Get Covered Illinois℠
The state's official health insurance marketplace

Letter of Explanation – Other Qualifying Life Event

Instructions

Use this form if you qualify for a Special Enrollment Period through Get Covered Illinois due to an error by the marketplace or a marketplace partner, a violation of a Qualified Health Plan (QHP) contract by a Health Plan, or an exceptional circumstances such as a natural disaster or serious medical condition that prevented your enrollment during an eligible enrollment period. Visit https://getcovered.illinois.gov/get-started/specialenrollment.html for more information about Special Enrollment Periods and https://getcovered.illinois.gov/get-started/submitting-documents.html for more information about how to submit this form.

Primary Contact Information

First Name	Middle Initial	Last Name	Suffix
Date of Birth (mm/dd/yyyy)	Application ID (find this number in your online account)		

Attestation

Applicant Name(s): Enter the name(s) of the person or people you are attesting to having a qualifying life event

Please select the qualifying life event (choose one):

- ◯ Error by Marketplace or Marketplace Partner
- ◯ Violation of QHP Contract by Health Plan
- ◯ Exceptional Circumstances

Date of qualifying life event: (mm/dd/yyyy)

Tell us about your situation, including all relevant details:

- I understand that I have 30 days to notify Get Covered Illinois of any change of information in this application. I will report any changes within this time period. I understand that changes in my household size, address or other details might affect my or my household's eligibility for specific benefits. I understand and will notify Get Covered Illinois if my application information changes.
- I acknowledge that Get Covered Illinois will only use the information I provide on this form to determine my eligibility to enroll in coverage through Get Covered Illinois. Get Covered Illinois will keep this information confidential, as required by federal and state law, regulations, and guidance.
- By signing below, I hereby declare under penalty of perjury, pursuant to 28 U.S.C. 1749 and 720 ILCS 5/32-2 that the above information in this form is true and correct based on my personal knowledge.

Signature	Date (mm/dd/yyyy)

Mail this form to:
Get Covered Illinois
Attn: Marketplace Appeals Program
P.O. Box 804058
Chicago, IL 60680

Fax this form to:
Get Covered Illinois
1-888-973-8254

Call the Get Covered Illinois Customer Assistance Center:
1-866-311-1119 (TTY: 711)

Upload this form to your Get Covered Illinois account:
http://enroll.getcovered.illinois.gov/hix/account/user/login

Getting Help in a Language Other than English

If you, or someone you're helping, has questions about Get Covered Illinois, you have the right to get help and information in your language at no cost. To talk to an interpreter, call 1-866-311-1119, TTY 711.

Si usted, o alguien a quien usted está ayudando, tiene preguntas acerca de Get Covered Illinois, tiene derecho a obtener ayuda información en su idioma sin costo alguno. Para hablar con un intérprete, llame al 1-866-311-1119, TTY 711.

Jeśli Ty lub osoba, której pomagasz ,macie pytania odnośnie Get Covered Illinois, masz prawo do uzyskania bezpłatnej informacji i pomocy we własnym języku .Aby porozmawiać z tłumaczem, zadzwoń pod numer 1-866-311-1119, TTY 711.

如果您，或您正在幫助的人，有關於 Get Covered Illinois 方面的問 題，您有權利免費以您的母語得到幫助和訊息。想要跟一位翻譯員通話，請致電 1-866-311-1119, TTY 711。

만약 귀하 또는 귀하가 돕고 있는 어떤 사람이 Get Covered Illinois 에 관해서 질문이 있다면 귀하는 그러한 도움과 정보를 귀하의 언어로 비용 부담없이 얻을 수 있는 권리가 있습니다. 그렇게 통역사와 얘기하기 위해서는 1-866-311-1119, TTY 711 로 전화하십시오.

Kung ikaw, o ang iyong tinutulangan, ay may mga katanungan tungkol sa Get Covered Illinois, may karapatan ka na makakuha ng tulong at impormasyon sa iyong wika ng walang gastos. Upang makausap ang isang tagasalin, tumawag sa 1-866-311-1119, TTY 711.

إن كان لديك أو لدى شخص تساعده أسئلة بخصوص Get Covered Illinois، فلديك الحق في الحصول على المساعدة والمعلومات الضرورية بلغتك من دون اية تكلفة. للتحدث مع مترجم اتصل بـ1-866-311-1119, TTY 711.

Если у вас или лица, которому вы помогаете, имеются вопросы по поводу Get Covered Illinois, то вы имеете право на бесплатное получение помощи и информации на вашем языке. Для разговора с переводчиком позвоните по телефону 1-866-311-1119, TTY 711.

જો તમને અથવા તમે મદદ કરી રહ્યાં છો તેવા કોઈને Get Covered Illinois. વિશે પ્રશ્નો હોય, તો મદદ અને માહિતી મેળવવા માટે તમારું સ્વાગત છે. મદદ તમારી ભાષામાં કોઈપણ ખર્ચ વિના મેળવી શકાય છે. મુદ્દાઓની ચર્ચા કરવા માટે, [અહીં નંબર દાખલ કરો] પર કૉલ કરો.

اگر آپ کسی کی مدد کر رہے ہیں اور آپ کے بارے میں کوئی سوال ہے Get Covered Illinois، تو آپ کو اپنی زبان میں مفت مدد اور معلومات حاصل کرنے کا حق ہے۔ مترجم سے بات کریں۔

ếu quý vị, hay người mà quý vị đang giúp đỡ, có câu hỏi về Get Covered Illinois, quý vị sẽ có quyền được giúp và có thêm thông tin bằng ngôn ngữ của mình hoàn toàn miễn phí. Để nói chuyện với một thông dịch viên, xin gọi 1-866-311-1119, TTY 711.

Se tu o qualcuno che stai aiutando avete domande su Get Covered Illinois, hai il diritto di ottenere aiuto e informazioni nella tua lingua gratuitamente. Per parlare con un interprete, puoi chiamare 1-866-311-1119, TTY 711.

यदि आपको, या आप जिस व्यजति की सहायिा कर रहे हैं, उन्हें इस विषय Get Covered Illinois के बारे में सिाल हैं, िो आपको मुफ्ि में अपनी भाषा में सहायिा दिया िानकारी लेने का अधिकार है। 1-866-311-1119, TTY 711 पर फ़ोन करें

Si vous, ou quelqu'un que vous êtes en train d'aider, a des questions à propos de Get Covered Illinois, vous avez le droit d'obtenir de l'aide et l'information dans votre langue à aucun coût. Pour parler à un interprète, appelez 1-866-311-1119, TTY 711.

Εάν εσείς ή κάποιος που βοηθάτε έχετε ερωτήσεις γύρω απο το Get Covered Illinois , έχετε το δικαίωμα να λάβετε βοήθεια και πληροφορίες στη γλώσσα σας χωρίς χρέωση.Για να μιλήσετε σε έναν διερμηνέα, καλέστε 1-866-311-1119, TTY 711.

Falls Sie oder jemand, dem Sie helfen, Fragen zum Get Covered Illinois haben, haben Sie das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um mit einem Dolmetscher zu sprechen, rufen Sie bitte die Nummer 1-866-311-1119, TTY 711 an.