The Transparency in Coverage Final Rules (the TiC Final Rules) require most group health plans and health insurance issuers offering coverage in the group and individual markets to disclose, on a public website, information regarding in-network rates for covered items and services, out-of-network allowed amounts and billed charges for covered items and services, and negotiated rates and historical net prices for covered prescription drugs in three separate machine-readable files.

The machine-readable files must be available effective July 01, 2022 on an internet website free of charge. The user is not required to establish a user account, password, or other credentials and does not require the user to submit any personal identifying information such as a name, email address, or telephone number.

- Files have requirements regarding font size, accessibility, and security settings.
- Files may be posted on a third party site.
- Files may not be a PDF or Excel.

In-network machine-readable files include negotiated rates for all covered items and services at the plan level, for all medical codes, for contracted rates and by provider.

Out-of-network machine-readable files include allowed amounts for covered items, services based on billed charges and allowed amounts including historical amounts. Files are not required if there are fewer than 20 claims for a service for a provider.

***A machine-readable file as defined at 45 CFR 180.20 means a digital representation of data or information in a file that can be imported or read into a computer system for further processing.  MRFs are extremely large files and are not user friendly. The files should not be confused with the member-friendly Price Transparency Tool.***

Machine Readable files can be accessed at:
 mrf.healthcarebluebook.com/IMS or at imstpa.com/Legal

For more information :
https://www.cms.gov/healthplan-price-transparency/plans-and-issuers