

# INSTRUCTIONS FOR THE ELECTRONIC DATA INTERCHANGE (EDI) WEB SYSTEM

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## INSTRUCTIONS FOR EDI WEB SYSTEM

We recommend executing this website on internet explorer version 10 or higher. To access to the EDI system enter: <https://w3.wca.state.nm.us/edi>

### Login screen

The main screen for the EDI system follows:

Electronic Data Interchange (EDI) System [Login](#)

**WORKERS' COMPENSATION  
ADMINISTRATION  
STATE OF NEW MEXICO**

**LOGIN:**

UserName

☐ Remember me on this Computer

[Forgot Password](#)  
[Contact Us](#)

**Why Does New Mexico Require This Information?**  
New Mexico State Law . If you need a login/password or have any questions about the submission process, please contact Richard Adu-Asamoah at (505) 841-6044. In the meantime, you can use the links below to download detailed instructions about completing your EDI submission.

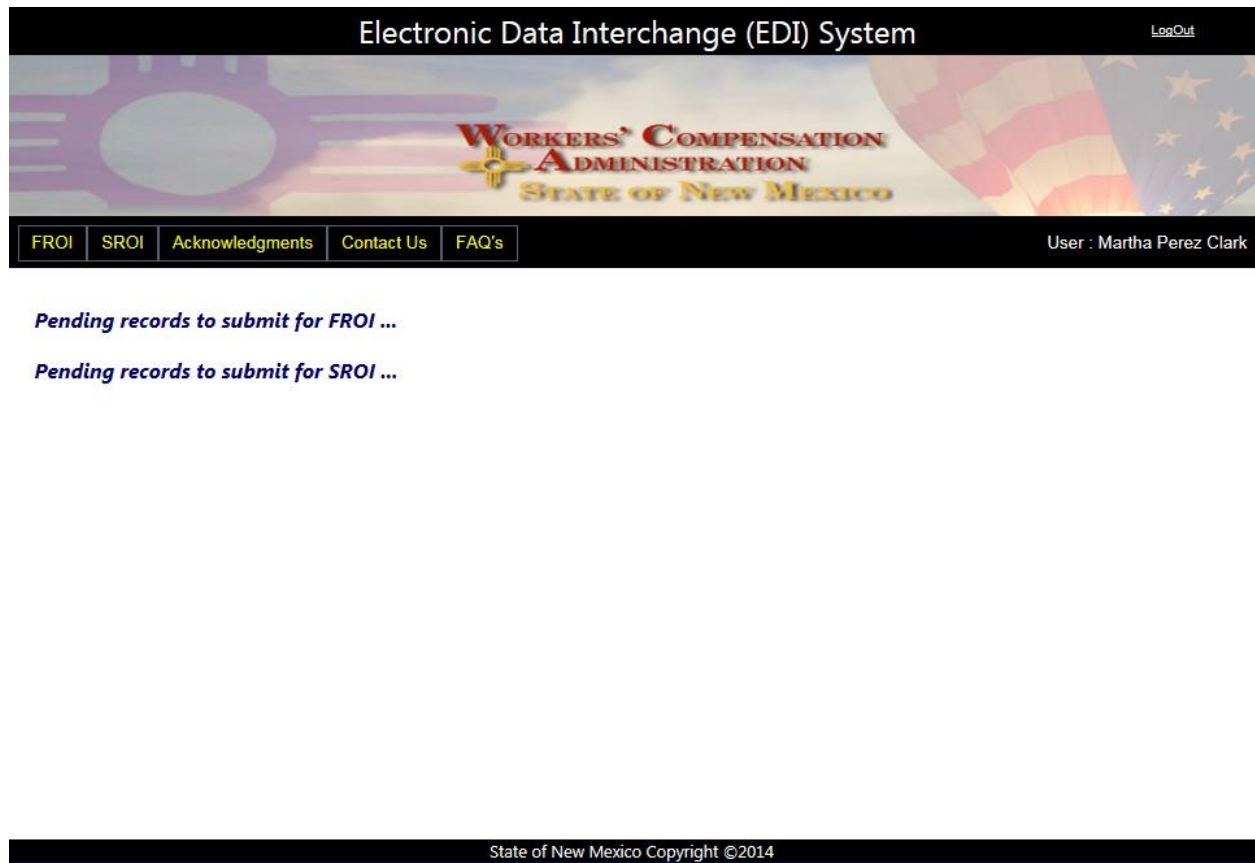
[Download the EDI Process guide \(228K PDF\)](#)  
[Download the EDI System User Manual \(228K PDF\)](#)

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The first time the user enters the UserName, the system accepts the temporary password. Then, the system asks for a password chosen by the user. The user creates a password that should follow some simple rules indicated by the EDI system. The login screen also contains the options Forgot Password and Contact Us. Forgot password allows requesting a new temporary password. Contact us allows to send questions related to the EDI system. Finally, this screen allows downloading the EDI process guide and the EDI system user manual.

## Main Menu

Once the user has logged into the system, the following screen appears:




This screen shows the main menu: FROI (First Report of Injury or Illness), SROI (Subsequent Report of Injury or Illness), Acknowledgments, Contact Us and FAQ (Frequent Asked Questions).

This screen also shows the records that have been saved to submit the FROIs and SROIs. For this instance, the user has no records pending to submit.

## First Report of Injury (FROI)

The option FROI (First Report of Injury or Illness) allows the user entering the data for this report. The sub-option Home returns to the main menu screen. As follows the screen to enter the FROI information is presented.

Electronic Data Interchange (EDI) System
[LogOut](#)



Home

FROI

User: Martha Perez Clark

### First Report of Injury or Illness (FROI)

**GENERAL**

<div style="margin-bottom: 5px;">Transaction ID <input style="width: 100%;" type="text" value="148"/></div> <div style="margin-bottom: 5px;">Report Purpose Code * <input style="width: 100%;" type="text" value="Select Code"/></div> <div style="margin-bottom: 5px;">Claim Number * <input style="width: 100%;" type="text"/></div> <div style="margin-bottom: 5px;">Jurisdiction Claim Number <input style="width: 100%;" type="text"/></div> <div style="margin-bottom: 5px;">Employer FEIN * <input style="width: 100%;" type="text" value="856000102"/></div> <div style="margin-bottom: 5px;">Employer Name * <input style="width: 100%;" type="text" value="TPA NUMBER TWO TESTING"/></div> <div style="margin-bottom: 5px;">Employer Address 1 * <input style="width: 100%;" type="text" value="C"/></div> <div style="margin-bottom: 5px;">Employer City * <input style="width: 100%;" type="text" value="ABQ"/></div> <div style="margin-bottom: 5px;">Insured Report Number <input style="width: 100%;" type="text"/></div> <div style="margin-bottom: 5px;">Employer Zip Code * <input style="width: 100%;" type="text" value="87015"/></div>	<div style="margin-bottom: 5px;">Date <input style="width: 100%;" type="text" value="01-20-2015"/></div> <div style="margin-bottom: 5px;">Jurisdiction <input style="width: 100%;" type="text" value="NM"/></div> <div style="margin-bottom: 5px;">Industry Code <input style="width: 100%;" type="text"/></div> <div style="margin-bottom: 5px;">Insured Name <input style="width: 100%;" type="text"/></div> <div style="margin-bottom: 5px;">Address 2 <input style="width: 100%;" type="text"/></div> <div style="margin-bottom: 5px;">State * <input style="width: 100%;" type="text" value="NM"/></div> <div style="margin-bottom: 5px;">Location Number <input style="width: 100%;" type="text"/></div>
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**CARRIER or CLAIMS ADMINISTRATOR (TPA)**

<div style="margin-bottom: 5px;">Carrier FEIN * <input style="width: 100%;" type="text" value="856000102"/></div> <div style="margin-bottom: 5px;">TPA FEIN <input style="width: 100%;" type="text"/></div> <div style="margin-bottom: 5px;">Carrier/TPA Address 1 <input style="width: 100%;" type="text" value="C"/></div>	<div style="margin-bottom: 5px;">Carrier Name * <input style="width: 100%;" type="text" value="TPA NUMBER TWO TESTING"/></div> <div style="margin-bottom: 5px;">TPA Name <input style="width: 100%;" type="text"/></div> <div style="margin-bottom: 5px;">Address 2 <input style="width: 100%;" type="text"/></div>
--	---

:  
:  
:  
:  
:

Carrier/TPA City	ABQ	State	NM
Carrier/TPA Zip Code	87015		
Policy Number		Self Insured *	<input checked="" type="radio"/> Unknown <input type="radio"/> Yes <input type="radio"/> No
Date Policy Effective		Policy Expiration	
<b>EMPLOYEE</b>			
Social Security Number *		Date of Birth *	
Employee Last Name *		First Name *	
Employee Middle Name		Date of Hire *	
Employee Address 1 *		Address 2	
Employee City *		State *	
Employee Zip Code *		Phone Number	
Occupation/Job Title *		Employment Status	Select Code
Number of Dependents		NCCI Class Code	
Gender *	Select Code	Marital Status *	Select Code
<b>WAGE</b>			
Wage per period *		Period *	Select Code
Days Worked/Week			
Full Pay on Day of Injury	<input checked="" type="radio"/> Unknown <input type="radio"/> Yes <input type="radio"/> No	Salary Continued	<input checked="" type="radio"/> Unknown <input type="radio"/> Yes <input type="radio"/> No
<b>OCCURRENCE</b>			
Date of Injury *		Time of Injury	
Date Reported Employer *		Last Day Worked	
Date Disability Began		Zip Code Injury *	
Employer Premises	<input checked="" type="radio"/> Unknown <input type="radio"/> Yes <input type="radio"/> No		
Nature Injury *	Select Code		
Part Body Injured *	Select Code		
Cause Injury *	Select Code		
Accident Description *			
Date Return Work		Date Death	
Date Reported to Claim Adm*			
<b>TREATMENT</b>			
Initial Treatment *	Select Code		
<a href="#">Insert</a> <a href="#">Cancel</a>			
Pending records to submit ...			
<a href="#">Create File FROI</a>			

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Depending on the type of user, the system will populate either the information for the carrier, the employer or none.

For convenience, we will refer to the FROI or SROI information as a record. The record can be inserted only if all the mandatory fields are entered, as well as the data type for the fields are observed. The mandatory fields are indicated with the "\*" at the right of the field name. The tool tips offer help

indicating the allowed and mandatory information. The tool tips appear close to the text boxes. For instance, the tool tip for the SSN text box indicates that it only accepts digits and the length is 9.

**Social Security Number \***

Only digits, length 9

Once all the verification is cleared, the system saves the record and it will appear at the bottom of the page. The inserted FROI information will appear after “Pending records to submit...” As follows an example of two records inserted.

### ***Pending records to submit ...***

ID	Purpose Code	Claim Number	Employer FEIN	Employer Name	Employee Last Name	First Name	Date Injury	
<a href="#">Delete</a> <a href="#">Select</a>	2111 00	5FERW	850193025	TPA number two testing	HAMILTON	DANIEL	1/27/2015	<a href="#">Print</a>
<a href="#">Create File FROI</a>								

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The user can keep inserting records on this screen. If the user wants to update any of the editable fields in a record, the user can “Select” the record. The record selected will be displayed in the first part of the screen, i.e. FROI form. Then, the user can change the information and click the “Update” button. The system will update and save the record. The user can also delete the record if necessary.

Another option is Print, which allows the user to print the record FROI. If the user needs to print the information from FROI, the user will validate to print the last entered or updated information. For instance, the following image shows the FROI generated to print.

User: Martha Perez Clark

ID: 2111

### First Report of Injury or Illness (FROI)

**GENERAL**

Transaction ID	148	Date	02/17/2015
Report Purpose Code *	00 Original	Jurisdiction	NM
Claim Number *	5FERW		
Jurisdiction Claim Number	861651561515521515151515		
Employer FEIN *	850193025	Industry Code	125621
Employer Name *	TPA number two testing	Insured Name	MAURICE DE LEON MARTINEZ LOPEZ
Employer Address 1 *	CARLOS 10 GUTIERREZ 2345 DE LA	Address 2	65 JUSTO CORRO DE LA ROSA
Employer City *	ABQ	State *	NM
Insured Report Number	2222222222	Location Number	23122
Employer Zip Code *	87015		

**CARRIER or TPA**

Carrier Name *	TPA NUMBER TWO TESTING AND ADD	Carrier FEIN *	850193025
TPA FEIN	333333333	TPA Name	LEON INSURANCE S. A.C.A.
Carrier/TPA Address 1	CAROLINA DEL NORTE 23232333333	Address 2	232 CORNELL APT. 232
Carrier/TPA City	ABQ	State	NM
Carrier/TPA Zip Code	87015		
Policy Number	166152021212123233333333333333	Self Insured *	<input type="radio"/> Unknown <input type="radio"/> Yes <input type="radio"/> No
Date Policy Effective	02/02/2015	Policy Expiration	01/02/2016

**EMPLOYEE**

Social Security Number *	123145698	Date of Birth *	12/27/1998
Employee Last Name *	HAMILTON	First Name *	DANIEL
Employee Middle Name		Date of Hire *	06/03/2014
Employee Address 1 *	250 HARVARD	Address 2	
Employee City *	HAWAII	State *	NM
Employee Zip Code *	88888	Phone Number	
Occupation/Job Title *	JOURNALIST	Employment Status	Select Code
Number of Dependents	23	NCCI Class Code	
Gender *	U Unknown	Marital Status *	M Married

**WAGE**

Wage per period *	25.00	Period *	02 Bi-week
Days Worked/Week	2		
Full Pay on Day of Injury	<input type="radio"/> Unknown <input type="radio"/> Yes <input type="radio"/> No	Salary Continued	<input type="radio"/> Unknown <input type="radio"/> Yes <input type="radio"/> No

**OCCURRENCE**

Date of Injury *	01/27/2015	Time of Injury	01:00
Date Reported Employer *	02/04/2015	Last Day Worked	02/10/2015
Date Disability Began	02/15/2015	Zip Code Injury *	77777
Employer Premises	<input type="radio"/> Unknown <input type="radio"/> Yes <input type="radio"/> No		
Nature Injury *	31 Hearing Loss or Impairment		
Part Body Injured *	26 Soft Tissue		
Cause Injury *	17 Cut, Puncture or laceration from Object Being Lifted or Handled		
Accident Description *	THIS IS THE TEST TO PRINT THE PAGE PER RECORD E1. EVERY TIME THE USER WANTS TO PRINT A RECORD, THEN SELECT THE OPTION TO THE RIGHT SIDE OF THE GRIDVIEW		
Date Return Work	02/02/2015	Date Death	
Date Reported to Claim Administrator *	02/03/2015		

**TREATMENT**

Initial Treatment *	02 Minor hospital medical remedies and diagnostic testing
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Once the user has entered all the records to submit, the user can click "Create File FROI", which will submit all the records inserted by the user to process EDI. The system will display a confirmation that the records were submitted. The confirmation includes user identifier, date and time.

## Subsequent Report of Injury or Illness (SROI)

The option SROI allows the user entering the data for this report. The sub-option Home returns to the main menu screen. It also has two other vertical sub-options, Payments and Paid to date. As follows the screen to enter the SROI information is presented.

**Workers' Compensation Administration**  
STATE OF NEW MEXICO

Home SROI User: Martha Perez Clark

SROI  
Payments  
Paid to date

### Subsequent Report of Injury (SROI)

NM does not require Numbers of Permanent Impairments, Benefit Adjustments or Death dependent relationships

**GENERAL**

Transaction ID  Maintenance Date \*   
 Report Purpose Code \*  Jurisdiction   
 Claim type  Claim status

**CARRIER or CLAIMS ADMINISTRATOR (TPA)**

Carrier FEIN \*  Agency Claim Number   
 Claim Number \*  Carrier/TPA Zip Code   
 TPA FEIN  Date Representation   
 Agreement to compensate ☒ Unknown ☐ Yes ☐ No

**EMPLOYEE**

Social Security Number \*  Number Dependents   
 Wage per Period \*  Period \*   
 Salary Continued ☒ Unknown ☐ Yes ☐ No Pre-existing Disability ☒ Unknown ☐ Yes ☐ No  
 Days Worked/Week

**ACCIDENT**

Insured Report Number  Late Reason Code   
 Date of Injury \*  Date Disability Began \*   
 Maximal Medical Improvment  Date Death   
 Return to Work Qualifier  Date Return to Work

Insert Cancel

Pending records to submit ....

Continue

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In the same way as the option FROI, the record for SROI can be inserted only if all the mandatory fields are entered, as well as the data type for the fields are observed. The mandatory fields are indicated with the "\*" at the right of the field name. The tool tips offer help indicating the mandatory and allowed information. The tool tips appear close to the text boxes. Once all the verification is cleared, the system saves the record and it will appear at the bottom of the page.



The user can insert the SROI information, which will appear after “Pending records to submit...” If the user wants to update any of the editable fields in a record, the user can “Select” the record. The record selected will be displayed in the first part of the screen, i.e. SROI form. Then, the user can change the information and click the “Update” button. The system will update and save the record. The user can also delete the record if necessary.

Once the user has inserted the SROI record, the user can click “Continue” to go to the “Payments” screen. If there is no record, the user is not able to continue with the Payments screen; instead an error message in color red is displayed – Please enter a record to continue with the EDI system –.

**Workers' Compensation Administration**  
STATE OF NEW MEXICO

Home SROI User: Martha Perez Clark

SROI  
Payments  
Paid to date

**Subsequent Report of Injury (SROI)**  
NM does not require Numbers of Permanent Impairments, Benefit Adjustments or Death dependent relationships

**GENERAL**

Transaction ID: A19 Maintenance Date \*: 02-19-2015  
Report Purpose Code \*: Select Code Jurisdiction: NM  
Claim type: Select Code Claim status: Select Code

**CARRIER or CLAIMS ADMINISTRATOR (TPA)**

Carrier FEIN \*: 850193025 Agency Claim Number:   
Claim Number \*:   
TPA FEIN:   
Agreement to compensate: ☒ Unknown ☐ Yes ☐ No  
Carrier/TPA Zip Code: 87015  
Date Representation:

**EMPLOYEE**

**ACCIDENT**

Insured Report Number:   
Date of Injury \*:   
Maximal Medical Improvment:   
Return to Work Qualifier: Select Code  
Late Reason Code: Select Code  
Date Disability Began \*:   
Date Death:   
Date Return to Work:

Insert Cancel

The creation of at least one record is necessary to link this record with the following screens. For instance the SROI record may have “Payments or Adjustments” and “Paid to date/reduced earnings or

recoveries.” Once the user inserts a SROI record and the user clicks on “Continue”, the Payments screen appears. This screen receives the information related to the SROI record, like Claim Number.

**Electronic Data Interchange (EDI) System** [LogOut](#)

**WORKERS' COMPENSATION  
ADMINISTRATION  
STATE OF NEW MEXICO**

[Home](#) [SROI](#) User: Martha Perez Clark

SROI  
Payments  
Paid to date

**Payments or Adjustments (SROI)**

<b>Claim Number</b>	<input type="text" value="6556"/>	<b>Purpose code</b>	<input type="text" value="FN"/>
<b>E6 ID</b>	<input type="text" value="1056"/>	<b>Disability *</b>	<input type="text" value="Select Code"/>
<b>Code *</b>	<input type="text" value="Select Code"/>		
<b>Weekly amount</b>	<input type="text"/>	<b>Amount to date *</b>	<input type="text"/>
<b>Weeks *</b>	<input type="text"/>	<b>Days *</b>	<input type="text"/>
<b>Start date *</b>	<input type="text"/>	<b>End date</b>	<input type="text"/>

[Insert](#) [Cancel](#)

*Maximum number of payments allowed per record is 10.  
Pending payments to submit ...*

[Continue](#)

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The user can keep inserting records in this screen, as long as the number of records is less or equal to 10. The user can click on “Continue” to go to the next screen “Paid to date.”

This screen “Paid to date” receives the information related to the SROI record, like Claim Number.

Electronic Data Interchange (EDI) System [LogOut](#)

**WORKERS' COMPENSATION ADMINISTRATION**  
STATE OF NEW MEXICO

[Home](#) [SROI](#) User: Martha Perez Clark

SROI  
Payments  
Paid to date

**Paid to date/ Reduced Earnings/ Recoveries (SROI)**

Claim Number  Purpose code

E6 ID

Code \*  Amount \*

[Insert](#) [Cancel](#)

*Maximum number of earnings or recoveries allowed per record is 25.  
Pending earnings or recoveries to submit ...*

[Continue](#)

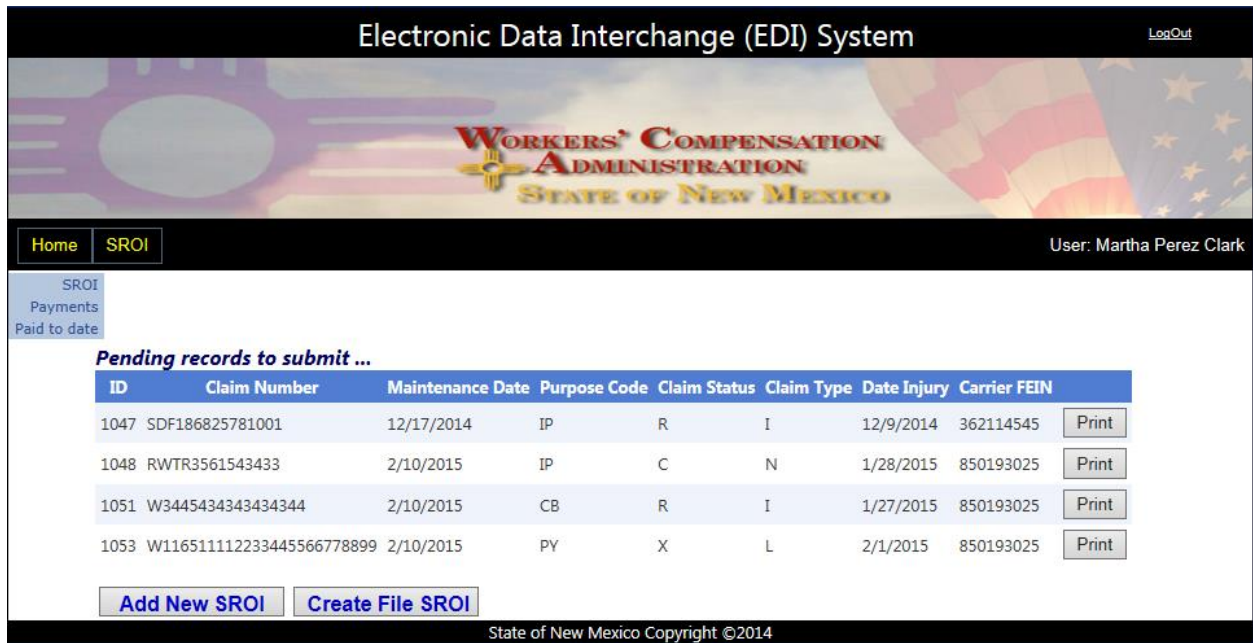
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The user can keep inserting records in this screen, as long as the number of records is less or equal to 25.

In the same way as the form SROI, the records for “Payments” and “Paid to date” can be inserted only if all the mandatory fields are entered, as well as the data type for the fields are observed. The mandatory fields are indicated with the “\*” at the right of the field name. The tool tips offer help indicating the mandatory and allowed information. The tool tips appear close to the text boxes. Once all the verification is cleared, the system saves the record and it will appear at the bottom of the page.

The “Payments” and “Paid to date” information inserted will appear after “Pending records to submit...” If the user wants to update any of the editable fields in a record, the user can “Select” the record. The record selected will be displayed in the first part of the screen, i.e. “Payments” or “Paid to date” forms. Then, the user can change the information and click the “Update” button. The system will update and save the record. The user can also delete the record if necessary.

After the user clicks on “Continue” on the “Paid to date” screen, the user can see the following screen:



**Electronic Data Interchange (EDI) System** [Log Out](#)

**Workers' Compensation Administration**  
STATE OF NEW MEXICO

[Home](#) [SROI](#) User: Martha Perez Clark

SROI  
Payments  
Paid to date

**Pending records to submit ...**

ID	Claim Number	Maintenance Date	Purpose Code	Claim Status	Claim Type	Date Injury	Carrier FEIN	
1047	SDF186825781001	12/17/2014	IP	R	I	12/9/2014	362114545	<a href="#">Print</a>
1048	RWTR3561543433	2/10/2015	IP	C	N	1/28/2015	850193025	<a href="#">Print</a>
1051	W34454343434344	2/10/2015	CB	R	I	1/27/2015	850193025	<a href="#">Print</a>
1053	W116511112233445566778899	2/10/2015	PY	X	L	2/1/2015	850193025	<a href="#">Print</a>

[Add New SROI](#) [Create File SROI](#)

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The option print allows the user to print the record with the entered information. For instance if the user clicks Print on the record with ID 1053, the following screen can be sent to print.

User: Martha Perez Clark

ID: 1053

### Subsequent Report of Injury (SROI)

**GENERAL**

Transaction ID: A49 Maintenance Date \*: 02/10/2015

Report Purpose Code \*: PY Payment, Medical-only or Notification Jurisdiction: NM

Claim type: L Became Lost Time Claim status: X Reopened/Closed

**CARRIER or TPA**

Carrier FEIN \*: 850193025 Agency Claim Number: 1165116156111223344556677

Claim Number \*: W116511112233445566778899 Carrier/TPA Zip Code: 87015

TPA FEIN: 156165165 Date Representation: 02/10/2015

Agreement to compensate: ☒ Unknown ☐ Yes ☐ No

**EMPLOYEE**

Social Security Number \*: 121213121 Number Dependents: 54

Wage per Period \*: 12.00 Period \*: 02 Bi-week

Salary Continued: ☒ Unknown ☐ Yes ☐ No Pre-existing Disability: ☒ Unknown ☐ Yes ☐ No

Days Worked/Week: 2

**ACCIDENT**

Insured Report Number: 156165165 Late Reason Code: D2 Dispute concerning compensability, in whole

Date of Injury \*: 02/01/2015 Date Disability Began \*: 02/08/2015

Maximal Medical Improvment: 02/09/2015 Date Death: 02/03/2015

Return to Work Qualifier: 5 Released to RTW without physical restri Date Return to Work: 02/11/2015

## Payments or Adjustments ...

Payment	SROI ID	Disability	Code	Accumulator	Amount	Start	End	Weeks	Days
1052	1053	PPD	040	46.00	26.00	2/10/2015	2222	5	
1053	1053	PPD	090	656.00		1/26/2015	2	2	

## Paid to date, Reduced Earnings or Recoveries ...

ID	SROI ID	Code	Amount
2059	1053	330	250.00
2060	1053	340	605.00
2061	1053	350	565.00
2062	1053	390	656.00

The user can “Add New SROI” to insert another SROI record. Once the user has entered all the records to submit, the user can click on “Create File SROI”, which will submit all the records inserted by the user to process EDI. The system will display a confirmation that the records were submitted. The confirmation includes user identifier, date and time.

**Electronic Data Interchange (EDI) System**[LogOut](#)

**WORKERS' COMPENSATION  
ADMINISTRATION  
STATE OF NEW MEXICO**

[Home](#)[SROI](#)User: Martha Perez Clark


[SROI](#)[Payments](#)[Paid to date](#)

**The file from the SROI records was submitted. Confirmation: User 4 on 1/23/2015 9:10:43 AM**

## Acknowledgments

This screen shows the acknowledgment files for the user logged in. The user can view each of the records sent on a specific date and time, or download the acknowledgment file.

**Electronic Data Interchange (EDI) System**
Logout



[FROI](#)
[BROI](#)
[Acknowledgments](#)
[Contact Us](#)
[FAQ's](#)
User: Martha Perez Clark

Search by Claim Number:

Download and View Acknowledgment Files

	Header ID	Receiver FEIN	Receiver postal	Date sent	Time sent	Original date	Original time	T / P	EDI Release	
<a href="#">Download</a>	71	E56000102		2015-01-20	091121	2015-01-17	000505	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	69	E56000102		2015-01-16	092157	2015-01-16	000504	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	65	E56000102		2015-01-15	085034	2015-01-15	000505	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	62	E56000102		2015-01-14	090310	2015-01-14	000504	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	61	E56000102		2015-01-14	090126	2015-01-14	000504	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	59	E56000102		2015-01-13	090543	2015-01-13	000506	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	58	E56000102		2015-01-13	090303	2015-01-13	000506	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	56	E56000102		2015-01-12	090322	2015-01-10	000504	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	54	E56000102		2015-01-12	090135	2015-01-10	000504	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	51	E56000102		2015-01-09	091141	2015-01-09	000503	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	50	E56000102		2015-01-09	091037	2015-01-09	000503	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	48	E56000102		2015-01-08	091248	2015-01-08	000505	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	46	E56000102		2015-01-08	091151	2015-01-08	000505	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	43	E56000102		2015-01-07	090921	2015-01-07	000504	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	41	E56000102		2015-01-07	090822	2015-01-07	000504	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	38	E56000102		2015-01-06	085537	2015-01-06	000506	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	37	E56000102		2015-01-06	085502	2015-01-06	000506	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	36	E56000102		2015-01-05	092032	2015-01-03	000505	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	34	E56000102		2015-01-05	091950	2015-01-03	000505	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	32	E56000102		2015-01-02	091228	2015-01-01	000504	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	31	E56000102		2015-01-02	091150	2015-01-01	000504	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	28	E56000102		2014-12-31	094049	2014-12-31	000505	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	26	E56000102		2014-12-31	093931	2014-12-31	000504	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	24	E56000102		2014-12-30	085548	2014-12-30	000504	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	23	E56000102		2014-12-30	085438	2014-12-30	000504	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	21	E56000102		2014-12-29	090000	2014-12-27	000505	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	20	E56000102		2014-12-29	085934	2014-12-27	000505	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	16	E56000102		2014-12-24	091010	2014-12-24	000504	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	15	E56000102		2014-12-24	090954	2014-12-24	000504	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	12	E56000102		2014-12-23	093651	2014-12-23	000505	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	10	E56000102		2014-12-23	093558	2014-12-23	000505	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	7	E56000102		2014-12-22	090438	2014-12-20	000504	P 1	1	<a href="#">View</a>
<a href="#">Download</a>	5	E56000102		2014-12-19	085842	2014-12-19	000504	P 1	1	<a href="#">View</a>

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The acknowledgment information allows viewing the records submitted. For instance the following records show when the user selects view on the row with header id 121.

Search by Claim Number:

Header ID :

	Transaction	Code	Ack	Ack Code	Date Sent	Date processed	Adjuster Claim #	WCA #	SSN - Injury Date	# errors	T / P
Select	148	00	AK1	TE	2015-02-05	2015-02-06	881-500214			1	P
	148	00	AK1	TA	2015-02-05	2015-02-06	881-500215			0	P

From the records in the previous screen, the user can select any of the records rejected during the EDI processing.

Once the user selects the record with errors, the EDI system displays the error description(s) and the option to resubmit this record with error(s).

Transaction	Code	Ack	Ack Code	Date Sent	Date processed	Adjuster Claim #	WCA #	SSN - Injury Date	# errors	T / P
148	00	AK1	TE	2015-02-05	2015-02-06	881-500214			1	P
148	00	AK1	TA	2015-02-05	2015-02-06	881-500215			0	P

	Error Description 1	Error Description 2	Sequence
<a href="#">Resubmission</a>	Post code of injury site	Must be valid on zip code table	1

The resubmission option works only if the record was entered on this EDI system and the user created this record. For instance in this case, see the following screen.

**Please select the record recovered on the form FROI, correct the information and resubmit it.**  
[Go to FROI](#)

Once the user clicks on Go to FROI, this record will show at the end of the option FROI of the system.

Pending records to submit ...								
ID	Purpose Code	Claim Number	Employer FEIN	Employer Name	Employee Last Name	First Name	Date Injury	
<a href="#">Select</a> <a href="#">Delete</a>	2119 00	881-500214	850193025	TPA number two testing	HAMILTON	DANIEL	1/27/2015	<input type="button" value="Print"/>
<input type="button" value="Create File FROI"/>								

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If the record was entered using the EDI system, the record will be recovered from previously submitted records. This recovered record will show under “Pending record to submit...” in the corresponding FROI or SROI options. At this point, the user can “Select” the record and make the necessary changes to correct and resubmit the record. For further information see FROI and SROI.

If the user selects the option “Resubmission” and the record was not entered in the EDI system, the following message shows.

**Please correct and resubmit this record. It was not entered in this system.**

The acknowledgment option also allows downloading the acknowledgment file to the user’s computer. The user can select “Save as” and rename the acknowledgment file properly. For instance, using the date and time the file was submitted.

The screenshot displays the 'Electronic Data Interchange (EDI) System' interface. A 'Save As' dialog box is open, showing the file path 'edi' and a list of folders (Desktop, Downloads, Recent Places, Libraries, Documents, Music, Pictures, Videos, Computer). The file name is 'FROI\_Jan20-2014-10-00.txt' and the save type is 'Text Document (\*.txt)'. The background shows a table of records with columns for 'Download', 'ID', 'Request ID', 'Response ID', 'Status', and 'Action'. The user is identified as 'Martha Perez Clark'.

Download	ID	Request ID	Response ID	Status	Action
Download 56	856000102	2015-01-12 090322	2015-01-10 000504	P 1	View
Download 54	856000102	2015-01-12 090135	2015-01-10 000504	P 1	View
Download 51	856000102	2015-01-09 091141	2015-01-09 000503	P 1	View
Download 50	856000102	2015-01-09 091037	2015-01-09 000503	P 1	View
Download 48	856000102	2015-01-08 091248	2015-01-08 000505	P 1	View

At the bottom, a message asks: 'Do you want to open or save Ack\_download.txt from w3.wca.state.nm.us?'. Buttons for 'Open', 'Save', and 'Cancel' are visible.

The acknowledgment option also offers the option to search by Claim Number, showing the records of this claim number, as long as the records belong to the fein registered to the user.

Electronic Data Interchange (EDI) System

[LogOut](#)



[FROI](#) [SROI](#) [Acknowledgments](#) [Contact Us](#) [FAQ's](#)

User: Martha Perez Clark

Search by Claim Number:

View Acknowledgment Records

Transaction	Code	Ack	Ack Code	Date Sent	Date processed	Adjuster Claim #	WCA #	SSN - Injury Date	# errors	T / P
148	00	AK1	TA	2014-12-18	2014-12-19	WC-15-00978			0	P


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## Contact us

This screen allows the user to send any question by email regarding the EDI system. The name and email are populated. For the user's convenience, the user can also contact us by phone.

Electronic Data Interchange (EDI) System

[LogOut](#)



[FROI](#) [SROI](#) [Acknowledgments](#) [Contact Us](#) [FAQ's](#)

User : Martha Perez Clark

Name

Martha Perez Clark

Your Email

test@state.nm x

Subject

Message


Send

Help:  
M-F 8am - 5pm  
(excl. holidays)  
  
505-841-six eight  
zero five

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## Frequent Asked Questions (FAQ)

This option contains the most relevant questions to help users.

Electronic Data Interchange (EDI) System					LogOut
					
FROI	SROI	Acknowledgments	Contact Us	FAQ's	User: Martha Perez Clark
<b>What can I do in the NM Workers Compensation EDI Website?</b>					
1. You can create & update your EDI information to submit First Report of Injury (FROI) and Subsequent Report of Injury (SROI). 2. You can store your reports for a short period before submission, i.e. two days. 3. You can submit your reports to start the EDI process. 4. You can view the acknowledgment records from the submitted reports.					
How do I register to use the NM Workers Compensation EDI Website?					
What do I do if I change my address or I change my email address?					
What to do if I forget my password?					
Why do I need to create such a robust password?					
Why cannot I insert my reports FROI or SROI after I enter the information?					
Why cannot I update my reports FROI or SROI after I enter the information?					
Why cannot I submit my reports FROI or SROI?					
Why I cannot continue to the Payments screen on the report page SROI?					
Why when I select resubmission, the system says "Please correct the information and resubmit it. This record was not entered in this system." ?					
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