



TaxNewsFlash

United States



No. 2020-679
November 3, 2020

Final rule on public disclosure of health plan and health insurance coverage information

The U.S. Treasury Department and IRS (jointly with the Labor Department and the Department of Health and Human Services) this afternoon released for publication in the Federal Register a final rule (T.D. 9929) to require group health plans and health insurance issuers in the individual and group markets to disclose, upon request, cost-sharing information to a participant, beneficiary, enrollee or that person's authorized representative.

The final rule also requires health plans and issuers to disclose in-network provider rates, historical out-of-network allowed amounts and the associated billed charges, and negotiated rates for prescription drugs.

Under the final rule, plans and issuers are required to make the information available on an internet website and, if requested, in paper form. The purpose is to allow a participant, beneficiary, enrollee or authorized representative to obtain an estimate and understanding of the individual's out-of-pocket expenses and to allow the person to "effectively shop" for items and services.

The [final rule](#) [PDF 1 MB] (153 pages as published in the Federal Register on November 12, 2020) is intended to give access to health coverage information that can be used to understand health care pricing and "potentially dampen the rise in health care spending."

The purpose of this report is to provide text of the 470-page final rule.

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