



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

## Notice of Decision

Decision Date: November 24, 2015

NY State of Health Number: [REDACTED]  
Appeal Identification Number: AP000000002903

[REDACTED]

Dear [REDACTED],

On July 10, 2015, your spouse, [REDACTED], appeared by telephone at a hearing on your appeal of NY State of Health Marketplace's April 9, 2015 enrollment confirmation 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 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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## Decision

Decision Date: November 24, 2015

NY State of Health Number: [REDACTED]  
Appeal Identification Number: AP000000002903

[REDACTED]

## Issue

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

Did the Marketplace properly determine that [REDACTED] enrollment in UnitedHealthcare of New York, Inc. should be effective June 1, 2014?

## Procedural History

The Marketplace received multiple applications for your household on March 10, 2014. In the last of the applications submitted on this date, you attested to being married, that [REDACTED] was your domestic partner, that you would file your 2014 taxes jointly with [REDACTED], that you would claim no dependents, and that her expected yearly income for 2014 was \$8,163.00 and your expected income was \$5,980.00.

In response to the last application filed on March 10, 2014, on March 13, 2014, the Marketplace issued an eligibility determination notice stating, in relevant part, that [REDACTED] was eligible for Medicaid effective March 1, 2014. This notice advised you that while your spouse's Medicaid coverage would begin March 1, 2014, she must also choose a health plan soon or one would be chosen for her.

On April 23, 2014, the Marketplace received a revised application.

On April 30, 2014, the Marketplace issued a notice confirming that as of April 23, 2014, UnitedHealthcare of New York, Inc. had been selected for your spouse's coverage. The notice stated that her insurance through Medicaid would begin

April 1, 2014 and that her enrollment through UnitedHealthcare of New York, Inc. would begin June 1, 2014.

On May 13, 2015, you spoke to the Marketplace's Account Review Unit and appealed the enrollment confirmation notice insofar as it began your spouse's coverage under your UnitedHealthcare of New York, Inc. on June 1, 2014, rather than May 1, 2014.

On July 10, 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**

- 1) On March 13, 2014, your spouse was found eligible for Medicaid based on the information contained in your Marketplace application. An eligibility determination notice was issued that same day stating that your spouse's Medicaid coverage would begin on March 1, 2014, but also advised her to select a Medicaid Managed Care (MMC) plan soon or one would be chosen for her.
- 2) Your spouse testified that when she was found eligible for Medicaid through the Marketplace on March 13, 2014, she believed that she had selected an MMC plan that same day.
- 3) The record reflects that on April 23, 2014, UnitedHealthcare of New York, Inc., was selected for your spouse's MMC plan coverage.
- 4) On April 30, 2014, the Marketplace issued a notice advising you that your Medicaid coverage began on April 1, 2014 and that the MMC would take effect on June 1, 2014.
- 5) Your spouse testified that a Marketplace representative advised her that your MMC coverage would be effective April 1, 2014.
- 6) Your spouse testified that she wanted her coverage under UnitedHealthcare of New York, Inc. to take effect on May 1, 2014, rather than June 1, 2014, to assist in paying approximately \$30,000.00 in medical expenses incurred by going to the emergency room in May 2014. Your spouse further testified that backdating was necessary since the hospital does not accept fee-for-service Medicaid.

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

## **Applicable Law and Regulations**

An individual is eligible for fee-for-service Medicaid effective on the first day of the month if an individual was eligible any time during that month (42 CFR § 435.915(b)).

Medicaid Managed Care (MMC) plan enrollments received on or before the fifteenth day of the month are effective the first day of the following month. Enrollments received after the fifteenth day of the month are effective the first day of the second following month (Medicaid Managed Care Model Contract (Appendix H-6(b)(ii) & (iii), effective 3/1/2014 – 2/28/2019; see, §1115 Soc. Sec. Act; N.Y. Soc. Serv. Law §364-j(1)(c); 18 NYCRR 360-10.3(h)).

## **Legal Analysis**

The issue is whether the Marketplace properly determined that your spouse's enrollment in her Medicaid Managed Care (MMC) plan was effective June 1, 2014.

The date on which a MMC plan can take effect depends on the day a person selects the plan for enrollment.

A plan that is selected between the sixteenth day of the month and the end of the month goes into effect on the first day of the second following month.

The record reflects that your spouse's MMC plan was selected on April 23, 2014, so it must take effect on the first day of the second following month after April 2014; that is, on June 1, 2014.

While you testified that a Marketplace representative advised you that your MMC coverage would be effective April 1, 2014, you offered no evidence to corroborate that testimony.

Therefore, the April 30, 2014 enrollment confirmation notice stating that your spouse's MMC coverage would take effect on June 1, 2014 is correct and must be AFFIRMED.

## **Decision**

The April 30, 2014 enrollment confirmation notice is AFFIRMED.

**Effective Date of this Decision:** November 24, 2015

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

This decision does not change your eligibility.

The effective date of your Medicaid Managed Care plan is June 1, 2014.

## **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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## **Summary**

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The April 30, 2014 enrollment confirmation notice is AFFIRMED.

This decision does not change your eligibility.

The effective date of your Medicaid Managed Care plan is June 1, 2014.

### **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:**

