AMGA
Advancing High Performance Health

One Prince Street
Alexandria, VA 22314-3318
O 703.838.0033
F 703.548.1890

November 15, 2022

The Honorable Chiquita Brooks-LaSure
Administrator
Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-9900-NC
P.O. Box 8013
Baltimore, MD 21244-8013

Re: Request for Information: Advanced Explanation of Benefits and Good Faith Estimate for Covered Individuals (RIN 0938-AU98)

Dear Administrator Brooks-LaSure:

AMGA appreciates the opportunity to submit comments in response to the Request for Information (RFI) on Advanced Explanation of Benefits (AEOB) and Good Faith Estimate (GFE) for Covered Individuals. Founded in 1950, AMGA is a trade association leading the transformation of health care in America. AMGA applauds the Departments' efforts to implement critical patient protections, improve care outcomes, and increase patient satisfaction, and to this end, we have previously submitted comments on the No Surprises Act and GFE requirements.

Representing multispecialty medical groups and integrated systems of care, we advocate, educate, innovate, and empower our members to deliver the next level of high-performance health. AMGA is the national voice promoting awareness of our members' recognized excellence in the delivery of coordinated, high-quality, and high-value care. Over 177,000 physicians practice in our member organizations, delivering care to more than one in three Americans.

While AMGA supports the spirit of the transparency provisions in the No Surprises Act and appreciates the value of empowering patients to make informed care decisions, our members remain concerned about the various implications of GFE requirements and their associated impact on patient care access. Particularly, our members have concerns about the data complexities and administrative burdens created by current AEOB and GFE requirements under the No Surprises Act. As a result of these requirements, providers need to establish an infrastructure to efficiently accommodate the volume of requests with limited resources, while continuing to deliver high-quality care.

AMGA is pleased to offer comments and recommendations for your consideration:

I. **Technology Standardization:** AMGA recommends the standardization of GFE data exchange by establishing universal application programming interface (API) technology.

II. **Reducing Provider Burden:** AMGA recommends implementing automated processes and delaying the enforcement of GFE requirements.

I. Technology Standardization for AEOB and GFE Data Exchange

Of paramount concern among our members are the alarming privacy issues surrounding the exchange of AEOB and GFE data from providers and facilities to insurers. The lack of a proper, standardized system and infrastructure creates many risks that directly impact the security of patients' personal protected health information (PHI). A secure solution for exchanging this information is critical to protect patients' privacy.

To ensure patient data can be safely and accurately transferred among stakeholders, the Department of Health and Human Services (HHS) should identify a standard application programming interface (API) to enable a safe, real-time GFE data exchange. Establishing a standardized API technology across all entities would significantly alleviate the privacy concerns of transferring data for GFEs.

Further, standardized API technology and the increased availability of certification criteria will also aid in addressing the Health Insurance Portability and Accountability Act (HIPAA) complexities, which are inherent in the current system due to differences in coding practices and electronic health record (EHR) systems among entities. AMGA recommends a trial period for testing newly adopted data transfer standards before all entities are required to adopt them.

In an effort to support these goals and ultimately implement a secure and functional GFE data exchange process, AMGA members are developing sizeable, cross-functional system that provides as much auto-generated information, such practice information, patient information, or dates, on the estimates as possible. Currently, staff must manually enter such information. This system incorporates numerous workflows based on the type of estimate needed—office visits, in-office procedures, and surgery—in a facility. Clinician engagement and testing of the technology are also critical and often overlooked considerations, which directly contribute to the complexity of the data exchange issue. AMGA firmly believes that involvement and buy-in of all stakeholders—including government entities, professional societies, clinicians, EHR developers, and professional medical coding and billing staff—are crucial to creating a secure solution for exchanging data to protect patient privacy.

II. Reducing Provider Burden

AMGA supports the intent behind GFE requirements and welcomes improved price transparency in health care. However, the unprecedented healthcare workforce crisis, exacerbated by the COVID-19 public health emergency (PHE), has contributed to the provider and administrative burden, a primary concern among our members. The GFE requirements impose additional tasks and costs to an already strained healthcare workforce, ultimately impairing timely patient access to medical care. Specifically, the time and format requirements of the GFE-necessitated workflow and other operational changes required to expeditiously

provide patients with an accurate GFE will impose a considerable burden on our members. In some cases, providers have shifted infrastructure to devote over 40 individuals to work close to 8 hours per week to meet the GFE requirements. Allocating additional resources and personnel to this task—gathering, collating, and preparing a GFE for multiple providers/facilities—is very time-consuming, and our members report the ongoing burden is significant.

To alleviate provider burden in meeting these requirements, AMGA recommends the Centers for Medicare & Medicaid Services (CMS) and HHS engage with stakeholders to implement additional automation to the GFE process. Due to the individualized nature of the estimates and costs associated with adopting new technology requirements, AMGA anticipates this will take some time to develop and implement. Therefore, AMGA recommends the Departments collaborate with stakeholders to determine a secure, compliant, and efficient GFE process to inform patients of their financial responsibilities, while maintaining a workflow balance for providers, particularly those experiencing financial and workforce difficulties. In the meantime, the Departments should delay enforcement until a mutually agreed-upon solution is developed.

Our members' primary focus is to build a climate of trust in the partnerships among patients and providers, and we thank the agencies involved for considering our concerns and recommendations. AMGA greatly appreciates the opportunity to inform and guide all agencies involved on this complex and increasingly important issue. We look forward to continuing our valuable partnership with the Office of the National Coordinator for Health Information Technology (ONC). Should you have questions, please contact Darryl M. Drevna, AMGA's senior director of regulatory affairs, at 703.838.0033 ext. 339 or at ddrevna@amga.org.

Sincerely,

Jerry Penso, M.D., M.B.A.
President and Chief Executive Officer, AMGA