

Other formats and languages

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact Explore Health at explorehealth@oha.oregon.gov or 855-268-3767 (voice). We accept all relay calls.

Your Rights and Responsibilities

The information in this section lists what the Oregon Health Insurance Marketplace, an office within Oregon Health Authority (OHA) agrees to do for you. These are your “rights.”

It also lists what you agree to do when you apply for or get medical assistance. These are your “responsibilities.”

Please read this form carefully. You can ask an Explore Health Enrollment Partner or Customer Service Representative to explain this form to you. Ask questions if there is something you do not understand.

You agree to do certain things when you (and your family) get financial assistance through Explore Health. You may lose financial assistance or need to pay the government back if you get more than you should. You can minimize the risk of owing money by reporting changes (see below). You will learn this when you file form 8965 with your federal tax return. Any money due back will be added to your federal tax return.

Your rights: What you can expect from Explore Health

- Explore Health will treat you with respect in a fair and polite way.
- You have the right to ask about and apply for any coverage or program available through Explore Health. We may send your information to other services you may qualify for. You have the option to opt out of this information sharing.
- You can ask for confirmation for any form you turn in to an Explore Health Enrollment Partner.
- You may contact us through your Applicant Dashboard, chat, phone, fax, by mail, text message, or email. You can ask to talk with a person in charge.
- You can ask for help to apply, fill out forms, or report changes in your preferred language.
- Explore Health will give you information in a format or language you can understand.
- Explore Health will do its best to meet your needs if you have a disability. Explore Health follows the Americans with Disabilities Act and Section 504 of the Rehabilitation Act.
- You can ask to see statements about you in your household account.
- The information you give Explore Health is kept private. You can view our **Privacy Policy** online at ExploreHealthOR.gov/Privacy and our **Fraud, Waste, and Abuse Policy** online at ExploreHealthOR.gov/FWA.
- You can file an appeal if you disagree with a decision Explore Health made including:
 - Ineligibility for financial assistance
 - How much financial assistance you qualify for
 - Ineligibility for a Special Enrollment Period
 - Ineligibility to enroll in a health or dental plan
 - An Explore Health plan ending
 - Coverage start date

- Denial of coverage reinstatement due to a life change affecting health coverage or savings (e.g., change in income, household size, or coverage status)
- Eligibility decisions due to life changes affecting coverage or savings
- Untimeliness of eligibility determination or notice
- Any other Explore Health eligibility decision not listed above
- An Explore Health Enrollment Partner or Customer Service Representative can help you fill out the appeal form.
- You have 90 days from the Explore Health Eligibility Notice date to file an appeal (95 days for citizenship and immigration issues).

Your responsibilities: What you must do

If you are applying for coverage through Explore Health, you must:

- Give Explore Health true, correct and complete information.
- Give proof of to verify certain things you report if they cannot be verified against federal and state databases.
- Report changes to Explore Health (see below).
- If required, pay your monthly premium to keep your health and/or dental plan(s) active. Premium payments should be made directly to your insurance company.
- Request to end your coverage through Explore Health if you become eligible for other health coverage, including coverage through an employer, the Oregon Health Plan (OHP), Medicare, or VA health coverage.

Reporting changes

If you are found eligible for financial assistance, you must report certain changes that affect you and others who are enrolled in your household. If you don't report changes as required, you may get too much financial help. You may be responsible for paying back some or all the premium tax credit you received.

When approved for financial assistance, your Eligibility Notice tells you more about reporting changes. You should report changes within 30 days to avoid receiving more advance premium tax credits than you are eligible for. You can also find information on [ExploreHealthOR.gov](https://www.explorehealthor.gov) or by logging in to your Applicant Dashboard.

When you report a change, the Explore Health system will let you know if you need to provide verification documents. If the change affects the coverage you are enrolled in, Explore Health will let you know. If you are not sure if you need to report a change, you can ask an Explore Health Enrollment Partner or Customer Service Representative.

Explore Health: Oregon's Health Insurance Marketplace

PO Box 191

Salem, OR 97308

855-268-3767 (Relay calls welcome)

[ExploreHealthOR.gov](https://www.explorehealthor.gov)

