

Name: _____

Date: _____

Appeals

X H A S L Z T C B J B G V N I M J D U F W D V Y
 I P C C E I L I M B H Z D L G A B E O L T S C L
 K R T H V R N T T H E H M P V R X G Q F S O L E
 S E S E E N O I K L A S F L K K O N V G B A E V
 E S K D L O P Z U P L V D N H E A D S E T R A E
 M I B U E I O E A E T F R P J T X I O G J U N L
 N D A L M T D N J F H C I A A P S X O G T C D Y
 U E U E O A Q S S Z I J V A I L R P E S D T E T
 Y N N A C C C H I A N E E I B A O D B P G G S R
 G T T D N I M I I F S E H C T C D E E Q E C K E
 S S I H I F R P E E U S I L V E R P L A N F P V
 S D M E L I J A O L R J M E D I C A I D M Q O O
 R A E R A R B N A I A I Y D A D O S M N X S L P
 P Y L E U E K Y J B N U L T I D E R C X A T I L
 E N Y N N V U J C C C I O Q K H W I N C E K C A
 G Z W C N O I T A R E C R A C N I X E Q P X Y R
 D A P E A F S P E C I A L E N R O L L M E N T E
 A T C A E R A C E L B A D R O F F A G M T E I D
 B N Q L R E S D C E Y Y X D E A D L I N E Z P E
 X X O X O F N I H T L A E H D E T C E T O R P F
 E L I G I B I L I T Y D E T E R M I N A T I O N
 Q D D N H T E N N C A R E U Y T L A N E P X A T
 E V I T A T N E S E R P E R D E Z I R O H T U A
 X A P T C Y E G I N B O U N D C A L L F O R M I

Schedule Adherence Clean Desk Policy Untimely Presidents Day F Drive Silver Plan
 Tax Credit Headset APTC Annual Income Level Incarceration Citizenship Deadline
 Tax Penalty Marketplace ID Protected Health Info Verification Health Insurance ECN
 Special Enrollment Acts ESD Medicaid Tenn Care Authorized Representative Badge
 Inbound Call Form Eligibility Determination Affordable Care Act Federal Poverty Level