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.

Appendix A2. Transparency in Coverage Reporting by Qualified Health Plan Issuers - Plan Year 2024

General Information				
Was this Issuer on the Exchange in 2022?*				
SADP Only?*				
Issuer HIOS ID*				
Issuer Level Data				
Number of In-Network Issuer Level Claims with Date(s) of Service (DOS) in 2022 That Were Also Received in Calendar				
Year 2022*				
Number of In-Network Issuer Level Claims with DOS in 2022 That Were Also Denied in Calendar Year 2022*				
Number of In-Network Issuer Level Claim Resubmissions with DOS in 2022 That Were Also Received in Calendar Year				
2022*				
Number of Out-of-Network Issuer Level Claims with DOS in 2022 That Were Also Received in Calendar Year 2022*				
Number of Out-of-Network Issuer Level Claims with DOS in 2022 That Were Also Denied in Calendar Year 2022*				
Number of Out-of-Network Issuer Level Claim Resubmissions with DOS in 2022 That Were Also Received in Calendar				
Year 2022*				
Number of Issuer Level Internal Appeals Filed in Calendar Year 2022*				
Number of Issuer Level Internal Appeals Overturned from Calendar Year 2022 Appeals*				
Number of Issuer Level External Appeals Filed in Calendar Year 2022*				
Number of Issuer Level External Appeals Overturned from Calendar Year 2022 Appeals*	Also Denied in Calendar Year 2022* 22 That Were Also Received in Calendar Year Vere Also Received in Calendar Year 2022* Vere Also Denied in Calendar Year 2022* In 2022 That Were Also Received in Calendar 2022 Appeals*			
Notes:				
Please enter any comments/notes here.				

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All plan IDs submitted via Plans & Benefits Templated juma to be actuated in this template.

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_	Plan Year 2024																	
	Plan Level Data																	
				Number of Plan	Number of Plan					Number of Plan Level								
		Number of Plan	Number of Plan	Level In-Network	Level Out-of-	Number of Plan	Number of Plan Level	Number of Plan Level	Number of Plan Level	Claims with DOS in 2022	Number of Plan Level	Number of Plan Level						
		Level In-Network	Level In-Network	Resubmissions with	Network Claims with								That Were Also Denied				Number of Plan Level	
		Claims with DOS in	Claims with DOS in	DOS in 2022 That	DOS in 2022 That	Network Claims with	Resubmissions with DOS	That Were Also Denied	That Were Also Denied	Due to Investigational.	Due to Prior	Due to Services	Due to Lack of Medical	Due to Lack of Medical	That Were Denied Due	That Were Denied Due	Claims with DOS in 2022	
		2022 That Were	2022 That Were	Were Also Received	Were Also Received	DOS in 2022 That	in 2022 That Were Also	Due to Enrollment	Due to Enrollee Benefit	Cosmetic or	Authorization or	Excluded or Not	Necessity, Excluding	Necessity, Behavioral	to Out of Network	to Administrative	That Were Also Denied	
		Also Received in	Also Denied in	in Calendar Year	in Calendar Year	Were Also Denied in	Received in Calendar	Status in Calendar Year	Limit Reached in	Experimental Procedure	Referral Required in	Covered in Calendar	Behavioral Health, in	Health only in Calendar	Provider/Claims in	Reasons in Calendar	for "Other" Reasons in	Notes: (Please enter any
Plan		Calendar Year 2022*				Calendar Year 2022*			Calendar Year 2022*				Calendar Year 2022*		Calendar Year 2022*		Calendar Year 2022*	