Centers for Medicare & Medicaid Services (CMS)
Center for Consumer Information and Insurance Oversight (CCIIO)

State-based Exchange Public Use Files (SBE PUF) Data Dictionary for PY 2024 Plan PUF Attributes

Overview of PY 2024 Plan PUF

CMS CCIIO is releasing the State-based Exchange (SBE) PUF to improve the transparency and increase access to the SBE data. The SBE PUF includes Qualified Health Plans (QHPs) and stand-alone dental plans (SADPs) offered in states which operate their own Marketplaces that do not rely on the Federal information technology platform for QHP eligibility and enrollment functionality. This includes states which operate their own Small Business Health Options Programs (SHOP).

The Plan Attributes PUF (Plan-PUF) is one of six files that make up the SBE PUF. The Plan-PUF contains plan level data on maximum out-of-pocket payments, deductibles, cost sharing, Health Savings Account (HSA) eligibility, formulary ID, and other plan attributes. These data originate from the Plans & Benefits template (i.e., template field), an Excel-based form used by issuers to describe their plans in the QHP/SADP application process and were provided by the National Association of Insurance Commissioners (NAIC) by extracting the information from their System for Electronic Rate and Form Filing (SERFF). 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 Plan & Benefits template or enter these values manually.

This data dictionary describes the variables contained in the Plan-PUF for each SBE. Each record relates to one issuer's insurance plan. The Plan-PUF is available for SBEs for plan year (PY) 2024.

Variable Attributes

Field	Content
Variable Name (PUF Header):	BusinessYear (BUSINESS YEAR)
Variable Definition:	Year for which plan provides coverage to enrollees.
Data Type:	Text
Variable Label:	Business Year
Allowable Values:	2024
Data Source:	System-generated field
Comments:	N/A
Variable Name (PUF Header):	stateCode (STATE CODE)
Variable Definition:	Two-character state abbreviation indicating the state where the plan is offered

Field	Content
Data Type:	Text
Variable Label:	State Code
Allowable Values:	All state abbreviations for those states that operate SBEs
Data Source:	System-generated field
Comments:	N/A
Variable Name (PUF Header):	issuerName (ISSUER NAME)
Variable Definition:	The business name of the issuer organization
Data Type:	Text
Variable Label:	Issuer Name
Allowable Values:	Free text
Data Source:	Template field
Comments:	N/A
Variable Name (PUF Header):	issuerID (ISSUER ID)
Variable Definition:	Five-digit numeric code that identifies the issuer organization in the Health Insurance Oversight System (HIOS)
Data Type:	Text
Variable Label:	Issuer ID
Allowable Values:	Free text
Data Source:	Template field
Comments:	N/A
Variable Name (PUF Header):	SourceName (SOURCE NAME)
Variable Definition:	Categorical identifier of source of the data import
Data Type:	Text
Variable Label:	Source Name
Allowable Values:	SERFF
Data Source:	System-generated field
Comments:	SERFF is the only source used data in the SBE PUF
Variable Name (PUF Header):	VersionNum (VERSION NUMBER)
Variable Definition:	Integer Value for version of data import

Field	Content
Data Type:	Text
Variable Label:	Version Number
Allowable Values:	Free text
Data Source:	System-generated field
Comments:	This field is available for SBE QHP PUFs through 2021.
Variable Name (PUF Header):	ImportDate (IMPORT DATE)
Variable Definition:	Date of the Data Import
Data Type:	Date/Time
Variable Label:	Import Date
Allowable Values:	Free text
Data Source:	System-generated field
Comments:	N/A
Variable Name (PUF Header):	BenefitsPackageID (BENEFIT PACKAGE ID)
Variable Definition:	Numeric identifier of benefit package
Data Type:	Text
Variable Label:	Benefit Package ID
Allowable Values:	Free text
Data Source:	Template field
Comments:	This field is available for SBE QHP PUFs through 2021.
Variable Name (PUF Header):	marketCoverage (MARKET COVERAGE)
Variable Definition:	Categorical indicator of market coverage of plan
Data Type:	Text
Variable Label:	Market Coverage
Allowable Values:	• Individual • SHOP (Small Group)
Data Source:	Template field
Comments:	N/A
Variable Name (PUF Header):	dentalOnlyPlan (DENTAL ONLY PLAN)

Field	Content
Variable Definition:	Categorical indicator of dental-only status of plan
Data Type:	Text
Variable Label:	Dental-only Plan Indicator
Allowable Values:	• Yes • No
Data Source:	Template field
Comments:	N/A
Variable Name (PUF Header):	TIN (TIN)
Variable Definition:	Tax ID Number of the Issuer
Data Type:	Text
Variable Label:	Tax Identification Number
Allowable Values:	Free text
Data Source:	Template Field
Comments:	Values for this field are only available for the 2014 through 2020 datasets.
Variable Name (PUF Header):	standardComponentID (STANDARD COMPONENT ID)
Variable Definition:	Fourteen-character alpha-numeric code that identifies an insurance plan within HIOS. The Standard Component ID is made up of the following: • A five-digit Issuer ID (HIOS) • Two-character State ID • Three-digit Product Number • Four-digit Standard Component Number
Data Type:	Text
Variable Label:	Standard Component ID
Allowable Values:	Free text
Data Source:	Template Field
Comments:	N/A
Variable Name (PUF Header):	planMarketingName (PLAN MARKETING NAME)
Variable Definition:	Marketing name of insurance plan
Data Type:	Text
Variable Label:	Plan Marketing Name

Field	Content
Allowable Values:	Free text
Data Source:	Template Field
Comments:	N/A
Variable Name (PUF Header):	hiosProductId (HIOS PRODUCT ID)
Variable Definition:	Seven-character alpha-numeric code that identifies an insurance product within HIOS
Data Type:	Text
Variable Label:	HIOS Product ID
Allowable Values:	Free text
Data Source:	Template Field
Comments:	N/A
Variable Name (PUF Header):	HPID (HPID)
Variable Definition:	Identifies the insurance plan using the National Health Plan Identifier
Data Type:	Text
Variable Label:	National Health Plan Identifier
Allowable Values:	Free text
Data Source:	Template field
Comments:	This field is only available for the 2014 through 2020 datasets.
Variable Name (PUF Header):	networkId (NETWORK ID)
Variable Definition:	Identifier for a health care provider network organization
Data Type:	Text
Variable Label:	Network ID
Allowable Values:	List of Network IDs valid for the issuer
Data Source:	Template Field
Comments:	Network IDs can be imported from the Network ID template based on the number of networks and the issuer's state or entered manually by issuer.
Variable Name (PUF Header):	serviceAreaId (SERVICE AREA ID)
Variable Definition:	Identifier for a Service Area
Data Type:	Text

Field	Content
Variable Label:	Service Area ID
Allowable Values:	List of Service Area IDs valid for the issuer
Data Source:	Template Field
Comments:	Service area IDs can be imported from the service area template based on the number of service areas and the issuer's state, or entered manually by the issuer
Variable Name (PUF Header):	formularyId (FORMULARY ID)
Variable Definition:	Identifier for a drug formulary
Data Type:	Text
Variable Label:	Formulary ID
Allowable Values:	List of Formulary IDs valid for the issuer
Data Source:	Template Field
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 the issuer
Variable Name (PUF Header):	isNewPlan (IS IT A NEW PLAN)
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
Comments:	N/A
Variable Name (PUF Header):	planType (PLAN TYPE)
Variable Definition:	Type of Insurance Plan
Data Type:	Text
Variable Label:	Plan Type
Allowable Values:	• Indemnity • PPO • HMO • POS • EPO

Field	Content
Data Source:	Template field
Comments:	N/A
Variable Name (PUF Header):	metalLevel (METAL LEVEL)
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
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 (PUF Header):	uniquePlanDesign (UNIQUE PLAN DESIGN)
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
Comments:	This field is not applicable to dental plans
Variable Name (PUF Header):	qhpNonQHPTypeId (QHP NONQHP TYPE ID)
Variable Definition:	Categorical indicator of a plan's exchange marketplace (On the exchange, Off the exchange)
Data Type:	Text
Variable Label:	QHP/Non QHP

Field	Content
Allowable Values:	• On Exchange • Off Exchange • Both
Data Source:	Template field
Comments:	When the value is Both, refer to the Plan ID column for more information about whether a plan is on/off exchange. The Plan ID includes the 2-digit variant, where "00" is for off Exchange plans and "01 - 06" is for on - Exchange plans.
Variable Name (PUF Header):	isNoticeRequiredForPregnancy (IS NOTICE REQUIRED FOR PREGNACY)
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
Comments:	This field is not applicable for dental plans
Variable Name (PUF Header):	isReferralRequiredForSpecialist (IS REFERRAL REQUIRED FOR SPECIALIST)
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
Comments:	This field is not applicable to dental plans
Variable Name (PUF Header):	specialistRequiringReferral (SPECIALIST REQUIRING REFERRAL)
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
Comments:	This field is not applicable to dental plans; this field is only required if IsReferralRequiredForSpecialist field equals Yes

Field	Content
Variable Name (PUF Header):	planLevelExclusions (PLAN LEVEL EXCLUSIONS)
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
Comments:	This field is optional; blanks indicate a value was not provided
Variable Name (PUF Header):	isHSAEligible (IS HSA ELIGIBLE)
Variable Definition:	An indication that the insurance plan qualifies for a health savings account (HSA)
Data Type:	Text
Variable Label:	Is HSA Eligible?
Allowable Values:	• Yes • No
Data Source:	Template field
Comments:	N/A
Variable Name (PUF Header):	hsaOrHRAEmployerContribution (HSA OR HRA EMPLOYER CONTRIBUTION)
Variable Definition:	An indication that the employer makes an HSA or Health Reimbursement Arrangement (HRA) contribution
Data Type:	Text
Variable Label:	HSA or HRA Employer Contribution?
Allowable Values:	• Yes • No
Data Source:	Template field
Comments:	N/A
Variable Name (PUF Header):	hsaOrHRAEmployerContributionAmount (HSA OR HRA EMPLOYER CONTRIBUTION AMOUNT)
Variable Definition:	The dollar amount per employee that the employer contributes to the HSA or HRA
Data Type:	Text
Variable Label:	HSA or HRA Employer Contribution Amount
Allowable Values:	Free text

Field	Content
Data Source:	Template field
Comments:	N/A
Variable Name (PUF Header):	childOnlyOffering (CHILD ONLY OFFERING)
Variable Definition:	The types of 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
Comments:	N/A
Variable Name (PUF Header):	childOnlyPlanId (CHILD ONLY PLAN ID)
Variable Definition:	The HIOS Plan Identifier for the child-only insurance plan that corresponds to this insurance plan
Data Type:	Text
Variable Label:	Child Only Plan ID
Allowable Values:	Free text
Data Source:	Template field
Comments:	This field is only applicable for adult-only plans and does not apply to catastrophic plans
Variable Name (PUF Header):	wellnessProgramOffered (WELLNESS PROGRAM OFFERED)
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 Programs Offered
Allowable Values:	• Yes • No
Data Source:	Template field
Comments:	This field is not applicable for dental plans

Field	Content
Variable Name (PUF Header):	diseaseManagementProgramsOffered (DISEASE MANAGEMENT PROGRAMS OFFERED)
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
Data Source:	Template field
Comments:	This field is not applicable for dental plans
Variable Name (PUF Header):	ehbPediatricDentalApportionmentQuantity (EHB PEDIATRIC DENTAL APPORTIONMENT QUANTITY)
Variable Definition:	The dollar amount or percentage of the EHB apportionment for Pediatric Dental
Data Type:	Text
Variable Label:	EHB Pediatric Dental Apportionment Quantity
Allowable Values:	Free text
Data Source:	N/A
Comments:	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 2024 datasets.
Variable Name (PUF Header):	isGuaranteedRate (IS GUARANTEED RATE?)
Variable Definition:	An indication of whether the rates for the insurance plan are guaranteed or estimated
Data Type:	Text
Variable Label:	Guaranteed Rate
Allowable Values:	Guaranteed Rate Estimated Rate
Data Source:	Template field
Comments:	This field is not applicable for medical plans

Field	Content
Variable Name (PUF Header):	specialtyDrugMaximumCoinsurance (SPECIALITY DRUG MAXIMUM COINSURANCE)
Variable Definition:	The maximum dollar value of coinsurance for specialty high cost drugs
Data Type:	Text
Variable Label:	Specialty Drug Maximum Coinsurance (SPECIALITY DRUG MAXIMUM COINSURANCE)
Allowable Values:	Free text
Data Source:	Template field
Comments:	This field is optional; blanks indicate that a value was not provided
Variable Name (PUF Header):	inpatientCopaymentMaximumDays (INPATIENT COPAYMENT MAXIMUM DAYS)
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
Comments:	This field is optional, so blanks or zero values indicate a value was not provided
Variable Name (PUF Header):	beginPrimaryCareCostSharingAfterNumberOfVisits (BEGIN PRIMARY CARE COST SHARING AFTER NUMBER OF VISITS)
Variable Definition:	The maximum number of fully covered visits allowed, after which primary care cost sharing will begin
Data Type:	Text

Field	Content
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
Comments:	This field is optional, so blanks or zero values indicate a value was not provided
Variable Name (PUF Header):	beginPrimaryCareDeductibleCoinsuranceAfterNumberOfCopays (BEGIN PRIMARY CARE DEDUCTIBLE COINSURANCE AFTER NUMBER OF COPAYS)
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
Comments:	This field is optional, blanks or zero values indicate a value was not provided
Variable Name (PUF Header):	planEffectiveDate (PLAN EFFECTIVE DATE)
Variable Definition:	The activation date of enrollment coverage on an insurance plan

Field	Content
Data Type:	Text
Variable Label:	Plan Effective Date (PLAN EFFECTIVE DATE)
Allowable Values:	Free text
Data Source:	Template field
Comments:	N/A
Variable Name (PUF Header):	planExpirationDate (PLAN EXPIRATION DATE)
Variable Definition:	The end date of plan selection for enrollment on an insurance plan
Data Type:	Text
Variable Label:	Plan Expiration Date
Allowable Values:	Free text
Data Source:	Template field
Comments:	This field is optional, so blanks or zero values indicate a value was not provided
Variable Name (PUF Header):	outofCountryCoverage (OUT OF COUNTRY COVERAGE)
Variable Definition:	Indicates whether out of country coverage is provided for health services
Data Type:	Text
Variable Label:	Out of Country Coverage
Allowable Values:	• Yes • No
Data Source:	Template field
Comments:	N/A
Variable Name (PUF Header):	outOfCountryCoverageDescription (OUT OF COUNTRY COVERAGE DESCRIPTION)
Variable Definition:	The conditions under which out of country health services are covered
Data Type:	Text
Variable Label:	Out of Country Coverage Description
Allowable Values:	Free text
Data Source:	Template field
Comments:	This field is only applicable for plans that offer out of country coverage
Variable Name (PUF Header):	outOfServiceAreaCoverage (OUT OF SERVICE AREA COVERAGE)

Field	Content
Variable Definition:	Indicates whether out of service area coverage is provided
Data Type:	Text
Variable Label:	Out of Service Area Coverage
Allowable Values:	Yes No
Data Source:	Template field
Comments:	N/A
Variable Name (PUF Header):	outOfServiceAreaCoverageDescription (OUT OF SERVICE AREA COVERAGE DESCRIPTION)
Variable Definition:	The conditions under which out of service area health services are covered
Data Type:	Text
Variable Label:	Out of Service Area Coverage Description
Allowable Values:	Free text
Data Source:	Template field
Comments:	This field is only applicable for plans that offer out of service area coverage.
Variable Name (PUF Header):	nationalNetwork (NATIONAL NETWORK)
Variable Definition:	Indicates whether the insurance plan is supported by a national network of health service provider companies
Data Type:	Text
Variable Label:	National Network
Allowable Values:	● Yes ● No
Data Source:	Template field
Comments:	N/A
Variable Name (PUF Header):	URLForSummaryOfBenefitsCoverage (URL FOR SUMMARY OF BENEFITS COVERAGE)
Variable Definition:	The URL for the summary of benefits and coverage
Data Type:	Text
Variable Label:	URL for Summary of Benefits and Coverage
Allowable Values:	Free text
Data Source:	Template field

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Field	Content
Comments:	Template field for the 2014 through 2020 datasets; HIOS Supplemental Submission Module (SSM) for the 2020 through 2023 datasets; Marketplace Plan Management System (MPMS) for the 2024 dataset.
Variable Name (PUF Header):	URLForEnrollmentPayment (URL FOR ENROLLMENT PAYMENT)
Variable Definition:	The URL for enrollment payment
Data Type:	Text
Variable Label:	URL for Enrollment Payment
Allowable Values:	Free text
Data Source:	Template field
Comments:	Template field for the 2014 through 2020 datasets; HIOS Supplemental Submission Module (SSM) for the 2020 through 2023 datasets; Marketplace Plan Management System (MPMS) for the 2024 dataset.
Variable Name (PUF Header):	PlanBrochure (PLAN BROCHURE)
Variable Definition:	The URL for the plan brochure
Data Type:	Text
Variable Label:	URL for Plan Brochure
Allowable Values:	Free text
Data Source:	Template field
Comments:	Template field for the 2014 through 2020 datasets; HIOS Supplemental Submission Module (SSM) for the 2020 through 2023 datasets; Marketplace Plan Management System (MPMS) for the 2024 dataset.
Variable Name (PUF Header):	FormularyURL (FORMULARY URL)
Variable Definition:	The URL for the prescription drug formulary associated with this plan
Data Type:	Text
Variable Label:	Formulary URL
Allowable Values:	Free text
Data Source:	Template field
Comments:	Template field for the 2014 through 2020 datasets; HIOS Supplemental Submission Module (SSM) for the 2020 through 2023 datasets; Marketplace Plan Management System (MPMS) for the 2024 dataset. This field is only available for the 2015 through 2024 datasets. This field is only valid for medical plans.

Field	Content
Variable Name (PUF Header):	planId (PLAN ID)
Variable Definition:	The Plan ID identifies an insurance plan's cost sharing reduction (CSR) variant within HIOS and is comprised of the 14 - digit HIOS Standard Component ID and the 2-digit variant, where "00" is for off Exchange plans and "01 - 06" is for on - Exchange plans).
Data Type:	Text
Variable Label:	Plan ID (Standard Component ID with variant)
Allowable Values:	Free text
Data Source:	Template field
Comments:	Prepopulated in template; variant identification follows these rules. See CSR Variation Type for name. ● 00 = off-Exchange variant ● 01 = on-Exchange variant, or standard plan ● 02 = Zero Cost Sharing Plan Variation ● 03 = Limited Cost Sharing Plan Variation ● 04 = 73% AV Level Silver Plan Cost-sharing Reduction (CSR) plan variant ● 05 = 87% AV Level Silver Plan CSR ● 06 = 94% AV Level Silver Plan CSR https://www.qhpcertification.cms.gov/s/Plans%20and%20Benefits%20FAQs
Variable Name (PUF Header):	csrVariationType (CSR VARIATION TYPE)
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 ● Standard High Off Exchange Plan ● Standard High On Exchange Plan ● Standard Low Off Exchange Plan ● Standard Low On Exchange Plan ● Standard Silver Off Exchange Plan ● Standard Silver On Exchange Plan ● Standard Gold Off Exchange Plan

Field	Content
	• Standard Gold On Exchange Plan • Standard Bronze Off Exchange Plan • Standard Bronze On Exchange Plan • Standard Expanded Bronze Off Exchange Plan • Standard Expanded Bronze On Exchange Plan • Standard Platinum Off Exchange Plan • Standard Platinum On Exchange Plan • Standard Catastrophic On Exchange Plan • Standard Catastrophic Off Exchange Plan
Data Source:	Template field
Comments:	Prepopulated in template; see Plan ID for variant associations.
Variable Name (PUF Header):	issuerActuarialValue (ISSUER ACTUARIAL VALUE)
Variable Definition:	The numeric actuarial value (AV) generated manually for an insurance plan by the issuer
Data Type:	Text
Variable Label:	Issuer Actuarial Value
Allowable Values:	Free text
Data Source:	Template field
Comments:	This field is only applicable for dental plans and plans with a unique plan design
Variable Name (PUF Header):	avCalculatorOutputNumber (AV CALCULATOR OUTPUT NUMBER)
Variable Definition:	The numeric AV generated by the template's AV Calculator for an insurance plan
Data Type:	Text
Variable Label:	AV Calculator Output Number
Allowable Values:	Free text
Data Source:	Template field
Comments:	This field is only applicable for medical plans and plans that do not have a unique plan design
Variable Name (PUF Header):	medicalDrugDeductiblesIntegrated (MEDICAL DRUG DEDUCTIBLES INTEGRATED)
Variable Definition:	An indication of whether the insurance plan specifies that the medical and drug deductibles are combined into one deductible
Data Type:	Text

Field	Content
Variable Label:	Medical Drug Deductibles Integrated
Allowable Values:	• Yes • No
Data Source:	Template field
Comments:	This field is not applicable for dental plans
Variable Name (PUF Header):	medicalDrugmaximumOutOfPocketIntegrated (MEDICAL DRUG MAXIMUM OUT OF POCKET INTEGRATED)
Variable Definition:	An indication of whether the insurance plan specifies that the medical and drug maximum out of pocket (MOOP) limits are combined into one limit
Data Type:	Text
Variable Label:	Medical Drug Maximum Out of Pocket Integrated
Allowable Values:	Free text
Data Source:	Template field
Comments:	This field is not applicable for dental plans
Variable Name (PUF Header):	multipleNetworkTiers (MULTIPLE NETWORK TIERS)
Variable Definition:	An indication of whether there are two or more in network tiers
Data Type:	Text
Variable Label:	Multiple Network Tiers
Allowable Values:	• Yes • No
Data Source:	Template field
Comments:	N/A
Variable Name (PUF Header):	firstTierUtilization (FIRST TIER UTILIZATION)
Variable Definition:	The expected percentage of utilization for the first in network tier
Data Type:	Text
Variable Label:	First Tier Utilization
Allowable Values:	Free text
Data Source:	Template field
Comments:	N/A
Variable Name (PUF Header):	secondTierUtilization (SECOND TIER UTILIZATION)

Field	Content
Variable Definition:	The expected percentage of utilization for the second in network tier
Data Type:	Text
Variable Label:	Second Tier Utilization
Allowable Values:	Free text
Data Source:	Template field
Comments:	N/A
Variable Name (PUF Header):	mehbInnTier1IndividualMoop (MEHB INN TIER 1 INDIVIDUAL MOOP)
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
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 (PUF Header):	mehbInnTier1FamilyMoop (MEHB INN TIER 1 FAMILY MOOP)
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
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 (PUF Header):	mehbInnTier2IndividualMOOP (MEHB INN TIER 2 INDIVIDUAL MOOP)
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

Field	Content
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
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 (PUF Header):	mehbInnTier2FamilyMOOP (MEHB INN TIER 2 FAMILY MOOP)
Variable Definition:	The dollar amount of the tier 2 in network, family out-of-pocket cost limit for medical EHB benefits
Data Type:	Text
Variable Label:	Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier 2), family
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
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 (PUF Header):	mehbOutOfNetIndividualMOOP (MEHB OUT OF NET INDIVIDUAL MOOP)
Variable Definition:	The dollar amount of the out of network, individual out-of-pocket cost limit for medical EHB benefits
Data Type:	Text
Variable Label:	Maximum Out of Pocket for Medical EHB Benefits, Out of Network, Individual
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
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 (PUF Header):	mehbOutOfNetFamilyMOOP (MEHB OUT OF NET FAMILY MOOP)
Variable Definition:	The dollar amount of the out of network, family out-of-pocket cost limit for medical EHB benefits
Data Type:	Text
Variable Label:	Maximum Out of Pocket for Medical EHB Benefits, Out of Network, Family
Allowable Values:	• $X • Not Applicable
Data Source:	Template field

Field	Content
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 (PUF Header):	mehbCombInnOonIndividualMOOP (MEHB COMB INN OON INDIVIDUAL MOOP)
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 of Network, Individual
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
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 (PUF Header):	mehbCombInnOonFamilyMOOP (MEHB COMB INN OON FAMILY MOOP)
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 of Network, Family
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
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 (PUF Header):	dehbInnTier1IndividualMOOP (DEHB INN TIER 1 INDIVIDUAL MOOP)
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	Content
Comments:	This field is only applicable for plans with separate medical and drug MOOP limits; this field will be blank for dental plans
Variable Name (PUF Header):	dehbInnTier2IndividualMOOP (DEHB INN TIER 2 INDIVIDUAL MOOP)
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
Comments:	This field is only applicable for plans with separate medical and drug MOOP limits; this field will be blank for dental benefits
Variable Name (PUF Header):	dehbInnTier1FamilyMOOP (DEHB INN TIER 1 FAMILY MOOP)
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
Comments:	This field is available for SBE QHP PUFs through 2022.
Variable Name (PUF Header):	dehbInnTier2FamilyMOOP (DEHB INN TIER 2 FAMILY MOOP)
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
Comments:	This field is only applicable for plans with separate medical and drug MOOP limits; this field will be blank for dental benefits

Field	Content
Variable Name (PUF Header):	dehbOutOfNetIndividualMOOP (DEHB OUT OF NET INDIVIDUAL MOOP)
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
Comments:	This field is only applicable for plans with separate medical and drug MOOP limits; this field will be blank for dental benefits
Variable Name (PUF Header):	dehbOutOfNetFamilyMOOP (DEHB OUT OF NET FAMILY MOOP)
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
Comments:	This field is only applicable for plans with separate medical and drug MOOP limits; this field will be blank for dental benefits
Variable Name (PUF Header):	dehbCombInnOonIndividualMOOP (DEHB COMB INN OON INDIVIDUAL MOOP)
Variable Definition:	The dollar amount of the combined in/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, Combined In/Out of Network, Individual
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
Comments:	This field is only applicable for plans with separate medical and drug MOOP limits; this field will be blank for dental benefits
Variable Name (PUF Header):	dehbCombInnOonFamilyMOOP (DEHB COMB INN OON FAMILY MOOP)

Field	Content
Variable Definition:	The dollar amount of the combined in/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, Combined In/Out of Network, Family
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
Comments:	This field is only applicable for plans with separate medical and drug MOOP limits; this field will be blank for dental benefits
Variable Name (PUF Header):	tehbInnTier1IndividualMOOP (TEHB INN TIER 1 INDIVIDUAL MOOP)
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, In Network (Tier 1), Individual
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
Comments:	This field is only applicable for plans with combined medical and drug MOOP limits; for dental plans, this field will be blank
Variable Name (PUF Header):	tehbInnTier1FamilyMOOP (TEHB INN TIER 1 FAMILY MOOP)
Variable Definition:	The dollar amount of the tier 1 in network, family out-of-pocket cost limit for medical and drug EHB benefits
Data Type:	Text
Variable Label:	Maximum Out of Pocket for Medical and Drug EHB Benefits, In Network (Tier 1), Family
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
Comments:	This field is only applicable for plans with combined medical and drug MOOP limits; for dental plans, this field will be blank
Variable Name (PUF Header):	tehbInnTier2IndividualMOOP (TEHB INN TIER 2 INDIVIDUAL MOOP)

Field	Content
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, In Network (Tier 2), Individual
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
Comments:	This field is only applicable for plans with multiple in network tiers and combined medical and drug MOOP limits; for dental plans, this field will be blank
Variable Name (PUF Header):	tehbInnTier2FamilyMOOP (TEHB INN TIER 2 FAMILY MOOP)
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, In Network (Tier 2), family
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
Comments:	This field is only applicable for plans with multiple in network tiers and combined medical and drug MOOP limits; for dental Plans, this field will be blank.
Variable Name (PUF Header):	tehbOutOfNetIndividualMOOP (TEHB OUT OF NET INDIVIDUAL MOOP)
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, Out of Network, Individual
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
Comments:	This field is only applicable for plans with combined medical and drug MOOP limits; for dental plans, this field will be blank
Variable Name (PUF Header):	tehbOutOfNetFamilyMOOP (TEHB OUT OF NET FAMILY MOOP)

Field	Content
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, Out of Network, Family
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
Comments:	This field is only applicable for plans with combined medical and drug MOOP limits; for dental plans, this field will be blank
Variable Name (PUF Header):	tehbCombInnOonIndividualMOOP (TEHB COMB INN OON INDIVIDUAL MOOP)
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, Combined In/Out of Network, Individual
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
Comments:	This field is only applicable for plans with combined medical and drug MOOP limits; for dental plans, this field will be blank
Variable Name (PUF Header):	tehbCombInnOonFamilyMOOP (TEHB COMB INN OON FAMILY MOOP)
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, Combined In/Out of Network, Family
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
Comments:	This field is only applicable for plans with combined medical and drug MOOP limits; for dental plans, this field will be blank
Variable Name (PUF Header):	mehbDedInnTier1Individual (MEHB DED INN TIER1 INDIVIDUAL)
Variable Definition:	The dollar amount of the tier 1 in network, individual deductible for medical EHB

Field	Content
	benefits
Data Type:	Text
Variable Label:	Medical EHB Deductible, In Network (Tier 1), Individual
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
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 (PUF Header):	mehbDedInnTier1Family (MEHB DED INN TIER1 FAMILY)
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
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 (PUF Header):	mehbDedInnTier1Coinsurance (MEHB DED INN TIER1 COINSURNACE)
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
Comments:	This field is only applicable for plans with separate medical and drug deductibles; this field will be blank for dental plans
Variable Name (PUF Header):	mehbDedInnTier2Individual (MEHB DED INN TIER2 INDIVIDUAL)
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

Field	Content
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
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 (PUF Header):	mehbDedInnTier2Family (MEHB DED INN TIER2 FAMILY)
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
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 (PUF Header):	mehbDedInnTier2Coinsurance (MEHB DED INN TIER2 COINSURANCE)
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
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 (PUF Header):	mehbDedOutOfNetIndividual (MEHB DED OUT OF NET INDIVIDUAL)
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	Content
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 (PUF Header):	mehbDedOutOfNetFamily (MEHB DED OUT OF NET FAMILY)
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
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 (PUF Header):	mehbDedCombInnOonIndividual (MEHB DED COMB INN OON INDIVIDUAL)
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
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 (PUF Header):	mehbDedCombInnOonFamily (MEHB DED COMB INN OON FAMILY)
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
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

Field	Content
Variable Name (PUF Header):	dehbInnTier1IndividualMoop (DEHB DED INN TIER1 INDIVIDUAL)
Variable Definition:	The dollar amount of the tier 1 in network, individual deductible for drug EHB benefits
Data Type:	Text
Variable Label:	Drug EHB Deductible, In Network (Tier 1), Individual
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
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 (PUF Header):	dehbDedInnTier1Family (DEHB DED INN TIER1 FAMILY)
Variable Definition:	The dollar amount of the tier 1 in network, family deductible for drug EHB benefits
Data Type:	Text
Variable Label:	Drug EHB Deductible, In Network (Tier 1), Family
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
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 (PUF Header):	dehbDedInnTier1Coinsurance (DEHB DED INN TIER1 COINSURNACE)
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
Comments:	This field is only applicable for plans with separate medical and drug deductibles; this field will be blank for dental plans
Variable Name (PUF Header):	dehbDedInnTier2Individual (DEHB DED INN TIER2 INDIVIDUAL)
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

Field	Content
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
Comments:	This field is only applicable for plans with multiple in network tiers and separate medical and drug deductibles; for dental plans, this field will be blank for dental benefits
Variable Name (PUF Header):	dehbDedInnTier2Family (DEHB DED INN TIER2 FAMILY)
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
Comments:	This field is only applicable for plans with multiple in network tiers and separate medical and drug deductibles; for dental plans, this field will be blank for dental benefits
Variable Name (PUF Header):	dehbDedInnTier2Coinsurance (DEHB DED INN TIER2 COINSURANCE)
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
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 (PUF Header):	dehbDedOutOfNetIndividual (DEHB DED OUT OF NET INDIVIDUAL)
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	Content
Comments:	This field is only applicable for plans with separate medical and drug deductibles; this field will be blank for dental plans
Variable Name (PUF Header):	dehbDedOutOfNetFamily (DEHB DED OUT OF NET FAMILY)
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
Comments:	This field is only applicable for plans with separate medical and drug deductibles; this field will be blank for dental plans
Variable Name (PUF Header):	dehbDedCombInnOonIndividual (DEHB DED COMB INN OON INDIVIDUAL)
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
Comments:	This field is only applicable for plans with separate medical and drug deductibles; for dental plans, this field will be blank.
Variable Name (PUF Header):	dehbDedCombInnOonFamily (DEHB DED COMB INN OON FAMILY)
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
Comments:	This field is only applicable for plans with separate medical and drug deductibles; for dental plans, this field will be blank

Field	Content
Variable Name (PUF Header):	tehbInnTier1IndividualMoop (TEHB DED INN TIER 1 INDIVIDUAL)
Variable Definition:	The dollar amount of the tier 1 in network, individual deductible for medical and drug EHB benefits
Data Type:	Text
Variable Label:	Medical and Drug EHB Deductible, In Network (Tier 1), Individual
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
Comments:	This field is only applicable for plans with combined medical and drug deductibles; for dental plans, this field will be blank
Variable Name (PUF Header):	tehbDedInnTier1Family (TEHB DED INN TIER 1 FAMILY)
Variable Definition:	The dollar amount of the tier 1 in network, family deductible for medical and drug EHB benefits
Data Type:	Text
Variable Label:	Medical and Drug EHB Deductible, In Network (Tier 1), Family
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
Comments:	This field is only applicable for plans with combined medical and drug deductibles; for dental plans, this field will be blank
Variable Name (PUF Header):	tehbDedInnTier1Coinsurance (TEHB DED INN TIER 1 COINSURANCE)
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:	Medical and Drug EHB Deductible, In Network (Tier 1), Default Coinsurance
Allowable Values:	Free text
Data Source:	Template field
Comments:	This field is only applicable for plans with combined medical and drug deductibles; this field will be blank for dental plans
Variable Name (PUF Header):	tehbDedInnTier2Individual (TEHB DED INN TIER 2 INDIVIDUAL)
Variable Definition:	The dollar amount of the tier 2 in network, individual deductible for medical and drug EHB benefits

Field	Content
Data Type:	Text
Variable Label:	Medical and Drug EHB Deductible, In Network (Tier 2), Individual
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
Comments:	This field is only applicable for plans with multiple in network tiers and separate medical and drug deductibles; for dental plans, this field will be blank for dental benefits
Variable Name (PUF Header):	tehbDedInnTier2Family (TEHB DED INN TIER 2 FAMILY)
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
Comments:	This field is only applicable for plans with multiple in network tiers and combined medical and drug deductibles; for dental plans, this field will be blank
Variable Name (PUF Header):	tehbDedInnTier2Coinsurance (TEHB DED INN TIER 2 COINSURANCE)
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:	Medical and Drug EHB Deductible, In Network (Tier 2), Default Coinsurance
Allowable Values:	Free text
Data Source:	Template field
Comments:	This field is only applicable for plans with multiple in network tiers and combined medical and drug deductibles; this field will be blank for dental plans
Variable Name (PUF Header):	tehbDedOutOfNetIndividual (TEHB DED OUT OF NET INDIVIDUAL)
Variable Definition:	The dollar amount of the out of network, individual deductible for medical and drug EHB benefits
Data Type:	Text
Variable Label:	Medical EHB Deductible, Out of Network, Individual

Field	Content
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
Comments:	This field is only applicable for plans with combined medical and drug deductibles; for dental plans, this field will be blank
Variable Name (PUF Header):	tehbDedOutOfNetFamily (TEHB DED OUT OF NET FAMILY)
Variable Definition:	The dollar amount of the out of network, family deductible for medical and drug EHB benefits
Data Type:	Text
Variable Label:	Medical and Drug EHB Deductible, Out of Network, Family
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
Comments:	This field is only applicable for plans with combined medical and drug deductibles; for dental plans, this field will be blank
Variable Name (PUF Header):	tehbDedCombInnOonIndividual (TEHB DED OUT COMB INN OON INDIVIDUAL)
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:	Medical and Drug EHB Deductible, Combined In/Out of Network, Individual
Allowable Values:	• $X • Not Applicable
Data Source:	Template field
Comments:	This field is only applicable for plans with combined medical and drug deductibles; for dental plans, this field will be blank
Variable Name (PUF Header):	tehbDedCombInnOonFamily (TEHB DED OUT COMB INN OON FAMILY)
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:	Medical and Drug EHB Deductible, Combined In/Out of Network, Family
Allowable Values:	• $X • Not Applicable
Data Source:	Template field

Field	Content
Comments:	This field is only applicable for plans with combined medical and drug deductibles; for dental plans, this field will be blank
Variable Name (PUF Header):	sbcHavingABabyDeductible (SBC HAVING A BABY DEDUCTIBLE)
Variable Definition:	The dollar amount of the deductible for the sample Summary of Benefits & Coverage (SBC) scenario of having a baby
Data Type:	Text
Variable Label:	SBC Scenario, having a Baby, Deductible
Allowable Values:	Free Text
Data Source:	Template field
Comments:	This field is optional; blanks indicate a value was not provided; this field is not applicable for dental plans
Variable Name (PUF Header):	sbcHavingABabyCopayment (SBC HAVING A BABY COPAYMENT)
Variable Definition:	The dollar amount of the copayment for the sample SBC scenario of having a baby
Data Type:	Text
Variable Label:	SBC Scenario, having a Baby, Copayment
Allowable Values:	Free Text
Data Source:	Template field
Comments:	This field is optional; blanks indicate a value was not provided; this field is not applicable for dental plans
Variable Name (PUF Header):	sbcHavingABabyCoinsurance (SBC HAVING A BABY COINSURANCE)
Variable Definition:	The dollar amount of the coinsurance for the sample SBC scenario of having a baby
Data Type:	Text
Variable Label:	SBC Scenario, having a Baby, Coinsurance
Allowable Values:	Free Text
Data Source:	Template field
Comments:	This field is optional; blanks indicate a value was not provided; this field is not applicable for dental plans
Variable Name (PUF Header):	sbcHavingABabyLimit (SBC HAVING A BABY LIMIT)
Variable Definition:	The dollar amount of the benefits limit for the sample SBC scenario of having a baby
Data Type:	Text

Field	Content
Variable Label:	SBC Scenario, having a Baby, Limit
Allowable Values:	Free Text
Data Source:	Template field
Comments:	This field is optional; blanks indicate a value was not provided; this field is not applicable for dental plans
Variable Name (PUF Header):	sbcHavingDiabetesDeductible (SBC HAVING DIABETES DEDUCTIBLE)
Variable Definition:	The dollar amount of the deductible for the sample SBC scenario of having diabetes
Data Type:	Text
Variable Label:	SBC Scenario, having Diabetes, Deductible
Allowable Values:	Free Text
Data Source:	Template field
Comments:	This field is optional; blanks indicate a value was not provided; this field is not applicable for dental plans
Variable Name (PUF Header):	sbcHavingDiabetesCopayment (SBC HAVING DIABETES COPAYMENT)
Variable Definition:	The dollar amount of the copayment for the sample SBC scenario of having diabetes
Data Type:	Text
Variable Label:	SBC Scenario, having Diabetes, Copayment
Allowable Values:	Free Text
Data Source:	Template field
Comments:	This field is optional; blanks indicate a value was not provided; this field is not applicable for dental plans
Variable Name (PUF Header):	sbcHavingDiabetesCoinsurance (SBC HAVING DIABETES COINSURANCE)
Variable Definition:	The dollar amount of the coinsurance for the sample SBC scenario of having diabetes
Data Type:	Text
Variable Label:	SBC Scenario, having Diabetes, Coinsurance
Allowable Values:	Free Text
Data Source:	Template field
Comments:	This field is optional; blanks indicate a value was not provided; this field is not applicable for dental plans

Field	Content
Variable Name (PUF Header):	sbcHavingDiabetesLimit (SBC HAVING DIABETES LIMIT)
Variable Definition:	The dollar amount of the benefit limit for the sample SBC scenario of having diabetes
Data Type:	Text
Variable Label:	SBC Scenario, having Diabetes, Limit
Allowable Values:	Free Text
Data Source:	Template field
Comments:	This field is optional; blanks indicate a value was not provided; this field is not applicable for dental plans
Variable Name (PUF Header):	ehbPercentPremium (EHB PERCENT PREMIUM)
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 Premium
Allowable Values:	0 -1, blank
Data Source:	Template field
Comments:	This field is only available for the 2016 through 2024 datasets. This field is only valid for medical plans and is not required for catastrophic plans.
Variable Name (PUF Header):	DesignType (PLAN DESIGN TYPE)
Variable Definition:	An indication of whether a plan is a Standardized Plan Option for its metal level, plan type and service area.
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
Comments:	N/A
Variable Name (PUF Header):	CompositeRatingOffered (INSURANCE PLAN COMPOSITE PREMIUM AVAILABLE INDICATOR)

Field	Content
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
Comments:	This field is only available for the 2016 through 2024 datasets. This field equals "No" for individual market plans.
Variable Name (PUF Header):	planVariantMarketingName (PLAN VARIANT MARKETING NAME)
Variable Definition:	Marketing name of the plan variation of the insurance plan
Data Type:	Template field
Variable Label:	Plan Variant Marketing Name
Allowable Values:	Free text
Data Source:	Template field
Comments:	This field is only available for the 2017 through 2024 datasets.
Variable Name (PUF Header):	sbcHavingSimpleFractureDeductible (SBC HAVING SIMPLE FRACTURE DEDUCTIBLE)
Variable Definition:	The dollar amount of the deductible for the sample SBC scenario of treatment of a simple fracture
Data Type:	Text
Variable Label:	SBC Scenario, Treatment of a Simple Fracture, Deductible
Allowable Values:	Free text
Data Source:	Template field
Comments:	This field is only available for the 2017 through 2024 datasets. This field is optional; blanks indicate a value was not provided; this field is not applicable to dental plans.
Variable Name (PUF Header):	sbcHavingSimpleFractureCopayment (SBC HAVING SIMPLE FRACTURE COPAYMENT)
Variable Definition:	The dollar amount of the copayment for the sample SBC scenario of treatment of a simple fracture
Data Type:	Text
Variable Label:	SBC Scenario, Treatment of a Simple Fracture, Copayment

Field	Content
Allowable Values:	Free text
Data Source:	Template field
Comments:	This field is only available for the 2017 through 2024 datasets. This field is optional; blanks indicate a value was not provided; this field is not applicable to dental plans.
Variable Name (PUF Header):	sbcHavingSimpleFractureCoinsurance (SBC HAVING SIMPLE FRACTURE COINSURANCE)
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
Comments:	This field is only available for the 2017 through 2024 datasets. This field is optional; blanks indicate a value was not provided; this field is not applicable to dental plans.
Variable Name (PUF Header):	sbcHavingSimpleFractureLimit (SBC HAVING SIMPLE FRACTURE LIMIT)
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
Comments:	This field is only available for the 2017 through 2024 datasets. This field is optional; blanks indicate a value was not provided; this field is not applicable to dental plans.