All fields with an asterisk (*) are required. To validate the template, press Validate button or Ctrl + Shift + 1. To finalize the template, press Finalize button or Ctrl + Shift + F. Centers for Medicare & Medicaid Services (CMS) Qualified Health Plan (QHP) Transparency in Coverage Reporting

Plan Year 2025 v5.0

General Information	
Was this Issuer on the Exchange in 2023?*	Yes
SADP Only?*	No
Issuer HIOS ID*	70285
Issuer Level Data	
Number of Issuer Level In-Network Claims with Date(s) of Service (DOS) in 2023 That Were Also Received in Calendar Year 2023*	303,728
Number of Issuer Level In-Network Claims with DOS in 2023 That Were Also Denied in Calendar Year 2023*	52,781
Number of Issuer Level In-Network Claims with DOS in 2023 That Were Also Resubmitted in Calendar Year 2023*	13,305
Number of Issuer Level Out-of-Network Claims with DOS in 2023 That Were Also Received in Calendar Year 2023*	92,011
Number of Issuer Level Out-of-Network Claims with DOS in 2023 That Were Also Denied in Calendar Year 2023*	32,092
Number of Issuer Level Out-of-Network Claims with DOS in 2023 That Were Also Resubmitted in Calendar Year 2023*	7,588
Number of Issuer Level Internal Appeals Filed in Calendar Year 2023*	603
Number of Issuer Level Internal Appeals Overturned from Calendar Year 2023 Appeals*	290
Number of Issuer Level External Appeals Filed in Calendar Year 2023*	0
Number of Issuer Level External Appeals Overturned from Calendar Year 2023 Appeals*	0
Notes:	
Please enter any comments/notes here	

Please enter any comments/notes here. The Discourse statement. For Discourse statement. A coming to the raper work reduction Act of 1993, no persons are required to respond to a contection or monimation unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1310. The time required to complete this information collection is estimated to average 2520 minutes, including the time to review instructions, search existing data resources, gather the data needd, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate() or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PAR Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850. ****CMS Disclosure**** Please do not send applications, claims, payments, medical records or any documents containing ensitive information to the PAR Reports Clearance Office. Please note that any correspondence not pertaining to the information collection burden approved under the associated OMB control number listed on this form will not be reviewed, forwarded, or retained. If you have questions or concerns regarding where to submit your documents, please contact the Marketplace Call Center at 1-800-318-2596 (TTY: 1-855-889-4325).