# TEXAS MEDICAID

## HIPAA TRANSACTION STANDARD COMPANION GUIDE

Refers to the Implementation Guide 275
ADDITIONAL INFORMATION TO SUPPORT A HEALTH CARE SERVICES REVIEW for PASRR

Nursing Facility Specialized Services (NFSS)

CORE v5010 Companion Guide

January 2026

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## Preface

This Companion Guide to the v5010 ASC X12N Implementation Guide and associated errata adopted under Health Insurance Portability and Accountability Act of 1996 (HIPAA) clarifies and specifies the data content when exchanging electronically with Texas Medicaid. Transmissions based on this Companion Guide, used in tandem with the v5010 ASC X12N Implementation Guides, 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 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 TR3/Implementation Guides.

# 1 INTRODUCTION

## 1.1 Scope

Under the Administrative Simplification provisions of the Health Insurance Portability and Accountability Act (HIPAA) of 1996, the Secretary of the Department of Health and Human Services (HHS) is directed to adopt standards to support the electronic exchange of administrative and financial health care transactions. The purpose of the Administrative Simplification portion of HIPAA is to enable health information to be exchanged electronically and to adopt standards for those transactions.

Texas Medicaid defines a Trading Partner as any entity trading data with Texas Medicaid using Electronic Data Interchange (EDI). Trading partners include vendors, clearinghouses, providers and billing agents.

The Accredited Standards Committee (ASC) X12 Standards for EDI Technical Report Type 3 (TR3) dated July 2007 was used to create this Companion Guide for the 275 Additional Information to Support a Health Care Services Review for PASRR Nursing Facility Specialized Services (NFSS) with Texas Medicaid. All instructions in this document are written using information known at the time of publication and are subject to change.

## 1.2 Overview

This guide is intended as a resource to assist submitters in successfully conducting EDI 275 Additional Information to Support a Health Care Services Review (278) for the Request for Preadmission Screening & Resident Review (PASRR) Nursing Facility Specialized Services (NFSS) Authorization with Texas Medicaid. This document does not provide detailed data specifications, which are published separately by the industry committees responsible for their creation and maintenance.

For details on submission of batch X12 278 Health Care Services - Request for Review and Response transactions to Texas Medicaid for Authorization Request for PASRR NFSS view the 278 Companion Guide.

The instructions in this companion guide are not intended to be stand-alone requirements documents and must be used in conjunction with the associated American National Standards Institute Accredited Standards Committee (ANSI ASC) X12N National Implementation Guide. This companion guide conforms to all the requirements of any associated ASC X12 Implementation Guide and is in conformance with ASC X12's Fair Use and Copyright statements.

## 1.3 References

The ANSI ASC X12N Implementation Guides are available for purchase at the Washington Publishing Company web site at: https://x12.org/products/technical-reports

The Texas Medicaid EDI Connectivity Guide which contains instructions regarding connectivity options including Committee for Affordable Quality Health Care (CAQH), Committee on Operating Rules for Information Exchange (CORE®)compliant Safe Harbor information, can be found on the EDI page of the Texas Medicaid website at: https://www.tmhp.com/topics/edi

## 1.4 Additional Information

**Security and Privacy Statement**

Covered entities were required to implement HIPAA Privacy Regulations no later than April 14, 2003. A covered entity is defined as a health plan, a health care clearinghouse, or a health care provider who transmits any health information in electronic form in connection with a HIPAA transaction. Providers that conduct certain electronic transmissions are responsible for ensuring these privacy regulations are implemented in their business practices. Texas Health and Human Services Commission (HHSC) is a HIPAA Covered Entity. Accordingly, Texas Medicaid is operating as a HIPAA Business Associate of HHSC as defined by the federally mandated rules of HIPAA. A Business Associate is defined as a person or organization that performs a function or activity on behalf of a covered entity but is not part of the covered entity's workforce.

**The privacy regulation has three major purposes:**

1. To protect and enhance the rights of consumers by providing them access to their health information and controlling the appropriate use of that information;
2. To improve the quality of health care in the United States by restoring trust in the health care system among consumers, health care professionals and the many organizations and individuals committed to the delivery of health care; and
3. To improve the efficiency and effectiveness of health care delivery by creating a national framework for health privacy and protection.

# 2 GETTING STARTED

## 2.1 Working with Texas Medicaid

This section describes how to interact with Texas Medicaid's Electronic Data Interchange (EDI) systems.

EDI Help Desk is available to assist trading partners in exchanging data with Texas Medicaid. Below are details on how to register and contact the department for assistance.

## 2.2 Trading Partner Registration

HHSC requires any entity exchanging electronic data with Texas Medicaid to be enrolled in the Texas Medicaid Program and approved for the submission of X12 transaction sets.

Texas Medicaid Enrollment Forms and instructions are available at:

https://www.tmhp.com/topics/provider-enrollment

Successful enrollment in Texas Medicaid is required before proceeding with EDI.

To get started with EDI transactions, the necessary forms and instructions are available at:

https://www.tmhp.com/resources/forms?field_topics_target_id=96

# 3 TESTING WITH TEXAS MEDICAID

Texas Medicaid requires that all Trading Partners who submit electronic data to successfully complete the testing process prior to submitting electronic data.

If the Provider or Billing Agent utilizes a Clearinghouse to submit the electronic data, the entity connecting with Texas Medicaid must have successfully completed the testing process prior to data submission.

Testing and Certification instructions, along with setup information can be found in Section 9.1 of the Texas Medicaid EDI Connectivity Guide found at:

https://www.tmhp.com/sites/default/files/file-library/edi/TMHP_EDI_Connectivity_Guide.pdf

# 4 CONNECTIVITY WITH THE SUBMITTER/COMMUNICATIONS

## 4.1 Transmission Administrative Procedures

The Texas Medicaid EDI Connectivity Guide that contains specific instructions regarding connectivity options, can be found on the EDI page of the Texas Medicaid website at:

https://www.tmhp.com/topics/edi

## 4.2 Communication protocol specifications

The Texas Medicaid EDI Connectivity Guide that contains specific instructions regarding connectivity options, along with CORE compliant Safe Harbor information, can be found on the EDI page of the Texas Medicaid website at:

https://www.tmhp.com/topics/edi

## 4.3 Passwords

Texas Medicaid provides instruction on resetting of passwords in section 5.1 of the Texas Medicaid EDI Connectivity Guide found at:

https://www.tmhp.com/sites/default/files/file-library/edi/TMHP_EDI_Connectivity_Guide.pdf

# 5 CONTACT INFORMATION

## 5.1 Customer Service

**Texas Medicaid EDI Help Desk**

The EDI Help Desk provides technical assistance only by troubleshooting Texas Medicaid EDI issues. Contact your system administrator for assistance with network, hardware, or telephone line issues.

To reach the Texas Medicaid EDI Help Desk, select one of the following methods:

Fax 1-512-514-4230 or 1-512-514-4228

Call 1-888-863-3638, (or call 1-512-514-4150)

## 5.2 Applicable websites/e-mail

This section contains detailed information about useful web sites and email addresses.

Texas Medicaid EDI Technical Information, such as code references, vendor file specifications, and additional Companion Guides can be found at:

https://www.tmhp.com/topics/edi

The Texas Medicaid Provider Procedures Manual is found at:

https://www.tmhp.com/resources/provider-manuals

EDI Helpful Links:

Washington Publishing Company – The Washington Publishing Company site includes reference documents pertaining to HIPAA, such as: implementation guides, data conditions, and the data dictionary for X12N standards.

Workgroup for Electronic Data Interchange (WEDI) – This site provides implementation materials and information.

National Uniform Billing Committee (NUBC) – This site is the official source of UB-04 billing information.

Texas Department of State Health Services (DSHS)

Texas Health and Human Services Commission

# 6 CONTROL SEGMENTS/ENVELOPES

## 6.1 ISA-IEA

- Texas Medicaid does not support repetition of a simple data element or a composite data structure.
- Texas Medicaid will send and accept only one ISA/IEA in each file and one GS/GE per ISA.
- Texas Medicaid uses "*" (asterisk) as the element separator, and "~" (tilde) as the segment separator.

## 6.2 GS-GE

- The Sender ID and Receiver ID information is submitted in the GS02 and GS03.

# 7 TEXAS MEDICAID SPECIFIC BUSINESS RULES AND LIMITATIONS

Texas Medicaid will accept up to 5000 transactions per batch. If a file is submitted with more than 5000 transactions the entire file will be rejected and not processed by Texas Medicaid.

X12 files with more than one GS-GE Functional Group will fail to process in the Texas Medicaid system.

EDI must accept X12 275 request files created with following naming conventions: *.txt or *.dat or *.zip where * is a provider assigned file name.

The Texas Medicaid Provider Procedures Manual is the providers' principal source of information about Texas Medicaid. The most recent version is found at:

https://www.tmhp.com/resources/provider-manuals

# 8 ACKNOWLEDGEMENTS AND/OR REPORTS

Texas Medicaid provides HIPAA responses and acknowledgements that should be utilized by the Trading Partner for reconciliation purposes.

The following responses will be received by the Trading Partner in response to file submissions:

| | |
|---|---|
| TA1 Transaction | Interchange Acknowledgement<br>The TA1 will be sent if the submitter ID is not known or if the file received is structurally incorrect. |
| BID Document | Batch ID Report<br>The BID file is sent as acknowledgement of file reception. This is not an indicator that the file was accepted; only received. This zero-byte file will provide the Texas Medicaid assigned batch ID within the file name.<br>*This response will not be returned for files exchanged over the CORE Operating Rule "Safe Harbor" connection method. |
| 999 Transaction | Implementation Acknowledgement<br>This file provides high level transaction set response details for the file received. It does not contain transaction (form) level responses. |
| 824 | Application Advice<br>This file notifies the sender if the document has been accepted or rejected and to report on data errors. |

# 9 TRANSACTION SPECIFIC INFORMATION

This section is used to describe the required data sets for Texas Medicaid processing of the X12 275 Additional information for Health Care Services Review.

This Companion Guide describes the use of the X12 275 Additional information to support a Health Care Services Review for PASRR NFSS. This guide must be used in conjunction with the Implementation guide to submit an X12 275 transaction.

Simple or composite data elements within a segment can be designated as repeating data elements. Texas Medicaid does not support repetition of a simple data element or a composite data structure.

Texas Medicaid will send and accept only one ISA/IEA in each file and one GS/GE per ISA.

## 9.1 Submitting an X12 275

**(Additional Information to support a health care services review transaction for PASRR NFSS)**

A complete Authorization Request for PASRR Nursing Facility Specialized Services (NFSS) requires the submission of both an X12 278 transaction (For details on submission refer to NFSS 278 Companion Guide) and a corresponding X12 275 transaction. A 5010 X12 275 represents additional information, including attachments to support a Health Care Services

Review (278) for PASRR NFSS. X12 275 and X12 278 transactions must each be sent in separate batch files. A submitter must submit both an X12 278 transaction and the associated unsolicited X12 275 transaction containing XML data* required to complete the NFSS submission. A submitter may submit a solicited X12 275 transaction with additional images related to the NFSS. An X12 275 transaction without a corresponding successfully processed X12 278 will be held for 5 calendar days awaiting a corresponding X12 278 transaction after which it will be rejected. More details regarding solicited and unsolicited X12 275 transactions are below.

***For initial XML data setup contact Texas Medicaid prior to submitting the X12 275***

### 9.1.1 Unsolicited X12 275

In order to complete an X12 278 (Health Care Services Review – Request for Review), the provider must submit one Unsolicited X12 275 (Additional Information to Support a Health Care Service Review) transaction containing XML data to complete NFSS submission. The Unsolicited X12 275 (Transaction Set Purpose Code BGN01 = '02' (Add)) must contain one attachment with XML Structured Data and may also contain other supporting image (non-XML) attachments for service transactions. If the Unsolicited X12 275 is rejected (unsuccessful), it can be resubmitted; however, only one successful Unsolicited X12 275 submission is allowed. An unsolicited X12 275 transaction must contain exactly one attachment containing XML structured data referencing the Reference Identification Number in Loop 2000E of the corresponding X12 278 transaction (Loop 2000E.PWK06). Loop 2100A, segment CAT02 (Report Transmission Code) must have a qualifier "TX" (Text) with BIN02 containing XML structured data or the Unsolicited X12 275 transaction will be rejected.

If the unsolicited X12 275 transaction is submitted prior to the corresponding X12 278 transaction, the 275 transaction will be held up to 5 calendar days awaiting the corresponding 278 transaction. After 5 calendar days the X12 275 transaction will be rejected in the absence of a corresponding successfully processed X12 278 transaction.

### 9.1.2 Solicited X12 275

When supplemental attachments are required to support a successfully submitted NFSS, the provider may submit one or more Solicited X12 275 (Additional Information to Support a Health Care Service Review) transactions. The Solicited X12 275 (Transaction Set Purpose Code BGN01 = '11' (Response)) may only contain image attachments - No XML structured data. If Transaction Set Purpose Code BGN01 has a value of "11" (Response) and XML qualifier "TX" (Text) is present in Loop 2100A.CAT02, then the 275 will be rejected.

Details of required loops and elements with fields expected in each are provided in X12 275 Structure below. The maximum size of an attachment is 10 MB per attachment and must be in a valid file format of PDF, Image (JPG, TIF, PNG, and GIF), MS Word, MS Excel, or RTF. LTCOP will assign a naming convention in the format "Attachment_<Sequence Number>_<Received Date>" for all attachments sent via EDI.

Linking an X12 275 transaction to its associated X12 278 transaction is explained in Appendix "**Linking an X12 275 to corresponding X12 278**".

### 9.1.3 X12 275 Structure

| TR3 Page # | Loop ID | Element ID | Data Value | Description |
|---|---|---|---|---|
| 1000A Information Source Name | | | | |
| NM1 - Information Source Name | | | | |
| 47 | 1000A | NM101 | FA | |
| 48 | 1000A | NM102 | 2 | |
| 48 | 1000A | NM108 | 46 | |
| 1000B Information Receiver Name | | | | |
| NM1 - Information Receiver Name | | | | |
| 55 | 1000B | NM101 | X3 | |
| 56 | 1000B | NM102 | 2 | |
| 56 | 1000B | NM103 | TMHP | |
| 56 | 1000B | NM108 | 46 | |
| 57 | 1000B | NM109 | | Must send the TMHP Receiver ID - 617591011LTCPP for Production 617591011LTCPT for Test |
| 1000C Patient Name | | | | |
| NM1 - Patient Name | | | | |
| 62 | 1000C | NM101 | QC | |

| TR3 Page # | Loop ID | Element ID | Data Value | Description |
|---|---|---|---|---|
| 63 | 1000C | NM108 | MI | |
| 64 | 1000C | NM109 | | Resident's nine-digit Medicaid number |
| REF - PATIENT EVENT TRACKING NUMBER | | | | |
| 66 | 1000C | REF01 | 2I | |
| 66 | 1000C | REF02 | | In the unsolicited X12 275, must send the submitter control number from TRN02 of Loop 2000E in the corresponding X12 278 transaction.<br>In the solicited X12 275, must send the DLN from the 278 Response in the Patient Event Tracking Number. |
| 2000A ASSIGNED NUMBER | | | | |
| TRN - ATTACHMENT CONTROL NUMBER | | | | |
| 68 | 2000A | TRN01 | 1 or 2 | Must send "1" when submitting an unsolicited 275. Must send "2" when submitting a solicited 275. |
| 69 | 2000A | TRN02 | | When BGN01 = "11", this number is the Attachment Control Number assigned by Texas Medicaid.<br>When BGN01 = "02", this number is the Attachment Control Number assigned by the submitter<br>This number will be used to link the attachment to the corresponding X12 278 request or response and must match PWK06 segment in the X12 278. |
| 2100A CAT - CATEGORY OF ADDITIONAL INFORMATION | | | | |
| 79 | 2100A | CAT02 | MB or TX | Must send "TX" for XML structured data attachment in the unsolicited 275.<br>Must send "MB" for image attachments. |
| 2110A BIN - BINARY DATA SEGMENT | | | | |
| 83 | 2110A | BIN02 | | Must contain XML data when BIN01 = 'TX'. For XML schema details contact Texas Medicaid.<br>Must contain image attachments when BIN01 = |

| TR3 Page # | Loop ID | Element ID | Data Value | Description |
|---|---|---|---|---|
| | | | | 'MB'. The end of the Binary Data must be defined by use of the tilde (~) Data Element Separator. This character is not to be counted in BIN01. |

### 9.1.4 Required fields for linking an X12 275 to corresponding X12 278

- TMHP will match an **unsolicited** 5010 **X12 275** transaction where BGN01=02 (Add) with a corresponding 5010 **X12 278** transaction using the following criteria-
  1. Submitter IDs (ISA06 of 278 and 275) for the two files must match.
  2. Submitter control number in Loop 2000E.TRN02 (where TRN01=1 (Current Transaction Trace No.)) of X12 278 must match Patient Event Tracking number in Loop 1000C.REF02 in the X12 275.
  3. Provider-submitted attachment control numbers in Loop 2000E.PWK06 and Loop 2000F.PWK06 (where PWK01=M1, PWK02=EL and PWK05=AC) of the X12 278 request must match the attachment control numbers submitted in Loop 2000A.TRN02 (where TRN01=1 (Current Transaction Trace No.)) of the X12 275.
  4. Receiver IDs for the X12 275 and X12 278 files must match.
- TMHP will match a **solicited X12 275** transaction where BGN01=11 (Response) with the corresponding 5010 **X12 278** transaction using the following criteria-
  1. Submitter ID of X12 275 and Receiver Id of X12 278 response must match.
  2. Patient Event Tracking Number in Loop 1000C.REF02 (where REF01=2I) of the X12 275 must be the DLN sent in the corresponding X12 278 response (Loop 2000E.REF02 where REF01=NT).
  3. Attachment control number (ACN) in Loop 2000A.TRN02 (where TRN01=2 (Referenced Transaction Trace No.)) of the X12 275 must match the TMHP-generated ACN (Loop 2000E.PWK06 and 2000F.PWK06) sent in the corresponding X12 278 response.
  4. Receiver ID of 275 and Submitter Id of X12 278 response must match.

Please refer to "**Linking an X12 275 to corresponding X12 278**" in Appendices for further illustration on how to link the two transactions.

## X12 824 Response for X12 275

EDI will generate an X12 824 response file for each X12 275 that is successfully processed by EDI. X12 824 Structure below includes more details for the required Loops and Segments in the X12 824 response file.

**File Format:**

The X12 824 response file from Texas Medicaid is created with a filename using the following file naming convention:

<Submitter ID.File ID.824>

- 9-digit Submitter ID (assigned by Texas Medicaid during trading partner testing)
- TMHP-assigned 8-character File ID (also known as Batch ID)
- Last 3 characters represent the file extension

Example: The filename, "123456789.D1234567.824" consists of the 9-digit Submitter ID "123456789," File ID (aka Batch ID) "D1234567," and the file extension ".824"

## X12 824 Structure

| Loop ID | Element ID | Data Value | Description |
|---|---|---|---|
| BGN - BEGINNING OF HIERARCHICAL TRANSACTION | | | |
| | BGN02 | Reference Identification | Concatenate EDI File ID and EDI Trans ID and DLN (from the X12 278 response transaction) |
| | BGN06 | Reference Identification | Copy BGN02 from the X12 275 received to BGN06 of the 824 Response |
| | BGN08 | Action Code | U - When 275 transaction is rejected. WQ - When 275 transaction is accepted. |
| 1000A N1- SUBMITTER NAME | | | |
| 1000A | N102 | TMHP | |
| 1000A | N103 | | Copy 275 Request 1000B.NM108 to 824 Response 1000A.N103 |
| 1000A | N104 | | Copy 275 Request 1000B.NM109 to 824 Response 1000A.N104 |
| 1000B RECEIVER NAME | | | |
| 1000B | N102 | | Copy 275 Request 1000A.NM103 to 824 Response 1000B.N102 when 275 Request 1000A.NM102 = 2 |
| 1000B | N103 | | Copy 275 Request 1000A.NM108 to 824 Response 1000B.N103 |
| 1000B | N104 | | Copy 275 Request 1000A.NM109 to 824 Response 1000B.N104 |
| 2000 ORIGINAL TRANSACTION IDENTIFICATION | | | |

| Loop ID | Element ID | Data Value | Description |
|---|---|---|---|
| 2000 | OTI01 | Application Acknowledgement Code | TA - When transaction is accepted. TR - When transaction is rejected.<br>TE - When transaction is accepted with error. |
| 2000 | OTI02 | TN | |
| 2000 | OTI03 | NA | |
| 2000 | OTI10 | | Copy ST01 from 275 received to 824 Response OTI10 |
| 2100 ERROR OR INFORMATIONAL MESSAGE LOCATION | | | |
| 2100 | RED06 | | Industry error codes which will be cross walked to TMHP specific business edit codes as described in "PASRR NFSS X12 275 Business Edits" below.<br>Each TED loop will repeat for each distinct edit that sets and RED segment will repeat for each instance that specific edit sets. E.g., if two edits Bx27502010 and Bx27502011 both cross walk to the same industry code E078 and Bx27502010 sets four times and Bx27502011 once, the 824 will look like this:<br>TED*024<br>RED*NA**94**IBP*E078<br>RED*NA**94**IBP*E078<br>RED*NA**94**IBP*E078<br>RED*NA**94**IBP*E078<br>TED*024<br>RED*NA**94**IBP*E078 |

### 9.1.5 PASRR NFSS X12 275 Business Edits

Below is a list of Business Edits for PASRR NFSS X12 275 transaction. The X12 824 response will contain the Industry Error code in Loop 2100 RED06 segment. Below table contains a crosswalk of the Industry Error Codes to the PASRR NFSS Business Edit Numbers. All Business Edits are fatal except for Bx27501065 which is a warning edit.

| Business Edit Number | Request Type | Business Edit Description | Industry Error Code & Description |
|---|---|---|---|
| Bx27501001 | CMWC & DME | If "Yes, explain" is a required field, if "Is there a history of decubitus/skin breakdown?" = true. | E035- Situational required element is missing |

| Business Edit Number | Request Type | Business Edit Description | Industry Error Code & Description |
|---|---|---|---|
| Bx27501002 | CMWC & DME | If "Yes explain:" is populated, but "Is there a history of decubitus/skin breakdown?" = false. | E035- Situational required element is missing |
| Bx27501003 | CMWC & DME | If "Yes, explain and include the wound stage and wound dimensions of each current site:" is a required field, if "Is there a current decubitus/skin breakdown?" = true. | E035- Situational required element is missing |
| Bx27501004 | CMWC & DME | "If Yes, indicate the expected date" is a required field, if "Is surgery anticipated?" = true. | E035- Situational required element is missing |
| Bx27501005 | CMWC & DME | "If Yes, indicate the expected date" must be greater than Date of Assessment if "Is surgery anticipated?"=true | E051- Incorrect date |
| Bx27501007 | CMWC & DME | "Is surgery anticipated?" = false, but "If Yes, describe the procedure" is populated. | E042- unexpected segment |
| Bx27501008 | CMWC & DME | "Is surgery anticipated?" = false, but "If Yes, indicate the expected date" is populated. | E042- unexpected segment |
| Bx27501009 | CMWC & DME | "If Yes, describe the procedure" is a required field, if "Is surgery anticipated?" = true. | E035- Situational required element is missing |
| Bx27501011 | CMWC & DME | "If Yes, explain" is a required field, if "Is the resident tube fed?" = true. | E035- Situational required element is missing |
| Bx27501012 | CMWC & DME | "Is the resident tube fed?" = false but "If Yes, explain" is populated. | E042- unexpected segment |
| Bx27501013 | CMWC & DME | "Does the resident have a current education/vocational setting?" = false but "Name of education/vocational site" is populated. | E042- unexpected segment |

| Business Edit Number | Request Type | Business Edit Description | Industry Error Code & Description |
|---|---|---|---|
| Bx27501014 | CMWC & DME | "Name of education/vocational site:" is a required field, if "Does the resident have a current education/vocational setting?" = true. | E035- Situational required element is missing |
| Bx27501015 | CMWC & DME | Therapist Last Name is a required field, if Therapist First Name is populated. | E035- Situational required element is missing |
| Bx27501016 | CMWC & DME | Phone No. is a required field, if Therapist First Name is populated. | E035- Situational required element is missing |
| Bx27501017 | CMWC & DME | "Does the resident have a current seating system?" = false but "Describe the resident's current seating system, including the mobility base and age of the system/base" is populated | E042- unexpected segment |
| Bx27501018 | CMWC & DME | "Describe wheelchair type:" is a required field, if "Does the resident have a current seating system?" = true | E035- Situational required element is missing |
| Bx27501019 | CMWC | "Date of Purchase" is a required field if "Does the resident have a current seating system?" = true. | E035- Situational required element is missing |
| Bx27501020 | CMWC | "Date of Purchase" cannot be a future date. | E051- Incorrect date |
| Bx27501022 | CMWC & DME | "Describe why the current seating system does not meet the resident's needs" is required, if "Does the resident have a current seating system?" = true | E035- Situational required element is missing |
| Bx27501023 | CMWC | "Will the CMWC need to be transported?" = false, but "If Yes, describe how the item will be transported" is populated. | E042- unexpected segment |
| Bx27501024 | CMWC | "If Yes, describe how the item will be transported" is a required field, if "Will the CMWC need to be transported?" = true. | E035- Situational required element is missing |

| Business Edit Number | Request Type | Business Edit Description | Industry Error Code & Description |
|---|---|---|---|
| Bx27501025 | CMWC & DME | "Is the education/vocational site accessible to the requested CMWC?" is required, if "Does the resident have a current education/vocational setting?" = true. | E035- Situational required element is missing |
| Bx27501026 | CMWC & DME | "Are ramps available at the education/vocational site?" is required if "Does the resident have a current education/vocational setting?" = true. | E035- Situational required element is missing |
| Bx27501027 | CMWC & DME | HCPCS code is not present or not found in the system for a CMWC or DME request. | E043- Missing data |
| Bx27501028 | DME | "Will the DME Item need to be transported?" = false but "If Yes, describe how the DME Item will be transported" is populated. | E042- unexpected segment |
| Bx27501029 | DME | "If Yes, describe how the DME Item will be transported" is a required field, if "Will the DME Item need to be transported?" = true. | E035- Situational required element is missing |
| Bx27501030 | DME | "If Yes, is the site accessible and safe for the use of the DME item?" is a required field, if "Was a DME similar to the one requested used at this site?" = true. | E035- Situational required element is missing |
| Bx27501070 | DME | If Yes, is the site accessible and safe for the use of the DME item? is populated but Was a DME similar to the one requested used at this site? = false. | E042- unexpected segment |
| Bx27501031 | DME | "Does the resident have a current DME item or items?" = false, but "Describe the resident's current DME item(s) (if the item requested is a replacement), including the type and the age of the item" is populated. | E042- unexpected segment |

| Business Edit Number | Request Type | Business Edit Description | Industry Error Code & Description |
|---|---|---|---|
| Bx27501032 | DME | "Describe the resident's current DME item(s) (if the item requested is a replacement), including the type and the age of the item" is a required field, if "Does the resident have a current DME item or items?" = true. | E035- Situational required element is missing |
| Bx27501033 | DME | "Describe why the current DME item(s) does/does not meet the resident's needs" is a required field, if "Does the resident have a current DME item or items?" = true. | E035- Situational required element is missing |
| Bx27501038 | Therapy | Treating impairment or dysfunction is a required field. | E043- Missing data |
| Bx27501039 | Therapy | Initial Assessment/Current Level of Function and Underlying Impairments is a required field. | E043- Missing data |
| Bx27501040 | Therapy | Clinical Impressions is a required field. | E043- Missing data |
| Bx27501041 | Therapy | Reason for Skilled Services is a required field. | E043- Missing data |
| Bx27501042 | Therapy | Skilled Intervention Focus is a required field. | E043- Missing data |
| Bx27501043 | Therapy | Diagnosis (DX) ICD-10 Code is a required field. | E035- Situational required element is missing |
| Bx27501044 | Therapy | Diagnosis (DX) ICD-10 Code not found. | E043- Missing data |
| Bx27501046 | Therapy | Long-Term Goals is a required field. | E043- Missing data |
| Bx27501047 | Therapy | Short-Term Goals is a required field. | E043- Missing data |

| Business Edit Number | Request Type | Business Edit Description | Industry Error Code & Description |
|---|---|---|---|
| Bx27501048 | All | "Is the Therapist employed by the Nursing Facility" is a required field. | E043- Missing data |
| Bx27501049 | All | Therapist's Employer Name is a required field. | E035- Situational required element is missing |
| Bx27501050 | All | Therapist's Employer Mailing Address is a required field. | E043- Missing data |
| Bx27501051 | All | Therapist's Employer City is a required field. | E043- Missing data |
| Bx27501052 | All | Therapist's Employer State is a required field. | E043- Missing data |
| Bx27501053 | All | Therapist's Employer ZIP Code is a required field. | E043- Missing data |
| Bx27501054 | All | Therapist's Signature Date is a required field. | E043- Missing data |
| Bx27501055 | All | Therapist's Signature Date cannot be more than 364 calendar days prior to the TMHP Received date in LTCOP for an assessment. | E051- Incorrect date |
| Bx27501056 | All | Therapist's Signature Date cannot be more than 29 calendar days prior to the TMHP Received date in LTCOP for a service. | E051- Incorrect date |
| Bx27501057 | All | Therapist's Signature Date must be greater than or equal to the date of assessment. | E051- Incorrect date |
| Bx27501058 | All | Therapist's Signature Date cannot be greater than the TMHP Received date in LTCOP. | E051- Incorrect date |

| Business Edit Number | Request Type | Business Edit Description | Industry Error Code & Description |
|---|---|---|---|
| Bx27501060 | CMWC & DME | Referring Physician Date Resident Last Seen is a required field. | E043- Missing data |
| Bx27501060 | Therapy | Referring Physician Date Resident Last Seen is a required field. | E043- Missing data |
| Bx27501061 | All | Referring Physician Date Resident Last Seen must be less than or equal to the Signature date. | E051- Incorrect date |
| Bx27501062 | All | Referring Physician Date Resident Last Seen cannot be greater than the TMHP received date for 278. | E051- Incorrect date |
| Bx27501065 | All | Therapist's License State on the corresponding 278 transaction is not Texas. | E046- Not matching |
| Bx27501067 | Therapy | Type of Service Requested for Therapy (OT, PT or ST) is not an exact match with the corresponding 278 transaction. | E046- Not matching |
| Bx27501068 | CMWC | Type of Service Requested for CMWC is not an exact match with the corresponding 278 transaction. | E046- Not matching |
| Bx27501069 | DME | Type of Service Requested for DME is not an exact match with the corresponding 278 transaction. | E046- Not matching |
| Bx27501072 | CMWC & DME | Is there a current decubitus/skin breakdown" is filled as false but "Yes, explain and include the wound stage and wound dimensions of each current site: "has been populated". | E043- Missing data |
| Bx27501073 | CMWC & DME | Ambulatory Number Of Feet is a required field if Ambulatory Status is "short distance". | E043- Missing data |
| Bx27501074 | CMWC & DME | "Is the resident dependent upon a wheelchair or walker for ambulation" is a required field if Ambulatory Status is "With assistance" | E043- Missing data |

| Business Edit Number | Request Type | Business Edit Description | Industry Error Code & Description |
|---|---|---|---|
| Bx27501075 | CMWC & DME | "If yes, describe the level of dependence. If no, describe the resident's ability to ambulate" is a required field if Ambulatory Status is "With assistance" | E043- Missing data |
| Bx27501076 | CMWC & DME | "No. of Years" is a required field if Indicate Resident's ambulation potential is "expected in the future within" | E043- Missing data |
| Bx27501077 | CMWC & DME | "If Yes, has a therapist from the education/vocational setting been involved in this assessment?" is required if "Does the resident have a current education/vocational setting?"=true. | E043- Missing data |
| Bx27501078 | CMWC | "Describe the resident's current seating system, including the mobility base and age of the system/base" is a required field if "Does the resident have a current seating system?" is true | E043- Missing data |
| Bx27501079 | DME | "Does the resident have a current DME item or items?" is filled as false but "Describe why the current DME item(s) does not meet the resident's needs" is populated. | E043- Missing data |
| Bx27501080 | CMWC | Measurement Date cannot be a future date. | E051- Incorrect date |
| Bx27501081 | CMWC | Measurement Date cannot be more than 29 calendar days prior to the TMHP Received date. | E051- Incorrect date |
| Bx27502001 | All | Transaction Set Purpose Code in BGN01 must have a value of "02" (Add) or "11" (Response). | E054- Invalid identification code |
| Bx27502002 | All | Trace Type Code (TRN01) must be "1" (Current Transaction Trace Number) if Transaction Set Purpose Code (BGN01) is "02"(Add). | E054- Invalid identification code |

| Business Edit Number | Request Type | Business Edit Description | Industry Error Code & Description |
|---|---|---|---|
| Bx27502003 | All | Trace Type Code (TRN01) must be "2" (Referenced Transaction Trace Number) if Transaction Set Purpose Code (BGN01) is "11"(Response). | E054- Invalid identification code |
| Bx27502004 | All | If Transaction Set Purpose Code BGN01 has a value of "02" (Add) then this transaction must contain exactly one attachment containing XML data referencing the 2000E loop of the corresponding 278 transaction: Exactly one 2000A loop must be present with 1) segment TRN02 (Reference Identification) having the Attachment Control Number in Loop 2000E.PWK06 of the corresponding 278 and 2) Loop 2100A, segment CAT02 (Report Transmission Code) having qualifier "TX" (Text). | E078- Missing/Invalid Attachment Control information |
| Bx27502005 | All | If Transaction Set Purpose Code BGN01 has a value of "11" (Response) then XML qualifier "TX" (Text) must NOT be present in Loop 2100A.CAT02. | E040-"Not Used" data element present |
| Bx27502006 | All | Category of Additional Information (Loop 2100A.CAT02) must have a value of "MB" where BIN02 has an image attachment or "TX" where BIN02 has an XML attachment. | E054- Invalid identification code |
| Bx27502007 | All | Source Individual or Organizational identifying code qualifier (Loop 1000A.NM108) must have a value of "46" or "XX". | E054- Invalid identification code |
| Bx27502008 | All | Receiver Individual or Organizational identifying code qualifier (Loop 1000B.NM108) must have a value of "46" or "XX". | E054- Invalid identification code |

| Business Edit Number | Request Type | Business Edit Description | Industry Error Code & Description |
|---|---|---|---|
| Bx27502009 | All | The attachment must be one of the below file types:<br>1. PDF<br>2. Image (JPG, TIF, PNG, GIF)<br>3. MS Word<br>4. MS Excel<br>5. RTF | E066- Missing/Invalid file name extension |
| Bx27502010 | All | The maximum size of an attachment is 10 MB per attachment. | E078- Missing/Invalid Attachment Control information |
| Bx27502011 | All | The TMHP Attachment Control Number is missing or does not match the corresponding 278 transaction. | E078- Missing/Invalid Attachment Control information |
| Bx27502012 | All | The corresponding 278 transaction for this 275 transaction was not received. | E043- Missing data |
| Bx27501071 | All | The corresponding 278 transaction was received more than 5 calendar days before this 275 transaction. | E129- Maintenance Transaction cannot be processed as it is outside of allocated time period |
| Bx27502013 | All | Unrecoverable XML Error or XML not interpreted in accordance with published XML schema. | E073-Unrecoverable XML error |
| Bx27502014 | All | Request Type does not match the Request Type in the corresponding 278 file. | E046- Not matching |
| Bx27502015 | All | Duplicate combination of Submitter Control Number and Attachment Control Number(s) submitted in the unsolicited 275 transaction by the same submitter. | E025-Duplicate |
| Bx27502016 | Therapy | Date of Onset, if known, cannot be a future date. | E051- Incorrect date |

# 10 APPENDICES

## 275 Unsolicited Transaction Example

Below is an example of an Unsolicited X12 275 transaction where BIN segment contains only a snippet of the XML data. For complete XML schema contact Texas Medicaid. In the following examples carriage return line feeds are inserted following ~ character for improved readability purposes.

ISA*00**00*  *ZZ*146111111 *ZZ*617591011LTCPP
*170407*0832*^*00501*000000001*1*P*+~
GS*PI*146111111*617591011LTCPP*20170407*130037*1*X*005010X211~
ST*275*0001*005010X211~
BGN*02*000000001*20170407*13003700~
NM1*FA*2*NURSING HOME NAME*****46*001010000~
NM1*X3*2*TMHP*****46*617591011LTCPP~
NM1*QC*1******MI*511111111~
REF*2I*9876543210A~
LX*1~
TRN*1*ABC100001~
REF*FJ*ReferenceIdentification~
DTP*368*D8*20170407~
CAT*AE*TX~
EFI*05~
BIN*2161*<?xml version="1.0" encoding="UTF-8"?><ServiceReviewAttachment
xmlns="http://sra.schema.tmhp.com"><StructuredDataAttachment><PasrssStructuredDataAttachment
xmlns:ns0="http://pasrss.schema.tmhp.com"><ns0:Therapy><ns0:Occupational><ns0:TherapyAssessme
nt><ns0:TherapistInfo><ns0:IsTherapistEmployedByNF>true</ns0:IsTherapistEmployedByNF><ns0:Em
ployerName>EmployerName</ns0:EmployerName><ns0:Address>TherapistAddress</ns0:Address><ns
0:City>TherapistCity</ns0:City><ns0:State>TX</ns0:State><ns0:ZipCode>78727</ns0:ZipCode>~
SE*14*0001~
GE*1*1~

## 275 Solicited Transaction Example

Below is an example of a Solicited X12 275 transaction where BIN segment contains a snippet of an image attachment:

ISA*00**00*  *ZZ*146111111 *ZZ*617591011LTCPP
*170405*0832*^*00501*100000001*1*P*+~
GS*PI*146111111*617591011LTCPT*20170405*130037*100001*X*005010X211~
ST*275*1001*005010X211~
BGN*11*000000001*20170405*13003700~
NM1*FA*2*NURSING HOME NAME*****46*001010000~
NM1*X3*2*TMHP*****46*617591011LTCPP~
NM1*QC*1******MI*511111111~
REF*2I*170965300000~
LX*1~

TRN*2*1000~
DTP*368*D8*20170405~
CAT*AE*MB~
EFI*05~
BIN*55353*<?xml version="1.0" encoding="UTF-8"?><ServiceReviewAttachment xmlns="http://sra.schema.tmhp.com"><FileAttachment><FileName>Sample_PNG_Image</FileName><FileTypeExtension>png</FileTypeExtension><FileData>iVBORw0KGgoAAAANSUhE~
LX*2~
TRN*2*1001~
REF*FJ*Excel File~
DTP*368*D8*20170405~
CAT*AE*MB~
EFI*05~
BIN*31662*<?xml version="1.0" encoding="UTF-8"?><ServiceReviewAttachment xmlns="http://sra.schema.tmhp.com"><FileAttachment><FileName>Sample_Excel_File</FileName><FileTypeExtension>xls</FileTypeExtension><FileData>0M8R4KGxGuEAAAAAAAAAAA~
SE*20*1001~
GE*1*100001~
IEA*1*100000001~

## 824 Response Example

Below is an example of an 824 response where "TA" denotes accepted transaction, "TE" denotes accepted with error, and "TR" denotes rejected transaction. Business Edit related to Industry code E035 set one time and business edit related to code E043 set five times.

ISA*00* *00* *ZZ*617591011LTCPP *ZZ*146111111
*170331*1942*|*00501*100000001*0*P*:~
GS*AG*617591011LTCPT *146111111*20170331*194249*100001*X*005010X186~
ST*824*0001*005010X186~
BGN*11*I9073AA6-I9073AA6A00001*20170331*194247**000000001**WQ~
N1*41*TMHP*46*617591011LTCPP~
N1*40**46*000402605~
OTI*TA*TN*NA***20170331*130037*100001*1001*275*005010X211~
SE*6*0001~
ST*824*0002*005010X186~
BGN*11*I9073AA6-I9073AA6A00001*20170331*194247**000000001**U~
N1*41*TMHP*46*617591011LTCPP~
N1*40**46*001010000~
OTI*TR*TN*NA***20170331*130037*100001*1001*275*005010X211~
TED*024~
RED*NA**94**IBP*E035~
TED*024~
RED*NA**94**IBP*E043~
TED*024~
RED*NA**94**IBP*E043~
TED*024~

RED*NA**94**IBP*E043~
TED*024~
RED*NA**94**IBP*E043~
TED*024~
RED*NA**94**IBP*E043~
SE*18*0002~
GE*2*100001~
IEA*1*100000001~

### Linking an X12 275 and corresponding X12 278 transaction

The table below illustrates how an X12 278 Health Care Services Review for PASRR NFSS transaction will be linked to a corresponding 275 - Additional Information to Support a Health Care Services Review transaction.

The first two columns depict the 278 request file where Loop 2000E.TRN02 must contain the Submitter Control Number where 2000E.TRN01= 1. Loop 2000E.PWK segment must be populated only once with PWK01=M1, PWK02=EL, PWK05=AC, and PWK06 = Attachment Control Number assigned by the Provider. Similarly, Loop 2000F.PWK must be populated with PWK01=M1, PWK02=EL, PWK05=AC, and PWK06 = Attachment Control Number assigned by the Provider. Multiple Loop 2000Fs are allowed to denote different service lines or type of services requested.

In the below example, Attachment Control Number 1 is used to send a reference number that will link an X12 278 to XML structured data sent in Unsolicited 275 file; Attachment Control Number 2 denotes Service Item 1 Attachment, say for e.g. DME Gait Trainer and Attachment Control Number 3 denotes Service Item 2 Attachment, say for e.g. DME Orthotic Device. Matching colors below represent the same ACNs being sent on the corresponding 275 transaction. In the Unsolicited 275 file, for example, the Submitter Control Number must be sent in Loop1000C REF02 segment (Patient Event Tracking Number), Attachment Control Number 1 in first Loop 2000A.TRN02, Attachment Control Number 2 in second Loop 2000A.TRN02, and Attachment Control Number 3 in third Loop 2000A.TRN02 and so on.

Similarly, the DLN and TMHP Attachment Control Numbers sent in the 278 response file must be used to link an X12 Solicited 275 file. The DLN in Loop 2000E.REF02 of the 278 response must be sent in Loop1000C REF02 segment of the Solicited 275 and the TMHP Attachment Control Numbers in PWK06 segment of Loop 2000E and Loop 2000F of the 278 response must be referenced in Loop 2000A.TRN02 of the Solicited 275 file.

Note that in order to send image attachments referencing Loop 2000E (assessment level of the form), the unsolicited 275 cannot be used and the submitter must use the solicited 275 transaction.

| Transaction in 278 Request File | | Accompanying Unsolicited Transaction in Unsolicited 275 File | | 278 Response | | 275 Solicited | |
|---|---|---|---|---|---|---|---|
| **Loop** | **Segment** | BGN01 | 02 (Add) | **Loop** | **Segment** | BGN01 | 11 (Response) |
| 2000E | TRN01=1 (Current Transaction Trace Number) | **Loop** | **Segment** | 2000E | REF01=NT (Current Transaction Trace Number) | **Loop** | **Segment** |
| | TRN02= Submitter Control Number | 1000C | REF01= 2 | | REF02= **DLN** (assigned by LTCOP Service) | 1000C | REF01= 2 |
| 2000E | PWK01=M1 (Medical Record Attachment) | | REF02= Patient Event Tracking Number (2000E.TRN02 in 278 request) | 2000E | TRN01=2 (Referenced Transaction Trace Number) | | REF02= Patient Event Tracking Number (**DLN** from the 278 Response) |
| | PWK02=EL (Electronically Only) | 2000A | TRN01=1 (Current Transaction Trace Number) | | TRN02= Submitter Control Number | 2000A | TRN01=2 (Referenced Transaction Trace Number) |
| | PWK05=AC (Attachment Control Number) | | TRN02= Attachment Control Number 1 (2000E.PWK06 in 278 request) (Header attachment – XML structured data) | 2000E | PWK01=M1 (Medical Record Attachment) | | TRN02= TMHP Attachment Control Number 1 |
| | PWK06= Attachment Control Number 1 (Header attachment – XML structured data) | 2000A | TRN01=1 (Current Transaction Trace Number) | | PWK02=EL (Electronically Only) | 2000A | TRN01=2 (Referenced Transaction Trace Number) |
| 2000F | PWK01=M1 (Medical Record Attachment) | | TRN02= Attachment Control Number 2 (2000F.PWK06 in 278 request) (Service Item 1 attachment) | | PWK05=AC (Attachment Control Number) | | TRN02= TMHP Attachment Control Number 2 |
| | PWK02=EL (Electronically Only) | 2000A | TRN01=1 (Current Transaction Trace Number) | | PWK06= TMHP Attachment Control Number 1 | 2000A | TRN01=2 (Referenced Transaction Trace Number) |
| | PWK05=AC (Attachment Control Number) | | TRN02= Attachment Control Number 3 (2000F.PWK06 in 278 request) (Service Item 2 attachment) | 2000F | PWK01=M1 (Medical Record Attachment) | | TRN02= TMHP Attachment Control Number 3 |
| | PWK06= Attachment Control Number 2 (Service Item 1 attachment) | | | | PWK02=EL (Electronically Only) | | |
| 2000F | PWK01=M1 (Medical Record Attachment) | | | | PWK05=AC (Attachment Control Number) | | |
| | PWK02=EL (Electronically Only) | | | | PWK06= TMHP Attachment Control Number 2 | | |
| | PWK05=AC (Attachment Control Number) | | | 2000F | PWK01=M1 (Medical Record Attachment) | | |
| | PWK06= Attachment Control Number 3 (Service Item 2 attachment) | | | | PWK02=EL (Electronically Only) | | |
| | | | | | PWK05=AC (Attachment Control Number) | | |
| | | | | | PWK06= TMHP Attachment Control Number 3 | | |
| **Matching colors indicate matching cross reference numbers on the different transactions.** | | | | | | | |

The following is a log of changes made since the original version of the document was published.

| | Change | Date |
|---|---|---|
| 1 | Updated industry error codes for multiple edits in Section 9. under "PASRR NFSS X12 275 Business Edits".<br>Rearranged the edits in Section 9. under "PASRR NFSS X12 275 Business Edits" to be sequential.<br>Updated verbiage under Section 10. "Linking an X12 275 and corresponding X12 278 transaction". | 05/25/2017 |
| 2 | Added error code Bx27502016 as a fatal edit if the date of onset is a future date. | 11/05/2018 |
| 3 | Updated http links to https links and updated formatting. | 08/10/2023 |
| 4 | Edifecs decommission of self-testing tool, removed reference to Edifecs Section 3<br>Texas Medicaid provides a self-testing tool through Edifecs. | 12/03/2025 |