New Mexico Health Care Authority
Medical Assistance Division
Conduent State Healthcare, LLC

CONDUENT

HEALTH CARE AUTHORITY

Medicaid Benefit Eligibility/Response Companion Guide

New Mexico Health Care Authority
MMISR Financial Services Project

Version 1.1

Revision History

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1.0	08/06/2025	Approved and published version.	Conduent	Kristie Abraham
1.1	02/19/2026	Removed Ramp Management information and update Trading partner registration and agreement link in section 3.1 and 9	Yoga Rajendran	John Padilla via email on 3/4/2026

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Disclosure Statement

This companion guide has been created for use in conjunction with the ASC *(Accredited Standards Committee)* X12 TR3s. It should not be considered a replacement but rather used as an additional source of information. The companion guide contains data clarifications derived from specific business rules that apply exclusively to Medicaid processing for the State of New Mexico. The guide also includes useful information about sending and receiving data to and from Conduent Electronic Data Interchange (EDI) Solutions, Inc.

Submitters are therefore encouraged to check the New Mexico Health Care Authority (HCA) Medical Assistance Division (MAD) website periodically for updates to the companion guides at the following website: https://www.hca.nm.gov/providers/hipaa-standard-companion-guides/.

Preface

This companion guide to the *v5010 ASC X12N Implementation Guides - Technical Report Type 3 (TR3)* and associated errata adopted under HIPAA, clarifies, and specifies the data content when exchanging electronically with the New Mexico Medicaid program. Transmissions based on this companion guide, used in tandem with the *v5010 ASC X12N Implementation Guides (TR3*), are compliant with both ASC X12N syntax and those guides. This companion guide is intended to convey information that is within the framework of the *v5010 ASC X12N Implementation Guides (TR3*) adopted for use under HIPAA. The companion guide is not intended to convey information that in any way exceeds the requirements or usages of data expressed in the *v5010 ASC X12N Implementation Guides (TR3)*.

Disclaimer

For accurate and precise New Mexico Medicaid, eligibility, and other New Mexico Medicaid specific information the reader or user of this guide is directed to:

- New Mexico Health Insurance Portability and Accountability Act (HIPAA) Helpdesk via email at: HIPAA.DeskNM@hca.nm.gov or telephone 800-299-7304.
- Provider Relations Call Center at: 800-299-7304
- New Mexico Health Care Authority (HCA) Medical Assistance Division (MAD) at: https://www.hca.nm.gov

This guide attempts to provide the best information available at the time of publication, however, that information may not be the most current or accurate at the time the guide is being utilized by the reader or user.

1. Introduction

Conduent EDI Solutions, Inc., a leader in healthcare technology, provides Electronic Data Interchange (EDI) clearing house services to providers enrolled with various insurance companies and in contracted healthcare plans. This document outlines the procedures necessary for engaging EDI with Conduent EDI and provides specific data clarifications where applicable. Our electronic transactions acquisition services provide an array of tools that allow you to:

- Easily submit all your transactions to one source.
- Submit transactions twenty-four hours a day, seven days a week.
- Receive confirmation of receipt of each file transferred.
- Receive remittance notification from health care plans on a regular basis.

As an EDI Gateway Service, we provide connectivity to various healthcare plans and states where Conduent is the fiscal agent, third-party administrator, or contracted clearinghouse. Healthcare plans that participate with Conduent EDI Solutions, Inc. are referred to as payers. Transactions are accepted electronically into Conduent data center and are processed through the Conduent State Healthcare Clearinghouse (SHCH).

The Conduent SHCH provides connectivity for the flow of medical information and data between medical providers, facilities, vendors, claim payment agencies, and other clearinghouses and the Front-end Online Transaction Processor (OLTP). Beyond the receipt and delivery of this data, Conduent SHCH provides translation to and from ANSI ASC X12N standard formats.

The 270/271 transaction data will be submitted to the Conduent SHCH for processing. Conduent SHCH validates submission of ANSI X12N format(s). TA1 report is generated to verify data at the interchange level and confirms whether the envelope has been accepted or rejected due to issues such as corrupt or invalid data. If the file contains syntactical error(s), the segment(s) and elements(s) where the error(s) occurred will be reported in a X12 N 999 acknowledgement.

1.1. Scope

This companion guide is intended to be used by Trading Partners for the submission of the X12N 270/271 transaction to Conduent EDI Solutions. This guide is to be used in conjunction with the *ANSI ASC X12N 5010 National Implementation Guide*. The companion guide contains data clarifications derived from specific business rules that apply exclusively to claims processing for NM Medicaid. This companion guide is subject to change.

1.2. Overview

This document provides the following information for NM Medicaid Trading Partners:

- Testing expectations
- Connectivity methods for transaction transmission and associated security standards

- NM Medicaid data requirements
- Details on responses/acknowledgements
- X12 270/271 transaction data clarifications

1.3. References

This Companion Guide is intended for trading partner use in conjunction with the ANSI ASC X12N National Consolidated Guides (TR3), as adopted under HIPAA. These are available at: https://x12.org/products/technical-reports.

Table 1: Reference Materials

ANSI ASC 5010 Implementation Guides	X12.org
EDI Online	https://edionline.portal.conduent.com/EDIOnline/redirect.action
HCA FAQ's	https://www.hca.nm.gov/providers/hipaa-standard-companion-guides/
NM Helpdesk	HIPAA.DeskNM@hca.nm.gov
EDI MOVEit	https://pbmazuremoveit.services.conduent.com
Trading Partner agreement Form	https://www.hca.nm.gov/providers/hipaa-standard-companion-guides/

2. Getting Started

2.1. Working with New Mexico Medicaid

Any entity sending electronic transmissions to Conduent EDI Solutions for processing where reports and responses will be delivered must complete an EDI enrollment package. This package provides Conduent EDI Solutions the information necessary to assign a Logon Name, Logon ID, and Trading Partner ID, which are required to submit electronic transmissions.

2.2. Trading Partner Registration

- HCA requires any provider exchanging electronic data with New Mexico Medicaid to be enrolled in the program and should be approved for the submission of X12 transaction sets.
- New Mexico Medicaid Enrollment Forms and instructions are available at the New Mexico Medicaid Portal (conduent.com)
- Successful enrollment in New Mexico Medicaid is required before proceeding with Conduent EDI.
- HCA makes available companion guides and enrollment packages for download via the web at: https://www.hca.nm.gov/providers/hipaa-standard-companion-guides/

2.3. Certification and Testing Overview

Conduent EDI Solutions does not require certification of submitters and their transactions; however, we do require some minimal transaction testing.

Completion of the testing process must occur prior to electronic submission of production data to Conduent EDI Solutions. Assistance from Conduent EDI Business Analysts is available throughout this process. Each test transmission is inspected thoroughly to ensure no format errors are present. Testing is conducted to verify the integrity of the format, not the integrity of the data; however, to simulate a production environment, we request that the user send real transmission data. The number of test transmissions required depends on the number of format errors on a transmission and the relative severity of these errors. Additional testing may be required in the future to verify any changes made to Conduent's system. Also, changes to the X12N formats may require additional testing.

3. Testing with the Payer

Vendors, Billing Agents, Clearinghouses, and Providers who have created their own electronic claims submission software are required to engage in testing with Conduent EDI Solutions. These entities will validate their applications using Companion Guides along with the National *ANSI ASC X12N Implementation Guides*. These guides ensure that the software meets X12N standards and payer business edit requirements. The test file should first be validated in UAT Conduent EDI solution. Successful completion of both testing processes is required before a submitter will be approved for production.

Each test transmission is validated to ensure no format errors are present. Testing is conducted to verify the integrity of the format not the integrity of the data. However, to simulate a production environment, we request that test files contain realistic healthcare transaction data. The number of test transmissions required depends on the number of format errors in a transmission and the relative severity of these errors. Additional testing may be required in the future to verify any changes made to Conduent's system or HIPAA mandated changes.

3.1. Conduent EDI Trading Partner Testing Procedures

1. Complete a new Trading Partner Agreement (TPA) for 5010 transactions.
   - The form is available on the New Mexico Medicaid Website at: https://www.hca.nm.gov/providers/hipaa-standard-companion-guides/
   - Complete the form and send to HIPAA.DeskNM@hca.nm.gov.
2. Once the New Mexico HIPAA Helpdesk receives the signed TPA, they will enter the information into the Trading Partner Management System (TPMS) and provide details on submission of the 270-271 transactions for testing.
3. The user will be granted access to the Conduent EDI file submission portal to perform HIPAA transaction format on the test files.
   - EDI Online, which is a streamlined application for submitting files, and
   - EDI DMZ, an SFTP connection, which allows automated delivery and receipt of files.
4. Validate the files in the below Conduent EDI Solution
   - UAT EDI Online application- https://acttnow-uat.portal.conduent.com/EDIOnline/redirect.action or
   - UAT MOVEit DMZ/Transfer-https://nonprodazuresftp.services.conduent.com .
   - The files only need to pass SNIP levels 1 and 2 without errors. (That is, if the files have a SNIP level 5 error, or a SNIP level 1 warning (not error), then the file is considered passed for 5010 validations.)
   - Submit the files in UAT EDI Online or EDI DMZ/Transfer first to ensure they pass 5010 validations.
5. Submit three files of at least 10 valid claims each for each transaction type (270) the user wishes to submit into production.

6. Once the user has submitted three files of at least 10 valid claims each, contact the NM HIPAA Helpdesk (HIPAA.DeskNM@hca.nm.gov) to let them know the user is ready to have the files reviewed by the State.
7. The claims will be reviewed by the State and once approved, permission will be granted to submit 5010 version 270 claims to the production system.

3.2. Tracking Transmission/Production Problems

Please have the following information available when calling the NM HIPAA Helpdesk (800-299-7304 or HIPAA.DeskNM@hca.nm.gov) regarding transmission and production issues.

- **Trading Partner ID**: The Trading Partner ID is NM HIPPA Helpdesk key to accessing the trading partner information. Please have this number available each time the user contacts the NM HIPAA Helpdesk or 1-800-299-7304.
- **Logon Name and Logon User ID**: These allow asynchronous Trading Partners access to the host system for claims submission. The NM HIPAA Helpdesk uses this information to reference the submitted data.
- **Submitter ID**: The user should use their Conduent EDI Solutions submitter ID number in conjunction with the software application to transmit files to Conduent EDI Solutions.

4. Connectivity with the Payer(s)/Communications

This section describes the process for submitting HIPAA X12N transactions, along with various submission methods, security requirements, and exception handling procedures.

4.1. Process Flows

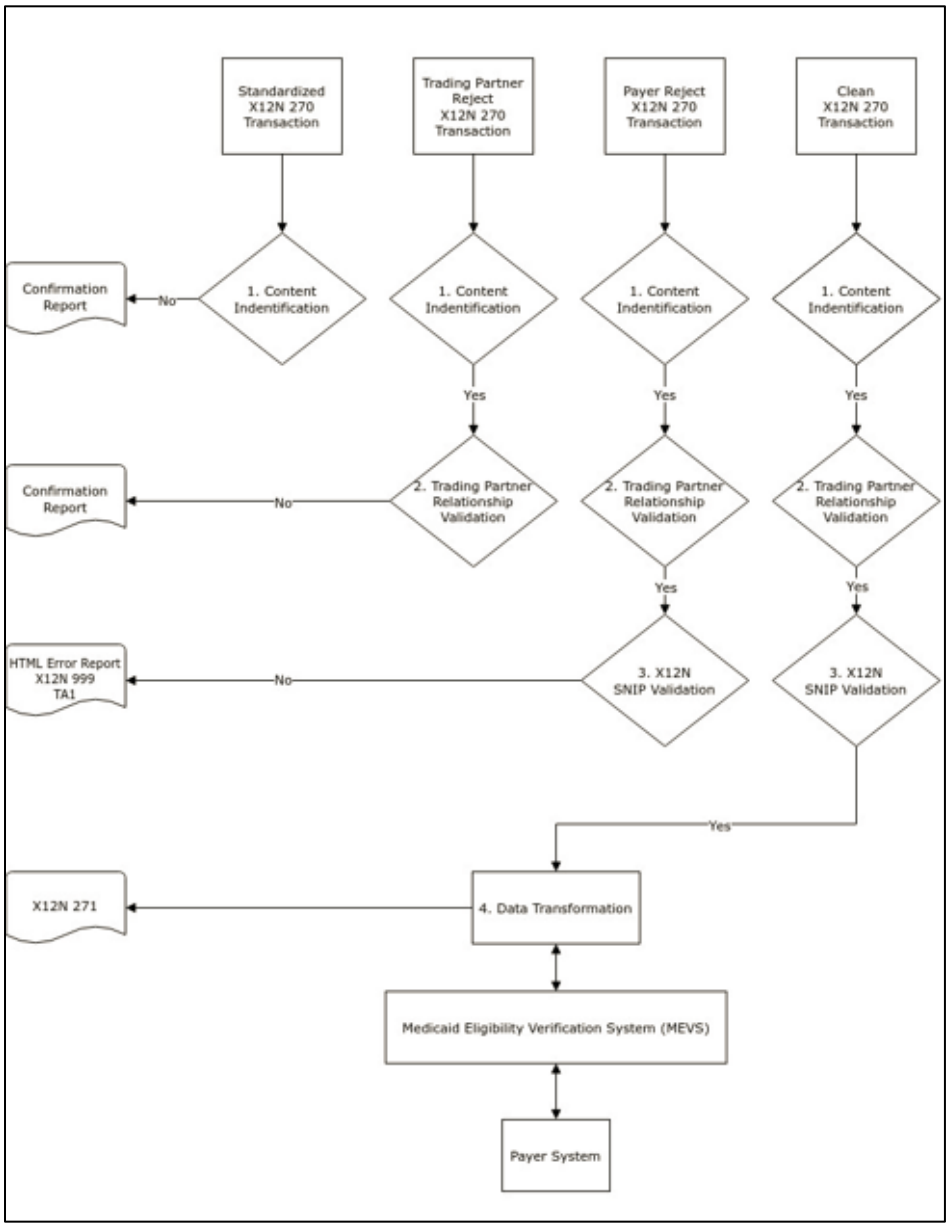


Figure 1: Editing and Validation Flow Diagram

LEGEND:

1. **Content Identification:** The process starts with four types of X12N 270-271 transactions. Each type goes through a "Content Identification" check. If the content does not pass the identification check, a TA1 Report is generated, and the process stops for that transaction.

• Standardized X12N 270 Transaction • Trading Partner Reject X12N 270 Transaction	• Payer Reject X12N 270 Transaction • Clean X12N 270 Transaction

2. **Trading Partner Relationship Validation:** The trading partner information is validated. If the trading partner information is invalid, a TA1 (Interchange Acknowledgement) will be returned to the submitter. If the trading partner relationship is valid, the data will pass for X12N syntax validation.
3. **X12N SNIP 1&2 Validation:** A determination will be made as to whether the data is ANSI ASC X12N. A X12 N 999 (Implementation Acknowledgement) will be returned to the submitter. The X12 N 999 contains ACCEPT information. If the file contained syntactical errors, the segment(s) and element(s) where the error(s) occurred will be reported. If the data passes X12N SNIP 1 and 2 validations, it is then sent to the adjudication system.

4.2. Transmission Administrative Procedures

When file transmission or technical production issues occur, which could require the re-submission of files, please contact the NM HIPAA helpdesk at **1 (800)-299-7304 or by email at HIPAA.DeskNM@hca.nm.gov.**

Note: The Inbound/Outbound File Name must not exceed 100 characters including file extension, spaces and underscore.

4.3. Communication Protocol Specifications

We offer the following transmission methods for Trading Partners:

- EDI Online
- EDI DMZ/Transfer (SFTP)
- SOAP/MIME channel

Transaction transmission is available twenty-four hours a day, seven days a week. This availability is subject to scheduled and unscheduled maintenance downtime. It is an operational policy to schedule preventative maintenance periods on weekends whenever possible.

4.3.1. EDI Online

Conduent EDI Online tool provides healthcare providers the ability to conduct business electronically with Conduent EDI.

EDI Online capability allows users to:

- Submit 5010 270 X12 transactions.
- Retrieve responses for the transactions including 999s, online confirmation reports.

Access to the site for New Mexico Medicaid Trading Partners is administered through the New Mexico HIPAA Helpdesk (HIPAA.DeskNM@hca.nm.gov). If you need further information about EDI Online, please contact the New Mexico HIPAA Helpdesk.

4.3.1.1. Sending X12 Files Through the EDI Gateway

To get started, access the Conduent EDI Login page:
https://edionline.portal.conduent.com/EDIOnline/redirect.action

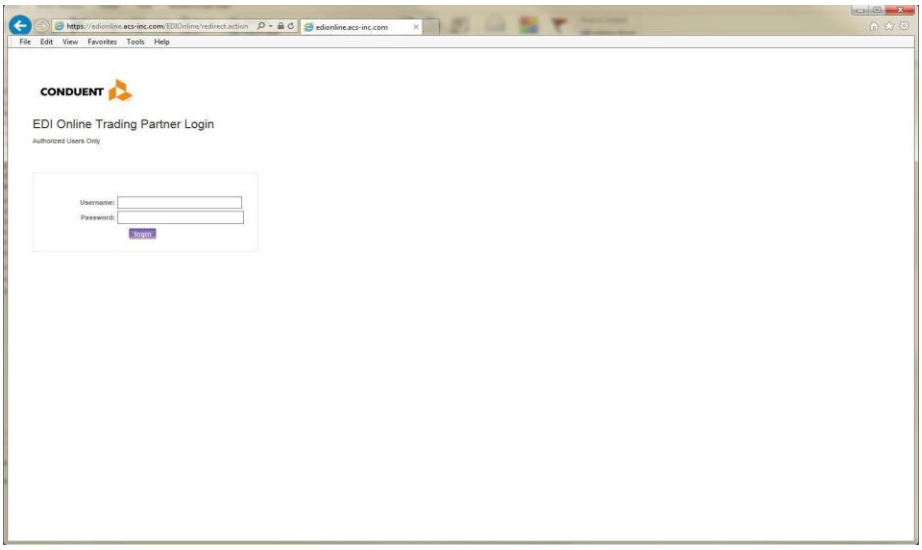


Figure 2: Conduent EDI Login Page

Enter the TPMS username and password that was assigned when the user enrolled for EDI services and click the Log In button.

Once the user logs in successfully, the next window confirms the login information was correct. To submit files, click on **Submit Files** button.

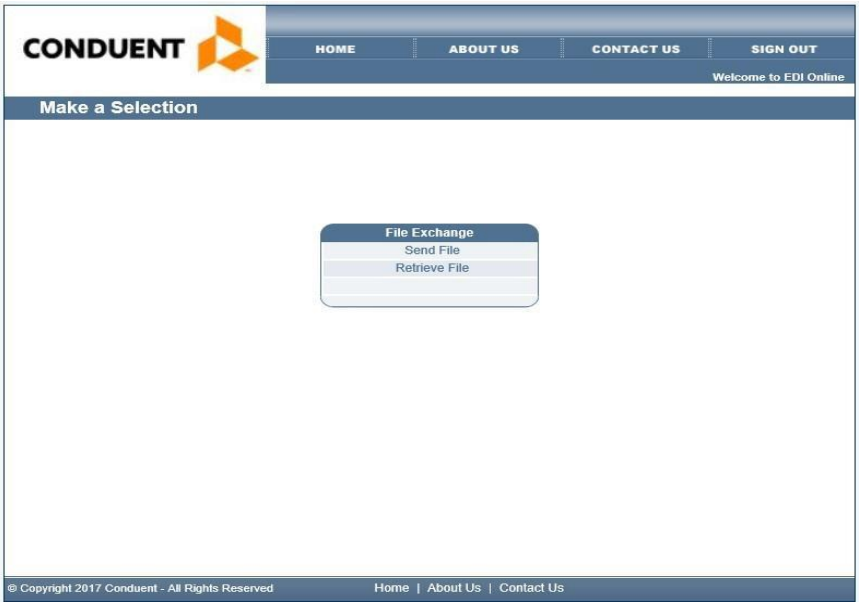


Figure 3: File Submission Page

The next window prompts the user to navigate to the location of the file to upload using the **Browse** button.



Figure 4: File Selection Page

Once the user uses the Browse button to locate the file, click the **Submit** button.

EDI Online will return a window stating that the file was successfully submitted. There is a link to view the confirmation report. The user can either click the link or click on the menu item **Retrieve Files**.

4.3.2. EDI MOVEit DMZ/Transfer

MOVEit DMZ/Transfer is appropriate for submitters of large transaction files. MOVEit DMZ/Transfer is a software product that transports data via secure FTP across the Internet.

There are two methods for using MOVEit DMZ/Transfer:

1. Uploading files through a secure website https://pbmazuremoveit.services.conduent.com.
2. Sending and receiving files via Secure FTP client.

4.3.3. . SOAP/MIME Channel

HTTP MIME/SOAP WSDL are CAQH (Council for Affordable Quality HealthCare) compliant safe harbor channels. SOAP WSDL is implemented as a SOAP Web Service and HTTP MIME as a RESTFUL Web Service. Trading partners can use these web services to submit batch and real time transactions, retrieve the acknowledgements and responses, etc. These channels are secured by a username and password through SSL communication.

4.4. Passwords

Trading partners are assigned a **Logon Name** and **Logon User ID** during the enrollment process with NM Medicaid. Login User IDs (passwords) can be up to 50 characters.

5. Contact Information

Access to the site for New Mexico Medicaid Trading Partners is administered through the NM HCA HIPAA Helpdesk (HIPAA.DeskNM@hca.nm.gov).

5.1. EDI Customer Service/Technical Assistance

The NM HIPAA Helpdesk assists users with questions about electronic submission. The NM HIPAA Helpdesk is the provider's contact point. The NM HIPAA Helpdesk is available to all New Mexico Providers Monday through Friday from 8:00 a.m. to 5:00 p.m. MT at **1-(800)-299-7304 or by email at HIPAA.DeskNM@hca.nm.gov.**

The NMHIPAA Helpdesk:

- Provides information on available services.
- Enrolls users for electronic submission.
- Verifies receipt of electronic transmissions.
- Provides technical assistance to users who are experiencing transmission difficulties.

6. Control Segments/Envelopes

This section contains data clarifications. The clarifications include:

- Identifiers to use when a national standard has not been adopted.
- Parameters in the implementation guide provide options.

Many of the data elements included in the companion guides are business requirements and are not standardization-required elements. The inclusion of a business-required data field, as defined by this companion guide, may aid in the delivery of a positive response.

6.1. ISA-IEA

Conduent EDI Solutions will read the Interchange Control Segments to validate the Interchange Envelope of each ASC X12 file received for processing. If the Interchange Envelope is invalid, the trading partner will receive a TA1 Interchange Acknowledgement. In the event a TA1 is generated, the TA1 will be delivered to the Trading Partner Mailbox. Table 2 ISA-IEA table provides the sender and receiver codes, authorization, and delimiter information.

Table 2: ISA-IEA Segment

Loop	Segment	Data Element	Description
Header	ISA	01	The value to be used 00.
Header	ISA	03	The value to be used 00.
Header	ISA	05	The value to be used ZZ (Mutually Defined).
Header	ISA	06	You must enter the Trading Partner ID provided during the enrollment process, which is different than the previous 4010 Trading Partner ID. Example: 123456 followed by spaces to complete the 15-digit element.
Header	ISA	07	The value to be used ZZ (Mutually Defined).
Header	ISA	08	The value to be entered is 100000 followed by spaces to complete the 15-digit element.
Header	ISA	09	Expected date in YYMMDD format.
Header	ISA	10	Expected time in HHMM format.

Loop	Segment	Data Element	Description
Header	ISA	15	Use one of the following values: T = Test data P = Production data

6.2. GS-GE

Conduent EDI Solutions permits Trading Partners to submit single or multiple functional groups within an X12 file. If the X12 file contains multiple functional groups, Conduent EDI will split a file containing multiple functional groups into several files for processing. As a result, the Trading Partner will receive multiple X12C 999 Implementation Acknowledgments.

Table 3: GS-GE Segment

Loop	Segment	Data Element	Description
Header	GS	02	The user must enter the Trading Partner ID provided during the enrollment process. The value in this data element should mirror that of ISA06 except for the trailing spaces. Example: 123456
Header	GS	03	Enter 77048
Header	GS	04	Expected date in CCYYMMDD format.
Header	GS	05	Expected time in HHMM or HHMMSS format.
Header	GS	08	The value to be used is 005010X212.

6.3. ST-SE

Conduent EDI Solutions will require a unique Transaction Set Control Number in the ST02. The ST02 value should match the SE02 value. Should a file contain multiple ST to SE Transaction Sets, each transaction set control number may not be duplicated within the same interchange (ISA to IEA).

There are no set limits on the number of batches a trading partner can submit in a day or in the file. It is generally recommended to keep the request small and limit transaction sets to 999 requests per ST-SE group.

Table 4: ST-SE Segment

Loop	Segment	Data Element	Description
Functional Group	ST	02	Refer to the X12 TR3 Guide.
Functional Group	SE	02	Refer to the X12 TR3 Guide.

7. Payer-Specific Business Rules and Limitations

To promote efficient, accurate electronic transaction processing, please note:

- Each user is assigned a Conduent EDI Solutions Trading Partner ID: 6-digits long.
- Logon Name (system generated): 9-12-characters long.
- Logon User ID (password) system generated: up to 50 characters long.
- Conduent EDI Solutions Submitter ID: 5-digits long.
- All dates are in the CCYYMMDD format within the transaction set(ST-SE).
- All date/times are in the CCYYMMDDHHMM format within the transaction set(ST-SE).
- The same phone number will be used for transmitting tests and production.
- New Mexico Medicaid Provider ID: 8-digits long.
- The Receiver ID for New Mexico is 100000 and the Payer ID for New Mexico is 77048.
- The Trading Partner Agreement determines where reports and responses will be delivered.

8. Acknowledgements and/or Reports

8.1. Acknowledgements

HIPAA enabled the healthcare community to standardize transactions, front-end edits, and the corresponding acceptance/rejection reports. These reports ensure precision in EDI transaction format syntax and adherence to the transaction implementation guide. The type of report generated depends on the level of the invalid edit.

Each transaction contains multiple levels where edits may occur. The level at which an error is detected determines whether an entire batch or a single claim is rejected. The following three headings explain these levels in detail:

- Interchange Level Syntax Results and TA1 Rejection Report.
- Transaction Set Level Syntax Results and X12N 999 Rejection.
- Retrieving Error Reports.

The levels and their affiliated acceptance/rejection reports are discussed on the following pages.

8.2. Report Inventory

8.2.1. Interchange Level Syntax Results and TA1 Rejection Report

Interchange or TA1 edits verify the ISA, GS, GE, and IEA level segments and their data content, which include header and footer batch information, and any X12 syntax error at this level will result in the entire transaction being rejected, with these rejections reported on TA1.

8.2.2. TA1-Interchange Acknowledgement

A TA1 is an Interchange Acknowledgement segment used to report receipt of individual interchange envelopes. An interchange envelope contains the sender, receiver, and data type information within the header. TA1 reports the syntactical analysis of the interchange header and trailer. If invalid (e.g., the data is corrupt or the trading partner relationship does not exist within the Conduent system) the interchange will be rejected and a TA1, along with the data, will be forwarded to the Conduent EDI Support Unit for referencing purposes.

Refer to National Electronic Data Interchange Implementation Guide, Health Care Claim, 270/271 transaction, under Sections A and B.

- **ISA** Interchange Control Header: contains sender information.
- **GS** Functional Group Header: starts a group of related transaction sets.
- **GE** Functional Group Trailer: ends a group of related transaction sets.
- **IEA** Interchange Control Trailer: counts total number of functional groups within a batch.

8.2.3. Transaction Set Level Syntax Results and 999 Rejection Report

This level of edit is enforced by transaction set level syntax problems for all transactions within each functional group. These edits check the ST and SE level segments and the data content within these segments. These segments consist of the entire detailed information within a transaction. Any X12 syntax error that occurs at this level will result in the entire transaction being rejected. However, if the functional group consists of additional transactions without errors, these will be processed. The rejections are reported on X12 N 999.

8.2.4. X12 N 999-Implementation Acknowledgement

Conduent SHCH validates submission of ANSI ASC X12N format(s). An X12 N 999, or Implementation Acknowledgement, is generated when an EDI file, e.g., an ANSI ASC X12N file that has passed the header and trailer check, passes through the clearinghouse. This report contains Accept or Reject information; if the file contains syntactical errors, the segment(s) and element(s) where the error(s) occurred will be reported. If errors are found, a rejected or partial ASC X12C 999 will be generated. If errors are not found, an accepted ASC X12C 999 will be generated. If the Trading Partner receives a rejected or partial 999, the Trading Partner will review, correct and resubmit. For additional information regarding the ASC X12C 999, please refer to the ASC X12C 999 (v005010X231A1 TR3) Implementation Guide. This method of acknowledgement is required by the Trading Partner Agreement between Conduent EDI Solutions and the Trading Partners.

The examples below show an accepted and a rejected X12 N 999.



Figure 5: Accepted X12N 999 Example



Figure 6: Rejected X12N 999 Example

Refer to *National Electronic Data Interchange Implementation Guide*, Health Care Claim, 270/271, under sections “A” and “B”.

The X12 N 999 edits verify the **ST** and **SE** level segments and the segment data content within these segments.

- ST Transaction Set Header: starts a transaction set.
- SE Transaction Set Trailer: ends a transaction set.

If an error is identified within the Submitter, Receiver, or Provider loops, the entire Transaction Set (ST and SE segments and all segments in between) is rejected with an ASC X12C 999. However, if the functional group consists of additional transactions without errors, the other transactions will be processed.

8.3. Retrieving Confirmation Reports

1. Once the user clicks on the Confirmation Report link (or Retrieve Files), the next window will display a **Reports** link under the heading **Confirmation Reports**. Click on the link to navigate to the confirmation report.

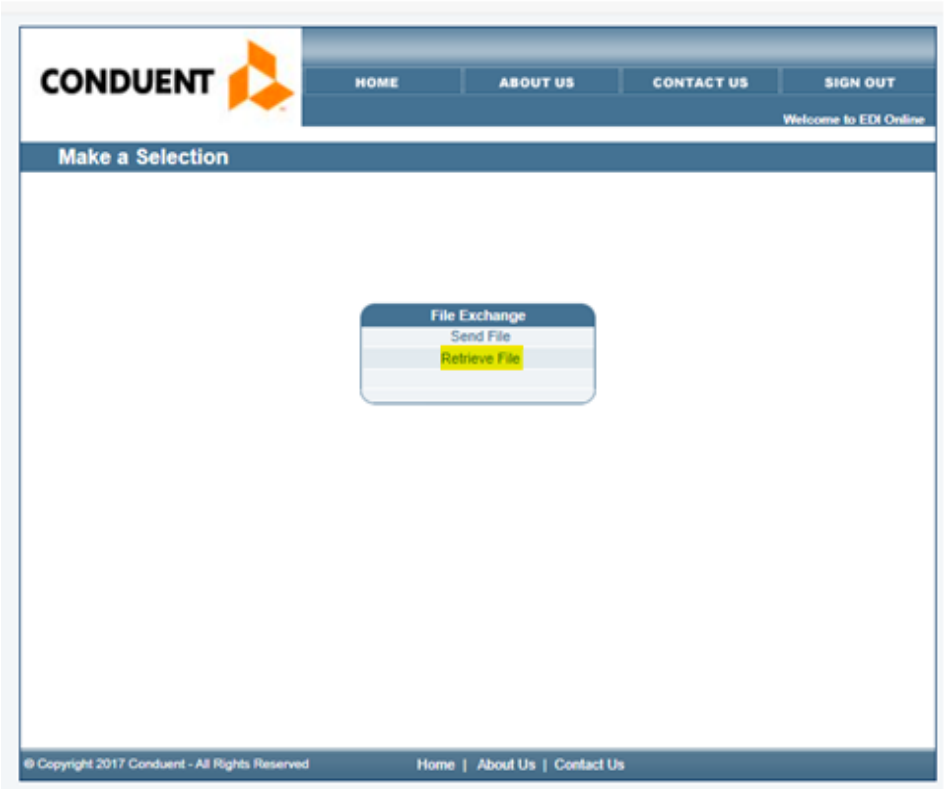


Figure 7: Confirmation Report Retrieval Page

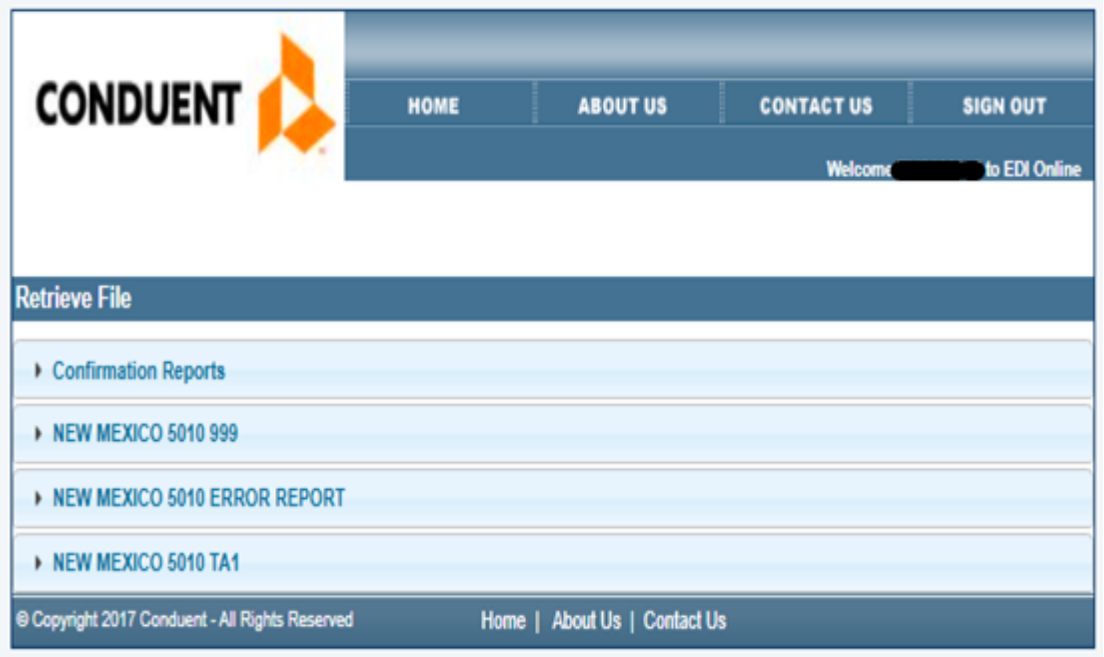


Figure 8: File Retrieval Selection

2. The available confirmation report(s) will be displayed in the next window.

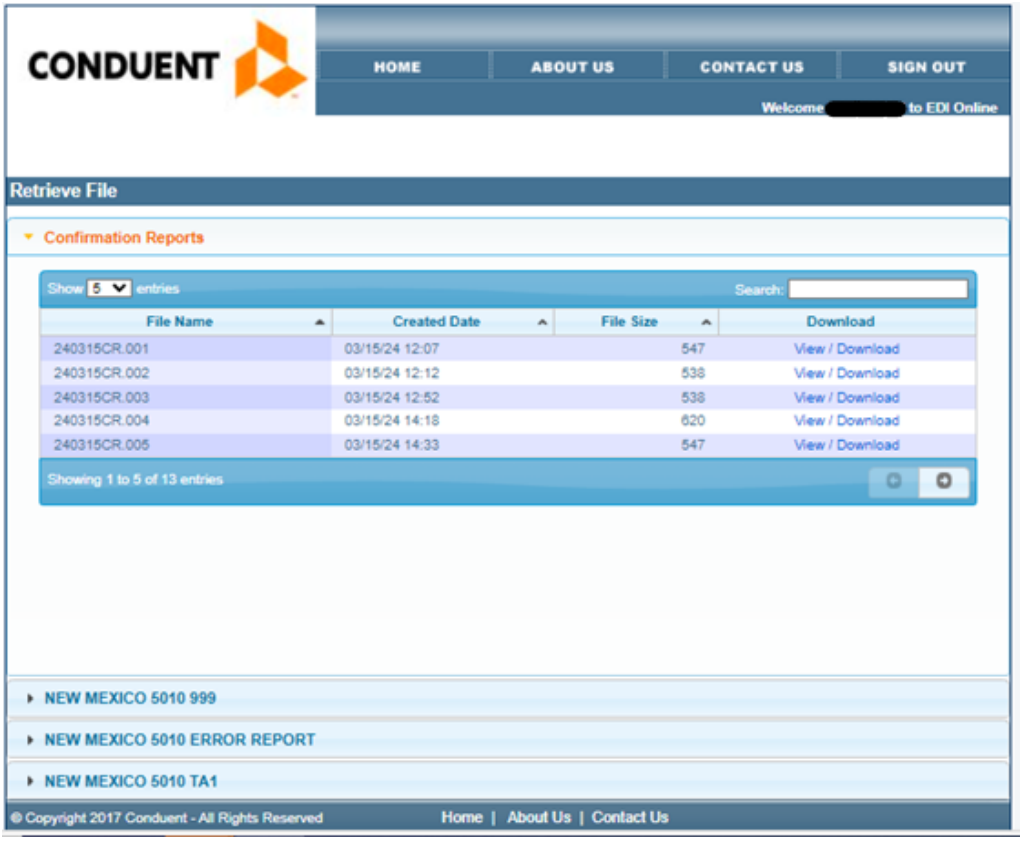


Figure 9: View Confirmation Reports

Note: The reports in the EDI online will be available for 60 days. Older reports are available upon request.

3. From the above screenshot, Conduent can see the date of the last file submission. Ensure that this date matches the date the user submitted the file.
4. Sometimes, there is a lag of up to 15 minutes before the report appears in the list.
   a. If the user doesn't see a report for the submission, then refresh the screen.
   b. If the user submits multiple files in one day, the sequence number in the file name will be increased by one.
5. Click on the report.
   a. The user can view the report.
   b. The user can download the report.
   c. Once the file is saved to a desired location, the user will be prompted to open the file.
   d. The user can use Notepad to open the report.
6. If the user does not receive a confirmation report after 15 minutes, contact the New Mexico HIPAA Helpdesk to report the delay. The following is an example of a confirmation report.

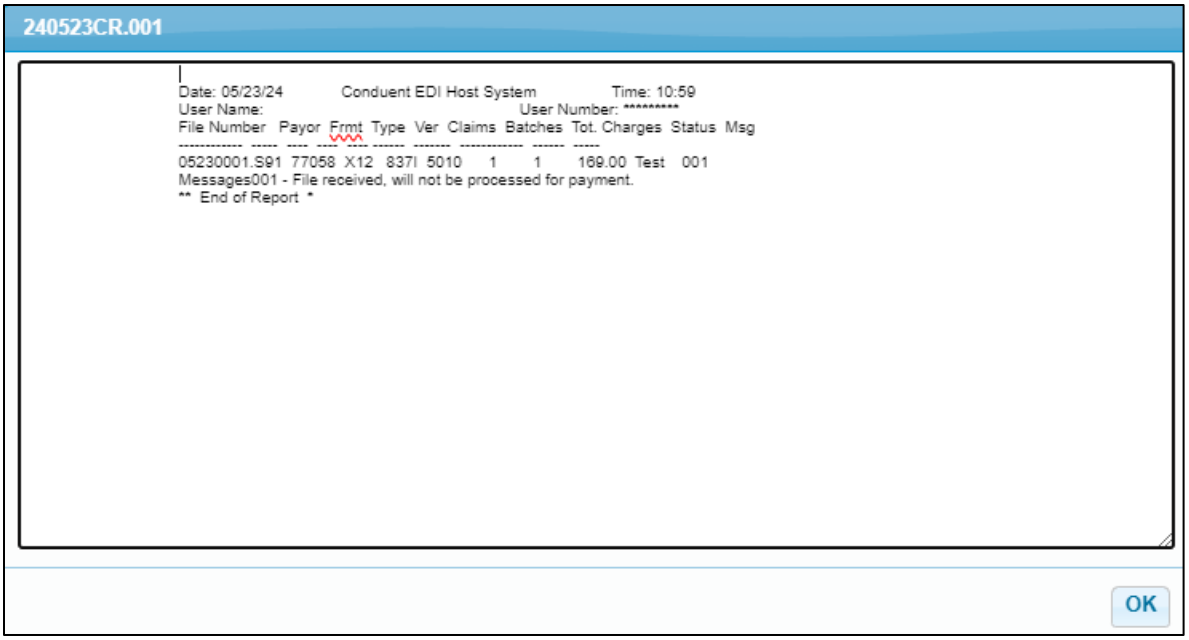


Figure 10: Confirmation Report Example

7. The message, **Messages001 – File received** indicates that the file upload was successful. The message states that it will not be processed for payment because the file that uploaded was a test file.

8.4. Retrieving HTML Confirmation Report and TA1 Files

Follow the same procedures as above.

9. Trading Partner Agreements

Conduent EDI Solutions requires trading partner enrollment, which includes a trading partner agreement, for testing and submission of X12N 270-271 transactions through Conduent processing gateway. To fulfill the enrollment requirements, Trading Partners must complete and submit a Trading Partner Signature Agreement Form with an original signature. All enrollment instructions must be followed carefully, and the signed Agreement Form, along with any other required documentation, should be mailed to the Conduent NM Medicaid Fiscal Agent to complete the application process. The trading partner agreement also determines where reports and responses will be delivered.

The NM Medicaid trading partner agreement form is available at https://www.hca.nm.gov/providers/hipaa-standard-companion-guides/

Trading Partners

An EDI Trading Partner is defined as any payer customer (provider, billing service, software vendor, employer group, financial institution, etc.) that transmits to, or receives electronic data from the payer.

10. Transaction-Specific Information (Version 5010)

This section contains data clarifications. The clarifications include:

- Identifiers to use when a national standard has not been adopted.
- Parameters in the implementation guide that provide options.

10.1. 270 Member Eligibility Inquiry

When testing, please limit the number of inquiries to 10-20 per file. In production, please limit the number of inquiries to 99 per file.

270 Member Eligibility Timeframe for Providers

- Provider type code 201 – 3 years retro
- Provider type code 221 – 7 years retro
- All Other Providers – 1 year retro

10.2. 270 Member Eligibility Access Key

Providers can submit inquiries using one of the following access keys:

- Client ID
- Client Social Security Number (SSN) and Date of Birth
- Client Last Name, Gender, Date of Birth
- Client SSN and Last Name

Any inquiry by name must contain at least 3 characters of the last name. If the last name is shorter than 3 characters, it can't be used for an inquiry method requiring name.

10.3. Transaction Size

Conduent EDI Solutions follows the industry standards and recommendations contained in the ANSI ASC Consolidated Guide. Currently this guide recommends that trading partners limit the size of the transaction (ST-SE envelope) to a maximum of 5000 CLM segments

10.4. Data Clarifications

This companion guide for the ANSI ASC Consolidated 270/271 Healthcare Claim transaction has been created for use in conjunction with the combined consolidated guide. It should not be considered a replacement for the consolidated guide but rather used as an additional source of information.

10.5. 270/271

Table 5: 270 Member Eligibility Inquiry

Loop	Segment	Data Element	Description
Header	BHT	06	The Spend Down functionality of the 270 will not be supported.
2100A	NM1	03	Name Last or Organization Name NM Medicaid
2100A	NM1	09	Identification Code 77048
2100C	General Note		A maximum of 99 subscriber loops per transaction can be processed in batch mode
2100C	DTP	01	Please use 291 (Eligibility date)
2100C	DTP	02	If this date is not submitted, the date in BHT04 will be used to check eligibility.
2100C	DTP	03	If a date range of greater than one day is submitted, the first date will be utilized as the from and to date, check for client eligibility. If dates are omitted, the date in BHT-04 will be used.
2110C	EQ	01	Conduent allows for generic or explicit eligibility requests. If an inquiry is submitted with a Service Type Code other than 30, a generic response will be returned.

Table 6: 271 Member Eligibility Response

Loop	Segment	Data Element	Comments
Envelope	ISA	05	ZZ
Envelope	ISA	06	100000
Envelope	ISA	07	ZZ
Envelope	ISA	08	Trading Partner ID assigned by New Mexico HIPPA Helpdesk.
Envelope	GS	02	77048
Envelope	GS	03	Trading Partner ID assigned by New Mexico HIPPA Helpdesk
Header	BHT	02	Transaction set purpose code. 11 = Response
2100A	NM1	01	Entity Identifier Code PR.
2100A	NM1	09	Identification Code 77048.
2100C	NM1	03	The name from the NM MMISR will overlay the name sent in on the 270 requests. Please validate this name against the inquiry.

Loop	Segment	Data Element	Comments
2100C	NM1	04	The name from the NM MMISR will overlay the name sent in on the 270 requests. Please validate this name against the inquiry.
2100C	NM1	05	The name from the NM MMISR will overlay the name sent in on the 270 requests. Validate this name against the inquiry.
2100C	AAA	04	Follow-Up Action Code NM CMdS values: C, Please Correct and Resubmit N Resubmission Not Allowed
2110C	EB		This segment occurs multiple times. ***If the client is not eligible, you will receive an Inactive response. You will receive all ACTIVE coverages in the following order. Medicaid Lock-In TPL Medicare A Medicare B Medicare C Medicare D If the client is not eligible, you will not receive additional EB segments showing any of the coverages listed above.

11. Appendices

11.1. Implementation Checklist

Conduent does not offer an Implementation Checklist for our Trading Partner EDI services with New Mexico Medicaid. The New Mexico HIPAA Helpdesk assists new Trading Partners with enrollment and testing, but a formal implementation checklist is not necessary.

11.2. Business Scenarios

Please contact the New Mexico HIPAA Helpdesk to discuss your specific EDI related business needs with New Mexico Medicaid, should they not be covered in this guide or other available New Mexico Medicaid X12N transaction companion guides.

11.3. Transmission Examples

N/A

11.4. Frequently Asked Questions

NM HCA FAQs are available here: https://www.hca.nm.gov/providers/hipaa-standard-companion-guides/

Also, your Conduent EDI Business Analyst(s) have EDI and X12 expertise to field all related inquiries. Please direct your questions to NM HIPAA Helpdesk.