

New Hampshire MMIS

Companion Guide to the
005010X220A1 Benefit
Enrollment and Maintenance
(834)

Conduent EDI Solutions
December 2024

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Preface

This Companion Guide to the v5010 ASC X12N Implementation Guides - Technical Report Type 3 (TR3) and associated errata adopted under Health Insurance Portability and Accountability Act (HIPAA) clarifies and specifies the data content when exchanging electronically with the New Hampshire Medicaid Management Information System (MMIS). Transmissions based on this Companion Guide, used in tandem with the v5010 ASC X12N Implementation Guides (TR3) and CCIIIO Companion guide, and 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 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 Implementation Guides (TR3).

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1 Introduction

This 834 Companion Guide is intended for Trading Partner use in conjunction with the ASC X12N 834 National Electronic Data Interchange Transaction Set Implementation Guide and CCIIIO Guide.

The ASC X12N Implementation Guide can be accessed at:

<http://store.x12.org/store/healthcare-5010-consolidated-guides>

The CCIIIO Guide can be accessed at:

<https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/companion-guide-for-ffe-enrollment-transaction-v15.pdf>

This Companion Guide outlines the procedures necessary for engaging in Electronic Data Interchange (EDI) with the New Hampshire MMIS and specifies data clarification where applicable. [Section 10 Transaction Specific Information](#) contains provider data clarifications for fields and values that have changed.

Transaction specific data will be detailed using a table with the following information included (if applicable):

- TR3 Page
- Loop
- Segment
- Data Element
- Industry Name
- Comments

Scope

This Companion Guide is intended for use by New Hampshire Medicaid Trading Partners for the retrieval of the X12N 834 transactions from Conduent and to send 834 Effectuation Instructions from MCOs to Conduent. This Companion Guide is to be used in conjunction with the 834 Implementation Guide and TR3. Conduent is the Fiscal Agent for New Hampshire Department of Health and Human Services (DHHS). Conduent will accept and process X12N transactions on behalf of New Hampshire Medicaid.

Conduent provides connectivity for the flow of medical information and data between medical providers, facilities, vendors, claim payment agencies, clearinghouses and the front-end Online Transaction Processor (OLTP). Beyond the receipt and delivery of this data, Conduent EDI Solutions provides translation to and from ASC X12N standard formats. Please refer to [Section 4 Connectivity with the New Hampshire MMIS](#) for more information regarding transmission methods.

Overview

This Companion Guide is divided into 10 Sections. Each section will describe the process or requirement that each Trading Partner must complete to submit and receive X12N transactions for New Hampshire Medicaid.

Each section will detail the steps Trading Partners will be required to complete to successfully transmit data to and from the New Hampshire Medicaid MMIS.

This Companion Guide will provide contact information for obtaining assistance from the NH Medicaid MMIS. In addition, it will address data clarifications, including NH Medicaid-specific data requirements.

References

This document serves as a companion to the ASC X12N Implementation Guides (TR3) as adopted under HIPAA. These can be accessed at:

<http://store.x12.org/store/healthcare-5010-consolidated-guides>

Additional Information

For more information on NH Medicaid EDI services for providers, including provider enrollment and claim transaction information, please visit: <http://nhmmis.nh.gov>.

2 Getting Started

Working with New Hampshire Medicaid

We provide availability for transaction transmission and download retrieval 24 hours a day, seven days a week. This availability is subject to scheduled downtime. It is operational policy to schedule preventative maintenance periods on weekends or after 9:00 p.m. Eastern Standard Time. Conduent EDI Solutions notifies the New Hampshire Medicaid Trading Partners of outages or scheduled maintenance periods.

Currently, the system maintenance window is Sunday 12:01 a.m. – 12:00 p.m., Eastern Standard Time (EST). In the event of unscheduled downtime, Conduent EDI Solutions will inform New Hampshire Medicaid Trading Partners via notifications and/or web portal banner messages. Conduent EDI works to resolve unscheduled outages as expeditiously as possible.

For any non-routine downtime planned for the MMIS system, a notification message will be displayed for providers on the login screen of the MMIS web portal in advance of the downtime.



Trading Partner Registration

All entities that send electronic transactions to Conduent EDI for processing and, subsequently, retrieve reports and responses, must enroll as EDI Trading Partners. The completed Trading Partner enrollment application provides the Conduent New Hampshire Provider Relations Unit the information necessary to assign a Login Name, Login ID, and Trading Partner ID, which are required to send or retrieve electronic transactions. The Trading Partner enrollment application is available on the NH Medicaid website at <http://nhmmis.nh.gov>. Click on 'Enrollment' in the Quick Links box to navigate to the Trading Partner enrollment application.

For your convenience, the direct URL to the provider enrollment page is as follows:
<https://nhmmis.nh.gov/portals/wps/portal/ProviderEnrollment>

Certification and Testing Overview

Conduent X12N transaction code sets are certified by EDIFICS Ramp Management Compliance Check engine, which provides accurate validation of HIPAA transactions (Type 1 EDI Syntax, Type 2 HIPAA Syntax, and some Type 7 NH Trading Partner Specific). Conduent EDI Solutions requires transaction testing with all enrolling Trading Partners for NH Medicaid.

Once a Trading Partner has successfully enrolled for NH Medicaid and has communicated with a Conduent Business Analyst, the Trading Partner may begin the testing process. Trading Partners will be required to participate in EDIFICS Ramp Management testing.

3 Testing with the New Hampshire MMIS

Before submitting 834 Effectuation Instruction production files through Conduent EDI Solutions, the Trading Partner must submit two valid test files. If the Trading Partner has received a test status of “Passed,” then the Conduent Business Analyst will contact the Trading Partner and update the Trading Partner status to production.

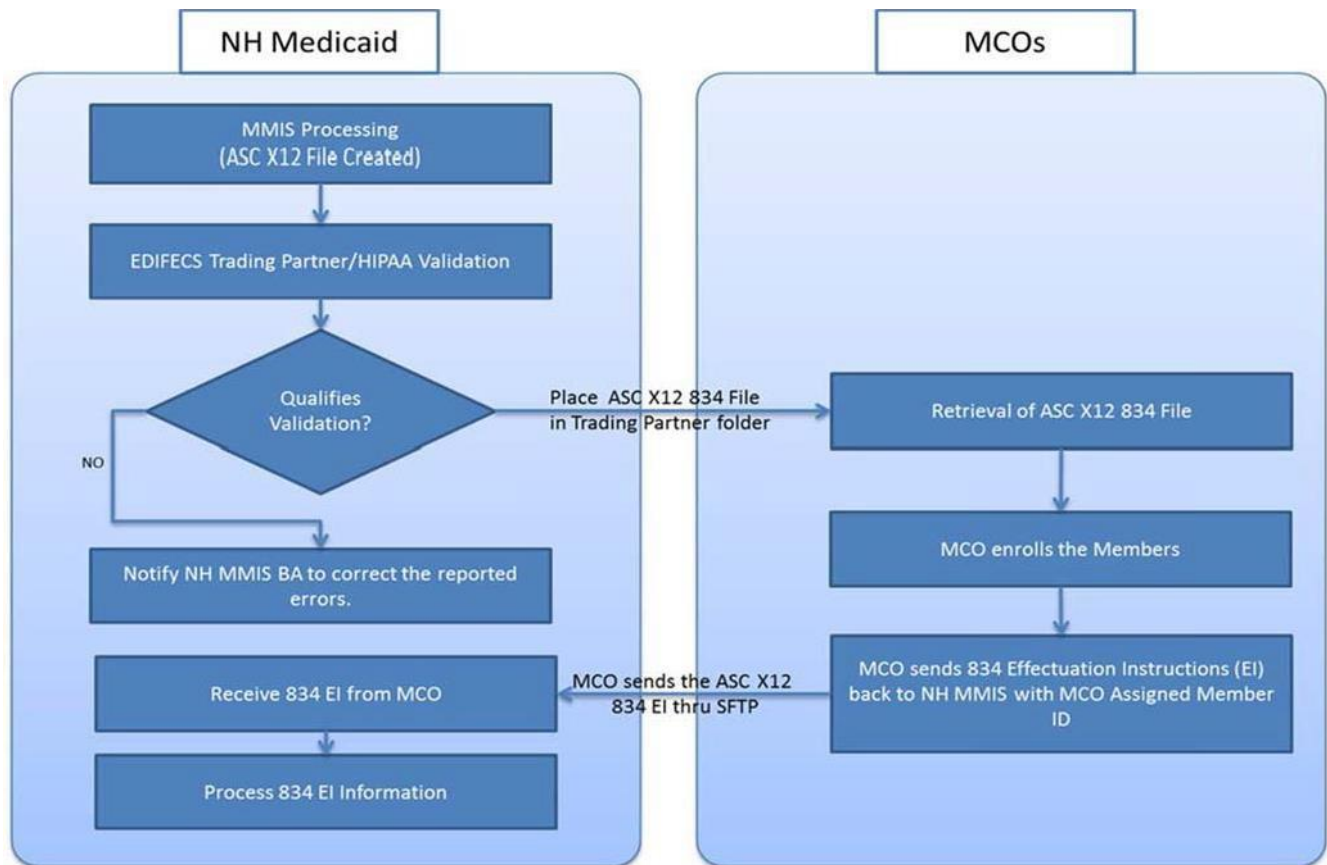
These tests verify a Trading Partner’s ability to submit a X12N 834 Confirmation transaction containing valid data in the required format. Trading Partners are encouraged to include a minimum of 10 unique transactions per test file to ensure more comprehensive testing. New Hampshire Medicaid-supported inbound transaction types are X12N 270, X12N 276, X12N 278, X12N 837P, X12N 837I, X12N 837D and X12N 834 EI. Changes to the X12N formats may require additional testing.

Should Trading Partners receive a test status of “Failed,” then Trading Partners should review the errors using the EDIFECs Error Report within EDIFECs Ramp Management, correct and resubmit their test file until the file receives a status of “Passed.” If Trading Partners require further assistance with EDIFECs Ramp Management and/or assistance resolving errors, please contact the assigned Conduent EDI Business Analyst by email at NHMMISED@Conduent.com.

4 Connectivity with the New Hampshire MMIS

Process Flows

Editing and Validation Flow Diagram



Legend:

1. **MMIS Processing:** MMIS will create the 834 file in accordance with the ASC X12 Technical Report Type 3 standards, with NH specific rules applied.
2. **EDIFICS Transaction Manager Processing:** The EDIFICS Transaction Management tool will certify that the 834 file passes Trading Partner verification. The Transaction Manager will also provide validation of the HIPAA transactions (Type 1 EDI Syntax, Type 2 HIPAA Syntax, Type 3 Balancing, Type 4 Situation Testing and Type 7 NH Trading Partner Specific edits). In the case that the Transaction Manager finds errors in the Trading Partner verification or the HIPAA transaction validation, a NH EDI Specialist will be notified for review and correction of the file.
3. **Trading Partner Retrieval of ASC X12 834 File:** The file is available for retrieval by the Trading Partner in the manner agreed on with NH Medicaid.
4. **Receive 834 EI from MCO:** The MCO assigned Member ID is received in the 834 Effectuation Instruction (EI) transaction and will be stored in MMIS System.

Transmission Administration Procedures

New Hampshire Medicaid will create the 834 file in accordance with the ASC X12 Technical Report Type 3 standards and NH-specific rules will be applied. The EDIFECs Transaction Management (TM) will certify that the 834 file created passes Trading Partner verification. The Transaction Manager will also provide validation of the HIPAA transactions (Type 1 EDI Syntax, Type 2 HIPAA Syntax). Conduent will strive for Level 3 Balancing and Level 4 Situation Testing, but due to the transient nature of clients and data that is often missing we will provide a report to the MCOs with the issues during testing phase and an agreed upon edit type will be set for validation. In the case that the Transaction Manager finds errors in the Trading Partner verification or the HIPAA transaction validation, a NH EDI Specialist will be notified for review and correction of the file. The file is available for retrieval by the Trading Partner in the manner agreed on with NH Medicaid. The method used is noted in the Trading Partner Enrollment application. The methods available to the Trading Partner are available via download from the Managed File Transfer process (Secure FTP). More information on file retrieval options is available within [Communication Protocol Specifications](#).

Frequency of Files:

NH MMIS will deliver files from Monday through Friday or Tuesday through Saturday except state holidays between 00:01 a.m. to 5:00 a.m. Eastern Time depending upon the completion of enrollment operational activities. Files should be processed in the order they were intended for i.e., the order they were sent. Conduent would fix the file and resend, not combine with the next day's file.

Naming of the Files:

Conduent will name its outbound X12s using the below file naming standards.

834 Daily - <TrackingId>_<Timestamp>_834Daily_native.dat.
834 Monthly - <TrackingId>_<Timestamp>_834Reconciliation_native.dat
834 EI 999 - <TrackingId>_B_<OriginalFilename>_999Native.dat
834 EI TA1 - <TrackingId>_B_<OriginalFilename>_TA1Native.dat

The Tracking ID is a 15 digit unique ID followed by a timestamp in CCYYMMDDHHMMSS format.

The incoming 834 effectuation instructions transactions file name must *not* contain any spaces. It is recommended to have a file name containing date, time and a unique sequence number to identify the file during issue resolution process. The file name can be up to 100 characters long.

If you have questions or require assistance with your TA1 or X12 999, please contact your Conduent Fiscal Agent EDI Business Analyst at NHMMISEDI@Conduent.com. Please include your Trading Partner ID and telephone number in your email.

Re-Transmission Procedures

Transmission/Production Issues

When file transmission or technical production issues occur that may require the re-submission of files, please contact the Conduent New Hampshire Provider Relations Unit at **1 (866) 291-1674** (toll-free) or **(603) 223-4774** (local).

Please have the following information available when calling the Conduent New Hampshire Provider Relations Unit regarding transmission and production issues.

- Trading Partner ID
- Secure FTP ID

Communication Protocol Specifications

NH Medicaid Trading Partners can submit X12N files and download files such as the X12N 835, X12N 277CA, TA1, and X12C 999 via Secure FTP.

Secure FTP

Secure file transfer

Secure file transfer is an appropriate alternative to the New Hampshire Web Portal for large volume Trading Partners (i.e. files in excess of 10MB each). For submitting and retrieving files via Secure file transfer, access to the Conduent DMZDMZ site (powered by MOVEit TRANSFER®) is available free of charge to Trading Partners. It should be noted that the Conduent DMZ site is completely separate from New Hampshire Medicaid. Trading partners may use the separate secured Web site for submission and retrieval of files, or any secured FTP product that is compatible with MOVEit TRANSFER. See [MOVEit-Compatible FTP Applications](#).

Secure file transfer Setup and Support

Secure file transfer setup will usually occur during Trading Partner Enrollment. If the Trading Partner wishes to create a Secure file transfer account, or requires additional support (i.e. account becomes locked or experiences connectivity issues), the Trading Partner should contact the Conduent New Hampshire Provider Relations Unit at **1 (866) 291-1674** (toll-free) or at **(603) 223-4774** (local).

Note: Secure file transfer setup is separate from Trading Partner Enrollment, but still coordinated through the Conduent New Hampshire Provider Relations Unit. The

Provider Relations Unit may request additional information not obtained during Trading Partner Enrollment during Secure file transfer setup.

Trading Partners set up for submission and/or retrieval of files via the Secure file transfer mechanism will receive connectivity details from the Provider Relations Unit once setup is complete. This information will include login credentials, policies concerning passwords, file retention, and basic information on site navigation.

MOVEit TRANSFER

MOVEit TRANSFER® is a software product that manages logins, folders, and data as an Internet-exposed secured landing zone. Only secured communications protocols may be used to access the TRANSFER. These include HTTPS, SFTP, and FTPS. FTPS is being phased out as it is considered less secure and is more difficult to manage with firewalls. Data is stored in encrypted format while residing on the TRANSFER.

There are two methods for accessing MOVEit TRANSFER:

1. Uploading files through a secure Web site
<https://secureft.services.conduent.com/>
2. Sending and receiving files via a Secure file transfer client. MOVEit Freely® is a free Secure file transfer client available for download at
<http://www.standardnetworks.com>.

1.

MOVEit-Compatible FTP applications

MOVEit-Compatible FTP application	
HTTPS (HTTP over SSL) Clients	SSH2 SFTP and SCP2 Clients
cURL (downloads only) - AIX; AmigaOS; BeOS; DOS; DragonFly BSD; FreeBSD; HP-UX; Linux; NetBSD; NetWare; OpenBSD; OS/2; OS X; QNX; RISC OS; Solaris; SunOS; Tru64 UNIX; UNIXware; VMS; Windows Internet Explorer Web Browser - Macintosh, Windows Firefox Web Browser - any supported OS MOVEit Central Windows Vista Business Ed., 2003, XP Professional, 2000 Server MOVEit Central API Java Class - Windows Vista Business Ed., 2003, XP Professional, 2000 Server MOVEit Central API Windows COM Component - Windows Vista Business Ed., 2003,	Cyberduck - OS X v.10.3 or higher Cyclone Commerce Interchange - Solaris FileZilla - Windows F-Secure SSH (including SCP2) - Solaris, UNIX, Windows Fugu - OS X v.10.3 or higher IBM Ported Tools (OpenSSH) - z/OS Ipswitch WS_FTP Pro - Windows J2SSH - Java MacSSH

XP Professional, 2000 Server MOVEit TRANSFER API Java Class - any OS with Java v.1.4 or higher MOVEit TRANSFER API Windows COM Component - Windows Vista Business Ed., 2003, XP, 2000, NT 4.0 MOVEit Wizard ActiveX Plugin - Internet Explorer Windows MOVEit Wizard Java Plugin - Firefox Linux and Windows; Mozilla Linux and Windows; Netscape Linux and Windows; Opera Linux and Windows; Safari OS X MOVEit Xfer Java - Any OS with Java v.1.4 or higher MOVEit Xfer Windows - Windows Vista Business Ed., 2003, XP, 2000, ME, 98, NT Mozilla Web Browser - any supported OS Netscape Navigator Web Browser - Linux, Macintosh, Windows Opera Web Browser - any supported OS Safari Web Browser - OS X	- OS X v.10.3 or higher Magnetk sftpdrive - Windows MOVEit Central - Windows Vista Business Ed., 2003, XP Professional, 2000 Server NET::SFTP (uses Net::SSH::Perl) - Linux OpenSSH for sftp - MVS; OS X v.10.3 or higher; Solaris; UNIX; Windows; z/OS v.1.4 or higher PuTTY PSCP and PSFTP - Windows, Windows NT for Alpha Rbrowser - OS X v.10.3 or higher SouthRiver Technologies WebDrive - Windows SSH FileSystem (SSHFS) - Unix (requires OpenSSH and FUSE) SSH Secure Shell FTP - Windows SSH Tectia Client - AIX, HP-UX, Linux, Solaris, Windows SSH Tectia Connector - Windows
AS2 and AS3 (SSL) Clients Clients that are AS2 or AS3 certified by Drummond will be compatible with MOVEit TRANSFER, including: MOVEit Central Windows Vista Business Ed., 2003, XP Professional, 2000 Server	Stairways Interarchy - OS X Transmit - OS X v.10.3 or higher WinSCP (in SFTP mode) - Windows
FTPS (FTP over SSL) Clients bTrade TDAccess - AIX, AS/400, HP-UX, Linux, MVS, Solaris, Windows C-Kermit FTP - AIX, QNX, UNIX, VMS Cleo LexiCom - AS/400, Linux, UNIX, Windows cURL - AIX; AmigaOS; BeOS; DOS; DragonFly BSD; FreeBSD; HPUX; Linux; NetBSD; NetWare; OpenBSD;	FTPS (FTP over SSL) Clients, Cont. MOVEit Central - Windows Vista Business Ed., 2003, XP Professional, 2000 Server MOVEit Freely - Windows Vista Business Ed., 2003, XP, 2000, ME, 98, NT Netkit - Linux, Solaris, UNIX Rhino Voyager FTP - Windows Seagull Secure file transfer Pro

OS/2; OS X; QNX; RISC OS; Solaris; SunOS; Tru64 UNIX; UNIXware; VMS; Windows FileZilla - Windows GlobalSCAPE CuteFTP Pro - Windows GLUB Secure file transfer - Java IBM z/OS Secure Sockets FTP - z/OS IniCom FlashFXP (GUI v.3.0 or higher) - Windows Ipswitch WS_FTP Pro (GUI v.7.0 or higher) - Windows LFTP - AIX, MVS, Solaris, UNIX MOVEit Buddy - Windows Vista Business Ed., 2003, XP, 2000, ME, 98, NT	- Windows SmartFTP - Windows SouthRiver Technologies WebDrive - Windows Stairways Interarchy - OS X Sterling Commerce Connect:Direct Enterprise Command Line Client - UNIX, Windows Surge SSLFTP - FreeBSD; Linux; Macintosh; Solaris; Windows TrailBlazer ZMOD - OS/400 Tumbleweed SecureTransport Clients - UNIX, Windows /n software IP*Works SSL - Windows
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Passwords

Log in Credentials: In order to receive your authorized user log in credentials all Trading Partners, regardless of submission method, must be enrolled with NH Medicaid and approved as Trading Partners on the NH Health Enterprise MMIS. Log in credentials include names/ids and passwords, that will be required for the submission of transactions to NH Medicaid.

Trading Partner ID: The Trading Partner ID links the Trading Partner to their transaction data and is the NH Health Enterprise MMISs internal key to accessing their Trading Partner information. Please have this number available each time you contact the Conduent New Hampshire Provider Relations Unit at **1 (866) 291-1674** or at **(603) 223-4774** (local). **The following login credentials are issued depending on the chosen communication method.**

Web Portal User ID/Password: This Web Portal User ID allows Trading Partners access to the New Hampshire MMIS Health Enterprise Portal for functions that include file submission and file retrieval. The Conduent New Hampshire Provider Relations Unit also uses the logon name to access Web Portal data submissions.

Secure file transfer ID/Password: These are the login credentials for the Conduent DMZ site. These allow FTP Trading Partners to access assigned folders for file submission or to retrieve responses. The Conduent New Hampshire Provider Relations Unit also uses this Secure file transfer ID to reference your DMZ data submissions.

MOVEit-Compatible FTP applications

MOVEit-Compatible FTP application	
HTTPS (HTTP over SSL) Clients	SSH2 SFTP and SCP2 Clients
cURL (downloads only) - AIX; AmigaOS; BeOS; DOS; DragonFly BSD; FreeBSD; HPUX; Linux; NetBSD; NetWare; OpenBSD; OS/2; OS X; QNX; RISC OS; Solaris; SunOS; Tru64 UNIX; UNIXware; VMS; Windows Internet Explorer Web Browser - Macintosh, Windows Firefox Web Browser - any supported OS MOVEit Central Windows Vista Business Ed., 2003, XP Professional, 2000 Server MOVEit Central API Java Class - Windows Vista Business Ed., 2003, XP Professional, 2000 Server MOVEit Central API Windows COM Component - Windows Vista Business Ed., 2003, XP Professional, 2000 Server MOVEit DMZ API Java Class - any OS with Java v.1.4 or higher MOVEit DMZ API Windows COM Component - Windows Vista Business Ed., 2003, XP, 2000, NT 4.0 MOVEit Wizard ActiveX Plugin - Internet Explorer Windows MOVEit Wizard Java Plugin - Firefox Linux and Windows; Mozilla Linux and Windows; Netscape Linux and Windows; Opera Linux and Windows; Safari OS X MOVEit Xfer Java - Any OS with Java v.1.4 or higher MOVEit Xfer Windows - Windows Vista Business Ed., 2003, XP, 2000, ME, 98, NT Mozilla Web Browser - any supported OS Netscape Navigator Web Browser - Linux, Macintosh, Windows	Cyberduck - OS X v.10.3 or higher Cyclone Commerce Interchange - Solaris FileZilla - Windows F-Secure SSH (including SCP2) - Solaris, UNIX, Windows Fugu - OS X v.10.3 or higher IBM Ported Tools (OpenSSH) - z/OS Ipswitch WS_FTP Pro - Windows J2SSH - Java MacSSH - OS X v.10.3 or higher Magnetk sftpdrive - Windows MOVEit Central - Windows Vista Business Ed., 2003, XP Professional, 2000 Server NET::SFTP (uses Net::SSH::Perl) - Linux OpenSSH for sftp - MVS; OS X v.10.3 or higher; Solaris; UNIX; Windows; z/OS v.1.4 or higher PuTTY PSCP and PSFTP - Windows, Windows NT for Alpha Rbrowser - OS X v.10.3 or higher SouthRiver Technologies WebDrive - Windows SSH FileSystem (SSHFS) - Unix (requires OpenSSH and FUSE) SSH Secure Shell FTP - Windows

MOVEit-Compatible FTP application	
Opera Web Browser - any supported OS Safari Web Browser - OS X	SSH Tectia Client - AIX, HP-UX, Linux, Solaris, Windows SSH Tectia Connector - Windows
AS2 and AS3 (SSL) Clients Clients that are AS2 or AS3 certified by Drummond will be compatible with MOVEit DMZ, including: MOVEit Central Windows Vista Business Ed., 2003, XP Professional, 2000 Server	Stairways Interarchy - OS X Transmit - OS X v.10.3 or higher WinSCP (in SFTP mode) - Windows
FTPS (FTP over SSL) Clients bTrade TDAccess - AIX, AS/400, HP-UX, Linux, MVS, Solaris, Windows C-Kermit FTP - AIX, QNX, UNIX, VMS Cleo LexiCom - AS/400, Linux, UNIX, Windows cURL - AIX; AmigaOS; BeOS; DOS; DragonFly BSD; FreeBSD; HP-UX; Linux; NetBSD; NetWare; OpenBSD; OS/2; OS X; QNX; RISC OS; Solaris; SunOS; Tru64 UNIX; UNIXware; VMS; Windows FileZilla - Windows GlobalSCAPE CuteFTP Pro - Windows GLUB Secure FTP - Java IBM z/OS Secure Sockets FTP - z/OS IniCom FlashFXP (GUI v.3.0 or higher) - Windows Ipswitch WS_FTP Pro (GUI v.7.0 or higher) - Windows LFTP - AIX, MVS, Solaris, UNIX MOVEit Buddy - Windows Vista Business Ed., 2003, XP, 2000, ME, 98, NT	FTPS (FTP over SSL) Clients, Cont. MOVEit Central - Windows Vista Business Ed., 2003, XP Professional, 2000 Server MOVEit Freely - Windows Vista Business Ed., 2003, XP, 2000, ME, 98, NT Netkit - Linux, Solaris, UNIX Rhino Voyager FTP - Windows Seagull Secure FTP Pro - Windows SmartFTP - Windows SouthRiver Technologies WebDrive - Windows Stairways Interarchy - OS X Sterling Commerce Connect:Direct Enterprise Command Line Client - UNIX, Windows Surge SSLFTP - FreeBSD; Linux; Macintosh; Solaris; Windows TrailBlazer ZMOD - OS/400 Tumbleweed SecureTransport Clients - UNIX, Windows /n software IP*Works SSL - Windows

Passwords

Login Credentials: In order to receive your authorized user login credentials, all Trading Partners, regardless of submission method, must be enrolled with New Hampshire Medicaid and approved as Trading Partners on the NH Health Enterprise MMIS. Login credentials include names/IDs and passwords that will be required for the submission of transactions to NH Medicaid.

Trading Partner ID: The Trading Partner ID links the Trading Partner to their transaction data and is the NH Health Enterprise MMIS' internal key to accessing their Trading Partner information. Please have this number available each time you contact the Conduent New Hampshire Provider Relations Unit at **1 (866) 291-1674** (toll-free) or **(603) 223-4774** (local).

Secure FTP ID/Password: These are the login credentials for the Conduent Grab-It site. These allow FTP Trading Partners to access assigned folders for file submission or response retrieval. The Conduent New Hampshire Provider Relations Unit also uses this secure FTP ID to reference your Grab-It data submissions.

5 Contact Information

EDI Customer Service

The Conduent New Hampshire Provider Relations Unit is available to all NH Medicaid Trading Partners, Monday through Friday from 8:00 a.m. to 5:00 p.m., Eastern Standard Time, at the following numbers:

Toll Free: 1 (866) 291-1674

Local: (603) 223-4774

EDI Technical Assistance

The Conduent New Hampshire Provider Relations Unit assists users with questions about electronic submissions. The Conduent New Hampshire Provider Relations Unit is available to all NH Medicaid Trading Partners, Monday through Friday from 8:00 a.m. to 5:00 p.m., Eastern Standard Time, at **1 (866) 291-1674** (toll-free) or **(603) 223-4774** (local). The Provider Relations Unit specializes in the following:

- Providing information on available services
- Creating user accounts for file submission for approved Trading Partners
- Verifying receipt of electronic transmissions
- Assisting Trading Partners experiencing transmission difficulties

Provider Services Number

The Conduent New Hampshire Provider Relations Unit is available to all NH Medicaid Trading Partners, Monday through Friday from 8:00 a.m. to 5:00 p.m., Eastern Standard Time, at **1 (866) 291-1674** (toll-free) or **(603) 223-4774** (local).

Applicable Website/E-mail

Please visit www.nhmmis.nh.gov for NH Medicaid Provider and Trading Partner services information, including Trading Partner enrollment information, FAQs, manuals and related documentation.

6 Control Segments/ Envelopes

ISA-IEA

Conduent EDI Solutions will create the Interchange Control Segments to validate the Interchange Envelope of each ASC X12 outbound file. The ISA table provides sender and receiver codes, authorization and delimiter information.

TR3 Page	Loop	Segment	Data Element	Industry Name	Comments
Interchange Control Header (ISA)					
C.4	Envelope	ISA	05	Interchange ID Qualifier	ZZ
C.4	Envelope	ISA	06	Interchange Sender ID	026000618
C.5	Envelope	ISA	07	Interchange ID Qualifier	ZZ
C.5	Envelope	ISA	08	Interchange Receiver ID	Trading Partner ID assigned by New Hampshire Medicaid
C.6	Envelope	ISA	14	Acknowledgem ent requested	1

GS-GE

Conduent EDI Solutions creates single or multiple functional groups within an X12 file. Due to the fact that the MCOs for the 834 will only have one Provider ID they will get one Functional Group daily (see frequency of files). Each functional Group will have its own unique sequence number.

TR3 Page	Loop	Segment	Data Element	Industry Name	Comments
Functional Group Header (GS)					
C.7	Envelope	GS	02	Application Sender's Code	026000618
C.7	Envelope	GS	03	Application Receiver's Code	Trading Partner ID assigned by NH Medicaid

ST-SE

Conduent EDI Solutions creates 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). An ST to SE will be created for each Member enrollment. This will facilitate the ability to reject some enrollments if they are not valid.

TR3 Page	Loop	Segment	Data Element	Industry Name	Comments
Transaction Set Header (ST to SE)					
31	Functional Group	ST	02	Transaction Set Control Number	Refer to the X12 TR3 Guide
Transaction Set Trailer (SE)					
186	Functional Group	SE	02	Transaction Set Control Number	Refer to the X12 TR3 Guide

7 New Hampshire Medicaid Specific Business Rules and Limitations

Many of the data elements detailed in this Companion Guide reflect New Hampshire business requirements, but still meet the standard requirements in the ASC X12N Implementation Guide. Inclusion of a “business-required” data field, as defined by this Companion Guide, will aid in the delivery of a positive response from the NH Health Enterprise MMIS. For more information regarding NH Medicaid-specific billing requirements, consult the applicable NH Medicaid provider billing manual, which can be downloaded from the NH Medicaid website at: <http://nhmmis.nh.gov>.

Note on decimal/amount fields: Even though the X12N transaction defines Amount fields as having an 18-byte maximum, there is an additional HIPAA rule that limits all decimal fields to a maximum of 10 characters, including the two implied or reported decimal places. Accordingly, for all decimal or amount fields:

- “123456789012” is not an acceptable amount, because it is greater than 10 bytes.
- “12345678.90” is acceptable because the number of digits is not greater than 10; the decimal point itself is not limited by the rule.
- However, “1234567890” is not acceptable because the X12N engine assumes that a decimal point and succeeding zeroes are implied so that the actual number being communicated is “1234567890.00”, which is greater than 10 bytes.

For all fields not listed in these bullets, follow the guidelines in the ASC X12N Implementation Guides (TR3), available at <http://store.x12.org/store/healthcare-5010-consolidated-guides>.

8 Acknowledgements and/or Reports

Transmission Errors and Reports

The 834 (Daily and Monthly Files) is an outbound transaction, therefore New Hampshire MMIS System would expect an Interchange Acknowledgement (TA1) and Implementation acknowledgement (999) from its Trading Partners for every transmission of enrollment X12 file within four (4) hours of the file transmission. All outbound EDI transactions are certified by EDIFECS Compliance Check validation engine, which provides accurate validation of HIPAA transactions (Type 1 EDI Syntax, Type 2 HIPAA Syntax, and some Type 7 NH Trading Partner Specific) and therefore the carriers can expect error free X12 files from Conduent. In addition to Implementation and Interchange acknowledgement, Carriers are recommended to contact EDI support in case of failures or errors. The EDI Customer support is available Monday through Friday from 8:00 a.m. to 5:00 p.m., Eastern Standard Time, at 1 (866) 291-1674 (toll-free) or (603) 223-4774 (local).

TA1 – To be sent when the whole file is rejected or there are syntactical issues.

999 – To be sent when there are full reject of the file, partial or if the MCO will accept the file with errors.

For 834 Effectuation Instruction transactions received from trading partners, the MMIS system will generate acceptance/rejection reports within 24 hours upon receipt of the X12 834 Effectuation Instruction. The generation of acceptance/rejection reports is reliant on the type of error, and the level where the error occurs. Depending on the error level, the result may be the rejection of an entire file or a single transaction.

Transmission Errors

Transmission Errors can occur when there are errors in the ISA segment. The ISA is part of the Interchange Control. A transmission error will occur when the ISA exceeds the fixed length defined by the TR3 Guide. This will result in the file being unrecognized X12 data by the validation engine. When the file is unable to be recognized an audit report will be generated and posted to the Trading Partner mailbox. If the Trading Partner is unable to be identified in either the ISA or GS, the audit report will still generate and post to a mailbox created for the Trading Partner ID found in the inbound file. The Trading Partner should use the audit report to correct and resubmit their X12 file.

- Leading spaces before the start of the data makes the fileunrecognizable. Compliance Check expects “ISA” in the first three spaces.

Data With Error Report	Powered by Editors
Generated: Thursday, October 04, 2012 09:51 AM EDT (GMT) http://api.edi.com/v2/Schemas/profiles/ediexchange_data/xmlschemas/_ReportUsingInterface.html?doc=000-2755-e&No=9100&id=147163933	
This report shows the results of a submitted data file validated against corresponding guidelines. If there are errors, you must fix the application that created the data file and then generate and submit a new data file.	
Report Summary	
Total Errors:	1
Total Warnings:	0
Total Informational:	0

The three acceptance/rejection reports are:

- TA1 Interchange Acknowledgement
- X12C 999 Implementation Acknowledgement
- EDIFECs Error Report

The ISA and GS segments contain the header and footer information within the Interchange (ISA-IEA) and Functional Group (GS-GE) envelopes. Some ISA-IEA and GS-GE problems will result in the entire submission being rejected. A TA1 will be delivered to the Trading Partner mailbox. If the Trading Partner relationship does not exist (a missing or invalid Trading Partner ID) a TA1 will be generated because the relationship does not exist within the NH Medicaid Trading Partner Management Database. A report of the TA1 will be generated daily and delivered to the Conduent Provider Relations Unit and the EDI Business Analyst for additional review. For additional information regarding the TA1, please refer to the ASC X12C 999 (v005010X231A1TR3) Implementation Guide.

- The submitted file is not recognized as an X12N file due to file corruption or data errors in the ISA-IEA or GS-GE envelopes.
- The submitted file has errors that would prevent the translation engine from uniquely identifying the file, transaction type, or submitter.

- The Trading Partner identified in GS02 is not recognized or is not authorized to submit test or production files of that transaction type.
- The ISA01 contains a value other than 00 or 03.

Interchange-Level Errors and the TA1 Rejection Report

Envelope problems that make it impossible to identify the ISA-IEA envelope will result in a TA1 Interchange Acknowledgement rejection of the entire submission.

Functional Group Level Errors and the TA1 Rejection Report

When the ISA-IEA and GS-GE envelopes are identifiable but the Trading Partner is not authorized for the transaction, the entire submission is rejected with a TA1.

X12C 999 Implementation Acknowledgment

If the file, envelope, and submitter are recognized, the file is passed through Compliance Check to determine the syntactical validity of the X12N submission. An X12C 999 Implementation Acknowledgement will be generated for all files that receive an accepted TA1. If errors are found, a rejected or partial X12C 999 will be generated. If errors are not found, an X12C 999 will be generated with an accepted acknowledgment. If the Trading Partner receives a rejected or partial X12C 999, the Trading Partner will review, correct and resubmit. For additional information regarding the X12C 999, please refer to the ASC X12C 999 (v005010X231A1TR3) Implementation Guide. If the Trading Partner requires additional assistance with the X12C 999, please contact the Provider Relations Unit.

Interchange Level Errors and the X12C 999 Implementation Acknowledgement

If the Interchange Header is recognizable and all elements are the proper length, but the header contains syntactically invalid data, such as invalid qualifiers or data relationships, an X12C 999 will be generated.

Functional Group Level Errors and the X12C 999 Implementation Acknowledgement

When the GS and GE segments are identifiable and the Trading Partner is authorized for the transaction, but a syntactical error is identified in the GS or GE segments, the entire functional group (from GS to GE) is rejected with an X12C 999.

Example of Functional Group Level Error that will result in an X12C 999:

- The transaction was built with incorrect Total Number of transaction sets at the Functional Group Trailer. GE01 should be 2 because the Functional Group contains two ST to SE transaction sets.

Transaction Set Level Errors and the X12C 999

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 X12C 999. However, if the functional group consists of additional transactions without errors, the other transactions will be processed.

EDIFECs Error Report

Every X12N transaction that does not receive a TA1 or X12C 999 transaction rejection will pass through the EDIFECs Compliance Check engine. EDIFECs generates a full report of all Loops, Segments, Elements, along with the data contained within them, and explanations of the errors, if any. This report is especially useful in troubleshooting errors when it is combined with the X12C 999. The EDIFECs reports will be available to Trading Partners in their mailbox.

9 Trading Partner Agreements

Prior to engaging in EDI with the New Hampshire MMIS Enterprise, prospective Trading Partners must complete a Trading Partner enrollment package, which includes a Trading Partner Signature Agreement Form that requires an original signature. Please follow all enrollment instructions and mail the signed Trading Partner Agreement Form to the Conduent NH Medicaid Fiscal Agent, along with any other required documents to complete the enrollment application process.

Please find all New Hampshire Provider/Trading Partner Enrollment information at:
<https://nhmmis.nh.gov/portals/wps/portal/ProviderEnrollment>

The mailing address is:

Conduent Provider Relations Unit
P. O. Box 2059
Concord, NH 03302-2059

Trading Partners

In simple terms, an EDI Trading Partner is defined as any provider or agent acting on behalf of the provider who transmits electronic transaction data to or receives electronic transaction data from a health plan.

Trading Partners are the MCOs that are servicing the growing Medicaid population. In this case the MCO is the trading partner exchanging electronic transactions with NH MMIS and is also a "Provider" the entity being paid by NH MMIS.

10 Transaction Specific Information

This section contains data clarifications, including New Hampshire-specific data requirements. For additional guidance on the use of business rules, please see [Section 7 New Hampshire Medicaid Specific Business Rules and Limitations](#).

ASC X12N 834 Benefit Enrollment and Maintenance

This section is common for both the daily and monthly reconciliation process. The daily file would have enrollment information (Addition, Change, Termination and Reinstatement of Members) and the monthly reconciliation file is to ensure NH Medicaid and the MCOs are synchronized. The 834 enrollment reconciliation transaction will be initiated by NH Medicaid and is identified by the action code in BGN08 and INS03. The reconciliation process occurs once a month after completing all daily operational activities related to enrollment.

TR3 Page	Loop	Segment	Data Element	Industry Name	Comments
Interchange Control Header (ISA)					
C.4	Envelope	ISA	05	Interchange ID Qualifier	ZZ
C.4	Envelope	ISA	06	Interchange Sender ID	026000618
C.5	Envelope	ISA	07	Interchange ID Qualifier	ZZ
C.5	Envelope	ISA	08	Interchange Receiver ID	Trading Partner ID assigned by NewHampshire Medicaid
C.6	Envelope	ISA	14	Acknowledgement requested	1
Transaction Set Policy Number (REF) - Will not be sent.					
File Effective Date (DTP)					
37	N/A	DTP	01	Date/Time Qualifier	303 – Maintenance Effective Date
Transaction Set Control Totals (QTY)					
38	N/A	QTY	01	Quantity Qualifier	TO

TR3 Page	Loop	Segment	Data Element	Industry Name	Comments
Loop 1000A – Sponsor Name Information (N1)					
39	1000A	N1	02	Name	"NH MEDICAID"
40	1000A	N1	03	Identification Code Qualifier	FI – Federal Tax ID
40	1000A	N1	04	Identification Code	026000618
Loop 1000B – Payer Identification (N1)					
42	1000B	N1	03	Identification Code Qualifier	FI – Federal Tax ID
Loop 1000C – TPA/Broker Name and Account will not be sent.					
Loop 2000 – Member Level Detail (INS)					
48	2000	INS	01	Response Code	It will always be "Y"
48	2000	INS	02	Individual Relationship Code	It will always be "18"
49	2000	INS	04	Maintenance Reason Code	The following set of codes represents the plan selection method during Initial enrollment. The detailed plan selection method is available in 2750 Reporting Category loop Section. AL – Auto – Algorithm AL – Auto – Claims History AL – Auto – Family Affiliation AL – Auto – Prior MCO AL – Auto – PCP Affiliation. AL – Auto-Claims Tiebreaker EC – EASY EC – Form EC – New HEIGHTS Screen EC – Administrative 02 – Newborn 02 – QHP Newborn 28 - Auto-Performance 28 – New HEIGHTS Pre-Selection 28 – NH EASY Pre-Selection 28 - Passive Renewal NH MMIS would use the 834 X12 TR3 recommended values during Update/Termination/Re-enrollment/reconciliation 834X12 Transactions.
51	2000	INS	06	Medicare Status Code	If a Member is Medicare, then appropriate Status code will be sent. Note: INS06-2 will not be sent.

54	2000	INS	12	Date Time Period	If member is deceased, then reporting Member's death date will be sent.
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TR3 Page	Loop	Segment	Data Element	IndustryName	Comments
54	2000	INS	13	Confidentiality Code	NH Medicaid sends either U or R based on Member's Information.
Loop 2000 – Subscriber Identifier (REF)					
55	2000	REF	02	Reference Identification	NH Medicaid ID
Loop 2000 – Member Supplemental Identifier (REF)					
56	2000	REF	01	Reference Identification Qualifier	This segment may have 2 -3 loops depending on Medicare information. 3H – Case Number 17 – Medicaid ID F6 – MBI ZZ - HICN
56	2000	REF	02	Reference Identification	If REF01 = 3H – New Heights Case Number will be sent in REF02. If REF 01 = 17, Medicaid ID will be sent in REF02. If REF01 = F6, MBI will be sent in REF02. If REF01 = ZZ, HICN will be sent in REF02.
Loop 2000 – Member Level Dates (DTP)					
59	2000	DTP	01	Date/Time Qualifier	338 – Medicare Begin Date 339 – Medicare End Date. If the Medicare End Date is end of time, then Medicare End Date will not be sent.
Loop 2100A – Member Name (NM1)					
62	2100A	NM1	01	Entity Identifier Code	X12 recommended code will be sent based on the type of transaction.
63	2100A	NM1	03	Name Last or Organization Name	Medicaid Member Last Name will always be sent. The Allowed values are A-Z, a-z, 0-9, '.', ''(space),'-'.
63	2100A	NM1	04	Name First	Medicaid Member First Name will always be sent. The Allowed values are A-Z, a-z, 0-9, '.', ''(space),'-'.
63	2100A	NM1	05	Name Middle	If available, it will be sent. It will always be a single character
63	2100A	NM1	07	Name Suffix	If available it will be sent. MCOs can expect any of the following values I,II,III,IV,V,JR,MD,PHD,SR

TR3 Page	Loop	Segment	Data Element	Industry Name	Comments
64	2100A	NM1	08	Identification Code Qualifier	34 – If Member SSN is available it will be sent.
64	2100A	NM1	09	Identification Code	If Member SSN is available it will be sent. Note: SSN is not validated.
Loop 2100A – Member Communication Numbers (PER)					
65	2100A	PER	03	Communication Number Qualifier	TE
65	2100A	PER	05	Communication Number Qualifier	AP
65	2100A	PER	07	Communication Number Qualifier	EM
Loop 2100A – Member Residence Street Address(N3)					
68	2100A	N3	01	Address Information.	Either Member Residence Address or Mailing Address will always be sent.
Loop 2100A – Member City, State, Zip code (N4)					
70	2100A	N4	03	Postal Code	NH MMIS stores either 9 or 5 character postal Code. Note: The postal codes are not validated.
70	2100A	N4	05	Location Qualifier	If county is available, "CY" will be sent.
69	2100A	N4	06	Location Identifier	If available, NH MMIS Will Transmit County of Residence. Note: County Codes will not be sent for Out of State Members.
Loop 2100A – Member Demographics (DMG)					
72	2100A	DMG	02	Date Time Period	Member's Birth Date will always be sent. It will not be future Date.
73	2100A	DMG	03	Gender Code	MMIS Stores M, F or U. So MCOs can expect any of the X12 recommended values in 834 Transaction.
73	2100A	DMG	04	Marital Status Code	This will not be sent.

TR3 Page	Loop	Segment	Data Element	Industry Name	Comments
73	2100A	DMG	05	Race or Ethnicity Information	A - Asian E - Other Race or Ethnicity H - Hispanic I - American Indian or Alaskan Native J - Native Hawaiian N - Black (Non-Hispanic) O - White (Non-Hispanic) Note: New Hampshire will send Native Hawaiian OR Pacific Islander as J – Native Hawaiian.
73	2100A	DMG	06	Citizenship Status Code	1 – US Citizen 3 – Resident Alien
Loop 2100A – Employment Class (EC) will not be sent.					
Loop 2100A – Member Income (ICM) will not be sent.					
Loop 2100A – Member Policy Amount (AMT) will not be sent.					
Loop 2100A – Member Health Information (HLH).					
82	2100A	HLH	01	Tobacco Usage	T – Tobacco User N – Not a Tobacco User U – Unknown
Member Language (LUI)					
84	2100A	LUI	01	Identification Code Qualifier	LE – ISO 639 Language Codes
85	2100A	LUI	02	Identification Code	If Known, Member language information will be sent. Language - ISO 639 Code Albanian - sqi Arabic - ara Bosnian - bos Cantonese - chi French - fra Farsi - fas Greek - grk Korean - kor Mandarin - chi Portuguese - por Romanian - ron Russian - rus Spanish - spa Swahili - swa Syrian - syr Ukrainian - ukr Vietnamese - vie
Loop 2100B – Incorrect Member Name – This loop will be sent when there is a change in Member's Name or Demographic information.					
Loop 2100C – Member Mailing Address (N3)					
95	2100C	N3	02	Mailing Address Information	If Applicable, Member's care of address will be sent in N302 and it can be identified by "C/O" prefix followed by Care of Person Name.
Loop 2100D – Member Employer will not be sent.					

TR3 Page	Loop	Segment	Data Element	Industry Name	Comments
Loop 2100E – Member School will not be sent.					
Loop 2100F – Custodial Parent will not be sent.					
Loop 2100G – Responsible Person (NM1)					
124	2100G	NM1	01	Entity Identifier Code	QD - Responsible Party: This code will be used to indicate the Case Head. New Hampshire will always send a 2100G loop with the Case Head name. QD – This code will be used to identify the Responsible Person for cases where the casehead is under the age of 18. The presence of NM108 and NM109 values (see below) distinguishes the responsible person in this scenario from the Case Head iteration described above. 6Y – Case Manager: Situational. For Foster Care, District Office information will be sent. LR -- Legal Representative. This code will be used when the member has a guardian, conservator or protected payee, Authorized Rep, Power of Attorney. 9K – Key Person (Situational). This code will be used when the member has a Care Giver.
125	2100G	NM1	03	Name Last	QD – Case Head Last Name will always be Sent. LR – Last Name will always be Sent. 6Y – Case Manager Last Name will always be sent. 9K – Care Giver Name will always be sent.
125	2100G	NM1	04	Name First	QD – Case Head First Name will always be sent. If Available, LR – Legal representative First Name will be sent. 6Y – First Name will not be sent. 9K – First Name will not be sent.
126	2100G	NM1	08	Identification Code Qualifier	In Case of Minor Case Head, this will be ZZ
128	2100G	NM1	09	Identification Code	For Minor Case Head, this element will carry value "MINOR CASEHEAD RESPONSIBLE PERSON"

TR3 Page	Loop	Segment	Data Element	Industry Name	Comments
Loop 2100G – Responsible Person Communication Numbers (PER) – PER Segment will not be sent for Case Head. If available and NM101 is LR, QD (with NM108 and NM109) and CY, Communication numbers will be sent.					
Loop 2100G – Responsible Person Street Address (N3) – N3 Segment will not be sent for Case Head. If available and NM101 is LR, QD (with NM108 and NM109) and CY, Street address will be sent.					
130	2100G	N3	01	Mailing Address Information	
130	2100G	N3	02	Mailing Address Information	If NM101 – 6Y – If Applicable, Member's Staff worker Name will be sent in N302 and it can be identified by "C/O" prefix followed by Staff Worker Name.
Loop 2100G – Responsible Person City, State, Zip Code (N4) – N4 Segment will not be sent for Case head. If available and NM101 is LR, QD (with NM108 and NM109) and CY, State, City and Zip code will be sent.					
Loop 2100H – Drop off Location will not be sent					
Loop 2200 – Disability Information will not be sent.					
Loop 2300 – Health Coverage (HD)					
141	2300	HD	03	Insurance Line Code	HLT- Health. The member is eligible for the coverage benefits agreed upon between DHHS and MCOs.
141	2300	HD	04	Plan Coverage Description	If available termination reason code will be sent. 13- Income Exceeds the Program Limit 14- Income Exceeds the Net Income Limit 16 Income Exceeds the Gross Income Limit 24-Countable Resources Exceed Limits 112–Failed to Provide/Verify Information 113–Failed to Provide Information 186--Reported resources exceed the program eligibility standard 304–Income Exceeds the Limit 351–Community Engagement Suspension 700–Mail-In Rede Form Not Returned 710–Did Not Keep Required Interview Appointment 847–Did Not Keep A Redetermination Appointment 808-Resources Exceed Limit 933–Online Rede Application Not Completed

					940-Denied Due to Enrolled for Medicare Part A or B NOTE: This will only be sent if the member is terminated for these specific reasons.
Loop 2300 – Health Coverage Date (DTP)					
145	2300	DTP	01	Date/Time Qualifier	348 – Benefit Begin Date 349 – Benefit End. This will be sent during Termination Transaction.
Loop 2300 – Health Coverage Policy Amount (AMT Segment) will not be sent.					

Loop 2300 – Health Coverage Policy Number (REF) Segment will not be sent.					
Loop 2300 – Prior Coverage Months (REF Segment) will not be sent.					
Loop 2300 – Identification Card (IDC Segment) will not be sent.					
Loop 2310 – Provider Information					
155	2310	NM1	01	Entity Identifier Code	P3 – Primary Care Provider
156	2310	NM1	02	Entity Type Qualifier	1 – Person
156	2310	NM1	03	Name Last	This element will not be sent.
156	2310	NM1	04	Name First	This element will not be sent.
156	2310	NM1	05	Name Middle	This element will not be sent.
156	2310	NM1	06	Name Prefix	This element will not be sent.
157	2310	NM1	07	Name Suffix	This element will not be sent.
157	2310	NM1	08	Identification Code Qualifier	XX – Centers for Medicare and Medicaid Services National Provider Identifier
157	2310	NM1	09	Identification code	NPI ID
157	2310	NM1	10	Entity Relationship Code	72 – Unknown
Loop 2320 – COORDINATION OF BENEFITS will not be sent.					
Loop 2750 – Reporting Category (N1)					
103	2750	N1	02	Reporting Name	See "2750 Reporting Category Loop" Section for a complete list of Reporting Category.

2750 Reporting Category Loop

N102	REF01	REF02	DTP	Initial Enrollment	Monthly Reconciliation	Termination	Change	Comments
"ADDL MAINT REASON"	17	'TERM'	N			Y		Terminate a member
"COE-CRE CODE"	9X	<<AAAA>>-<<X>>	Y	Y	Y		Y	COE refers to Category of Eligibility. This refers to the 4. characters Medicaid Program Code. Refer to "Category of Eligibility" Table for the list of COE Codes. CRE Code refers to the Community Re-entry Program. This is populated when the member is in this program. A – Adult Medicaid Community Re-entry C – Youth Medicaid Community Re-entry B – Both Adult and Youth Community Re-entry. N – Not eligible for Community Re-entry NOTE: For member's that are eligible for both youth and adult Community Re-entry Program, they will be enrolled in the Adult Re-entry benefit plan for the first 15 days. On the 16th day they will be enrolled in the Both Adult and Youth plan for the remaining time.
"EXPANSION BENEFIT PLAN"	XX1	"MA/MS"	Y	Y	Y		Y	Value in REF02 represents the Medicaid expansion benefit plan. MA- Medicaid Alternate Benefit Plan. Member has Granite Advantage Health Care Program MS- Medicaid Standard

N102	REF01	REF02	DTP	Initial Enrollment	Monthly Reconciliation	Termination	Change	Comments
"NF LIABILITY"	ZZ	<<AAA>> - <<NNNNNNNN N.NN>>	Y	Y	Y		Y	This Reporting category loop represents the Medicaid Nursing facility and Medicare Skilled Nursing Facility Liability amounts and this loop can have multiple iterations for a member. REF02 represents two values. The First three bytes represent either PLB (Medicaid Nursing facility) or Medicare Skilled Nursing Facility (SNF) followed by a "-" (hyphen) symbol and the liability amount. The Patient Liability amount can be Zero but will not contain negative amounts.

N102	REF01	REF02	DTP	Initial Enrollment	Monthly Reconciliation	Termination	Change	Comments
"HCBC"	ZZ	<<NNNNNNNNNN N>>- <<CCYYMMDD >>-<< AAAAAAAAAA AA AAAAAAAAAA AAAAAAAAAA >>	Y	Y	Y		Y	This Reporting category loop represents the HCBC Type, Case management Agency and their Next Review Date. The Case Management Agency is the agency that provides case management services to a Medicaid recipient who is approved for HCBC waived services. <<AA>> represents the two bytes of HCBC Type. MCO can receive any of the following values based on the HCBC type identified for the member. AA – DD/Community/DD AB – DD/Nursing Home/DD AC – CFI/Community/CFI AD – CFI/Nursing Home/CFI BB – ABD/Nursing Home/ABD BC – ABD/Community/ABD BE – ABD-MFP/Community Passport/ABD CC – Child/Community/IHS DD CE – Child MFP/Community Passport/ABD CI – Child/Institution/IHS DD DE – DD-MFP Community Passport/DD EC – CFI-Mid Community/CFI ED – CFI-Mid/Nursing Home/CFI EE – CFI-MFP/Comm Passport/CFI EF – CFI-CDB/Community/CFI EG – CFI-CDB/Nursing Home/CFI FD – FAST Forward Waiver w/DCYFDJJS FN – FAST Forward Waiver non-DCYFDJJS Waiver Types: ABD—Community Services for individuals with an Acquired Brain Disorder DD—Community Services for individuals with a Developmental Disability CFI—Choices for Independence IHS – In Home Supports for Children with developmental disabilities. FF – FAST Forward (Families and Systems Together). <<NNNNNNNNNN>> – Represents Medicaid Case management ID.

N102	REF01	REF02	DTP	Initial Enrollment	Monthly Reconciliation	Termination	Change	Comments
								<<CCYYMMDD>> – This represents the next review date. << AAAAAAAAAAAAAAAAAA AAAAAAAAAAAAAAAAAAAAAA >> Represents the first and last name of the case manager. The first and last name will be delimited by space. MCO can receive any of the following case management agency IDs. CFI: •3076643 – Area Agency of Greater Nashua INC •3076352 – Brain Injury Association of NH •3076981 – Community Crossroads INC •3079997 – Crotched Mt Community Care INC •3106613 – Granite Case Management •3076344 – Life Coping INC •3076343 – Pilot Health INC •3114528 – Community Partners of Strafford County •3110628 – Monadnock Collaborative ABD, DD, & IHS: • 1 – Northern Human Services • 2 – PathWays of the River Valley • 3 – Lakes Region Community Services • 4 – Community Bridges, Inc. • 5 – Monadnock Developmental • 6 – Gateways Community Services • 7 – Moore Center Services, Inc. • 8 – One Sky Community Services • 9 – Community Partners Forum Court • 10 – Region 10 Community Support Services, Inc FF: •11 – NFI North • 12 – Center for Life Management

N102	REF01	REF02	DTP	Initial Enrollment	Monthly Reconciliation	Termination	Change	Comments
"NURSING FACILITY"	ZZ	<<AAA>> - <<AN>>- <<NNNNNNNN NN>>	Y	Y	Y		Y	This Reporting category loop represents the level of Care that is provided to Medicaid Members and their NPI. For Medicare Skilled Nursing Facility, the level of care is unknown therefore value "Z1" will be sent for Medicare SNF Services. The first three characters <<AAA>> represent the Nursing care Type. They can contain either NSF – Medicaid Nursing Facility or SNF – Medicare Skilled nursing Facility. <<AN>> represents the Level of Care. L1 – SNF L2 – ICF L3 – SNF Atypical L4 – ICF Atypical L5 – SNF Swing L6 – ICF Swing TWO SPACES – Applies only to Medicare Skilled Nursing Facility. <<NNNNNNNNNN>> represents the NPI. Note: The Three values are separated by a "-" hyphen symbol.
"IMD PLANS"	ZZ	<<NNNNNNNN NN>> - <<AAAAAAAAA AAAAAAAAAA AAA>>	Y	Y	Y		Y	This Reporting category loop represents the IMD plans. <<NNNNNNNNNN>> represents the NPI. << AAAAAAAAAAAAAAAAAAAAA AAAA >> represents the provider's name. Note: The Two values are separated by a "-" hyphen symbol.

N102	REF01	REF02	DTP	Initial Enrollment	Monthly Reconciliation	Termination	Change	Comments
"PREGNANT"	9X	"AQ"	Y	Y	Y		Y	This reporting category shares the members pregnancy information
"COPAY"	9X	"CP"	Y	Y	Y		Y	This loop represents the copay eligibility span for the enrolled member. The eligibility span is provided in DTP segments and this loop can have multiple iterations for a member.
"PLAN SELECTION METHOD"	18	"AA" "AC" "AF" "AM" "AP" "AT" "A1" "E1" "F1" "H1" "M1" "M2" "QN" "PH" "PE" "PR"	N	Y				PLAN SELECTION METHOD. This is a detailed classification list and any one of the plan selection methods listed in REF02 made during the plan selection will be sent. The codevalues and their plan selection definition is listed below AA – Auto – Algorithm AC – Auto – Claims History AF – Auto – Family Affiliation AM – Auto – Prior MCO AP – Auto – PCP Affiliation. AT – Auto-Claims Tiebreaker A1 - Auto-Performance E1 – EASY F1 – Form H1 – New HEIGHTS Screen M1 – Administrative M2 – Newborn QN – QHP Newborn PH – New HEIGHTS Pre-Selection PE – NH EASY Pre-Selection PR - Passive Renewal
"DCYF DETAILS"	19	<<TEXT1>> <<TEXT2>> <<TEXT3>> <<TEXT4>>	Y	Y	Y		Y	This Reporting category loop represents the Foster child's DYCF details. TEXT1 – The first field represents the Bureau Indicator. MCOs can receive "C", "J" or "S" to indicate CPS, JJ or shared. TEXT2 – The second field represents the Medical Decision maker. Text 2 can be "DCYF", "PARENT" or "SELF". Y TEXT3 – The third field represents the placement Status. MCOs can receive any of the following placement status values Text 3 can be "In Placement" or "Home"

N102	REF01	REF02	DTP	Initial Enrollment	Monthly Reconciliation	Termination	Change	Comments
								TEXT4 – The fourth field represents the placement type. MCOs can receive any of the following placement types. Foster Home Group Care Relative Home Medical Runaway/Missing
"HEALTH INDICATORS"	ZZ	<<TEXT1>>- <<TEXT2>>- <<TEXT3>>- <<TEXT4>>	N	Y	Y		Y	This Reporting category loop represents the Health Indicators. TEXT1 - Indian Tribal Health Services. Y – Yes the member is eligible for Indian Tribal Health Services N – No the member is not eligible for Indian Tribal Health Services U – Unreported TEXT2 – Supplemental Security Income Y – Yes N – No TEXT3 – Social Security Disability Insurance Y – Yes N – No TEXT4 – Special Medical Services Y – Yes N – No
"FINANCIAL REDETERMINATION DATE"	ZZ	"MMCCYY"	N	Y	Y		Y	This Reporting category loop represents the Financial Redetermination date.
"LIVING ARRANGEMENT"	ZZ	<<NN>>	N	Y	Y		Y	This Reporting category loop represents the Living Arrangement. 06– Homeless 07– Homeless -Temporary Shelter
"INCARCERATION RELEASE DATE"			Y	Y	Y		Y	This Reporting category loop represents the Incarceration Release Date in the DTP segment in CCYYMMDD
"COMMUNITY ENGAGEMENT INFORMATION"	ZZ	<<MMCCYY>>- <<MMCCYY>>- <<X>>-<<XX>>- <<MMDDCCYY>> - <<MMDDCCYY>>	N	Y	Y	Y	Y	This Reporting category loop represents the Community Engagement Information. The first field represents the community engagement Begin Date. The second field represents the community engagement End Date. The third field represents the Community Engagement

N102	REF01	REF02	DTP	Initial Enrollment	Monthly Reconciliation	Termination	Change	Comments
								Status Code: E – Exempt M – Mandatory V – Voluntary The fourth field represents the community engagement status reason code: C – Closed N – Non-Compliant O – Open S – Suspended AD – Disability AF – Pnt/Caretaker of Family Member Need Care CC – Parent/Caretaker Child Under 6 CH – Parent/Caretaker DD Child DU – Disabled HD – Caretaker Family Mem Disabled HI – Enrolled in HIP HL - Homeless HR – Inpatient Hospitalization HS – Caretaker Family Mem ill/Hosp MF – Medically Frail PR – Pregnant / Post-Partum RA – ReasonableAccommodation SC – State Cert Drug Court Program ST – Exempt in SNAP/TANF TR – Illness/Incap/Outpatient The fifth field represents the community engagement participation date. The sixth field represents the community engagement non-compliance date.
COHORT RATE		<<NNNNNNNN NNN>>- <<CCYYMMDD>> - <<CCYYMMDD>>	Y	Y	Y			This Reporting category loop represents the estimated cohort rate for the associated dates. The actual payment amount will e determined when the capitation payment is issued.

Note: Health Coverage (834 X12 Loop ID – 2300) and Reporting Category Loop (834 X12 Loop ID – 2750) will not be sent when there is a change to Member Name, Address or Demographic information.

Category of Eligibility

COE Code	Description	Additional Identifier
MAAA	Old Age Assistance	Old Age Assistance
MAAB	Aid to the Needy Blind	-----
MAAD	Aid to the Permanently and totally Disabled	Disabled Adult
MAEM	Families with Older Children (FWOC)	TANF
MAEN	Transitional Assessment Planning Program (TAP)	TANF
MAER	New Hampshire Employment Program (NHEP)	TANF
MAES	Interim Disabled Parent Program (IDP)	TANF
MAEU	Unemployed Parent (UP)	TANF
MAFR	Family Assistance Program (FAP)	TANF
MAFU	Unemployed Parent	TANF
MBCC	Breast and Cervical Cancer Program	BCCP
MCAA	Old Age Assistance (Cat Needy)	Old Age Assistance
MCAB	Aid to the Needy Blind (Cat Needy)	-----
MCAD	Aid to the Permanently and totally Disabled (Cat Needy)	Disabled Adult
MCDC	Children w/Severe Disabilities (Cat Needy)	-----
MCER	NHEP-Related Regular or Absent Parent (Cat Needy)	TANF-related MA
MCEU	NHEP-Related Unemployed Parent (Cat Needy)	TANF-related MA
MCFR	FAP-Related Regular or Absent Parent (Cat Needy)	TANF-related MA
MCFU	FAP-Related Unemployed Parent (Cat Needy)	TANF-related MA
MCHC	Home Care-Children w/Severe Disabilities (Cat Needy)	Katie-Beckett
MCIE	Children's Expanded	-----
MCN	Newborn	-----
MCP1	Adoption Subsidy IV-E (Cat Needy)	Adoption Subsidy
MCP2	Adoption Subsidy Non IV-E (Cat Needy)	Adoption Subsidy
MCPI	Foster Care IV-E (Cat Needy)	Foster Care
MCPN	Foster Care Non IV-E (Cat Needy)	Foster Care
MCRA	Refugee Medical Assistance Adult (Cat Needy)	-----
MCRF	Refugee Medical Assistance Family (Cat Needy)	-----
ME12	Extended 12 Month	-----
ME4	Extended 4 Month	-----
MEAD	Medicaid for Employed Adults	Disabled Adult
MEAO	Medicaid for Older Adults with Disabilities	Disabled Adult
MGIA	Granite Advantage Health Care Program	-----
MGIC	Children's Medicaid	-----
MGIE	Expanded Children	-----
MGIF	Former Foster Care	-----
MGIM	Granite Advantage Health Care Program--Medically Frail	-----
MGIN	Newborn	-----
MGIP	Parents Caretaker	-----
MGIW	Pregnant Woman	-----
MMAA	Old Age Assistance (Med Needy)	Old Age Assistance

COE Code	Description	Additional Identifier
MMAB	Aid to the Needy Blind (Med Needy)	-----
MMAD	Aid to the Permanently and totally Disabled (Med Needy)	Disabled Adult
MMDC	Children w/Severe Disability (Med Needy)	-----
MMER	NHEP-Related Regular or Absent Parent (Med Needy)	TANF-related MA
MMEU	NHEP-Related Unemployed Parent (Med Needy)	TANF-related MA
MMFR	FAP-Related Regular or Absent Parent (Med Needy)	TANF-related MA
MMFU	FAP-Related Unemployed Parent (Med Needy)	TANF-related MA
MMHC	HC-CSD (Med Needy)	Katie-Beckett
MMP2	Adoption Subsidy Non IV-E (Med Needy)	Adoption Subsidy
MMPN	Foster Care Non IV-E (Med Needy)	Foster care
MMRA	Refugee Medical Assistance Adult (Med Needy)	-----
MMRF	Refugee Medical Assistance Family (Med Needy)	-----
MP C	Poverty Level Child	-----
MP P	Poverty Level Pregnant Woman / Postpartum	-----
MPQC	Children's Medical Assistance	-----
MPQP	Qualified Pregnant Woman / Postpartum	-----
MSPB	Protected MA – 1619(A) / 1619(B)	-----
MSPP	Protected MA – Pickle	-----

ASC X12N 834 Benefit Enrollment and Maintenance – Enrollment Confirmation

The Enrollment Confirmation (or otherwise called as Effectuation Instruction) transaction is created in accordance with the ASC X12 Technical Report Type 3 standards and CCIIO Companion guide. The Trading Partners can use the same communication channel to transmit the ASC X12 834 Enrollment confirmation transaction to NH Medicaid System. NH Medicaid expects 834 Effectuation Instructions (EI) within 48 business working hours. The Acknowledgement and Error report process is defined in Section 8 of this document. The below table contains data clarifications, including New Hampshire-specific data requirements.

Conduent EDI Solutions expects each member enrollment confirmation in a separate ST to SE with 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). This will facilitate the ability to reject some enrollments if they are not valid. As specified in "Acknowledgements and/or Reports" section, if errors are found, X12C 999 will be generated and NH Medicaid expects the corrected information within next 48 Hours for the error transactions.

TR3 Page	Loop	Segment	Data Element	Industry Name	Comments
Interchange Control Header (ISA)					
C.4	Envelope	ISA	05	Interchange ID Qualifier	ZZ
C.4	Envelope	ISA	06	Interchange Sender ID	Trading Partner ID assigned by New Hampshire Medicaid
C.5	Envelope	ISA	07	Interchange ID Qualifier	ZZ
C.5	Envelope	ISA	08	Interchange Receiver ID	026000618
C.6	Envelope	ISA	14	Acknowledgem ent requested	1
Transaction Set Control Totals (QTY)					
38	N/A	QTY	01	Quantity Qualifier	TO

TR3 Page	Loop	Segment	Data Element	Industry Name	Comments
Member Level Detail (INS)					
49	2000	INS	04	Maintenance Reason Code	28
Member Supplemental Identifier (REF)					
56	2000	REF	01	Reference Identification Qualifier	Two iterations will be sent. ZZ 17
56	2000	REF	02	Reference Identification	ZZ – MCO assigned Subscriber ID will be sent. 17 – Medicaid Assigned Member ID.
Health Coverage Date (DTP)					
145	2300	DTP	03	Date Time Period	348 – Benefit Begin Date. Enrollment Begin Date must be sent.
Reporting Category (N1)					
103	2750	N1	02	Reporting Name	See "2750 Reporting Category Loop" Section for a complete list of Reporting Category.

2750 Reporting Category Loop

N102	REF01	REF02	DTP	Initial Enrollment	Confirmation	Termination	Change	Comments
"ADDL MAINT REASON"	17	"CONFIRM"	N		Y			Confirmation of Member Details

Appendices

Implementation Checklist

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

Business Scenarios

In the event your specific EDI-related business scenario is not addressed in this guide or the other available NH Medicaid X12N Transaction Companion Guides, please contact the Conduent New Hampshire Provider Relations Unit to discuss your specific EDI-related business needs with NH Medicaid.

Transmission Examples

Please contact the Conduent New Hampshire Provider Relations Unit for any question regarding transmission examples.

Frequently Asked Questions

For current Provider and Trading Partner FAQs, please visit the following page:
<https://nhmmis.nh.gov/portals/wps/portal/ProviderFaq>

Change Summary

Version	Date	Description
1.0	06/08/2015	Initial Document for Deliverables
1.1		Summary of Changes 1. Section 10 – "Transaction Set Policy Number" Segment is included. 2. Section 10 – "File Effective Date" Segment is included. 3. Section 10 – Loop 1000C TPA/Broker account Segment is included. 4. Section 10 – INS Segment – Provided additional Information to INS01, INS02, INS06, INS12 and INS13 elements. 5. Section 10 – Loop 2000 – Member Level Dates information is included. 6. Section 10 – Loop 2100A – NM1 Segment. Additional information about this Segment is provided (NM101, NM103, NM104, NM105, NM107, NM108 and NM109). 7. Section 10 – Loop 2100A – N3 Segment is included. 8. Section 10 – Loop 2100A – N403, N404 element is included. 9. Section 10 – Loop 2100A – Member Demographics Segment is included. 10. Section 10 – Loop 2100A – Segments EC, ICM and AMT is included. 11. Section 10 – Loop 2100B – Information about Incorrect Member Name loop is added. 12. Section 10 – Included 2100D, 2100E, 2100FLoops. 13. Section 10 – Loop 2100G – Included NM103, NM104, NM108 and NM109. 14. Section 10 – Included 2100G PER, N3, N4 Segments. 15. Section 10 – Included 2100H Loop. 16. Section 10 – Included 2200 Loop. 17. Section 10 – Section 2300 AMT, Prior Coverage Months (REF), IDC Segments. 18. Section 10 – Included 2310 Loop Information.

Version	Date	Description
		19. Section 10 – Included 2320 Loop Information. 20. Section 10 – Modified the 2700 Member reporting category loop to 2750 Reporting category loop. 21. Section 10 – Modified the Change column in reporting category table. 22. Section 10 – Added *NOTE* below the 2750 Member Reporting Category table. 23. Section 10 – 834 Confirmation – Included Qualifier 17 in Member Supplemental Identifier. 24. Page 10 – Naming of Files Section is modified to include file naming standards for 999 and TA1 X12s.
1.2	07/29/2015	1. Section 8: Included verbiage for Carriers to contact Conduent EDI Customer support in case of EDI File failures or errors. 2. NPI will be sent instead of Nursing Facility ID in 2700 Loop.
1.3	09/14/2015	1. N102 Value "HCBC Liability" in 2750 loop – Added "IHS" type of HCBC Service in Page 34. 2. N102 Value "NF Liability" – The Medicare nursing facility is changed to SNF from NSF.
1.4	10/13/2015	1. Modified the Termination column in "2750 reporting Category Loop" section to reflect the correct information that will be sent in a Termination Transaction.
1.5	12/02/2015	1. Change Loop ID from 2100 to 2310 in (loop 2310 – Provider information). 2. Formatting Changes.
1.6	01/26/2016	1. Added HCBC Case Management Agency IDs in 2750 HCBC Loop. 2. Removed the following 2750 Loop information a. PRE AMT 1 b. BH SUPP AMT c. OTH PAY AMT 1 d. PRE AMT TOT e. TOT RES AMT
1.7	02/18/2016	1. Greek Language code is incorrectly specified as GRE instead of GRK, this is corrected in Version 1.7.
1.8	04/01/2016	1. 2100G Loop – Value 9K is introduced to send care

Version	Date	Description
		give information for foster child. 2100G Loop – 6Y is modified to send District office information for Foster Child. - Foster Care indicator sent in 2750 Reporting category Loop is removed. - DCYF details are added in 2750 reporting categoryloop.
1.9	09/28/2016	- Made changes to Bureau indicator in DCYF Details that is sent in 2750 reporting skilled' categoryLoop 2100A Loop – Updated Race or Ethnicity Information to remove Pacific Islander from A – Asian. Pacific Islander is included in J – Native Hawaiian.
1.10	07/02/2018	Added Fast Forward Waiver code FN and FD to N102 segment in 2750 loop.
1.11	10/04/2018	- Updated 2000 loop for Medicare ID. Will add MBI as F6 and HICN as ZZ.. - Updated 2300 loop to send term reason codes. 112, 113, 700, 710, 847, 933. - Added 2100A, HLH segment for tobacco usage indicator. - Added rep type R = Authorized Rep, F = Power of Attorney to Legal rep loop in 2100G loop. - Added Case Manager first and last name to 2750 loop for "HCBC" data. - Added a 2750 loop each for Health Indicators: "Indian Tribal Health Service", "Supplemental Security Income", "Social Security Disability Insurance", and "Special Medical Services". - Added a 2750 loop for "Financial Redetermination Date". - Added a 2750 loop for "Living Arrangement". - Added additional case agency IDs that will be sent for HCBC types ABD, DD, & IHS:
1.12	01/28/2019	- Added two new CFI case management agency IDs "3114528" and "3110628" in the 2750 HCBC Loop. - Added two new plan selection method codes "PH and PE" in the 2750 PLAN SELECTION METHOD Loop. - Updated the Category of Eligibility descriptions for COE codes MGIA and MGIA to "Granite Advantage Health Care Program", which replaced the NH Health Protection Program.
1.13	02/25/2019	Added new term reason codes 351 and 352 to Loop 2300 – Health Coverage (HD).

		2. Added new 2750 loop for "Incarceration Release Date". 3. Added new 2750 loop for "Community Engagement Information".
1.14	6/11/2019	1. Loop 2750 – Community Engagement Information - Added 2 new status reason codes. Changed the description of other status reason codes 2. Removed 352 term reason code from Loop 2300
1.15	07/30/2019	1. Added Community Engagement Status Reason Code of 'HL' – Homeless
1.16	06/24/2020	1. Added new Category of Eligibility COE Code of MEAO - Medicaid for Older Adults with Disabilities
1.17	05/06/2022	Added new section for NHH/IMD LTC spans following the SNF/NSF nursing facility spans.
1.18	05/16/2023	Added following new term reason codes: 13 - Income Exceeds The Program Limit 14-Income Exceeds The Net Income Limit 16 - Income Exceeds The Gross Income Limit 24-Countable Resources Exceed Limits 186-Reported resources exceed the program eligibility standard 304-Income Exceeds the Limit 808 - Resources Exceed Limit 940 - Denied Due to Enrolled for Medicare Part A or B
1.20	06/18/2024	Added cohort information to 2750 loop.
1.21	07/20/2024	Modified 2750 loop for COE to include the CRE (community re-entry) code.
1.22	01/27/2025	Modified 2750 loop explanation to explain CRE code B. Added Maintenance Codes in 2750 loop A1- Auto-Performance and PR - Passive Renewal. Updated Maintenance codes in 2000 loop.
1.23	04/01/2025	Modified logic to only send active Medicare spans that has been verified via CMS.