
APPENDIX B: ESSENTIAL HEALTH BENEFITS (EHB)-BENCHMARK PLAN ACTUARIAL CERTIFICATE TEMPLATE

Instructions for Completing Appendix B:

Under § 156.111(e)(2), States must submit an actuarial certification as part of the EHB-benchmark selection process affirming that the State's EHB-benchmark plan provides a scope of benefits that is equal to the scope of benefits provided under a typical employer plan as defined at § 156.111(b)(2)(i) (supplemented by the State as necessary to provide coverage within each EHB category at § 156.110(a)).

States must complete all fields of this actuarial certification. CMS will consider any partial or blank fields as incomplete. The actuarial report associated with this certification must be submitted as an attachment. Actuarial reports should be uploaded in a format that prevents further editing after submission. For example, States can scan copies of the Actuarial Report or convert documents into a PDF format to upload.

SECTION 1: TYPICAL EMPLOYER PLANS DETERMINATION FOR § 156.111(b)(2)(i)

1. In accordance with § 156.111(b)(2)(i), does the State's proposed EHB-benchmark plan provide a scope of benefits that are equal to the scope of benefits provided under a typical employer plan as defined at § 156.111(b)(2)(i) (supplemented by the State as necessary to provide coverage within each EHB category at § 156.110(a))?

Yes

No

2. The State's proposed EHB-benchmark plan must provide a scope of benefits that is equal to the scope benefits of a typical employer plan in the State. The scope of benefits in a typical employer plan in a State is any scope of benefits that is as or more generous than the scope of benefits in the least generous plan (supplemented by the State as necessary to provide coverage within each EHB category at § 156.110(a)), and as or less generous than the scope of benefits in the most generous plan in the State (supplemented by the State as necessary to provide coverage within each EHB category at § 156.110(a)), among the following the plans at § 156.111(b)(2)(ii)(A) and (B). What plans did the state identify as the least and most generous plans among the plans at § 156.111(b)(2)(ii)(A) and (B)?

3. Briefly describe the methods, assumptions, and data used to determine that the State's proposed EHB-benchmark plan provides a scope of benefits that are equal to the scope of benefits provided under a typical employer plan (or greater than the scope of benefits provided under a typical employer plan, to the extent any supplementation is required to provide coverage within each EHB category at § 156.111(a)).

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1174. The information collection included in this package reflects the time and effort for states to select a new EHB-benchmark plan. The time required to complete this information collection is estimated to average 205 hours per response, including the time to review instructions, search existing data resources, gather the data needed, to review and complete the information collection. This information collection, pursuant to 45 C.F.R. 156.111, requires states who wish to modify their benchmark plans to respond to this ICR. All information collected will be kept private in accordance with regulations at 45 C.F.R. 155.260, Privacy and Security of Personally Identifiable Information. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850, Attention: Information Collections Clearance Officer, or email Ken Buerger at Ken.Buerger@cms.hhs.gov.

SECTION 2: CERTIFICATION LANGUAGE

45 CFR § 156.111(e)(2) requires that a State selecting its EHB-benchmark plan must submit an actuarial certification and an associated actuarial report from an actuary, who is a member of the American Academy of Actuaries, in accordance with generally accepted actuarial principles and methodologies that affirms that the State's EHB-benchmark plan provides a scope of benefits that is equal to the scope of benefits provided under a typical employer plan as defined at § 156.111(b)(2)(ii) (supplemented by the State as necessary to provide coverage within each EHB category at § 156.110(a)).

The analysis described in this document and supported in the actuarial report attached to this document was:

- (i) conducted by a member of the American Academy of Actuaries, and
- (ii) performed in accordance with generally accepted actuarial principles and methods, including complying with all applicable Actuarial Standards of Practice (ASOP).

Name of Actuary Completing Form

Actuary Signature	Date
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