STATE OF NEW MEXICO
OFFICE OF SUPERINTENDENT OF INSURANCE

SUPERINTENDENT OF INSURANCE
Alice T. Kane

DEPUTY SUPERINTENDENT
Timothy Vigil

BULLETIN 2025-003

June 23, 2025

TO: ALL HEALTH CARE CARRIERS LICENSED IN NEW MEXICO SUBJECT TO SURPRISE BILLING PROTECTIONS ACT

RE: DATA CALL PURSUANT TO THE SURPRISE BILLING PROTECTION ACT (ACT), NMSA 1978, CHAPTER 59A, ARTICLE 57A OF THE INSURANCE CODE

Pursuant to NMSA 1978, Section 59A-57A-l1 of the Act, the Superintendent of Insurance (Superintendent) "may require health insurance carriers" to "report the annual percentage of claims and expenditures paid to nonparticipating providers for health care services," to monitor the effectiveness of the requirements in the Act, and the impact on provider networks and health care costs. This monitoring requires establishment of a data baseline pre-enactment of the Surprise Billing Protection Act in 2020.

13.10.33.11 NMAC requires carriers to submit a surprise billing data report using a template provided by the Superintendent. The rule requires carriers to file this report annually by May 1 of each year. The report is required to contain data from the full prior calendar year.

OSI has updated the Surprise Billing Data Call Template to clarify instructions and to capture additional information required by the OSI to assess the effectiveness of the requirements of the Surprise Billing Act. The overall layout of the report remains the same, with new data fields added. Below is a list of the changes made to help understand the differences between the two versions. The new Surprise Billing Data Call Template can be found on OSI's website at the following link:

Office of Superintendent of Insurance (state.nm.us)

List of changes to the surprise billing data call template

The changes and updates are highlighted in red font on each tab of the template.

Carrier and Summary Information tab:

1. Expanded and requires numbers of adjudicated claims
2. Requires total paid amounts in reporting period
3. Enter the appropriate reporting year

Instructions Tab:

1. Added and defined 'Reporting Period'
2. Defined Adjudicated Claims.
3. Defined Denied Claims count.
4. Defined Claim Denials.
5. Defined Physician Claims.
6. Requires and defines new data field 'Percent of Medicare Claims Paid at SBR (Surprise Billing Rate)

Emergency and Non-Emergency Tabs:

1. Added the % of Medicare for Claims paid at SBR.
2. Added the following fields to capture more information specifically related to claims that are paid at the Surprise Billing Rate (SBR) in order to assess the impact on members:
    a. Paid Amount for Claims Paid at SBR
    b. Patient Share for Claims Paid at SBR
    c. % of Medicare for Claims Paid at SBR
3. Added the automated totals fields (rows 64-66) for each claim category which will allow for easier validation of total amounts.

Prior to submitting data call reports, carriers must validate the accuracy of the data and completeness of the reports. Any missing or incorrect information in the data report will result in an immediate rejection of the filing.

PLAN YEAR 2024

Every subject carrier in operation in 2024 shall furnish the information and data for the plan year 2024 in the newly revised Surprise Billing Data Call Template.

Filing should be submitted as 'Informational' under the below-named TOI and Sub-TOI. The "Project Name" field should be named as noted below with the plan year of the data mentioned first. **A separate SERFF filing should be submitted for each plan year reported. Please add the 'Reporting Year' in the Carrier and Summary tab in the report for each year's report.**

1. First tab: Carrier and Summary Information, complete this tab entirely.
2. Second tab: Instructions for completing the template are on the second tab of the spread sheet template.
3. **The filing is due by September 1, 2025**.
4. This information shall be submitted via SERFF using the following instructions:
    a. TOI: H21- Health – Other
    b. Sub TOI: H21.000 Health-Other
    c. Filing Type: Informational
    d. The Project Name: 2024 Surprise Billing Data Call
    e. The Requested Filing Mode: Informational
    f. Template Naming Convention: [carrier name] [plan type] [PY2024][name of report][date created][version #(if necessary)]

- i.e.: PHP_HMO_PY2024_Surprise Billing Data Call_08.01.2024

PLAN YEARS 2021 and 2022

The data was not collected for plan years 2021 and 2022. OSI requires the data from previous years to compare to current years to better understand the whole outcome. Therefore, every carrier is ordered to complete the new Surprise Billing Data Call template for plan **years 2021 and 2022**. OSI and the Superintendent of Insurance appreciate your time and effort to capture this data.

Filing should be submitted as 'Informational' under the below-named TOI and Sub-TOI. The Project Name field should be named as noted below with the plan year of the data mentioned first.

A separate SERFF filing should be submitted for each plan year reported. Please add the 'Reporting Year' in the Carrier and Summary tab in the report for each year's report.

1. First tab: Carrier and Summary Information, complete this tab entirely.
2. Second Tab: Instructions for completing the template are on the second tab of the spread sheet template.
3. **The filing is due by October 1, 2025 for both plan years**.
4. This information shall be submitted via SERFF using the following instructions:
   a. TOI: H21- Health – Other
   b. Sub TOI: H21.000 Health-Other
   c. Filing Type: Informational
   d. The Project Name: 20xx Surprise Billing Data Call
   e. The Requested Filing Mode: Informational
   f. Template Naming Convention: [carrier name] [plan type] [PY20xx] [name of report] [date created] [version # (if necessary)]

- i.e.: PHP_HMO_PY2021_Surprise Billing Data Call_09.01.2025

Failure to submit complete and correct information requested in this bulletin by the indicated deadlines may result in a penalty pursuant to NMSA 1978, Section 59A-1-18.

If you have any questions regarding this bulletin, please contact Danelle Callan, Bureau Chief, Managed Care Compliance and Policy Bureau at Danelle.Callan@osi.nm.gov with the Office of Superintendent of Insurance.

As always, the Office of Superintendent of Insurance thanks carriers for their partnership and cooperation.

ISSUED this 23rd day of June 2025.

ALICE T. KANE
Superintendent of Insurance

SANTA FE LOCATION (MAIN OFFICE)
(OVERNIGHT/SECOND DAY MAIL ONLY)
1120 Paseo De Peralta, 4th Floor
Santa Fe, New Mexico 87501

(USPS MAIL ONLY)
P O Box 1689
Santa Fe, New Mexico 87504

Main Phone: (505) 827-4601 | Toll Free: (855) 4 - ASK - OSI
www.osi.state.nm.us