

Appendix A: 60-day Notice Comments & Responses for the Affordable Care Act Internal Claims and Appeals and External Review Procedures for Non- grandfathered and Grandfathered Group Health Plans and Issuers and Individual Market Issuers (CMS-10338/OMB Control Number 0938-1099)

HHS received one comment related to an information collection request (ICR) HHS released concerning CMS-10338, a Paperwork Reduction Act (PRA) document detailing requirements related to the Affordable Care Act Internal Claims and Appeals and External Review Procedures for Non-grandfathered and Grandfathered Group Health Plans and Issuers and Individual Market Issuers. This is the summary of and response to the comment.

Comment:

One commenter stated that the Internal Claims and Appeals and External Review regulations are in need of immediate action to review documentations relevant to healthcare violations of insurance providers for individuals entitled to healthcare insurance coverage under existing laws. The commenter explained that the agency contract agreement and private sector's actions have caused harmful impacts for insurance coverage for medical prescriptions, doctor appointments, laboratory testing expenses and validity of prescriptions for healthcare preventative measures. The commenter emphasized that, due to the numerous violations of impacts, there is a need to address these issues to help prevent future occurrences.

Response:

HHS appreciates the concerns expressed by the commenter to the effect that the Internal Claims and Appeals and External Review regulations and their implementation are in need of review to ensure that health insurance plans and issuers are complying with all applicable requirements. HHS remains committed to helping consumers understand their rights under the claims and appeals and external review processes. HHS will share this comment with the other agencies responsible for implementation of these requirements for consideration.