



2026 Colorado Issuer ECP Attestation Template

Contents

Attestations Required of Both Medical QHP and SADP Issuers.....	1
Attestation Required of Medical QHP Issuers Only	3
Attestation Required of SADP Issuers Only	4

Attestations Required of Both Medical QHP and SADP Issuers

Instructions: The following attestations apply to all qualified health plans (QHPs) and stand-alone dental plans (SADPs) that an issuer is submitting for certification for the next plan year. All issuers who wish to offer either certified QHPs or SADPs in Colorado are required to respond “Yes” to the following attestation.

1. Applicant agrees to adhere to all of the certification standards and operational requirements applicable to applicant in 45 *Code of Federal Regulation* (CFR) Parts 153, 155, and 156, and Colorado Insurance Regulations 4-2-53, 4-2-54, 4-2-55, 4-2-56, 4-2-57, and 4-2-80.

☐ Yes

☐ No

Essential Community Provider Attestations

1. Has the applicant met the 35 percent threshold requirement of the General ECP Standard or the Alternate ECP Standard under 45 CFR 156.235 (as described in the annual Letter to Issuers) and Colorado Insurance Regulation 4-2-53?

To meet the percentage threshold requirement of the General ECP Standard, the applicant has satisfied the following requirement: contracted with at least 35 percent of available ECPs in each plan’s service area to participate in the plan’s provider network.*

To meet the percentage threshold requirement of the Alternate ECP Standard, the applicant has satisfied the following requirement: contracted with at least 35 percent of available ECPs in each plan’s service area to participate in the plan’s provider network with providers located within health professional shortage areas (HPSAs) or ZIP Codes in which 30 percent or more of the population falls below 200 percent of the federal poverty level.*

* For plans that use tiered networks, ECPs must be contracted within the network tier that results in the lowest cost-sharing obligation to count toward the issuer’s satisfaction of each element of the ECP standard. For example, a QHP issuer cannot use the number of ECPs contracted with their PPO network to certify their HMO network if using

the PPO network providers would result in higher cost-sharing obligations for HMO plan enrollees. For plans with two network tiers (for example, participating providers and preferred providers), such as many PPOs, where cost sharing is lower for preferred providers, only preferred providers would be counted toward ECP standards.

All issuers are strongly encouraged to run the applicable ECP Tool (i.e., the ECP medical QHP Tool or the ECP SADP tool). If a carrier does not meet the 35% ECP standard, for health benefit plans or SADPs submitted in the binder, including those with embedded dental benefits, during the carrier binder validation or Division review process, the carrier shall submit a copy of the "Colorado ECP Justification Template." If necessary, or as requested by the carrier, this template will be generated by the Division, during review of the "Essential Community Provider/Network Adequacy" (ECP/NA) Template in the Binder filing.

If the carrier does not meet the Colorado Option Standardized Plans 50% ECP standard, for health benefit plans with standardized plans, as specified in Colorado Insurance Regulation 4-2-80, the carrier shall submit a copy of the "Colorado ECP Justification Template." If necessary, or as requested by the carrier, this template will be generated by the Division, during review of the "Essential Community Provider/Network Adequacy" (ECP/NA) Template in the Binder filing.

☐ Yes

☐ No

☐ NA

2. Has the applicant met the ECP category per county requirement of the General ECP Standard or the Alternate ECP Standard under 45 CFR 156.235 (as described in the annual Letter to Issuers) and Colorado Insurance Regulation 4-2-53?

To meet the ECP category per county requirement of the General ECP Standard, the applicant has satisfied the following requirement: offered contracts in good faith to at least one ECP in each ECP category in each county in the service area to participate in the plan's provider network for the respective QHP certification plan year, where an ECP in that category is available (not applicable to SADP applicants).*

To meet the ECP category per county requirement of the Alternate ECP Standard, the applicant has satisfied the following requirement: offered all of the categories of services provided by entities in each of the ECP categories in each county in the plan's service area to participate in the plan's provider network, as outlined in the General ECP Standard, or otherwise offered a contract to at least one ECP outside of the issuer's integrated delivery system in each ECP category in each county in the plan's service area for the respective QHP certification plan year, where an ECP in that category is available (not applicable to SADP applicants).*

* For plans that use tiered networks, ECPs must be contracted within the network tier that results in the lowest cost-sharing obligation to count toward the issuer's satisfaction of each element of the ECP standard. For example, a QHP issuer cannot use the number of ECPs contracted with their PPO network to certify their HMO network if using the PPO network providers would result in higher cost-sharing obligations for HMO plan enrollees. For plans with two network tiers (for example, participating providers and preferred providers), such as many PPOs, where cost sharing is lower for preferred providers, only preferred providers would be counted toward ECP standards.

All issuers are strongly encouraged to run the applicable ECP Tool (i.e., the ECP medical QHP Tool or the ECP SADP tool). If a carrier does not meet the county requirement of the

General ECP standard, specified in Colorado Insurance Regulation 4-2-53, for health benefit plans or SADPs submitted in the binder, including those with embedded dental benefits, during the carrier binder validation or Division review process, the carrier shall submit a copy of the “Colorado ECP Justification Template.” If necessary, or as requested by the carrier, this template will be generated by the Division, during review of the “Essential Community Provider/Network Adequacy” (ECP/NA) Template in the Binder filing.

☐ Yes

☐ No

☐ NA

3. Has the applicant met the Indian health care provider requirement of the General ECP Standard or the Alternate ECP Standard under 45 CFR 156.235 (as described in the annual Letter to Issuers)?

To meet the Indian health care provider requirement of the General ECP Standard, the applicant has satisfied the following requirement: offered contracts in good faith to all available Indian health care providers in the plan’s service area to participate in the plan’s provider network for the respective QHP certification plan year.*

Issuers that qualify to submit under the Alternate ECP Standard are exempt from the Indian health care provider ECP requirement.

* For plans that use tiered networks, ECPs must be contracted within the network tier that results in the lowest cost-sharing obligation to count toward the issuer’s satisfaction of each element of the ECP standard. For example, a QHP issuer cannot use the number of ECPs contracted with their PPO network to certify their HMO network if using the PPO network providers would result in higher cost-sharing obligations for HMO plan enrollees. For plans with two network tiers (for example, participating providers and preferred providers), such as many PPOs, where cost sharing is lower for preferred providers, only preferred providers would be counted toward ECP standards.

☐ Yes

☐ No

☐ NA

Attestation Required of Medical QHP Issuers Only

Instructions: The following attestations apply to all medical QHPs (not SADPs) that an issuer is submitting for certification for the next plan year. Applicants applying to offer medical QHPs in Colorado are required to respond “Yes” to the following attestations with regard to those medical QHPs. All applicants not applying to offer medical QHPs should select “NA” (not applicable).

1. Applicant agrees to adhere to all applicable requirements in 45 CFR Parts 146, 147, 155, and 156, and Colorado Insurance Regulations 4-2-53, 4-2-54, 4-2-55, 4-2-56, 4-2-57, and 4-2-80.

☐ Yes

☐ No

☐ NA

Attestation Required of SADP Issuers Only

Instructions: The following attestations apply to all SADPs that an issuer is submitting for certification for the next plan year. Only applicants who wish to offer certified SADPs are required to respond "Yes" to the following attestations. All applicants not offering certified SADPs should select "NA" (not applicable).

1. Applicant agrees to adhere to all of the certification standards and operational requirements applicable to applicant in 45 CFR Parts 155 and 156, and Colorado Insurance Regulation 4-2-57.

☐

Yes

☐

No

NA

HIOS ID

Signature

Date

Printed Name

Title/Position