



CMS Center for Consumer Information & Insurance Oversight (CCIIO), State-based Marketplace Public Use Files (SBM PUF) Data Dictionary for Business Rules PUF

1. Overview of the Business Rules PUF

The Centers for Medicare & Medicaid Services (CMS) Center for Consumer Information and Insurance Oversight (CCIIO) is releasing the State-Based Marketplace (SBM) PUF in order to improve the transparency and increase access to the SBM data. The SBM PUF includes data on Qualified Health Plans (QHPs) and Stand-alone Dental Plans (SADPs) offered in states which operate their own Marketplaces that do not rely on the federal information technology platform for QHP eligibility and enrollment functionality. This includes states which operate their own Small Business Health Options Programs (SHOP).

The Business Rules PUF (BR-PUF) is one of the six files that make up the SBM PUF. The BR-PUF contains plan level data on application of rates, such as allowed relationships (e.g., spouse, dependents) and tobacco use. These data originate from the Business Rules template (i.e., template field), an Excel-based form used by issuers to describe their plans in the QHP/SADP application process, and were provided by the National Association of Insurance Commissioners (NAIC) by extracting the information from their System for Electronic Rate and Form Filing (SERFF).

This data dictionary describes the variables contained in the BR-PUF file for each SBM. Each record relates to a set of rules for the application of rates for one plan. The BR-PUF is available for SBMs for plan year 2016.

2. Variable Attributes

<i>Variable Name:</i>	BusinessYear
<i>Variable Definition:</i>	Year for which plan provides coverage to enrollees
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Business Year
<i>Allowable Values:</i>	2016
<i>Data Source:</i>	System-generated field
<i>Comments:</i>	N/A

<i>Variable Name:</i>	StateCode
<i>Variable Definition:</i>	Two-character state abbreviation indicating the state where the plan is offered
<i>Data Type:</i>	Text
<i>Variable Label:</i>	State Code
<i>Allowable Values:</i>	All state abbreviations for those states that operate SBMs



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<i>Variable Label:</i>	State Code
<i>Data Source:</i>	System-generated field
<i>Comments:</i>	N/A
<i>Variable Name:</i>	IssuerID
<i>Variable Definition:</i>	Five-digit numeric code that identifies the issuer organization in the Health Insurance Oversight System (HIOS)
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Issuer ID
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Comments:</i>	N/A
<i>Variable Name:</i>	SourceName
<i>Variable Definition:</i>	Categorical identifier of source of the data import
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Source Name
<i>Allowable Values:</i>	SERFF
<i>Data Source:</i>	System-generated field
<i>Comments:</i>	SERFF is the only source used data in the SBM PUF
<i>Variable Name:</i>	VersionNum
<i>Variable Definition:</i>	Integer Value for version of data import
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Version Number
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	System-generated field
<i>Comments:</i>	N/A
<i>Variable name:</i>	ImportDate
<i>Variable Definition:</i>	Date of the Data Import
<i>Data Type:</i>	Date/Time
<i>Variable Label:</i>	Import Date
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	System-generated field
<i>Comments:</i>	N/A
<i>Variable Name:</i>	TIN
<i>Variable Definition:</i>	Tax ID Number of issuer
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Tax Identification Number
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field



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<i>Comments:</i>	N/A
<i>Variable name:</i>	ProductID
<i>Variable Definition</i>	Ten-character alpha-numeric code that identifies an insurance product within HIOS
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Product ID
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Comments:</i>	N/A
<i>Variable Name:</i>	StandardComponentID
<i>Variable Definition:</i>	Fourteen-character alpha-numeric code that identifies an insurance plan within HIOS
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Standard Component ID
<i>Allowable Values:</i>	Free text
<i>Data Source:</i>	Template field
<i>Comments:</i>	N/A
<i>Variable Name:</i>	EnrolleeContractRateDeterminationRule
<i>Variable Definition:</i>	Description of enrollee contract rule for determining rates
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Enrollee Contract Rate Determination Rule
<i>Allowable Values:</i>	“There are rates specifically for couples and for families (not just addition of individual rates)” “A different rate (specifically for parties of two or more) for each enrollee is added together”
<i>Data Source:</i>	Template Field
<i>Comments:</i>	N/A
<i>Variable Name:</i>	TwoParentFamilyMaxDependentsRule
<i>Variable Definition:</i>	The maximum number of dependents used to rate a policy in a two parent family
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Two Parent Family Max Dependents Rule
<i>Allowable Values:</i>	1 2 3 or more
<i>Data Source:</i>	Template Field
<i>Comments:</i>	N/A
<i>Variable Name:</i>	SingleParentFamilyMaxDependentsRule



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<i>Variable Definition:</i>	The maximum number of dependents used to rate a policy in a single parent family
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Single Parent Family Max Dependents Rule
<i>Allowable Values:</i>	1 2 3 or more
<i>Data Source:</i>	Template Field
<i>Comments:</i>	N/A
<i>Variable Name:</i>	DependentMaximumAgeRule
<i>Variable Definition:</i>	Integer value for the maximum age for which an insurance plan could be issued for a child, if applicable
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Dependent Maximum Age Rule
<i>Allowable Values:</i>	Number representing age Not applicable
<i>Data Source:</i>	Template Field
<i>Comments:</i>	N/A
<i>Variable Name:</i>	ChildrenOnlyContractMaxChildrenRule
<i>Variable Definition:</i>	The maximum number of children used to rate a child-only policy
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Children Only Contact Max Children Rule
<i>Allowable Values:</i>	1 2 3 or more
<i>Data Source:</i>	Template field
<i>Comments:</i>	N/A
<i>Variable Name:</i>	DomesticPartnerAsSpouseIndicator
<i>Variable Definition:</i>	Categorical indicator for whether a domestic partner is treated the same as secondary subscribers
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Domestic Partner as Spouse Indicator
<i>Allowable Values:</i>	Yes No
<i>Data Source:</i>	Template Field
<i>Comments:</i>	N/A
<i>Variable Name:</i>	SameSexPartnerAsSpouseIndicator



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<i>Variable Definition:</i>	Categorical indicator for whether a same sex partner is treated the same as secondary subscribers
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Same Sex Partner as Spouse Indicator
<i>Allowable Values:</i>	Yes No
<i>Data Source:</i>	Template Field
<i>Comments:</i>	N/A
<i>Variable Name:</i>	AgeDeterminationRule
<i>Variable Definition:</i>	Categorical indicator for the method used to determine the person's age at the time of an application
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Age Determination Rule
<i>Allowable Values:</i>	"Age on effective date" "Age on January 1 st of the effective date year" "Age on insurance date (age on birthday nearest the effective date)" "Age on January 1 st or July 1 st "
<i>Data Source:</i>	Template Field
<i>Comments:</i>	N/A
<i>Variable Name</i>	MinimumTobaccoFreeMonthsRule
<i>Variable Definition:</i>	Integer value for the number of tobacco-free months considered when qualifying an enrollee for the non-tobacco insurance rate, if applicable
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Minimum Tobacco Free Months Rule
<i>Allowable Values:</i>	Number representing months of no tobacco use Not applicable
<i>Data Source:</i>	Template field
<i>Comments:</i>	N/A
<i>Variable Name:</i>	CohabitationRule (Required and Code)
<i>Variable Definition:</i>	Categorical indicator that identifies which family relationships are allowed for enrollees and whether cohabitation is required
<i>Data Type:</i>	Text
<i>Variable Label:</i>	Cohabitation Rule
<i>Allowable Values:</i>	Spouse, True / False Father or Mother, True / False Grandfather or Grandmother, True / False Grandson or Granddaughter, True / False



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	Uncle or Aunt, True / False Nephew or Niece, True / False Cousin, True / False Adopted Child, True / False Foster Child, True / False Son-in-law or daughter-in-law, True / False Brother-in-law or sister-in-law, True / False Mother-in-law or father-in-law, True / False Brother or Sister, True / False Ward, True / False Stepparent, True / False Stepson or Stepdaughter, True / False Self, True / False Child, True / False Sponsored dependent, True / False Dependent on a Minor Dependent, True / False Ex-spouse, True / False Guardian, True / False Court Appointed Guardian, True / False Collateral Dependent, True / False Life Partner, True / False Annuitant, True / False Trustee, True / False Other Relationship, True / False Other Relative, True / False Template field Only relationships allowed by issuer are listed, followed by True or False to indicate cohabitation requirement; field may be truncated to 256 characters if exported to Excel or Access
<i>Data Source:</i> <i>Comments:</i>	
<i>Variable Name:</i> <i>Variable Definition:</i> <i>Data Type:</i> <i>Variable Label:</i> <i>Allowable Values:</i> <i>Data Source:</i> <i>Comments:</i>	MarketCoverage Categorical indicator of market coverage of plans submitted with this template Text Market Coverage Individual SHOP (Small Group) Template Field N/A
<i>Variable Name:</i> <i>Variable Definition:</i> <i>Data Type:</i>	DentalOnlyPlan Categorical indicator that plan is a stand-alone dental plan Text



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Variable Limit:

Allowable Values:

Data Source:

Comments:

Dental-Only Plan Indicator

Yes

No

Template field

N/A