

Weekly Digest

• January 31, 2025 •



Fast-Approaching Deadlines for ACA Reporting and Similar State Reporting

"In 2017, Congress eliminated the ACA's individual mandate penalty. However, certain states and the District of Columbia impose an individual mandate at the state level. Those jurisdictions impose reporting requirements on employers. The state reporting obligations generally require the employer to furnish paper forms to individuals. The 'posting' options available to satisfy federal requirements do not apply unless specifically noted." [Full Article](#)

Venable, LLP



New Lawsuit Challenges Final MHPAEA Rule and Tests Limits of Federal Agency Authority

"A key concern noted throughout the *ERISA Industry Committee* complaint is that the increasingly onerous MHPAEA burdens imposed by the regulatory agencies may lead employers to cease providing coverage for MH/SUD services, a result that would directly undermine the goals of MHPAEA." [Full Article](#)

Thompson Hine

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Supreme Court to Decide Legality of ACA's Preventive Services Mandate

"One possibility is that the Supreme Court will conclude that the USPSTF members are officers of the United States, were not properly appointed, and therefore, any updates to the USPSTF recommendations after March 10, 2010 do not have the force of law. But, the recommendations pre-March 10, 2010, continue in effect, because Congress adopted them in the statutory text."

[Full Article](#)

Groom Law Group



Insurers Failed to Comply With Mental Health Coverage Law, Department of Labor Report Finds

"Health plans, and the companies that administer them, have excluded key behavioral treatments, such as therapies for substance use and autism, and offered inadequate networks of mental health providers, according to a 142-page report released Jan. 17. The report, which the agencies are required to file regularly to Congress, also detailed the results of secret shopper surveys of more than 4,300 mental health providers listed in insurance directories and found an 'alarming proportion' were 'unresponsive or unreachable.'" [Full Article](#)

Pro Publica Inc.

Departments' Surprise Medical Billing Guidance Further Extends Enforcement Relief Regarding Certain QPA and Addresses Gag Clause Compliance

"The FAQs include the example of an agreement between a TPA and the owner of a network under which the TPA is generally barred from sharing relevant information with the plan. The agreement effectively restricts the plan from providing cost information to a business associate. In the Departments' view, this agreement: [1] Indirectly restricts the plan (even though the plan is not a party to the agreement). [2] Results in a violation of the gag clause rules by the plan." [Full Article](#)

Thomson Reuters



California SB 923: New Trans-Inclusive Healthcare Requirements for Health Plans

"Beginning in the first quarter of 2025, California healthcare service plans, health insurers, Medi-Cal managed care plans, and PACE organizations must ensure that staff who have direct enrollee contact receive evidence-based cultural competency training focused on transgender-inclusive healthcare. This requirement arises from Senate Bill No. 923 (SB 923), a law passed by the California legislature in 2022." [Full Article](#)

McDermott Will & Emery