

Chapter 17a: Federally-facilitated SHOP Participation Provision Supporting Documentation and Justification for the Federally-facilitated Individual Marketplace

Each QHP issuer filing a QHP to be sold through a Marketplace in the individual market must complete this form for each applicable state Marketplace.

QHP Issuer HIOS ID: _____ NAIC Code _____ State _____

Definitions:

Issuer group means all entities treated under subsection (a) or (b) of section 52 of the Internal Revenue Code of 1986 as a member of the same controlled group of corporations as (or under common control with) a health insurance issuer, or issuers affiliated by the common use of a nationally licensed service mark.

Please select the applicable box to describe how you will comply with 45 CFR 156.200(g).

“We” and “our” in these statements refer to the applicant issuer completing this form.

- Neither we nor any issuer in our issuer group has a share of this State’s small group market greater than 20%, as determined by the most recent list of these issuers published by HHS.
- We have a share of this State’s small group market greater than 20% as determined by the most recent list of these issuers published by HHS and we have filed QHP applications for silver and gold plans in this state’s FF-SHOP.
- Another issuer in our issuer group has a share of this State’s small group market greater than 20% as determined by the most recent list of these issuers published by HHS, we have a share of this State’s small group market less than 20% as determined by the most recent list of these issuers published by HHS, and we have filed QHP applications for silver and gold plans in this state’s FF-SHOP.
- Another issuer in our issuer group has a share of this State’s small group market greater than 20% as determined by the most recent list of these issuers published by HHS, we do not participate in this state’s small group market, and another issuer in our issuer group with greater than 20% small group market share (identified below) has filed QHP applications for silver and gold plans in this state’s FF-SHOP.

Issuer name: _____

HIOS ID: _____

NAIC Code: _____

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