



May 5, 2022

Machine-readable files required on public websites by July 1, 2022, for Transparency in Coverage.

As a reminder, the Transparency in Coverage Rule requires group health plans to (1) make public disclosures in machine-readable files (“public disclosures”) and (2) make disclosures specific to participants (“individual disclosures”).

Public Disclosures – The enforcement date for posting machine-readable files (MRF) varies by plan year with the initial July 1, 2022 date applicable to plan years beginning on or after January 1, 2022. Plans must publicly post two files, updated monthly:

- In-network negotiated payment rates
- Historical out-of-network allowed amounts and billed charges

The effective date for a third file, the pharmacy MRF, is pending.

Auxiant has been working extensively with Plans’ partners receiving and testing MRFs as they become available. Our newly created website, transparency.auxiant.com, will be live on July 1, 2022 and host all available MRFs. Some network partners have expressed interest in posting the files on their own website, in which case when we are given those links, they will be posted to the Auxiant transparency website. There are still network and referenced based pricing partners who have not documented their plans for 7/1/22 compliance. We are actively seeking this information. As the enforcement date nears, we will be reaching out to our affected clients to determine the correct path forward.

Some plan sponsors or members may wonder how the MRFs impact them. A MRF is a digital representation of data or information in a file that can be imported into or read by a computer system for further processing. They are large and complex. It’s important to remember 7/1/22 represents only the first in a series of transparency deadlines which are ultimately intended to empower consumers but those changes will largely begin in 2023.

Individual Disclosures – Plans will be required to make available to participants personalized out-of-pocket cost information and the underlying negotiated rates for all covered health care items and services provided through an internet-based self-service tool and in paper form upon request. This requirement is

effective for plan years beginning on or after January 1, 2023 with respect to a list provided by HHS of 500 items and services. The out of pocket estimates for all other items and services must be made available for plan years beginning on or after January 1, 2024.

Please contact your account manager with any questions regarding the MRF requirement. Information regarding our implementation plans for the individual disclosure requirement will be released pending additional guidance.