



STATE OF NEW YORK  
DEPARTMENT OF HEALTH  
P.O. Box 11729  
Albany, NY 12211

## Notice of Adjournment/Dismissal

Notice Date: August 4, 2014

NY State of Health Number: [REDACTED]  
Appeal Identification Number: AP000000000651

[REDACTED]  
[REDACTED]  
[REDACTED]

Dear [REDACTED]

On April 18, 2014, the Marketplace issued an eligibility determination in your case.

On May 16, 2014, you appealed that determination.

The Marketplace scheduled a telephone hearing on your appeal request and on May 28, 2014, sent you a notice to tell you that a Hearing Officer would call you at about 1:00 pm on June 17, 2014.

On June 17, 2014, a Hearing Officer attempted to call the number that you gave the Marketplace but the call was unable to be completed because the number you provided does not accept calls from blocked or unknown callers. We were therefore unable to reach you at the number you provided.

If you provide the Marketplace a phone number where we can reach you within 30 days of this Notice, your hearing will be rescheduled and a new Notice of Hearing will be sent to you.

Failure to provide a contact number within 30 days will result in a dismissal of your appeal.

If you need this information in a language other than English or you need assistance reading this notice, we can help you. Call 1-855-355-5777 (TTY – English: 1-800-662-1220) (TTY – Spanish: 1-877-662-4886).

## **How does this Notice Affect Your Eligibility?**

If you provide a working contact phone number within 30 days, this matter will be rescheduled. If you fail to provide a working number the Marketplace's April 18, 2014 eligibility determination will remain in effect.

## **Appeal Identification Number**

When communicating with the Marketplace about this appeal, please refer to the Appeal Identification Number at the top of this notice.

## **How to Contact the Marketplace**

You can contact us in any of the following ways:

- By calling the Customer Service Center at 1-855-355-5777
- By mail at:  
NY State of Health Appeals  
P.O. Box 11729  
Albany, NY 12211
- By fax: 1-855-900-5557

## **Legal Authority**

We are sending you this notice in accordance with Federal regulation 45 CFR § 155.530.

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