

NOTICE OF ABSOLUTE BAR DATE AND CLAIMS FILING DEADLINE

On March 19, 2021, the 2nd Judicial District Court, Bernalillo County, New Mexico determined that New Mexico Health Connection, Inc. (“NMHC”) was insolvent, appointed the Superintendent of Insurance as the Receiver, and ordered the Receiver to liquidate NMHC. The Court also ordered any person who may have a claim against NMHC to submit a proof of claim to the Receiver by **September 19, 2021**. **If you do NOT have a claim against NMHC no action is required by you.**

The Receiver has created an online process for filing a proof of claim. In order to protect personal health information (“PHI”), a unique login number* has been assigned to Healthcare Providers. **This unique login number will need to be entered on the Creditor screen in order for the Proof of Claim intake system to display all claims that are owed to you.** If you are a Healthcare provider and did not receive a unique login number, contact the Receiver at nmhc@riskreg.com. A unique login number is not required for all other claimants. Simply Register and add your creditor and claim information.

We encourage you to review the Proof of Claim Intake System User Guide before starting your claim. <https://www.mynmhc.org/#!/ProofOfClaim>

Access the Proof of Claim Intake System at <https://osi-claims.osi.state.nm.us/>.

If you have questions about the process or the NMHC liquidation, please review the FAQs at www.mynmhc.org/#!/FAQ. For general information regarding the NMHC liquidation, please visit: www.mynmhc.org. If you do not have access to a computer, call 360-818-4773 for more information (*this phone line is unable to answer general POC questions, please refer to the website listed above.*)

The proof of claim process requires a statement acknowledged by the claimant that includes all of the following, as applicable: the claim details, including the claim amount and the circumstances underlying the claimed debt; the identity and amount of any security on the claim; any payments made on the debt; that the sum claimed is justly owing and that there is no setoff, counterclaim, or defense to the claim; any right of priority of payment or other specific right asserted by the claimant; a copy of any written instrument which is the foundation of the claim; the name and address of the claimant and the claimant’s attorney, if any. **Any claim submitted after September 19, 2021 will be rejected as untimely.**

Healthcare Providers

If you are a healthcare provider (provider) who delivered a benefit to a NMHC member, you should proceed as follows: First, submit the claim to the NMHC claim administrator as you would in the ordinary course of your business. **The deadline for submitting a claim to the third party administrator is September 1, 2021.** Second, after the claim has been adjudicated by the NMHC claim administrator, and you receive an Explanation of Payment (EOP), submit a claim through the online Proof of Claim intake system. An Explanation of Benefits (EOB) will be sent to the member simultaneously with transmittal of your EOP.

NOTE: A provider can only bill a member for the patient responsibility as indicated on the EOP. **A provider may not bill a member for any unpaid claim costs that were the responsibility of NMHC, even if NMHC has insufficient assets to pay some or all of those costs. A provider who bills a member for costs owed by NMHC may be subject to discipline or penalties.**

Member/Policyholder

Member/Policyholders should use the online Proof of Claim intake system to submit a claim against NMHC.

Agent or Broker

Agents and brokers should use the online Proof of Claim intake system to submit a claim against NMHC.

Federal Government Claims

The Receiver requests that any agency of the Federal Government use a proof of claim form and file their claim by the claims filing deadline to expedite the payment of claims to higher priority claimants.

Employee Claims

Employees with claims up to \$1,000 for services performed within 3 months of the date of liquidation may file a claim using the Proof of Claim intake system. An employee with a claim in excess of \$1,000 or a claim for an expense reimbursement should file a separate General Creditor claim for the amount in excess of \$1,000. Officers and Directors may not file an Employee Claim and must file a General Creditor claim using the online Proof of Claim intake system.

General Creditor

General Creditors of all types should use the online Proof of Claim intake system to submit a claim against NMHC.

IMPORTANT INFORMATION: THE INFORMATION YOU PROVIDE ON YOUR PROOF OF CLAIM MAY BE SHARED WITH A THIRD PARTY OR THE LIQUIDATION COURT FOR THE PURPOSE OF EVALUATING OR RESOLVING THE CLAIM OR OTHER INTERNAL LIQUIDATION OPERATIONS. THE RECEIVER BY CONTRACT REQUIRES ANY THIRD PARTY CONTRACTOR TO MAINTAIN CONFIDENTIALITY REGARDING THE PERTINENT INFORMATION IN ITS POSSESSION.

**This Proof of Claim (POC) Intake System contains confidential information, which may be protected health information as defined by the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule. If you were assigned a unique login number, this POC Intake System is intended for the exclusive use of the individual or entity to whom the unique login in number was assigned and may contain information that is proprietary, privileged, confidential, and/or exempt from disclosure under applicable law. You are solely responsible for granting access to this POC Intake System to those persons and business associates who are authorized to access and view the confidential information associated with your unique login number. If you are not the intended recipient (or an employee or agent responsible for reviewing this information for filing a Proof of Claim), you are hereby notified that any disclosure, dissemination, distribution or copying of this information is strictly prohibited and may be subject to legal restriction or sanction, including civil or criminal penalties.*