

## 2022 Issue Brief

### Good Faith Estimates (GFE)

#### Issue

On Sept. 30, 2021, the Departments of Health and Human Services (HHS), Treasury, Labor, and the Office of Personnel Management issued Part II of an Interim Final Rule to implement aspects of the No Surprises Act (NSA). The regulations also include a requirement that AMGA providers must offer Good Faith Estimates (GFEs) of the cost of items and services provided to uninsured or self-pay patients. For uninsured or self-pay patients, providers and facilities must ask about a patient's health insurance status and provide notification that a GFE is available on request by the patient. While AMGA members believe that transparency is a core tenant to value-based care and are committed to ensuring that their patients have access to price transparency tools, the current regulations provide additional administrative burdens without improving transparency or care.

As multispecialty medical groups and integrated systems of care work to integrate the GFE processes into their systems, the Department of Health and Human Services' regulations do not consider the workflow and infrastructure needed to meet the requirements in a timely matter. Providers are raising concerns with the GFEs in three key areas: unclear guidance, staffing, and the cost and lack of infrastructure to complete the GFEs. AMGA members are concerned about the accuracy of the GFEs, given the uncertainty around what procedures and services actually will be provided once a clinician begins treating a patient. These concerns include:

#### Unclear Guidance

The current guidance issued by CMS regarding when a GFE is required is causing confusion among providers. Issues of concern include whether providers are required to provide a GFE to all who meet the self-pay or uninsured criteria, or if providers have the option of waiting until a patient requests a GFE. Greater clarification from HHS is needed in order to ensure that providers are properly adhering to the law.

#### Staffing Concerns

The current GFE requirements have created additional burdens on providers already facing staffing shortages and difficulties recruiting qualified staff due to the ongoing COVID-19 pandemic. GFEs require staff to be knowledgeable about multiple aspects of health care, including coding, facilities, providers, schedulers, and fee schedules. These complexities will likely increase when the estimated costs from outside providers must be included. AMGA members report they have had to be forced to hire or reassign staff to comply with the GFE requirements, which could worsen staffing shortages and result in care delays. Greater GFE guidance must be given in order to ensure that current administrative burdens do not impact patient care.

**Cost and Infrastructure**

Providers will need to invest in the infrastructure needed to provide GFEs to patients. Currently, multispecialty medical groups and integrated systems of care are working to build a system to provide the GFEs. These efforts require a dedicated team to develop a system and workflow to respond to GFE requests. This team also will take on additional hours and cost to gather and validate data.

**AMGA asks Congress to**

- **Delay GFE requirements to allow time for stakeholders and agencies to study this issue and determine how best to provide usable pricing information to patients**