



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

Notice of Decision

Decision Date: January 29, 2016

NY State of Health Number: [REDACTED]
Appeal Identification Number: AP000000004856

[REDACTED]

Dear [REDACTED],

On December 22, 2015 you appeared by telephone at a hearing on your appeal of NY State of Health Marketplace's July 19, 2015 eligibility determination notice and October 14, 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 and the NY State of Health number at the top of this notice.

Legal Authority

We are sending you this notice in accordance with 45 Code of Federal Regulations (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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NY State of Health Number: [REDACTED]
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[REDACTED]

Issue

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

Did the Marketplace properly determine that your newborn son was no longer eligible to enroll in a qualified health plan, effective July 31, 2015?

Did the Marketplace properly determine that your child's coverage through Child Health Plus began on November 1, 2015, instead of August 1, 2015?

Procedural History

On [REDACTED], your newborn child was added to your household's application for health insurance.

On March 21, 2015 the Marketplace issued a notice of eligibility determination stating that your child was conditionally eligible to purchase a qualified health plan at full cost, effective March 1, 2015. The notice further directed you to provide documentation confirming your child's citizenship status and Social Security number before June 18, 2015 or he might lose his eligibility for health insurance or financial assistance.

Also on March 21, 2015 the Marketplace issued a notice confirming your child's enrollment in a qualified health plan.

On July 19, 2015, the Marketplace issued a notice of eligibility redetermination stating that your child was no longer eligible to enroll in a qualified health plan at full cost through the Marketplace because you had not confirmed his citizenship status or Social Security number. His eligibility for coverage would end effective

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July 31, 2015. On July 20, 2015 the Marketplace issued a disenrollment notice confirming that your child's enrollment in his qualified health plan was terminated effective July 31, 2015.

On October 1 and October 2, 2015, your account was updated multiple times, including several applications that declined financial assistance.

On October 1, 2015, in response to an application that declined financial assistance, the Marketplace issued a notice of eligibility determination stating that your child was eligible to enroll in a qualified health plan at full cost.

On October 2, 2015, you spoke with the Marketplace's Account Review Unit and appealed the July 19, 2015 determination insofar as your child was found ineligible for coverage as of July 31, 2015. You further appealed the effective date of your child's reenrollment in coverage under his Child Health Plus plan insofar as it began on November 1, 2015, and not August 1, 2015.

On October 3, 2015, in response to the final application submitted on October 2, 2015, the Marketplace issued an eligibility determination notice stating that your child was eligible to enroll in a Child Health Plus plan at full cost, effective November 1, 2015.

On October 14, 2015, the Marketplace issued an enrollment confirmation notice stating that your child's enrollment in his Child Health Plus plan could start as early as November 1, 2015 if you paid the first month's premium.

On December 22, 2015, you had a telephone hearing with a Hearing Officer from the Marketplace's Appeals Unit. The record was developed during the hearing and left open for up to 15 days to provide you an opportunity to submit supporting evidence, including proof of payment for your child's monthly premiums.

On January 5, 2016, the Marketplace's Appeals Unit received your supporting evidence, which included a copy of your child's qualified health plan invoices and proof of payments made for the months of August, October, and December 2015; a copy of a CareConnect Explanation of Benefits statement; and a medical bill issued on October 2, 2015. These documents were collectively marked as Appellant's Exhibit 1 and incorporated into the record. The record is now closed.

Findings of Fact

A review of the record support the following findings of fact:

- 1) According to the application that was submitted on [REDACTED], your newborn child did not have a Social Security number, but was in the process of applying for one.

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- 2) The Marketplace issued a notice on March 21, 2015 stating that your child was conditionally eligible to purchase a qualified health plan at full cost but that you needed to provide documentation confirming your child's citizenship status and Social Security number before June 18, 2015.
- 3) You testified, and your Marketplace account confirms, that you elected to receive notifications via regular mail.
- 4) You testified that you did not receive any notice from the Marketplace telling you that you needed to submit documentation in order to confirm your child's Social Security number and citizenship status.
- 5) No notices sent to you at the address listed on your Marketplace account have been returned as undeliverable.
- 6) You testified that you supplied your child's Social Security number to the Marketplace in April 2015.
- 7) You testified that you kept receiving regular invoices from your child's health plan and had been unaware that your child's coverage had been terminated.
- 8) There is no evidence in the record that the Marketplace received your child's citizenship documentation or Social Security number before June 18, 2015.
- 9) You testified, and the record reflects, that prior to being disenrolled, your child was enrolled in a full-pay qualified health plan.
- 10) You testified that after your child was disenrolled, you called the Marketplace and submitted an updated application. You further testified that you did not supply your child's Social Security number that that time because it was already on file.
- 11) The record reflects that your child's Social Security number was added to your household's Marketplace application on October 2, 2015.
- 12) The record reflects that on or about October 2, 2015, your child was enrolled in a Child Health Plus plan through the Marketplace.
- 13) According to the notice issued on October 3, 2015, your child's Child Health Plus eligibility was effective November 1, 2015.

- 14) You testified that you believe your child's coverage should begin effective August 1, 2015.

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)). Furthermore, the Marketplace must require an applicant who has a Social Security number to provide such a number (45 CFR § 155.310(a)(3)(i)).

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 validation of Social Security numbers and the certification of citizenship, status as a national, or lawful presence (45 CFR § 155.315(a),(b), (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)).

Child Health Plus

“A State must specify a method for determining the effective date of eligibility for [Child Health Plus], which can be determined based on the date of application or through any other reasonable method that ensures coordinated transition of children between [Child Health Plus] and other insurance affordability programs as family circumstances change and avoids gaps or overlaps in coverage” (42 CFR § 457.340(f)).

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)).

Legal Analysis

The first issue under review is whether the Marketplace properly determined that your newborn child was no longer eligible to enroll in a qualified health plan through the Marketplace, effective July 31, 2015.

According to the application that was submitted on [REDACTED], your child did not have a Social Security number but was in the process of applying for one.

The Marketplace is required to determine whether individuals are eligible to enroll in coverage through the Marketplace, and must confirm that they have a valid Social Security number and that their citizenship status is satisfactory.

If the Marketplace cannot verify an individual's citizenship status or validate their social security number, it must provide the individual a period of 90 days from the date notice is received to resolve the inconsistency.

In the eligibility determination issued on March 21, 2015 you were advised that your child's eligibility was only conditional, and that you needed to confirm your child's citizenship status and Social Security number before June 18, 2015.

The record reflects that the Marketplace did not receive the requested citizenship documentation or a valid Social Security number 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 child's eligibility without verification of his citizenship status or Social Security number. As a result, the Marketplace properly determined that your child could not enroll in a qualified health plan through NY State of Health effective July 31, 2015 because there is no evidence that you timely provided the information requested by the Marketplace.

Therefore, the Marketplace's July 19, 2015 eligibility determination is correct and is AFFIRMED.

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

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The record indicates that you submitted an updated application which included your child's Social Security number to the Marketplace on October 2, 2015. Your child was enrolled in a Child Health Plus plan on that same day.

In New York State, consistent with federal regulation, if an application for Child Health Plus insurance coverage is received before the 15th of the month, benefits are provided on the first day of the next month.

On October 3, 2015, the Marketplace issued an eligibility determination notice stating that your child was eligible to enroll in a full price Child Health Plus, effective November 1, 2015.

On October 14, 2015, the Marketplace issued a notice confirming your child's Child Health Plus plan selection. The notice confirmed his coverage could start as early as November 1, 2015, if you pay your first month premium.

Since your child's updated application was filed on October 3, 2015, his Child Health Plus plan properly took effect on November 1, 2015.

Therefore, the October 14, 2015 enrollment confirmation notice is AFFIRMED.

Decision

The July 19, 2015 eligibility determination notice and the October 14, 2015 enrollment confirmation notice are AFFIRMED.

Effective Date of this Decision: January 29, 2016

How this Decision Affects Your Eligibility

This decision has does not effect on your child's eligibility for or enrollment in Child Health Plus; your child's Child Health Plus enrollment is effective November 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.

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

Summary

The July 19, 2015 eligibility determination notice and the October 14, 2015 enrollment confirmation notice are AFFIRMED.

This decision has does not effect on your child's eligibility for or enrollment in Child Health Plus; your child's Child Health Plus enrollment is effective November 1, 2015.

Legal Authority

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

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).

A Copy of this Decision Has Been Provided To:

