

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: Appeal Identification Number: AP000000004965



Dear ,

On December 29, 2015 you appeared by telephone at a hearing on your appeal of NY State of Health Marketplace's October 6, 2015 eligibility determination and disenrollment notices.

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).



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

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Issue

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

Did the Marketplace properly determine that your newborn daughter was no longer eligible to enroll in a Child Health Plus plan, effective October 31, 2015?

Did the Marketplace properly disenroll your newborn child from her Child Health Plus plan, effective October 31, 2015?

Procedural History

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

On July 3, 2015 the Marketplace issued a notice of eligibility determination stating that your child was conditionally eligible to enroll in Child Health Plus with a \$30.00 monthly premium, effective August 1, 2015. The notice further directed you to provide documentation confirming your child's citizenship status and Social Security number before September 30, 2015 or she might lose her eligibility for health insurance or financial assistance.

Also on July 3, 2015 the Marketplace issued a notice confirming your child's enrollment in a Child Health Plus plan.

On October 6, 2015, the Marketplace issued a notice of eligibility redetermination stating that your child was no longer eligible to enroll in a Child Health Plus plan

through the Marketplace because you had not confirmed her citizenship status or Social Security number. Her eligibility for coverage ended effective October 31, 2015. Also on October 6, 2015 the Marketplace issued a disenrollment notice confirming that your child's enrollment in her Child Health Plus plan was terminated effective October 31, 2015.

On October 20, 2015 the Marketplace issued an eligibility determination notice stating that your newborn child was eligible to enroll in a Child Health Plus plan with a \$30.00 monthly premium, effective December 1, 2015.

Also on October 20, 2015, you spoke with the Marketplace's Account Review Unit and appealed the October 6, 2015 determination insofar as your child was not eligible for coverage as of October 31, 2015. You further appealed the effective date of your child's coverage under her Child Health Plus plan insofar as it began on December 1, 2015, and not November 1, 2015.

On October 21, 2015 the Marketplace issued a notice confirming your child's enrollment in a Child Health Plus plan. It further stated that her coverage could start as early as June 1, 2014 if you paid the first month's premium.

On December 29, 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:

- According to the application that was submitted on newborn child did not have a Social Security number, but was in the process of applying for one.
- 2) The Marketplace issued a notice on July 3, 2015 stating that your newborn child was conditionally eligible to enroll in a Child Health Plus plan, but directed you to provide documentation confirming your child's citizenship status and Social Security number before September 30, 2015.
- 3) You confirmed that you received the July 3, 2015 notice requesting additional information. You further testified that you spoke with a Marketplace representative to inform the Marketplace that you were experiencing difficulties in obtaining your child's Social Security number because the birth certificate issued by the hospital was incorrect.

- 4) According to the October 6, 2015 eligibility determination, your newborn child's Child Health Plus eligibility was to end effective October 31, 2015.
- 5) You testified, and the record reflects, that you supplied your child's Social Security number to the Marketplace on October 19, 2015.
- 6) According to the notes associated with your account, and the Marketplace's system, your newborn child's Child Health Plus coverage was adjusted to reflect an effective date of November 1, 2015, with no gap in coverage.

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 Child Health Plus plan through the Marketplace, effective October 31, 2015.

According to the application that was submitted on a submitted, 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, among other things, 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 July 3, 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 September 30, 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 her citizenship status or Social Security number. As a result, the Marketplace properly determined, on October 6, 2015, 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 October 6, 2015 eligibility determination was correct at the time it was issued and is AFFIRMED.

However, the record reflects that the Marketplace received your child's Social Security number on October 19, 2015, prior to your child's Child Health Plus disensolment.

Therefore, the matter is RETURNED to the Marketplace to verify your child's Social Security number and to issue a determination regarding your newborn child's eligibility as of the date the Social Security number was submitted.

Decision

The October 6, 2015 eligibility determination notice is AFFIRMED.

Your application is RETURNED to the Marketplace to verify your child's Social Security number and to issue a determination regarding your newborn child's eligibility as of the date the Social Security number was submitted.

Effective Date of this Decision: January 29, 2016

How this Decision Affects Your Eligibility

This decision has does not affect on your child's eligibility for or enrollment in Child Health Plus.

Your case is being returned to the Marketplace to verify your child's Social Security number and to issue a determination regarding your newborn child's eligibility as of the date the Social Security number was submitted.

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 October 6, 2015 eligibility determination notice is AFFIRMED.

This decision does not affect your child's eligibility for or enrollment in Child Health Plus.

Your case is being returned to the Marketplace to verify your child's Social Security number and to issue a determination regarding your newborn child's eligibility as of the date the Social Security number was submitted.

Legal Authority

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

A Copy of this Decision Has Been Provided To:

