



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

Notice of Decision

Decision Date: December 21, 2015

NY State of Health Number: [REDACTED]
Appeal Identification Number: AP000000003759

[REDACTED]

Dear [REDACTED],

On September 18, 2015, you appeared by telephone at a hearing on your appeal of NY State of Health Marketplace's July 3, 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 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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Decision

Decision Date: December 21, 2015

NY State of Health Number: [REDACTED]
Appeal Identification Number: AP000000003759

[REDACTED]

Issue

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

Did the Marketplace properly determine that your newborn child's coverage through Child Health Plus was effective August 1, 2015?

Procedural History

On [REDACTED], your youngest child was born.

On July 2, 2015, you reported the birth of your child to the Marketplace and the Marketplace prepared a preliminary eligibility determination stating that your newborn child was conditionally eligible to enroll in Child Health Plus with a \$30.00 monthly premium effective August 1, 2015. On that same day, your child was enrolled in HealthPlus, an Amerigroup Company through Child Health Plus, effective August 1, 2015.

Also on July 2, 2015, you spoke with the Marketplace's Account Review Unit and requested an appeal the effective date of coverage for your newborn child insofar as it began her coverage on August 1, 2015, and not the date of her birth on [REDACTED].

On July 3, 2015, the Marketplace issued a notice of eligibility determination based on the July 2, 2015 application, which stated that your newborn child was eligible to enroll in Child Health Plus with a \$30.00 monthly premium, effective August 1, 2015.

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Also on July 3, 2015, the Marketplace issued a notice confirming your newborn child's enrollment in HealthPlus, an Amerigroup Company as of July 2, 2015. The notice stated that your child's coverage could begin as early as August 1, 2015, if you pay your first month's premium.

On September 18, 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 are only appealing the effective date of Child Health Plus coverage for your newborn child.
- 2) The record reflects that your newborn child was born on [REDACTED].
- 3) The record reflects that you updated your Marketplace account on July 2, 2015 and added your newborn child to your application. The record further reflects that she was enrolled in HealthPlus, an Amerigroup Company on July 2, 2015.
- 4) You testified that your newborn child was covered under your Third Party Health Insurance from her date of birth until the date she was discharged from the hospital.
- 5) You testified that you have outstanding pediatric bills for necessary office visits during the months of June and July 2015.

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

Applicable Law and Regulations

Enrollment Periods - Generally

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

The 2015 annual open enrollment period began November 15, 2014 and extended through February 15, 2015 (45 CFR §155.410(e)).

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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 plan. One circumstance under which a special enrollment can be authorized is when the qualified individual gains a dependent or becomes a dependent through marriage, birth, adoption, placement for adoption, or placement in foster care ((45 CFR § 155.420(d)(2)).

Newborn Child – Effective Date of Coverage

Generally, if a triggering life event occurs, the qualified individual or enrollee has 60 days from the date of a triggering event to select a QHP (45 CFR § 155.420(c)(1)).

In addition, there are special effective dates in the case of birth, adoption, placement for adoption, or placement in foster care of a child for Marketplace Exchanges. The Marketplace must ensure that coverage is effective for a qualified individual or enrollee on the date of birth, adoption, placement for adoption, or placement in foster care, or it may permit the qualified individual or enrollee to elect a coverage effective date of the first of the month following the date of birth, adoption, placement for adoption, or placement in foster care (45 CFR §155.420(b)(2); NYS Insurance Law § 4305). The Marketplace has elected to make the effective date the first day of the month of birth.

If the Exchange permits the qualified individual or enrollee to elect a coverage effective date of either the first of the month following the date of birth, adoption, placement for adoption or placement in foster care, the Exchange must ensure coverage is effective on the date duly selected by the qualified individual or enrollee (45 CFR §155.420(b)(2)).

Legal Analysis

The issue is whether the Marketplace properly determined that your child's enrollment in her Child Health Plus plan was effective August 1, 2015.

The record indicates that your newborn was born on [REDACTED], which is considered a triggering life event. The record further reflects that you reported her birth to the Marketplace on July 2, 2015 when you enrolled her in HealthPlus, an Amerigroup Company through Child Health Plus. On that same date, you also requested an appeal regarding the August 1, 2015 start date of your newborn child's health insurance coverage because you needed coverage effective as of her date of birth, [REDACTED].

When a triggering life event occurs, the qualified individual has sixty days from the date of that event to select a qualified health plan.

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The record reflects that you followed the necessary steps and timely reported your newborn child's birth on July 2, 2015, and added her enrollment as of July 2, 2015, all which occurred within the 60-day period following the triggering life event.

Having fulfilled your notice obligations, your newborn child's coverage should have been made effective from the date of her birth, or the first of that month, since the Marketplace permits the first of the month of birth as the allowable start date of coverage. Therefore, the July 3, 2015 enrollment confirmation notice indicating a coverage start date as early as August 1, 2015 for your newborn child's Child Health Plus plan is MODIFIED, in part, to state that her coverage with HealthPlus, an Amerigroup Company will begin effective June 1, 2015.

You will be responsible for any premium due for your newborn child's coverage in June and July 2015.

The record also reflects that your newborn child remains "conditionally eligible" until proof of her citizenship status and Social Security Number are provided to the Marketplace. You must submit the requested documentation in order to confirm your newborn child's eligibility.

Decision

The July 3, 2015 enrollment confirmation notice is MODIFIED, in part, to state that your new born child (Marketplace ID: [REDACTED]) is enrolled in HealthPlus, an Amerigroup Company through Child Health Plus, effective June 1, 2015.

Effective Date of this Decision: December 21, 2015

How this Decision Affects Your Eligibility

This decision does not change your child's eligibility to enroll in coverage through Child Health Plus.

Your newborn child's enrollment start date is modified from August 1, 2015 to June 1, 2015.

You will be responsible for any premium due for your newborn child's coverage in June and July 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 July 3, 2015 enrollment confirmation notice is MODIFIED, in part, to state that your new born child (Marketplace ID: [REDACTED]) is enrolled in HealthPlus, an Amerigroup Company through Child Health Plus, effective June 1, 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).

This decision does not change your child's eligibility to enroll in coverage through Child Health Plus.

Your newborn child's enrollment start date is modified from August 1, 2015 to June 1, 2015.

You will be responsible for any premium due for your newborn child's coverage in June and July 2015.

It is also noted that your newborn child remains "conditionally eligible" until proof of her citizenship status and Social Security Number are provided to the Marketplace. You must submit the requested documentation in order to confirm your newborn child's eligibility.

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:

