

The Transparency in Coverage rule requires insurers and plans to create online consumer tools that include personalized information regarding members' cost-sharing responsibilities for covered items and services, including prescription drugs. The tool must be an internet-based cost estimator tool to estimate personal cost-share liability for both medical and prescription drugs.

By January 1, 2023, plans and issuers must provide information on the costs of 500 common items and services to start with, and by January 1, 2024, every covered item and service.

Typically, consumers receive an Explanation of Benefits after receiving care, which details the price charged by the provider, contracted or negotiated rate, and consumer cost sharing. Now, consumers will be able to receive this type of information before receiving care and use it to compare prices and better estimate potential out-of-pocket costs.

The tools must:

- Permit members to search based on billing code or description
- Allow members to compare costs across both in-network and out-of-network providers
- Inform members of any accumulated deductible or other out-of-pocket expenditures to date
- List any factors that impact the cost such as service location or drug dosage
- Provide cost estimates in paper format at the member's request

IMS has partnered with HealthCare Bluebook to provide the Price Comparison Tool to all members upon contract renewal in **2022**.

Members can go to healthcarebluebook.com/cc/IMS, select Price Transparency Tool at imstpa.com/Legal or access the Price Transparency Tool directly from their member login at imstpa.com.

For more information:

<https://www.cms.gov/healthplan-price-transparency/plans-and-issuers>