

Primarypxsrgo BtfrfhTest
1234 Road
Denver CO 80202





Account Number: 7837810000
January 13, 2025 at 3:50 PM

Dear Primarypxsrgo BtfrfhTest,


We received new or updated information about your household on January 13, 2025. The change to your household's information is considered a Qualified Life Change Event, which means you can enroll in a health insurance plan or make changes to your current plan through a Special Enrollment Period.

You can enroll in a new plan or make changes to your current plan by March 14, 2025.

This letter also includes information that members of your household may qualify for Health First Colorado (Colorado's Medicaid Program) or Child Health Plan Plus (CHP+). Members of your household who qualify for either of these programs will get a separate letter from the State of Colorado.

Primarypxsrgo BtfrfhTest, it looks like you may qualify for Health First Colorado (Colorado's Medicaid Program) or Child Health Plan Plus (CHP+).		
	Information about Health First Colorado or CHP+	<ul style="list-style-type: none">You may qualify for Health First Colorado (Colorado's Medicaid program) or Child Health Plan Plus (CHP+). We have sent information from your application to the State of Colorado. They will officially determine if you qualify for Health First Colorado or CHP+ and send you a letter telling you if you qualify.If you have any questions about this, visit Health First Colorado • Connect for Health ColoradoIf you are not interested in Health First Colorado or CHP+ coverage, see the Additional information for your household section below.
Primarypxsrgo BtfrfhTest, starting as early as February 1, 2025 you are approved for:		
	Health insurance plan for 2025	<p>You can enroll in a health insurance plan for 2025 if you qualify for a Special Enrollment Period or if it's Open Enrollment.</p> <ul style="list-style-type: none">Enroll in a plan by March 14, 2025.

Primarypxsrgo BtfrfhdTest, you do not qualify for the following:

	Premium Tax Credits or Cost-Sharing Reduction for 2025	You do not qualify for Premium Tax Credits or Cost-Sharing Reduction because: <ul style="list-style-type: none">• You told us you qualify for Health First Colorado or Child Health Plan Plus (CHP+)
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Reporting changes about your household:

If you have changes in your household after you enroll in a plan through Connect for Health Colorado, you should report them to us within 30 days. Some changes, called “Qualified Life Change Events,” may allow your household to shop for a new plan through a Special Enrollment Period. If you choose to enroll in a new plan through a Special Enrollment Period, you’ll need to enroll within 60 days of your Qualified Life Change Event. Learn more about Qualified Life Change Events by visiting [ConnectforHealthCO.com/resources/before-you-buy/when-can-i-buy/](https://connectforhealthco.com/resources/before-you-buy/when-can-i-buy/).

To report changes, log into your PEAK account or call 855-752-6749 or TTY: 855-346-3432. If you do not have a PEAK account, you can create one at [Colorado.gov/PEAK](https://colorado.gov/PEAK).

If you do not report changes about your household, you may have to pay back some or all of your Premium Tax Credit to the IRS when you file your federal income tax return.

Additional information for your household:

If you apply for financial help through Connect for Health Colorado, we assess whether you or members of your household could qualify for Health First Colorado (Colorado’s Medicaid Program) or the Child Health Plan Plus (CHP+) program. This letter informs you which members of your household may qualify for these programs based on our assessment. However, you or members of your household can request a full determination from the State of Colorado on whether they qualify for Health First Colorado or CHP+. Call 855-752-6749 or TTY: 855-346-3432 for questions about financial help available through Connect for Health Colorado.

If members of your household qualify for Health First Colorado or CHP+, but you do not want that coverage, you may choose to enroll in a health insurance plan through Connect for Health Colorado.

- To see plans offered in your area, log into your Connect for Health Colorado account, click on your eligibility summary, and click continue to go to the shopping pages.

Disagree with your determination:

If you disagree with your household's eligibility determination, **you may file an appeal. You must request an appeal of the results on this notice within 60 days from the date of this notice.** You can do this by requesting an informal resolution, a formal hearing or both. You may log into your Connect for Health Colorado® account to see a summary of the information we used for your eligibility determination.

You can request an appeal in one of these four ways

1. Please call the Connect for Health Colorado® Customer Service Center at 855-752-6749 (TTY:855-346-3432) Monday - Friday 8:00a.m. - 6:00p.m.
2. Visit [ConnectforHealthCO.com](https://connectforhealthco.com) and go to "Resources" to download an Appeal Request form. You can upload the completed Appeal Request form to your Connect for Health Colorado® account in "My Documents."
3. Mail or bring your Appeal Request form to:
Office of Appeals
4600 South Ulster Street
Suite 300
Denver CO 80237
4. Fax your Appeal Request Form to 303-322-4217.

You have the right to representation:

You can represent yourself, be represented by a lawyer, or be represented by another person of your choice, such as a friend or family member.

An appeal decision for one household member may change eligibility for other household members.**Expedited Hearing:**

If you think waiting for a hearing might jeopardize your life or health, you have the right to ask for an expedited (faster) hearing. To request an expedited hearing, use the same process for a regular appeal and hearing, but say that you want an "**expedited hearing**" and explain why it should be expedited.

Other information:

The determinations or assessments in this letter were made based upon 45 CFR 155.335 and 45 CFR 155.305.

Connect for Health Colorado® does not discriminate on the basis of race, color, ethnic or national origin, ancestry, age, sex, gender, gender identity and expression, sexual orientation, marital status, religion, creed, political beliefs, or disability in any of its programs, services and activities.

Connect for Health Colorado® can provide aids and services to individuals with disabilities, and language services to individuals whose first language is not English, when needed to ensure equal opportunity and meaningful access to programs, services and activities. Examples of aids and services include, but are not limited to, qualified sign language interpreters, information in other formats (including large print), foreign language interpreters, and information translated into other languages. Aids and services can be provided in a timely manner and free of charge.

To request free aids or services, please call the Connect for Health Colorado® Customer Service Center at 855-752-6749 (TTY:855-346-3432) Monday - Friday 8:00a.m. - 6:00p.m.

To file a discrimination complaint or learn more about this policy, please call 303-590-9640, fax us at 303-322-4217, or contact us by mail at:

Connect for Health Colorado

General Counsel
4600 South Ulster Street
Suite 300
Denver CO 80237

Civil rights complaints can also be filed with the U.S. Department of Health and Human Services Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal available at https://ocrportal.hhs.gov/ocr/cp/complaint_frontpage.jsf or by phone, fax or mail at:

Telephone: 800-368-1019
Fax: 202-619-3818
TDD: 800-537-7697
1961 Stout Street Room 08-148
Suite 5000
Denver CO 80294

Complaint forms are available at <http://www.hhs.gov/civil-rights/filing-a-complaint/index.html>

Sincerely,
Connect for Health Colorado®

You can get this letter in Spanish or in a large print copy or another way that's best for you. Call 855-752-6749 (TTY: 855-346-3432). Puede recibir esta carta en español o en copia impresa con letra grande o de cualquier otra manera que le resulte conveniente. Llame al 855-752-6749 (TTY: 855-346-3432).

Connect for Health Colorado® is Colorado's official health insurance marketplace. Our mission is to increase access, affordability and choice for individuals, families and small employers. Learn more at www.ConnectforHealthCO.com.

CONFIDENTIALITY NOTICE: *This message and its contents are confidential and are intended only for the recipient(s). If you are not an intended recipient and have received this message in error, you may not use, copy, reproduce or further distribute the message. Please inform the sender and delete the message. Thank you.*

Privacy Notice: *Protecting your privacy is very important to us. You can view our Privacy Policy at: <https://connectforhealthco.com/privacy-policy/>.*

Additional Language Assistance

<p>Español / Spanish</p>	<p>Este aviso contiene información importante. Este aviso contiene información importante acerca de su solicitud o cobertura a través de Connect for Health Colorado. Preste atención a las fechas importantes que contiene el aviso. Es posible que deba tomar alguna medida antes de cumplirse determinadas fechas para mantener su cobertura médica o para ayudar con los costos. Tiene derecho a recibir esta información y ayuda en su idioma sin costo alguno. Llame al 855-752-6749.</p>
<p>繁體中文 / Chinese</p>	<p>本通知含有重要的訊息。本通知含有關於您透過Connect for Health Colorado所提出的保險承保申請的重要的訊息。請注意在本通知中所包含的重要的日期。您可能需要在特定的截止日期之前採取行動，才能保留您的健康保險或讓您的醫療費用得到償付。您有權利免費以您的母語得到幫助和訊息。請致電 855-752-6749。</p>
<p>Tiếng Việt / Vietnamese</p>	<p>Thông báo này cung cấp thông tin quan trọng. Thông báo này có thông tin quan trọng về đơn xin nộp hoặc hợp đồng bảo hiểm qua chương trình Connect for Health Colorado. Xin xem ngày then chốt trong thông báo này. Quý vị có thể phải thực hiện theo thông báo đúng thời hạn để duy trì bảo hiểm sức khỏe hoặc được trợ giúp thêm về chi phí. Quý vị có quyền được biết thông tin này và được trợ giúp bằng ngôn ngữ của mình hoàn toàn miễn phí. Xin gọi số 855-752-6749.</p>
<p>한국어 / Korean</p>	<p>본 통지서에는 Connect for Health Colorado를 통한 커버리지에 관한 중요한 정보가 들어 있습니다. 본 통지서에 나와 있는 주요 날짜를 주의 깊게 확인하십시오. 귀하의 건강 커버리지를 계속 유지하거나 비용 지원을 받기 위해서 일정 날짜까지 조치를 취해야 할 필요가 있을 수 있습니다. 귀하는 비용 부담 없이 귀하의 언어로 이러한 정보와 도움을 받을 권리가 있습니다. 855-752-6749번으로 전화하십시오.</p>
<p>Русский / Russian</p>	<p>Настоящее уведомление содержит важную информацию. Это уведомление содержит важную информацию о вашем заявлении или страховом покрытии через Connect for Health Colorado. Обратите внимание на ключевые даты в настоящем уведомлении. Вам, возможно, потребуется принять меры к определенным срокам для сохранения страхового покрытия или помощи с расходами. Вы имеете право на бесплатное получение этой информации и помощь на вашем языке. Звоните по телефону 855-752-6749.</p>
<p>አማርኛ / Amharic</p>	<p>ይህ ማስታወቂያ አስፈላጊ መረጃ ይዟል። ይህ ማስታወቂያ በ Connect for Health Colorado በኩል ስለ ሽፋንዎ ላቀረቡት ጥያቄ አስፈላጊ መረጃ ይዟል። በዚህ ማስታወቂያ ውስጥ ለሚገኙ ቁልፍ ቀናት ትኩረት ይስጡ። የጤናን ሽፋንዎን ለመጠበቅና ለወጪዎችዎ እርዳታ ለማግኘት ከተወሰኑ ቀናት በፊት እርምጃ መውሰድ ሊያስፈልግዎት ይችላል። ይህን መረጃ የማግኘት እና የለምንም ከፍተኛ በቋንቋዎ እርዳታ የማግኘት መብት አለዎት። ወደ 855-752-6749 ይደውሉ።</p>
<p>العربية / Arabic</p>	<p>يحتوي هذا الإشعار على معلومات هامة. يحتوي هذا الإشعار على معلومات هامة بخصوص طلبك للحصول على التغطية التأمينية من خلال Connect for Health Colorado. انتبه للتواريخ الرئيسية الواردة في هذا الإشعار. قد تحتاج لاتخاذ إجراء قبل تواريخ معينة للحفاظ على تغطيتك</p>

	التأمينية الصحية أو للمساعدة في دفع التكاليف. لك الحق في الحصول على هذه المعلومات والمساعدة بلغتك من دون أي تكلفة. اتصل بـ 855-752-6749
Deutsch / German	Diese Benachrichtigung enthält wichtige Informationen. Diese Benachrichtigung enthält wichtige Informationen bezüglich Ihres Antrags auf Krankenversicherungsschutz durch Connect for Health Colorado. Bitte beachten Sie die wichtigen Termine in dieser Benachrichtigung. Möglicherweise müssen Sie bis zu bestimmten Stichtagen handeln, um Ihren Krankenversicherungsschutz aufrechtzuerhalten oder Kostenunterstützung zu erhalten. Sie haben das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Rufen Sie an unter 855-752-6749.
Français / French	Cet avis comprend d'importantes informations sur votre demande de couverture par l'intermédiaire de Connect for Health Colorado. Faites attention aux dates clés figurant dans le présent avis. Vous devrez peut-être intervenir avant certaines dates limites pour maintenir votre couverture de soins de santé ou payer une partie des cotisations. Vous avez le droit d'obtenir gratuitement ces informations et de l'aide dans votre langue. Appelez le 855-752-6749.
नेपाली / Nepali	यो सूचनामा Connect for Health Colorado मार्फत हुने स्वास्थ्य बिमाहरूका लागि तपाईंले गर्ने अनुरोधका बारेमा महत्त्वपूर्ण जानकारी समावेश गरिएका हुन्छन्। यस सूचनामा भएका मुख्य मितिहरूमा ध्यान दिनुहोस्। आफ्नो स्वास्थ्य बिमा पाइरहनु वा आफूले तिर्ने खर्च कम गर्न तपाईंले निश्चित मिति अघि नै प्रक्रिया चाल्नु पर्छ। तपाईंसँग निःशुल्क रूपमा आफ्नै भाषामा जानकारी लिने र सहायता लिने अधिकार हुन्छ। यसका लागि 855-752-6749 मा फोन गर्नुहोस्।
Tagalog	Ang paunawang ito ay naglalaman ng mahalagang impormasyon tungkol sa iyong aplikasyon o coverage sa pamamagitan ng Connect for Health Colorado. Bigyang-pansin ang mga mahalagang petsa dito sa paunawa. Maaaring kailanganin mong magsagawa ng hakbang bago ang ilang mga itinakdang petsa upang mapanatili ang iyong health coverage o tulong sa mga gastos. May karapatan kang makakuha ng ganitong impormasyon at tulong sa iyong wika nang walang gastos. Tumawag sa 855-752-6749.
日本語 / Japanese	この通知には重要な情報が含まれています。この通知には、Connect for Health Colorado の申請または補償範囲に関する重要な情報が含まれています。この通知に記載されている重要な日付をご確認ください。健康保険や有料サポートを維持するには、特定の期日までに行動を取らなければならない場合があります。ご希望の言語による情報とサポートが無料で提供されます。855-752-6749までお電話ください。
Oroomiffa / Cushite / Oromo	Beeksisni kun odeeffannoo barbaachisaa qaba. Beeksisti kun sagantaa yookan karaa Connect for Health Colorado tiin tajaajila keessan ilaalchisee odeeffannoo barbaachisaa qaba. Guyyaawwan murteessaa ta'an beeksisa kana keessatti ilaalaa. Tarii kaffaltiidhaan deeggaramuuf yookan tajaajila fayyaa keessaniif guyyaa dhumaa irratti wanti raawwattan jiraachuu danda'a. Kaffaltii irraa bilisa haala ta'een afaan keessaniin odeeffannoo argachuu fi deeggarsa argachuuf mirga ni qabaattu. Lakkoofsa bilbilaa 855-752-6749 tii bilbilaa.
فارسی / Persian / Farsi	این اعلامیه حاوی اطلاعات مهمی در مورد درخواست شما برای پوشش دهی از طریق Connect for Health Colorado است. به تاریخ های مهم مندرج در این اعلامیه توجه کنید.

	<p>ممکن است لازم باشد قبل از تاریخ‌های خاصی برای حفظ پوشش سلامت یا کمک هزینه‌ها اقدام کنید. شما حق دارید بدون هیچ هزینه‌ای به زبان خود اطلاعات و راهنمایی دریافت کنید. با 855-752-6749 تماس بگیرید.</p>
Polski / Polish	<p>To ogłoszenie zawiera ważne informacje. To ogłoszenie zawiera ważne informacje odnośnie Państwa wniosku o pokrycie polisą ubezpieczeniową Connect for Health Colorado. Prosimy zwrócić uwagę na kluczowe daty zawarte w tym ogłoszeniu. Może zajść konieczność podjęcia w określonym terminie pewnych działań mających na celu zachowanie ubezpieczenia lub uzyskanie pomocy związanej z pokryciem kosztów. Mają Państwo prawo do uzyskania bezpłatnych informacji i pomocy we własnym języku. Prosimy zadzwonić pod numer 855-752-6749.</p>
Bassa	<p>Bo-ɖyi-bèin-bèin nià ke bédé bo kpa-dè bá ni zòò-dèò ɖyi bó koĩn-bàin jè dyiin dé Connect for Health Colorado jè dyie mú. Dè dũu dyi wè bẽ ko ĩmú ɔ mu kpáinɛɛ ni no bo-ɖyi-bèin-bèin nià ke mú. Ɔ jèɛɛ, hwè bé wéó ké bó nyiniɛɛ m̃ m̃ b̃èin kpé bé m̃ ké bó dɛ-dò dyi nyùin bé m̃ ké niĩn dyoò-mú-wódó-wódó nià bó koĩn-bàin jèò ɖyie moò bé m̃ ké gbo-kpá-kpá dò tò dé dɛ-dò tò-tò mú. Kpéò ñi dé m̃ gbo bé m̃ ké bo ñià kɛɛ dyé ɔ kè bé m̃ ké gbo-kpá-kpá tò dé ñi bídí-wùdùò mú bé m̃ ké sɛɛ dɛ-dò dyi péé fɔɔ. Ɖá Nɔbà nià kɛ. 855-752-6749.</p>
Ibo	<p>Okwa a nwere ozi di mkpa gbasara aririo gi maka mkpuchi site na Connect for health Colorado. Lezienụ anya na isi ubochi ndi di na okwa a. I nwere ike ime ihe tupu ubochi ufodu iji dobe mkpuchi ahuike gi ma o bu iji nyere aka na ugwo. I nwere ikike inweta ozi a na enyemaka n asusu gi n efu, kpoo 855-752-6749.</p>
Yoruba	<p>Àkíyèsí yíí ní Ìfítónìlétí Pàtàkì Nínú. Àkíyèsí yíí ní Ìfítónìlétí pàtàkì nípa ìbèèrè rẹ fún àkóso nípasẹ Connect for Health Colorado nínú. Še àkíyèsí àwọn ojọ pàtàkì tí n bẹ nínú àkíyèsí yíí. O lè ní láti gbé àwọn ìgbésẹ̀sáájú àwọn ojọkan pàtò láti šètọ́jú àkóso ìlera rẹ tàbí láti šèrànwọ̀pèlú àwọn ìdíyelé. O ní ẹtọ lati rí ìrànłọ̀wọ̀ àti Ìfítónìlétí yíí gbà ní èdè rẹ láisanwó. Pè sóri 855-752-6749.</p>