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# Complex Case Web Form User Guide

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Introduction

1. Introduction

This user guide provides instructions for completing the Complex Case web form. The Complex Case web form allows assisters to submit a Complex Case for investigation.

A Complex Case is a case involving a single consumer or tax household where the assister has been unable to resolve a specific issue on the consumer or tax household’s application for Marketplace coverage. Complex cases are not policy questions or general questions about the Marketplace application.

Only federally certified application counselors (CACs) and/or Navigators in a Federally-facilitated Marketplace (FFM) may submit Complex Cases. To be considered federally certified, CACs must have a current CAC certificate issued by a certified application counselor designated organization (CDO) with an active CMS-CDO agreement. Navigators must be affiliated with a current federally funded Navigator organization and have a current Navigator certificate.

1.1. Before Starting the Web Form

Before you get started, complete the following actions:

- Confirm that the consumer’s contact information is current on their Marketplace application.
- Contact the Marketplace Call Center at 1-800-318-2596 (TTY: 1-855-889-4325) for assistance in resolving the issue.
- Collect all necessary information as you must complete and submit this web form in a single session.
  - You must complete the Complex Case web form in a single session.
  - If you select the Cancel button or close your browser before submitting the web form, you will lose all entered data.
  - If you are inactive for 30 minutes, the web form will time out and all of your information will be lost.
- Notify the consumer that they will receive a phone call from a caseworker with the Complex Case Help Center (CCHC) and that their response is critical to timely case response.

1.2. Helpful Tips for Completing the Web Form

All pages of the web form contain required and/or optional fields. All required fields are indicated with a red asterisk (*). If you attempt to proceed to the next page of the web form without completing all required fields, the web form will display an error message indicating which fields are required to proceed.

When completing this web form, do not include any personally identifiable information (PII) or protected health information (PHI). There are specific fields on the web form that will ask you to attest that the information you entered, and any documents you attached to your submission, do not include any PII or PHI.
Introduction

- PII is information that can be used to distinguish or trace an individual’s identity either alone or when combined with other information that is linked or linkable to a specific individual. Examples of PII assisters may collect, disclose, access, maintain, store and/or use when helping consumers in the Marketplace (Note: This list is not exhaustive): name, phone number, email address, birth date, social Security Number (SSN).

- The Health Insurance Portability and Accountability Act of 1996 protects all "individually identifiable health information" held or transmitted by a covered entity or its business associate, in any form or media, whether electronic, paper, or oral. The Privacy Rule calls this information "protected health information (PHI)." “Individually identifiable health information” is information, including demographic data, that relates to the individual’s past, present or future physical or mental health or condition, the provision of health care to the individual, or the past, present, or future payment for the provision of health care to the individual, and that identifies the individual or for which there is a reasonable basis to believe it can be used to identify the individual.

If including supporting documentation, do not submit any medical records or immigration documents, the review team cannot accept and will delete this information from the Complex Case submission. You must redact (black out/white out) any PII from any documentation, letters from the Marketplace, etc. The only information needed to resolve a Complex Case is the consumer’s application ID and the phone number used by the consumer or assister to contact the Marketplace Call Center.

1.3. Web Form Navigation Features

The Complex Case web form contains navigational buttons at the bottom of each page. While submitting your Complex Case information, follow the navigational guidance below.

- To exit the web form, select the Cancel button.
  - The web form will display a pop-up window asking if you want to exit the web form.
    - Select the OK button to continue exiting the web form. If you select this option, you will lose all information entered up to this point, the session will close, and you will have to start the web form over again to submit the Complex Case.
    - Select the Cancel button to return to the web form.
Introduction

- To return to the previous page of the web form, select the Back button.
- To advance to the next page of the web form, select the Continue button.

![Figure 2: Page Navigation Buttons](image-url)
Welcome Page

2. Welcome to the Complex Case Submission Web Form Page

The Welcome to the Complex Case Submission Web Form page contains an Introduction section describing the web form, audience, and navigational features. This page includes questions you must complete prior to submitting the Complex Case web form.

![Welcome to the Complex Case Submission Web Form](image)

**Introduction**

This web form allows an assister to submit a complex case for investigation. A complex case is a case involving a single consumer or tax household where the assister has been unable to resolve a specific issue on the consumer or tax household's application for Marketplace coverage. Complex cases are not policy questions or general questions about the Marketplace application.

Only federally certified application counselors (CACs) and/or Navigators in a Federally facilitated Marketplace (FFM) may submit complex cases. To be considered federally certified, CACs must have a current CAC certificate issued by a certified application counselor designated organization (CCDO) with an active CMS-CDO agreement. Navigators must be affiliated with a current federally funded Navigator organization and have a current Navigator certificate.

If you are an Agent or Broker, please send your case to the Agent and Broker Mailbox at FFMP/Producer-AssisterHelpdesk@cms.hhs.gov.

**Before starting this web form:**

- Confirm that the consumer’s contact information is current on their Marketplace application.
- Contact the Marketplace Call Center for assistance in resolving the issue.
- Collect all necessary information as you must complete and submit this web form in a single session.
  - If you select the Cancel button or close your browser before submitting the web form, you will lose all entered data.
  - If you are inactive for 30 minutes, the web form will time out and all of your information will be lost.
- Notify the consumer that they will receive a phone call from a caseworker with the Complex Case Help Center (CCCH) that their response is critical to timely case response.

**Have you confirmed with the consumer that their phone number on the Marketplace application is current?**

- Yes
- No

**Disclaimer:**

By using this web form you accept the terms and conditions. If you decline, you should not use the web form.

- This warning banner provides privacy and security notices consistent with applicable federal laws, directives, and other federal guidance for accessing this U.S. Government information system, which includes (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4) all devices and storage media attached to this network or to a computer on this network.
- This system is provided for Government authorized use only.
- Unauthorized or improper use of this system is prohibited and may result in disciplinary action and/or civil and criminal penalties.
- Personal use of social media and networking sites on this system is limited as to not interfere with official work duties and is subject to monitoring.
- By using this system, you understand and consent to the following:
  - The Government may monitor, record, and audit your system usage, including usage of personal devices and email systems for official duties or to conduct HHS business. Therefore, you have no reasonable expectation of privacy regarding any communication or data transmitted or stored on this system. At any time, and for any lawful Government purposes, the Government may monitor, intercept, and search and seize any communication or data transmitted or stored on this system.
  - Any communication or data transmitted or stored on this system may be disclosed or used for any lawful Government purpose.

Figure 3: Welcome to the Complex Case Submission Web Form Page
Welcome Page

2.1. Consumer Contact Information Question

You must respond to the first question on the welcome page: *Have you confirmed with the consumer that their phone number on the Marketplace application is current?*

1. **Select** the *Yes* or *No* button to indicate your response.

   ![Figure 4: Consumer Contact Information Buttons]

   a) If you select *Yes*, proceed to **Section 2.2.** below.
   b) If you select *No*, an error will appear and you must confirm the accuracy of the consumer's phone number on the Marketplace application before proceeding.

   ![Figure 5: No Response to Question 1 Error Message]

2.2. Marketplace Call Center Question

If you selected *Yes*, to the first question on the welcome page, you must respond to a second question before proceeding: *Have you attempted to resolve this issue with the Marketplace Call Center?*

1. **Select** the *Yes* or *No* button to indicate your response.

   ![Figure 6: Marketplace Call Center Buttons]

   a) If you select *Yes*, proceed to **Section 3** below.
   b) If you select *No*, an error message will appear and you must contact the Marketplace Call Center before proceeding.

   ![Figure 7: No Response to Question 2 Error Message]
3. Marketplace Call Center Information Page

The *Marketplace Call Center Information* page contains fields pertaining to the phone call made to the Marketplace Call Center. You need to respond to these questions prior to entering information specific to your Complex Case.

![Figure 8: Marketplace Call Center Information Page](image)

To complete the *Marketplace Call Center Information* page:

1. **Select** the Yes or No radio button to indicate whether the assister called the Marketplace Call Center at 1-800-318-2596 (TTY: 1-855-889-4325).

![Figure 9: Marketplace Call Center Phone Number Yes or No Radio Buttons](image)

2. Use the calendar function to **enter** the date when the assister contacted the Marketplace Call Center. The format for this field is MM/DD/YYYY.

![Figure 10: Date Assister Contacted the Marketplace Call Center Field](image)
3. **Enter** the phone number from which the assister called the Marketplace Call Center in the following format: xxx-xx-xxxx.

   ![Figure 11: Phone Number Used to Call the Marketplace Call Center Field](image1)

   **NOTE**
   
   This is not the phone number you dialed to reach the call center, this is the phone number from which you placed the call to the Marketplace Call Center. The submitter must enter the phone number in the following format xxx-xx-xxxx.

4. **Enter** a summary of the assister’s conversation with the Marketplace Call Center in the text field. When completing this field, do not include PHI or PII.

   ![Figure 12: Summary of Marketplace Call Center Conversation Field](image2)

5. **Select** the checkbox to attest that the summary you entered does not include any PHI or PII.

   ![Figure 13: Marketplace Call Center Discussion Attestation Statement Checkbox](image3)

6. **Select** the Continue button to proceed to the next page of the web form.

   ![Figure 14: Marketplace Call Center Page Continue Button](image4)
Submitter Contact Information Page

4. Submitter Contact Information Page

The **Submitter Contact Information** page contains fields pertaining to your contact information as the submitter of the Complex Case. All required fields are indicated with a red asterisk (*).

![Submitter Contact Information Page](image)

**Figure 15: Submitter Contact Information Page**

To complete the **Submitter Contact Information** page:

1. **Enter** your **First Name** and **Last Name**.
2. **Enter** your **Email Address** in the following format: email@domain.extension.
3. **Enter** your **Job Title**.
4. **Enter** your **Phone Number** in the following format: xxx-xxx-xxxx.
5. If applicable, **enter a phone extension**.

![Submitter Contact Information Fields](image)

**Figure 16: Submitter Contact Information Fields**

6. **Select** the **Continue** button to proceed to the next page of the web form.

![Submitter Contact Information Page Continue Button](image)

**Figure 17: Submitter Contact Information Page Continue Button**
5. Assister Contact Information Page

The Assister Contact Information page contains fields pertaining to the assister’s information. All required fields are indicated with a red asterisk (*).

To complete the top portion of the Assister Contact Information page:

1. **Enter** the Assister’s Organization Name in the text field.

2. **Select** the radio button that best describes the type of assister who helped the consumer with this issue:
   - Navigator
   - Certified Application Counselor (CAC)
   - Other Assister Type Description – if you select this option, enter a description of the assister type in the field provided.
3. **Enter** the assister’s ID in the **Assister ID** text field.

<table>
<thead>
<tr>
<th>Assister ID: If you assisted the consumer as a CAC, enter your CAC ID. If you assisted the consumer as a Navigator, enter your Navigator ID. If you are a CAC or Navigator, this field is required.</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Blank]</td>
</tr>
</tbody>
</table>

**Figure 21: Assister ID Field**

a) If you select the **Other Assister Type Description** option as the **Assister Type**, the web form will not require you to enter an assister ID.

b) If the assister provided assistance to the consumer as a CAC, **enter a CAC ID**. If the assister provided assistance to the consumer as a Navigator, **enter a Navigator ID**. Refer to the note below for examples of the appropriate format to use for each assister ID type.

**NOTE**

Example of CAC-ID: NYCDOA1200001
Example of Navigator ID: INNAV1234567

Based on your selections in the top portion of the **Assister Contact Information** page, the web form will populate additional sections for you to complete.

For all three assister type options, the **Assister Contact Information** section will appear. This is where you will enter the contact information for the assister associated with the Complex Case.

If you are the assister affiliated with this Complex Case, **select** the **Same as Submitter** checkbox to auto populate your information into the Assister Contact Information fields.

**Figure 22: Assister Contact Information – Same as Submitter Checkbox**
Assister Contact Information Page

If you are submitting this web form on behalf of an assister, complete the Assister Contact Information section following the steps below.

1. Enter the assister’s First Name and Last Name.
2. Enter the assister’s Email Address in the following format: email@domain.extension.
3. Enter the assister’s Job Title.
4. Enter the assister’s Phone Number in the following format: xxx-xxx-xxxx.
5. If applicable, enter a phone extension.

Assisters have the option to request to be included in all communication with the consumer regarding the Complex Case.

6. Select the Yes or No radio button to indicate the assister’s preference whether or not to request to be included in communication with the consumer.

If you select Navigator as the Assister Type, the web form will display the Project Officer Contact Information section.

If you are the Project Officer affiliated with this Complex Case, select the Same as Submitter checkbox to auto populate your information into the Project Officer Contact Information fields.
Assister Contact Information Page

If you are not a Project Officer, complete the *Project Officer Contact Information* section following the steps below.

1. *Enter* the Project Officer’s *First Name* and *Last Name*.
2. *Enter* the Project Officer’s *Email Address* in the following format: email@domain.extension.
3. *Enter* the Project Officer’s *Job Title*.
4. *Enter* the Project Officer’s *Phone Number* in the following format: xxx-xxx-xxxx.
5. If applicable, *enter a phone extension*.

   ![Figure 26: Navigator Project Officer Contact Information Fields](image)

6. *Select* the *Continue* button to proceed to the next page of the web form.

   ![Figure 27: Assister Contact Information Page Continue Button](image)
6. Consumer Information Page

The **Consumer Information** page contains fields pertaining to the Complex Case and the consumer involved in the Complex Case. All required fields are indicated with a red asterisk (*).

![Figure 28: Consumer Information Page](image)

To complete the **Consumer Information** page:

1. **Enter** the full **Marketplace Application ID**. This entry must be nine or ten numbers.

![Figure 29: Marketplace Application ID Field](image)
Consumer Information Page

2. **Select** the state where the consumer lives from the drop-down menu.

   ![Figure 30: Consumer State of Residence Pick List](image)

3. **Enter** the city where the consumer lives in the text field.

   ![Figure 31: Consumer City of Residence Field](image)

4. **Select** the Yes, No, or Unknown radio button to indicate whether the case was escalated and assigned a Health Insurance Casework System (HICS) case number.

   ![Figure 32: HICS Radio Buttons](image)

   **NOTE**
   
   A HICS case number is assigned to a consumer when a case escalates to a case worker.

5. **Select** the Yes, No, or Unknown radio button to indicate that the case escalated, and assigned a Health Insurance Casework System (HICS) case number.

   ![Figure 33: HICS Case Number Field](image)

6. **Select** the Yes or No radio button to indicate whether the case is medically urgent.

   ![Figure 34: Is the Consumer’s Case Medically Urgent Yes or No Radio Buttons](image)

7. **Enter** the name of the issuer company.
8. **Enter** the date the issue was identified in the following format: MM/DD/YYYY.
9. **Enter** the date the consumer met or discussed the case with the assister in the following format: MM/DD/YYYY.
10. **Enter** the date the consumer applied for Marketplace Coverage in the following format: MM/DD/YYYY.

   ![Figure 35: Optional Fields](image)
11. **Select** the *Yes, No, or Unknown* radio buttons to indicate whether the consumer has an open appeal for the issue reported in this Complex Case. All required fields are indicated with a red asterisk (*).

![Figure 36: Open Appeal Radio Buttons](image)

If you select yes, the web form will display additional fields for you to complete.

12. **Enter** the **Issuer Appeal Number**. The format for this field is alphanumeric numbers.
13. **Enter** the **Issuer Appeal Date using the calendar function**. The format for this field is MM/DD/YYYY.
14. **Enter** the **Marketplace Appeal Number**. The format for this field is alphanumeric numbers.
15. **Enter** the **Marketplace Appeal Date** in the following format: MM/DD/YYYY.

![Figure 37: Appeal Information Fields](image)

16. **Select** the **Continue** button to proceed to the next page of the web form.

![Figure 38: Consumer Information Page Continue Button](image)
The Complex Case Details page contains fields for you to enter a summary of the consumer’s issue(s). All required fields are indicated with a red asterisk (*).

**WARNING**

Do not include any PHI (including medical information) or PI. Any case that contains any of that information will not be processed.

![Complex Case Details Page](image)

**Figure 39: Complex Case Details Page**
Complex Case Details Page

To complete the Complex Case Details page:

1. *Enter* the specific details about the case in the Complex Case Summary text field. All required fields are indicated with a red asterisk (*).

   ![Figure 40: Complex Case Summary Field](image)

2. *Select* the checkbox to indicate that you attest that the summary text you entered does not include any PHI or PII. All required fields are indicated with a red asterisk (*).

   ![Figure 41: Complex Case Summary Attestation Field](image)

3. *Enter* the specific results the consumer desires in the Consumer’s Desired Results text field. All required fields are indicated with a red asterisk (*).

   ![Figure 42: Consumer’s Desired Results Field](image)
Complex Case Details Page

4. **Select** the **checkbox** to indicate that you attest that the consumer’s desired results summary you entered does not include any PHI or PII.

![Figure 43: Consumer’s Desired Results Attestation Statement Checkbox](image1)

5. **Select** the **Yes** or **No** radio button to indicate whether you have any supporting documentation you want to include as part of your Complex Case submission.

![Figure 44: Supporting Documents Radio Buttons](image2)

If you select **Yes**, the web form will navigate to the **Supporting Documents Upload** page. Refer to **Section 8** of this document for instructions.

If you select **No**, the web form will navigate to the **Complex Case Summary** page. Refer to **Section 9** of this document for instructions.

6. **Select** the **Continue** button to proceed to the next page of the web form.

![Figure 45: Complex Case Details Page Continue Button](image3)
8. Supporting Documents Upload Page

If you have supporting documentation you want to include as part of your Complex Case submission, you can upload these documents on the Supporting Documents Upload page. You can upload up to five supporting documents for a Complex Case. All required fields are indicated with a red asterisk (*).

If you do not have any documents to submit:

1. Select the Back button to return to the Complex Case Details page.
2. Select the No radio button at the bottom of the Complex Case Details page to indicate that you do not have any supporting documents.
3. Select the Continue button to proceed to the Complex Case Summary page.

To upload supporting documentation:

1. Select the Upload Files button or the use the Drop Files option.
2. **Select** the file you want to upload.
3. **Select** the **Upload Attachment** button.

![Figure 48: Upload Attachment Button]

4. If a document is uploaded by mistake, **select** the **Delete** option to remove it.
5. **Select** the **checkbox** to attest that the documents you uploaded do not include any PHI/PII.

![Figure 49: Checkbox Selected Does Not Contain PHI/PII]

6. **Select** the **Continue** button to proceed to the next page of the web form.

![Figure 50: Supporting Documents Upload Page Continue Button]
Complex Case Summary Page

9. Complex Case Summary Page

The Complex Case Summary page contains all of the information you entered on the web form.

Figure 51: Complex Case Summary Page
Complex Case Summary Page

Before submitting the Complex Case:

1. **Review** each section for completion.
2. If you need to edit any information, **select** the **Edit** button next to the section header that corresponds to the section you need to update.

   ![Figure 52: Complex Case Summary Page Edit Button](image)

   a) Make the changes to the information as needed.
   b) **Select** the **Continue** button to return to the **Complex Case Summary** page.

3. **Select** the **Submit** button to complete your complex case submission or the **Cancel** button to cancel the submission. Selecting the **Cancel** button will open a popup window to confirm to cancel all information entered. When confirmed all information entered up to this point will be lost and it is not recoverable.

   ![Figure 53: Complex Case Summary Page Submit Button](image)
10. Confirmation Page

The Confirmation page contains the Submission End Time, Complex Case Number, and a list of contacts who will receive an acknowledgement email. This page serves as your record for future reference and communication about your Complex Case submission.

Figure 54: Confirmation Page

CMS recommends that you download a PDF confirmation for your records. Note: CMS intentionally excludes the following fields from the PDF to ensure no PHI/PII is included: Marketplace Call Center Summary, Complex Case Summary, and Consumer’s Desired Results.

Once the CMS casework team reviews your submission, CMS will send a copy of these excluded fields in an email for your records.

To download a PDF confirmation:

1. Select the Generate PDF Confirmation button.
2. Save the file for your records.
Confirmation Page

To exit the web form:

1. Select the Exit button.

The web form will navigate back to the Welcome to the Complex Case Submission Web Form page. You can enter another Complex Case for submission or close out of the Complex Case Submission Web Form.

If you have any questions, contact assisterquestions@cms.hhs.gov.