



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

## Notice of Decision

Decision Date: November 16, 2015

NY State of Health Number: [REDACTED]  
Appeal Identification Number: AP000000002804

[REDACTED]

Dear [REDACTED]

On July 8, 2015, you appeared by telephone at a hearing on your appeal of NY State of Health Marketplace's May 3, 2015 eligibility determination and May 4, 2015 disenrollment notice.

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).

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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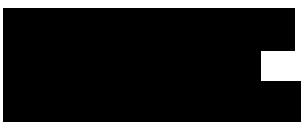


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## Decision

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## Issues

The issues presented for review by the Appeals Unit of NY State of Health are:

Did the Marketplace properly determine that you and your spouse were no longer eligible to enroll in a qualified health plan through the Marketplace, effective May 31, 2015?

Did the Marketplace properly disenroll you, your spouse and your four children from coverage under your platinum-level qualified health plan effective May 31, 2015?

## Procedural History

On December 10, 2014, the Marketplace issued an eligibility determination notice stating that you and your spouse were conditionally eligible to enroll in a qualified health plan (QHP) at full cost, effective January 1, 2015. The notice requested that you provide documentation confirming citizenship status for you and your spouse before March 11, 2015. Your four children were also found eligible to enroll in a QHP, without conditions, at full cost, effective January 1, 2015.

On December 15, 2014, the Marketplace issued a notice confirming your family's enrollment in platinum-level QHP, with coverage beginning January 1, 2015. This notice also requested that you provide documentation confirming citizenship status for you and your spouse before March 11, 2015.

On May 3, 2015, the Marketplace issued a notice of eligibility redetermination stating that you and your spouse were no longer eligible to enroll in health

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insurance through the Marketplace because you had not confirmed citizenship status for you or your spouse by providing the necessary documentation. Eligibility for coverage for you and your spouse ended effective May 31, 2015.

On May 4, 2015, the Marketplace issued a notice stating that enrollment in the platinum-level QHP for you, your spouse, and your four children would be terminated effective May 31, 2015.

On May 8, 2015, the Marketplace received copies of U.S. Passports for you and your spouse.

On that same date, the Marketplace received a revised application.

Also on May 8, 2015, you spoke with the Marketplace's Account Review Unit and appealed the May 3, 2015 eligibility determination and May 4, 2015 disenrollment notice.

On May 9, 2015, the Marketplace issued an eligibility redetermination notice stating that you and your spouse were conditionally eligible to purchase a QHP at full cost, effective June 1, 2015, pending the receipt before August 6, 2015 of documentation confirming citizenship status for you and your spouse. Your four children were also found eligible, without conditions, to enroll in a QHP at full cost, effective June 1, 2015.

On May 13, 2015, the Marketplace issued an additional eligibility redetermination notice stating that you, your spouse and your four children were eligible, without condition, to enroll in a QHP at full cost, effective June 1, 2015.

On May 17, 2015, the Marketplace received a further revised application.

On May 18, 2015, the Marketplace issued an additional eligibility redetermination notice stating that you, your spouse, and your four children were eligible, without conditions, to enroll in a QHP at full cost, effective July 1, 2015. The notice also stated that your family qualified to select a health plan outside of the open enrollment period.

Also on May 18, 2015, the Marketplace issued an enrollment notice confirming your family's enrollment in a platinum-level QHP as of May 17, 2015, with coverage beginning July 1, 2015.

On July 8, 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 support the following findings of fact:

- 1) You testified that you received the Marketplace's notice requesting documentation confirming citizenship status for you and your spouse.
- 2) You testified that you attempted to upload copies of Certificates of Naturalization for you and your spouse to the Marketplace in December and January 2015, but that this attempt to provide documents may have failed because the file size was too large.
- 3) You testified that you made no further attempts to provide the citizenship documents prior to March 12, 2015.
- 4) There is no evidence in the record that the Marketplace received your citizenship documentation before March 12, 2015.
- 5) You, your spouse, and your four children were disenrolled from coverage under the platinum-level QHP effective May 31, 2015.
- 6) You submitted a copies of U.S. Passports for you and your spouse to the Marketplace on May 8, 2015.
- 7) You, your spouse, and your children were found eligible to reenroll in a health on May 17, 2015, and you reenrolled in the platinum-level QHP that same day.
- 8) Coverage for you, your spouse, and your family resumed effective July 1, 2015.
- 9) You are seeking reinstatement of your health insurance coverage for the month of June 2015.

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

## Applicable Law and Regulations

### Citizenship and Immigration Status

To enroll in a qualified health plan through the Marketplace, an applicant must be a citizen or national of the United States, or a non-citizen lawfully present in the United States and reasonably expecting to become a citizen or remain a lawfully

present noncitizen for the entire period for which enrollment is being sought (45 CFR § 155.305(a)(1)).

The Marketplace must verify or obtain information in order to determine that an applicant is eligible for enrollment in a qualified health plan, including the certification of citizenship, status as a national, or lawful presence (45 CFR § 155.315(a), (c)).

If an applicant attests to citizenship, status as a national, or lawful presence, and the Marketplace is unable to verify such attestation, the Marketplace must provide the applicant 90 days, from the date the notice of inconsistency is received by the applicant, to provide satisfactory documentary evidence. Notice is considered to have been received five days after the date on the notice, unless the applicant demonstrates that he or she did not receive the notice within the five-day period. (45 CFR § 155.315(c)(3)).

## **Legal Analysis**

The first issue under review is whether the Marketplace properly determined that you and your spouse were no longer eligible to enroll in a qualified health plan through the Marketplace, effective May 31, 2015.

The Marketplace is required to determine whether individuals are eligible to enroll in coverage through the Marketplace, and must confirm, among other things, that their citizenship status is satisfactory.

If the Marketplace cannot verify an individual's citizenship status, it must provide the individual a period of 90 days, from the date notice is received, to resolve the inconsistency. For purposes of verifying citizenship, notice is considered received five days after the date on the notice.

In the eligibility determination issued on December 10, 2014, you were advised that eligibility for you and your spouse was only conditional, and that you needed to confirm your citizenship status before March 12, 2015.

The record reflects that the Marketplace did not receive the requested citizenship documentation before the deadline.

If the Marketplace remains unable to verify the inconsistency after the 90 day period ends, then it must determine the applicant's eligibility based on the information available in the data sources.

Since the requested citizenship documentation was not received within the 90-day period, the Marketplace was required to redetermine your eligibility without verification of your citizenship status. As a result, the Marketplace properly

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determined that you and your spouse could not remain enrolled in a qualified health plan through NY State of Health effective May 31, 2015 because you had not provided the information requested by the Marketplace.

Therefore, the Marketplace's May 3, 2015 eligibility determination is correct and is **AFFIRMED**.

The credible evidence of record reflects that you provided copies of you and your spouse's U.S. Passport on May 8, 2015. Since you and your spouse's eligibility already been redetermined and your citizenship status verified as of May 18, 2015, there is no need to return your case to the Marketplace for a further redetermination.

The second issue under review is whether the Marketplace properly disenrolled your entire family from their coverage effective May 31, 2015.

As a result of the May 3, 2015 eligibility determination, affirmed by this Decision, you and your spouse were found no longer eligible to enroll in a qualified health plan through the Marketplace, effective May 31, 2015. Accordingly, you and your spouse were properly disenrolled from your coverage under the platinum level QHP effective May 31, 2015.

However, since the December 10, 2014 eligibility determination stated that each of your children were eligible to enroll in a QHP without the condition placed upon you or your spouse, the record does not support the termination of their coverage as of May 31, 2015.

We, therefore, find that the May 4, 2015 disenrollment notice is **MODIFIED** solely to reflect that each of the children's coverage terminated June 30, 2015, in order to continue their coverage uninterrupted until they were reenrolled in the platinum-level QHP as of July 1, 2015, along with you and your spouse.

## **Decision**

The May 3, 2015 eligibility determination is **AFFIRMED**.

The May 4, 2015 disenrollment notice is **MODIFIED** solely to reflect that each of the children's coverage terminated June 30, 2015, in order to continue their coverage uninterrupted until they were reenrolled in the platinum-level QHP as of July 1, 2015, along with you and your spouse, as reflected in the May 18, 2015 eligibility determination.

Your case is **RETURNED** to the Marketplace to restore your children's coverage for the month of June 2015.

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**Effective Date of this Decision:** November 16, 2015

## **How this Decision Affects Your Eligibility**

You and your spouse's coverage under the platinum-level QHP ended effective May 31, 2015.

The Marketplace will restore your children's coverage under the platinum-level QHP for the month of June 2015 so that it continues in effect, without interruption.

## **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:

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P.O. Box 11729

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Albany, NY 12211

- By fax: 1-855-900-5557

## **Summary**

The May 3, 2015 eligibility determination is **AFFIRMED**.

The May 4, 2015 disenrollment notice is **MODIFIED** solely to reflect that each of the children's coverage terminated June 30, 2015, in order to continue their coverage uninterrupted until they were reenrolled in the platinum-level QHP as of July 1, 2015, along with you and your spouse, as reflected in the May 18, 2015 eligibility determination.

You and your spouse's coverage under the platinum-level QHP ended effective May 31, 2015.

The Marketplace will restore your children's coverage under the platinum-level QHP for the month of June 2015 so that their coverage continues in effect, without interruption.

## **Legal Authority**

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

**A Copy of this Decision Has Been Provided To:**

