

RxDC FAQs for 2023 Reference Year

1. What is the Consolidated Appropriations Act, 2021?

Congress passed the Consolidated Appropriations Act (CAA) in December 2020 with \$1.4 trillion in 2021 appropriations and \$900 billion in funding for COVID-19 relief. It included major healthcare items with several consumer protection provisions and transparency implications for health plans and providers.

2. What provision from the CAA is specific to Group Health Plans and this RxDC Group Survey?

A component of the CAA is a provision stating Group Health Plans must submit data files regarding Prescription Drug Costs and Health Care Spending. This is known as the RxDC Report and is a data collection effort established by the CAA. The Centers for Medicare and Medicaid Services (CMS) is collecting the data on behalf of three federal agencies (Health and Human Services, Labor, Treasury). Group Health Plans must annually submit information about prescription drug costs and healthcare spending to CMS.

3. Are Employers required to submit this data?

Yes, Small Groups, Large Groups and Self-Insured Groups are required to submit this data, and the CAA places the burden of compliance on Group Health Plans. **Although BCBSMS is not responsible for your compliance, we are again working with Groups this year to submit data to CMS on behalf of Groups who had coverage through or administered by BCBSMS in 2023.**

4. How is BCBSMS assisting in the process?

To continue to assist Group Health Plans in complying with the CAA requirement, BCBSMS will submit RxDC information regarding coverage the Group had through or administered by BCBSMS during 2023. As part of that process, BCBSMS is requesting Groups provide BCBSMS with additional information necessary for submission to CMS by completing our RxDC survey.

- Groups with coverage during a portion of 2023 with another insurer or TPA are responsible for ensuring information relevant to such coverage is reported either by the Group or the other insurance carrier or TPA.
- BCBSMS will submit the required data for 2023 before the deadline of June 1, 2024.
- Our RxDC Group survey must be completed by March 31, 2024, for us to submit complete RxDC data on the Group's behalf.

5. What information do I need to prepare to complete the survey?

To complete the RxDC Survey, you will need the following associated with coverage issued by BCBSMS:

1. The 3-digit Plan Number used on the IRS/DOL Form 5500-series report.
2. Amount of Premium paid by Members specifically for the year 2023.
3. Amount of Premium Paid by the Employer specifically for the year 2023.

6. How do I provide the required information to BCBSMS and what are the requirements?

For **ACTIVE** Group Health Plans, the survey will be in *myBlue Group* and **must be submitted through *myBlue Group* by March 31, 2024.**

For **INACTIVE** Group Health Plans **only**, a link to the survey is available at www.bcbsms.com/im-an-employer on the right-hand side of the page.

- It is imperative BCBSMS receives your submission before March 31st for us to meet the CMS deadline of June 1st.

- Surveys will not be accepted after 11:59 pm on March 31st, and survey information will not be accepted via any other method.
- Once the survey is submitted, changes to the survey responses will not be accepted.

7. I am completing the RxDC Survey for an ACTIVE Group Health Plan. How can I log into myBlue Group if I do not remember my Username or Password?

For ACTIVE Group Health Plans, a myBlue account is required to access the survey. To login to myBlue Group, you can navigate to www.bcbsms.com and select “Employer” at the top of the myBlue Login screen. If you do not remember your password, click ‘Forgot Password’ at the bottom of the login screen. If you are having trouble with your Username, call your BCBSMS Certified Agent or our Group Customer Support Team at 601-664-4469.

8. Will Groups have to submit their own RxDC data to CMS if they do not complete the BCBSMS survey?

Yes, if you decide not to complete this survey, information not provided to us will need to be submitted to CMS by the Group. To avoid non-compliance, your Group must either create an account in the [CMS Health Insurance Oversight System](#) (HIOS) to submit your D1 and P2 data files or complete our RxDC Survey. The deadline for self-submitting the data files is June 1, 2024.

More information on how to create a HIOS account, what data is required, how to submit the data can be found on the CMS website [here](#). The instructions for using the RxDC module are in the [RxDC HIOS Module User Manual](#). *NOTE: Per the CMS RxDC Reporting Instructions: “It can take up to two weeks to create your accounts. Don’t wait until the last minute!”*

9. Why are there multiple surveys in myBlue Group?

The Annual Group Survey is separate and should not be confused with the RxDC Survey.

10. What RxDC data is collected, and how will it be used?

CMS reporting requires one or more plan lists, eight data files, and a narrative response. Data is reported through the RxDC module in the Health Insurance Oversight System (HIOS).

- **D1** - Premium and Life-Years
- **D2** - Medical spending information
- **D3-D8** – Rx Drug spending information
- **P2** – Group health plan list
- **Narrative Response**

CMS states the data will help to:

- Identify major drivers of increases in prescription drug and healthcare spending;
- Understand how prescription drug rebates impact premiums and out-of-pocket costs; and
- Promote transparency in prescription drug pricing.

11. What do I do if I have questions?

Please contact your Blue Cross & Blue Shield of Mississippi Certified Agent, or our Group Customer Support Team at 601-664-4469.