

Blue Cross and Blue Shield of New Mexico

835 Electronic Funds Transfer Standard Companion Guide

*Refers to the Implementation Guides
Based on ASC X12 version 005010*

Version 1.5

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Disclosure Statement

This material contains confidential and proprietary information. Unauthorized use or disclosure of the information is strictly prohibited. The information in this document is intended for providers who have established a provider record with BCBSNM and electronic trading partner use only. BCBSNM may make improvements and/or changes in the product and/or program described in this publication at any time. Revisions may be made periodically, and updated versions of this document will be published accordingly.

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The information in this document is believed to be correct at the time of publication and is provided by BCBSNM for awareness, and educational purposes only. This material does not purport to provide legal advice. The information provided here is for reference use only and does not constitute the rendering of legal, financial, or other professional advice or recommendations by BCBSNM. If legal advice is required, the reader should consult with an attorney.

Preface

The Affordable Care Act (ACA) mandates implementation of Administrative Simplification operating rules to promote greater uniformity in the exchange of electronic health care data. The Committee on Operating Rules for Information Exchange (CORE) is part of the Council for Affordable Quality Healthcare (CAQH) initiative. CAQH CORE has authored operating rules to be implemented in phases for HIPAA-standard electronic data interchange (EDI) transactions, including the Health care Claim Payment/Advice (835).

This Companion Guide to the v5010 ASC X12N Implementation Guides and associated errata adopted under the Health Insurance Portability and Accountability Act (HIPAA) clarifies and specifies the data content when exchanging electronically with BCBSNM. Transmissions based on this companion guide, used in tandem with the v5010 ASC X12N Implementation Guides, are compliant with both ASC X12 syntax and those guides. This companion guide is intended to convey information that is within the framework of the ASC X12N Implementation Guides adopted for use under HIPAA. This 835 EFT 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. Express permission to use X12 copyrighted materials has been granted.

Table of Contents	Page
<u>SECTION 1: INTRODUCTION</u>	5
1.1 – Scope	5
1.2 – Overview	5
1.3 – References	5
1.4 – Additional Information	5
<u>SECTION 2: GETTING STARTED</u>	6 – 7
2.1 – Working with BCBSNM	6
2.2 – Trading Partner Registration	6
2.2.1 – Electronic Enrollment Process	6
2.3 – Certification and Testing Overview	6
2.3.1 – Availability of Funds	7
2.3.2 – Late/Missing EFT Resolution Procedure	7
<u>SECTION 3: CONNECTIVITY AND COMMUNICATIONS WITH BCBSNM</u>	8 – 9
3.1 – Process Flow	8
3.2 – Transmission Administrative Procedure	8
3.3 – Re-transmission Procedure	9
<u>SECTION 4: CONTACT INFORMATION</u>	9 – 10
4.1 – EDI Customer Service	9
4.2 – EDI Technical Assistance	9
4.3 – Provider Service Number	9
4.4 – Applicable Websites	10
<u>SECTION 5: CONTROL SEGMENTS AND ENVELOPES</u>	10 – 11
5.1 – ISA-IEA	10
5.1.1 – Delimiters/Separators	10
5.2 – GS-GE	11
<u>SECTION 6: SPECIFIC BUSINESS RULES AND LIMITATIONS WITH BCBSNM</u>	11
<u>SECTION 7: ACKNOWLEDGEMENTS AND/OR REPORTS</u>	11
<u>SECTION 8: TRADING PARTNER AGREEMENTS</u>	11
<u>APPENDICES</u>	12 – 13
A1 – Additional Resources	12
A2 – Change Summary	12, 13

Section 1: Introduction

1.1 Scope

The HIPAA transaction implementation guides for Electronic Data Interchange (EDI) transactions are called Technical Reports, Type 3 (TR3s). These TR3s provide guidelines for submitting and receiving HIPAA-standard EDI transactions. The TR3s require transmitters and receivers to make certain determinations. This 835 EFT Companion Guide does not replace the HIPAA ASC X12N TR3s, nor does it attempt to amend any of the information therein. It does not impose any additional obligations that are not permitted to be imposed by the HIPAA standards for electronic transactions. If inconsistencies exist between the terms of this companion guide and the TR3(s), the relevant TR3(s) will govern with respect to HIPAA edits. This Companion Guide will govern with respect to business edits.

This 835 EFT Companion Guide provides supplemental information to the Trading Partner Agreement (TPA) that exists between BCBSNM and its electronic trading partners. Trading partners should refer to their TPA for guidelines pertaining to any legal conditions surrounding implementation of EDI transactions and code sets. Information contained in this companion guide is not intended to amend, revoke, contradict, or otherwise alter the terms and conditions of the TPA. If there is an inconsistency with the terms of this guide and the terms of the TPA, the terms of the TPA shall govern.

1.2 Overview

EFT is the automated transfer of claims payments from the health plan to the provider's designated financial institution. Section 1104 of ACA adds EFT to the list of HIPAA-standard EDI transactions, as mandated by the Healthcare EFT Standards (CCD+ and X12 v5010 835 TR3 TRN Segment).

This companion guide contains assumptions, conventions, determinations or data specifications that are related to EFT and may be unique to BCBSNM. This document also provides information on specific code pertinent to BCBSNM business processes and situations which are within the parameters of HIPAA. Readers of the companion guide should be familiar with the HIPAA ASC X12 TR3s, their structure and content.

1.3 References

Entities that conduct HIPAA-standard transactions are responsible for obtaining and following EDI transaction standards specified within the current HIPAA-mandated ASC X12 5010 TR3s.

The Washington Publishing Company (WPC) is an independent publisher of technical reports recognized by the Centers for Medicare & Medicaid Services (CMS) as the industry standard. To purchase TR3s, visit the X12 website at <https://x12.org/products>.

1.4 Additional Information

The reader of this companion guide is assumed to be a provider who has established a provider record with BCBSNM and/or the provider's designated billing agent (billing service or clearinghouse) that transmits to or receives electronic data from BCBSNM. For the purposes of this document, the reader may be referred to as a trading partner or a provider.

In addition to the 835 EFT, trading partners are encouraged to conduct other HIPAA-standard EDI transactions when conducting business with BCBSNM. Before, during and after the claim submission process, electronic transactions help maximize administrative efficiencies, reduce unnecessary paper waste, decrease the need to conduct time-consuming telephone transactions, increase security of BCBSNM members' protected health information and promote greater accuracy with faster completion of each transaction. Additional information of the variety of EDI transactions available and/or supported by BCBSNM, refer to the [Electronic Commerce page](#) on our provider website.

[Back to Table of Contents.](#)

Section 2: Getting Started

2.1 Working with BCBSNM

Providers who have established a provider record with us are strongly encouraged to participate with the Plan's EFT under the Terms and Conditions set forth within the EFT Authorization Agreement. Providers also must use their best efforts to participate with the Plan's Electronic Remittance Advice (ERA) as described on the ERA Enrollment Form. Additional information on EFT and ERA is available on the [Electronic Funds Transfer/Electronic Remittance Advice page](#).

2.2 Trading Partner Registration

Providers are strongly encouraged to enroll for EFT electronically. Agreement with the EFT Authorization Agreement Terms and Conditions is required.

Note: If enrolled for the 835 EFT and ERA, the provider must contact their financial institution to arrange for the delivery of the CORE-required Minimum CCD+ data elements needed for reassociation of the payment and the 835 ERA. Reassociation is a process that supports matching of payments with claim data for posting to your patient accounts. A sample letter to send to your bank is available in the CORE section of the CAQH website at <https://www.caqh.org/core/industry-implementation-resources>. (Scroll down and expand the Payment and Remittance TOOLS FOR PROVIDERS section and refer to the [Sample Provider EFT Reassociation Data Request Letter](#).) This document includes instructions to assist you with requesting delivery of the data, as well as a glossary of key terms.

2.2.1 Electronic Enrollment Process

Providers who have established a provider record with BCBSNM and are registered with Availity® Essentials may enroll online for EFT through Availity Essentials using the Transaction Enrollment tool*. Refer to the [Electronic Funds Transfer/Electronic Remittance Advice page](#) on our website for online enrollment assistance. Please note that this function must be performed by the provider's Availity Administrator. For enrollment status and assistance with other enrollment-related concerns, email [Electronic Commerce Services](#).

*There is no cost to register or use [Availity Essentials](#).

2.3 Certification and Testing Overview

Upon completion of the enrollment process, the trading partner will receive a letter from us to acknowledge and approve the request for EFT. The letter also provides notification that we will conduct prenote testing with the designated financial institution, along with the date EFT payments will be implemented, pending successful completion of prenote testing.

Continue to next page.

2.3.1 Availability of Funds

In general, funds will be transferred to your financial institution within two banking days, after the claim is finalized, depending on your payment schedule. EFT payment dates may be affected by banking and corporate holidays. Refer to the [Holiday Schedule Reminders](#) on the [Electronic Commerce page](#) of our provider website for details.

Use the following guide to identify the payment type:

If the check trace number begins with:	The payment type is:	Example (TRN02):
C	Commercial	C21123E12345670
F	BCBS FEP Dental®	F21123E12345670
H	HMO Capitation	H21123E12345670
T	Medicaid	T21123E12345670
M	Medicare Advantage	M21123E12345670

2.3.2 Late/Missing EFT Resolution Procedure

Late or missing is defined as a maximum elapsed time of four business days.

The following process describes how late/missing EFTs are identified and resolved by BCBSNM:

1. When a provider determines they are missing an EFT, the provider emails Electronic Commerce Services. An inquiry is generated and routed to the 835 team for research resolution.
2. We research to determine if EFT is set up for the provider. If not, the provider is advised on how to enroll. If enrollment is confirmed, we check internal systems to determine if the EFT was issued and to verify status, funded or returned.
3. If returned, we check the return code and advises the provider accordingly.
 - If returned with a reissue code, EFT data can be updated, and the failed EFT is auto reissued.
 - If the EFT reason code is not a reissue code, a paper check is requested, and the provider is advised of the status.

For Medicare Advantage and New Mexico Medicaid claims, additional information may be obtained from Customer Service at the following numbers:

Blue Cross Medicare Advantage (HMO)SM and Blue Cross Medicare Advantage (PPO)SM (Medicare Advantage)	877-774-8592
Turquoise Care (New Mexico Medicaid)	800-693-0663

[Back to Table of Contents.](#)

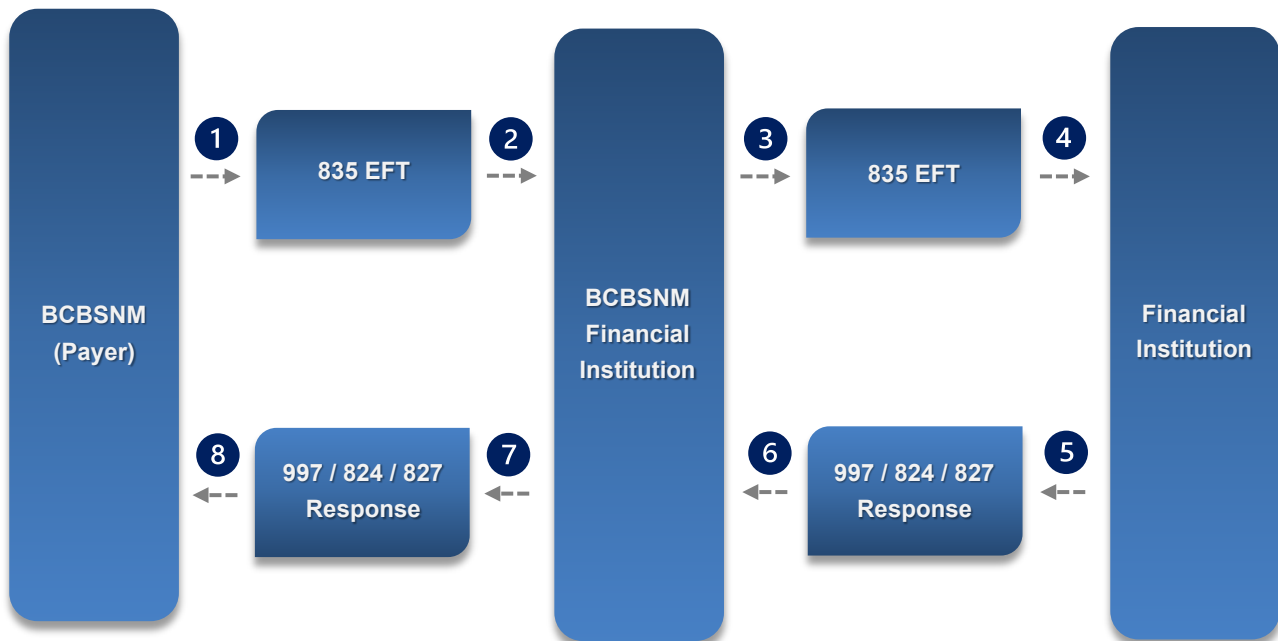
Section 3: Connectivity and Communications with BCBSNM

This section is for informational purposes only to provide an overview of the transmission of 835 EFT data between BCBSNM and the financial institution, as well as transmission/re-transmission procedures and communication protocol specifications.

3.1 Process Flow

Below is a diagram that outlines the general process flow for the 835 EFT transaction to the financial institution, with the response 997/824/827 transactions from the financial institution back to BCBSNM.

The 997 is sent per the agreement between BCBSNM and the financial institution. The 824 is the daily file that we receive whenever the bank receives an 835 EFT file from us. The translated 824 file is used to confirm accepted or acknowledged status. The 827 file is a collection of EFT payments that have been rejected or corrected by the bank for various reasons, such as incorrect/invalid bank account number, closed account, etc. The translated 827 file is used to identify rejected status.



3.2 Transmission Administrative Procedure

We (the payer) will send one transmission to the bank each day. This file will contain the following:

- One interchange (ISA-IEA) per transmission
- One functional group (GS-GE) per transmission
- Multiple transaction set (ST-SE) per transmission

Refer to the TR3(s) for terminology clarification and additional information.

Continue to next page.

3.3 Re-transmission Procedure

The following notifications will be sent by the financial Institution to us if a transmission is unable to be completed for the outbound 835 EFT:

- **997 Functional Acknowledgement Transaction**

If the transaction submission passes the ISA/IEA pre-screening above, it is then checked for ASC X12 syntax and HIPAA-compliance errors. When the compliance check is complete, a 997 will be sent to the trading partner informing them if the transaction has failed the compliance check. If multiple transaction sets (ST-SE) are sent within a functional group (GS-GE), the entire functional group (GS-GE) will be rejected with a 997 response.

The following notification will be sent by us to the financial institution if a transmission is unable to be completed for the inbound 824/827:

- **997 Functional Acknowledgement Transaction**

If the transaction submission passes the ISA/IEA pre-screening above, it is then checked for ASC X12 syntax and HIPAA-compliance errors. When the compliance check is complete, a 997 will be sent to the trading partner informing them if the transaction has failed the compliance check. If multiple transaction sets (ST-SE) are sent within a functional group (GS-GE), the entire functional group (GS-GE) will be rejected with a 997 response.

[Back to Table of Contents.](#)

Section 4: Contact Information

4.1 EDI Customer Service

For assistance with EFT enrollment questions and/or to report late/missing EFT payments, email [Electronic Commerce Services](#).

4.2 EDI Technical Assistance

For assistance with vendor (software vendor, billing service, clearinghouse) questions on specific transactions and/or technical assistance or support, contact the appropriate vendor.

4.3 Provider Service Number

Check the member's BCBSNM ID card for the appropriate number to call for assistance. As a reminder, electronic options are available for most types of transactions. If you do not have online access, you may contact Provider Customer Service at 800-349-3706 to use our automated interactive voice response (IVR) system.

For Medicare Advantage and New Mexico Medicaid claim-related questions, contact Customer Service, as follows:

Blue Cross Medicare Advantage (HMO)SM and Blue Cross Medicare Advantage (PPO)SM (Medicare Advantage)	877-774-8592
Turquoise Care (New Mexico Medicaid)	800-693-0663

Continue to next page.

4.4 Applicable Websites

For additional information on:	Visit:
Announcements, programs, initiatives, provider learning opportunities and related resources for providers	bcbsnm.com/provider
Purchasing TR3s	https://x12.org/products
CAQH CORE Phase III 835 EFT and ERA Operating Rules	caqh.org
Electronic EFT enrollment and other electronic transactions and services for providers	availity.com

[Back to Table of Contents.](#)

Section 5: Control Segments and Envelopes

Control Segments apply to all transactions and include the ISA and GS Segments. These segments are part of every transmission structure. The parameters outlined below are applicable to the financial institution.

5.1 ISA-IEA

The Interchange Control Header (ISA06) Interchange Sender ID and (ISA08) Interchange Receiver ID are individually assigned to each trading partner (BCBSNM and the financial institution) per mutual agreement.

ANSI v5010 Requirements				
Field	Length	835 EFT Inquiry	824 Response	827 Response
ISA01	2	00	00	00
ISA03	2	00	00	00
ISA05	2	Interchange Sender ID Qualifier	Interchange Sender ID Qualifier	Interchange Sender ID Qualifier
ISA06	15	Interchange Sender ID	Interchange Sender ID	Interchange Sender ID
ISA07	2	Interchange Receiver ID Qualifier	Interchange Receiver ID Qualifier	Interchange Receiver ID Qualifier
ISA08	15	Interchange Receiver ID	Interchange Receiver ID	Interchange Receiver ID
ISA11	1	Repetition separator (see table below)	Repetition separator (see table below)	Repetition separator (see table below)
ISA14	1	0	0	0
ISA15	1	"P" must be used to indicate Production "T" must be used to indicate Test	"P" must be used to indicate Production "T" must be used to indicate Test	"P" must be used to indicate Production "T" must be used to indicate Test
ISA16	1	: = Composite separator	: = Composite separator	: = Composite separator

5.1.1 Delimiters/Separators

The delimiters/separators below cannot be used in a data element value elsewhere in the transaction. Use of these delimiters/separators within a data element could result in translation errors when the transaction is processed.

Delimiters/Separators		
Name	Character	Description
Asterisk	*	Data Element Separator
Carat	^	Repetition Separator
Colon	:	Component Element Separator
Tilde	~	Segment Terminator

Continue to next page.

5.2 GS-GE

The Group Control Header (GS02) Group Sender ID and (GS03) Group Receiver ID are individually assigned to each trading partner (BCBSNM and the financial institution) per mutual agreement.

ANSI v5010 Requirements				
Field	Length	835 EFT Inquiry	824 Response	827 Response
GS02	2/15	Application Sender's Code	Application Sender's Code	Application Sender's Code
GS03	2/15	Application Receiver's Code	Application Receiver's Code	Application Receiver's Code
GS06	1/9	Group Control Number	Group Control Number	Group Control Number

[Back to Table of Contents.](#)

Section 6: Specific Business Rules and Limitations with BCBSNM

The section may be enhanced in the future to provide our specific data, business processes and situations which are within the parameters of HIPAA.

Section 7: Acknowledgements and/or Reports

We process the following ASCX12 HIPAA acknowledgements for EFT:

Acknowledgements	Description
ASC X12 997 005010X221A1 (HIPAA)	Functional Acknowledgement: A negative 997 is sent in case of compliance issues

(Refer to [Section 3.3: Re-transmission Procedure](#) for more information about 997s.)

Section 8: Trading Partner Agreements

This section contains general information concerning Trading Partner Agreements (TPAs).

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

Payers have EDI Trading Partner Agreements that accompany the standard implementation guide to ensure the integrity of the electronic transaction process. A Trading Partner Agreement is related to the electronic exchange of information, whether the agreement is an entity or a part of a larger agreement, between each party to the agreement. For example, a Trading Partner Agreement may specify among other things, the roles and responsibilities of each party to the agreement in conducting standard transactions.

[Back to Table of Contents.](#)

Appendices

A1 Additional Resources

Additional information and other helpful resources are available on the [Electronic Funds Transfer/Electronic Remittance Advice page](#) of our Provider website.

A2 Change Summary

The Change Log below will be used to document revisions that are made after initial publication of this ANSI v5010 Companion Guides.

835 EFT Companion Guide Change Log				
Chapter	Section	Change Description	Date of Change	Version
Connectivity with BCBSNM/Communications	3.1	Removed outdated table and inserted brief paragraph to describe when funds normally are transferred to the provider's financial institution.	April 16, 2014	1.1
Getting Started	2.1	Added reference to government programs with full product names.	May 15, 2017	1.2
Getting Started	2.2	Revised language to emphasize electronic enrollment.	May 15, 2017	1.2
Getting Started	2.2.1	Added: Reference to Primary Access Administrator; Electronic Commerce Center email address; registration info for Availity.	May 15, 2017	
Getting Started	2.2.2	Removed mailing address for enrollment forms; added Electronic Commerce Center email address.	May 15, 2017	1.2
Getting Started	2.3.1	Added reference to government programs and chart/guide with check trace number information to identify payment type.	May 15, 2017	1.2
Getting Started	2.3.2	Added Electronic Commerce Center email address and government programs customer service phone numbers.	May 15, 2017	1.2
Contact Information	4.1	Added contact information for government programs.	May 15, 2017	1.2
Contact Information	4.2	Removed reference to Electronic Commerce Center; added language to direct provider to the appropriate vendor for EDI Technical Assistance.	May 15, 2017	1.2
Contact Information	4.3	Adjusted wording (removed reference to claim status for commercial); also added government programs customer service phone numbers.	May 15, 2017	1.2
Appendices	A1	Adjusted wording and removed reference to Electronic Options Tutorial.	May 15, 2017	1.2
Appendices	A1	Removed hyperlink to Frequently Asked Questions document that was removed from the Provider website.	April 9, 2018	1.3
Getting Started	2.2.2	Updated references to government programs product names and customer service phone number.	April 9, 2018	1.3
Getting Started	2.3.2	Updated references to government programs product names and customer service phone number.	April 9, 2018	1.3
Contact Information	4.1	Updated references to government programs product names and customer service phone number.	April 9, 2018	1.3
Contact Information	4.3	Updated references to government programs product names and customer service phone number.	April 9, 2018	1.3
Introduction	1.3	Updated web address for purchasing TR3 reports.	Jan. 29, 2021	1.4
Getting Started	2.1	Removed government programs references.	Jan. 29, 2021	1.4
Getting Started	2.2	Updated CAQH web address for CORE Operating Rules. Updated description on how to navigate the CAQH website.	Jan. 29, 2021	1.4
Getting Started	2.2.1	Updated instructions for online EFT enrollment via Availity. Replaced the BCBSNM Electronic Commerce Services phone number with email address.	Jan. 29, 2021	1.4
Getting Started	2.2.2	Removed Paper Enrollment Process section.	Feb. 16, 2021	1.4

Getting Started	2.3.1	Updated government programs reference with product name(s).	Jan. 29, 2021	1.4
Getting Started	2.3.2	Replaced the BCBSNM Electronic Commerce Services phone number with email address. Updated government programs reference with product name(s).	Jan. 29, 2021	1.4
Contact Information	4.1	Replaced the BCBSNM Electronic Commerce Services phone number with email address. Removed government programs reference and Customer Service phone numbers.	Jan. 29, 2021	1.4
Contact Information	4.3	Updated government programs reference with product name(s).	Jan. 29, 2021	1.4
Contact Information	4.4	Updated web address for purchasing TR3 reports. Updated CAQH web address for CORE	Jan. 29, 2021	1.4
Control Segments and Envelopes	5.1	Removed the following replicated elements from the TR3; ISA02, ISA04, ISA09, ISA10, ISA12, ISA13.	Jan. 29, 2021	1.4
Control Segments and Envelopes	5.2	Removed the following replicated elements from the TR3; GS01, GS04, GS05, GS07, GS08.	Jan. 29, 2021	1.4
References	1.3	Updated X12 web address for purchasing TR3 reports.	April 23, 2025	1.5
Trading Partner Registration	2.2	Replaced outdated web links for CAQH and Sample Provider EFT Reassociation Data Request Letter.	April 23, 2025	1.5
Late/Missing EFT Resolution Procedure	2.3.2	Added Customer Service phone number for Turquoise Care (New Mexico Medicaid).	April 23, 2025	1.5
Provider Service Number	4.3	Added Customer Service phone number for Turquoise Care (New Mexico Medicaid).	April 23, 2025	1.5
Electronic Enrollment Process	2.2.1	Update content and website link to direct users to the BCBSNM provider website for online enrollment assistance.	April 30, 2025	1.5
Process Flow	3.1	Replaced BCBSNM Gateway with BCBSNM Financial Institution in process flow.	April 30, 2025	1.5
Control Segments and Envelopes	5	Update verbiage in second sentence to remove information indicating that the parameters outlined are applicable to the financial institution "that has a direct connection with BCBSNM."	April 30, 2025	1.5
Introduction	1.0	Corrected brand derivatives.	Jan. 8, 2026	1.5
Getting Started	2.0	Corrected brand derivatives.	Jan. 8, 2026	1.5
Connectivity and Communication with BCBSNM	3.0	Corrected brand derivatives.	Jan. 8, 2026	1.5
Contact Information	4.0	Corrected brand derivatives.	Jan. 8, 2026	1.5
Specific Business Rules and Limitations with BCBSNM	6.0	Corrected brand derivatives.	Jan. 8, 2026	1.5
Acknowledgements and/or Reports	7.0	Corrected brand derivatives.	Jan. 8, 2026	1.5
Trading Partner Agreements	8.0	Corrected brand derivatives.	Jan. 8, 2026	1.5
Appendices	A2	Corrected brand derivatives.	Jan. 8, 2026	1.5

[Back to Table of Contents.](#)

CAQH CORE is a multi-stakeholder collaboration of more than 130 organizations representing providers, health plans, vendors, government agencies and standard-setting bodies developing operating rules to help simplify health care administrative transactions. For additional information, refer to the CORE section of the CAQH website at <https://www.caqh.org/caqh-core>.

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