

Attestation Explanations

1. Accuracy of Information

- **Attestation:** I confirm that all the information provided in the application is true and accurate to the best of my knowledge.
 - **Explanation:** This attestation is a legal requirement to ensure the information submitted is correct and reliable for determining eligibility for health coverage and financial assistance. If any false information is provided, even unintentionally, it could lead to consequences such as losing coverage, being required to repay subsidies, or facing legal penalties.
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2. Proof of Eligibility

- **Attestation:** I must provide accurate information for eligibility and may need to provide proof.
 - **Explanation:** The Marketplace relies on self-reported information to determine eligibility but may request additional documentation (e.g., income verification or proof of citizenship) to confirm the accuracy of the data. Failing to provide proof when requested could delay or deny coverage.
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3. Reporting Changes

- **Attestation:** I must inform the Marketplace if I become eligible for other coverage, such as Medicaid, Medicare, CHIP, or a job-based plan.
 - **Explanation:** Eligibility for Marketplace plans and subsidies can change if you gain access to other qualifying health coverage. Reporting these changes helps avoid complications, such as having to repay subsidies or being enrolled in duplicate coverage, which could be costly and legally problematic.
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4. Coverage Termination for Other Qualifying Health Coverage

- **Attestation:** If I am enrolled in a Marketplace plan and later found to have other qualifying health coverage, my Marketplace plan will be terminated automatically.
 - **Explanation:** The Marketplace ensures compliance with federal regulations by automatically ending coverage if you qualify for programs like Medicaid or Medicare. This prevents overlaps and ensures resources are directed toward those who need Marketplace coverage.
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5. Premium Tax Credit Eligibility

- **Attestation:** I understand that I am not eligible for a premium tax credit if I have other qualifying health coverage.
 - **Explanation:** Premium tax credits are designed to help those without access to affordable, qualifying coverage. If you gain access to a job-based plan, Medicaid, or Medicare, the subsidy is no longer available. Misrepresentation could result in having to repay tax credits received during ineligible periods.
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6. Tax Filing Requirements

- **Attestation:**
 - I must file a federal income tax return for the plan tax year.
 - If I'm married at the end of plan year, I must file a joint income tax return with my spouse.
 - No one else will be able to claim me as a dependent.
 - This does not constitute tax advice, and I should consult a tax advisor for tax-related matters.
 - **Explanation:** Premium tax credits are reconciled on your federal tax return based on actual income compared to what was estimated in your application. If you're married, filing jointly is required to qualify for the credits. Consulting a tax advisor ensures compliance and proper management of any tax-related implications.
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7. Marketplace Use of Data

- **Attestation:** I permit the Marketplace to use my income data for up to 5 years to determine eligibility for assistance.
 - **Explanation:** This consent simplifies the renewal process for Marketplace coverage and financial assistance. By allowing the Marketplace to access your data for a set period, you reduce the need for repetitive verifications and ensure consistent eligibility assessments.
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8. Consent to Electronic Notices and Signatures

- **Attestation:** I consent to receive electronic notices and use electronic signatures during enrollment.
- **Explanation:** This streamlines communication with the Marketplace, allowing you to receive important updates, documents, and requests quickly. Electronic signatures ensure the enrollment process is efficient while remaining secure and legally valid.

9. Phone Number Authorization

- **Attestation:** I confirm that I am authorized for the provided phone number and agree to receive marketing calls or messages.
- **Explanation:** This attestation ensures compliance with telecommunication laws and confirms your consent for the Marketplace or its representatives to contact you. This includes reminders, updates about your application, or other related information.

10. Assistance from Authorized Representative

- **Attestation:** Your broker will use my information to complete and submit the Marketplace application on my behalf.
- **Explanation:** If an authorized representative (such as a family member or agent) assists with your application, this attestation acknowledges your permission for them to act on your behalf. This ensures transparency and legal authorization for their role in the process.

11. Changes to My Marketplace Account

- **Attestation:** I know I can make changes to my Marketplace account or by calling the Marketplace Call Center at 1-800-318-2596 (TTY: 1-855-889-4325).
- **Explanation:** Life changes such as income adjustments, household size updates, or new access to health coverage must be reported. This attestation provides you with clear instructions on how to make these updates, ensuring your account information remains accurate.

12. Penalty of Perjury

- **Attestation:** I'm signing this application under penalty of perjury, which means I've provided true answers to all questions to the best of my knowledge. I understand I may be subject to penalties under federal law if I intentionally provide false information.
- **Explanation:** This is a legal requirement to ensure honesty in your application. By signing under penalty of perjury, you agree to the legal implications of providing false information, which could include fines, loss of benefits, or prosecution.