

Revised POC Edit Matrix

	Element #	Element Name	Mandatory Field Not Present	Must be Numeric (0 - 9)	Must be a Valid Date (CCYYMMDD)	Must be A-Z, 0-9, or spaces	Must be a Valid Time (HHMMSS)	No Match on Database	All Digits Cannot Be the Same	Must be <= Current Date	Not Statutorily Valid	Duplicate Transaction/Transaction	Code ID Invalid	Invalid Event Sequence Relationship	Invalid Data Sequence Relationship	Corresponding Report Data Not Found	Invalid Record Count	Must be >= Policy Effective Date	Must be <= Policy Expiration Date	Transaction Not Approved For Production	
			001	028	029	030	031	039	040	041	042	057	058	063	064	065	066	067	068	101	
Insured Record Transaction	0000	Entire Transaction										TR		TR	TR	TR				TR	
	0001	Transaction Set ID	TR										TR								
	0107	Record Sequence Number	TR	TR								TR									
	0108	Date Processed			TR					TR											
	0109	Time Processed					TR														
	0110	Acknowledgement Trans. Set ID																			
	0111	Application Acknowl. Code																			
	0112	Request Code																			
	0113	Free Form Text																			
	0114	Number of Errors																			
	0115	Element Number																			
	0116	Error Element Number																			
	0098	Sender ID	TR						TR												
	0099	Receiver ID	TR						TR												
	0100	Date Transmission Sent	TR		TR						TR										
0101	Time Transmission Sent	TR				TR															
0102	Original Transmission Date																				
0103	Original Transmission Time																				
0104	Test/Prod Indicator	TR						TR													
0105	Interchange Version ID	TR						TR													
0106	Detail Record Count	TR	TR														TR				
0300	Transaction Set Purpose Code																				
0302	Jurisdiction Designee Received Date	TR		TR						TR											
0002	Transaction Set Type Code																				
0303	Transaction Reason Code																				
0304	Transaction Set Type Effective Date	TR		TR													TR				
Insurer	0006	Insurer FEIN	TR	TR				TR					TR								
	0007	Insurer Name	TR																		
	0305	Issuing Office Name																			
	0306	Issuing Office Address Line 1																			
	0307	Issuing Office Address Line 2																			
	0308	Issuing Office City																			
	0309	Issuing Office State																			
	0310	Issuing Office Postal Code																			
	Agency	0311	Issuing Agency Name																		
	0312	Issuing Agency City																			
0313	Issuing Agency State																				
Insured	0314	Insured FEIN	TR	TR				TR	TR				TR								
	0017	Insured Name	TR																		
	0315	Insured Address Line 1	TR*																		
	0316	Insured Address Line 2																			
	0317	Insured City	TR																		
	0318	Insured State	TR											TR							
	0319	Insured Postal Code	TR											TR							
	0320	Insured Telephone Number																			
	0321	Business Market																			
	0322	Wrap-up Indicator																			
0004	Jurisdiction	TR																			
0333	Employee Leasing Policy Identification	TR								TR			TR								

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	Error Message	001	028	029	030	031	039	040	041	042	057	058	063	064	065	066	067	068	101
Element #	Element Name																		
Policy	0323 Insured Legal Status	TR										TR							
	0028 Policy Number	TR			TR														
	0029 Policy Effective Date	TR		TR															TR
	0030 Policy Expiration Date																		
	0324 Prior Policy Number	TR			TR					TR									
	0325 Assignment Date																		
Jurisdiction	0004 Jurisdiction	TR											TR						
	0326 Governing Class	TR	TR																
Employer Count	0327 Total Payroll																		
	0328 Number of Employers	TR	TR													TR			
Employer Segment	0001 Transaction Set ID	TR											TR						
	0107 Record Sequence Number	TR	TR																
	0016 Employer FEIN	TR	TR					TR					TR						
	0329 Employer UI Code																		
	0018 Employer Name	TR																	
	0019 Employer Address Line 1	TR*																	
	0020 Employer Address Line 2																		
	0021 Employer City	TR																	
	0022 Employer State	TR											TR						
	0023 Employer Postal Code	TR											TR						
	0025 Industry Code																		
	0330 Number of Employees																		
	0331 Employer Notification Date																		
	NOTES:	TR = Transaction Rejected																	
		TR* = Transaction Rejected if BOTH Address Lines 1 and 2 are blank																	