

Table of Contents	
#	Tab Name
1	Form Information
2	Background
3	Document Change Log
4	Instructions
5	Pre-Sampling
6	Policy
7	Tax Filing
8	Member Demographics
9	Verification Events
10	Verification Inconsistency
11	Eligibility Events
12	SEP Manual
13	Redetermination Events
14	Enrollment Reconciliation
15	Plan Management
16	Data Dictionary
17	Data Mapping Tool

Form Information

Form Name
Form Number
Revision Date
PRA Disclosure Statement

Form Information

Form Name	Improper Payment Pre-Testing and Assessment (IPPTA) Data Request Form (DRF)
Form Number	TBD
Revision Date	6/21/2024
PRA Disclosure Statement	<p>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 0938-1439 (Expires 06/30/2026). This is a mandatory information collection. The time required to complete this information collection is estimated to average 530 hours per response during an IPPTA period, including the time to review instructions, search existing data sources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this collection, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop 05, Baltimore, Maryland 21244-1850. ****CMS Disclosure**** Please do not send applications, claims, payments, medical records or any documents containing sensitive information to the Reports Clearance Office. Please note that any correspondence not pertaining to the information collection burden approved under the associated OMB control number listed on this form will not be reviewed, forwarded, or retained. If you have questions or concerns regarding where to submit documents, please contact Halina DeSantis at halina.desantis@cms.hhs.gov.</p>

IPPTA Data Request Form Background

Per the Patient Protection and Affordable Care Act (ACA) (Pub. L. 111-148), the Health Care and Education Reconciliation Act (Pub. L. 111-152), and the Payment Integrity Information Act (PIIA) (Pub. L. 116-117), The Centers for Medicare & Medicaid Services (CMS) are to use a systematic method to conduct improper payments measurements for the Health Insurance Exchanges. This includes the Federally Facilitated Exchanges (FFE), State Exchanges using the Federal Platform (SE-FPs) and State Partnership Exchanges (SPEs). This also includes independent State Exchanges (SEs). To prepare SEs for the planned improper payment measurement, CMS is conducting an Improper Payment Pre-Testing and Assessment (IPPTA) Program.

To facilitate IPPTA, CMS is requesting that the state Exchange provide (1) Pre-sampling Information and (2) Sampled Unit Data in a uniform format through the use of this IPPTA Data Request Form (DRF). Scenario-based Sampled Unit Data Collection will be used to understand the application population for each State Exchange. After reviewing the pre-sampling data submitted by the SE, CMS will contact the SE to request that the SE submit the application data associated with no fewer than 10 tax households that collectively fulfill the scenarios to be provided to the SE by the CMS RC. The Scenario-based Sampled Unit Data Collection will be used to conduct the IPPTA reviews to determine SE compliance with federal regulations.

Document Changelog

Form Name	
Form Number	
Revision Date	
	5/10/2024
	5/15/2024
	5/29/2024
	5/29/2024
	5/30/2024
	5/30/2024
	5/31/2024
	6/20/2024

Improper Payment Pre-Testing and Assessment (IPPTA) Data Request Form (DRF) with Data Mapping Tool (DMT)
TBD
Description of Changes
Included "Data Mapping Tool" tab, Created "Document Change Log" tab
Updated "Instructions" tab, with entry for Data Mapping Tool
Created a "DRF Table of Contents" tab, including a table of contents.
Moved up the "Document Change Log" tab to the fourth tab.
Added a new column "Policy Applied APTC Amount" and updated the column L to reflect that the column is reserved for and filled out by SBE in the "Pre-Sampling" tab.
Altered 'FTR PDM Scheduled Date' Element Detail within 'Data Dictionary' tab of the DRF to reflect 'N/A'. Previous language stated that 'There should be at least one date scheduled for Death PDM.'
Added eight (8) information elements ('Auto Re-Enrolled For Past 2 Benefit Years', 'Enrollee Tax Return Access Authorization', 'Failure to Reconcile Indicator', 'IRS Annual Tax Household Income Amount', 'IRS Income Data Available', 'IRS Tax Form Receipt', 'No IRS Data For Past 3 Benefit Years', 'No Updates to Application For Past 2 Benefit Years') to the 'Data Dictionary' and 'Redetermination Events' tabs to
Added new "SSN Inconsistency" column to 'Pre-Sampling' tab, and data dictionary entry

Instructions

Note: There are hyperli

Phase 1: Pre-Sampling I

Tab Name
Pre-Sampling

Phase 2: Scenario-based

Tab Name
Policy
Tax Filing

Member Demographics

Verification Events

Verification Inconsisten

Eligibility Events

[SEP Manual](#)

[Redetermination Events](#)

[Enrollment Reconciliation](#)

[Plan Management](#)

[All Consumer Documents](#)

[Data Mapping Tool](#)

[Data Dictionary](#)

links in Column A that can be used to access the different tabs in this workbook.

Data

Instructions

The State Exchange (SE) will be asked to populate the IPPTA DRF "Pre-Sampling" tab with the total universe of Exchange Assignments that receive APTC greater than \$0, associated with a specified Benefit Year (BY). Please provide the following information associated with the policies under the designated columns within the tab:

- 1) Map the policies to their associated tax households using a unique identifier, providing the mapping under Column B "Tax Household Identifier". Note: if the SE does not have a designated system identifier for tax households, please generate a proxy identifier for the tax household.
- 2) Provide the count of verification inconsistencies by their inconsistency type in Columns C through I. It's acceptable to have a zero indicate whether an inconsistency exists if the SE is not able to provide specific inconsistency counts.
- 3) Provide the number of tax household members in Column J "Number of Tax Household Members" for each tax household identifier. Note: Column K "Selected For Sample (Filled Out By CMS)" will be filled in by CMS after it has received the requested pre-sampling data from the SE.

d Sampled Unit Data Collection

Instructions

- 1) Refer back to Column K "Selected for Sample (Filled Out By CMS)" in the "Pre-Sampling" tab and find the line items where it is filled out by CMS with a "Y". Note the "Tax Household Grouping Identifier" which will be used to populate the columns within this tab.
- 2) For each of the noted "Tax Household Grouping Identifier", provide all "Application Identifier", "Application Version", "Application Submission Date", "Person Tracking Number", and "As-Of-Date" that were submitted for that tax household within the Benefit Year. These identifiers constitute the primary key that organizes the tax household by their application submissions for each of their members. It will be used to retrieve the information provided in the other tabs of this workbook.
- 3) For each of the "Person Tracking Number", with consideration in the context of their "Application Identifier", "Application Version", "Application Submission Date" and "As-Of-Date", provide the requested Policy Information in Columns G through Column O. Note: the "Data Dictionary" tab provides the definitions for each of the requested information elements

- 1) Refer back to Column K "Selected for Sample (Filled Out By CMS)" in the "Pre-Sampling" tab and find the line items where it is filled out by CMS with a "Y". Note the "Tax Household Grouping Identifier" which will be used to populate the columns within this tab.
- 2) For each of the noted "Tax Household Grouping Identifier", provide all "Application Identifier", "Application Version", "Application Submission Date", "Person Tracking Number", and "As-Of-Date" that were submitted for that tax household within the Benefit Year. These identifiers constitute the primary key that organizes the tax household by their application submissions for each of their members. It will be used to retrieve the information provided in the other tabs of this workbook.
- 3) For each of the "Person Tracking Number", with consideration in the context of their "Application Identifier", "Application Version", "Application Submission Date" and "As-Of-Date", provide the requested Tax Filing Information in Columns G through Column O. Note: the "Data Dictionary" tab provides the definitions for each of the requested information elements

1) Refer back to Column K "Selected for Sample (Filled Out By CMS)" in the "Pre-Sampling" tab and find the line items where i by CMS with a "Y". Note the "Tax Household Grouping Identifier" which will be used to populate the columns within this tab.
2) For each of the noted "Tax Household Grouping Identifier", provide all "Application Identifier", "Application Version", "Appl Date", "Person Tracking Number", and "As-Of-Date" that were submitted for that tax household within the Benefit Year. These constitute the primary key that organizes the tax household by their application submissions for each of their members. It will information provided in the other tabs of this workbook.
3) For each of the "Person Tracking Number", with consideration in the context of their "Application Identifier", "Application V "Application Submission Date" and "As-Of-Date", provide the requested Member Demographic Information in Columns G through Note: the "Data Dictionary" tab provides the definitions for each of the requested information elements

1) Refer back to Column K "Selected for Sample (Filled Out By CMS)" in the "Pre-Sampling" tab and find the line items where i by CMS with a "Y". Note the "Tax Household Grouping Identifier" which will be used to populate the columns within this tab.
2) For each of the noted "Tax Household Grouping Identifier", provide all "Application Identifier", "Application Version", "Appl Date", "Person Tracking Number", and "As-Of-Date" that were submitted for that tax household within the Benefit Year. These constitute the primary key that organizes the tax household by their application submissions for each of their members. It will information provided in the other tabs of this workbook.
3) For each of the "Person Tracking Number", with consideration in the context of their "Application Identifier", "Application V "Application Submission Date" and "As-Of-Date", provide the requested Verification Events Information in Columns G through Note: the "Data Dictionary" tab provides the definitions for each of the requested information elements

1) Refer back to Column K "Selected for Sample (Filled Out By CMS)" in the "Pre-Sampling" tab and find the line items where i by CMS with a "Y". Note the "Tax Household Grouping Identifier" which will be used to populate the columns within this tab.
2) For each of the noted "Tax Household Grouping Identifier", provide all "Application Identifier", "Application Version", "Appl Date", "Person Tracking Number", and "As-Of-Date" that were submitted for that tax household within the Benefit Year. These constitute the primary key that organizes the tax household by their application submissions for each of their members. It will information provided in the other tabs of this workbook.
3) For each of the "Person Tracking Number", with consideration in the context of their "Application Identifier", "Application V "Application Submission Date" and "As-Of-Date", provide the requested Verification Inconsistency Information in Columns G through
4) For fields "Relevant Consumer Documents" and "All Consumer Documents", CMS is requesting information on the relevant documents that were used to resolve the inconsistency as well as all consumer documents that were submitted by the consumer whether it was used for resolution, respectively. CMS would like to receive copies of these consumer documents for review at the SE to submit data via a secured method.
Note: the "Data Dictionary" tab provides the definitions for each of the requested information elements

1) Refer back to Column K "Selected for Sample (Filled Out By CMS)" in the "Pre-Sampling" tab and find the line items where i by CMS with a "Y". Note the "Tax Household Grouping Identifier" which will be used to populate the columns within this tab.
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3) For each of the "Person Tracking Number", with consideration in the context of their "Application Identifier", "Application V "Application Submission Date" and "As-Of-Date", provide the requested Eligibility Events Information in Columns G through C Note: the "Data Dictionary" tab provides the definitions for each of the requested information elements

1) Refer back to Column K "Selected for Sample (Filled Out By CMS)" in the "Pre-Sampling" tab and find the line items where i by CMS with a "Y". Note the "Tax Household Grouping Identifier" which will be used to populate the columns within this tab.
2) For each of the noted "Tax Household Grouping Identifier", provide all "Application Identifier", "Application Version", "Appl Date", "Person Tracking Number", and "As-Of-Date" that were submitted for that tax household within the Benefit Year. These constitute the primary key that organizes the tax household by their application submissions for each of their members. It will information provided in the other tabs of this workbook.
3) For each of the "Person Tracking Number", with consideration in the context of their "Application Identifier", "Application V "Application Submission Date" and "As-Of-Date", provide the requested SEP Manual Verification Information in Columns G th
4) For fields "Relevant Consumer Documents" and "All Consumer Documents", CMS is requesting information on the relevant documents that were used to resolve the SEP manual verification as well as all consumer documents that were submitted by t regardless on whether it was used for resolution, respectively. CMS would like to receive copies of these consumer document work with the SE to submit data via a secured method.
Note: the "Data Dictionary" tab provides the definitions for each of the requested information elements

1) Refer back to Column K "Selected for Sample (Filled Out By CMS)" in the "Pre-Sampling" tab and find the line items where i by CMS with a "Y". Note the "Tax Household Grouping Identifier" which will be used to populate the columns within this tab.
2) For each of the noted "Tax Household Grouping Identifier", provide all "Application Identifier", "Application Version", "Appl Date", "Person Tracking Number", and "As-Of-Date" that were submitted for that tax household within the Benefit Year. These constitute the primary key that organizes the tax household by their application submissions for each of their members. It will information provided in the other tabs of this workbook.
3) For each of the "Person Tracking Number", with consideration in the context of their "Application Identifier", "Application V "Application Submission Date" and "As-Of-Date", provide the requested Redetermination Event Information in Columns G th
Note: the "Data Dictionary" tab provides the definitions for each of the requested information elements

1) Refer back to Column K "Selected for Sample (Filled Out By CMS)" in the "Pre-Sampling" tab and find the line items where i by CMS with a "Y". Note the "Tax Household Grouping Identifier" which will be used to populate the columns within this tab.
2) For each of the noted "Tax Household Grouping Identifier", provide all "Application Identifier", "Application Version", "Appl Date", "Person Tracking Number", and "As-Of-Date" that were submitted for that tax household within the-Benefit Year. The constitute the primary key that organizes the tax household by their application submissions for each of their members. It will information provided in the other tabs of this workbook.
3) For each of the "Person Tracking Number", with consideration in the context of their "Application Identifier", "Application V "Application Submission Date" and "As-Of-Date", provide the requested Enrollment Reconciliation Event Information in Colum Column W.
Note: the "Data Dictionary" tab provides the definitions for each of the requested information elements

1) Refer back to Column K "Selected for Sample (Filled Out By CMS)" in the "Pre-Sampling" tab and find the line items where i by CMS with a "Y". Note the "Tax Household Grouping Identifier" which will be used to populate the columns within this tab.
2) For each of the noted "Tax Household Grouping Identifier", provide all "Application Identifier", "Application Version", "Appl Date", "Person Tracking Number", and "As-Of-Date" that were submitted for that tax household within the Benefit Year. These constitute the primary key that organizes the tax household by their application submissions for each of their members. It will information provided in the other tabs of this workbook.
3) For each of the "Person Tracking Number", with consideration in the context of their "Application Identifier", "Application V "Application Submission Date" and "As-Of-Date", provide the requested QHP Information in Columns G through Column L.
Note: the "Data Dictionary" tab provides the definitions for each of the requested information elements

After completing all of the tabs mentioned above, the SE should provide CMS with the consumer submitted documents for ea consumer submitted documents will be used to review the APTC for each sample.

The Data Mapping Tool allows the Exchange to provide the "Data Element" contained in the SE's internal system that matches "Information Element" for review in the Data Request Form. Note, the tool is organized by SEIPM IPPTA Review Area, the SE is to populate the identified blue cells, as all grey cells are previously requested elements and will be populated automatically to request. SE may specify proxy identifiers in the event that a direct match between "Data Element" and requested "Information Element" is not found. SE may also include notes where useful.

Definitions for the requested information on any of the tabs can be found by searching under Column A "Information Element". Each Information Element can also be accessed using hyperlinks throughout this workbook.

Member Association Role

Application Information

Member Attestati

<u>Application Creati</u>	<u>Application Enrollr</u>	<u>Application Event Type</u>	<u>Application Event Source</u>	<u>Attested Non-Peri</u>

Data Dictionary

Information Element	Element Definition
Adjudication History	A description of the history of adjudicating an inconsistency.
Non-Citizen ID Indicator	Indicates whether the consumer provided an Non-Citizen ID.
All Consumer Documents	<p>A list of all consumer documents received by the Exchange associated to the members of an application, including the type(s) of documents received, the date(s) the documents were received and the mode they were received.</p> <p>If providing multiple documents, please separate document by semi-colon</p>
Annual Income Inconsistency	The number of annual income verification inconsistencies that were associated to a tax household for a given plan year. Note: if SE cannot provide a specific count, then a "Y/N" value is acceptable to indicate that an inconsistency type exists for the tax household
Application Creation Date	A field that is used to reflect the date that an application was created prior to being submitted.
Application Enrollment Period Type	The enrollment period for the creation of the application.

Data Dictionary

Information Element	Element Definition
Application Event Source	The origin event that led to the creation or change, update to an application.
Application Event Type	The different types of events that led to the creation or change, update to an application.
Application Identifier	A unique identifier for an application household (or households) during a given Plan / Benefit Year.
Application Submission Date	A field that is used to reflect the date that an application was submitted.

Data Dictionary

Information Element	Element Definition
Application Version	A sequence number that is used to distinguish various events for an application, i.e. the creation and subsequent changes or updates made to an application during a Plan / Benefit Year.
APTC Eligibility Date	Date when the APTC eligibility was determined for an application member.
APTC Eligibility Indicator	Indicates if member is eligible for APTC.
APTC Eligibility Reason	Reason for how the given APTC eligibility determination was reached.
Attempt Made to DHS SAVE Indicator	Indicates whether the Manual Adjudicator made an attempt to DHS SAVE.
Attested Non-ESC MEC Type	The applicant's attestation of the specific Non-ESC MEC type that they currently hold or plan to hold during the benefit year.
Attested Annual Household Income	The amount of annual income an applicant attested to on the application.
Attested Circumstance Change Date	The date the circumstance change occurred.
Attested Circumstance Change Type	The circumstance change type attested by the applicant.

Data Dictionary

Information Element	Element Definition
Attested Citizenship Status Indicator	Indicates whether applicant attests he/she is a US citizen.
Attested Coverage Request	An indicator that the application member attested to applying for coverage.
Attested ESC Offer	Indicates whether an applicant is eligible for Employer Sponsored health coverage.
Attested Financial Assistance Request	An indicator that the application member attested to requesting financial assistance.
Attested Incarceration Pending Disposition Indicator	Indicates whether an applicant attested to being in pending disposition for incarceration.
Attested Incarceration Status Indicator	Indicates whether an applicant attested to being incarcerated.
Attested Information Change Reported Indicator	Indicates that the insurance applicant understands that changed information needs to be reported.
Attested Lawfully Present Status Indicator	Indicates whether an applicant attests to being lawfully present.
Attested No Fixed Address	Indicates whether an applicant has no fixed address.
Attested Non-ESC MEC Offer	Indicates whether the applicant attests to being enrolled in non-employer sponsored health coverage.
Attested Non-Perjury Indicator	Indicates that the insurance applicant certifies that attestations are true under penalty of perjury.
Attested Person Recognized Tribe Indicator	Indicates if a person attested to being a member of a federally recognized tribe, band, nation, or community.
Attested Tax Household Size	Attested number of individuals in the application related to tax filer members.
Attested Temporary Absence	Indicates whether this application member attests to living outside of the state temporarily.
Auto Re-Enrolled For Past 2 Benefit Years	Indicates whether an application member was auto re-enrolled in the past two benefit years.
Auto Re-Enrollment Denial Reason	The reason an application member was denied auto re-enrollment and APTC Eligibility is terminated.
Auto Re-Enrollment Eligible Indicator	Indicates whether an application member has passed the state exchange's auto re-enrollment criteria.
Birth Date	Birth date of an application member.

Data Dictionary

Information Element	Element Definition
Chosen for ESC Sampling	Applicant was selected as a part of the statistically significant subset and will be verified via the sampling process.
Citizenship Inconsistency	The number of citizenship verification inconsistencies that were associated to a tax household for a given plan year. Note: if SE cannot provide a specific count, then a "Y/N" value is acceptable to indicate that an inconsistency type exists for the tax household
Citizenship Inconsistency Manual Adjudication Conducted	Indicates whether a citizenship verification inconsistency was manually adjudicated.
Citizenship Verification Date	Date when verification of citizenship attestation was conducted.
Citizenship Verification Reason	The findings used to set the final verification result in corroborating the consumer's attestation.
Citizenship Verification Result	The final determination on whether the Exchange was able to verify the consumer's attestation.
Consumer Documents Expiration Date	Date of expiry of the consumer submitted document.
Consumer Documents Issue Date	Date of issuance of the consumer submitted document.
Consumer Documents Reflected in Manual Income Verification Result	Consumer documents reflected in standard or custom tool / method / process for manual verification.
Consumer Income Document Effective End Date	The effective end date of the income document as submitted by the consumer.
Consumer Income Document Effective Start Date	The effective start date of the income document as submitted by the consumer.
Consumer Income Documented Amount	The amount of total annual tax income of the tax household calculated by the inconsistency verification worker based on documentation the applicant provided.

Data Dictionary

Information Element	Element Definition
Coverage 60 Days Before Marriage Indicator	Indicates whether the application member attested to having MEC within 60 days before the attested marriage date.
Coverage 60 Days Before Move Indicator	Indicates whether the application member attested to having MEC within 60 days before the attested move date
Death Data Present	SSA indicated that applicant is associated with death data.
Death Date	Death date of applicant.
Death PDM Actual Run Date	Date when Death PDM was executed for application member.
Death PDM Scheduled Date	The date during the benefit year when the Death PDM is scheduled to occur.
Death Resolution Status	Status used to indicate whether or not an applicant has resolved death-related issues with application.
DHS SAVE Manual Verification Indicator	<p>An indicator that reflects whether DHS SAVE (Systematic Non-Citizen Verification for Entitlements) was used to manually verify an applicant's attestation of lawful presence status.</p> <ul style="list-style-type: none"> - N/A - The inconsistency was not related immigration status. - Yes Successful - Non-Citizen ID was provided by consumer and lawful presence was determined = Yes using DHS SAVE. - Not Successful - Non-Citizen ID was provided but lawful presence could not be verified. - Not Attempted - Non-Citizen ID was either: <ul style="list-style-type: none"> - Not provided and not used - Provided but not used for resolution
Eligible for ESC Sampling	The applicant is eligible to be added to the ESC sampling frame.
Enrollee Tax Return Access Authorization	Indicates whether the tax data used in the application can be used at the time of renewal.
ESC Data Found	Indicates whether or not ESC verification data was found in the data source.
ESC Data Source	The external data source that is used to verify the ESC attestation.
ESC Inconsistency Manual Adjudication Conducted	Indicates whether an ESC verification inconsistency was manually adjudicated.

Data Dictionary

Information Element	Element Definition
ESC MEC Inconsistency	The number of ESC MEC verification inconsistencies that were associated to a tax household for a given plan year. Note: if SE cannot provide a specific count, then a "Y/N" value is acceptable to indicate that an inconsistency type exists for the tax household
ESC Meets MEC and Affordability Standards-based on employer verified premium amount	Indicates whether consumers ESC meets Minimum Essential Coverage (MEC) and Affordability standards based on employer verified premium amount
ESC Meets MEC and Affordability Standards-based on attested premium amount	Indicates whether consumers ESC meets Minimum Essential Coverage (MEC) and Affordability standards based on consumer attested premium amount
ESC Verification Result-Attested	Indicator denoting the verification result of attested ESC MEC.
ESC Verification Result-Employer Verified	Indicator denoting the verification result of employer stated ESC coverage.
ESC Verification Determination Date-Attested	Date when verification of ESC MEC attestation was conducted.
ESC Verification Determination Date-Employer Verified	Date when Employer ESC MEC verification was conducted.
ESC Verification Reason-Attested	The findings used to set the final verification result in corroborating or disagreeing with the consumer's attestation.

Data Dictionary

Information Element	Element Definition
ESC Verification Reason- Employer Verified	The findings used to set the final verification result in corroborating or disagreeing with the employer verified ESC coverage.
Escalation Guidance	Indicates whether an application was escalated to proper authorities for review and guidance.
Essential Health Benefits Policy Premium Amount	Essential Health Benefits (EHB) policy premium amount in a given month.
Exchange Applied SEP Determination Date	The date that the exchange applied SEP was determined for the application version.
Exchange Applied SEP End Date	The date that the exchange applied SEP ended or will end.
Exchange Applied SEP Indicator	Indicator that marks the SEP that was applied by the exchange.
Exchange Applied SEP Start Date	The date that the exchange applied SEP started or will start.
Exchange Assigned Policy ID	A unique identifier assigned by the exchange to the insurance policy.
Exchange Benefit End Date	Benefit end date for the QHP coverage period as reflected by Exchange records.
Exchange Benefit Start Date	Benefit start date for the QHP coverage period as reflected by Exchange records.
Exchange Effectuation Status	Indicates whether the applicant paid their initial premium for a given policy as indicated by Exchange.
Exchange Policy Applied APTC Amount	The policy applied APTC the Exchange reported in their reconciliation output (RCNO) file that was sent to the issuer.
Failure to Reconcile Indicator	Indicates whether the tax household anchor attested that the tax household reconciled to premium tax credits on last year's tax return.
Federal Poverty Level Amount	This is the Federal Poverty Level (FPL), as published on the first day of the regular enrollment period for coverage by a qualified health plan (QHP) through an Exchange for a calendar year, for a family size equal to tax household size without regard to lawful presence status.
First Name	First name of application member

Data Dictionary

Information Element	Element Definition
FPL Percentage Per Attested Income	Income as a percentage of the Federal Poverty Level (FPL) amount, calculated per advanced payment tax credit rules published by the treasury based on information provided by the consumer.
FTR PDM Actual Run Date	Date when FTR PDM was executed for application member.
FTR PDM Confirmed Expiration	The applicant has failed to resolve the FTR issue within the given resolution period.
FTR PDM Confirmed Expiration Date	The date when applicant failed to resolve their FTR issue within the allotted resolution period.
FTR PDM Scheduled Date	The date during the benefit year when the FTR PDM is scheduled to occur.
Good Faith Extension	Indicator that reflects whether a good faith extension has been applied to the inconsistency clock end date.
Home City	Applicant home city.
Home State Code	Applicant home state code.
Home Street Address	Applicant home street address.
Home Zip Code	Applicant home zip code.
I-94 Number Indicator	Indicates whether the consumer provided an I-94 number.
Immigration Status Expiration Date	Date when consumer's immigration status expires and needs to be redetermined.
Incarceration Inconsistency Manual Adjudication Conducted	Indicates whether an Incarceration verification inconsistency was manually adjudicated.
Incarceration Verification Date	Date when verification of incarceration attestation was conducted.
Incarceration Verification Reason	The findings used to set the final verification result in corroborating the consumer's attestation.

Data Dictionary

Information Element	Element Definition
Incarceration Verification Result	The final determination on whether the Exchange was able to verify the consumer's attestation.
Income Inconsistency Manual Adjudication Conducted	Indicates whether an Income verification inconsistency was manually adjudicated.
Income Verification Date	Date when verification of income attestation was conducted.
Income Verification Reason	The findings used to set the final verification result in corroborating the consumer's attestation.
Income Verification Result	Indicator denoting the verification result of an income verification.
Inconsistency Adjudication Date	Date that the manual verification of an inconsistency was concluded.
Inconsistency Clock End Date	The clock end date set by the Exchange based on the date the inconsistency was triggered.
Inconsistency Clock End Date (Alternative)	The clock end date set by the Exchange based on the date the inconsistency was triggered, per alternative source, for example a data warehouse.
Inconsistency Expiration Date	The date of expiration for an inconsistency, set by the manual verification.
Inconsistency Identifier	A unique identifier for an inconsistency generated as a result of unsuccessful electronic verifications performed by the Exchange.

Data Dictionary

Information Element	Element Definition
Inconsistency Status	An indicator that reflects the current status.
Inconsistency Sub-Type	A field that describes the sub type of inconsistency that was generated by the Exchange.
Insurance Policy End Date	The end date of the Policy which the applicants are enrolled in.
Insurance Policy Identifier	A unique identifier assigned by the exchange to the insurance policy.
Insurance Policy Selected Date	Date when the insurance policy was selected.
Insurance Policy Start Date	The start date of the Policy which the applicants are enrolled in.
Insurance Policy Status	The status of the Policy which the applicants are enrolled in.
IRS Annual Tax Household Income Amount	The Annual Tax Household Income amount returned from IRS.
IRS Income Data Available	Indicates whether or not Income verification data was found in the IRS.

Data Dictionary

Information Element	Element Definition
IRS Tax Form Receipt	Indicates whether the tax household anchor attested that the tax household reconciled to premium tax credits on last year's tax return.
Issuer Benefit End Date	Benefit end date for the QHP coverage period as reflected by Issuer records.
Issuer Benefit Start Date	Benefit start date for the QHP coverage period as reflected by Issuer records.
Issuer Effectuation Status	Indicates whether the applicant paid their initial premium for a given policy as indicated by issuer.
Issuer Policy Applied APTC Amount	The amount of APTC that has been applied to the policy as reflected by Issuer records.
Issuer Reconciliation Data Matching Issue Indicator For Applied APTC Amount	Indicates whether Issuer and Exchange had data matching issues during reconciliation for applied APTC amount.
Issuer Reconciliation Data Matching Issue Indicator For Benefit End Date	Indicates whether Issuer and Exchange had data matching issues during reconciliation for benefit end date.
Issuer Reconciliation Data Matching Issue Indicator For Benefit Start Date	Indicates whether Issuer and Exchange had data matching issues during reconciliation for benefit start date.
Issuer Reconciliation Data Matching Issue Indicator For Effectuation Status	Indicates whether the issuer and Exchange had data matching issues during reconciliation for effectuation status.
Issuer Reconciliation Data Matching Issue Resolution For Applied APTC Amount	Indicates the action taken to resolve data discrepancies between the issuer and Exchange for applied APTC amount.
Issuer Reconciliation Data Matching Issue Resolution For Benefit End Date	Indicates the action taken to resolve data discrepancies between the issuer and Exchange for benefit end date.
Issuer Reconciliation Data Matching Issue Resolution For Benefit Start Date	Indicates the action taken to resolve data discrepancies between the issuer and Exchange for benefit start date.

Data Dictionary

Information Element	Element Definition
Issuer Reconciliation Data Matching Issue Resolution For Effectuation Status	Indicates the action taken to resolve data discrepancies between the issuer and Exchange for effectuation status.
Issuer Total Premium Amount	Issuer total premium amount provided during the reconciliation process.
Last Name	Last name of application member
Latest Policy Record	For a specific policy, if multiple versions exist, this indicator will represent the latest version for that policy.
Lawful Presence Inconsistency	The number of lawful presence verification inconsistencies that were associated to a tax household for a given plan year. Note: if SE cannot provide a specific count, then a "Y/N" value is acceptable to indicate that an inconsistency type exists for the tax household
Lawful Presence Inconsistency Manual Adjudication Conducted	Indicates whether a Lawful Presence verification inconsistency was manually adjudicated.
Lawful Presence Verification Date	Date when verification of lawful presence attestation was conducted.
Lawful Presence Verification Reason	The findings used to set the final verification result in corroborating the consumer's attestation.
Lawful Presence Verification Result	The final determination on whether the Exchange was able to verify the consumer's attestation.
Lived In Foreign Country 60 Days Before Marriage Indicator	Indicates whether the applicant or the spouse attested to living in a foreign country or U.S. territory within 60 days before the marriage.
Lived In No QHP Zone Within 60 Days Before Marriage Indicator	Indicates whether the applicant or the spouse attested to living in a service area where no QHP was available through the Exchange within 60 days before the marriage.

Data Dictionary

Information Element	Element Definition
Lived In No QHP Zone Within 60 Days Before Move Indicator	Indicates whether the applicant attested to moving from a service area where no QHP was available through the Exchange within the last 60 days.
Lived in US 5 Years Indicator	Indicates whether an applicant attested to living in the US for at least 5 years.
Mailing City	Applicant mailing city.
Mailing State Code	Applicant mailing state code.
Mailing Street Address	Applicant mailing street address.
Mailing Zip Code	Applicant mailing zip code.
Manual Income Verification Result	Outcome of income verification performed by manual reviewers to assess compatibility between attested and documented income.
Maximum APTC Amount	The maximum advanced payment tax credit amount for which the tax household is eligible for.
Medicaid Denied Date	Date that an applicant was denied eligibility for Medicaid.
Medicaid Denied Indicator	Indicates whether an applicant has been denied eligibility for Medicaid in the last 60 days.
Medicaid/CHIP Confirmed Dual Enrollment	Medicaid CHIP was confirmed to be dually enrolled and applicant has not resolved issue within the allotted resolution period.
Medicaid/CHIP Confirmed Expiration Date	The date when applicant failed to resolve their Medicaid/CHIP dual enrollment issue within the allotted resolution period.
Medicaid/CHIP PDM Actual Run Date	Date when Medicaid/CHIP PDM was executed for application member.
Medicaid/CHIP PDM Scheduled Date	The date during the benefit year when the Medicaid/CHIP PDM is scheduled to occur.
Medicare Dual Enrollment Status	Indicates whether an applicant is dually enrolled in Medicare and Non ESC MEC.
Medicare PDM Actual Run Date	Date when Medicare PDM was executed for application member.
Medicare PDM Scheduled Date	The date during the benefit year when the Medicare PDM is scheduled to occur.
Medicare Resolution Status	Status used to indicate whether or not an applicant has resolved Medicare dual-enrollment issues with application.
Member Association Role Type	The relationship the member has to the tax filer.

Data Dictionary

Information Element	Element Definition
Member-Level Allocated APTC Amount	Allocated APTC Amount is the amount that is allocated to the policy based on the amount the tax household has elected without consideration for amounts that are reallocated from other policies. The final amount of APTC that is applied takes into consideration the amounts that are leftover from policies.
Middle Name	Middle name of application member
Moved From Foreign Country Within Last 60 Days Indicator	Indicates whether the applicant attested to moving from a foreign country to the USA within the last 60 days.
Multiple Tax Household Indicator	Indicates whether the insurance application contains multiple tax households.
No IRS Data For Past 3 Benefit Years	Indicates whether the Exchange has not received updated IRS data for the application member within the past three years.
No Updates to Application For Past 2 Benefit Years	Indicates whether an application member has not updated their application within the past two benefit years.
Non-ESC MEC Coverage End Date	The date that the applicants Non-ESC MEC coverage ended or will end.
Non-ESC MEC EDS Data Found	Hub returned data for any Non-ESC MEC coverage
Non-ESC MEC Inconsistency	The number of Non-ESC MEC verification inconsistencies that were associated to a tax household for a given plan year. Note: if SE cannot provide a specific count, then a "Y/N" value is acceptable to indicate that an inconsistency type exists for the tax household

Data Dictionary

Information Element	Element Definition
Non-ESC MEC Inconsistency Identifier	A unique identifier for an inconsistency generated as a result of unsuccessful electronic verifications of Non-ESC MEC coverage performed by the Exchange.
Non-ESC MEC Inconsistency Manual Adjudication Conducted	Indicates whether a Non-ESC MEC verification inconsistency was manually adjudicated.
Non-ESC MEC Verification Determination Date	The date that the application Non-ESC MEC verification was determined.
Non-ESC MEC Verification Reason	The findings used to set the final verification result in corroborating the consumer's attestation.
Non-ESC MEC Verification Result	Indicator denoting the verification result of a Non-ESC MEC verification.
Number of Tax Household Members	Total number of individuals considered to be part of a tax household
Person Tracking Number	A unique identification number that is used to identify a person across benefit years.
Physical Document Type	The type of document that would be supplied by the consumer to validate or verify certain eligibility status (e.g. citizenship, lawful presence). Specific physical document types would require manual adjudication.
Plan Certified Indicator	Indicates whether the selected QHP by the consumer has been certified
Plan Year	Year for which this plan has been created.
Policy Applied APTC Amount	The amount of APTC that has been applied to the policy.

Data Dictionary

Information Element	Element Definition
Policy Creation Date	The date when the policy was created.
QHP Eligibility Determination Date	Date when the application member's QHP eligibility was determined.
QHP Eligibility Indicator	Indicates if the Exchange determines an applicant is eligible for QHP.
QHP Eligibility Reason	Reason for the given determination for QHP eligibility.
QHP Residency Eligibility Determination Date	Date when the application member QHP Residency date was determined.
QHP Residency Eligibility Indicator	Indicates whether the applicant was determined to be QHP Residency eligible.
QHP Residency Eligibility Reason	Reason for the given determination for QHP Residency eligibility.
QHP Suppression Date	Date of QHP suppression.
QHP Suppression Reason	Reason for the suppression of a QHP.
QHP Unsuppression Date	Date of QHP unsuppression.
Relevant Consumer Documents	<p>A list of documents provided by the consumer to adjudicate a specific inconsistency, including name, date received, and any other relevant information.</p> <p>If providing multiple documents, please separate document by semi-colon</p>
Residency Inconsistency Manual Adjudication Conducted	Indicates whether a Residency verification inconsistency was manually adjudicated.
Residency Verification Date	Date when verification of residency attestation was conducted.
Residency Verification Reason	The findings used to set the final verification result in corroborating the consumer's attestation.
Residency Verification Result	The final determination on whether the Exchange was able to verify the consumer's attestation.

Data Dictionary

Information Element	Element Definition
Second Lowest Cost Silver Plan Premium Amount	This is the essential health benefits EHB adjusted monthly premium of the Second Lowest Cost Silver Plan (SLCSP) (or sum of SLCSPs) that cover the primary taxpayer, his or her spouse, and their tax dependents for use in computing max advance payments of the premium tax credit.
Selected For Sample (Filled Out By SBE)	Indicator that flags whether a tax household was selected as part of the sample for review
Selected Insurance Plan Identifier	Insurance plan identifier for the policy selected by the applicant.
SEP Eligibility Determination Date	The date when the application members SEP eligibility was determined.
SEP Eligibility End Date	The date that the application SEP eligibility ended or will end.
SEP Eligibility Indicator	Indicator that marks which SEP the application is eligible for based on the applicant's attestation.
SEP Eligibility Start Date	The date that the application SEP eligibility started or will start.
SEP Manual Adjudication Clock End Date	Date when the SEP manual adjudication ends.
SEP Manual Adjudication Date	Date when the SEP was manually adjudicated.
SEP Manual Adjudication Identifier	A unique identifier for a SEP manual review performed by the Exchange.
SEP Manual Adjudication Indicator	Indicates if the SEP application was manually adjudicated by the exchange.
SEP Manual Adjudication Status	Outcome of the manual SEP verification adjudication.
SEP Type	The type of SEP.
Special Rule For Non-Citizens Override Indicator	Indicates whether an applicant who is lawfully present, with income below the 100% FPL, but is ineligible for Medicaid by reason of immigration status, making them eligible for APTC.
SSN Inconsistency	The number of SSN inconsistencies that were associated to a tax household for a given plan year. Note: if SE cannot provide a specific count, then a "Y/N" value is acceptable to indicate that an inconsistency type exists for the tax household
SSN Inconsistency Manual Adjudication Conducted	Indicates whether a SSN verification inconsistency was manually adjudicated.

Data Dictionary

Information Element	Element Definition
SSN Provided by Applicant	Social Security Number provided by applicant.
SSN Verification Date	Date when SSN attestation verification was conducted.
SSN Verification Reason	The findings used to set the final verification result in corroborating the consumer's attestation.
SSN Verification Result	The final determination on whether the Exchange was able to verify the consumer's attestation.
Tax Dependent Indicator	Applicant attesting to being a dependent within a tax household.
Tax Filer Indicator	Applicant attesting to being a tax filer within a tax household.
Tax Filing Status	Tax filing status of an applicant.
Tax Household Grouping Identifier	Identifier that groups application members within a single tax household.
Tax Household Size in Manual Income Verification	Tax household size reflected any standard or custom tool / method / process for manual verification.
Transient City	Applicant intended future home city.
Transient State Code	Applicant intended future home state code.
Transient Street Address	Applicant intended future home street address.
Transient Zip Code	Applicant intended future mailing zip code.
Attested Premium Amount	Consumer attested ESC MEC Premium amount.
Employer Verified Premium Amount	ESC MEC Premium amount as stated by employer during sampling.
As-Of Date	a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.
Received APTC Prior Year	Indicates that an application member has received APTC the previous year

Data Dictionary

Information Element	Element Definition
SEP Inconsistency Identifier	A unique identifier for an inconsistency generated as a result of unsuccessful electronic verifications of SEP coverage performed by the Exchange.
SEP Auto-Verification Inconsistency Result	Indicator denoting the verification result of a SEP Auto-Verification.
Incarceration Inconsistency	A unique identifier for an inconsistency generated as a result of an incarceration inconsistency by the Exchange.
Residency Inconsistency	A unique identifier for an inconsistency generated as a result of a residency inconsistency by the Exchange.

Element Detail	Format
<p>This is a free text field that provides a narrative of the end-to-end chronology of events associated with an inconsistency to enhance the interpretation of the events related to adjudicating the inconsistency. The field will contain, but are not limited to the following elements:</p> <ul style="list-style-type: none"> - The current status of the inconsistency type being reviewed. - The date the issue was submitted. - The inconsistency that was created and the Clock End Date that was associate with the task. - The list of documents that were submitted by the consumer and the dates they were submitted. - The Adjudication Date. 	Alphanumeric
<p>Indicator of whether the DMI was adjudicated using the consumer Non-Citizen ID. Possible values are:</p> <ul style="list-style-type: none"> - "Yes - Non-Citizen ID number was used to resolve the issue." - "No - Non-Citizen ID number was not used to resolve the issue." 	Alphanumeric
N/A	Alphanumeric
N/A	Numeric
This date associates to a unique application version.	Date
<p>Enrollment period includes:</p> <ul style="list-style-type: none"> - Open Enrollment - Special Enrollment 	Alphanumeric

Element Detail	Format
<p>The application can be originated from any of the following sources:</p> <ul style="list-style-type: none"> - Consumer online submission - Issuer direct enrollment - Submission from third parties - Inbound account transfer - Manual verification worker - Appeals group - Other <p>Note: Application submission from third parties include those events originated from agents, brokers, navigators or assisters, call center workers etc..</p>	Alphanumeric
<p>Application events types include:</p> <ul style="list-style-type: none"> - Initial Application - Change in Circumstances (aka. Change Report) - Period Data Matching (PDM) for Death - PDM for Medicare - PDM for Medicaid and CHIP - PDM for Failure to Reconcile (FTR) - Auto Re-enrollment - Updates as a result of manual verification - Updates as a result of appeal - Other 	Alphanumeric
<p>In the event that a given tax household is represented among two or more applications or policies for QHP/APTC eligibility within a specific Plan / Benefit Year, CMS would want to be able to map all related applications pertaining to the same tax household. If an Exchange does not have such an identifier at the household level, this identifier should be created for each sample.</p>	Alphanumeric
<p>This date associates to a unique application.</p>	Date

Element Detail	Format
<p>There are often multiple application versions that associate to a given application due to any number of events that may occur throughout the Plan / Benefit Year (e.g. reports of Change in Circumstance, Periodic Data Matching, Redeterminations of Eligibility, etc.).</p> <p>In the event an Exchange uses unique identifiers, such as Physical and Logical Application and Policy IDs, to distinguish these events from the same household, the Exchange is expected to apply sequence numbers for each of these events. An alternative might be using dates for the new policies resulted from application events.</p>	Alphanumeric
N/A	Date
N/A	Alphanumeric
N/A	Alphanumeric
<p>Indicator of whether the inconsistency was adjudicated per a search in DHS SAVE using the consumer provided Non-Citizen ID or I-94 number.</p> <p>Values for this field are:</p> <ul style="list-style-type: none"> - Yes - DHS SAVE was used to resolve the issue. - No - DHS SAVE was not used to resolve the issue. 	Alphanumeric
N/A	Alphanumeric
N/A	Decimal
N/A	Date
N/A	Alphanumeric

Element Detail	Format
This indicator associates to each unique member on the application.	Alphanumeric
This indicator associates to each unique member on the application.	Alphanumeric
N/A	Alphanumeric
This indicator associates to the tax household on the application.	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
Changed information can include but not limited to: * Member demographic information * Life events (e.g., marriage, adoption) * Annual income increase/decrease * Lawful presence status change	Alphanumeric
This indicator associates to each unique member on the application.	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Integer
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Date

Element Detail	Format
N/A	Alphanumeric
N/A	Numeric
N/A	Alphanumeric
This date associates to each unique member on the application.	Date
Reasons for the verification result can vary depending on the verification logic used by the Exchange. For example, the reason could be 'Inconsistent with External Data Source' if the verification logic is simply using a basic comparison of the consumer's attestation with those observed from the external data source. If the consumer does not exactly match the external data source, then the consumer receives a Verification Result of 'Inconsistent'.	Alphanumeric
The verification result should clearly indicate if the verification was successful in verifying the attestation, or if inconsistency was found.	Alphanumeric
N/A	Date
N/A	Date
This may not be applicable to Exchanges.	Alphanumeric
This field could be used to understand the effective date range of the income document. This field may not be applicable to all Exchanges.	Date
This field could be used to understand the effective date range of the income document. This field may not be applicable to all Exchanges.	Date
Examples of income sources could be from an employer pay stub, 1040, etc.	Decimal

Element Detail	Format
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Date
N/A	Date
There should be at least one date scheduled for Death PDM.	Date
N/A	Alphanumeric
<p>DHS SAVE is a Third Party Data Source that is used when performing electronic verification (Step 1). Steps 2 and 3 may be used during the manual verification process to verify applicants' lawful presence status.</p> <ul style="list-style-type: none"> - N/A - The inconsistency was not related immigration status. - Yes Successful - Non-Citizen ID was provided by consumer and lawful presence was determined = Yes using DHS SAVE. - Not Successful - Non-Citizen ID was provided but lawful presence could not be verified. - Not Attempted - Non-Citizen ID was either: <ul style="list-style-type: none"> - Not provided and not used - Provided but not used for resolution 	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric

Element Detail	Format
N/A	Numeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
This date associates to each unique member on the application.	Date
This date associates to each unique member on the application.	Date
Reasons for the verification result can vary depending on the verification logic used by the Exchange. For example, the reason could be 'Inconsistent with External Data Source' if the verification logic is simply using a basic comparison of the consumer's attestation with those observed from the external data source. If the consumer does not exactly match the external data source, then the consumer receives a Verification Result of 'Inconsistent'.	Alphanumeric

Element Detail	Format
Reasons for the verification result can vary depending on the verification logic used by the Exchange. For example, the reason could be 'Inconsistent with External Data Source' if the verification logic is simply using a basic comparison of the consumer's attestation with those observed from the external data source. If the consumer does not exactly match the external data source, then the consumer receives a Verification Result of 'Inconsistent'.	Alphanumeric
This may not apply to all Exchanges.	Alphanumeric
N/A	Decimal
N/A	Date
N/A	Date
N/A	Alphanumeric
N/A	Date
N/A	Alphanumeric
N/A	Date
N/A	Date
N/A	Alphanumeric
N/A	Decimal
N/A	Alphanumeric
FPL guidelines can be found at https://aspe.hhs.gov/poverty-guidelines .	Decimal
N/A	Alphanumeric

Element Detail	Format
APTC eligible range is 100.00% to 400.00%.	Decimal
N/A	Date
N/A	Alphanumeric
N/A	Date
N/A	Date
<p>The field could be populated with the following:</p> <ul style="list-style-type: none"> - The date and time that a Clock End Date was extended, by applying GFE, the reason for the extension. - What the clock End Date was before the GFE was applied and after. - Blank: No GFE 	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
<p>Indicator of whether the DMI was adjudicated using the consumer I-94 number.</p> <p>Values for this field are:</p> <ul style="list-style-type: none"> - Yes - I-94 number was used to resolve the issue. - No - I-94 number was not used to resolve the issue. 	Alphanumeric
N/A	Date
N/A	Alphanumeric
This date associates to each unique member on the application.	Date
<p>Reasons for the verification result can vary depending on the verification logic used by the Exchange. For example, the reason could be 'Inconsistent with External Data Source' if the verification logic is simply using a basic comparison of the consumer's attestation with those observed from the external data source. If the consumer is not found within the external data source, then the consumer's attestation value is used.</p>	Alphanumeric

Element Detail	Format
The verification result should clearly indicate if the verification was successful in verifying the attestation, or if inconsistency was found.	Alphanumeric
N/A	Alphanumeric
This date associates to the tax household on the application.	Date
Reasons for the verification result can vary depending on the verification logic used by the Exchange. For example, the reason could be 'Inconsistent with External Data Source' if the verification logic is simply using a basic comparison of the consumer's attestation with those observed from the external data source. If the consumer does not exactly match the external data source, then the consumer receives a Verification Result of 'Inconsistent'.	Alphanumeric
N/A	Alphanumeric
This field may not be applicable to all Exchanges.	Date
N/A	Date
N/A	Date
This data is after the consumer submitted the requested documents per the clock end, and indicates a deadline for completing the manual verification.	Date
An inconsistency is triggered by the Exchange when the outcome of a verification indicates a discrepancy between the applicant's attestation and the information available from a Trusted Data Source. An inconsistency identifier would be assigned for each event where an inconsistency is triggered by the Exchange. The inconsistency identifier would be specific to each type of inconsistency triggered by the Exchange pertaining to any application member. In the event that an Exchange does not have dedicated inconsistency identifiers to identify unique inconsistencies, the Exchange could create such an identifier as long as it is unique within the sample.	Alphanumeric

Element Detail	Format
<p>Statuses include:</p> <ul style="list-style-type: none"> - Successful manual verification: Inconsistency was resolved and consumer attestation verified. - Unsuccessful manual verification: Inconsistency was not resolved and consumer attestation not verified. - Other: This category could include various statuses used by an Exchange. 	Alphanumeric
<p>The Exchange may trigger several sub types of inconsistencies based on which consumer attestation(s) are found to be inconsistent with Trusted Data Sources. Inconsistency Subtype is associated with unique verification issue within the application. It further classifies the inconsistency type. This field may or may not be applicable for all Exchanges.</p>	Alphanumeric
N/A	Date
N/A	Alphanumeric
N/A	Date
N/A	Date
<p>Possible values are:</p> <ul style="list-style-type: none"> - Initial enrollment: An intent to enroll in a health plan. The policy has not been accepted by the issuer but the process to initiate that process has started - Effectuated: A policy has been created by the initial enrollment request, confirmed by the Issuer, and begun coverage as of the policy effective date. - Canceled: Policy has been cancelled. A policy can only be cancelled if coverage has not started, i.e., had not been effectuated. - Terminated: Coverage has ended for the policy after the policy was effectuated (providing coverage). 	Alphanumeric
N/A	Decimal
N/A	Alphanumeric

Element Detail	Format
N/A	Alphanumeric
N/A	Date
N/A	Date
N/A	Alphanumeric
N/A	Decimal
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric

Element Detail	Format
N/A	Alphanumeric
N/A	Decimal
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Numeric
N/A	Alphanumeric
This date associates to each unique member on the application.	Date
Reasons for the verification result can vary depending on the verification logic used by the Exchange. For example, the reason could be 'Inconsistent with External Data Source' if the verification logic is simply using a basic comparison of the consumer's attestation with those observed from the external data source. If the consumer does not exactly match the external data source, then the consumer receives a Verification Result of 'Inconsistent'.	Alphanumeric
The verification result should clearly indicate if the verification was successful in verifying the attestation, or if inconsistency was found.	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric

Element Detail	Format
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
The values for this field should clearly indicate if the manual income verification was successful or not.	Alphanumeric
N/A	Decimal
N/A	Date
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Date
N/A	Date
There should be at least two dates scheduled for Medicaid/CHIP PDM.	Date
N/A	Alphanumeric
N/A	Date
There should be at least two dates scheduled for Medicare PDM.	Date
N/A	Alphanumeric
N/A	Alphanumeric

Element Detail	Format
This is a numeric text value.	Decimal
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Date
N/A	Alphanumeric
N/A	Numeric

Element Detail	Format
<p>An inconsistency is triggered by the Exchange when the outcome of a verification indicates a discrepancy between the applicant's attestation and the information available from a Trusted Data Source. An inconsistency identifier would be assigned for each event where an inconsistency is triggered by the Exchange. The inconsistency identifier would be specific to each type of inconsistency triggered by the Exchange pertaining to any application member.</p> <p>In the event that an Exchange does not have dedicated inconsistency identifiers to identify unique inconsistencies, the Exchange could create such an identifier as long as it is unique within the sample.</p>	Alphanumeric
N/A	Alphanumeric
N/A	Date
<p>Reasons for the verification result can vary depending on the verification logic used by the Exchange. For example, the reason could be 'Inconsistent with External Data Source' if the verification logic is simply using a basic comparison of the consumer's attestation with those observed from the external data source. If the consumer does not exactly match the external data source, then the consumer receives a Verification Result of 'Inconsistent'.</p>	Alphanumeric
N/A	Alphanumeric
N/A	Integer
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Integer
N/A	Decimal

Element Detail	Format
N/A	Date
N/A	Date
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Date
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Date
N/A	Alphanumeric
N/A	Date
Not all documents from the consumer may be used to adjudicate an inconsistency.	Alphanumeric
N/A	Alphanumeric
This date associates to each unique member on the application.	Date
Reasons for the verification result can vary depending on the verification logic used by the Exchange. For example, the reason could be 'Inconsistent with External Data Source' if the verification logic is simply using a basic comparison of the consumer's attestation with those observed from the external data source. If the consumer is not found within the external data source, then the consumer's attestation value is used.	Alphanumeric
The verification result should clearly indicate if the verification was successful in verifying the attestation, or if inconsistency was found.	Alphanumeric

Element Detail	Format
N/A	Decimal
N/A	Alphanumeric
This indicator is made of a code, 2 sets of numbers identifying the plan selected, with the state abbreviation in between them.	Alphanumeric
N/A	Date
N/A	Date
N/A	Alphanumeric
N/A	Date
N/A	Date
N/A	Date
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Numeric
N/A	Alphanumeric

Element Detail	Format
This field is only used for applicants who attest to citizenship, applicants who are lawfully present may or may not have an SSN.	Alphanumeric
This date associates to each unique member on the application.	Date
Reasons for the verification result can vary depending on the verification logic used by the Exchange. For example, the reason could be 'Inconsistent with External Data Source' if the verification logic is simply using a basic comparison of the consumer's attestation with those observed from the external data source. If the consumer does not exactly match the external data source, then the consumer receives a Verification Result of 'Inconsistent'.	Alphanumeric
The verification result should clearly indicate if the verification was successful in verifying the attestation, or if inconsistency was found.	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
This may not be applicable to Exchanges.	Integer
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Alphanumeric
N/A	Decimal
N/A	Decimal
	date/timestamp
N/A	Alphanumeric

Element Detail	Format
<p>An inconsistency is triggered by the Exchange when the outcome of a verification indicates a discrepancy between the applicant's attestation and the information available from a Trusted Data Source. An inconsistency identifier would be assigned for each event where an inconsistency is triggered by the Exchange. The inconsistency identifier would be specific to each type of inconsistency triggered by the Exchange pertaining to any application member.</p> <p>In the event that an Exchange does not have dedicated inconsistency identifiers to identify unique inconsistencies, the Exchange could create such an identifier as long as it is unique within the sample.</p>	Alphanumeric
N/A	Alphanumeric
<p>An inconsistency is triggered by the Exchange when the outcome of a verification indicates a discrepancy between the applicant's attestation and the information available from a Trusted Data Source. An inconsistency identifier would be assigned for each event where an inconsistency is triggered by the Exchange. The inconsistency identifier would be specific to each type of inconsistency triggered by the Exchange pertaining to any application member.</p> <p>In the event that an Exchange does not have dedicated inconsistency identifiers to identify unique inconsistencies, the Exchange could create such an identifier as long as it is unique within the sample.</p>	Alphanumeric
<p>An inconsistency is triggered by the Exchange when the outcome of a verification indicates a discrepancy between the applicant's attestation and the information available from a Trusted Data Source. An inconsistency identifier would be assigned for each event where an inconsistency is triggered by the Exchange. The inconsistency identifier would be specific to each type of inconsistency triggered by the Exchange pertaining to any application member.</p> <p>In the event that an Exchange does not have dedicated inconsistency identifiers to identify unique inconsistencies, the Exchange could create such an identifier as long as it is unique within the sample.</p>	Alphanumeric

Length	Example
1000	"This inconsistency was resolved on 01-01-2020 using an I-551 card. DHS SAVE was not used."
100	"Yes - Non-Citizen ID number was used to resolve the issue", "No - Non-Citizen ID number was not used to resolve the issue"
1000	"I-551 Card (Received on 01-01-2020) via Mailroom, Passport (Received on 02-01-2020) uploaded to web site, 1040 (Received on 03-01-2020) via Mailroom"
3	"1", "8", "Y", "N"
9	"12JAN2021"
100	"Open Enrollment", "Special Enrollment"

Length	Example
100	"Consumer online submission"
100	"Initial Application"
100	"A123456", "12345678", "A1-2024-MD" -- (an example of a generated Application Identifier for the Plan Year 2024 review for the state of MD)
9	"12JAN2021"

Length	Example
100	"1", "2", "01/22/2020"
9	"12JAN2021"
10	"True", "False", "Yes", "No", "Y", "N"
100	"Applicant has employee sponsored coverage (ESC)", "Income is out of FPL range", "Applicant meets all APTC eligibility criteria"
100	"Yes - DHS SAVE was used to resolve the issue", "No - DHS SAVE was not used to resolve the issue"
100	"VA", "Medicaid/CHIP", "Medicare", "Peace Corp", "Tricare"
10	"60000"
9	"12JAN2021"
100	"Adoption", "Newborn", "Marriage", "Relocation", "Loss of MEC"

Length	Example
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
10	"2"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
100	"Failure to provide sufficient documentation to allow Auto-rerollment"
10	"True", "False", "Yes", "No", "Y", "N"
9	"12JAN2021"

Length	Example
10	"True", "False", "Yes", "No", "Y", "N"
3	"1", "8", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
9	"12JAN2021"
1000	"External data source not reasonably compatible with attestation", "Applicant did not give sufficient information", "Applicant attestation was over set thresholds"
100	"Yes", "No", "Success", "Failure", "Verified", "Inconsistency Found"
9	"12JAN2021"
9	"12JAN2021"
1000	"1040"
9	"12JAN2021"
9	"12JAN2021"
10	"60000"

Length	Example
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
9	"12JAN2021"
9	"12JAN2021"
9	"12JAN2021"
10	"True", "False", "Yes", "No", "Y", "N"
100	"N/A", "Yes Successful", "Not Successful", "Not Attempted"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
100	"Office of Personnel Management", "Employer Sampled Information"
10	"True", "False", "Yes", "No", "Y", "N"

Length	Example
3	"1", "8", "Y", "N"
11	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
10	"Yes", "No", "Success", "Failure", "Verified", "Inconsistency Found", "Hold"
10	"Yes", "No", "Success", "Failure", "Verified", "Inconsistency Found", "Hold"
9	"12JAN2021"
9	"12JAN2021"
1000	"External data source not reasonably compatible with attestation", "Applicant did not give sufficient information", "Applicant attestation was over set thresholds"

Length	Example
1000	"External data source not reasonably compatible with attestation", "Applicant did not give sufficient information", "Applicant attestation was over set thresholds"
10	"True", "False", "Yes", "No", "Y", "N"
10	"2000"
9	"12JAN2021"
8	"12JAN2021"
10	"True", "False", "Yes", "No", "Y", "N"
9	"12JAN2021"
100	"12345678"
9	"12JAN2021"
9	"12JAN2021"
10	"True", "False", "Yes", "No", "Y", "N"
10	"2000"
10	"True", "False", "Yes", "No", "Y", "N"
10	"60000"
100	"Sherwin"

Length	Example
10	"60000"
9	"12JAN2021"
10	"True", "False", "Yes", "No", "Y", "N"
9	"12JAN2021"
9	"12JAN2021"
1000	"Yes (with original clock end date, extended clock end date, and reason)", "No"
100	"McLean"
10	"VA"
100	"123 Forrest Street"
10	"22102"
100	"Yes - I-94 number was used to resolve the issue", "No - I-94 number was not used to resolve the issue"
9	"12JAN2021"
10	"True", "False", "Yes", "No", "Y", "N"
9	"12JAN2021"
1000	"External data source not reasonably compatible with attestation", "Applicant did not give sufficient information"

Length	Example
100	"Yes", "No", "Success", "Failure", "Verified", "Inconsistency Found"
10	"True", "False", "Yes", "No", "Y", "N"
9	"12JAN2021"
1000	"External data source not reasonably compatible with attestation", "Applicant did not give sufficient information", "Applicant attestation was over set thresholds"
100	"Yes", "No", "Success", "Failure", "Verified", "Inconsistency Found"
9	"12JAN2021"
9	"12JAN2021"
9	"12JAN2021"
9	"12JAN2021"
100	"123456789"

Length	Example
1000	"Successful manual verification", "Unsuccessful manual verification", "Other - Insufficient document. The consumer was asked to submit additional document(s) to confirm their attested information, and the inconsistency was not successfully resolved"
100	"citizenship_born_qhp"
9	"12JAN2021"
100	"12345678"
9	"12JAN2021"
9	"12JAN2021"
100	"Initial enrollment"
10	"60000"
10	"True", "False", "Yes", "No", "Y", "N"

Length	Example
10	"True", "False", "Yes", "No", "Y", "N"
9	"12JAN2021"
9	"12JAN2021"
10	"True", "False", "Yes", "No", "Y", "N"
10	"2000"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
1000	"Exchange keeps data value and tells issuer to update their data records", "Exchange adopts issuer data values"
1000	"Exchange keeps data value and tells issuer to update their data records", "Exchange adopts issuer data values"
1000	"Exchange keeps data value and tells issuer to update their data records", "Exchange adopts issuer data values"

Length	Example
1000	"Exchange keeps data value and tells issuer to update their data records", "Exchange adopts issuer data values"
10	"2000"
100	"Brown"
10	"True", "False", "Yes", "No", "Y", "N"
3	"1", "8", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
9	"12JAN2021"
1000	"External data source not reasonably compatible with attestation", "Applicant did not give sufficient information", "Applicant attestation was over set thresholds"
100	"Yes", "No", "Success", "Failure", "Verified", "Inconsistency Found"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"

Length	Example
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
100	"McLean"
10	"VA"
100	"123 Forrest Street"
10	"22102"
10	"True", "False", "Yes", "No", "Y", "N"
10	"2000"
9	"12JAN2021"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
9	"12JAN2021"
9	"12JAN2021"
9	"12JAN2021"
10	"True", "False", "Yes", "No", "Y", "N"
9	"12JAN2021"
9	"12JAN2021"
10	"True", "False", "Yes", "No", "Y", "N"
10	"spouse", "daughter", "son"

Length	Example
10	"2000"
100	"David"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
9	"12JAN2021"
10	"True", "False", "Yes", "No", "Y", "N"
3	"1", "8", "Y", "N"

Length	Example
10	"123456789"
10	"True", "False", "Yes", "No", "Y", "N"
9	"12JAN2021"
1000	"External data source not reasonably compatible with attestation", "Applicant did not give sufficient information", "Applicant attestation was over set thresholds"
100	"Yes", "No", "Success", "Failure", "Verified", "Inconsistency Found"
10	"1"
10	"12345678"
100	
10	"True", "False", "Yes", "No", "Y", "N"
10	"2021", "2022", "2023"
10	"2000"

Length	Example
9	"12JAN2021"
9	"12JAN2021"
10	"True", "False", "Yes", "No", "Y", "N"
100	"Applicant is incarcerated", "Applicant is neither a citizen or has lawful presence", "Applicant meets all QHP eligibility criteria"
9	"12JAN2021"
10	"True", "False", "Yes", "No", "Y", "N"
100	"Applicant residency is out of state"
9	"12JAN2021"
100	"Exchange freezes new enrollments"
9	"12JAN2021"
1000	"I-551 Card (Received on 01-01-2020) via Mailroom"
10	"True", "False", "Yes", "No", "Y", "N"
9	"12JAN2021"
1000	"External data source not reasonably compatible with attestation", "Applicant did not give sufficient information"
100	"Yes", "No", "Success", "Failure", "Verified", "Inconsistency Found"

Length	Example
10	"2000"
3	"Yes", "No"
100	"99969OH100010"
9	"12JAN2021"
8	"12JAN2021"
10	"True", "False", "Yes", "No", "Y", "N"
9	"12JAN2021"
9	"12JAN2021"
9	"12JAN2021"
10	"123456789"
10	"True", "False", "Yes", "No", "Y", "N"
100	"Expired", "Obsolete", "Resolved", "Running"
100	"Adoption", "Newborn", "Marriage", "Relocation", "Loss of MEC"
10	"True", "False", "Yes", "No", "Y", "N"
3	"1", "8", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"

Length	Example
100	"123-45-6789"
9	"12JAN2021"
1000	"External data source not reasonably compatible with attestation", "Applicant did not give sufficient information", "Applicant attestation was over set thresholds"
100	"Yes", "No", "Success", "Failure", "Verified", "Inconsistency Found"
10	"True", "False", "Yes", "No", "Y", "N"
10	"True", "False", "Yes", "No", "Y", "N"
100	"Single", "Married", "Married Filing Separately"
10	"0123456789"
10	"2"
100	"McLean"
10	"VA"
100	"123 Forrest Street"
10	"22102"
10	"60000"
11	"60000"
16	yyyy-mm-dd-hh. mm.
10	"True", "False", "Yes", "No", "Y", "N"

Length	Example
10	"123456789"
100	"Yes", "No", "Success", "Failure", "Verified", "Inconsistency Found"
10	"123456789"
10	"123456789"

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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	No Underline
Data Mapping by State	
Data Mapping	Information Element
4. Review Area: Electronic Verification of Applications	
4.1 Review Module: Confirm SSN Electronic Verification	
<ul style="list-style-type: none"> 4.1.1 Review Unit: Confirm SSN Verification was Conducted - Determine whether 	
	<u>Tax Household Grouping Identifier</u>
	<u>Application Identifier</u>
	<u>Application Version</u>
	<u>Application Submission Date</u>
	<u>Person Tracking Number</u>
	<u>As-Of-Date</u>
	<u>SSN Provided by Applicant</u>
	<u>First Name</u>
	<u>Middle Name</u>
	<u>Last Name</u>
	<u>Birth Date</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>Application Creation Date</u>
	<u>Application Event Type</u>
	<u>Application Event Source</u>
	<u>Attested Coverage Request</u>
	<u>Attested Financial Assistance Request</u>
	<u>SSN Verification Date</u>
	<u>SSN Verification Result</u>
	<u>SSN Verification Reason</u>
● 4.1.2 Review Unit: Confirm SSN Verification was Concluded Properly - Determin	
0	Tax Household Grouping Identifier
0	Application Identifier

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	SSN Provided by Applicant
0	First Name
0	Middle Name
0	Last Name
0	Birth Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	SSN Verification Date
0	SSN Verification Result
0	SSN Verification Reason
	<u>SSN Inconsistency Manual Adjudication Conducted</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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Data Mapping by State	
Data Mapping	Information Element
	<u>Citizenship Verification Result</u>
	<u>Citizenship Verification Reason</u>
	<u>Citizenship Inconsistency Manual Adjudication Conducted</u>
	<u>Death Data Present</u>
• 4.1.3 Review Unit: Confirm Single Use of SSN - Determine if multiple individual	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	SSN Provided by Applicant
0	First Name
0	Middle Name
0	Last Name
0	Birth Date
4.2 Review Module: Confirm Citizenship/LP Electronic Verification	
● 4.2.1 Review Unit: Confirm Citizenship/LP Verification was Conducted - Determ	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	First Name
0	Middle Name
0	Last Name
0	Birth Date
0	Application Creation Date

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
	<u>Attested Citizenship Status Indicator</u>
	<u>Attested Lawfully Present Status Indicator</u>
	<u>Citizenship Verification Date</u>
	<u>Lawful Presence Verification Date</u>
● 4.2.2 Review Unit: Confirm Citizenship/LP Verification was Concluded Properly	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	SSN Provided by Applicant
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Attested Financial Assistance Request
0	Attested Citizenship Status Indicator
0	Attested Lawfully Present Status Indicator
0	Citizenship Verification Date
	<u>Citizenship Verification Result</u>
0	Citizenship Verification Reason
	<u>Physical Document Type</u>
0	Citizenship Inconsistency Manual Adjudication Conducted
0	Lawful Presence Verification Date
	<u>Lawful Presence Verification Result</u>
	<u>Immigration Status Expiration Date</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>Lawful Presence Verification Reason</u>
	<u>Lawful Presence Inconsistency Manual Adjudication Conducted</u>
● 4.2.3 Review Unit: Confirm Action on Immigration Status Redetermination - Id	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
	<u>Insurance Policy End Date</u>
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Attested Lawfully Present Status Indicator
0	Immigration Status Expiration Date

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	RC Determined Result
4.3 Review Module: Confirm Annual Household Income and Tax Household :	
● 4.3.1 Review Unit: Confirm Income Verification Conducted - Confirm that annu	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Application Creation Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
	<u>FPL Percentage Per Attested Income</u>
	<u>Income Verification Date</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>Income Verification Reason</u>
● 4.3.2 Review Unit: Confirm Income Verification Concluded Properly - Determin	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
	<u>Attested Annual Household Income</u>
0	Income Verification Date
	<u>Income Verification Result</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Income Verification Reason
	<u>Consumer Income Documented Amount</u>
	<u>Income Inconsistency Manual Adjudication Conducted</u>
	<u>Consumer Income Document Effective End Date</u>
	<u>APTC Eligibility Indicator</u>
● 4.3.3 Review Unit: Confirm Tax Household Size was Calculated Properly - Det	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
	<u>Member Association Role Type</u>
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Attested Financial Assistance Request
	<u>Attested Tax Household Size</u>
● 4.3.4 Review Unit: Confirm Individuals are Present in Only One Application - Fc	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
	<u>Insurance Policy Identifier</u>
	<u>Policy Creation Date</u>
	<u>Insurance Policy Status</u>
	<u>Insurance Policy Start Date</u>
0	Insurance Policy End Date
	<u>Policy Applied APTC Amount</u>
0	SSN Provided by Applicant
0	First Name
0	Middle Name
0	Last Name

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Birth Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Attested Tax Household Size
	<u>Member-Level Allocated APTC Amount</u>
	<u>Maximum APTC Amount</u>
4.4 Review Module: Confirm Residency Electronic Verification	
● 4.4.1 Review Unit: Confirm Residency Verification was Conducted - Determine	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
	<u>Home Street Address</u>
	<u>Home City</u>
	<u>Home State Code</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>Home Zip Code</u>
0	Application Creation Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
	<u>Residency Verification Date</u>
● 4.4.2 Review Unit: Confirm Residency Verification was Conducted Properly - De	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Home Street Address
0	Home City
0	Home State Code
0	Home Zip Code
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Residency Verification Date

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>Residency Verification Result</u>
	<u>Residency Verification Reason</u>
4.5 Review Module: Confirm Incarceration Electronic Verification	
● 4.5.1 Review Unit: Confirm Incarceration Verification was Conducted - Determination	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Application Creation Date
0	Application Event Type
0	Application Event Source

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Attested Coverage Request
0	Attested Financial Assistance Request
	<u>Attested Incarceration Status Indicator</u>
● 4.5.2 Review Unit: Confirm Incarceration Verification was Concluded Properly	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Attested Incarceration Status Indicator
	<u>Incarceration Verification Date</u>
4.6 Review Module: Confirm ESC MEC Verification	
● 4.6.1 Review Unit: Confirm ESC MEC Verification was Conducted - Verify attest	

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Application Creation Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
	<u>Attested ESC Offer</u>
	Eligible for ESC Sampling
	Chosen for ESC Sampling

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>ESC Data Source</u>
	<u>ESC Data Found</u>
	<u>ESC Meets MEC and Affordability Standards-based on attested premium amount</u>
	<u>ESC Meets MEC and Affordability Standards-based on employer verified premium amount</u>
	<u>ESC Verification Determination Date-Attested</u>
	<u>ESC Verification Determination Date-Employer Verified</u>
	<u>ESC Verification Result-Attested</u>
	<u>ESC Verification Result-Employer Verified</u>
	<u>APTC Eligibility Date</u>
0	APTC Eligibility Indicator
● 4.6.2 Review Unit: Confirm ESC MEC Verification was Concluded Properly - Ver	

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Attested ESC Offer
	<u>Attested Premium Amount</u>
0	ESC Data Source
0	ESC Data Found
	<u>ESC Inconsistency Manual Adjudication Conducted</u>
0	ESC Meets MEC and Affordability Standards-based on attested premium amount

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	ESC Meets MEC and Affordability Standards-based on employer verified premium amount
0	ESC Verification Determination Date-Attested
0	ESC Verification Determination Date-Employer Verified
0	ESC Verification Result-Attested
0	ESC Verification Result-Employer Verified
4.7 Review Module: Confirm Non ESC MEC Verification	
● 4.7.1 Review Unit: Confirm Non ESC MEC Verification was Conducted - Confirm	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Application Creation Date

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
	<u>Attested Non-ESC MEC Offer</u>
	<u>Non-ESC MEC Verification Determination Date</u>
	<u>Non-ESC MEC Verification Result</u>
	<u>Non-ESC MEC Verification Reason</u>
	<u>QHP Eligibility Indicator</u>
● 4.7.2 Review Unit: Confirm Non ESC MEC Verification was Concluded Properly	
0	Tax Household Grouping Identifier
0	Application Identifier

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Insurance Policy Start Date
0	Insurance Policy End Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Attested Non-ESC MEC Offer
	<u>Medicaid Denied Date</u>
0	Non-ESC MEC Verification Determination Date
	<u>Non-ESC MEC EDS Data Found</u>
0	Non-ESC MEC Verification Result
0	Non-ESC MEC Verification Reason

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>Non-ESC MEC Inconsistency Identifier</u>
	<u>Non-ESC MEC Inconsistency Manual Adjudication Conducted</u>
0	QHP Eligibility Indicator
5. Review Area: Inconsistency Adjudication and Conclusion	
5.1 Review Module: General Inconsistency Review	
● 5.1.1 Review Unit: Verify Inconsistency Document Submission Timeline - Verify	
	<u>Tax Household Grouping Identifier</u>
	<u>Application Identifier</u>
	<u>Application Version</u>
	<u>Application Submission Date</u>
	<u>Person Tracking Number</u>
	<u>As-Of-Date</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	First Name
0	Middle Name
0	Last Name
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
	<u>Inconsistency Identifier</u>
	<u>Inconsistency Sub-Type</u>
	<u>Inconsistency Status</u>
	<u>Adjudication History</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>Relevant Consumer Documents</u>
	<u>All Consumer Documents</u>
	<u>Inconsistency Clock End Date</u>
	<u>Inconsistency Clock End Date (Alternative)</u>
	<u>Good Faith Extension</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>DHS SAVE Manual Verification Indicator</u>
• 5.1.2 Review Unit: Verify Inconsistency Adjudication Timeline - Verify the cons	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Inconsistency Identifier

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Inconsistency Sub-Type
0	Inconsistency Status
0	Adjudication History
0	Inconsistency Clock End Date
0	Inconsistency Clock End Date (Alternative)
	<u>Inconsistency Adjudication Date</u>
0	Good Faith Extension
• 5.1.3 Review Unit: Verify Application Member Names - Determine whether the	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	First Name
0	Middle Name
0	Last Name
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Inconsistency Identifier
0	Inconsistency Status

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Adjudication History
0	Relevant Consumer Documents
0	All Consumer Documents
	<u>Escalation Guidance</u>
● 5.1.4 Review Unit: Verify Document Authenticity - Validate the authenticity of	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Inconsistency Identifier
0	Inconsistency Status
0	Adjudication History
0	Relevant Consumer Documents
● 5.1.5 Review Unit: Verify Document Expiration Dates - Determine if the docum	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	First Name
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Inconsistency Identifier
0	Inconsistency Sub-Type
0	Inconsistency Status
0	Adjudication History
0	Relevant Consumer Documents
0	All Consumer Documents
0	Inconsistency Adjudication Date
	<u>Consumer Documents Issue Date</u>
	<u>Consumer Documents Expiration Date</u>
	<u>Consumer Income Document Effective Start Date</u>
	<u>Consumer Income Document Effective End Date</u>
5.2 Review Module: Inconsistency Sufficiency Review	
<ul style="list-style-type: none"> 5.2.1 Review Unit: Verify Citizenship Sufficiency - Verify consumer submitted d 	

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	First Name
0	Middle Name
0	Last Name
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Inconsistency Identifier
0	Inconsistency Sub-Type
0	Inconsistency Status
0	Adjudication History
0	Relevant Consumer Documents

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	All Consumer Documents
0	DHS SAVE Manual Verification Indicator
	<u>Non-Citizen ID Indicator</u>
	<u>I-94 Number Indicator</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>Attempt Made to DHS SAVE Indicator</u>
● 5.2.2 Review Unit: Verify Immigration Sufficiency - Verify consumer submitted	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	First Name
0	Middle Name
0	Last Name
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Inconsistency Identifier

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Inconsistency Sub-Type
0	Inconsistency Status
0	Adjudication History
0	All Consumer Documents
0	DHS SAVE Manual Verification Indicator
0	Non-Citizen ID Indicator
0	I-94 Number Indicator
0	Attempt Made to DHS SAVE Indicator
• 5.2.3 Review Unit: Verify Annual Income Sufficiency - Verify consumer submit	
0	Tax Household Grouping Identifier
0	Application Identifier

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	First Name
0	Middle Name
0	Last Name
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Attested Annual Household Income
0	Inconsistency Identifier
0	Inconsistency Sub-Type
0	Inconsistency Status
0	Adjudication History
0	Relevant Consumer Documents

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	All Consumer Documents
0	DHS SAVE Manual Verification Indicator
0	Non-Citizen ID Indicator
0	I-94 Number Indicator
0	Attempt Made to DHS SAVE Indicator
	<u>Consumer Documents Reflected in Manual Income Verification Result</u>
• 5.2.4 Review Unit: Verify ESC MEC Sufficiency - Verify consumer submitted doc	
0	Tax Household Grouping Identifier
0	Application Identifier

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	First Name
0	Middle Name
0	Last Name
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Inconsistency Identifier
0	Inconsistency Sub-Type
0	Inconsistency Status
0	Adjudication History
0	All Consumer Documents
0	Escalation Guidance

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	DHS SAVE Manual Verification Indicator
0	Non-Citizen ID Indicator
0	I-94 Number Indicator
0	Attempt Made to DHS SAVE Indicator
• 5.2.5 Review Unit: Verify Non-ESC MEC Sufficiency - Verify consumer submitte	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	As-Of-Date
0	First Name
0	Middle Name
0	Last Name
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Inconsistency Identifier
0	Inconsistency Sub-Type
0	Inconsistency Status
0	Adjudication History
0	All Consumer Documents
0	Escalation Guidance

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	DHS SAVE Manual Verification Indicator
0	Non-Citizen ID Indicator
0	Attempt Made to DHS SAVE Indicator
• 5.2.6 Review Unit: Verify Incarceration Sufficiency - Verify consumer submitted	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As of Date

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	First Name
0	Middle Name
0	Last Name
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Inconsistency Identifier
0	Inconsistency Sub-Type
0	Inconsistency Status
0	Adjudication History
0	All Consumer Documents
0	Escalation Guidance

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	DHS SAVE Manual Verification Indicator
0	Non-Citizen ID Indicator
0	I-94 Number Indicator
0	Attempt Made to DHS SAVE Indicator
5.3 Review Module: Inconsistency Conclusion	
● 5.3.1 Review Unit: Verify Inconsistency Conclusion Reflected in the Exchange -	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Application Event Type

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Inconsistency Identifier
0	Inconsistency Sub-Type
0	Inconsistency Status
● 5.3.2 Review Unit: Verify APTC/QHP Eligibility Adjustment - Verify that the elig	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Insurance Policy Identifier
0	Insurance Policy Status
0	Insurance Policy End Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Attested Financial Assistance Request
0	Inconsistency Identifier
0	Inconsistency Sub-Type
0	Inconsistency Status
0	Inconsistency Adjudication Date
	<u>Inconsistency Expiration Date</u>
0	QHP Eligibility Indicator
0	APTC Eligibility Indicator
0	Member-Level Allocated APTC Amount
0	Maximum APTC Amount
● 5.3.3 Review Unit: Verify Income Verification Tool (IVT) Inconsistency Conclusions	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Application Event Type

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Attested Annual Household Income
0	Consumer Income Documented Amount
0	Inconsistency Identifier
0	Inconsistency Sub-Type
0	Inconsistency Status
	<u>Manual Income Verification Result</u>
6. Review Area: SEP Adjudication and Conclusion	
6.1 Review Module: General SEP Adjudication Review Procedures	
<ul style="list-style-type: none"> 6.1.1 Review Unit: Verify SEP Document Submission Timeline - Verify the const 	
	<u>Tax Household Grouping Identifier</u>
	<u>Application Identifier</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>Application Version</u>
	<u>Application Submission Date</u>
	<u>Person Tracking Number</u>
	<u>As-Of-Date</u>
0	First Name
0	Middle Name
0	Last Name
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
	<u>SEP Type</u>
	<u>SEP Manual Adjudication Identifier</u>
	<u>SEP Adjudication History</u>
	<u>SEP Relevant Consumer Documents</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>SEP All Consumer Documents</u>
	<u>SEP Manual Adjudication Status</u>
	<u>SEP Manual Adjudication Clock End Date</u>
	<u>SEP Good Faith Extension</u>
• 6.1.2 Review Unit: Verify SEP Adjudication Timeline - Verify whether the SEP a	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	SEP Type

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	SEP Manual Adjudication Identifier
0	SEP Adjudication History
	<u>SEP Manual Adjudication Date</u>
0	SEP Manual Adjudication Status
0	SEP Good Faith Extension
• 6.1.3 Review Unit: Verify Application Member Names - Verify whether the nan	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	First Name
0	Middle Name
0	Last Name
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	SEP Type
0	SEP Manual Adjudication Identifier
0	SEP Adjudication History
0	SEP Relevant Consumer Documents
0	SEP All Consumer Documents

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	SEP Manual Adjudication Status
	<u>SEP Escalation Guidance</u>
• 6.1.4 Review Unit: Verify Document Authenticity - Verify whether the consum	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	First Name
0	Middle Name
0	Last Name
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	SEP Type
0	SEP Manual Adjudication Identifier
0	SEP Adjudication History
0	SEP Relevant Consumer Documents
0	SEP All Consumer Documents
0	SEP Manual Adjudication Status
0	SEP Manual Adjudication Clock End Date

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
<ul style="list-style-type: none"> 6.1.5 Review Unit: Verify QLE Dates - Verify whether the consumer submitted 	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	First Name
0	Middle Name
0	Last Name
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	SEP Type
0	SEP Manual Adjudication Identifier
0	SEP Adjudication History
0	SEP Relevant Consumer Documents
0	SEP All Consumer Documents
0	SEP Manual Adjudication Status
0	SEP Manual Adjudication Clock End Date
0	SEP Good Faith Extension
0	SEP Escalation Guidance

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
6.2 Review Module: Conclusion of SEP Manual Adjudication	
● 6.2.1 Review Unit: Verify SEP Conclusion Reflected in SBE's database - Verify th	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Insurance Policy Identifier
0	Insurance Policy Status
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	SEP Type
0	SEP Manual Adjudication Identifier
0	SEP Adjudication History
0	SEP Relevant Consumer Documents
0	SEP All Consumer Documents
0	SEP Manual Adjudication Status
0	SEP Escalation Guidance
● 6.2.2 Review Unit: Verify Enrollment per SEP Conclusion - Verify the SEP eligibi	
0	Tax Household Grouping Identifier

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Insurance Policy Identifier
0	Insurance Policy Status
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	SEP Type
0	SEP Manual Adjudication Identifier
0	SEP Adjudication History
0	SEP Relevant Consumer Documents
0	SEP All Consumer Documents
0	SEP Manual Adjudication Status
0	SEP Escalation Guidance
7. Review Area: Eligibility Determinations	
7.1 Review Module: Verify QHP Residency Eligibility Determination	
<ul style="list-style-type: none"> 7.1.1 Review Unit: Confirm QHP Residency was Conducted - This test is performed 	
	<u>Tax Household Grouping Identifier</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>Application Identifier</u>
	<u>Application Version</u>
	<u>Application Submission Date</u>
	<u>Person Tracking Number</u>
	<u>As-Of-Date</u>
0	Application Creation Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
	<u>QHP Residency Eligibility Determination Date</u>
	<u>QHP Residency Eligibility Indicator</u>
<ul style="list-style-type: none"> 7.1.2 Review Unit: Confirm QHP Residency was Concluded Properly - Determin 	

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
	<u>Tax Filer Indicator</u>
	<u>Tax Dependent Indicator</u>
0	Home Street Address
0	Home City
0	Home State Code
0	Home Zip Code
	<u>Mailing Street Address</u>
	<u>Mailing City</u>
	<u>Mailing State Code</u>
	<u>Mailing Zip Code</u>
	<u>Transient Street Address</u>
	<u>Transient City</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>Transient State Code</u>
	<u>Transient Zip Code</u>
	<u>Attested Temporary Absence</u>
	<u>Attested No Fixed Address</u>
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
	<u>Residency Inconsistency Manual Adjudication Conducted</u>
0	QHP Residency Eligibility Indicator
7.2 Review Module: Verify QHP Eligibility Determination	
• 7.2.1 Review Unit: Verify QHP Eligibility Determination Was Conducted - Deter	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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Data Mapping by State	
Data Mapping	Information Element
0	As-Of-Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Attested Citizenship Status Indicator
0	Attested Lawfully Present Status Indicator
0	Attested Incarceration Status Indicator
0	QHP Residency Eligibility Indicator
	<u>QHP Residency Eligibility Reason</u>
	<u>QHP Eligibility Determination Date</u>
0	QHP Eligibility Indicator
	<u>QHP Eligibility Reason</u>
	<u>Attested Non-Perjury Indicator</u>
● 7.2.2 Review Unit: Verify QHP Eligibility Determination Was Concluded Proper	
0	Tax Household Grouping Identifier

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Application Event Type
0	Application Event Source
0	Attested Non-Perjury Indicator
	<u>Attested Information Change Reported Indicator</u>
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Attested Citizenship Status Indicator
0	Attested Lawfully Present Status Indicator
0	Attested Incarceration Status Indicator
	<u>Attested Incarceration Pending Disposition Indicator</u>
0	Residency Verification Result

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	QHP Eligibility Determination Date
0	QHP Eligibility Indicator
7.3 Review Module: Verify APTC Eligibility Determination	
● 7.3.1 Review Unit: Verify APTC Eligibility Determination Was Conducted - Verif	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
	<u>Tax Filing Status</u>
0	Application Creation Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Attested Lawfully Present Status Indicator

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	FPL Percentage Per Attested Income
0	Attested ESC Offer
0	Non-ESC MEC Verification Reason
0	APTC Eligibility Date
0	APTC Eligibility Indicator
● 7.3.2 Review Unit: Verify APTC Eligibility Determination Was Concluded Properly	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Tax Filing Status
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Attested Lawfully Present Status Indicator
0	FPL Percentage Per Attested Income
0	Attested Non-ESC MEC Offer
	<u>Attested ESC Offer</u>
0	Non-ESC MEC Verification Result
0	QHP Eligibility Indicator
0	APTC Eligibility Indicator
	<u>APTC Eligibility Reason</u>
	<u>Special Rule For Non-Citizens Override Indicator</u>
7.4 Review Module: Verify SEP Eligibility Determination	
• 7.4.1 Review Unit: Confirm SEP Eligibility Determination Was Concluded Properly	
0	Tax Household Grouping Identifier

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Insurance Policy Identifier
0	Insurance Policy Status
0	Birth Date
	<u>Application Enrollment Period Type</u>
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
	<u>Attested Circumstance Change Type</u>
	<u>Attested Circumstance Change Date</u>
	<u>Attested Person Recognized Tribe Indicator</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>Medicaid Denied Indicator</u>
0	Medicaid Denied Date
	<u>Moved From Foreign Country Within Last 60 Days Indicator</u>
	<u>Coverage 60 Days Before Move Indicator</u>
	<u>Lived In No QHP Zone Within 60 Days Before Move Indicator</u>
	<u>Coverage 60 Days Before Marriage Indicator</u>
	<u>Lived in No QHP Zone Within 60 Days Before Marriage Indicator</u>
	<u>Lived In Foreign Country 60 Days Before Marriage Indicator</u>
0	QHP Eligibility Indicator
0	Member-Level Allocated APTC Amount
	<u>Exchange Applied SEP Indicator</u>
	<u>Exchange Applied SEP Start Date</u>
	<u>Exchange Applied SEP End Date</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>Exchange Applied SEP Determination Date</u>
	<u>SEP Eligibility Indicator</u>
0	SEP Type
	<u>SEP Eligibility Start Date</u>
	<u>SEP Eligibility End Date</u>
	<u>SEP Eligibility Determination Date</u>
0	SEP Manual Adjudication Status
	<u>SEP Manual Adjudication Indicator</u>
• 7.4.2 Review Unit: Confirm Electronic SEP Verification Performed - Determine i	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Insurance Policy Identifier

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>Latest Policy Record</u>
0	Insurance Policy Status
0	Insurance Policy Start Date
0	Insurance Policy End Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Member-Level Allocated APTC Amount
0	Exchange Applied SEP Indicator
0	Exchange Applied SEP Start Date
0	Exchange Applied SEP End Date
0	Exchange Applied SEP Determination Date
0	SEP Eligibility Indicator
0	SEP Type
0	SEP Eligibility Start Date
0	SEP Eligibility End Date
0	SEP Eligibility Determination Date
	<u>SEP Auto-Verification Inconsistency Result</u>
	<u>SEP Inconsistency Identifier</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	SEP Manual Adjudication Indicator
<ul style="list-style-type: none"> 7.4.3 Review Unit: Confirm Effective Coverage Start Date and Best SEP Determination 	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Insurance Policy Identifier
0	Insurance Policy Status
0	Insurance Policy Start Date
	Insurance Policy Selected Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Attested Circumstance Change Type
0	Attested Circumstance Change Date
0	Exchange Applied SEP Indicator

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Exchange Applied SEP Start Date
0	Exchange Applied SEP End Date
0	Exchange Applied SEP Determination Date
0	SEP Type
0	SEP Eligibility Start Date
0	SEP Eligibility End Date
0	SEP Eligibility Determination Date
0	SEP Manual Adjudication Indicator
7.5 Review Module: Verify Max APTC	
• 7.5.1 Review Unit: Verify Max APTC Was Calculated Properly - Determine if the	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	As-Of-Date
0	Insurance Policy Identifier
0	Insurance Policy Status

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Insurance Policy Start Date
0	Insurance Policy End Date
0	Policy Applied APTC Amount
	<u>Essential Health Benefits Policy Premium Amount</u>
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	FPL Percentage Per Attested Income
0	Attested Annual Household Income
	<u>Federal Poverty Level Amount</u>
	<u>Second Lowest Cost Silver Plan Premium Amount</u>
0	Maximum APTC Amount

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>Issuer Effectuation Status</u>
● 7.5.2 Review Unit: Verify FPL Amount Was From Correct Coverage Year - Deter	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	As-Of-Date
0	Insurance Policy Identifier
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Attested Tax Household Size
0	Federal Poverty Level Amount
0	Issuer Effectuation Status

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
● 7.5.3 Review Unit: Confirm the Applied APTC Does Not Exceed the Max APTC A	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	As-Of-Date
0	Insurance Policy Identifier
0	Insurance Policy Status
0	Insurance Policy Start Date
0	Insurance Policy End Date
0	Policy Applied APTC Amount
0	Essential Health Benefits Policy Premium Amount
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Member-Level Allocated APTC Amount
0	Maximum APTC Amount
0	Issuer Effectuation Status
<ul style="list-style-type: none"> 7.5.4 Review Unit: Confirm the Applied APTC Amount Does Not Exceed the Ho 	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	As-Of-Date
0	Insurance Policy Identifier
0	Insurance Policy Status
0	Policy Applied APTC Amount
0	Essential Health Benefits Policy Premium Amount

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Issuer Effectuation Status
8. Review Area: Enrollment Redeterminations	
8.1 Review Module: Verify Annual Redeterminations Were Concluded Properly	
● 8.1.1 Review Unit: Verify Enrollee Group Assignments - Determine whether the	
	<u>Tax Household Grouping Identifier</u>
	<u>Application Identifier</u>
	<u>Application Version</u>
	<u>Person Tracking Number</u>
0	Application Event Type
0	Application Event Source

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Attested Annual Household Income
	<u>Enrollee Tax Return Access Authorization</u>
	<u>IRS Income Data Available</u>
	<u>IRS Tax Form Receipt</u>
	<u>IRS Annual Tax Household Income Amount</u>
	<u>Failure to Reconcile Indicator</u>
	<u>Auto Re-enrolled for past 2 Benefit Years</u>
	<u>No IRS data for past 3 Benefit Years</u>
	<u>No updates to application for past 2 Benefit Years</u>
● 8.1.2 Review Unit: Verify APTC Eligibility Determination per Annual Redetermini	
0	Tax Household Grouping Identifier

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Application Identifier
0	Application Version
	<u>Application Submission Date</u>
0	Person Tracking Number
	<u>As-Of-Date</u>
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	APTC Eligibility Indicator
	<u>Auto Re-Enrollment Eligible Indicator</u>
	<u>Auto Re-Enrollment Denial Reason</u>
8.2 Review Module: Medicaid/CHIP Periodic Data Matching (PDM)	

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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	No Underline
Data Mapping by State	
Data Mapping	Information Element
● 8.2.1 Review Unit: Medicaid/CHIP PDM Requested Properly - Determine wheth	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Insurance Policy Start Date
0	Insurance Policy End Date
0	Policy Applied APTC Amount
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
	<u>Medicaid/CHIP PDM Scheduled Date</u>
	<u>Medicaid/CHIP PDM Actual Run Date</u>
	<u>Medicaid/CHIP Confirmed Dual Enrollment</u>
	<u>Medicaid/CHIP Confirmed Expiration Date</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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	No Underline
Data Mapping by State	
Data Mapping	Information Element
● 8.2.2 Review Unit: Medicaid/CHIP PDM Confirmation of Dual Enrollment Was C	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Insurance Policy Start Date
0	Insurance Policy End Date
0	Application Event Type
0	Application Event Source
0	Attested Financial Assistance Request
0	APTC Eligibility Date
0	APTC Eligibility Indicator
0	Medicaid/CHIP PDM Scheduled Date
0	Medicaid/CHIP PDM Actual Run Date
0	Medicaid/CHIP Confirmed Dual Enrollment
0	Medicaid/CHIP Confirmed Expiration Date

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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	No Underline
Data Mapping by State	
Data Mapping	Information Element
8.3 Review Module: Verify Failure to Reconcile (FTR) Periodic Data Match	
● 8.3.1 Review Unit: Verify FTR PDM Check Was Initiated - Determine whether a	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Insurance Policy Start Date
0	Insurance Policy End Date
0	Policy Applied APTC Amount
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
	<u>FTR PDM Scheduled Date</u>
	<u>FTR PDM Actual Run Date</u>
	<u>FTR PDM Confirmed Expiration</u>
	<u>FTR PDM Confirmed Expiration Date</u>
	<u>Received APTC Prior Year</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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	No Underline
Data Mapping by State	
Data Mapping	Information Element
● 8.3.2 Review Unit: Verify Whether Confirmed FTR PDM Was Concluded Proper	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Insurance Policy Start Date
0	Insurance Policy End Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	APTC Eligibility Date
0	APTC Eligibility Indicator
0	FTR PDM Scheduled Date
0	FTR PDM Confirmed Expiration Date
0	Received APTC Prior Year
8.4 Review Module: Death Periodic Data Matching	
● 8.4.1 Review Unit: Death PDM Initiated Properly - Determine whether a Death	
0	Tax Household Grouping Identifier
0	Application Identifier

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Insurance Policy Start Date
0	Insurance Policy End Date
0	Policy Applied APTC Amount
0	Birth Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	SSN Verification Date
0	SSN Verification Result
0	SSN Verification Reason
	<u>Death PDM Scheduled Date</u>
	<u>Death PDM Actual Run Date</u>
	<u>Death Date</u>
<ul style="list-style-type: none"> • 8.4.2 Review Unit: Death PDM Concluded Properly - Determine whether an ap 	

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Insurance Policy End Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	QHP Eligibility Indicator
0	Death PDM Scheduled Date
0	Death Data Present
0	Death Date
	<u>Death Resolution Status</u>
8.5 Review Module: Medicare Periodic Data Matching	
● 8.5.1 Review Unit: Medicare PDM Initiated Properly - Determine whether a Me	
0	Tax Household Grouping Identifier

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Insurance Policy Start Date
0	Insurance Policy End Date
0	Policy Applied APTC Amount
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
	<u>Medicare PDM Scheduled Date</u>
	<u>Medicare PDM Actual Run Date</u>
● 8.5.2 Review Unit: Medicare PDM Concluded Properly - Determine whether an	
0	Tax Household Grouping Identifier
0	Application Identifier

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Insurance Policy Start Date
0	Insurance Policy End Date
0	Application Event Type
0	Application Event Source
0	QHP Eligibility Indicator
0	APTC Eligibility Date
0	APTC Eligibility Indicator
0	Medicare PDM Scheduled Date
0	Medicare PDM Actual Run Date
	<u>Medicare Dual Enrollment Status</u>
	<u>Medicare Resolution Status</u>
9. Review Area: Enrollment Reconciliation	
9.1 Review Module: Verify Enrollment Determination	

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
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	No Underline
Data Mapping by State	
Data Mapping	Information Element
● 9.1.1 Review Unit: Verify Household Enrollment Based on SBE's APTC Eligibility	
	<u>Tax Household Grouping Identifier</u>
	<u>Application Identifier</u>
	<u>Application Version</u>
	<u>Application Submission Date</u>
	<u>Person Tracking Number</u>
	<u>As-Of-Date</u>
0	Insurance Policy Identifier
0	Insurance Policy Start Date
0	Insurance Policy End Date
	<u>Multiple Tax Household Indicator</u>
0	Tax Filing Status
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Attested Financial Assistance Request
0	APTC Eligibility Indicator
0	Member-Level Allocated APTC Amount
● 9.1.2 Review Unit: Confirm Enrollment Effectuation Reconciliation - Confirm w	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Insurance Policy Identifier
0	Insurance Policy Status
0	Insurance Policy Start Date
0	Insurance Policy End Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
	<u>Exchange Effectuation Status</u>
0	Issuer Effectuation Status

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>Issuer Reconciliation Data Matching Issue Indicator For Effectuation Status</u>
	<u>Issuer Reconciliation Data Matching Issue Resolution For Effectuation Status</u>
● 9.1.3 Review Unit: Confirm Issuer and the SBE Coverage Span Reconciliation - I	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Insurance Policy Status
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
	<u>Exchange Benefit Start Date</u>
	<u>Issuer Benefit Start Date</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>Issuer Reconciliation Data Matching Issue Indicator For Benefit Start Date</u>
	<u>Issuer Reconciliation Data Matching Issue Resolution For Benefit Start Date</u>
	<u>Exchange Benefit End Date</u>
	<u>Issuer Benefit End Date</u>
	<u>Issuer Reconciliation Data Matching Issue Indicator For Benefit End Date</u>
	<u>Issuer Reconciliation Data Matching Issue Resolution For Benefit End Date</u>
● 9.1.4 Review Unit: Confirm APTC Value Reconciliation - Determine whether ap	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	As-Of-Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
	<u>Exchange Policy Applied APTC Amount</u>
	<u>Issuer Policy Applied APTC Amount</u>
	<u>Issuer Total Premium Amount</u>
	<u>Issuer Reconciliation Data Matching Issue Indicator For Applied APTC Amount</u>
	<u>Issuer Reconciliation Data Matching Issue Resolution For Applied APTC Amount</u>
10. Review Area: Payments	
10.1 Review Module: Verify Net APTC Calculated Payments	
<ul style="list-style-type: none"> 10.1.1 Review Unit: Aggregated Enrollment-Payment Comparison - Determine 	
	<u>Tax Household Grouping Identifier</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>Application Identifier</u>
	<u>Application Version</u>
	<u>Application Submission Date</u>
	<u>As-Of-Date</u>
0	Insurance Policy Identifier
0	Insurance Policy Start Date
0	Insurance Policy End Date
0	Policy Applied APTC Amount
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
11. Review Area: Plan Management	
11.1 Review Module: Verify QHP Status	

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
<ul style="list-style-type: none"> 11.1.1 Review Unit: Confirm QHP Is Certified for the Coverage Year - Determined 	
	<u>Tax Household Grouping Identifier</u>
	<u>Application Identifier</u>
	<u>Application Version</u>
	<u>Application Submission Date</u>
	<u>Person Tracking Number</u>
	<u>As-Of-Date</u>
0	Insurance Policy Identifier
0	Insurance Policy Status
0	Insurance Policy Start Date
0	Insurance Policy End Date
0	Application Event Type
0	Application Event Source
0	Attested Coverage Request
0	Attested Financial Assistance Request
	<u>Selected Insurance Plan Identifier</u>

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
	<u>Plan Certified Indicator</u>
	<u>QHP Suppression Date</u>
	<u>QHP Unsuppression Date</u>
	<u>QHP Suppression Reason</u>
<ul style="list-style-type: none"> 11.1.2 Review Unit: Confirm No New Enrollments for Suppressed QHP - Determ 	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Insurance Policy Identifier
0	Insurance Policy Status
0	Insurance Policy Start Date
0	Insurance Policy End Date
0	Policy Applied APTC Amount
0	Application Event Type
0	Application Event Source

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Selected Insurance Plan Identifier
0	QHP Suppression Date
0	QHP Unsuppression Date
0	QHP Suppression Reason
• 11.1.3 Review Unit: Confirm Member Enrolled in QHP Offered In Their Plan Area	
0	Tax Household Grouping Identifier
0	Application Identifier
0	Application Version
0	Application Submission Date
0	Person Tracking Number
0	As-Of-Date
0	Insurance Policy Identifier
0	Insurance Policy Status
0	Insurance Policy Start Date
0	Insurance Policy End Date
0	Home State Code
0	Application Event Type
0	Application Event Source

Legend	
Disclaimer: SBEs should review this sheet in chronological	
Cell Color	Cell Format
	<u>Underlined</u>
	No Underline
Data Mapping by State	
Data Mapping	Information Element
0	Attested Coverage Request
0	Attested Financial Assistance Request
0	Selected Insurance Plan Identifier

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was peviously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

er SSN electronic verification was conducted when an SSN is provided.

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan / Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e. the creation and subsequent changes or updates made to an application during a Plan / Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person.

A date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

Social Security Number provided by applicant

First name of application member.

Middle name of application member.

Last Name of application member.

Birth Date of an application member.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

A field that is used to reflect the date that an application was created prior to being submitted.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Date when SSN attestation verification was conducted.

The final determination on whether the Exchange was able to verify the consumers attestation.

The findings used to set the final verification result in corroborating the consumer's attestation.

Indicates whether SSN electronic verification was concluded properly, and an inconsistency was initiated.

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping
Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

Social Security Number provided by applicant

First name of application member.

Middle name of application member.

Last name of application member.

Birth Date of an application member.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Date when SSN attestation verification was conducted.

The final determination on whether the Exchange was able to verify the consumers attestation.

The findings used to set the final verification result in corroborating the consumer's attestation.

Indicates whether an SSN verification inconsistency was manually adjudicated

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

The final determination on whether the Exchange was able to verify the consumer's attestation.

The findings used to set the final verification result in corroborating the consumer's attestation.

Indicates whether a Citizenship verification inconsistency was manually adjudicated.

SSA indicated that applicant is associated with death data.

s incorrectly used the same SSN. Note that an individual is defined here by a unique combination

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Social Security Number provided by applicant

First name of application member.

Middle name of application member.

Last name of application member.

Birth Date of an application member.

Identify if the Exchange conducted citizenship / LP verification when applicants (refer to the Glossary)

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

First name of application member.

Middle name of application member.

Last name of application member.

Birth Date of an application member.

A field that is used to reflect the date that an application was created prior to being submitted.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Indicates whether applicant attests he/she is a US citizen.

Indicates whether an applicant attests to being lawfully present.

Date when verification of citizenship attestation was conducted.

Date when verification of lawful presence attestation was conducted.

- Determine whether citizenship / LP verification was concluded properly, and an Inconsistency v

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan / Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e. the creation and subsequent changes or updates made to an application during a Plan / Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person.

Social Security Number provided by applicant

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

An indicator that the application member attested to requesting financial assistance.

Indicates whether application member attests he/she is a US citizen.

Indicates whether an application member attests to being lawfully present.

Date when verification of citizenship attestation was conducted.

The final determination on whether the Exchange was able to verify the consumer's attestation.

The findings used to set the final verification result in corroborating the consumer's attestation.

The type of document that would be supplied by the consumer to validate or verify certain eligibility status (e.g. citizenship, lawful presence). Specific physical document types would require manual adjudication.

Indicates whether a Citizenship verification inconsistency was manually adjudicated.

Date when verification of lawful presence attestation was conducted.

The final determination on whether the Exchange was able to verify the consumer's attestation.

Date when consumer's immigration status expires and needs to be redetermined.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was peviously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

The findings used to set the final verification result in corroborating the consumer's attestation.

Indicates whether a Lawful Presence verification inconsistency was manually adjudicated.

Identify situations where an application member's coverage should have been terminated on their i

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan / Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e. the creation and subsequent changes or updates made to an application during a Plan / Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person.

The end date of the Policy which the applicants are enrolled in.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Indicates whether an application member attests to being lawfully present.

Date when consumer's immigration status expires and needs to be redetermined.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was peviously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

An RC determined field indicating the result of an RU.

Size Verification

al household income verification was conducted for the application version.

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan / Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e. the creation and subsequent changes or updates made to an application during a Plan / Benefit Year.

A field that is used to reflect the date that an application was submitted.

A field that is used to reflect the date that an application was created prior to being submitted.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Income as a percentage of the Federal Poverty Level (FPL) amount, calculated per advanced payment tax credit rules published by the treasury based on information provided by the consumer.

Date when verification of income attestation was conducted.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was peviously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

The findings used to set the final verification result in corroborating the consumer's attestation.

e whether income verification was concluded properly and an Inconsistency was initiated when a

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan / Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e. the creation and subsequent changes or updates made to an application during a Plan / Benefit Year.

A field that is used to reflect the date that an application was submitted.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

The amount of annual income an application member attested to on the application.

Date when verification of income attestation was conducted.

Indicator denoting the verification result of an income verification.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping
Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

The findings used to set the final verification result in corroborating the consumer's attestation.

The amount of total annual tax income of the tax household calculated by the inconsistency verification worker based on documentation the application member provided.

Indicates whether an Income verification inconsistency was manually adjudicated.

The effective end date of the income document as submitted by the consumer.

Indicates if member is eligible for APTC.

Determine whether the tax household size is equal to the sum of all application members that were id

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan / Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e. the creation and subsequent changes or updates made to an application during a Plan / Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person.

The relationship the member has to the tax filer.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

An indicator that the application member attested to requesting financial assistance.

Attested number of individuals in the application related to tax filer members.
For each distinct individual in the system, determine whether the individual is present on multiple

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

A unique identifier assigned by the exchange to the insurance policy.

The date when the policy was created.

The status of the Policy which the applicants are enrolled in.

The start date of the Policy which the applicants are enrolled in.

The end date of the Policy which the applicants are enrolled in.

The amount of APTC that has been applied to the policy.

Social Security Number provided by applicant

First name of application member.

Middle name of application member.

Last name of application member.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was peviously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Birth Date of an application member.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Attested number of individuals in the application related to tax filer members.

Allocated APTC Amount is the amount that is allocated to the policy based on the amount the tax household has elected without consideration for amounts that are reallocated from other policies. The final amount of APTC that is applied takes into consideration the amounts that are left over from policies.

The maximum advanced payment tax credit amount for which the tax household is eligible for.

whether Residency electronic verification was conducted when an address is provided.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Date when verification of residency attestation was conducted.

determine whether Residency electronic verification was concluded properly, and an inconsistency

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

The final determination on whether the Exchange was able to verify the consumer's attestation.

The findings used to set the final verification result in corroborating the consumer's attestation.

Indicate whether Incarceration electronic verification was conducted when an Incarceration Attestation is provided.

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

A date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

A field that is used to reflect the date that an application was created prior to being submitted.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Indicates whether an application member is incarcerated.

- Determine whether Incarceration electronic verification was concluded properly, and an inconsi

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Indicates whether an application member is incarcerated.

Date to which Incarceration Verification was conducted.

ations of Employer Sponsored Coverage (ESC) Minimum Essential Coverage (MEC) to use in eligibi

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping
Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

A field that is used to reflect the date that an application was created prior to being submitted.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Indicates whether an applicant is eligible for Employer Sponsored health coverage.

The application member is eligible to be added to the ESC sampling frame.

Application member was selected as a part of the statistically significant subset and will be verified via the sampling process.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

The external data source that is used to verify the ESC attestation.

Indicates whether or not ESC verification data was found in the data source.

Indicates whether consumers ESC meets Minimum Essential Coverage (MEC) and Affordability standards based on consumer attested premium amount.

Indicates whether consumers ESC meets Minimum Essential Coverage (MEC) and Affordability standards based on employer verified premium amount.

Date when verification of ESC MEC attestation was conducted.

Date when Employer ESC MEC verification was conducted.

Indicator denoting the verification result of attested ESC MEC.

Indicator denoting the verification result of employer stated ESC coverage.

Date when the APTC eligibility was determined for an application member.

Indicates if member is eligible for APTC.

ify attestations of Employer Sponsored Coverage (ESC) Minimum Essential Coverage (MEC) to use

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping
Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Indicates whether an applicant is eligible for Employer Sponsored health coverage.

Consumer attested ESC MEC Premium amount.

The external data source that is used to verify the ESC attestation.

Indicates whether or not ESC verification data was found in the data source.

Indicates whether an ESC verification inconsistency was manually adjudicated.

Indicates whether consumers ESC meets Minimum Essential Coverage (MEC) and Affordability standards based on consumer attested premium amount.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Indicates whether consumers ESC meets Minimum Essential Coverage (MEC) and Affordability standards based on employer verified premium amount.

Date when verification of ESC MEC attestation was conducted.

Date when Employer ESC MEC verification was conducted.

Indicator denoting the verification result of attested ESC MEC.

Indicator denoting the verification result of employer stated ESC coverage.

that Non-ESC MEC verification was conducted for each application version prior to being used in

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

A field that is used to reflect the date that an application was created prior to being submitted.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Indicates whether the applicant attests to being enrolled in non-employer sponsored health coverage.

The date that the application Non-ESC MEC verification was determined.

Indicator denoting the verification result of a Non-ESC MEC verification.

The findings used to set the final verification result in corroborating the consumer's attestation.

Indicates if the Exchange determines an applicant is eligible for QHP.

- Confirm whether an application member's attestations of coverage through a public Non-ESC M

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping
Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

The start date of the Policy which the applicants are enrolled in.

The end date of the Policy which the applicants are enrolled in.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Indicates whether the applicant attests to being enrolled in non-employer sponsored health coverage.

Date that an applicant was denied eligibility for Medicaid.

The date that the application Non-ESC MEC verification was determined.

Hub returned data for any Non-ESC MEC coverage.

Indicator denoting the verification result of a Non-ESC MEC verification.

The findings used to set the final verification result in corroborating the consumer's attestation.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

A unique identifier for an inconsistency generated as a result of unsuccessful electronic verifications of Non-ESC MEC coverage performed by the Exchange.

Indicates whether a Non-ESC MEC verification inconsistency was manually adjudicated.

Indicates if the Exchange determines an applicant is eligible for QHP.

n

the consumer provided documents within the regulatory timeframe for inconsistency resolution

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

First name of application member.

Middle name of application member.

Last name of application member.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

A unique identifier for an inconsistency generated as a result of unsuccessful electronic verifications performed by the Exchange.

A field that describes the sub type of inconsistency that was generated by the Exchange.

An indicator that reflects the current status.

A description of the history of adjudicating an inconsistency.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

A list of documents provided by the consumer to adjudicate a specific inconsistency, including name, date received, and any other relevant information.

A list of all consumer documents received by the Exchange associated to the members of an application, including the type(s) of documents received, the date(s) the documents were received and the mode they were received.

The clock end date set by the Exchange based on the date the inconsistency was triggered.

The clock end date set by the Exchange based on the date the inconsistency was triggered, per alternative source, for example a data warehouse.

Indicator that reflects whether a good faith extension has been applied to the inconsistency clock end date.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

An alternative date that the manual verification of an inconsistency was concluded, per a system different from the original source. Such a system could be a data warehouse.

name(s) provided on the application reasonably match the consumer's name(s) reflected in cons

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Indicates whether an application was escalated to proper authorities for review and guidance.

documents submitted by the consumer.

ents submitted by the consumer were not expired and/or valid to adjudicate an Inconsistency ba

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

First name of application member.

Middle name of application member.

Last name of application member.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

A unique identifier for an inconsistency generated as a result of unsuccessful electronic verifications performed by the Exchange.

A field that describes the sub type of inconsistency that was generated by the Exchange.

An indicator that reflects the current status.

A description of the history of adjudicating an inconsistency.

A list of documents provided by the consumer to adjudicate a specific inconsistency, including name, date received, and any other relevant information.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping
Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

A list of all consumer documents received by the Exchange associated to the members of an application, including the type(s) of documents received, the date(s) the documents were received and the mode they were received.

An indicator that reflects whether DHS SAVE (Systematic Alien Verification for Entitlements) was used to manually verify an application member's attestation of lawful presence status.

- N/A - The inconsistency was not related to immigration status.
- Yes Successful - Alien ID was provided by consumer and lawful presence was determined = Yes using DHS SAVE.
- Not Successful - Alien ID was provided but lawful presence could not be verified.
- Not Attempted - Alien ID was either:
 - Not provided and not used
 - Provided but not used for resolution

Indicates whether the consumer provided a Non-Citizen ID.

Indicates whether the consumer provided an I-94 number.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was peviously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Indicates whether the Manual Adjudicator made an attempt to DHS SAVE.

documents are sufficient to resolve an immigration inconsistency for those application versions v

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan / Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e. the creation and subsequent changes or updates made to an application during a Plan / Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

First name of application member.

Middle name of application member.

Last Name of application member.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

A unique identifier for an inconsistency generated as a result of unsuccessful electronic verifications performed by the Exchange.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

A field that describes the sub type of inconsistency that was generated by the Exchange.

An indicator that reflects the current status.

A description of the history of adjudicating an inconsistency.

A list of all consumer documents received by the Exchange associated to the members of an application, including the type(s) of documents received, the date(s) the documents were received and the mode they were received.

An indicator that reflects whether DHS SAVE (Systematic Alien Verification for Entitlements) was used to manually verify an application member's attestation of lawful presence status.

- N/A - The inconsistency was not related immigration status.
- Yes Successful - Alien ID was provided by consumer and lawful presence was determined = Yes using DHS SAVE.
- Not Successful - Alien ID was provided but lawful presence could not be verified.
- Not Attempted - Alien ID was either:
 - Not provided and not used
 - Provided but not used for resolution

Indicates whether the consumer provided an Alien ID.

Indicates whether the consumer provided an I-94 number.

Indicates whether the Manual Adjudicator made an attempt to DHS SAVE.

ed documents are sufficient to resolve an annual income inconsistency for those application versi

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

First name of application member.

Middle name of application member.

Last name of application member.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

The amount of annual income an application member attested to on the application.

A unique identifier for an inconsistency generated as a result of unsuccessful electronic verifications performed by the Exchange.

A field that describes the sub type of inconsistency that was generated by the Exchange.

An indicator that reflects the current status.

A description of the history of adjudicating an inconsistency.

A list of documents provided by the consumer to adjudicate a specific inconsistency, including name, date received, and any other relevant information.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

A list of all consumer documents received by the Exchange associated to the members of an application, including the type(s) of documents received, the date(s) the documents were received and the mode they were received.

An indicator that reflects whether DHS SAVE (Systematic Alien Verification for Entitlements) was used to manually verify an application member's attestation of lawful presence status.

- N/A - The inconsistency was not related to immigration status.
- Yes Successful - Alien ID was provided by consumer and lawful presence was determined = Yes using DHS SAVE.
- Not Successful - Alien ID was provided but lawful presence could not be verified.
- Not Attempted - Alien ID was either:
 - Not provided and not used
 - Provided but not used for resolution

Indicates whether the consumer provided a Non-Citizen ID.

Indicates whether the consumer provided an I-94 number.

Indicates whether the Manual Adjudicator made an attempt to DHS SAVE.

Consumer documents reflected in standard or custom tool / method / process for manual verification.

Documents are sufficient to resolve an ESC MEC inconsistency for those application versions with ESC

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please

indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

First name of application member.

Middle name of application member.

Last name of application member.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

A unique identifier for an inconsistency generated as a result of unsuccessful electronic verifications performed by the Exchange.

A field that describes the sub type of inconsistency that was generated by the Exchange.

An indicator that reflects the current status.

A description of the history of adjudicating an inconsistency.

A list of all consumer documents received by the Exchange associated to the members of an application, including the type(s) of documents received, the date(s) the documents were received and the mode they were received.

Indicates whether an application was escalated to proper authorities for review and guidance.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please

indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

An indicator that reflects whether DHS SAVE (Systematic Alien Verification for Entitlements) was used to manually verify an application member's attestation of lawful presence status.

- N/A - The inconsistency was not related to immigration status.
- Yes Successful - Alien ID was provided by consumer and lawful presence was determined = Yes using DHS SAVE.
- Not Successful - Alien ID was provided but lawful presence could not be verified.
- Not Attempted - Alien ID was either:
 - Not provided and not used
 - Provided but not used for resolution

Indicates whether the consumer provided a Non-Citizen ID.

Indicates whether the consumer provided an I-94 number.

Indicates whether the Manual Adjudicator made an attempt to DHS SAVE.

d documents are sufficient to resolve a Non-ESC MEC inconsistency for those application versions

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping
Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was peviously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

First name of application member.

Middle name of application member.

Last name of application member.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

A unique identifier for an inconsistency generated as a result of unsuccessful electronic verifications performed by the Exchange.

A field that describes the sub type of inconsistency that was generated by the Exchange.

An indicator that reflects the current status.

A description of the history of adjudicating an inconsistency.

A list of all consumer documents received by the Exchange associated to the members of an application, including the type(s) of documents received, the date(s) the documents were received and the mode they were received.

Indicates whether an application was escalated to proper authorities for review and guidance.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was peviously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

An indicator that reflects whether DHS SAVE (Systematic Alien Verification for Entitlements) was used to manually verify an application member's attestation of lawful presence status.

- N/A - The inconsistency was not related to immigration status.
- Yes Successful - Alien ID was provided by consumer and lawful presence was determined = Yes using DHS SAVE.
- Not Successful - Alien ID was provided but lawful presence could not be verified.
- Not Attempted - Alien ID was either:
 - Not provided and not used
 - Provided but not used for resolution

Indicates whether the consumer provided a Non-Citizen ID.

Indicates whether the Manual Adjudicator made an attempt to DHS SAVE.

Documents are sufficient to resolve an incarceration inconsistency for those application versions

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan / Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e. the creation and subsequent changes or updates made to an application during a Plan / Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping
Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

First name of application member.

Middle name of application member.

Last Name of application member.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

A unique identifier for an inconsistency generated as a result of unsuccessful electronic verifications performed by the Exchange.

A field that describes the sub type of inconsistency that was generated by the Exchange.

An indicator that reflects the current status.

A description of the history of adjudicating an inconsistency.

A list of all consumer documents received by the Exchange associated to the members of an application, including the type(s) of documents received, the date(s) the documents were received and the mode they were received.

Indicates whether an application was escalated to proper authorities for review and guidance.

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order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

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Information Element Definition

Ability determinations and policy status on the SBE's database reflected the Inconsistency expiration
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Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

A unique identifier assigned by the exchange to the insurance policy.

The status of the Policy which the applicants are enrolled in.

The end date of the Policy which the applicants are enrolled in.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

The amount of total annual tax income of the tax household calculated by the inconsistency verification worker based on documentation the application member provided.

Outcome of income verification performed by manual reviewers to assess compatibility between attested and documented income.

Member submitted documents were submitted within the regulatory timeframe for SEP pre-enrollment

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

The type of SEP

A unique identifier for a SEP manual review performed by the Exchange.

A description of the history of adjudicating a SEP.

A list of documents provided by the consumer to adjudicate SEP; including name, date received, and any other relevant information.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Date when the SEP was manually adjudicated.

ne(s) provided on the application reasonably match the consumer's name reflected in consumer s

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping.

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

the SEP conclusion reached by the manual reviewer was reflected correctly in the SBE's database.

lity determination and policy status reflected in the SBE's database is based on the conclusion re

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping
Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

med to verify the consumer provided documents within the regulatory time frame for SEP pre-en
Identifier that groups application members within a single tax household.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

A field that is used to reflect the date that an application was created prior to being submitted.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Date when the application member QHP Residency date was determined.

Indicates whether the applicant was determined to be QHP Residency eligible.

e whether member was properly determined QHP Residency Eligible based on their attested resi

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

Applicant attesting to being a tax filer within a tax household.

Applicant attesting to being a dependent within a tax household.

Applicant home street address.

Applicant home city.

Applicant home state code.

Applicant home zip code.

Applicant mailing street address.

Applicant mailing city.

Applicant mailing state code.

Applicant mailing zip code.

Applicant intended future home street address.

Applicant intended future home city.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Applicant intended future home state code.

Applicant intended future mailing zip code.

Indicates whether this application member attests to living outside of the state temporarily.

Indicates whether an applicant has no fixed address.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Indicates whether a Residency verification inconsistency was manually adjudicated.

Indicates whether the applicant was determined to be QHP Residency eligible.

mine whether QHP eligibility was conducted for an application member who requested coverage

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was peviously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Indicates whether applicant attests he/she is a US citizen.

Indicates whether an applicant attests to being lawfully present.

Indicates whether an application member is incarcerated.

Indicates whether the applicant was determined to be QHP Residency eligible.

Reason for the given determnation for QHP Residency eligibility.

Date when the application member's QHP eligibility was determined.

Indicates if the Exchange determines an applicant is eligible for QHP.

Reason for the given determnation for QHP eligibility.

Indicates that the insurance applicant certifies that attestations are true under penalty of perjury.

ly - Determine whether QHP Eligibility Status was set properly based on the application member's

Identifier that groups application members within a single tax household.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

Indicates that the insurance applicant certifies that attestations are true under penalty of perjury.

Indicates that the insurance applicant understands that changed information needs to be reported.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Indicates whether applicant attests he/she is a US citizen.

Indicates whether an applicant attests to being lawfully present.

Indicates whether an application member is incarcerated.

Indicates whether an applicant attested to being in pending disposition for incarceration.

The final determination on whether the Exchange was able to verify the consumer's attestation.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Date when the application member's QHP eligibility was determined.

Indicates if the Exchange determines an applicant is eligible for QHP.

y that APTC Verification occurred.

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

Tax filing status of an applicant.

A field that is used to reflect the date that an application was created prior to being submitted.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Indicates whether an applicant attests to being lawfully present.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Income as a percentage of the Federal Poverty Level (FPL) amount, calculated per advanced payment tax credit rules published by the treasury based on information provided by the consumer.

Indicates whether an applicant is eligible for Employer Sponsored health coverage.

The findings used to set the final verification result in corroborating the consumer's attestation.

Date when the APTC eligibility was determined for an application member.

Indicates if member is eligible for APTC.

ly - Determine whether the APTC eligibility indicator was set properly.

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

Tax filing status of an applicant.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Indicates whether an applicant attests to being lawfully present.

Income as a percentage of the Federal Poverty Level (FPL) amount, calculated per advanced payment tax credit rules published by the treasury based on information provided by the consumer.

Indicates whether the applicant attests to being enrolled in non-employer sponsored health coverage.

Indicates whether an applicant is eligible for Employer Sponsored health coverage.

Indicator denoting the verification result of a Non-ESC MEC verification.

Indicates if the Exchange determines an applicant is eligible for QHP.

Indicates if member is eligible for APTC.

Reason for how the given APTC eligibility determination was reached.

Indicates whether an applicant who is lawfully present, with income below the 100% FPL, but is ineligible for Medicaid by reason of immigration status, making them eligible for APTC.

ly - Determine whether SEP eligibility was determined properly for an application version based

Identifier that groups application members within a single tax household.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

A unique identifier assigned by the exchange to the insurance policy.

The status of the Policy which the applicants are enrolled in.

Birth Date of an application member.

The enrollment period for the creation of the application.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

The circumstance change type attested by the applicant.

The date the circumstance change occurred.

Indicates if a person attested to being a member of a federally recognized tribe, band, nation, or community.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Indicates whether an applicant has been denied eligibility for Medicaid in the last 60 days.

Date that an applicant was denied eligibility for Medicaid.

Indicates whether the applicant attested to moving from a foreign country to the USA within the last 60 days.

Indicates whether the application member attested to having MEC within 60 days before the attested move date.

Indicates whether the applicant attested to moving from a service area where no QHP was available through the Exchange within the last 60 days.

Indicates whether the application member attested to having MEC within 60 days before the attested marriage date.

Indicates whether the applicant or the spouse attested to living in a service area where no QHP was available through the Exchange within 60 days before the marriage.

Indicates whether the applicant or the spouse attested to living in a foreign country or U.S. territory within 60 days before the marriage.

Indicates if the Exchange determines an applicant is eligible for QHP.

Allocated APTC Amount is the amount that is allocated to the policy based on the amount the tax household has elected without consideration for amounts that are reallocated from other policies. The final amount of APTC that is applied takes into consideration the amounts that are left over from policies.

Indicator that marks the SEP that was applied by the exchange.

The date that the exchange applied SEP started or will start.

The date that the exchange applied SEP ended or will end.

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order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

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Information Element Definition

The date that the exchange applied SEP was determined for the application version.

Indicator that marks which SEP the application is eligible for based on the application member's attestation.

The type of SEP.

The date that the application SEP eligibility started or will start.

The date that the application SEP eligibility ended or will end.

The date when the application members SEP eligibility was determined.

Outcome of the manual SEP verification adjudication.

Indicates if the SEP application was manually adjudicated by the exchange.

if an SEP Electronic Verification was performed.

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

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order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

ation Was Concluded Properly - Determine whether the effective coverage start date was prop

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

A unique identifier assigned by the exchange to the insurance policy.

The status of the Policy which the applicants are enrolled in.

The start date of the Policy which the applicants are enrolled in.

Date when the insurance policy was selected.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

The circumstance change type attested by the applicant.

The date the circumstance change occurred.

Indicator that marks the SEP that was applied by the exchange.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

The date that the exchange applied SEP started or will start.

The date that the exchange applied SEP ended or will end.

The date that the exchange applied SEP was determined for the application version.

The type of SEP.

The date that the application SEP eligibility started or will start.

The date that the application SEP eligibility ended or will end.

The date when the application members SEP eligibility was determined.

Indicates if the SEP application was manually adjudicated by the exchange.

Indicates if the SBE calculated the max APTC amount correctly based on the application member's applicable Se

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

A unique identifier assigned by the exchange to the insurance policy.

The status of the Policy which the applicants are enrolled in.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

The start date of the Policy which the applicants are enrolled in.

The end date of the Policy which the applicants are enrolled in.

The amount of APTC that has been applied to the policy.

Essential Health Benefits (EHB) policy premium amount in a given month.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Income as a percentage of the Federal Poverty Level (FPL) amount, calculated per advanced payment tax credit rules published by the treasury based on information provided by the consumer.

The amount of annual income an application member attested to on the application.

This is the Federal Poverty Level (FPL), as published on the first day of the regular enrollment period for coverage by a qualified health plan (QHP) through an Exchange for a calendar year, for a family size equal to tax household size without regard to lawful presence status.

This is the essential health benefits EHB adjusted monthly premium of the Second Lowest Cost Silver Plan (SLCSP) (or sum of SLCSPs) that cover the primary taxpayer, his or her spouse, and their tax dependents for use in computing max advance payments of the premium tax credit.

The maximum advanced payment tax credit amount for which the tax household is eligible for.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Indicates whether the applicant paid their initial premium for a given policy as indicated by issuer.

Indicates whether the FPL amount used in the calculation corresponds to the correct coverage year, state code

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

A unique identifier assigned by the exchange to the insurance policy.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Attested number of individuals in the application related to tax filer members.

This is the Federal Poverty Level (FPL), as published on the first day of the regular enrollment period for coverage by a qualified health plan (QHP) through an Exchange for a calendar year, for a family size equal to tax household size without regard to lawful presence status.

Indicates whether the applicant paid their initial premium for a given policy as indicated by issuer.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was peviously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Amount - Determine if the applied APTC for a given application version is less than or equal to the

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.
a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

A unique identifier assigned by the exchange to the insurance policy.

The status of the Policy which the applicants are enrolled in.

The start date of the Policy which the applicants are enrolled in.

The end date of the Policy which the applicants are enrolled in.

The amount of APTC that has been applied to the policy.

Essential Health Benefits (EHB) policy premium amount in a given month.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was peviously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Allocated APTC Amount is the amount that is allocated to the policy based on the amount the tax household has elected without consideration for amounts that are reallocated from other policies. The final amount of APTC that is applied takes into consideration the amounts that are left over from policies.

The maximum advanced payment tax credit amount for which the tax household is eligible for.

Indicates whether the applicant paid their initial premium for a given policy as indicated by issuer.

Household Essential Health Benefits Premium Amount - Determine if the sum of plan EHB premium

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.
a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

A unique identifier assigned by the exchange to the insurance policy.

The status of the Policy which the applicants are enrolled in.

The amount of APTC that has been applied to the policy.

Essential Health Benefits (EHB) policy premium amount in a given month.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Indicates whether the applicant paid their initial premium for a given policy as indicated by issuer.

erly

e enrollee was assigned correctly to a problematic group based on their tax form receipt and annu

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan / Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e. the creation and subsequent changes or updates made to an application during a Plan / Benefit Year.

A unique identification number that is used to identify a person.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Indicates whether the tax data used in the application can be used at the time of renewal.

Indicates whether or not Income verification data was found in the IRS.

Indicates whether the tax household anchor attested that the tax household reconciled to premium tax credits on last year's tax return.

The Annual Tax Household Income amount returned from IRS.

Indicates whether the tax household anchor attested that the tax household reconciled to premium tax credits on last year's tax return.

Indicates whether an application member was auto re-enrolled in the past two benefit years.

Indicates whether the Exchange has not received updated IRS data for the application member within the past three years.

Indicates whether an application member has not updated their application within the past two benefit years.

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order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Indicates if member is eligible for APTC.

Indicates whether an application member has passed the state exchange's auto re-enrollment criteria.

The reason an application member was denied auto re-enrollment and APTC Eligibility is terminated.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Whether the SBE requested a PDM on APTC eligible application members per the PDM planned request

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

The start date of the Policy which the applicants are enrolled in.

The end date of the Policy which the applicants are enrolled in.

The amount of APTC that has been applied to the policy.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

The date during the benefit year when the Medicaid/CHIP PDM is scheduled to occur.

Date when Medicaid/CHIP PDM was executed for application member.

Medicaid CHIP was confirmed to be dually enrolled and applicant has not resolved issue within the allotted resolution period.

The date when applicant failed to resolve their Medicaid/CHIP dual enrollment issue within the allotted resolution period.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Concluded Properly - Determine if the SBE properly terminated APTC eligibility for consumers that

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

The start date of the Policy which the applicants are enrolled in.

The end date of the Policy which the applicants are enrolled in.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to requesting financial assistance.

Date when the APTC eligibility was determined for an application member.

Indicates if member is eligible for APTC.

The date during the benefit year when the Medicaid/CHIP PDM is scheduled to occur.

Date when Medicaid/CHIP PDM was executed for application member.

Medicaid CHIP was confirmed to be dually enrolled and applicant has not resolved issue within the allotted resolution period.

The date when applicant failed to resolve their Medicaid/CHIP dual enrollment issue within the allotted resolution period.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping
Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was peviously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

ly - Determine whether the system properly terminated APTC eligibility based on a confirmed FTR

PDM check was conducted for the relevant population per the PDM scheduled date

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping
Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

The start date of the Policy which the applicants are enrolled in.

The end date of the Policy which the applicants are enrolled in.

The amount of APTC that has been applied to the policy.

Birth Date of an application member.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Date when SSN attestation verification was conducted.

The final determination on whether the Exchange was able to verify the consumers attestation.

The findings used to set the final verification result in corroborating the consumer's attestation.

The date during the benefit year when the Death PDM is scheduled to occur.

Date when Death PDM was executed for application member.

Death date of applicant.

Application member who has a confirmed death status from the Death PDM had their QHP Eligibility

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

The end date of the Policy which the applicants are enrolled in.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

Indicates if the Exchange determines an applicant is eligible for QHP.

The date during the benefit year when the Death PDM is scheduled to occur.

SSA indicated that applicant is associated with death data.

Death date of applicant.

Status used to indicate whether or not an applicant has resolved death-related issues with application.

Medicare PDM check was initiated properly for the relevant population per the Medicare PDM sche

Identifier that groups application members within a single tax household.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

The start date of the Policy which the applicants are enrolled in.

The end date of the Policy which the applicants are enrolled in.

The amount of APTC that has been applied to the policy.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

The date during the benefit year when the Medicare PDM is scheduled to occur.

Date when Medicare PDM was executed for application member.

application member who has a confirmed duplicate coverage status from the Medicare PDM has

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping
Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

The start date of the Policy which the applicants are enrolled in.

The end date of the Policy which the applicants are enrolled in.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

Indicates if the Exchange determines an applicant is eligible for QHP.

Date when the APTC eligibility was determined for an application member.

Indicates if member is eligible for APTC.

The date during the benefit year when the Medicare PDM is scheduled to occur.

Date when Medicare PDM was executed for application member.

Indicates whether an applicant is dually enrolled in Medicare and Non ESC MEC.

Status used to indicate whether or not an applicant has resolved Medicare dual-enrollment issues with application.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

- Determine whether the household, or member(s) of a household, was properly enrolled to receive

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

A unique identifier assigned by the exchange to the insurance policy.

The start date of the Policy which the applicants are enrolled in.

The end date of the Policy which the applicants are enrolled in.

Indicates whether the insurance application contains multiple tax households.

Tax filing status of an applicant.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

An indicator that the application member attested to requesting financial assistance.

Indicates if member is eligible for APTC.

Allocated APTC Amount is the amount that is allocated to the policy based on the amount the tax household has elected without consideration for amounts that are reallocated from other policies. The final amount of APTC that is applied takes into consideration the amounts that are left over from policies.

Whether policy effectuation was reconciled and processed properly.

Indicates whether the applicant paid their initial premium for a given policy as indicated by Exchange.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Indicates whether the issuer and Exchange had data matching issues during reconciliation for effectuation status.

Indicates the action taken to resolve data discrepancies between the issuer and Exchange for effectuation status.

Determine whether coverage spans reported by the issuer match that of the SBE with respect to b

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

The status of the Policy which the applicants are enrolled in.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Benefit start date for the QHP coverage period as reflected by Exchange records.

Benefit start date for the QHP coverage period as reflected by Issuer records.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Indicates whether Issuer and Exchange had data matching issues during reconciliation for benefit start date.

Indicates the action taken to resolve data discrepancies between the Issuer and Exchange for benefit start date.

Benefit end date for the QHP coverage period as reflected by Exchange records.

Benefit end date for the QHP coverage period as reflected by Issuer records.

Indicates whether Issuer and Exchange had data matching issues during reconciliation for benefit end date.

Indicates the action taken to resolve data discrepancies between the Issuer and Exchange for benefit end date.

plied APTC values reported by the issuer match that of the SBE for every financial span of the Ben

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

The policy applied APTC the Exchange reported in their reconciliation output (RCNO) file that was sent to the issuer.

The amount of APTC that has been applied to the policy as reflected by Issuer records.

Issuer total premium amount provided during the reconciliation process.

Indicates whether Issuer and Exchange had data matching issues during reconciliation for applied APTC amount.

Indicates the action taken to resolve data discrepancies between the issuer and Exchange for applied APTC amount.

whether the aggregated pre-payment APTC amount at the application level is reasonably compat

Identifier that groups application members within a single tax household.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

A unique identifier assigned by the exchange to the insurance policy.

The start date of the Policy which the applicants are enrolled in.

The end date of the Policy which the applicants are enrolled in.

The amount of APTC that has been applied to the policy.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

whether payments were made to applicants enrolled in non-certified, de-certified, or withdrawn

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

A unique identifier assigned by the exchange to the insurance policy.

The status of the Policy which the applicants are enrolled in.

The start date of the Policy which the applicants are enrolled in.

The end date of the Policy which the applicants are enrolled in.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Insurance plan identifier for the policy selected by the applicant.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

Indicates whether the selected QHP by the consumer has been certified.

Date of QHP suppression.

Date of QHP unsuppression.

Reason for the suppression of a QHP.

Indicates whether payments were made to suppressed QHP policies associated to new enrolled applic

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

A unique identifier assigned by the exchange to the insurance policy.

The status of the Policy which the applicants are enrolled in.

The start date of the Policy which the applicants are enrolled in.

The end date of the Policy which the applicants are enrolled in.

The amount of APTC that has been applied to the policy.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Insurance plan identifier for the policy selected by the applicant.

Date of QHP suppression.

Date of QHP unsuppression.

Reason for the suppression of a QHP.

ea - Determine whether payments were made to suppressed QHP policies associated to new enro

Identifier that groups application members within a single tax household.

A unique identifier for an application household (or households) during a given Plan/Benefit Year.

A sequence number that is used to distinguish various events for an application, i.e., the creation and subsequent changes or updates made to an application during a Plan/Benefit Year.

A field that is used to reflect the date that an application was submitted.

A unique identification number that is used to identify a person across benefit years.

a date/timestamp indicating when an application was created or modified due to updates made by the consumer or system generated events.

A unique identifier assigned by the exchange to the insurance policy.

The status of the Policy which the applicants are enrolled in.

The start date of the Policy which the applicants are enrolled in.

The end date of the Policy which the applicants are enrolled in.

Applicant home state code.

The different types of events that led to the creation or change, update to an application.

The origin event that led to the creation or change, update to an application.

order from top to bottom.

Description

Indicates new data element RC is requesting from SBE. The RC requests the SBE to provide data mapping element associated with the information element. If the state does not have the data mapping element, please indicate so under column "E" and any alternative to achieve data mapping

Indicates data element associated with review unit in which the RC is not requesting data mapping for since this information was previously requested. The SBE does NOT need to input information in these cells.

Information Element Definition

An indicator that the application member attested to applying for coverage.

An indicator that the application member attested to requesting financial assistance.

Insurance plan identifier for the policy selected by the applicant.

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"0123456789"		
"A123456", "12345678", "A1-2024-MD" -- (an example of a generated Application Identifier for the Plan Year 2024 review for the state of MD)		
"1", "2", "01/22/2020"		
"12JAN2021"		
"12345678"		
"yyyy-mm-dd-hh. mm."		
"123-45-6789"		
"Sherwin"		
"David"		
"Brown"		
"12JAN2021"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"12JAN2021"		
"Initial Application"		
"Consumer online submission"		
"True", "False", "Yes", "No", "Y", "N"		
"True", "False", "Yes", "No", "Y", "N"		
"12JAN2021"		
"Yes", "No", "Success", "Failure", "Verified", "Inconsistency Found"		
"External data source not reasonably compatible with attestation", "Applicant did not give sufficient information", "Applicant attestation was over set thresholds"		
d when appropriate.		

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Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
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"True", "False", "Yes", "No", "Y", "N"		
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Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"Yes", "No", "Success", "Failure", "Verified", "Inconsistency Found"		
"Passport"		
"Yes", "No", "Success", "Failure", "Verified", "Inconsistency Found"		
"12JAN2021"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"60000"		
"12JAN2021"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"External data source not reasonably compatible with attestation", "Applicant did not give sufficient information", "Applicant attestation was over set thresholds"		
ppropriate.		
"60000"		
"Yes", "No", "Success", "Failure", "Verified", "Inconsistency Found"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"60000"		
"True", "False", "Yes", "No", "Y", "N"		
"12JAN2021"		
"True", "False", "Yes", "No", "Y", "N"		
Identified as part of the current year tax household.		
"spouse", "daughter", "son"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"2"		
applications receiving APTC payments during the same coverage month(s). A distinct individual correspond		
"12345678"		
"12JAN2021"		
"Initial enrollment"		
"12JAN2021"		
"2000"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"True", "False", "Yes", "No", "Y", "N"		
stency was initiated when appropriate.		
"12JAN2021"		
ility determinations.		

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Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"True", "False", "Yes", "No", "Y", "N"		
"True", "False", "Yes", "No", "Y", "N"		
"True", "False", "Yes", "No", "Y", "N"		

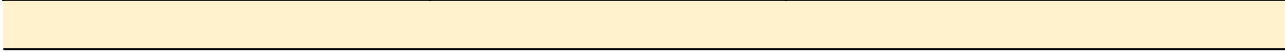
Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"Office of Personnel Management", "Employer Sampled Information"		
"True", "False", "Yes", "No", "Y", "N"		
"True", "False", "Yes", "No", "Y", "N"		
"True", "False", "Yes", "No", "Y", "N"		
"12JAN2021"		
"12JAN2021"		
"Yes", "No", "Success", "Failure", "Verified", "Inconsistency Found", "Hold"		
"Yes", "No", "Success", "Failure", "Verified", "Inconsistency Found", "Hold"		
"12JAN2021"		
in eligibility determinations was conducted properly.		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"1,000"		
"True", "False", "Yes", "No", "Y", "N"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"True", "False", "Yes", "No", "Y", "N"		
"12JAN2021"		
"Yes", "No", "Success", "Failure", "Verified", "Inconsistency Found"		
"External data source not reasonably compatible with attestation", "Applicant did not give sufficient information", "Applicant attestation was over set thresholds"		
"True", "False", "Yes", "No", "Y", "N"		
EC plan was verified against approved external data source and an inconsistency was raised when appropriate		

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Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"12JAN2021"		
"True", "False", "Yes", "No", "Y", "N"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"123456789"		
"True", "False", "Yes", "No", "Y", "N"		
"0123456789"		
"A123456", "12345678", "A1-2024-MD" -- (an example of a generated Application Identifier for the Plan Year 2024 review for the state of MD)		
"1", "2", "01/22/2020"		
"12JAN2021"		
"12345678"		
"yyyy-mm-dd-hh. mm."		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"123456789"		
"citizenship_born_qhp"		
"Successful manual verification", "Unsuccessful manual verification", "Other - Insufficient document. The consumer was asked to submit additional document(s) to confirm their attested information, and the inconsistency was not successfully resolved"		
"This inconsistency was resolved on 01-01-2020 using an I-551 card. DHS SAVE was not used."		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"I-551 Card (Received on 01-01-2020) via Mailroom"		
"I-551 Card (Received on 01-01-2020) via Mailroom, Passport (Received on 02-01-2020) uploaded to web site, 1040 (Received on 03-01-2020) via Mailroom"		
"12JAN2021"		
"12JAN2021"		
"Yes (with original clock end date, extended clock end date, and reason)", "No"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"True", "False", "Yes", "No", "Y", "N"		
sed on the age of the document based on SBE policy.		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"Yes - Non-Citizen ID number was used to resolve the issue", "No - Non-Citizen ID number was not used to resolve the issue"		
"Yes - I-94 number was used to resolve the issue", "No - I-94 number was not used to resolve the issue"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
ons with annual income inconsistencies.		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"1040"		
: MEC inconsistencies.		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
with Non-ESC MEC inconsistencies.		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"True", "False", "Yes", "No", "Y", "N"		
ent verification.		
"0123456789"		
"A123456", "12345678", "A1-2024-MD" -- (an example of a generated Application Identifier for the Plan Year 2024 review for the state of MD)		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"1", "2", "01/22/2020"		
"12JAN2021"		
"12345678"		
"yyyy-mm-dd-hh. mm."		
"Adoption", "Newborn", "Marriage", "Relocation", "Loss of MEC"		
"123456789"		
"This SEP was resolved on 01-01-2020 using an Birth Certificate. DHS SAVE was not used."		
"Birth Certificate (Received on 01-01-2020) via Mailroom"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
atched by the manual reviewer.		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
rollment verification.		
"0123456789"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"A123456", "12345678", "A1-2024-MD" -- (an example of a generated Application Identifier for the Plan Year 2024 review for the state of MD)		
"1", "2", "01/22/2020"		
"12JAN2021"		
"12345678"		
"yyyy-mm-dd-hh. mm."		
"12JAN2021"		
"True", "False", "Yes", "No", "Y", "N"		
dependency.		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"VA"		
"22102"		
"True", "False", "Yes", "No", "Y", "N"		
"True", "False", "Yes", "No", "Y", "N"		
"True", "False", "Yes", "No", "Y", "N"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"Single", "Married", "Married Filing Separately"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"True", "False", "Yes", "No", "Y", "N"		
"Applicant has employee sponsored coverage (ESC)", "Income is out of FPL range", "Applicant meets all APTC eligibility criteria"		
"True", "False", "Yes", "No", "Y", "N"		
on all application member attestations. Determine whether the SEP start and end dates properly reflect th		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"True", "False", "Yes", "No", "Y", "N"		
"True", "False", "Yes", "No", "Y", "N"		
"True", "False", "Yes", "No", "Y", "N"		
"True", "False", "Yes", "No", "Y", "N"		
"True", "False", "Yes", "No", "Y", "N"		
"True", "False", "Yes", "No", "Y", "N"		
"True", "False", "Yes", "No", "Y", "N"		
"True", "False", "Yes", "No", "Y", "N"		
"12JAN2021"		
"12JAN2021"		

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Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"True", "False", "Yes", "No", "Y", "N"		
"Yes", "No", "Success", "Failure", "Verified", "Inconsistency Found"		
"123456789"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"2000"		
"60000"		
"2000"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
Annual household income during annual auto re-enrollment.		
"0123456789"		
"A123456", "12345678", "A1-2024-MD" -- (an example of a generated Application Identifier for the Plan Year 2024 review for the state of MD)		
"1", "2", "01/22/2020"		
"12345678"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"A123456", "12345678", "A1-2024-MD" -- (an example of a generated Application Identifier for the Plan Year 2024 review for the state of MD)		
"1", "2", "01/22/2020"		
"12JAN2021"		
"12345678"		
"yyyy-mm-dd-hh. mm."		
"True", "False", "Yes", "No", "Y", "N"		
"Failure to provide sufficient documentation to allow Auto-reenrollment"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
Provide APTC payments based on the APTC eligibility of all household members for each financial span.		
"0123456789"		
"A123456", "12345678", "A1-2024-MD" -- (an example of a generated Application Identifier for the Plan Year 2024 review for the state of MD)		
"1", "2", "01/22/2020"		
"12JAN2021"		
"12345678"		
"yyyy-mm-dd-hh. mm."		
True, "False", "Yes", "No", "Y", "N"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"True", "False", "Yes", "No", "Y", "N"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"True", "False", "Yes", "No", "Y", "N"		
"Exchange keeps data value and tells issuer to update their data records", "Exchange adopts issuer data values"		
benefit start date and benefit end date.		
"12JAN2021"		
"12JAN2021"		

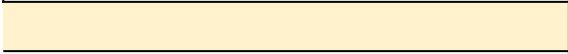
Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"True", "False", "Yes", "No", "Y", "N"		
"Exchange keeps data value and tells issuer to update their data records", "Exchange adopts issuer data values"		
"12JAN2021"		
"12JAN2021"		
"True", "False", "Yes", "No", "Y", "N"		
"Exchange keeps data value and tells issuer to update their data records", "Exchange adopts issuer data values"		
Benefit Year.		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"2000"		
"2000"		
"2000"		
"True", "False", "Yes", "No", "Y", "N"		
"Exchange keeps data value and tells issuer to update their data records", "Exchange adopts issuer data values"		
ible with the aggregated applied APTC amount for an application for the Benefit Year.		
"0123456789"		

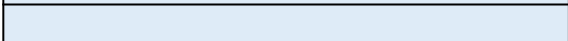
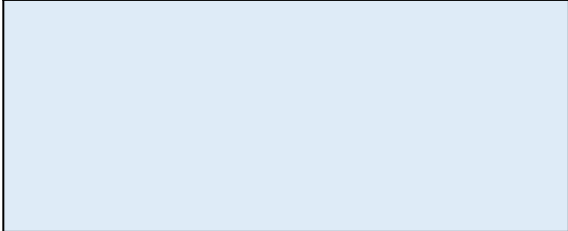
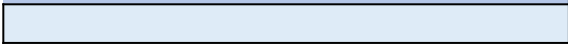
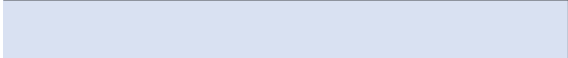
Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
"A123456", "12345678", "A1-2024-MD" -- (an example of a generated Application Identifier for the Plan Year 2024 review for the state of MD)		
"1", "2", "01/22/2020"		
"12JAN2021"		
"yyyy-mm-dd-hh. mm."		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.
n QHP plans.		
"0123456789"		
"A123456", "12345678", "A1-2024-MD" -- (an example of a generated Application Identifier for the Plan Year 2024 review for the state of MD)		
"1", "2", "01/22/2020"		
"12JAN2021"		
"12345678"		
"yyyy-mm-dd-hh. mm."		
"99969OH100010"		

Example	Does the State Have Data Element to Test Review Unit?	If NOT, alternative data element provided by SBE to meet the data requirement.

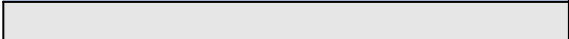
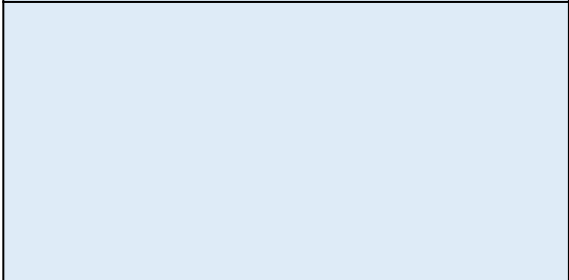
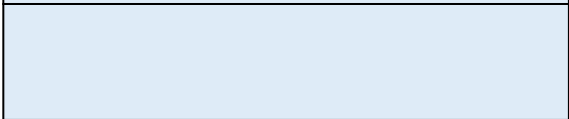
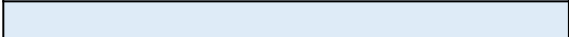
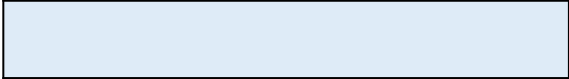


Note





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Light gray rectangular block

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Light gray rectangular block containing the text **Note**

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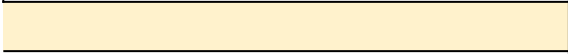
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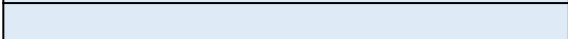
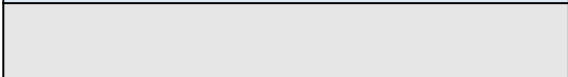
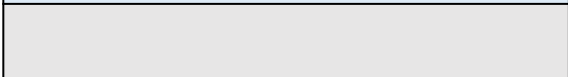
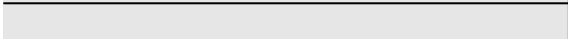
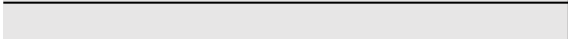
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Note



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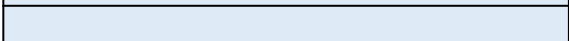
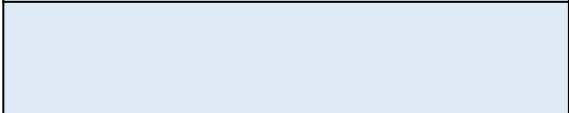
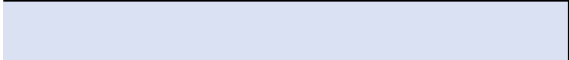
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Note



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Light gray rectangular block containing the text **Note**

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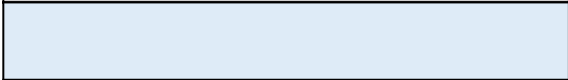
Light blue rectangular block

Large light blue rectangular block

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Note



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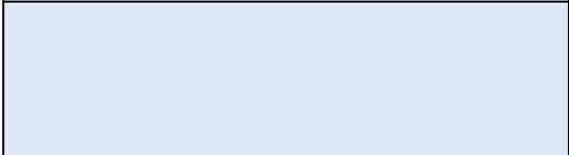
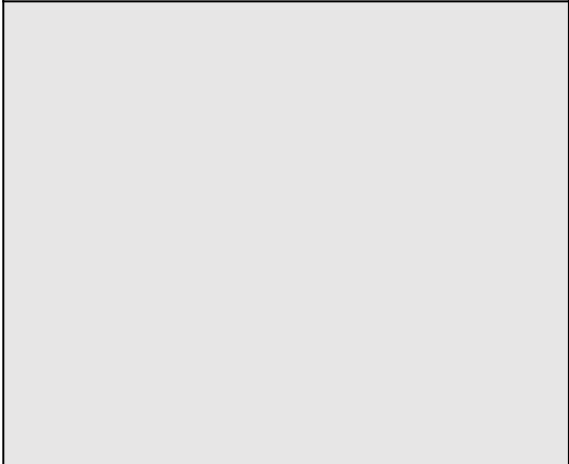
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Note



Note



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Light gray rectangular block containing the text **Note**

Light blue rectangular block

Medium blue rectangular block

Light gray rectangular block

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Light gray rectangular block containing the text **Note**

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Light gray rectangular block containing the text **Note**

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Light gray rectangular block containing the text **Note**

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Yellow header bar

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Dark gray header bar

Note

Large light gray area

Light gray bar

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Note

been terminated, canceled, or have an adjusted max APTC Amount.

Light gray rectangular block

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Light gray rectangular block containing the text **Note**

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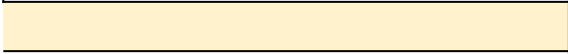
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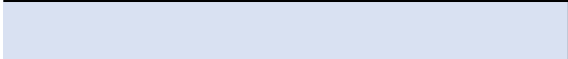
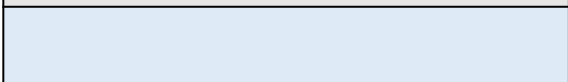
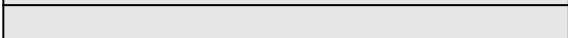
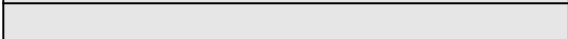
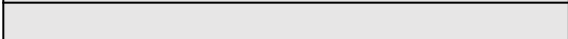
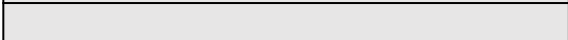
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Note



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Yellow header bar

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Dark gray header bar

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Dark gray header bar

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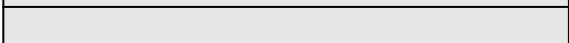
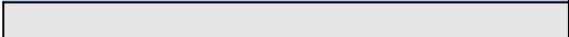
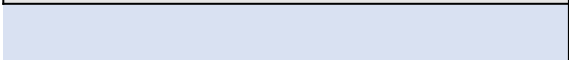
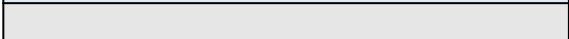
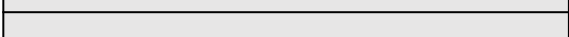
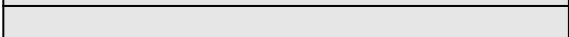
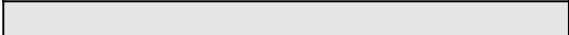
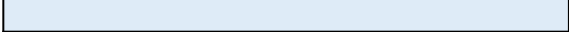
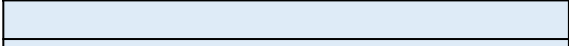
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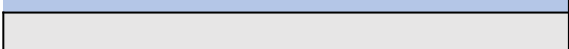
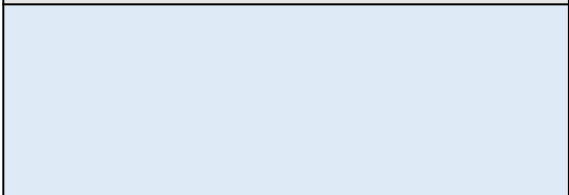
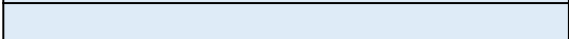
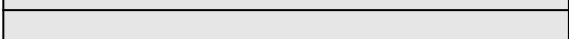
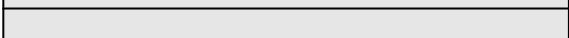
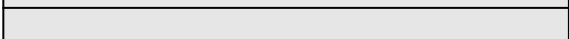
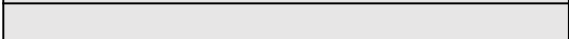


Note





Note



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White rectangular block

Yellow rectangular block

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Light gray rectangular block containing the text **Note**

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Light gray rectangular block containing the text **Note**

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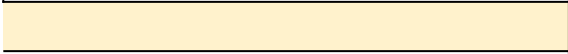
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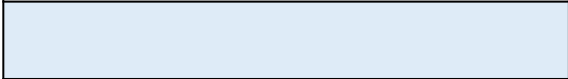
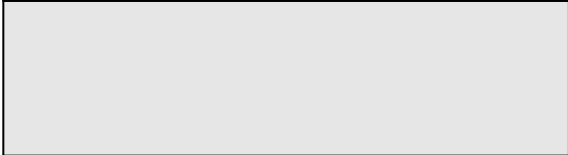
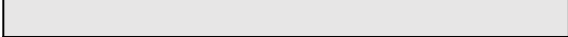
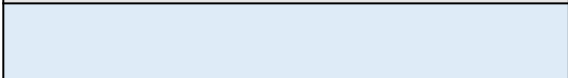
Note

the QLE attestation date.

Note



Note



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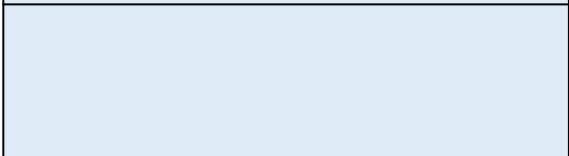
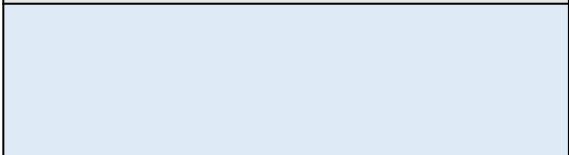
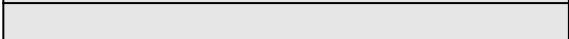
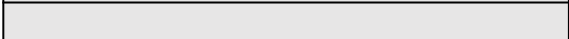
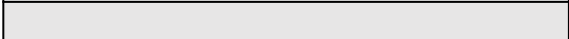
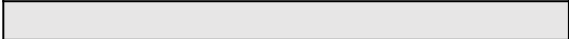
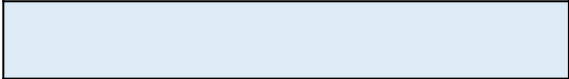
Unit also determines whether the best SEP QLE was selected properly for an application version.

Note

d APTC is given based on the application member's selected QHP.



Note



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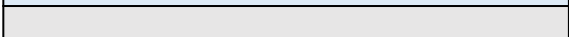
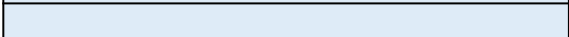
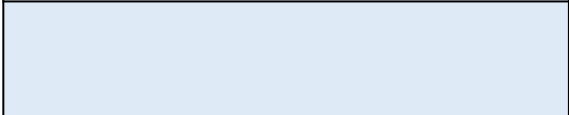
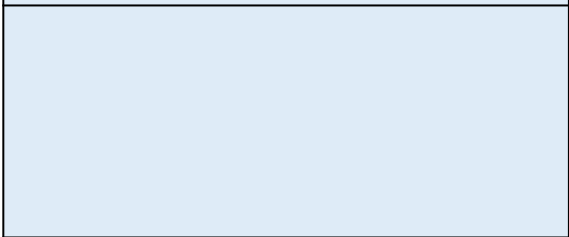
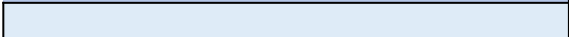
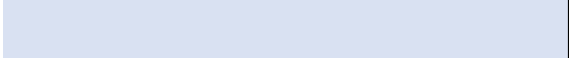
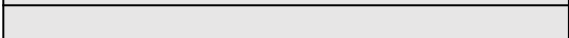
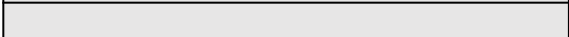
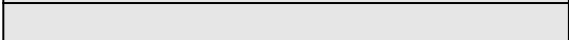
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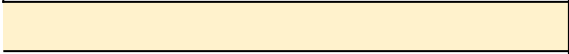
Note

2 (refer to the Glossary for definition) amount for that policy.

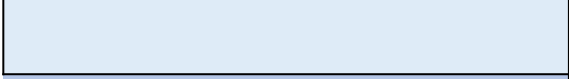
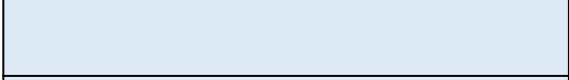
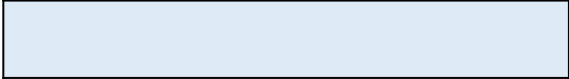
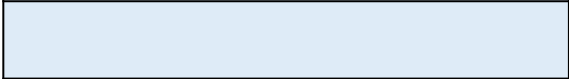
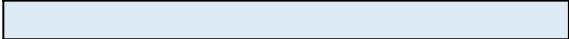
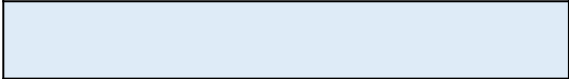


Note





Note



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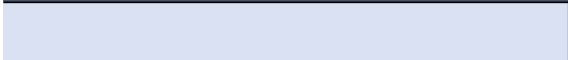
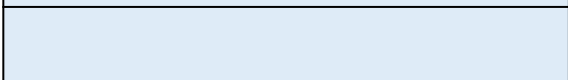
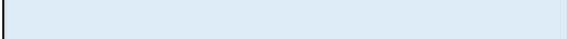
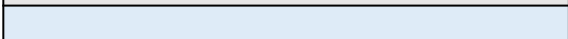
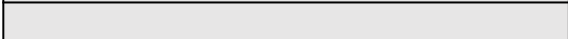
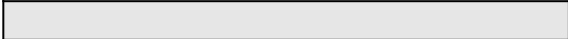
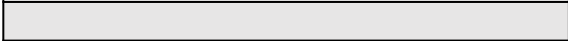
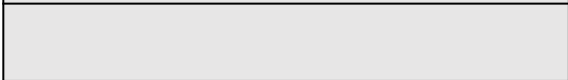
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Note



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Light gray rectangular block containing the text **Note**

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Yellow header bar

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Dark gray header bar

Note

Light gray header bar

Light gray header bar

Light gray header bar

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Blue header bar

Light gray header bar

Light gray rectangular block

White rectangular block

Yellow rectangular block

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White rectangular block

Dark gray rectangular block

Note

Light blue rectangular block

Light blue rectangular block

Medium blue rectangular block

Light gray rectangular block

Light gray rectangular block

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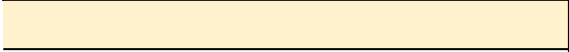
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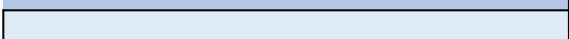
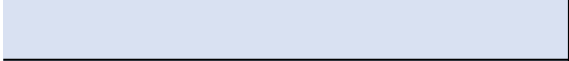
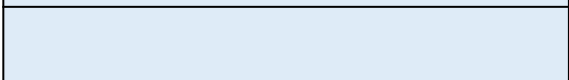
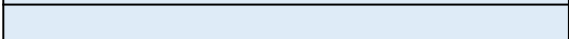
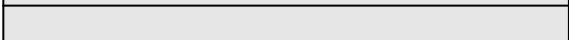
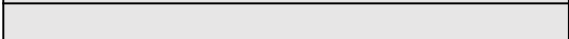
Light blue rectangular block

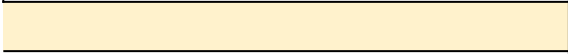
Light blue rectangular block

Note

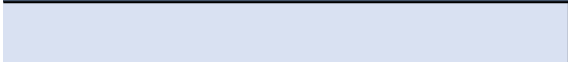
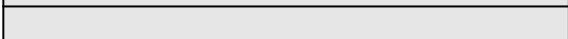
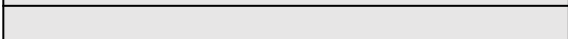
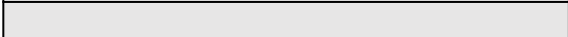
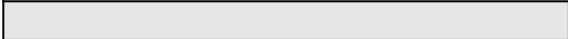
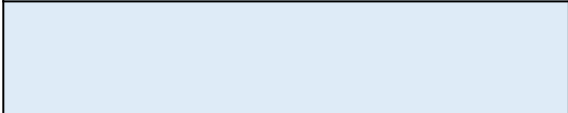


Note





Note



Grey header bar

White header bar

Yellow header bar

White header bar

White header bar

Dark grey header bar

Note

Blue header bar

Light blue header bar

Light blue header bar

Light blue header bar

Light blue header bar

Light blue header bar

Light blue header bar

Light grey header bar

Light grey header bar

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Note

Note

