

# **Electronic Trading Partner Profile & Transmission Profile – Sender’s Response**

**Return this page to:**

Receiver Name: South Carolina Workers’ Compensation Commission  
Attention: Amanda Underhill  
Address: P.O. Box 1715, Columbia, SC 29202  
Phone: 803-737-5714  
Email: [aunderhill@wcc.sc.gov](mailto:aunderhill@wcc.sc.gov)

**Sender Legal Name** (no abbreviations): \_\_\_\_\_

**Sender ID:** The Federal Employer’s Identification Number of your business entity. This, along with the 9 position Postal Code (Zip+4), will be used to identify a unique trading partner. The Sender ID FEIN and Postal Code should be the same as those that will be used by the partner as the Sender ID in the Header Record of all EDI transmissions from the partner:

**Sender ID – FEIN:** \_\_\_\_\_ **Postal Code (9 digits):** \_\_\_\_\_

**Sender Trading Partner Type** (check all that apply):

- |  |   |
|--|---|
| <input type="checkbox"/> Jurisdiction          | <input type="checkbox"/> Claim Administrator  |
| <input type="checkbox"/> Insurer               | <input type="checkbox"/> Self-Insurer         |
| <input type="checkbox"/> Employer              | <input type="checkbox"/> EDI Service Provider |
| <input type="checkbox"/> Other (specify) _____ |   |

**Physical Address:**

Address Line 1: \_\_\_\_\_  
Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**Mailing Address:**

Address Line 1: \_\_\_\_\_  
Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**Contact Information:**

**Business Contact**

Name:  
Title:  
Phone:  
E-mail:

**Technical Contact**

Name:  
Title:  
Phone:  
E-mail:

**Transaction Information:**

Secure File Transfer Protocol (FTP/SSL)

# Electronic Trading Partner Profile

## SOUTH CAROLINA ELECTRONIC TRANSMISSION PROFILE RECEIVER'S SPECIFICATIONS

### For Trading Partner's Info

Receiver Type: Jurisdiction

Receiver ID - FEIN: 570973850

Postal Code (9 digits): 292021715

#### Transaction Information

##### **CLAIMS R3.0**

Claims FROI (148/R21)

Claims SROI (A49/R22)

#### Acknowledgment Information

R3 Flat File                      AKC

R3 Flat File                      AKC

##### **Coverage POC R2.1**

Coverage PC-1

Coverage PC-2

R2.1 Flat File                      AKP

R2.1 Flat File                      AKP

#### Transmission Frequencies

Available Submission Times

File Processing

Acknowledgement Retrieval Times

Sunday – Saturday (24/7)

Monday – Friday 6 am, 10 am, and 2 pm EST

Monday – Friday 7:30 am, 11:30 am, and 3:30 pm EST  
(May be earlier depending on volume of files/transactions sent)

#### Jurisdiction Approved Transmission Method: SFTP Only

#### Secure File Transfer Protocol (SFTP)

##### **Specifications**

Host URL:

Port:

Login Name:

Password:

\*(login name and Password will be provided upon receipt of this form)

##### **Receiver Requirements**

ftps.wcc.sc.gov

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\* see below

\* see below

SC Contact: South Carolina Workers' Compensation Commission

Attention: Amanda Underhill,

Address: P.O. Box 1715, Columbia, SC 29202-1715

Phone: (803) 737-5714

Email: [aunderhill@wcc.sc.gov](mailto:aunderhill@wcc.sc.gov)