

Qualified Health Plan Issuer Application Instructions

Plan Year 2025

**Extracted section:
Section 2N: Rates Table**

Section 2N: Rates Table

1. Introduction

In the Rates Table section of the Marketplace Plan Management System (MPMS), issuers enter rate information for each plan they offer in a Rating Area. If the issuer offers both medical and dental plans and submits their Qualified Health Plan (QHP) Application in the Health Insurance Oversight System (HIOS), a single Rates Table Template must be submitted that contains rate data for all its plans (QHPs and stand-alone dental plans [SADPs]).

The instructions for this section apply to the following issuer types:

- QHP
- SADP

See Appendix D for additional information.

2. Data Requirements

To complete this section, the following are needed:

1. HIOS Issuer ID
2. Plan IDs.

3. Quick Reference

Key Changes for 2025

- ◆ There are no key changes to the 2025 Rates Table Template.

Tips for the Rates Table Section

- ◆ Use separate worksheets in the Rates Table Template for medical plans and dental plans.
- ◆ Use separate worksheets for Individual Market plans and Small Business Health Options Program (SHOP) plans.
- ◆ For Individual Market plans, the rate effective date must be January 1, 2025.
- ◆ For SHOP plans with trended quarterly rates, the rate effective date must correspond with the calendar quarters (January 1, April 1, July 1, and October 1). Each worksheet is bound to a separate effective date range. If the issuer submits SHOP trended quarterly rates, a separate worksheet must be submitted for each date range that a set of rates will be effective.
- ◆ If the issuer submits in HIOS, a single Rates Table Template that contains rate data for all the issuer's plans (QHPs and SADPs) must be submitted in MPMS. If the issuer submits via the System for Electronic Rates & Forms Filing (SERFF), this requirement does not apply.

Additional Resources

- ◆ There are no supporting documents for this section.
- ◆ There are [instructional videos](#) for this section.
- ◆ There are [templates](#) for this section.

4. Detailed Section Instructions

Complete the Rates Table Template using the steps outlined below to provide rate information. All required fields must be completed to validate the template.

Rates Table Template	Steps
HIOS Issuer ID	Enter the five-digit HIOS Issuer ID .
Rate Effective Date	Enter the rate effective date as mm/dd/yyyy . For Individual Market plans, the rate effective date must be 01/01/2025 .

Rates Table Template	Steps
	<ul style="list-style-type: none"> ◆ For SHOP plans with trended quarterly rates, the rate effective date must correspond with the calendar quarters (January 1, April 1, July 1, and October 1). Each worksheet in the Rates Table Template is bound to a separate effective date range. If the issuer submits SHOP trended quarterly rates, a separate worksheet must be submitted for each date range that a set of rates will be effective. ◆ If the issuer submits a SHOP quarterly rate change, they must submit the entire template with updated worksheets for the effective date range of the quarterly rate change during the applicable data change submission window. The issuer may submit rate changes that would apply for the next quarter or any subsequent quarter in the remaining plan year. The issuer must not change or delete rates from the template for any current or previous quarter during the data change window. For example, during the submission for updated second-quarter SHOP rates, the first-quarter rates must match the original submission that contained the rates offered during the first quarter. For SHOP medical plans, the changes must be consistent with the revised index rates that are submitted in the corresponding Unified Rate Review Template (URRT).
Rate Expiration Date	<p>Enter the rate expiration date as mm/dd/yyyy.</p> <ul style="list-style-type: none"> ◆ For Individual Market plans, the rate expiration date must be 12/31/2025. ◆ For SHOP plans, the rate expiration date must correspond with the calendar quarters (03/31/2025, 06/30/2025, 09/30/2025, and 12/31/2025).
Rating Method	<p>Select whether the plans on the worksheet use Age-Based Rates or Family-Tier Rates. <u>Note:</u> Only issuers in states that do not permit rating for age or tobacco use and that establish uniform family tiers and corresponding multipliers or issuers entering rates for SADPs are eligible to select Family-Tier Rates. A list of states that use family-tier rating is available on the State Specific Rating Variations page.</p>
Add Sheets	<p>Click Add Sheet to add additional worksheets for the following:</p> <ul style="list-style-type: none"> ◆ To separate SHOP plans with different rate effective and expiration dates. All plans on a single worksheet <u>must</u> have the same rate effective and rate expiration dates. ◆ To separate Individual Market plans and SHOP plans. ◆ To separate medical plans and dental plans. ◆ To separate plans that use age-based rating and family-tier rating. ◆ To separate by rating area.
Plan ID	<p>Enter the 14-character alphanumeric HIOS-generated plan ID (e.g., 12345AZ1234567) that identifies the plan associated with the rates in that row.</p>
Rating Area	<p>Select the rating area from the list. The rating area is the geographic area where the rates in the row are valid. Rating areas are defined by each state. A list of rating areas for each state is available on the State Specific Geographic Rating Areas page. If a set of rates is allowed to be offered in more than one rating area, issuers can elect to assign the set of rates to multiple rating areas within a template worksheet.</p>
Tobacco	<p>If the issuer uses age-based rates, select from the following to indicate whether rates vary based on tobacco use:</p> <ul style="list-style-type: none"> ◆ Tobacco User/Non-Tobacco User—if rates differ for tobacco and non-tobacco users. If this option is selected, rates must be entered for non-tobacco and tobacco users. Market rules require QHP tobacco rates to be no more than 1.5 times higher than the corresponding non-tobacco rate within a single age band.¹ <p>QHPs rating by tobacco use may not apply tobacco rating to individuals age 0–20, for whom the sale and use of tobacco products is prohibited under federal law. For each underage tobacco age band (0–14, 15, 16, 17, 18, 19, and 20), enter the same rate values under <i>Individual (non-tobacco) Rate</i> and <i>Individual Tobacco Rate</i>. This entry will prevent application of unique tobacco rating to an underage enrollee.</p>

¹ 42 U.S.C. 300gg—Fair Health Insurance Premiums.

Rates Table Template	Steps
	<p>To offer small-group market medical plans (including SHOP QHPs) with tobacco rating, the issuer must offer a wellness program designed to prevent or reduce tobacco use in accordance with Section 2705 of the Public Health Service (PHS) Act and indicate the wellness program on your Plans & Benefits Template. If the issuer does not offer such a wellness program, the small-group market medical plan cannot rate for tobacco use.</p> <ul style="list-style-type: none"> ◆ No Preference—if the rate applies to tobacco and non-tobacco users. No separate rates are submitted for tobacco and non-tobacco users.
Age	<p>If the issuer uses age-based rates, the template will automatically generate a row for each age band from 0–14 through 64 and over.</p> <ul style="list-style-type: none"> ◆ If the issuer elects to rate by tobacco use and enters the non-tobacco rates first for the underage age bands of 0–14 through 20, the worksheet will auto-populate the tobacco rate for each band with the non-tobacco rate. ◆ If the issuer is in a state that does not permit rating for age or tobacco use and that establishes uniform family tiers (and corresponding multipliers) or is entering rates for an SADP using Family-Tier Rates as the rating method, skip to Family Tier.
Individual Rate	<ul style="list-style-type: none"> ◆ Enter the individual rate that applies to the plan ID. Market rules limit individual rate variation based on age to not more than three times the 21-age rate. In addition, QHPs may not have a 0–20 age rate higher than the 21-age rate and must follow the federal age-rating curve or your state’s age-rating curve if it is within the 1:3 market rule. A list of states using state-specific age curve variations is available on the State Specific Rating Variations page. <p>Note: QHPs and SADPs must enter a value above \$0.00 for all age bands under the Individual Rate column unless you responded Allows Child-Only under <i>Child-only Offering</i> in the Plans & Benefits Template. QHP child-only offerings must enter a positive non-zero value for the 0–14, 15, 16, 17, 18, 19, and 20 age bands and are allowed to enter a value of \$0.00 for adult age bands 21 through 64 and over. SADP child-only offerings must enter a positive non-zero value for the 0–14, 15, 16, 17, and 18 age bands and are allowed to enter a value of \$0.00 for adult age bands 19 through 64 and over.</p> <ul style="list-style-type: none"> ◆ QHPs and SADPs that rate by tobacco use should enter a positive non-zero value under <i>Individual Tobacco Rate</i> for age bands 21 through 64 and over. For the 0 through 20 age bands, QHPs must enter the same value as the non-tobacco rate under <i>Individual Tobacco Rate</i> to avoid applying tobacco rating to underage enrollees. For QHPs, tobacco rating cannot be applied to individuals age 0–20, for whom the sale and use of tobacco products is prohibited under federal law.
Family Tier	<p>If the issuer’s state does not permit rating for age or tobacco use and has established uniform family tiers and corresponding multipliers, or if the issuer is issuing SADPs and selected Family-Tier Rates in <i>Rating Method</i>, enter the individual rate in <i>Individual Rate</i>. Selecting Family-Tier Rates will also generate the following family tier columns:</p> <ul style="list-style-type: none"> ◆ <i>Individual Rate</i> (required): Enter the rate of an individual primary subscriber. ◆ <i>Couple</i> (required): Enter the rate for a couple. A couple is defined as a primary subscriber and his or her spouse. A couple may also be a domestic partnership if Life Partner is allowed by the issuer in the Business Rules Template. ◆ <i>Primary Subscriber and One Dependent</i> (required): Enter the rate for a primary subscriber with one dependent. ◆ <i>Primary Subscriber and Two Dependents</i> (required): Enter the rate for a primary subscriber with two dependents. ◆ <i>Primary Subscriber and Three or More Dependents</i> (required): Enter the rate for a primary subscriber with three or more dependents. ◆ <i>Couple and One Dependent</i> (required): Enter the rate for a couple with one dependent. ◆ <i>Couple and Two Dependents</i> (required): Enter the rate for a couple with two dependents. ◆ <i>Couple and Three or More Dependents</i> (required): Enter the rate for a couple with three or more dependents.

Rates Table Template	Steps
	Note: A dependent is defined as any dependent relationship you allow as defined in the Business Rules Template. If any member of the enrollment group is determined to be ineligible, no rate will be returned for that plan.

See Figure 2N-1 for an example of a completed Rates Table Template when **Age-Based Rates** is selected.

Figure 2N-1. Rates Table Template (Age-Based Rates)

2025 Rates Table Template v14.0		Steps		
Validate		<i>All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.</i>		
Finalize		<i>If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.</i>		
		<i>If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.</i>		
		<i>If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.</i>		
		<i>To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.</i>		
	HIOS Issuer ID*	12345		
	Rate Effective Date*	1/1/2025		
	Rate Expiration Date*	12/31/2025		
	Rating Method*	Age-Based Rates		
Add Sheet				
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan
12345VA0001001	Rating Area 1	No Preference	0-14	10.00
12345VA0001001	Rating Area 1	No Preference	15	11.00
12345VA0001001	Rating Area 1	No Preference	16	12.00
12345VA0001001	Rating Area 1	No Preference	17	13.00

See Figure 2N-2 for an example of a completed Rates Table Template when **Family-Tier Rates** is selected.

Figure 2N-2. Rates Table Template (Family-Tier Rates)

2025 Rates Table Template v14.0		Steps			
Validate		<i>All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.</i>			
Finalize		<i>If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.</i>			
		<i>If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.</i>			
		<i>If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.</i>			
		<i>To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.</i>			
	HIOS Issuer ID*	12345			
	Rate Effective Date*	1/1/2025			
	Rate Expiration Date*	12/31/2025			
	Rating Method*	Family-Tier Rates			
Add Sheet					
Plan ID*	Rating Area ID*	Individual Rate*	Couple*	Primary Subscriber and One Dependent*	Primary Subscriber and Two Dependents*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan	Required: Enter the rate of a couple based on the pairing of a primary enrollee and a secondary subscriber (e.g. husband and spouse)	Required: Enter the rate of a family based on a single parent with one dependent	Required: Enter the rate of a family based on a single parent with two dependents
12345VA0001001	Rating Area 1	10.00	20.00	30.00	40.00

After entering all data, click **Save** to ensure no data are lost. Once the Rates Table Template is completed, it must be validated, finalized, and uploaded into MPMS.

Template Validation and Submission Step	Step Description
Validate Template	Click Validate in the top left of the template. The validation process identifies any data issues that need to be resolved. If no errors are identified, finalize the template.
Validation Report	If the template has any errors, a Validation Report will appear in a pop-up box showing the reason for and cell location of each error. Correct any identified errors and click Validate again. Repeat until all errors are resolved. The template will provide a notification when there are no errors with the callout box message "This Template is Valid!"

Template Validation and Submission Step	Step Description
Finalize Template	Click Finalize in the template to create the .XML version of the template that will be uploaded in the Plan Validation Workspace in MPMS.
Save Template	Save the .XML template. CMS recommends saving the validated template as a standard Excel .XLSM file in the same folder as the finalized .XML file for easier reference.
Upload and Link Template	Upload the saved .XML file in the Plan Validation Workspace in MPMS and link the validated template to the issuer's application. Refer to the MPMS User Guide for details on how to complete these steps.

This concludes the Rates Table section of the QHP Application Instructions.