

Revision History

The following table outlines changes to the Instructions chapters.

Version	Chapter	Revision description
1	Appendix A: Template Field Crosswalk	N/A
1	Appendix B: QHP Application Abbreviations	N/A
1	Appendix C: Enabling Macros in Microsoft Excel	N/A
1	Chapter 1: Administrative	N/A
3	Chapter 2: Program Attestation	Ver – 2: Updated Figures 2-3 and 2-4. Corrected reference categories as they appear in 45 CFR 153, and 45 CFR 156. Ver – 3: Edited attestation language for: compliance plan, stand-alone dental, enrollment, financial management, and SHOP. Updated Figure 2-3.
1	Chapter 3: State Licensure	N/A
1	Chapter 4: Good Standing	N/A
1	Chapter 5: Accreditation	N/A
2	Chapter 6: Network Adequacy	Ver – 2: Clarified Language in the Network Adequacy Attestation question #3 for when an issuer would need to submit the ECP/Network Adequacy Template.
2	Chapter 7: Essential Community Providers	Ver – 2: Updated formatting. Added clarifying language throughout the document.
2	Chapter 7a: Supplemental Response Essential Community Provider	Ver – 2: Made form fillable. No content changed.
1	Chapter 8: Network ID	N/A
2	Chapter 9: Service Area	Ver – 2: Updated file naming convention to align with Chapter 16
1	Chapter 9a: Supplemental Response Partial County	N/A
2	Chapter 10: Plans and Benefits	Ver – 2: Fixed typos. Added clarifying information regarding the Standardized Plan Design including the Add-In file. Corrected language when selecting an option for the <i>Does this plan offer Composite Rating?</i> Updated figures for Standardized Plan Design.
1	Chapter 10a: Discrimination Cost Sharing Outlier Justification	N/A
1	Chapter 10b: Discrimination Language Justification	N/A

Version	Chapter	Revision description
1	Chapter 10c: EHB Substituted Benefit Justification	N/A
1	Chapter 10d: Meaningful Difference Justification	N/A
1	Chapter 10e: Unique AV Plan Justification	N/A
1	Chapter 11: Actuarial Value Calculator	N/A
2	Chapter 12: Prescription Drugs	Ver – 2: Added paragraph describing how the template does not capture minimum or maximum copay or coinsurance.
1	Chapter 12a: Discrimination Formulary Clinical Appropriateness Justification	N/A
1	Chapter 12b: Discrimination Formulary Outlier Review Justification	N/A
1	Chapter 12c: Discrimination Treatment Protocol Justification	N/A
1	Chapter 12d: Formulary Inadequate Category Class Count Justification	N/A
2	Chapter 13: Business Rules	Ver – 2: Screenshots were updated to reflect template.
2	Chapter 14: Rates Table	Ver – 2: Screenshots were updated to reflect template.
2	Chapter 15: Stand-Alone Dental Plan	Ver – 2: Removed incorrect guidance when selecting an option for the <i>QHP/Non-QHP</i> field.
1	Chapter 15a: Stand-Alone Dental Plan Actuarial Value Supporting Documentation and Justification	N/A
1	Chapter 15b: Stand-Alone Dental Plan Description of EHB Allocation	N/A
2	Chapter 16: Supporting Documentation and Justification	Ver – 2: Updated file naming conventions.
1	Chapter 17: SHOP Justification	N/A
2	Chapter 18: ECP/Network Adequacy Template	Ver – 2: Updated formatting. Added clarifying information throughout the document.
1	Plan ID Crosswalk Template Instructions	N/A