Dear [Consumer]:

Thank you for participating in the hearing on the appeal request with Your Health Idaho ("YHI"). The appeal hearing occurred as scheduled on October 9, 2020 and was heard by an appeal panel consisting of YHI Governance Committee members (the "Appeal Panel"). The Appeal Panel members present at your appeal hearing were Senator Jim Rice (Appeal Panel Chair), John Livingston, and Kevin Settles. You attended via phone and testified at the appeal hearing. [YHI Staff] appeared via phone at the appeal hearing and testified on behalf of YHI.

The Appeal Panel has reviewed and considered the appeal record without deference to prior decisions in your case. The appeal record includes all information used to determine your eligibility, as well as any additional relevant facts and evidence presented during the appeals process, including at the hearing (the “Appeal Record”). Based upon the review of the Appeal Record and considering the arguments of the parties at the appeal hearing, the Appeal Panel hereby issues its appeal decision (the “Appeal Decision”) as follows:

**ISSUE ON APPEAL**

The issue on appeal is a request for a retroactive change in effective date from October 1, 2020 to September 1, 2020.

**FINDINGS OF FACT**

1. On August 31, 2020, the consumer experienced a loss of Minimum Essential Coverage (MEC) and was notified of this loss on August 24, 2020.

2. On September 2, 2020, the consumer submitted a financial application for Advanced Premium Tax Credit (APTC) to the Idaho Department of Health and Welfare (IDHW).

3. On September 2, 2020, the consumer’s request for APTC was approved effective September 1, 2020 by IDHW.

4. On September 3, 2020, the consumer submitted an electronic request for an SEP based on Loss of MEC. The request was approved, and an SEP was opened for the consumer.
5. On September 6, 2020, the consumer completed their plan selection which created an enrollment with an October 1, 2020 effective date.

6. On September 16, 2020, the consumer appealed to YHI to request a retroactive change in effective date from October 1, 2020 to September 1, 2020.

7. On September 17, 2020, YHI determined the request Upheld, as there were no exceptional circumstances, no misrepresentation of information and no policy-related reason to change the enrollment effective date per YHI and federal policy.

8. On September 17, 2020, the consumer requested an appeal hearing with YHI.

CONCLUSIONS OF LAW

- The Appeal Panel concludes that the Appellant did not attempt to enroll with YHI prior to loss of coverage.
- The Code of Federal Regulation (CFR) requires that if a consumer’s plan selection (after loss of coverage), is made after the date of the triggering event, the Exchange must ensure that coverage is effective on the first day of the following month.
  - 45 C.F.R. § 155.420 (b)(2)(iv)
- The Appellant’s request for a change in effective date from October 1, 2020 to September 1, 2020 is Upheld because 45 C.F.R. § 155.420 does not provide an exception that would be applicable in this case. 45 C.F.R. § 155.420 requires an October 1, 2020 effective date.
- This decision is effective as of October 9, 2020 and is approved as of October 10, 2020 (45 C.F.R 155.545 (a)(5))

If you are satisfied with this Appeal Decision, you do not need to do anything. If you are dissatisfied with this Appeal Decision, you may appeal to the United States Department of Health and Human Services ("HHS") under 42 U.S.C. § 18081(f) and 45 C.F.R. § 155.520(c). An appeal request to HHS may be made by calling the Marketplace Call Center at 1-800-318-2596 (TYY 855-889-4325), or by downloading and submitting the appeals form as instructed for Idaho from the appeals page on www.healthcare.gov. An appeal request to HHS must be made within thirty (30) days of the date of this Appeal Decision.

Sincerely yours,

[Signature]

Senator Jim Rice
Appeal Panel Chair
Your Health Idaho

cc: Your Health Idaho