

Section 1332 of the Patient Protection and Affordable Care Act (ACA) State Innovation Waivers – Pass-through Funding Report – FFE/SBE-FP States

Reporting Instructions: Please capture data for the 1332 waiver grant yearly pass-through funding report in this template, which has been developed based on your specific terms and conditions and in accordance with ACA section 1332(a)(3). For Plan Year 2025 pass-through funding reports are due no later than October 15, 2024, in order to inform pass-through funding calculations. The pass-through funding amount will be reported to the state as soon as practicable, conditional on timely receipt of this report.

STATE:

A. GRANTEE INFORMATION			
1. Reporting Period End Date	2. Report Due Date	3. Date Submitted	
4. Federal Agency and Organization Element to Which Report is Submitted Consumer Information & Insurance Oversight (CCIIO)	5. Federal Grant Number Assigned by Federal Agency	6a. DUNS Number	6b. EIN
7. Recipient Organization Name			
Address Line 1			
Address Line 2			
Address Line 3			
City	State	Zip Code	Zip Extension
9. Grant Period End Date		8. Grant Period Start Date	

Section 1332 of the Patient Protection and Affordable Care Act (ACA) State Innovation Waivers – Pass-through Funding Report – FFE/SBE-FP States

10. Other Attachments (attach other documents as needed or as instructed by the awarding Federal agency)

Section 1332 of the Patient Protection and Affordable Care Act (ACA) State Innovation Waivers – Pass-through Funding Report – FFE/SBE-FP States

B. PASS-THROUGH FUNDING DATA

11a. Under section 1332(a)(3) and STC 15, metrics to assist the Departments in calculating pass-through funding for the effective plan year (PY).

	Value	Comments (if applicable)
<p>i. The final 2025 second lowest cost silver plan (SLCSP) rates¹ for individual health insurance coverage for a representative individual (e.g., a 21-year-old non-smoker) in each rating area or service area (if premiums vary by geographies small than rating areas).</p> <p>¹The Essential Health Benefit (EHB) % of premium is incorporated into the SLCSP determinations. The SLCSP should be determined only based on the portion of the premium that reflects EHB.</p>	[To be completed <i>after</i> item 11a.ii. Please review the data CMS has provided, as instructed in the State Premium Data spreadsheet.]	
<p>ii. Estimates of what the final 2024 SLCSP rates for individual health insurance coverage for a representative individual in each rating area or service area (if premiums vary by geographies smaller than rating areas) would have been without the waiver.</p>	[Please provide all without-waiver silver plan rates, as instructed in the Silver Rates spreadsheet.]	
<p>iii. The 2024 SLCSP rates for a representative individual in each rating area or service area (if premiums vary by geographies smaller than rating areas). Note that the rating or service area data for 2024 and 2025 needs to be the same, so please use the 2025 service areas for both years of data.</p>	[To be completed <i>after</i> item 11a.ii. Please review the data CMS has provided, as instructed in the State Premium Data spreadsheet.]	
<p>iv. The total amount of all premiums expected to be paid for individual health insurance coverage for PY 2025.</p>		
<p>v. Estimate of what total premiums would have been for individual health insurance coverage for PY 2025 without the waiver.</p>		
<p>vi. The state-specific age curve premium variation for the current and upcoming plan year for the individual market.</p>	[Please indicate in the spreadsheet if the state uses the federal or a state-specific version. If applicable, provide the state-specific age curve.]	[Please complete as part of the spreadsheet.] Montana does not have a state-specific age curve.

Section 1332 of the Patient Protection and Affordable Care Act (ACA) State Innovation Waivers – Pass-through Funding Report – FFE/SBE-FP States

vii. Estimate of total reinsurance reimbursements for PY 2025.		Please see accompanying report for methodological details.
viii. Estimate of total 2025 enrollment for individual health insurance coverage with the waiver.		Please see accompanying report for methodological details.
viv. Estimate of what total 2025 enrollment for individual health insurance coverage would be without the waiver.		Please see accompanying report for methodological details.
11b. Under section 1332(a)(3), a narrative to explain the methodology used to estimate data to assist the Departments in calculating pass-through funding for the subsequent year.		
i. For the estimate of what the final SLCS rates for a representative individual in each rating area or service area would have been in 2025 without the waiver, provide a narrative that includes information on the methods and assumptions used to estimate this data.		
ii. For the estimate of what total premiums would have been for PY 2025 without the waiver, provide a narrative that includes information on the methods and assumptions used to estimate this data.		
iii. An explanation on why the experience for PY 2025 may vary from previous estimates and how assumptions used to estimate the impact have changed. This includes an explanation for changes in the estimated impact of the waiver on aggregate premiums, the estimated impact to the SLCS rates, and the estimated impact on enrollment. The state should also explain changes to the estimated reinsurance estimates relative to prior estimates.		

Section 1332 of the Patient Protection and Affordable Care Act (ACA) State Innovation Waivers – Pass-through Funding Report – FFE/SBE-FP States

12. Please describe below any new state programs or legislation that could impact the without-waiver PTC baseline (e.g., state subsidies, enrollment programs). Please also describe if the state made changes to its projected pass-through funding or state share for the program, parameters, premium reduction, or size of the reinsurance program in light of changes in federal law or policy, such as the Inflation Reduction Act of 2022, compared to the state's original projections.