SHOP Marketplace Appeals

If you're a small business owner that applied for coverage in the Small Business Health Options Program (SHOP) Marketplace, you have the right to appeal SHOP Marketplace decisions in 2 cases:

- 1. You got a notice denying you SHOP Marketplace eligibility.
- 2. The SHOP Marketplace didn't make an eligibility determination in a timely manner.

If you're not eligible to participate in the SHOP Marketplace, you'll get a notice explaining how to file an appeal for your specific situation. You have 90 days from the date in the notice to request an appeal.

If your state is running its own SHOP Marketplace, the appeals processes may be different. Refer to your state's SHOP Marketplace for more details. Visit **HealthCare.gov/small-businesses/employers** to find the SHOP Marketplace that serves you.

How to file an appeal

To file an appeal for SHOP Marketplace eligibility, you'll need to fill out and mail in an appeals request form. Visit **Marketplace.cms.gov/applications-andforms/eligibility-appeals-forms.html** to download forms for employers and employees.

Mail your completed SHOP Marketplace appeals form to: Health Insurance Marketplace 465 Industrial Boulevard London, KY 40750-0061

Keep a copy of your appeals form for your records. If you have questions about SHOP Marketplace coverage, call the SHOP Call Center at 1-800-706-7893, Monday – Friday, 9 a.m. – 7 p.m. ET. TTY users should call 711 to reach a call center representative. Agents and brokers helping small employers may also use this number.





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