

Chapter 10c: EHB-Substituted Benefit (Actuarial Equivalent) Supporting Documentation and Justification

Please fill in the following information.

HIOS Issuer ID: _____

HIOS Product ID: _____

Applicable HIOS Plan IDs (Standard Component): _____

EHB Benchmark Benefits	Substituted Benefits	Value of EHB Benchmark Benefits	Value of Substituted Benefits	EHB Category	Cost and Utilization Assumptions

Certification language:

This substitution

- (i) is actuarially equivalent to the benefit that is being replaced;
- (ii) is made only within the same essential health benefit category; and
- (iii) is not a prescription drug benefit.

The certification

- (i) was conducted by a member of the American Academy of Actuaries;
- (ii) was based on an analysis performed in accordance with generally accepted actuarial principles and methodologies; and
- (iii) used a standardized plan population.

Actuary Signature: _____

Actuary Printed Name: _____

Date: _____

If this provides insufficient space to list your justifications, please print out another form and add additional reasons there.