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

CONDUENT

HEALTH CARE AUTHORITY

Health Care Claim Acknowledgment Companion Guide

New Mexico Health Care Authority
MMISR Financial Services Project

Version 1.1

Revision History

Version	Date	Description	Author	HCA Approval
1.0	08/06/2025	Approved and published version	Conduent	Kristie Abraham
1.1	02/26/2026	Updated link in section 1.3 and 10.4. Removed Medicaid portal link from disclaimer	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.

1.1. Scope

This companion guide is intended to be used by Trading Partners for the retrieval of the X12N 277CA transaction from 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:

- X12N 277CA Health Care Information Status Notification Process
- Data Retrieval Methods
- Payer Specific Data
- 277CA transaction set

1.3. References

This companion guide is intended for New Mexico Medicaid Trading Partner use in conjunction with the ANSI ASC X12N Standards for Electronic Data Interchange Technical Report Type 3 (TR3) Health Care Information Status Notification (277CA).These are available at: https://X12.org/products/technical.

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
NM MOVEit	https://pbmazuremoveit.services.conduent.com
Trading Partner agreement Form	https://www.hca.nm.gov/providers/hipaa-standard-companion-guides/

2. X12N 277CA Process

2.1. X12N 277CA Health Care Information Status Notification Process

To receive an X12N 277CA Health Care Information Status Notification, a provider must request that 277CAs be delivered and provide their Trading Partner and Billing Provider Medicaid IDs.

To request 277CAs, please contact tHIPAA.DeskNM@hca.nm.gov.

After an X837 transaction has been received, an X12N 277CA file will be delivered to the Conduent EDI Mailbox System for the provider or clearinghouse to retrieve.

277CAs are generated daily during the NM Medicaid X837 transaction cycle.

2.2. Contained in the 277CA transaction.

The 277CA file contains status information for X837 files that have been either accepted or rejected. The universe of claims reported include:

Unadjudicated X837 transactions will not include X12N 277CA transaction.

Adjudicated claims (the X12 837 transactions have not been adjudicated).

There are three (3) different levels of status information.

- Level 1 is the highest level and contains status information on the entire 837 file submitted by the trading partner. An entire 837 file (which may contain batches submitted by several different providers) may either be accepted, or it may be rejected based on edits performed by the 837 processes. A status code of **A2** means that the claim was accepted. A status code of **A7** means that the claim was rejected.
- Level 2 is for provider level acceptance or rejection. A status code of **A2** means that the provider's batch has been accepted. A status code of **A7** means that the provider's batch was rejected.
- Level 3 is for patient (claim) level acceptance or rejection. A status code of **A2** means that the claim has been accepted. A status code of **A7** means that the claim was rejected.

2.3. Files Received

Each trading partner will receive one X12N 277CA transaction file for all X837 transactions the State has received for a given time frame. If no X837 transactions have been received during that given time frame, the X12N 277CA file will not be produced.

277CAs are available for trading partners to retrieve each day. If no X837 transactions are sent, a 277CA will not be generated.

Following is the example for the naming convention of X12N 277CA:

NM_120405_77048_O_20675_pppppppp_277CA_ttttt_277CA. 001
NM = New Mexico Medicaid

120405 = file date in YYMMDD format
77048= NM Payer ID
O = constant letter ‘O’ for Outbound
20675= Tracking Number
pppppppp = Provider’s 8 character NM Medicaid Billing Provider ID
277CA = Transaction Type
tttttt = 6 character Trading Partner ID
277CA = Transaction Type
001= File Sequence Number

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. 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 your trading partner information. Please have this number available each time the user contacts the NM HIPAA Helpdesk.
- **Logon Name and Logon User ID**: These allow asynchronous Trading Partners access to the host system for claims submission. The New Mexico 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 837 transactions, along with various submission methods, security requirements, and exception handling procedures.

4.1. Process Flows

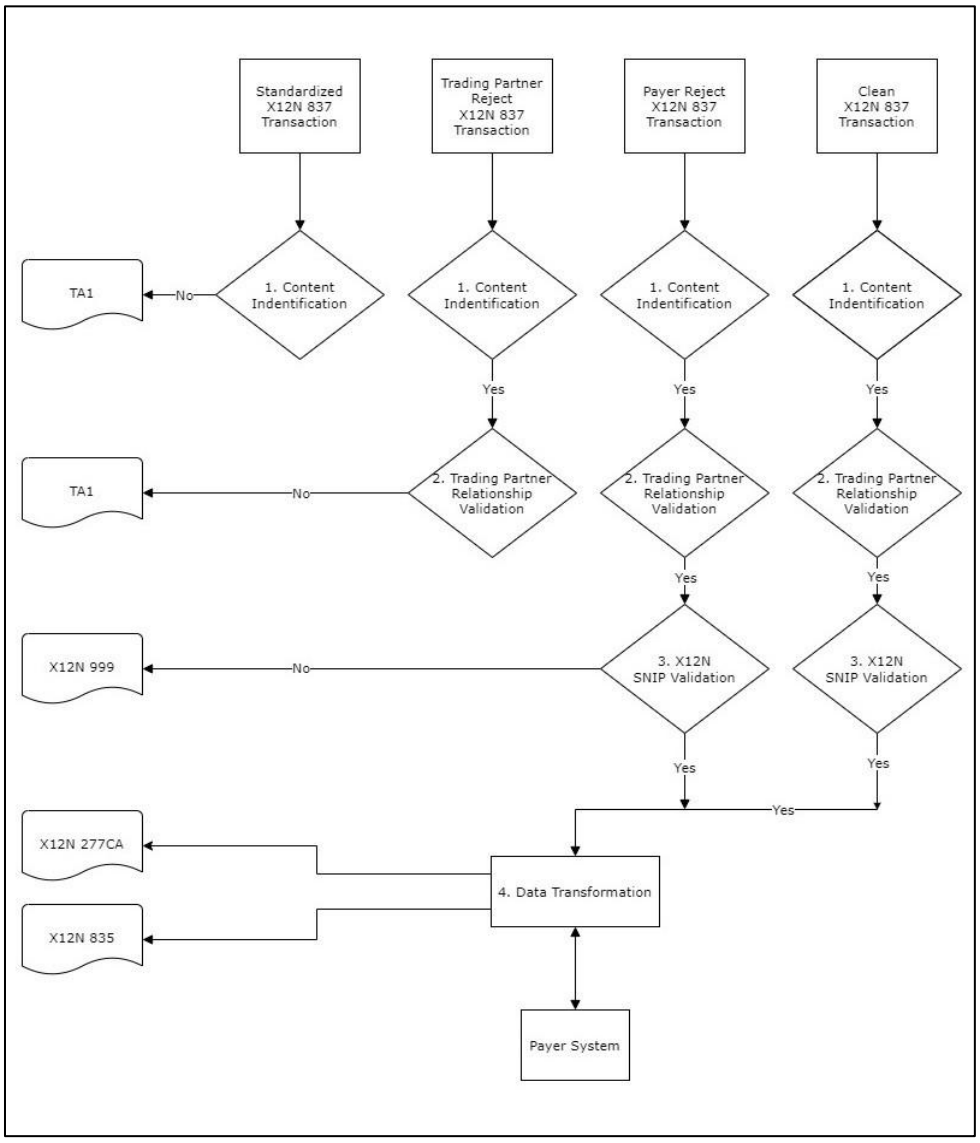


Figure 1: Editing and Validation Flow Diagram

LEGEND:

1. **Content Identification**: The process starts with four types of X12N 837 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 837 Transaction** • **Trading Partner Reject X12N 837 Transaction**	• **Payer Reject X12N 837 Transaction** • **Clean X12N 837 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

To receive a 277CA, enrolled New Mexico Trading Partners will submit X12N 837 transaction data to Conduent EDI Solutions for processing. The TA1 Interchange Acknowledgement reports the syntactical analysis of the interchange header and trailer. If the data (Interchange Envelope) is invalid, the file will be rejected. If the Trading Partner relationship does not exist (a missing or invalid Trading Partner ID) a TA1 will not be generated because the relationship does not exist within the NM Trading Partner Management Database.

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**

4.3. Communication Protocol Specifications

We offer the following transmission methods for Trading Partners:

- EDI Online
- EDI DMZ/Transfer (SFTP)

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. Either method of access requires the submitter to use a pre-assigned logon ID and password to gain access to their files.

4.3.1. EDI Online

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

EDI Online capability allows users to:

- Submit 5010 837 X12 transactions.
- Retrieve responses for the transactions including 999s, online confirmation reports 277CA's and 835s.

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

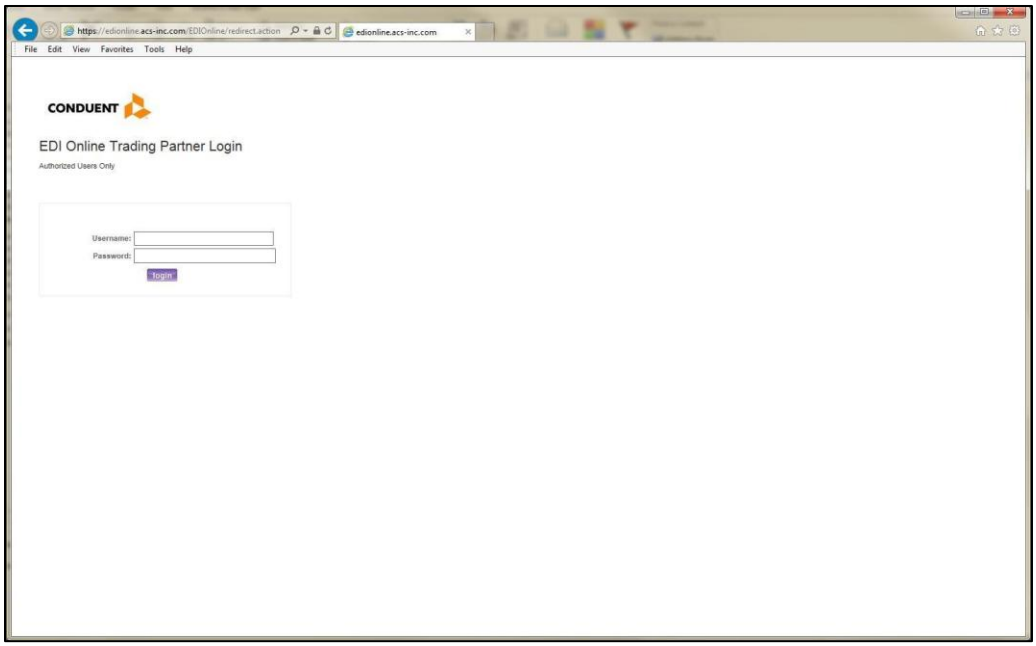


Figure 2: Conduent EDI Login Page

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.

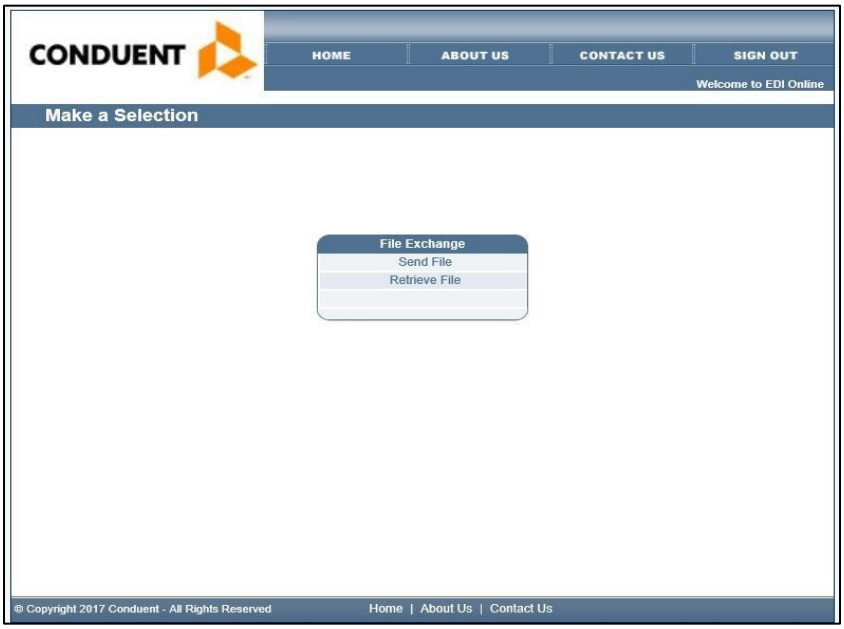


Figure 3: File Submission Page

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 has used the **Browse** button to locate the file, click the Submit button.

EDI Online will return a window stating 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. EDI sends the 277CA file to the trading partner's DMZ folder.

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 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 NM HIPAA 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 (and)
- Parameters in the implementation guide that 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 create the Interchange Control Segments to validate the Interchange Envelope of each ASC X12 outbound file. Table 2 ISA-IEA 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	The value to be entered is 100000 followed by spaces to complete the 15-digit element.
Header	ISA	07	The value to be used ZZ (Mutually Defined)
Header	ISA	08	Trading Partner ID is associated with the billing provider. Example: 123456 followed by spaces to complete the15-digit element
Header	ISA	11	Repetition Separator '^'
Header	ISA	14	Acknowledgement indicator: 0 (Not requested)
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

Table 3: GS-GE Segment

Loop	Segment	Data Element	Description
Header	GS	02	Sender Code 77048
Header	GS	03	Application Receiver code -Trading Partner ID
Header	GS	04	Functional group creation date expressed in CCYYMMDD format.
Header	GS	05	Functional group creation time expressed HHMM format.
Header	GS	08	The value to be used 005010X222A1

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).

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): 9-12characters 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.
- All date/times are in the CCYYMMDDHHMM format.
- 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.

7.1. Retrieving Confirmation Reports

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 the confirmation report.

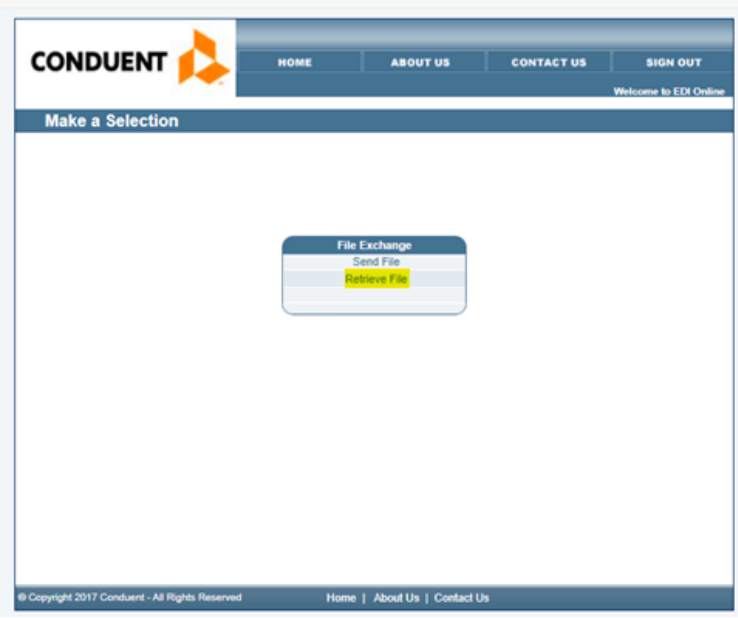


Figure 5: Confirmation Report Retrieval Page

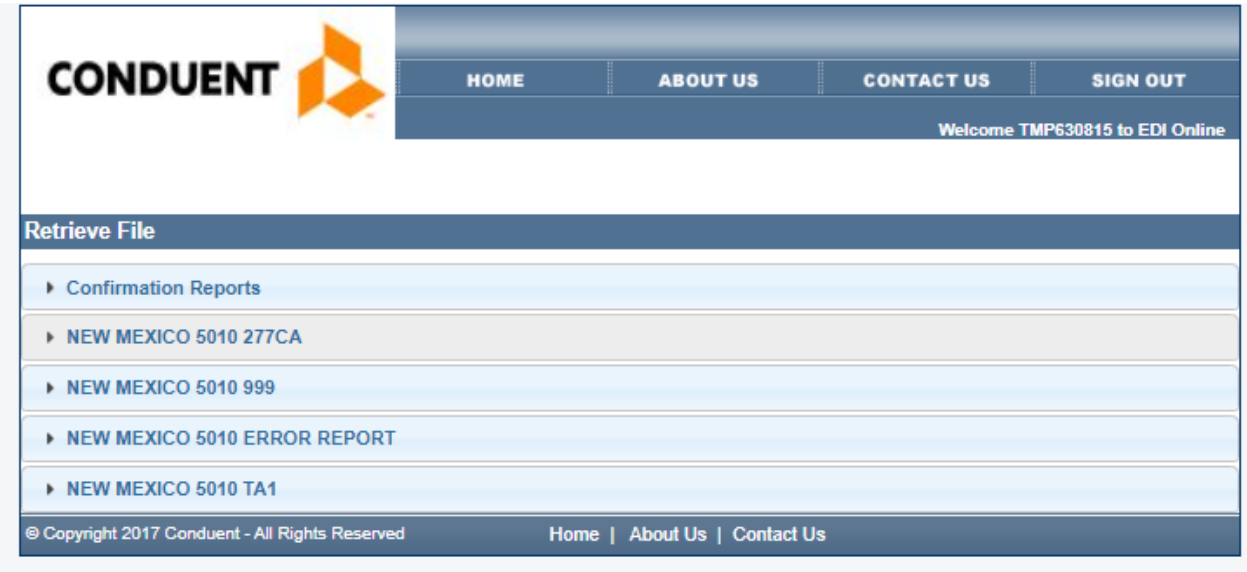


Figure 6: File Retrieval Selection

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

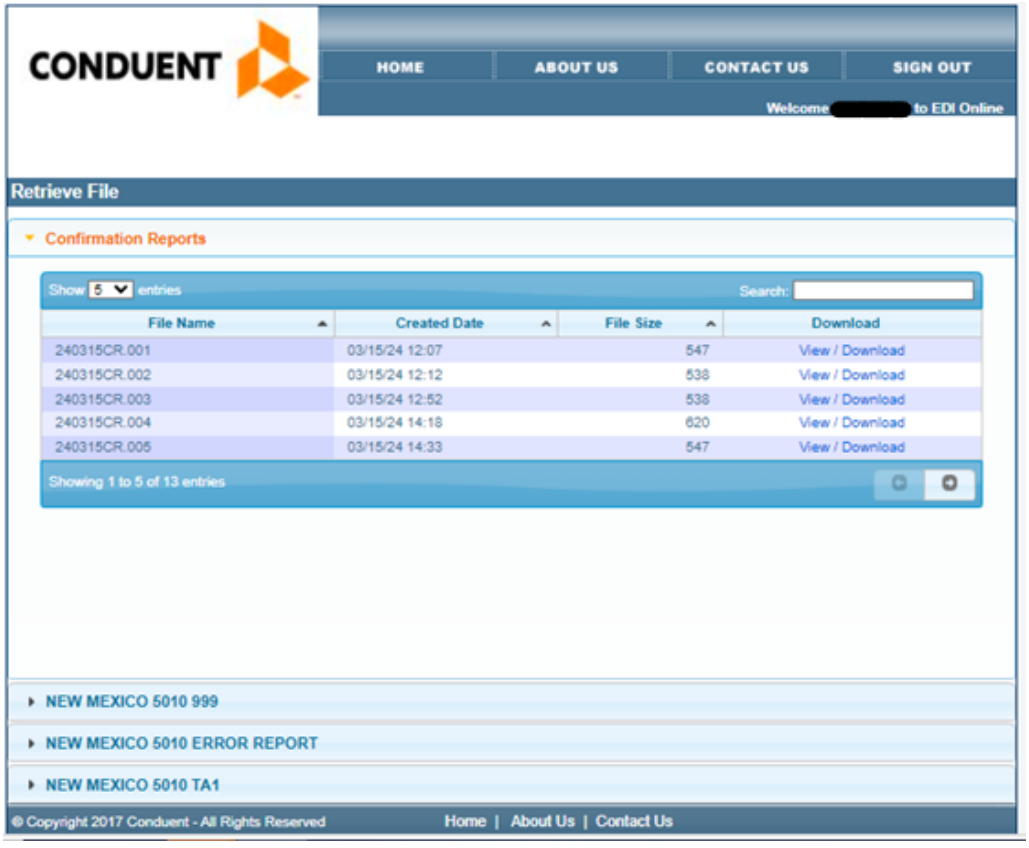


Figure 7: View Confirmation Reports

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

1. 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.
2. 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.
3. 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.
4. 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.

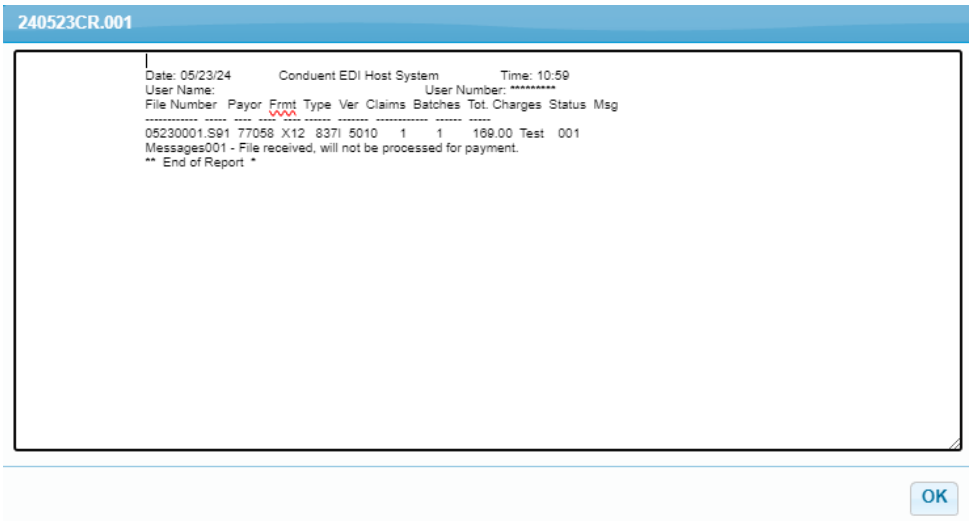


Figure 8: Confirmation Report Example

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.

7.2. Retrieving HTML Confirmation Report and TA1 Files

Follow the same procedures as above.

8. Trading Partner Agreements

Conduent EDI Solutions requires trading partner enrollment, which includes a trading partner agreement, for testing and submission of X12N 837 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.

9. 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.

Many of the data elements included in the Companion Guides are business requirements and are not necessarily required per the ANSI ASC standard. Inclusion of a “Business-Required” data field, as defined by this Companion Guide, may aid in the delivery of a positive response.

9.1. Transaction Size

Conduent EDI Solutions follows the industry standards and recommendations contained 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.

9.2. Data Clarifications

This companion guide for the ANSI ASC Consolidated 277CA Healthcare Claim/acknowledgement 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.

9.3. 277CA

Table 5: 277CA Transactions

Loop	Segment	Data Element	Comments
Header	BHT	03	Reference Identification: EDI trace number
2100A	NM1		This segment contains the payer’s name and ID information.
2200A	TRN		This segment contains the transmission receipt control identifier (EDI trace number) from the 837.
2200A	DTP		Contains the date received (current date).
2100B	NM1		Contains the submitter’s (trading partner) information from the 837 transactions.
2200B	TRN		This segment contains the transmission receipt control identifier (EDI trace number) from the 837.

Loop	Segment	Data Element	Comments
2200B	STC	01-01 10-01 11-01	A2 is the default value for this category code.
2200B	STC	01-2	20 is the default value for this status level.
2200B	STC	01-03	PR = Payer -Default value.
2200B	STC	03	WQ = Accept. This is the default value for this status level.
2200B	QTY		Contains the total accepted plus total claim amounts for accepted.
2200C	STC	01-1 10-1	Contains the provider level status code. A2 = provider batch accepted.
2000C	STC	01-2	20- Default value for this status level,
2200C	STC	01-03	PR = Payer is the default value.
2200C	STC	03	Patient (claim) Level status information. WQ is the default value.
2200D	STC	01-1 10-1 11-1	Contains the patient (claim) level status code. A2 = claim accepted.
2200D	STC	01-02	20 - Default value for this status level.
2200D	STC	01-03	PR = Payer is the default value.

10. Appendices

10.1. 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.

10.2. 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.

10.3. Transmission Examples

Please contact the NM HIPAA Helpdesk for transmission examples beyond the samples already provided in this guide.

10.4. 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.