



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

Notice of Decision

Decision Date: November 25, 2015

NY State of Health Number: [REDACTED]
Appeal Identification Number: AP000000004243

[REDACTED]

Dear [REDACTED],

On November 9, 2015 you appeared by telephone at a hearing on your appeal of NY State of Health Marketplace's August 2, 2015 eligibility determination 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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Issue

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

Did the Marketplace properly determine that you were no longer eligible to enroll in a qualified health plan, effective August 31, 2015?

Procedural History

On April 25, 2015 the Marketplace issued a notice of eligibility redetermination stating that you were conditionally eligible to receive up to \$275.00 per month in advance premium tax credits and cost-sharing reductions effective June 1, 2015. The notice directed you to provide documentation confirming your citizenship status before July 23, 2015, or you might be found ineligible for health insurance through the Marketplace or your financial assistance might end.

Also on April 25, 2015 the Marketplace issued an enrollment confirmation notice stating that your insurance coverage could start as early as June 1, 2015 if you paid your first month's premium.

On August 2, 2015, the Marketplace issued a notice of eligibility redetermination stating that you were not eligible for Medicaid, Child Health Plus or to receive tax credits or cost sharing reductions. You also could not enroll in a qualified health plan at full cost through the Marketplace. This was because you did not provide documentation of your citizenship status. Your eligibility for coverage ended effective August 31, 2015.

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Also on August 2, 2015 the Marketplace issued a disenrollment notice stating that your insurance was terminated and you would no longer have health insurance coverage effective August 31, 2015.

On August 10, 2015, you spoke with the Marketplace's Account Review Unit and appealed the August 2, 2015 determination insofar as you were determined to be ineligible to enroll in a qualified health plan or to receive financial assistance.

On November 9, 2015, you had a telephone hearing with a Hearing Officer from the Marketplace's Appeals Unit. Spanish Interpreter [REDACTED] assisted during the hearing. 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) The Marketplace sent you a notice on April 25, 2015 stating that your eligibility was only conditional and that you needed to submit documentation confirming your citizenship status before July 23, 2015.
- 2) You testified that you did not receive a notice asking you to submit citizenship documentation.
- 3) You testified, and your Marketplace account confirms, that you receive all of your notices through regular mail.
- 4) There is no evidence in the record that any of the notices that were sent to your mailing address were returned as undeliverable.
- 5) You testified that the only notice you received from the Marketplace was the cancellation notice.

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

Applicable Law and Regulations

Citizenship and Immigration Status

To enroll in a qualified health plan through the Marketplace, an applicant must be a citizen or national of the United States, or a non-citizen lawfully present in the United States and reasonably expects to become a citizen or remain a lawfully

present noncitizen for the entire period for which enrollment is being sought (45 CFR § 155.305(a)(1)).

The Marketplace must verify or obtain information in order to determine that an applicant is eligible for enrollment in a qualified health plan, including the certification of citizenship, status as a national, or lawful presence (45 CFR § 155.315(a), (c)).

If an applicant attests to citizenship, status as a national, or lawful presence, and the Marketplace is unable to verify such attestation, the Marketplace must provide the applicant 90 days to provide satisfactory documentary evidence, from the date the notice of inconsistency is received by the applicant. Notice is considered received five days after the date on the notice, unless the applicant demonstrates that he or she did not receive the notice within the five day period. (45 CFR § 155.315(c)(3)).

Legal Analysis

The issue under review is whether the Marketplace properly determined that you were no longer eligible to enroll in a qualified health plan through the Marketplace, effective August 31, 2015.

The Marketplace is required to determine whether individuals are eligible to enroll in coverage through the Marketplace, and must confirm, among other things, that their citizenship status is satisfactory.

If the Marketplace cannot verify an individual's citizenship status, it must provide the individual a period of 90 days from the date notice is received to resolve the inconsistency. For purposes of verifying citizenship, notice is considered received five days after the date on the notice.

In the eligibility determination issued on April 25, 2015, you were advised that your eligibility was only conditional, and that you needed to confirm your citizenship status before July 23, 2015.

You testified that you did not receive a notice asking you to submit citizenship documentation. However, there is no evidence in the record that any of the notices that were sent to your mailing address were returned as undeliverable.

Therefore, the record reflects that the Marketplace properly notified you of an inconsistency in your account and that you did not submit the requested citizenship documentation before the deadline.

If the Marketplace remains unable to verify the inconsistency after the 90 day period ends, then it must determine the applicant's eligibility based on the information available in the data sources.

Since the requested citizenship documentation was not received within the 90 day period, the Marketplace was required to redetermine your eligibility without verification of your citizenship status. As a result, the Marketplace properly determined that you could not enroll in a qualified health plan through NY State of Health effective August 31, 2015 because you did not provide the information requested by the Marketplace.

Therefore, the Marketplace's August 2, 2015 eligibility determination is correct and is AFFIRMED.

Decision

The August 2, 2015 eligibility determination notice is AFFIRMED.

Effective Date of this Decision: November 25, 2015

How this Decision Affects Your Eligibility

The Marketplace properly found you not eligible to enroll in a qualified health plan because you failed to submit proof of your citizenship status.

Please note that this decision only applies to your eligibility for the year 2015. For insurance coverage starting January 1, 2016, you will need to reapply with the Marketplace during the Open Enrollment Period. The Open Enrollment Period for 2016 health coverage is November 1, 2015 to January 31, 2016. For more information on Open Enrollment please go to <https://nystateofhealth.ny.gov/> or contact the Marketplace at the contact information listed in this decision.

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.

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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
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Summary

The August 2, 2015 eligibility determination notice is AFFIRMED.

The Marketplace properly found you not eligible to enroll in a qualified health plan because you failed to submit proof of your citizenship status.

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Legal Authority

We are sending you this notice in accordance with federal regulation 45 CFR § 155.545(a).

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A Copy of this Decision Has Been Provided To:

