Name: _____ Date: _____

Affordable Care Act

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

Federal Poverty Level
Schedule Adherence
Retro Activity
Determination
Citizenship
Deadline
Headset
APTC
Annual Income Level
Inbound Call Form
Presidents Day
Work Station
supervisor
Medicaid
F Drive
ESD
Affordable Care Act
Clean Desk Policy
Marketplace ID
Silver Plan
Tax Credit
Job Aid
Bronze
Special Enrollment
Health Insurance
Incarceration
Tax Penalty
Tenn Care
Invalid
CICQ

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