



Transparency in Coverage

Beginning July 1st, 2022, the Transparency in Coverage Rules (*TIC Rules*) requires group health plans and health insurance issuers to make available to the public, negotiated rates for all covered items with in-network providers, and historical payments to and billed charges from, out-of-network providers, through machine-readable files (*MRFs*) posted on their internet website, updated monthly.

To ensure data integrity, all files must conform to a non-proprietary, open standard format and be encrypted for security. MediExcel Health Plan will publish its machine-readable files in the *JSON* format to its website on or around the first day of every month.

Language for Employer Groups

The links below lead to the machine-readable files that are made available in response to the federal Transparency in Coverage Rules, (*TIC Rules*) effective July 1, 2022, and include negotiated service rates and out-of-network allowed amounts between health plans and healthcare providers. The machine-readable files (*MRFs*) are formatted to allow easy access and data analysis by researchers, regulators, and application developers.

Under *TIC Rules*, health plans (*which include clients who sponsor employee benefit plans*) and health insurance issuers must publish two separate *MRFs*:

- **In-Network:** negotiated rates for all covered items and services between the plan or issuer and in-network providers.

<https://www.dropbox.com/s/y0cyzud1dddzbiz/In-Network%20MRF.json?dl=0>

- **Out-of-Network:** allowed amounts paid to, and billed charges from, out-of-network providers for all covered services within a 90-day period.

<https://www.dropbox.com/s/9j2stadebm2lpva/Out-of-Network%20MRF.json?dl=0>

The summaries provided above are for convenience and are not intended as legal advice. Clients should consult with their attorney for advice specific to their needs. Prior to 7/1/22, the MRFs may not be accessible.