All fields with an asterisk (*) are required. To validate the template, press Validate button or Ctrl + Shift + I. To final. Centers for Medicare & Medicaid Services (CMS) Qualified Health Plan (QHP) Tr Plan Year 2022 v2.1

General Information

Was this Issuer on the Exchange in 2020?*

SADP Only?*

Issuer HIOS ID*

Issuer Level Data

Number of Issuer Level Claims with Date(s) of Service (DOS) in 2020 That Were Also Received in Calendar Year 2020*

Number of Issuer Level Claims with DOS in 2020 That Were Also Denied in Calendar Year 2020*

Number of Issuer Level Internal Appeals Filed in Calendar Year 2020*

Number of Issuer Level Internal Appeals Overturned from Calendar Year 2020 Appeals*

Number of Issuer Level External Appeals Filed in Calendar Year 2020*

Number of Issuer Level External Appeals Overturned from Calendar Year 2020 Appeals*

Notes:

Please enter any comments/notes here.

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OMB control number: 0938-1310/Expiration date: 04/22/2022 ize the template, press Finalize button or Ctrl + Shift + F. ansparency in Coverage Reporting

Yes
No
79279
156,311
22,005
79
52
0
0

All fields with an asterisk (*) are required. To validate the template, press Va All plan IDs submitted via Plans & Benefits Template(s) must be included in th **Centers for Medicare & Medi**

Number of Plan Level Claims with DOS in 2020 Number of Plan Level That Were Also Denied Claims with DOS in 2020 Number of Plan Level Due to Prior Claims with DOS in 2020 Authorization or That Were Also Received in Calendar That Were Also Denied **Referral Required in** Plan ID* Year 2020* in Calendar Year 2020* Calendar Year 2020* 79279PA0080001 13,074 1,969 39 79279PA0080002 9,507 1,373 41 79279PA0080003 5,307 561 19 1,415 79279PA0080004 10,502 39 79279PA0080006 23,945 3,593 121 79279PA0080008 26,278 3,663 107 79279PA0090002 33,979 4,810 186 302 3 79279PA0100001 1,813 79279PA0110001 9,831 1,359 36 79279PA0120001 4,254 538 51 79279PA0130001 17,821 2,422 72 0 0 0 79279PA0130002 0 0 79279PA0130003 0 0 0 0 79279PA0130005 0 79279PA0140001 0 0 0 0 0 79279PA0150001 0 0 79279PA0160001 0 79279PA0170001 0 0 0 79279PA0090001 0 0 0

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Plan Year 2022				
Plan Level Data				
Number of Plan Level		Number of Plan Level	Number of Plan Level	
Claims with DOS in 2020	Number of Plan Level	Claims with DOS in 2020	Claims with DOS in 2020	
That Were Also Denied	Claims with DOS in 2020	That Were Also Denied	That Were Also Denied	
Due to an Out-Of-	That Were Also Denied	Due to Lack of Medical	Due to Lack of Medical	
Network	Due to Exclusion of a	Necessity, <u>excluding</u>	Necessity, Behavioral	
Provider/Claims in	Service in Calendar Year	Behavioral Health in	Health <u>only</u> , in Calendar	
Calendar Year 2020*	2020*	Calendar Year 2020*	Year 2020*	
533	144	0	0	
485	120	0	0	
222	36	0	0	
363	104	0	0	
900	269	0	22	
1,142	310	0	0	
1,525	374	0	1	
131	29	0	0	
322	87	0	0	
212	37	0	0	
755	168	0	0	
0	0	0	0	
0	0	0	0	
0	0	0	0	
0	0	0	0	
0	0	0	0	
0	0	0	0	
0	0	0	0	
0	0	0	0	

icaid Services (CMS) Qualified Health Plan (QHP) Transparency in Coverage Reporting

Number of Plan Level	
Claims with DOS in 2020	
That Were Also Denied	
for "Other" Reasons in	Notes: (Please enter any
Calendar Year 2020*	comments/notes here.)
1,691	
1,174	
485	
1,204	
3,025	
3,126	
3,971	
254	
1,161	
410	
2,081	
0	
0	
0	
0	
0	
0	
0 0	
0	