

Acquired Claims

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A claim is considered to be acquired when a new Claim Administrator has taken over claims from a prior Claim Administrator. The new Claim Administrator may receive these claims in an open or closed status and may be required to file the proper acquiring FROI transaction.

Codes To Know

FROI AQ (Acquired Claim): Transaction submitted by the new Claim Administrator to show acquisition of a claim that was previously established via EDI by the prior Claim Administrator. Requires minimal data to be sent.

FROI AU (Acquired Claim/Unallocated): Transaction submitted by the new Claim Administrator to show acquisition of a claim not previously established via EDI by a prior Claim Administrator OR a transaction submitted by the new Claim Administrator when their FROI AQ transaction rejected for no claim match on database. This is the equivalent to a FROI 00.

FROI 02 (Change): Transaction can be submitted by the new Claim Administrator in lieu of a FROI AQ/AU when the claim stays in the original claims system or when the prior Claim Administrator FEIN is listed on the electronic Trading Partner Profile of the new Trading Partner due to a takeover. These two Claim Administrators will be grouped together for EDI purposes.

SROI AP (Acquired Payment): Transaction sent by the acquiring Claim Administrator to report their first indemnity payment.

SROI PY (Payment Report): Transaction sent when the acquiring Claim Administrator has paid only medical expenses and the total now exceeds \$1,000 over the lifetime of the claim.

SROI AC (Acquisition/Indemnity Ceased): Transaction sent by the acquiring Claim Administrator, when Acquisition Status Code B is sent on the accepted AQ or AU acknowledgment, to substitute for transaction(s) not accepted from a prior Claim Administrator and used to indicate a claim suspension and to indicate indemnity benefits have ended.

DN0423 Acquired Claim Last Known Indemnity Through Date: Required on the AC transaction to provide the last known date through for which indemnity benefits were paid by the prior claim administrator

OBTC 430 (Total Unallocated Prior Indemnity Benefits): The Other Benefit Type Code used when reporting the sum of indemnity benefits paid to date by the prior Claim Administrator.

OBTC 440 (Total Unallocated Prior Medical Benefits): The Other Benefit Type Code used when reporting the sum of medical benefits paid to date by the prior Claim Administrator.

	When To File
FROI AQ	10 calendar days from the effective date of acquisition
FROI AU	30 calendar days from the effective date of acquisition or 10 calendar days from the date of FROI AQ rejection
FROI 02	10 calendar days from the effective date of acquisition
SROI AP	10 calendar days upon payment
SROI PY	10 calendar days upon payment
SROI AC	10 calendar days from AQ/AU acknowledgment with returned Acquisition Status Code B



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Note: If the claim is received "closed" where no activity has occurred in the 5 years prior to acquiring the claim, an acquisition transaction is not required unless the claim becomes active again.

- An active claim is defined as:
 - There is an open award
 - Payments are currently being made for any benefit
 - There is a current denial/dispute
 - o Claim for Benefits filed by the Claimant pending action
 - o Outstanding request for EDI submission
 - o Any inactive claim where any of the above occur

*If there was a full and final settlement issued and an accepted PY was filed by the prior claim admin reporting the payments for that full and final settlement, then that JCN would not require an AQ at the time of the acquisition, even if it was active within the last 5 years. Should it later become active, the AQ would be required.

Challenges

- The new Claim Administrator is not provided with the assigned Jurisdiction Claim Number.
 - Email the Commission's EDI Support Team or call the Commission's Customer Contact Center to obtain the assigned JCN.

• Acquiring a claim at the same time Match Data details need to be updated.

 A claim must first be acquired reflecting Match Data details as submitted by the prior Claim Administrator before the current Claim Administrator can update any additional information. When the acquisition transaction has been accepted, the FROI 02 transaction(s) can be submitted to update the Match Data field(s).

• Reporting benefits

- The new Claim Administrator is not required to report:
 - Any benefits paid until they have either paid indemnity or medical expenses, unless it is a medical only claim and the total paid over the lifetime of the claim has not reached the \$1,000 threshold.
 - The AP/EP or PY should be filed at this time depending on benefits paid.
 - Benefits paid by the prior Claim Administrator until the new Claim Administrator has made payments and filed an initial SROI.
 - If known, the benefits paid by the prior Claim Administrator should be reported under the Other Benefits Segment as code 430 and 440.
- Exception: Acquisition Status Code B is returned on the AQ/AU acknowledgement and the AC is required to show no ongoing payments