

EMPOWERING PLANS

October 22, 2014; Braintree, MA

Friends & Colleagues:

These last few weeks have brought with them a whirlwind of controversy and concern. The Phia Group, LLC is pleased to announce that it will be addressing three of the hottest topics during its monthly webinar. If you have not yet signed up for our FREE webinar, to be held on Thursday, October 30th, 2014, from 1:00 - 2:00 PM EST, then you will most certainly be missing out! **Follow this link to register** and hear our assessment of the following major topics:

The Regulatory FAQ Addressing Reference Based Pricing ("RBP")

Recently, a regulatory FAQ addressing RBP programs was released, regarding "reasonable" access to providers willing to accept the RBP rate, and RBP's impact on patient out of pockets; (limited by the Patient Protection and Affordable Care Act ["PPACA"]). Attendees of our October webinar will hear from our legal team, as we discuss the FAQ, what it means for RBP programs, and the steps we believe you can take to protect yourself and your program.

Recent Concerns with the HHS Minimum Value Calculator

As employers are preparing their plans for the upcoming year, some are looking at other plan options that will meet most of the requirements of the Affordable Care Act (ACA) but will perhaps not meet the minimum value requirement of the Employer Shared Responsibility Mandate (Employer Mandate). However, as some employers have discovered, there appears to be a flaw in the Federal Minimum Value (MV) Calculator, a tool used to determine if a plan meets the minimum value requirement of the Employer Mandate. The MV Calculator is indicating, in some cases, that plans that do not offer basic benefits such as hospitalization coverage still meet the minimum value requirement of the ACA but this calculation contradicts the IRS guidance in IRS Notice 2012-31.

Our legal team will discuss the different types of plan designs that employers are looking at for 2015 (i.e. Preventive Only ("Skinny") Plans and Minimum Value Plans) as well as our considerations when using the MV Calculator for these types of plans.

Pressing Our Luck When Administering Dialysis Carve-Outs In The Face Of The Medicare Secondary Payer Act ("MSPA")

Dialysis carve-outs are common, and work very well. Many benefit plans have taken advantage of this excellent process, and are maximizing benefits while minimizing costs. Unfortunately, the rate of success has been "all over the map," largely dependent upon vendors and their clientele ensuring that the applicable plan language matches the process, and doesn't run afoul of applicable law. Newly brought to the industry's attention are theories and procedures, reflected in widely adopted plan language that may come too close to violating the MSPA. Our team will discuss what some vendors are promoting, and what concerns many have shared in response.

Join us on October 30th at 1PM to discuss these issues! <u>Register NOW!!!</u>