

*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. All plan IDs submitted via Plans & Benefits Template(s) must be included in this template.*

## Centers for Medicare &amp; Medicaid Services (CMS) Qualified Health Plan (QHP) Transparency in Coverage Reporting

## Plan Year 2026

## Plan Level Data

[illegible]