



NAVIGATING THE NO SURPRISES ACT

YOUR GUIDE TO REQUIREMENT, CHALLENGES AND COMPLIANCE

CT AAHAM

CohnReznick LLP



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TODAY'S SPEAKER

Caroline Znaniec is a Healthcare Industry and Revenue Cycle Leader with CohnReznick LLP. Caroline has 25+ years of combined industry and consulting experience within the healthcare revenue cycle. She is a recognized industry speaker and author in such areas as coding and documentation, charge description master (CDM), charge capture, pricing, governance, technology, revenue integrity, compliance and revenue cycle transformation.

Caroline is a national member of the American Association of Healthcare Administrative Management (AAHAM) and member of the Maryland Chapter. She also an Advisory Board Member and Mid-Atlantic Chapter Leader for the National Association of Healthcare Revenue Integrity (NAHRI) and co-leader of the Maryland Healthcare Financial Management Association (HFMA) Electronic Health Record (EHR) Forum.

Also, follow Caroline on LinkedIn and Twitter for regular updates on price transparency initiatives, revenue cycle tips and advice.



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TODAY'S WEBINAR OBJECTIVES

The webinar presentation will review the objectives of the **No Surprises Act**, requirements and challenges to meeting compliance. From the presentation, attendees will obtain an understanding of how the Act affects the patient, provider and payer communities, and how each works interdependently to meet the Act's objectives.





BACKGROUND



The No Surprises Act (NSA) will limit consumer out-of-pocket costs at in-network levels and prohibit “surprise billing” or “balance billing”



Affected stakeholders include providers, facilities, air ambulances, insurers, plans and payers.



The Act and the regulations take effect for providers and facilities on January 1, 2022, and for group health plans, health insurance issuers and Federal Employee Health Benefits (FEHB) Program carriers, for plan, policy or contract years beginning on or after January 1, 2022.

Enforcement of certain requirements are delayed.



Reduce out of
pocket costs

Remove financial
barriers to care



Improve health
outcomes

EXPECTATIONS
FROM NSA



NSA SCENARIOS AND APPLICABILITY



Patient accesses emergency services outside their network while away from home

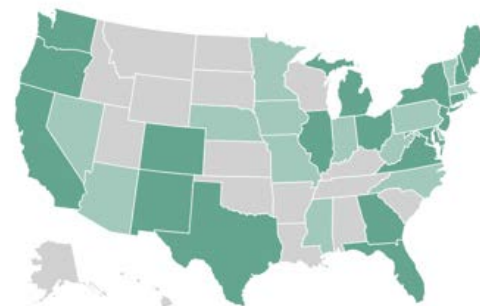


Patient receives care from an out-of-network physician providing services at an in-network hospital.



Health plan denies coverage for emergency services, stating that the services were unnecessary.

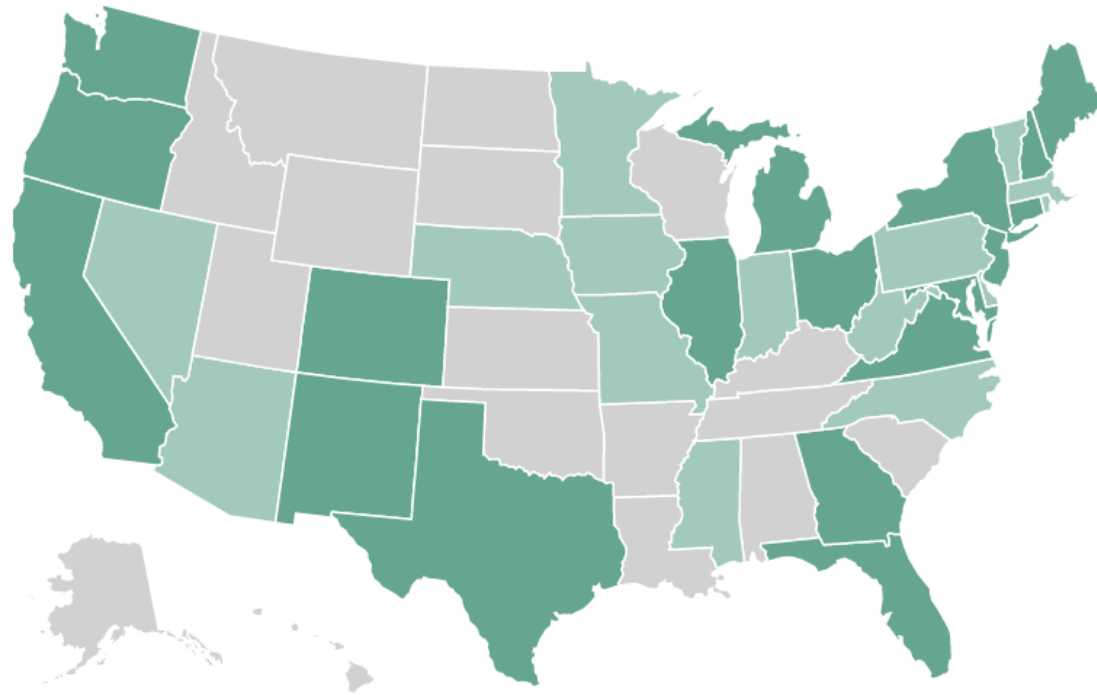
Service Type	Facility	Physician/ Practitioner	NSA Application
Emergency	Non-Participating	Non-Participating	Applicable
Non-Emergency	Participating	Non-Participating	Applicable
Non-Emergency	Non-Participating	Non-Participating	Not Applicable



If there is no applicable state law, the NSA outlines a reimbursement process that providers and health plans must follow



STATE PROTECTIONS



- No Balance Billing Protections
- Partial Balance Billing Protections
- Comprehensive Balance Billing Protections

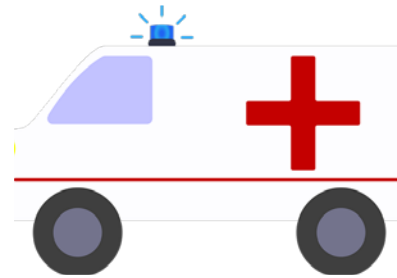
33 states have enacted laws to protect enrollees from balance billing, the scope of these protections varies

Commonwealth Fund
State Balance-Billing Protections

<https://www.commonwealthfund.org>



KEY NSA REQUIREMENTS



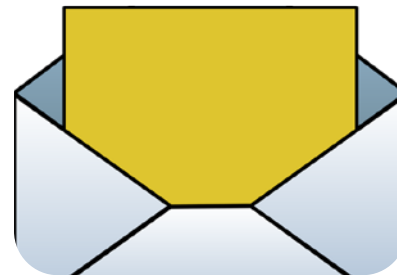
Covered Services



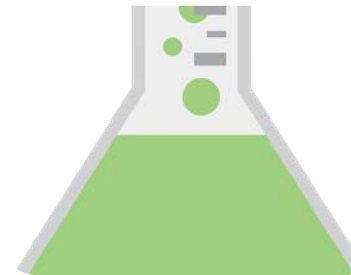
**Patient
Estimates**



**Minimum
Payment**



**Notice and
Consent**



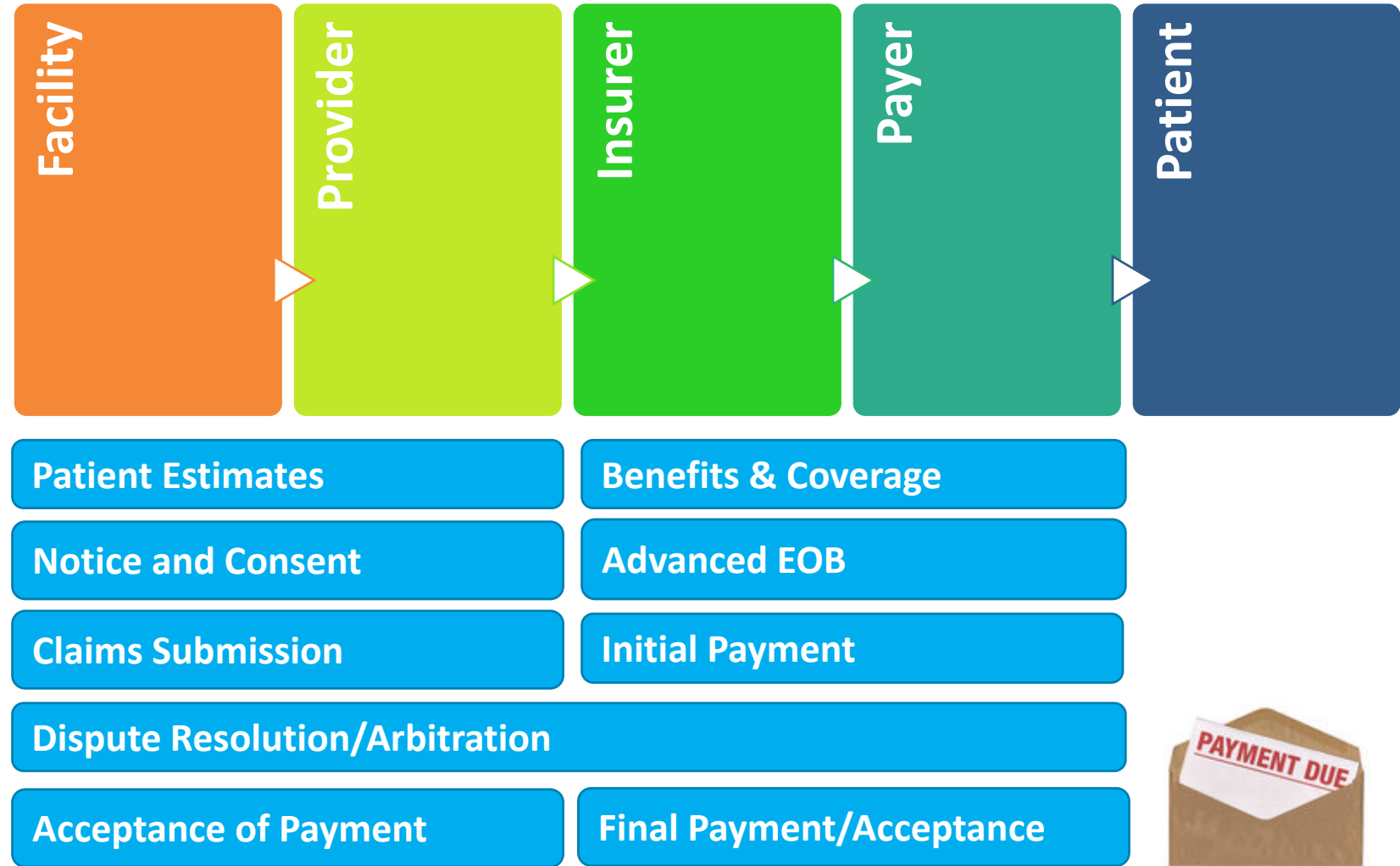
**Treatment of
Ancillary Services**



**Dispute
Resolution**



KEY NSA REQUIREMENTS STAKEHOLDERS AND ROLES





TIMELINES AND ENFORCEMENT – KEY REQUIREMENTS

Requirement	Timeline Requirement	Stakeholder	Enforcement
Provider Directory		Insurer	Delayed
Emergency Coverage & Benefits		Insurer	January 1, 2022
Good Faith Estimate – Insured	<ul style="list-style-type: none">72 hours before scheduled service3 hours before service delivery for unanticipated services	Facility/Provider	Delayed
Good Faith Estimate - Uninsured	<ul style="list-style-type: none">72 hours before scheduled service3 hours before service delivery for unanticipated services	Facility/Provider	January 1, 2022
Notice and Consent	<ul style="list-style-type: none">72 hours before scheduled serviceSame day if within 72 hours	Facility/Provider	January 1, 2022
Advanced EOB	<ul style="list-style-type: none">10 days from receipt of notice from facility/provider with good faith estimateIf within 10 days, 1 business day to provide	Payer	Delayed
Initial Payment/Denial	<ul style="list-style-type: none">30 days from claim submission	Payer	January 1, 2022
Dispute Resolution	<ul style="list-style-type: none">30 day negotiation period after initial payment30 days IDR if not settled in negotiation	Facility/Provider & Payer	January 1, 2022
Final Payment	<ul style="list-style-type: none">30 days after resolution decision	Payer	January 1, 2022



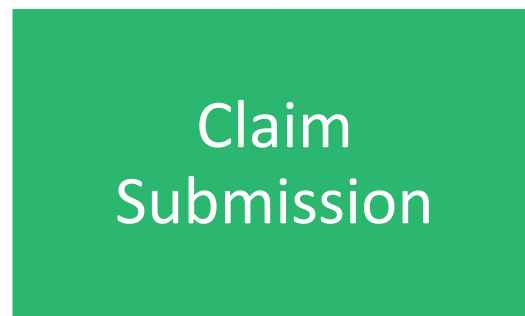
NSA COMPLIANCE CHECKLIST ITEMS FOR 1/1/2022

- Patient status
- Network status
- Benefits & coverage
- Good faith estimate



- Public disclosure
- Required forms
- Timing
- Retention

- Timing
- Completeness



- Initial payment
- Review & Response
- Dispute Resolution
- Payment



UNDERSTANDING PAYMENT AND DISCLOSURE OPTIONS

Type of Service	Facility	Provider	Ancillary Services	NSA Facility Reimbursement	NSA Provider Reimbursement	NSA Ancillary Reimbursement	NSA Required Notice and Consent for Balance Billing OON
Emergency	IN	IN	IN	Contracted Rate(s)	Contracted Rate(s)	Contracted Rate(s)	Not Applicable
Emergency	IN	IN	OON	Contracted Rate(s)	Contracted Rate(s)	QPA	Not Applicable
Emergency	IN	OON	IN	Contracted Rate(s)	QPA	Contracted Rate(s)	Not Applicable
Emergency	IN	OON	OON	Contracted Rate(s)	QPA	QPA	Not Applicable
Emergency	OON	IN	IN	QPA	Contracted Rate(s)	Contracted Rate(s)	Not Applicable
Emergency	OON	IN	OON	QPA	Contracted Rate(s)	QPA	Not Applicable
Emergency	OON	OON	IN	QPA	QPA	Contracted Rate(s)	Not Applicable
Emergency	OON	OON	OON	QPA	QPA	QPA	Not Applicable
Non-Emergency	IN	IN	IN	Contracted Rate(s)	Contracted Rate(s)	Contracted Rate(s)	Not Applicable
Non-Emergency	IN	IN	OON	Contracted Rate(s)	Contracted Rate(s)	QPA	Not Applicable
Non-Emergency	IN	OON	IN	Contracted Rate(s)	QPA/NC	Contracted Rate(s)	Applicable for OON provider services (not ancillary)
Non-Emergency	IN	OON	OON	Contracted Rate(s)	QPA/NC	QPA	Applicable for OON provider services (not ancillary)

Key: IN – in-network
 OON – out-of-network
 QPA – qualifying payment amount
 QPA/NC – qualifying payment amount, or notice and consent – allowing balance billing



SUCCESS UNDER NSA





QUESTIONS



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