

# PRIME Enables Compliance With the New No Surprises Act



The newest legislation in healthcare, the No Surprises Act, was signed into law on December 27, 2020. It protects patients from unexpected medical costs, offers a model to resolve payment disputes between healthcare payers and providers, and regulates payers' management of provider network directory data to ensure accuracy. Even though the new legislation does not take effect until January 2022, PRIME aligns with its principles and can assist your plan with ensuring that consumers' expectations of accurate provider data are met.

## No Surprises Act and Provider Directories

The No Surprises Act encourages provider data accuracy in directories and outlines the consequences to payers and providers when inaccurate data adversely and financially impacts a patient.

The No Surprises Act requires insurance agencies to maintain accurate provider directories. The legislation mandates that health plans must:

- Maintain provider data within directories at least every 90 days;
- Update provider data residing in downstream systems within 2 days; and
- Remove unverified providers from directories.



PRIME's capabilities are aligned with each of these requirements, which are in addition to the existing CMS regulations applicable to Medicare, Medicaid, and QHP. PRIME also integrates with popular PDMS systems like Cactus, Portico, and TruProvider and supports real-time secure file integrations to facilitate health plan operational workflows.

## The Importance of Provider Directories


Provider directories help consumers select in-network providers and facilitate the estimation of treatment costs. When provider directories are accurate, members can confidently connect with desired providers. Accurate provider directories also foster trust between the member, provider, and health plan. The No Surprises Act insulates members and caregivers from inappropriate billing due to inaccurate provider data.

## Providers will Benefit from using PRIME in their Practices

For all of these reasons, providers will benefit by utilizing PRIME to adhere to the No Surprises Act. By using PRIME, providers will be able to focus on what matters most, the patient. PRIME will also help providers avoid costly CMS audits.

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## Contact Information

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## Provider Data Accuracy and Validation Services

### PRIME makes data validation easy and convenient

With 100% direct outreach, 95% data quality, and 90% validation success, PRIME performs data validation at the source via direct outreach channels with a best-in-class implementation timeframe (less than one month to go live) and outcome-based pricing with full audit transparency.

PRIME offers an online portal for providers to update data conveniently. PRIME's call center is also available for providers to speak with an agent to assist with data updating. PRIME's technology integrates directly with a health system's EHR, eg. EPIC, to update and process data with roster submissions. Providers who utilize PRIME embrace efficient and automated data updates, allowing them more time to focus on the patient.

### PRIME supports and drives data accuracy

The latest audit reviews by CMS indicate that almost 49% of health plan directories contained errors. These errors include incorrect provider locations and telephone numbers, provider participation status, and other critical information relevant to the patient and caregiver.

Provider data, including coverage options, participation status, appointment availability, affiliation, and clinical focuses, change often. PRIME swiftly monitors for these changes and updates health plans accordingly. PRIME also monitors for provider and health plan data discrepancies.