HEALTH ISSUES

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Biden Administration Issues Interim Final Rule on Surprise Medical Billing Law

The U.S. Departments of Health and Human Services (HHS), Labor (DOL), the Treasury ("the Departments"), and the Office of Personnel Management (OPM) yesterday issued an <u>interim final rule</u> with a comment period to further implement the *No Surprises Act*, a law addressing out-of-network billing that was enacted through the Consolidated Appropriations Act ("the Act"), 2021 (<u>H.R. 133</u>, Division BB - Private Health Insurance and Public Health Provisions).

The rule provides a process to settle out-of-network rates between providers and payers and outlines requirements for health care cost estimates for uninsured or self-pay individuals. The rule provides for a payment dispute resolution process for uninsured or self-pay individuals. The rule also adds protections for patients in an external review process who have employer provided or individual health plan coverage to allow for them to dispute denied payment for certain claims.

The interim final rule is the third regulation issued by the Departments and OPM in implementing the *No Surprises Act*. Following the Administration's *Executive Order on Promoting Competition in the American Economy*, the Departments and OPM have issued rulemaking this year on <u>air ambulance plan data</u> and <u>consumer protections related to surprise medical billing</u>. The rules take effect on January 1, 2022. Written comments on the rule issued on September 30, 2021, must be received by 60 days after the rule is published in the Federal Register to be considered.

If you have any questions regarding this *Academy Alert*, please contact Matthew Williams, senior health policy analyst (williams@actuary.org; 202-868-7001).

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