CMS Center for Consumer Information & Insurance Oversight (CCIIO), Health Insurance Marketplace Public Use Files (Marketplace 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) is releasing the Marketplace PUFs in order to improve transparency and increase access to the Marketplace data. The Marketplace PUFs include data on Qualified Health Plans (QHPs) and Stand-alone Dental Plans (SADPs) offered in states with Federally-facilitated Marketplaces (FFM), which include states with State Partnership Marketplaces (SPM), Federally-facilitated Small Business Health Options Programs (FF-SHOP) and State-based Marketplaces that rely on the federal information technology platform for QHP eligibility and enrollment functionality (SBM-FP). The Marketplace PUFs also include data on Multi State Plans (MSPs). The Marketplace PUFs do not include data from SBMs that do not rely on the federal platform for QHP eligibility and enrollment functionality.

The Benefits and Cost Sharing PUF (BenCS-PUF) is one of the files that make up the Marketplace PUFs. The BenCS-PUF contains plan-level data on essential health benefits, coverage limits, and cost sharing for each QHP and SADP. These data either originate from the Plans & Benefits template (i.e., template field), an Excel-based form used by issuers to describe their plans in the QHP/SADP application process, 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 relates to the coverage of a single benefit by one issuer's insurance plan. The BenCS-PUF is available for plan year 2014, plan year 2015, plan year 2016, and plan year 2017.

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
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, 2015, and 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:	Equal to IssuerId field. This field is only available for the 2014, 2015, and 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:	Equal to StateCode field. This field is only available for the 2014, 2015, and 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
	$X Copay per Day
	$X Copay per Stay
	$X Copay per Day after deductible
	$X Copay per Stay after deductible
	$X Copay per Day before deductible
	$X Copay per Stay before deductible
	Not Applicable
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
	$X Copay per Day
	$X Copay per Stay
	$X Copay per Day after deductible
	$X Copay per Stay after deductible
	$X Copay per Day before deductible
	$X Copay per Stay before deductible
	Not Applicable
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
	$X Copay per Day
	$X Copay per Stay
	$X Copay per Day after deductible
	$X Copay per Stay after deductible
	$X Copay per Day before deductible
	$X Copay per Stay before deductible
	Not Applicable
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
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
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
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 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 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:	Blank values are equivalent to No. This field is only available for the 2014, 2015, and 2016 datasets.

Variable Name:	IsCovered
Variable Definition:	Categorical indicator of whether 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 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

	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
	Dollar per year
	Dollar 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 optional; blanks indicate a value was not provided. This field is only available for the 2014, 2015, and 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
	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
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
	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-ofpocket 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-ofpocket 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:	Unavailable for some templates. This field is only available for the 2014, 2015, and 2016 datasets.