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 +

resilve button or Cot + Shift + F.

Centers for Medicare & Medicaid Services (CMS) Qualified Health Man (QMP) Transparency in Coverage Reporting

Centers for Medicare & Medicaid Services (CMS) Qualified Health Plan (QHP) Transparency in Coverage Reporting																	
Plan Year 2025																	
Plan Level Data																	
										Number of Plan Level			Number of Plan Level	Number of Plan Level			1
							Number of Plan Level	Number of Plan Level		Claims with DOS in	Number of Plan Level		Claims with DOS in	Claims with DOS in			
	Number of Plan Level In						Claims with DOS in	Claims with DOS in	Number of Plan Level	2023 That Were Also	Claims with DOS in	Number of Plan Level	2023 That Were Also	2023 That Were Also	Number of Plan Level	Number of Plan Level	
	Network Claims with	Number of Plan Level In	Number of Plan Level In	Number of Plan Level	Number of Plan Level	Number of Plan Level	2023 That Were Also	2023 That Were Also	Claims with DOS in	Denied Due to Lack of	2023 That Were Also	Claims with DOS in	Denied Due to Member	Denied Due To	Claims with DOS in	Claims with DOS in	
	Date(s) of Service (DOS)	Network Claims with	Network Claims with	Out-of-Network Claims	Out-of-Network Claims	Out-of-Network Claims	Denied Due to Prior	Denied Due to an Out-	2023 That Were Also	Medical Necessity.	Denied Due to Lack of	2023 That Were Also	Not Covered Durine All	Investigational.	2023 That Were Denied	2023 That Were Also	
	in 2023 That Were Akn	DOS in 2023 That Were	DOS in 2023 That Were	with DOS in 2023 That	with DOS in 2023 That	with DOS in 2023 That	Authorization or	Of-Network	Denied Due to	excluding Behavioral	Medical Nerossity	Denied Due to Enrollee	or Part of Date of	Experimental or	Due to Administrative	Denied for "Other"	
		Also Denied in Calendar		Were Also Received in		Were Also Resubmitted					Behavioral Health only.			Cosmetic Procedure in		Reasons in Calendar	Notes: (Please enter any
Plan ID*		Year 2023*				in Calendar Year 2023*			Calendar Year 2023*		in Calendar Year 2023*					Year 2023*	comments/notes here.)
																	This is a capitated plan
																	with minimal claims paid
97389CA0010002	cen																FFS to providers.
97389CAU010002	032																This is a capitated plan
																	with minimal claims paid
97389C40090001																	FFS to providers
97389CAU090001	U																This is a capitated plan
																	This is a capitated plan with minimal claims paid
97389CA0100001			_	_	_	_						_	_	_			
97389CA0100001	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	FFS to providers.
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