Individual & Family Appeal Rights

You have the right to appeal our decision and receive a hearing if you do not agree with it. You can appeal a decision to deny, terminate, or change your eligibility for:

- Marketplace health insurance
- An enrollment period
- Advance premium tax credits (including the dollar amount of your tax credit)
- Cost-sharing reductions (including the dollar amount of your cost-sharing reductions)

You have **90 days** from the date of the notice you received to appeal the decision. If you do not appeal within **90 days, you may lose your right to appeal.**

Any decisions about your eligibility for benefits might also change the eligibility of other people in your household.

How to Request an Appeal

- Call Maine CoverME at (800) 965-7476.
- Fill out an appeal request form and send it by mail or fax to the address or phone number listed on the form. You can get a copy of the form at www.coverme.gov/appeals.

What Happens When You Appeal

Once you file an appeal, you will receive a formal 'Acknowledgement of Appeal Notice' based on your Marketplace communication preference which confirms your intent to appeal and includes additional information about the appeals process. The Marketplace Office of Hearings will then mail you a notice telling you when a hearing before an independent Administrative Hearings Officer will occur in your case. This is a hearing that you must attend, whether it is conducted virtually or in-person.

The hearing will remain scheduled unless you contact CoverME at (800) 965-7476 to cancel it. At your hearing, you can testify, have others testify for you, and submit documents. CoverME representatives can ask you (or other people who testify) questions. CoverME representatives can also submit documents and testimony. You can ask any agency witness questions too. The Administrative Hearings Officer will then make a decision. You will get a notice explaining the decision by US mail. It will also tell you what to do if you do not agree with it.

Help with Your Appeal

You have the right to represent yourself or have a lawyer, family member, or friend represent you at the Administrative Review and/or at the hearing.

Coverage During Your Appeal

If you are already enrolled in a plan, and receiving help paying for your health plan, you can keep

your plan and cost savings during your appeal as long as you pay your monthly premiums on time. If you lose your appeal, you may owe money when you file your federal tax return for any tax credits you received during the appeal process.

Ending Your Appeal Early

You can cancel your appeal any time before the Administrative Hearing Officer makes a final written decision. If you withdraw your appeal because the agency promised to change its decision, that new decision stands even after you have withdrawn the appeal. If you stop your appeal before the agency changes its decision, the notice you appealed will be enforced as written.