All fields with an asterisk (*) are required. To validate the template, press Validate button or Ctrl + Shift + I. 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 2026 v6.0

General Information	
Was this Issuer on the Exchange in 2024?*	Yes
SADP Only?*	Yes
Issuer HIOS ID*	62683
Issuer Level Data	
Number of Issuer Level In-Network Claims with Date(s) of Service (DOS) in 2024 That Were Also Received in Calendar Year 2024*	481,891
Number of Issuer Level In-Network Claims with DOS in 2024 That Were Also Denied in Calendar Year 2024*	106,428
Number of Issuer Level In-Network Claims with DOS in 2024 That Were Also Resubmitted in Calendar Year 2024*	10,659
Number of Issuer Level Out-of-Network Claims with DOS in 2024 That Were Also Received in Calendar Year 2024*	36,828
Number of Issuer Level Out-of-Network Claims with DOS in 2024 That Were Also Denied in Calendar Year 2024*	9,901
Number of Issuer Level Out-of-Network Claims with DOS in 2024 That Were Also Resubmitted in Calendar Year 2024*	1,777
Number of Issuer Level Internal Appeals Filed in Calendar Year 2024*	1,162
Number of Issuer Level Internal Appeals Overturned from Calendar Year 2024 Appeals*	365
Number of Issuer Level External Appeals Filed in Calendar Year 2024*	0
Number of Issuer Level External Appeals Overturned from Calendar Year 2024 Appeals*	0
Notes:	
Please enter any comments/notes here.	

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