

CMS Center for Consumer Information & Insurance Oversight (CCIIO), Health Insurance Exchange Public Use Files (Exchange PUFs) Data Dictionary for Plan Attributes PUF

1. Overview of the Plan Attributes PUF

The Centers for Medicare & Medicaid Services (CMS) Center for Consumer Information & Insurance Oversight (CCIIO) publishes the Exchange PUFs to improve transparency and increase access to data on Qualified Health Plans (QHPs) and Stand-alone Dental Plans (SADPs) offered through the Exchanges in the individual market and Small Business Health Options Program (SHOP). The PUFs include data from states with Federally-facilitated Exchanges (FFEs) including states performing plan management functions, and State-based Exchanges that rely on the federal information technology platform for QHP eligibility and enrollment (SBE-FPs). The Exchange PUFs also include data on Multi-State Plans (MSPs) and certified off-exchange SADPs. The PUFs do not include data from SBEs that do not rely on the federal platform for QHP eligibility and enrollment.

The Plan Attributes PUF (Plan-PUF) is one of the files that comprise the Exchange PUFs. The Plan-PUF contains plan variant-level data on maximum out of pocket payments, deductibles, health savings account (HSA) eligibility, and other plan attributes. These data originate from an issuer's Plans & Benefits template of the QHP Application (i.e., template field), or were generated by CCIIO for use in data processing (i.e., system-generated). The issuer can also import data created in other templates (e.g., Network IDs from the Network ID template, Service Area IDs from the Service Area template, and Formulary IDs from the Prescription Drug template) to use as allowable values for the applicable fields in the Plans & Benefits template, or enter these values manually.

This data dictionary describes the variables contained in the Plan-PUF. Each record reports plan characteristics at the plan-variant level. The Plan-PUF is available for plan years 2014 through 2025.

2. Variable Attributes

Variable Name: BusinessYear

Variable Definition: Year for which plan provides coverage to enrollees

Data Type: Text

Variable Label: Business Year

Allowable Values 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024,

2025

Data Source: System-generated field

Field Name from

Business Year

Data Source:

Comments: N/A

Variable Name: StateCode

Variable Definition: Two-character state abbreviation indicating the state where the plan

is offered



Data Type: Text

Variable Label: State Code

Allowable Values: All 50 state abbreviations + 9 territory abbreviations

Data Source: System-generated field

Field Name from

State Code

Data Source:

Comments: N/A

Variable Name: IssuerId

Variable Definition: Five-digit numeric code that identifies the issuer organization in the

Health Insurance Oversight System (HIOS)

Data Type: Text Variable Label: Issuer ID Allowable Values: Free text

System-generated field Data Source:

Field Name from

Issuer ID

Data Source:

Comments: N/A

Variable Name: IssuerMarketplaceMarketingName

Variable Definition: Marketplace Marketing name of insurance company

Data Type: Text

Variable Label: Issuer Marketplace Marketing Name

Allowable Values: Free text

System-generated field Data Source:

Field Name from Issuer Marketplace Marketing Name from issuer's HIOS

Data Source: administrative data. If this value is blank, reports Issuer Legal Name

from HIOS administrative data.

Comments: This field is only available for the 2021 through 2025 datasets.

Variable Name: SourceName

Variable Definition: Categorical identifier of source of data import

Data Type: Text

Variable Label: Source Name

Allowable Values: HIOS

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System-generated field Data Source: Field Name from

Data Source:

Source Name

Comments: N/A

Variable Name: VersionNum

Integer value for version of data import Variable Definition:

Data Type: Text

Variable Label: Version Number

Allowable Values: Free text



Data Source: System-generated field

Field Name from

Version Number

Data Source:

Comments: This field is only available for the 2014 through 2016 datasets.

Variable Name: ImportDate

Variable Definition: Date of data import

Data Type: Date/Time
Variable Label: Import Date
Allowable Values: Free text

Data Source: System-generated field

Field Name from

Data Source:

Import Date

Comments: N/A

Variable Name: BenefitPackageId

Variable Definition: Numeric identifier of benefit package

Data Type: Text

Variable Label:

Allowable Values: Free text

Data Source: System-generated field Field Name from Benefit Package ID

Data Source:

Comments: This field is only available for the 2014 through 2016 datasets.

Variable Name: IssuerId2

Variable Definition: Five-digit numeric code that identifies the issuer organization in HIOS

Data Type: Text
Variable Label: Issuer ID
Allowable Values: Free text
Data Source: Template field
Field Name from HIOS Issuer ID

Data Source:

Comments: This field is only available for the 2014 through 2016 datasets.

Variable Name: StateCode2

Variable Definition: Two-character state abbreviation indicating the state where the plan

is offered

Data Type: Text

Variable Label: State Code

Allowable Values: All 50 state abbreviations + 9 territory abbreviations

Data Source: Template field Field Name from Issuer State

Data Source:

Comments: This field is only available for the 2014 through 2016 datasets.

Variable Name: MarketCoverage



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Variable Definition: Categorical indicator of market coverage of plan

Data Type: Text

Variable Label: Market Coverage

Allowable Values: Individual

SHOP (Small Group)

Data Source: Template field
Field Name from Market Coverage

Data Source:

Comments: N/A

Variable Name: DentalOnlyPlan

Variable Definition: Categorical indicator of dental-only status of plan

Data Type: Text

Variable Label: Dental-Only Plan Indicator

Allowable Values: Yes

No

Data Source: Template field Field Name from Dental Only Plan

Data Source:

Comments: N/A

Variable Name: TIN

Variable Definition: Tax ID Number of issuer

Data Type: Text

Variable Label: Tax Identification Number

TIN

Allowable Values: Free text

Data Source: Template field

Field Name from

Data Source:

Comments: This field is only available for the 2014 through 2020 datasets.

Variable Name: StandardComponentId

Variable Definition: Fourteen-character alpha-numeric code that identifies an insurance

plan within HIOS

Data Type: Text
Variable Label: Plan ID
Allowable Values: Free text
Data Source: Template field

Field Name from HIOS Plan ID (Standard Component)

Data Source:

Comments: N/A

Variable Name: PlanMarketingName

Variable Definition: Marketing name of insurance plan

Data Type: Text

Variable Label: Plan Marketing Name

Allowable Values: Free text



Data Source: Template field

Field Name from

Plan Marketing Name

Data Source:

Comments: N/A

Variable Name: HIOSProductId

Variable Definition: Seven-character alpha-numeric code that identifies an insurance

product within HIOS

Data Type: Text

Variable Label: HIOS Product ID

Allowable Values: Free text

Data Source: Template field
Field Name from HIOS Product ID

Data Source:

Comments: N/A

Variable Name: HPID

Variable Definition: Identifies the insurance product using a National Health Plan

Identifier

Data Type: Text

Variable Label: HPID (National Health Plan Identifier)

Allowable Values: Free text

Data Source: Template field

Field Name from

Data Source:

HPID

Comments: This field is only available for the 2014 through 2020 datasets.

Variable Name: Networkld

Variable Definition: Identifier for a health care provider network organization

Data Type: Text

Variable Label: Network ID

Allowable Values: List of Network IDs valid for the issuer

Data Source: Template field Field Name from Network ID

Data Source:

Comments: Network IDs can be imported from the Network ID template based on

the number of networks and the issuer's state, or entered manually

by issuer.

Variable Name: ServiceAreald

Variable Definition: Identifier for a service area

Data Type: Text

Variable Label: Service Area ID

Allowable Values: List of Service Area IDs valid for the issuer

Data Source: Template field
Field Name from Service Area ID

Data Source:



Comments: Service Area IDs can be imported from the Service Area template

based on the number of service areas and the issuer's state, or

entered manually by issuer.

Variable Name: FormularyId

Variable Definition: Identifier for a drug formulary

Data Type: Text

Variable Label: Formulary ID

Allowable Values: List of Formulary IDs valid for the issuer

Data Source: Template field Field Name from Formulary ID

Data Source:

Comments: Formulary IDs can be imported from the Prescription Drug template

based on the number of formularies and the issuer's state, or entered

manually by issuer; this field is not applicable to dental plans.

Variable Name: IsNewPlan

Variable Definition: Categorical indicator of whether the insurance plan is new for the

current year or existed previously in the marketplace

Data Type: Text

Variable Label: New/Existing Plan

Allowable Values: New

Existing

Data Source: Template field
Field Name from New/Existing Plan

Data Source:

Comments: N/A

Variable Name: PlanType

Variable Definition: Type of insurance plan

Data Type:TextVariable Label:Plan TypeAllowable Values:Indemnity

PPO HMO POS EPO

Data Source: Template field Field Name from Plan Type

Data Source:

Comments: N/A

Variable Name: MetalLevel

Variable Definition: Metal level, or coverage category, of insurance plan based on its

actuarial value

Data Type: Text

Variable Label: Metal Level



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Allowable Values: Platinum

Gold Silver Bronze Catastrophic

High Low

Data Source: Template field
Field Name from Level of Coverage

Data Source:

Comments: Values of High and Low are only applicable to dental plans; values

other than High and Low are only applicable to medical plans.

Variable Name: DesignType

Variable Definition: An indication of whether a plan is a Standardized Plan Option for its

metal level, plan type and service area

Data Type: Text

Variable Label: Design Type

Allowable Values: Not Applicable – plan is not a Standardized Plan Option

Design Type 1 – plan is a Standardized Plan Option in FFE states excluding Delaware, Louisiana, and the SBE-FP state of Oregon Design Type 2 – plan is a Standardized Plan Option in Delaware or

Louisiana

Design Type 3 – plan is a Standardized Plan Option in Oregon Design Type 4 – unused value for Standardized Plan Option Design Type 5 – unused value for Standardized Plan Option

Data Source: Template field Field Name from Design Type

Data Source:

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Comments: This field is available for the 2017 through 2020 datasets as an

indicator of whether a plan has a Standardized Plan Design. This field is available for the 2023 through 2025 datasets as an indicator of whether a plan is a Standardized Plan Option. The Allowable Values defined above are applicable to Plan Years 2023 through 2025. This

field is not applicable to dental plans.

Variable Name: UniquePlanDesign

Variable Definition: An indication that the health insurance plan has a unique design, for

purposes of the actuarial value calculator

Data Type: Text

Variable Label: Unique Plan Design

Allowable Values: Yes

No

Data Source: Template field
Field Name from Unique Plan Design

Data Source:

Comments: This field is not applicable to dental plans.



Variable Name: QHPNonQHPTypeId

Variable Definition: Categorical indicator of a plan's Exchange status (On the Exchange,

Off the Exchange)

Data Type: Text

Variable Label: QHP/Non QHP
Allowable Values: On Exchange

Off Exchange Both

Data Source: Field Name from Template field QHP/Non QHP

Data Source:

Comments: N/A

Variable Name: IsNoticeRequiredForPregnancy

Variable Definition: An indication of whether notice to the issuer is required before

pregnancy-related benefits will be covered

Data Type: Text

Variable Label: Notice Required for Pregnancy

Allowable Values: Yes

No

Data Source: Template field

Field Name from

Notice Required for Pregnancy

Data Source:

Comments: This field is not applicable to dental plans.

Variable Name: IsReferralRequiredForSpecialist

Variable Definition: An indication of whether pre-authorization is required before a

specialist visit

Data Type: Text

Variable Label: Is a Referral Required for Specialist?

Allowable Values: Yes

No

Data Source: Template field

Field Name from

Is a Referral Required for Specialist?

Data Source:

Comments: This field is not applicable to dental plans.

Variable Name: SpecialistRequiringReferral

Variable Definition: The types of specialists that require pre-authorization

Data Type: Text

Variable Label: Specialist Requiring a Referral

Allowable Values: Free text

Data Source: Template field

Field Name from

Specialist Requiring a Referral

Data Source:



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Comments: This field is not applicable to dental plans; this field is only required if

IsReferralRequiredForSpecialist field equals Yes.

Variable Name: PlanLevelExclusions

Variable Definition: The list of exclusions to the insurance plan that apply to all benefits

Data Type: Text

Variable Label: Plan Level Exclusions

Allowable Values: Free text

Data Source: Template field

Field Name from Plan Level Exclusions

Data Source:

Comments: This field is optional; blanks indicate a value was not provided.

Variable Name: IndianPlanVariationEstimatedAdvancedPaymentAmountPerEnrollee

Variable Definition: Estimated dollar amount of cost–sharing reductions for eligible

enrollees to be provided in the form of an advance payment to the

issuer

Data Type: Text

Variable Label: Limited Cost Sharing Plan Variation - Estimated Advanced Payment

Allowable Values: Free text

Data Source: Template field

Field Name from

Limited Cost Sharing Plan Variation - Est Advanced Payment

Data Source:

Comments: This field is not applicable to dental plans; this field should be blank

for medical plans.

Variable Name: CompositeRatingOffered

Variable Definition: An indication of whether issuers and employers can use the

composite premium field.

Data Type: Text

Variable Label: Composite Rating Offered

Allowable Values: Yes

No

Data Source: Template field

Field Name from

Does this plan offer Composite Rating?

Data Source:

Comments: This field is only available for the 2016 through 2025 datasets. This

field equals "No" for individual market plans.

Variable Name: ChildOnlyOffering

Variable Definition: The types of adult and child enrollment options (Allows Adult and

Child-only, Allows Adult-only, Allows Child-only) of an insurance plan

Data Type: Text

Variable Label: Child-Only Offering

Allowable Values: Allows Adult and Child-Only

Allows Adult-Only
Allows Child-Only



Plan Attributes Public Use File Data Dictionary

Data Source: Field Name from Template field Child-Only Offering

Data Source:

Comments: This field is not applicable to catastrophic plans.

Variable Name: ChildOnlyPlanId

Variable Definition: The HIOS Plan Identifier for the child-only insurance plan that

corresponds to the insurance plan

Data Type: Text

Variable Label: Child Only Plan ID

Allowable Values: Free text

Data Source: Template field
Field Name from Child Only Plan ID

Data Source:

Comments: This field is only applicable to adult-only plans and does not apply to

catastrophic plans.

Variable Name: WellnessProgramOffered

Variable Definition: An indication of whether an insurance plan offers wellness programs

according to Section 2705 of the Public Health Service Act

Data Type: Text

Variable Label: Wellness Program Offered

Allowable Values: Yes
No

Data Source: Template field

Field Name from

Tobacco Wellness Program Offered

Data Source:

Comments: This field is not applicable to dental plans.

Variable Name: DiseaseManagementProgramsOffered

Variable Definition: Categorical indicator of whether the plan offers disease management

programs for specific conditions

Data Type: Text

Variable Label: Disease Management Programs Offered

Allowable Values: Asthma

Heart disease Depression Diabetes

High blood pressure & high cholesterol

Low back pain Pain management

Pregnancy

Weight loss programs (This value is only available in the 2016

through 2025 datasets.)

Data Source: Template field

Field Name from

Disease Management Programs Offered

Data Source:



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Comments: This field is not applicable to dental plans.

Variable Name: EHBPercentTotalPremium

Variable Definition: The percent of the plan's total premium relative to the EHB

benchmark plan for the state.

Data Type: Text

Variable Label: EHB Percent of Total Premium

Allowable Values: 0 -1, blank

Data Source: Template field

Field Name from EHB Percent of Total Premium

Data Source:

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only valid for medical plans and is not required for catastrophic

plans.

Variable Name: EHBPercentPremiumS4

Variable Definition: The projected percent of the plan's total premium relative to the EHB

benchmark plan for the state.

Data Type: Text

Variable Label: EHB Percent of Total Premium, Section 4

Allowable Values: 0 -1, blank

Data Source: Template field

Field Name from EHB Percent of TP, Section IV

Data Source:

Comments: This field is only available for the 2014 and 2015 datasets. This field

is only valid for medical plans.

Variable Name: EHBPediatricDentalApportionmentQuantity

Variable Definition: The dollar amount or percentage of the EHB Apportionment for

Pediatric Dental

Data Type: Text

Variable Label: EHB Apportionment for Pediatric Dental

Allowable Values: Free text

Data Source: Template field

Field Name from

EHB Apportionment for Pediatric Dental

Data Source:

Comments: This field is not applicable to medical plans. This field is a dollar

amount for the 2014 through 2016 datasets, and is a percentage for

the 2017 through 2025 datasets.

Variable Name: IsGuaranteedRate

Variable Definition: An indication of whether the rates for the insurance plan are

guaranteed or estimated

Data Type: Text

Variable Label: Guaranteed Rate
Allowable Values: Guaranteed Rate
Estimated Rate



Data Source: Template field Field Name from **Guaranteed Rate**

Data Source:

Comments: This field is not applicable to medical plans.

Variable Name: PlanEffectiveDate

Variable Definition: The activation date of enrollment coverage on an Insurance plan

Data Type:

Variable Label: Plan Effective Date

Allowable Values: Free text Template field Data Source: Field Name from Plan Effective Date

Data Source:

Comments: N/A

Variable Name: PlanExpirationDate

Variable Definition: The end date of plan selection for enrollment on an Insurance plan

Data Type:

Plan Expiration Date Variable Label:

Allowable Values: Free text Data Source: Template field

Field Name from

Plan Expiration Date

Data Source:

Comments: This field is optional; blank or zero values indicate a value was not

provided.

OutOfCountryCoverage Variable Name:

Variable Definition: Indicates whether out of country coverage is provided for health

services

Data Type: Text

Variable Label: Out of Country Coverage

Allowable Values: Yes No

Template field Data Source:

Field Name from

Out of Country Coverage

Data Source:

Comments: N/A

OutOfCountryCoverageDescription Variable Name:

The conditions under which out of country health services are Variable Definition:

covered

Data Type: Text

Variable Label: Out of Country Coverage Description

Free text Allowable Values: Data Source: Template field

Field Name from

Out of Country Coverage Description

Data Source:



Comments: This field is only applicable to plans that offer out of country

coverage.

Variable Name: OutOfServiceAreaCoverage

Variable Definition: Indicates whether out of service area coverage is provided

Data Type: Text

Variable Label: Out of Service Area Coverage

Allowable Values: Yes

No

Data Source: Template field

Field Name from

Out of Service Area Coverage

Data Source:

Comments: N/A

Variable Name: OutOfServiceAreaCoverageDescription

Variable Definition: The conditions under which out of service area health services are

covered

Data Type: Text

Variable Label: Out of Service Area Coverage Description

Allowable Values: Free text

Data Source: Template field

Field Name from

Out of Service Area Coverage Description

Data Source:

Comments: This field is only applicable to plans that offer out of service area

coverage.

Variable Name: NationalNetwork

Variable Definition: Indicates whether the insurance plan is supported by a national

network of health service provider companies

Data Type: Text

Variable Label: National Network

Allowable Values: Yes
No

Data Source: Template field
Field Name from National Network

Data Source:

Comments: N/A

Variable Name: URLForEnrollmentPayment
Variable Definition: The URL for Enrollment Payment

Data Type: Text

Variable Label: URL for Enrollment Payment

Allowable Values: Free text

Data Source: Template field for the 2014 through 2020 datasets; HIOS

Supplemental Submission Module (SSM) for the 2020 through 2023 datasets; Marketplace Plan Management System (MPMS) for the

2024 and 2025 datasets.



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Field Name from

Data Source:

URL for Enrollment Payment

Comments: This field is optional; blank or zero values indicate a value was not

provided.

Variable Name: FormularyURL

Variable Definition: The URL for the prescription drug formulary associated with this plan

Data Type: Text

Variable Label: Formulary URL

Allowable Values: Free text

Data Source: Template field for the 2014 through 2020 datasets; HIOS

Supplemental Submission Module (SSM) for the 2020 through 2023 datasets; Marketplace Plan Management System (MPMS) for the

2024 and 2025 datasets.

Field Name from

Data Source:

Formulary URL

Comments: This field is only available for the 2015 through 2025 datasets. This

field is only valid for medical plans.

Variable Name: PlanId

Variable Definition: Seventeen-character alpha-numeric code that identifies an insurance

plan's cost sharing reduction (CSR) variant within HIOS

Data Type: Text

Variable Label: Plan ID (Standard Component ID with Variant)

Allowable Values: Free text

Data Source: Template field

Field Name from

HIOS Plan ID (Standard Component + Variant)

Data Source:

Comments: Prepopulated in template; character count includes '-'

Variable Name: PlanVariantMarketingName

Variable Definition: Marketing name of the plan variation of the insurance plan

Data Type: Text

Variable Label: Plan Variant Marketing Name

Allowable Values: Free text

Data Source: Template field

Data Source: I emplate fix Field Name from Plan Varian

Data Source:

Plan Variant Marketing Name

Comments: This field is only available for the 2017 through 2025 datasets.

Variable Name: CSRVariationType

Variable Definition: Name of the cost sharing reduction options offered for a health

insurance plan

Data Type: Text

Variable Label: CSR Variation Type



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Allowable Values: Standard Off Exchange Plan

Standard On Exchange Plan Zero Cost Sharing Plan Variation Limited Cost Sharing Plan Variation

73% AV Level Silver Plan 87% AV Level Silver Plan 94% AV Level Silver Plan

Standard High Off Exchange Plan Standard High On Exchange Plan Standard Low Off Exchange Plan Standard Low On Exchange Plan Standard Silver Off Exchange Plan Standard Silver On Exchange Plan Standard Gold Off Exchange Plan Standard Gold On Exchange Plan Standard Bronze Off Exchange Plan Standard Bronze On Exchange Plan

Standard Expanded Bronze Off Exchange Plan Standard Expanded Bronze On Exchange Plan

Standard Platinum Off Exchange Plan Standard Platinum On Exchange Plan Standard Catastrophic On Exchange Plan Standard Catastrophic Off Exchange Plan

Data Source: Field Name from

CSR Variation Type

Template field

Data Source:

Comments: Prepopulated in template.

Variable Name: IssuerActuarialValue

Variable Definition: The numeric actuarial value (AV) generated manually for an

insurance plan by the issuer

Data Type: Percentage

Variable Label: Issuer Actuarial Value

Allowable Values: Free text

Data Source: Template field

Field Name from Issuer Actuarial Value

Data Source:

Comments: This field is only applicable to plans with a unique plan design.

Variable Name: AVCalculatorOutputNumber

Variable Definition: The numeric AV generated by the template's AV Calculator for an

insurance plan

Data Type: Text

Variable Label: AV Calculator Output Number

Allowable Values: Free text

Data Source: Template field



Plan Attributes Public Use File Data Dictionary

Field Name from

Data Source:

AV Calculator Output Number

Comments: This field is only applicable to medical plans and plans that do not

have a unique plan design.

Variable Name: MedicalDrugDeductiblesIntegrated

Variable Definition: An indication of whether the insurance plan specifies that the medical

and drug deductibles are combined into one deductible

Data Type: Text

Variable Label: Medical Drug Deductibles Integrated

Allowable Values: Yes

No

Data Source: Template field

Field Name from

Medical & Drug Deductibles Integrated?

Data Source:

Comments: This field is not applicable to dental plans.

Variable Name: MedicalDrugMaximumOutofPocketIntegrated

Variable Definition: An indication of whether the insurance plan specifies that the medical

and drug maximum out of pocket (MOOP) limits are combined into

one limit

Data Type: Text

Variable Label: Medical Drug Maximum Out of Pocket Integrated

Allowable Values: Yes

No

Data Source: Template field

Field Name from

Data Source:

Medical & Drug Maximum Out of Pocket Integrated?

Comments: This field is not applicable to dental plans.

Variable Name: MultipleInNetworkTiers

Variable Definition: An indication of whether there are two in network tiers

Data Type: Tex

Variable Label: Multiple In Network Tiers

Allowable Values: Yes

No

Data Source: Template field

Field Name from

Multiple In Network Tiers?

Data Source:

Comments: N/A

Variable Name: FirstTierUtilization

Variable Definition: The expected percentage of utilization for the first in network tier

Data Type: Text

Variable Label: First Tier Utilization

Allowable Values: Free text



Plan Attributes Public Use File Data Dictionary

Data Source: Field Name from Template field

1st Tier Utilization

Data Source:

Comments: N/A

Variable Name: SecondTierUtilization

Variable Definition: The expected percentage of utilization for the second in network tier,

based on the value entered for the first tier

Data Type: Text

Variable Label: Second Tier Utilization

Allowable Values: 100% minus First Tier Utilization

Data Source: Template field
Field Name from 2nd Tier Utilization

Data Source: Comments:

Calculated by template.

Variable Name: SBCHavingaBabyDeductible

Variable Definition: The dollar amount of the deductible for the sample Summary of

Benefits & Coverage (SBC) scenario of having a baby

Data Type: Text

Variable Label: SBC Scenario, Having a Baby, Deductible

Allowable Values: Free text

Data Source: Template field

Field Name from

SBC Scenario, Having a Baby, Deductible

Data Source:

Comments: This field is optional; blanks indicate a value was not provided; this

field is not applicable to dental plans.

Variable Name: SBCHavingaBabyCopayment

Variable Definition: The dollar amount of the copayment for the sample SBC scenario of

having a baby

Data Type: Text

Variable Label: SBC Scenario, Having a Baby, Copayment

Allowable Values: Free text

Data Source: Template field

Field Name from Data Source:

SBC Scenario, Having a Baby, Copayment

Comments:

This field is optional; blanks indicate a value was not provided; this

field is not applicable to dental plans.

Variable Name: SBCHavingaBabyCoinsurance

Variable Definition: The dollar amount of the coinsurance for the sample SBC scenario of

having a baby

Data Type: Text

Variable Label: SBC Scenario, Having a Baby, Coinsurance

Allowable Values: Free text

Data Source: Template field



Plan Attributes Public Use File Data Dictionary

Field Name from

Data Source:

SBC Scenario, Having a Baby, Coinsurance

Comments: This field is optional; blanks indicate a value was not provided; this

field is not applicable to dental plans.

Variable Name: SBCHavingaBabyLimit

Variable Definition: The dollar amount of the benefit limits or exclusions for the sample

SBC scenario of having a baby

Data Type: Text

Variable Label: SBC Scenario, Having a Baby, Limit

Allowable Values: Free text

Data Source: Template field

Field Name from SBC

Data Source:

SBC Scenario, Having a Baby, Limit

Comments: This field is optional; blanks indicate a value was not provided; this

field is not applicable to dental plans.

Variable Name: SBCHavingDiabetesDeductible

Variable Definition: The dollar amount of the deductible for the sample SBC scenario of

having diabetes

Data Type: Text

Variable Label: SBC Scenario, Having Diabetes, Deductible

Allowable Values: Free text

Data Source: Template field

Field Name from

SBC Scenario, Having Diabetes, Deductible

Data Source:

Comments: This field is optional; blanks indicate a value was not provided; this

field is not applicable to dental plans.

Variable Name: SBCHavingDiabetesCopayment

Variable Definition: The dollar amount of the copayment for the sample SBC scenario of

having diabetes

Data Type: Text

Variable Label: SBC Scenario, Having Diabetes, Copayment

Allowable Values: Free text

Data Source: Template field

Field Name from

SBC Scenario, Having Diabetes, Copayment

Data Source:

Comments: This field is optional; blanks indicate a value was not provided; this

field is not applicable to dental plans.

Variable Name: SBCHavingDiabetesCoinsurance

Variable Definition: The dollar amount of the coinsurance for the sample SBC scenario of

having diabetes

Data Type: Text

Variable Label: SBC Scenario, Having Diabetes, Coinsurance

Allowable Values: Free text



Plan Attributes Public Use File Data Dictionary

Data Source: Template field

Field Name from Data Source:

SBC Scenario, Having Diabetes, Coinsurance

Comments:

This field is optional; blanks indicate a value was not provided; this

field is not applicable to dental plans.

Variable Name: SBCHavingDiabetesLimit

Variable Definition: The dollar amount of the benefit limits or exclusions for the sample

SBC scenario of having diabetes

Data Type: Text

Variable Label: SBC Scenario, Having Diabetes, Limit

Allowable Values: Free text

Data Source: Template field

Field Name from

SBC Scenario, Having Diabetes, Limit

Data Source:

Comments: This field is optional; blanks indicate a value was not provided; this

field is not applicable to dental plans.

Variable Name: SBCHavingSimplefractureDeductible

Variable Definition: The dollar amount of the deductible for the sample SBC scenario of

treatment of a simple fracture

Data Type: Text

Variable Label: SBC Scenario, Treatment of a Simple Fracture, Deductible

Allowable Values: Free text

Data Source: Template field

Field Name from

SBC Scenario, Treatment of a Simple Fracture, Deductible

Data Source:

Comments: This field is only available for the 2017 through 2025 datasets. This

field is optional; blanks indicate a value was not provided; this field is

not applicable to dental plans.

Variable Name: SBCHavingSimplefractureCopayment

Variable Definition: The dollar amount of the copayment for the sample SBC scenario of

treatment of a simple fracture

Data Type: Text

Variable Label: SBC Scenario, Treatment of a Simple Fracture, Copayment

Allowable Values: Free text

Data Source: Template field

Field Name from

SBC Scenario, Treatment of a Simple Fracture, Copayment

Data Source:

Comments: This field is only available for the 2017 through 2025 datasets. This

field is optional; blanks indicate a value was not provided; this field is

not applicable to dental plans.

Variable Name: SBCHavingSimplefractureCoinsurance

Variable Definition: The dollar amount of the coinsurance for the sample SBC scenario of

treatment of a simple fracture



Data Type: Text

Variable Label: SBC Scenario, Treatment of a Simple Fracture, Coinsurance

Allowable Values: Free text

Data Source: Template field

Field Name from Data Source:

SBC Scenario, Treatment of a Simple Fracture, Coinsurance

Comments: This field is only available for the 2017 through 2025 datasets. This

field is optional; blanks indicate a value was not provided; this field is

not applicable to dental plans.

Variable Name: SBCHavingSimplefractureLimit

Variable Definition: The dollar amount of the benefit limits or exclusions for the sample

SBC scenario of treatment of a simple fracture

Data Type: Text

Variable Label: SBC Scenario, Treatment of a Simple Fracture, Limit

Allowable Values: Free text

Data Source: Template field

Field Name from Data Source:

SBC Scenario, Treatment of a Simple Fracture, Limit

Comments: This field is only available for the 2017 through 2025 datasets. This

field is optional; blanks indicate a value was not provided; this field is

not applicable to dental plans.

Variable Name: SpecialtyDrugMaximumCoinsurance

Variable Definition: The maximum dollar value of coinsurance for specialty high-cost

drugs

Data Type: Text

Variable Label: Specialty Drug Maximum Coinsurance

Allowable Values: Free text

Data Source: Template field

Field Name from

Maximum Coinsurance for Specialty Drugs

Data Source:

Comments: This field is optional; blanks indicate a value was not provided.

Variable Name: InpatientCopaymentMaximumDays

Variable Definition: The maximum number of days for which a patient can be charged a

copayment for an inpatient stay, if the insurance plan design charges

inpatient stays by day

Data Type: Text

Variable Label: Inpatient Copayment Maximum Days

Allowable Values: 0 (equivalent to no maximum)

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Data Source:	Template field
Field Name from	Maximum Number of Days for Charging an Inpatient Copay?
Data Source:	
Comments:	This field is optional; blank or zero values indicate a value was not
	provided.
	· ·
Variable Name:	BeginPrimaryCareCostSharingAfterNumberOfVisits
Variable Definition:	The maximum number of fully covered visits allowed, after which
variable belimitori.	•
Data Tura	primary care cost sharing will begin
Data Type:	Text
Variable Label:	Begin Primary Care Cost-Sharing After Number Of Visits
Allowable Values:	0 (equivalent to no maximum)
	1
	2
	3
	4
	5
	6
	7
	8
	9
	10
Data Source:	
	Template field
Field Name from	Begin Primary Care Cost-Sharing After a Set Number of Visits?
Data Source:	
Comments:	This field is optional; blank or zero values indicate a value was not
	provided.
Variable Name:	BeginPrimaryCareDeductibleCoinsuranceAfterNumberOfCopays
Variable Definition:	The maximum number of primary care visits with co-payment
	allowed, after which all primary care visits will be subject to the
	deductible or maximum out of pocket limits
Data Type:	Text
Variable Label:	Begin Primary Care Deductible Coinsurance After Number Of
Variable Labor.	Copays
Allowable Values:	0 (equivalent to no maximum)
Allowable values.	0 (equivalent to no maximum)
	2
	3
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Data Source: Template field

Begin Primary Care Deductible/ Coinsurance After a Set Number of Field Name from

Data Source: Copays?

Comments: This field is optional; blank or zero values indicate a value was not

provided.

Variable Name: MEHBInnTier1IndividualMOOP

Variable Definition: The dollar amount of the tier 1 in network, individual out-of-pocket

cost limit for medical EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier

1), Individual

\$X Allowable Values:

Not Applicable

Data Source: Template field

Field Name from

Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier

Data Source: 1), Individual

Comments: This field is only applicable to plans with separate medical and drug

MOOP limits; for dental plans, this field contains the MOOP value for

dental benefits.

Variable Name: MEHBInnTier1FamilyMOOP

Variable Definition: The dollar amount of the tier 1 in network, family out-of-pocket cost

limit for medical EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier

1), Family

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier

Data Source: 1), Family

Comments: This field only applies to the 2014 and 2015 datasets. This field is

only applicable to plans with separate medical and drug MOOP limits;

for dental plans, this field contains the MOOP value for dental

benefits.

MEHBInnTier1FamilyPerPersonMOOP Variable Name:

The dollar amount of the tier 1 in network, family per person out-of-Variable Definition:

pocket cost limit for medical EHB benefits

Data Type:

Variable Label: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier

1), Family Per Person



Plan Attributes Public Use File Data Dictionary

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier

Data Source: 1), Family Per Person

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug

MOOP limits; for dental plans, this field contains the MOOP value for

dental benefits.

Variable Name: MEHBInnTier1FamilyPerGroupMOOP

Variable Definition: The dollar amount of the tier 1 in network, family per group out-of-

pocket cost limit for medical EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier

1), Family Per Group

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier

Data Source: 1), Family Per Group

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug MOOP limits; for dental plans, this field contains the MOOP value for

dental benefits.

Variable Name: MEHBInnTier2IndividualMOOP

Variable Definition: The dollar amount of the tier 2 in network, individual out-of-pocket

cost limit for medical EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier

2), Individual

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier

Data Source: 2), Individual

Comments: This field is only applicable to plans with multiple in network tiers and

separate medical and drug MOOP limits; for dental plans, this field

contains the MOOP value for dental benefits.

Variable Name: MEHBInnTier2FamilyMOOP

Variable Definition: The dollar amount of the tier 2 in network, family out-of-pocket cost

limit for medical EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier

2), Family



Data Source:

The Center for Consumer Information & Insurance Oversight

Plan Attributes Public Use File Data Dictionary

Allowable Values: \$X

Not Applicable

2), Family

Data Source: Template field

Field Name from Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier

Comments: This field is only available for the 2014 and 2015 datasets. This field

is only applicable to plans with multiple in network tiers and separate medical and drug MOOP limits; this field contains the MOOP value

for dental benefits.

Variable Name: MEHBInnTier2FamilyPerPersonMOOP

Variable Definition: The dollar amount of the tier 2 in network, family per person out-of-

pocket cost limit for medical EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier

2), Family Per Person

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier

Data Source: 2), Family Per Person

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with multiple in network tiers and separate medical and drug MOOP limits; this field contains the

MOOP value for dental benefits.

Variable Name: MEHBInnTier2FamilyPerGroupMOOP

Variable Definition: The dollar amount of the tier 2 in network, family per group out-of-

pocket cost limit for medical EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier

2), Family Per Group

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Medical EHB Benefits, In Network (Tier

Data Source: 2), Family Per Group

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with multiple in network tiers and separate medical and drug MOOP limits; this field contains the

MOOP value for dental benefits.

Variable Name: MEHBOutOfNetIndividualMOOP

Variable Definition: The dollar amount of the out of network, individual out-of-pocket cost

limit for medical EHB benefits

Data Type: Text



Plan Attributes Public Use File Data Dictionary

Variable Label: Maximum Out of Pocket for Medical EHB Benefits. Out of Network.

Individual

Allowable Values: \$X

Not Applicable

Template field Data Source:

Field Name from Maximum Out of Pocket for Medical EHB Benefits, Out of Network,

Individual Data Source:

Comments: This field is only applicable to plans with separate medical and drug

MOOP limits; for dental plans, this field contains the MOOP value for

dental benefits.

MEHBOutOfNetFamilyMOOP Variable Name:

The dollar amount of the out of network, family out-of-pocket cost Variable Definition:

limit for medical EHB benefits

Data Type:

Variable Label: Maximum Out of Pocket for Medical EHB Benefits, Out of Network,

Family

Allowable Values: \$X

Not Applicable

Template field Data Source:

Field Name from Maximum Out of Pocket for Medical EHB Benefits, Out of Network,

Data Source: Family

Comments: This field is only available for the 2014 and 2015 datasets. This field

> is only applicable to plans with separate medical and drug MOOP limits; for dental plans, this field contains the MOOP value for dental

benefits.

Variable Name: MEHBOutOfNetFamilyPerPersonMOOP

Variable Definition: The dollar amount of the out of network, family per person out-of-

pocket cost limit for medical EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical EHB Benefits, Out of Network,

Family Per Person

Allowable Values: \$X

Not Applicable

Template field Data Source:

Field Name from

Maximum Out of Pocket for Medical EHB Benefits, Out of Network,

Data Source: Family Per Person

This field is only available for the 2016 through 2025 datasets. This Comments:

> field is only applicable to plans with separate medical and drug MOOP limits; for dental plans, this field contains the MOOP value for

dental benefits.

Variable Name: MEHBOutOfNetFamilyPerGroupMOOP

The dollar amount of the out of network, family per group out-of-Variable Definition:

pocket cost limit for medical EHB benefits

Text Data Type:



Plan Attributes Public Use File Data Dictionary

Variable Label: Maximum Out of Pocket for Medical EHB Benefits, Out of Network,

Family Per Group

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Medical EHB Benefits, Out of Network,

Data Source: Family Per Group

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug MOOP limits; for dental plans, this field contains the MOOP value for

dental benefits.

Variable Name: MEHBCombInnOonIndividualMOOP

Variable Definition: The dollar amount of the combined in/out of network, individual out-

of-pocket cost limit for medical EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical EHB Benefits, Combined In/Out

Network, Individual

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Medical EHB Benefits, Combined In/Out

Data Source: Network, Individual

Comments: This field is only applicable to plans with separate medical and drug

MOOP limits; for dental plans, this field contains the MOOP value for

dental benefits.

Variable Name: MEHBCombInnOonFamilyMOOP

Variable Definition: The dollar amount of the combined in/out of network, family out-of-

pocket cost limit for medical EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical EHB Benefits, Combined In/Out

Network, Family

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Medical EHB Benefits, Combined In/Out

Data Source: Network, Family

Comments: This field is only available for the 2014 and 2015 datasets. This field

is only applicable to plans with separate medical and drug MOOP limits; for dental plans, this field contains the MOOP value for dental

benefits.

Variable Name: MEHBCombInnOonFamilyPerPersonMOOP

Variable Definition: The dollar amount of the combined in/out of network, family per

person out-of-pocket cost limit for medical EHB benefits

Data Type: Text



Plan Attributes Public Use File Data Dictionary

Variable Label: Maximum Out of Pocket for Medical EHB Benefits, Combined In/Out

Network, Family Per Person

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Medical EHB Benefits, Combined In/Out

Data Source: Network, Family Per Person

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug MOOP limits; for dental plans, this field contains the MOOP value for

dental benefits.

Variable Name: MEHBCombInnOonFamilyPerGroupMOOP

Variable Definition: The dollar amount of the combined in/out of network, family per group

out-of-pocket cost limit for medical EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical EHB Benefits, Combined In/Out

Network, Family Per Group

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Medical EHB Benefits, Combined In/Out

Data Source: Network, Family Per Group

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug

MOOP limits; for dental plans, this field contains the MOOP value for

dental benefits.

Variable Name: DEHBInnTier1IndividualMOOP

Variable Definition: The dollar amount of the tier 1 in network, individual out-of-pocket

cost limit for drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 1),

Individual

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 1),

Data Source: Individual

Comments: This field is only applicable to plans with separate medical and drug

MOOP limits; this field is blank for dental plans.

Variable Name: DEHBInnTier1FamilyMOOP

Variable Definition: The dollar amount of the tier 1 in network, family out-of-pocket cost

limit for drug EHB benefits

Data Type: Text



Plan Attributes Public Use File Data Dictionary

Variable Label: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 1),

Family

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 1),

Data Source: Family

Comments: This field is only available for the 2014 and 2015 datasets. This field

is only applicable to plans with separate medical and drug MOOP

limits; this field is blank for dental plans.

Variable Name: DEHBInnTier1FamilyPerPersonMOOP

Variable Definition: The dollar amount of the tier 1 in network, family per person out-of-

pocket cost limit for drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 1),

Family Per Person

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 1),

Data Source: Family Per Person

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug

MOOP limits; this field is blank for dental plans.

Variable Name: DEHBInnTier1FamilyPerGroupMOOP

Variable Definition: The dollar amount of the tier 1 in network, family per group out-of-

pocket cost limit for drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 1),

Family Per Group

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 1),

Data Source: Family Per Group

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug

MOOP limits; this field is blank for dental plans.

Variable Name: DEHBInnTier2IndividualMOOP

Variable Definition: The dollar amount of the tier 2 in network, individual out-of-pocket

cost limit for drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 2),

Individual



Plan Attributes Public Use File Data Dictionary

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 2),

Data Source: Individual

Comments: This field is only applicable to plans with multiple in network tiers and

separate medical and drug MOOP limits; this field is blank for dental

plans.

Variable Name: DEHBInnTier2FamilyMOOP

Variable Definition: The dollar amount of the tier 2 in network, family out-of-pocket cost

limit for drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 2),

Family

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 2),

Data Source: Family

Comments: This field is only available for the 2014 and 2015 datasets. This field

is only applicable to plans with multiple in network tiers and separate medical and drug MOOP limits; this field is blank for dental plans.

Variable Name: DEHBInnTier2FamilyPerPersonMOOP

Variable Definition: The dollar amount of the tier 2 in network, family per person out-of-

pocket cost limit for drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 2),

Family Per Person

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 2),

Data Source: Family Per Person

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with multiple in network tiers and separate medical and drug MOOP limits; this field is blank for dental

plans.

Variable Name: DEHBInnTier2FamilyPerGroupMOOP

Variable Definition: The dollar amount of the tier 2 in network, family per group out-of-

pocket cost limit for drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 2),

Family Per Group



Plan Attributes Public Use File Data Dictionary

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Drug EHB Benefits, In Network (Tier 2),

Data Source: Family Per Group

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with multiple in network tiers and separate medical and drug MOOP limits; this field is blank for dental

plans.

Variable Name: DEHBOutOfNetIndividualMOOP

Variable Definition: The dollar amount of the out of network, individual out-of-pocket cost

limit for drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Drug EHB Benefits, Out of Network,

Individual

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Drug EHB Benefits, Out of Network,

Data Source: Individua

Comments: This field is only applicable to plans with separate medical and drug

MOOP limits; this field is blank for dental plans.

Variable Name: DEHBOutOfNetFamilyMOOP

Variable Definition: The dollar amount of the out of network, family out-of-pocket cost

limit for drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Drug EHB Benefits, Out of Network,

Family

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Drug EHB Benefits, Out of Network,

Data Source: Family

Comments: This field is only available for the 2014 and 2015 datasets. This field

is only applicable to plans with separate medical and drug MOOP

limits; this field is blank for dental plans.

Variable Name: DEHBOutOfNetFamilyPerPersonMOOP

Variable Definition: The dollar amount of the out of network, family per person out-of-

pocket cost limit for drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Drug EHB Benefits, Out of Network,

Family Per Person

Allowable Values: \$X

Not Applicable



Plan Attributes Public Use File Data Dictionary

Data Source: Template field

Field Name from Maximum Out of Pocket for Drug EHB Benefits, Out of Network,

Data Source: Family Per Person

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug

MOOP limits; this field is blank for dental plans.

Variable Name: DEHBOutOfNetFamilyPerGroupMOOP

Variable Definition: The dollar amount of the out of network, family per group out-of-

pocket cost limit for drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Drug EHB Benefits, Out of Network,

Family Per Group

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Drug EHB Benefits, Out of Network,

Data Source: Family Per Group

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug

MOOP limits; this field is blank for dental plans.

Variable Name: DEHBCombInnOonIndividualMOOP

Variable Definition: The dollar amount of the combined in/out of network, individual out-

of-pocket cost limit for drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Drug EHB Benefits, Combined In/Out

Network, Individual

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Drug EHB Benefits, Combined In/Out

Data Source: Network, Individual

Comments: This field is only applicable to plans with separate medical and drug

MOOP limits; this field is blank for dental plans.

Variable Name: DEHBCombInnOonFamilyMOOP

Variable Definition: The dollar amount of the combined in/out of network, family out-of-

pocket cost limit for drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Drug EHB Benefits, Combined In/Out

Network, Family

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Drug EHB Benefits, Combined In/Out

Data Source: Network, Family



Comments: This field is only available for the 2014 and 2015 datasets. This field

is only applicable to plans with separate medical and drug MOOP

limits; this field is blank for dental plans.

Variable Name: DEHBCombInnOonFamilyPerPersonMOOP

Variable Definition: The dollar amount of the combined in/out of network, family per

person out-of-pocket cost limit for drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Drug EHB Benefits, Combined In/Out

Network, Family Per Person

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Drug EHB Benefits, Combined In/Out

Data Source: Network, Family Per Person

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug

MOOP limits; this field is blank for dental plans.

Variable Name: DEHBCombInnOonFamilyPerGroupMOOP

Variable Definition: The dollar amount of the combined in/out of network, family per group

out-of-pocket cost limit for drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Drug EHB Benefits, Combined In/Out

Network, Family Per Group

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Drug EHB Benefits, Combined In/Out

Data Source: Network, Family Per Group

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug

MOOP limits; this field is blank for dental plans.

Variable Name: TEHBInnTier1IndividualMOOP

Variable Definition: The dollar amount of the tier 1 in network, individual out-of-pocket

cost limit for medical and drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

In Network (Tier 1), Individual

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

Data Source: In Network (Tier 1), Individual



Plan Attributes Public Use File Data Dictionary

Comments: This field is only applicable to plans with combined medical and drug

MOOP limits; this field is blank for dental plans.

Variable Name: TEHBInnTier1FamilyMOOP

Variable Definition: The dollar amount of the tier 1 in network, family out-of-pocket cost

limit for medical and drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

In Network (Tier 1), Family

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

Data Source: In Network (Tier 1), Family

Comments: This field is only available for the 2014 and 2015 datasets. This field

is only applicable to plans with combined medical and drug MOOP

limits; this field is blank for dental plans.

Variable Name: TEHBInnTier1FamilyPerPersonMOOP

Variable Definition: The dollar amount of the tier 1 in network, family per person out-of-

pocket cost limit for medical and drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

In Network (Tier 1), Family Per Person

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

Data Source: In Network (Tier 1), Family Per Person

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with combined medical and drug

MOOP limits; this field is blank for dental plans.

Variable Name: TEHBInnTier1FamilyPerGroupMOOP

Variable Definition: The dollar amount of the tier 1 in network, family per group out-of-

pocket cost limit for medical and drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

In Network (Tier 1), Family Per Group

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

Data Source: In Network (Tier 1), Family Per Group

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with combined medical and drug

MOOP limits; this field is blank for dental plans.



Variable Name: TEHBInnTier2IndividualMOOP

Variable Definition: The dollar amount of the tier 2 in network, individual out-of-pocket

cost limit for medical and drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

In Network (Tier 2), Individual

Allowable Values: \$X

Not Applicable

Template field Data Source:

Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), Field Name from

Data Source: In Network (Tier 2), Individual

This field is only applicable to plans with multiple in network tiers and Comments:

combined medical and drug MOOP limits; this field is blank for dental

plans.

TEHBInnTier2FamilyMOOP Variable Name:

The dollar amount of the tier 2 in network, family out-of-pocket cost Variable Definition:

limit for medical and drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

In Network (Tier 2), Family

Allowable Values: \$X

Not Applicable

Template field Data Source:

Field Name from Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

Data Source: In Network (Tier 2), Family

This field is only available for the 2014 and 2015 datasets. This field Comments:

> is only applicable to plans with multiple in network tiers and combined medical and drug MOOP limits; this field is blank for dental plans.

Variable Name: TEHBInnTier2FamilyPerPersonMOOP

Variable Definition: The dollar amount of the tier 2 in network, family per person out-of-

pocket cost limit for medical and drug EHB benefits

Data Type:

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

In Network (Tier 2), Family Per Person

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from

Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

In Network (Tier 2), Family Per Person Data Source:

This field is only available for the 2016 through 2025 datasets. This Comments:

field is only applicable to plans with multiple in network tiers and

combined medical and drug MOOP limits; this field is blank for dental

plans.



Plan Attributes Public Use File Data Dictionary

Variable Name: TEHBInnTier2FamilyPerGroupMOOP

The dollar amount of the tier 2 in network, family per group out-of-Variable Definition:

pocket cost limit for medical and drug EHB benefits

Data Type:

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

In Network (Tier 2), Family Per Group

Allowable Values: \$X

Not Applicable

Template field Data Source:

Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), Field Name from

In Network (Tier 2), Family Per Group Data Source:

This field is only available for the 2016 through 2025 datasets. This Comments:

> field is only applicable to plans with multiple in network tiers and combined medical and drug MOOP limits; this field is blank for dental

plans.

Variable Name: TEHBOutOfNetIndividualMOOP

Variable Definition: The dollar amount of the out of network, individual out-of-pocket cost

limit for medical and drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

Out of Network, Individual

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

Data Source: Out of Network, Individual

This field is only applicable to plans with combined medical and drug Comments:

MOOP limits; this field is blank for dental plans.

Variable Name: **TEHBOutOfNetFamilyMOOP**

The dollar amount of the out of network, family out-of-pocket cost Variable Definition:

limit for medical and drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

Out of Network, Family

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from

Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

Out of Network, Family Data Source:

This field is only available for the 2014 and 2015 datasets. This field Comments:

is only applicable to plans with combined medical and drug MOOP

limits; this field is blank for dental plans.

TEHBOutOfNetFamilyPerPersonMOOP Variable Name:



Plan Attributes Public Use File Data Dictionary

Variable Definition: The dollar amount of the out of network, family per person out-of-

pocket cost limit for medical and drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

Out of Network, Family Per Person

Allowable Values: \$X

Not Applicable

Template field Data Source:

Field Name from Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

Data Source: Out of Network, Family Per Person

This field is only available for the 2016 through 2025 datasets. This Comments:

field is only applicable to plans with combined medical and drug

MOOP limits; this field is blank for dental plans.

Variable Name: TEHBOutOfNetFamilyPerGroupMOOP

The dollar amount of the out of network, family per group out-of-Variable Definition:

pocket cost limit for medical and drug EHB benefits

Data Type:

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

Out of Network, Family Per Group

Allowable Values: \$X

Not Applicable

Data Source: Template field

Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), Field Name from

Data Source: Out of Network, Family Per Group

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with combined medical and drug

MOOP limits; this field is blank for dental plans.

Variable Name: TEHBCombInnOonIndividualMOOP

Variable Definition: The dollar amount of the combined in/out of network, individual out-

of-pocket cost limit for medical and drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

Combined In/Out Network, Individual

Allowable Values: \$X

Not Applicable

Data Source: Template field

Maximum Out of Pocket for Medical and Drug EHB Benefits (Total), Field Name from

Data Source: Combined In/Out Network, Individual

Comments: This field is only applicable to plans with combined medical and drug

MOOP limits; this field is blank for dental plans.

Variable Name: TEHBCombInnOonFamilyMOOP

The dollar amount of the combined in/out of network, family out-of-Variable Definition:

pocket cost limit for medical and drug EHB benefits

Text Data Type:



Plan Attributes Public Use File Data Dictionary

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

Combined In/Out Network, Family

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

Data Source: Combined In/Out Network, Family

Comments: This field is only available for the 2014 and 2015 datasets. This field

is only applicable to plans with combined medical and drug MOOP

limits; this field is blank for dental plans.

Variable Name: TEHBCombInnOonFamilyPerPersonMOOP

Variable Definition: The dollar amount of the combined in/out of network, family per

person out-of-pocket cost limit for medical and drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

Combined In/Out Network, Family Per Person

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

Data Source: Combined In/Out Network, Family Per Person

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with combined medical and drug

MOOP limits; this field is blank for dental plans.

Variable Name: TEHBCombInnOonFamilyPerGroupMOOP

Variable Definition: The dollar amount of the combined in/out of network, family per group

out-of-pocket cost limit for medical and drug EHB benefits

Data Type: Text

Variable Label: Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

Combined In/Out Network, Family Per Group

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Maximum Out of Pocket for Medical and Drug EHB Benefits (Total),

Data Source: Combined In/Out Network, Family Per Group

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with combined medical and drug

MOOP limits; this field is blank for dental plans.

Variable Name: MEHBDedInnTier1Individual

Variable Definition: The dollar amount of the tier 1 in network, individual deductible for

medical EHB benefits

Data Type: Text

Variable Label: Medical EHB Deductible, In Network (Tier 1), Individual



Plan Attributes Public Use File Data Dictionary

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from

Medical EHB Deductible, In Network (Tier 1), Individual

Data Source:

Comments: This field is only applicable to plans with separate medical and drug

deductibles; for dental plans, this field contains the deductible for

dental benefits.

Variable Name: MEHBDedInnTier1Family

Variable Definition: The dollar amount of the tier 1 in network, family deductible for

medical EHB benefits

Data Type: Text

Variable Label: Medical EHB Deductible, In Network (Tier 1), Family

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Data Source:

Medical EHB Deductible, In Network (Tier 1), Family

Comments: This field is only available for the 2014 and 2015 datasets. This field

is only applicable to plans with separate medical and drug

deductibles; for dental plans, this field contains the deductible for

dental benefits.

Variable Name: MEHBDedInnTier1FamilyPerPerson

Variable Definition: The dollar amount of the tier 1 in network, family per person

deductible for medical EHB benefits

Data Type: Text

Variable Label: Medical EHB Deductible, In Network (Tier 1), Family Per Person

Allowable Values: \$X

Not Applicable

Data Source: Te

Field Name from

Template field

Data Source:

Medical EHB Deductible, In Network (Tier 1), Family Per Person

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for

dental benefits.

Variable Name: MEHBDedInnTier1FamilyPerGroup

Variable Definition: The dollar amount of the tier 1 in network, family per group deductible

for medical EHB benefits

Data Type: Text

Variable Label: Medical EHB Deductible, In Network (Tier 1), Family Per Group

Allowable Values: \$X

Not Applicable

Data Source: Template field



Plan Attributes Public Use File Data Dictionary

Field Name from

Data Source: Comments: Medical EHB Deductible, In Network (Tier 1), Family Per Group

This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for

dental benefits.

Variable Name: MEHBDedInnTier1Coinsurance

Variable Definition: The percentage used for the tier 1 in network coinsurance for medical

EHB benefits, unless a different coinsurance is listed for a specific

benefit

Data Type: Text

Variable Label: Medical EHB Deductible, In Network (Tier 1), Default Coinsurance

Allowable Values: Free text

Data Source: Template field

Field Name from Data Source:

Medical EHB Deductible, In Network (Tier 1), Default Coinsurance

Comments: This field is only applicable to plans with separate medical and drug

deductibles; this field is blank for dental plans.

Variable Name: MEHBDedInnTier2Individual

Variable Definition: The dollar amount of the tier 2 in network, individual deductible for

medical EHB benefits

Data Type: Text

Variable Label: Medical EHB Deductible, In Network (Tier 2), Individual

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Data Source:

Medical EHB Deductible, In Network (Tier 2), Individual

Comments: This field is only applicable to plans with multiple in network tiers and

separate medical and drug deductibles; for dental plans, this field

contains the deductible for dental benefits.

Variable Name: MEHBDedInnTier2Family

Variable Definition: The dollar amount of the tier 2 in network, family deductible for

medical EHB benefits

Data Type: Text

Variable Label: Medical EHB Deductible, In Network (Tier 2), Family

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from

Medical EHB Deductible, In Network (Tier 2), Family

Data Source:

Comments: This field is only available for the 2014 and 2015 datasets. This field

is only applicable to plans with multiple in network tiers and separate



medical and drug deductibles; for dental plans, this field contains the

deductible for dental benefits.

Variable Name: MEHBDedInnTier2FamilyPerPerson

Variable Definition: The dollar amount of the tier 2 in network, family per person

deductible for medical EHB benefits

Data Type: Text

Variable Label: Medical EHB Deductible, In Network (Tier 2), Family Per Person

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Data Source:

Medical EHB Deductible, In Network (Tier 2), Family Per Person

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with multiple in network tiers and separate medical and drug deductibles; for dental plans, this field

contains the deductible for dental benefits.

Variable Name: MEHBDedInnTier2FamilyPerGroup

Variable Definition: The dollar amount of the tier 2 in network, family per group deductible

for medical EHB benefits

Data Type: Text

Variable Label: Medical EHB Deductible, In Network (Tier 2), Family Per Group

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from

Medical EHB Deductible, In Network (Tier 2), Family Per Group

Data Source:

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with multiple in network tiers and separate medical and drug deductibles; for dental plans, this field

contains the deductible for dental benefits.

Variable Name: MEHBDedInnTier2Coinsurance

Variable Definition: The percentage used for the tier 2 in network coinsurance for medical

EHB benefits, unless a different coinsurance is listed for a specific

benefit

Data Type: Text

Variable Label: Medical EHB Deductible, In Network (Tier 2), Default Coinsurance

Allowable Values: Free text

Data Source: Template field

Field Name from

Medical EHB Deductible, In Network (Tier 2), Default Coinsurance

Data Source:

Comments: This field is only applicable to plans with multiple in network tiers and

separate medical and drug deductibles; this field will be blank for

dental plans.



Plan Attributes Public Use File Data Dictionary

Variable Name: MEHBDedOutOfNetIndividual

Variable Definition: The dollar amount of the out of network, individual deductible for

medical EHB benefits

Data Type: Text

Variable Label: Medical EHB Deductible, Out of Network, Individual

Allowable Values: \$X

Not Applicable

Template field Data Source:

Field Name from Data Source:

Medical EHB Deductible, Out of Network, Individual

This field is only applicable to plans with separate medical and drug Comments:

deductibles; for dental plans, this field contains the deductible for

dental benefits.

Variable Name: MEHBDedOutOfNetFamily

The dollar amount of the out of network, family deductible for medical Variable Definition:

EHB benefits

Data Type: Text

Variable Label: Medical EHB Deductible, Out of Network, Family

Allowable Values: \$X

Not Applicable

Template field Data Source:

Field Name from

Data Source:

Medical EHB Deductible, Out of Network, Family

Comments: This field is only available for the 2014 and 2015 datasets. This field

is only applicable to plans with separate medical and drug

deductibles; for dental plans, this field contains the deductible for

dental benefits.

Variable Name: MEHBDedOutOfNetFamilyPerPerson

Variable Definition: The dollar amount of the out of network, family per person deductible

for medical EHB benefits

Data Type: Text

Variable Label: Medical EHB Deductible, Out of Network, Family Per Person

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from

Data Source:

Medical EHB Deductible, Out of Network, Family Per Person

Comments: This field is only available for the 2016 through 2025 datasets. This

> field is only applicable to plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for

dental benefits.

Variable Name: MEHBDedOutOfNetFamilyPerGroup

The dollar amount of the out of network, family per group deductible Variable Definition:

for medical EHB benefits



Plan Attributes Public Use File Data Dictionary

Data Type: Text

Variable Label: Medical EHB Deductible, Out of Network, Family Per Group

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from

Medical EHB Deductible, Out of Network, Family Per Group

Data Source: Comments:

This field is only available for the 2016 through 2025 datasets. This field is only applicable to plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for

dental benefits.

Variable Name: MEHBDedCombInnOonIndividual

Variable Definition: The dollar amount of the combined in/out of network, individual

deductible for medical EHB benefits

Data Type: Text

Variable Label: Medical EHB Deductible, Combined In/Out of Network, Individual

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Data Source:

Medical EHB Deductible, Combined In/Out of Network, Individual

Comments: This field is only applicable to plans with separate medical and drug

deductibles; for dental plans, this field contains the deductible for

dental benefits.

Variable Name: MEHBDedCombInnOonFamily

Variable Definition: The dollar amount of the combined in/out of network, family

deductible for medical EHB benefits

Data Type: Text

Variable Label: Medical EHB Deductible, Combined In/Out of Network, Family

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from

Medical EHB Deductible, Combined In/Out of Network, Family

Data Source: Comments:

This field is only available for the 2014 and 2015 datasets. This field

is only applicable to plans with separate medical and drug

deductibles; for dental plans, this field contains the deductible for

dental benefits.

Variable Name: MEHBDedCombInnOonFamilyPerPerson

Variable Definition: The dollar amount of the combined in/out of network, family per

person deductible for medical EHB benefits

Data Type: Text



Plan Attributes Public Use File Data Dictionary

Variable Label: Medical EHB Deductible, Combined In/Out of Network, Family Per

Person

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Medical EHB Deductible, Combined In/Out of Network, Family Per

Data Source: Person

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for

dental benefits.

Variable Name: MEHBDedCombInnOonFamilyPerGroup

Variable Definition: The dollar amount of the combined in/out of network, family per group

deductible for medical EHB benefits

Data Type: Text

Variable Label: Medical EHB Deductible, Combined In/Out of Network, Family Per

Group

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Medical EHB Deductible, Combined In/Out of Network, Family Per

Data Source: Group

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for

dental benefits.

Variable Name: DEHBDedInnTier1Individual

Variable Definition: The dollar amount of the tier 1 in network, individual deductible for

drug EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, In Network (Tier 1), Individual

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Data Source:

Drug EHB Deductible, In Network (Tier 1), Individual

Comments: This field is only applicable to plans with separate medical and drug

deductibles; for dental plans, this field contains the deductible for

dental benefits.

Variable Name: DEHBDedInnTier1Family

Variable Definition: The dollar amount of the tier 1 in network, family deductible for drug

EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, In Network (Tier 1), Family



Plan Attributes Public Use File Data Dictionary

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Data Source:

Drug EHB Deductible, In Network (Tier 1), Family

Comments: This field is only available for the 2014 and 2015 datasets. This field

is only applicable to plans with separate medical and drug

deductibles; for dental plans, this field contains the deductible for

dental benefits.

Variable Name: DEHBDedInnTier1FamilyPerPerson

Variable Definition: The dollar amount of the tier 1 in network, family per person

deductible for drug EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, In Network (Tier 1), Family Per Person

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from

Drug EHB Deductible, In Network (Tier 1), Family Per Person

Data Source:

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for

dental benefits.

Variable Name: DEHBDedInnTier1FamilyPerGroup

Variable Definition: The dollar amount of the tier 1 in network, family per group deductible

for drug EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, In Network (Tier 1), Family Per Group

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from

Drug EHB Deductible, In Network (Tier 1), Family Per Group

Data Source: Comments:

This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug deductibles; for dental plans, this field contains the deductible for

dental benefits.

Variable Name: DEHBDedInnTier1Coinsurance

Variable Definition: The percentage used for the tier 1 in network coinsurance for drug

EHB benefits, unless a different coinsurance is listed for a specific

benefit

Data Type: Text

Variable Label: Drug EHB Deductible, In Network (Tier 1), Default Coinsurance

Allowable Values: Free text



Plan Attributes Public Use File Data Dictionary

Template field Data Source:

Field Name from Data Source:

Drug EHB Deductible, In Network (Tier 1), Default Coinsurance

Comments: This field is only applicable to plans with separate medical and drug

deductibles; this field is blank for dental plans.

Variable Name: DEHBDedInnTier2Individual

Variable Definition: The dollar amount of the tier 2 in network, individual deductible for

drug EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, In Network (Tier 2), Individual

Allowable Values: \$X

Not Applicable

Template field Data Source:

Field Name from Data Source:

Drug EHB Deductible, In Network (Tier 2), Individual

Comments: This field is only applicable to plans with multiple in network tiers and

separate medical and drug deductibles; this field is blank for dental

plans.

DEHBDedInnTier2Family Variable Name:

The dollar amount of the tier 2 in network, family deductible for drug Variable Definition:

EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, In Network (Tier 2), Family

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from

Drug EHB Deductible, In Network (Tier 2), Family

Data Source:

Comments: This field is only available for the 2014 and 2015 datasets. This field

is only applicable to plans with multiple in network tiers and separate

medical and drug deductibles; this field is blank for dental plans.

Variable Name: DEHBDedInnTier2FamilyPerPerson

Variable Definition: The dollar amount of the tier 2 in network, family per person

deductible for drug EHB benefits

Data Type:

Variable Label: Drug EHB Deductible, In Network (Tier 2), Family Per Person

Allowable Values: \$X

Not Applicable

Template field Data Source:

Field Name from Data Source:

Drug EHB Deductible, In Network (Tier 2), Family Per Person

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with multiple in network tiers and



separate medical and drug deductibles; this field is blank for dental

plans.

Variable Name: DEHBDedInnTier2FamilyPerGroup

Variable Definition: The dollar amount of the tier 2 in network, family per group deductible

for drug EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, In Network (Tier 2), Family Per Group

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Data Source:

Drug EHB Deductible, In Network (Tier 2), Family Per Group

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with multiple in network tiers and separate medical and drug deductibles; this field is blank for dental

plans.

Variable Name: DEHBDedInnTier2Coinsurance

Variable Definition: The percentage used for the tier 2 in network coinsurance for drug

EHB benefits, unless a different coinsurance is listed for a specific

benefit

Data Type: Text

Variable Label: Drug EHB Deductible, In Network (Tier 2), Default Coinsurance

Allowable Values: Free text

Data Source: Template field

Field Name from

lame from Drug EHB Deductible, In Network (Tier 2), Default Coinsurance

Data Source:

Comments: This field is only applicable to plans with multiple in network tiers and

separate medical and drug deductibles; this field is blank for dental

plans.

Variable Name: DEHBDedOutOfNetIndividual

Variable Definition: The dollar amount of the out of network, individual deductible for drug

EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, Out of Network, Individual

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Drug

Data Source:

Drug EHB Deductible, Out of Network, Individual

Comments: This field is only applicable to plans with separate medical and drug

deductibles; this field is blank for dental plans.

Variable Name: DEHBDedOutofNetFamily



Plan Attributes Public Use File Data Dictionary

Variable Definition: The dollar amount of the out of network, family deductible for drug

EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, Out of Network, Family

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from

Drug EHB Deductible, Out of Network, Family

Data Source:

Comments: This field is only available for the 2014 and 2015 datasets. This field

is only applicable to plans with separate medical and drug

deductibles; this field is blank for dental plans.

Variable Name: DEHBDedOutofNetFamilyPerPerson

Variable Definition: The dollar amount of the out of network, family per person deductible

for drug EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, Out of Network, Family Per Person

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from

Drug EHB Deductible, Out of Network, Family Per Person

Data Source:

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug

deductibles; this field is blank for dental plans.

Variable Name: DEHBDedOutofNetFamilyPerGroup

Variable Definition: The dollar amount of the out of network, family per group deductible

for drug EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, Out of Network, Family Per Group

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from

Drug EHB Deductible, Out of Network, Family Per Group

Data Source:

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug

deductibles; this field is blank for dental plans.

Variable Name: DEHBDedCombInnOonIndividual

Variable Definition: The dollar amount of the combined in/out of network, individual

deductible for drug EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, Combined In/Out of Network, Individual



Plan Attributes Public Use File Data Dictionary

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from

Drug EHB Deductible, Combined In/Out of Network, Individual

Data Source:

Comments: This field is only applicable to plans with separate medical and drug

deductibles; this field is blank for dental plans.

Variable Name: DEHBDedCombInnOonFamily

Variable Definition: The dollar amount of the combined in/out of network, family

deductible for drug EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, Combined In/Out of Network, Family

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from

Drug EHB Deductible, Combined In/Out of Network, Family

Data Source:

Comments: This field is only available for the 2014 and 2015 datasets. This field

is only applicable to plans with separate medical and drug

deductibles; this field is blank for dental plans.

Variable Name: DEHBDedCombInnOonFamilyPerPerson

Variable Definition: The dollar amount of the combined in/out of network, family per

person deductible for drug EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, Combined In/Out of Network, Family Per

Person

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Drug EHB Deductible, Combined In/Out of Network, Family Per

Data Source: Person

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug

deductibles; this field is blank for dental plans.

Variable Name: DEHBDedCombInnOonFamilyPerGroup

Variable Definition: The dollar amount of the combined in/out of network, family per group

deductible for drug EHB benefits

Data Type: Text

Variable Label: Drug EHB Deductible, Combined In/Out of Network, Family Per

Group

Allowable Values: \$X

Not Applicable

Data Source: Template field



Plan Attributes Public Use File Data Dictionary

Field Name from Drug EHB Deductible, Combined In/Out of Network, Family Per

Data Source: Group

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with separate medical and drug

deductibles; this field is blank for dental plans.

Variable Name: TEHBDedInnTier1Individual

Variable Definition: The dollar amount of the tier 1 in network, individual deductible for

medical and drug EHB benefits

Data Type: Text

Variable Label: Combined Medical and Drug EHB Deductible, In Network (Tier 1),

Individual

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Combined Medical and Drug EHB Deductible, In Network (Tier 1),

Data Source: Individual

Comments: This field is only applicable to plans with combined medical and drug

deductibles; this field is blank for dental plans.

Variable Name: TEHBDedInnTier1Family

Variable Definition: The dollar amount of the tier 1 in network, family deductible for

medical and drug EHB benefits

Data Type: Text

Variable Label: Combined Medical and Drug EHB Deductible, In Network (Tier 1),

Family

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Combined Medical and Drug EHB Deductible, In Network (Tier 1),

Data Source: Family

Comments: This field is only available for the 2014 and 2015 datasets. This field

is only applicable to plans with combined medical and drug

deductibles; this field is blank for dental plans.

Variable Name: TEHBDedInnTier1FamilyPerPerson

Variable Definition: The dollar amount of the tier 1 in network, family per person

deductible for medical and drug EHB benefits

Data Type: Text

Variable Label: Combined Medical and Drug EHB Deductible, In Network (Tier 1),

Family Per Person

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Combined Medical and Drug EHB Deductible, In Network (Tier 1),

Data Source: Family Per Person



Plan Attributes Public Use File Data Dictionary

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with combined medical and drug

deductibles; this field is blank for dental plans.

Variable Name: TEHBDedInnTier1FamilyPerGroup

Variable Definition: The dollar amount of the tier 1 in network, family per group deductible

for medical and drug EHB benefits

Data Type: Text

Variable Label: Combined Medical and Drug EHB Deductible, In Network (Tier 1),

Family Per Group

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Combined Medical and Drug EHB Deductible, In Network (Tier 1),

Data Source: Family Per Group

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with combined medical and drug

deductibles; this field is blank for dental plans.

Variable Name: TEHBDedInnTier1Coinsurance

Variable Definition: The percentage used for the tier 1 in network coinsurance for medical

and drug EHB benefits, unless a different coinsurance is listed for a

specific benefit

Data Type: Text

Variable Label: Combined Medical and Drug EHB Deductible, In Network (Tier 1),

Default Coinsurance

Allowable Values: Free text

Data Source: Template field

Field Name from Combined Medical and Drug EHB Deductible, In Network (Tier 1),

Data Source: Default Coinsurance

Comments: This field is only applicable to plans with combined medical and drug

deductibles; this field is blank for dental plans.

Variable Name: TEHBDedInnTier2Individual

Variable Definition: The dollar amount of the tier 2 in network, individual deductible for

medical and drug EHB benefits

Data Type: Text

Variable Label: Combined Medical and Drug EHB Deductible, In Network (Tier 2),

Individual

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Combined Medical and Drug EHB Deductible, In Network (Tier 2),

Data Source: Individual

Comments: This field is only applicable to plans with multiple in network tiers and

combined medical and drug deductibles; this field is blank for dental

plans.



Variable Name: TEHBDedInnTier2Family

Variable Definition: The dollar amount of the tier 2 in network, family deductible for

medical and drug EHB benefits

Data Type: Text

Variable Label: Combined Medical and Drug EHB Deductible, In Network (Tier 2),

Family

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Combined Medical and Drug EHB Deductible, In Network (Tier 2),

Data Source: Family

Comments: This field is only available for the 2014 and 2015 datasets. This field

is only applicable to plans with multiple in network tiers and combined

medical and drug deductibles; this field is blank for dental plans.

Variable Name: TEHBDedInnTier2FamilyPerPerson

Variable Definition: The dollar amount of the tier 2 in network, family per person

deductible for medical and drug EHB benefits

Data Type: Text

Variable Label: Combined Medical and Drug EHB Deductible, In Network (Tier 2),

Family Per Person

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Combined Medical and Drug EHB Deductible, In Network (Tier 2),

Data Source: Family Per Person

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with multiple in network tiers and combined medical and drug deductibles; this field is blank for dental

plans.

Variable Name: TEHBDedInnTier2FamilyPerGroup

Variable Definition: The dollar amount of the tier 2 in network, family per group deductible

for medical and drug EHB benefits

Data Type: Text

Variable Label: Combined Medical and Drug EHB Deductible, In Network (Tier 2),

Family Per Group

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Combined Medical and Drug EHB Deductible, In Network (Tier 2),

Data Source: Family Per Group

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with multiple in network tiers and



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combined medical and drug deductibles; this field is blank for dental

plans.

Variable Name: TEHBDedInnTier2Coinsurance

Variable Definition: The percentage used for the tier 2 in network coinsurance for medical

and drug EHB benefits, unless a different coinsurance is listed for a

specific benefit

Text Data Type:

Variable Label: Combined Medical and Drug EHB Deductible, In Network (Tier 2),

Default Coinsurance

Allowable Values: Free text

Template field Data Source:

Field Name from Combined Medical and Drug EHB Deductible, In Network (Tier 2),

Data Source: **Default Coinsurance**

This field is only applicable to plans with multiple in network tiers and Comments:

combined medical and drug deductibles; this field is blank for dental

plans.

TEHBDedOutOfNetIndividual Variable Name:

Variable Definition: The dollar amount of the out of network, individual deductible for

medical and drug EHB benefits

Data Type: Text

Variable Label: Combined Medical and Drug EHB Deductible, Out of Network,

Individual

Allowable Values: \$X

Not Applicable

Template field Data Source:

Combined Medical and Drug EHB Deductible, Out of Network, Field Name from

Data Source: Individual

This field is only applicable to plans with combined medical and drug Comments:

deductibles; this field is blank for dental plans.

Variable Name: **TEHBDedOutofNetFamily**

Variable Definition: The dollar amount of the out of network, family deductible for medical

and drug EHB benefits

Text Data Type:

Variable Label: Combined Medical and Drug EHB Deductible, Out of Network, Family

Allowable Values: \$X

Not Applicable

Data Source: Template field

Combined Medical and Drug EHB Deductible, Out of Network, Family

Field Name from

Data Source:

This field is only available for the 2014 and 2015 datasets. This field Comments:

is only applicable to plans with combined medical and drug

deductibles; this field is blank for dental plans.

TEHBDedOutofNetFamilyPerPerson Variable Name:



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Variable Definition: The dollar amount of the out of network, family per person deductible

for medical and drug EHB benefits

Data Type: Text

Variable Label: Combined Medical and Drug EHB Deductible, Out of Network, Family

Per Person

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Combined Medical and Drug EHB Deductible, Out of Network, Family

Data Source: Per Person

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with combined medical and drug

deductibles; this field is blank for dental plans.

Variable Name: TEHBDedOutofNetFamilyPerGroup

Variable Definition: The dollar amount of the out of network, family per group deductible

for medical and drug EHB benefits

Data Type: Text

Variable Label: Combined Medical and Drug EHB Deductible, Out of Network, Family

Per Group

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Combined Medical and Drug EHB Deductible, Out of Network, Family

Data Source: Per Group

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with combined medical and drug

deductibles; this field is blank for dental plans.

Variable Name: TEHBDedCombInnOonIndividual

Variable Definition: The dollar amount of the combined in/out of network, individual

deductible for medical and drug EHB benefits

Data Type: Text

Variable Label: Combined Medical and Drug EHB Deductible, Combined In/Out of

Network, Individual

Allowable Values: \$X

Not Applicable

Data Source: Template field

Field Name from Combined Medical and Drug EHB Deductible, Combined In/Out of

Data Source: Network, Individual

Comments: This field is only applicable to plans with combined medical and drug

deductibles; this field is blank for dental plans.

Variable Name: TEHBDedCombInnOonFamily

Variable Definition: The dollar amount of the combined in/out of network, family

deductible for medical and drug EHB benefits

Data Type: Text



Plan Attributes Public Use File Data Dictionary

Variable Label: Combined Medical and Drug EHB Deductible, Combined In/Out of

Network, Family

Allowable Values: \$X

Not Applicable

Template field Data Source:

Field Name from Combined Medical and Drug EHB Deductible, Combined In/Out of

Data Source: Network, Family

Comments: This field is only available for the 2014 and 2015 datasets. This field

is only applicable to plans with combined medical and drug

deductibles; this field is blank for dental plans.

Variable Name: TEHBDedCombInnOonFamilyPerPerson

The dollar amount of the combined in/out of network, family per Variable Definition:

person deductible for medical and drug EHB benefits

Data Type:

Variable Label: Combined Medical and Drug EHB Deductible, Combined In/Out of

Network, Family Per Person

Allowable Values: \$X

Not Applicable

Template field Data Source:

Field Name from

Combined Medical and Drug EHB Deductible, Combined In/Out of Data Source:

Network, Family Per Person

Comments: This field is only available for the 2016 through 2025 datasets. This

field is only applicable to plans with combined medical and drug

deductibles; this field is blank for dental plans.

Variable Name: TEHBDedCombInnOonFamilyPerGroup

The dollar amount of the combined in/out of network, family per group Variable Definition:

deductible for medical and drug EHB benefits

Data Type: Text

Variable Label: Combined Medical and Drug EHB Deductible, Combined In/Out of

Network, Family Per Group

\$X Allowable Values:

Not Applicable

Data Source: Template field

Combined Medical and Drug EHB Deductible, Combined In/Out of Field Name from

Data Source: Network, Family Per Group

This field is only available for the 2016 through 2025 datasets. This Comments:

field is only applicable to plans with combined medical and drug

deductibles; this field is blank for dental plans.

Variable Name: IsHSAEligible

Variable Definition: An indication that the insurance plan qualifies for a health savings

account (HSA)

Data Type: Text

Variable Label: **HSA** Eligible



Plan Attributes Public Use File Data Dictionary

Allowable Values: Yes

No

Data Source: Template field Field Name from HSA Eligible

Data Source:

Comments: This field is not applicable to dental plans.

Variable Name: HSAOrHRAEmployerContribution

Variable Definition: An indication that the employer makes an HSA or health

reimbursement arrangement (HRA) contribution

Data Type: Text

Variable Label: HSA/HRA Employer Contribution

Allowable Values: Yes

No

Data Source: Template field

Field Name from HSA/H

Data Source:

HSA/HRA Employer Contribution

Comments: This field is only applicable to medical plans in the SHOP market.

Variable Name: HSAOrHRAEmployerContributionAmount

Variable Definition: The dollar amount per employee that the employer contributes to the

HSA or HRA

Data Type: Text

Variable Label: HSA/HRA Employer Contribution Amount

Allowable Values: Free text

Data Source: Template field

Field Name from

HSA/HRA Employer Contribution Amount

Data Source: Comments:

Comments: This field is only applicable to medical plans in the SHOP market and

only required if HSAOrHRAEmployerContribution field equals Yes.

Variable Name: URLForSummaryofBenefitsCoverage

Variable Definition: The URL for the Summary of Benefits & Coverage

Data Type: Text

Variable Label: URL for Summary of Benefits & Coverage

Allowable Values: Free text

Data Source: Template field for the 2014 through 2020 datasets; HIOS

Supplemental Submission Module (SSM) for the 2020 through 2023 datasets; Marketplace Plan Management System (MPMS) for the

2024 and 2025 datasets.

Field Name from

Data Source:

URL for Summary of Benefits & Coverage

Comments: This field is optional; blank or zero values indicate a value was not

provided.

Variable Name: PlanBrochure

Variable Definition: The URL for the Plan Brochure



Data Type: Text

Variable Label: Plan Brochure
Allowable Values: Free text

Data Source: Template field for the 2014 through 2020 datasets; HIOS

Supplemental Submission Module (SSM) for the 2020 through 2023 datasets; Marketplace Plan Management System (MPMS) for the

2024 and 2025 datasets.

Field Name from

Data Source:

Plan Brochure

Comments: This field is optional; blank or zero values indicate a value was not

provided.

Variable Name: RowNumber

Variable Definition: Template row number associated with this data record

Data Type: Text

Variable Label: Row Number Allowable Values: Free text

Data Source: System-generated field

Field Name from

RowNumber

Data Source:

Comments: This field is only available for the 2014 through 2016 datasets.