



Joe Lombardo
Governor

NEVADA HEALTH AUTHORITY

Division of Consumer Health Services

Silver State Health Insurance Exchange

2310 S. Carson St., Suite 2

Carson City, NV 89701

NVHA.NV.GOV

NEVADAHEALTHLINK.COM



Stacie Weeks, Director



Jennifer Krupp, Administrator
Division of Consumer Health

State Authorization of QHP/QDP Data Change Request

Issuers should complete Section 1 of this form and submit to Silver State Health Insurance Exchange for authorization along with a formal letter explaining the request for the data change that outlines any potential impact to the consumers, and the QHP/QDP Application Data Change Request Form. The Silver State Health Insurance Exchange will complete Section 2 of this form, and return a copy of this form to the issuer for submission of the issuer's Data Change Request via the Nevada Health Link SBE Platform.

Section 1:

Date: _____

Issuer ID: _____

Issuer Legal Name: _____

Description of Data Change:

Section 2: To be completed by SSHIX

1. The above issuer is authorized to submit the above referenced data change.

☐ Yes

☐ No

2. Reason for the change (check all that apply)

☐ Issue submitted incorrect QHP/QDP template(s) and must make a change to align template(s) with QHP/QDP data previously approved by SSHIX or the Division of Insurance (DOI).

☐ Issue submitted a typographical (i.e., data entry error) for which the first justification does not apply, resulting in incorrect data display on the Exchange consumer portal.

SSHIX Signature: _____ Date: _____

State Representative

Name/Title: _____

Phone: _____

Email: _____