# INSURER/SELF-INSURER ELECTRONIC DATA SPECIFICATION

**Edition Q2**

**Version 1.2**

# Part 1

# Implementation of the National Insurer Data

# Specification

# and

# Submission Rules

## ABOUT THIS SPECIFICATION

### *Version*

Version Number 1.2 – issued 30 October 2015.

Note: No 'applicable from' date has been mandated for this version, as it does not introduce any prospective requirements – it has been issued to provide greater definitional clarity, describe a number of processes introduced, and document changes already made to date as the result of the WA implementation of the NIDS.

Replaces Editions E4 and Q1, and Version 1.1 of Edition Q2.

### *Coverage*

This specification sets out WorkCover WA's rules for the implementation of the National Insurer Data Specification (NIDS), version 8.0, which covers the collection of Policy and Claims data from approved insurers and exempt employers (self-insurers) operating within the Western Australian jurisdiction.

### *This Document*

This is Part 1 of a 2-part specification, and covers the following aspects of WorkCover WA's implementation of the NIDS:

- Comparison with the Q1 edition of the specification
- WorkCover WA's modifications to version 8.0 of the NIDS
- Data submission regime
- Processing, validation and issue resolution arrangements

It should be considered together with Part 2 of the specification, which describes each NIDS data item individually, as defined and implemented by WorkCover WA.

### *Copies of This Document Can Be Obtained From:*

Scheme Information Services
WorkCover WA
2 Bedbrook Place
SHENTON PARK  WA  6008

The Insurer On-Line Application – INO

The WorkCover WA website - www.workcover.wa.gov.au

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## INTRODUCTION

### *Background*

WorkCover WA's Policy and Claims data requirements arise from its obligations to monitor and recommend changes to the Western Australian workers' compensation scheme, to promote employment safety and injury management, ensure compliance with the Workers' Compensation and Injury Management Act 1981 (the Act), and to collect data that complies with the National Data Set (NDS) specification.

Electronic collection of policy and claims data by WorkCover WA commenced in March1990, with the issue of the first "Specification for Magnetic Tape Return of Workers' Compensation Policy and Claims Details" document in March of that year. That document was progressively modified (as the "E" series) over subsequent years, with the last substantial modification (to edition E4) being made in September 1994. Two procedural updates were also made in mid and late 2000.

Over 1999/2000 a comprehensive review was carried out not only of the existing specification (edition E4), but also of all data supply arrangements between WorkCover WA and insurers/self-insurers, and of the various recommendations made by inquiries into the workers' compensation system itself. This resulted in the issue in September 2001, of Edition Q1, which was applicable from 1 January 2002. The last revision (Version 1.5.1b) was issued on 1 July 2010.

Over the next two years WorkCover WA collaborated with the Insurance Council of Australia and workers' compensation regulators in Tasmania, the Australian Capital Territory and the Northern Territory (i.e. the risk states) to develop a common specification for workers' compensation data supplied by insurers. The new National Insurer Data Specification (NIDS) was agreed in 2012 and specifies data items, formats and validation rules. NIDS is closely based on the Western Australian Q1 specification but also includes data items specific to the individual jurisdictions while allowing for a common data extraction and supply process for insurers.

WorkCover WA decided late in 2012 to implement the NIDS in Western Australia from January 2014.

### *Document Purpose*

This document is designed to describe:

- The extent and nature of the changes between Version 1.5.1 of Edition Q1 of the Insurer/Self-Insurer Electronic Data Specification and Version 8.0 of the NIDS
- The content and structure of the NIDS and its XML schema
- The WorkCover WA implementation of the NIDS (data items, submission rules and XML schema).

### *Who Should Use This Document?*

This specification is primarily designed for Insurers and Self-Insurers, to enable them to provide the Policy and Claims data required by WorkCover WA.

Those already supplying NIDS-formatted data to other jurisdictions should use it to ensure that they are conforming to the WorkCover WA-specific data item definitions and submission rules.

Those approaching the NIDS for the first time should use it to gain a better understanding of the NIDS and its XML schema structure, and as the basis for the design of their submissions to WorkCover WA.

Users of the data will also find it useful for its description of the data item definitions, submission rules, and validations performed.

Note:  Text in this document that has been changed from that in Version 1.1 is highlighted in yellow.

## Comparison - Q1 to NIDS

### *Major Changes between Edition Q1 and NIDS*

There are a number of differences between Q1 and NIDS version 8.0. These can be categorised as follows:

- Data Items added, deleted, and changed
- Code values and numbers changed
- Generic format changes

Most of these changes are a part of the 'standard' NIDS. However, there are also a small number of WorkCover WA-specific changes to the NIDS – these are also outlined below.

### Data Items added, deleted, and changed

The lists setting out data item-level changes to the Q1 list that have been made necessary to conform to the NIDS are set out in Appendix 1.

### Code Value and Number Changes

The following is a list of Q1 data items for which there has been a change to either code values, code numbers, or both. Details of these differences are set out in Appendix 2

| Q1 Data Item | NIDS Data Item |
|---|---|
| P16 - Employer Address State/Territory | P012 - Employer Address State/Territory |
| P17 - Lapsed Reason Code | P027 - Lapse/Cancellation Reason Code |
| P18 - Coverage Type Code | P029 - Coverage Type Code |
| P26 – Policy Type Code | P039 – Premium Collection Type |
| C10 – Shared Claim Code | C009 – Shared Claim Code |
| C11 – Record Status Code | C010 – Record Status Code |
| C22 – Duty Status Code | C032 – Duty Status Code |
| C23 – Employment Status Code | C033 – Employment Status Code |
| C24 – Employment Type Code | C034 – Employment Type Code |
| C25 – Full/Part Time Code | C035 – Full/Part Time Code |
| C88 – Sec 155 D(3) Delegation Flag | C054 – Injury Management Program Type |
| C36 – Claim Status Code | C062 – Claim Status Code |
| C39 - Level of Fitness at Latest Medical Certificate | C085 - Capacity to Work at Medical Certificate |
| C44 - Extent of Incapacity Code | C055 – Extent of Incapacity Code |
| C48 – Common Law Involvement | C063 – Common Law Involvement |

| C49 – Common Law Outcome | C064 – Common Law Outcome |
|---|---|
| C64 – Payment Type Code | C100 – Payment Type Code |
| C69 – Transaction Type Code | C107 – Transaction Type Code |
| C85 – Work Status | C087 – Work Status |
| C86 - Return to Work Program Status | C088 - Return to Work Plan Status |
| C87 - Return to Work Program Goal/Outcome | C089 - Return to Work Program Goal/Outcome |

## Data Format Changes

## Date Formats

Date formats have been changed in the NIDS – they should now comply with ISO 8601. This means that dates are defined using the XML "xs:date" type, and should be in the format yyyy-mm-dd.

This differs from the Q1 standard, which is yyyymmdd (no dashes).

Where a time component is necessary, the XML "xs:datetime" type is used.  In these cases (i.e., Effective Date and Expiry Date in the Policy data only) the separator "T" should be used and the time should be in the format HH:MM:SS, where HH uses a 24 hour scale.  For example, "2011-06-30T15:00:00" represents June 30, 2011 at 3:00pm.

## Money Formats

Unlike Edition Q1 all currency-based values are expected in normal 'money' format, i.e., '$$$$.cc', including the decimal point but excluding the literal '$' sign and formatting comas or spaces.  Negative values (e.g., for recoveries, and journal entries where applicable) should include an embedded '-' (minus) sign.

All currency-based values in the NIDS are set as 'MoneyType', which is then defined in the XML schema as 'decimal', with a maximum size of 20 and level of precision of 4.  If the above expectation is adhered to this format therefore allows for up to 18 numbers before the decimal point, and 2 after.  The decimal point and any applicable minus sign are not included in the character count.

## SubmissionAction Attribute

Where present (i.e., in relation to the Work Status and Medical Certificate Update data only), the SubmissionAction attribute is used to perform a particular action against a record when it is imported into the WorkCover WA system. The SubmissionAction attribute has 3 valid values – "insert", "update", and "delete".

WorkCover WA ignores the 'insert' and 'update' attributes if they are set, as they reflect the processing system's default operational mode anyway, but does specifically action the 'delete' attribute if it is set.

### Submission Rule Changes

There are also a number of changes to the submission rules for some existing Claim data items.  These relate to the following:

- Medical Certificate Data Items
- Work Status Data Items

Provision is made in the NIDS for the reporting of multiple instances of these sets of data within a single reporting period.  The WorkCover WA submission requirements for these sets of data are set out in the section Data Supply Procedures - Submission Rules.

## Comparison – Version 1.1 to Version 1.2

### Part 1

- Work Status and Medical Certificate Update data - SubmissionAction attribute – revised description (delete attribute used).
- WorkCover WA - Specific Changes to NIDS – notification that validation list is current.
- Cancellation Coverage Type Codes – clarification of the notification of the date of cancellation.
- Coverage ID – modification of definition to emphasise the need to re-use the same Coverage ID when notifying Policy adjustments and other changes, and to allow for branches.
- Notification of record-level issues – updated description of information provided both on the screen and in downloadable files; more definitive description of files of unresolved issues, including Issue File XML schema and naming convention adopted.
- NIDS record-level 'keys' – expansion of concept
- Resolution of record-level errors – extended explanation of methodology to be used
- Timing - re-titled 'Timing of issue resolution', with amended expression of issue resolution deadlines.
- Appendix 4 (Validations)
  - Clarified issue messages:

| | |
|---|---|
| P003.3 | C085.2 |
| P031.4 | C100.9 |
| P031.5 | C101.2 |
| P033.1 | C105.4 |
| P034.3 | C111.4 |
| P034.4 | C112.2 |
| P041.2 | C112.3 |
| P053.2 | C112.4 |
| P053.4 | C112.5 |
| C006.1 | C112.6 |
| C006.4 | C112.8 |
| C039.2 | C113.1 |
| C060.1 | C113.2 |

  - Removed validations:

| | |
|---|---|
| P041.4 | C086.7 |
| P053.3 | C088.5 |
| C002.1 | C095.M |
| C048.1 (a) | C096.M |
| C056.1 | C097.M |
| C059.1 | C098.M |

| C061.M | C098.3 |
|--------|--------|
| C065.1 | C113.7 |
| C083.3 | C124.2 |
| C085.3 | |

(a) Moved to post-processing checks.

- o Added validations:

| P003.1 | C083.5 |
|--------|--------|
| P028.M | C086.8 |
| P004.2 | C086.9 |
| P028.10 | C086.10 |
| P028.11 | C091.2 |
| C007.1 | C092.4 |
| C048.6 | C093.4 |
| C048.7 | C095.1 |
| C049.4 | C095.2 |
| C050.4 | C096.1 |
| C052.4 | C098.4 |
| C053.4 | C098.5 |
| C056.4 | C100.19 |
| C057.3 | C100.20 |
| C058.4 | C100.21 |
| C059.5 | C103.5 |
| C061.5 | C104.6 |
| C062.5 | C106.4 |
| C064.6 | C113.9 |
| C083.4 | |

- o <u>Changed Error/Confirmation Status:</u>

| <u>P027.4</u> | <u>C064.2</u> |
|--------|--------|
| <u>P029.4</u> | <u>C113.8</u> |

- o Modified validation logic:

| P035.M | C062.1 |
|--------|--------|
| P036.M | C062.2 |
| | C062.4 |

- <u>Appendix 5 (List of Abbreviations Used)</u> - added

- <u>Appendix 6 (Unresolved Issues – XML Schema)</u> - added

## **Part 2**

- <u>P001 (Insurer Number)</u> – addition of reference to list in <u>Appendix 1</u>
- <u>P027 (Lapse/Cancellation Reason Code)</u> – clarified definition of code '08' and Rules
- <u>P028 (Coverage ID)</u> – added cross reference to Part 1
- <u>P031 (Effective Date)</u> – amplified Rules

- <u>P033 (ANZSIC 1993)</u> – changed title to PRC 1993
- <u>P034 (ANZSIC 2006)</u> - changed title to PRC 2006
- <u>P035 (Estimated Wages)</u> - amplified Rules
- <u>P036 (Estimated Number of Workers)</u> - amplified Rules
- <u>C001 (Insurer Number)</u> – addition of reference to list in Appendix 1
- <u>C025 (Worker Home Phone Number)</u> – corrected numbering (was duplicate C026)
- <u>C031 (Worker Preferred Language)</u> – changed Description (use of specific tables from the ABS Standard)
- <u>C040 (Normal Weekly Earnings)</u> – changed to Conditional (required only for Time Lost Claims)
- <u>C061 (Claim Status Date)</u> – changed to Conditional (required <u>except</u> for the initial (opening) pending status of the claim, when it should <u>not</u> be supplied)
- <u>C063 (Common Law Involvement)</u> – amplified Rules.
- <u>C064 (Common Law Outcome)</u> - amplified Rules.
- <u>C069 (Workplace Address Suburb</u> – amended Rules, to note non-validation if C070 (Workplace Address State/Territory) supplied as 'OFF'.
- <u>C092 (Whole Person Impairment Percentage)</u> – amplified Rules.
- <u>C098 (Total Time Lost Actual)</u> – changed to Conditional (required only when Claim is a 'time lost' Claim)
- <u>C100 (Payment Type Code)</u> – clarified coding of Section 92(f) agreements for codes 10 and 17, and of payments to Rheumatologists.
- <u>C101 (Weekly Payment Code)</u> – clarified requirements, including those for recoveries.
- <u>C103 (Date Paid From)</u> - clarified requirements relating to recoveries
- <u>C104 (Date Paid To)</u> - clarified requirements relating to recoveries
- <u>C107 (Transaction Type Code)</u> – clarified requirements relating to recoveries and cancelled payments.
- <u>C111 (Provider Number)</u> - clarified requirements, including those for recoveries.
- <u>C112 (Service Code)</u> - clarified requirements, including those for recoveries.

- <u>Appendix 1 (Insurer Numbers – Approved and Self-Insurers)</u> - added

## NIDS – WorkCover WA Implementation

### *NIDS as a Standard*

WorkCover WA is committed to the concept of the NIDS. However, WorkCover WA has made a number of changes to the NIDS version 8.0 documentation and XML schema to enable it to receive data compatible with that supplied over many years according to the Q1 standard and its predecessors, and to offer two additional optional data items requested by Insurers.

### *WorkCover WA - Specific Changes to NIDS*

The WorkCover WA changes and additions to the NIDS and accompanying documentation are comprised of:

- Removal of the mandatory requirement for some of the data items that were specified as "*Mandatory (for WA only)"*
- WA-specific data item definition modifications
- the offering of two additional data items
- specification of submission rules and timings
- amplification of descriptions and rules
- modifications and additions to the validation list
- publication of a completely 'backwards compatible' Version 8.1 XML schema to encompass the above as necessary.

The first three groups of changes are listed below.

Submission rules and timings are covered in the section Data Supply Procedures.

The description and rule amplifications, which are made for clarification purposes where the NIDS documentation is either silent or needs customisation for WA (e.g., the WA-only data items), do not intentionally modify any aspects of NIDS. They are not listed here, but are incorporated within the individual data item descriptions in the document Q2-Part 2 Version 1.2.docx.

During the development and implementation of its NIDS processing system (SIMS) WorkCover WA has modified the NIDS standard suit of validations, and the list shown in Appendix 4 details the validations currently implemented as at the date of release of this document.

If experience with the data indicates the need for modification to any of these validations, or for any additional validations, these will be discussed and then notified prior to implementation.

A description of the new version of the XML schema is also included in the section Data Supply Procedures.

## Removal of the Mandatory Requirement for Some of the Data Items Specified as "*Mandatory (for WA only)*"

There are a number of data items included in the NIDS V 8.0 documentation that were specified as '*Mandatory (for WA only)*'. Some of these were already a part of the Q1 data specification, while others were added in the NIDS drafting process. As implementation of the NIDS in WA has progressed, it has become apparent that some of these are no longer required. These are:

- P042 – Actual Final Premium Charged
- C003 - WorkCover Claim Number
- C004 – Start Date of Return Period
- C005 – End Date of Return Period
- C010 - Record Status Code
- C109 – Payment Context

These are considered 'optional' and, if supplied, are not validated and do not result in the rejection of files or records, either by their existence or absence.

## WorkCover WA-Specific Data Item Definition Modifications

### ANZSIC codes

The Premium Rating methodology used within the WA jurisdiction is based on the ANZSIC codes (1993 edition, transitioning to 2006). To provide better actuarial outcomes a number of the 4-digit ANZSIC classes have been subdivided, by the addition of a 5th digit. This results in all Premium Rating Classifications being 5 digits, as those not subdivided are filled with a zero as the 5th digit.

These 5-digit classes are currently held by Insurers operating within the WA jurisdiction, and supplied to WorkCover WA in their quarterly and annual Premium Rate returns, and the current Q1 dataset. In the WA implementation of the NIDS the following instances of ANZSIC are to be supplied as the WA 5-digit version:

- Policy - P033 (ANZSIC 1993) – as WorkCover WA "PRC 1993"
- Policy - P034 (ANZSIC 2006) - as WorkCover WA "PRC 2006"
- Claims - C008 (ANZSIC 1993) – as WorkCover WA "PRC 1993"
- Claims - C129 (ANZSIC 2006) - as WorkCover WA "PRC 2006"

**Cancellation Coverage Type Codes**

To allow the accurate marking of the cancellation of a Policy, WorkCover WA requires the supply of the date the insurer actually marked the Policy as cancelled in their system to be supplied as the Expiry Date in the Policy Coverage Node record used to notify the cancellation.  This is instead of the Expiry Date of the Coverage period concerned.  The Effective ('Inception') Date of the Coverage period in which the cancellation occurred should still be supplied as specified in the NIDS – this, in effect, notifies the 'shortening' of the period of cover from the original Effective Date to the cancellation date.

Note that it is not necessary to adopt the above substitution for Lapse notifications, as the Act specifies that the Effective Date of a Lapse is considered to be the Submission Date of the return plus 7 days - thus the Effective and Expiry Dates supplied in the NIDS Coverage Node record for a Lapse are ignored by WorkCover WA.

**Claim Status Code**

In response to requests from a number of Insurers, the code value for "Paid without Prejudice", which was removed in the NIDS, has been re-instated as new code '06'. It is to be used for WA only, when relevant, instead of codes '01' and '03'.

**Additional Data Items**

**Team Number**

As Insurer Team Number in both the Policy and Claim data have not been included in the NIDS, but are still considered of benefit by the Insurers concerned, provision has been made for them to be supplied on a purely optional basis within the NIDS data. To facilitate this provision a WA-specific XML NIDS schema has been produced. This schema is identical to the NIDS 8.0 Submission.xsd, and is completely 'backwardly compatible' with that version, apart from the addition of one extra optional element to each of the Policy and Claim nodes.  These elements are specified as completely free-form, with a limit of three characters, to be supplied completely at the discretion of the insurer (with whatever values have meaning in that insurer's context). If supplied, however, they have to be tagged and positioned as indicated in the WA NIDS 8.1 Submission.xsd.

Both of these versions of the schema can be found at http://nidscheck.workcover.wa.gov.au/.

The submission file is not rejected if the Team Number is not supplied, but the values supplied are used to allow filtering of feedback such as issue summaries.

## CONDITIONS

### *Legal Requirements*

Pursuant to section 103(A) of the *Workers' Compensation and Injury Management Act 1981* (the Act) approved insurers are required to submit data in accordance with this specification to WorkCover WA within fourteen days of the end of the period to which the return relates. Under the same provision self-insurers are required to do so within twenty one days of the end of the period to which the return relates.

### *WorkCover WA's Obligations*

### **Notification Of Errors/Non-Conformity With Requirements**

WorkCover WA processes submitted files as soon as possible after receiving them, in the order that they are received.

Feedback concerning file-level issues is given immediately to the insurer/self-insurer, via the Internet-based Insurer Online facility (INO), once the submission has been successfully received and processing attempted.

Notification of record-level issues is also made as soon as the processing of each file has been completed via the same means. Insurer/self-insurer representatives are alerted to the availability of this information via e-mail once processing of a return has been completed.

A 'user guide', detailing the issue notification and resolution process, is available via the INO menu.

### **Non-Disclosure**

WorkCover WA will not divulge information collected in accordance with this specification outside of the constraints of the Act*.*

### *Insurer/Self-Insurer's Obligations*

- Conform to the requirements, standards and timeframes set out in this specification and associated schema files.
- Correct notified errors and respond to other indications of non-conformity and requests for confirmation within the timeframe agreed as part of the insurer/self-insurer performance monitoring guidelines.

## DATA SUPPLY PROCEDURES

### *Data Supply Modes*

WorkCover WA currently only supports file upload via the Insurer Online application.

It is envisaged that a 'web services' facility will be introduced at some time in the future.

### File Upload

The file upload facility via the Insurer Online application provides for the upload of XML files constructed in accordance with both the NIDS 8.0 Submission.xsd and the WA NIDS 8.1 Submission.xsd, and conforming to the rules set out in this specification, from the offices of an insurer or self-insurer to WorkCover WA.

### *Supplying Data for the First Time*

Supply should be negotiated, in the first instance, with the Manager, Scheme Information Services. Test data should be sent prior to acceptance by WorkCover WA of data on a 'production' basis. This is to be done at least four weeks prior to lodgement of initial planned production data.

This is to allow time for: -

- WorkCover to ensure that the data conforms to specifications;
- The Insurer or self-insurer to implement system changes and submit a further test set if the initial test set is rejected.

Test data should also be sent whenever system or software changes are made.

### *NIDSCheck facility*

A utility has been provided to allow testing of the acceptability of a file to WorkCover WA at the schema level only. It is available at http://nidscheck.workcover.wa.gov.au/. This utility does not store any data, so any file submitted does not count towards any legislative requirements – it is provided purely to allow checking of the acceptability of a file to WorkCover WA at the physical schema level only without the need for an Insurer Online login.

### *Sandbox*

WorkCover WA has also made available a fully functioned 'Sandbox' version of Insurer Online which allows the full testing of a submission file for record-level validity

using a secure copy of its Production database (as at the date of document release this is refreshed at the end of each month). This version provides the same results as a Production submission, purely for testing purposes, without contributing to an Insurers or Self-Insurers legal obligations to supply returns. Please contact Scheme.Information@workcover.wa.gov.au for details and to arrange a logon authorisation.

## *Submission Rules*

### Definitions

The term 'submission' used in this document refers to an individual file submitted to WorkCover WA. The term 'return' refers to the fulfilment of an Insurer's or Self-Insurer's Policy or Claim data supply obligation for any given month, via one or more file submissions.

### Timing of data submissions

While the design of the NIDS allows for flexible submission periods and timeframes, minimum requirements have been agreed as a part of WorkCover WA's Approved Insurer and Self-Insurer performance monitoring arrangements. Currently agreed measures can be found in the following documents on the WorkCover WA website:

> Approved Insurer Performance Monitoring Indicators
>
> Approved Self-Insurer Performance Indicators

### Content

Conceptually the overall content of data submissions has not changed significantly from that of the Q1 data specification.

Apart from specifying that a submitted file can contain one, two, three or all four of the data 'nodes' set out in the NIDS 'schema', the NIDS is not specific regarding a number of possible data submission scenarios, leaving some room for interpretation by insurers and self-insurers. To ensure its data requirements are met, WorkCover WA has defined the following data submission rules, which become a part of the NIDS data requirements for the WA jurisdiction.

For a list of Data Items and their relationships, as defined in the document NIDS V 8.0.docx and the XML schema, see Appendix 3.

**Policy Data**

Each return is to contain, in accordance with this specification:

- "…details of each employer who has during the month in question (the return month) effected or renewed a policy or contract of insurance with the insurer concerned against liability under the Act" (as per section 171(1)(a) of the Act).

- "…details of each employer in respect of whom the insurance office concerned has during the month in question (the return month) marked in its books as lapsed a policy or contract of insurance under this Act" (as per section 171(1)(b) of the Act).

- amendments and adjustments to previously supplied details of employers, policies and contracts of insurance that have been made during the month in question (the return month), arising from both business changes (endorsements, etc) and corrections to resolve issues arising from NIDS data processing.

The NIDS allows a Policy return to be supplied either as one or two Policy-related files, or as a part of a combined Policy and Claims file, in XML format according to the schema defined in <u>WA NIDS 8.1 Submission.xsd</u>.  The Policy component of the schema comprises of two 'nodes':

- Policies
- Coverages

**Policies Node**

Schema view
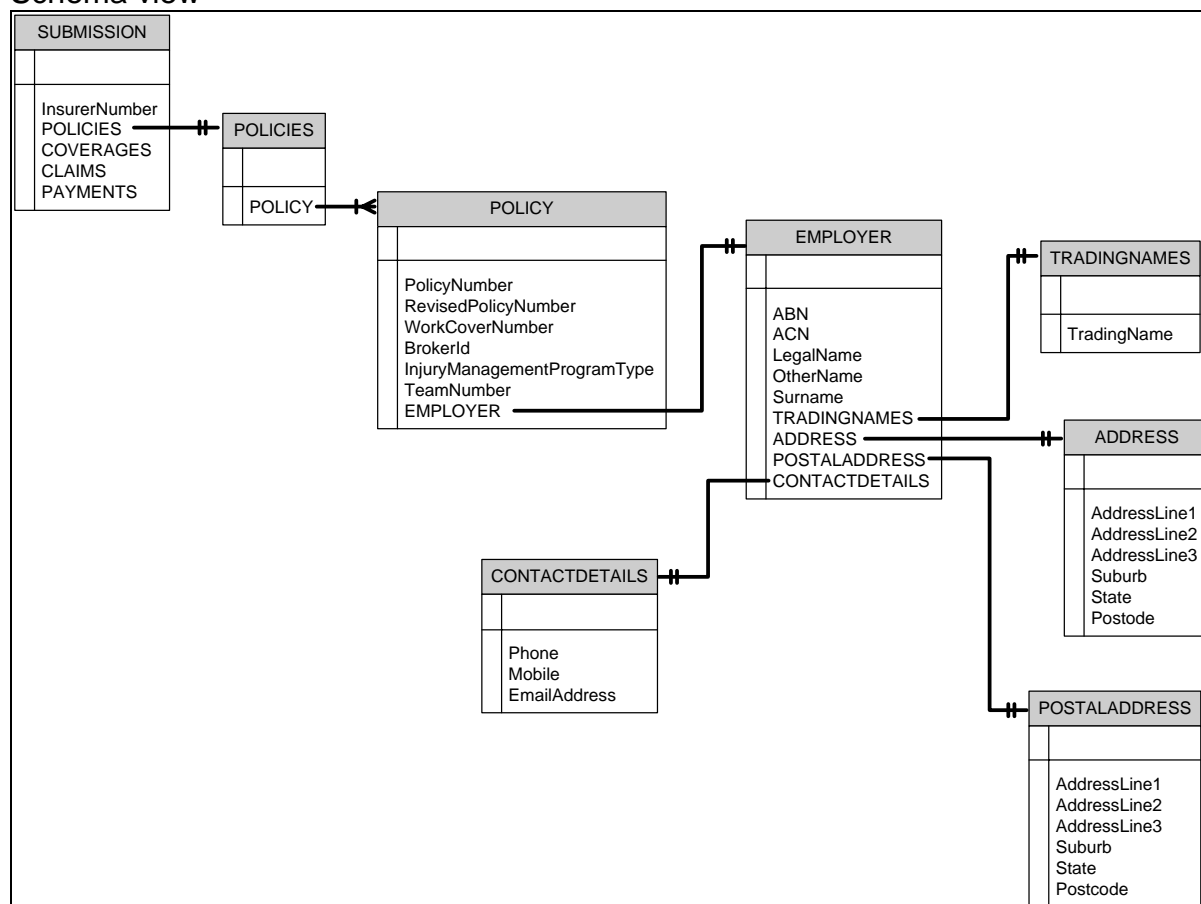


This node contains the identification of the Policy and the employer to which it 'belongs'. As such, a notification is required <u>initially</u>, when first notifying the Policy/contract of insurance, and <u>then only when any details of the Policy node content change</u>. If there are more than one set of changes within a period covered by a file submission, only one notification is required for the period, setting out the details as at the end of the period. Equally, if there are no changes to the Policy node content over the file submission period (once a Policy/contract of insurance is initially notified), no Policy Node notification is expected for a Policy/contract of insurance in the submission.

<u>Note</u> that the Policy Amendment record type defined in the Q1 specification is not included in the NIDS. Therefore, to monitor changes to an employer's details, WorkCover WA utilises the notification of any changed details in a Policies node record as a 'trigger' for further investigation of the need to adjust its WCN records. Any change in the employer details as defined in this specification should cause the supply of a new 'Policies' Node record.

**Coverages Node**

Schema view
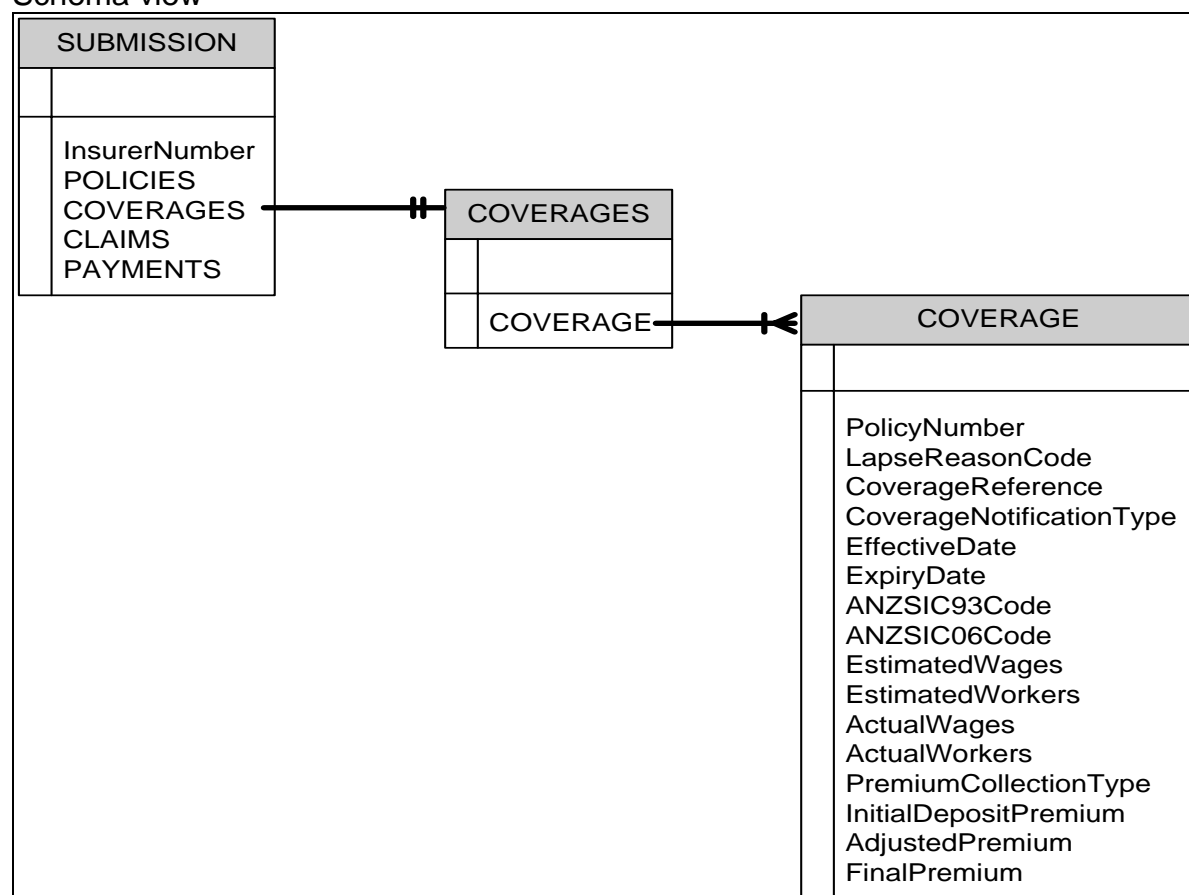


This node contains the following sets of information:

- Coverage notification (one or more per employer as applicable), relating to:
  - Cover notes
  - New policies
  - Policy renewals
  - Other coverage type
  - Policy lapse notification (one per policy as applicable)
  - Policy cancellation notification

- Policy classification details, providing for each Premium Rate Class for the insured period for the Policy:
  - the Estimated and Actual Wages
  - the Estimated and Actual Number of Workers

- Policy premium details, providing for each Premium Rate Class for the insured period for the Policy:
  - the Initial Deposit and Current Adjusted Premium the employer is charged. This information applies to both conventional and 'burning cost' policies, with the various adjustments applicable to each type being supplied as successive Current Adjusted Premium Charged figures as applicable.

- Adjustments to any of the above, by way of a record of Coverage Type "Adjustment Notification".

More than one set of Policy Classification and Policy Premium information is acceptable for a policy/contract of insurance for a coverage period, e.g., in the same submission, due to multiple Premium Rate Classifications for the Policy, or over different submissions, due to adjustment to wages or premium for previous coverage periods.

Policy Classification and Policy Premium information may be supplied in relation to a Coverage Notification supplied in a previous return, e.g., to notify the Actual Wages and Actual Number of Workers for an insured period when only estimates were previously supplied.

Multiple risks with the same Premium Rate Classification (e.g., branches) for a policy/contract of insurance for a coverage period should either be
- summed as one entity, so that the aggregate for each coverage period/ Premium Rate Classification combination is only ever supplied under the one Coverage ID, or
- supplied separately, with each separately identified entity having its own unique Coverage ID

In each case the Coverage ID(s) supplied should then remain unchanged for each adjustment or update of the relevant entity.

If multiple adjustments are made for an entity uniquely identified by a Coverage ID during the period covered by a single submission, and a Coverage notification for each of the adjusted values is supplied in the submission (rather than simply the last adjusted value for the period), they should be supplied in the order in which they occurred.

Policy Classification and Premium values are expected for each Coverage period notified in a submission, except for Cover Notes.

There may be more than one Coverage notification per submission for the same Policy and/or employer (e.g., a Cover Note and a New Policy Notification for the same employer within the submission period).

Coverage ID

The NIDS introduces the concept of the Coverage ID (termed CoverageReference in the NIDS schema) in relation to discrete sets of information within the Coverages Node.  It is defined as:

> *Unique reference number/ID allocated by insurer for each coverage period of a policy.*
> *The Coverage ID is used to uniquely identify the coverage row. In the same way that any Primary Key is used to identify a data row in a relational*

*database, in the jurisdiction's database, when a new coverage is created, it will get a new ID.*
*When an update to an existing coverage is performed, the update is performed to the coverage that is identified by the supplied coverage ID.*
*When the coverage is updated, be that the effective date, expiry date or both, or any of the other meta data fields associated with the coverage, a new coverage ID should not be used - the original (and only) Coverage ID MUST be used.*

If the original Coverage ID is changed for any reason it should be cancelled, by supplying an Adjustment Coverage record notifying a Lapse/Cancellation Reason Code '08' (Cancelled Coverage), and then replaced with a Coverage record using the amended Coverage ID.

The Coverage ID is also used in the Claim data to relate a Claim to a particular 'Coverage' period. Note that the Coverage ID supplied in the Claim must match a Coverage ID already supplied for the Policy for which the Claim Occurrence Date is within the coverage period.

The NIDS is not prescriptive as to the exact form of the Coverage ID, its scope, or its composition. However, it has to be unique for an Insurer. It is used for two purposes:

- the identification of individual records within a submitted file for purposes of updates (either to correct errors, or to notify adjustments), and
- the facilitation of linkage of related records in the jurisdiction's database.

To achieve these purposes the Coverage ID has to identify entities at the most granular level in data supplied as a Coverages Node notification – for most Insurers this will be to the combined Policy, Coverage Period, and Premium Rate Classification level. However, for some Insurers this concept is extended to identify separate branches, each with the same combination of Policy, Coverage Period, and Premium Rate Classification – each of these entities needs to be given its own unique Coverage ID, to separate records for each branch, and to fulfill the above purposes.

This also becomes important in the case of Policies with multiple Premium Rate Classifications per Coverage period (e.g., a Labour Hire company) - in this case the Coverage ID needs to identify each instance of this combination of identifiers.

A consequence of this will be multiple notifications of the same coverage period, numerically corresponding to the number of Premium Rate Classifications involved - each notification differentiated by its own Coverage ID. This will be so for both initial notifications of this information, and for updates of the coverage period itself. Updates of the Classification and Premium components of the Coverages Node need only relate to the specific Coverage ID concerned.

If there is more than one instance of a Coverage ID in a Coverages Node in a submitted file, the records are processed and applied to the WorkCover WA database in the order submitted.

## Claim Data

Each return is to contain, in accordance with this specification, details of all claims lodged with the Insurer/Self-Insurer during the return month, and those submitted previously for which there was any activity (including payments <mark>and corrections to resolve issues arising from NIDS data processing</mark>) during the return month.

No data are required for an incident notification until a Claim is lodged.

The NIDS allows a Claim return to comprise either one or two Claim-related files, or as a part of a combined Policy and Claims file, in XML format according to the schema defined in <u>WA NIDS 8.1 Submission.xsd</u>.  The Claim component of the schema comprises of two 'nodes':

- Claims
- Payments

## Claims Node

Schema view
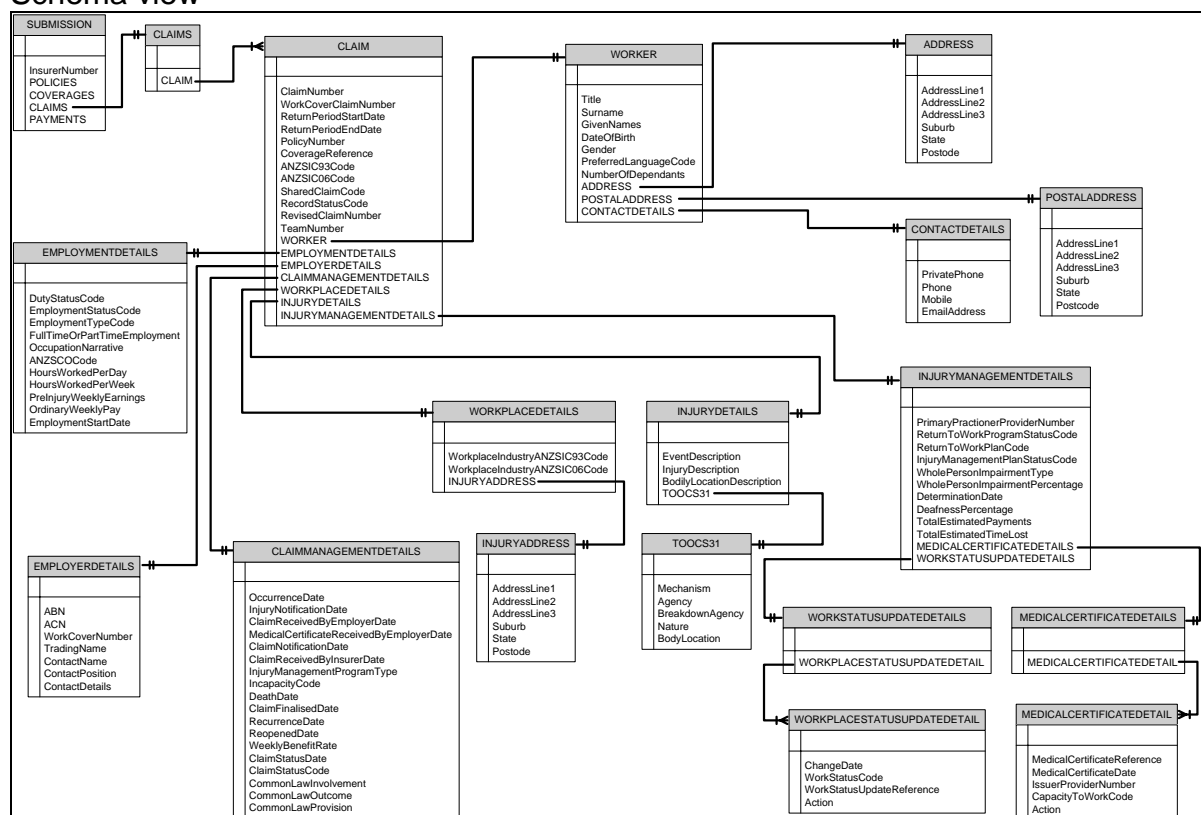


The Claims node contains details of the worker, claim occurrence, claim receipt and ongoing status, injury management progression, worker's employer, the policy and coverage period against which the claim is recorded, and updated estimates of cost and time lost.  It also contains a provision for multiple notifications of medical certificate and work status details.

As such, it is required <u>initially</u>, when first notifying the receipt of a Claim, and <u>then only when any details of the Claims node record content change</u>. If there is more than one set of changes within a period covered by a file submission, only one notification is required for the period, setting out the details as at the end of the period. Equally, if there are no changes to the Claims node record content over the file submission period (once a Claim is initially notified), no Claims Node record is expected in the submission.

Medical Certificate Data

The NIDS provides for more than one set of Medical Certificate details to be supplied within a submission period. Each is uniquely identified by the use of a Medical Certificate ID (termed MedicalCertificateReference in the NIDS schema), generated by the Insurer or Self-Insurer, and is independent of the Claim Number.

WorkCover WA requires details of <u>every</u> medical certificate received within the submission period, regardless of the Medical Certificate Date.

Work Status Data

The NIDS provides for more than one set of Work Status details to be supplied within a submission period. Each is uniquely identified by the use of a Work Status Update ID (termed WorkStatusUpdateReference in the NIDS schema), generated by the Insurer or Self-Insurer, and is independent of the Claim Number.

WorkCover WA requires details of <u>every</u> Work Status change, including the first recorded. This has been made necessary with the removal of the Date Ceased Work and Date Resumed Work data items in the transition from Q1 to the NIDS, because of duplication of these data items with equivalent Work Status code values.

Insurers and Self-Insurers are reminded that, due to the importance of the analysis of these occurrences in the monitoring of Scheme Performance, WorkCover WA pays particular attention to the correct supply of these values in the Work Status Data.

## PaymentsNode

Schema view
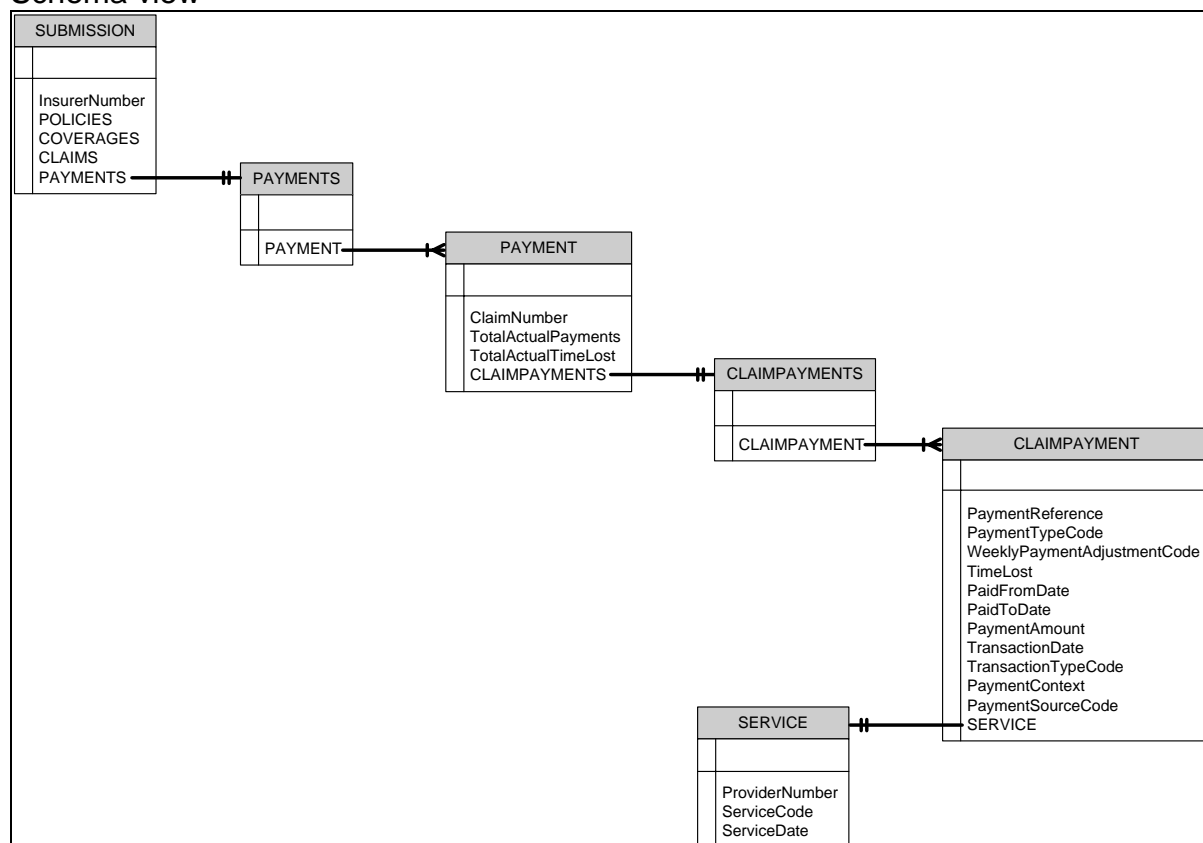


The Payments Node contains two sets of data:

- Payment - contains one instance only of both cumulative actual payments and time lost for the claim up to the end of the submission period.
- ClaimPayments - contains details of all the payment transactions made during the submission period.

A Payment set of data is expected if there has been a change in the Actual totals since the last file submission for the claim.  As these changes would normally be reflected by Claim Payments transactions made by the Insurer or Self-Insurer, a Payment set of data would be expected if there are any transactions reported for the Claim in the submitted file.

Conversely, the ClaimPayment set of data (transactions) are expected if there is a change in the Total Payments Actual for the claim since the last Payment set of data was supplied for the Claim.

Therefore, if either a Payment set of data or a Claim Payments set of data is supplied for the claim in the submitted file, the other is expected.  However, it would be acceptable if these were supplied without a corresponding Claims Node record for the Claim in the submitted file, as long as the Claim is already recorded in the WorkCover WA database, and there was no change within the Claims Node details for the Claim since it was last reported.

It should also be noted that, while the Service element has been separated within the ClaimPayment set of data in the schema, only one instance of the Service set of data is expected for each relevant ClaimPayment, i.e., there has to be a separate payment transaction recorded and supplied for <u>each</u> service (<u>not</u> one transaction per invoice).

## OPERATIONAL ISSUES

### *Interface*

The existing Insurer Online (INO) web-based facility has been modified to facilitate the submission of Policy and Claims data files, the notification and resolution of issues that arise as a consequence of those submissions, and the monitoring of processing status and history.

### *Processing Framework*

WorkCover WA has adopted a similar processing model to that adopted by both the Tasmanian and ACT jurisdictions. This is depicted diagrammatically as follows:
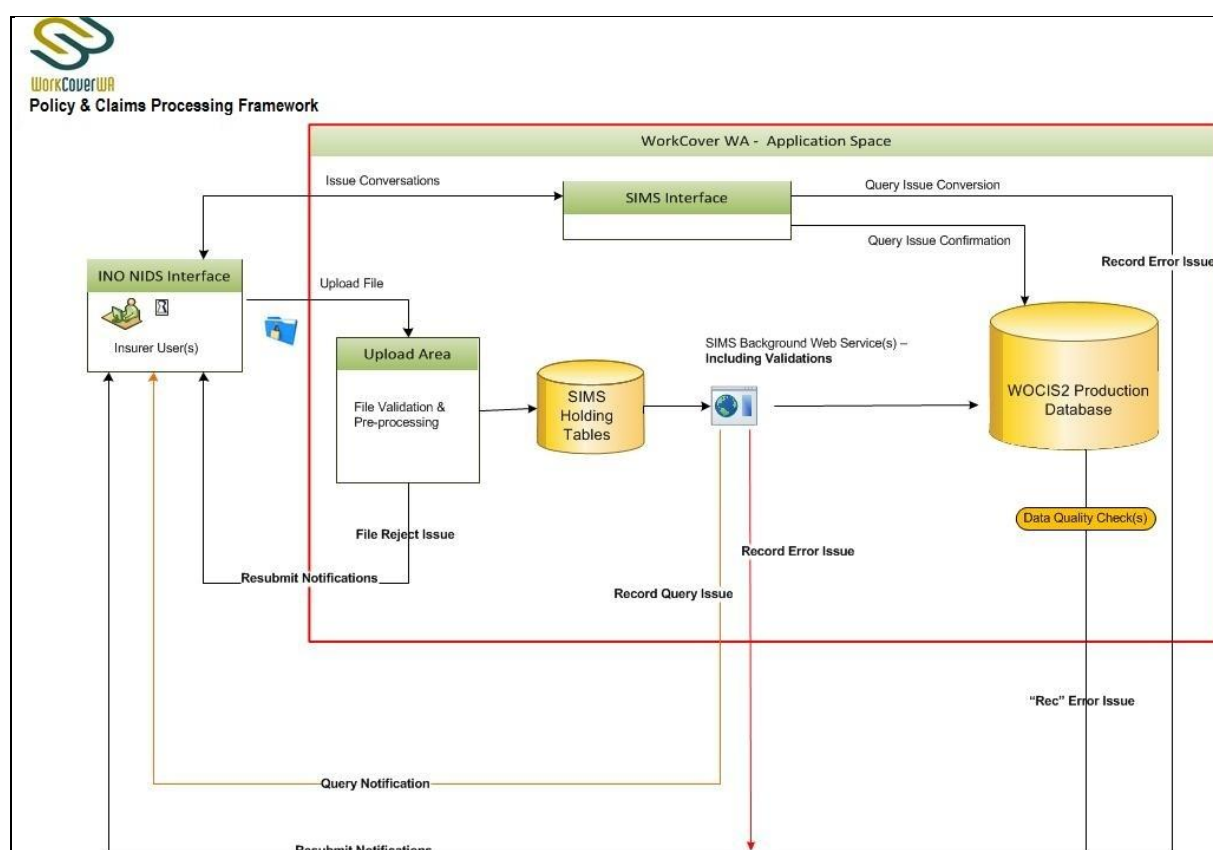


### *Data Submission*

Data file submission is achieved via the appropriate option under the INO menu item "Policy and Claim Data Submission".

*Data Acceptance*

Checking of data supplied is performed at both the file and record levels.

## File level

Files submitted are initially tested against the schema defined in WA NIDS 8.1 Submission.xsd, to ensure that they are valid NIDS XML files acceptable to WorkCover WA.  This version of the schema is completely 'backwardly compatible' with the NIDS 8.0 Submission.xsd, so that files submitted according to this schema will also be accepted. As well as allowing for the two optional WA-specific data items (Team Number in both the Policies and Claims nodes), it includes some generic modifications to handle empty sets of XML tags.

Any file that fails that test is rejected, and the reasons for the rejection are displayed in the Issue Details page for the particular File Submission, found via the appropriate INO "Policy and Claim Data Submission" menu item.

Files can be tested for acceptability at the schema level using the utility provided at http://nidscheck.workcover.wa.gov.au/.

### Rejected files

After remediation rejected files need to be re-submitted, using the same file name as previously submitted, to resolve the file rejection error condition.  This is achieved using the appropriate menu option under the INO menu item "Policy and Claim Data Submissions".

Alternatively a file-level error Issue may be resolved after discussion with WorkCover WA's Scheme Information staff using the 'Conversations" option in the same menu.

## Record level

Once accepted at the file level, records are validated according to the WorkCover WA version of the NIDS v 8.0 validations.  A list of validations applied as at the date of release of this publication is shown at Appendix 4.  A completely up to date list of currently applied validations can be seen at any time by use of the "Issues Documentation" menu option within the SIMS application in INO.

Records are considered as either in error (expressed as 'Error' issues), or containing queried data (expressed as 'Confirmation' issues).

In addition, a query condition can later be recognised as being in error, thus requiring correction and resubmission of the record concerned rather than confirmation.

Note:  Files submitted are processed in the order uploaded.  If submitted 'out of order', records that have a logical dependency on an as-yet-unsubmitted record (e.g., a Claim made on a Policy to be notified in a yet unsubmitted Policy file) are initially considered in error.  However, once the required record is submitted and accepted, the record in error is re-validated and itself accepted if not considered in error or queried for any other reason.

## Notification of record-level issues

Notification of record-level issues is done via both a screen interface and downloadable XML and CSV files.

Details provided for each format in relation to records with issues raised are:

| Heading | Description | Screen | CSV | XML |
|---|---|---|---|---|
| Issue Id | WorkCover WA system-generated key | n.a. | Yes | Yes |
| Entity Type | Claim/Payment/Policy/Coverage | Yes | Yes | Yes |
| Entity Key | Unique NIDS key | Yes | Yes | Yes |
| Description | Includes issue message, data items involved or referenced, and values/keys supplied or referenced | Yes | Yes | Yes |
| Rule Number | See Q2 Part 1 Appendix 4 for a list | Yes | Yes | Yes |
| Issue Type | Error/Confirmation | Yes | Yes | Yes |
| Submission Reference | WorkCover WA submission reference | Link (a) | Yes | Yes |
| Submission Date | Date/time the issue was raised | Yes | Yes | Yes |
| Team Number | If supplied | n.a. | Yes | Yes |
| Details | Currently not used | n.a. | n.a. | n.a. |
| Values | Structured Validation Description (b) | n.a. | Yes | n.a. |

n.a. Not applicable
(a) A link to the actual Submission file from which the issue was raised.
(b) A program-recognisable version of the issue description.

In conformity with the other jurisdictions that have adopted the NIDS, and to facilitate automated upload of the files, the following naming convention has been adopted for both formats of downloadable files:

*ccyymmdd*RejectedData*companynumber.file extension*

where
> *ccyymmdd* is the date the file was generated/downloaded
> *companynumber* is the NIDS Standard Insurer Number (see List of Approved and Self Insurer Numbers in Appendix 1 of Part 2 of this document)
> *file extension* is either XML or CSV

The format of the CSV version of the Issue file is a follows:

| Column | Content |
|---|---|
| A. | Issue Id |
| B. | Entity Type |
| C. | Entity Key |
| D. | Description |
| E. | Rule Number |
| F. | Issue Type |
| G. | Submission Reference |
| H. | Submission Date |
| I. | Team Number |
| J. | Details (currently not used) |
| K. | Structured Validation Description |

The schema of the XML version of the Issue file is set out in Appendix 6 of this document

**NIDS record-level 'keys'**

Each 'node' of the XML schema specifies a unique record-level identifier for error correction purposes.  These are as follows:

- Policies Node - Policy Number (P003)
- Coverages Node - Coverage ID (P028)
- Claims Node – Insurer Claim Number (C002)
- ClaimPayment Node – Insurer Payment ID (C099)

In addition, the following 'record types' within the schema are also recognised as having unique record-level identifiers for this purpose:

- Medical Certificate Update – Medical Certificate ID (C131)
- Work Status Update – Work Status Update ID (C130)

**Resolution of Error issues raised**

Notification of records considered in error, and the details of those errors, is done via both via screen-based listings, and downloadable XML and CSV files.

Error issues can only be resolved by correction of the data identified as in error in the Insurer/Self-Insurer's database (or extracted incorrectly), and resubmission of the record concerned.  In certain limited circumstances WorkCover WA Scheme Information staff can also 'dismiss' Error issues, instead of their correction by resubmission of the record(s) concerned.

Resubmission of records notified as in error is carried out by the same interface used for the original submission of files. Records can either be resubmitted as a separate file, or as a part of a larger submission file.

Resubmitted records then go through the same validation process as originally supplied records, and effectively 'replace' the originally submitted record.

**It is important to note that, for a record to be used as a correcting record, it has to have the <u>same</u> unique record-level identifier as the original record notified as in error (see [NIDS record-level 'keys'](#)). A record resubmitted with the intention of its use as a correcting record, but with a different 'key', will be processed as a new record and treated as such for validation and data purposes – it will <u>not</u> be used to correct the original record.**

**This principal also applies in those cases where the unique record-level identifier is constructed from conceptually separate elements (e.g., Coverage ID, which is often created by the concatenation of such elements as Policy Number, Effective Date, and PRC). The resulting string is recorded as the identifier when first supplied, and if any of these elements is changed (e.g., the PRC), the string must <u>not</u> be changed as a consequence - the new 'string' will be considered as a new unique identifier, and will not be processed as an replacement/correction of the original record. The originally supplied string should continue to be used as the unique identifier for a resubmitted, correcting, record.**

### Resolution of Confirmation issues raised

Queried records (Confirmation issues) are also notified via both screen-based listings, and downloadable XML and CSV files. The screen-based listings allow a 'conversation' to occur with WorkCover WA Scheme Information staff, with a view to resolution of the query (and consequential acceptance of the record). Queried records can also be resolved by the resubmission of a corrected version of the record if it is realised it is in error (see [Resolution of Error issues raised](#)).

### Timing of issue resolution

All submitted records are to be either corrected (errors) or accepted (queries) within the currently agreed timeframes (see [Timing of data submissions](#)).

## NIDS DATA ITEMS

### *List of Data Items*

The NIDS data items, and their WorkCover WA-specific definitions and rules, are set out in the document Q2-Part 2 Version 1.2.docx

The following information is shown for each NIDS data item:

- Title              as per both NIDS V 8.0.docx and the XML Schema
- Format          as per both NIDS V 8.0.docx and the XML Schema
- Length          as per both NIDS V 8.0.docx and the XML Schema
- XSD Location   showing the element 'path'
- Description     as modified for WorkCover WA use
- Rules           as modified for WorkCover WA use (see also Rules)

### Rules

The following rule modifications have been adopted for the WorkCover WA implementation of the NIDS:

- **Mandatory**

  A value must be provided for every notification of the relevant type

- **Conditional**

  A value must be provided when applicable (e.g., a 'Date Claim Finalised' must be supplied when the claim is actually finalised).  Conditional data items that are not applicable at the time should not be referenced at all in the XML data set or, if they are (by the use of XML tags), should be default-filled with the appropriate fill characters for the format type.

- **Optional**

  A value is provided at the insurer's discretion.  Optional data items for which values are not supplied should not be referenced at all in the XML data set (e.g., the 'State' element, which has its own 'Type' defined within the schema) or, if they are (by the use of XML tags), should be default-filled with the appropriate fill characters for the format type.  These data items are not validated, apart from conformity with the schema.

### Date Formats

Date formats in the NIDS should comply with ISO 8601. This means that dates are defined using the XML "xs:date" type, and should be in the format yyyy-mm-dd.

Where a time component is necessary, the XML "xs:datetime" type is used. In these cases (i.e., Effective Date and Expiry Date in the Policy data only) the separator "T" should be used and the time should be in the format HH:MM:SS, where HH uses a 24 hour scale. For example, "2011-06-30T15:00:00" represents June 30, 2011 at 3:00pm.

**<u>Conventions</u>**

The following conventions have been adopted in the list:

- Data item the same as <u>NIDS V 8.0.docx</u> – title in green
- Data item modified from <u>NIDS V 8.0.docx</u> –changed component shown in orange

## VALIDATIONS

### *WorkCover WA's Validation Philosophy*

WorkCover WA depends upon accurate data from insurers and self-insurers to effectively carry out its functions.  To ensure that the data received is useable WorkCover WA carries out a number of validation processes prior to it being accepted onto its database.

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

**WorkCover WA reserves the right to add, or amend, validations at any time. If this occurs insurers and self-insurers will be notified, but the emphasis on the part of suppliers of data should be on the provision of valid, logically correct data in the first place, rather than on ensuring that the data is sufficiently 'correct' to pass the current WorkCover WA validations.**

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

Once a submitted file is accepted as valid by checking against the NIDS schema (see Data Acceptance), the record-level validations performed by WorkCover WA fall into two general categories:

Record-level validations are applied to individual data items or to a number of data items within the same record.  In addition, checks are also made between the data supplied in a return against the data already held in the WorkCover WA database for the policy or claim concerned.  These validations are of two basic types:

- Errors – these validations fail when either an incorrect value is supplied, or an incorrect combination (within the validated record, or against pre-existing values already in the WorkCover WA database) of values is supplied.  These must be corrected.

- Requests for Confirmation – these validations fail when an unlikely or unusual combination of values (within the validated record, or against pre-existing values already in the WorkCover WA database) is supplied.  Most of these require an acceptable explanation (via a conversation with WorkCover WA – using the facility provided in INO), some agreed action by WorkCover WA staff (also arranged via a conversation), or correction if wrong (via resubmission of the record once it has been corrected in the Insurer/Self-Insurer's database).

### *List of Current Validations*

A list of validations applied as at the date of release of this publication is shown at Appendix 4.  A list of currently applied validations can be seen at any time by use of the "Issues Documentation" menu option within the SIMS application in INO.

# APPENDIX 1

*Q1 to NIDS - Data Items Added, Deleted, and Changed*

**WorkCover WA**

**Q1 to NIDS - Data Items Added, Deleted, and Changed**

The lists below set out the data item-level changes to the Q1 list that were made necessary to conform to the NIDS.

**Policy data items added**

| NIDS Ref. | Data Item |
|---|---|
| P002 | Employer ABN |
| P044 | Employer ACN |
| P050 | Employer Surname |
| P009 | Employer Address Line 3 |
| P013 | Employer Address Postcode |
| P009 | Employer Postal Address Line 1 |
| P010 | Employer Postal Address Line 2 |
| P045 | Employer Postal Address Line 3 |
| P011 | Employer Postal Address Suburb |
| P016 | Employer Postal Address State/Territory |
| P017 | Employer Postal Address Postcode |
| P018 | Employer Phone Number |
| P019 | Employer Mobile Phone Number |
| P020 | Employer Email Address |
| P021 | Broker ID |
| P026 | Injury Management Program Type |
| P028 | Coverage ID |
| P034 | ANZSIC 2006 (as WorkCover WA PRC 2006 - see WorkCover WA - Specific Changes to NIDS) |
| P041 | Current Adjusted Premium Charged (replaced Q1 " Actual Final Premium Charged") |

In addition, one extra optional data item was added to the Policy data (see also Optional Additional Data Items).

| NIDS Ref. | Data Item |
|---|---|
| P999 | Team Number |

**WorkCover WA**

**Q1 to NIDS - Data Items Added, Deleted, and Changed**

**Q1 Policy data items removed**

| Q1 Ref. | Data Item |
|---------|-----------|
| P1 | Record Type Code |
| P2 | Run Type Indicator |
| P4 | Insurer Name |
| P5 | Data Type |
| P6 | Return Date |
| P30 | Number of Policy Records |
| P28 | Actual Final Premium Charged (replaced by Current Adjusted Premium Charged) |

**Q1 Policy data items modified**

Note that data items for which the differences are descriptive only (e.g., to amplify a description, or to substitute WA legislative equivalents) are not listed here.

| Q1 Ref. | Data Item | Type of Modification(s) |
|---------|-----------|-------------------------|
| P7 | Policy Number | Length changed |
| P8 | Revised Policy Number | Length changed |
| P10 | Employer Legal Name | Name, submission rule changed |
| P11 | Employer Other Name | Submission rule changed |
| P12 | Employer Trading Name | Length and submission rule changed |
| P13 | Employer Address Line 1 | Submission rule changed |
| P14 | Employer Address Line 2 | Submission rule changed |
| P15 | Employer Address Suburb | Submission rule changed |
| P16 | Employer Address State/Territory | Submission rule changed |
| P17 | Lapsed Reason Code | Name, length, additional codes, rule change |
| P18 | Coverage Type Code | Length, additional codes, rule change |
| P19 | Effective Date | Data type, rule change |
| P20 | Expiry Date | Data type, rule changed (see also WorkCover WA Specific Changes to NIDS) |
| P21 | Premium Rate Classification | Listed in the NIDS as ANZSIC 1993, name and submission rule changed (as WorkCover WA PRC 1993 - see WorkCover WA - Specific Changes to NIDS) |
| P26 | Policy Type Code | Name changed to Premium Collection Type, length, submission rule changed |
| P27 | Initial Deposit Premium Charged | Submission rule changed |

**WorkCover WA**

**Q1 to NIDS - Data Items Added, Deleted, and Changed**

**Claim data items added - required by WorkCover WA**

| NIDS Ref. | Data Item |
|-----------|-----------|
| C007 | Coverage ID |
| C012 | Worker Title |
| C120 | Worker Residential Address Line 3 |
| C026 (a) | Worker Mobile Phone Number |
| C027 (a) | Worker Work Phone Number |
| C028 (a) | Worker Email Address |
| C031 | Worker Preferred Language |
| C124 | Worker Dependants |
| C056 | Date of Death |
| C049 | Date Insurer Notified of Injury |
| C051 | Date Medical Certificate Received by Employer |
| C052 | Date Insurer Notified of Claim |
| C131 | Medical Certificate ID |
| C086 | Date Work Status Changed |
| C130 | Work Status Update ID |
| C090 | Injury Management Plan Status |
| C091 | Whole Person Impairment Type |
| C092 | Whole Person Impairment Percentage |
| C093 | Date of Determination |
| C094 | Deafness Percentage |
| C099 | Insurer Payment ID (Claim Payment Record) |
| C101 | Weekly Payment Code (Claim Payment Record) |
| C102 | Time Lost (Claim Payment Record) |
| C110 | Payment Source |
| C129 | ANZSIC 2006 (as WorkCover WA PRC 2006 - see WorkCover WA - Specific Changes to NIDS) |

(a) At least one of C026, C027 or C028 is required.

**WorkCover WA**

**Q1 to NIDS - Data Items Added, Deleted, and Changed**

**Claim data items added – non-mandatory for WorkCover WA**

The following data items were added to the NIDS, for use by other jurisdictions, and/or are not required by WorkCover WA.  **They are shown as either 'Optional' or 'Not required for WorkCover WA' in Part 2 of this document and, if supplied, are not validated (apart from conformity with the schema) and do not result in the rejection of files or records, either by their existence or absence.**

| NIDS Ref. | Data Item |
|-----------|-----------|
| C004 | Start Date of Return Period |
| C005 | End Date of Return Period |
| C019 | Worker Residential Address Postcode |
| C020 | Worker Postal Address Line 1 |
| C021 | Worker Postal Address Line 2 |
| C121 | Worker Postal Address Line 3 |
| C022 | Worker Postal Address Suburb |
| C023 | Worker Postal Address State/Territory |
| C024 | Worker Postal Address Postcode |
| C037 | Workers Occupation Code |
| C043 | Employer ABN |
| C125 | Employer ACN |
| C044 | Employer Trading Name |
| C045 | Employer Contact Name |
| C046 | Employer Contact Position |
| C047 | Employer Contact Phone Number |
| C041 | Ordinary Time Rate of Pay Per Week |
| C042 | Date Worker Started Employment |
| C066 | Workplace ANZSIC 1993 |
| C128 | Workplace ANZSIC 2006 |
| C067 | Workplace Address Line 1 |
| C068 | Workplace Address Line 2 |
| C122 | Workplace Address Line 3 |
| C070 | Workplace Address State/Territory |
| C071 | Workplace Address Postcode |
| C073 | Mechanism of Incident Code |
| C074 | Agency of Injury/Disease Code |
| C075 | Breakdown Agency Code |
| C077 | Nature of Injury/Disease Code |
| C079 | Bodily Location of Injury/Disease Code |
| C082 | Primary Provider Number |
| C084 | Medical Certificate Provider Number |
| C109 | Payment Context (Claim Payment Record) |

**WorkCover WA**

**Q1 to NIDS - Data Items Added, Deleted, and Changed**

In addition, one extra optional data item was added to the Claim data (see also Optional Additional Data Items).

| NIDS Ref. | Data Item |
|-----------|-----------|
| C999 | Team Number |

**Q1 Claim data items removed**

| Q1 Ref. | Data Item |
|---------|-----------|
| C1 | Record Type Code |
| C2 | Run Type Indicator |
| C4 | Insurer Name |
| C5 | Data Type |
| C6 | Return Date |
| C32 | Time of Occurrence |
| C40 | Date Resumed Work |
| C53 | Weekly Payments (cumulative total) |
| C54 | Redemption Payments (cumulative total) |
| C55 | Specific Injury Payments (cumulative total) |
| C56 | Fatal Payments (cumulative total) |
| C57 | Medical Practitioners and Specialist Payments (cumulative total) |
| C58 | Hospital Expense Payments (cumulative total) |
| C59 | All Other Treatment and Appliance Payments (cumulative total) |
| C60 | Vocational Rehabilitation Payments (cumulative total) |
| C61 | Miscellaneous Payments (cumulative total) |
| C62 | Common Law and Other Acts Payments (cumulative total) |
| C63 | Legal Expense Payments (cumulative total) |
| C89 | Sect. 92(f) Payment Flag (now Payment Type Code '13') |
| C73 | Major Activity of the Worker's Workplace |
| C81 | Number of Claim Detail Records |
| C82 | Number of Claim Payment Records |
| C83 | Number of Claim Narrative Records |
| C77 | What Object was Involved in the Occurrence |

**Q1 Claim data items modified**

Note that data items for which the differences are descriptive only (e.g., to amplify a description, or to substitute WA legislative equivalents) are not listed here.

| Q1 Ref. | Data Item | Type of Modification(s) |
|---------|-----------|-------------------------|
| C8 | Insurer Claim Number | Length changed |
| C9 | Policy Number | Length changed |
| C10 | Shared Claim Code | Codes, values changed |
| C11 | Record Status Code | Length, code values changed |

**WorkCover WA**

**Q1 to NIDS - Data Items Added, Deleted, and Changed**

| Q1 Ref. | Data Item | Type of Modification(s) |
|---|---|---|
| C12 | Revised Insurer Claim Number | Length changed |
| C14 | Worker Given Name | Length changed |
| C19 | Worker Phone Number | Length changed |
| C20 | Worker Date of Birth | Length, format changed |
| C22 | Duty Status Code | Length, codes changed |
| C23 | Employment Status Code | Length, code values changed |
| C24 | Employment Type Code | Length, codes changed, additional value |
| C25 | Full/Part Time Code | Length, codes changed |
| C74 | Workers Occupation or Main Tasks or Duties Performed | Name changed to Workers Occupation Narrative, submission rule changed |
| C30 | Premium Rate Classification | Listed in the NIDS as "ANZSIC 1993", name and submission rule changed - (as WorkCover WA PRC 1993 - see WorkCover WA - Specific Changes to NIDS) |
| C28 | Pre- Injury Weekly Earnings | Name changed to Normal Weekly Earnings |
| C32 | Date of Occurrence | Length, format changed |
| C33 | Date Claim Received by Employer | Length, format changed |
| C34 | Date Claim Received By Insurer | Length, format changed |
| C88 | Sec 155 D(3) Delegation Flag | Name changed to Injury Management Program Type, length, codes changed |
| C44 | Extent of Incapacity Code | Length, codes changed |
| C41 | Date of Finalisation | Name, length, format and submission rules changed |
| C42 | Date of Recurrence | Length, format changed |
| C43 | Date Reopened | Length, format changed |
| C35 | Claim Status Date | Length, format changed |
| C36 | Claim Status Code | Length, code values changed |
| C48 | Common Law Involvement | Length, code values changed |
| C49 | Common Law Outcome | Length, code values changed |
| C75 | Suburb Where The Worker's Occurrence Occurred | Name changed to Workplace Address Suburb |
| C76 | What Action was Involved in the Occurrence | Name changed to Incident Description Narrative, scope changed to include What Object was Involved in the Occurrence |
| C78 | The Most Serious Injury or Disease Caused by the Occurrence | Name changed to Most Serious Injury/Disease Narrative, length changed |
| C79 | Bodily Location of The Injury or | Name changed to Bodily Location |

**WorkCover WA**

### Q1 to NIDS - Data Items Added, Deleted, and Changed

| Q1 Ref. | Data Item | Type of Modification(s) |
|---------|-----------|-------------------------|
| | Disease | Of Injury/Disease Narrative, length changed |
| C38 | Date of Latest Medical Certificate | Name changed to Date Of Medical Certificate, length and format changed, submission rules changed. |
| C39 | Level of Fitness at Latest Medical Certificate | Name changed to Capacity To Work At Medical Certificate, length and format changed, submission rules changed. |
| C85 | Work Status | Length and format changed, submission rules changed |
| C86 | Return To Work Program Status | Name changed to Return To Work Plan Status, length and format changed |
| C87 | Return To Work Program Goal/Outcome | Name changed to Return To Work Plan Goal/Outcome, length and format changed |
| C52 | Total Payments Actual | Submission rules changed |
| C47 | Total Time Lost Actual | Submission rules changed |
| C64 | Payment Type Code | Codes changed (some re-used), additional values (some split, some added) |
| C65 | Date Paid From | Length, format changed |
| C66 | Date Paid To | Length, format changed |
| C68 | Transaction Date | Length, format changed. |
| C69 | Transaction Type Code | Length, format, codes changed, additional value. |
| C70 | Provider Number | Length changed |
| C72 | Service Date | Length, format changed. |

# APPENDIX 2

## *Summary of Q1 to NIDS Code Changes*

**WorkCover WA**

**Summary of Q1 to NIDS Code Changes**

| Q1 (P16 - Employer Address State/Territory) | | NIDS (P012 - Employer Address State/Territory) | | |
|---|---|---|---|---|
| **Code** | **Description** | **Code** | **Description** | **Notes** |
| ACT | Australian Capital Territory | ACT | Australian Capital Territory | |
| NSW | New South Wales | NSW | New South Wales | |
| NT | Northern Territory | NT | Northern Territory | |
| QLD | Queensland | QLD | Queensland | |
| SA | South Australia | SA | South Australia | |
| TAS | Tasmania | TAS | Tasmania | |
| VIC | Victoria | VIC | Victoria | |
| WA | Western Australia | WA | Western Australia | |
| | | OTH | Other | New value |

| Q1 (P17 - Lapsed Reason Code) | | NIDS (P027 - Lapse/Cancellation Reason Code) | | |
|---|---|---|---|---|
| **Code** | **Description** | **Code** | **Description** | **Notes** |
| | (no equivalent) | 00 | No Lapse/Cancellation reason required | New default |
| 1 | Business Sold | 01 | Business Sold | |
| 2 | Business Closed | 02 | Business Closed | |
| 3 | Not Employing | 03 | Not Employing | |
| 4 | Insured Elsewhere | 04 | Insured Elsewhere | |
| 5 | Policy/Cover Note Replaced | 05 | Policy/Cover Note Replaced | |
| 6 | Non-Payment of Premium | 06 | Non-Payment of Premium | |
| 7 | No Reply to Correspondence | 07 | No Reply to Correspondence | |
| | (no equivalent) | 08 | Cancelled coverage | |
| | (no equivalent) | 09 | Other reason | |

**WorkCover WA**

**Summary of Q1 to NIDS Code Changes**

| Q1 (P18 - Coverage Type Code) | | NIDS (P029 - Coverage Type Code) | | |
|---|---|---|---|---|
| **Code** | **Description** | **Code** | **Description** | **Notes** |
| 1 | Cover Note Notification | 01 | Cover Note Notification | |
| 2 | New Policy Notification | 02 | New Policy Notification | |
| 3 | Policy Renewal Notification | 03 | Renewal Notification | |
| | (no equivalent) | 04 | Cancellation Notification | |
| | (no equivalent) | 05 | Lapsed Notification | |
| | (no equivalent) | 06 | Adjustment Notification | |
| 9 | Any other type of coverage | 09 | Any other notification type | |

| Q1 (P26 - Policy Type Code) | | NIDS (P039 – Premium Collection Type) | | |
|---|---|---|---|---|
| **Code** | **Description** | **Code** | **Description** | **Notes** |
| 1 | 'Normal' Policy | 01 | 'Normal' Policy | |
| 2 | Burning Cost Policy | 02 | Burning Cost Policy | |
| 3 | Minimum Premium Policy – Householder | 03 | Minimum Premium Policy – Domestic | |
| 4 | Minimum Premium Policy – Other | 04 | Minimum Premium Policy – Other (Nominal) | |
| 9 | Other Policy Type | 09 | Other Policy Type | |

**WorkCover WA**

**Summary of Q1 to NIDS Code Changes**

| Q1 (C10 - Shared Claim Code) | | NIDS (C009 - Shared Claim Code) | | |
|---|---|---|---|---|
| **Code** | **Description** | **Code** | **Description** | **Notes** |
| I | Insurer | | | Q1 value no longer used |
| M | MVPI | | | Q1 value no longer used |
| O | Other party | | | Q1 value no longer used |
| | | 00 | Not Shared | New default (was blank in Q1) |
| | | 01 | Shared, responsible insurer | New value |
| | | 02 | Shared, not responsible insurer | New value |

| Q1 (C11 – Record Status Code) | | NIDS (C010 - Record Status Code) | | |
|---|---|---|---|---|
| **Code** | **Description** | **Code** | **Description** | **Notes** |
| N | New claim | 01 | New Claim | |
| U | Update of an existing claim | 02 | Update existing claim | |

| Q1 (C22 - Duty Status Code) | | NIDS (C032 - Duty Status Code) | | |
|---|---|---|---|---|
| **Code** | **Description** | **Code** | **Description** | **Notes** |
| A | Working – at Normal Workplace | 01 | At Work – at Normal Workplace | |
| B | Working – Away from Normal Workplace | 06 | At work – working away from normal workplace | |
| C | Working – Road Traffic Accident | 02 | At Work - Road Traffic Accident | |
| D | Commuting/Journey | 04 | Commuting/journey | |
| E | On Work Break – at Normal Workplace | 03 | At work - on break | |
| F | On Work Break – Away from Normal Workplace | 05 | Away from work during recess break | |
| O | Other Duty Status | 09 | Other | |

**WorkCover WA**

**Summary of Q1 to NIDS Code Changes**

| Q1 (C23 - Employment Status Code) | | NIDS (C033 - Employment Status Code) | | |
|---|---|---|---|---|
| **Code** | **Description** | **Code** | **Description** | **Notes** |
| 1 | Direct Worker | 01 | Direct worker | |
| 2 | Working Director | 02 | Working Director | |
| 3 | Contractor | 03 | Contractor | |
| 4 | Worker of Contractor | 04 | Worker of Contractor | |
| 5 | Sub Contractor | 05 | Sub Contractor | |
| | | 06 | Labour hire worker | New value |
| | | 07 | Apprentice/Trainee | New value |
| 6 | Other | 09 | Other | |

| Q1 (C24 - Employment Type Code) | | NIDS (C034 - Employment Type Code) | | |
|---|---|---|---|---|
| **Code** | **Description** | **Code** | **Description** | **Notes** |
| P | Permanent | 01 | Permanent | |
| T | Temporary | 02 | Temporary | |
| C | Casual | 03 | Casual | |
| V | Temporary Overseas Visa Worker | 04 | Temporary Overseas Visa Worker | |
| | | 09 | Other | New value |

| Q1 (C25 - Full/Part Time Code) | | NIDS (C035 - Full/Part Time Code) | | |
|---|---|---|---|---|
| **Code** | **Description** | **Code** | **Description** | **Notes** |
| F | Full time | 01 | Full time | |
| P | Part time | 02 | Part time | |

**WorkCover WA**

**Summary of Q1 to NIDS Code Changes**

| Q1 (C88 - Sec 155 D(3) Delegation Flag) | | NIDS (C054 – Injury Management Program Type) | | |
|---|---|---|---|---|
| **Code** | **Description** | **Code** | **Description** | **Notes** |
| Y | Delegation Received | 01 | Insurer | |
| N | Delegation Not Received | 02 | Employer | |

**WorkCover WA**

**Summary of Q1 to NIDS Code Changes**

| Q1 (C36 - Claim Status Code) | | NIDS (C062 – Claim Status Code) | | |
|---|---|---|---|---|
| Code | Description | Code | Description | Notes |
| A | Accepted | 01 | Accepted | |
| D | Disallowed | 03 | Rejected | |
| I | Interim Payment Order Made | 02 | Pending | |
| P | Pending | 02 | Pending | |
| R | Reconsideration of Status | 02 | Pending | |
| U | Disallowed, Ordered to Pay | 03 | Rejected | |
| V | Paid Without Prejudice | 06 | Paid Without Prejudice | Value re-instated as Code '06' |
| W | Withdrawn | 04 | Withdrawn | |
| X | Not a Valid Claim | 05 | Invalid Claim | |
| O | Other | | | Q1 value no longer used – need to allocate to a valid NIDS code |

| Q1 (C39 - Level of Fitness at Latest Medical Certificate) | | NIDS (C085 – Capacity to Work at Medical Certificate) | | |
|---|---|---|---|---|
| Code | Description | Code | Description | Notes |
| F | Fit for pre-disability duties, including fit but requiring further treatment. | 01 | Fit for pre-injury duties, including fit but requiring further treatment | |
| R | Fit for restricted return to work or alternative duties. | 02 | Fit for restricted return to work or alternative duties. | |
| U | Unfit for work | 03 | Unfit for work | |

**WorkCover WA**

**Summary of Q1 to NIDS Code Changes**

| Q1 (C44 – Extent of Incapacity Code) | | NIDS (C055 – Extent of Incapacity Code) | | |
|---|---|---|---|---|
| **Code** | **Description** | **Code** | **Description** | **Notes** |
| 1 | Death. | 01 | Death. | |
| 3 | Temporary Incapacity. | 02 | Temporary Incapacity. | |
| 4 | Permanent Incapacity - Partial | 03 | Permanent Incapacity - Partial | |
| 5 | Permanent Incapacity - Total | 04 | Permanent Incapacity - Total | |
| 6 | No Incapacity at any Time – Worker Not Injured | 05 | No Incapacity at any Time – Worker Not Injured | |
| 7 | No Incapacity at any Time – Worker Injured | 06 | No Incapacity at any Time – Worker Injured | |

| Q1 (C48 - Common Law Involvement) | | NIDS (C063 – Common Law Involvement) | | |
|---|---|---|---|---|
| **Code** | **Description** | **Code** | **Description** | **Notes** |
| 0 | No Common Law involvement | 00 | No current/expected Common Law involvement | |
| 1 | Common Law estimate raised by insurer | 01 | Common Law estimate raised by insurer | |
| 2 | Common Law claims incurred prior to 14 November 2005 for workers with an Agreement or Determination recorded for a disability of less than 30% but not less than 16% who have registered a Common Law Election | | | Q1 value no longer used – to be coded as NIDS code '01', '02' or '03' as appropriate |
| 3 | Common Law claims incurred prior to 14 | | | Q1 value no longer used – to be coded |

**WorkCover WA**

**Summary of Q1 to NIDS Code Changes**

| Q1 (C48 - Common Law Involvement) | | NIDS (C063 – Common Law Involvement) | | |
|---|---|---|---|---|
| | November 2005 for workers with an Agreement or Determination recorded for a disability of 30% or greater | | | as NIDS code '01', '02' or '03' as appropriate |
| 4 | Section 93D Writ issued | | | Q1 value no longer used – to be coded as NIDS code '02' or '03' as appropriate |
| 5 | Common Law claims incurred from 14 November 2005 onward for workers with a degree of impairment of less than 25% but not less than 15% who have registered an election to retain the right to seek damages | | | Q1 value no longer used – to be coded as NIDS code '01', '02' or '03' as appropriate |
| 6 | Common Law claims incurred from 14 November 2005 onward for workers with a degree of impairment of 25% or greater | | | Q1 value no longer used – to be coded as NIDS code '01', '02' or '03' as appropriate |
| 7 | Section 92(f) Settlement agreed | | | Q1 value no longer used – to be coded as NIDS code '01', '02' or '03' as appropriate (also now covered by new NIDS Payment Type Code '13') |
| | (no equivalent) | 02 | Writ Issued | New value |
| | (no equivalent) | 03 | Common Law finalised (settlement or judgement) | New value |

**WorkCover WA**

**Summary of Q1 to NIDS Code Changes**

| Q1 (C49 - Common Law Outcome) | | NIDS (C064 – Common Law Outcome) | | |
|---|---|---|---|---|
| **Code** | **Description** | **Code** | **Description** | **Notes** |
| | (no equivalent) | 00 | Not Applicable | New default |
| P | Pending | 01 | Pending | |
| S | Settlement | 02 | Settlement | |
| J | Judgement | 03 | Judgement | |
| W | Withdrawn | 04 | Withdrawn | |
| D | Dismissed | 05 | Dismissed | |
| L | Lapsed | 06 | Lapsed | |

**WorkCover WA**

**Summary of Q1 to NIDS Code Changes**

| Q1 (C64 - Payment Type Code) | | NIDS (C100 – Payment Type Code) | | |
|---|---|---|---|---|
| Code | Description | Code | Description | Notes |
| 01 | Weekly Payment | 01 | Weekly Payment | |
| 02 | Redemption Payment | 12 | Redemption Payment | |
| 03 | Specific Injury Payment | 11 | Permanent Impairment Payment | |
| 04 | Fatal Payment | 02 | Fatal Weekly Payment | Split as appropriate – see Definitions |
| 04 | Fatal Payment | 03 | Fatal Lump Sum Payment | Split as appropriate– see Definitions |
| 04 | Fatal Payment | 04 | Fatal Other Payment | Split as appropriate– see Definitions |
| 05 | Medical Practitioner or Specialist Payment | 05 | Medical Practitioner or Specialist Payment | |
| 06 | Hospital Expense Payment | 06 | Hospital Expense Payment | |
| 07 | Other Treatment or Appliance Payment | 07 | Other Treatment or Appliance Payment | Split as appropriate– see Definitions |
| 07 | Other Treatment or Appliance Payment | 09 | Allied Health Payment | Split as appropriate– see Definitions |
| 08 | Vocational Rehabilitation Payment | 08 | Vocational Rehabilitation Payment | |
| 09 | Miscellaneous Payment | 16 | Investigation Expense Payment | Split as appropriate– see Definitions |
| 09 | Miscellaneous Payment | 17 | Miscellaneous Payment | Split as appropriate– see Definitions |
| 10 | Common Law or Other Act Payment | 10 | Common Law Payment | |
| 11 | Legal Expense Payment | 14 | Worker Legal Expense Payment | Split as appropriate– see Definitions |
| 11 | Legal Expense Payment | 15 | Insurer Legal Expense Payment | Split as appropriate– see Definitions |
| | (no equivalent) | 13 | Negotiated Settlement Payment | New value – replaces Q1 Sect 92(f) Flag – (a). – see also Definitions |

(a) NIDS value '13' (Negotiated Settlement Payment) is to be used whenever a Sect. 92(f) Agreement is made, regardless of the context, rather than other potentially relevant values such as '10' (Common Law Payment) or '02' (Redemption Payment).

**WorkCover WA**

**Summary of Q1 to NIDS Code Changes**

| Q1 (C69 - Transaction Type Code) | | NIDS (C107 – Transaction Type Code) | | |
|---|---|---|---|---|
| **Code** | **Description** | **Code** | **Description** | **Notes** |
| PT | Payment | 01 | Payment | |
| RM | Recovery – MVPI | 02 | Recovery – CTP (Compulsory Third Party) | |
| RO | Recovery – Other (Excluding reinsurance recoveries) | 03 | Recovery – Other (Excluding reinsurance recoveries) | |
| JL | Journal entry (Including adjustments made to adjust incorrect payment category, service code or provider number coding). | 04 | Journal entry (Including adjustments made to adjust incorrect payment category, service code or provider number coding). | |
| | (no equivalent) | 05 | Cancelled | See Definitions. |

| Q1 (C85 – Work Status) | | NIDS (C087 – Work Status) | | |
|---|---|---|---|---|
| **Code** | **Description** | **Code** | **Description** | **Notes** |
| A | Maintained at Work | 01 | Maintained at Work | |
| B | Return to Work – Full Hours | 02 | Return to Work – Full Hours | |
| C | Return to Work – Partial Hours | 03 | Return to Work – Partial Hours | |
| D | Not Working – Injury Related | 04 | Not Working – Injury Related | |
| E | Not Working – Other Reason | 05 | Not Working – Other Reason | |
| F | Unknown – Failure to Provide a Medical Certificate | 06 | Unknown – Failure to Provide a Medical Certificate | |
| G | Unknown - Other | 09 | Unknown - Other | |

**WorkCover WA**

**Summary of Q1 to NIDS Code Changes**

| Q1 (C86 – Return to Work Program Status) | | NIDS (C088 – Return to Work Plan Status) | | |
|---|---|---|---|---|
| **Code** | **Description** | **Code** | **Description** | **Notes** |
| 0 | RTW Program Not Applicable | 00 | RTW Program Not Applicable | |
| 1 | RTW Program Applicable but Not in Place | 01 | RTW Program Applicable but Not in Place | |
| 2 | RTW Program Agreed | 02 | RTW Program Agreed | |
| 3 | RTW Program Commenced | 03 | RTW Program Commenced | |
| 4 | RTW Program Completed | 04 | RTW Program Completed | |
| 5 | RTW Program Cancelled | 05 | RTW Program Cancelled | |
| 9 | RTW Program Status Unknown/Not Yet Known | 09 | RTW Program Status Unknown/Not Yet Known | |

| Q1 (C87 – Return to Work Program Goal/Outcome) | | NIDS (C089 – Return to Work Program Goal/Outcome) | | |
|---|---|---|---|---|
| **Code** | **Description** | **Code** | **Description** | **Notes** |
| 0 | RTW Program Not Applicable | 00 | RTW Program Not Applicable | |
| 1 | Same Employer – Same Job | 01 | Same Employer – Same Job | |
| 2 | Same Employer – Modified Job | 02 | Same Employer – Modified Job | |
| 3 | Same Employer – new Job | 03 | Same Employer – new Job | |
| 4 | New Employer – New Job | 04 | New Employer – New Job | |
| 5 | Not resuming Wiork | 05 | Not resuming Wiork | |
| 9 | RTW Program Goal/Outcome Unknown | 09 | RTW Program Goal/Outcome Unknown | |

# APPENDIX 3

***Relationship between Data Items as Defined in the Document <u>NIDS V 8.0.docx</u>
and the XML Schema***

**WorkCover WA**

**Relationship between Data Items as Defined in the Document <u>NIDS V 8.0.docx</u> and the XML Schema**

**Submission Node (common)**

| No. | Data Item Name | XML Name | XML Type | Min Len | Max Len | Parent Node |
|---|---|---|---|---|---|---|
| P001 | Insurer Number | InsurerNumber | integer | n/a | n/a | n/a - attribute of Submission node |

**Policies Node**

| No. | Data Item Name | XML Name | XML Type | Min Len | Max Len | Parent Node |
|---|---|---|---|---|---|---|
| P002 | Employer ABN | ABN | string | 0 | 20 | Submission.Policies.Policy.Employer |
| P043 | Workcover Number | WorkCoverNumber | string | 0 | n/a | Submission.Policies.Policy |
| P044 | Employer ACN | ACN | string | 0 | 20 | Submission.Policies.Policy.Employer |
| P003 | Policy Number | PolicyNumber | n/a | 1 | 255 | Submission.Policies.Policy |
| P004 | Revised Policy Number | RevisedPolicyNumber | n/a | 0 | 255 | Submission.Policies.Policy |
| P005 | Employer Legal Name | LegalName | string | 0 | 200 | Submission.Policies.Policy.Employer |
| P006 | Employer Other Name | OtherName | string | 0 | 200 | Submission.Policies.Policy.Employer |
| P050 | Employer Surname | Surname | string | 0 | 200 | Submission.Policies.Policy.Employer |
| P007 | Employer Trading Name | TradingName | string | 0 | 1024 | Submission.Policies.Policy.Employer.TradingNames |
| P009 | Employer Address Line 1 | AddressLine1 | string | 0 | 100 | Submission.Policies.Policy.Employer.Address |
| P010 | Employer Address Line 2 | AddressLine2 | string | 0 | 100 | Submission.Policies.Policy.Employer.Address |
| P045 | Employer Address Line 3 | AddressLine3 | string | 0 | 100 | Submission.Policies.Policy.Employer.Address |
| P011 | Employer Address Suburb | Suburb | string | 0 | 200 | Submission.Policies.Policy.Employer.Address |
| P012 | Employer Address State/Territory | State | string | 0 | n/a | Submission.Policies.Policy.Employer.Address |
| P013 | Employer Address Postcode | Postcode | string | 0 | 4 | Submission.Policies.Policy.Employer.Address |
| P014 | Employer Postal Address Line 1 | AddressLine1 | string | 0 | 100 | Submission.Policies.Policy.Employer.PostalAddress |
| P051 | Employer Postal Address Line 2 | AddressLine2 | string | 0 | 100 | Submission.Policies.Policy.Employer.PostalAddress |
| P052 | Employer Postal Address Line 3 | AddressLine3 | string | 0 | 100 | Submission.Policies.Policy.Employer.PostalAddress |
| P015 | Employer Postal Address Suburb | Suburb | string | 0 | 200 | Submission.Policies.Policy.Employer.PostalAddress |
| P016 | Employer Postal Address | State | string | 0 | n/a | Submission.Policies.Policy.Employer.PostalAddress |

**WorkCover WA**

## Relationship between Data Items as Defined in the Document <u>NIDS V 8.0.docx</u> and the XML Schema

**Policies Node**

| No. | Data Item Name | XML Name | XML Type | Min Len | Max Len | Parent Node |
|---|---|---|---|---|---|---|
| | State/Territory | | | | | |
| P017 | Employer Postal Address Postcode | Postcode | string | 0 | 4 | Submission.Policies.Policy.Employer.PostalAddress |
| P018 | Employer Phone Number | Phone | string | 0 | 50 | Submission.Policies.Policy.Employer.ContactDetails |
| P019 | Employer Mobile Phone Number | Mobile | string | 0 | 50 | Submission.Policies.Policy.Employer.ContactDetails |
| P020 | Employer Email Address | EmailAddress | string | 0 | 200 | Submission.Policies.Policy.Employer.ContactDetails |
| P021 | Broker ID | BrokerId | string | 0 | n/a | Submission.Policies.Policy |
| P026 | Injury Management Program Type | InjuryManagementProgramType | string | 0 | 50 | Submission.Policies.Policy |
| P999 | Team Number | TeamNumber | string | 0 | 3 | Submission.Policies.Policy |

**Coverages Node**

| No. | Data Item Name | XML Name | XML Type | Min Len | Max Len | Parent Node |
|---|---|---|---|---|---|---|
| P027 | Lapse/Cancellation Reason Code | LapseReasonCode | string | 0 | 50 | Submission.Coverages.Coverage |
| P003 | Policy Number | PolicyNumber | n/a | 1 | n/a | Submission.Coverages.Coverage |
| P028 | Coverage Id | CoverageReference | string | 0 | 50 | Submission.Coverages.Coverage |
| P029 | Coverage Type Code | CoverageNotificationType | string | 0 | 50 | Submission.Coverages.Coverage |
| P031 | Effective Date | EffectiveDate | datetime | n/a | n/a | Submission.Coverages.Coverage |
| P032 | Expiry Date | ExpiryDate | datetime | n/a | n/a | Submission.Coverages.Coverage |
| P033 | Anzsic 1993 | ANZSIC93Code | string | 0 | 20 | Submission.Coverages.Coverage |
| P034 | Anzsic 2006 | ANZSIC06Code | string | 0 | 20 | Submission.Coverages.Coverage |
| P035 | Estimated Wages | EstimatedWages | decimal | n/a | 20 | Submission.Coverages.Coverage |
| P036 | Estimated Number Of Workers | EstimatedWorkers | integer | n/a | 20 | Submission.Coverages.Coverage |
| P037 | Actual Wages | ActualWages | decimal | n/a | 20 | Submission.Coverages.Coverage |
| P038 | Actual Number Of Workers | ActualWorkers | integer | n/a | 20 | Submission.Coverages.Coverage |
| P039 | Premium Collection Type | PremiumCollectionType | string | 0 | 50 | Submission.Coverages.Coverage |
| P053 | Initial Deposit Premium Charged | InitialDepositPremium | decimal | n/a | 20 | Submission.Coverages.Coverage |

**WorkCover WA**

**Relationship between Data Items as Defined in the Document <ins>NIDS V 8.0.docx</ins> and the XML Schema**

**Coverages Node**

| No. | Data Item Name | XML Name | XML Type | Min Len | Max Len | Parent Node |
|-----|----------------|----------|----------|---------|---------|-------------|
| P041 | Current Adjusted Premium Charged | AdjustedPremium | decimal | n/a | 20 | Submission.Coverages.Coverage |
| P042 | Actual Final Premium Charged | FinalPremium | decimal | n/a | 20 | Submission.Coverages.Coverage |

**Submission Node (common)**

| No. | Data Item Name | XML Name | XML Type | Min Len | Max Len | Parent Node |
|-----|----------------|----------|----------|---------|---------|-------------|
| C001 | Insurer Number | InsurerNumber | integer | n/a | n/a | n/a - attribute of Submission node |

**Claims Node**

| No. | Data Item Name | XML Name | XML Type | Min Len | Max Len | Parent Node |
|-----|----------------|----------|----------|---------|---------|-------------|
| C002 | Insurer Claim Number | ClaimNumber | string | 1 | 255 | Submission.Claims.Claim |
| C003 | Workcover Claim Number (WCCN) | WorkCoverClaimNumber | string | 0 | 255 | Submission.Claims.Claim |
| C004 | Start Date Of Return Period | ReturnPeriodStartDate | date | n/a | n/a | Submission.Claims.Claim |
| C005 | End Date Of Return Period | ReturnPeriodEndDate | date | n/a | n/a | Submission.Claims.Claim |
| C006 | Policy Number | PolicyNumber | string | 1 | 255 | Submission.Claims.Claim |
| C007 | Coverage ID | CoverageReference | string | 1 | 255 | Submission.Claims.Claim |
| C008 | ANZSIC 1993 | ANZSIC93Code | string | 0 | 20 | Submission.Claims.Claim |
| C129 | ANZSIC 2006 | ANZSIC06Code | string | 0 | 20 | Submission.Claims.Claim |
| C009 | Shared Claim Code | SharedClaimCode | string | 0 | 50 | Submission.Claims.Claim |
| C010 | Record Status Code | RecordStatusCode | string | 0 | 50 | Submission.Claims.Claim |
| C011 | Revised Insurer Claim Number | RevisedClaimNumber | string | 0 | 255 | Submission.Claims.Claim |
| C012 | Worker Title | Title | string | 0 | 50 | Submission.Claims.Claim.Worker |
| C013 | Worker Surname | Surname | string | 0 | 200 | Submission.Claims.Claim.Worker |
| C014 | Worker Given Names | GivenNames | string | 0 | 200 | Submission.Claims.Claim.Worker |
| C015 | Worker Residential Address Line 1 | AddressLine1 | string | 0 | 100 | Submission.Claims.Claim.Worker.Address |

**WorkCover WA**

**Relationship between Data Items as Defined in the Document <u>NIDS V 8.0.docx</u> and the XML Schema**

| | | | XML | Min | | |
|---|---|---|---|---|---|---|
| **No.** | **Data Item Name** | **XML Name** | **Type** | **Len** | **Max Len** | **Parent Node** |
| C016 | Worker Residential Address Line 2 | AddressLine2 | string | 0 | 100 | Submission.Claims.Claim.Worker.Address |
| C120 | Worker Residential Address Line 3 | AddressLine3 | string | 0 | 100 | Submission.Claims.Claim.Worker.Address |
| C017 | Worker Residential Address Suburb | Suburb | string | 0 | 200 | Submission.Claims.Claim.Worker.Address |
| C018 | Worker Residential Address State/Territory | State | string | 0 | n/a | Submission.Claims.Claim.Worker.Address |
| C019 | Worker Residential Address Postcode | Postcode | string | 0 | 4 | Submission.Claims.Claim.Worker.Address |
| C020 | Worker Postal Address Line 1 | AddressLine1 | string | 0 | 100 | Submission.Claims.Claim.Worker.PostalAddress |
| C021 | Worker Postal Address Line 2 | AddressLine2 | string | 0 | 100 | Submission.Claims.Claim.Worker.PostalAddress |
| C121 | Worker Postal Address Line 3 | AddressLine3 | string | 0 | 100 | Submission.Claims.Claim.Worker.PostalAddress |
| C022 | Worker Postal Address Suburb | Suburb | string | 0 | 200 | Submission.Claims.Claim.Worker.PostalAddress |
| C023 | Worker Postal Address State/Territory | State | string | 0 | n/a | Submission.Claims.Claim.Worker.PostalAddress |
| C024 | Worker Postal Address Postcode | Postcode | string | 0 | 4 | Submission.Claims.Claim.Worker.PostalAddress |
| C025 | Worker Home Phone Number | PrivatePhone | string | 0 | 50 | Submission.Claims.Claim.Worker.ContactDetails |
| C026 | Worker Mobile Phone Number | Mobile | string | 0 | 50 | Submission.Claims.Claim.Worker.ContactDetails |
| C027 | Worker Work Phone Number | Phone | string | 0 | 50 | Submission.Claims.Claim.Worker.ContactDetails |
| C028 | Worker Email Address | EmailAddress | string | 0 | 200 | Submission.Claims.Claim.Worker.ContactDetails |
| C029 | Worker Date Of Birth | DateOfBirth | date | n/a | n/a | Submission.Claims.Claim.Worker |
| C030 | Worker Gender | Gender | string | 0 | 50 | Submission.Claims.Claim.Worker |
| C031 | Worker Preferred Language | PreferredLanguageCode | string | 0 | 20 | Submission.Claims.Claim.Worker |

**WorkCover WA**

**Relationship between Data Items as Defined in the Document <u>NIDS V 8.0.docx</u> and the XML Schema**

**Claims Node**

| No. | Data Item Name | XML Name | XML Type | Min Len | Max Len | Parent Node |
|---|---|---|---|---|---|---|
| C124 | Worker Dependants | NumberOfDependants | integer | n/a | n/a | Submission.Claims.Claim.Worker |
| C032 | Duty Status Code | DutyStatusCode | string | 0 | 50 | Submission.Claims.Claim.EmploymentDetails |
| C033 | Employment Status Code | EmploymentStatusCode | string | 0 | 50 | Submission.Claims.Claim.EmploymentDetails |
| C034 | Employment Type Code | EmploymentTypeCode | string | 0 | 50 | Submission.Claims.Claim.EmploymentDetails |
| C035 | Full/Part Time Code | FullTimeOrPartTimeEmployment | string | 0 | 50 | Submission.Claims.Claim.EmploymentDetails |
| C036 | Workers Occupation Narrative | OccupationNarrative | string | 0 | 200 | Submission.Claims.Claim.EmploymentDetails |
| C037 | Workers Occupation Code | ANZSCOCode | string | 0 | 20 | Submission.Claims.Claim.EmploymentDetails |
| C038 | Hours Worked Per Day | HoursWorkedPerDay | integer | n/a | 4 | Submission.Claims.Claim.EmploymentDetails |
| C039 | Hours Worked Per Week | HoursWorkedPerWeek | integer | n/a | 5 | Submission.Claims.Claim.EmploymentDetails |
| C040 | Normal Weekly Earnings | PreInjuryWeeklyEarnings | decimal | n/a | 20 | Submission.Claims.Claim.EmploymentDetails |
| C041 | Ordinary Time Rate Of Pay Per Week | OrdinaryWeeklyPay | decimal | n/a | 20 | Submission.Claims.Claim.EmploymentDetails |
| C042 | Date Worker Started Employment | EmploymentStartDate | date | n/a | n/a | Submission.Claims.Claim.EmploymentDetails |
| C043 | Employer ABN | ABN | string | 0 | 20 | Submission.Claims.Claim.EmployerDetails |
| C125 | Employer ACN | ACN | string | 0 | 20 | Submission.Claims.Claim.EmployerDetails |
| C127 | Workcover Number | WorkCoverNumber | string | 0 | n/a | Submission.Claims.Claim.EmployerDetails |
| C044 | Employer Trading Name | TradingName | string | 0 | 1024 | Submission.Claims.Claim.EmployerDetails |
| C045 | Employer Contact Name | ContactName | string | 0 | 200 | Submission.Claims.Claim.EmployerDetails |
| C046 | Employer Contact Position | ContactPosition | string | 0 | 100 | Submission.Claims.Claim.EmployerDetails |
| C047 | Employer Contact Phone Number | ContactDetails | string | 0 | 50 | Submission.Claims.Claim.EmployerDetails |
| C048 | Date Of Occurrence | OccurrenceDate | date | n/a | n/a | Submission.Claims.Claim.ClaimManagementDetails |
| C049 | Date Insurer Notified Of Injury | InjuryNotificationDate | date | n/a | n/a | Submission.Claims.Claim.ClaimManagementDetails |
| C050 | Date Claim Received By Employer | ClaimReceivedByEmployerDate | date | n/a | n/a | Submission.Claims.Claim.ClaimManagementDetails |
| C051 | Date Medical Certificate Received By Employer | MedicalCertificateReceivedByEmployerDate | date | n/a | n/a | Submission.Claims.Claim.ClaimManagementDetails |

**WorkCover WA**

**Relationship between Data Items as Defined in the Document <u>NIDS V 8.0.docx</u> and the XML Schema**

**Claims Node**

| No. | Data Item Name | XML Name | XML Type | Min Len | Max Len | Parent Node |
|---|---|---|---|---|---|---|
| C052 | Date Insurer Notified Of Claim | ClaimNotificationDate | date | n/a | n/a | Submission.Claims.Claim.ClaimManagementDetails |
| C053 | Date Claim Received By Insurer | ClaimReceivedByInsurer Date | date | n/a | n/a | Submission.Claims.Claim.ClaimManagementDetails |
| C054 | Injury Management Program Type | InjuryManagementProgra mType | string | 0 | 50 | Submission.Claims.Claim.ClaimManagementDetails |
| C055 | Extent Of Incapacity Code | IncapacityCode | string | 0 | 50 | Submission.Claims.Claim.ClaimManagementDetails |
| C056 | Date Of Death | DeathDate | date | n/a | n/a | Submission.Claims.Claim.ClaimManagementDetails |
| C057 | Date Claim Finalised | ClaimFinalisedDate | date | n/a | n/a | Submission.Claims.Claim.ClaimManagementDetails |
| C058 | Date Of Recurrence | RecurrenceDate | date | n/a | n/a | Submission.Claims.Claim.ClaimManagementDetails |
| C059 | Date Reopened | ReopenedDate | date | n/a | n/a | Submission.Claims.Claim.ClaimManagementDetails |
| C060 | Weekly Benefit Rate | WeeklyBenefitRate | decimal | n/a | 20 | Submission.Claims.Claim.ClaimManagementDetails |
| C061 | Claim Status Date | ClaimStatusDate | date | n/a | n/a | Submission.Claims.Claim.ClaimManagementDetails |
| C062 | Claim Status Code | ClaimStatusCode | string | 0 | 50 | Submission.Claims.Claim.ClaimManagementDetails |
| C063 | Common Law Involvement | CommonLawInvolvement | string | 0 | 50 | Submission.Claims.Claim.ClaimManagementDetails |
| C064 | Common Law Outcome | CommonLawOutcome | string | 0 | 50 | Submission.Claims.Claim.ClaimManagementDetails |
| C065 | Common Law Provision | CommonLawProvision | decimal | n/a | 20 | Submission.Claims.Claim.ClaimManagementDetails |
| C066 | Workplace Anzsic 1993 | WorkplaceIndustryANZSI C93Code | string | 0 | 20 | Submission.Claims.Claim.WorkplaceDetails |
| C128 | Workplace Anzsic 2006 | WorkplaceIndustryANZSI C06Code | string | 0 | 20 | Submission.Claims.Claim.WorkplaceDetails |
| C067 | Workplace Address Line 1 | AddressLine1 | string | 0 | 100 | Submission.Claims.Claim.WorkplaceDetails.InjuryAddr ess |
| C068 | Workplace Address Line 2 | AddressLine2 | string | 0 | 100 | Submission.Claims.Claim.WorkplaceDetails.InjuryAddr ess |
| C122 | Workplace Address Line 3 | AddressLine3 | string | 0 | 100 | Submission.Claims.Claim.WorkplaceDetails.InjuryAddr ess |
| C069 | Workplace Address Suburb | Suburb | string | 0 | 200 | Submission.Claims.Claim.WorkplaceDetails.InjuryAddr ess |
| C070 | Workplace Address State/Territory | State | string | 0 | n/a | Submission.Claims.Claim.WorkplaceDetails.InjuryAddr ess |

**WorkCover WA**

**Relationship between Data Items as Defined in the Document <u>NIDS V 8.0.docx</u> and the XML Schema**

**Claims Node**

| No. | Data Item Name | XML Name | XML Type | Min Len | Max Len | Parent Node |
|---|---|---|---|---|---|---|
| C071 | Workplace Address Postcode | Postcode | string | 0 | 4 | Submission.Claims.Claim.WorkplaceDetails.InjuryAddress |
| C072 | Incident Description Narrative | EventDescription | string | 0 | 1000 | Submission.Claims.Claim.InjuryDetails |
| C073 | Mechanism Of Incident Code | Mechanism | string | 0 | 20 | Submission.Claims.Claim.InjuryDetails.TOOCS31 |
| C074 | Agency Of Injury/Disease Code | Agency | string | 0 | 20 | Submission.Claims.Claim.InjuryDetails.TOOCS31 |
| C075 | Breakdown Agency Code | BreakdownAgency | string | 0 | 20 | Submission.Claims.Claim.InjuryDetails.TOOCS31 |
| C076 | Most Serious Injury/Disease Narrative | InjuryDescription | string | 0 | 500 | Submission.Claims.Claim.InjuryDetails |
| C077 | Nature Of Injury/Disease Code | Nature | string | 0 | 20 | Submission.Claims.Claim.InjuryDetails.TOOCS31 |
| C078 | Bodily Location Of Injury/Disease Narrative | BodilyLocationDescription | string | 0 | 100 | Submission.Claims.Claim.InjuryDetails |
| C079 | Bodily Location Of Injury/Disease Code | BodyLocation | string | 0 | 20 | Submission.Claims.Claim.InjuryDetails.TOOCS31 |
| C082 | Primary Provider Number | PrimaryPractionerProviderNumber | string | 0 | 20 | Submission.Claims.Claim.InjuryManagementDetails |
| C131 | Medical Certificate ID | MedicalCertificateReference | string | 1 | 255 | Submission.Claims.Claim.InjuryManagementDetails.MedicalCertificateDetails.MedicalCertificateDetail |
| C083 | Date Of Medical Certificate | MedicalCertificateDate | date | n/a | n/a | Submission.Claims.Claim.InjuryManagementDetails.MedicalCertificateDetails.MedicalCertificateDetail |
| C084 | Medical Certificate Provider Number | IssuerProviderNumber | string | 0 | 20 | Submission.Claims.Claim.InjuryManagementDetails.MedicalCertificateDetails.MedicalCertificateDetail |
| C085 | Capacity To Work At Medical Certificate | CapacityToWorkCode | string | 0 | 50 | Submission.Claims.Claim.InjuryManagementDetails.MedicalCertificateDetails.MedicalCertificateDetail |
| C086 | Date Work Status Changed | ChangeDate | date | n/a | n/a | Submission.Claims.Claim.InjuryManagementDetails.WorkStatusUpdateDetails.WorkStatusUpdateDetail |
| C087 | Work Status | WorkStatusCode | string | 0 | 50 | Submission.Claims.Claim.InjuryManagementDetails.WorkStatusUpdateDetails.WorkStatusUpdateDetail |

**WorkCover WA**

**Relationship between Data Items as Defined in the Document <u>NIDS V 8.0.docx</u> and the XML Schema**

**Claims Node**

| No. | Data Item Name | XML Name | XML Type | Min Len | Max Len | Parent Node |
|---|---|---|---|---|---|---|
| C130 | Work Status Update ID | WorkStatusUpdateReference | string | 1 | 255 | Submission.Claims.Claim.InjuryManagementDetails.WorkStatusUpdateDetails.WorkStatusUpdateDetail |
| C088 | Return To Work Plan Status | ReturnToWorkProgramStatusCode | string | 0 | 50 | Submission.Claims.Claim.InjuryManagementDetails |
| C089 | Return To Work Plan Goal/Outcome | ReturnToWorkPlanCode | string | 0 | 50 | Submission.Claims.Claim.InjuryManagementDetails |
| C090 | Injury Management Plan Status | InjuryManagementPlanStatusCode | string | 0 | 50 | Submission.Claims.Claim.InjuryManagementDetails |
| C091 | Whole Person Impairment Type | WholePersonImpairmentType | string | 0 | 50 | Submission.Claims.Claim.InjuryManagementDetails |
| C092 | Whole Person Impairment Percentage | WholePersonImpairmentPercentage | integer | 0 | 100 | Submission.Claims.Claim.InjuryManagementDetails |
| C093 | Date Of Determination | DeterminationDate | date | n/a | n/a | Submission.Claims.Claim.InjuryManagementDetails |
| C094 | Deafness Percentage | DeafnessPercentage | integer | 0 | 100 | Submission.Claims.Claim.InjuryManagementDetails |
| C095 | Total Payments Estimated | TotalEstimatedPayments | decimal | n/a | 20 | Submission.Claims.Claim.InjuryManagementDetails |
| C097 | Total Time Lost Estimated | TotalEstimatedTimeLost | integer | n/a | 7 | Submission.Claims.Claim.InjuryManagementDetails |
| C999 | Team Number | TeamNumber | string | 0 | 3 | Submission.Claims.Claim |

**Payments Node**

| No. | Data Item Name | XML Name | XML Type | Min Len | Max Len | Parent Node |
|---|---|---|---|---|---|---|
| C002 | Insurer Claim Number | ClaimNumber | string | 1 | 255 | Submission.Payments.Payment |
| C096 | Total Payments Actual | TotalActualPayments | decimal | n/a | 20 | Submission.Payments.Payment |
| C098 | Total Time Lost Actual | TotalActualTimeLost | integer | n/a | 8 | Submission.Payments.Payment |
| C099 | Insurer Payment ID | PaymentReference | string | 1 | 255 | Submission.Payments.Payment.ClaimPayments.ClaimPayment |
| C100 | Payment Type | PaymentTypeCode | string | 0 | 50 | Submission.Payments.Payment.ClaimPayments.ClaimPayment |

**WorkCover WA**

**Relationship between Data Items as Defined in the Document <u>NIDS V 8.0.docx</u> and the XML Schema**

| **Payments Node** | | | | | | |
|---|---|---|---|---|---|---|
| **No.** | **Data Item Name** | **XML Name** | **XML Type** | **Min Len** | **Max Len** | **Parent Node** |
| | Code | | | | | |
| C101 | Weekly Payment Code | WeeklyPaymentAdjustmentCode | string | 0 | 50 | Submission.Payments.Payment.ClaimPayments.ClaimPayment |
| C102 | Time Lost | TimeLost | integer | n/a | 8 | Submission.Payments.Payment.ClaimPayments.ClaimPayment |
| C103 | Date Paid From | PaidFromDate | date | n/a | n/a | Submission.Payments.Payment.ClaimPayments.ClaimPayment |
| C104 | Date Paid To | PaidToDate | date | n/a | n/a | Submission.Payments.Payment.ClaimPayments.ClaimPayment |
| C105 | Payment Amount | PaymentAmount | decimal | n/a | 20 | Submission.Payments.Payment.ClaimPayments.ClaimPayment |
| C106 | Transaction Date | TransactionDate | date | n/a | n/a | Submission.Payments.Payment.ClaimPayments.ClaimPayment |
| C107 | Transaction Type Code | TransactionTypeCode | string | 0 | 50 | Submission.Payments.Payment.ClaimPayments.ClaimPayment |
| C109 | Payment Context | PaymentContext | string | 0 | n/a | Submission.Payments.Payment.ClaimPayments.ClaimPayment |
| C110 | Payment Source | PaymentSourceCode | string | 0 | 50 | Submission.Payments.Payment.ClaimPayments.ClaimPayment |
| C111 | Provider Number | ProviderNumber | string | 0 | 20 | Submission.Payments.Payment.ClaimPayments.ClaimPayment.Service |
| C112 | Service Code | ServiceCode | string | 0 | 50 | Submission.Payments.Payment.ClaimPayments.ClaimPayment.Service |
| C113 | Service Date | ServiceDate | date | n/a | n/a | Submission.Payments.Payment.ClaimPayments.ClaimPayment.Service |

# APPENDIX 4

*List of Validations Applied*

**WorkCover WA**

***List of Validations Applied***

This appendix contains a list of the validations implemented as at the release date of this version (30 September 2015). They are a combination of applicable NIDS Version 8.0 validations, and additional validations considered useful in the WorkCover WA NIDS processing context.

The WorkCover WA NIDS Claim and Policy System provides a facility for users to view and download a list of currently implemented validations.

Notes:

1. The error messages shown below all have the string '*for (entity type) (entity key)*' appended, as applicable, in addition to the entity identification provided as a part of the Issue Notification process.

2. Messages are colour coded in the lists as follows:

| No colour | No change since Version 1.1 |

| Green | Added since Version 1.1 |

| Red | Removed since Version 1.1 – no longer applied. |

| Yellow | Modified since Version 1.1 |

| Blue | Moved to post-processing checks since Version 1.1 |

**WorkCover WA**

***List of Validations Applied***

## *Policy Validations*

| Data Element No | Data Element Name | Rule No. | Confirmation /Error | Error Message |
|---|---|---|---|---|
| P003 | Policy Number | P003.1 | Error | Policy Number must be provided for a Coverage {coverageReference} - please liaise with WorkCover WA to resolve this issue |
| P003 | Policy Number | P003.2 | Error | An existing Policy could not be found for coverage type Lapse or Cancellation ({coverageNotificationType}) |
| P003 | Policy Number | P003.3 | Error | Policy has not been approved to be cancelled between given Effective Date ({effectiveDate}) and Submitted Cancellation Date ({expiryDate}) |
| P003 | Policy Number | P003.6 | Confirmation | The Policy was previously CANCELLED. Please confirm if policy is to be reinstated |
| P003 | Policy Number | P003.7 | Error | The Policy Number ({policyNumber}) must not be more than 20 characters long - please liaise with WorkCover WA to resolve this issue |
| P003 | Policy Number | P003.8 | Error | This Policy record was not supplied with any coverage information and the Policy cannot be found in the WorkCover database - please liaise with WorkCover WA to resolve this issue |
| P003 | Policy Number | P003.9 | Error | The Policy and Coverage do not link to the same Policy in WorkCover WA's database - please liaise with WorkCover WA to resolve this issue |
| P003 | Policy Number | P003.10 | Error | An existing Policy for coverage type Renewal could not be found |
| P004 | Revised Policy Number | P004.1 | Error | Revised Policy Number ({revisedPolicyNumber}) already exists in the WorkCover Database |
| P004 | Revised Policy Number | P004.2 | Error | The supplied Revised Policy Number ({RevisedPolicyNumber}) already exists in the WorkCover Database as a Revised Policy Number for a different business entity |
| P004 | Revised Policy Number | P004.7 | Error | Revised Policy number ({revisedPolicyNumber}) must not be more than 20 characters long - please liaise with WorkCover WA to resolve this issue |
| P005 | Employer Legal Name | P005.M | Error | Employer Legal Name was not provided |
| P009 | Employer Address Line 1 | P009.M | Error | Employer Address Line 1 was not provided |
| P009 | Employer Address Line 1 | P009.1 | Confirmation | "Anywhere in Australia" is not a Valid Address |

**WorkCover WA**

*List of Validations Applied*

| Data Element No | Data Element Name | Rule No. | Confirmation /Error | Error Message |
|---|---|---|---|---|
| P010 | Employer Address Line 2 | P010.1 | Confirmation | "Anywhere in Australia" is not a Valid Address |
| P011 | Employer Address Suburb | P011.M | Error | Employer Address Suburb was not provided |
| P012 | Employer Address State/Territory | P012.M | Error | Employer Address State/Territory code was not provided |
| P012 | Employer Address State/Territory | P012.3 | Confirmation | Employer State/Territory ({employerState}) code entered is not valid |
| P026 | Injury Management Program | P026.M | Error | Injury Management Program Code was not provided |
| P026 | Injury Management Program | P026.3 | Error | The Injury Management Program Code ({injuryManagementProgramType}) provided is invalid |
| P027 | Lapse/ Cancellation Reason Code | P027.1 | Confirmation | The Coverage has been supplied with a Lapse Reason Code of "09 - Other". Please liaise with WorkCover WA to clarify the intention of this notification and resolve this issue |
| P027 | Lapse/ Cancellation Reason Code | P027.2 | Error | Lapse Reason Code (08 Cancelled coverage) provided is not valid with a Coverage Type Code other than '06 Adjustment'. Please liaise with WorkCover WA to clarify the intention of this notification and resolve this issue |
| P027 | Lapse/ Cancellation Reason Code | P027.3 | Error | A valid Lapse/Cancellation Code must be provided for a Policy that has been Cancelled/Lapsed |
| P027 | Lapse/ Cancellation Reason Code | P027.4 | Confirmation | Lapse Reason Code ({lapseReasonCode}) has been provided for Coverage Notification Type ({coverageNotificationType}). Please liaise with WorkCover WA to clarify the intention of this notification and resolve this issue |
| P028 | Coverage ID | P028.M | Error | Coverage Reference must be provided |
| P028 | Coverage ID | P028.4 | Confirmation | Lapse Reason Code '08' (Cancelled coverage) has been provided. Please liaise with WorkCover WA to clarify the intention of this notification and resolve this issue |
| P028 | Coverage ID | P028.5 | Error | The New Coverage should have a matching Policy record |
| P028 | Coverage ID | P028.8 | Error | An existing policy to be adjusted could not be found |

**WorkCover WA**

*List of Validations Applied*

| Data Element No | Data Element Name | Rule No. | Confirmation /Error | Error Message |
|---|---|---|---|---|
| P028 | Coverage ID | P028.9 | Error | An existing coverage to be adjusted could not be found |
| P028 | Coverage ID | P028.10 | Error | Policy has no Coverage following Coverage Cancellation |
| P028 | Coverage ID | P028.11 | Confirmation | The Effective Date ({effectiveDate}) submitted for the Coverage Reference ({CoverageReference}) is different to what is already recorded ({recordedeffectiveDate}) with WorkCover |
| P029 | Coverage Type Code | P029.3 | Error | Coverage Notification Type ({coverageNotificationType}) is invalid or missing. Please liaise with WorkCover WA to clarify the intention of this notification and resolve this issue |
| P029 | Coverage Type Code | P029.4 | Error | The Coverage provided has Coverage Notification Type of '09 - Any other notification type'. Please liaise with WorkCover WA to clarify the intention of this notification and resolve this issue |
| P031 | Effective Date | P031.M | Error | Effective Date was not provided for Coverage Type Cover Note, New or Renewal |
| P031 | Effective Date | P031.2 | Error | Effective Date ({effectiveDate}) is later than Expiry Date ({expiryDate}) |
| P031 | Effective Date | P031.4 | Confirmation | Please confirm or amend the Effective Date ({effectiveDate}) as it is more than 60 days after the File Submission Date ({submissionDate}) |
| P031 | Effective Date | P031.5 | Confirmation | Lapse notification received with date of effect ({EffectiveDate}) is prior to the Coverage expiry ({expiryDate}) |
| P031 | Effective Date | P031.6 | Confirmation | Effective Date ({effectiveDate}) for renewal is later than the last recorded Expiry Date ({expiryDate}) |
| P031 | Effective Date | P031.7 | Confirmation | The Effective date ({effectiveDate}) of this Coverage is the same as a previously recorded event but with a different Expiry Date ({expiryDate}). Please confirm if amending the period of coverage |
| P032 | Expiry Date | P032.M | Error | Expiry Date was not provided |
| P032 | Expiry Date | P032.3 | Confirmation | Coverage Period ({effectiveDate}) - ({expiryDate}) exceeds 18 months |
| P032 | Expiry Date | P032.4 | Confirmation | Cover Note supplied has period of cover greater than 60 days from ({effectiveDate}) to ({expiryDate}) |

**WorkCover WA**

*List of Validations Applied*

| Data Element No | Data Element Name | Rule No. | Confirmation /Error | Error Message |
|---|---|---|---|---|
| P033 | PRC 1993 | P033.1 | Error | PRC 1993 code ({ANZSIC93Code}) provided is invalid |
| P033 | PRC 1993 | P033.2 | Error | PRC 1993 was not provided |
| P034 | PRC 2006 | P034.3 | Error | PRC 2006 ({ANZSIC06Code}) provided is invalid |
| P034 | PRC 2006 | P034.4 | Error | PRC 2006 was not provided |
| P035 | Estimated Wages | P035.M | Error | Estimated Wages was not provided |
| P035 | Estimated Wages | P035.5 | Error | Estimated Workers ({estimatedWorkers}) must be consistent with Estimated Wages ({estimatedWages}. If one is supplied then a value for the other is expected |
| P036 | Estimated Number Of Workers | P036.M | Error | Estimated Number of Workers was not provided |
| P037 | Actual Wages | P037.2 | Error | Actual Workers ({actualWorkers}) must be consistent with Actual Wages ({actualWages}. If one is supplied then a value for the other is expected |
| P037 | Actual Wages | P037.4 | Confirmation | Estimated Wages or Actual Wages was not provided |
| P037 | Actual Wages | P037.5 | Confirmation | The coverage period related to this Effective Date ({effectiveDate}) has not expired, however, the Actual Wages ({actualWages}) and/or the Actual Number of Workers ({actualWorkers}) has been supplied |
| P039 | Premium Collection Type | P039.M | Error | Premium collection type was not provided |
| P039 | Premium Collection Type | P039.3 | Error | Premium collection type ({premiumCollectionType}) provided is invalid |
| P041 | Current Adjusted Premium Charged | P041.1 | Confirmation | Current Adjusted Premium Charged is expected to be greater than Zero (0) |
| P041 | Current Adjusted Premium Charged | P041.2 | Confirmation | The Current Adjusted Premium Charged amount (${adjustedpremium}) provided for a '03' (Minimum Premium Policy – Domestic) is at least 20% less than the Recommended Minimum Premium |
| P041 | Current Adjusted Premium Charged | P041.3 | Confirmation | Adjusted Premium Charged ({adjustedPremium}) supplied for a Minimum Premium Policy (Premium Collection Type '03' or '04') is greater than expected |

**WorkCover WA**

*List of Validations Applied*

| Data Element No | Data Element Name | Rule No. | Confirmation /Error | Error Message |
|---|---|---|---|---|
| P041 | Current Adjusted Premium Charged | P041.4 | Confirmation | The Current Adjusted Premium Charged amount (${adjustedpremium}) provided for a '04 Minimum Premium Policy - Other (Nominal)' is less than the Recommended Minimum Premium |
| P043 | WorkCover Number | P043.M | Error | A WorkCover Number was not provided |
| P043 | WorkCover Number | P043.1 | Error | The WorkCover Number ({workCoverNumber}) provided does not exist in WorkCover WA's database |
| P043 | WorkCover Number | P043.2 | Error | The incoming WCN ({workCoverNumber}) does not match existing WCN ({policyWCN}). Please liaise with WorkCover WA to clarify the intention of this notification and resolve this issue |
| P053 | Initial Deposit Premium Charged | P053.1 | Confirmation | Initial Deposit Premium Charged is required when Adjusted Premium is not provided |
| P053 | Initial Deposit Premium Charged | P053.2 | Confirmation | The Current Initial Deposit Premium Charged amount (${initialDepositPremium}) provided for a '03' (Minimum Premium Policy Domestic) is at least 20% less than the Recommended Minimum Premium |
| P053 | Initial Deposit Premium Charged | P053.3 | Confirmation | Initial Deposit Premium Charged (${initialDepositPremium}) for a '04 Minimum Premium Policy - Other (Nominal)' is less than the Recommended Minimum Premium |
| P053 | Initial Deposit Premium Charged | P053.4 | Confirmation | The Current Initial Deposit Premium Charged amount ({InitialDepositPremium}) provided for a Min Premium Policy (Premium Collection Type '03' or '04') is at least 20% greater than the Recommended Min Premium |
| PA (a) | Policy Data Quality | PA.1 | Error | Policy 'Amendment' Data Quality – missing information required for WCN details maintenance (as described) |

(a) This validation is raised during post-processing data quality checking of apparent changes to WCN details, as derived from changes in Employer details notified in Policy records.  It is resolved by the supply of the requested information (via a conversation with WorkCover WA), and is then clerically dismissed.

**WorkCover WA**

*List of Validations Applied*

## *Claim Validations*

| Data Element No | Data Element Name | Rule No. | Confirmation/ Error | Error Message |
|---|---|---|---|---|
| C002 | Insurer Claim Number | C002.M | Error | A claim was submitted for policy ({policyNumber}) without a Claim Number - please liaise with WorkCover WA to resolve this issue |
| C002 | Insurer Claim Number | C002.1 | Error | Claim already exists in WorkCover Database but for a different Policy Number |
| C002 | Insurer Claim Number | C002.3 | Error | The length of Claim Number should be a maximum of 20 characters - please liaise with WorkCover WA to resolve this issue |
| C002 | Insurer Claim Number | C002.4 | Error | Claim Number provided for a set of payments could not be found on WorkCover WA's Database - please liaise with WorkCover WA to resolve this issue |
| C002 | Insurer Claim Number | C002.5 | Error | Claim Number was not provided for a set of payments - please liaise with WorkCover WA to resolve this issue |
| C002 | Insurer Claim Number | C002.6 | Confirmation | Another Claim for the Worker, ({givenNames}) ({Surname}, D.O.B. ({dateOfBirth}, with the same WCN ({WCN}) and Date of Occurrence ({occurrenceDate}) already exists within the WorkCover Database |
| C006 | Policy Number | C006.1 | Error | The Policy Number ({policyNumber}) is recorded in the WorkCover database against a different WCN ({OtherWorkCoverNumber}) than the one provided ({WorkCoverNumber}) |
| C006 | Policy Number | C006.3 | Error | The Policy Number ({policyNumber}) provided for Claim was not found in WorkCover WA's database |
| C006 | Policy Number | C006.4 | Error | The PolicyNumber ({PolicyNumber}) and or CoverageReference ({CoverageReference}) provided for this Claim differ from the Policy Number already recorded ({OtherPolicyNumber}) in WorkCover WA's database |
| C007 | Coverage ID | C007.1 | Error | The Coverage Id ({CoverageReference}) provided for the Claim ({ClaimNumber}) does not match the Coverage ID for the Policy number ({PolicyNumber}) and Occurrence Date ({OccurrenceDate}) |
| C008 | PRC 1993 | C008.2 | Error | PRC 1993 Code ({anzsic93Code}) provided is invalid |
| C008 | PRC 1993 | C008.5 | Error | A PRC 1993 Code was not provided |

**WorkCover WA**

*List of Validations Applied*

| Data Element No | Data Element Name | Rule No. | Confirmation/ Error | Error Message |
|---|---|---|---|---|
| C009 | Shared Claim Code | C009.M | Error | A Shared Claim Code was not provided |
| C009 | Shared Claim Code | C009.2 | Error | Shared Claim Code ({sharedClaimCode}) provided is invalid |
| C011 | Revised Insurer Claim Number | C011.4 | Confirmation | Revised Insurer Claim Number ({revisedClaimNumber}) for Claim should be unique |
| C011 | Revised Insurer Claim Number | C011.5 | Error | The length of Revised Claim Number ({revisedClaimNumber}) must be a maximum of 20 characters - please liaise with WorkCover WA to resolve this issue |
| C012 | Worker Title | C012.M | Error | Worker Title was not provided |
| C013 | Worker Surname | C013.M | Error | The Worker Surname was not provided |
| C013 | Worker Surname | C013.1 | Error | Worker Surname ({Surname}) should not be more than 30 characters - please liaise with WorkCover WA to resolve this issue |
| C014 | Worker Given Names | C014.M | Error | Worker Given Name was not provided |
| C014 | Worker Given Names | C014.1 | Error | The length of Worker Given Names ({givenNames}) should have a maximum of 30 characters - please liaise with WorkCover WA to resolve this issue |
| C015 | Worker Residential Address Line 2 | C015.M | Error | Worker Residential Address Line 1 was not provided |
| C015 | Worker Residential Address Line 1 | C015.1 | Error | The length of Worker Residential Address Line 1 ({residentialAddressLine1}) should have a maximum of 30 characters - please liaise with WorkCover WA to resolve this issue |
| C016 | Worker Residential Address Line 2 | C016.1 | Error | The length of Worker Residential Address Line 2 ({residentialAddressLine2}) should have a maximum of 30 characters - please liaise with WorkCover WA to resolve this issue |
| C017 | Worker Residential Address Suburb | C017.M | Error | The Worker Residential Address Suburb was not provided |
| C017 | Worker Residential Address Suburb | C017.3 | Error | The Worker Residential Address Suburb ({workerResidentialSuburb}) does not match a listed Australian Postal Suburb |
| C018 | Worker Residential Address State/Territory | C018.M | Error | The Worker Residential Address State/Territory was not provided |

## WorkCover WA

### *List of Validations Applied*

| Data Element No | Data Element Name | Rule No. | Confirmation/ Error | Error Message |
|---|---|---|---|---|
| C018 | Worker Residential Address State/Territory | C018.3 | Error | The Worker Residential State/Territory ({workerResidentialState}) provided is invalid |
| C025 | Worker Home Phone Number | C025.1 | Error | Worker contact detail was not provided |
| C025 | Worker Home Phone Number | C025.2 | Error | The length of Worker Home Phone Number ({phoneNumber}) must not be more than 30 characters |
| C029 | Worker Date of Birth | C029.M | Confirmation | Worker Date of Birth was not provided |
| C029 | Worker Date of Birth | C029.2 | Confirmation | The Workers age ({calculatedvalue}) is outside the expected range of 15 to 80 years according to provided Date of Birth ({dateOfBirth}) and Occurrence Date ({occurrenceDate}) |
| C030 | Worker Gender | C030.3 | Error | Worker Gender Code ({workerGender}) is invalid |
| C031 | Worker Preferred Language | C031.M | Error | Worker Preferred Language was not provided |
| C031 | Worker Preferred Language | C031.2 | Error | The Worker Preferred Language Code ({preferredLanguageCode}) is invalid |
| C032 | Duty Status Code | C032.M | Error | Duty Status Code was not provided |
| C032 | Duty Status Code | C032.1 | Confirmation | Duty Status Code has been provided as "09 Other". Please liaise with WorkCover Staff to resolve this issue |
| C032 | Duty Status Code | C032.3 | Confirmation | Duty Status Code "04 Journey" has been provided with an Occurrence Date ({occurrenceDate}) after 24 December 1993. Please liaise with WorkCover staff to resolve this issue |
| C032 | Duty Status Code | C032.4 | Error | Duty Status Code ({dutyStatusCode}) is invalid |
| C033 | Employment Status Code | C033.M | Error | Employment Status Code was not provided |
| C033 | Employment Status Code | C033.2 | Confirmation | For Employment Status Code "02- Working Director, Employment Type Code should not be "02-Temporary", "03-Casual" or "04-Temporary Overseas Visa Worker" |
| C033 | Employment Status Code | C033.3 | Error | Employment Status Code ({employmentStatusCode}) is invalid |
| C033 | Employment Status Code | C033.4 | Confirmation | For Employment Status Code "03- Contractor, Employment Type Code should not be "03-Casual" or "04-Temporary Overseas Visa Worker" |

**WorkCover WA**

*List of Validations Applied*

| Data Element No | Data Element Name | Rule No. | Confirmation/ Error | Error Message |
|---|---|---|---|---|
| C034 | Employment Type Code | C034.M | Error | Employment Type Code was not provided |
| C034 | Employment Type Code | C034.3 | Error | Employment Type Code ({employmentTypeCode}) is invalid |
| C035 | Full/Part Time Code | C035.M | Error | Full/Part Time Code was not provided |
| C035 | Full/Part Time Code | C035.3 | Error | The Full/Part Time Code ({fullTimeOrPartTimeEmployment}) provided is invalid |
| C036 | Worker's Occupation Narrative | C036.M | Error | The Worker Occupation Narrative was not provided |
| C038 | Hours Worked Per Day | C038.M | Error | Hours Worked Per Day ({hoursWorkedPerDay}) was not provided or is invalid |
| C038 | Hours Worked Per Day | C038.1 | Confirmation | Hours Worked Per Day ({hoursWorkedPerDay}) provided is not within the range expected by WorkCover (Min: 2:00 hrs/day and Max 12 hrs/day) |
| C039 | Hours Worked Per Week | C039.M | Error | Hours Worked Per Week ({hoursWorkedPerWeek}) was not provided or is invalid |
| C039 | Hours Worked Per Week | C039.2 | Confirmation | Hours Worked Per Week ({hoursWorkedPerWeek}) provided is not within the full time range expected by WorkCover (Greater than 30:00 hrs/wk and Max 70:00 hrs/wk) |
| C039 | Hours Worked Per Week | C039.4 | Confirmation | Hours Worked Per Day ({hoursWorkedPerDay}) provided is greater than Hours Worked Per Week ({hoursWorkedPerWeek}) |
| C039 | Hours Worked Per Week | C039.6 | Confirmation | Hours Worked Per Week ({hoursWorkedPerWeek}) provided is not within the part time range expected by WorkCover (Min: 02:00 hrs/wk and Max 30:00 hrs/wk) |
| C040 | Normal Weekly Earnings | C040.4 | Confirmation | Normal Weekly Earnings was not provided but there is time lost |
| C042 | Date Worker Started Employment | C042.3 | Error | Date Worker Started Employment ({employmentStartDate}) provided is after the Date of Occurrence ({occurrenceDate}) |
| C048 | Date Of Occurrence | C048.M | Error | Date of Occurrence was not provided |
| C048 | Date Of Occurrence | C048.1 | Confirmation | Difference between Occurrence Date ({occurrenceDate}) and Insurer Received Date ({claimReceivedByInsurerDate}) is greater than 2 years |
| C048 | Date Of Occurrence | C048.4 | Error | The Occurrence Date ({occurrenceDate}) is not within the Coverage Period for the Policy ({policyNumber}) |

**WorkCover WA**

*List of Validations Applied*

| Data Element No | Data Element Name | Rule No. | Confirmation/ Error | Error Message |
|---|---|---|---|---|
| C048 | Date Of Occurrence | C048.5 | Error | Date Claim Received by Insurer ({claimReceivedByInsurerDate}) provided is prior to the Date of Occurrence ({occurrenceDate}) |
| C048 | Date Of Occurrence | C048.6 | Error | Date of Occurrence ({occurrenceDate}) cannot be in the future |
| C048 | Date Of Occurrence | C048.7 | Error | The Date of Occurrence ({OccurrenceDate}) supplied for the Claim is different to what is recorded on WorkCover WA's Database ({OtherOccurrenceDate}). - Please liaise with WorkCover WA to resolve this issue |
| C049 | Date Insurer Notified Of Injury | C049.M | Error | Date Insurer Notified was not provided |
| C049 | Date Insurer Notified Of Injury | C049.3 | Error | Date Insurer Notified of Injury ({injuryNotificationDate}) is prior to the Date of Occurrence ({occurrenceDate}) |
| C049 | Date Insurer Notified Of Injury | C049.4 | Error | Date Insurer Notified Of Injury ({InjuryNotificationDate}) cannot be in the future |
| C050 | Date Claim Received By Employer | C050.M | Error | Date Claim Received By Employer was not provided |
| C050 | Date Claim Received By Employer | C050.3 | Error | Date Claim Received by Employer ({claimReceivedByInsurerDate}) is prior to the Date of Occurrence ({occurrenceDate}) |
| C050 | Date Claim Received By Employer | C050.4 | Error | Date Claim Received By Employer ({ClaimReceivedByEmployerDate}) cannot be in the future |
| C052 | Date Insurer Notified Of Claim | C052.M | Error | Date Insurer Notified of Claim was not provided |
| C052 | Date Insurer Notified Of Claim | C052.3 | Error | Date Insurer Notified of Claim ({claimNotificationDate}) is prior to the Date Insurer Notified of Injury ({injuryNotificationDate}) |
| C052 | Date Insurer Notified Of Claim | C052.4 | Error | Date Insurer Notified Of Claim ({ClaimNotificationDate}) cannot be in the future |
| C053 | Date Claim Received By Insurer | C053.M | Error | Date Claim Received by Insurer was not provided |
| C053 | Date Claim Received By Insurer | C053.2 | Confirmation | Insurer Received Date provided with a different date ({claimReceivedByInsurerDate}) than previously provided to WorkCover ({otherReceivedDate}). Please check if date has been amended in your system and provide an explanation |
| C053 | Date Claim Received By Insurer | C053.3 | Error | The Insurer Received Date ({claimReceivedByInsurerDate}) is prior to the Date Insurer Notified of Claim ({claimNotificationDate}) |

# WorkCover WA

## *List of Validations Applied*

| Data Element No | Data Element Name | Rule No. | Confirmation/ Error | Error Message |
|---|---|---|---|---|
| C053 | Date Claim Received By Insurer | C053.4 | Error | Date Claim Received By Insurer ({ClaimReceivedByInsurerDate}) cannot be in the future |
| C054 | injury management program type | C054.M | Error | Injury Management Program Type was not provided |
| C055 | Extent Of Incapacity Code | C055.M | Error | Extent of Incapacity Code was not provided |
| C055 | Extent Of Incapacity Code | C055.1 | Confirmation | Extent of Incapacity indicates Permanent Incapacity but Actual Total Time Lost is zero (0) |
| C055 | Extent Of Incapacity Code | C055.2 | Confirmation | Extent of Incapacity indicates "05 - No Incapacity at any time - Worker Not Injured " or "06 - No Incapacity at any time - Worker Injured" but Actual Total Time Lost has been provided |
| C055 | Extent Of Incapacity Code | C055.3 | Error | Extent of incapacity code ({extentOfIncapacityCode}) is invalid |
| C055 | Extent Of Incapacity Code | C055.4 | Confirmation | Claim has been Finalised and Extent of Incapacity indicates death but no Fatal Payment provided |
| C056 | Date Of Death | C056.1 | Confirmation | Date of Death should be provided if Worker Dependants ({numberofDependants}) is greater than zero (0) |
| C056 | Date Of Death | C056.2 | Error | Date of Death ({deathDate}) is prior to the Date of Occurrence ({occurrenceDate}) |
| C056 | Date Of Death | C056.3 | Confirmation | Date of Death was not provided but Extent of Incapacity is "01- Death" |
| C056 | Date Of Death | C056.4 | Error | Date of Death ({DeathDate}) cannot be greater Current Date |
| C057 | Date Claim Finalised | C057.1 | Error | Date of Finalisation ({claimFinalisedDate}) is prior to a previously provided Date of Finalisation ({previousClaimFinalisedDate}) |
| C057 | Date Claim Finalised | C057.2 | Error | Date Claim Finalised ({caimFinalisedDate}) is prior to the Date Claim Received by Insurer ({claimReceivedByInsurerDate}) |
| C057 | Date Claim Finalised | C057.3 | Error | Date Claim Finalised ({ClaimFinalisedDate}) cannot be in the future |
| C058 | Date Of Recurrence | C058.2 | Error | Date of Recurrence ({recurrenceDate}) is prior to a previously provided Date of Recurrence |
| C058 | Date Of Recurrence | C058.3 | Error | Recurrence Date ({recurrenceDate}) is not after Occurrence Date ({occurrenceDate}) |

# WorkCover WA

## *List of Validations Applied*

| Data Element No | Data Element Name | Rule No. | Confirmation/ Error | Error Message |
|---|---|---|---|---|
| C058 | Date Of Recurrence | C058.4 | Error | Recurrence Date ({RecurrenceDate}) cannot be in the future |
| C059 | Date Reopened | C059.1 | Confirmation | Date Reopened ({reopenedDate}) is prior to a previously provided Date Reopened ({previouslyReopenedDate}) |
| C059 | Date Reopened | C059.2 | Error | Claim Reopened ({claimReopenedDate}) but not previously finalised |
| C059 | Date Reopened | C059.3 | Confirmation | Date Reopened has not been provided but Claim previously recorded with a Date Reopened |
| C059 | Date Reopened | C059.4 | Confirmation | Reopened Date ({reopenedDate}) is prior to the Recurrence Date ({recurrenceDate}) |
| C059 | Date Reopened | C059.5 | Error | Reopened Date ({ReopenedDate}) cannot be in the future |
| C060 | Weekly Benefit Rate | C060.1 | Confirmation | Weekly Benefit Rate ({WeeklyBenefitRate}) is more that 20% greater than the Normal Weekly Earnings ({PreInjuryWeeklyEarnings}) |
| C060 | Weekly Benefit Rate | C060.2 | Confirmation | Weekly Benefit Rate ({weeklyBenefitRate}) is greater than the Cap amount |
| C060 | Weekly Benefit Rate | C060.3 | Confirmation | Weekly Benefit Rate ({weeklyBenefitRate}) is less than the minimum value expected by WorkCover |
| C060 | Weekly Benefit Rate | C060.4 | Confirmation | Weekly Benefit Rate not provided but Weekly Payments are present |
| C061 | Claim Status Date | C061.M | Error | Claim Status Date has not been provided |
| C061 | Claim Status Date | C061.1 | Error | Claim Status Date ({claimStatusDate}) is prior to the Insurer Received Date ({claimReceivedByInsurerDate}) |
| C061 | Claim Status Date | C061.2 | Confirmation | Claim Status Date ({claimStatusDate}) is inconsistent with the Claim Status Code ({claimStatusCode}). Date must be present if the Claim Status Code is other than "02 - Pending" |
| C061 | Claim Status Date | C061.3 | Error | The Claim Status Date ({claimStatusDate}) is prior to the Claim Occurrence Date ({occurenceDate}) |
| C061 | Claim Status Date | C061.4 | Error | The Claim Status Date ({claimStatusDate}) is prior to the last recorded Claim Status Date |
| C061 | Claim Status Date | C061.5 | Error | Claim Status Date ({ClaimStatusDate}) cannot be in the future |

# WorkCover WA

## *List of Validations Applied*

| Data Element No | Data Element Name | Rule No. | Confirmation/ Error | Error Message |
|---|---|---|---|---|
| C062 | Claim Status Code | C062.M | Error | Claim Status Code has not been provided |
| C062 | Claim Status Code | C062.1 | Error | Claim has previously been marked as invalid (claim status code 05) and cannot be updated |
| C062 | Claim Status Code | C062.2 | Error | Claim has previously been marked as invalid (claim status code 05). Payments cannot be updated |
| C062 | Claim Status Code | C062.3 | Error | The Claim Status Code ({claimStatusCode}) is invalid |
| C062 | Claim Status Code | C062.4 | Confirmation | A Rejected Claim has payments exceeding $10,000 |
| C062 | Claim Status Code | C062.5 | Error | Claim cannot be marked as invalid (claim status code 05) when they are valid payment transactions on the claim |
| C063 | Common Law Involvement | C063.M | Confirmation | Common Law Involvement Code has not been provided |
| C063 | Common Law Involvement | C063.1 | Error | Common Law Involvement Code ({commonLawInvolvement}) is invalid |
| C063 | Common Law Involvement | C063.2 | Confirmation | Common Law Provision ({commonLawProvision}) has been provided but Common Law Involvement recorded as "00 - No Current/Expected Common Law Involvement" |
| C063 | Common Law Involvement | C063.3 | Confirmation | Common Law Outcome ({commonLawOutcome}) has been provided but the Common Law Involvement has been set to "00 - No Current/Expected Common Law Involvement" |
| C063 | Common Law Involvement | C063.4 | Confirmation | Common Law Involvement has been provided as "01 - Common Law Estimate Raised by Insurer", however the Common Law Outcome ({commonLawOutcome}) is not "01" - Pending |
| C064 | Common Law Outcome | C064.M | Error | The Common Law Outcome was not provided |
| C064 | Common Law Outcome | C064.1 | Error | The Common Law Outcome Code ({commonLawOutcome}) is invalid |
| C064 | Common Law Outcome | C064.2 | Error | Common Law Outcome NOT provided but Claim is reported with Common Law Involvement ({commonLawInvolvement}) |
| C064 | Common Law Outcome | C064.3 | Confirmation | Common Law Payment ({commonLawPayment}) has been provided but Common Law Outcome ({commonLawOutcome}) is not "02" - Settlement or "03" - Judgement |

# WorkCover WA

## *List of Validations Applied*

| Data Element No | Data Element Name | Rule No. | Confirmation/ Error | Error Message |
|---|---|---|---|---|
| C064 | Common Law Outcome | C064.4 | Confirmation | Common Law Outcome reported as "02" - Settlement or "03" - Judgement but Common Law Payment not provided |
| C064 | Common Law Outcome | C064.5 | Confirmation | Date Finalised ({claimFinalisedDate}) has been provided but Common Law Outcome is "01- Pending" |
| C064 | Common Law Outcome | C064.6 | Error | Common Law Outcome ({commonLawOutcome}) must not be "01- Pending" or "03-Judgement" when the Payment Type Code is (13) |
| C065 | Common Law Provision | C065.1 | Error | Common Law provision ({common Law Provision}) must be provided as Whole Dollars only |
| C065 | Common Law Provision | C065.2 | Confirmation | Common Law Provision was not provided when a Common Law Involvement ({commonLawInvolvement}) has been indicated |
| C065 | Common Law Provision | C065.3 | Error | Common Law Provision ({common Law Provision}) is greater than the Estimated Total Payments ({estimated Total Payments}) (includes Common Law Provision) |
| C069 | Workplace Address Suburb | C069.M | Error | The WorkPlace Address Suburb was not provided |
| C069 | Workplace Address Suburb | C069.3 | Error | The Work Place Suburb ({Suburb}) does not match a listed Australian Postal Suburb |
| C072 | Incident Description Narrative | C072.M | Error | The incident Description Narrative was not provided |
| C076 | most serious injury/disease narrative | C076.M | Error | The Most Serious Injury/Disease Narrative was not provided |
| C078 | bodily location of injury/disease narrative | C078.M | Error | The Bodily Location Of Injury/Disease Narrative was not provided |
| C083 | Date Of Medical Certificate | C083.2 | Error | Date Of Medical Certificate was not provided but Medical Certificate ID ({medicalCertificateReference}) has been provided |
| C083 | Date Of Medical Certificate | C083.3 | Confirmation | New Date of Medical Certificate ({lastMedicalCertificateDate}) provided is prior to the latest existing Date of Medical Certificate ({latestExistingMedicalCertificateDate}) |
| C083 | Date Of Medical Certificate | C083.4 | Error | Date of Medical Certificate ({LastMedicalCertificateDate}) for Medical Certificate Reference ({medicalCertificateReference}) cannot be in the future |
| C083 | Date Of Medical Certificate | C083.5 | Error | Date of Medical Certificate ({LastMedicalCertificateDate}) for Medical Certificate Reference ({MedicalCertificateReference}) must be equal or |

**WorkCover WA**

*List of Validations Applied*

| Data Element No | Data Element Name | Rule No. | Confirmation/ Error | Error Message |
|---|---|---|---|---|
| | | | | greater than Date of Occurrence ({OccurrenceDate}) |
| C085 | Capacity To Work At Medical Certificate | C085.1 | Error | The Capacity to Work at Medical Certificate was not provided but a Medical Certificate ID ({medicalCertificateReference}) has been provided |
| C085 | Capacity To Work At Medical Certificate | C085.2 | Confirmation | The latest dated ({LastMedicalCertificateDate}) Capacity to Work ({CapacityToWorkCode}) for Medical Certificate Reference ({MedicalCertificateReference}) indicates that the worker is fit to work. However, the latest dated ({DateWorkStatusChanged}) Work Status Code ({WorkStatusCode}) in Work Status Update ID ({WorkStatusUpdateReference}) indicates the worker has not returned to work |
| C085 | Capacity To Work At Medical Certificate | C085.3 | Confirmation | Capacity To Work At Medical Certificate indicates that the worker is unfit for work. A Work Status was provided indicating a Resumption of Work ({workStatusCode}) |
| C085 | Capacity To Work At Medical Certificate | C085.4 | Error | The Capacity To Work At Medical Certificate Code ({capacityToWorkCode}) is invalid for Medical Certificate Reference ({medicalCertificateReference}) |
| C086 | Date Work Status Changed | C086.7 | Confirmation | The Date Work Status Changed ({lastWorkStatusDate}) provided is prior to the latest existing Date Work Status Changed ({latestWorkStatusDate}) |
| C086 | Date Work Status Changed | C086.8 | Error | Date Work Status Changed was not provided but a Work Status Update ID ({workStatusUpdateReference}) has been provided |
| C086 | Date Work Status Changed | C086.9 | Error | Date Work Status Changed ({DateWorkStatusChanged}) for Work Status Update Reference ({WorkStatusUpdateReference}) cannot be in the future |
| C086 | Date Work Status Changed | C086.10 | Error | Date Work Status Changed ({DateWorkStatusChanged}) for Work Status Reference ({WorkStatusUpdateReference}) must be equal or greater than Date of Occurrence ({OccurrenceDate}) |
| C087 | Work Status | C087.1 | Error | Work Status was not provided but a Work Status Update ID ({workStatusUpdateID}) has been provided |
| C087 | Work Status | C087.2 | Confirmation | Work Status is '01' (Maintained at Work) but Actual Time Lost ({actualTimeLost}) was also provided |
| C087 | Work Status | C087.3 | Error | The Work Status code ({workStatusCode}) is invalid for Reference ({workStatusUpdateReference}) |

# WorkCover WA

## *List of Validations Applied*

| Data Element No | Data Element Name | Rule No. | Confirmation/ Error | Error Message |
|---|---|---|---|---|
| C088 | Return To Work Program Status | C088.M | Error | Return to Work Plan Status was not provided |
| C088 | Return To Work Plan Status | C088.1 | Confirmation | The Return to Work Plan Status cannot be "04 - RTW Plan Completed" when Plan Goal/Outcome is "09 -RTW Plan goal/Outcome Unknown" |
| C088 | Return To Work Plan Status | C088.3 | Error | Return to Work Program Status ({returnToWorkProgramStatus}) is invalid |
| C088 | Return To Work Plan Status | C088.4 | Confirmation | For Self Insurers, Return to Work Plan Status should not be "09 RTW Plan Goal/Outcome Unknown" |
| C088 | Return To Work Plan Status | C088.5 | Confirmation | The Return to Work Plan Status should not be "01 RTW Plan Applicable but Not in Place" when Return to Work Plan Goal/Outcome is "09 RTW Plan Status Unknown/Not Yet Known" |
| C089 | Return To Work Plan Goal/Outcome | C089.M | Error | Return To Work Plan Goal/Outcome was not provided |
| C089 | Return To Work Plan Goal/Outcome | C089.3 | Error | The Return To Work Plan Goal/Outcome ({returnToWorkPlanCode}) is invalid |
| C089 | Return To Work Plan Goal/Outcome | C089.4 | Confirmation | Return To Work Plan Status ({returnToWorkStatusCode}) is inconsistent with Return To Work Plan Goal/Outcome ({returnToWorkPlanCode}) - if one is "00" then the other should also be "00" |
| C091 | Whole Person Impairment Type | C091.M | Error | Whole Person Impairment Type was not provided |
| C091 | Whole Person Impairment Type | C091.2 | Error | The Whole Person Impairment Type Code must not be 00-Nil when Common Law involvment is 02 - Writ Issued or 03 - Common Law Finalised |
| C091 | Whole Person Impairment Type | C091.3 | Error | The Whole Person Impairment Type Code ({wholePersonImpairmentType}) provided is invalid |
| C092 | Whole Person Impairment Percentage | C092.2 | Error | Whole Person Impairment Percentage was not provided, when Whole Person Impairment Type is other than "00 - Nil" ({wholePersonImpairmentType}) |
| C092 | Whole Person Impairment Percentage | C092.3 | Error | Whole Person Impairment Type is entered as Nil, therefore Whole person Impairment Percentage ({wholepersonimpairmentpercentage}) should be Zero (0) |
| C092 | Whole Person Impairment Percentage | C092.4 | Error | Whole Person Impairment Percentage ({WholePersonImpairmentPercentage}) must be greater and equal than |

# WorkCover WA

## *List of Validations Applied*

| Data Element No | Data Element Name | Rule No. | Confirmation/ Error | Error Message |
|---|---|---|---|---|
| | | | | 15% when Common Law Involvement is 02 - Writ Issued or 03 - Common Law Finalised |
| C093 | Date Of Determination | C093.2 | Error | Whole Person Impairment Type is not equal to "00 - Nil" ({wholePersonImpairmentType}) but a Date of Determination was not provided |
| C093 | Date Of Determination | C093.3 | Error | The Date of Determination ({determinationDate}) is prior to the Date of Occurrence ({occurrenceDate}) |
| C093 | Date Of Determination | C093.4 | Error | The Date of Determination ({DeterminationDate}) cannot be in the future |
| C094 | Deafness Percentage | C094.2 | Error | Deafness Percentage was not provided when Whole person impairment type is "02- Industrial Deafness" |
| C094 | Deafness Percentage | C094.3 | Error | The Deafness Percentage ({deafnessPercentage}) must be greater than or equal to Whole Person Impairment Percentage ({wholePersonImpairmentPercentage}) |
| C095 | Total Payments Estimated | C095.M | Error | Total Payments Estimated was not provided |
| C095 | Total Payments Estimated | C095.1 | Confirmation | Estimated Total Payments ({totalEstimatedPayments}) is less than the Actual Total Payments ({totalActualPayments}) |
| C095 | Total Payments Estimated | C095.2 | Confirmation | Estimated Total Payments ({TotalEstimatedPayments}) supplied is greater than the maximum allowed prescribed amount ({MaxTotalPaymentAmount}) |
| C096 | Total Payments Actual | C096.1 | Confirmation | Total Actual Payments ({TotalActualPayments}) supplied is greater than the maximum allowed prescribed amount ({MaxTotalPaymentAmount}) |
| C096 | Total Payments Actual | C096.M | Error | Total Payments Actual was not provided |
| C097 | Total Time Lost Estimated | C097.2 | Confirmation | Estimated Total Time Lost ({totalEstimatedTimeLost}) is less than the Actual Total Time Lost ({totalActualTimeLost}) |
| C097 | Total Time Lost Estimated | C097.3 | Confirmation | Work Status ({workStatus}) indicates Return to Work on Full or Partial hours, or Not Working due to Injury, but Total Estimated Time Lost was not provided |
| C097 | Total Time Lost Estimated | C097.M | Error | Total Estimated Time Lost was not provided |
| C098 | Total Time Lost Actual | C098.M | Error | Total Time Lost Actual was not provided |

**WorkCover WA**

*List of Validations Applied*

| Data Element No | Data Element Name | Rule No. | Confirmation/ Error | Error Message |
|---|---|---|---|---|
| C098 | Total Time Lost Actual | C098.1 | Confirmation | Work Status ({workStatus}) indicates Return to Work on Full or Partial hours, or Not Working due to Injury, but Total Actual Time Lost was not provided |
| C098 | Total Time Lost Actual | C098.3 | Confirmation | Total Actual Time Lost was provided but no Weekly Payment transactions have been received |
| C098 | Total Time Lost Actual | C098.4 | Confirmation | Actual Total Time Lost has been provided but extent of incapacity supplied ({incapacityCode)} indicates that there was no incapacity at any time |
| C098 | Total Time Lost Actual | C098.5 | Error | Actual Total Time Lost ({TotalActualTimeLost}) is greater than the number of calculated working hours since the Occurrence Date |
| C099 | Insurer Payment Id | C099.M | Error | Claim Payment must have the payment reference. Transaction Date ({transactionDate}) Amount ({paymentAmount}) |
| C099 | Insurer Payment Id | C099.1 | Error | Payment Reference ({paymentReference}) is associated with a different Claim ({otherClaimNumber}) |
| C100 | Payment Type Code | C100.M | Error | Payment Type Code was not provided |
| C100 | Payment Type Code | C100.2 | Confirmation | Permanent Impairment Payment provided but the Extent of Incapacity ({incapacityCode}) does not indicate permanent incapacity |
| C100 | Payment Type Code | C100.3 | Error | The Payment Type Code ({paymentTypeCode}) provided is invalid |
| C100 | Payment Type Code | C100.5 | Confirmation | Common Law Payments provided but the Extent of Incapacity ({incapacityCode}) does not indicate permanent incapacity |
| C100 | Payment Type Code | C100.6 | Confirmation | Redemption Payments provided but the Extent of Incapacity ({incapacityCode}) does not indicate permanent incapacity |
| C100 | Payment Type Code | C100.9 | Confirmation | A Common Law Payment has been provided but Whole Person Impairment Percentage ({WholePersonImpairmentPercentage}) is not 15% or more |
| C100 | Payment Type Code | C100.10 | Confirmation | Fatal Payments provided ({paymentTypeCode}) but the Extent of Incapacity ({incapacityCode}) is not "1 Death" |
| C100 | Payment Type Code | C100.13 | Confirmation | Extent of Incapacity indicates Death but a Redemption Payment has been provided |
| C100 | Payment Type Code | C100.15 | Confirmation | Extent of Incapacity indicates Death but a Permanent Impairment Payment has been provided |

# WorkCover WA

## *List of Validations Applied*

| Data Element No | Data Element Name | Rule No. | Confirmation/ Error | Error Message |
|---|---|---|---|---|
| C100 | Payment Type Code | C100.16 | Confirmation | Common Law Payment ({paymentAmount}) appears low |
| C100 | Payment Type Code | C100.17 | Confirmation | Common Law Payment ({paymentAmount}) is more than double the Common Law Provision ({commonLawProvision}) |
| C100 | Payment Type Code | C100.18 | Confirmation | Negotiated Settlement Payment value ({paymentAmount}) is lower than expected |
| C100 | Payment Type Code | C100.19 | Confirmation | The total amount of Weekly, Redemption, Permanent Impairment and Fatal Payments ({TotalRemunerationPayments}) cannot exceed the Prescribed Amount ({PrescribedAmount}) |
| C100 | Payment Type Code | C100.20 | Confirmation | The total amount Medical, Hospital, Other Treatment and Allied Health Payments ({TotalMedPayments}) cannot exceed the Maximum Scheduled Prescribed Medical Amount ({MaxTotalMedPaymentAmount}) |
| C100 | Payment Type Code | C100.21 | Confirmation | The total amount Vocational Rehabilitation Payments ({TotalVocRehabPayments}) cannot exceed the Prescribed Amount ({MaxTotalVocRehabPaymentAmount}) |
| C101 | Weekly Payment Code | C101.2 | Error | Weekly Payment Code ({weeklyPaymentAdjustmentCode}) provided is not valid with Payment Type Code ({paymentTypeCode}) |
| C102 | Time Lost | C102.2 | Error | Time Lost was not provided for a weekly payment |
| C102 | Time Lost | C102.3 | Confirmation | Weekly Payment Type Code provided as "03 - Other" but Time Lost ({claimPaymentTimeLost}) has been provided |
| C102 | Time Lost | C102.6 | Confirmation | Payment is not a Weekly Payment ({paymentTypeCode}) but Time Lost ({claimPaymentTimeLost}) has been provided |
| C103 | Date Paid From | C103.2 | Error | The Date Paid From ({paidFromDate}) provided is prior to Claim Date of Occurrence ({dateofOccurrence}) |
| C103 | Date Paid From | C103.3 | Error | Date Paid From was not provided for a weekly payment |
| C103 | Date Paid From | C103.4 | Error | Date Paid From was provided for Payment Type Code ({paymentTypeCode}) |
| C103 | Date Paid From | C103.5 | Error | Date Paid From ({PaidFromDate}) cannot be greater than 12 months in the future |
| C104 | Date Paid To | C104.2 | Error | Date Paid To was not provided for a weekly payment |

# WorkCover WA

## *List of Validations Applied*

| Data Element No | Data Element Name | Rule No. | Confirmation/ Error | Error Message |
|---|---|---|---|---|
| C104 | Date Paid To | C104.3 | Error | Date Paid To ({paidToDate}) is prior to Date Paid From ({paidFromDate}) |
| C104 | Date Paid To | C104.4 | Error | The Date Paid To ({paidToDate}) is prior to Claim Date of Occurrence ({dateOfOccurrence}) |
| C104 | Date Paid To | C104.5 | Error | For payment type code ({paymentTypeCode}), Date Paid To must be Blank |
| C104 | Date Paid To | C104.6 | Error | Date Paid To ({PaidToDate}) cannot be greater than 12 months in the future |
| C105 | Payment Amount | C105.M | Error | Claim Payment Amount was not provided |
| C105 | Payment Amount | C105.4 | Confirmation | Payment Amount ({PaymentAmount}) varies significantly from the Scheduled Fee associated with this Service Code ({ServiceCode}) relating to Service Date ({serviceDate}) |
| C106 | Transaction Date | C106.M | Error | Claim Payment does not have a transaction date |
| C106 | Transaction Date | C106.3 | Error | The Transaction Date ({transactionDate}) is prior to the Claim Date of Occurrence ({occurrenceDate}) |
| C106 | Transaction Date | C106.4 | Error | The Transaction Date {TransactionDate} cannot be in the future |
| C107 | Transaction Type Code | C107.M | Error | Transaction Type Code was not provided |
| C107 | Transaction Type Code | C107.2 | Error | The Transaction Type Code ({transactionTypeCode}) provided is invalid |
| C110 | Payment Source | C110.M | Error | The Payment Source Code was not provided |
| C110 | Payment Source | C110.3 | Error | The Payment Source ({paymentSourceCode}) provided is invalid |
| C111 | Provider Number | C111.1 | Error | Service Code ({serviceCode}), Service Date ({serviceDate}) and Provider Number ({providerNumber}) must either all be supplied or all be blank for Investigation Expense Payment |
| C111 | Provider Number | C111.2 | Error | Provider Number was not provided for Payment Types "05", "07", "08" and "09". Payment Type Code provided is ({paymentTypeCode}) |
| C111 | Provider Number | C111.3 | Error | Provider Number has been supplied for a Payment Type Code other than 05, 07, 08, 09 or 16 ({paymentTypeCode}) |

**WorkCover WA**

*List of Validations Applied*

| Data Element No | Data Element Name | Rule No. | Confirmation/ Error | Error Message |
|---|---|---|---|---|
| C111 | Provider Number | C111.4 | Error | Provider Number ({ProviderNumber}) relating to Service Date ({ServiceDate}) is not recorded in the WorkCover Database |
| C112 | Service Code | C112.2 | Error | Service Code was not provided for Payment Type Code '05', '07', '08' or '09' relating to Service Date ({ServiceDate}). Payment Type Code provided is ({PaymentTypeCode}) |
| C112 | Service Code | C112.3 | Error | Service Code ({ServiceCode}) provided for a Payment Type Code other than '05', '07', '08', '09' or '16' relating to Service Date ({ServiceDate}). Payment Type Code provided is ({PaymentTypeCode}) |
| C112 | Service Code | C112.4 | Error | Service Code ({ServiceCode}) relating to Service Date ({ServiceDate}) is not recorded in the WorkCover Database |
| C112 | Service Code | C112.5 | Confirmation | Service Type ({ServiceCode}) relating to Service Date ({ServiceDate}) is not common for this Provider Type ({ProviderNumber}). Please check codes used or confirm the type of service provided |
| C112 | Service Code | C112.6 | Confirmation | Default Service Code ({ServiceCode}) relating to Service Date ({ServiceDate}) used. Please supply further details of the type of service provided |
| C112 | Service Code | C112.8 | Error | Service Code ({ServiceCode}) relating to Service Date ({ServiceDate}) must be of type 'AS' or 'RT' if supplied for a Investigation Expense Payment |
| C113 | Service Date | C113.1 | Error | Service Date ({serviceDate}) provided for a Payment Type Code other than '05', '07', '08', '09' or '16'. Payment Type Code provided is ({paymentTypeCode}) |
| C113 | Service Date | C113.2 | Error | Service Date was not provided for Payment Type Code '05', '07', '08' and '09'. Payment Type Code provided is ({paymentTypeCode}) |
| C113 | Service Date | C113.3 | Confirmation | Service Date ({serviceDate}) outside the valid date range of the Service Code (serviceCode}) provided |
| C113 | Service Date | C113.6 | Error | Service Date ({service Date}) is prior to the Date of Occurrence ({occurrenceDate}) for the Claim |
| C113 | Service Date | C113.7 | Error | Date Claim Finalised ({claimFinalisedDate}) is prior to the Service Date ({serviceDate}) |
| C113 | Service Date | C113.8 | Confirmation | Transaction Date ({transactionDate}) for the Payment is prior to Service Date ({serviceDate}) |

# WorkCover WA

## *List of Validations Applied*

| Data Element No | Data Element Name | Rule No. | Confirmation/ Error | Error Message |
|---|---|---|---|---|
| C113 | Service Date | C113.9 | Error | Service Date ({ServiceDate}) cannot be greater than 12 months in the future |
| C124 | Worker Dependants | C124.2 | Confirmation | Claim is stated as Fatal, please confirm that there are no dependants for the Claimant ({givenNames}) ({Surname}) |
| C127 | WorkCover Number | C127.M | Error | WorkCover Number must be provided |
| C129 | PRC 2006 | C129.1 | Error | The PRC2006 ({ANZSIC06Code}) Code is Invalid |
| C129 | PRC 2006 | C129.3 | Error | Claim is linked to a policy/coverage with an effective date of "01-Jul-2013" or later but ANZSIC 2006 code was not provided |
| C130 | Work Status Update ID | C130.1 | Error | The Work Status Update ID ({workStatusUpdateReference}) already exists for another Claim ({anotherClaimNumber}) |
| C131 | Medical Certificate ID | C131.1 | Error | The Medical Certificate ID ({medicalCertificateReference}) already exists for another Claim ({anotherClaimNumber}) |
| C500 (a) | Claims Coding | C500.1 | Error | Claim Form missing |
| C500 (a) | Claims Coding | C500.2 | Error | Claims Coding - missing information (as described) |
| C800 (a) | Claims Data Quality | C800.1 | Error | Claims Data Quality - missing information (as described) |

(a) These validations are raised during post-processing Claims coding or data quality checking.  They are resolved by the supply of the requested Form, or information (via a conversation with WorkCover WA), and are then clerically dismissed.

# APPENDIX 5

## *List of Abbreviations Used*

**WorkCover WA**

*List of Abbreviations Used*

| Abbreviation | Meaning |
|---|---|
| INO | Insurer Online – WorkCover WA's online 'portal' for authorised clients |
| NDS | National Data Set |
| NIDS | National Insurer Data Specification – the basis of this document |
| SIMS | Scheme Information Management System – used to process and store NIDS data |
| The Act | Workers' Compensation and Injury Management Act 1981 |
| XML | Extensible Markup Language |

# APPENDIX 6

*Unresolved Issues Downloadable File – XML Schema*

**WorkCover WA**

*Unresolved Issues Downloadable File – XML Schema*

```xml
<?xml version="1.0" encoding="Windows-1252"?>
<xs:schema attributeFormDefault="unqualified"
elementFormDefault="qualified" xmlns:xs="http://www.w3.org/2001/XMLSchema">
<xs:element name="SubmissionResponses">
<xs:complexType>
<xs:sequence>
<xs:element name="PolicyResponses" />
<xs:element name="CoverageResponses" />
<xs:element name="ClaimResponses">
<xs:complexType>
<xs:sequence>
<xs:element maxOccurs="unbounded" name="ClaimResponse">
<xs:complexType>
<xs:sequence>
<xs:element name="ClaimNumber" type="xs:unsignedLong" />
<xs:element name="SubmissionDetails">
<xs:complexType>
<xs:sequence>
<xs:element name="SubmissionId" type="xs:string" />
<xs:element name="SubmissionDateTime" type="xs:dateTime" />
<xs:element name="FileName" type="xs:string" />
</xs:sequence>
</xs:complexType>
</xs:element>
<xs:element name="Errors">
<xs:complexType>
<xs:sequence>
<xs:element name="Error">
<xs:complexType>
<xs:sequence>
<xs:element name="ErrorCode" type="xs:string" />
<xs:element name="ErrorDescription" type="xs:string" />
<xs:element name="Details" />
</xs:sequence>
<xs:attribute name="TeamNumber" type="xs:string" use="required" />
<xs:attribute name="IssueId" type="xs:unsignedInt" use="required" />
<xs:attribute name="Confirmation" type="xs:boolean" use="required" />
</xs:complexType>
</xs:element>
</xs:sequence>
</xs:complexType>
</xs:element>
</xs:sequence>
</xs:complexType>
</xs:element>
</xs:sequence>
</xs:complexType>
</xs:element>
<xs:element name="PaymentResponses">
<xs:complexType>
<xs:sequence>
<xs:element maxOccurs="unbounded" name="PaymentResponse">
<xs:complexType>
<xs:sequence>
<xs:element name="PaymentId" type="xs:unsignedInt" />
<xs:element name="SubmissionDetails">
```

**WorkCover WA**

*Unresolved Issues Downloadable File – XML Schema*

```xml
<xs:complexType>
<xs:sequence>
<xs:element name="SubmissionId" type="xs:string" />
<xs:element name="SubmissionDateTime" type="xs:dateTime" />
<xs:element name="FileName" type="xs:string" />
</xs:sequence>
</xs:complexType>
</xs:element>
<xs:element name="Errors">
<xs:complexType>
<xs:sequence>
<xs:element name="Error">
<xs:complexType>
<xs:sequence>
<xs:element name="ErrorCode" type="xs:string" />
<xs:element name="ErrorDescription" type="xs:string" />
<xs:element name="Details" />
</xs:sequence>
<xs:attribute name="TeamNumber" type="xs:string" use="required" />
<xs:attribute name="IssueId" type="xs:unsignedInt" use="required" />
<xs:attribute name="Confirmation" type="xs:boolean" use="optional" />
</xs:complexType>
</xs:element>
</xs:sequence>
</xs:complexType>
</xs:element>
</xs:sequence>
</xs:complexType>
</xs:element>
</xs:sequence>
</xs:complexType>
</xs:element>
<xs:element name="FileResponses">
<xs:complexType>
<xs:sequence>
<xs:element name="FileResponse">
<xs:complexType>
<xs:sequence>
<xs:element name="SubmissionDetails">
<xs:complexType>
<xs:sequence>
<xs:element name="SubmissionId" type="xs:string" />
<xs:element name="SubmissionDateTime" type="xs:dateTime" />
<xs:element name="FileName" type="xs:string" />
</xs:sequence>
</xs:complexType>
</xs:element>
<xs:element name="Errors">
<xs:complexType>
<xs:sequence>
<xs:element name="Error">
<xs:complexType>
<xs:sequence>
<xs:element name="ErrorCode" type="xs:string" />
<xs:element name="ErrorDescription" type="xs:string" />
<xs:element name="Details" type="xs:string" />
</xs:sequence>
<xs:attribute name="TeamNumber" type="xs:string" use="required" />
```

**WorkCover WA**

*Unresolved Issues Downloadable File – XML Schema*

```xml
<xs:attribute name="IssueId" type="xs:unsignedInt" use="required" />
</xs:complexType>
</xs:element>
</xs:sequence>
</xs:complexType>
</xs:element>
</xs:sequence>
</xs:complexType>
</xs:element>
</xs:sequence>
</xs:complexType>
</xs:element>
</xs:sequence>
</xs:complexType>
</xs:element>
</xs:schema>
```