I (Ca	Date Issue Identified (INIMDITY) (Completed by The CMS Team Lead) Team Lead)		Condition Language (Completed By The CMS Team Lead)	Related to Pre-Audit Issue Summary? (Completed By The CMS Team Lead) (Y/N)	Pre-Audit Issue Summary Number Completed By The CMS Team Lead) (If applicable) Detailed Description of the Issue (Explain what happened) (Remaining fields to be Completed By Sponsor)		Root Cause Analysis for the Issue (Explain why it happened)	Methodology - Describe the process that was undertaken to determine the # of members impacted	# of Members Impacted	Actions Taken to Resolve System/Operational Issues	Date System/Operational Remediation Initiated (MM/DD/YY)	Date System/Operational Remediation Completed (MM/DD/YY)	Action: Taken to Resolve Negatively Impacted Beneficiaries Including Outreach Description and Status	Date Beneficiary Outreach and Remediation Initiated (MM/DD/YY)	Date Beneficiary Outreach and Remediation Completed (MM/DD/YY)

Cardiolder	Contract ID		Person who	reconsideration, NCF	Previder Type (CEOCHNA)	Time the request was reviewed (SEEMEN - Milliary line)	Is this an expedited or standard request (EN)	Date the respect was dismissed (SDESDEYY)	Erzom for Dhanical (e.g., no ACE, so WOL, unlinely Hingi	metilization provided	Ther writes soldiedon provided in mendice/provider (EEEEOX: Military time)	Appealed to IEE (Y70)	Date forwarded in ISK (MADE(13)	If plan directed case, amount of randler hiddity (8)	poid in response in	If rescaling paid, amount (5)	Amount coroller ectabarred (5)	Date carefler evialusced (MMSEVI)