

Public Display Requirements Overview for Blue Cross NC Employer Groups

June 2022

The following is a summary provided for convenience and is not intended as legal advice. Customers should consult with their attorney for advice specific to their needs. This document and the policies contained within are subject to change at any time without prior notice.

Under the Transparency in Coverage Rule, health insurance issuers and group health plans¹ must produce and maintain public machine-readable files (in the JSON format) with all in-network rates and historical allowed amounts for out-of-network providers (collectively referred to as the “Files”).² Each rate posted in the Files must be reported by individual billing code for each coverage type and for each provider at a specific site of service. Files must be publicly available, accessible to any person free of charge, without conditions and updated monthly.

The Transparency in Coverage Rule applies to Affordable Care Act (ACA) non-grandfathered plans and transitional plans³. These requirements do not apply to grandfathered plans⁴, excepted benefits⁵, retiree-only plans, short term limited duration plans, or Flexible Spending Accounts, Health Reimbursement Accounts and Health Savings Accounts. Customers should consult their own legal counsel on whether their plan is covered.

Files include:

- **In-Network Rate File:** Includes plan name, billing codes for all covered items and services, provider identifiers, place of service, negotiated rates associated with each provider for each item or service, as well as rates that support alternative payment models for each network provider.
- **Out-of-Network Historical Rates File:** Includes plan name, billing codes for all covered items and services, provider identifiers, place of service, unique allowed amounts and billed charges paid to out-of-network providers during the defined look-

¹ Self-insured group health plans may enter an agreement with third-party administrators to perform the functions required under the rule, but group health plans will remain legally responsible. Please see more on this below.

² Agencies required an additional file to display costs of covered prescription drugs, but they have since deferred enforcement of the Prescription Drug File until further rulemaking is completed.

³ Transitional plans are plans that became effective between March 23, 2010, when the ACA was signed, and October 2013, when the regulations went into effect. Transitional plans do not meet ACA requirements but are allowed by federal law. The plans cannot be sold to new customers.

⁴ Grandfathered plans are plans that were effective prior to the March 23, 2010, enactment of the ACA and have been renewed annually since then.

⁵ E.g., *standalone vision, dental, and hearing plans*

back period, which is the 90-day period beginning 180 days prior to publication of the file.⁶

How Blue Cross NC will support the machine-readable files requirement

- Blue Cross and Blue Shield of North Carolina (Blue Cross NC) will produce machine-readable files containing in-network rates and out-of-network historical rates. The Files will include in-network rates and out-of-network historical rates for providers in North Carolina and other states. The Files will be updated monthly. The Files will contain a very significant amount of data (estimated at 1 Terabyte per file).
- Blue Cross NC will host Files on its publicly available website, at <https://www.bluecrossnc.com/about-us/policies-and-best-practices/transparency-coverage-mrf#>. (This website will be live on July 1, 2022.)
- The Files will be publicly available and posted free of charge without having to establish a user account, password or other credentials. (Blue Cross NC does not intend to charge additional fees to self-funded groups for these Files.)
- Blue Cross NC will produce Files for ACA non-grandfathered plans and transitional plans. Data for grandfathered plans are not subject to these requirements and will not be publicly available.
- The Transparency in Coverage Rule requires group health plans to make the Files available on a publicly available internet site. Employer groups may post the relevant URL below to their own public website to satisfy the requirements of the Transparency in Coverage rule.
 - **For fully-insured groups:**
Blue Cross NC will create, host, and update the Files on behalf of fully-insured groups. Blue Cross NC is also in the process of updating its fully-insured group contracts to accommodate the nature of this responsibility. Fully-insured contracts must be reviewed and approved by the North Carolina Department of Insurance before any changes may take effect. Once the changes are approved, we will update groups accordingly.
 - **For self-funded groups:**
At this time, Blue Cross NC's expectation is that Blue Cross NC will create, update, and make the Files publicly available for self-funded groups at the URL link below. The group will make the URL link to the Files available on its publicly

⁶ Federal requirements set minimum reporting threshold for Allowed Amount File to unique payment amounts with at least 20 claims from the lookback period.

accessible website to meet the requirements for group health plans. Blue Cross NC is in the process of updating its Administrative Services Agreement to clarify the nature of the responsibilities relevant to the Transparency in Coverage requirements. Customers should discuss any concerns and the requirements with their own legal counsel.


Timeline

In 2021, the federal government deferred enforcement of in-network rates and out-of-network historical rates files until July 1, 2022. Blue Cross NC is actively working on implementation to meet the applicable federal deadlines for enforcement including making the Files publicly available and making any necessary contract changes to accommodate the nature of the responsibilities relevant to group health plans.

How fully-insured group and individual market customers will access these files

- Users will visit <https://www.bluecrossnc.com/about-us/policies-and-best-practices/transparency-coverage-mrff#> to access their table of contents (TOC) file. (This website will be publicly available on July 1, 2022.)
- The Files for fully-insured customers will be listed separately from Files for self-funded customers.
- Blue Cross NC will provide one table of contents (TOC) file that applies to all fully-insured group and individual market customers. That File will include both in-network and out-of-network historical rates, for all fully-insured health plans we offer.
 - Users will need to search for their employer group name, plan name or federal employer tax ID number within the TOC file. Then, they will be able to download the in-network files and out-of-network historical rates files that apply to their plan.
 - In-network files will be compressed, and users must decompress the files to read the content. Details about how are available here: <https://www.gnu.org/software/gzip/>.
 - To find data for individual market plans, users can search for Blue Cross NC's federal employer tax ID number, 560894904.

How self-funded group customers will access these files

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- The user will be able to view the Files associated with an employer's name. Users will visit <https://www.bluecrossnc.com/about-us/policies-and-best-practices/transparency-coverage-mrf#> to access their table of contents (TOC) file. (This website will be publicly available on July 1, 2022.) Once a user clicks on the TOC file with their employer name, they will see the File(s) associated with the health plan(s).
 - In-network files:
 - Each employer's name may be associated with one or more files, depending on the number of provider networks used by the employer group. Each in-network file contains negotiated rates for providers in one contracted network. Reasons why a user could see more than one in-network file include:
 - If the employer uses more than one Blue Cross NC network.
 - If the employer uses multiple networks for employees outside of North Carolina.
 - In-network files will be compressed, and users must decompress the files to read the content. Details about how are available here: <https://www.gnu.org/software/gzip/>.
 - Users of the Files, like health care researchers or application developers, may choose to integrate the data across all the in-network rate files.
 - Out-of-network historical rates files: There will be one out-of-network historical rates file associated with each employer group's name based on experience of their members during the lookback period. Even if the employer uses more than one network or uses multiple networks for employees outside of North Carolina, there will only be one out-of-network historical rates file per employer group.

Sample TOC File

Below is a sample image of a table of contents (TOC) file. This is for general information purposes and uses sample data only.

```

"reporting_entity_name": "Blue Cross and Blue Shield NC",
"reporting_entity_type": "third party",
"reporting_structure": [{
  "reporting_plans": [{
    "plan_name": "large ASO group name",
    "plan_id_type": "EIN",
    "plan_id": "1111111111",
    "plan_market_type": "group"
  }],
  "in_network_files": [{
    "description": "NC-in-network local file",
    "location": "https://www.bluecrossnc.com/files/2022-05-020_in_network-rates.json"
  },{
    "description": " Michigan-in-network local file ",
    "location": "https://www.mibcbs.mrf.com/2022-05-020_02E0_in_network-rates.json.gz"
  },{
    "description": " SouthCarolina-in-network local file ",
    "location": "https://www.scbcbcs.mrf.com/2022-05-020_05A0_in_network-rates.json.gz"
  }],
  "allowed_amount_file": {
    "description": "allowed amount file",
    "location": "https://www.bluecrossnc.com/files/2022-05-020_allowed-amounts.json"
  }
}
}]

```

Sample In-Network Rate File

Below is a sample image of an in-network rate file. This is for general information purposes and uses sample data only.

```

{
  "reporting_entity_name": "Blue Cross and Blue Shield NC",
  "reporting_entity_type": "third party",
  "last_updated_on": "2022-04-25",
  "version": "1.0.0",
  "provider_references": [{
    "provider_group_id": 1,
    "provider_groups": [{
      "npi": [1111111111, 2222222222, 3333333333, 4444444444, 5555555555],
      "tin": {
        "type": "ein",
        "value": "11-1111111"
      }
    }
  ],{
    "npi": [1111111111, 2222222222, 3333333333, 4444444444, 5555555555],
    "tin": {
      "type": "ein",
      "value": "22-2222222"
    }
  }
  ],{
    "provider_group_id": 2,
    "provider_groups": [{
      "npi": [1111111111, 2222222222, 3333333333, 4444444444, 5555555555],
      "tin": {
        "type": "ein",
        "value": "11-1111111"
      }
    }
  ]
  },{
    "in_network": [{
      "negotiation_arrangement": "ffs",
      "name": "Knee Replacement",
      "billing_code_type": "CPT",
      "billing_code_type_version": "2020",
      "billing_code": "27447",
      "description": "Arthroplasty, knee condyle and plateau, medial and lateral compartments",
      "negotiated_rates": [{

```