



Surprise: The No Surprises Act is Coming!  
Price Transparency and the Impact on  
Healthcare

# Agenda

## **Welcome & Introductions**

Jennifer Covich Bordenick, Chief Executive Officer, eHealth Initiative & Foundation

## **Overview and Foundation of the No Surprises Act and Transparency**

Josh Roll, Government Relations Manager, American Heart Association

Matthew Albright, Chief Legislative Affairs Officer, Zelis

## **How Health IT Leaders are Preparing, Impact and Pressures of the Regulations**

Eric Holmberg, Director, Digital Delivery, Blue Cross Blue Shield North Dakota

Ruby Raley, Vice President of Healthcare, Axway

## **Panel discussion and Audience Q&A**

## **Closing remarks**





# Moderator and Speakers



**Wanneh Dixon**  
Director, Strategy and  
Programs  
eHealth Initiative



**Josh Roll**  
Government Relations Manager  
American Heart Association



**Matthew Albright**  
Chief Legislative Affairs Officer  
Zelis



**Ruby Raley**  
Vice President of Healthcare  
Axway



**Eric Holmberg**  
Director, Digital Delivery  
Blue Cross Blue Shield North Dakota





# Our Mission

eHealth Initiative Foundation (eHI) is a catalyst for healthcare transformation, convening diverse leaders from across the industry to unlock opportunities for collaborative innovation. eHI, along with its coalition of members, focuses on education, thought leadership, and advocacy.

We believe that innovation and diverse perspectives power the transformation of healthcare. Our members are working toward consumer-centered health that is lower cost, higher quality, and more accessible for all populations. For more information, visit [ehidc.org](http://ehidc.org).



# eHealth Initiative Members



Social  
Determinants of  
Health (SDOH)

Consumer  
Privacy of  
Health Data

# Our Focus Areas

Virtual Care

COVID-19 Best  
Practices &  
Innovation

Our work is focused on these areas: Privacy, Analytics/SDOH, Virtual Care & COVID-19. Working with our members in these key areas, we can positively impact healthcare by improving quality and reducing costs. No single stakeholder can make an impact alone, it is critical that all sectors of healthcare band together.



# Recent Reports

1. [REPORT:](#) Virtual Care Delivery During COVID-19 and Beyond
2. [REPORT:](#) Guiding Principles for Ethical Use of SDOH Data During COVID-19
3. [REPORT:](#) Assessing eHI's Guiding Principles for Ethical Use of SDOH Data During COVID-19
4. [REPORT:](#) Supporting American Indian & Alaskan Native Communities Combating COVID-19
5. [REPORT:](#) Insights from Pharma: Addressing Social Determinants and Advancing Health Equity
6. [REPORT:](#) Consumer Privacy Framework for Health Data





# Digital Health Equity Summit

Addressing Inequities & Building a  
Modern Healthcare System

November 3<sup>rd</sup>-4<sup>th</sup>, 2021





Thank You to the Sponsor



# **The No Surprises Act (NSA) and Transparency in Coverage Rule (TiC) impose new requirements on payers and providers**

**Effective January 1, 2022**

## **Transparency Provisions for All claims**

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**TiC: 3 publicly available machine-readable files (MRF)**  
– INN, OON, Rx

**NSA: Provider directories**

**NSA: Insurance cards**

**NSA: Advanced EOB for all scheduled services**

**NSA and TiC: Price transparency tool**

## **Surprise Balance Billing Provisions for Out-of-Network Claims**

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**NSA: Prohibition on Balance Billing**

**NSA: Member cost-sharing**

**NSA: Payer-Provider Reimbursement, Settlement, and Independent Dispute Resolution process**



# No Surprises Act and Transparency: Price/Cost Sharing Tool

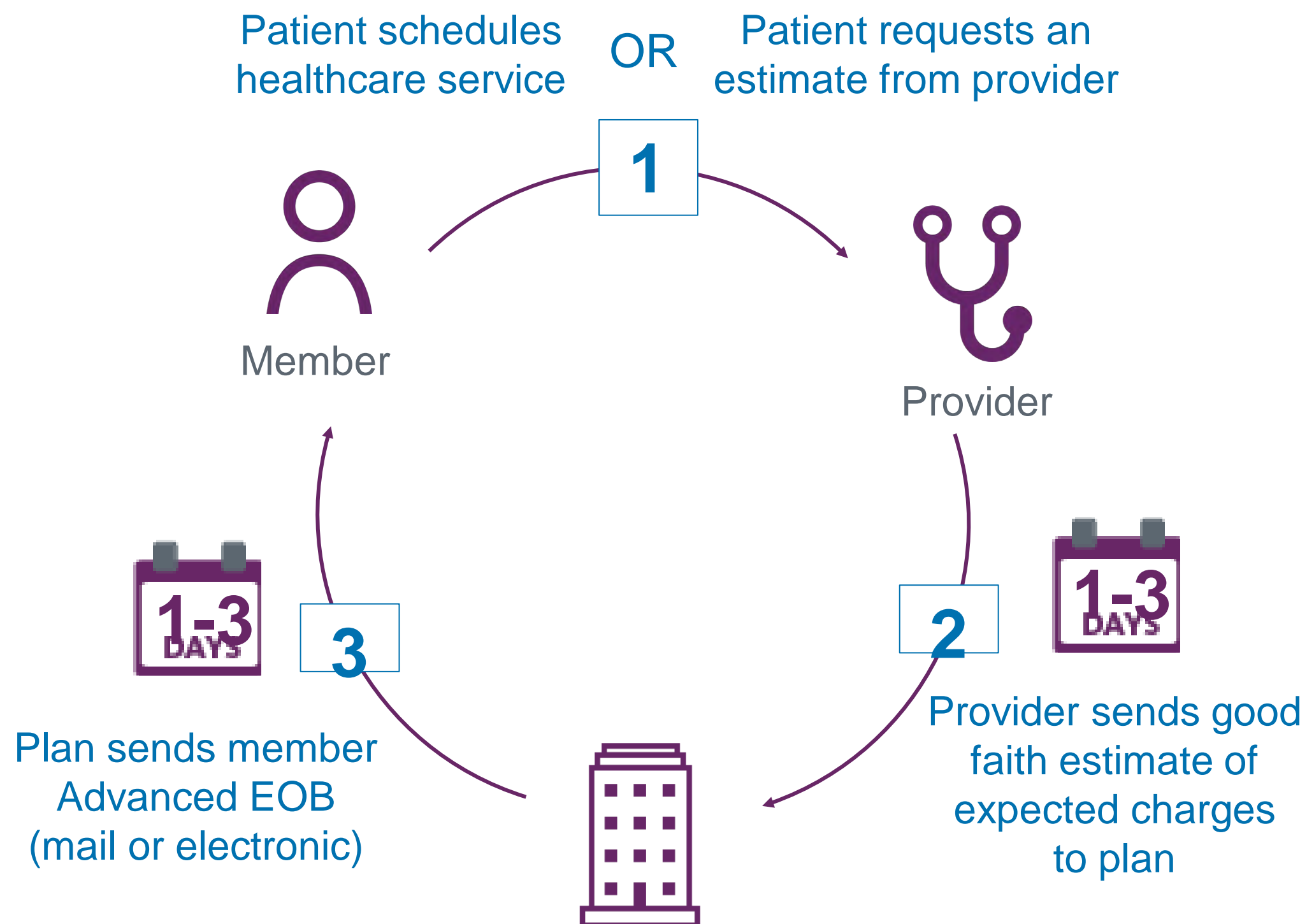
**No Surprises Act**  
Effective: Plan years beginning  
on or after January 2022

**Transparency in Coverage \***  
Effective: Plan years beginning on or  
after January 2023

Method	Online tool	✓	✓
	Print / mail		✓
	At patient's request		✓
Member financials	Estimated cost sharing/financial responsibility	✓	✓
	Accumulated amount for deductible, OOP limit		✓
Compare / Search by:	Specific items and services	✓	✓
	Provider name if in network	✓	✓
	Billing codes		✓
	Plan Year	✓	
	Geographic Region	✓	✓
	Dosage		✓
	General amount of cost sharing		✓
Pricing	In-network contracted rate or underlying fee schedule as \$ amount		✓
	Out of network allowed amount, as \$ amount or %		✓
Other	Various notices		✓



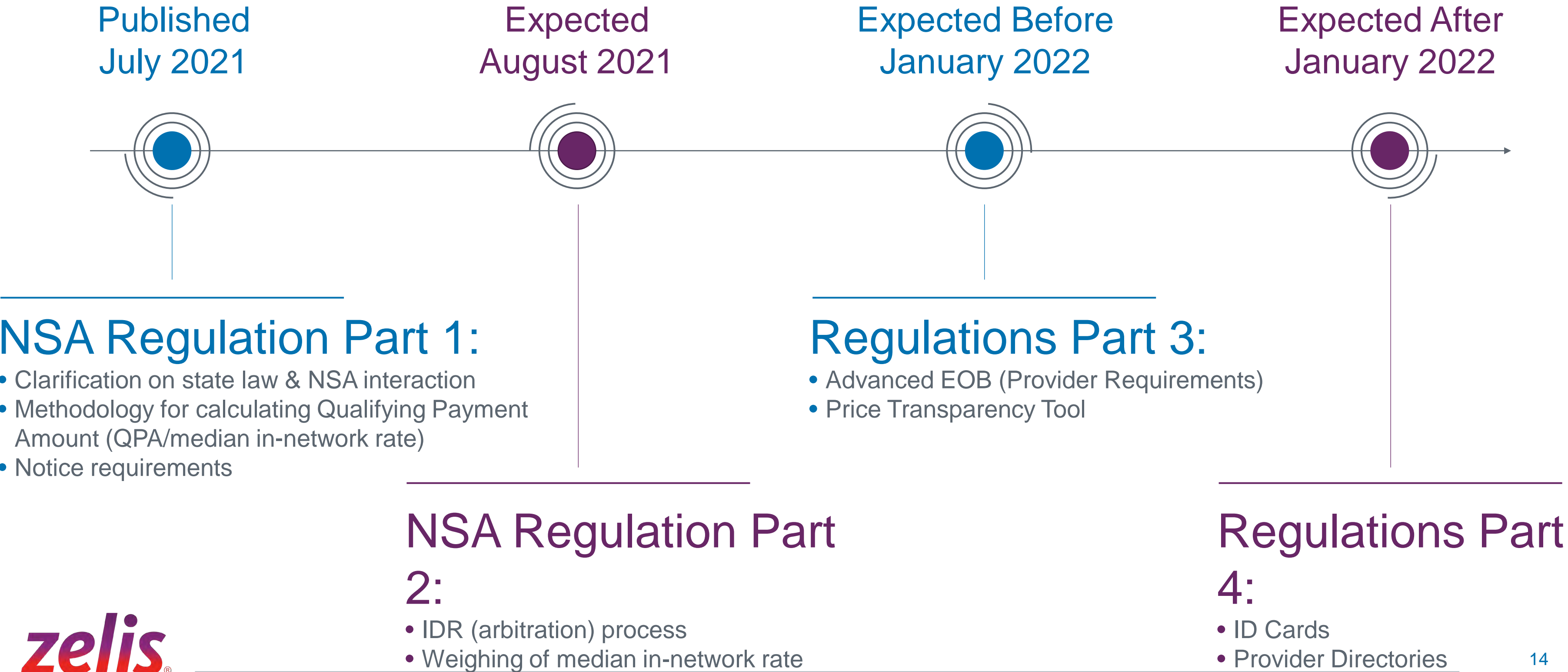
## No Surprises Act: Advanced Explanation of Benefits



- Applies to all services provided by providers and facilities, not just out-of-network
- Applies:
  - when an appointment is made for services (not just “if requested”)
  - when requested w/o an appointment
- Delivered via print or electronic based on member choice



# No Surprises Act: Interim Final Regulation and Unified Agenda: Regulation Scope and Schedule per NSA Reg Part 1





eHealthInitiative

# Surprise! It's Time to Transform Pricing Processes

July 2021

Erik Holmberg, Blue Cross Blue Shield of North Dakota

Ruby Raley, Axway



The Plan



## Information and Technology Leaders Should Consider

- Create a roadmap that connects all mandates capabilities to develop your strategy
- Requires a more integrated collaboration between business and technology
- Connect the business strategy to technology solutions in order to build reusable and portable technology
- Will you meet just the mandate or are you building this as a strategic differentiator?
- Build or Buy. Can your solution meet the requirements or will you need a partner to piece it together?
- Capabilities for everyone you serve or just those who fall into the mandate groups?
- Data, data, data... what should we do with all of this?
- Mindfully plan future support of capabilities (ACA, ICD-10)



## 4 Common Pitfalls

01



### Assumptions

- Partners solution may change – midstream.
- Focus on acquiring technology. Don't neglect People & Process.
- Authentication is standard. It can be challenging across platforms and vendor solutions.

02



### Data Integration

- Sourcing FHIR integration from vendors. Mapping existing data is rarely easy.
- Data sources vary. Claims, PBM, Pricing structures vary; not native HL7
- Think through Façade vs Repository. Validate ability to orchestrate on the fly.

03



### Project vs Journey

- Just another regulatory compliance project. Dependencies abound.
- Budget overruns. Transformation from portal to payment is expensive.
- Testing at end of project. Prioritize developer experience, test everything.

04



### Weak Architecture

- Minimizing reuse. Provider Directory is key to Interoperability Rule and NSA.
- Versioning. Uneven adoption by ecosystem. Ex. FHIR R4
- Resilience. Peak processing load is unknown. Monitoring is key to maintaining service levels