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| **Category:** | **Comments:** | **Resolution:** | **Commenter(s)** |
| User Friendly | Access the enrollment system online, by mail or phone, in person, or through existing gateways), and obtain consumer assistance at any juncture; Apply for coverage using a clear, logical, and user-friendly application that requests the minimal amount of information required, screens for all available coverage programs, and refers to other health and human services programs, if applicable. | The appendices of this PRA notice include information on both the online and paper-based application platforms. We envision that call center staff would use the online application in order help callers receive determinations. We have conducted consumer testing and worked with usability and design experts in order to make the application questions user-friendly. The online application is dynamic in nature in order to request the minimum amount of information for an eligibility determination, as reflected in the system logic described in the Appendix. Referrals to other health and human services programs are outside the scope of this data collection, and would likely be state-specific in nature. | National Health Law Programs; Pennsylvania Partnership for Children; Sargent Shriver National Center; 100% Campaign; Advocates for Children & Youth; Center for Law and Social Policy; Center on Budget and Policy Priorities; The Colorado Community Health Network; Community Service Society; Enroll America; Families USA; Georgetown University Center for children and Families; Kentucky Voices of Health; Oregon Health Insurance Exchange; American Academy of Pediatrics; National Immigration Law Center; Asian Pacific American Legal Center; Northwest Health Law Advocates; The Health Coalition for Children and Youth; Health Care for All New York;  |
| Language Taglines | As required by Title VI and HHS guidance, the application must be available in a number of languages in addition to English. At the start of the application, include in-language taglines in at least 15 languages, using standardized language, directing limited English proficient consumers to consumer assistance providers. The application should contain a notice of right to language assistance and access to a language assistance helpline.  | We have included a Spanish tagline on the paper application. The online application will implement taglines as part of the broader website infrastructure which is not demonstrated as part of this collection of information, but we agree that it is important. Guidance is forthcoming on state responsibilities for accessibility of application materials for individuals who are limited English proficient. | National Health Law Programs; The Leadership Conference on Civil and Human Rights; The Asian & Pacific Islander American Health Forum; Center on Budget and Policy Priorities; Enroll America; Georgetown University Center for children and Families; Language Line Services; Chinese Language School of Columbia; Legacy Good Samaritan Medical Center; Mosaic Medical; AnMed Health; Advisory Panel for Outreach and Education; State of Hawaii’s Office of Language Access; National Immigration Law Center; Asian Pacific American Legal Center; Northwest Health Law Advocates; The Health Coalition for Children and Youth; National Asian Pacific American Families Against Substance Abuse; The National Council on Interpreting in Health Care; The Southeast Asia Resource Action Center;  |
| Consumer Testing | Testing the application on families in situations where the parents are covered in the Exchange and the children are covered under Medicaid or CHIP, to ensure that the application sufficiently collects the information necessary for each family member to be enrolled in the appropriate source of coverage. Additionally, all notices, instructions, messages, explanations, and questions should be field-tested to be sure that applicants understand and respond positively to the presentation. | We agree with the importance of consumer testing and have been engaged in an iterative testing process of both online and paper-based forms. Additional notices are outside the scope of this data collection. | National Health Law Programs; 100% Campaign; The Asian & Pacific Islander American Health Forum; Advocates for Children & Youth; The Colorado Community Health Network; Community Service Society; Families USA; Georgetown University Center for children and Families; Kentucky Voices of Health; National Immigration Law Center; Asian Pacific American Legal Center; Northwest Health Law Advocates; The Children’s Partnership; Health Care for All New York;  |
| Enrollment | Manage health care enrollment across programs in a single online location that allows for comparing and choosing a plan, paying premiums, and reporting a change of circumstances, with seamless transfer between programs, if applicable. | Enrollment is outside the scope of the single streamlined application collection of information PRA. | 100% Campaign; AARP;  |
| Available Assistance | Assistance for applicants should be available through a number of resources, such as navigators and toll-free hotlines. Information accompanying the application should let families know how they can get personalized assistance, including the availability of language services. | Assistance is outside the scope of the single streamlined application collection of information PRA. However, we know assistance by phone, internet, and in-person will be critical to many consumers’ successful completion of the application. Note that the paper application draft directs users to where to get help. The online application will have many places where users can click to find out more information, as well as overall glossaries and online help chat features. | National Health Law Programs; The Leadership Conference on Civil and Human Rights; Pennsylvania Partnership for Children; Advocates for Children & Youth; The Center for American Progress; Enroll America; Families USA; Georgetown University Center for children and Families; Legacy Good Samaritan Medical Center; Mosaic Medical; AnMed Health; Advisory Panel for Outreach and Education; American Academy of Pediatrics; National Immigration Law Center; Asian Pacific American Legal Center; Northwest Health Law Advocates; The Health Coalition for Children and Youth; Health Care for All New York; National Asian Pacific American Families Against Substance Abuse; The National Council on Interpreting in Health Care; The Southeast Asia Resource Action Center;  |
| Privacy Statement | The application’s request for demographic data should include a notice of privacy and security rights, as well as an explanation for why the information is being collected. It’s recommended that this statement comes at the very beginning of the application, before the individual begins entering any personal information. | The first page of the online application, as demonstrated in the video, includes a privacy statement. The paper application also includes a message about the privacy of information at the beginning of step 2 and in the rights and responsibilities before signature. CMS has partnered with the other federal agencies participating in the data services hub in order to craft an identity proofing and consent solution that will ensure security for users’ personal information. | National Health Law Programs; The Leadership Conference on Civil and Human Rights; New Yorkers for Accessible Health Coverage; Sargent Shriver National Center; The Asian & Pacific Islander American Health Forum; Center for Law and Social Policy; Center on Budget and Policy Priorities; Enroll America; Families USA; Georgetown University Center for children and Families; National Immigration Law Center; Asian Pacific American Legal Center; Northwest Health Law Advocates; Health Care for All New York;  |
| Nondiscrimination Notice | Add a notice informing applicants that Exchanges are subject to the nondiscrimination requirements of Section 1557 of the ACA, Title VI and existing civil rights laws, including prohibiting discrimination on the basis of race, color, national origin, disability, age, sex, gender identity or sexual orientation. | The results page of the online application, as well as the paper application’s rights and responsibilities section, includes the statement “Following federal law, there’s no discrimination on the basis of care, color, national origin, sex, or disability. If you feel you’ve been discriminated against, you can file a complaint of discrimination”. | National Health Law Programs; The Leadership Conference on Civil and Human Rights; Georgetown University Center for children and Families; National Immigration Law Center; Asian Pacific American Legal Center; Northwest Health Law Advocates;  |
| Explanatory Information | Where a question requests sensitive information (such as race/ethnicity, SSN, citizenship/immigration status, income, etc.), the application should provide a brief description of the information and explanation of the rationale for collecting it, in a manner that speaks to the issue through the consumer’s eyes. Where the application requests income information, the consumer should be informed of why the accuracy is important (i.e., it could affect the costs they pay and benefits they receive) and offered help with figuring out how to make their information most accurate. | We agree with the importance of this type of explanatory information and have tried to include it where relevant in the online application, through a mixture of on-screen text and hyperlinks or help icons that could provide more information for those who want it. On the paper application, we are limited in space, so we have tried to include concise explanatory information in a couple key places based on feedback from consumer testing. | National Health Law Programs; 100% Campaign; AARP;  |
| Applicant/Non-Applicant Information | Support the identification of each household member as either an applicant or a non-applicant, so that non-applicants, often parents applying on behalf of children, are not asked unnecessary questions. | Many application questions need to be asked only of people applying for insurance, and not asked of other household members. This was a priority in the design of both the online and paper applications, and should be clearly reflected in the appendices. | National Health Law Programs; Pennsylvania Partnership for Children; Sargent Shriver National Center; The Asian & Pacific Islander American Health Forum; Advocates for Children & Youth; America’s Health Insurance Plans; Center for Law and Social Policy; Center on Budget and Policy Priorities; The Colorado Community Health Network; Community Service Society; Enroll America; Families USA; Georgetown University Center for children and Families; Kentucky Voices of Health; Language Line Services; Alaska Native Tribal Health Consortium; Northwest Portland Area Indian Health Board; National Council of Urban Indian Health; National Indian Health Board; Tribal Technical Advisory Group; United South and Eastern Tribes, Inc.; Chinese Language School of Columbia; Legacy Good Samaritan Medical Center; Mosaic Medical; Advisory Panel for Outreach and Education; State of Hawaii’s Office of Language Access; American Academy of Pediatrics; National Immigration Law Center; Asian Pacific American Legal Center; Northwest Health Law Advocates; The Health Coalition for Children and Youth; Health Care for All New York; National Asian Pacific American Families Against Substance Abuse; The National Council on Interpreting in Health Care; The Southeast Asia Resource Action Center; |
| SSN | Require SSNs only of applicants who are eligible for SSNs, and explain that other applicants may be assigned a unique identifier for purposes of enrollment in coverage. Clarify that failure to provide an SSN for a non-applicant does not affect the eligibility of applicant family members. | Yes we have added language for consumers about the role of the SSN in the application, and will provide additional information in help text for the online application. | The Leadership Conference on Civil and Human Rights; National Center for Transgender Equality; The Asian & Pacific Islander American Health Forum; Advocates for Children & Youth; Center on Budget and Policy Priorities; Community Service Society; Enroll America; Georgetown University Center for children and Families; American Academy of Pediatrics; National Immigration Law Center; Asian Pacific American Legal Center; Northwest Health Law Advocates; The Health Coalition for Children and Youth; Health Care for All New York;  |
| Eligible Immigration Status | Application should clarify that immigration status of a non-applicant is not needed and does not affect the eligibility of other family members. | Yes, we never request citizenship or immigration status from non-applicants. | National Health Law Programs; The Leadership Conference on Civil and Human Rights; National Center for Transgender Equality; Pennsylvania Partnership for Children; The Asian & Pacific Islander American Health Forum; Advocates for Children & Youth; Center on Budget and Policy Priorities; Community Service Society; Families USA; Georgetown University Center for children and Families; American Academy of Pediatrics; National Immigration Law Center; Asian Pacific American Legal Center; Northwest Health Law Advocates; The Health Coalition for Children and Youth; Health Care for All New York;  |
| Data Retrieval/Permission | Applicants will likely need to provide some consent/permission, whether to allow them to authorize pulling data from the IRS or to confirm their citizenship through a match with the SSA. As a part of this consent/permission section of the application, it is very important that families be clearly notified as to how their information will be used, the protections they are entitled to, and other pertinent privacy rights. | We have incorporated information about data matching in the privacy statement, and will be adding more as part of the implementation of the consent/identity proofing solution agreed on with SSA and IRS. | 100% Campaign; The Children’s Partnership;  |
| Ordering of Determination | Suggestion that the Medicaid-first ordering to be supported by all materials and guidance for the single application. They argue that everyone that is requesting help to pay for health insurance has to be evaluated for Medicaid first. | Because people are not eligible for CHIP or APTC if they are eligible for Medicaid, the streamlined application back-end logic will indeed first screen people for Medicaid based on MAGI. On the online application, this is implemented as a preliminary eligibility determination after the income section of the application, so that applicants that look eligible for Medicaid based on MAGI are not asked questions relevant only to APTC and CHIP, such as employer-sponsored coverage affordability and special enrollment periods. | 100% Campaign; The Children’s Partnership;  |
| Optional vs. Required Information | Optional questions shall be clearly marked as such. | This is a subject we continue to work on. Some questions in the Appendices are clearly marked as optional, such as Race and Ethnicity. | Pennsylvania Partnership for Children; 100% Campaign; Advocates for Children & Youth; The Center for American Progress; Community Service Society; Georgetown University Center for children and Families; Kentucky Voices of Health; American Academy of Pediatrics; National Immigration Law Center; Asian Pacific American Legal Center; The Health Coalition for Children and Youth; Health Care for All New York;  |
| Baseline Applicant Information | Include collection of primary language, sex assigned at birth, and relationship status from all applicants, as well as optional questions on race, ethnicity, sexual orientation, and gender identity. | We appreciate the importance of collection of demographic data, and have worked with the CMS Office of Minority Health to ensure that our application complies with the guidelines of ACA Section 4302. It is also critical to minimize the burden and time of application completion, so we do ask some questions, such as primary language, just of the household contact. | National Health Law Programs; The Leadership Conference on Civil and Human Rights; Medicaid Health Plans of America; New Yorkers for Accessible Health Coverage; Pennsylvania Partnership for Children; Sargent Shriver National Center; Advocates for Children & Youth; America’s Health Insurance Plans; The Center for American Progress; Center for Law and Social Policy; Center on Budget and Policy Priorities; Community Service Society; Enroll America; Families USA; Florida Legal Services; Georgetown University Center for children and Families; Language Line Services; WellPoint Inc.; Chinese Language School of Columbia; Legacy Good Samaritan Medical Center; Mosaic Medical; Advisory Panel for Outreach and Education; State of Hawaii’s Office of Language Access; New York State Department of Health; American Academy of Pediatrics; National Immigration Law Center; Asian Pacific American Legal Center; Northwest Health Law Advocates; The Health Coalition for Children and Youth; Health Care for All New York; National Asian Pacific American Families Against Substance Abuse; Lau Ola Clinic; HHSC; The National Council on Interpreting in Health Care; The Southeast Asia Resource Action Center; |
| Data on Gender Identification | Gender identification to be as follows: What is your current gender identity? Gender identity is an individual’s internal understanding of one’s own gender.* Male
* Female
* Transgender, female to male
* Transgender, male to female
 | We appreciate the importance of collection of demographic data, and have worked with the CMS Office of Minority Health to ensure that our application complies with the guidelines of ACA Section 4302. It is also critical to minimize the burden and time of application completion, so we do ask some questions, such as primary language, just of the household contact. | National Health Law Programs; The Leadership Conference on Civil and Human Rights; National Center for Transgender Equality; The Center for American Progress; Community Service Society; Tennessee Justice Center; Northwest Health Law Advocates; Health Care for All New York; |
| Data on Relationship Status and Sexual Orientation | “Applicant” and “Applicant/Non-Applicant” Data Elements in Appendices A and B of the streamlined application allow respondents to indicate that they are in a domestic partnership or civil union, in addition to the option indicating marriage, and that the application consistently uses “Parent 1” and “Parent 2” instead of “Mother” and “Father.” | We agree with the usage of “Parent” in place of “mother” or “father” and have implemented that in the application data collection viewable in the appendices. We also collect information about domestic partnership to the extent that it can affect eligibility or plan enrollment. | National Health Law Programs; The Leadership Conference on Civil and Human Rights; The Center for American Progress; National Immigration Law Center; Asian Pacific American Legal Center; Northwest Health Law Advocates;  |
| Income Information  | “Projected Annual Income” should come after “Current/Monthly Income,” since it may be easier for some to calculate annual income after determining their monthly income. Guidance on how to calculate a monthly income should be provided, referencing common documents such as an applicant’s pay stub and the frequency of payment.Those who are not paid in the typical fashion – self-employed, those working for multiple employers, those who do seasonal or piece work. These consumers may not have access to a pay stub that allows for easy reference, so accommodations, both during the application and verification processes, must be made so these individuals are able to provide accurate information without undue burden. | For the online application, we have worked with the IRS to craft income questions that minimize burden but do elicit information about many income types that are countable as part of the definition of Modified Adjusted Gross Income. This starts with a streamlined option that appears only for people whose federal income tax data, based on an electronic data match with the IRS, provides a clue that the family’s income is high enough that each applicant is likely to be over-income for Medicaid and CHIP. In the streamlined path, described in Appendix A and shown visually in one of scenarios demonstrated in Appendix B, users answer only two questions about income. However, if family members do appear eligible for Medicaid or CHIP, they complete the current/monthly income section, which also takes advantage of electronic data matching by pre-populating available current income data which the consumer can confirm, edit, or delete. We also take steps to allow consumers to explain their current income to us in the way that makes sense to them—for example by providing options of answering income questions on an hourly, daily, weekly, monthly, quarterly, and annual basis when appropriate. We also plan to add extensive “help text” in the income section to guide consumers through the process. | National Health Law Programs; The Leadership Conference on Civil and Human Rights; New Yorkers for Accessible Health Coverage; Sargent Shriver National Center; Advocates for Children & Youth;  |
| Disability | Application shall ask all applicants for information about disability status to identify those who may be eligible for traditional Medicaid. | Yes, this is included for all applicants in the paper and online applications. | National Health Law Programs; The Leadership Conference on Civil and Human Rights; 100% Campaign; Community Service Society; Families USA; Florida Legal Services; Tennessee Justice Center; The Children’s Partnership; Health Care for All New York; |
| Pregnancy | Application should ask for information on an applicant’s pregnancy status since this could affect a woman’s potential eligibility options. | Yes, this is included for all applicants and non-applicants in the paper and online applications. | National Health Law Programs; The Leadership Conference on Civil and Human Rights; Pennsylvania Partnership for Children; 100% Campaign; Advocates for Children & Youth; Center on Budget and Policy Priorities; Community Service Society; Families USA; American Academy of Pediatrics; National Immigration Law Center; Asian Pacific American Legal Center; Northwest Health Law Advocates; The Children’s Partnership; HHSC;  |
| Foster Care | Application question should be developed to identify those individuals. | We are asking a question in paper and online applications to identify adolescents who were formerly in foster care, for purposes of Medicaid eligibility. We anticipate that states will continue to use their current pathways to establish eligibility for children currently in foster care. | Pennsylvania Partnership for Children; 100% Campaign; The Children’s Partnership;  |
| Past Medical Expenses | Applicant should have ability to indicate on the application if they have incurred any recent medical expenses. If so, further follow up may be required. | Yes, this is included for all applicants in the paper and online applications if they appear to be eligible for Medicaid. | Pennsylvania Partnership for Children; Sargent Shriver National Center; Advocates for Children & Youth; America’s Health Insurance Plans; Center for Law and Social Policy; Community Service Society; Enroll America; Families USA; Georgetown University Center for children and Families; National Immigration Law Center; The Health Coalition for Children and Youth; Health Care for All New York; |
| Application Summary | The applicant shall be made aware of options and methods for controlling the information entered on the application, including for changes and deletions, and/or saving for possible submission in the future.  | Yes, this is included for all applicants in the online application. | National Health Law Programs; The Leadership Conference on Civil and Human Rights; Sargent Shriver National Center; 100% Campaign; Center for Law and Social Policy; Community Service Society; Enroll America; Families USA; Georgetown University Center for children and Families; American Academy of Pediatrics; National Immigration Law Center; Asian Pacific American Legal Center; Northwest Health Law Advocates; Health Care for All New York; |