

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

Notice of Decision

Decision Date: August 18, 2015

NY State of Health Number:

Appeal Identification Number: AP00000001794



Dear ,

On March 26, 2015 your spouse appeared by telephone at a hearing on your appeal of NY State of Health Marketplace's December 22, 2014 eligibility determination.

The enclosed Decision, rendered after that hearing, is issued by the Appeals Unit of NY State of Health.

If you have questions about your Decision, you can contact us by:

- Calling the Customer Service Center at 1-855-355-5777
- Sending Mail to:

NY State of Health Appeals P.O. Box 11729 Albany, NY 12211

Sending a Fax to 1-855-900-5557

When contacting NY State of Health about your appeal and/or the Decision, please refer to the Appeal Identification Number at the top of this notice.

Legal Authority

We are sending you this notice in accordance with Code of Federal Regulation (CFR) 45 CFR § 155.545(b).



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

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Issue

The issue presented for review by the Appeals Unit of NY State of Health is:

Did the Marketplace properly determine that your children's coverage through Child Health Plus ended on December 31, 2014?

Procedural History

On October 20, 2013, the Marketplace issued a notice confirming that you had chosen to receive all information from New York State of Health electronically.

On July 7, 2014, the Marketplace received your modified application for health insurance for your children, including your newborn daughter, and prepared a preliminary eligibility determination in your case. It stated that your children were presumptively eligible to enroll in health insurance through Child Health Plus with a \$60.00 monthly premium per child, effective August 1, 2014. According to the preliminary determination, this eligibility was projected to end on September 30, 2014. This preliminary determination was based on an annual household income of \$84,454.72, and indicated that you would need to provide additional information in order for this eligibility to be finalized.

On July 8, 2014, the Marketplace issued an enrollment confirmation notice, which stated that your children's Child Health Plus (CHP) plan selection with UnitedHealthcare Community Plan could begin as early as August 1, 2014 if you paid the first month's premium. It requested that you provide proof of your (income by October 8, 2014. It did not request documentation regarding your wife's income.

On September 4, 2014, the Marketplace issued a notice stating that although your children were presumptively eligible to enroll through Child Health Plus, you would need to submit documentation of your () income for the last four weeks, within 90 days, or your family's eligibility might end. The notice did not request documentation regarding your spouse's income; instead, it asked only for income documentation.

On November 6, 2014, the Marketplace issued a notice that stated it was time to renew your health insurance coverage for 2015. The notice stated that, based on information from federal and state sources, the Marketplace could not make a decision about whether or not your children qualified for financial help paying for their health coverage. You were asked to update the information in your NY State of Health account by December 15, 2014 or the financial help you were receiving might end.

On November 27, 2014, the Marketplace issued an eligibility redetermination notice based on updated information received by the Marketplace on October 9, 2014. It stated that your children are conditionally eligible to enroll through Child Health Plus with a \$60.00 monthly premium per child effective November 1, 2014. You were directed to provide documentation of income for yourself and your two children by December 10, 2014. Your wife was again not mentioned.

On December 22, 2014, the Marketplace issued an eligibility redetermination notice that stated your children are not eligible for Child Health Plus because you had not responded to the renewal notice and had not completed your renewal within the required timeframe. It did not provide a date as to when your children's coverage would end.

On December 25, 2014, the Marketplace issued a disenrollment notice, which stated that your children's coverage with UnitedHealthcare Community Plan would end effective December 31, 2014 because they were no longer eligible to enroll in health insurance through New York State of Health.

On February 11, 2015, the Marketplace received your updated application for health insurance for your children.

On February 12, 2015, the Marketplace issued an eligibility redetermination notice that stated your children were newly conditionally eligible to enroll through Child Health Plus with a \$60.00 monthly premium per child effective March 1, 2015. This determination was based on a household income of \$84,000.00. You were again directed to produce proof of income for only yourself and your children.

Also on February 12, 2015, the Marketplace issued an enrollment confirmation notice, which stated that your children's Child Health Plus plan selection with

UnitedHealthcare Community Plan could begin as early as March 1, 2015 if you pay the first month's premium.

On February 15, 2015, you spoke with the Marketplace's Account Review Unit and appealed your children's disenrollment from their health insurance coverage through Child Health Plus effective December 31, 2015.

On March 16, 2015, the Marketplace issued an eligibility redetermination notice that stated your children are eligible to enroll in health coverage through a full price Child Health Plus plan or Child-Only qualified health plan effective April 1, 2015. This determination was based on a household income of \$96,000.00.

On March 26, 2015, you had a telephone hearing with a Hearing Officer from the Marketplace's Appeals Unit. At the hearing, your spouse appeared on your behalf. The record was developed during the hearing and closed at the end of the hearing.

On April 10, 2015, the Marketplace issued a notice, for the first time, requesting information regarding your wife's income.

Findings of Fact

A review of the record supports the following findings of fact:

- 1) You testified that when you initially applied for health insurance through the Marketplace for your children, you were informed that your children's Child Health Plus enrollment would be effective for one year from the date of their enrollment.
- 2) Notices sent to you indicated that your children's eligibility was presumptive only, and that you needed to send in proof of income. However, no notices were sent to you until April 10, 2015, advising you that it was your wife's income that required documentation.
- The record reflects that your children were enrolled in UnitedHealthcare Community Plan through Child Health Plus effective August 1, 2014. The Marketplace system further reflects that your children's enrollment with UnitedHealthcare Community Plan began on August 1, 2014, and was effective until July 31, 2015.
- 4) You testified that you re-applied for health insurance through the Marketplace for your children in July 2014 after your daughter was born on School You further testified that you enrolled your children in UnitedHealthcare Community Plan and your Marketplace

- account reflected that your children's coverage was effective from August 1, 2014 to July 31, 2015.
- 5) You testified, and provided evidence, that you paid your children's health insurance premiums for January and February 2015 (Appellant's Exhibit 1, March 26, 2015).
- 6) You testified that you were not aware that your children's coverage was terminated until you took your daughter to a doctor's appointment January 2015 and received a bill for the services in February 2015.
- 7) You testified that you spoke with your children's health insurance provider, who confirmed that their coverage was cancelled. You further testified they acknowledged that your insurance premium payments were deposited and credited to your account, but your children remained uninsured.
- 8) You testified that you did not receive the renewal notices from the Marketplace, nor did you receive email alerts that you had notices available to review in your Marketplace account inbox.
- You are requesting the Marketplace reinstate your children's coverage with UnitedHealthcare Community Plan for the months of January and February 2015.
- A review of all the viewable documents in your Marketplace accounts reveals no request on the part of the Marketplace for you to submit income documentation for your spouse, until April 10, 2015.

Conflicting evidence, if any, was considered and found to be less credible than the evidence noted above.

Applicable Law and Regulations

Child Health Plus

A child who meets the eligibility requirements for Child Health Plus (CHP) may be eligible to receive a subsidy payment if the child resides in a household with a household income at or below 400% of the federal poverty level (FPL) (New York Public Health Law (PHL) § 2511(2)(a)(iii)). To be eligible to enroll in CHP with subsidy payments, a child must not be "eligible for medical assistance"; that is, must not be eligible for Medicaid (NY Public Health Law § 2511(2)(b)).

The "period of eligibility" for CHP is "that period commencing on the first day of the month during which a child is an eligible child and enrolled or recertified for

enrollment on an annual basis based on all required information and documentation and ending on the last day of the twelfth month following such date," unless the CHP premiums are not timely paid or child no longer resides in New York State, gains access to or obtains other health insurance coverage, or becomes eligible for Medicaid (NY Public Health Law [PHL] § 2510(6)).

Legal Analysis

The issue is whether the Marketplace properly determined that your children were not eligible for Child Health Plus (CHP) as of December 22, 2014.

Generally, the Marketplace may redetermine a child's eligibility for CHP only once every 12 months, and no more frequently than once every twelve months; but that rule is applicable only once your children's eligibility determination has been finalized. In the present case, your children's eligibility was only presumptive, pending production of income documentation.

However, in the present case, the question causing the presumptive eligibility determination was proof of your wife's income. The Marketplace never informed you that documentation of her income was needed until April 10, 2015.

When the Marketplace did request more proof of income, it specifically referred only to income, which you had already submitted.

Additionally, you credibly testified that you did not receive any electronic notices warning you that notices had been posted to your Marketplace account.

Therefore, we find that you did not receive adequate notice that your wife's income documentation was needed and that it was reasonable for you to rely on the notices sent to you that repeatedly and specifically requested only your () income documentation, which you repeatedly sent in. Your children's eligibility for health insurance through CHP should have continued, without interruption.

Your children's enrollment in CHP should have continued without interruption and you are eligible for reimbursement for any medical bills incurred during January and February 2015 due to the improper termination from CHP coverage on December 31, 2014. The December 22, 2014 eligibility determination is RESCINDED

Your case is being referred back to the Marketplace to correct this error.

Decision

The December 22, 2014 eligibility determination is RESCINDED.

Your case is REMANDED to the Marketplace to reinstate your children's enrollment with UnitedHealthcare Community Plan through CHP for the remainder of their previous CHP eligibility year effective January 1, 2015, and to address the issue of reimbursement for medical expenses.

Effective Date of this Decision: August 18, 2015

How this Decision Affects Your Eligibility

Your children's CHP coverage began on August 1, 2014 and continued to be effective as of January 1, 2015.

You are eligible for reimbursement for any medical bills incurred during January and February 2015 due to the improper termination from CHP coverage on December 31, 2014, and your case will be returned to the Marketplace to address this issue.

If You Disagree with this Decision (Appeal Rights)

This Decision is final unless you submit an appeal request to U.S. Department of Health and Human Services or bring a lawsuit under New York Civil Practice Law and Rules, Article 78.

You may bring a lawsuit on any Appeals Unit decision in New York State court in accordance with Article 78 of the New York Civil Practice Law and Rules. This must be done within four months after the date of the Decision Date, which appears on the first page of this Decision.

Additionally, Appeals Unit decisions on issues involving eligibility for qualified health plans, advance premium tax credits, and cost-sharing reductions may be appealed to the U.S. Department of Health and Human Services. This must be done within 30 days of the date of the Decision Date, which appears on the first page of this Decision (45 CFR § 155.520(c))

If you wish to be represented by an attorney in bringing an outside appeal and do not know how to go about getting one, you may contact legal resources available to you. You may, for example, contact the local County Bar Association, Legal Aid, or Legal Services.

If You Have Questions about this Decision (Customer Service Resources):

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

Summary

The December 22, 2014 eligibility determination is RESCINDED.

Your case is REMANDED to the Marketplace to reinstate your children's enrollment with UnitedHealthcare Community Plan through CHP for the remainder of their previous CHP eligibility year effective January 1, 2015, and to address the issue of reimbursement for medical expenses.

Your children's CHP coverage began on August 1, 2014 and continued to be effective as of January 1, 2015.

You are eligible for reimbursement for any medical bills incurred during January and February 2015 due to the improper termination from CHP coverage on December 31, 2014, and your case will be returned to the Marketplace to address this issue.

Legal Authority

We are sending you this notice in accordance with federal regulation 45 CFR § 155.545(a).

A Copy of this Decision Has Been Provided To:

