Broker News

For brokers and producers only

CareFirst

Date: January 12, 2023

Markets: Commercial, excluding Med Supp/Medigap and Medicare Advantage

CAA & Transparency in Coverage Updates: RxDC Reporting, Cost Sharing and Federal IDR Fees

Prescription Drug and Healthcare Spending Reports (RxDC)

On December 23, 2022, the Department of Health and Human Services (HHS), the Department of Labor (DOL), and the Department of the Treasury (collectively, the Departments) released FAQs about Affordable Care Act and Consolidated Appropriations Act, 2021 Implementation (Set 56). The document offers updated guidance for the initial submission of the RxDC reporting that provided a submission grace period through January 31, 2023. The Departments clearly stated that they would not consider a plan or issuer to be out of compliance provided that a good faith submission of the 2020 and 2021 data is made on or before that date.

Due to this flexibility, CareFirst opted to delay our submission to allow for some additional internal data validation. As stated in the previous RxDC article, CareFirst will not send a mass communication to groups confirming the submission once complete. For questions about whether a group's data is included in our submission, please refer to the information provided in the articles that went out in October 2022 and December 2022.

Consumer Transparency Cost Sharing Information Requirements

CareFirst supports meaningful transparency efforts that help consumers make informed healthcare decisions. We go beyond price to integrate quality and wellness by leveraging our digital tools to provide the personalized, value-driven experience consumers want and need. Meaningful transparency supports high-value healthcare decision-making, leading to better outcomes and lower care costs.

CAA and TIC regulations require health insurers and group health plans to provide an internet-based, self-service, cost-transparency tool to enrollees starting in January 2023. The tool must have personalized out-of-pocket cost information and the underlying negotiated rates for 500 covered healthcare items and services included in the CMS requirements. Health plans must expand those tools to cover all items and services by January 2024.

CareFirst will use our Treatment Cost Estimator (TCE) tool, powered by Sapphire Digital and available through *My Account,* to meet this requirement for most of our commercial business. Members can already use TCE to access individualized cost estimates for many common healthcare services. The TCE functionality is being enhanced to provide the ability to search for services by billing code and to display refined cost estimates based on our negotiated rates with providers (when applicable) for all 500 services required by CMS. All members with access to *My Account* will have a seamless update to their experience for the enhanced TCE functionality once it goes live.

Unfortunately, Sapphire Digital has encountered some critical defects in the testing phase for the

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enhanced functionality that have delayed the deployment. This delay is impacting all Sapphire Digital clients, not just CareFirst. Production deployment is currently expected in mid to late January.

Beginning the first week of January, CareFirst Administrators (CFA) and National Capital Area Services (NCAS) clients will have access to a similar tool powered by Perspecta.

In 2023, CareFirst will continue to explore opportunities in partnership with our shared administration accounts that need additional support to make tools available to their members.

Members can also obtain this personalized cost information by phone if they call Member Services using the number on the back of their ID card. Our customer service team will assist them and provide a copy of the information electronically or by mail upon request.

No Surprises Act: 2023 Federal Independent Dispute Resolution (IDR) Fees

On December 23, 2022, the Department of Health and Human Services (HHS), the Department of Labor (DOL), and the Department of the Treasury (collectively, the Departments) released the Amendment to the Calendar Year 2023 Fee Guidance for the Federal Independent Dispute Resolution (IDR) Process under the No Surprises Act: Change in Administrative Fee. Beginning on January 1, 2023, the non-refundable fee assessed to both the initiating and non-initiating parties of a Provider-Payer dispute will increase from $50 to $350. Additionally, the Departments published an updated list of certified IDR entity fees that can be found at https://www.cms.gov/nosurprises/help-resolve-payment-disputes/certified-idre-list.

For more information

If you have any questions, please contact your CareFirst Account Consultant.