

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

#### **Notice of Decision**

Decision Date: May 20, 2016

NY State of Health Account ID:

Appeal Identification Number: AP000000006289



Dear

On May 2, 2016, you appeared by telephone at a hearing on your appeal of NY State of Health's November 22, 2015 disenrollment 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 Account ID at the top of this notice.

# **Legal Authority**

We are sending you this notice in accordance with 45 Code of Federal Regulations § 155.545.

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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#### **Decision**

Decision Date: May 20, 2016

NY State of Health Account ID:

Appeal Identification Number: AP00000006289



#### Issue

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

Did NY State of Health properly determine that your children's eligibility for and enrollment in their Child Health Plus plan ended December 31, 2015?

# **Procedural History**

On February 14, 2015, NY State of Health (NYSOH) issued a notice of eligibility determination, based on your February 13, 2015 application, stating that your children were eligible for Child Health Plus, effective March 1, 2015. Your children were subsequently enrolled in a Child Health Plus plan.

On November 15, 2015, an eligibility determination notice was issued stating that your children were eligible to enroll in Child Health Plus for a cost of \$60.00 per month effective March 1, 2015.

On November 22, 2015, an eligibility determination notice was issued finding your children eligible to enroll in Child Health Plus for a cost of \$60.00 per month effective January 1, 2016.

Also on November 22, 2015, a disenrollment notice was issued ending your children's coverage under Child Health Plus plan effective December 31, 2015.

On November 25, 2015, an enrollment confirmation notice was issued stating that your children's health coverage with Child Health Plus would not begin until you picked a plan.

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On January 6, 2016, NYSOH issued a notice of enrollment, based on your plan selection on January 5, 2016, stating that your children were enrolled in a Child Health Plus plan and that coverage would start on February 1, 2016.

On January 19, 2016, you spoke to NYSOH's Account Review Unit and appealed the start date of your children's Child Health Plus plan insofar as it did not begin January 1, 2016.

On May 2, 2016, you had a telephone hearing with a Hearing Officer from NYSOH'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:

- 1) You testified that you are seeking that your three children be enrolled in their Child Health Plus plan as of January 1, 2016.
- 2) The record reflects that on November 16, 2015, NY State of Health, (NYSOH) received your children's updated application for health insurance.
- 3) You testified that you had used a Broker to help update the information in your account and enroll you and your spouse in a health plan on November 16, 2015, as your and your spouse's coverage with Health Republic was ending.
- 4) The record reflects that after your Broker updated your application, your three children were disenrolled from their Child Health Plus plan effective December 31, 2015.
- 5) The enrollment confirmation notice issued on November 25, 2015 stated that you still needed to pick a health plan for your three children.
- 6) You testified that you contacted the NYSOH on January 5, 2016 and confirmed your children's Child Health Plus plan.
- 7) You testified that you were not aware that your Broker never selected and confirmed your children's Child Health Plus plan when you had updated your coverage on November 16, 2015.

- 8) You testified that you did have medical costs in the form of a primary care physician visit for one of your children during the month of January 2016.
- 9) The record reflects that you reside in Suffolk County.

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

### Applicable Law and Regulations

#### Child Health Plus

A child who meets the eligibility requirements for Child Health Plus (CHP) may be eligible to receive a subsidy payment if the child resides in a household with a household income at or below 400% of the federal poverty level (FPL) (New York Public Health Law (PHL) § 2511(2)(a)(iii)). To be eligible to enroll in CHP with subsidy payments, a child must not be "eligible for medical assistance"; that is, must not be eligible for Medicaid (NY Public Health Law § 2511(2)(b)).

The "period of eligibility" for Child Health Plus is "that period commencing on the first day of the month during which a child is an eligible child and enrolled or recertified for enrollment on an annual basis based on all required information and documentation and ending on the last day of the twelfth month following such date," unless the CHP premiums are not timely paid, or the child no longer resides in New York State, gains access to or obtains other health insurance coverage, or becomes eligible for Medicaid (NY Public Health Law § 2510(6)).

"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)).

The State of New York has provided that a child's period of eligibility for Child Health Plus begins on the first day of the month during which a child is eligible. A child will become eligible on the first day of the next month, if the application is received by the 15th of the month; applications received after the 15th day of the month will be processed for the first day of the second following month (see State Plan Amendment (SPA) NY-14-0005, approved February 3, 2015 and effective January 1, 2014).

#### Legal Analysis

The issue under review is did NY State of Health (NYSOH) properly determine that your children's eligibility for and enrollment in their Child Health Plus (CHP) plan ended December 31, 2016.

NYSOH issued a notice of eligibility determination on February 14, 2015, based on your February 13, 2015 application, stating that your children were eligible for Child Health Plus, effective March 1, 2015. Your children were subsequently enrolled in a Child Health Plus plan beginning March 1, 2015.

Since the period of your child's CHP eligibility began on March 1, 2016, it should have continued until February 29, 2016, unless an event had occurred to disqualify them from CHP eligibility. The record does not indicate that any CHP premiums were not timely paid during the months in question, that your child gained access to or obtained other health insurance, or that your children became eligible for Medicaid. The record does confirm that they still reside in New York State.

You testified that you had used a Broker to help update the information in your account and enroll you and your spouse in a health plan on November 16, 2015 as your coverage had ended with Health Republic.

The record reflects that after your Broker updated your application, your three children were disenrolled from their Child Health Plus plan effective December 31, 2015.

The enrollment confirmation notice issued on November 25, 2015 stated that you still needed to pick a health plan for your three children. During your telephone hearing, you testified that you were not aware that your Broker never selected and confirmed your children's Child Health Plus plan when you had updated your coverage on November 16, 2015.

At the time additional determinations were made after March of 2015, the 12-month period of CHP eligibility that began on March 1, 2015 had not yet expired, and no event had occurred to end your children's eligibility. Therefore, your child's CHP coverage should not have ended effective December 31, 2015.

You testified that you did have medical costs in the form of a primary care physician visit for one of your children during the month of January, 2016. You then re-enrolled your children in a Child Health Plus plan on January 5, 2016 with a plan start date of February 1, 2016.

The November 22, 2015, disenrollment notice stating that CHP coverage for your three children would end effective December 31, 2015 is RESCINDED.

#### **Decision**

The November 22, 2015, disenrollment notice stating that your children's Child Health Plus coverage would end effective December 31, 2015, is RESCINDED.

Your case is RETURNED to the NYSOH to ensure that your children's Child Health Plus coverage is restored effective January 1, 2016, without any gap in coverage.

Effective Date of this Decision: May 20, 2016

#### **How this Decision Affects Your Eligibility**

The effective date of your children's Child Health Plus plan is March 1, 2015. This coverage will continue until February 29, 2016 unless one of the events mentioned above occurs.

You are responsible for paying the insurance carrier any Child Health Plus premiums that are owed for the month of January 2016, when they experienced a gap in coverage.

# 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 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 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.

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# 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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• By fax: 1-855-900-5557

### **Summary**

The November 22, 2015, disenrollment notice stating that your children's Child Health Plus coverage would end effective December 31, 2015, is RESCINDED.

Your case is RETURNED to the NYSOH to ensure that your children's Child Health Plus coverage is restored effective January 1, 2016.

The effective date of your children's reenrollment in Child Health Plus plan is March 1, 2016. This coverage will continue until February 29, 2016 unless one of the events mentioned above occurs.

You are responsible for paying the insurance carrier any Child Health Plus premiums that are owed for the month of January 2016, when they experienced a gap in coverage.

# **Legal Authority**

We are issuing this determination in accordance with 45 CFR § 155.545.

# A Copy of this Decision Has Been Provided To:

