



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

## Notice of Decision

Decision Date: December 10, 2015

NY State of Health Number: [REDACTED]  
Appeal Identification Number: AP000000004218

[REDACTED]

Dear Ms. [REDACTED]

On November 18, 2015, you appeared by telephone at a hearing on your appeal of NY State of Health Marketplace's May 2, 2015 and May 21, 2015 eligibility determinations and May 21, 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

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NY State of Health Number: [REDACTED]  
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## Issue

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

Did the Marketplace properly terminate your children's coverage through Child Health Plus, effective May 31, 2015?

Did the Marketplace properly determine that your child's coverage through Child Health Plus resumed on July 1, 2015, instead of June 1, 2015?

## Procedural History

On March 8, 2015, the Marketplace issued a notice that it was time to renew your health insurance for 2015. That notice stated that, based on information from federal and state sources, the Marketplace could not make a decision about whether your children would qualify for financial help paying for their health coverage, and that you needed to update your account by April 15, 2015, or they might lose the financial assistance they were currently receiving.

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

On May 2, 2015, the Marketplace issued a notice of eligibility redetermination stating that your children were not eligible for Child Health Plus because you had not responded to the renewal notice and had not completed your renewal within the required timeframe. Your children's eligibility would end effective May 31, 2015.

On May 20, 2015, the Marketplace received your household's updated application for health insurance.

On May 21, 2015, the Marketplace issued an eligibility determination notice stating that your children were eligible to reenroll in a plan through Child Health Plus with a \$15.00 monthly premium, effective July 1, 2015. The notice further stated that their coverage would be effective shortly after the first premium payment was received by the health plan.

Also on May 21, 2015, the Marketplace issued a notice confirming your children's Child Health Plus plan selection. The notice confirmed that the total monthly premium was \$30.00 and their coverage could start as early as July 1, 2015, if you paid your first month premium.

On August 6, 2015, you spoke to the Marketplace's Account Review Unit and appealed the enrollment confirmation notice insofar as it began your coverage under your Child Health Plus plan on July 1, 2015 instead of June 1, 2015.

On November 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, and the record reflects, that you are appealing only your children's eligibility.
- 2) Your Marketplace account indicates that you receive notices from the Marketplace via regular mail.
- 3) You testified that you did not receive the March 8, 2015 renewal notice informing you that you needed to update the information in your Marketplace account to ensure that your children's coverage would not be interrupted and that their financial assistance would continue.
- 4) No notices sent to you at the address listed on your Marketplace account have been returned as undeliverable.
- 5) You testified that you did not know that you needed to renew your application until you received the May 4, 2015 disenrollment notice stating that your children's Child Health Plus coverage would end effective May 31, 2015.

- 6) You testified, and the record reflects, that you updated your application on May 20, 2015.
- 7) You testified, and the record reflects, that on or about May 20, 2015 you enrolled your children in a Child Health Plus plan through the Marketplace.
- 8) You testified that you were told that your children's coverage would begin effective July 1, 2015, and disputed the effective date of coverage because you renewed your children's coverage on May 20, 2015.

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 information by which the Marketplace will use to redetermine a qualified individual's eligibility for that 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)).

### Child Health Plus

In New York State, Child Health Plus benefits are furnished "By the first day of the month after the application is received if prior to the 15th of the month or the first day after the subsequent month if after the 15th of the month" (Selection made on Form CS 18, Separate Child Health Insurance Program Non-Financial Eligibility – Citizenship. Sections: 2105(c)(9) and 2107(e)(1)(J) of the SSA and 42 CFR 457.320(b)(6), (c) and (d)).

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## Legal Analysis

The first issue is whether the Marketplace properly terminated your children's coverage through Child Health Plus, effective May 31, 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 information by which the Marketplace will use to determine an 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 information contained in the renewal notice.

On March 8, 2015, the Marketplace issued an annual renewal notice in your case. That notice stated that based on information from federal and state sources, the Marketplace could not make a decision about whether or not your children qualified for financial help paying for their health coverage. You were asked to update the information in your account by April 15, 2015 or the financial help they were receiving might end.

You stated that you did not receive the March 8, 2015 renewal notice.

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

Since the Marketplace had not received any updated information from you by the time of the deadline stated in the renewal notice, on May 2, 2015 an eligibility redetermination notice was issued that stated your children were no longer eligible for Child Health Plus, effective May 31, 2015. Your children were not eligible for Child Health Plus because renewal period and income data was not available. This finding was necessitated by the federal regulations noted above and, therefore, the Marketplace's May 2, 2015 eligibility determination is **AFFIRMED**.

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

The record indicates that you submitted your children's application for health insurance on May 20, 2015 and that you enrolled them in a Child Health Plus plan that same day.

In New York State, consistent with federal regulation, if an application for Child Health Plus insurance coverage is received after the 15<sup>th</sup> of the month, benefits are provided on "the first day of the subsequent month."

On May 21, 2015, the Marketplace issued an eligibility determination notice stating that your children were eligible to enroll in Child Health Plus with a \$15.00 monthly premium, effective July 1, 2015.

Also on May 21, 2015, the Marketplace issued a notice confirming your children's Child Health Plus plan selection. The notice confirmed that the total monthly premium was \$30.00 and their coverage could start as early as July 1, 2015, if you pay your first month premium.

Since your children's application was filed on May 20, 2015, their Child Health Plus plan properly took effect on July 1, 2015.

## **Decision**

The May 2, 2015 eligibility determination is AFFIRMED.

The May 21, 2015 eligibility determination and May 21, 2015 enrollment confirmation notice are AFFIRMED.

**Effective Date of this Decision:** December 10, 2015

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

This decision does not change your children's eligibility.

The effective date of your children's Child Health Plus plan is July 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 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).

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
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Albany, NY 12211
- By fax: 1-855-900-5557

## **Summary**

The May 2, 2015 eligibility determination is AFFIRMED.

The May 21, 2015 enrollment confirmation notice is AFFIRMED.

This decision does not change your children's eligibility.

The effective date of your children's Child Health Plus plan is July 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:**

