

What Data Is Reported?

- For **fully insured employers**, group health plan data will typically be reported by the issuer (as the “**reporting entity**”)—but the issuer may need “**plan-level**” and other data to complete report (more later)—issuer will file:
 - P2 - Plan List: Issuer lists all group policyholders, broken down by market segment and state
 - D1 – D8 Data Files: Issuer aggregates Rx drug, health, and premium costs for all of its policyholders, but broken down by market segment and state
 - Narrative Response
- For **self-funded employers**, group health plan data will typically be reported by one or more third party vendors (such as TPA, PBM, ASO)—but these “**reporting entities**” will typically need certain “**plan-level**” data from the employer—employer must coordinate and may also have to submit some of the files—TPA/PBM will typically file:
 - P2 - Plan List: TPA/PBM lists all group clients, broken down by market segment and state
 - D1 – D8 Data Files: TPA/PBM aggregates Rx drug, health, and premium costs for all of its policyholders, but broken down by market segment and state
 - Narrative Response