

### Transparency in Coverage Summary of 60-day Comments

Category	Comments Summary	Resolution
Timing	Align data collection with similar collection efforts	As proposed in the supporting statement, CMS will work to align with other reporting requirements.
Scope of data collection	Reporting requirements should not require a duplicative process for issuers	CMS seeks to minimize duplicate efforts wherever possible by aligning the data submission with the QHP certification process in future collections, as well as continuing to align with other entities that may require issuers to submit similar data.
Data on claims denials	Do not collect or display information on claims denials at this time	In our initial phased in approach, we only collected claims denial and internal and external appeals figures. At this time we believe that expanding this data collection element to be useful to consumers.
	Clarify guidance for reporting claims	CMS will identify what additional guidance is needed to support issuer's submission of claims data in the issuer instruction manual.
	Develop common definitions to ensure the data collected are consistent similar data collections	CMS will add common definitions to the data collection process.
	CMS should not add new claims appeals reporting requirement	At this time, CMS has not proposed any new requirements for issuers to report on appeals that was not already implemented in the previous collection. The existing reporting requirement include: the number of claims received; the number of claims denied; the number of internal appeals filed and overturned; and the number of external appeals filed and overturned.