

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 (FFE) including states performing plan management functions, and State-based Exchanges that rely on the federal information technology platform for QHP eligibility and enrollment (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.

The Plan Attributes PUF (Plan-PUF) is one of the files that comprise the Exchange PUFs. The Plan-PUF contains plan variant-level data on maximum out of pocket payments, deductibles, health savings account (HSA) eligibility, and other plan attributes. These data originate from an issuer's Plans & Benefits template of the QHP Application (i.e., template field), or were generated by CCIIO for use in data processing (i.e., system-generated). The issuer 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 2022.

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, 2020, 2021, 2022
<i>Data Source:</i>	System-generated field
<i>Field Name from Data Source:</i>	Business Year
<i>Comments:</i>	N/A
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<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 Data Source:</i>	State Code
<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 Data Source:</i>	Issuer ID
<i>Comments:</i>	N/A
<i>Variable Name:</i>	IssuerMarketplaceMarketingName
<i>Variable Definition:</i>	Marketplace Marketing name of insurance company
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Issuer Marketplace Marketing Name
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	System-generated field
<i>Field Name from Data Source:</i>	Issuer Marketplace Marketing Name from issuer's HIOS administrative data. If this value is blank, reports Issuer Legal Name from HIOS administrative data.
<i>Comments:</i>	This field is only available for the 2021 and 2022 datasets.
<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 Data Source:</i>	Source Name
<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 Data Source:</i>	Version Number
<i>Comments:</i>	This field is only available for the 2014 through 2016 datasets.

<i>Variable Name:</i>	ImportDate
<i>Variable Definition:</i>	Date of data import
<i>Data Type:</i>	Date/Time
<i>Variable Label:</i>	Import Date
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	System-generated field
<i>Field Name from Data Source:</i>	Import Date
<i>Comments:</i>	N/A
<i>Variable Name:</i>	BenefitPackageId
<i>Variable Definition:</i>	Numeric identifier of benefit package
<i>Data Type:</i>	Text
<i>Variable Label:</i>	
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	System-generated field
<i>Field Name from Data Source:</i>	Benefit Package ID
<i>Comments:</i>	This field is only available for the 2014 through 2016 datasets.
<i>Variable Name:</i>	IssuerId2
<i>Variable Definition:</i>	Five-digit numeric code that identifies the issuer organization in HIOS
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Issuer ID
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	HIOS Issuer ID
<i>Comments:</i>	This field is only available for the 2014 through 2016 datasets.
<i>Variable Name:</i>	StateCode2
<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>	Template field
<i>Field Name from Data Source:</i>	Issuer State
<i>Comments:</i>	This field is only available for the 2014 through 2016 datasets.
<i>Variable Name:</i>	MarketCoverage
<i>Variable Definition:</i>	Categorical indicator of market coverage of plan
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Market Coverage
<i>Allowable Values:</i>	Individual SHOP (Small Group)
<i>Data Source:</i>	Template field

<i>Field Name from Data Source:</i>	Market Coverage
<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 Data Source:</i>	Dental Only Plan
<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 Data Source:</i>	TIN
<i>Comments:</i>	This field is only available for the 2014 through 2020 datasets.
<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 Data Source:</i>	HIOS Plan ID (Standard Component)
<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 Data Source:</i>	Plan Marketing Name
<i>Comments:</i>	N/A
<i>Variable Name:</i>	HIOSProductId
<i>Variable Definition:</i>	Seven-character alpha-numeric code that identifies an insurance product within HIOS

<i>Data Type:</i>	Text
<i>Variable Label:</i>	HIOS Product ID
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	HIOS Product ID
<i>Comments:</i>	N/A
<i>Variable Name:</i>	HPID
<i>Variable Definition:</i>	Identifies the insurance product using a National Health Plan Identifier
<i>Data Type:</i>	Text
<i>Variable Label:</i>	HPID (National Health Plan Identifier)
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	HPID
<i>Comments:</i>	This field is only available for the 2014 through 2020 datasets.
<i>Variable Name:</i>	NetworkId
<i>Variable Definition:</i>	Identifier for a health care provider network organization
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Network ID
<i>Allowable Values:</i>	List of Network IDs valid for the issuer
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Network ID
<i>Comments:</i>	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.
<i>Variable Name:</i>	ServiceAreaId
<i>Variable Definition:</i>	Identifier for a service area
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Service Area ID
<i>Allowable Values:</i>	List of Service Area IDs valid for the issuer
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Service Area ID
<i>Comments:</i>	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.
<i>Variable Name:</i>	FormularyId
<i>Variable Definition:</i>	Identifier for a drug formulary
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Formulary ID
<i>Allowable Values:</i>	List of Formulary IDs valid for the issuer

Data Source: Template field
Field Name from Data Source: Formulary ID
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 marketplace
Data Type: Text
Variable Label: New/Existing Plan
Allowable Values: New
Existing
Data Source: Template field
Field Name from Data Source: New/Existing Plan
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 Data Source: Plan Type
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
Bronze
Catastrophic
High
Low
Data Source: Template field

Field Name from Data Source: Level of Coverage
Comments: Values of High and Low are only applicable for dental plans; values other than High and Low are only applicable to medical plans.

Variable Name: DesignType
Variable Definition: An indication that the plan follows a standardized plan design for its metal level.
Data Type: Text
Variable Label: Design Type
Allowable Values: Not Applicable
Design Type 1
Design Type 2
Design Type 3
Design Type 4
Design Type 5
Data Source: Template field
Field Name from Data Source: Design Type
Comments: This field is only available for the 2017 through 2020 datasets.

Variable Name: UniquePlanDesign
Variable Definition: An indication that the health insurance plan has a unique design, for purposes of the actuarial value calculator
Data Type: Text
Variable Label: Unique Plan Design
Allowable Values: Yes
No
Data Source: Template field
Field Name from Data Source: Unique Plan Design
Comments: This field is not applicable for dental plans.

Variable Name: QHPNonQHPTypeld
Variable Definition: Categorical indicator of a plan's Exchange status (On the Exchange, Off the Exchange)
Data Type: Text
Variable Label: QHP/Non QHP
Allowable Values: On Exchange
Off Exchange
Both
Data Source: Template field
Field Name from Data Source: QHP/Non QHP
Comments: N/A

Variable Name: IsNoticeRequiredForPregnancy
Variable Definition: An indication of whether notice to the issuer is required before pregnancy-related benefits will be covered
Data Type: Text
Variable Label: Notice Required for Pregnancy
Allowable Values: Yes
 No
Data Source: Template field
Field Name from Data Source: Notice Required for Pregnancy
Comments: This field is not applicable for dental plans.

Variable Name: IsReferralRequiredForSpecialist
Variable Definition: An indication of whether pre-authorization is required before a specialist visit
Data Type: Text
Variable Label: Is a Referral Required for Specialist?
Allowable Values: Yes
 No
Data Source: Template field
Field Name from Data Source: Is a Referral Required for Specialist?
Comments: This field is not applicable for dental plans.

Variable Name: SpecialistRequiringReferral
Variable Definition: The types of specialists that require pre-authorization
Data Type: Text
Variable Label: Specialist Requiring a Referral
Allowable Values: Free text
Data Source: Template field
Field Name from Data Source: Specialist Requiring a Referral
Comments: This field is not applicable for dental plans; this field is only required if IsReferralRequiredForSpecialist field equals Yes.

Variable Name: PlanLevelExclusions
Variable Definition: The list of exclusions to the insurance plan that apply to all benefits
Data Type: Text
Variable Label: Plan Level Exclusions
Allowable Values: Free text
Data Source: Template field
Field Name from Data Source: Plan Level Exclusions
Comments: This field is optional; blanks indicate a value was not provided.

Variable Name: IndianPlanVariationEstimatedAdvancedPaymentAmountPerEnrollee
Variable Definition: Estimated dollar amount of cost-sharing reductions for eligible enrollees to be provided in the form of an advance payment to the issuer
Data Type: Text
Variable Label: Limited Cost Sharing Plan Variation - Estimated Advanced Payment
Allowable Values: Free text
Data Source: Template field
Field Name from Data Source: Limited Cost Sharing Plan Variation - Est Advanced Payment
Comments: This field is not applicable for dental plans; this field should be blank for medical plans.

Variable Name: CompositeRatingOffered
Variable Definition: An indication of whether issuers and employers can use the composite premium field.
Data Type: Text
Variable Label: Composite Rating Offered
Allowable Values: Yes
 No
Data Source: Template field
Field Name from Data Source: Does this plan offer Composite Rating?
Comments: This field is only available for the 2016 through 2022 datasets. This field equals "No" for individual market plans.

Variable Name: ChildOnlyOffering
Variable Definition: The types of adult and child enrollment options (Allows Adult and Child-only, Allows Adult-only, Allows Child-only) of an insurance plan
Data Type: Text
Variable Label: Child-Only Offering
Allowable Values: Allows Adult and Child-Only
 Allows Adult-Only
 Allows Child-Only
Data Source: Template field
Field Name from Data Source: Child-Only Offering
Comments: This field is not applicable for catastrophic plans.

Variable Name: ChildOnlyPlanId
Variable Definition: The HIOS Plan Identifier for the child-only insurance plan that corresponds to the insurance plan
Data Type: Text
Variable Label: Child Only Plan ID
Allowable Values: Free text
Data Source: Template field

Field Name from Data Source: Child Only Plan ID
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 Data Source: Tobacco Wellness Program Offered
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 2022 datasets.)
Data Source: Template field
Field Name from Data Source: Disease Management Programs Offered
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 Data Source: EHB Percent of Total Premium

<i>Comments:</i>	This field is only available for the 2016 through 2022 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 Data Source:</i>	EHB Percent of TP, Section IV
<i>Comments:</i>	This field is only available for the 2014 and 2015 dataset. This field is only valid for medical plans.
<i>Variable Name:</i>	EHBPediatricDentalApportionmentQuantity
<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 Data Source:</i>	EHB Apportionment for Pediatric Dental
<i>Comments:</i>	This field is not applicable for medical plans. This field is a dollar amount for the 2014 through 2016 datasets, and is a percentage for the 2017 through 2022 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 Data Source:</i>	Guaranteed vs. Estimated Rate
<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 Data Source:</i>	Plan Effective Date
<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 Data Source:</i>	Plan Expiration Date
<i>Comments:</i>	This field is optional, so blanks 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 Data Source:</i>	Out of Country Coverage
<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 Data Source:</i>	Out of Country Coverage Description
<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 for the 2014 through 2020 datasets; HIOS Supplemental Submission Module (SSM) for the 2020 through 2022 datasets.
<i>Field Name from Data Source:</i>	URL for Enrollment Payment
<i>Comments:</i>	This field is optional, so blanks 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 for the 2014 through 2020 datasets; HIOS Supplemental Submission Module (SSM) for the 2020 through 2022 datasets.

Field Name from Data Source: Formulary URL
Comments: This field is only available for the 2015 through 2022 datasets. This field is only valid for medical plans.

Variable Name: PlanId
Variable Definition: Seventeen-character alpha-numeric code that identifies an insurance plan's cost sharing reduction (CSR) variant within HIOS
Data Type: Text
Variable Label: Plan ID (Standard Component ID with Variant)
Allowable Values: Free text
Data Source: Template field
Field Name from Data Source: HIOS Plan ID (Standard Component + Variant)
Comments: Prepopulated in template; character count includes '-'

Variable Name: PlanVariantMarketingName
Variable Definition: Marketing name of the plan variation of the insurance plan
Data Type: Text
Variable Label: Plan Variant Marketing Name
Allowable Values: Free text
Data Source: Template field
Field Name from Data Source: Plan Variant Marketing Name
Comments: This field is only available for the 2017 through 2022 datasets.

Variable Name: CSRVariationType
Variable Definition: Name of the cost sharing reduction options offered for a health insurance plan
Data Type: Text
Variable Label: CSR Variation Type
Allowable Values: 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
Data Source: Template field
Field Name from Data Source: CSR Variation Type
Comments: Prepopulated in template.

Variable Name: IssuerActuarialValue
Variable Definition: The numeric actuarial value (AV) generated manually for an insurance plan by the issuer
Data Type: Percentage
Variable Label: Issuer Actuarial Value

<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Issuer Actuarial Value
<i>Comments:</i>	This field is only applicable for 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 Data Source:</i>	AV Calculator Output Number
<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 Data Source:</i>	Medical & Drug Deductibles Integrated?
<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 Data Source:</i>	Medical & Drug Maximum Out of Pocket Integrated?
<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

<i>Allowable Values:</i>	Yes No
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Multiple In Network Tiers?
<i>Comments:</i>	N/A
<i>Variable Name:</i>	FirstTierUtilization
<i>Variable Definition:</i>	The expected percentage of utilization for the first in network tier
<i>Data Type:</i>	Text
<i>Variable Label:</i>	First Tier Utilization
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	1st Tier Utilization
<i>Comments:</i>	N/A
<i>Variable Name:</i>	SecondTierUtilization
<i>Variable Definition:</i>	The expected percentage of utilization for the second in network tier, based on the value entered for the first tier
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Second Tier Utilization
<i>Allowable Values:</i>	100% minus First Tier Utilization
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	2nd Tier Utilization
<i>Comments:</i>	Calculated by template.
<i>Variable Name:</i>	SBCHavingaBabyDeductible
<i>Variable Definition:</i>	The dollar amount of the deductible for the sample Summary of Benefits & Coverage (SBC) scenario of having a baby
<i>Data Type:</i>	Text
<i>Variable Label:</i>	SBC Scenario, Having a Baby, Deductible
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	SBC Scenario, Having a Baby, Deductible
<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>	SBCHavingaBabyCopayment
<i>Variable Definition:</i>	The dollar amount of the copayment for the sample SBC scenario of having a baby
<i>Data Type:</i>	Text
<i>Variable Label:</i>	SBC Scenario, Having a Baby, Copayment
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	SBC Scenario, Having a Baby, 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>	SBCHavingaBabyCoinsurance
<i>Variable Definition:</i>	The dollar amount of the coinsurance for the sample SBC scenario of having a baby
<i>Data Type:</i>	Text
<i>Variable Label:</i>	SBC Scenario, Having a Baby, Coinsurance
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	SBC Scenario, Having a Baby, 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>	SBCHavingaBabyLimit
<i>Variable Definition:</i>	The dollar amount of the benefit limits or exclusions for the sample SBC scenario of having a baby
<i>Data Type:</i>	Text
<i>Variable Label:</i>	SBC Scenario, Having a Baby, Limit
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	SBC Scenario, Having a Baby, 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>	SBCHavingDiabetesDeductible
<i>Variable Definition:</i>	The dollar amount of the deductible for the sample SBC scenario of having diabetes
<i>Data Type:</i>	Text
<i>Variable Label:</i>	SBC Scenario, Having Diabetes, Deductible
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	SBC Scenario, Having Diabetes, Deductible
<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>	SBCHavingDiabetesCopayment
<i>Variable Definition:</i>	The dollar amount of the copayment for the sample SBC scenario of having diabetes
<i>Data Type:</i>	Text
<i>Variable Label:</i>	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 2022 datasets. 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
<i>Data Type:</i>	Text
<i>Variable Label:</i>	SBC Scenario, Treatment of a Simple Fracture, Copayment
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	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 2022 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 2022 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 2022 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.

Variable Name: InpatientCopaymentMaximumDays
Variable Definition: 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
Data Type: Text

Variable Label: Inpatient Copayment Maximum Days
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: Maximum Number of Days for Charging an Inpatient Copay?
Comments: This field is optional, so blanks or zero values indicate a value was not provided.

Variable Name: BeginPrimaryCareCostSharingAfterNumberOfVisits
Variable Definition: The maximum number of fully covered visits allowed, after which primary care cost sharing will begin
Data Type: Text
Variable Label: Begin Primary Care Cost-Sharing After Number Of Visits
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 Cost-Sharing After a Set Number of Visits?
Comments: This field is optional, so blanks or zero values indicate a value was not provided.

Variable Name: BeginPrimaryCareDeductibleCoinsuranceAfterNumberOfCopays
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, blanks 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 2022 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 2022 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

<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier 2), Individual
<i>Comments:</i>	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.
<i>Variable Name:</i>	MEHBInnTier2FamilyMOOP
<i>Variable Definition:</i>	The dollar amount of the tier 2 in network, family out-of-pocket cost limit for medical EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Maximum Out of Pocket for Medical EHB Benefits, 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 EHB Benefits, 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 separate medical and drug MOOP limits; this field contains the MOOP value for dental benefits.
<i>Variable Name:</i>	MEHBInnTier2FamilyPerPersonMOOP
<i>Variable Definition:</i>	The dollar amount of the tier 2 in network, family per person out-of-pocket cost limit for medical EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Maximum Out of Pocket for Medical EHB Benefits, 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>	Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier 2), Family Per Person
<i>Comments:</i>	This field is only available for the 2016 through 2022 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.
<i>Variable Name:</i>	MEHBInnTier2FamilyPerGroupMOOP
<i>Variable Definition:</i>	The dollar amount of the tier 2 in network, family per group out-of-pocket cost limit for medical EHB benefits
<i>Data Type:</i>	Text

<i>Variable Label:</i>	Maximum Out of Pocket for Medical EHB Benefits, 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>	Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier 2), Family Per Group
<i>Comments:</i>	This field is only available for the 2016 through 2022 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.

<i>Variable Name:</i>	MEHBOutOfNetIndividualMOOP
<i>Variable Definition:</i>	The dollar amount of the out of network, individual out-of-pocket cost limit for medical EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Maximum Out of Pocket for Medical EHB Benefits, Out of 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 Medical EHB Benefits, Out of Network, Individual
<i>Comments:</i>	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.

<i>Variable Name:</i>	MEHBOutOfNetFamilyMOOP
<i>Variable Definition:</i>	The dollar amount of the out of network, family out-of-pocket cost limit for medical EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Maximum Out of Pocket for Medical EHB Benefits, Out of Network, 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 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; 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 2022 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 2022 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: MEHBCombInnOonIndividualMOOP
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: MEHBCombInnOonFamilyMOOP
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 2022 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 2022 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 is 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 is 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

Data Source: Not Applicable
Field Name from Data Source: Template field
 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 2022 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; this field is 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 2022 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; this field is 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 is 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 is 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 2022 datasets. This field is only applicable for plans with multiple in network tiers and separate medical and drug MOOP limits; this field is 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 2022 datasets. This field is only applicable for plans with multiple in network tiers and separate medical and drug MOOP limits; this field is 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 is 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
Field Name from Data Source: Maximum Out of Pocket for Drug 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; this field is blank for dental plans.

Variable Name: DEHBOutOfNetFamilyPerPersonMOOP
Variable Definition: The dollar amount of the out of 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, 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 Drug EHB Benefits, Out of Network, Family Per Person
Comments: This field is only available for the 2016 through 2022 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; this field is blank for dental plans.

Variable Name: DEHBOutOfNetFamilyPerGroupMOOP
Variable Definition: 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 2022 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; this field is 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 is blank for dental plans.

<i>Variable Name:</i>	DEHBCombInnOonFamilyMOOP
<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 Data Source:</i>	Maximum Out of Pocket for Drug EHB Benefits, Combined In/Out 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 is blank for dental plans.

<i>Variable Name:</i>	DEHBCombInnOonFamilyPerPersonMOOP
<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

Data Type: Text
Variable Label: Maximum Out of Pocket for Drug 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 Drug EHB Benefits, Combined In/Out Network, Family Per Person
Comments: This field is only available for the 2016 through 2022 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; this field is blank for dental plans.

Variable Name: DEHBCombInnOonFamilyPerGroupMOOP
Variable Definition: The dollar amount of the combined in/out of 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, 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 Drug EHB Benefits, Combined In/Out Network, Family Per Group
Comments: This field is only available for the 2016 through 2022 datasets. This field is only applicable for plans with separate medical and drug MOOP limits; this field is 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 is 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

<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
<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
<i>Comments:</i>	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 is blank for dental plans.

<i>Variable Name:</i>	TEHBInnTier1FamilyPerPersonMOOP
<i>Variable Definition:</i>	The dollar amount of the tier 1 in network, family per person 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 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 Medical and Drug EHB Benefits (Total), In Network (Tier 1), Family Per Person
<i>Comments:</i>	This field is only available for the 2016 through 2022 datasets. This field is only applicable for plans with combined medical and drug MOOP limits; this field is blank for dental plans.

<i>Variable Name:</i>	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 2022 datasets. This field is only applicable for plans with combined medical and drug MOOP limits; this field is blank for dental plans.

Variable Name: TEHBInnTier2IndividualMOOP
Variable Definition: The dollar amount of the tier 2 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 2), 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 2), Individual
Comments: This field is only applicable for plans with multiple in network tiers and combined medical and drug MOOP limits; this field is blank for dental plans.

Variable Name: TEHBInnTier2FamilyMOOP
Variable Definition: The dollar amount of the tier 2 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 2), 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 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 combined medical and drug MOOP limits; this field is blank for dental plans.

Variable Name: TEHBInnTier2FamilyPerPersonMOOP
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 2022 datasets. This field is only applicable for plans with multiple in network tiers and combined medical and drug MOOP limits; this field is 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 2022 datasets. This field is only applicable for plans with multiple in network tiers and combined medical and drug MOOP limits; this field is 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 is 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 is 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 2022 datasets. This field is only applicable for plans with combined medical and drug MOOP limits; this field is 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 2022 datasets. This field is only applicable for plans with combined medical and drug MOOP limits; this field is blank for dental plans.

Variable Name: TEHBCombInnOonIndividualMOOP

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 Data Source: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), Combined In/Out Network, Individual
Comments: This field is only applicable for plans with combined medical and drug MOOP limits; this field is blank for dental plans.

Variable Name: TEHBCombInnOonFamilyMOOP
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 Data Source: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), 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 is blank for dental plans.

Variable Name: TEHBCombInnOonFamilyPerPersonMOOP
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 Data Source: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), Combined In/Out Network, Family Per Person
Comments: This field is only available for the 2016 through 2022 datasets. This field is only applicable for plans with combined medical and drug MOOP limits; this field is blank for dental plans.

Variable Name: TEHBCombInnOonFamilyPerGroupMOOP
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 2022 datasets. This field is only applicable for plans with combined medical and drug MOOP limits; this field is 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 2022 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 2022 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 is 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 Data Source: Medical 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; 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 Data Source: Medical EHB Deductible, In Network (Tier 2), Family Per Person
Comments: This field is only available for the 2016 through 2022 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 Data Source: Medical EHB Deductible, In Network (Tier 2), Family Per Group
Comments: This field is only available for the 2016 through 2022 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 Data Source: Medical EHB Deductible, Out of Network, Family Per Person
Comments: This field is only available for the 2016 through 2022 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 Data Source: Medical EHB Deductible, Out of Network, Family Per Group
Comments: This field is only available for the 2016 through 2022 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 Data Source: Medical EHB Deductible, Combined In/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: 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 2022 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 2022 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

<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Drug EHB Deductible, In Network (Tier 1), Individual
<i>Comments:</i>	This field is only applicable for plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for dental benefits.

<i>Variable Name:</i>	DEHBDedInnTier1Family
<i>Variable Definition:</i>	The dollar amount of the tier 1 in network, family deductible for drug EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Drug EHB Deductible, In Network (Tier 1), Family
<i>Allowable Values:</i>	\$X Not Applicable
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Drug EHB Deductible, In Network (Tier 1), 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 deductibles; for dental plans, this field contains the deductible for dental benefits.

<i>Variable Name:</i>	DEHBDedInnTier1FamilyPerPerson
<i>Variable Definition:</i>	The dollar amount of the tier 1 in network, family per person deductible for drug EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Drug EHB Deductible, In Network (Tier 1), Family Per Person
<i>Allowable Values:</i>	\$X Not Applicable
<i>Data Source:</i>	Template field
<i>Field Name from Data Source:</i>	Drug EHB Deductible, In Network (Tier 1), Family Per Person
<i>Comments:</i>	This field is only available for the 2016 through 2022 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.

<i>Variable Name:</i>	DEHBDedInnTier1FamilyPerGroup
<i>Variable Definition:</i>	The dollar amount of the tier 1 in network, family per group deductible for drug EHB benefits
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Drug EHB Deductible, 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>	Drug EHB Deductible, In Network (Tier 1), Family Per Group

Comments: This field is only available for the 2016 through 2022 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 is 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 is 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 is 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 2022 datasets. This field is only applicable for plans with multiple in network tiers and separate medical and drug deductibles; this field is 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 2022 datasets. This field is only applicable for plans with multiple in network tiers and separate medical and drug deductibles; this field is 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 is 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 Data Source: Drug EHB Deductible, Out of Network, Individual
Comments: This field is only applicable for plans with separate medical and drug deductibles; this field is 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 Data Source: 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 separate medical and drug deductibles; this field is 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 Data Source: Drug EHB Deductible, Out of Network, Family Per Person
Comments: This field is only available for the 2016 through 2022 datasets. This field is only applicable for plans with separate medical and drug deductibles; this field is 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 Data Source: Drug EHB Deductible, Out of Network, Family Per Group

Comments: This field is only available for the 2016 through 2022 datasets. This field is only applicable for plans with separate medical and drug deductibles; this field is blank for dental plans.

Variable Name: DEHBDedComblnnOonIndividual
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 Data Source: Drug EHB Deductible, Combined In/Out of Network, Individual
Comments: This field is only applicable for plans with separate medical and drug deductibles; this field is blank for dental plans.

Variable Name: DEHBDedComblnnOonFamily
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 Data Source: 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 separate medical and drug deductibles; this field is blank for dental plans.

Variable Name: DEHBDedComblnnOonFamilyPerPerson
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 2022 datasets. This field is only applicable for plans with separate medical and drug deductibles; this field is 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 2022 datasets. This field is only applicable for plans with separate medical and drug deductibles; this field is 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 is 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 is 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 2022 datasets. This field is only applicable for plans with combined medical and drug deductibles; this field is 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 2022 datasets. This field is only applicable for plans with combined medical and drug deductibles; this field is 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
Comments: This field is only applicable for plans with combined medical and drug deductibles; this field is blank for dental plans.

Variable Name: TEHBDedInnTier2Individual
Variable Definition: The dollar amount of the tier 2 in network, individual deductible for medical and drug EHB benefits
Data Type: Text
Variable Label: Combined Medical and Drug EHB Deductible, In Network (Tier 2), Individual
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Combined Medical and Drug EHB Deductible, In Network (Tier 2), Individual
Comments: This field is only applicable for plans with multiple in network tiers and combined medical and drug deductibles; this field is blank for dental plans.

Variable Name: TEHBDedInnTier2Family
Variable Definition: The dollar amount of the tier 2 in network, family deductible for medical and drug EHB benefits
Data Type: Text
Variable Label: Combined Medical and Drug EHB Deductible, In Network (Tier 2), Family
Allowable Values: \$X
 Not Applicable
Data Source: Template field
Field Name from Data Source: Combined Medical and 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 combined medical and drug deductibles; this field is blank for dental plans.

Variable Name: TEHBDedInnTier2FamilyPerPerson
Variable Definition: The dollar amount of the tier 2 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 2), 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 2), Family Per Person

Comments: This field is only available for the 2016 through 2022 datasets. This field is only applicable for plans with multiple in network tiers and combined medical and drug deductibles; this field is blank for dental plans.

Variable Name: TEHBDedInnTier2FamilyPerGroup
Variable Definition: The dollar amount of the tier 2 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 2), 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 2), Family Per Group
Comments: This field is only available for the 2016 through 2022 datasets. This field is only applicable for plans with multiple in network tiers and combined medical and drug deductibles; this field is blank for dental plans.

Variable Name: TEHBDedInnTier2Coinsurance
Variable Definition: 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
Data Type: Text
Variable Label: Combined Medical and Drug EHB Deductible, In Network (Tier 2), Default Coinsurance
Allowable Values: Free text
Data Source: Template field
Field Name from Data Source: Combined Medical and Drug EHB Deductible, In Network (Tier 2), Default Coinsurance
Comments: This field is only applicable for plans with multiple in network tiers and combined medical and drug deductibles; this field is blank for dental plans.

Variable Name: TEHBDedOutOfNetIndividual
Variable Definition: The dollar amount of the out of network, individual deductible for medical and drug EHB benefits
Data Type: Text
Variable Label: Combined Medical and Drug EHB Deductible, Out of Network, Individual
Allowable Values: \$X
 Not Applicable

Data Source: Template field
Field Name from Data Source: 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 is 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 is 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 2022 datasets. This field is only applicable for plans with combined medical and drug deductibles; this field is 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 2022 datasets. This field is only applicable for plans with combined medical and drug deductibles; this field is 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 is 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 is 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 2022 datasets. This field is only applicable for plans with combined medical and drug deductibles; this field is blank for dental plans.

Variable Name: TEHBDedComblnnOonFamilyPerGroup

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 2022 datasets. This field is only applicable for plans with combined medical and drug deductibles; this field is blank for dental plans.

Variable Name: IsHSAEligible

Variable Definition: An indication that the insurance plan variant 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.

<i>Variable Name:</i>	HSAOrHRAEmployerContributionAmount
<i>Variable Definition:</i>	The dollar amount per employee that the employer contributes to the HSA or HRA
<i>Data Type:</i>	Text
<i>Variable Label:</i>	HSA/HRA Employer Contribution Amount
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	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 for the 2014 through 2020 datasets; HIOS Supplemental Submission Module (SSM) for the 2020 through 2022 datasets.
<i>Field Name from Data Source:</i>	URL for Summary of Benefits & Coverage
<i>Comments:</i>	This field is optional, so blanks 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 for the 2014 through 2020 datasets; HIOS Supplemental Submission Module (SSM) for the 2020 through 2022 datasets.
<i>Field Name from Data Source:</i>	Plan Brochure
<i>Comments:</i>	This field is optional, so blanks 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



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Field Name from Data Source: RowNumber

Comments: Unavailable for some templates. This field is only available for the 2014 through 2016 datasets.
