**1. Introductions:**

| **NAME** | **AFFILIATION** |
| --- | --- |
| Amaya Spenser | University of Alaska |
| Amy B. Garza | Kenai Peninsula Borough & School District  |
| April Burns | Amerisafe |
| Aurora Krueger | Sentry Insurance a Mutual Company |
| Barbara Smith  | Liberty Mutual Group |
| Beni Labrada | Alaska Municipal League Joint Insurance Association |
| Beth Mow | State of Alaska |
| Brad Thompson | Alaska Public Entity Insurance |
| Brenda Vannoy | University of Alaska  |
| Cheryl S. Keyes  | Sedgwick CMS |
| Christy Hickman | Amerisafe |
| Cindy Hall | Aon |
| Danielle Nelson | University of Alaska  |
| Denise M. Allain | FirstComp Underwriters Group, Inc. |
| Edith Manzo | Broadspire Services |
| Gordon Debs | Gallagher Bassett Services Inc  |
| Johanna Grasso | Alaska Municipal League Joint Insurance Association |
| Julie Riddle | The Hartford Financial Services Group, Inc. |
| Kelsie Pfister | Broadspire Services |
| Kimberley Dean | Alaska Timber Insurance Exchange  |
| Laura Kurt | Alaska Dept. of Labor and Workforce Development |
| Laurel J. Bray | Alaska Timber Insurance Exchange  |
| Leisha Reynolds | ESIS, Inc. |
| Linda Hawthorn | Amerisafe |
| Lori McEahern | ACE Group |
| Lori Raby  | Mitchell International |
| Marcia Morgan | CorVel Enterprise Comp |
| Marcie Marzofka | Sentry Insurance a Mutual Company |
| Margaret Brockhaus | Alaska Division of Workers’ Compensation |
| Mike Monagle | Alaska Division of Workers’ Compensation |
| Monica Butler | Alaska Division of Workers’ Compensation |
| Nickee Glackin | CorVel Enterprise Comp  |
| Nikki Mrozinski | Sentry Insurance a Mutual Company |
| Pamla J. Scott | Alaska Timber Insurance Exchange  |
| Patricia A Mercurio | Travelers Indemnity Company  |
| Patricia Wilson | University of Alaska  |
| Patti Mackay | ESIS, Inc. |
| Rosalyn Soik | Sentry Insurance, A Mutual Company |
| Sandy Fazio | Alaska Municipal League Joint Insurance Association |
| Sara Zaccari |  |
| Scott Schirl | Liberty Mutual Group |
| Seanne Popp | SeaBright Insurance Company  |
| Sue Richardson | The Hartford Financial Services Group, Inc. |
| Susan Daniels | Northern Adjusters, Inc. |
| Susan Kosinski | ARECA Insurance Exchange  |
| Tina Queen     | Broadspire Services  |
| Tommie S. Savina | Umialik Insurance Company  |
| Tricia R. Bell | Northern Adjusters, Inc. |

**2. Review Draft Forms:**

1. **Legend for EDI Data Elements:**
	* Mandatory (Red Font)
	* Mandatory Conditional (Purple Font)
	* Expected (Turquoise Font)
	* If Available/If Applicable (Green Font)
	* *Not on Alaska’s Element Requirement Table* (Black Italic Font)
2. **07-6100 - Employee Report of Occupational Injury or Illness to Employer**
	* Employer shall keep a record with respect to an injury / illness to an employee
	* See AS 23.30.065 (Employer’s record of injuries) for further detail
3. **07-6101 – Employer Report of Occupational Injury or Illness to Division of Workers’ Compensation**
	* Change block 3 to NAICS Code (DN0025)
	* Add Employer Signature, Title and Date blocks
	* Division will notify the Injured Worker, Employer and Claims Administrator when the EDI Report is received
	* Division will update the Event Table(s) to reflect this business process
4. **07-6104b – Compensation Report**
	* Update language in signature block under block 70
	* Division will notify Injured Worker when this report is received
	* Division will update the Event Table(s) to reflect this business process
5. **07-6105 – Controversion Notice**
	* This form is still under revision and cross-walked to EDI DNs
	* Division will distribute form when ready for review
	* In addition to electronic reporting, Trading Partners will need to send the paper Controversion form to the Injured Worker
	* Division will update the Event Table(s) to reflect this business process

**3. Legacy SROI Reporting Processes and Alaska Statute Requirements:**

1. **Paper - need to continue for Legacy claims**
	* Continue paper reports in addition to the limited number of SROI reports accepted on Legacy claims
	* The accepted SROI reports on Legacy claims do NOT provide the detail needed when compensation has begun, increased, decreased, suspended, terminated, resumed, or change in type
	* See AS 23.30.155 (Payment of compensation) for further detail
	* A Legacy claim is an open claim, including indemnity and medical, where the Date the Claim Administrator Had Knowledge of Injury (DN0041) is less than the EDI Mandate Date of July 22, 2013 which includes claims where a paper report was sent that received a Jurisdiction Claim Number (JCN)
2. **Investigating as an option using the SROI MTC UR – would expect a one-time filing for Legacy claims, followed by multiple Periodic MTC MN (Monthly)**
	* At this time these SROI reports on Legacy claims will NOT provide the detail needed when compensation has begun, increased, decreased, suspended, terminated, resumed, or change in type
3. **Considering converting all active Legacy claims after a 2-5 year period**
	* Our thought is that the Legacy claim level with a Trading Partner will be significantly reduced thus easier to convert to EDI by gathering the needed DN information for the claim

**4. Notification to Injured Workers, Insurers, and Claims Administrators under the EDI Process:**

* 1. **First Report of Injury (FROI) is received by the Division of Workers’ Compensation**
	+ The Division will notify the Injured Worker. Employer and Claims Administrator
	+ A FROI equals the filing of Form 07-6101 or FROI MTC 00-Original, 01-Cancel, 04-Denial, AQ-Acquired Claim, or AU-Acquired Unallocated
	1. **Subsequent Report of Injury (SROI) is received by the Division of Workers’ Compensation that impacts the payment of compensation to the Injured Worker**
	+ The Division of Workers’ Compensation will notify the Injured Worker and Claims Administrator
	+ A SROI in this instance equals the filing of Form 07-6104b or SROI MTC AP-Acquired Payment, CA-Change in Benefit Amount, CB-Change in Benefit Type, EP-Employer Paid, ER-Employer Reinstatement, IP-Initial Payment, RB-Reinstatement of Benefits, RE-Reduced Earnings, or Sx-Suspension
	1. **SROI Denial or Partial Denial is received by the Division of Workers’ Compensation**
	+ The Trading Partner will notify the Injured Worker via Form 07-6105

5. **Answer Submitted Questions Regarding Implementation and Requirements**

1. See the May 9, 2013 Question and Answer Session Questions