

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

Notice of Decision

Decision Date: May 24, 2016

NY State of Health Account ID: Appeal Identification Number: AP000000006310



On May 10, 2016 you appeared by telephone at a hearing, with the assistance of a Russian interpreter, on your appeal regarding the New York State of Health's December 23, 2015 cancellation and the enrollment notices.

The enclosed Decision, rendered after that hearing, is issued by the Appeals Unit of the 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 the NY State of Health about your appeal and/or the Decision, please refer to the Appeal Identification Number at the top of this letter.

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

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Issues

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

Did New York State of Health properly cancel your youngest child's Child Health Plus (MetroPlus) health plan effective January 1, 2016?

Did New York State of Health properly start your youngest child's Child Health Plus (Fidelis Care) health plan effective February 1, 2016?

Procedural History

On September 12, 2015 the New York State of Health (NYSOH) issued an eligibility determination notice that your youngest child was eligible to enroll through Child Health Plus with a \$9.00 premium per month effective October 1, 2015.

On the same day NYSOH issued an enrollment notice confirming your youngest child's enrollment as of September 11, 2015. The notice states that your child will be enrolled in Fidelis Care and coverage could start as early as October 1, 2015.

On December 11, 2015 NYSOH issued three notices:

- (1) An eligibility determination stating, in relevant parts, that your spouse is eligible for Medicaid effective as of December 1, 2015, and your youngest child was eligible to enroll in Child Health Plus for a cost of \$9.00 per month effective as of January 1, 2016.
- (2) A disenrollment notice stating that your youngest child's Fidelis Care plan would end effective December 31, 2015, because they are no longer eligible to remain enrolled in their current health insurance.

(3) An enrollment notice confirming that as of December 10, 2015, your spouse was enrolled in Medicaid (MetroPlus), and your youngest daughter was enrolled in Child Health Plus (MetroPlus) with a plan enrollment start date of January 1, 2016.

On December 23, 2015 NYSOH issued a cancellation notice stating you requested to cancel your youngest child's MetroPlus plan on December 22, 2015. The notice stated that your child will not have coverage with MetroPlus effective January 1, 2016.

On the same day NYSOH issued an enrollment notice confirming your youngest child's enrollment as of December 22, 2015. The notice states that your child will be enrolled in Fidelis Care with a plan enrollment start date of February 1, 2016.

On January 19, 2016 you spoke to the NYSOH Account Review Unit and requested an appeal insofar as the cancellation date of your youngest child's Child Health Plus (MetroPlus) health plan and the enrollment start date of your child's Child Health Plus (Fidelis Care) health plan.

On May 10, 2016 you had a telephone hearing with a Hearing Officer from NYSOH's Appeals Unit with the assistance of Russian interpreter Testimony was taken during the hearing, and the record was closed at the end of the proceeding.

Findings of Fact

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

- 1. You are appealing your youngest child's (child) cancellation date of their Child Health Plus (MetroPlus) health plan and the enrollment start date of their Child Health Plus (Fidelis Care) health plan.
- 2. Your child's date of birth is
- 3. According to your NYSOH account, your child was enrolled in Fidelis Care with a start date of October 1, 2015.
- 4. You testified that your child's Child Health Plus plan was changed from Fidelis Care to MetroPlus on December 10, 2015. This occurred on the same day your spouse was enrolled in Medicaid (MetroPlus).
- 5. You testified that you contacted NYSOH on December 22, 2015 to change your child's Child Health Plus health plan from MetroPlus to Fidelis Care. You were told by the NYSOH customer service representative that your child's MetroPlus coverage would continue until the Fidelis Care coverage

began and there would be no "negative consequence" if you change your child's plan was changed from MetroPlus to Fidelis Care.

- 6. On December 23, 2015 NYSOH issued a cancellation notice confirming that on December 22, 2015 you requested to cancel your child's insurance coverage with MetroPlus, and the plan would be cancelled effective January 1, 2016
- 7. On December 23, 2015 NYSOH issued an enrollment notice confirming your child's enrollment as of December 22, 2015. The notice states that your child will be enrolled in Fidelis Care with a plan enrollment start date of February 1, 2016
- 8. You testified that your child was not covered for the month of January 2016 and has outstanding medical bills because of the gap in coverage.
- 9. You testified that you paid the January 2016 monthly health insurance premium to MetroPlus.

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

Applicable Law and Regulations

Child Health Plus Disenrollment Date

The State plan must include a description of the state's policies governing enrollment and disenrollment (see 42 CFR § 457.305(b)).

If the enrollee requests a disenrollment, the request is effective the first day of the month following the receipt of the enrollee's request or effective on a future date if requested by the enrollee (NYSDOH 2008-2012 Model Contract (Appendix C Section 12.2)).

Child Health Plus Start Date

"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 e.g. State Plan Amendment (SPA) NY-14-0005, approved February 3, 2015 and effective January 1, 2014).

Legal Analysis

The first issue under review is whether the Marketplace properly cancelled your child's MetroPlus health plan on January 1, 2016.

If the enrollee requests a disenrollment, the request is effective the first day of the month following the receipt of the enrollee's request or effective on a future date, if requested by the enrollee.

According to the record, you contacted the NYSOH on December 22, 2015 to change your child's Child Health Plus health plan from Metro Plus to Fidelis Care. You were advised during the conversation that your child's MetroPlus coverage would continue until your child's Fidelis Care coverage began. The NYSOH customer service representative confirmed that there would be no consequence if you change your child's plan from MetroPlus to Fidelis Care.

Your child's MetroPlus plan was improperly cancelled on January 1, 2016 and should have continued until January 31, 2016.

Therefore, the December 23, 2015 NYSOH cancellation notice stating your child's MetroPlus plan would be cancelled January 1, 2016 is MODIFIED to be cancelled effective January 31, 2016.

The second issue under review is whether the Marketplace properly determined that your child's effective date of coverage through Fidelis Care was February 1, 2016.

The record indicates that you contacted the NYSOH on December 22, 2015 and re-enrolled your child in Fidelis Care.

The date on which a Child Health Plus 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 from the sixteenth day of the month and the end of the month goes into effect on the first day of the second following month.

Since you changed your child's health plan from MetroPlus to Fidelis Care on December 22, 2015, it must take effect on the first day of the second month after December 2015; that is, on February 1, 2016.

Therefore, the December 23, 2015 enrollment notice stating that your child's enrollment in Child Health Plus (Fidelis), with a plan enrollment of February 1, 2016, is correct and AFFIRMED.

This case is RETURNED to NYSOH to ensure that your child's MetroPlus coverage is active from January 1, 2016 through January 31, 2016, and coverage through Fidelis Care is effective February 1, 2016.

Decision

The December 23, 2015 NYSOH cancellation notice stating your child's Child Health Plus (MetroPlus) would be cancelled January 1, 2016 is MODIFIED to state that your child's plan is cancelled effective January 31, 2016.

The December 23, 2015 enrollment notice stating that your child's enrollment in Child Health Plus (Fidelis), with a plan enrollment of February 1, 2016, is correct and AFFIRMED.

This case is RETURNED to the Marketplace to ensure that your child's MetroPlus coverage is active from January 1, 2016 through January 31, 2016, and coverage through Fidelis Care is effective February 1, 2016.

Effective Date of this Decision: May 24, 2016

How this Decision Affects Eligibility

Your child's Child Health Plus (MetroPlus) coverage should have been active from January 1, 2016 through January 31, 2016.

Your child's Child Health Plus (Fidelis Care) coverage should have been effective February 1, 2016.

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 December 23, 2015 NYSOH cancellation notice stating your child's MetroPlus plan would be cancelled January 1, 2016 is MODIFIED to state that your child's plan would be cancelled effective January 31, 2016.

Therefore, the December 23, 2015 enrollment notice stating that your child's enrollment in Child Health Plus (Fidelis), with a plan enrollment of February 1, 2016, is correct and AFFIRMED.

This case is RETURNED to the Marketplace to ensure that your child's MetroPlus coverage is active from January 1, 2016 through January 31, 2016, and coverage through Fidelis Care is effective February 1, 2016.

Your child's Child Health Plus (MetroPlus) coverage should have been active from January 1, 2016 through January 31, 2016.

Your child's Child Health Plus (Fidelis Care) coverage should have been effective February 1, 2016.

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:

