

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: AP000000004314



On November 9, 2015, you appeared by telephone at a hearing on your appeal of NY State of Health Marketplace's July 20, 2015 enrollment notice regarding the start date of your spouse's Medicaid Managed Care coverage.

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).



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

**Decision** 

Decision Date: December 21, 2015

NY State of Health Number:

Appeal Identification Number: AP00000004314



#### Issues

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

Did the Marketplace properly determine that your spouse's enrollment start date in the Medicaid Managed Care you elected was, first, September 1, 2015 and, ultimately, November 1, 2015?

Did the Marketplace properly deny your request to have your spouse's Medicaid Managed Care plan backdated?

# **Procedural History**

On December 19, 2014, the Marketplace issued a notice of eligibility determination that, in relevant part, stated your spouse was conditionally eligible for Medicaid, effective January 1, 2015. The notice further instructed that she needed to provide documentation confirming her immigration status before March 20, 2015 and, if she failed to submit the documentation timely, she might be found ineligible for health insurance or for less help with her health insurance.

On December 23, 2014, the Marketplace issued a similar notice of eligibility redetermination as that issued on December 19, 2014 with an effective date of February 1, 2015. This notice stated that your spouse had to submit documentation confirming her immigration status before March 24, 2015 and, if she failed to submit the documentation timely, she might be found ineligible for health insurance or for less help with her health insurance.

On February 15, 2015, the Marketplace again issued a similar notice of eligibility redetermination to the December 19, 2014 and December 23, 2014 notices. This notice had a submission deadline for immigration documentation of before May 18, 2015.

On February 16, 2015, the Marketplace issued an enrollment notice that your spouse had health coverage under Medicaid, effective February 1, 2015, but needed to pick a Medicaid Managed Care plan soon or one would be chosen for her.

On February 26, 2015 and again on March 2, 2015, the Marketplace issued notices of eligibility redetermination that your spouse remained conditionally eligible for Medicaid, effective February 1, 2015, but needed to submit proof of her immigration status before May 26, 2015, and proof of income before March 12, 2015.

On May 27, 2015, the Marketplace issued a notice of eligibility redetermination that your spouse remained conditionally eligible for Medicaid, effective May 1, 2015. This notice instructed her to submit documentation confirming her immigration status before August 24, 2015, and proof of income before June 10, 2015.

That same day, the Marketplace issued an enrollment notice that your spouse had not chosen a plan yet, her insurance coverage through Medicaid would begin May 1, 2015, and she must choose a health plan soon or one would be chosen for her.

On June 17, 2015, the Marketplace issued a letter addressed to you that you had submitted income documentation to resolve the inconsistency in your household; however, the documentation appears to be insufficient to resolve the request. The notice instructed you that additional income information was still required to confirm your eligibility and/or to make an eligibility determination.

On July 15, 2015, you uploaded to your Marketplace account a copy of your signed 2014 U.S. Individual Income Tax Return (Form 1040) (Appellant's Exhibit A).

On July 16, 2015, the Marketplace issued a notice of eligibility redetermination that, based on your updated application, your spouse remained conditionally eligible for Medicaid, effective July 1, 2015. This notice further instructed your spouse to submit documentation as proof of her immigration status before October 13, 2015, and proof of income before July 30, 2015.

On July 19, 2015, the Marketplace issued a notice of eligibility redetermination that you were eligible for Medicaid, effective July 1, 2015, and your spouse needed to provide documentation as proof of immigration status before October 13, 2015.

On July 20, 2015, the Marketplace issued an enrollment notice confirming that you and your spouse had selected a Medicaid Managed Care plan, and both of you would be covered under that plan effective September 1, 2015.

On August 14, 2015, the Marketplace issued a letter that additional information regarding your household income was needed to determine eligibility for you, your spouse, and your newborn child.

That same day, the Marketplace issued a letter confirming your August 13, 2015 request for a telephone hearing to review "Denial of MMC Backdating."

On September 5, 2015, the Marketplace issued a notice of eligibility redetermination that you alone were no longer eligible for Medicaid but would remain in continuous coverage until June 30, 2016, effective September 1, 2015.

That same day, the Marketplace issued an enrollment notice that you alone were enrolled in a Medicaid Managed Care plan, effective September 1, 2015.

Also that same day, the Marketplace issued a disenrollment notice that your spouse's coverage in that same MMC plan would end September 30, 2015.

Finally, that same day and again on September 10, 2015, the Marketplace issued letters indicating that your spouse and infant child may be eligible for health insurance through New York State of Health, but more information is needed to make a determination. The reason given was that the income information you provided does not match what New York State of Health obtained from state and federal data sources such that an eligibility determination could not be made until you provide income documentation for NY State of Health to be able to confirm additional information; first, by September 19, 2015 and then by September 24, 2015.

On October 7, 2015, the Marketplace issued a notice of eligibility redetermination that, effective October 1, 2015, you remain eligible for Medicaid, your spouse is conditionally eligible for Medicaid and needs to submit documentation to confirm her immigration status by January 4, 2016, and your infant child is eligible for Medicaid.

That same day, the Marketplace issued an enrollment notice confirming that you and your infant child were enrolled in the MMC plan you had selected, effective September 1, 2015, and your spouse still needed to pick a plan.

On October 13, 2015, the Marketplace issued another enrollment notice confirming that you and your infant child were enrolled in the MMC plan you had selected, effective September 1, 2015, and your spouse was enrolled in the same MMC plan effective November 1, 2015.

On November 9, 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) According to your Marketplace application, you and your spouse plan on filing your 2015 tax return with the tax status of married filing jointly, and will claim your newborn as a dependent on that tax return.
- 2) According to your Marketplace account, on December 18, 2014, you uploaded to your Marketplace account the following documents:
  - (a) A copy of the front and back of your spouse's I-766 (USA Employment Authorization Card), USCIS#, valid November 23, 2012 and expiring November 22, 2013; and
  - (b) A copy of a U.S. Custom and Boarder Protection I-94 print-out regarding your spouse's arrival and departure date records as a nonimmigrant alien (including Admission Record Number), with a most recent date of entry of June 18, 2013 and an "admit until" date of June 17, 2014.
- 3) According to your Marketplace account that was updated on February 15, 2015, your spouse reported that she was pregnant.
- 4) According to your Marketplace account, on February 26, 2015, you uploaded a Department of Homeland Security Form I-797C, Notice of Action, dated January 23, 2015, regarding your spouse's appointment to capture her biometrics on February 11, 2015. The Notice states that it "DOES NOT GRANT IMMIGRATION STATUS OR BENEFIT."
- According to your Marketplace account, on February 26, 2015, you uploaded a DHS Form I-797C, Notice of Action, dated January 22, 2015, regarding your I-130, Petition for Alien Relative. This notice stated it was in regards to your petition as a citizen or lawful permanent resident of the United States to establish the relationship to your spouse, an alien relative, who wishes to immigrate to the United States. The Notice states that it "DOES NOT GRANT IMMIGRATION STATUS OR BENEFIT."
- According to your Marketplace account, on May 5, 2015 and May 26, 2015, you uploaded a copy of the front and back of your spouse's I-766 USA Employment Authorization Card, USCIS#, valid March 18, 2015 and expiring on March 17, 2016.
- 7) On those same two days, you uploaded a copy of your 2014 Schedule C (Form 1040), Profit and Loss from Business from your

- 8) According to your Marketplace account, the proof of income submitted on May 26, 2015 was invalidated on June 17, 2015, because you submitted only your Schedule C from your 2014 income tax return. The notation in your Marketplace account states that an invalid document letter was sent that same day, as is also noted in the Procedural History Section above.
- 9) According to your Marketplace account, on July 15, 2015, you uploaded an unsigned version and a signed version of your and your spouse's 2014 U.S. Individual Income Tax Return (Form 1040), both dated July 15, 2015. Your tax return showed your household's annual adjusted gross income in 2014 was \$26,772.00. Your occupation is listed as a spouse's occupation is listed as a
- 10) You testified that your occupations will be the same on your 2015 tax return, and your household income will be comparable to your 2014 household income of \$26,772.00.
- 11) According to your Marketplace account, on August 13, 2015, your newborn child was added as a household member to your account with a birth date of .
- 12) That same day and again on August 23, 2015, you uploaded to your Marketplace account copies of the front and back of your spouse's current USA Employment Authorization Card, as referenced in Fact #6 above.
- 13) According to your Marketplace account, on September 3, 2015, you uploaded a copy of your spouse's U.S.A. permanent resident card showing she has been a resident since August 10, 2015 and that her card expires August 11, 2017.
- 14) That same day, you again uploaded a copy of your signed 2014 Form 1040.
- 15) According to your Marketplace account, on or about August 13, 2015, your request to have your spouse's Medicaid Managed Care plan backdated was denied because document submission was still pending.
- 16) You are seeking to have your spouse's Medicaid Managed Care plan backdated to as early as February 1, 2015.

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

# **Applicable Law and Regulations**

#### Medicaid, Generally

Medicaid can be provided through the Marketplace to adults who: (1) Are age 19 or older and under age 65; (2) Are not pregnant; (3) Are not entitled to or enrolled for Medicare benefits under part A or B of title XVIII of the Act; (4) Are not otherwise eligible for and enrolled for mandatory coverage under a State's Medicaid State plan in accordance with subpart B of this part; and (5) Have a household modified adjusted gross income that is at or below 138% of the federal poverty level for the applicable family size (42 CFR § 435.119(b), 42 CFR § 435.603(d)(4)), N.Y. Soc. Serv. Law § 366(1)(b)).

#### Eligibility for Enrollment in Medicaid

In general, the Marketplace must review Medicaid eligibility once every twelve months or "whenever it receives information about a change in a beneficiary's circumstances that may affect eligibility" (42 CFR § 435.916(a)(1), (d); emphasis added). The Marketplace must make its "redetermination of eligibility without requiring information from the individual if able to do so based on reliable information contained in the individual's account or other more current information available to the agency, including but not limited to information accessed through any data bases accessed by the agency" (42 CFR § 435.916(a)(2)).

A person whose Medicaid eligibility is based on the modified adjusted gross income of the person or the persons' household remains Medicaid eligible for 12 months unless the person becomes ineligible due to "citizenship status, lack of [New York] state residence, or failure to provide a valid social security number" (N.Y. Social Services Law § 366.4(c)).

The Marketplace must provide an individual with the annual redetermination notice, including the projected eligibility for coverage arid financial assistance, and must require the qualified individual to report any changes within 30 days (45 CFR § 155.335(c), (e)). Once the 30-day period has lapsed, the Marketplace must issue a redetermination as provided by the notice, with consideration given to any updates provided by the individual (45 CFR §155.335(h).

If the Marketplace remains unable to verify the attestation after the 90-day period ends, then it must determine the applicant's eligibility based on the information available in the data sources (45 CFR § 155.315(f)(5)).

#### <u>Immigration Status and Medicaid Eligibility</u>

One of the non-financial criteria for Medicaid eligibility is the immigration status of the person applying for health insurance. A person is eligible for Medicaid when his or her immigration status is satisfactory and he or she meets all other requirements for

Medicaid. Generally, no person, except a United States citizen, naturalized citizen, qualified alien, and persons permanently residing in the United States under color of law (PRUCOL), is eligible for medical assistance from the state (NY Soc. Serv. Law § 122(1); 18 NYCRR § 360-3.2).

Individuals who are citizens or nationals of the United States and who have provided satisfactory documentary evidence of citizenship or national status must be provided Medicaid (42 CFR § 435.406(a)(1)).

Immigrants who are permanently residing under color of law (PRUCOL) are eligible for all of the State's financial assistance programs, including Medicaid. Department of Health policy, in part, defines PRUCOL individuals as those persons whose application is pending before the U.S. Citizenship and Immigration Services (USCIS).

Acceptable proofs of immigration status for immigrant non-citizens include:

- I-551 resident alien card (green card)
- I-94 arrival/departure record
- U.S. Visa
- I-766 employment authorization card
- Document from USCIS:

Your application for Immigration Status Letters to and from USCIS I-797 USCIS Notice of Action Other documents from the USCIS

 Proof that you lived continuously in the U.S. before 1972 (lease agreement, proof of employment).

#### Medicaid and Pregnant Women

Family size means the number of persons counted as a member of an individual's household. In the case of an individual who expects to file a tax return and does not expect to be claimed by another taxpayer, the household consists of the taxpayer and all persons whom such individual expects to claim as a tax dependent (42 CFR § 435.603(f)(1). In the case of a married couple living together, each spouse will be included in the household of the other spouse, regardless of whether they expect to file a joint tax return (42 CFR § 435.603 (f)(4)).

For purposes of Medicaid eligibility, the family size of either a pregnant woman or a person who is in the family of a pregnant woman includes not only the pregnant woman but also the number of children she expects to deliver (42 CFR § 435.603(b); State Plan Amendment (SPA) 13-0055-MM3, as approved by the US Department of Health and Human Services, March 19, 2014).

In New York, a pregnant woman is eligible for Medicaid at a household income of 223% of the FPL (42 CFR §435.116 (c)(2); NY Department of Social Services Admin Directive 13ADM-03).

#### Income Verification

For all individuals whose income is needed to calculate the household's eligibility, the Marketplace must request data that will allow the Marketplace to verify the household's income (45 CFR §155.320(c)(1)(i)). If the Marketplace cannot verify the income information required to determine eligibility, it must attempt to resolve the inconsistency by providing the individual an opportunity to submit satisfactory documentary evidence within 90 days from the date of notice (45 CFR §155.315(f)(2)).

During this period, the Marketplace must provide eligibility for enrollment in a qualified health plan to the extent that an individual is otherwise qualified (45 CFR § 155.315(f)(4)(1)).

If the Marketplace is still unable to verify the individual's income information after this period, it must determine the individual's eligibility based on the information available in the data sources.

#### De Novo Review

The Marketplace Appeals Unit must review each appeal de novo and "consider all relevant facts and evidence adduced during the appeals process" (45 CFR § 155.535(f)). "De novo review means a review of an appeal without deference to prior decisions in the case" (45 CFR § 155.500).

The Marketplace is required to provide "timely written notice to an applicant of any eligibility determination" made pursuant to 45 CFR Part 155, Subpart D, which sets out requirements for functions in the Individual Marketplace (45 CFR § 155.310(g)). An applicant or enrollee has the right to appeal an eligibility determination or redetermination or a failure by the Marketplace to provide timely notice of eligibility determination (45 CFR § 155.505(b)).

#### Medicaid Start Dates

An individual is eligible for fee-for-service Medicaid effective on the first day of the month if an individual was eligible any time during that month (42 CFR 435.915(b)).

Medicaid Managed Care (MMC) plan enrollments received on or before the fifteenth day of the month are effective the first day of the following month. Enrollments received after the fifteenth day of the month are effective the first day of the second following month (Medicaid Managed Care Model Contract (Appendix H-6(b)(ii) & (iii), effective 3/1/2014 – 2/28/2019; see, §1115 Soc. Sec. Act; N.Y. Soc. Serv. Law §364-j(1)(c); 18 NYCRR 360-10.3(h)).

# Legal Analysis

Federal regulation requires that a person seeking enrollment in Medicaid through the Marketplace have satisfactory citizenship or immigration status. Satisfactory status includes being a citizen or national of the United States, or having PRUCOL status. Federal regulation further requires the Marketplace to obtain or verify a person's immigration status in order to allow that person enrollment in Medicaid.

The record reflects that at the time of the December 19 and 23, 2014 and February 15, 2015 eligibility determinations, the Marketplace lacked evidence from you in order to confirm your spouse's immigration/citizenship status. The applications regarding these determination dates indicated that your spouse's I-766 (Employment Authorization Card) had expired November 22, 2013, and her Admission Record had an "admit until" date of June 17, 2014. Since the Marketplace lacked the documentation necessary to determine whether or not your spouse met the citizenship or immigration status requirements for Medicaid, the Marketplace properly found her to be conditionally eligible for Medicaid as of those times, and she was properly enrolled in Medicaid Fee-For-Service, effective February 1, 2015.

The record reflects that on February 15, 2015, your application was updated to state that your spouse was now pregnant. As a result and under the Medicaid regulations regarding household size of pregnant women, and because you and your spouse are married and planned on filing your 2015 tax return as married filing jointly, your household size increased to three people, consisting of you, your spouse, and your unborn child. Due to the change in your household's size, the Marketplace redetermined your household's eligibility for financial assistance using a three-person household. This resulted in the February 15, 2015 notice of eligibility redetermination, in which your spouse was properly determined to be conditionally eligible for Medicaid, effective February 1, 2015, now with a submission deadline for immigration and income documents of before May 18, 2015. The request for income documentation was added because your household's income, particularly, your spouse's income could not be verified through data sources.

Thereafter, on February 26, 2015, you provided the required documentation to demonstrate your spouse's immigration status. Specifically, you provided a copy of a DHS Form I-797C, Notice of Action, dated January 22, 2015, regarding your I-130, Petition for Alien Relative, which stated you were petitioning as a citizen or lawful permanent resident of the United States to establish the relationship to your spouse, an alien relative, who wished to immigrate to the United States. According to Department of Health policy, this document is acceptable proof of your spouse's PRUCOL status and, thus, her eligibility for Medicaid. Based on the satisfactory documentation as to your spouse's immigration/citizenship status, ordinarily, the Marketplace would have verified her immigration status at this time and redetermined her eligibility for Medicaid. However, the condition on your spouse's eligibility for Medicaid remained active because income documentation needed to verify her eligibility for Medicaid had not yet been submitted.

The record reflects that, based on income documents you had uploaded on May 5, 2015 and again on May 26, 2015, the Marketplace was still unable to resolve the inconsistencies regarding your household's income. Nonetheless, the Marketplace issued a notice of eligibility redetermination on May 27, 2015, that your spouse remained conditionally eligible for Medicaid, effective May 1, 2015, but still needed to submit documents as proof of immigration status before August 1, 2015, and proof of income before June 10, 2015. Since the Marketplace had acceptable proof of your spouse's immigration status as of February 26, 2015 and again as of May 5, 2015 and May 26, 2015 when you uploaded the front and back of her current I-766 Employment Authorization Card, this May 27, 2015 notice of eligibility redetermination is MODIFIED, in part, to state that only proof of income remained outstanding. That portion of the May 27, 2015 notice of eligibility redetermination that stated your spouse remained conditionally eligible for Medicaid, effective May 1, 2015, remains in effect to the extent that it is premised on outstanding income documents still being required.

The next update made to your Marketplace account was on July 15, 2015, when you uploaded both an unsigned and signed copy of your household's 2014 Form 1040, dated July 15, 2015. This updated income documentation resulted in a July 16, 2015 notice of eligibility redetermination, in which your spouse was determined to remain conditionally eligible for Medicaid, effective July 1, 2015. The basis for the condition on her eligibility was that she still needed to provide proof of her immigration status before October 13, 2015, and proof of income before July 30, 2015. The corresponding July 19, 2015 enrollment notice stated she was enrolled in Medicaid, effective July 1, 2015, but needed to provide proof of her immigration status before October 13, 2015.

Proof of her immigration status was submitted on February 26, 2015, May 5, 2015, and May 26, 2015, such that your spouse's eligibility should not have been conditioned in part upon submission of more immigration documentation. In addition, your household's 2014 Form 1040 clearly stated that your spouse was a "homemaker" and had no source of income for 2014, and that you credibly testified that these statuses would be the same for 2015, as would your projected 2015 household income of \$26,722.00. Therefore, the July 16, 2015 eligibility redetermination is MODIFIED to remove the condition on your spouse's Medicaid eligibility, and that same notice and July 19, 2015 enrollment notice are MODIFIED to remove the request for immigration and/or income documentation.

By this Decision, your Marketplace application is deemed completed as of July 15, 2015.

The issue turns to whether the Marketplace properly determined your spouse's effective enrollment date in her MMC plan was effective September 1, 2015, and then November 1, 2015, and that your request to backdate her enrollment was verbally denied.

On August 13, 2015, you spoke with the Marketplace's Account Review Unit and appealed having your request to have your spouse's MMC plan backdated denied.

However, the record does not contain a notice of eligibility determination or redetermination on the issue of the MMC backdate denial. It does contain an August 14, 2015 notice in which the Marketplace acknowledges receipt of an appeal request and identifies one of the issue on appeal as "Denial of MMC Backdating."

In this particular case, the lack of a notice of eligibility determination on the issue of backdating your spouse's MMC start date does not prevent the Appeals Unit from reaching the merits of the case or constitute material error. Under 45 CFR § 155.505(b), you are as entitled to appeal Marketplace failure to timely issue a notice of eligibility determination as you are to appeal an adverse notice of eligibility determination. The text of the August 14, 2015 notice, which acknowledges the appeal on the issue of MMC backdate denial, permits an inference that the Marketplace did deny your MMC backdate request. Since Appeal Unit review of Marketplace determinations is performed on a de novo basis, no deference would have been granted to the notice of eligibility determination had it been issued.

The date on which an MMC 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.

The record reflects that on July 19, 2015, you selected an MMC plan for your spouse, so it must take effect on the first day of the second following month after July 2015; that is, on September 1, 2015. There is no provision in the law to allow for it to be further backdated since your Marketplace application had just been completed on July 15, 2015.

Therefore, the July 20, 2015 enrollment confirmation notice stating that your spouse's MMC coverage would take effect on September 1, 2015 is correct and must be AFFIRMED.

The September 5, 2015 disenrollment notice stating that your spouse is disenrolled from her MMC plan, effective September 30, 2015, is RESCINDED.

The October 7, 2015 notice of eligibility redetermination is MODIFIED, in part, to remove both the condition on your spouse's eligibility for Medicaid and the request for her to submit documentation to confirm her immigration status by January 4, 2016.

The October 7, 2015 enrollment notice is MODIFIED, in part, to remove the statement that your spouse needs to pick a plan.

The October 13, 2015 enrollment notice is MODIFIED, in part, to remove your spouse's MMC plan effective date of November 1, 2015.

Your case is being returned to the Marketplace to ensure that the foregoing changes to your spouse's eligibility for Medicaid and enrollment in the MMC plan are effectuated.

#### **Decision**

The May 27, 2015 notice of eligibility redetermination is MODIFIED, in part, to state that only proof of income regarding your household and, in particular, your spouse remained outstanding.

Your Marketplace application is deemed complete as of July 15, 2015.

The July 16, 2015 eligibility redetermination is MODIFIED to remove the condition on your spouse's Medicaid eligibility and that same notice and July 19, 2015 enrollment notice are MODIFIED to remove the request for immigration and/or income documentation.

The July 20, 2015 enrollment confirmation notice stating that your spouse's MMC coverage would take effect on September 1, 2015 is AFFIRMED.

The September 5, 2015 disenrollment notice stating that your spouse is disenrolled from her MMC plan, effective September 30, 2015, is RESCINDED.

The October 7, 2015 notice of eligibility redetermination is MODIFIED, in part, to remove both the condition on your spouse's eligibility for Medicaid and the request for her to submit documentation to confirm her immigration status by January 4, 2016.

The October 7, 2015 enrollment notice is MODIFIED, in part, to remove the statement that your spouse needs to pick a plan.

The October 13, 2015 enrollment notice is MODIFIED, in part, to remove your spouse's MMC plan effective date of November 1, 2015.

Your case is RETURNED to the Marketplace to ensure that the foregoing changes to your spouse's eligibility for Medicaid and enrollment in the MMC plan are effectuated.

Effective Date of this Decision: December 21, 2015

# **How this Decision Affects Your Eligibility**

Your spouse was conditionally eligible for Medicaid effective February 1, 2015, and she had health insurance under Medicaid Fee-For-Service effective February 1, 2015 to August 31, 2015.

Your Marketplace application was complete as of July 15, 2015.

By this Decision, all conditions on your spouse's eligibility for Medicaid are removed.

Your spouse was enrolled in the MMC Plan that you had selected as of September 1, 2015 and continuing through January 31, 2016.

The Marketplace is directed to ensure that these changes to your spouse's eligibility for Medicaid and enrollment in the MMC plan, effective September 1, 2015, are effectuated.

# 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 May 27, 2015 notice of eligibility redetermination is MODIFIED, in part, to state that only proof of income regarding your household and, in particular, your spouse remained outstanding.

Your Marketplace application is deemed complete as of July 15, 2015.

The July 16, 2015 eligibility redetermination is MODIFIED to remove the condition on your spouse's Medicaid eligibility and that same notice and July 19, 2015 enrollment notice are MODIFIED to remove the request for immigration and/or income documentation.

The July 20, 2015 enrollment confirmation notice stating that your spouse's MMC coverage would take effect on September 1, 2015 is AFFIRMED.

The September 5, 2015 disenrollment notice stating that your spouse is disenrolled from her MMC plan, effective September 30, 2015, is RESCINDED.

The October 7, 2015 notice of eligibility redetermination is MODIFIED, in part, to remove both the condition on your spouse's eligibility for Medicaid and the request for her to submit documentation to confirm her immigration status by January 4, 2016.

The October 7, 2015 enrollment notice is MODIFIED, in part, to remove the statement that your spouse needs to pick a plan.

The October 13, 2015 enrollment notice is MODIFIED, in part, to remove your spouse's MMC plan effective date of November 1, 2015.

Your case is RETURNED to the Marketplace to ensure that the foregoing changes to your spouse's eligibility for Medicaid and enrollment in the MMC plan are effectuated.

Your spouse was conditionally eligible for Medicaid effective February 1, 2015, and she had health insurance under Medicaid Fee-For-Service effective February 1, 2015 to August 31, 2015.

Your Marketplace application was complete as of July 15, 2015.

By this Decision, all conditions on your spouse's eligibility for Medicaid are removed.

Your spouse was enrolled in the MMC Plan that you had selected as of September 1, 2015 and continuing through January 31, 2016.

The Marketplace is directed to ensure that these changes to your spouse's eligibility for Medicaid and enrollment in the MMC plan, effective September 1, 2015, are effectuated.

# **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: