

Additional Disclosure: CCIIO developed a database for collecting, tracking, and reporting consumer complaints data, and made it available, free of charge, to Consumer Assistance Program (CAP) grantees (pursuant to Section 2793 of the PHS Act, as amended by Section 1002 of the Affordable Care Act) for use in tracking and reporting data on consumer complaints to CCIIO. A separate emergency Paperwork Reduction Act package was approved on February 15, 2011 for the Caseworker Tool for the exclusive use of CAP grantees. The use of the Caseworker Tool by CAPs is separate and distinct from the use of the Caseworker Tool for purposes of the Health Insurance Assistance Team in CCIIO for which this PRA package is being submitted.

Home Page

The screenshot shows the home page of the Consumer Assistance Program Case Worker Tool. The page has a blue header with the title "Consumer Assistance Program" and the subtitle "CASE WORKER TOOL". Below the header, the date "Wednesday, March 16, 2011" is displayed on the left, and navigation links "HOME" and "SIGN OUT" are on the right. A tooltip above the navigation links reads "Home can be used to navigate pages within the site." The main content area features a vertical menu of five blue buttons: "Manage Account", "Add New Case", "Search Case", "Data Extract Report", and "Submit Data to HIOS". To the right of this menu is a "What's New" section with three links: "Link 1", "Link 2", and "Link 3". At the bottom of the page, there is a footer with links for "Accessibility", "Rules of Behavior", "Web Policies", "Contact Us", "Support", and "File Formats and Plug-Ins". Below these links is the text "U.S. Department of Health & Human Services · 200 Independence Avenue, S.W. · Washington, D.C. 20201" and "CAP Version#: 2.1.6". The browser's address bar at the bottom shows the URL "http://ffix-hios-cag/CAPSystem/AppPages/Home.aspx" and the system tray includes "Local intranet" and a zoom level of "100%".

Add a New Case

Consumer Assistance Program

CASE WORKER TOOL

Wednesday, March 16, 2011 [HOME](#) | [SIGN OUT](#) | Welcome **Meera Rahul**

Basic Information:

Note: (*) = required field.

First Name:

Last Name:

Zip Code:

Telephone:

* Caller Type:

Case Notes:

Note: There is a 500 character maximum. Once the Save Case Notes button is clicked, case notes submitted cannot be edited.

Contact Info	Appeals and Grievances	Demographic Information	Health Insurance Status and Recent History	Health Insurance Options Following Loss/Change of Other Coverage	ACA Compliance	Case Notes	Close Case/Follow Up	Audit
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Local intranet | 100%

Contact Info

Consumer Assistance Program

CASE WORKER TOOL

Wednesday, March 16, 2011 [HOME](#) | [SIGN OUT](#) | Welcome Meera Rahul

Basic Information:

Note: (*) = required field.

First Name:

Last Name:

Zip Code:

Telephone:

* Caller Type:

[Save Basic Info](#)

Case Notes has been successfully saved.

Case Notes:

Note: There is a 500 character maximum. Once the Save Case Notes button is clicked, case notes submitted cannot be edited.

[Save Case Notes](#)

[Contact Info...](#) | [Appeals and Grievances](#) | [Demographic Information](#) | [Health Insurance Status and Recent History](#) | [Health Insurance Options Following Loss/Change of Other Coverage](#) | [ACA Compliance](#) | [Case Notes](#) | [Close Case/Follow Up](#) | [Audit](#)

Contact Information

Complainant?

Address:

City:

* State:

Evening Phone:

E-mail Address:

Source of Communication:

English Proficiency:

Additional Contact:

Additional Contact Phone Number:

Contact Relationship:

Local intranet 100%

Appeals and Grievances

Consumer Assistance Program

CASE WORKER TOOL

Wednesday, March 16, 2011 [HOME](#) | [SIGN OUT](#) | Welcome Meera Rahul

Basic Information:

Note: (*) = required field.

First Name:

Last Name:

Zip Code:

Telephone:

* Caller Type:

Case Notes has been successfully saved.

Case Notes:

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Contact Info	Appeals and Grievances	Demographic Information	Health Insurance Status and Recent History	Health Insurance Options Following Loss/Change of Other Coverage	ACA Compliance	Case Notes	Close Case/Follow Up	Audit
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Appeals and Grievances

Level: Fee (external appeal):

Timeframe: Type of coverage:

Name of Issuer: Type of Plan:

Name of Employer: Does plan have grandfather status?

Is issuer a third party administrator?

Note: One or multiple options can be selected from Type of ACA Issue and Reason for Denial. Please use shift/or control to select multiple options.

Affordable Care Act Compliance Issue: Type of Denial:

Local intranet 100%

Demographic Information

Consumer Assistance Program

CASE WORKER TOOL

Wednesday, March 16, 2011 [HOME](#) | [SIGN OUT](#) | Welcome Meera Rahul

Basic Information:

Note: (*) = required field.

First Name:

Last Name:

Zip Code:

Telephone:

* Caller Type:

[Save Basic Info](#)

Case Notes has been successfully saved.

Case Notes:

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[Save Case Notes](#)

Contact Info	Appeals and Grievances	Demographic Information	Health Insurance Status and Recent History	Health Insurance Options Following Loss/Change of Other Coverage	ACA Compliance	Case Notes	Close Case/Follow Up	Audit
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Demographic Information

Age:

Gender:

How would you describe your ethnicity?

Marital Status:

Employment Status:

State where employer resides:

Size of Employer:

Spouse's Employment Status:

Size of Spouse's Employer:

Self-Employed?

Health Condition: Yes No

Type of condition:

Local intranet 100%

Health Insurance Status and Recent History

Consumer Assistance Program

CASE WORKER TOOL

Wednesday, March 16, 2011 HOME | SIGN OUT |

Welcome Meera Rahul

Basic Information:

Note: (*) = required field.

First Name:
Last Name:
Zip Code:
Telephone:
* Caller Type:

Case Notes has been successfully saved.
Case Notes:

Note: There is a 500 character maximum. Once the Save Case Notes button is clicked, case notes submitted cannot be edited.

Contact Info	Appeals and Grievances	Demographic Information	Health Insurance Status and Recent History	Health Insurance Options Following Loss/Change of Other Coverage	ACA Compliance	Case Notes	Close Case/Follow Up	Audit
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Health Insurance Status and Recent History

Note: One or multiple options can be selected from Reason for Anticipated Loss and Type of ACA Issue. Please use shift/or control to select multiple options.

Type of Coverage at Initial Contact:
Primary Insured or Dependent?
Reason for anticipated coverage loss:

Reason (if Other is selected):

Done Local intranet 100%

Health Insurance Options Following Loss/Change of Other Coverage – Part 1

The screenshot displays the 'Consumer Assistance Program CASE WORKER TOOL' interface. At the top, it shows the date 'Wednesday, March 16, 2011' and navigation links for 'HOME' and 'SIGN OUT'. A welcome message reads 'Welcome Meera Rahul'. The main content area is divided into two sections: 'Basic Information' and 'Case Notes'. The 'Basic Information' section includes a note that asterisks denote required fields and contains input fields for 'First Name' (test), 'Last Name' (test), 'Zip Code', and 'Telephone'. A dropdown menu for '* Caller Type' is set to 'Insured In Transition', and a 'Save Basic Info' button is present. The 'Case Notes' section features a red confirmation message 'Case Notes has been successfully saved.', a text area for notes, a 500-character limit note, and a 'Save Case Notes' button. Below these sections is a horizontal navigation menu with tabs for 'Contact Info', 'Appeals and Grievances', 'Demographic Information', 'Health Insurance Status and Recent History', 'Health Insurance Options Following Loss/Change of Other Coverage' (which is active), 'ACA Compliance', 'Case Notes', 'Close Case/Follow Up', and 'Audit'. The active tab displays the title 'Health Insurance Options Following Loss/Change of Other Coverage' and a list of insurance types with checkboxes: 'EST', 'Post EST', 'Non-Group', 'Government Funded Insurance', and 'Other Coverage'. A 'Show Options' button is located below the list, and a 'Save' button is at the bottom left of the content area. The browser's status bar at the bottom shows 'Done', 'Local intranet', and a zoom level of 100%.

Health Insurance Options Following Loss/Change of Other Coverage – Part 2

Basic Information:

Note: (*) = required field.

First Name:

Last Name:

Zip Code:

Telephone:

* Caller Type:

[Save Basic Info](#)

Case Notes has been successfully saved.

Case Notes:

Note: There is a 500 character maximum. Once the Save Case Notes button is clicked, case notes submitted cannot be edited.

[Save Case Notes](#)

Contact Info | Appeals and Grievances | Demographic Information | Health Insurance Status and Recent History | **Health Insurance Options Following Loss/Change of Other Coverage** | ACA Compliance | Case Notes | Close Case/Follow Up | Audit

Health Insurance Options Following Loss/Change of Other Coverage

- ESI
 - ESI (own, large)
 - ESI (own, small)
 - ESI (own, size unknown)
 - ESI (own, group of one)
 - ESI (own, state subsidized)
 - ESI (dep, large)
 - ESI (dep, small)
 - ESI (dep, size unknown)
 - ESI (dep, group of one)
 - ESI (dep, state subsidized)
- Post ESI
- Non-Group
- Government Funded Insurance
- Other Coverage

[Show Options](#)

Done

Local Intranet

100%

Health Insurance Options Following Loss/Change of Other Coverage – Part 3

Basic Information:

Note: (*) = required field.

First Name:

Last Name:

Zip Code:

Telephone:

* Caller Type:

Save Basic Info

Case Notes has been successfully saved.

Case Notes:

Note: There is a 500 character maximum. Once the Save Case Notes button is clicked, case notes submitted cannot be edited.

Save Case Notes

Contact Info | Appeals and Grievances | Demographic Information | Health Insurance Status and Recent History | **Health Insurance Options Following Loss/Change of Other Coverage** | ACA Compliance | Case Notes | Close Case/Follow Up | Audit

Show Options

ESI - ESI (own, large)

Note: One or multiple options can be selected from Insurance Burden and Detail. Please use shift/or control to select multiple options.

Obtained When needed?
 Yes No Unknown

Obtained With burden
 Yes No

Other Reason/Detail:

Insurance Burden:

- Cost sharing too high
- Needed benefits not covered
- Non-continuous enrollment
- Other adequacy burden
- Other affordability burden

Detail:

- No benefits offered
- In waiting period
- Ineligible
- Cannot afford premium
- Pre-ex

ESI - ESI (own, group of one)

Done

Local Intranet

100%

ACA Compliance – Available only on Information Only workflow

Consumer Assistance Program

CASE WORKER TOOL

Wednesday, March 16, 2011 HOME | SIGN OUT |

Welcome Meera Rahul

Basic Information:

Note: (*) = required field.

First Name:

Last Name:

Zip Code:

Telephone:

* Caller Type:

Case Notes has been successfully saved.

Case Notes:

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Contact Info	Appeals and Grievances	Demographic Information	Health Insurance Status and Recent History	Health Insurance Options Following Loss/Change of Other Coverage	ACA Compliance	Case Notes	Close Case/Follow Up	Audit
--------------	------------------------	-------------------------	--	--	----------------	------------	----------------------	-------

ACA Compliance

Name of Issuer:

Name of Employer:

Is issuer a third party administrator?

Type of Plan:

Does Plan Have Grandfather Status?

Note: One or multiple options can be selected from Type of ACA Issue. Please use shift/or control to select multiple options.

Affordable Care Act Compliance Issue:

Type of ACA Issue:

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Case Notes (History)

Consumer Assistance Program

CASE WORKER TOOL

Wednesday, March 16, 2011 [HOME](#) | [SIGN OUT](#) | Welcome Meera Rahul

Basic Information:

Note: (*) = required field.

First Name:

Last Name:

Zip Code:

Telephone:

* Caller Type:

[Save Basic Info](#)

Case Notes has been successfully saved.

Case Notes:

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[Save Case Notes](#)

Contact Info	Appeals and Grievances	Demographic Information	Health Insurance Status and Recent History	Health Insurance Options Following Loss/Change of Other Coverage	ACA Compliance	Case Notes	Close Case/Follow Up	Audit
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Case Notes

First Name	Last Name	Created Date	Case Notes
Meera	Rahul	3/16/2011 10:58:20 AM	additional test
Meera	Rahul	3/16/2011 10:36:39 AM	test test

Done Local intranet 100%

Close Case/Follow up

Consumer Assistance Program

CASE WORKER TOOL

Wednesday, March 16, 2011 [HOME](#) | [SIGN OUT](#) | Welcome Meera Rahul

Basic Information:

Note: (*) = required field.

First Name:

Last Name:

Zip Code:

Telephone:

* Caller Type:

[Save Basic Info](#)

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Case Notes:

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[Save Case Notes](#)

Contact Info	Appeals and Grievances	Demographic Information	Health Insurance Status and Recent History	Health Insurance Options Following Loss/Change of Other Coverage	ACA Compliance	Case Notes	Close Case/Follow Up	Audit
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Close Case/Follow Up

Agency Contacted: Other Agency Contacted:

Other State Agency: Disposition:

Disposition:

Insurance Problem Resolution Status:

What Worked:

What Didn't Work:

Done Local intranet 100%

Audit

Consumer Assistance Program

CASE WORKER TOOL

Wednesday, March 16, 2011 [HOME](#) | [SIGN OUT](#) | Welcome Meera Rahul

Basic Information:

Note: (*) = required field.

First Name:

Last Name:

Zip Code:

Telephone:

* Caller Type:

[Save Basic Info](#)

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Case Notes:

Note: There is a 500 character maximum. Once the Save Case Notes button is clicked, case notes submitted cannot be edited.

[Save Case Notes](#)

Contact Info | Appeals and Grievances | Demographic Information | Health Insurance Status and Recent History | Health Insurance Options Following Loss/Change of Other Coverage | ACA Compliance | Case Notes | Close Case/Follow Up | **Audit**

Audit

First Name	Last Name	Created Date	Audit Description
Meera	Rahul	3/16/2011 10:36:27 AM	Case and Contact Created

Local intranet | 100%

Case Search

Consumer Assistance Program

CASE WORKER TOOL

Wednesday, March 16, 2011
[HOME](#) | [SIGN OUT](#)

Welcome Meera Rahul

Case Search

First Name:

Zip Code:

Email:

Date Created (MM/DD/YYYY): -

Case Status:

Last Name:

Telephone:

Case ID:

Case Worker:

Keyword:

Your search returned **18** results.

	Case id	First Name	Last Name	Zip Code	Case Status	Date Created	Date Updated	Caller Type
Select	20110314_000000003	*Mee	Ra*		Open	3/14/2011 9:38:14 AM	3/14/2011 9:38:14 AM	Uninsured
Select	20110313_000000004	mee	marked for del	34567	Marked for Deletion	3/13/2011 11:40:56 PM	3/13/2011 11:47:13 PM	Insured In Transition
Select	20110313_000000001	Meera	Raaa	23456	Open	3/13/2011 10:48:05 PM	3/13/2011 10:48:05 PM	Information Only
Select	20110310_000000003	meera	rahul	22030	Open	3/10/2011 12:12:24 PM	3/13/2011 10:26:03 PM	Uninsured
Select	20110310_000000001	Meer	Rahul	23456	Open	3/10/2011 8:59:46 AM	3/10/2011 9:04:07 AM	Uninsured
Select	20110305_000000005	meera, ins in	NON appeals	67890	Closed	3/5/2011 2:44:40 PM	3/5/2011 3:08:39 PM	Insured In Transition