



# Qualified Health Plan Service Area Exception

Pursuant to 45 CFR 155.1055(a) each service area of a Qualified Health Plan (QHP) must cover a minimum geographic area that is at least the entire county or group of counties, unless it is determined that serving a smaller geographic area is necessary, nondiscriminatory, and in the best interest of the qualified individuals and employers.

Issuers offering QHPs are required to include a sufficient number and type of providers to ensure that all services are available without reasonable delay. All issuers should define the service areas for which the plan is providing services. If an issuer is not covering an entire "QHP service area" as defined in 50 Ill. Adm. Code 4500.30, the issuer must provide the subset of the QHP service area and request an exception for the QHP service area which will not be covered. The issuer must complete the questions below and provide any documentation pertinent to the exception request. The form will need to be attached in the binder filing in SERFF under the Supporting Documentation Tab.

1. Are there contracted providers in the counties of the QHP service area you have included in your request for exception who meet the time and distance criteria to supply services to the excluded counties? Provide a list of providers and facilities including their specialty or facility type.
2. If no providers/facilities meet the specific time and distance standards in a specific QHP service area, the issuer must provide time and distance data that members would have to travel beyond the specific required criteria for the respective provider and/or facility type to reach the next closest contracted provider outside of the QHP service area. Provide contact information including names, addresses, and phone numbers for the next closest contracted provider or facility.
3. Is the plan only contracting with medical groups or does the plan contract with individual providers? Please include the justification for these specific requirements
4. If patterns of care in the QHP service area do not support the need for requested number of provider/facility type, provide data on local patterns of care (e.g. using claims data, referral patterns, local provider interviews) indicating where the members currently seek this type of care and/or where the providers currently refer members.
5. If the excluded county is next to a contiguous state, do you contract with providers in that state?
6. Provide narrative justification which fully explains the issuer's QHP service area exception request and documentation which supports attempts to contract with providers in the excepted service area or why this was not attempted. Pursuant to 45 CFR 155.1055(a) explain why serving a smaller geographic area is necessary, nondiscriminatory, and in the best interest of the qualified individuals and employers.
7. What is the timeline for contracting with providers in all the QHP service areas? If the plan will continue to expand the provider networks, DOI would like a timeline for contracting providers for future coverage.

*Last updated: 5/1/2026*