

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
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ansparency in Coverage Reporting

Yes
No
31609
972,846
162,892
106
55
8
2

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

Plan ID*	Number of Plan Level Claims with DOS in 2020 That Were Also Received in Calendar Year 2020*	Number of Plan Level Claims with DOS in 2020 That Were Also Denied in Calendar Year 2020*	Number of Plan Level Claims with DOS in 2020 That Were Also Denied Due to Prior Authorization or Referral Required in Calendar Year 2020*
31609PA0070002	155,659	21,647	1,164
31609PA0070003	187,475	30,504	1,142
31609PA0070004	142,818	23,956	855
31609PA0160001	6,194	1,160	49
31609PA0160005	205,222	33,174	1,299
31609PA0160006	247,751	41,417	1,535
31609PA0160007	N/A	N/A	N/A

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**Medicaid Services (CMS) Qualified Health Plan (QHP) Transparency in Coverage Reporting
Plan Year 2022**

Plan Level Data			
Number of Plan Level Claims with DOS in 2020 That Were Also Denied Due to an Out-Of-Network Provider/Claims in Calendar Year 2020*	Number of Plan Level Claims with DOS in 2020 That Were Also Denied Due to Exclusion of a Service in Calendar Year 2020*	Number of Plan Level Claims with DOS in 2020 That Were Also Denied Due to Lack of Medical Necessity, <u>excluding</u> Behavioral Health in Calendar Year 2020*	Number of Plan Level Claims with DOS in 2020 That Were Also Denied Due to Lack of Medical Necessity, Behavioral Health <u>only</u> , in Calendar Year 2020*
1,477	4,010	2,354	836
965	4,558	2,702	907
661	3,522	1,803	477
45	108	80	36
1,660	5,252	2,731	592
1,928	5,937	2,872	565
N/A	N/A	N/A	N/A

Number of Plan Level Claims with DOS in 2020 That Were Also Denied for "Other" Reasons in Calendar Year 2020*	Notes: (Please enter any comments/notes here.)
19,717	
28,333	
22,365	
1,075	
30,505	
38,426	
N/A	New plan for PY2021