

# No Surprises Act/Transparency in Coverage Requirements Summary

Law	Requirement	By When?					Details
		1/22	7/22	1/23	1/24	TBD	
No Surprises Act	I.D. Cards	✓					All physical and electronic I.D. cards must include: (1) applicable deductible; (2) out-of-pocket maximum limitations; and (3) a telephone number and web address where people can seek consumer assistance. HealthEZ is partnering with each plan sponsor to ensure that their members receive these updated ID cards upon renewal in 2022. Clients with renewal and effective dates of January 1, 2022 were the first to receive the new ID card requirements.
	Balance Billing Protections	✓					Beginning on January 1, 2022, plan sponsors must provide certain disclosures related to new balance billing protections included in the No surprises Act. HealthEZ has provided plan sponsors with a compliant notice they can distribute plan participants and post in their physical workspace, added specific EOB message codes and additional disclosures on NSA eligible claims, and established a process to identify and ensure the allowed amounts are calculated correctly.
	Independent Dispute Resolution	✓					The NSA created a new independent dispute resolution process to resolve NSA claim disputes on an expedited basis HealthEZ has developed a process and a notice provision on EOB's that are sent to providers with the required language on how to dispute NSA allowed amounts.
	Provider Directory	✓					Plans must create a public database containing contact information for each in-network provider and facility. HealthEZ has developed a compliant directory for all providers in its proprietary network America's PPO HealthEZ has confirmed that Aetna PPO, Cigna PPO and America's PPO, our own proprietary network, are in compliance with these requirements.
	Provider Anti-Discrimination Protections	✓					Plans shall not discriminate with respect to any provider who is acting within the scope of that provider's license or certification. HealthEZ has established a process to ensure its network partners comply with these requirements.
	Continuity of Care	✓					The NSA creates new protections for continuing care patients against surprise charges when a provider or facility ceases to be an in-network provider. HealthEZ has confirmed that Aetna PPO, Cigna PPO, and our own proprietary network, America's PPO, are in compliance with these requirements.
	Reporting on Pharmacy and Drug Costs			✓			The NSA creates new requirements to submit certain information related to prescription drugs spending to the Departments of Health and Human Services, Labor, and Treasury. While this requirement is currently delayed pending further rulemaking, HealthEZ is proactively preparing to help plan sponsors meet these requirements.
	Advanced EOBs					✓	The NSA requires health plans must create and send an Advanced Explanation of Benefits that includes a "good faith estimate" of the participant's cost sharing liability for certain advanced scheduled services. While this requirement is currently delayed pending further rulemaking, HealthEZ is proactively preparing to help plan sponsors meet these requirements.
Transparency in Coverage	Machine Readable File (In-Network Negotiated Rates)		✓				Health plans must publicly disclose a machine-readable file containing negotiated in-network provider rates for covered items and services. HealthEZ is coordinating on behalf of our self funded clients to receive and post on a publicly available website their applicable in-network negotiated rates in the Machine Readable File format. In the coming weeks, clients can expect an email from HealthEZ with more details on the obligations and services that HealthEZ can provide.
	Machine Readable File (Out-of-Network Allowed Amounts)		✓				Health plans must publicly disclose a machine-readable file containing certain out-of-network allowed amounts and billed charges for covered items and services. HealthEZ is coordinating on behalf of our self funded clients to receive and post on a publicly available website their applicable out-of-network allowed rates in the Machine Readable File format. In the coming weeks, clients can expect an email from HealthEZ with more details on the obligations and services that HealthEZ can provide.
	Machine Readable File (Prescription Drugs)					✓	Health plans must publicly disclose a machine-readable file containing negotiated rates and historical net prices for covered prescription drugs. While this requirement is currently delayed pending further rulemaking, HealthEZ is proactively preparing to help plan sponsors meet these requirements.
	Price Comparison Tool (500 Items)			✓			Beginning on January 1, 2023, health plans must make certain price comparison information for 500 specific items and services available to plan participants, beneficiaries, and enrollees on an internet-based self-service tool. HealthEZ will be releasing a new cost estimator tool later in 2022 that will allow plan participants the ability to shop for 500 common services that compare on both cost and quality data. This service will leverage claims data, machine readable files and quality data from CMS. This tool will go beyond what is required to satisfy the requirements of the new law.
	Price Comparison Tool (All Items)				✓		Beginning on January 1, 2024, health plans must expand their price comparison disclosures to all covered items and services. HealthEZ will be releasing a cost estimator tool for all services at a later date, but prior to the deadline set by TIC.
	Price Comparison Tool (Pharmacy)				✓		Beginning on January 1, 2024, health plans must expand their price comparison disclosures to include prescription drugs. HealthEZ will be releasing a cost estimator tool for pharmacy services at a later date, but prior to the deadline set by TIC.