



**To:** Connect for Health Colorado Board Members

**From:** Kyla Hoskins, Policy Analyst

**Subject:** Consumer Individual Eligibility Determination Template Sample

**Date:** May 13, 2013

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This memo includes consumer eligibility determination notice templates for the following model notice:

<b>Consumer Correspondence</b>
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1. Individual: Eligible for APTC
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The following document is in *draft* form and underwent review for readability and formatting by Assistive Technology Partners at the University of Colorado Denver. The information included in the document was taken from a variety of sources that include:

- Assistive Technology Partners initial recommendations on readability and formatting;
- Information gathered from Connect for Health Colorado stakeholders;
- Federal regulations;
- Information gathered by the CMS' Coverage Learning Collaborative including consumer testing of draft language by Manatt Health Solutions and Maximus Center on Health Literacy; and
- Information gathered from the Department of Healthcare Policy and Financing's (HCPF) Client Correspondence Stakeholder meetings.

On May 2<sup>nd</sup> Connect for Health Colorado held an Advisory Group meeting to gather stakeholder feedback on the work that Connect for Health Colorado and Assistive Technology Partners has done to date related to notice development and to provide a more long term view of our eligibility determination noticing work.

**Please note:** This document is an example of what a single applicant could receive from the marketplace after submission of the single streamlined application. Our communications have the capacity to be customized for individuals based on electronic data elements and this is one example of the variable text that may be included. This document also represents first year notices. We will continue to work to refine our eligibility determination notices with the help of CMS, HCPF, Assistive Technology Partners, our stakeholders, and our Board.

## Individual Eligible for Advanced Premium Tax Credit (APTC) through Connect for Health Colorado

**Scenario:** Individual submits a single streamlined application through the marketplace web portal to receive an eligibility determination. After the application has been run through the eligibility rules engines, the applicant is determined eligible for APTC and ineligible for CSR.

### Example Content

Important Messages		Variable Data Element	Comments
<b>Accessibility &amp; Language Access</b>	You can get this letter in Spanish or in large print copy or another way that's best for you. Call 888-888-8888 (TTY: 666-666-6666). Statement in Spanish.		Information should be provided to applicants and enrollees in a manner that is accessible to individuals living with disabilities and who are limited English proficient.
<b>Date/Time of Notice (same as mailing date)</b>	<MM DD, YYYY> <12:00 am/pm>	√	
<b>Date &amp; Time of Application Submission</b>	<MM/DD/YYYY> <12:00 am/pm>	√	
<b>Eligibility Determination</b>	You qualify/don't qualify for the following programs...	√	Regulatory requirement
<b>Decision Date</b>	Date decision was made	√	
<b>Definition of Benefit</b>	e.g. The Advance Premium Tax Credit makes health insurance cheaper by decreasing the amount you pay towards the monthly premium.		
<b>How we made our decision</b>	<household size> <reported annual income>	√	Regulatory requirement
<b>Right to appeal</b>	If you think this decision is wrong...		Regulatory requirement. Staff is continuing to develop the appeal process. This language is subject to change once we understand how we are operationalizing appeals.

Important Messages		Variable Data Element	Comments
<b>Plan Selection/Enrollment Next Steps</b>	Time to enroll in your health plan		
<b>Consumer Assistance</b>	If you have questions or need assistance...		
<b>Important Connect for Health Colorado policies</b>	Verification Policies/Report Changes/Re-determinations...		
<b>Helpful Explanations</b>	What are APTCs and CSRs		
<b>Supplemental Information</b>	Medicare information		
<b>Legal authority</b>	Citation to or identification of specific regulation supporting action		Regulatory requirement
<b>Privacy statement</b>	We promise to keep your information private and confidential		



You can get this letter in Spanish or in large print copy or another way that's best for you.

Call 888-888-8888 (TTY: 666-666-6666). Usted puede obtener esta carta en español o en una copia en letra grande u otra manera que sea mejor para usted.

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April 9, 2013

Date & Time of Application: April 8, 2013 at 12:00 p.m.

Dear Jane M Doe,

You qualify for the following programs through Connect for Health Colorado:



## Approved

Benefit	Eligibility	Individual Name	Date of Decision
Advance Premium Tax Credit	Eligible for up to \$80.00 per month	Jane Doe	04/8/2013
The Advance Premium Tax Credit makes health insurance cheaper by lowering the amount you have to pay toward the monthly premium.			

You do not qualify for the following programs:



## Not Approved

Benefit	Eligibility	Individual Name	Date of Decision
Reduced Copays & Deductibles	Ineligible: Over-Income	Kyla Hoskins	04/8/2013
The reduced copays and deductibles benefit allows you to purchase health insurance plans that have lower deductibles, co-pays and co-insurance.			

### ***How We Made Our Decision***

We counted your household size and income based on what you told us and other information available to us from federal databases. Your household size is 1, and your income is \$30,000. Your income is within our financial assistance income range, so you qualify to receive benefits through Connect for Health Colorado! If you think we made a mistake counting your income, and you think you qualify for more services, you have the right to appeal. For more information on how to appeal, see "Right to Appeal" below.

### ***Right to Appeal***

If you think this decision is wrong, you may ask for either an informal conference or a hearing or both. You may still enroll in a qualified health plan and receive your Advance Premium Tax Credit and/or Reduced Copays & Deductible benefits while you appeal.

### ***Appeal Process***

Choose one of the following:

1. **Log into** your online Connect for Health Colorado account, under the My Appeals tab click the button "Submit Appeal";
2. **Call** 888-888-8888 (TTY: 666-666-6666);
3. **Mail** your appeal request to:  
P.O. Box 1234  
Appeals  
Colorado Springs, CO 99999; or
4. **Fax** your appeal to 777-77-7777

**Important:** You have 90 days from the date of this notice to submit an appeal request. **You must appeal by: July 08, 2013**

**Remember:** You may still receive your Advance Premium Tax Credit and/or Reduced Copays & Deductible benefits while you appeal. The result of your appeal could change what health coverage you qualify for. It could also change what others in your household qualify for.

**Legal Help:** If you want to apply for free legal help, call Colorado Legal Services' Denver office 303-837-1313 or your local Colorado Legal Services office.

You can bring someone with you to an informal conference or hearing. That person can be a lawyer or a friend or a family member. Remember to bring any documents or information you need to help us understand your concerns.

If you have a disability, as defined by the Americans with Disabilities Act, you may have rights under the Americans with Disabilities Act (ADA). For more information call 888-888-8888.

## **Time to Enroll in Your Health Plan!**

Go to <http://www.connectforhealthco.com> and choose your qualified health plan today! Sign up ends March 31, 2014, so it is important that you choose your health plan before then.

If you have already signed up for a health plan, you will receive enrollment, benefit, and provider network information from your health plan issuer. Please note that your coverage depends on successful payment of the first month's premium. We will send you another letter after your selected health plan has received payment and enrolled you in coverage. Call your health plan directly if you have questions about your plan's covered services and providers.

## **Do You Need Assistance?**

Choosing a health plan is an important decision and we are here to help. If you have questions, go to <http://www.connectforhealthco.com>, contact your broker or Health Coverage Guide, or call our Customer Service Center at 888-888-8888 (TTY: 666-666-6666).

You can update your account and contact preferences at: <http://www.connectforhealthco.com>. You will need your login ID and password.

## **Important Connect for Health Colorado Policies**

### ***Verification***

You may be asked to confirm the information you provided in your application. If so, you will receive a letter listing the documents needed and how to submit them. You will have 90 days from when you receive the letter to submit the documents. During these 90 days your eligibility will not change. If your information is not received and approved by Connect for Health Colorado, you will no longer be eligible to receive the Advance Premium Tax Credit and/or Reduced Copay and Deductible benefits.

### ***Reporting Changes***

You must report any changes that would affect your eligibility for your health plan, Advance Premium Tax Credit and/or Reduced Copays & Deductible benefits within 30 days of such change. You need to contact us if:

- You no longer live in Colorado
- Your income changes
- Your household changes, for example you marry/divorce, become pregnant, or have children
- You become qualified for Medicare or Medicaid
- You are offered coverage through your employer
- You become incarcerated (jail or prison)

To report changes you may go to <http://www.connectforhealthco.com> or call 888-888-8888 (TTY: 666-666-6666). If you do not report changes, and the changes

affect your eligibility for the Advance Premium Tax Credit, **you may be responsible to pay back some or your entire discount to the IRS.**

### ***Yearly Re-determination***

You must renew your eligibility for the Advance Premium Tax Credit and the Reduced Copays & Deductible benefits every year. Connect for Health Colorado will contact you if more information or action is needed for a renewal. You will also have a chance to change plans every year during the annual open enrollment period.

### ***Notice to Your Employer***

Are you employed? If so, your employer may need to contribute to the cost of your health insurance. Connect for Health Colorado will report that you are qualified for the Advance Premium Tax Credit to your employer. Your employer has the right to appeal your eligibility if they disagree with it. To learn more about the Employer Shared Responsibility Requirement go to [www.healthcare.gov](http://www.healthcare.gov).

## **How Does the Advance Premium Tax Credit Work?**

Individuals and families can receive a new kind of tax credit which lowers the cost of monthly premiums. The tax credit only applies to plans offered through Connect for Health Colorado. The tax credit will be available to individuals earning between about \$15,000 and \$46,000 a year, couples earning between about \$20,000 and \$62,000 a year, and families of four earning between about \$31,000 and \$94,000 a year. These benefits can be used right away.

This tax credit is for individuals, couples and families who:

- Need health insurance
- Do not qualify for public health coverage such as Medicare and Medicaid
- Do not have access to affordable coverage through an employer

If you accept your Advance Premium Tax Credit and enroll in a health plan on Connect for Health Colorado, at the end of the year the IRS will compare your projected annual income with the income you report on your income tax return.

If your income on your tax return is lower than you expected, you may receive a tax refund. If your income on your tax return is higher than you expected, you may have to pay a tax liability.

To learn more go to <http://www.healthcare.gov/marketplace/costs/tax-credits/>

## **What are Reduced Copays & Deductible Benefits?**

Reduced Copays & Deductible benefits lower out of pocket costs for people when they receive health care services. Out of pocket costs include deductibles, co-payments and co-insurance.

To learn more go to <http://www.healthcare.gov/marketplace/costs/index.html>

## **Are you turning 65 or becoming eligible for Medicare due to disability this calendar year?**

People who become eligible for Medicare will no longer be eligible for help paying costs through Connect for Health Colorado. Becoming eligible for Medicare may also affect your health coverage. For questions about Medicare eligibility, call the Social Security Administration at 1-800-772-1213.

For questions about how Medicare eligibility might affect your health coverage, contact your health plan issuer. If you have questions about Medicare benefits or Medicare rights in your State, you should contact Medicare at 1-800-MEDICARE (1-800-633-4227) or the State Health Insurance Program, Colorado SHIP at 1-888-696-7213. You can also go online to [www.ssa.gov](http://www.ssa.gov), [www.medicare.gov](http://www.medicare.gov), or [www.askdora.colorado.gov](http://www.askdora.colorado.gov).

Sincerely,

Connect for Health Colorado

**Legal reference:** 26 U.S.C. 36B and its implementing regulations in accordance with Sections 1402, 1411, and 1412 of the Affordable Care Act.

**We promise to keep your information private and confidential.**