

Weekly Digest

• August 17, 2021 •

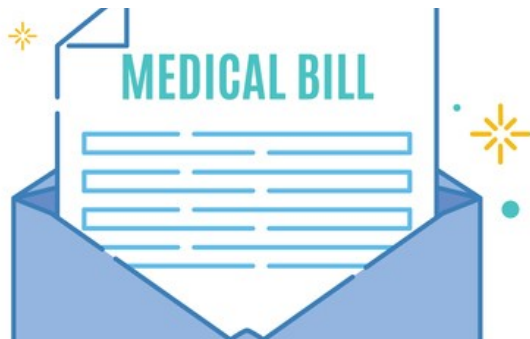


EMPLOYEE
BENEFITS

No More Balance Billing for Some Out-of-Network Services

“Effective beginning January 1, 2022, the CAA prohibits plans and providers from billing patients more than in-network cost-sharing amounts in certain circumstances. The prohibition applies to both emergency care and certain non-emergency situations where patients do not have the ability to choose an in-network provider.” [Full Article](#)

Holland & Hart LLP



Health Plan Premium Surcharges for Those Not Vaccinated for COVID-19?

“Implementing a COVID-19 premium surcharge wellness program to provide an incentive for more plan participants to get vaccinated comes with some compliance challenges. Those challenges depend largely on the design of the program and the administration of it. And, unfortunately, the guidance surrounding wellness programs, particularly from the Equal Employment Opportunity Commission (EEOC), remains less than clear.” [Full Article](#)

Jackson Lewis P.C.

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By, Thomson Reuters / EBIA

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By, Epstein Becker Green, via Compliance Today

United Behavioral Health, United Healthcare Insurance Co. Plans to Pay 15.6M, Take Corrective Actions After Federal, State Investigations

"An investigation by the department's Employee Benefits Security Administration found that going back to at least 2013, United reduced reimbursement rates for out-of-network mental health services, thereby overcharging participants for those services, and flagged participants undergoing mental health treatments for a utilization review, resulting in many denials of payment for those services." [Full Article](#)

Employee Benefits Security Administration [EBSA], U.S. Departments of Labor [DOL]

Discounted Premiums on Individual Disability Policies Do Not Create ERISA Plan

"While it was clear that the employer paid no portion of the policy premiums, the insurer argued that the premium discount was effectively a company contribution. But the court rejected this contention, explaining that discounted premiums are not considered employer contributions unless the employer negotiated or was otherwise involved with the discount." [Full Article](#)

Thomson Reuters / EBIA



ARPA COBRA Subsidies and the Remaining Action Item for Plan Sponsors

"Assistance eligible individuals (or AEIs) receiving subsidized coverage must be sent notice of the end of their subsidy no less than 15 days and no more than 45 days in advance. While this requirement has applied all along, these notices must be sent to the vast majority of the AEIs between August 16 and September 15 to reflect the end of the COBRA subsidy period generally on September 30, 2021." [Full Article](#)

Jackson Lewis P.C.

Best Practices for Mental Health Parity: Considerations for Implementation

"While these requirements specific to NQTLs are unique to MHPAEA, the associated documentation and comparative analyses activities should feel familiar because they mirror some of the traditional documentation and auditing and monitoring functions of a corporate compliance program. Ultimately, plans and insurers need to demonstrate, upon request, that they are continually maintaining compliance with regard to parity. In effect, maintaining the capacity to rebut a presumption of noncompliance at any time." [Full Article](#)

Epstein Becker Green, via Compliance Today