacement report with the appropriate employers attorney fees and ALAE paid amount.	3	Loss	Accepted with Errors	
000248	The claimants attorney fees reported on this claim must also be recorded as indemnity loss.	If the claimants attorney fees are greater than 0, then the incurred indemnity must be greater than 0.	Submit a L (Loss) correction or replacement report with the appropriate claimants attorney fees and incurred indemnity amount.	3	Loss	Accepted with Errors	
000251	Indemnity paid and incurred indicates subrogation, but subrogation is not coded in the type of recovery.	If the indemnity paid is greater than the indemnity incurred, then the type of recovery must be '02', '03', '04',or '05'.	Submit a L (Loss) correction or replacement report either changing the paid indemnity amount or change the recovery type.	3	Loss	Accepted with Errors	
000252	Medical paid and incurred indicates subrogation, but subrogation is not coded in the type of recovery.	If medical paid is greater than medical incurred, then type of recovery must be '02', '03', '04',or '05'.	Submit a L (Loss) correction or replacement report either changing the paid medical amount or change the recovery type.	3	Loss	Accepted with Errors	

Complete Massachusetts Statistical Edit List

Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000253	If the nature of injury is 60-68, 70-76, 78-80, then the type of loss should be 02 or 03. If the nature of injury is 83, then the type of loss should be 02. If the nature of injury is 01-59, then the type of loss should be 01. If the nature of injury is 69, 77, 90 or 91, then the type of loss can be 01, 02, or 03.	If the nature of injury is 60-76, 78-80, then the type of loss should be 02 or 03. If the nature of injury is 83, then the type of loss should be 02. If the nature of injury is 01-59, then the type of loss should be 01. If the nature of injury is 69, 77, 90 or 91, then the type of loss can be 01, 02, or 03.	Submit a L (Loss) correction or replacement report with the appropriate nature of injury and loss type.	3	Loss	Accepted with Errors	Y
000254	There is a conflict between the type of loss and the cause of accident.	If type of loss is 02 or 03, then cause of accident must be 01, 03, 06, 08, 09, 11, 14, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 70, 74, 82, 83, 90, 94, 95, 96, 97, 98, or 99.	Submit a L (Loss) correction or replacement report with the appropriate cause of accident and loss type.	3	Loss	Accepted with Errors	Y
000256	This pre-ASWG USR needs to be manually converted to ASWG.	If ASWG indicator is not 'A', meaning the USR is a pre-ASWG USR, then fail edit.	Submit replacement report with USR as an ASWG unit.	4	Header	Reject	
000257	Class code requires a partner class.	This edit is checking, for example, if class 4771 is reported on a USR, then class 0771 must be reported on the same USR and that their exposure must be equal to each other.	Submit an E (Exposure) correction or replacement report with the appropriate partner class. Refer to the Massachusetts Statistical Plan - Part 3, A.5.1.c	2	Exposure	Reject	
000258	Claim count appears to be large in comparison to loss amount.	This edit fails if medical incurred plus indemnity incurred divided by claim count is less than 50.	If required submit a correction report with the appropriate incurred amounts and/or claim count. The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Total	Accepted with Warnings	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000259	Aggregate deductible amount must be greater than or equal to the claim deductible amount.	Deductible amount (for the claim) is not less than the deductible amount aggregate. Exception: Ded amount Aggregate of 0 (or blank) is ok with any claim deductible amount.	Submit a correction report with the appropriate deductible amount aggregate amount. Refer to the Massachusetts Statistical Plan - Part 1, Section IV.	3	Header	Accepted with Errors	
000260	Negative loss amount.	Loss amounts cannot be negative.	Submit a L (Loss) correction or replacement report with the correct loss amount.	2	Loss	Reject	
000261	Overall premium must be at least 1.	The sum of the standard premium and the premium and credits associated with the non-standard premium is not at least 1. Exception to the edit if there are no exposure records or if the only exposure record has class code 1111.	Submit a correction report with the appropriate overall premium amount.	3	Exposure	Accepted with Errors	
000262	Per capita exposure times rate is not equal to the reported premium.	The reported manual rate is not within 50 (+ or - 35) of the result of (premium/exposure). Edit applies to per capita classes 0908, 0909, 0912 and 0913.	Submit an E (Exposure) correction or replacement report with the appropriate exposure amount for the per capita class reported. Refer to the Massachusetts Statistical Plan - Part 1, Section V.	3	Exposure	Accepted with Errors	
000263	Claim count and at least one loss amount are inconsistent.	Claim count is greater than 0 and all of the loss amounts are 0, or the claim count is 0 and any of the loss amounts are non zero. Exception is if claim is coded with a type of settlement code of '05'. If the claim count is greater than 0 and all of the loss amounts are 0, the system will default the claim count to 0 and the edit will pass.	Submit a correction or replacement report with the appropriate claim count and loss amounts.	2	Loss	Reject	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000264	Expense constant must appear on MA single state policy.	Unit which is not multistate but has a standard premium greater than 750 and does not contain class 0900 and the appropriate expense constant premium.	Submit a correction or replacement report containing the expense constant class code (0900) as defined in the Massachusetts Statistical Plan - Part 1, Section IV and Part 1, Section V.	2	Header/ Exposure	Reject	
000265	The policy premium is too large to require a loss constant.	Class code 0032 and corresponding premium appear on the unit with standard premium greater than $550.	Submit a E (Exposure) correction or replacement report either removing the loss constant (0032) or with the appropriate standard premium amount. Refer to the Massachusetts Statistical Plan - Part 1, Section IV.	3	Exposure	Accepted with Errors	
000266	Risk does not appear to have sufficient premium to require an ARAP (All Risk Adjustment Program) surcharge.	Standard premium is less than $1000 and has class code 0277 and corresponding ARAP surcharge premium. Edit only applies to single state USRs.	If required, submit an E (Exposure) correction or replacement report either with the appropriate standard premium amount or by removing the 0277 class. Refer to the Massachusetts Statistical Plan - Part 1, Section IV.	1	Exposure	Accepted with Warnings	
000267	Premium amount suggests the risk qualifies for experience rating but merit rating is reported on unit.	Standard premium is greater than $25,000 and either class code 9885 or 9886 and corresponding premium/credit is reported.	If required, submit an E (Exposure) correction or replacement report either with the appropriate standard premium amounts or remove the merit rating class. Refer to Experience Rating Plan section listed under Program Overviews in the Helpful Information section of the WCRIBMA website (wcribma.org).	1	Exposure	Accepted with Warnings	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000415	This USR has a report level that is greater than 05 with a policy effective date less than 01/01/99.	This edit will check to make sure the report number is valid. If report is > 05 and policy effective date < 01/01/99, then fail.	Submit a replacement report, by reporting R in the Rep Ind field on the Header record, with corrections to the date and/or report level. If the USR was submitted in error and should be deleted, a written request needs to be sent to the WCRIBMA contact in the Data Operations department.	4	Header	Reject	
000416	Exposure or premium is not allowed on subsequent reports.	Exposure totals are not allowed on subsequent reports. Exposure is only allowed on first reports and corrections to the first report.	Submit correction or replacement report without any exposure information reported on the USR.	2	Header/ Exposure	Reject	
000419	The plan indicator on the USR must match the plan indicator on the corresponding policy.	The plan indicator on the USR must match the plan indicator on the corresponding policy.	Submit correction or replacement report with the appropriate plan indicator. This plan indicator should match the plan indicator on the policy. Refer to the Massachusetts Statistical Plan - Part 1, Section IV.	2	Header/ Policy	Reject	
000421	Invalid accident date for claim submitted with catastrophe code 48.	The accident date for claims entered with catastrophe code 48 must be between 9/11/01 and 9/14/01.	Submit a L (Loss) correction or replacement report with the appropriate claims and accident dates if catastrophe code 48 is selected.	2	Loss	Reject	
000422	Invalid policy effective date for claim submitted with catastrophe code 48.	The policy effective date for claims entered with catastrophe code 48 must be between 8/27/00 and 9/14/01.	Submit correction or replacement report with the appropriate policy effective date for any claims submitted with catastrophe code 48.	2	Header/ Loss	Reject	

Complete Massachusetts Statistical Edit List

Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000423	Policy conditions - estimated exposure indicator - this USR is estimated.	Estimated exposure indicator from header record is equal to "Y" on report 01.	When audit has been completed, submit an E (Exposure) correction or replacement report with the audited exposures and correct estimated audit code.	3	Header	Accepted with Errors	
000426	Deductible per claim is greater than zero, but no deductible class has been reported.	If the deductible per claim is greater than zero, then a deductible class must also be reported. This edit checks the exposure record.	Submit an E (Exposure) correction or replacement report with the appropriate deductible class (9663 or 9664) as defined in the Massachusetts Statistical Plan - Part 1, Section V.	3	Header/ Exposure	Accepted with Errors	
000428	Deductible coding is not consistent.	If the deductible type is 0000 the then deductible aggregate amount and deductible percent must all be blank or zeros.	Submit a H (Header) correction or replacement report either removing the deductible amounts on the header or adding the appropriate deductible coding.	2	Header	Reject	
000430	Deductible per claim is greater than zero, but no deductible class has been reported.	If the deductible per claim is greater than zero, then a deductible class must also be reported. This edit checks the header record.	Submit an E (Exposure) correction or replacement report with the appropriate deductible class (9663 or 9664) as defined in the Massachusetts Statistical Plan - Part 1, Section V.	3	Header/ Exposure	Accepted with Errors	
000434	Death claims with catastrophe code 48 require injury part and nature equal to 90, and injury cause equal to 89.	For claims with catastrophe code 48 and injury code 01, injury part and nature must be 90, injury cause must be 89.	Submit a L (Loss) correction or replacement report with the appropriate part, nature and cause codes.	2	Loss	Reject	
000439	Losses can not be coded to class 9740.	Losses can not be coded to class code 9740 (terrorism coding).	Submit a L (Loss) correction or replacement report with the appropriate class code for the loss being reported.	2	Loss	Reject	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000440	Class 9740 should be reported for the approved date range.	Class 9740 should be reported for the approved date range (11/26/02).	Submit an E (Exposure) correction or replacement report with the appropriate class code. For information regarding class 9740, refer to the Massachusetts Statistical Plan - Part 3, A.5.19.	1	Exposure	Accepted with Warnings	
000441	The Premium for class 9740 should be less than the [total standard exposure/100] * .20 or less than [total subject premium] * .10.	The premium associated with class 9740 should be less than the total standard exposure divided by 100 and then multiplied by .20 or less than the total subject premium multiplied by .10.	Submit an E (Exposure) correction or replacement report with the appropriate premium amount for class 9740.	1	Exposure	Accepted with Warnings	
000450	Deductible credit amount is not reasonable.	If class 9664 is reported and the deductible per claim is less than or equal to 5000, then the premium must be less than 12% of total standard premium. If the deductible per claim is greater than 100000, then the premium must be between .5 and 99.5 % of ((sum of above the line premium excluding 9664 and credit classes) + ARAP, which is reported on the 0277 class).	Submit an E (Exposure) correction or replacement report with the appropriate deductible credit amount.	3	Exposure/ Header	Accepted with Errors	
000454	Policy is missing class 9046 for CPAP Factor.	For first reports, if the selected CPAP factor has a status of L and the USR does not include class 9046, edit fails.	Submit an E (Exposure) correction or replacement report adding class 9046 to the Exposure records.	3	Exposure	Accepted with Errors	
000455	Class 9046 not allowed if CPAP is DNQ.	If the selected CPAP Factor has a status of D (DNQ) and the USR does include class 9046, fail edit.	Submit an E (Exposure) correction or replacement report removing class 9046.	3	Exposure	Accepted with Errors	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000462	USR reports deductible provisions but endorsement is not part of the original policy.	If class code 9663 or 9664 appears on a USR with non zero premium, then verify that the policy contains a deductible endorsement record effective some time during the policy period. This edit is applicable to policies effective > = 7/1/2005.	Verify that the policy contains a deductible endorsement record. If not, submit the deductible endorsement.	3	Exposure/ Policy	Accepted with Errors	
000464	Policy/USR interstate indication inconsistent.	For units with policy effective date of 7/1/2005 and greater, the interstate indicator must be Y if the policy experience rating code is 1 or 2. The interstate indicator must be N if the policy experience rating code is 3 or 5.	Submit an H (Header) correction or replacement report with the appropriate interstate indicator. If the error is caused from the policy side, contact the WCRIBMA.	3	Header/ Policy	Accepted with Errors	
000467	USR/Policy Multistate indication inconsistent.	If the USR multi state indicator is Y, then policy must provide coverage for more than one state. Only edit if policy effective date >= 07/01/05. If multi state indicator on the USR is N, the policy should match (multi state indicator not Y, or no other states on 3A). If multi state indicator on the USR is Y, then the policy should have more than the bureau state listed in 3A, or a multi state indicator of Y.	Submit a H (Header) correction or replacement report with the appropriate multistate indicator. If the error is caused from the policy side, contact the WCRIBMA.	3	Header/ Policy	Accepted with Errors	
000468	Type of coverage including employers liability has been reported with injury code 06.	If a claim is coded as medical only (injury code 06), it cannot be an employer's liability claim (coverage type 02, 03, 04).	Submit a L (Loss) correction or replacement report either changing the injury code or the coverage type. Refer to the Massachusetts Statistical Plan - Part 1, Section VI.	2	Loss	Reject	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000471	Injury code is not acceptable for report levels 6 through 10.	If the USR report level is 06 or greater and the injury code is 5, 6, or 7, then fail with a warning.	If required, submit a L (Loss) correction or replacement report. The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Loss	Accepted with Warnings	
000472	Paid medical and paid indemnity can not be zero for report levels 6 through 10.	If the USR report level is 06 or greater and paid medical and paid indemnity are both zero, then fail with a warning.	If required, submit a L (Loss) correction or replacement report.	3	Loss	Accepted with Errors	
000473	Claimant attorney fees, employer attorney fees and ALAE paid can not be zero for report levels 6 through 10.	For open claims reported on USRs where report level is 06 or greater, claimant attorney fees, employer attorney fees and ALAE paid cannot be zero.	If required, submit a L (Loss) correction or replacement report.	3	Loss	Accepted with Errors	
000474	SIGs (Self Insured Groups) can not submit USRs with report levels 6 through 10.	If the USR report level is 06 or greater and the carrier is a SIG (Self Insured Group), then reject.	Check the appropriate reporting level of the unit.	4	Header	Reject	
000476	This USR has a report level that is greater than 10.	This edit checks to make sure the report number is not greater than 10.	Check the appropriate reporting level of the unit.	4	Header	Reject	
000477	"No exposure developed" unit report, must use class code 1111 and leave the exposure field blank.	If a correction is deleting all above the line exposures and class 1111 has not been reported, then fail.	Submit a E (Exposure) correction or replacement report adding the 1111 no exposure class.	3	Exposure	Accepted with Errors	
000483	Losses coded to occupational disease class code must be reported with Loss Coverage Code that indicates occupational disease.	If a claim has class code 0059, 0067, 0066, or 0065 then the type of loss must be 02.	If required, submit a L (Loss) correction or replacement report with correct loss coverage code. The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Loss	Accepted with Warnings	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000484	Verify reported rate.	Reported manual rate must match approved manual rate for the reported rate revision effective date. Edit applicable to policies effective prior to 5/1/2017.	Submit an E (Exposure) correction or replacement report with the appropriate approved manual rate or appropriate rate revision effective date.	3	Exposure	Accepted with Errors	Y
000485	Verify large medical losses without indemnity losses.	Claims with Incurred Medical losses exceeding $100,000 are expected to also contain Incurred Indemnity losses.	If required, submit a L (Loss) correction or replacement report with the appropriate medical and indemnity loss information.	3	Loss	Accepted with Errors	Y
000486	Warning - Accident Date has changed.	If the accident date for the revised loss record is different from the previous record, then fail the edit.	If required, submit a L (Loss) correction or replacement report with the appropriate accident code on the loss record. The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Loss	Accepted with Warnings	
000487	Verify repeating exposure or premium digits.	Exposure or premium with all repeating digits should be verified for accuracy. Edit applies when exposure or premium amount exceeds 100,000.	If required, submit an E (Exposure) correction or replacement report with the appropriate exposure and/or premium amounts. The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Exposure	Accepted with Warnings	
000488	USR was reported with an unacceptable replacement indicator.	Replacement indicator must equal R or be blank.	Submit a H (Header) correction or replacement report with the appropriate replacement indicator.	2	Header	Reject	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000489	Verify repeating digits in loss amounts.	Loss amounts with all repeating digits should be verified for accuracy (e.g., 999999999 applies to values in excess of $100,000).	If required, submit a L (Loss) correction or replacement report with the appropriate loss amounts. The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Loss	Accepted with Warnings	
000490	Warning -part/nature/ cause has changed.	If the injury description code (part/nature/cause) for the revised loss record is different from the previous record, then fail the edit. Will only fail if previous part/nature/cause was valid.	If required, submit a L (Loss) correction or replacement report with the appropriate accident code on the loss record. The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Loss	Accepted with Warnings	
000491	Verify that audited payroll has been reported.	Exposure is not expected to contain four or more trailing zeros when estimated exposure flag = 'N'—please verify for accuracy.	If required, submit an E (Exposure) correction or replacement report with the appropriate audited payroll amounts. The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Exposure	Accepted with Warnings	
000493	Claim has same accident date but different catastrophe numbers.	If > 0, then any other catastrophe claim on the unit that has the same accident date is expected to have the same catastrophe number if reported (excluding Extraordinary Catastrophic Events).	Submit a L (Loss) correction or replacement report with the appropriate accident date and catastrophe number.	3	Loss	Accepted with Errors	
000494	Verify replacement not reporting claim records.	Replacement report is expected to contain claim records when claim records existed on the original—please verify for accuracy.	If required, submit correction report with appropriate claim records. The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Header	Accepted with Warnings	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000496	Verify large premium risk without corresponding losses.	If the sum of manual premium amounts, excluding statistical codes, is > $250,000, then sum of incurred medical and incurred indemnity must be greater than or equal to 1% of the sum of the manual premium amounts (excl stat codes).	If required, submit correction report with the appropriate loss amounts. The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Total	Accepted with Warnings	
000497	Invalid per claim deductible amount.	Deductible per claim must be 2500 when deductible aggregate is greater than 10,000 and less than 75,000.	Submit a H (Header) correction or replacement report with the appropriate deductible per claim amount.	3	Header	Accepted with Errors	
000501	Corrections to the correction sequence number are not allowed.	If there is a header correction and the previous correction sequence number is supplied then the system should fail this edit.	Internal Edit. If carrier action is needed, WCRIBMA staff will contact the carrier.	4	Header / Link	Failed	
000502	Invalid aggregate deductible amount.	If aggregate deductible amount is > 10,000 and < 75,000, then aggregate deductible must be no more than 20% of standard premium.	Submit a H (Header) correction or replacement report with the appropriate aggregate deductible amount	3	Header	Accepted with Errors	
000503	Header corrections not allowed on report / correction of 01 / 00 or report levels greater than 01.	Header corrections are only allowed on first reports. If rpt = 01 and corr = 00 or rpt > 01 then fail edit.	Internal Edit. If carrier action is needed, WCRIBMA staff will contact the carrier.	4	Header / Link	Failed	
000504	Header Link data corrections not allowed at report levels greater than 01 and Previous fields must be different than Link data fields.	USR identifies a link data header correction as correction type of H and the reporting of the previous fields (carrier, policy, or effective date). Link data corrections are only valid on first reports (rpt = 01 and corr > 00). Previous fields must be different than the reported link data fields.	Internal Edit. If carrier action is needed, WCRIBMA staff will contact the carrier.	4	Header / Link	Failed	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000505	Max number of attempts reached during USR Correction Processing. Unable to apply corrections - Staff intervention is required.	Only called during USR correction Processing when max number of correction levels have been reached for applying corrections.	Internal Edit. If carrier action is needed, WCRIBMA staff will contact the carrier.	4	Header / Link	Failed	
000506	Error processing Link Data Correction during USR Correction Processing. Unable to apply corrections.	Edit fails if USR Correction Processing fails while applying a Header link data correction.	Internal Edit. If carrier action is needed, WCRIBMA staff will contact the carrier.	4	Header / Link	Failed	
000507	Header link data corrections are not allowed when subsequent USRs exist for the policy.	If previous link data is reported, there cannot be subsequent units for the policy (in accepted status).	Internal Edit. If carrier action is needed, WCRIBMA staff will contact the carrier.	4	Header / Link	Failed	
000508	Update Type of C found on USR - Change records are not allowed in USR Correction Processing.	If 'C' records (change records) are reported and USR Correction Processing is triggered, this edit should fail as change records are not allowed in USR Correction processing.	Internal Edit. If carrier action is needed, WCRIBMA staff will contact the carrier.	4	Header / Link	Failed	
000509	Invalid jurisdiction state for claim submitted with Catastrophe Code 87.	Claims entered with catastrophe code 87 must have jurisdiction state of 31 (NY).	Internal Edit. If carrier action is needed, WCRIBMA staff will contact the carrier.	2	Loss	Failed	
000510	Invalid accident date for claim submitted with Catastrophe Code 87.	The accident dates for claims entered with catastrophe code 87 must be between 09/11/01 and 09/12/02.	Internal Edit. If carrier action is needed, WCRIBMA staff will contact the carrier.	2	Loss	Failed	
000511	Invalid loss type for claim submitted with Catastrophe Code 87 or 12.	The type of loss for claims entered with catastrophe code 87 or 12 must be 02.	Submit a L (Loss) correction or replacement report with the appropriate type of loss for the catastrophe code reported.	2	Loss	Failed	
000512	Invalid injury cause for claim submitted with Catastrophe Code 87.	The injury cause for claims entered with catastrophe code 87 must be 96.	Internal Edit. If carrier action is needed, WCRIBMA staff will contact the carrier.	2	Loss	Failed	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000514	No premium reported for class 9740.	Edit will fail if all of the following are true: 1) Total exposure is > 100,000 2) Either (no 9740 record or no 9740 premium).	If required, submit an E (Exposure) correction or replacement report with the correct premium amount for the class 9740. The WCRIBMA will assume the information is correct as reported if there is no carrier response.	1	Exposure	Accepted with Warnings	
000515	A-rate class code is not approved.	Fail if A-rate class is reported for a coverage ID without approval and the class has A-rate status on the effective date of the exposure record.	Submit an Exposure (E) correction or replacement report with the appropriate and approved class codes in the exposure.	2	Exposure	Reject	
000516	Verify the large deductible amount aggregate.	The deductible amount aggregate cannot be greater than 50,000,000.	If required, submit a H (Header) correction or replacement report with the appropriate deductible amount aggregate.	1	Header	Accepted with Warnings	
000517	Open indemnity claim without indemnity paid.	Paid indemnity must be greater than 0 for open and re-opened claims with incurred indemnity.	Submit a L (Loss) correction or replacement report with the appropriate indemnity paid amount.	3	Loss	Accepted with Errors	
000518	Open medical claim without medical paid.	Paid medical must be greater than 0 for open and re-opened claims with an open claim status and an injury code of 06 or 07.	Submit a L (Loss) correction or replacement report with the appropriate paid medical amount.	3	Loss	Accepted with Errors	
000519	Open medical claim on 3rd report or higher without medical paid and incurred medical less than $1,000.	Paid medical must be greater than 0 for open and re-opened medical claims, report 03 and higher with claim reported on lower report and incurred medical less than $1,000.	Submit a L (Loss) correction or replacement report with the appropriate paid and incurred medical amounts.	3	Loss	Accepted with Errors	
000524	FEIN must be 9 digits.	Federal ID number must be 9 digits if it is reported.	Submit a Header (H) correction or replacement report with the appropriate 9 digit FEIN number.	2	Header	Reject	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000529	Admiralty classes (industry group 07) must have a manual rate that is within the rate approved class file and the rate multiplied by the maximum applicable increased limits factor.	Prior to 9/1/2010, Admiralty classes (industry group 07) must have a manual rate that is within the rate approved class file and the rate multiplied by the USL&H factor plus one penny. 9/1/2010 and after, Admiralty classes (industry group 07) must have a manual rate that is within the rate approved class files and the rate multiplied by 1.36 plus on penny.	Submit a L (Loss) correction or replacement report with the correct manual rate for the Admiralty class reported.	3	Exposure	Accepted with Errors	
000530	Verify large standard premium amount.	USRs reported with standard premium greater than $500,000 without any deductible provisions (deductible types 1 and 2 only) and not coded with a type of coverage 05 for a large risk rating option, and a "Y" on the retro indicator on the header, are subject to verification. If edit passes these conditions it will then look to see that there is a decutible class code in the current view. These class codes are 9663 or 9664.	If required, submit correction report with the correct codings for a large risk rated policy.	1	Header/ Exposure	Accepted with Warnings	
000532	Change in Loss Condition Loss Act.	Check that for a claim number the loss condition code for loss act does not change. If changes are made, must be made at all report levels.	Verify the change in Loss Act is correct. If so, submit correction reports for each report level changing the Loss Act.	1	Loss	Accepted with Warnings	
000536	Change in Loss Condition Type of Loss.	Checks that for a claim number, the loss condition code for type of loss does not change. If changes are made, must be made at all report levels.	Verify the change in Type of Loss is correct. If so, submit correction reports for each report level changing the type of loss.	1	Loss	Accepted with Warnings	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000538	The premium discount reported does not match the premium discount selection filed by the carrier.	If the premium discount reported (0063 or 0064) is not the same as the premium discount selection within the carrier file, then fail the edit. Premium discounts are represented by type A (0063) and type B (0064).	Either submit correction reporting changing the premium discount reported to the filed discount selection for the reporting carrier, or if selection has changed, file a premium discount selection form to the WCRIBMA.	3	Exposure	Accepted with Errors	Y
000542	Mod effective date cannot be prior to the policy effective date by a year or more.	Mod effective date cannot be prior to the policy effective date by a year or more.	Submit an E (Exposure) correction or replacement report with the appropriate mod effective date.	3	Exposure	Accepted with Errors	Y
000543	Mod effective date cannot be greater than or equal to the policy expiration date.	Mod effective date cannot be greater than or equal to the policy expiration date.	Submit an E (Exposure) correction or replacement report with the appropriate mod effective date.	3	Exposure	Accepted with Errors	Y
000544	Mod effective date cannot be greater than the policy effective date for split 0.	Mod effective date cannot be greater than the policy effective date for split 0.	Submit an (E) Loss correction or replacement report with the appropriate mod effective date.	3	Exposure	Accepted with Errors	Y
000547	Catastrophe code not approved.	Catastrophe code is not an approved catastrophe code for Massachusetts.	Submit a L (Loss) correction or replacement report with the appropriate catastrophe code.	3	Loss	Accepted with Errors	
000548	Warning: Suspect part of body / nature of injury combination.	When reported on a USR, certain combinations of part-of-body code and nature-of-injury code are suspect. Some of these combinations apply to all injury types and some apply only to death claims.	If required, submit a L (Loss) correction or replacement report with the appropriate part of body and nature of injury codes for the claim in question.	1	Loss	Accepted with Warnings	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000549	Small deductibles must be reported with 9664.	For USRs with a policy effective date 1/1/2008 or greater with a report 01 any correction, If deductible per claim is >0 but less than or equal to 5000, or the deductible aggregate is > 0 but less than 75,000 then the deductible class 9664 must appear on the USR.	Submit a H (Header) correction or replacement report with the correct classification code, 9664, reported for small deductibles.	3	Header	Accepted with Errors	Y
000551	Standard Premium Total exceeds $500 and there are exposure records with class code 0990 with premium > 0.	If total standard premium exceeds $500 and there are any exposure records with code 0990 with premium > zero, generate a warning message. If the unit is for a 3-yr fixed policy, use $500 * 3. Edit applies only if policy effective date is greater than or equal to the MA premium calcualtion date, 01/01/2008.	Submit an Exposure (E) correction or replacement report to remove code 0990 or to correct other exposures, as appropriate.	3	Exposure	Accepted with Errors	
000552	Second injury fund reported for injury other than death or permanent total.	USR reported with recovery codes 02 [2nd injury fund only] and 04 [Subrogation with 2nd injury fund] where injury type is not 01 or 02. Allow recovery code 02 and 04 with injury type 09 if the lump sum flag is Y.	Submit a L (Loss) correction or replacement report with the appropriate recovery code for the death or PT claim reported.	3	Loss	Accepted with Errors	Y
000553	Correction type code is invalid for this report level.	If correction type code is present, correction sequence code must be greater than '00'.	Submit a replacement report, reporting the R indicator in the Rep Ind field, with the appropriate correction type code for this report level.	2	Header	Reject	
000554	Loss amounts conflict with claim status reported. Claim status has been defaulted as a result.	If both paid indemnity and medical amounts are greater than or equal to the incurred amounts, the claim is closed. Otherwise the claim is open.	Submit a L (Loss) correction or replacement report with the appropriate paid indemnity and medical amounts.	1	Loss	Accepted with Warnings	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000557	Individual Case Reports (ICR) are no longer accepted. ICR data was removed prior to validation.	If there are ICRs on the unit and its after 1/1/2009 then the ICR is automatically deleted prior to unit validation.	No corrective action necessary.	1	ICR	Accepted with Warnings	
000558	Loss Constant Too Large.	For class code 0032, the expo summed premium amount can not exceed $50.	Submit an Exposure (E) correction or replacement report with the appropriate premium amount, less than $50, for class code 0032 or to remove class 0032, as appropriate.	2	Exposure	Reject	
000560	The premium amount associated with scheduled rating must be less than 50% of algorithm manual premium.	The premium amount associated with class codes 9887 and 0887 must be less than 50 % of total manual premium. This edit only applies to policies with effective date of 1/1/08 and later.	Submit an E (Exposure) correction or replacement report with the appropriate amount of premium to be associate with the scheduled ratings codes.	3	Exposure	Accepted with Errors	
000562	An Aggravated Inequity correction report cannot be filed to reduce loss amounts for a claim that was previously reported as a closed claim.	The previous loss record must be open = 0 if the Correction Type Code is A (Aggravated Inequity).	Verify the report loss amounts are accurate. Otherwise submit a L (Loss) correction or replacement report with the appropriate Correction Type code in order to change the loss amounts.	1	Loss	Accepted with Warnings	
000563	An Aggravated Inequity correction report cannot be filed for a claim that has not been closed.	The revised loss record must have a claim status of 1 (closed) if the Correction Type Code equals A (Aggravated Inequity).	Verify the report is closed. Otherwise submit a L (Loss) correction or replacement report with the appropriate Correction Type code.	3	Loss	Accepted with Errors	Y

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000564	An aggravated inequity correction report cannot be filed when the loss amounts for a claim are increasing.	If the correction type = A, for any report/correction level, the revised loss indmenity and/or medical amounts should not increase. The edit looks at total incurred rather than medical and indemnity separately. It sums the incurred indemnity and incurred medical on the Revised (R) line and comparing it to the sum of the incurred indemnity and incurred medical on the Previous (P) line to see if the amount is increasing.	Verify the sum of the incurred indemnity and incurred medical on the revised line and compare it to the sum of the incurred indemnity and incurred medical on the previous line. Check if this is increasing. Submit a correction or replacement report with the correct amounts.	3	Loss	Accepted with Errors	
000565	An Aggravated Inequity report can only be filed at the latest report level.	If correction type code equals A and there is an accepted report/correction at a higher level, then reject report.	If report was submitted in error, no action needed. Otherwise, submit a replacement report with the appropriate correction type or submit a correction report for the latest report level with the appropriate correction type.	4	Header	Reject	
000571	Rate effective date cannot be greater than or equal to the policy expiration date.	The edit will only run if the policy expiration date, as reported on the unit, is different than the coverage expiration date. The edit fails if the rate effective date is equal to or greater than the reported policy expiration date on the unit.	Submit an E (Exposure) correction or replacement report changing the rate effective date on the exposure record.	2	Exposure	Failed	
000572	The grouped claim reporting option is no longer a reporting option. All claims must be listed individually with the appropriate claim number.	The edit fails if the claim number is null (signifying a group claim) and the policy effective date is on or after 1/1/2007.	Submit a L (Loss) correction or replacement report to add a separate loss record for each loss that is included in the group claim.	2	Loss	Reject	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000573	Losses cannot be closed without payment when paid amounts were reported on the previous loss records. A revised loss record is required.	If a previous loss record is reported on a subsequent report (report >01, correction = 00) with paid indemnity and/or medical loss amounts, look for the claim's revised record.	Submit a L (Loss) correction report or replacement report correcting the indemnity and/or medical paid amounts on the claim.	1	Loss	Accepted with Warnings	
000574	Class code 9751 is not allowed in unit statistical reporting.	9751 is not an allowed USR class code.	Submit an E (Exposure) correction or replacment report to remove class code 9751.	2	Exposure	Reject	
000626	Warning: Two or more claims have the same accident date with no catastrophe number.	Two or more claims have the same accident date with no catastrophe number.	Verify the reported accident dateas and catastrophe codes are accurate. Otherwise submit a L (Loss) correction or replacement report with the appropriate accident dates or catastrophe codes.	1	Loss	Accepted with Warnings	
000631	Injury Code of 01 is changing to a different Injury Code on a new report level that has a Settlement Type other than 05.	If the Injury code in the previous report is 01 (death claim) it is not allowed to be changed to a different injury code on subsequent reports, unless the Settlement Type is 05 (non-compensable) . The change in Injury from 01 to another Injury code is acceptable for Correction Reports regardless of Settlement Type	Verify the reported injury code is accurate. Otherwise submit a L (Loss) correction or replacement report to the current report level or previous reports levels with the appropriate injury code.	1	Loss	Accepted with Warnings	
000661	The Estimated Audit Code was changed to a Y or N to indicate the insured has cooperated with the audit. The statistical code 9757 must be removed or have zero premium.	Stat code 9757 premium must be zero if estimated audit code changes from U to Y/N - for header corrections only	Submit an E (Exposure) correction or replacement report to remove class code 9757 or change 9757 premium to 0. Or submit a header correction or replacement report to change estimated audit code to U.	2	Header	Reject	

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Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000664	Statistical code 9757 with Premium Amount greater than zero is not valid with Estimated Audit Code of N or Y.	If stat code 9757 is reported with premium greater than 0, the estimated audit code must be U - for header corrections only	Submit an E (Exposure) correction or replacement report to remove class code 9757 or change 9757 premium to 0. Or submit a header correction or replacement report to change estimated audit code to U.	2	Header	Reject	
000671	The Estimated Audit Code was changed to a Y or N to indicate the insured has cooperated with the audit. The statistical code 9757 must be removed or have zero premium.	Stat code 9757 premium must be zero if estimated audit code changes from U to Y/N - for multiple and expo corrections only	Submit an E (Exposure) correction or replacement report to remove class code 9757 or change 9757 premium to 0. Or submit a header correction or replacement report to change estimated audit code to U.	2	Exposure	Reject	
000672	Statistical code 9757 with Premium Amount greater than zero is not valid with Estimated Audit Code of N or Y.	If stat code 9757 is reported with premium greater than 0, the estimated audit code must be U - for multiple and expo corrections only	Submit an E (Exposure) correction or replacement report to remove class code 9757 or change 9757 premium to 0. Or submit a header correction or replacement report to change estimated audit code to U.	2	Exposure	Reject	
000700	Manual Rate and/or Premium are not allowed for this class code.	Class code 0012 should not be submitted with a premium and/or manual rate.	Submit an E (Exposure) correction or replacement report to remove premium or manual rate, from class code 0012.	2	Exposure	Failed	
000701	Catastrophe Nbr 12 must be reported for Claim <1> when Nature of injury is 83	Check to see if Catastrophe number 12 is included when Nature of Injury is 83.	Submit an L (Loss) correction or replacement report with the appropriate Catastrophe number for the Nature of Injury reported.	2	Loss	Reject	
000702	Catastrophe Nbr 12 must be reported for Claim <1> when Cause of injury is 83	Check to see if Catastrophe number 12 is included when Cause of Injury is 83.	Submit an L (Loss) correction or replacement report with the appropriate Catastrophe number for the Cause of Injury reported.	2	Loss	Reject	
000703	Cause of injury must be 83 when Nature of Injury is 83 for claim <1>	Check to see if Cause of Injury is 83 when Nature of Injury is 83.	Submit an L (Loss) correction or replacement report with the appropriate Cause of Injury and Nature of Injury.	2	Loss	Reject	

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Complete Massachusetts Statistical Edit List

Edit ID	Rejection Message	Edit Description	Corrective Action	Severity	Edit Type	Edit Status	Data Quality Finable Edit
000704	Cause of Injury must be 83 when Catastrophe 12 is reported for claim <1>	If Catastrophe 12, cause of Injury must be 83	Submit an L (Loss) correction or replacement report with the appropriate Cause of Injury for the Catatrophe number reported.	2	Loss	Reject	
000705	Nature of Injury must be 83 when Cause of Injury is 83 for claim <1>	If Cause of Injury is 83, Nature of Injury must be 83.	Submit an L (Loss) correction or replacement report with the appropriate Nature of Injury and Cause of Injury.	2	Loss	Reject	
000706	Nature of Injury must be 83 when Catastrophe 12 is reported for claim <1>	If Catastrophe 12, nature of Injury must be 83.	Submit an L (Loss) correction or replacement report with the appropriate Cause of Injury for the Catatrophe number reported.	2	Loss	Reject	
000717	Accident date for claim submitted with Catastrophe 12 must be <1>.	The accident date for claims entered with catastrophe number 12 must be greater than or equal to 12/01/2019.	Submit an L (Loss) correction or replacement report to correct the Accident date and/or Catastrophe number.	2	Loss	Reject	
000901	Verify reported rate.	Reported manual rate must match approved manual rate for the policy effective date. Edit applicable to policies effective on 5/1/2017.	Submit an E (Exposure) correction or replacement report with the appropriate approved manual rate or appropriate rate revision effective date.	3	Exposure	Accepted with Errors	Y