

Explanation Codes (Rejection/Benefits) Description

WorkSafeBC Code	Error Name	Description	MSP Code
146	Invalid Nature of Injury	(146) WorkSafeBC refused claim. Invalid nature of injury code. Please resubmit with amended information.	S1
147	Invalid Area of Body	(147) WorkSafeBC refused claim. Invalid body part code. Please resubmit with amended information.	SZ
148	Invalid Anatomical Position	(148) WorkSafeBC refused claim. Invalid side of body code. Please resubmit with amended information.	S2
154	Date of Service Prior to Date of Birth	(154) WorkSafeBC refused your claim submission. Transmitted record had a date of service prior to the date of birth.	
155	Date of Injury Prior to Date of Birth	(155) WorkSafeBC refused your claim submission. Transmitted record had a date of injury prior to the date of birth.	S7
157	Invalid Date Format	WorkSafeBC refused. Electronic report submission included an invalid date format.	G1
158	Invalid PHN	WorkSafeBC Claim – Invalid PHN	2W
201	Employer Name Missing	WorkSafeBC refused. Electronic report submission incomplete. Required information missing, employer's name.	G2
209	Worker Address Missing	(209) WorkSafeBC refused. Electronic report submission is incomplete. Required information missing - employee's address.	G4
227	Est. Disability Period Missing	(227) WorkSafeBC refused. Electronic report submission is incomplete. Required information missing - estimated time off work.	G5
233	Work Restrictions Missing	WorkSafeBC refused. Electronic report submission incomplete. Required information - work restrictions.	G6
250	Form Transmission Incomplete	WorkSafeBC refused electronic report submission. Incomplete form transmission.	GT
269	Reg. Pract. Not Indicated	(269) WorkSafeBC refused. Report submission incomplete, required information, regular practitioner indicator missing or invalid.	M1
271	Return To Work Not Indicated	(271) WorkSafeBC refused. Report submission incomplete, required information, return to full duties indicator missing or invalid.	M2
273	Rehab Program Not Indicated	(273) WorkSafeBC refused. Report submission incomplete, required information missing - rehab program not indicated.	J9
275	Disabled From Work Incomplete	(275) WorkSafeBC refused. Report submission incomplete, required information missing - disabled from work not indicated	J8
277	Patient Duration Incomplete	(277) WorkSafeBC refused. Report submission incomplete, required information missing - patient duration.	J7
279	Injury Text Missing	(279) WorkSafeBC refused. Report submission incomplete, required information missing - injury description.	J6
281	Worker Address/City Incomplete	(281) WorkSafeBC refused. Report submission incomplete, required information missing, worker's city and or work location missing.	J5
283	Employer Location Missing	(283) WorkSafeBC refused. Report submission incomplete, required information missing, work location missing.	J1
285	Clinical Info Missing	WorkSafeBC refused. Report submission incomplete, required information missing, clinical information missing.	J4
287	Specify Form Type	(287) WorkSafeBC refused. Report submission invalid, specific reference number invalid or missing.	J3

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316	Duplicate Form Transmission	(316) WorkSafeBC refused. Duplicate form detected.	L2
501	Information Missing. Please Resubmit With Missing Information.	(501) WorkSafeBC information missing. Please resubmit with missing information.	GW
502		Date of Service occurs after invoice date or invoice received date. Please resubmit with correct service date.	
504		Fee Item code could not be found. Please correct fee item code and resubmit.	
505		Item is billable by service provider. Please contact your provider for reimbursement.	
506		Fee item code was not active on date of service; for details contact Health Care Services at 604 232-7787 or toll-free at 1-888-967-5377 (local 7787).	
507	Duplicate Service	(507) WorkSafeBC Duplicate Services. A service was already paid for this date of service. Please do not re-bill.	HW
508	Payee not authorized for Date of Service. Contact Purchasing Services	(508) WorkSafeBC payee not authorized for date of service. For more information contact Purchasing Services Department.	GU
509	Practitioner Number Missing or Not Recognized. Please	(509) WorkSafeBC practitioner number is missing or not recognized. Please add or correct the information on the invoice and resubmit.	L9
510	Practitioner not authorized for Date of Service. Contact	(510) WorkSafeBC practitioner not authorized for date of service. For more information contact Purchasing Services Department.	L1
511	WorkSafeBC Claim Rejected Or Disallowed.	(511) WorkSafeBC claim rejected or disallowed. Do not rebill.	WD
512	Service is not allowed with another service already paid on this date	(512) WorkSafeBC service is not allowed with another service already paid on this date of service. Please refer to the contract.	EP
513	Service Not Entitled on Claim.	(513) WorkSafeBC service is not entitled on claim.	UM
514	Service Is Not Approved or Outside Allowable Entitlement.	(514) WorkSafeBC service is not approved or service is outside allowable entitlement period.	GV
515	Maximum Service Units Entitled Have Already Been Invoiced.	(515) WorkSafeBC the maximum service units entitled have already been invoiced. Contact claim owner for more information.	UL
516	Invoiced Units Reduced to Remaining Approved Units	(516) WorkSafeBC invoiced units reduced to remaining approved units	ET
517	Invoiced Units Reduced to Daily Maximum For Good/Service.	(517) WorkSafeBC invoiced units reduced to daily maximum for good/service.	L3
518	Proof Not Received or Not Accepted.	(518) WorkSafeBC proof was not received or not accepted. Please check contract for proof requirements.	SJ
519	Payee Not Authorized to Provide Good/Service	(519) WorkSafeBC payee is not authorized to provide goods/services for more information contact Purchasing Services Department.	J0
520	Pre-Requisite Not Received or Rejected	(520) WorkSafeBC pre-requisite item not received or rejected. Please check contract for pre-requisite required and your previous billing information.	ER
521	Limit 1 Form 8 Per Claim. Rate Adjusted to Form 11 Fee.	(521) WorkSafeBC limits one Form 8 per claim. Rate adjusted to Form 11 fee.	E2
522	Claim Decision Is Pending.	(522) WorkSafeBC claim decision is pending. Please resubmit when claim status is accepted.	SD

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523	Service Not Allowed With Another Service Already Entitled/Refer To	(523) WorkSafeBC service is not allowed with another service already entitled on this claim. Please refer to contract for contract terms.	SE
524	Daily Maximum for Good/Service Has Already Been Reached	(524) WorkSafeBC daily maximum for good/service has already been reached.	C6
525	Invoiced Units Reduced to Approved Units For Good/Service	(525) WorkSafeBC invoiced units reduced to approved units for good/service.	C7
526	Invoice Date Is Greater Than 90 Days From Date Of Service	(526) WorkSafeBC invoice date is greater than 90 days from date of service.	SF
527	Invoiced Amount Was Adjusted To Contract Rate	(527) WorkSafeBC Invoice Amount Was Adjusted To Contract Rate.	CY
528	Invoiced Amount was Adjusted to WorkSafeBC Fee Schedule	(528) WorkSafeBC invoiced amount was adjusted to WorkSafeBC fee schedule.	C8
529	Incentive Applied for Invoice Submission	(529) WorkSafeBC Incentive Applied For Invoice Submission. Please Refer To The Contract For More Information.	
530	Penalty Applied for Invoice Submission	(530) WorkSafeBC Penalty Applied for Invoice Submission. Please refer to the Contract for more information.	
531	Incentive Applied for Proof Submission	(531) WorkSafeBC incentive applied for proof submission. Please refer to the contract for more information.	CR
532	Penalty Applied for Proof Submission	(532) WorkSafeBC penalty applied for proof submission. Please refer to the contract for more information.	C9
533	Incentive Applied For Proof Timeliness	(533) WorkSafeBC incentive applied for proof timeliness. Please refer to the contract for more information.	L4
534	Penalty Applied For Proof Timeliness	(534) WorkSafeBC Penalty Applied for Proof Timeliness. Please Refer to the Contract for More Information.	
535		Incentive applied for service timeliness. Please refer to contract for more information.	
536	Penalty Applied for Service Timeliness	(536) WorkSafeBC penalty applied for service timeliness. Please refer to contract for more information.	R3
537	PST Not Applicable For Item	PST not applicable for item	
538	GST Not Applicable For Item	GST not applicable for item	
539	Interest Applied	(539) WorkSafeBC interest applied.	L5
540	Overpayment Recovery	(540) WorkSafeBC overpayment recovery.	
541	Claim Could Not Be Matched	(541) WorkSafeBC claim could not be matched.	WB
542	Payee Could Not Be Matched	(542) WorkSafeBC payee could not be matched.	S3
544	Adjusted via Payee/MSP request		
546	Debit Request From Payee		

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551	Payee Not Contracted To Provide Service	(551) WorkSafeBC payee not contracted to provide service.	SX
552	Amount Adjusted To Non Contract Rate	(552) WorkSafeBC Amount Adjusted To Non Contracted Rate.	
553	Invoice Amount Paid	(553) WorkSafeBC invoice amount paid.	V4
554	Invoices Received Date and Time Cannot Be In Future	(554) WorkSafeBC refused. Invoices Received Date and Time Cannot Be In Future.	
555	Invoices Original Amt Cannot Be Negative	(555) WorkSafeBC Invoice Original Amount Cannot Be Negative	
556	Invoice Item Must Be A Debit	(556) WorkSafeBC Invoice Item Must Be a Debit	
557	Invoice Items Create Date and Time Cannot Be In Future	(557) WorkSafeBC Invoice Items Created Date and Time Cannot Be In Future	
558	Invoice Items Created Date and Time Must Be On Or Before Received	(558) WorkSafeBC Invoice Items Created Date and Time Must Be on or Before Received Date and Time	
559	Invoice Items Total Amt Cannot Be Negative	(559) WorkSafeBC Invoice Items Total Amount Cannot Be Negative	
560	Invoice Items Unit Amount Cannot Be Negative	(560) WorkSafeBC Invoice Items Unit Amount Cannot Be Negative	
561	Service Prior To Injury	(561) WorkSafeBC service prior to injury.	WS
562	Amount Adjusted To \$0.00.	(562) WorkSafeBC amount adjusted to \$0.00. Refer to fee schedule or contract.	CZ
563	GST Amount Exceeds Maximum Allowable Amount	(563) WorkSafeBC GST amount exceeds maximum allowable amount.	G3
564	Total Amount Must Be Greater Than Federal Tax Amt	(564) WorkSafeBC total amount must be greater than Federal tax amount.	G7
565	Total Amt Must Be Greater Than Provincial Tax Amt	(565) WorkSafeBC total amount must be greater than Provincial tax amount.	G8
566	PST Amount Exceeds Maximum Allowable Amount	(566) WorkSafeBC PST amount exceeds maximum allowable amount.	G9
567	Payment Amount Reduced To BC Rates	(567) WorkSafeBC payment amount reduced to BC rates	R1
568	HST Not Applicable For Item	(568) WorkSafeBC HST not applicable for item	J2
569	Claim Cannot Be Matched at This Time.	Please Contact Payment Services At 604 276-3085 or 1-888-422-2228.	
570	PST Adjusted		
571	GST Adjusted		
572	HST Adjusted		