

# The No Surprises Act

## Open Negotiation Request Process for Health Care Professionals



### Key Points

- Protects patients from surprise balance billing for defined out-of-network items and services
- The protections of the law won't apply if the member chooses to receive items and services from an out-of-network provider, with some exceptions
- Applies to individual, small group and large group fully insured markets and self-insured group plans
- The fastest way to submit a negotiation request is via email

### Questions?

Call the Presbyterian Provider Services helpline at (505) 923-5757, Monday through Friday, 8 a.m. to 5 p.m.



The No Surprises Act of 2020 created legislation to protect patients from surprise balance billing. It is effective for plan or policy years beginning on or after Jan. 1, 2022, and applies to:

- Emergency services at out-of-network hospitals and free-standing emergency facilities
- Out-of-network providers at in-network facilities
- Out-of-network air ambulance carriers

### Negotiation Process

The negotiation process is specific to out-of-network claims that are covered under the No Surprises Act. If a provider disagrees with the payment amount of an out-of-network claim and wants to object to it, then they must submit a negotiation request to the payer. The provider and payer must then engage in negotiation for 30 days, after which the provider may seek resolution under the federal independent dispute resolution (IDR) process.

### Initiating a Negotiation Request

To initiate the negotiation process, providers must complete the [U.S. Federal Open Negotiation Notice form](#) and the attached **Presbyterian Open Negotiation Request form** and submit these forms to Presbyterian Health Plan, Inc. (Presbyterian) via email or mail:

- **Email:** [singlecaseagreements@phs.org](mailto:singlecaseagreements@phs.org)
- **Mail:** Presbyterian Health Plan  
Attn: Provider Contracting - Open Negotiation Request  
9521 San Mateo Blvd. NE  
Albuquerque, NM 87113

### Notes regarding negotiation requests:

- Choose only one method to submit your negotiation request.
- If the member agreed to waive surprise billing protections, then submit a copy of the signed consent form along with the forms.
- Do not send multiple patients on one set of forms. Please use one form per patient. Multiple claim numbers may be provided for the same patient.
- You must submit both forms together or the submission will be treated as incomplete.
- Do not use these forms to submit new claims or request an appeal. Follow the standard claims submission process and/or the appeals process outlined in the member's plan.

# Presbyterian Open Negotiation Request Form

## Provider/Facility Information (as listed on your provider remittance advice [PRA])

Name \_\_\_\_\_ Email Address \_\_\_\_\_

Contact Name (if different than above) \_\_\_\_\_

Phone Number \_\_\_\_\_

National Provider Identifier (NPI) # \_\_\_\_\_ Tax ID # \_\_\_\_\_

## Member Information

Name \_\_\_\_\_ Member ID # \_\_\_\_\_

Group # \_\_\_\_\_ Plan Name \_\_\_\_\_

## Claim Information

Use the chart below to describe the claim(s) you are submitting for the open negotiation request.

Claim Number(s)	Service Code(s)	Billed Amount	Amount Plan Paid	Date of Service	Offer for Total Out-of-Network Rate

**Reminder:** Please complete the [U.S. Federal Open Negotiation Notice form – OMB Control NO. 1210-0169](#) and include it with your submission to Presbyterian.

### Your Independent Resolution (IDR) Rights

After the open negotiation period is exhausted, you may have the right to file an IDR through the Centers for Medicare & Medicaid Services (CMS) portal.

If you file an IDR, please forward a copy of the completed Notice of IDR Initiation form you submitted to the CMS portal to Presbyterian via email: [singlecaseagreements@phs.org](mailto:singlecaseagreements@phs.org). In addition, please use this email when the CMS IDR form prompts you to provide an email address for Presbyterian.