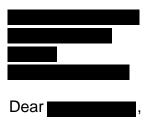


STATE OF NEW YORK DEPARTMENT OF HEALTH P.O. Box 11729 Albany, NY 12211

#### **Notice of Decision**

Decision Date: July 3, 2015

NY State of Health Number: AP000000002006



On April 22, 2015, you appeared by telephone at a hearing on your appeal of NY State of Health Marketplace's March 6, 2015 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 Federal regulation 45 CFR § 155.545(b).

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).

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

**Decision** 

Decision Date: July 3, 2015

NY State of Health Number:

Appeal Identification Number: AP00000002006



#### Issue

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

Did the Marketplace properly determine that you were not eligible for a special enrollment period to enroll in a qualified health plan as of March 6, 2015?

## **Procedural History**

The Marketplace received your application for health insurance on February 10, 2015.

On February 11, 2015, the Marketplace issued an eligibility determination notice stating that you are eligible to receive up to \$207.00 of advance premium tax credits and cost sharing reductions, if you select a silver-level plan, effective March 1, 2015.

On March 2, 2015, you modified your Marketplace Account. The following day, the Marketplace issued an eligibility determination notice stating that you are eligible to receive up to \$322.00 of advance premium tax credits and cost sharing reductions, if you select a silver-level plan, effective April 1, 2015.

On March 5, 2015, you updated your Marketplace Account. The following day, the Marketplace issued an eligibility determination notice stating that you are eligible to receive up to \$322.00 of advance premium tax credits and cost sharing reductions, if you select a silver-level plan, effective April 1, 2015. The notice also stated that you do not qualify to select a health plan outside of the open enrollment period.

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).

On March 11, 2015, you spoke to the Marketplace Account Review Unit and requested to appeal your denial of a special enrollment period.

On April 22, 2015, you had a telephone hearing with a Hearing Officer from the Marketplace's Appeals Unit. The record was developed during the hearing and closed at the end of the hearing.

#### **Findings of Fact**

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

- 1. You are applying for health insurance through the Marketplace for yourself only.
- 2. You testified that you were enrolled in an employer-sponsored insurance plan until December 31, 2014.
- 3. On February 10, 2015, the Marketplace determined that you were eligible to receive up to \$207.00 of advance premium tax credits and cost sharing reductions, if you select a silver-level plan (2/11/2015 Marketplace notice).
- 4. You testified that you travelled to the 2015, for approximately a month, because of a death in your family.
- 5. You testified that you were unable to enroll in a health insurance plan in the because of the quality of the internet service.
- 6. You testified that you did not know what the enrollment deadline was for 2015 health insurance coverage.
- 7. You testified that you waited until you returned to the United States to enroll in a health plan. You contacted the Marketplace to enroll in a health plan and was informed that the open enrollment period had lapsed.

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

# Applicable Law and Regulations

The Marketplace must provide an annual open enrollment period during which qualified individuals may enroll in a qualified health plan (QHP) and enrollees may change QHPs (45 CFR § 155.410(a)). The open enrollment period for the benefit year beginning on January 1, 2015 during which a qualified individual may enroll in a QHP and enrollees may change QHPs begins on November 15, 2014 and extends through February 15, 2015 (45 CFR § 155.410(e)).

However, the open enrollment period was extended to February 28, 2015 for individuals who took steps to apply for coverage on or before the February 15, 2015 deadline, but were unable to complete the enrollment process (Press Release: NY State of Health Implements 'Waiting in Line' Provision Ahead of February 15 Open Enrollment Deadline,

http://info.nystateofhealth.ny.gov/news/press-release-ny-state-health-implements-%E2%80%98waiting-line%E2%80%99-provision-ahead-february-15-open).

After each open enrollment period ends, the Marketplace provides special enrollment periods to qualified individuals. During a special enrollment period, a qualified individual may enroll in a QHP and an enrollee may change to another QHP. A special enrollment period may be permitted when one of the following triggering events occurs:

- 1) The qualified individual or his or her dependent
  - loses health insurance considered to be minimum essential coverage
  - ii) is enrolled in a non-calendar-year health insurance policy that will expire in 2014, even if they have the option to renew the policy
  - iii) loses pregnancy-related coverage
  - iv) loses medically needy coverage,
- 2) The qualified individual gains a dependent or becomes a dependent through marriage, birth, adoption, placement for adoption, or placement in foster care,
- 3) The qualified individual or his or her dependent, who was not previously a citizen, national, or lawfully present individual gains such status,
- 4) The qualified individual's or his or her dependent's, enrollment or nonenrollment in a QHP is unintentional, inadvertent, or erroneous and is the result of the error, misrepresentation, or inaction of an officer, employee, or agent of the Exchange or HHS, or its instrumentalities as evaluated and determined by the Exchange,
- 5) The enrollee or dependent adequately demonstrates to the Exchange that the QHP in which he or she is enrolled substantially violated a material provision of its contract in relation to the enrollee,

- The enrollee or enrollee's dependent is newly eligible or ineligible for advance payments of the premium tax credit, or change in eligibility for cost-sharing reductions,
- 7) The qualified individual, enrollee, or their dependent, gains access to new QHPs as a result of a permanent move,
- 8) The qualified individual who is an Indian may enroll in a QHP or change from one QHP to another one time per month,
- 9) The qualified individual or enrollee, or their dependent, demonstrates to the Exchange, in accordance with guidelines issued by HHS, that the individual meets other exceptional circumstances as the Exchange may provide, or
- 10) A qualified individual or enrollee, or his or her dependents, was not enrolled in QHP coverage or is eligible for but is not receiving advance payments of the premium tax credit or cost-sharing reductions as a result of misconduct on the part of a non-Exchange entity providing enrollment assistance or conducting enrollment activities

(45 CFR § 155.420(d)).

Unless stated otherwise, a qualified individual has 60 days from the date of a triggering event to select a QHP (45 CFR § 155.420(c)).

# Legal Analysis

The issue under appeal is whether or not the Marketplace correctly determined that you were not eligible for a special enrollment period on March 5, 2015.

Federal regulations provide that a qualified individual has 60 days from the date of a triggering event to select a qualified health plan (QHP) in the Marketplace.

The Marketplace provided an open enrollment from November 15, 2014 until February 15, 2015 or February 28, 2015, if you had taken the necessary steps to apply for coverage on or before the February 15, 2015 deadline, but were unable to complete the enrollment process. The record shows that you did not enroll in a health during the open enrollment period by February 15, 2015 or February 28, 2015.

Once the annual open enrollment period ends, a health plan enrollee must qualify for a special enrollment period in order to enroll in a health plan offered in the Marketplace.

Losing your health insurance coverage as of December 31, 2014 was a triggering event that qualified you for a 60-day special enrollment period. The special enrollment period began on the date of your triggering event. Sixty days from December 31, 2014, that 60-day period expired on March 1, 2015.

You testified that you travelled to the provided in February 2015, for approximately a month, because of a death in your family. However, you were unable to enroll in a health insurance plan while in the because of the quality of the internet service. Therefore, you waited until you returned to the United States to enroll in a health plan. By the time you contacted the Marketplace to enroll in a health plan, you were informed that the open enrollment period had lapsed.

The facts as set out in the record do not suggest that any other triggering event described in 45 CFR § 155.420(d) has occurred.

Therefore, the Marketplace's determination to deny a special enrollment period is AFFIRMED.

#### Decision

The Marketplace's March 5, 2015 notice of eligibility determination insofar as stating that you do not qualify for a special enrollment period is AFFIRMED.

Effective Date of this Decision: July 3, 2015

# **How this Decision Affects Your Eligibility**

This decision does not change your eligibility.

You did not qualify for a special enrollment period after March 1, 2015.

# 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 Marketplace's March 5, 2015 notice of eligibility determination insofar as stating that you do not qualify for a special enrollment period is AFFIRMED.

This decision does not change your eligibility.

You did not qualify for an additional special enrollment period after March 1, 2015.

# **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

