



Wisconsin Compensation Rating Bureau

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POLICY ELECTRONIC REPORTING INSTRUCTIONS

The following are Wisconsin requirements for electronic policy submissions. Before filing your first test submission, please contact the WCRB for scheduling.

Wisconsin accepts Transaction Codes:

- “01” New Policy
- “02” Renewal
- “03” Endorsements
- “04” Annual Rerate Endorsement
- “05” Cancellation/Reinstatement
- “06” Policy Replacement due to Key Field Change
- “08” Policy Replacement due to Rating Change
- “10” Policy Replacement due to Non-rating Change
- “14” Policy Replacement due to Miscellaneous Change/Non Key Field Change
- “15” Policy Replacement due to Add/Delete State
- “16” Coverage Notice

WCRB follows the standard reporting guidelines as defined in the [WCIO Workers Compensation Data Specifications Manual-WCPOLS section](#).

ELECTRONIC SUBMISSION TRACKING

This product is located in the Member Products section of www.wcrb.org and provides members the ability to search for and track the test status of electronically reported WCPOLS data for their group.

TESTING AND REQUIREMENTS

Insurers must submit both hard copy and electronic versions of the same policy transactions while in test. During testing, data is entered into a test database, and the hard copy forms are compared to the electronic version for accuracy. The hard copy information submitted for test is not used by the WCRB for production. These documents must be clearly labeled as test data.

A mixture of production data and non-production data is allowed for testing purposes. Data must be clearly labeled whenever the information was created solely for testing purposes.

In order to begin reporting production data electronically, the final result must contain:

- Submitted transaction information with a limited number of errors and **NO** submission rejection errors
- No discrepancies between the electronic transactions and the corresponding hard copy

Instructions for the various types of transactions are recorded in the remainder of this document. Please make sure to include the requested information or inform Wisconsin of the reason this information is not being included.

The WCRB will respond following the review of each test submission. This response will contain specific things that need to be addressed prior to submitting your next test file. Please return the response along with detail of your action for each item, and include the policy number of the example showing the change. We will not process your next test submission unless we receive this information.

Important Note:

Carriers must be approved for transaction “01” and “02” in Wisconsin before the WCRB will accept a test submission of Transaction “03”, “04”, “05”, “06”, “08”, “10”, “14”, “15”, and “16”.

Transaction Codes “01” and “02”

Insurers will be approved for electronic submission for Transaction Codes “01” and “02” when they have completed tests that include the following:

Additional locations	Short term policies
Policies with increased limits	Named insured at least 60 bytes long
Multi-state policies	Policies with WCPAP factor applied using stat code 9046
Long term and 3 year policies	Name Record with additional named insureds where multiple legal statuses are required
Experience Rated policies (both interstate and intrastate)	Policies providing coverage for Employers Leasing Company (ELC) and/or Client Company (CC)
Policies with a foreign address	
3 year fixed rated policies	Policies with non-rate based codes

Note:

If your company does not write any of the types of policies listed above, please notify the WCRB in writing and that will be taken into consideration during testing.

Please consult with the WCRB regarding the number of transactions that will be required.

Endorsement Identification Information

At least one Endorsement ID Record (Record Type 07) is required for each policy and should include all endorsement numbers associated and issued with a transaction. For Wisconsin, one record must include the Wisconsin Law Endorsement (WC480601C), Wisconsin Cancellation and Nonrenewal Endorsement (WC480606B), Terrorism Risk Insurance Program Reauthorization Disclosure Act (WC000422B), Catastrophe (Other than Certified Acts of Terrorism) Premium Endorsement (WC000421D) and Audit Noncompliance Endorsement (WC000424).

Any endorsements listed in Record Type 07, where variable information is required, must also be included. Effective 01/01/10, once approval has been granted, failure to receive endorsement records electronically will result in Notice to Carriers. In addition, unique carrier form numbers may not be reported in the Endorsement Identification Record per [Circular Letter 538](#).

Name Formation

Wisconsin prefers that Insurers use the following guidelines when reporting names:

- Do not include any special characters
- Omit the word “THE” if it is the first word in the name field
- If the name is a personal name, report last name first

String Names and Addresses

String names and addresses are a major problem for WCRB. As the House of Records for the State of Wisconsin, we have a requirement to produce name and address labels. String names are acceptable, but not preferred. In addition, name fields should only contain names, and address fields should only contain addresses; therefore, please do not include any other information in these fields.

Legal Nature of Insured Code

The codes accepted to report the legal nature of employers on a policy in the [WCIO Workers Compensation Data Specifications Manual—WCPOLS Section](#), are not all applicable in the State of Wisconsin. When multiple entities have operations in Wisconsin, the Legal Nature of the Insured reported in the Header Record should reflect the Legal Nature for all entities. The applicability of each code is listed in the profile below.

Code	Description	Wisconsin Applicability?
01	Individual	Yes
02	Partnership	Yes
03	Corporation	Yes
04	Association, Labor Union, Religious Organization	Yes
05	Limited Partnership	Yes
06	Joint Venture	Yes
07	Common Ownership	No
08	Multiple Status	No
09	Joint Employers	No
10	Limited Liability Company	Yes
11	Trust or Estate	Yes
12	Executor or Trustee	No
13	Limited Liability Partnership	Yes
14	Governmental Entity	Yes
99	Other (Report text description in Positions 250-269)	Yes

Note:

When Code 99—Other—is used to report the legal status of employers on a policy, the Text for Other Legal Status field (Record Type 01, position 250-269) must be completed. Due to the number of allowable bytes, recognizable legal nature abbreviations are allowed. Neither punctuation or “and/&” are required. Effective 01/01/10, WCRB abbreviations must be used per [Circular Letter 538](#).

Transaction Code “03”

Insurers will be approved for electronic submission of production records of Transaction Code “03” when they have completed one successful test that includes the following:

- Examples of each of the following records submitted with the test data
- Additional Record types not listed in the table below may be submitted for testing, but are not required

Number of Transactions	Record Type Code	Endorsement Name
1	10	Experience Rating Mod Change
1	11	Rate Change
1	13	Policy Period
1	19	Longshore and Harbor Workers' Compensation Act Coverage
1	25	Designated Workplaces Exclusion Endorsement
1	29	Voluntary Compensation and Employers Liability Coverage
1	36	Waiver of Our Right to Recover from Others
1	37	Sole Proprietors, Partners, Officers, and Others Coverage
1	38	Partners, Officers, and Others Exclusion
1	44	Audit Noncompliance Endorsement
2	84	Policy Information Page State Premium Change Record Report changes to State Premium Record
2	85	Policy Information Page Supplemental Data Element(s) Change Endorsement Record Report various types of policy information changes
2	86	Policy Information Page Class and/or Rate Change and Other Endorsement Record Report changes to class and rate changes
2	87	Policy Information Page Data Element(s) Change Endorsement Record Report various types of policy information changes
2	88	Policy Information Page Name Change Report 1 with a single name and 1 with multiple names
2	89	Policy Information Page Address Change Report 1 with a single address and 1 with multiple addresses

Note:

If your company does not use these record types, please notify the WCRB in writing and that will be taken into consideration during testing. If at a later date you want to use these record types, please let us know.

Transaction Code “04”

Insurers will be approved for electronic submission of production records of Transaction Code “04” when they have one successful test that includes one or two examples of this type of transaction.

Transaction Code “05”

Insurers will be approved for electronic submission of production records of Transaction Code “05” when they have one successful test that includes the following:

- Cancellations
- Nonrenewals
- Reinstatements
- At least one policy that has multiple cancellation/reinstatement/nonrenewal records
- At least one cancellation effective on the expiration date of the policy

Note:

Please consult with the WCRB regarding the number of transactions that are required.

For testing purposes, hard copy forms 0062 (Wisconsin Notice of Termination) and form 0062A (Wisconsin Notice of Reinstatement) should be sent in lieu of Insurer company forms. Copies of these forms are located in the Forms section of this Web site.

Cancellation Reason Mapping

Because the code description wording in WCPOLS is slightly different from our hard copy form, we have included reason mapping tables.

Cancellation ID Code 1—Cancellation

Cancellations are Insurer or Employer initiated and can be effective at any time including the expiration date of the policy.

Electronic Reason Code	Hard Copy Description
01	Out of Business/Sold (see note below)
02	No WI Employees/Operations
03	Insured’s Request
05	Non-Payment of Premium
07	Rewritten
08	Out of Business/Sold (see note below)
09	Coverage Placed Elsewhere
13	Misrepresentation/Fraud (see note below)
14	Corporate Officers Non-Election
15	Substantial Change in Risk
16	Failure to Comply with Terms and Conditions of Policy
18	Participation in Wrap-up Complete
19	Underwriting Reasons (May only be used for new business not in effect for more than 60
21	Misrepresentation/Fraud (see note below)
22	Employee Leasing Agreement Terminated

Note:

Electronic Reason Codes 01 & 08 and Codes 13 & 21 may be used interchangeably in Wisconsin.

Cancellation ID Code 3—Nonrenewal

A nonrenewal in Wisconsin is an Insurer-initiated transaction that must be effective on the expiration date of the policy and received at least 60 days prior to the expiration date of the policy.

Any Reason for Cancellation Code that is valid in Wisconsin will be accepted as a reason for nonrenewal. Reason for Cancellation Code '00' will also be accepted and this is preferred.

Transaction Code “06”

Insurers will be approved for electronic submission of production records of Transaction Code “06” when they have one successful test that includes three (3) Transaction Code “06”s.

Transaction Codes “08”, “10”, “14”, and “15”

Insurers will be approved for electronic submission for Transaction Codes “08”, “10”, “14”, and “15” when they have completed a test which includes at least one example of each of the following:

Note:

At least 75% of the change transactions submitted for testing must include changes affecting Wisconsin data. When submitting change transactions, the corresponding hard copy must clearly identify the change that is being made and the order in which it should be processed.

Please consult with the WCRB regarding the number of transactions that are required.

- A change transaction with multiple State Premium Records due to Experience Modification Effective Date
- A change transaction changing an employer name with a Policy Change Effective Date within the policy period, but not equal to the policy effective date
- A change transaction deleting an address mid-term
- A change transaction deleting a class code
- At least two of these changes must be adding or deleting a state
- Transaction Code “15” testing must include at least one example where Wisconsin is not the state being deleted. An example where Wisconsin is the state being deleted should be included along with the required cancellation (Transaction “05”)
- An example of two change transactions for the same policy where the first change is effective mid-term involving a name or address and the second change is on the effective date of the policy (see Potential Result of change Transactions in Wisconsin on the next page)

Note: (Transaction Codes “08”, “10”, “14”, and “15”)

If your company does not support any of these types of transactions, please notify the WCRB in writing and we will take this into consideration during testing. If at some later date you want to submit these types of transactions, please let us know.

Multiple Premium Record Reporting in Wisconsin

Multiple State Premium Records are required when an Experience Modification Effective Date is reported using a Transaction Code 08,10,14 or 15. These State Premium Records should be in order of the dates reported. Each record must contain the appropriate data associated with its particular period.

Note:

Multiple State Premium Records must be reported at least 20 days prior to the Experience Modification Effective Date.

Potential Result of Change Transactions in Wisconsin

The method an Insurer uses to report subsequent transactions for a policy may result in a change not intended by the Insurer. If you submit effective and expiration dates for all records, even those not changed by a transaction, the following may be the result:

Policy Issued: 01/01/15

Policy Period: 01/01/15 to 01/01/16

Transaction Code	Change	Received Date	Policy Change Effective Date in all records	Policy Change Expiration Date in all records
08	Adding named insured	03/05/15	03/01/15	01/01/16
10	Change in Experience Mod	05/01/15	01/01/15	01/01/16

If the Insurer reports the Policy Change Effective Date and Policy Change Expiration Date on each record of a transaction, even though a change was only made on one of the records, the Policy Change Effective Date will be stored for all records in the WCRB system. In the above example, a name was added with a Policy Change Effective Date of 03/01/15 using Transaction Code 08. Subsequently, Transaction Code 10 was issued to change the Experience Mod with a Policy Change Effective Date of 01/01/15. Since this transaction is a complete policy replacement, and the Policy Change Effective Date of 01/01/15 was reported on all records, the name added by Transaction Code 08 will be updated to be effective 01/01/15 when Transaction Code 10 is submitted.

Transaction Code “16”

Insurers will be approved for electronic submission of production records of Transaction Code “16” when they have one successful test that includes at least two of these transactions.

Note:

WCPOLS requires that Link Data, at least one Name Record, and at least one Address Record be included in a Transaction “16”. Wisconsin also requires the Policy Type ID Code—Plan field (position 108) in the Header Record and a State Premium Record for Wisconsin (Record 04, State Code: value 48).

GENERAL ELECTRONIC REPORTING INFORMATION

General Instructions

Alphanumeric fields must be left justified and space filled. Numeric fields must be right justified and zero filled. Low values, null characters, control characters, or “unprintable” characters are not acceptable and may cause the submission to be rejected.

Reasons for Re-Testing

Once an Insurer has passed the test phase and is allowed to submit transactions electronically, the following conditions will cause them to be returned to the test phase:

- Changes in the WCRB system requiring Insurers to return to test
- An Insurer is ready to submit transaction types not previously tested
- An unacceptably high rate of error is encountered on submissions
- Electronic and hard copy versions of the same transactions don't match
- Changes in the carrier system

Submission Instructions

Wisconsin requires that all submissions to the WCRB be sent via the Compensation Data Exchange (CDX) application. If your system does not support an electronic transmittal record (ETR) or a submission control record (SCR), PEEP (Policy Entry and Edit Package) can create these records for you.

Compensation Data Exchange (CDX)

CDX is an Internet-based service that facilitates the electronic transmission of worker's compensation data between Member Insurers and Data Collection Organizations. Please visit the ACCCT Web site for more information at www.accct.org.

PEEP—Policy Entry and Edit Package

PEEP is an application available on the ACCCT Web site that is used to manually enter policy transactions so that they can be submitted to the WCRB. It may also be used to import files and transactions into PEEP allowing insurers the option to change transaction data and report transactions or endorsement records that their system does not support. See the ACCCT Web site for documentation of this option in the [PEEP User Guide](#).

Manage Policy—WCRB Member Product

Manage Policy is a product used to report Wisconsin data, though it does allow entry and retention of certain data for other states. The product is available to WCRB Members allowing them to manually enter and submit transactions to the WCRB. Transactions may also be imported into Manage Policy allowing insurers the option to make changes to transactions, and report transactions or endorsement records that their system does not support. There is no need for carriers to test prior to using Manage Policy. See the Manage Policy User Guide on the WCRB.org Website for documentation.

Contact Information

We hope to maintain a very high level of communication with each Insurer during the test phase. After we process each submission, we will contact you with the results. If you have any questions, please contact:

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Appendix A

Common Reporting Errors

Record Name	Record Type	Field	Position	Error	Reference
Header Record	01	11	77-84	The Prior Policy Number field should be the policy number for the prior coverage. If the prior policy number is not available, leave this field blank.	
Address Record	03	7	51-110	The Address field should include any attn.'s, c/o's, etc. WI considers these to be only part of the street address.	
Endorsement Identification Record	07			An Endorsement Identification Record is required for all policies.	
Endorsement Identification Record	07			Company endorsements used in Wisconsin may not be reported on an electronic transaction.	See General Circular Letter 538, 4/16/2009
State Premium Record	04	3	46-47	Multiples of this record are required whenever an anniversary rating date and/or experience modification effective date are applied to a policy.	

Appendix B
PEEP (Policy Entry and Edit Package)
Fields Required for WI
Per Screen Links

The purpose of these guidelines is to provide a list of fields in the PEEP application that are required in Wisconsin. Completing these fields will aid carriers in submitting data that meets Wisconsin's jurisdictional requirements.

Bold = Required Field in Wisconsin

Italics = Required if Applicable

I. Link Data Common to All Transactions

Link data is required for all transactions entered into PEEP. The Transaction Code corresponding to the type of transaction being entered must be selected.

Link Data Information/Key Policy Data Elements:

Carrier Number

Policy Number

Policy Effective Date (MMDDYY)

Transaction Code

Transaction Issue Date (MMDDYY)

II. Required Fields—Transactions 01, 02, 04, 06, 08, 10, 14, & 15

Information Page Screen Link:

Part 1

Primary Name of Insured (see III. Name screen link to add other insureds)

Primary Address (see IV. Address screen link to add other addresses)

City

State

Zip (Numbers Only, NO Dashes)

Country (if outside US)

Foreign Address Code

Geographic Area (if outside US)

FEIN (will accept a policy without, NTC will be sent)

Producer Name

Producer Address

City

State

Zip (Numbers only, No Dashes)

Legal Nature of Insured

Text for Other

Prior Policy Number

Part 2**Policy Expiration Date (MMDDYY) (For all Transactions except 16)**

Experience Rating Code

Interstate Risk ID Number (if available)

POLICY INDICATORS**Employee Leasing Policy Type**

Policy Term

Field Wrap Up

Type of Coverage

Policy Type ID Code Plan Indicator**ORIGINAL POLICY (For Policy Key Change Transaction Only)**

Original Policy Number (Transaction Code 06 only)

Original Carrier Code (Transaction Code 06 only)

Original Policy Effective Date (Transaction Code 06 only)

Part 3A**State Codes (alphabetic list of all state codes)****Part 3B****Policy Limits**

Accident

Policy Limit

Each Employee

Part 3C

Other States Insurance

Inclusion/Exclusion Code

3C state codes (alphabetic list of all state codes)

Part 4**Policy Minimum**

State

Amount

Deposit Premium

Total Est. Std. Premium

Policy Changes Effective Date (MMDDYY) (For Transactions 08, 10, 14, 15)

Policy Changes Expiration Date (MMDDYY) (For Transactions 08, 10, 14, 15)

Name Screen Link:

Name Record

Name of Insured

Federal Employer Identification Number (FEIN)

Policy Changes Effective Date (MMDDYY) (For Transactions 08, 10, 14, 15)

Policy Changes Expiration Date (MMDDYY) (For Transactions 08, 10, 14, 15)

Address Screen Link:

Address Record

Type of Address Code

Name Link Identifier *(if known)*

Street Address

City

State

Postal or Zip Code (no dashes)

Policy Changes Effective Date (MMDDYY) (For Transactions 08, 10, 14, 15)

Policy Changes Expiration Date (MMDDYY) (For Transactions 08, 10, 14, 15)

Exposure/Premium Info Screen Link:

Exposures

Classification Code

Estimated Exposure Amount (Enter whole dollar amounts only)

Manual Charged Rate (Enter the decimal)

Estimated Premium Amount (Enter whole dollars only)

Exposure Period Effective Date (if other than policy effective date)

Exposure Act/Exposure Coverage Code

Policy Changes Effective Date (MMDDYY) (For Transactions 08, 10, 14, 15)

Policy Changes Expiration Date (MMDDYY) (For Transactions 08, 10, 14, 15)

Premium

State Add/Delete Code (Use for Transaction Code 15)

**Independent Rating Bureau Risk ID Number/File Number/Account Number
(Transaction ID Code 01 and Policy Type ID Code Plan Indicator 2 only)**

Carrier Code (if different from the Carrier Code in link data)

Experience Modification Factor/Merit Rating Factor (assume x.xxx)

Estimated State Standard Premium Total

Expense Constant Amount (one per policy)

Premium Discount Amount (Enter whole dollars only)

Prorated Expense Constant Reason Code

Prorated Minimum Premium Reason Code

Reason State Was Added To Policy Reason Code

Experience Modification Effective Date (MMDDYY)

Type of Non-Standard ID Code

Policy Changes Effective Date (MMDDYY) (For Transactions 08, 10, 14, 15)

Policy Changes Expiration Date (MMDDYY) (For Transactions 08, 10, 14, 15)

Endorsements Screen Link:

3D Endorsements

State Code (All is acceptable)

Endorsement Number (list all endorsements applicable to the policy)

Bureau Version Identifier (for each endorsement listed if applicable)

Policy Changes Effective Date (MMDDYY) (For Transactions 08, 10, 14, 15)

Policy Changes Expiration Date (MMDDYY) (For Transactions 08, 10, 14, 15)

Endorsement Records for any Endorsement that have Variable Data

III. Required Fields for Transaction Code 03

This Transaction Code is used to report endorsements that have specific record layouts and are issued subsequent to the policy. Once the link data and the state information is entered, the endorsement is selected. Data associated with this record is then completed.

IV. Required Fields Transaction Code 16

Part 1

Primary Name of Insured (See III. Name screen link to add other insureds)

Primary Address (See IV. Address screen link to add other addresses)

City

State

Zip

Part 2

Policy Expiration Date (Zero fill)

Policy Type ID Code Plan Indicator

Part 3A

State Codes (Alphabetic List of all State Codes)

V. Required Fields—Transaction 05 (Cancellation/Nonrenewal)

Enter State Code

Cancellation/Nonrenewal Information

Transaction ID Code (must be 1=cancellation or 3=nonrenewal)

Cancel Code

Reason for Cancellation

Name of Employer

Address of Employer

Cancellation/Reinstatement Transaction Sequence Number (to be completed within multiple cancellation/reinstatement/nonrenewal transactions are in the same submission)

Cancellation/Reinstatement Effective Date

VI. Required Fields—Transaction 05 (Reinstatements)

Enter State Code

Reinstatement Information

Transaction ID Code (must be 2=reinstatement)

Reinstatement Code

Name of Employer

Address of Employer

Cancellation/Reinstatement Transaction Sequence Number (to be completed when multiple cancellation/reinstatement/nonrenewal transactions are in the same submission)

Cancellation/Reinstatement Effective Date (MMDDYY)



Wisconsin Compensation Rating Bureau

For information regarding updates, contact

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(WCPOLS SUBMISSION INSTRUCTIONS)

POLICY ELECTRONIC REPORTING INSTRUCTIONS SUMMARY OF CHANGES

Page, Section, etc.	Date of Change	Change/Update
Page 4, 6, 7, 13	2/14/17	Removed references to Anniversary Rating Date
Page 7	2/14/17	Updated Years on Examples
Page 8	2/14/17	Updated Contact Information
Page 9	2/14/17	Removed Cancellation/Reinstatement Record Information
Page 5	10/13/2016	Updated instruction information for currency
Page 10	10/13/2016	Removed Appendix B - ACCCT's File Naming Convention. Appendix B is now PEEP (Policy Entry and Edit Package) Fields Required for WI
Pages 8, 9, 12, 13, 14, 15	10/5/2015	Updated instruction information for currency
Pages 3 and 6	8/26/2014	Removed text for clarification from: String Names and Addresses, Page 3; and Note on Transaction Codes "08", Page 6
Page 7	8/26/2014	Added note under Multiple Premium Record Reporting in Wisconsin and removed last sentence from Note: in Transaction Code "16"
Page 9	8/26/2014	Changed Cancellation/Reinstatement Record error information. Removed reference to sections.
Pages 5 and 6	10/22/2013	Updated Cancellation ID Code 1, Reason for Cancellation table and Cancellation ID Code 3 per WCRB requirements.
Page 2, Important Note	1/31/2013	Added Transaction Code 04 and 16 to the list of Transactions that must be tested after Transaction Code 01 and 02 have been tested.
Page 2, Transaction Code 01 and 02	1/31/2013	Removed the bullet and added the information to the note. Eliminated "Retrospective rated policies" from the list of items that are required during testing.
Page 4, Transaction Code 03 Update	1/31/2013	Added the Record Type Codes 84, 85, and 86 to the requirements for testing Transaction Code 03.
Page 5, Update to Transaction Code 05 requirements	1/31/2013	Removed the requirements regarding the number of transaction that are required, changed the information in the bullets, and made the corresponding hard copy information part of the note.
Page 6, Update to Transaction Code 08, 10, 14, and 15	1/31/2013	Replaced the requirement regarding the number of transactions that are required with "Please consult the WCRB regarding the number of transactions that are required"
Page 11 and 14, Appendix C Update	1/31/2013	Removed Certificate Number (CA) from page 11 under the Link Data Common to All Transactions section, and added Type of Non-Standard ID Code to Page 14 under the Premium section.
Page 6, Transaction Code 08,10,14,and 15 - Note update	6/1/2012	Updated the information in the first bullet under the first note to include and/or Experience Modification Effective Date.
Page 7, Transaction Code 08,10,14,and 15	6/1/2012	Added a new item under the heading, Multiple Premium Record Reporting in Wisconsin regarding the reporting requirements for this record.
Page 9, Appendix A	6/1/2012	Updated the Error column for the State Premium Record information to include, and/or Experience Modification Effective Date.
Page 5, Cancellation ID Code 1 - Cancellation	11/11/2011	Added reference to Note regarding Hard Copy Description of Electronic Reason Code 13 and 21; added text to Underwriting Reasons, Code 19.

Page, Section, etc.	Date of Change	Change/Update
Page 5, Cancellation ID Code 1 - Cancellation	11/11/2011	Added text (May only be used for new business not in effect for more than 60 days) to Electronic Reason Code 19 to correspond with the approved hard copy Wisconsin Notice of Termination.
Page 8, General Reason for Retesting	11/11/2011	Added "Changes in the carrier system" as a reason that a carrier may need to re-test for electronic reporting.
Appendix C	9/13/2011	Eliminated <i>Experience Mod Status</i> as a required field in the Exposure/Premium Info Screen Link: Premium section. Added, Type of Coverage as, "required if applicable" under Information Page Screen Link: Part 2, POLICY INDICATORS
Page 7, Potential Result of Change Transactions in Wisconsin	8/4/2010	Transaction Code examples 10 and 08 reversed in chart example and explanation paragraph.
Page 5, Cancellation ID Code 1— Cancellation	2/23/2010	Added Electronic Reason Code 21 - Material Misrepresentation/Fraud per change to WCIO Workers Compensation Data Specifications Manual at the WCIO EDI Meeting 02/17/2010
Page 10, Appendix B	2/18/2010	Updated Appendix B, ACCCT's File Naming Convention for CDX, to include WCCRIT and WCMED type of data.
All pages	2/18/2010	Changed name of document to "POLICY ELECTRONIC REPORTING INSTRUCTIONS."
Pages 1, 2, 3, 6, 9	10/15/2009	Changes made to reflect Wisconsin move to eliminate hard copy effective 01/01/10.
Page 3, Endorsement Identification Record.	8/29/2008	Added "Endorsements received as hard copy may be subject to a \$25 hard copy keying charge.
Page 5, Cancellation ID Code 1 - Cancellation	8/29/2008	Added Electronic Reason Code 22 - Employee Leasing Agreement Terminated per change to WCPOLS.
Page 6, Transaction Code "08, "10", "14", and "15"	8/29/2008	Added information to the Note section regarding a new requirement for change transactions.
Page 9, Appendix A	8/29/2008	Changed the Section and Page Numbers in the Section Column per WCPOLS.
WCPOL Submission Instructions	5/16/2008	Changes were made to text throughout the document in order to clarify the instructions.
Page 1, Electronic Submission Tracking	5/16/2008	Added an explanation of the WCRB Web Member Product, Electronic Submission Tracking.
Page 4, Record Type Code EA	5/16/2008	Effective 05/01/08 this record is eliminated from WCPOLS and from this document.
Page 5, Cancellation ID Code-Cancellation	2/20/2008	Added (see note below) to Electronic Reason Code 01 and 08 for clarification.
Pages 11-15 Appendix C, PEEP Fields Required for WI	2/20/2008	Updated format of the Appendix to include additional information. Added section for Link Data Common to All Transactions, and Required Fields for Transaction Code 03, 16, and 05.
Page 13, Appendix C, Address screen link	11/16/2007	Added field name "Name Link Identifier (<i>if known</i>)" under the Address Record in Appendix C, PEEP (Policy Entry and Edit Package) Fields Required for WI.
Page 2, Transaction Codes "01" and "02"	8/7/2007	Updated list items under 2nd bullet: deleted "Additional Insureds" and changed last item to read, "Name Record with additional named insureds where multiple legal statuses are required".

Page, Section, etc.	Date of Change	Change/Update
Page 8, General Reason for Retesting	8/7/2007	Changed "three conditions" to "certain conditions" and added 4th bullet, "Electronic transactions must contain the same information as hard copy documents that were previously sent for the same policy". An example of this was also added.
Page 9, Common Reporting Errors	8/7/2007	Changed the error for field 4, position 48 to read "reason for cancellation code 04 and 17" instead of "reason for cancellation code 04 and 19"
Page 9, Common Reporting Errors	8/7/2007	This document is now Appendix A. Added row for "Record Name-State Premium Record", "Record Type-04", "Field-3", "Position-46-47", "Error-Multiples of this record are required whenever exposure amounts are being reported on a split period basis, (Anniversary Rating Date)"
Page 10	8/7/2007	Added Appendix B - ACCCT's File Naming Convention for CDX
Page 11	8/7/2007	Added Appendix C - PEEP (Policy Entry and Edit Package) Fields Required for WI
Industry Notified: via General Circular 511		
Page 5, Transaction Code "05"	3/19/2007	Added clarification note regarding electronic Reason Codes 01 and 08.
Page 1, Testing and Requirements	10/20/2006	Added a sentence to the last paragraph on page: "Please make sure to include the requested information or inform Wisconsin of the reason this information is not being
Page 1, Testing and Requirements	10/20/2006	Added an additional paragraph to the bottom of the page: "The WCRB will send a letter following the review of each test submission. This letter will contain specific
Page 2, Transaction Codes "01 and "02"	10/20/2006	Added list item: "Name Record where multiple legal statuses are required"
Page 2, Added section after heading "String Names and Addresses"	10/20/2006	Added section "Legal Nature of Insured Code" including description, table and note.
Page 4, Transaction Code "05"	10/20/2006	Removed the paragraph after the bullet, "At least one cancellation effective on the expiration date of the policy"
Page 5, Transaction Codes "08", "10", "14", and "15"	10/20/2006	Added 4 items relating to the 1st bullet, " At least 20 transactions that include different types of changes"
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