

EMPLOYER NEWS

February 13, 2024 (Updated 3/5/24)

Employer Groups Must Complete RxDC Survey by April 5

Under the Consolidated Appropriations Act (CAA), health insurers offering group or individual health coverage are required to report data annually regarding prescription drugs and health care spending to the Departments of Health and Human Services, Labor, and Treasury.

Health Plan of Nevada (HPN) and Sierra Health and Life (SHL) will submit the files for all groups who had active coverage during the 2023 reference year. Groups who had a Pharmacy Benefit Manager (PBM) other than the OptumRx integrated PBM, including OptumRx direct, will need to work with that PBM to submit the D3-D8 files.

To support this initiative, we will collect data annually from you to complete the RxDC reporting. **You may have submitted data in the prior year; however, because information may change, we must collect data each year.**

This year's survey will be sent to employer groups through Acrobat Adobe Sign next week. Employer groups must complete the survey by April 5, 2024.¹

Groups offering both HPN/SHL and UHC coverage will need to complete the survey twice – once with their HPN/SHL group number and once with their UHC policy number.

To facilitate the process, please refer to the following helpful resources: [FAQs about RxDC requirements](#) and the [Survey Worksheet](#).

Before starting the survey, employers will need to gather the following information:

- Member and employer average premium
- Administrative fees/TPA fees (if applicable)
- Medical, pharmacy, behavioral, and wellness vendors and their EIN (Employee Identification Number) if you have any vendors other than HPN/SHL

To be included in this year's submission, surveys cannot be changed after April 5, 2024. If you have questions, please contact your broker, HPN/SHL sales representative or email hpnshl_caasurvey@uhc.com.

¹If a group fails to complete the survey by April 5, HPN/SHL will submit the data in our system to CMS. However, the submission will be incomplete and the missing information will still need to be provided to CMS by the employer group or another reporting entity.