CMS Center for Consumer Information & Insurance Oversight (CCIIO), Health Insurance Exchange Public Use Files (Exchange PUFs) Data Dictionary for Benefits and Cost Sharing PUF

1. Overview of the Benefits and Cost Sharing 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 Benefits and Cost Sharing PUF (BenCS-PUF) is one of the files that comprise the Exchange PUFs. The BenCS-PUF contains plan variant-level data on essential health benefits, coverage limits, and cost sharing for each QHP and SADP. 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).

This data dictionary describes the variables contained in the BenCS-PUF. Each record reports the benefit and cost sharing characteristics of an issuer's plan variant. The BenCS-PUF is available for plan years 2014 through 2027.

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, 2026, 2027
Data Source:	System-generated field
Field Name from Data Source:	Business Year
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 Data Source:	State Code
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
Data Source:	System-generated field
Field Name from Data Source:	Issuer ID
Comments:	N/A

Variable Name:	SourceName
Variable Definition:	Categorical identifier of source of data import
Data Type:	Text
Variable Label:	Source Name
Allowable Values:	HIOS SERFF OPM
Data Source:	System-generated field
Field Name from Data Source:	Source Name
Comments:	N/A

Variable Name:	VersionNum
Variable Definition:	Integer value for version of data import
Data Type:	Text
Variable Label:	Version Number
Allowable Values:	Free text
Data Source:	System-generated field
Field Name from Data Source:	Version Number
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:	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 Data Source:	HIOS Issuer ID
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 Data Source:	Issuer State
Comments:	This field is only available for the 2014 through 2016 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 Data Source:	HIOS Plan ID (Standard Component)
Comments:	N/A

Variable Name:	PlanId
Variable Definition:	Seventeen-character alpha-numeric code that identifies an insurance plan's cost sharing reduction 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 Data Source:	HIOS Plan ID (Standard Component + Variant)
Comments:	Character count includes '-'

Variable Name:	BenefitName
Variable Definition:	Name assigned to benefit
Data Type:	Text
Variable Label:	Benefit Name
Allowable Values:	Free text
Data Source:	Template field
Field Name from Data Source:	Benefits
Comments:	N/A

Variable Name:	CopayInnTier1
Variable Definition:	Dollar amount for In Network Copay for Tier 1 for a benefit
Data Type:	Text
Variable Label:	Copay In Network (Tier 1)
Allowable Values:	No Charge No Charge after deductible $X Copay $X Copay after deductible $X Copay before deductible (This value is only available for the 2014 through 2017 datasets.) $X Copay with deductible (This value is only available for the 2018 through 2027 datasets.) $X Copay per Day $X Copay per Stay $X Copay per Day after deductible (This value is only available for the 2016 through 2027 datasets.) $X Copay per Stay after deductible (This value is only available for the 2016 through 2027 datasets.) $X Copay per Day before deductible (This value is only available for the 2016 and 2017 datasets.) $X Copay per Stay before deductible (This value is only available for the 2016 and 2017 datasets.) $X Copay per Day with deductible (This value is only available for the 2018 through 2027 datasets.) $X Copay per Stay with deductible (This value is only available for the 2018 through 2027 datasets.) Not Applicable (This field is only available for the 2016 through 2027 datasets.)
Data Source:	Template field
Field Name from Data Source:	Copay In Network (Tier 1)
Comments:	This field is only required for covered benefits; field will usually be blank for benefits that are not covered but could contain a value; copay amount applies to each enrollee.

Variable Name:	CopayInnTier2
Variable Definition:	Dollar amount for In Network Copay for Tier 2 for a benefit
Data Type:	Text
Variable Label:	Copay In Network (Tier 2)
Allowable Values:	No Charge No Charge after deductible $X Copay $X Copay after deductible $X Copay before deductible (This value is only available for the 2014 through 2017 datasets.)

	$X Copay with deductible (This value is only available for the 2018 through 2027 datasets.) $X Copay per Day $X Copay per Stay $X Copay per Day after deductible (This value is only available for the 2016 through 2027 datasets.) $X Copay per Stay after deductible (This value is only available for the 2016 through 2027 datasets.) $X Copay per Day before deductible (This value is only available for the 2016 and 2017 datasets.) $X Copay per Stay before deductible (This value is only available for the 2016 and 2017 datasets.) $X Copay per Day with deductible (This value is only available for the 2018 through 2027 datasets.) $X Copay per Stay with deductible (This value is only available for the 2018 through 2027 datasets.) Not Applicable (This value is only available for the 2016 through 2027 datasets.)
Data Source:	Template field
Field Name from Data Source:	Copay In Network (Tier 2)
Comments:	This field is only required for covered benefits and plans with multiple in network tiers; field will usually be blank for benefits that are not covered but could contain a value; copay amount applies to each enrollee.

Variable Name:	CopayOutofNet
Variable Definition:	Dollar amount for Out of Network Copay for a benefit
Data Type:	Text
Variable Label:	Copay Out of Network
Allowable Values:	No Charge No Charge after deductible $X Copay $X Copay after deductible $X Copay before deductible (This value is only available for the 2014 through 2017 datasets.) $X Copay with deductible (This value is only available for the 2018 through 2027 datasets.) $X Copay per Day $X Copay per Stay $X Copay per Day after deductible (This value is only available for the 2016 through 2027 datasets.) $X Copay per Stay after deductible (This value is only available for the 2016 through 2027 datasets.)

	$X Copay per Day before deductible (This value is only available for the 2016 and 2017 datasets.) $X Copay per Stay before deductible (This value is only available for the 2016 and 2017 datasets.) $X Copay per Day with deductible (This value is only available for the 2018 through 2027 datasets.) $X Copay per Stay with deductible (This value is only available for the 2018 through 2027 datasets.) Not Applicable (This value is only available for the 2016 through 2027 datasets.)
Data Source:	Template field
Field Name from Data Source:	Copay Out of Network
Comments:	This field is only required for covered benefits; field will usually be blank for benefits that are not covered but could contain a value; copay amount applies to each enrollee.

Variable Name:	CoinsInnTier1
Variable Definition:	Numeric value for In Network Coinsurance percentage for Tier 1 for a benefit
Data Type:	Text
Variable Label:	Coinsurance In Network (Tier 1)
Allowable Values:	No Charge No Charge after deductible X% X% Coinsurance after deductible Not Applicable (This value is only available for the 2016 through 2027 datasets.)
Data Source:	Template field
Field Name from Data Source:	Coinsurance In Network (Tier 1)
Comments:	This field is only required for covered benefits; field will usually be blank for benefits that are not covered but could contain a value; coinsurance amount applies to each enrollee.

Variable Name:	CoinsInnTier2
Variable Definition:	Numeric value for In Network Coinsurance percentage for Tier 2 for a benefit
Data Type:	Text
Variable Label:	Coinsurance In Network (Tier 2)
Allowable Values:	No Charge No Charge after deductible X% X% Coinsurance after deductible Not Applicable (This value is only available for the 2016 through 2027 datasets.)
Data Source:	Template field

Field Name from Data Source:	Coinsurance In Network (Tier 2)
Comments:	This field is only required for covered benefits and plans with multiple in network tiers; field will usually be blank for benefits that are not covered but could contain a value; coinsurance amount applies to each enrollee.
Variable Name:	CoinsOutofNet
Variable Definition:	Numeric value for Out of Network Coinsurance percentage for a benefit
Data Type:	Text
Variable Label:	Coinsurance Out of Network
Allowable Values:	No Charge No Charge after deductible X% X% Coinsurance after deductible Not Applicable (This value is only available for the 2016 through 2027 datasets.)
Data Source:	Template field
Field Name from Data Source:	Coinsurance Out of Network
Comments:	This field is only required for covered benefits; field will usually be blank for benefits that are not covered but could contain a value; coinsurance amount applies to each enrollee.
Variable Name:	IsEHB
Variable Definition:	Categorical indicator of whether a benefit is considered an essential health benefit
Data Type:	Text
Variable Label:	EHB Indicator
Allowable Values:	Yes Blank
Data Source:	Template field
Field Name from Data Source:	EHB
Comments:	Blank values are equivalent to No.
Variable Name:	IsStateMandate
Variable Definition:	Categorical indicator of whether a benefit is required by state
Data Type:	Text
Variable Label:	State Required Benefit Indicator
Allowable Values:	Yes blank
Data Source:	Template field
Field Name from Data Source:	State-Required Benefit
Comments:	This field is only available for the 2014 through 2016 datasets.

Variable Name:	IsCovered
Variable Definition:	Categorical indicator of whether a benefit is covered by the insurance plan
Data Type:	Text
Variable Label:	Is this Benefit Covered?
Allowable Values:	Covered Not Covered (or blank)
Data Source:	Template field
Field Name from Data Source:	Is this Benefit Covered?
Comments:	Blank values are equivalent to Not Covered.

Variable Name:	QuantLimitOnSvc
Variable Definition:	Categorical indicator of whether a benefit has a quantitative limit
Data Type:	Text
Variable Label:	Quantitative Limit on Service
Allowable Values:	Yes No (or blank)
Data Source:	Template field
Field Name from Data Source:	Quantitative Limit on Service
Comments:	This field is only required for covered benefits; blank values are equivalent to No.

Variable Name:	LimitQty
Variable Definition:	Numeric value for coverage limit on the benefit
Data Type:	Text
Variable Label:	Limit Quantity
Allowable Values:	Free text
Data Source:	Template field
Field Name from Data Source:	Limit Quantity
Comments:	This field is required if QuantLimitOnSvc field equals Yes.

Variable Name:	LimitUnit
Variable Definition:	The unit of measure for the coverage limit on the benefit
Data Type:	Text
Variable Label:	Limit Unit
Allowable Values:	Hours per week Hours per month Hours per year Days per week Days per month Days per year Months per year Visits per week Visits per month Visits per year

	Lifetime visits Treatments per week Treatments per month Lifetime treatments Lifetime admissions Procedures per week Procedures per month Procedures per year Lifetime procedures Dollars per year Dollars per visit Days per admission Procedures per episode
Data Source:	Template field
Field Name from Data Source:	Limit Unit
Comments:	This field is required if QuantLimitOnSvc field equals Yes.
Variable Name:	MinimumStay
Variable Definition:	Numeric value for the minimum number of hours of in-patient care that a patient must be provided for this benefit
Data Type:	Text
Variable Label:	Minimum Stay
Allowable Values:	Free text
Data Source:	Template field
Field Name from Data Source:	Minimum Stay
Comments:	This field is only available for the 2014 through 2016 datasets.
Variable Name:	Exclusions
Variable Definition:	The list of services or diagnoses that are excluded from the benefit
Data Type:	Text
Variable Label:	Exclusions
Allowable Values:	Free text
Data Source:	Template field
Field Name from Data Source:	Exclusions
Comments:	This field is optional; blanks indicate a value was not provided; field could be truncated at 256 characters if exported to Excel or Access.
Variable Name:	Explanation
Variable Definition:	Notes provided to further clarify benefit coverage limits or exclusions
Data Type:	Text
Variable Label:	Benefit Explanation
Allowable Values:	Free text
Data Source:	Template field
Field Name from Data Source:	Benefit Explanation

Comments:	This field is optional; blanks indicate a value was not provided; field could be truncated at 256 characters if exported to Excel or Access.
Variable Name:	EHBVarReason
Variable Definition:	The justification for not using the prepopulated EHB benefit information from the template
Data Type:	Text
Variable Label:	EHB Variance Reason
Allowable Values:	Above EHB Substituted Substantially Equal Using Alternate Benchmark Other Law/Regulation Additional EHB Benefit Dental Only Plan Available Not EHB (This value is only available for the 2017 through 2027 datasets.) Not EHB - Defrayed to Issuer (This value is only available for the 2026 and 2027 datasets.) Not EHB - Defrayed to Enrollee (This value is only available for the 2026 and 2027 datasets.)
Data Source:	Template field
Field Name from Data Source:	EHB Variance Reason
Comments:	This field is only required if the issuer made changes to the prepopulated template values.
Variable Name:	IsSubjToDedTier1
Variable Definition:	Categorical indicator of whether the enrollee is required to pay a Tier 1 deductible for this benefit
Data Type:	Text
Variable Label:	Is Subject to Deductible Tier 1
Allowable Values:	Yes No
Data Source:	Template field
Field Name from Data Source:	Subject to Deductible (Tier 1)
Comments:	This field is only available for the 2014 and 2015 datasets.
Variable Name:	IsSubjToDedTier2
Variable Definition:	Categorical indicator of whether the enrollee is required to pay a Tier 2 deductible for this benefit
Data Type:	Text
Variable Label:	Is Subject to Deductible Tier 2
Allowable Values:	Yes No
Data Source:	Template field

Field Name from Data Source:	Subject to Deductible (Tier 2)
Comments:	This field is only available for the 2014 and 2015 datasets.
Variable Name:	IsExclFromInnMOOP
Variable Definition:	Categorical indicator of whether the cost associated with this benefit is excluded from the in network maximum out-of-pocket payment total
Data Type:	Text
Variable Label:	Is Excluded from In Network MOOP
Allowable Values:	Yes No
Data Source:	Template field
Field Name from Data Source:	Excluded from In Network MOOP
Comments:	N/A
Variable Name:	IsExclFromOonMOOP
Variable Definition:	Categorical indicator of whether the cost associated with this benefit is excluded from the out of network maximum out-of-pocket payment total
Data Type:	Text
Variable Label:	Is Excluded from Out of Network MOOP
Allowable Values:	Yes No
Data Source:	Template field
Field Name from Data Source:	Excluded from Out of Network MOOP
Comments:	N/A
Variable Name:	RowNumber
Variable Definition:	Integer value for 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 Data Source:	RowNumber
Comments:	This field is only available for the 2014 through 2016 datasets.