

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

#### **Notice of Decision**

Decision Date: October 27, 2015

NY State of Health Number:

Appeal Identification Number: AP00000003599



On September 4, 2015 you appeared by telephone at a hearing on your appeal of NY State of Health Marketplace's June 23, 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 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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#### Issue

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

Did the Marketplace properly determine that you and your spouse's enrollment in TotalIndependence Silver NS INN Dep25 Acupuncture Massage Therapy Naturopathy should be terminated effective June 30, 2015?

# **Procedural History**

On April 1, 2015, the Marketplace issued a notice confirming you and your spouse's enrollment in TotalIndependence Silver NS INN Dep25 Acupuncture Massage Therapy Naturopathy. The notice further stated that if you paid your first month's premium, your coverage could start as early as May 1, 2015.

On June 22, 2015, you spoke to the Marketplace's Account Review Unit and appealed the disenrollment notice insofar as it terminated you and your spouse's coverage under your qualified health plan on June 30, 2015.

On June 23, 2015, a disenrollment notice was issued that stated you had requested to end your insurance coverage with TotalIndependence Silver NS INN Dep25 Acupuncture Massage Therapy Naturopathy on June 22, 2015. The notice further stated that you and your spouse would no longer have coverage effective June 30, 2015.

On September 4, 2015, you had a telephone hearing with a Hearing Officer from the Marketplace's Appeals Unit. Testimony was taken and the record was developed during the hearing. The record is now complete and closed.

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# **Findings of Fact:**

- You and your spouse were enrolled in TotalIndependence Silver NS INN Dep25 (Health Republic) Acupuncture Massage Therapy Naturopathy effective May 1, 2015.
- 2) You testified that on May 15, 2015, you found out that you would be starting a contract position in June 2015 and would have health insurance coverage through this position for the month of June 2015.
- 3) You testified that you contacted Health Republic on May 18, 2015, to cancel you and your spouse's coverage through the Marketplace.
- 4) You testified that you have only paid your May 2015 health insurance premium.
- 5) The Marketplace issued a disenrollment notice stating that you requested to end your insurance coverage on June 22, 2015, and you and your spouse's coverage through the Marketplace will be terminated effective June 30, 2015.
- 6) You testified you are seeking to have you and your spouse's health plan through the Marketplace terminated effective May 31, 2015.

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

# **Applicable Law and Regulations**

The Marketplace must permit an enrollee to terminate his or her coverage with a qualified health plan, including when an enrollee obtains minimum essential coverage, with appropriate notice to the Marketplace or qualified health plan (45 CFR § 155.430(b)(1), (d)).

For enrollee-initiated terminations, the last day of coverage is either:

- The termination date specified by the enrollee, if the enrollee provides reasonable notice (at least 14 days before the requested termination date);
- 2) Fourteen days after the enrollee requests the termination, if they do not provide reasonable notice; or

3) On a date on or after the date the enrollee requests the termination, if the enrollee's qualified health plan issuer and the enrollee agree to such a date

(45 CFR § 155.430(d)(2)(i)-(iii)).

# **Legal Analysis**

The issue is whether the Marketplace properly determined that you and your spouse's enrollment through Health Republic should be terminated on June 30, 2015.

On April 1, 2015, the Marketplace issued an enrollment confirmation notice, stating that your coverage could start as early as May 1, 2015 through Health Republic.

You contacted Health Republic on May 18, 2015, and requested that your health coverage be terminated.

The Marketplace must permit an enrollee to terminate their coverage with a qualified health plan (QHP) with appropriate notice to the Marketplace or QHP. However, the enrollee must provide reasonable notice before their enrollment in a QHP may be terminated. Reasonable notice is at least fourteen days before the requested effective date of termination.

On May 18, 2015, you requested that your QHP coverage be terminated May 31, 2015. The termination date must be at least fourteen days from date it was requested. Since you did not provide reasonable notice to the Marketplace or QHP, your coverage cannot be terminated on March 31, 2015. Your health plan would have to agree to effectuate termination of your coverage if you wanted your coverage terminated earlier than 14 days.

Therefore, the Marketplace's June 22, 2015 termination notice is AFFIRMED to state that your insurance coverage with Health Republic will terminate effective the last day of the month following your request which is June 30, 2015.

You may contact your health plan to see if they will agree to effectuate your disenrollment with an earlier date than you provided notice for.

Therefore, the disenrollment notice issued on June 23, 2015 is AFFIRMED.

#### Decision

The Marketplace's June 23, 2015 disenrollment notice is AFFIRMED.

#### Effective Date of this Decision: October 27, 2015

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).

# **How this Decision Affects Your Eligibility**

You and your spouse's coverage through TotalIndependence Silver NS INN Dep25is terminated effective June 30, 2015.

You may contact your health plan to see if they will agree to effectuate your disenrollment with an earlier date than you provided notice for.

# 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 June 23, 2015 disenrollment notice is AFFIRMED.

You and your spouse's coverage through TotalIndependence Silver NS INN Dep25 is terminated effective June 30, 2015.

You may contact your health plan to see if they will agree to effectuate your disenrollment with an earlier date than you provided notice for.

# **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: