

CMS Center for Consumer Information & Insurance Oversight (CCIIO), Health Insurance Exchange Public Use Files (Exchange PUFs) Data Dictionary for Plan Attributes PUF

1. Overview of the Plan Attributes PUF

The Centers for Medicare & Medicaid Services (CMS) Center for Consumer Information & Insurance Oversight (CCIIO) publishes the Exchange PUFs in order to improve transparency and increase access to data on Qualified Health Plans (QHPs) and Stand-alone Dental Plans (SADPs) offered through the Exchange in the individual market and Small Business Health Options Program (SHOP). The PUFs include data from states with Federally-facilitated Exchanges (FEEs), which include states with State Partnership Exchanges (SPEs) and State-based Exchanges that rely on the federal information technology platform for QHP eligibility and enrollment functionality (SBE-FPs). The Exchange PUFs also include data on Multi-State Plans (MSPs) and certified off-exchange SADPs. The PUFs do not include data from SBEs that do not rely on the federal platform for QHP eligibility and enrollment functionality.

The Plan Attributes PUF (Plan-PUF) is one of the files that make up the Exchange PUFs. The Plan-PUF contains plan variant-level data on maximum out of pocket payments, deductibles, health savings account (HSA) eligibility, formulary ID, and other plan attributes. These data either originate from the Plans & Benefits template (i.e., template field), an Excel based form used by issuers to describe their plans in the QHP/SADP application process, or were generated by CCIIO for use in data processing (i.e., system-generated). Issuers can also import data created in other templates (e.g., Network IDs from the Network ID template, Service Area IDs from the Service Area template, and Formulary IDs from the Prescription Drug template) to use as allowable values for the applicable fields in the Plans & Benefits template, or enter these values manually.

This data dictionary describes the variables contained in the Plan-PUF. Each record reports plan characteristics at the plan-variant level. The Plan-PUF is available for plan years 2014 through 2019.

2. Variable Attributes

<i>Variable Name:</i>	BusinessYear
<i>Variable Definition:</i>	Year for which plan provides coverage to enrollees
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Business Year
<i>Allowable Values:</i>	2014
	2015
	2016
	2017
	2018
	2019
<i>Data Source:</i>	System-generated field
<i>Field Name from</i>	Business Year
<i>Data Source:</i>	

<i>Comments:</i>	N/A
<i>Variable Name:</i>	StateCode
<i>Variable Definition:</i>	Two-character state abbreviation indicating the state where the plan is offered
<i>Data Type:</i>	Text
<i>Variable Label:</i>	State Code
<i>Allowable Values:</i>	All 50 state abbreviations + 9 territory abbreviations
<i>Data Source:</i>	System-generated field
<i>Field Name from</i>	State Code
<i>Data Source:</i>	
<i>Comments:</i>	N/A
<i>Variable Name:</i>	IssuerId
<i>Variable Definition:</i>	Five-digit numeric code that identifies the issuer organization in the Health Insurance Oversight System (HIOS)
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Issuer ID
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	System-generated field
<i>Field Name from</i>	Issuer ID
<i>Data Source:</i>	
<i>Comments:</i>	N/A
<i>Variable Name:</i>	SourceName
<i>Variable Definition:</i>	Categorical identifier of source of data import
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Source Name
<i>Allowable Values:</i>	HIOS SERFF OPM
<i>Data Source:</i>	System-generated field
<i>Field Name from</i>	Source Name
<i>Data Source:</i>	
<i>Comments:</i>	N/A
<i>Variable Name:</i>	VersionNum
<i>Variable Definition:</i>	Integer value for version of data import
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Version Number
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	System-generated field
<i>Field Name from</i>	Version Number
<i>Data Source:</i>	
<i>Comments:</i>	This field is only available for the 2014 through 2016 datasets.
<i>Variable Name:</i>	ImportDate

Variable Definition: Date of data import
Data Type: Date/Time
Variable Label: Import Date
Allowable Values: Free text
Data Source: System-generated field
Field Name from Data Source: Import Date
Comments: N/A

Variable Name: BenefitPackageld
Variable Definition: Numeric identifier of benefit package
Data Type: Text
Variable Label:
Allowable Values: Free text
Data Source: System-generated field
Field Name from Data Source: Benefit Package ID
Comments: This field is only available for the 2014 through 2016 datasets.

Variable Name: IssuerId2
Variable Definition: Five-digit numeric code that identifies the issuer organization in HIOS
Data Type: Text
Variable Label: Issuer ID
Allowable Values: Free text
Data Source: Template field
Field Name from Data Source: HIOS Issuer ID
Comments: This field is only available for the 2014 through 2016 datasets.

Variable Name: StateCode2
Variable Definition: Two-character state abbreviation indicating the state where the plan is offered
Data Type: Text
Variable Label: State Code
Allowable Values: All 50 state abbreviations + 9 territory abbreviations
Data Source: Template field
Field Name from Data Source: Issuer State
Comments: This field is only available for the 2014 through 2016 datasets.

Variable Name: MarketCoverage
Variable Definition: Categorical indicator of market coverage of plan
Data Type: Text
Variable Label: Market Coverage
Allowable Values: Individual
 SHOP (Small Group)
Data Source: Template field

<i>Field Name from</i>	Market Coverage
<i>Data Source:</i>	
<i>Comments:</i>	N/A
<i>Variable Name:</i>	DentalOnlyPlan
<i>Variable Definition:</i>	Categorical indicator of dental-only status of plan
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Dental-Only Plan Indicator
<i>Allowable Values:</i>	Yes No
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Dental Only Plan
<i>Data Source:</i>	
<i>Comments:</i>	N/A
<i>Variable Name:</i>	TIN
<i>Variable Definition:</i>	Tax ID Number of issuer
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Tax Identification Number
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from</i>	TIN
<i>Data Source:</i>	
<i>Comments:</i>	N/A
<i>Variable Name:</i>	StandardComponentId
<i>Variable Definition:</i>	Fourteen-character alpha-numeric code that identifies an insurance plan within HIOS
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Plan ID
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from</i>	HIOS Plan ID (Standard Component)
<i>Data Source:</i>	
<i>Comments:</i>	N/A
<i>Variable Name:</i>	PlanMarketingName
<i>Variable Definition:</i>	Marketing name of insurance plan
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Plan Marketing Name
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Plan Marketing Name
<i>Data Source:</i>	
<i>Comments:</i>	N/A

Variable Name: HIOSProductId
Variable Definition: Seven- character alpha-numeric code that identifies an insurance product within HIOS
Data Type: Text
Variable Label: HIOS Product ID
Allowable Values: Free text
Data Source: Template field
Field Name from HIOS Product ID
Data Source:
Comments: N/A

Variable Name: HPID
Variable Definition: Identifies the insurance product using a National Health Plan Identifier
Data Type: Text
Variable Label: HPID (National Health Plan Identifier)
Allowable Values: Free text
Data Source: Template field
Field Name from HPID
Data Source:
Comments: This field is optional; blanks indicate a value was not provided

Variable Name: NetworkId
Variable Definition: Identifier for a health care provider network organization
Data Type: Text
Variable Label: Network ID
Allowable Values: List of Network IDs valid for the issuer
Data Source: Template field
Field Name from Network ID
Data Source:
Comments: Network IDs can be imported from the Network ID template based on the number of networks and the issuer's state, or entered manually by issuer

Variable Name: ServiceAreaId
Variable Definition: Identifier for a service area
Data Type: Text
Variable Label: Service Area ID
Allowable Values: List of Service Area IDs valid for the issuer
Data Source: Template field
Field Name from Service Area ID
Data Source:
Comments: Service Area IDs can be imported from the Service Area template based on the number of service areas and the issuer's state, or entered manually by issuer

Variable Name: FormularyId
Variable Definition: Identifier for a drug formulary
Data Type: Text
Variable Label: Formulary ID
Allowable Values: List of Formulary IDs valid for the issuer
Data Source: Template field
Field Name from Formulary ID
Data Source:
Comments: Formulary IDs can be imported from the Prescription Drug template based on the number of formularies and the issuer's state, or entered manually by issuer; this field is not applicable for dental plans

Variable Name: IsNewPlan
Variable Definition: Categorical indicator of whether the insurance plan is new for the current year or existed previously in the Exchange
Data Type: Text
Variable Label: New/Existing Plan
Allowable Values: New
 Existing
Data Source: Template field
Field Name from New/Existing Plan
Data Source:
Comments: N/A

Variable Name: PlanType
Variable Definition: Type of insurance plan
Data Type: Text
Variable Label: Plan Type
Allowable Values: Indemnity
 PPO
 HMO
 POS
 EPO
Data Source: Template field
Field Name from Plan Type
Data Source:
Comments: N/A

Variable Name: MetalLevel
Variable Definition: Metal level, or coverage category, of insurance plan based on its actuarial value
Data Type: Text
Variable Label: Metal Level
Allowable Values: Platinum
 Gold
 Silver

<i>Data Source:</i>	Bronze Catastrophic High Low Template field
<i>Field Name from</i>	Level of Coverage
<i>Data Source:</i>	
<i>Comments:</i>	Values of High and Low are only applicable for dental plans; values other than High and Low are only applicable to medical plans
<i>Variable Name:</i>	DesignType
<i>Variable Definition:</i>	An indication that the plan follows a standardized plan design for its metal level.
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Design Type
<i>Allowable Values:</i>	Not Applicable Design Type 1 Design Type 2 Design Type 3 Design Type 4 Design Type 5
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Design Type
<i>Data Source:</i>	
<i>Comments:</i>	This field is only available for the 2017 through 2019 datasets.
<i>Variable Name:</i>	UniquePlanDesign
<i>Variable Definition:</i>	An indication that the health insurance plan has a unique design, for purposes of the actuarial value calculator
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Unique Plan Design
<i>Allowable Values:</i>	Yes No
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Unique Plan Design
<i>Data Source:</i>	
<i>Comments:</i>	This field is not applicable for dental plans
<i>Variable Name:</i>	QHPNonQHPTypeld
<i>Variable Definition:</i>	Categorical indicator of a plan's Exchange status (On the Exchange, Off the Exchange)
<i>Data Type:</i>	Text
<i>Variable Label:</i>	QHP/Non QHP
<i>Allowable Values:</i>	On Exchange Off Exchange Both
<i>Data Source:</i>	Template field

<i>Field Name from</i>	QHP/Non QHP
<i>Data Source:</i>	
<i>Comments:</i>	N/A
<i>Variable Name:</i>	IsNoticeRequiredForPregnancy
<i>Variable Definition:</i>	An indication of whether notice to the issuer is required before pregnancy-related benefits will be covered
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Notice Required for Pregnancy
<i>Allowable Values:</i>	Yes No
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Notice Required for Pregnancy
<i>Data Source:</i>	
<i>Comments:</i>	This field is not applicable for dental plans
<i>Variable Name:</i>	IsReferralRequiredForSpecialist
<i>Variable Definition:</i>	An indication of whether pre-authorization is required before a specialist visit
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Is a Referral Required for Specialist?
<i>Allowable Values:</i>	Yes No
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Is a Referral Required for Specialist?
<i>Data Source:</i>	
<i>Comments:</i>	This field is not applicable for dental plans
<i>Variable Name:</i>	SpecialistRequiringReferral
<i>Variable Definition:</i>	The types of specialists that require pre-authorization
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Specialist Requiring a Referral
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Specialist Requiring a Referral
<i>Data Source:</i>	
<i>Comments:</i>	This field is not applicable for dental plans; this field is only required if IsReferralRequiredForSpecialist field equals Yes
<i>Variable Name:</i>	PlanLevelExclusions
<i>Variable Definition:</i>	The list of exclusions to the insurance plan that apply to all benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Plan Level Exclusions
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Plan Level Exclusions
<i>Data Source:</i>	

<i>Comments:</i>	This field is optional; blanks indicate a value was not provided
<i>Variable Name:</i>	IndianPlanVariationEstimatedAdvancedPaymentAmountPerEnrollee
<i>Variable Definition:</i>	Estimated dollar amount of cost-sharing reductions for eligible enrollees to be provided in the form of an advance payment to the issuer
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Limited Cost Sharing Plan Variation - Estimated Advanced Payment
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Limited Cost Sharing Plan Variation - Est Advanced Payment
<i>Data Source:</i>	
<i>Comments:</i>	This field is not applicable for dental plans; this field should be blank for medical plans
<i>Variable Name:</i>	CompositeRatingOffered
<i>Variable Definition:</i>	An indication of whether issuers and employers can use the composite premium field.
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Composite Rating Offered
<i>Allowable Values:</i>	Yes No
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Does this plan offer Composite Rating?
<i>Data Source:</i>	
<i>Comments:</i>	This field is only available for the 2016 through 2019 datasets. This field will equal "No" for individual market plans
<i>Variable Name:</i>	ChildOnlyOffering
<i>Variable Definition:</i>	The types of child enrollment options (Allows Adult and Child-only, Allows Adult-only, Allows Child-only) of an insurance plan
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Child-Only Offering
<i>Allowable Values:</i>	Allows Adult and Child-Only Allows Adult-Only Allows Child-Only
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Child-Only Offering
<i>Data Source:</i>	
<i>Comments:</i>	This field is not applicable for catastrophic plans
<i>Variable Name:</i>	ChildOnlyPlanId
<i>Variable Definition:</i>	The HIOS Plan Identifier for the child-only insurance plan that corresponds to this insurance plan
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Child Only Plan ID
<i>Allowable Values:</i>	Free text

Data Source: Template field
Field Name from Child Only Plan ID
Data Source:
Comments: This field is only applicable for adult-only plans and does not apply to catastrophic plans

Variable Name: WellnessProgramOffered
Variable Definition: An indication of whether an insurance plan offers wellness programs according to Section 2705 of the Public Health Service Act
Data Type: Text
Variable Label: Wellness Program Offered
Allowable Values: Yes
 No
Data Source: Template field
Field Name from Tobacco Wellness Program Offered
Data Source:
Comments: This field is not applicable for dental plans

Variable Name: DiseaseManagementProgramsOffered
Variable Definition: Categorical indicator of whether the plan offers disease management programs for specific conditions
Data Type: Text
Variable Label: Disease Management Programs Offered
Allowable Values: Asthma
 Heart disease
 Depression
 Diabetes
 High blood pressure & high cholesterol
 Low back pain
 Pain management
 Pregnancy
 Weight loss programs (This value is only available in the 2016 through 2019 datasets.)
Data Source: Template field
Field Name from Disease Management Programs Offered
Data Source:
Comments: This field is not applicable for dental plans

Variable Name: EHBPercentTotalPremium
Variable Definition: The percent of the plan's total premium relative to the EHB benchmark plan for the state.
Data Type: Text
Variable Label: EHB Percent of Total Premium
Allowable Values: 0 -1, blank
Data Source: Template field
Field Name from EHB Percent of Total Premium
Data Source:

<i>Comments:</i>	This field is only available for the 2016 through 2019 datasets. This field is only valid for medical plans and is not required for catastrophic plans.
<i>Variable Name:</i>	EHBPercentPremiumS4
<i>Variable Definition:</i>	The projected percent of the plan's total premium relative to the EHB benchmark plan for the state.
<i>Data Type:</i>	Text
<i>Variable Label:</i>	EHB Percent of Total Premium, Section 4
<i>Allowable Values:</i>	0 -1, blank
<i>Data Source:</i>	Template field
<i>Field Name from</i>	EHB Percent of TP, Section IV
<i>Data Source:</i>	
<i>Comments:</i>	This field is only available for the 2014 & 2015 datasets. This field is only valid for medical plans.
<i>Variable Name:</i>	EHPediatricDentalApportionmentQuantity
<i>Variable Definition:</i>	The dollar amount or percentage of the EHB Apportionment for Pediatric Dental
<i>Data Type:</i>	Text
<i>Variable Label:</i>	EHB Apportionment for Pediatric Dental
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from</i>	EHB Apportionment for Pediatric Dental
<i>Data Source:</i>	
<i>Comments:</i>	This field is not applicable for medical plans. This field is a dollar amount for the 2014 through 2016 datasets and a percentage for the 2017 through 2019 datasets.
<i>Variable Name:</i>	IsGuaranteedRate
<i>Variable Definition:</i>	An indication of whether the rates for the insurance plan are guaranteed or estimated
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Guaranteed Rate
<i>Allowable Values:</i>	Guaranteed Rate Estimated Rate
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Guaranteed vs. Estimated Rate
<i>Data Source:</i>	
<i>Comments:</i>	This field is not applicable for medical plans
<i>Variable Name:</i>	PlanEffectiveDate
<i>Variable Definition:</i>	The activation date of enrollment coverage on an Insurance plan
<i>Data Type:</i>	Date
<i>Variable Label:</i>	Plan Effective Date
<i>Allowable Values:</i>	Free text

<i>Data Source:</i>	Template field
<i>Field Name from</i>	Plan Effective Date
<i>Data Source:</i>	
<i>Comments:</i>	N/A

<i>Variable Name:</i>	PlanExpirationDate
<i>Variable Definition:</i>	The end date of plan selection for enrollment on an Insurance plan
<i>Data Type:</i>	Date
<i>Variable Label:</i>	Plan Expiration Date
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Plan Expiration Date
<i>Data Source:</i>	
<i>Comments:</i>	This field is optional, so blank or zero values indicate a value was not provided

<i>Variable Name:</i>	OutOfCountryCoverage
<i>Variable Definition:</i>	Indicates whether out of country coverage is provided for health services
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Out of Country Coverage
<i>Allowable Values:</i>	Yes No
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Out of Country Coverage
<i>Data Source:</i>	
<i>Comments:</i>	N/A

<i>Variable Name:</i>	OutOfCountryCoverageDescription
<i>Variable Definition:</i>	The conditions under which out of country health services are covered
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Out of Country Coverage Description
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Out of Country Coverage Description
<i>Data Source:</i>	
<i>Comments:</i>	This field is only applicable for plans that offer out of country coverage

<i>Variable Name:</i>	OutOfServiceAreaCoverage
<i>Variable Definition:</i>	Indicates whether out of service area coverage is provided
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Out of Service Area Coverage
<i>Allowable Values:</i>	Yes No
<i>Data Source:</i>	Template field

<i>Field Name from Data Source:</i>	Out of Service Area Coverage
<i>Comments:</i>	N/A
<i>Variable Name:</i>	OutOfServiceAreaCoverageDescription
<i>Variable Definition:</i>	The conditions under which out of service area health services are covered
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Out of Service Area Coverage Description
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Out of Service Area Coverage Description
<i>Comments:</i>	This field is only applicable for plans that offer out of service area coverage
<i>Variable Name:</i>	NationalNetwork
<i>Variable Definition:</i>	Indicates whether the insurance plan is supported by a national network of health service provider companies
<i>Data Type:</i>	Text
<i>Variable Label:</i>	National Network
<i>Allowable Values:</i>	Yes No
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	National Network
<i>Comments:</i>	N/A
<i>Variable Name:</i>	URLForEnrollmentPayment
<i>Variable Definition:</i>	The URL for Enrollment Payment
<i>Data Type:</i>	Text
<i>Variable Label:</i>	URL for Enrollment Payment
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	URL for Enrollment Payment
<i>Comments:</i>	This field is optional, so blank or zero values indicate a value was not provided
<i>Variable Name:</i>	FormularyURL
<i>Variable Definition:</i>	The URL for the prescription drug formulary associated with this plan
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Formulary URL
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Formulary URL

<i>Comments:</i>	This field is only available for the 2015 through 2019 datasets. This field is only valid for medical plans
<i>Variable Name:</i>	PlanId
<i>Variable Definition:</i>	Seventeen-character alpha-numeric code that identifies an insurance plan's cost sharing reduction (CSR) variant within HIOS
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Plan ID (Standard Component ID with Variant)
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from</i>	HIOS Plan ID (Standard Component + Variant)
<i>Data Source:</i>	
<i>Comments:</i>	Prepopulated in template; character count includes '-'
<i>Variable Name:</i>	PlanVariantMarketingName
<i>Variable Definition:</i>	Marketing name of the plan variation of the insurance plan
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Plan Variant Marketing Name
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Plan Variant Marketing Name
<i>Data Source:</i>	
<i>Comments:</i>	This field is only available for the 2017 through 2019 datasets.
<i>Variable Name:</i>	CSRVariationType
<i>Variable Definition:</i>	Name of the cost sharing reduction options offered for a health insurance plan
<i>Data Type:</i>	Text
<i>Variable Label:</i>	CSR Variation Type
<i>Allowable Values:</i>	Standard Off Exchange Plan Standard On Exchange Plan Zero Cost Sharing Plan Variation Limited Cost Sharing Plan Variation 73% AV Level Silver Plan 87% AV Level Silver Plan 94% AV Level Silver Plan
<i>Data Source:</i>	Template field
<i>Field Name from</i>	CSR Variation Type
<i>Data Source:</i>	
<i>Comments:</i>	Prepopulated in template
<i>Variable Name:</i>	IssuerActuarialValue
<i>Variable Definition:</i>	The numeric actuarial value (AV) generated manually for an insurance plan by the issuer
<i>Data Type:</i>	Percentage
<i>Variable Label:</i>	Issuer Actuarial Value
<i>Allowable Values:</i>	Free text

<i>Data Source:</i>	Template field
<i>Field Name from</i>	Issuer Actuarial Value
<i>Data Source:</i>	
<i>Comments:</i>	This field is only applicable for dental plans and plans with a unique plan design
<i>Variable Name:</i>	AVCalculatorOutputNumber
<i>Variable Definition:</i>	The numeric AV generated by the template's AV Calculator for an insurance plan
<i>Data Type:</i>	Text
<i>Variable Label:</i>	AV Calculator Output Number
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from</i>	AV Calculator Output Number
<i>Data Source:</i>	
<i>Comments:</i>	This field is only applicable for medical plans and plans that do not have a unique plan design
<i>Variable Name:</i>	MedicalDrugDeductiblesIntegrated
<i>Variable Definition:</i>	An indication of whether the insurance plan specifies that the medical and drug deductibles are combined into one deductible
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Medical Drug Deductibles Integrated
<i>Allowable Values:</i>	Yes No
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Medical & Drug Deductibles Integrated?
<i>Data Source:</i>	
<i>Comments:</i>	This field is not applicable for dental plans
<i>Variable Name:</i>	MedicalDrugMaximumOutOfPocketIntegrated
<i>Variable Definition:</i>	An indication of whether the insurance plan specifies that the medical and drug maximum out of pocket (MOOP) limits are combined into one limit
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Medical Drug Maximum Out of Pocket Integrated
<i>Allowable Values:</i>	Yes No
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Medical & Drug Maximum Out of Pocket Integrated?
<i>Data Source:</i>	
<i>Comments:</i>	This field is not applicable for dental plans
<i>Variable Name:</i>	MultipleInNetworkTiers
<i>Variable Definition:</i>	An indication of whether there are two in network tiers
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Multiple In Network Tiers

Allowable Values: Yes
No
Data Source: Template field
Field Name from Multiple In Network Tiers?
Data Source:
Comments: N/A

Variable Name: FirstTierUtilization
Variable Definition: The expected percentage of utilization for the first in network tier
Data Type: Text
Variable Label: First Tier Utilization
Allowable Values: Free text
Data Source: Template field
Field Name from 1st Tier Utilization
Data Source:
Comments: N/A

Variable Name: SecondTierUtilization
Variable Definition: The expected percentage of utilization for the second in network tier, based on the value entered for the first tier
Data Type: Text
Variable Label: Second Tier Utilization
Allowable Values: 100% minus First Tier Utilization
Data Source: Template field
Field Name from 2nd Tier Utilization
Data Source:
Comments: Calculated by template

Variable Name: SBCHavingaBabyDeductible
Variable Definition: The dollar amount of the deductible for the sample Summary of Benefits & Coverage (SBC) scenario of having a baby
Data Type: Text
Variable Label: SBC Scenario, Having a Baby, Deductible
Allowable Values: Free text
Data Source: Template field
Field Name from SBC Scenario, Having a Baby, Deductible
Data Source:
Comments: This field is optional; blanks indicate a value was not provided; this field is not applicable for dental plans

Variable Name: SBCHavingaBabyCopayment
Variable Definition: The dollar amount of the copayment for the sample SBC scenario of having a baby
Data Type: Text
Variable Label: SBC Scenario, Having a Baby, Copayment
Allowable Values: Free text

Data Source: Template field
Field Name from SBC Scenario, Having a Baby, Copayment
Data Source:
Comments: This field is optional; blanks indicate a value was not provided; this field is not applicable for dental plans

Variable Name: SBCHavingaBabyCoinsurance
Variable Definition: The dollar amount of the coinsurance for the sample SBC scenario of having a baby
Data Type: Text
Variable Label: SBC Scenario, Having a Baby, Coinsurance
Allowable Values: Free text
Data Source: Template field
Field Name from SBC Scenario, Having a Baby, Coinsurance
Data Source:
Comments: This field is optional; blanks indicate a value was not provided; this field is not applicable for dental plans

Variable Name: SBCHavingaBabyLimit
Variable Definition: The dollar amount of the benefit limits or exclusions for the sample SBC scenario of having a baby
Data Type: Text
Variable Label: SBC Scenario, Having a Baby, Limit
Allowable Values: Free text
Data Source: Template field
Field Name from SBC Scenario, Having a Baby, Limit
Data Source:
Comments: This field is optional; blanks indicate a value was not provided; this field is not applicable for dental plans

Variable Name: SBCHavingDiabetesDeductible
Variable Definition: The dollar amount of the deductible for the sample SBC scenario of having diabetes
Data Type: Text
Variable Label: SBC Scenario, Having Diabetes, Deductible
Allowable Values: Free text
Data Source: Template field
Field Name from SBC Scenario, Having Diabetes, Deductible
Data Source:
Comments: This field is optional; blanks indicate a value was not provided; this field is not applicable for dental plans

Variable Name: SBCHavingDiabetesCopayment
Variable Definition: The dollar amount of the copayment for the sample SBC scenario of having diabetes
Data Type: Text
Variable Label: SBC Scenario, Having Diabetes, Copayment

<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	SBC Scenario, Having Diabetes, Copayment
<i>Comments:</i>	This field is optional; blanks indicate a value was not provided; this field is not applicable for dental plans

<i>Variable Name:</i>	SBCHavingDiabetesCoinsurance
<i>Variable Definition:</i>	The dollar amount of the coinsurance for the sample SBC scenario of having diabetes
<i>Data Type:</i>	Text
<i>Variable Label:</i>	SBC Scenario, Having Diabetes, Coinsurance
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	SBC Scenario, Having Diabetes, Coinsurance
<i>Comments:</i>	This field is optional; blanks indicate a value was not provided; this field is not applicable for dental plans

<i>Variable Name:</i>	SBCHavingDiabetesLimit
<i>Variable Definition:</i>	The dollar amount of the benefit limits or exclusions for the sample SBC scenario of having diabetes
<i>Data Type:</i>	Text
<i>Variable Label:</i>	SBC Scenario, Having Diabetes, Limit
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	SBC Scenario, Having Diabetes, Limit
<i>Comments:</i>	This field is optional; blanks indicate a value was not provided; this field is not applicable for dental plans

<i>Variable Name:</i>	SBCHavingSimplefractureDeductible
<i>Variable Definition:</i>	The dollar amount of the deductible for the sample SBC scenario of treatment of a simple fracture
<i>Data Type:</i>	Text
<i>Variable Label:</i>	SBC Scenario, Treatment of a Simple Fracture, Deductible
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	SBC Scenario, Treatment of a Simple Fracture, Deductible
<i>Comments:</i>	This field is only available for the 2017 through 2019 datasets. This field is not applicable This field is optional; blanks indicate a value was not provided; this field is not applicable for dental plans

<i>Variable Name:</i>	SBCHavingSimplefractureCopayment
<i>Variable Definition:</i>	The dollar amount of the copayment for the sample SBC scenario of treatment of a simple fracture

Data Type: Text
Variable Label: SBC Scenario, Treatment of a Simple Fracture, Copayment
Allowable Values: Free text
Data Source: Template field
Field Name from Data Source: SBC Scenario, Treatment of a Simple Fracture, Copayment
Comments: This field is only available for the 2017 through 2019 datasets. This field is optional; blanks indicate a value was not provided; this field is not applicable for dental plans

Variable Name: SBCHavingSimplefractureCoinsurance
Variable Definition: The dollar amount of the coinsurance for the sample SBC scenario of treatment of a simple fracture
Data Type: Text
Variable Label: SBC Scenario, Treatment of a Simple Fracture, Coinsurance
Allowable Values: Free text
Data Source: Template field
Field Name from Data Source: SBC Scenario, Treatment of a Simple Fracture, Coinsurance
Comments: This field is only available for the 2017 through 2019 datasets. This field is optional; blanks indicate a value was not provided; this field is not applicable for dental plans

Variable Name: SBCHavingSimplefractureLimit
Variable Definition: The dollar amount of the benefit limits or exclusions for the sample SBC scenario of treatment of a simple fracture
Data Type: Text
Variable Label: SBC Scenario, Treatment of a Simple Fracture, Limit
Allowable Values: Free text
Data Source: Template field
Field Name from Data Source: SBC Scenario, Treatment of a Simple Fracture, Limit
Comments: This field is only available for the 2017 through 2019 datasets. This field is optional; blanks indicate a value was not provided; this field is not applicable for dental plans

Variable Name: SpecialtyDrugMaximumCoinsurance
Variable Definition: The maximum dollar value of coinsurance for specialty high-cost drugs
Data Type: Text
Variable Label: Specialty Drug Maximum Coinsurance
Allowable Values: Free text
Data Source: Template field
Field Name from Data Source: Maximum Coinsurance for Specialty Drugs
Comments: This field is optional; blanks indicate a value was not provided

<i>Variable Name:</i>	InpatientCopaymentMaximumDays
<i>Variable Definition:</i>	The maximum number of days for which a patient can be charged a copayment for an inpatient stay, if the insurance plan design charges inpatient stays by day
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Inpatient Copayment Maximum Days
<i>Allowable Values:</i>	0 (equivalent to no maximum)
	1
	2
	3
	4
	5
	6
	7
	8
	9
	10
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Maximum Number of Days for Charging an Inpatient Copay?
<i>Comments:</i>	This field is optional, so blank or zero values indicate a value was not provided

<i>Variable Name:</i>	BeginPrimaryCareCostSharingAfterNumberOfVisits
<i>Variable Definition:</i>	The maximum number of fully covered visits allowed, after which primary care cost sharing will begin
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Begin Primary Care Cost-Sharing After Number Of Visits
<i>Allowable Values:</i>	0 (equivalent to no maximum)
	1
	2
	3
	4
	5
	6
	7
	8
	9
	10
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Begin Primary Care Cost-Sharing After a Set Number of Visits?
<i>Comments:</i>	This field is optional, so blank or zero values indicate a value was not provided

<i>Variable Name:</i>	BeginPrimaryCareDeductibleCoinsuranceAfterNumberOfCopays
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Variable Definition: The maximum number of primary care visits with co-payment allowed, after which all primary care visits will be subject to the deductible or maximum out of pocket limits

Data Type: Text

Variable Label: Begin Primary Care Deductible Coinsurance After Number Of Copays

Allowable Values: 0 (equivalent to no maximum)
1
2
3
4
5
6
7
8
9
10

Data Source: Template field

Field Name from Data Source: Begin Primary Care Deductible/ Coinsurance After a Set Number of Copays?

Comments: This field is optional, blank or zero values indicate a value was not provided

Variable Name: MEHBInnTier1IndividualMOOP

Variable Definition: The dollar amount of the tier 1 in network, individual out-of-pocket cost limit for medical EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier 1), Individual

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier 1), Individual

Comments: This field is only applicable for plans with separate medical and drug MOOP limits; for dental plans, this field contains the MOOP value for dental benefits

Variable Name: MEHBInnTier1FamilyMOOP

Variable Definition: The dollar amount of the tier 1 in network, family out-of-pocket cost limit for medical EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier 1), Family

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier 1), Family
Comments: This field only applies to the 2014 and 2015 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; for dental plans, this field contains the MOOP value for dental benefits

Variable Name: MEHBInnTier1FamilyPerPersonMOOP
Variable Definition: The dollar amount of the tier 1 in network, family per person out-of-pocket cost limit for medical EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier 1), Family Per Person
Allowable Values: \$X
Not Applicable
Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier 1), Family Per Person
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; for dental plans, this field contains the MOOP value for dental benefits

Variable Name: MEHBInnTier1FamilyPerGroupMOOP
Variable Definition: The dollar amount of the tier 1 in network, family per group out-of-pocket cost limit for medical EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier 1), Family Per Group
Allowable Values: \$X
Not Applicable
Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier 1), Family Per Group
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; for dental plans, this field contains the MOOP value for dental benefits

Variable Name: MEHBInnTier2IndividualMOOP
Variable Definition: The dollar amount of the tier 2 in network, individual out-of-pocket cost limit for medical EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier 2), Individual
Allowable Values: \$X
Not Applicable

Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier 2), Individual
Comments: This field is only applicable for plans with multiple in network tiers and separate medical and drug MOOP limits; for dental plans, this field contains the MOOP value for dental benefits

Variable Name: MEHBIInnTier2FamilyMOOP
Variable Definition: The dollar amount of the tier 2 in network, family out-of-pocket cost limit for medical EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier 2), Family
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier 2), Family
Comments: This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with multiple in network tiers and separate medical and drug MOOP limits; this field contains the MOOP value for dental benefits

Variable Name: MEHBIInnTier2FamilyPerPersonMOOP
Variable Definition: The dollar amount of the tier 2 in network, family per person out-of-pocket cost limit for medical EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier 2), Family Per Person
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier 2), Family Per Person
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with multiple in network tiers and separate medical and drug MOOP limits; this field contains the MOOP value for dental benefits

Variable Name: MEHBIInnTier2FamilyPerGroupMOOP
Variable Definition: The dollar amount of the tier 2 in network, family per group out-of-pocket cost limit for medical EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier 2), Family Per Group
Allowable Values: \$X
 Not Applicable

Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier 2), Family Per Group
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with multiple in network tiers and separate medical and drug MOOP limits; this field contains the MOOP value for dental benefits

Variable Name: MEHBOutOfNetIndividualMOOP
Variable Definition: The dollar amount of the out of network, individual out-of-pocket cost limit for medical EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Medical EHB Benefits, Out of Network, Individual
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Medical EHB Benefits, Out of Network, Individual
Comments: This field is only applicable for plans with separate medical and drug MOOP limits; for dental plans, this field contains the MOOP value for dental benefits

Variable Name: MEHBOutOfNetFamilyMOOP
Variable Definition: The dollar amount of the out of network, family out-of-pocket cost limit for medical EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Medical EHB Benefits, Out of Network, Family
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Medical EHB Benefits, Out of Network, Family
Comments: This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; for dental plans, this field contains the MOOP value for dental benefits

Variable Name: MEHBOutOfNetFamilyPerPersonMOOP
Variable Definition: The dollar amount of the out of network, family per person out-of-pocket cost limit for medical EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Medical EHB Benefits, Out of Network, Family Per Person
Allowable Values: \$X
 Not Applicable

Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Medical EHB Benefits, Out of Network, Family Per Person
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; for dental plans, this field contains the MOOP value for dental benefits

Variable Name: MEHBOutOfNetFamilyPerGroupMOOP
Variable Definition: The dollar amount of the out of network, family per group out-of-pocket cost limit for medical EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Medical EHB Benefits, Out of Network, Family Per Group
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Medical EHB Benefits, Out of Network, Family Per Group
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; for dental plans, this field contains the MOOP value for dental benefits

Variable Name: MEHBComblnnOonIndividualMOOP
Variable Definition: The dollar amount of the combined in/out of network, individual out-of-pocket cost limit for medical EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Medical EHB Benefits, Combined In/Out Network, Individual
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Medical EHB Benefits, Combined In/Out Network, Individual
Comments: This field is only applicable for plans with separate medical and drug MOOP limits; for dental plans, this field contains the MOOP value for dental benefits

Variable Name: MEHBComblnnOonFamilyMOOP
Variable Definition: The dollar amount of the combined in/out of network, family out-of-pocket cost limit for medical EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Medical EHB Benefits, Combined In/Out Network, Family

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Maximum Out of Pocket for Medical EHB Benefits, Combined In/Out Network, Family

Comments: This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; for dental plans, this field contains the MOOP value for dental benefits

Variable Name: MEHBCombInnOonFamilyPerPersonMOOP

Variable Definition: The dollar amount of the combined in/out of network, family per person out-of-pocket cost limit for medical EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical EHB Benefits, Combined In/Out Network, Family Per Person

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Maximum Out of Pocket for Medical EHB Benefits, Combined In/Out Network, Family Per Person

Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; for dental plans, this field contains the MOOP value for dental benefits

Variable Name: MEHBCombInnOonFamilyPerGroupMOOP

Variable Definition: The dollar amount of the combined in/out of network, family per group out-of-pocket cost limit for medical EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical EHB Benefits, Combined In/Out Network, Family Per Group

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Maximum Out of Pocket for Medical EHB Benefits, Combined In/Out Network, Family Per Group

Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; for dental plans, this field contains the MOOP value for dental benefits

Variable Name: DEHBInnTier1IndividualMOOP

Variable Definition: The dollar amount of the tier 1 in network, individual out-of-pocket cost limit for drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 1), Individual
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 1), Individual
Comments: This field is only applicable for plans with separate medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: DEHBInnTier1FamilyMOOP
Variable Definition: The dollar amount of the tier 1 in network, family out-of-pocket cost limit for drug EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 1), Family
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 1), Family
Comments: This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: DEHBInnTier1FamilyPerPersonMOOP
Variable Definition: The dollar amount of the tier 1 in network, family per person out-of-pocket cost limit for drug EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 1), Family Per Person
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 1), Family Per Person
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: DEHBInnTier1FamilyPerGroupMOOP
Variable Definition: The dollar amount of the tier 1 in network, family per group out-of-pocket cost limit for drug EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 1), Family Per Group

Allowable Values: \$X
Not Applicable
Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 1), Family Per Group
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: DEHBInnTier2IndividualMOOP
Variable Definition: The dollar amount of the tier 2 in network, individual out-of-pocket cost limit for drug EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 2), Individual
Allowable Values: \$X
Not Applicable
Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 2), Individual
Comments: This field is only applicable for plans with multiple in network tiers and separate medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: DEHBInnTier2FamilyMOOP
Variable Definition: The dollar amount of the tier 2 in network, family out-of-pocket cost limit for drug EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 2), Family
Allowable Values: \$X
Not Applicable
Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 2), Family
Comments: This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with multiple in network tiers and separate medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: DEHBInnTier2FamilyPerPersonMOOP
Variable Definition: The dollar amount of the tier 2 in network, family per person out-of-pocket cost limit for drug EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 2), Family Per Person
Allowable Values: \$X
Not Applicable

Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 2), Family Per Person
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with multiple in network tiers and separate medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: DEHBInnTier2FamilyPerGroupMOOP
Variable Definition: The dollar amount of the tier 2 in network, family per group out-of-pocket cost limit for drug EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 2), Family Per Group
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 2), Family Per Group
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with multiple in network tiers and separate medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: DEHBOutOfNetIndividualMOOP
Variable Definition: The dollar amount of the out of network, individual out-of-pocket cost limit for drug EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Drug EHB Benefits, Out of Network, Individual
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Drug EHB Benefits, Out of Network, Individual
Comments: This field is only applicable for plans with separate medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: DEHBOutOfNetFamilyMOOP
Variable Definition: The dollar amount of the out of network, family out-of-pocket cost limit for drug EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Drug EHB Benefits, Out of Network, Family
Allowable Values: \$X
 Not Applicable
Data Source: Template field

<i>Field Name from Data Source:</i>	Maximum Out of Pocket for Drug EHB Benefits, Out of Network, Family
<i>Comments:</i>	This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; this field will be blank for dental plans

<i>Variable Name:</i>	DEHBOutOfNetFamilyPerPersonMOOP
<i>Variable Definition:</i>	The dollar amount of the out of network, family per person out-of-pocket cost limit for drug EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Maximum Out of Pocket for Drug EHB Benefits, Out of Network, Family Per Person
<i>Allowable Values:</i>	\$X Not Applicable
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Maximum Out of Pocket for Drug EHB Benefits, Out of Network, Family Per Person
<i>Comments:</i>	This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; this field will be blank for dental plans

<i>Variable Name:</i>	DEHBOutOfNetFamilyPerGroupMOOP
<i>Variable Definition:</i>	The dollar amount of the out of network, family per group out-of-pocket cost limit for drug EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Maximum Out of Pocket for Drug EHB Benefits, Out of Network, Family Per Group
<i>Allowable Values:</i>	\$X Not Applicable
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Maximum Out of Pocket for Drug EHB Benefits, Out of Network, Family Per Group
<i>Comments:</i>	This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; this field will be blank for dental plans

<i>Variable Name:</i>	DEHBCombInnOonIndividualMOOP
<i>Variable Definition:</i>	The dollar amount of the combined in/out of network, individual out-of-pocket cost limit for drug EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Maximum Out of Pocket for Drug EHB Benefits, Combined In/Out Network, Individual
<i>Allowable Values:</i>	\$X Not Applicable
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Maximum Out of Pocket for Drug EHB Benefits, Combined In/Out Network, Individual

<i>Comments:</i>	This field is only applicable for plans with separate medical and drug MOOP limits; this field will be blank for dental plans
<i>Variable Name:</i>	DEHBComblnnOonFamilyMOOP
<i>Variable Definition:</i>	The dollar amount of the combined in/out of network, family out-of-pocket cost limit for drug EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Maximum Out of Pocket for Drug EHB Benefits, Combined In/Out Network, Family
<i>Allowable Values:</i>	\$X Not Applicable
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Maximum Out of Pocket for Drug EHB Benefits, Combined In/Out
<i>Data Source:</i>	Network, Family
<i>Comments:</i>	This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; this field will be blank for dental plans
<i>Variable Name:</i>	DEHBComblnnOonFamilyPerPersonMOOP
<i>Variable Definition:</i>	The dollar amount of the combined in/out of network, family per person out-of-pocket cost limit for drug EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Maximum Out of Pocket for Drug EHB Benefits, Combined In/Out Network, Family Per Person
<i>Allowable Values:</i>	\$X Not Applicable
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Maximum Out of Pocket for Drug EHB Benefits, Combined In/Out
<i>Data Source:</i>	Network, Family Per Person
<i>Comments:</i>	This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; this field will be blank for dental plans
<i>Variable Name:</i>	DEHBComblnnOonFamilyPerGroupMOOP
<i>Variable Definition:</i>	The dollar amount of the combined in/out of network, family per group out-of-pocket cost limit for drug EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Maximum Out of Pocket for Drug EHB Benefits, Combined In/Out Network, Family Per Group
<i>Allowable Values:</i>	\$X Not Applicable
<i>Data Source:</i>	Template field
<i>Field Name from</i>	Maximum Out of Pocket for Drug EHB Benefits, Combined In/Out
<i>Data Source:</i>	Network, Family Per Group
<i>Comments:</i>	This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: TEHBInnTier1IndividualMOOP
Variable Definition: The dollar amount of the tier 1 in network, individual out-of-pocket cost limit for medical and drug EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), In Network (Tier 1), Individual
Allowable Values: \$X
 Not Applicable
Data Source: Template field

Field Name from Data Source: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), In Network (Tier 1), Individual
Comments: This field is only applicable for plans with combined medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: TEHBInnTier1FamilyMOOP
Variable Definition: The dollar amount of the tier 1 in network, family out-of-pocket cost limit for medical and drug EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), In Network (Tier 1), Family
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), In Network (Tier 1), Family
Comments: This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with combined medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: TEHBInnTier1FamilyPerPersonMOOP
Variable Definition: The dollar amount of the tier 1 in network, family per person out-of-pocket cost limit for medical and drug EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), In Network (Tier 1), Family Per Person
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), In Network (Tier 1), Family Per Person
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with combined medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: TEHBInnTier1FamilyPerGroupMOOP

<i>Variable Definition:</i>	The dollar amount of the tier 1 in network, family per group out-of-pocket cost limit for medical and drug EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), In Network (Tier 1), Family Per Group
<i>Allowable Values:</i>	\$X Not Applicable
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), In Network (Tier 1), Family Per Group
<i>Comments:</i>	This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with combined medical and drug MOOP limits; this field will be blank for dental plans

<i>Variable Name:</i>	TEHBInnTier2IndividualMOOP
<i>Variable Definition:</i>	The dollar amount of the tier 2 in network, individual out-of-pocket cost limit for medical and drug EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), In Network (Tier 2), Individual
<i>Allowable Values:</i>	\$X Not Applicable
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), In Network (Tier 2), Individual
<i>Comments:</i>	This field is only applicable for plans with multiple in network tiers and combined medical and drug MOOP limits; this field will be blank for dental plans

<i>Variable Name:</i>	TEHBInnTier2FamilyMOOP
<i>Variable Definition:</i>	The dollar amount of the tier 2 in network, family out-of-pocket cost limit for medical and drug EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), In Network (Tier 2), Family
<i>Allowable Values:</i>	\$X Not Applicable
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), In Network (Tier 2), Family
<i>Comments:</i>	This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with multiple in network tiers and combined medical and drug MOOP limits; this field will be blank for dental plans

<i>Variable Name:</i>	TEHBInnTier2FamilyPerPersonMOOP
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Variable Definition: The dollar amount of the tier 2 in network, family per person out-of-pocket cost limit for medical and drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), In Network (Tier 2), Family Per Person

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), In Network (Tier 2), Family Per Person

Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with multiple in network tiers and combined medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: TEHBInnTier2FamilyPerGroupMOOP

Variable Definition: The dollar amount of the tier 2 in network, family per group out-of-pocket cost limit for medical and drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), In Network (Tier 2), Family Per Group

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), In Network (Tier 2), Family Per Group

Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with multiple in network tiers and combined medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: TEHBOutOfNetIndividualMOOP

Variable Definition: The dollar amount of the out of network, individual out-of-pocket cost limit for medical and drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), Out of Network, Individual

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), Out of Network, Individual

Comments: This field is only applicable for plans with combined medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: TEHBOutOfNetFamilyMOOP

Variable Definition: The dollar amount of the out of network, family out-of-pocket cost limit for medical and drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), Out of Network, Family

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), Out of Network, Family

Comments: This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with combined medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: TEHBOutOfNetFamilyPerPersonMOOP

Variable Definition: The dollar amount of the out of network, family per person out-of-pocket cost limit for medical and drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), Out of Network, Family Per Person

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), Out of Network, Family Per Person

Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with combined medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: TEHBOutOfNetFamilyPerGroupMOOP

Variable Definition: The dollar amount of the out of network, family per group out-of-pocket cost limit for medical and drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), Out of Network, Family Per Group

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), Out of Network, Family Per Group

Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with combined medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: TEHBComblnnOonIndividualMOOP

Variable Definition: The dollar amount of the combined in/out of network, individual out-of-pocket cost limit for medical and drug EHB benefits

Data Type: Text
Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), Combined In/Out Network, Individual
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),
Data Source: Combined In/Out Network, Individual
Comments: This field is only applicable for plans with combined medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: TEHBComblnnOonFamilyMOOP
Variable Definition: The dollar amount of the combined in/out of network, family out-of-pocket cost limit for medical and drug EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), Combined In/Out Network, Family
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),
Data Source: Combined In/Out Network, Family
Comments: This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with combined medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: TEHBComblnnOonFamilyPerPersonMOOP
Variable Definition: The dollar amount of the combined in/out of network, family per person out-of-pocket cost limit for medical and drug EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), Combined In/Out Network, Family Per Person
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),
Data Source: Combined In/Out Network, Family Per Person
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with combined medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: TEHBComblnnOonFamilyPerGroupMOOP
Variable Definition: The dollar amount of the combined in/out of network, family per group out-of-pocket cost limit for medical and drug EHB benefits
Data Type: Text
Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), Combined In/Out Network, Family Per Group

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), Combined In/Out Network, Family Per Group

Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with combined medical and drug MOOP limits; this field will be blank for dental plans

Variable Name: MEHBDedInnTier1Individual

Variable Definition: The dollar amount of the tier 1 in network, individual deductible for medical EHB benefits

Data Type: Text

Variable Label: Medical EHB Deductible, In Network (Tier 1), Individual

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Medical EHB Deductible, In Network (Tier 1), Individual

Comments: This field is only applicable for plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits

Variable Name: MEHBDedInnTier1Family

Variable Definition: The dollar amount of the tier 1 in network, family deductible for medical EHB benefits

Data Type: Text

Variable Label: Medical EHB Deductible, In Network (Tier 1), Family

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Medical EHB Deductible, In Network (Tier 1), Family

Comments: This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits

Variable Name: MEHBDedInnTier1FamilyPerPerson

Variable Definition: The dollar amount of the tier 1 in network, family per person deductible for medical EHB benefits

Data Type: Text

Variable Label: Medical EHB Deductible, In Network (Tier 1), Family Per Person

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Medical EHB Deductible, In Network (Tier 1), Family Per Person
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits

Variable Name: MEHBDedInnTier1FamilyPerGroup
Variable Definition: The dollar amount of the tier 1 in network, family per group deductible for medical EHB benefits
Data Type: Text
Variable Label: Medical EHB Deductible, In Network (Tier 1), Family Per Group
Allowable Values: \$X
Not Applicable
Data Source: Template field
Field Name from Data Source: Medical EHB Deductible, In Network (Tier 1), Family Per Group
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits

Variable Name: MEHBDedInnTier1Coinsurance
Variable Definition: The percentage used for the tier 1 in network coinsurance for medical EHB benefits, unless a different coinsurance is listed for a specific benefit
Data Type: Text
Variable Label: Medical EHB Deductible, In Network (Tier 1), Default Coinsurance
Allowable Values: Free text
Data Source: Template field
Field Name from Data Source: Medical EHB Deductible, In Network (Tier 1), Default Coinsurance
Comments: This field is only applicable for plans with separate medical and drug deductibles; this field will be blank for dental plans

Variable Name: MEHBDedInnTier2Individual
Variable Definition: The dollar amount of the tier 2 in network, individual deductible for medical EHB benefits
Data Type: Text
Variable Label: Medical EHB Deductible, In Network (Tier 2), Individual
Allowable Values: \$X
Not Applicable
Data Source: Template field
Field Name from Data Source: Medical EHB Deductible, In Network (Tier 2), Individual

Comments: This field is only applicable for plans with multiple in network tiers and separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits

Variable Name: MEHBDedInnTier2Family
Variable Definition: The dollar amount of the tier 2 in network, family deductible for medical EHB benefits
Data Type: Text
Variable Label: Medical EHB Deductible, In Network (Tier 2), Family
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Medical EHB Deductible, In Network (Tier 2), Family
Data Source:
Comments: This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with multiple in network tiers and separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits

Variable Name: MEHBDedInnTier2FamilyPerPerson
Variable Definition: The dollar amount of the tier 2 in network, family per person deductible for medical EHB benefits
Data Type: Text
Variable Label: Medical EHB Deductible, In Network (Tier 2), Family Per Person
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Medical EHB Deductible, In Network (Tier 2), Family Per Person
Data Source:
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with multiple in network tiers and separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits

Variable Name: MEHBDedInnTier2FamilyPerGroup
Variable Definition: The dollar amount of the tier 2 in network, family per group deductible for medical EHB benefits
Data Type: Text
Variable Label: Medical EHB Deductible, In Network (Tier 2), Family Per Group
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Medical EHB Deductible, In Network (Tier 2), Family Per Group
Data Source:
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with multiple in network tiers and

separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits

Variable Name: MEHBDedInnTier2Coinsurance
Variable Definition: The percentage used for the tier 2 in network coinsurance for medical EHB benefits, unless a different coinsurance is listed for a specific benefit
Data Type: Text
Variable Label: Medical EHB Deductible, In Network (Tier 2), Default Coinsurance
Allowable Values: Free text
Data Source: Template field
Field Name from Data Source: Medical EHB Deductible, In Network (Tier 2), Default Coinsurance
Comments: This field is only applicable for plans with multiple in network tiers and separate medical and drug deductibles; this field will be blank for dental plans

Variable Name: MEHBDedOutOfNetIndividual
Variable Definition: The dollar amount of the out of network, individual deductible for medical EHB benefits
Data Type: Text
Variable Label: Medical EHB Deductible, Out of Network, Individual
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Medical EHB Deductible, Out of Network, Individual
Comments: This field is only applicable for plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits

Variable Name: MEHBDedOutOfNetFamily
Variable Definition: The dollar amount of the out of network, family deductible for medical EHB benefits
Data Type: Text
Variable Label: Medical EHB Deductible, Out of Network, Family
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Medical EHB Deductible, Out of Network, Family
Comments: This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits

Variable Name: MEHBDedOutOfNetFamilyPerPerson

Variable Definition: The dollar amount of the out of network, family per person deductible for medical EHB benefits

Data Type: Text

Variable Label: Medical EHB Deductible, Out of Network, Family Per Person

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Medical EHB Deductible, Out of Network, Family Per Person

Data Source:

Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits

Variable Name: MEHBDedOutOfNetFamilyPerGroup

Variable Definition: The dollar amount of the out of network, family per group deductible for medical EHB benefits

Data Type: Text

Variable Label: Medical EHB Deductible, Out of Network, Family Per Group

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Medical EHB Deductible, Out of Network, Family Per Group

Data Source:

Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits

Variable Name: MEHBDedCombInnOonIndividual

Variable Definition: The dollar amount of the combined in/out of network, individual deductible for medical EHB benefits

Data Type: Text

Variable Label: Medical EHB Deductible, Combined In/Out of Network, Individual

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Medical EHB Deductible, Combined In/Out of Network, Individual

Data Source:

Comments: This field is only applicable for plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits

Variable Name: MEHBDedCombInnOonFamily

Variable Definition: The dollar amount of the combined in/out of network, family deductible for medical EHB benefits

Data Type: Text
Variable Label: Medical EHB Deductible, Combined In/Out of Network, Family
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Medical EHB Deductible, Combined In/Out of Network, Family
Comments: This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits

Variable Name: MEHBDedCombInnOonFamilyPerPerson
Variable Definition: The dollar amount of the combined in/out of network, family per person deductible for medical EHB benefits
Data Type: Text
Variable Label: Medical EHB Deductible, Combined In/Out of Network, Family Per Person
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Medical EHB Deductible, Combined In/Out of Network, Family Per Person
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits

Variable Name: MEHBDedCombInnOonFamilyPerGroup
Variable Definition: The dollar amount of the combined in/out of network, family per group deductible for medical EHB benefits
Data Type: Text
Variable Label: Medical EHB Deductible, Combined In/Out of Network, Family Per Group
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Medical EHB Deductible, Combined In/Out of Network, Family Per Group
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits

Variable Name: DEHBDedInnTier1Individual

Variable Definition: The dollar amount of the tier 1 in network, individual deductible for drug EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, In Network (Tier 1), Individual

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Drug EHB Deductible, In Network (Tier 1), Individual

Comments: This field is only applicable for plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits

Variable Name: DEHBDedInnTier1Family

Variable Definition: The dollar amount of the tier 1 in network, family deductible for drug EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, In Network (Tier 1), Family

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Drug EHB Deductible, In Network (Tier 1), Family

Comments: This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits

Variable Name: DEHBDedInnTier1FamilyPerPerson

Variable Definition: The dollar amount of the tier 1 in network, family per person deductible for drug EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, In Network (Tier 1), Family Per Person

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Drug EHB Deductible, In Network (Tier 1), Family Per Person

Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits

Variable Name: DEHBDedInnTier1FamilyPerGroup

Variable Definition: The dollar amount of the tier 1 in network, family per group deductible for drug EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, In Network (Tier 1), Family Per Group
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Drug EHB Deductible, In Network (Tier 1), Family Per Group
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits

Variable Name: DEHBDedInnTier1Coinsurance
Variable Definition: The percentage used for the tier 1 in network coinsurance for drug EHB benefits, unless a different coinsurance is listed for a specific benefit
Data Type: Text
Variable Label: Drug EHB Deductible, In Network (Tier 1), Default Coinsurance
Allowable Values: Free text
Data Source: Template field
Field Name from Data Source: Drug EHB Deductible, In Network (Tier 1), Default Coinsurance
Comments: This field is only applicable for plans with separate medical and drug deductibles; this field will be blank for dental plans

Variable Name: DEHBDedInnTier2Individual
Variable Definition: The dollar amount of the tier 2 in network, individual deductible for drug EHB benefits
Data Type: Text
Variable Label: Drug EHB Deductible, In Network (Tier 2), Individual
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Drug EHB Deductible, In Network (Tier 2), Individual
Comments: This field is only applicable for plans with multiple in network tiers and separate medical and drug deductibles; this field will be blank for dental plans

Variable Name: DEHBDedInnTier2Family
Variable Definition: The dollar amount of the tier 2 in network, family deductible for drug EHB benefits
Data Type: Text
Variable Label: Drug EHB Deductible, In Network (Tier 2), Family
Allowable Values: \$X
 Not Applicable
Data Source: Template field

Field Name from Data Source: Drug EHB Deductible, In Network (Tier 2), Family
Comments: This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with multiple in network tiers and separate medical and drug deductibles; this field will be blank for dental plans

Variable Name: DEHBDedInnTier2FamilyPerPerson
Variable Definition: The dollar amount of the tier 2 in network, family per person deductible for drug EHB benefits
Data Type: Text
Variable Label: Drug EHB Deductible, In Network (Tier 2), Family Per Person
Allowable Values: \$X
Not Applicable
Data Source: Template field
Field Name from Data Source: Drug EHB Deductible, In Network (Tier 2), Family Per Person
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with multiple in network tiers and separate medical and drug deductibles; this field will be blank for dental plans

Variable Name: DEHBDedInnTier2FamilyPerGroup
Variable Definition: The dollar amount of the tier 2 in network, family per group deductible for drug EHB benefits
Data Type: Text
Variable Label: Drug EHB Deductible, In Network (Tier 2), Family Per Group
Allowable Values: \$X
Not Applicable
Data Source: Template field
Field Name from Data Source: Drug EHB Deductible, In Network (Tier 2), Family Per Group
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with multiple in network tiers and separate medical and drug deductibles; this field will be blank for dental plans

Variable Name: DEHBDedInnTier2Coinsurance
Variable Definition: The percentage used for the tier 2 in network coinsurance for drug EHB benefits, unless a different coinsurance is listed for a specific benefit
Data Type: Text
Variable Label: Drug EHB Deductible, In Network (Tier 2), Default Coinsurance
Allowable Values: Free text
Data Source: Template field
Field Name from Data Source: Drug EHB Deductible, In Network (Tier 2), Default Coinsurance

Comments: This field is only applicable for plans with multiple in network tiers and separate medical and drug deductibles; this field will be blank for dental plans

Variable Name: DEHBDedOutOfNetIndividual
Variable Definition: The dollar amount of the out of network, individual deductible for drug EHB benefits
Data Type: Text
Variable Label: Drug EHB Deductible, Out of Network, Individual
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Drug EHB Deductible, Out of Network, Individual
Data Source:
Comments: This field is only applicable for plans with separate medical and drug deductibles; this field will be blank for dental plans

Variable Name: DEHBDedOutOfNetFamily
Variable Definition: The dollar amount of the out of network, family deductible for drug EHB benefits
Data Type: Text
Variable Label: Drug EHB Deductible, Out of Network, Family
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Drug EHB Deductible, Out of Network, Family
Data Source:
Comments: This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with separate medical and drug deductibles; this field will be blank for dental plans

Variable Name: DEHBDedOutOfNetFamilyPerPerson
Variable Definition: The dollar amount of the out of network, family per person deductible for drug EHB benefits
Data Type: Text
Variable Label: Drug EHB Deductible, Out of Network, Family Per Person
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Drug EHB Deductible, Out of Network, Family Per Person
Data Source:
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug deductibles; this field will be blank for dental plans

Variable Name: DEHBDedOutOfNetFamilyPerGroup

Variable Definition: The dollar amount of the out of network, family per group deductible for drug EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, Out of Network, Family Per Group

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Drug EHB Deductible, Out of Network, Family Per Group

Data Source:

Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug deductibles; this field will be blank for dental plans

Variable Name: DEHBDedCombInnOonIndividual

Variable Definition: The dollar amount of the combined in/out of network, individual deductible for drug EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, Combined In/Out of Network, Individual

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Drug EHB Deductible, Combined In/Out of Network, Individual

Data Source:

Comments: This field is only applicable for plans with separate medical and drug deductibles; this field will be blank for dental plans

Variable Name: DEHBDedCombInnOonFamily

Variable Definition: The dollar amount of the combined in/out of network, family deductible for drug EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, Combined In/Out of Network, Family

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Drug EHB Deductible, Combined In/Out of Network, Family

Data Source:

Comments: This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with separate medical and drug deductibles; this field will be blank for dental plans

Variable Name: DEHBDedCombInnOonFamilyPerPerson

Variable Definition: The dollar amount of the combined in/out of network, family per person deductible for drug EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, Combined In/Out of Network, Family Per Person

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Drug EHB Deductible, Combined In/Out of Network, Family Per Person

Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug deductibles; this field will be blank for dental plans

Variable Name: DEHBDedCombInnOonFamilyPerGroup

Variable Definition: The dollar amount of the combined in/out of network, family per group deductible for drug EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, Combined In/Out of Network, Family Per Group

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Drug EHB Deductible, Combined In/Out of Network, Family Per Group

Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with separate medical and drug deductibles; this field will be blank for dental plans

Variable Name: TEHBDedInnTier1Individual

Variable Definition: The dollar amount of the tier 1 in network, individual deductible for medical and drug EHB benefits

Data Type: Text

Variable Label: Combined Medical and Drug EHB Deductible, In Network (Tier 1), Individual

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Combined Medical and Drug EHB Deductible, In Network (Tier 1), Individual

Comments: This field is only applicable for plans with combined medical and drug deductibles; this field will be blank for dental plans

Variable Name: TEHBDedInnTier1Family

Variable Definition: The dollar amount of the tier 1 in network, family deductible for medical and drug EHB benefits

Data Type: Text

Variable Label: Combined Medical and Drug EHB Deductible, In Network (Tier 1), Family

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Combined Medical and Drug EHB Deductible, In Network (Tier 1), Family
Comments: This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with combined medical and drug deductibles; this field will be blank for dental plans

Variable Name: TEHBDedInnTier1FamilyPerPerson
Variable Definition: The dollar amount of the tier 1 in network, family per person deductible for medical and drug EHB benefits
Data Type: Text
Variable Label: Combined Medical and Drug EHB Deductible, In Network (Tier 1), Family Per Person
Allowable Values: \$X
Not Applicable
Data Source: Template field
Field Name from Data Source: Combined Medical and Drug EHB Deductible, In Network (Tier 1), Family Per Person
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with combined medical and drug deductibles; this field will be blank for dental plans

Variable Name: TEHBDedInnTier1FamilyPerGroup
Variable Definition: The dollar amount of the tier 1 in network, family per group deductible for medical and drug EHB benefits
Data Type: Text
Variable Label: Combined Medical and Drug EHB Deductible, In Network (Tier 1), Family Per Group
Allowable Values: \$X
Not Applicable
Data Source: Template field
Field Name from Data Source: Combined Medical and Drug EHB Deductible, In Network (Tier 1), Family Per Group
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with combined medical and drug deductibles; this field will be blank for dental plans

Variable Name: TEHBDedInnTier1Coinsurance
Variable Definition: The percentage used for the tier 1 in network coinsurance for medical and drug EHB benefits, unless a different coinsurance is listed for a specific benefit
Data Type: Text
Variable Label: Combined Medical and Drug EHB Deductible, In Network (Tier 1), Default Coinsurance
Allowable Values: Free text
Data Source: Template field
Field Name from Data Source: Combined Medical and Drug EHB Deductible, In Network (Tier 1), Default Coinsurance

<i>Comments:</i>	This field is only applicable for plans with combined medical and drug deductibles; this field will be blank for dental plans
<i>Variable Name:</i>	TEHBDedInnTier2Individual
<i>Variable Definition:</i>	The dollar amount of the tier 2 in network, individual deductible for medical and drug EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Combined Medical and Drug EHB Deductible, In Network (Tier 2), Individual
<i>Allowable Values:</i>	\$X Not Applicable
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Combined Medical and Drug EHB Deductible, In Network (Tier 2), Individual
<i>Comments:</i>	This field is only applicable for plans with multiple in network tiers and combined medical and drug deductibles; this field will be blank for dental plans
<i>Variable Name:</i>	TEHBDedInnTier2Family
<i>Variable Definition:</i>	The dollar amount of the tier 2 in network, family deductible for medical and drug EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Combined Medical and Drug EHB Deductible, In Network (Tier 2), Family
<i>Allowable Values:</i>	\$X Not Applicable
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Combined Medical and Drug EHB Deductible, In Network (Tier 2), Family
<i>Comments:</i>	This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with multiple in network tiers and combined medical and drug deductibles; this field will be blank for dental plans
<i>Variable Name:</i>	TEHBDedInnTier2FamilyPerPerson
<i>Variable Definition:</i>	The dollar amount of the tier 2 in network, family per person deductible for medical and drug EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Combined Medical and Drug EHB Deductible, In Network (Tier 2), Family Per Person
<i>Allowable Values:</i>	\$X Not Applicable
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Combined Medical and Drug EHB Deductible, In Network (Tier 2), Family Per Person
<i>Comments:</i>	This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with multiple in network tiers and

	combined medical and drug deductibles; this field will be blank for dental plans
<i>Variable Name:</i>	TEHBDedInnTier2FamilyPerGroup
<i>Variable Definition:</i>	The dollar amount of the tier 2 in network, family per group deductible for medical and drug EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Combined Medical and Drug EHB Deductible, In Network (Tier 2), Family Per Group
<i>Allowable Values:</i>	\$X Not Applicable
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Combined Medical and Drug EHB Deductible, In Network (Tier 2), Family Per Group
<i>Comments:</i>	This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with multiple in network tiers and combined medical and drug deductibles; this field will be blank for dental plans
<i>Variable Name:</i>	TEHBDedInnTier2Coinsurance
<i>Variable Definition:</i>	The percentage used for the tier 2 in network coinsurance for medical and drug EHB benefits, unless a different coinsurance is listed for a specific benefit
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Combined Medical and Drug EHB Deductible, In Network (Tier 2), Default Coinsurance
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Combined Medical and Drug EHB Deductible, In Network (Tier 2), Default Coinsurance
<i>Comments:</i>	This field is only applicable for plans with multiple in network tiers and combined medical and drug deductibles; this field will be blank for dental plans
<i>Variable Name:</i>	TEHBDedOutOfNetIndividual
<i>Variable Definition:</i>	The dollar amount of the out of network, individual deductible for medical and drug EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Combined Medical and Drug EHB Deductible, Out of Network, Individual
<i>Allowable Values:</i>	\$X Not Applicable
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Combined Medical and Drug EHB Deductible, Out of Network, Individual

Comments: This field is only applicable for plans with combined medical and drug deductibles; this field will be blank for dental plans

Variable Name: TEHBDedOutOfNetFamily
Variable Definition: The dollar amount of the out of network, family deductible for medical and drug EHB benefits
Data Type: Text
Variable Label: Combined Medical and Drug EHB Deductible, Out of Network, Family
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Combined Medical and Drug EHB Deductible, Out of Network, Family
Comments: This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with combined medical and drug deductibles; this field will be blank for dental plans

Variable Name: TEHBDedOutOfNetFamilyPerPerson
Variable Definition: The dollar amount of the out of network, family per person deductible for medical and drug EHB benefits
Data Type: Text
Variable Label: Combined Medical and Drug EHB Deductible, Out of Network, Family Per Person
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Combined Medical and Drug EHB Deductible, Out of Network, Family Per Person
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with combined medical and drug deductibles; this field will be blank for dental plans

Variable Name: TEHBDedOutOfNetFamilyPerGroup
Variable Definition: The dollar amount of the out of network, family per group deductible for medical and drug EHB benefits
Data Type: Text
Variable Label: Combined Medical and Drug EHB Deductible, Out of Network, Family Per Group
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Combined Medical and Drug EHB Deductible, Out of Network, Family Per Group
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with combined medical and drug deductibles; this field will be blank for dental plans

Variable Name: TEHBDedCombInnOonIndividual
Variable Definition: The dollar amount of the combined in/out of network, individual deductible for medical and drug EHB benefits
Data Type: Text
Variable Label: Combined Medical and Drug EHB Deductible, Combined In/Out of Network, Individual
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Combined Medical and Drug EHB Deductible, Combined In/Out of Network, Individual
Comments: This field is only applicable for plans with combined medical and drug deductibles; this field will be blank for dental plans

Variable Name: TEHBDedCombInnOonFamily
Variable Definition: The dollar amount of the combined in/out of network, family deductible for medical and drug EHB benefits
Data Type: Text
Variable Label: Combined Medical and Drug EHB Deductible, Combined In/Out of Network, Family
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Combined Medical and Drug EHB Deductible, Combined In/Out of Network, Family
Comments: This field is only available for the 2014 and 2015 datasets. This field is only applicable for plans with combined medical and drug deductibles; this field will be blank for dental plans

Variable Name: TEHBDedCombInnOonFamilyPerPerson
Variable Definition: The dollar amount of the combined in/out of network, family per person deductible for medical and drug EHB benefits
Data Type: Text
Variable Label: Combined Medical and Drug EHB Deductible, Combined In/Out of Network, Family Per Person
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Combined Medical and Drug EHB Deductible, Combined In/Out of Network, Family Per Person
Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with combined medical and drug deductibles; this field will be blank for dental plans

Variable Name: TEHBDedCombInnOonFamilyPerGroup

Variable Definition: The dollar amount of the combined in/out of network, family per group deductible for medical and drug EHB benefits

Data Type: Text

Variable Label: Combined Medical and Drug EHB Deductible, Combined In/Out of Network, Family Per Group

Allowable Values: \$X
Not Applicable

Data Source: Template field

Field Name from Data Source: Combined Medical and Drug EHB Deductible, Combined In/Out of Network, Family Per Group

Comments: This field is only available for the 2016 through 2019 datasets. This field is only applicable for plans with combined medical and drug deductibles; this field will be blank for dental plans

Variable Name: IsHSAEligible

Variable Definition: An indication that the insurance plan qualifies for a health savings account (HSA)

Data Type: Text

Variable Label: HSA Eligible

Allowable Values: Yes
No

Data Source: Template field

Field Name from Data Source: HSA Eligible

Comments: This field is not applicable for dental plans

Variable Name: HSAOrHRAEmployerContribution

Variable Definition: An indication that the employer makes an HSA or health reimbursement arrangement (HRA) contribution

Data Type: Text

Variable Label: HSA/HRA Employer Contribution

Allowable Values: Yes
No

Data Source: Template field

Field Name from Data Source: HSA/HRA Employer Contribution

Comments: This field is only applicable for medical plans in the SHOP market

Variable Name: HSAOrHRAEmployerContributionAmount

Variable Definition: The dollar amount per employee that the employer contributes to the HSA or HRA

Data Type: Text

Variable Label: HSA/HRA Employer Contribution Amount

Allowable Values: Free text

Data Source: Template field

<i>Field Name from Data Source:</i>	HSA/HRA Employer Contribution Amount
<i>Comments:</i>	This field is only applicable for medical plans in the SHOP market and only required if HSAOrHRAEmployerContribution field equals Yes

<i>Variable Name:</i>	URLForSummaryofBenefitsCoverage
<i>Variable Definition:</i>	The URL for the Summary of Benefits & Coverage
<i>Data Type:</i>	Text
<i>Variable Label:</i>	URL for Summary of Benefits & Coverage
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	URL for Summary of Benefits & Coverage
<i>Comments:</i>	This field is optional, so blank or zero values indicate a value was not provided

<i>Variable Name:</i>	PlanBrochure
<i>Variable Definition:</i>	The URL for the Plan Brochure
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Plan Brochure
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Plan Brochure
<i>Comments:</i>	This field is optional, so blank or zero values indicate a value was not provided

<i>Variable Name:</i>	RowNumber
<i>Variable Definition:</i>	Template row number associated with this data record
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Row Number
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	System-generated field
<i>Field Name from Data Source:</i>	RowNumber
<i>Comments:</i>	Unavailable for some templates. This field is only available for the 2014 through 2016 datasets.
