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February 26, 2013

TO: OMB, Office of Information and Regulatory Affairs
Attention: CMS Desk Officer

FROM: Kris Gross, Director, SHIIP--Iowa Insurance Division

RE: Comments on Draft of Appendix A: List of Questions in the Online Application to Support eligibility Determinations for Enrollment through the Health Insurance Marketplace and for Medicaid and the Children's Health Insurance Program

Thank you for the opportunity to offer comments related to the questions in the online application for the new health insurance marketplace, Medicaid and CHIP. My comments are based on experience we have had in our program (Iowa SHIIP--one of the State Health Insurance Information Programs funded by CMS). We help Medicare beneficiaries with applications for benefits regularly and the comments below are based on this experience. If you have questions related to my comments you can contact me at 515-242-5190 or kris.gross@iid.iowa.gov.

Comments

1. Section III.F.5.a—requires a signature—what option is available for someone who cannot sign a document due to a physical or mental disability?
2. Section IV.B.2—asks if the applicant's household income will be less than 400% FPL—how is income defined here? There are other places throughout the application where the applicant is asked to provide income (e.g. X.1). Each request needs to be clearly defined (gross, adjusted gross, annual, monthly, etc.)
3. Section VI.A.8.o,xii—define the term “collateral dependent”
4. Section XI.4.—An individual could have more than one employer. Will there be an option to provide information for more than one employer?
5. Section XI.12.c.vi—Which year are you referring to—current or past year?
6. Section XIII.1—the term “offered” is used (Is [FNLNS] offered health coverage through a job....). Do you mean that employer coverage is available or do you mean the applicant is actually enrolled in the employer coverage?
7. Anywhere a person is identified to be Medicare eligible/enrolled—provide the individual with contact information for the State Health Insurance Information Program (SHIP). SHIPs can help these individuals understand their Medicare options and benefits and apply for assistance. SHIPs need to refer non-Medicare individuals they encounter to the Navigators or Consumer Assistants when appropriate and the reverse should also occur.