Service Area Partial County Supplemental Response

Instructions for Submitting a Partial County Explanation

Complete each section below and thoroughly substantiate your response. You must respond to every part of all three sections.

After you complete this form, combine it, any evidence you are providing to substantiate your responses, and evidence of state approval for the request into a single PDF file. If you are submitting the partial county request through the System for Electronic Rate and Form Filing (SERFF), you do not need to submit evidence of state approval; successful transmission of your data will serve as state approval in SERFF states.

Name the combined document file using the following convention:
[Issuer ID]_[State]_service_area_partial_county.
For example: “12345_MD_service_area_partial_county.pdf.”

Upload the combined document into the Plan & Benefit section of the Benefits & Service Area Module in the Qualified Health Plan Application System using the document upload functionality. Select **Service Area Justification** from the *Document Type* drop-down menu.

Section 1: Partial County Explanation

Respond to the following three questions. If the partial county is a result of a legal agreement or settlement splitting up the counties by different issuers, document this agreement in your response.

Question 1: Describe how serving this partial county geographic area is necessary. Describe the evidence provided to substantiate this, and (if applicable) include it with your response.

Question 2: Describe how serving this partial county geographic area is *not* discriminatory. Describe the evidence provided to substantiate this, and (if applicable) include it with the response.

Issuers must be able to substantiate *both* of the following statements:

- The racial, ethnic, and economic composition of the population in the portion of the county the issuer is proposing to serve is comparable to the excluded portion of the county. Using U.S. census data (or data from another comparable source), compare the racial, ethnic, and economic composition of the included and excluded portions of the proposed county service area.
- The anticipated health care costs of the portion of the county the issuer is proposing to serve are similar to the costs in the area of the county that will be excluded from the service area.

Question 3: Describe how serving this partial county geographic area is in the best interest of the qualified individuals and employers. Describe the evidence provided to substantiate this, and (if applicable) include it with your response.

Section 2: Geography

Describe the geographic areas for the county, both inside and outside the partial county geographic area, including the major population centers, transportation arteries, significant topographic features (such as lakes and mountain ranges), and any other geographic factors that affected your proposal for the partial county.

Section 3: State Approval

Issuers submitting in the Health Insurance Oversight System (HIOS) must include written evidence from the appropriate state regulator, such as an email that lists the specific partial county requested, showing that it is approved by the state. Issuers submitting in SERFF should consult with the state regulator, but successful transmission of your data will indicate state approval.

HIOS Issuers Only: Have you included this evidence?

- Yes.
- No.