## Discrimination—Cost-Sharing Outlier: Supporting Documentation and Justification

Please fill in the following information.

**Health Insurance Oversight System (HIOS) Issuer ID:** 

**Applicable HIOS Plan IDs (Standard Component):** 

**Cost-Sharing Data Elements:** 

**Justification for Benefit Design:** 

If you do not have enough space here to list your justifications, print out another form to augment them as needed.

