

## MV Trust Deficiency Codes as of July 27, 2020

Description	Detailed Description	Deficiency Type
EXP Doc	Exposure Document for MV, when no SSN and exposed in US OR when JM exposure	DOCS
ILO_or_Medical	ILO or Medical document required	DOCS
Med Rep	Medical report not provided	DOCS
MV-BystanderSOE	Manville Bystander SOE	DOCS
PFT	PFT report not provided	DOCS
Release	Release Affirmed	DOCS
SOE Affid_or_Depo	SOE Affid or Depo not provided or insufficient	DOCS
5 YOE	There must be at least 5 years cumulative exposure to asbestos	POC
ADD	Address when not deceased	POC
Addr_Invalid	Claimant and Representative Address requires street, city, country, and if USA then 5 digits, zip, and state	POC
Disease	Alleged disease not provided	POC
Exp Entry	Exposure information not provided	POC
Exp Site	First exposure must have been before December 31, 1982	POC
GND	Gender of injured party not provided	POC
Invalid Ind	Industry must be updated to a currently active industry	POC
OEM	Occupational Exposure Months	POC
REP ADDR	Representative Address	POC
Rep Info	Representative information not provided	POC
SMK	Smoking history not provided	POC
SOE	SOE	POC
2002 EXP	First exposure must have been before December 31, 1982	Review-Med
B-Reader	The diagnosis must be based on an x-ray reading by a certified b-reader	Review-Med
BIL INT	Bilateral Interstitial Disease	Review-Med
BIL PL	Bilateral Pleural Disease	Review-Med
Bilateral	The disease must be diagnosed in both lungs (bilateral)	Review-Med
CausationLC	Causation Statement for Lung Cancer	Review-Med
CausationOC	Causation Statement for Other Cancer	Review-Med
CausationPL	Causation Statement for Pulmonary Condition (Bilateral Interstitial or Bilateral Pleural)	Review-Med

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Description	Detailed Description	Deficiency Type
ILO 1/0	The profusion must be 1/0 or greater or not provided	Review-Med
ILO 2/1	The profusion must be 2/1 or greater.	Review-Med
IP Exam INT	If the claimant is living, there must be a report from an in-person physical exam confirming a diagnosis of interstitial lung disease.	Review-Med
IP Exam PLU	If the claimant is living, there must be a report from an in-person physical exam confirming a diagnosis of pleural disease.	Review-Med
LAT	There must be at least 10 years between the year of first exposure and the date of diagnosis.	Review-Med
MESO	Malignant Mesothelioma	Review-Med
MV 5 YRS EXP	There must be at least 5 years cumulative exposure to asbestos prior to December 31, 1982.	Review-Med
MV OEM	Occupational exposure to Manville asbestos products prior to December 31, 1982	Review-Med
PFT Level	PFT report must meet TDP requirements	Review-Med
PLU B2 or >	The report must confirm that the level of chest wall pleural thickening is B2 or greater in both lungs.	Review-Med
PRI LC	Primary Lung Cancer	Review-Med
PRI OC	Primary Other Cancer	Review-Med
PROF 1/0	The profusion must be 1/0 or greater	Review-Med
SIC	The date of diagnosis must be after the settlement date of the non-malignancy claim.	Review-Med
SOE CDT	There must be an acceptable occupation and number of years to qualify for SOE.	Review-Med
SOL	Applicable Statute of Limitations must be met.	Review-Med