



HEALTH CARE REFORM ADVISORY

Jan. 5, 2022

2023 Proposed Benefit and Payment Parameters

The Department of Health and Human Services released the 2023 Proposed Notice of Benefit and Payment Parameters affecting Group Health Plans Tuesday, December 28.

BACKGROUND

The Affordable Care Act requires all Non-Grandfathered Group Health Plans to limit annual Out-of-Pocket Maximums on Essential Health Benefits (EHBs). The OOP maximum includes deductibles, co-insurance and co-payments toward EHBs.

The maximum OOP limits are adjusted annually for increases in the “Premium Adjustment Percentage”, a measure of medical inflation. The self-only OOP maximum applies to each individual, regardless of whether the individual is enrolled in single or family coverage.

OUT-OF-POCKET MAXIMUM & EMPLOYER SHARED RESPONSIBILITY PENALTIES

Below is a table containing the proposed single and family OOP annual maximums, as well as the annual level of the ACA Employer Shared Responsibility penalties. The Notice does not directly disclose the amount of Shared Responsibility penalties for the next year, however; these amounts can be calculated using the Premium Adjustment Percentage.

	OUT-OF-POCKET (OOP) MAXIMUM		EMPLOYER SHARED RESPONSIBILITY	
Year	Single	Family	4980H(a)	4980H(b)
2019	\$7,900	\$15,800	\$2,500	\$3,750
2020	\$8,150	\$16,300	\$2,570	\$3,860
2021	\$8,550	\$17,100	\$2,700	\$4,060
2022	\$8,700	\$17,400	\$2,750	\$4,120
2023	\$9,100	\$18,200	\$2,880	\$4,320

Please contact your Oswald client team representative for further information.

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