



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

## Notice of Decision

Decision Date: June 23, 2016

NY State of Health Account ID: [REDACTED]  
Appeal Identification Number: AP000000006612

[REDACTED]

Dear [REDACTED],

On June 2, 2016, you appeared by telephone at a hearing on your appeal of NY State of Health's January 27, 2016 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 Account ID 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.

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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DEPARTMENT OF HEALTH  
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## Decision

Decision Date: June 23, 2016

NY State of Health Account ID: [REDACTED]  
Appeal Identification Number: AP000000006612

[REDACTED]

## Issue

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

Did NYSOH properly determine that your child's enrollment in his Child Health Plus plan was effective February 1, 2016?

## Procedural History

On December 19, 2014, NY State of Health (NYSOH) issued a notice of eligibility determination, based on your December 18, 2014 application, stating that your child was eligible for Child Health Plus effective January 1, 2015. Your child was subsequently enrolled in a Child Health Plus plan.

On October 24, 2015, NYSOH issued a notice that it was time to renew your child's health insurance for 2016. That notice stated that, based on information from federal and state sources, NYSOH could not make a decision about whether your child would qualify for financial help paying for his health coverage, and that you needed to update your account by December 15, 2015, or your child might lose the financial assistance he was currently receiving.

No updates were made to your account by December 15, 2015.

On December 21, 2015, NYSOH issued an eligibility determination notice stating that your child was not eligible for Medicaid, Child Health Plus, or to receive tax credits or cost-sharing reductions to help pay for the cost of insurance. Your child also could not enroll in a qualified health plan at full cost. This was because NYSOH could not verify your child's Social Security Number and you had not

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responded to the renewal notice and had not completed your child's renewal within the required time frame. Your child's eligibility ended December 31, 2015.

On January 5, 2016, NYSOH received your child's updated application for health insurance.

On January 6, 2016, NYSOH issued a notice of eligibility determination, based on your January 5, 2016 application, stating that your child was conditionally eligible to enroll in Child Health Plus with a \$9.00 monthly premium, effective February 1, 2016. This determination was based on the condition that you confirm your Social Security number by providing documentation before April 4, 2016.

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

On January 26, 2016, NYSOH received your updated application.

On January 27, 2016, an eligibility determination notice was issued finding your child eligible to enroll in a Child Health Plus for a cost of \$60.00 per month effective March 1, 2016. Your child was subsequently enrolled in a Child Health Plus plan effective February 1, 2016.

On January 29, 2016 you spoke to NYSOH's Account Review Unit and appealed the start date of your child's Child Health Plus plan insofar as it did not begin January 1, 2016.

On June 2, 2016, you had a telephone hearing with a Hearing Officer from NYSOH's Appeals Unit. The record was developed during the hearing and was left open 15 days for you to provide documentation in the form of any notice that was sent to you which made you believe if there were no changes in the information in your account your child's coverage would start January 1, 2016. No documentation was received by June 17, 2016 and the record was closed.

## **Findings of Fact**

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

- 1) You testified, and the record reflects, that you receive all of your notices from NYSOH by regular mail.
- 2) You testified that you did not receive any notices telling you that you needed to update your application in order to renew your child's coverage.

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- 3) You testified you believe you had provided your child's Social Security number previously to the NYSOH when your child was born.
- 4) The December 18, 2014 application indicated you were still in the process of applying for a Social Security number for your child.
- 5) The events tab in your NYSOH account shows on January 26, 2016, your child's identity information changed and your child's Social Security Number was added to your NYSOH account.
- 6) You testified that you did not know that you needed to update your account until you took your child to his physician in January, 2016. You incurred a medical bill of approximately \$350.00.
- 7) You testified that you did pay a premium amount for your child for January 2016. You were told that this premium payment would then be applied his new Child Health Plus
- 8) The record reflects that on January 5, 2016, NYSOH received your child's updated application for health insurance.
- 9) You testified that you are seeking that your child be enrolled in his Child Health Plus plan as of January 1, 2016.

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

## **Applicable Law and Regulations**

### Annual Eligibility Redetermination

Generally, when NYSOH conducts annual eligibility redeterminations for qualified individuals who are seeking financial assistance through insurance affordability programs for the upcoming year, NYSOH is required to request that the qualified individual provide updated income and family size information for use in an eligibility redetermination for the upcoming year (see 45 Code of Federal Regulations (CFR) § 155.335(a)(b)).

NYSOH must send an annual renewal notice that contains the individual's projected eligibility for the upcoming year (45 CFR § 155.335(c)(3)). If a qualified individual does not respond to the notice after a 30-day period, NYSOH must redetermine that individual's eligibility using the information and projected

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eligibility provided in the annual renewal notice (45 CFR § 155.335(g)(h)). NYSOH must ensure this redetermination is effective on the first day of the coverage year or in accordance with the rules specified in 45 CFR § 155.330(f) regarding effective dates, whichever is later (45 CFR § 155.335(i)).

### Child Health Plus

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).

### Social Security Number Verification

If an applicant applies for Child Health Plus, the agency must require as a condition of eligibility, they furnish their Social Security number. (42 CFR § 457.340 (b)) (42 CFR § 435.910 (f)).

## **Legal Analysis**

The issue under review is whether NYSOH properly determined that your child’s enrollment in his Child Health Plus plan was effective February 1, 2016.

Your child was originally found eligible for Child Health Plus effective January 1, 2015.

Generally, NYSOH must redetermine a qualified child's eligibility for Child Health Plus once every twelve months without requiring information from the individual if

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able to do so based on reliable information contained in the individual's account or other more current information available to the agency. NYSOH's October 24, 2015, renewal notice stated that there was not enough information to determine whether your child was eligible to continue their financial assistance for health insurance, and that you needed to supply additional information by December 15, 2015, or their financial assistance might end.

Because there was no timely response to this notice, your child was terminated from his Child Health Plus plan effective December 31, 2015. The notice terminating his enrollment also stated that you had failed to provide a valid Social Security Number for your child.

You testified that you did not receive any notice from NYSOH telling you that you needed to update the information in your NYSOH account on your child's behalf. You testified, and your NYSOH account confirms, that you elected to receive notifications via regular mail. However, there is no evidence in the record that any of the notices that were sent to your mailing address were returned as undeliverable. Furthermore, you testified you believed you had provided your child's Social Security number previously to NYSOH when your child was born however, the December 18, 2014 application indicated you were still in the process of applying for a Social Security number for your child. The record indicates that January 26, 2016 is the first time NYSOH received an updated Social Security number in order to validate your child's identity.

Therefore, the record reflects that NYSOH properly notified you of your child's annual renewal and that information in your NYSOH account needed to be updated in order to ensure your child's eligibility for and enrollment in his Child Health Plus plan.

You first renewed your child's eligibility for financial assistance through NYSOH for 2016 on January 5, 2016, and enrolled your child into a Child Health Plus plan that day. You then updated your application for financial assistance again on January 26, 2016 with updated income and identity information. This updated changed your premium responsibility, but not the start date of your child's health plan.

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 between the sixteenth day of the month and the end of the month goes into effect on the first day of the second following month. Because your child's health plan was selected on January 5, 2016, it properly began the first day of the following month, February 1, 2016.

Therefore, NYSOH's January 27, 2016, enrollment confirmation notice is AFFIRMED because it properly began your child's eligibility for and enrollment in Child Health Plus on February 1, 2016.

## **Decision**

The January 27, 2016, enrollment confirmation notice is AFFIRMED.

**Effective Date of this Decision:** June 23, 2016

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

This decision does not change your child's eligibility.

The effective date of your child's Child Health Plus plan is 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 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.



## **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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## **Summary**

The January 27, 2016, enrollment confirmation notice is **AFFIRMED**.

This decision does not change your child's eligibility.

The effective date of your child's Child Health Plus plan is February 1, 2016.

## **Legal Authority**

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

**A Copy of this Decision Has Been Provided To:**

