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The Department of Health and Human Services (“HHS”) published the “payment parameters” portion of its Annual Notice of Benefit and Payment Parameters for 2027. For purposes of employer-sponsored health plans, the guidance includes the limits on annual out-of-pocket expenses (deductibles, co-payments, and other amounts, but not premiums) for non-grandfathered group medical plans for plan years that begin in 2027.

## Change to the Out-of-Pocket Maximums

Non-grandfathered group medical plans will see a significant increase in the out-of-pocket maximum for plan years beginning on or after January 1, 2026, as follows:

- \$12,000 for self-only coverage (up from \$10,600 for 2026)
- \$24,000 for coverage other than self-only (up from \$21,200 for 2026).

Note: The out-of-pocket maximum limits for non-grandfathered group medical plans are different (and generally higher) than the out-of-pocket maximum limits required for high-deductible health plans (“HDHPs”) that are compatible with health savings account (“HSA”) eligibility.

## Employer Action

For non-grandfathered group medical plans, update out-of-pocket limits for plan years beginning on or after January 1, 2027.