

Plan Crosswalk Template v14.0

Issuer Information

HIOS Issuer ID*	
Issuer State*	
Market Coverage*	
Dental Only Plan*	

2024 HIOS Plan ID (Standard Component)	Crosswalk Level	Counties Crosswalked at Zip Level
Required	Required: Indicate whether you would like to crosswalk your 2024 to 2025 Plan IDs at the plan, county or zip code level.	Required if user indicates Crosswalked at the Zip Level for one or more counties.

Actions

1. Import 2024 Plans & Benefits Template and Service Area Template

Please save your completed 2024 Plans & Benefits Template and Service Area Template to a folder on your hard drive and then select the button below to import the data.
2. Create "2025 Crosswalk Tab"

Select the button below to create the 2025 Crosswalk Tab based upon your entry.
3. Validate Data

Select the button below to validate information entered into all tabs. **Warning** : Depending on data size, validation may take several minutes.
4. Finalize Template

Select the button below to export data to XML file.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is [0938-1187]. This information collection is for the Exchange to collect plan- and issuer-level data from issuers to facilitate the certification and recertification of QHPs, Exchange operations, other Federal operations, QHP oversight, and ongoing market analysis. All of this data is leveraged across multiple business areas in the Exchange to facilitate other operational tasks such as plan comparisons on the insurance portal and various payment activities, such as determination of the second lowest cost silver plan, APTCs, or risk adjustment. The time required to complete this information collection is estimated to take up to 57 hours per issuer per year, including the time to review instructions, search existing data resources, gather the data needed, to review and complete the information collection. This information collection is required as the Exchange is responsible for ensuring that QHPs meet the minimum certification standards as described in the Exchange rule under 45 CFR 155 and 156, based on the PPACA, as well as other standards determined by the Exchange. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850 and email Alexandra Gribbin at Alexandra.Gribbin@cms.hhs.gov, Attention: Information Collections Clearance Officer.

2024 HIOS Plan ID (Standard Component)	Service Area ID	Service Area Name	2024 State	County Name	Partial County	Service Area Zip Code(s)
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