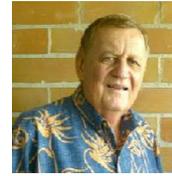


# Heard on the Net

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**Note: All headlines contain embedded URL links to the full article - just Click on each headline**

**[Recent Regs That Affect Most Private Health Insurance Coverage](#)** - "The plan transparency requirements will: [1] Up-end almost every type of contract out there in the health insurance industry. [2] Release a treasure trove of data into the marketplace, and [3] Take an enormous amount of effort and money to implement.... If finalized, [the proposed HIPAA privacy regulation] is going to have a massive impact on individual people and all covered entities, which include providers, health insurers, and self-funded plans. It will also affect business associates of covered entities, like health insurance agents and brokers."

**[Final Rule on Grandfathered Health Plans Will Allow Higher Employee Cost-Sharing](#)** - "Although the changes are relatively minor, the **new rule** will enable grandfathered group plans to impose higher cost-sharing requirements without losing grandfathered status."

**[COVID Relief Bill Bans Some Surprise Medical Bills, But Not All](#)** - "Starting in 2022, when insurers and medical providers cannot agree on a payment rate, the legislation requires both parties to use an outside arbiter to set a fair amount ... That amount would be based on what other doctors and hospitals typically get paid for similar services. Patients could be charged what they might normally pay for in-network care, but not more."

**[Congress Approves Repeal of Health Insurers' Antitrust Exemption](#)** - "H.R. 1418 would change part of the McCarran-Ferguson Act of 1945, a law that establishes the framework for how the federal government shares oversight of insurance with state insurance regulators. One section exempts insurers from federal antitrust oversight under the Sherman Act."

**[January 1, 2021 Deadline for Hospitals to Make Transparency Clear](#)** - "Effective January 1, 2021, hospitals operating in the United States are required to have detailed pricing information prominently displayed on their websites. They must post their standard charges online. Standard charges are 'the regular rate[s] established by the hospital for an item or service provided to a specific group of paying patients.' ... These include the hospital's gross charges, payer-specific negotiated charges, de-identified minimum and maximum negotiated charges, and discounted cash prices."

**[Employer Health Plans Must Pay the Cost of a COVID-19 Vaccine](#)** - "The CARES Act requires group health plans to provide first-dollar coverage of COVID-19 vaccines within 15 business days after the vaccine receives an 'A' or 'B' rating from the United States Preventive Services Task Force or receives a recommendation from the Advisory Committee on Immunization Practices of the CDC.... Group health plans and insurers must pay the full cost of COVID-19 vaccines regardless of whether administered in- or out-of-network."

**[2021 Consolidated Appropriations Act Includes Major FSA Relief](#)** - "[1] Full FSA carryovers from 2020-2021 and 2021-2022 plan years.... [2] Extended grace periods for 2020 and 2021 plan years.... [3] Health FSA spend down.... [4] Dependent care FSA relief for children who reached age 13... [5] FSA election change relief.... [6] Plan amendments may be retroactive."

**[DOL, HHS Finalize Rule to Give More Flexibility to ACA Grandfathered Plans](#)** - "The rule clarifies that a grandfathered group health plan that is a high-deductible health plan can increase its 'fixed amount cost-sharing requirements, such as deductibles, to the extent necessary to maintain its status as a [high-deductible health plan] without losing grandfather status' ... In addition, the **final rule** gives plans an alternative method for measuring any permitted increase in fixed-amount cost-sharing. A plan could lose its grandfathered status if its cost-sharing reaches a certain amount."

**The Dreaded IRS '226-J' Letter -- Why an Employer Might Get One and How to Respond -** "While a 226-J letter contains a proposed penalty amount, it is not a bill. It's merely an estimate of what the IRS thinks a business might owe. If a company agrees with their assessment, they can pay it right away, but the proposed penalty amount is not final. The information and estimates offered in 226-J letters are also not guaranteed to be accurate. Proposed penalty amounts are often wrong, and there is a straightforward process for employers to respond to the IRS."

**Upcoming Key Compliance Deadlines and Reminders for First Quarter 2021 -** "Items are separated into three categories: federal deadlines, state and local deadlines, and pandemic-related reminders.... These deadlines may or may not be applicable to your group depending on the employer and plan characteristics."

**ACA Reporting Penalties -** "The general ACA reporting penalties are \$280 for the late/incorrect Forms 1095-C furnished to employees, and \$280 for the late/incorrect Forms 1094-C and 1095-C filed with the IRS. That comes to a total potential general penalty of \$560 per employee, but exceptions may apply."

**Year-End COVID-19 Considerations for Health and Welfare Plans -** "Employers should consider end-of-the-year plan amendments to document mid-year changes resulting from the pandemic and related government action. Employers should evaluate whether they have appropriately notified employees of changes in benefits, particularly those that have resulted in changes to any Summary of Benefits and Coverage. Employers should evaluate plan administration in the face of extended plan deadlines."