ELECTRONIC TRANSMISSION PROFILE RECEIVER'S SPECIFICATIONS

Receiver Na	Centucky Department of Workers' Claims Date Prepared:									
(Jurisdiction Name & Workers' Compensation Agency Name)										
Trading Partner Type: X Jurisdiction Service Bureau Other										
Receiver ID: FEIN: 61-0600439 Postal Code (9 digits): {40601} - {6157}										
Transaction Sets for this Profile:										
Transaction Information Acknowledgment Information					ion					
Transac							Mode		Production Response	
IAIABC ANSI		i l	Release		Versio	n (EDI	(EDI/Paper/None)		period	
148 148			3		3041		EDI		3 Business	
A49	148		3		3041		EDI		3 Business	
POC	271		2		1		EDI		3 Business	
							EDI		3 Business	
AKI	824		1		3041		N/A		N/A	
Transmission Frequencies for this Profile: X Daily Weekly Select Day: SUN MON TUE WED THU FRI SAT Monthly Select Day (1-31): Other: Transmission Cut-off Time: 12:00 AM Electronic Mailbox(s) for this Profile:										
Network:						Network:				
		Te	est	Pro	duction			1	Test	Production
Mailbox Acct ID:						Mailbox A	Mailbox Acct ID:			
User ID:						Ĺ	Jser ID:			
Message Class:						Message	Class:			
Network:						Network:	Network:			
		Te	est	Pro	duction			1	Test	Production
Mailbox Acc	ct ID:					Mailbox A	Acct ID:			
	er ID:						Jser ID:			
Message C	lass:					Message	Class:			
Secure File Transfer Protocol (SFTP) for this Profile:										
Web Sit	te			Te	st		Production			
URL:										
Security Protocol:										
Encryption Level:										
Flat File Record Delimiter:Carriage Return (CR)Carriage Return Line Feed (CRLF)										
ANSI Information:							Duo di cattan			
Segment Terminator:									est	Production
Data Element Separator: Sub-Element Separator:				Sender/Receiver Qualifier: Sender/Receiver ID:						
oup-⊏letile	ні оераі	iaiUf.			56	siluei/Rece	IVELID:			

ELECTRONIC TRANSMISSION PROFILE SENDER'S RESPONSE

Return this page to:							
Receiver Name: Kentucky Department of Wo					Workers' Claims		
	Receiver ID: Receiver FEIN: 61-0600439 Receiver Postal Code (9 digits): 40601 - {6157}						
Rec	eiver Pos	tal Code (9 d	digits): { <u>40601</u>	_} - { <u>6157</u> }			
	Sender Selections/Information						
Master	Master Trading Partner Information:						
Leg	al Name (ı	no abbrevia	tions):				
Trading Partner Type:JurisdictionThird Party AdministratorEmployerService Bureau/DCOEDI Service ProviderSelf-InsurerInsurer Other (specify):							
Sender ID: Sender FEIN: Sender Postal Code (9digits):							
Transaction Sets for This Profile:							
			Transaction In	formation		Acknowledgment	
	IAIABC	ANSI	Release	Version	Projected # per Transmission	Mode (EDI/Paper/None)	
	148	148					
	A49	148					
	POC	271					
	MED	837					
Transmission Frequency (select only one from Receiver's options): Daily Weekly Select Day: SUN MON TUE WED THU FRI SAT Monthly Select Day (1-31): Other:							
Selected Media: Network Secure FTP							
Electronic Mailbox for this Profile:							
	Network						
			Test	Production			
	Mailb	ox Acct ID:					
		User ID:					
	Mess	age Class:					
*Secure File Transfer Protocol (SFTP) for this Profile:							
	S	ite	Te	est	Production		

0	
URL:	
Security Protocol:	
Encryption Level:	

^{*} See Instructions for additional information on securing Internet sessions.