

## BROKER NEWS

**July 19, 2022**

Under the Consolidated Appropriations Act (CAA), health insurers offering group or individual health coverage are required to report data annually regarding prescription drugs and health care spending to the Departments of Health and Human Services (HHS), Labor (DOL) and Treasury (USDT). This information must be submitted by the delayed enforcement date of December 27, 2022, through a web portal that is being set up by the Centers for Medicare & Medicaid Services (CMS). The December 27, 2022, report must include active and cancelled customer data from January 1, 2020, through December 31, 2021 (including if the client cancelled anytime during that period).

**Beginning in 2023, these reports will be required by June 1 each year. Reports submitted for June 1, 2023, require the 2022 data.**

To support the CAA Pharmacy Benefit and Costs reporting, Health Plan of Nevada (HPN) and Sierra Health and Life (SHL) will submit the report and required data for all fully insured. HPN/SHL will not accept requests for fully insured customers to submit the data themselves.

### **Customers using HPN/SHL to submit some or all data**

To understand how HPN/SHL will support the submission of data, refer to the [UnitedHealthcare Approach to CAA Pharmacy Benefits and Costs Reporting Guide](#). When submitting data, HPN/SHL will provide the data as outlined in the [CMS documented instructions](#).

The reporting will be aggregated at the issuer/TPA/state/market level, rather than separately for each plan. The guidance provides uniform standards and definitions, including standards for identifying prescription drugs regardless of the dosage strength, package size or mode of delivery so HHS, DOL and USDT can conduct meaningful data analysis and identify prescription drug trends.

- Data and narrative for fully insured groups will be organized separately by state for individual, small group and large group.
- Data and narrative for fully insured groups must be reported for the state where the contract is issued.
- For multiple employer welfare arrangements (MEWAs), data and applicable narrative must be reported for the state where the employer has its principal place of business or where the association is incorporated.

HPN/SHL is prepared to provide support and respond to your questions. Please refer to the [UHC Approach to CAA Pharmacy Benefits and Costs Reporting Guide](#) and contact your HPN/SHL account management team.

If you have any questions, please contact your HPN/SHL representative.



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