



Request #: [Number]

[Consumer Name]

[Consumer Address]

[Consumer Email Address]

Re: **NOTICE OF APPEAL DECISION**

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 participated via phone, and you 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 to open a retroactive Special Enrollment Period (SEP), effective July 1, 2020.

FINDINGS OF FACT

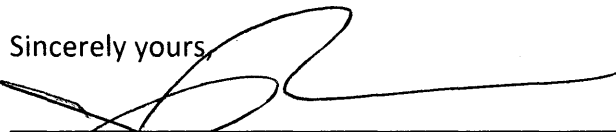
1. On November 26, 2019, the consumer’s representative enrolled the consumer in a Bronze plan effective January 1, 2020.
2. On June 16, 2020, YHI received an updated application from the Idaho Department of Health and Welfare (IDHW) reducing the consumer’s Advanced Premium Tax Credit (APTC) eligibility.
3. On June 16, 2020, the consumer was notified via email by YHI that the updated APTC was automatically applied to the existing enrollment effective July 1, 2020.

4. On June 24, 2020, the consumer appealed to YHI to request a Special Enrollment Period, effective July 1, 2020, based on a change in affordability of the current enrollment with the revised APTC eligibility.
5. On June 30, 2020, YHI determined the request *Upheld*, as the consumer did not have a valid Qualifying Life Event (QLE) to report per YHI and federal policy.
6. On June 30, 2020, the consumer requested an appeal hearing with YHI.

CONCLUSIONS OF LAW

- The Code of Federal Regulation (CFR) states that if a consumer’s increase of income demonstrates the consumer coming out of the Medicaid gap in a non-expansion state, they are eligible for an SEP.
 - 45 C.F.R. § 155.420 (d) (6)(iv)
 - 45 C.F.R. § 155.420 (d) (6) (v) (C)
- The Appeal Panel concludes that the consumer’s increase in income does not constitute a QLE, which would open an SEP.
- The Appellant’s request for a retroactive SEP effective July 1, 2020 is *Upheld* because there is no provision under 45 C.F.R. § 155.420 or any other CFR which allows for an SEP under these circumstances.
- 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 (TTY 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,


Senator Jim Rise
Appeal Panel Chair
Your Health Idaho

cc: Your Health Idaho