

Per 45 CFR § 156.285(d)(1)(ii), issuers of QHPs offered through an FF-SHOP are required to notify qualified employers and enrollees when FF-SHOP coverage has been cancelled or terminated for the following reasons: (1) the enrollee is no longer eligible for coverage in a QHP through the Exchange; (2) the enrollee's coverage is being terminated for nonpayment of premiums; (3) the enrollee's coverage is rescinded for fraud or intentional misrepresentation of a material fact in accordance with 45 C.F.R. §147.128; or (4) if a QHP issuer elects not to seek recertification with the Exchange for its QHP. This model language may be used by FF-SHOP issuers when developing these required cancellation and termination notices for FF-SHOP groups and enrollees. These notices must meet the standards set forth in 45 C.F.R. §§ 156.250, 155.230(b), and 155.205(c).

[QHP Issuer Header]

[Employer Contact Full Name]  
[Employer Address]

[Date]

Dear [Employer Contact First Name],

**Important: Your employer group's SHOP health insurance coverage is ending. This notice includes information about next steps for you and your employees.**

This letter includes important information about the health insurance from [QHP Name] you are offering your employees through the Federally-facilitated Small Business Health Options Program (SHOP). Due to [Reason for termination], beginning on [date termination takes effect] your employees covered under [QHP Name] will not have health insurance coverage. We are also notifying your employees about this termination of coverage.

### **How may I reinstate my group's coverage?**

If your coverage has been terminated for non-payment of premium, you may reinstate your group's coverage within 30 days of termination by calling the SHOP Call Center at 1-800-706-7893 (TTY: 711), Monday - Friday, 9 a.m. - 7 p.m. ET. In order to reinstate your coverage with no lapse in coverage, you must 1) pay all back premiums owed, and 2) pay the next month's premium amount owed in full.

### **What happens when my group's coverage ends?**

If the individuals covered under [QHP Name] lose access to health coverage through your business or company, it is important that they get covered from another source. If they do not, they will be fully responsible for covering the cost of any health services they receive after the date their coverage ends. Also, they might owe a penalty when they file their federal income tax return for the year if they have a gap in health coverage of three months or more during the year and don't qualify for an exemption from the requirement to maintain health coverage.

### **Getting new coverage for your employees**

Depending on the reason coverage was terminated, your employees might qualify for a special enrollment period in the SHOP or Individual Marketplace and might be able to enroll in another health insurance plan either through the Marketplace or outside the Marketplace. To help group members learn about their options for obtaining new coverage through the Marketplace, you can direct them to HealthCare.gov or to 1-800-318-2596 (TTY: 1-855-889-4325), available 24 hours a day, 7 days a week. To learn more about options for SHOP coverage, group members should go to HealthCare.gov or call the SHOP Call Center at 1-800-706-7893 (TTY: 711), Monday - Friday, 9 a.m. - 7 p.m. ET.

**What if I think this is an error?**

If you think the information included in this letter is incorrect and you do not think your employer group's coverage should be terminated, inform your agent or broker (if you have one) or [QHP Issuer] right away by calling the helpdesk at 1-xxx-xxx-xxxx, [days and times of helpdesk availability]. To check on the status of your SHOP account, you should also call the SHOP Call Center at 1-800-706-7893 (TTY: 711), Monday - Friday, 9 a.m. - 7 p.m. ET.

Sincerely,

[QHP Issuer Name]

[QHP Issuer Address]

[Insert privacy disclosure language]

[Insert ADA accessibility information]

[Insert limited English proficiency information]