

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

Notice of Decision

Decision Date: February 4, 2016

NY State of Health Number:

Appeal Identification Number: AP00000005063



On January 14, 2016 you appeared by telephone at a hearing on your appeal of NY State of Health Marketplace's May 30, 2015 enrollment 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).

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Issue

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

Did the Marketplace properly find that your Fidelis Care coverage should start on July 1, 2015?

Procedural History

On May 10, 2015 the Marketplace issued a disenrollment notice that your New York Catholic Health Plan, Inc. coverage would end effective May 31, 2015.

On May 12, 2015 your Marketplace account was updated.

On May 13, 2015 the Marketplace issued an eligibility determination that you are eligible to purchase a qualified health plan at full cost through New York State of Health effective June 1, 2015. The notice stated that you were not eligible to receive advance premium tax credits because you stated that you will not be filing a federal tax return in the upcoming year.

On May 29, 2015 your Marketplace account was updated.

On May 30, 2015 the Marketplace issued an eligibility determination that you are eligible to receive up to \$286.00 of advance premium tax credits and cost-sharing reductions, if you enroll in a silver-level qualified health plan effective July 1, 2015. The notice also stated that you qualified to select a health plan outside of the open enrollment period.

On the same day the Marketplace issued an enrollment notice confirming that as of May 29, 2015 you were enrolled in Fidelis Care and coverage could start as early as July 1, 2015.

On October 30, 2015 you spoke with the Marketplace's Account Review Unit and appealed the start date of your Fidelis Care Health Plan.

On January 14, 2016, 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. The record is now closed.

Findings of Fact

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

- 1. You testified that you were reapplying through the Marketplace because your Medicaid coverage was ending on May 31, 2015.
- On May 10, 2015 the Marketplace issued a disenrollment notice that your New York Catholic Health Plan, Inc. coverage would end effective May 31, 2015.
- 3. On May 29, 2015 you enrolled in a qualified health plan (Fidelis Care) through the Marketplace.
- 4. On May 30, 2015 the Marketplace issued an enrollment notice confirming that your enrollment as of May 29, 2015 in Fidelis Care and your coverage could start as early as July 1, 2015.
- 5. You testified that you are seeking to have your Fidelis Care coverage to begin June 1, 2015.
- 6. You testified that you have outstanding medical bills for the month of June 2015.

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

Applicable Law and Regulations

Special Enrollment Period

The Marketplace must provide an initial open enrollment period and annual open enrollment periods during which time qualified individuals may enroll in a qualified health plan (QHP) and enrollees may change QHPs (45 CFR §

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155.410(a)). The open enrollment period for the 2015 calendar year began November 15, 2014 and ended on February 15, 2015 (45 CFR § 155.410(e)(1)).

After each open enrollment period ends, the Marketplace provides special enrollment periods to qualified individuals or their dependents. During a special enrollment period, a qualified individual may enroll in a QHP and an enrollee may change to another QHP. The Marketplace must allow a qualified individual or his or her dependent to enroll in a QHP if the qualified individual or their dependent loses minimum essential coverage (45 CFR § 155.420(a)(1); 45 CFR § 155.420(d)(1)(i)).

Special Enrollment Period Effective Date:

Generally, the effective date for a QHP is the first day of the following month if the enrollment is received by the Marketplace on or before the fifteenth day of the month, and enrollments received after the fifteenth day of the month are effective the first day of the second following month (45 CFR § 155.420(b)(1)).

When an individual loses minimum essential coverage, if the plan selection is made on or before the day of the triggering event, the Marketplace must ensure that the coverage effective date is on the first day of the month following the loss of coverage. If the plan selection is made after the day of the triggering event, the Marketplace must ensure that coverage is effective with the regular effective dates (45 CFR § 155.420(b)(iv)).

Legal Analysis

The issue under appeal is whether or not the Marketplace correctly determined that your qualified health plan start date is July 1, 2015?

You credibly testified that you applied for coverage through the Marketplace because your Medicaid coverage was ending on May 31, 2015. On May 29, 2015 you enrolled in a qualified health plan (Fidelis Care) through the Marketplace. On the following day the Marketplace issued an enrollment notice stating that your enrollment with Fidelis Care would be effective July 1, 2015.

When a qualified individual or their dependent enrolls in a qualified health plan through the Marketplace after their minimum essential coverage has ended, the date in which the plan can take effect depends on the day a person selects the plan for enrollment.

When an individual loses minimum essential coverage, if the plan selection is made on or before the day of the triggering event, the Marketplace must ensure that the coverage effective date is on the first day of the month following the loss of coverage.

You selected Fidelis Care on May 29, 2015, so it must take effect on the first day of the following month, which is June 1, 2015.

Therefore the May 30, 2015 enrollment notice stating that your Fidelis Care coverage would take effect on July 1, 2015 is MODIFIED to state that the coverage is effective June 1, 2015.

Decision

The May 30, 2015 enrollment notice is MODIFIED to state that coverage could start as early as June 1, 2015.

Effective Date of this Decision: February 4, 2016

How this Decision Affects Your Eligibility

Your enrollment start date with Fidelis Care is modified from July 1, 2015 to June 1, 2015.

You will be responsibility for paying the health insurance premium for the month of June 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 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

Your enrollment start date with Fidelis Care is modified from July 1, 2015 to June 1, 2015.

You will be responsibility for paying the health insurance premium for the month of June 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:

