

## **NO SURPRISE BILLING INFORMATION FOR NON-NETWORK PROVIDERS**

The No Surprises Act, enacted as part of the Consolidated Appropriations Act 2021 (“CAA”), provides new federal consumer protections against balance billing and surprise medical bills under certain circumstances. Among other things, these include prohibiting balance billing in certain circumstances, requiring disclosure about balance billing protections, and providing a method for resolving certain disputes concerning payment to Non-Network Providers. We have posted disclosures explaining the rights and protections our Members have under the law on our public website at <http://webstatic.bcbsms.com/pdf/NSBN.pdf>. Additionally, our Explanation of Benefits, when we pay claims covered by the new law, will provide Members access to the same information provided in the online disclosure.

### **NON-NETWORK PROVIDER DISPUTES OF QUALIFIED PAYMENT AMOUNT**

In instances where Blue Cross & Blue Shield of Mississippi determines that the Qualified Payment Amount (“QPA”) applies for purposes of the Recognized Amount, we certify the QPA used and shared with the Non-Network Provider was determined in compliance with the methodology set forth in the applicable Federal regulations. When QPA applies, you will be notified by a message contained on a voucher that will be provided using the contact information on file with BCBSMS. Where QPA is used, the Allowed Amount stated on the voucher is the QPA.

The federal regulations also include provisions allowing Non-Network Providers, under specified circumstances, to request negotiation of the payor’s payment for claims subject to the No Surprises Act, and if negotiation fails, to enter into the Independent Dispute Resolution (IDR) process, also known as arbitration, to determine the allowed payment amount for the particular item or service in dispute. This process only applies to payments for items and services subject to the No Surprises Act and where the process is permitted by law.

If you wish to initiate the 30-day open negotiation period for purposes of determining the amount of total payment, written requests should be sent to:

MAIL: Blue Cross & Blue Shield of Mississippi  
Attn: Provider Appeals  
3545 Lakeland Drive  
Flowood, MS 39232

EMAIL: [nsaidr@bcbsms.com](mailto:nsaidr@bcbsms.com)

The request must include the Open Negotiation Notice required under the federal regulations which is available at [www.cms.gov/nosurprises](http://www.cms.gov/nosurprises). If the 30 day open negotiation period does not result in a determination, generally you may initiate the IDR process within 4 days after the end of the open negotiation period. Federal requirements for initiating the IDR process are available at [www.cms.gov/nosurprises](http://www.cms.gov/nosurprises). Notices and other communications to BCBSMS regarding IDR should be sent using the contact information listed above.

If you have questions regarding the Open Negotiation and IDR process, you may call our Customer Support Team at (601) 932-1122 or (800) 257-5825, Monday through Friday from 8:00 am until 4:30 pm.

For detailed information on how the No Surprises Act protects consumers from surprise billing and impacts the process of payments to certain Non-Network Providers, please visit [www.cms.gov/nosurprises](http://www.cms.gov/nosurprises).