

# Stand-Alone Dental Plan Actuarial Value Supporting Documentation

Fill in the following information.

**Health Insurance Oversight System (HIOS) Issuer ID:**

---

**Applicable HIOS Plan IDs (Standard Component):**

---

Verify that the actuarial value analysis was

- (i) conducted by a member of the American Academy of Actuaries and
- (ii) performed in accordance with generally accepted actuarial principles and methods.

**Actuarial Value for Pediatric Dental EHB:** \_\_\_\_\_

**Actuary Signature:** \_\_\_\_\_

**Actuary Printed Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_