

Appendix 1

Screenshots of CCIIO-Developed Database

The screenshot displays the 'Consumer Assistance Program CASE WORKER TOOL' interface. At the top, there is a blue header with the program name and 'CASE WORKER TOOL' in white text. Below the header, a navigation bar shows the date 'Tuesday, March 13, 2012' on the left and 'HOME' and 'SIGN OUT' buttons on the right. A user greeting 'Welcome Anna McCourt' is positioned on the right side of the page.

The main content area is divided into two primary sections:

- Basic Information:** This section includes a note: 'A field with an asterisk (*) before it is a required field.' It contains the following fields:
 - Case ID: N/A
 - Case Owner: N/A
 - First Name:
 - Last Name:
 - * State:
 - Zip Code:
 - Telephone:
 - * Caller Type:
 - How did consumer hear about the ombudsman program?:A 'Save Basic Info' button is located at the bottom of this section.
- Case Notes:** This section features a large text area for notes. Below the text area is a note: 'Note: There is a 2000 character maximum. Once the Save Case Notes button is clicked, case notes submitted cannot be edited.' A 'Save Case Notes' button is positioned below the note.

At the bottom of the interface, there is a horizontal menu with the following tabs: Contact Information, 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, and Audit.

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Contact Information	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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Contact Information

Complainant? Evening Phone:

Address: E-mail Address:

City:

Source of Communication:

English Proficiency:

Additional Contact:

Additional Contact Phone Number:

Contact Relationship:

Consent Form Required? Yes No Unknown

* Is this an Appeals Complaint?

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Appeals and Grievances

Level: Fee (external appeal):

Timeframe: Type of coverage:

CAP acting as authorized representative of the consumer?

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 the Shift or CTRL key to select multiple options.

Affordable Care Act Compliance Issue:

Type of Denial:

Type of ACA issue:

- Rescission
- Pre-existing exclusion or denial for children
- Dependent coverage to age 26

Reason for Denial:

- Medical necessity
- Experimental / investigational
- Rescission
- Incorrect claim

Denial Code:

Diagnosis: Treatment Category:

Diagnosis Code: Treatment Code:

Outcome of Appeal:

Final Level Filed:

Recovered Benefits Amount(\$):

[Save](#)

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Demographic Information

Age: Race:

Gender: Marital Status:

Ethnicity:

Employment Status: Spouse's Employment Status:

State where employer resides: Size of Spouse's Employer:

Size of Employer: Self-Employed?

Health Condition: Yes No

Type of condition:

Note: One or multiple options can be selected from Income Source. Please use the Shift or CTRL key to select multiple options.

Income Source:

- Wages
- Pension / Retirement
- SSI
- SSDI

Income Level (Monthly):

Change in income in the past year:

Income supports how many people?

Veteran's Status:

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Health Insurance Status and Recent History

Note: One or multiple options can be selected from Reason for Anticipated Coverage Loss and Type of ACA Issue. Please use the Shift or CTRL key to select multiple options.

Type of Coverage at Initial Contact:

Primary Insured or Dependent?

Reason for anticipated coverage loss:

- Availability
- Affordability
- Adequacy
- Other

Reason (if Other is selected):

Name of Issuer: Type of Plan:

Name of Employer: Does Plan Have Grandfather Status?

Is issuer a third party administrator?

Affordable Care Act Compliance Issue:

Type of ACA Issue:

- Rescission
- Pre-existing exclusion or denial for children
- Dependent coverage to age 26

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Health Insurance Options Following Loss/Change of Other Coverage

- ESI
- Post ESI
- Non-Group
 - Individual (medically underwritten)
 - Individual (HIPAA)
 - Individual (other guaranteed issue)
 - Individual (special state rules/subsidies)
 - High Risk Pool (non-HIPAA)
 - High Risk Pool (HIPAA)
- Government Funded Insurance

Non-Group - Individual (HIPAA)

Note: One or multiple options can be selected from Insurance Burden and Detail. Please use the Shift or CTRL key to select multiple options.

Obtained When Needed?
 Yes No Unknown

Obtained With Burden
 Yes No

Insurance Burden:

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

Detail:

Cannot afford premium
 Other adequacy burden
 Other

Other Reason/Detail:

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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 the Shift or CTRL key to select multiple options.

Affordable Care Act Compliance Issue:

Type of ACA Issue:

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Case Notes

First Name	Last Name	Created Date	Case Notes
Anna	McCourt	3/13/2012 2:23:01 PM	test case note

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Close Case/Follow Up

Agency Contacted for Enforcement: Other Agency Contacted for Enforcement:

Disposition: Disposition:

Insurance Problem Resolution Status:

What Worked:

What Didn't Work:

Follow Up Insurance Status:

Recovered Benefits from Appeals: N/A

Other Recovered Benefits Amount(\$):

Consumer is willing to share his/her story:

Did ACA Help Consumer?

Follow-Up Required?

Keywords:

Case Status:

Case Closed Date: N/A

Case Modified Date: 3/13/2012 2:44:19 PM

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Audit

Created By: Anna McCourt
 Created On: 3/13/2012 2:17:36 PM

First Name	Last Name	Created Date	Audit Description
Anna	McCourt	3/13/2012 2:54:33 PM	Caller Type Changed: Uninsured -- Insured In Transition
Anna	McCourt	3/13/2012 2:54:33 PM	Case and Contact Updated
Anna	McCourt	3/13/2012 2:44:19 PM	Case and Contact Updated
Anna	McCourt	3/13/2012 2:43:26 PM	Caller Type Changed: Other Assistance Referred -- Uninsured
Anna	McCourt	3/13/2012 2:43:26 PM	Case and Contact Updated
Anna	McCourt	3/13/2012 2:41:18 PM	Caller Type Changed: Information Only -- Other Assistance Referred
Anna	McCourt	3/13/2012 2:41:18 PM	Case and Contact Updated
Anna	McCourt	3/13/2012 2:30:18 PM	Caller Type Changed: Uninsured -- Information Only
Anna	McCourt	3/13/2012 2:30:18 PM	Case and Contact Updated

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