Workers' Compensation Board

eClaims

Webinar

JUNE 16, 2026

AGENDA

1. Amendment to §21-a & Subject Number 046-1787
2. Table changes published on 06/01/2026
3. eForms RFA-2
4. Questions

§21-a AMENDMENT

21-a AMENDMENT

- New legislation signed as part of the FY 2026 Budget amends § 21-a of the Workers' Compensation Law to permit workers' compensation insurers to pay for medical treatment, without accepting liability, for up to one year, beginning January 1, 2027.
- The amendment requires insurers to notify injured workers that such payments are being made and that their claim will automatically be accepted by the insurer at the one-year mark, unless the claim is controverted.
- The Board published updated table changes on 6/1/2026. Payers should review the eClaims Trading Partner table changes posted on the Board's eClaims webpage and update their systems accordingly.
- Please refer to Subject Number 046-1787
  wcb.ny.gov/content/main/SubjectNos/sn046_1787.jsp

21-a AMENDMENT TESTING

- **Given the scope of the changes, we will allow for a period where trading partners can test prior to the 1/1/2027 implementation.**
- **Additional information will be shared as it becomes available.**
- **Anyone who regularly uses our testing environment will be informed of when any data refresh will occur.**

TABLE CHANGES PUBLISHED ON 6/01/2026

RELAXED AND MODIFIED POPULATION RESTRICTIONS PUBLISHED 06/1/2026 TO BE IMPLEMENTED ON 1/1/2027

- **Numerous population restrictions were modified and published on the eClaims change log 6/1/2026 to be implemented on 1/1/2027.**
- **Payers should review the eClaims change log items 410- 456 posted on the Board's eClaims webpage and update their systems accordingly.**
- **Modifications from the previously posted 1/9/26 publication that have now been omitted from implementation have been explicitly marked "Never Implemented" for clarity on the eClaims Change Log.**
- **These changes align with the Amendments to Workers' Compensation Law Section 21-a Effective January 1, 2027.**
- **Questions regarding these edits may be sent to eClaims@wcb.ny.gov.**

CHANGE LOG ITEM 427: NEW POPULATION RESTRICTION PUBLISHED ON 1/9/2026 and 6/1/2026 TO BE IMPLEMENTED ON 1/1/2027

Several new edits and population restrictions were published on the eClaims change log on 1/9/2026 and modified on 6/1/2026 to align with the Amendments to Workers' Compensation Law Section 21-a effective January 1, 2027.

Change Log item 427:

427	Edit Matrix- Population Restrictions	DN0056 (Initial Date Disability Began)	Added a New Population Restriction DN0056-064 H) **Never Implemented:** H) Claim Type Code cannot be 'M' (Medical Only) if DN0068 (Initial Return to Work Date) is equal to or greater than seven days of DN0056 (Initial Date Disability Began). This applies to all dates of accident effective 1/1/2027. If DN0074 (Claim Type Code) is 'M" (Medical Only) and DN0056 (Initial Date Disability Began) has a latest value that is not null or blank and DN0068 (Initial RTW Date) is either blank or has a value greater than DN0056 (Initial Date Disability Began) by 7 or more days then DN0074 (Claim Type Code) must be included in the Change Variable Segment.	N/A	N/A
427 Continued			**NOW:** H) Claim Type Code cannot be 'M' (Medi[illegible] to Work Date) is greater than seven days of DN0056 (Initial Date Disability Began). This applies to all dates of accident effective 1/1/2027. If DN0074 (Claim Type Code) is 'M" (Medical Only) and DN0056 (Initial Date Disability Began) has a latest value that is not null or blank and DN0068 (Initial RTW Date) is either blank or has a value greater than DN0056 (Initial Date Disability Began) by 7 or more days then DN0074 (Claim Type Code) must be included in the Change Variable Segment. Business Need: To align with 21a for medical effective 1/1/2027.	6/1/2026	1/1/2027

CHANGE LOG ITEM 427: NEW ...

CHANGE LOG ITEMS 429, 431: NEW POPULATION RESTRICTIONS PUBLISHED ON 1/9/2026 and 6/1/2026 TO BE IMPLEMENTED ON 1/1/2027

Change Log Item 429 and 431:

429	Edit Matrix- Population Restrictions	DN0059 (Manual Classification Code)	Created new Population Restriction DN0059-064 B) B) If the received date is on or after 1/1/2027 and 365 days has passed from the received date of the first FROI or SROI with Agreement to Compensate code of W (Without Liability for Indemnity/Medical for indemnity and medical) and that first FROI or SROI was received on or after 1/1/2027, then Agreement to Compensate Code must be L (With Liability for Indemnity/Medical). Effective 1/1/2027, this edit will not be applied if DN0059 (Manual Classification Code) has been accepted as 7711 or 7370. If DN0059 (Manual Classification Code) is not 7711 or 7370, and received on or after 1/1/2027 and DN0075 (Agreement to Compensate Code) is not L, and earliest FROI/SROI received with DN0075 of W(without) is more than 365 days in the past, then DN0075 (Agreement to Compensate Code) must be included in the Change Variable Segment. Business Need: To align with 21a for medical effective 1/1/2027.	6/1/2026	1/1/2027

431	Edit Matrix- Population Restrictions	DN0068 (Initial RTW Date)	Added a New Population Restriction replacing the old DN0068-064 F) which was removed. See Change log item #430. **Never Implemented** F) Claim Type Code cannot be 'M' (Medical Only) if DN0068 (Initial Return to Work Date) is equal to or greater than seven days of DN0056 (Initial Date Disability Began). This applies to all dates of accident effective 1/1/2027. If DN0074 (Claim Type Code) is 'M" (Medical Only) and DN0056 (Initial Date Disability Began) has a latest value that is not null or blank and DN0068 (Initial RTW Date) is either blank or has a value greater than DN0056 (Initial Date Disability Began) by 7 or more days then DN0074 (Claim Type Code) must be included in the Change Variable Segment. **Business Need:** To align with 21a for medical effective 1/1/2027.	N/A	NA
431 Continued			**NOW:** F) Claim Type Code cannot be 'M' (Medical Only) if DN0068 (Initial Return to Work Date) is greater than seven days of DN0056 (Initial Date Disability Began). This applies to all dates of accident effective 1/1/2027. If DN0074 (Claim Type Code) is 'M" (Medical Only) and DN0056 (Initial Date Disability Began) has a latest value that is not null or blank and DN0068 (Initial RTW Date) is either blank or has a value greater than DN0056 (Initial Date Disability Began) by 7 or more days then DN0074 (Claim Type Code) must be included in the Change Variable Segment.	6/1/2026	1/1/2027

CHANGE LOG ITEMS 436, 437: NEW POPULATION RESTRICTIONS PUPLISHED ON 1/9/2026 and 6/1/2026 TO BE IMPLEMENTED ON 1/1/2027

Change Log Item 436 and 437:

436	Edit Matrix - Population Restrictions	DN0074 (Claim Type Code)	Added a New Population Restriction DN0074-064 N) **Never Implemented** N) Claim Type Code cannot be M (Medical Only) if DN0056 (Initial Date Disability Began) is not null or blank **and** DN0068 (Initial RTW Date) is blank or has a value greater than DN0056 (Initial Date Disability Began) by 7 or more days. This edit is effective 1/1/2027 and applies to dates of accident on or after 1/1/2027.	N/A	N/A
436 Continued			**NOW:** N) DN0074 (Claim Type Code) cannot be M (Medical Only) if DN0056 (Initial Date Disability Began) is not null or blank. **AND** DN0068 (Initial RTW Date) is blank or greater than 7 days from DN0056 (Initial Date Disability Began). This edit is effective 1/1/2027. EXCEPTION: If Initial Date Disability Began is present and Initial RTW Date is blank then the FROI receive date will be used to determine if there is more than 7 days of lost time. Business Need: To align with 21a for medical effective 1/1/2027.	6/1/2026	1/1/202
437	Edit Matrix- Population Restrictions	DN0075 (Agreement to Compensate Code)	Added a New Population Restriction DN0075-059 **Never Implemented** If last accepted Agreement to Compensate code on the case was L (With Liability for Indemnity/Medical) then Agreement to Compensate must be L (With Liability for Indemnity/Medical). This edit is effective 1/1/2027 and applies to dates of accidents on or after 1/1/2027.	N/A	N/A
437 Continued			**NOW:** If case was assembled on or after 9/26/2024 and last accepted Agreement to Compensate Code was L (With Liability for Indemnity/Medical). Then Agreement to Compensate must be L. This edit is effective 1/1/2027. Business Need: To align with 21a for medical effective 1/1/2027.	6/1/2026	1/1/202

CHANGE LOG ITEM 449: NEW POPULATION RESTRICTION PUBLISHED 1/9/2026 and 6/1/2026 TO BE IMPLEMENTED ON 1/1/2027

Change Log Item 449:

449	Edit Matrix- Population Restrictions	DN0075 (Agreement to Compensate Code)	Added a New Population Restriction DN0075-064 M) M) If DN0075 (Agreement to compensate code) is present and latest value of DN0074 (Claim Type Code) is N (Notification only) Then DN0074 (Claim Type Code) must be included in the change variable segment with a value other then N (notification only). Business Need: To align with 21a for medical effective 1/1/2027.	1/9/2026	1/1/2027

CHANGE LOG ITEM 456: RELAXED SEQUENCING EDIT

Relaxed Section 2, Edit #1.B sequencing edit, to allow payors to file a SROI-PY for a one-time lump sum payment on a controverted claim without having to file the FROI-00 accepting the claim first.

2. Edit #1 checks to see what FROI MTC (besides any FROI-02) was accepted from you last and applies the following edits accordingly:

(A) If your last accepted FROI was FROI-01, then your incoming SROI will be rejected for Edit 063 (Invalid Event Sequence) with DN0291 (Element Error Text) of "K) After FROI-01, first send FROI-00 to start over".

(B) Otherwise, if your last accepted FROI was FROI-04 but something other than a SROI-SA, SROI-PY without a benefit segment or only BTC reported to date is BTC 5xx, 030, 090 or a SROI-04 is being sent, then your incoming SROI will be rejected for Edit 063 (Invalid Event Sequence) with DN0291 (Element Error Text) of "L) After FROI-04, first send FROI-00 to accept".

RELAXED SEQUENCING EDIT - SROI-02 after SROI-04

- **The Board will be relaxing the sequencing edits to allow a SROI-02 after a SROI-04 after receiving feedback from trading partners.**
- **Implementation on 1/1/2027 with 21-a changes.**
- **Publishing on next Change Log.**

eFormsRFA-2

FAQs

- Numerous FAQs posted on the Board website.
- wcb.ny.gov/onboard/eforms/rfa-2.jsp#faqs

FAQs

> Application & technical questions

> How to

How do I request to cancel a duplicate case?

- Submit an online claims inquiry and select “Cancel/combine case.”

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THANK YOU

QUESTIONS?

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