



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

Notice of Decision

Decision Date: November 18, 2015

NY State of Health Number: [REDACTED]
Appeal Identification Number: AP000000003514

[REDACTED]

Dear [REDACTED],

On August 31, 2015 you appeared by telephone at a hearing on your appeal of NY State of Health Marketplace's April 20, 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).

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NY State of Health Number: [REDACTED]
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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 enrollment in your qualified health plan was effective June 1, 2015?

Procedural History

On February 10, 2015, the Marketplace issued a notice stating that it was time to renew your health insurance for 2015. That notice stated that based on information from federal and state data sources, the Marketplace could not make a decision about whether you would qualify for financial help paying for your health coverage, and that you needed to update your account by March 15, 2015 or you might lose the financial assistance you were currently receiving.

No updates were made to your account by March 15, 2015.

On March 19, 2015 the Marketplace issued an eligibility determination notice stating that you were not eligible for Medicaid, or to receive tax credits or cost-sharing reductions. You also could not enroll in a qualified health plan at full cost. This was because you had not responded to the renewal notice and had not completed your renewal within the required timeframe. As a result, you no longer qualified to receive financial assistance and your eligibility would end effective March 31, 2015.

Also on March 19, 2015 the Marketplace issued a disenrollment notice stating that your enrollment in your Medicaid Managed Care plan would end effective

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March 31, 2015 because you are no longer eligible to enroll in health insurance through New York State of Health.

On April 14, 2015, the Marketplace received your updated application for health insurance.

On April 15, 2015, the Marketplace issued a notice of eligibility redetermination stating that you were eligible to receive up to \$203.00 per month in advance premium tax credits and, if you selected a silver-level qualified health plan, for cost-sharing reductions. This eligibility was effective May 1, 2015. The notice further stated that you qualified to select a health plan outside of the open enrollment period and that you had until June 13, 2015 to do so.

On April 20, 2015, the Marketplace issued a notice confirming your enrollment as of April 19, 2015 in a qualified health plan. The notice stated that your health insurance coverage could begin as early as June 1, 2015 if you paid your first month's premium.

On June 16, 2015 you spoke to the Marketplace's Account Review Unit and appealed the enrollment confirmation notice insofar as your enrollment in a qualified health plan could begin no earlier than June 1, 2015.

On August 31, 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) On February 10, 2015 the Marketplace issued a renewal notice informing you that based on federal and state data sources the Marketplace could not confirm your eligibility and that you needed to update your Marketplace account by March 15, 2015 or the financial assistance you were receiving might end.
- 2) On March 19, 2015 the Marketplace issued an eligibility determination notice stating in part that you could not enroll in a qualified health plan because you did not respond to the renewal notice and did not complete your renewal within the required timeframe.
- 3) You testified that you receive notices from the Marketplace via regular mail.

- 4) You testified that you did not receive any notices from the Marketplace telling you that you needed to update the information in your Marketplace account or that you were being disenrolled from your previous health plan.
- 5) No notices sent to you at the address listed on your Marketplace account have been returned as undeliverable.
- 6) You testified that you did not know you needed to renew your application until April when you tried to fill a prescription but your insurance was denied.
- 7) The record reflects that your account was not successfully renewed until April 14, 2015.
- 8) On April 15, 2015, the Marketplace issued a notice stating in part that you qualified to select a health plan outside of the open enrollment period and that you had until June 13, 2015 to do so.
- 9) The record reflects that you selected a qualified health plan for enrollment on April 19, 2015.
- 10) On April 20, 2015, the Marketplace issued a notice confirming that your health insurance coverage could begin as early as June 1, 2015 if you paid your first month's premium.
- 11) You testified that you paid your first month's premium for the month of June.
- 12) You testified that you are looking to have your coverage through your qualified health plan be backdated to April and May 2015 because you have unpaid medical bills for those months.

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

Applicable Law and Regulations

Annual Eligibility Redetermination

Generally, the Marketplace must conduct annual eligibility redeterminations for qualified individuals who are seeking financial assistance through insurance affordability programs for the upcoming year, such as tax credits and cost-sharing reductions, Medicaid, or Child Health Plus. In such cases, the Marketplace is required to request that the qualified individual provide updated

income and family size information for use in an eligibility redetermination for the upcoming year (see 45 CFR § 155.335(a) and (b)).

The Marketplace must send an annual renewal notice that contains the individual's projected eligibility for the upcoming year (45 CFR § 155.335(c)(3)). If a qualified individual does not respond to the notice after a 30-day period, the Marketplace must redetermine that individual's eligibility using the information provided in the annual renewal notice (45 CFR § 155.335(g), (h)). The Marketplace must ensure this redetermination is effective on the first day of the coverage year or in accordance with the rules specified in 45 CFR § 155.330(f) regarding effective dates, whichever is later (45 CFR § 155.335(i)). The rules specified in 45 CFR § 155.330(f) are not pertinent here.

Enrollment in a Qualified Health Plan

The Marketplace must provide annual open enrollment periods during which time qualified individuals may enroll in a qualified health plan (QHP) and enrollees may change QHPs (45 CFR § 155.410(a)).

For the benefit year beginning on January 1, 2015, the annual open enrollment period began on November 15, 2014 and extended through February 15, 2015 (45 CFR § 155.410(e)); however, the open enrollment period was further 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%99waiting-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 their enrollment to another plan (45 CFR § 155.420(d)).

For individuals who are eligible for a special enrollment period, the Marketplace must ensure coverage is effective the first day of the following month, for QHP selections received by the Marketplace between the first and the fifteenth of any month (45 CFR § 155.420(b)(1)(i)). The Marketplace must ensure coverage is effective the first day of the second following month, for QHP selections received by the Marketplace between the sixteenth and the last day of any month (45 CFR § 155.420(b)(1)(ii)).

Legal Analysis

The issue under review is whether the Marketplace properly determined that your enrollment in a qualified health plan began June 1, 2015.

The Marketplace must redetermine a qualified individual's eligibility for health insurance and financial assistance to help pay for that health insurance annually. The Marketplace must issue a renewal notice that contains the individual's eligibility. If an individual does not respond to this notice, the Marketplace must issue an eligibility determination for the upcoming coverage year based on the projected eligibility contained in the renewal notice.

On February 10, 2015 the Marketplace issued a renewal notice informing you that based on federal and state data sources the Marketplace could not confirm your eligibility and that you needed to update your Marketplace account by March 15, 2015 or the financial assistance you were receiving might end.

No updates were made to your account by March 15, 2015.

On March 19, 2015 the Marketplace issued an eligibility determination notice stating in part that you could not enroll in a qualified health plan because you did not respond to the renewal notice and did not complete your renewal within the required timeframe.

You testified that you did not receive any notices informing you that your application needed to be updated or that you could not enroll in a health plan.

The record indicates that the notices were issued to the address you have listed on your Marketplace account, and there is no indication that any of the notices were returned to the Marketplace as undeliverable.

The record shows that your application was updated on April 14, 2015 and on April 15, 2015 the Marketplace issued a notice stating that you qualified to select a health plan outside of the open enrollment period and that you had until June 13, 2015 to do so.

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

A plan that is selected between the first day and fifteenth day of a month goes into effect on the first day of the following month. 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.

On April 19, 2015, you enrolled in a qualified health plan, so the plan must take effect on the first day of the second following month after April; that is, on June 1, 2015.

Therefore, the April 20, 2015 enrollment confirmation notice stating that your coverage in your qualified health plan could begin as early as June 1, 2015 if you paid your first month's premium, is correct and must be AFFIRMED.

Decision

The April 20, 2015 enrollment confirmation notice is AFFIRMED.

Effective Date of this Decision: November 18, 2015

How this Decision Affects Your Eligibility

This decision does not change your eligibility.

The effective date of your qualified health plan is June 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.

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

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Summary

The April 20, 2015 enrollment confirmation notice is AFFIRMED.

This decision does not change your eligibility.

The effective date of your qualified health plan is June 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:

