

## Louisiana Workforce Commission (LWC)

### Trading Partner Profile (TPP) Registration Instructions

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## Overview:

LWC's EDI Trading Partner Profile (TPP) Registration System provides each Trading Partner with the ability to both create a new TPP and update an existing TPP. An EDI TPP uniquely identifies a Trading Partner as the sender of data, and documents (1) how the data will be sent, (2) the Primary and Secondary Contacts, and (3) the Insurer and Claim Administrator demographics.

Upon **completion** of an EDI TPP, an auto-response email will be sent to both the Primary Contact and LWC. This will serve as notification to all relevant parties that there is an EDI TPP request pending implementation. An example of the auto-response email can be found in the [LWC Trading Partner Profile Registration Email Example](#) section.

Upon **approval** of an EDI TPP by LWC, ISO's EDI Support Team will notify the Primary Contact regarding when the profile will become effective for EDI reporting.

The following documentation guides the end-user through accessing and completing a NEW or UPDATED LWC EDI TPP.

### Creating and Accessing a Trading Partner Profile (TPP) Account:

All Trading Partners must sign-in to [ISO's Trading Partner Registration System](#) to create and update TPPs.

If this is the **first time** accessing ISO's Trading Partner Registration System, create an account by clicking on the 'Get Started' button, and entering both your e-mail address and desired password for your new account.

After your account has been created, a message will be sent from [www-data@wccapture.com](mailto:www-data@wccapture.com) to your account's specified e-mail address. This email will contain an activation code for activating your LWC EDI TPP account. Enter the activation code in the 'Activation Code' box and click 'Continue'.

Sign In

Username

Password

[Forgot Password?](#)

Create Account

New user? Create an account below to begin using the ISO Trading Partner Registration system.

After sign-on, Trading Partners will have the option to either create a new TPP or update a previously submitted TPP. Any previously submitted TPP will be visible on the below screen:

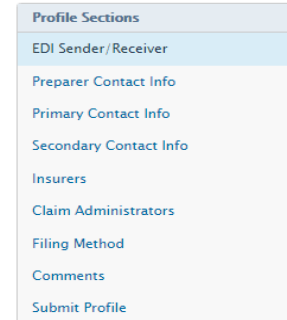


## Trading Partner Profiles

Welcome to the Trading Partner Registration system. Get started creating your first profile by clicking the button below.

[Create New Profile](#)

The TPP Registration System consists of the following sections shown at right. These profile sections will be explained in the [How to Complete a New LWC EDI TPP](#) section below:



### How to Complete a New LWC EDI TPP:

Click on the 'Create New Profile' button to create a new profile.


Required fields are indicated in bold formatting throughout these instructions. Any required fields that have not been completed upon clicking the 'Continue' or 'Next Page' buttons will be highlighted with a red box around the affected field.

When filling out the TPP, references to "DN" (e.g. Insurer Name (DN0007)) indicate that the information being requested is an EDI Data Element (DN) found in Claims EDI Reports. Information supplied in DN-associated TPP fields will be used as validations against data reported in the corresponding Claims EDI data elements.

- a. **EDI Sender:** This section provides identifying information about the Master Trading Partner (Sender).
  - a. **Sender Master FEIN:** Enter the Federal Employer Identification Number (FEIN) of your business entity. Please enter exactly 9 digits with no punctuation.
  - b. **Sender Postal Code:** Enter the Postal Code (Zip+4) of your business entity. Please enter exactly 9 digits with no punctuation. Click 'Continue' after populating the Sender Master FEIN and Sender Postal Code fields.
  - c. **Company Name:** Enter the Company Name of the EDI Sender. The Company Name should be the entire name as listed on any licensing/registration applications filed with LWC. PLEASE DO NOT USE ACRONYMS.
  - d. **Company Type:** Please indicate the Company Type of the EDI Sender if either Claim Administrator, Insurer or Self-Insured Employer.
  - e. **Group FEIN:** This field will be automatically populated with the Sender Master FEIN entered in the previous screen. The Group FEIN allows an EDI Sender that purchased another company to update the Claim Admin FEIN, et al on any claim in the same group even though they will have a different Sender ID (FEIN / Postal Code).

Note: The Sender Master FEIN and Sender Postal Code TPP fields should match the Sender ID (DN0098) in the Header Record of all Claims EDI transmissions.

Click 'Next Page' once the Company Type is selected.

- b. Preparer Contact Information: This section provides identifying information about the person completing the EDI TPP. The Preparer section of Trading Partner Profile should be pre-filled with information entered from the "My Account" – Contact Settings section of ISO's Trading Partner Registration System.
- Preparer Name**: Enter the contact name of the person completing the EDI TPP.
  - Preparer Job Title**: Enter the preparer's job title.
  - Preparer Address, City, State, and Zip**: Enter the preparer's address. Note: Zip Code – Please enter at least 5 digits with no punctuation.
  - Preparer Phone and Fax**: Enter the preparer's phone and fax number. Note: Please enter 10 digits with no punctuation.
  - Preparer Email**: Enter the preparer's email address.
- c. Primary/Secondary Contact Information: This section identifies individuals within your business entity who can be used as the main contacts for this TPP. These individuals will be contacted regarding any support / compliance issues with the TPP itself or Claims EDI reporting. The first contact entered will be the Primary Contact. Select Contact Type if either Business or Technical. If the Primary Contact is the same person as the Preparer Contact, click the 'Copy from Preparer Contact' button . If possible, provide at least one business and one technical contact. On the form, complete the following information for each specific contact.

Primary Contact:

- Contact Name: **First**, Middle, **Last**, Suffix
- Job Title: **Contact's Job Title**
- Address Line 1**, Address Line 2, **City, State, Zip**
- Phone, Fax, Email**

Note: Zip Code – Please enter at least 5 digits with no punctuation.

Note: Phone and Fax - Please enter 10 digits with no punctuation.

Secondary Contact:

- Contact Name: **First**, Middle, **Last**, Suffix
- Job Title: Enter **Contact's Job Title**
- Address Line 1**, Address Line 2, **City, State, Zip**
- Phone, Fax, Email**

Note: Zip Code – Please enter at least 5 digits with no punctuation.

Note: Phone and Fax - Please enter 10 digits with no punctuation.

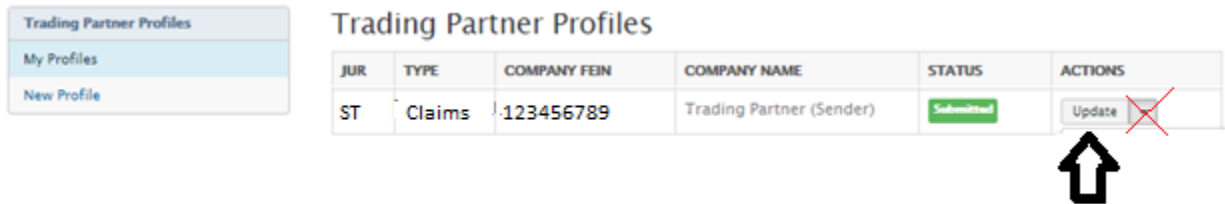
- d. Insurer(s):
- h. Submit the LWC EDI Trading Partner Profile:

Click the 'Submit Profile' button in the Submit Profile section to complete the registration process. An email confirmation will be generated per the example in the [LWC Trading Partner Profile Registration Email Example](#) section of this document. LWC will respond via email with confirmation and approval of the LWC EDI Trading Partner relationship.



### How to Update an Existing LWC EDI TPP:

Update a previously submitted TPP by selecting 'Update' in the ACTIONS column of the relevant TPP:



a. Update Insurers or Claim Administrators:

There are three options for updating Insurers (Insurer Section) and/or Claim Administrators (Claim Administrators Section) within the EDI TPP Update:

- Click the 'Add Insurer' button to add a new Insurer.
- Click the 'Add Claim Admin' button to add a Claim Administrator to your EDI TPP (one that has never been added or was previously added and removed).

- Click the 'Remove' menu item (drop-down from the 'Edit' button) and click the 'Mark Inactive' button to inactivate a previously approved Insurer or Claim Administrator on your LWC EDI TPP.


- Click the 'Edit' button to update the Insurer or Claim Admin records previously submitted to LWC.

- Once all updates necessary are completed, submit the profile by selecting the 'Submit Profile' button in the Submit Profile section.

b. Update Additional Sections of the TPP:

To update any other section of a previously submitted TPP (e.g. EDI Sender, Preparer Contact Info, Primary Contact Info, Secondary Contact Info, and/or Filing Method sections), select the

corresponding section and update the relevant fields. Provide a comment in the Comments section for any additional changes that have been made.

Once all updates necessary are completed, click the 'Submit Profile' button  in the Submit Profile section to complete the submission.

c. Change Sender ID:

Click the 'Change Sender ID' menu item (drop-down from the 'Update' button) and you will be redirected to the Sender ID section where you may edit either the Sender FEIN or Sender Postal Code.



This will create a new TPP – any changes to the Sender ID are considered a new or different Sender.

Note: If all updates made to the existing TPP need to be canceled, click the 'Cancel Updates' button



in the Submit Profile section.

## LWC TPP Registration Email Example

Upon **completion** of an EDI TPP, an auto-response email will be sent to both the Primary Contact and LWC. This will serve as notification to all relevant parties that there is an EDI TPP request pending implementation. Below is an example of the LWC EDI TPP registration email. The information that is captured in the EDI TPP submission will be included in the email.

-----Original Message-----

From: [www-data@wccapture.com](mailto:www-data@wccapture.com) [mailto:[www-data@wccapture.com](mailto:www-data@wccapture.com)]

Sent: Wednesday, July 1, 2020 12:00 PM

To: [lwcedi@lwc.la.gov](mailto:lwcedi@lwc.la.gov)

Cc : *Preparer's Email; Primary Contact's Email here; Secondary Contact's Email here; Filing Method Contact's Email Here*

Subject: EDI New Profile LA - *Your Company's Name here*

-----Original Message-----

-- Claims Electronic Data Interchange Profile --

Jurisdiction: LA

EDI Profile: New

-- EDI Sender/Receiver (Primary Insurer/TPA) --

Company Name: Sender Trading Partner Name

Company Type: Claim Administrator

Master FEIN: 123456789

Postal Code: 123451234

Group FEIN: 987654321

-- Preparer Contact Information --

Preparer Name: John Smith

Preparer Title: Associate Claims Handler

Preparer Addr 1: 56 Breezy Drive

Preparer Addr 2:

Preparer City: Quahog

Preparer State: LA

Preparer Zip: 12345

Preparer Phone: 401-123-7890

Preparer Fax: 401-123-7891

Preparer Email: [preparercontact@edisender.example.com](mailto:preparercontact@edisender.example.com)

-- Filing Information --

Filing Method: EDI Vendor

Vendor Company: EDI Vendor Name

Vendor Phone: 401-123-7892

Vendor Email: [example@vendor.example.com](mailto:example@vendor.example.com)



-- Primary Contact for EDI Implementation/Setup --

Primary Contact Name: Jane Smith  
Primary Contact Title: EDI Claims Manager  
Primary Contact Addr 1: 56 Breezy Drive  
Primary Contact Addr 2:  
Primary Contact City: Quahog  
Primary Contact State: LA  
Primary Contact Zip: 44444  
Primary Contact Phone: 401-123-7893  
Primary Contact Fax: 401-123-7894  
Primary Contact Email: [primarycontact@edisender.example.com](mailto:primarycontact@edisender.example.com)

-- Secondary Contact --

Secondary Contact Name: Joan Smith  
Secondary Contact Title: Business Systems Analyst  
Secondary Contact Addr 1: 56 Breezy Drive  
Secondary Contact City: Quahog  
Secondary Contact State: LA  
Secondary Contact Zip: 44444  
Secondary Contact Phone: 401-123-7895  
Secondary Contact Fax: 401-123-7896  
Secondary Contact Email: [secondarycontact@edisender.example.com](mailto:secondarycontact@edisender.example.com)

-- Insurers --

-- Insurer (1) --

Action: Add  
Insurer Status: Active  
Insurer FEIN (DN0006): 123456789  
Insurer Name (DN0007): Example Insurer 1  
Insurer Type: Insurer

-- Insurer (2) --

Action: Add  
Insurer Status: Active  
Insurer FEIN (DN0006): 564738219  
Insurer Name (DN0007): Example Insurer 2  
Insurer Type: Insurer

-- Claim Administrators --

-- Claim Administrator (1) --

Action: Add  
Claim Administrator Status: Active  
Claim Admin FEIN (DN0187): 192837465  
Claim Admin Name (DN0188): Legal Name of Claim Administrator Entity  
Claim Admin Attention Line:  
Representative Name (DN0140): Jim Smith (Claim Admin Representative)

Representative Business Phone: 401-123-7897  
Mailing Primary Addr: P.O. BOX 444  
Mailing Secondary Addr:  
Mailing City: Quahog  
Mailing State Code: LA  
Mailing Postal Code: 444441444  
Physical Primary Address: 45 Pineapple Boulevard  
Physical Secondary Address:  
Physical City: Quahog  
Physical State Code: LA  
Physical Postal Code: 444445678