

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

# **Notice of Decision**

Decision Date: June 28, 2016

NY State of Health Account ID: Appeal Identification Number: AP000000006728



Dear

On June 22, 2016 you appeared by telephone at a hearing on your appeal of NY State of Health's January 13, 2016 eligibility determination and January 30, 2016 enrollment confirmation 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 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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STATE OF NEW YORK DEPARTMENT OF HEALTH P.O. Box 11729 Albany, NY 12211

#### Decision

Decision Date: June 28, 2016

NY State of Health Account ID: Appeal Identification Number: AP000000006728



#### 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 eligibility for and enrollment in an Essential Plan was effective February 1, 2016?

# **Procedural History**

On February 10, 2015, NY State of Health (NYSOH) issued a notice stating that your employer was offering health insurance coverage through the Small Business Marketplace and that you were automatically re-enrolled into your health plan from the previous year.

On November 16, 2015, NYSOH issued a notice stating that the coverage through your employer was modified because of the wind down of Health Republic. The notice stated that you must re-enroll by November 30, 2015 for you to have coverage as of December 1, 2015.

On November 30, 2015, a NYSOH representative under your direction updated your NYSOH account. That day, you were found eligible to enroll in the Essential Plan and you selected an Essential Plan for enrollment.

On December 3, 2015, a NYSOH representative updated your account to enroll you into a qualified health plan for December 2015.

On December 4, 2015, NYSOH issued an eligibility determination notice, based on the December 3, 2015 update, stating that you were eligible to purchase a qualified health plan, effective January 1, 2016.

Also on December 4, 2015, NYSOH issued an enrollment confirmation notice stating that you were enrolled in a full-pay bronze level qualified health plan, effective January 1, 2016.

On December 5, 2015, NYSOH issued a notice of eligibility determination, based on your November 30, 2015 application, stating that you were eligible to enroll in the Essential Plan, effective January 1, 2016.

Also on December 5, 2015, NYSOH issued an enrollment confirmation notice stating that you were enrolled in the Essential Plan, effective January 1, 2016.

On December 17, 2015, a cancellation notice was issued stating that your insurance through the Essential Plan has been cancelled and will end effective January 1, 2016.

Also on December 17, 2015 another cancellation notice was issued stating that your insurance coverage through your full-pay bronze level qualified health plan has been cancelled and will end effective January 1, 2016.

On December 20, 2015, December 21, 2015, December 23, 2015, and December 24, 2015, NYSOH issued notices of eligibility determination stating that you were eligible to enroll in a qualified health plan.

On January 13, 2016, NYSOH issued an eligibility determination notice stating that you were eligible to enroll in the Essential Plan, effective February 1, 2016.

On January 30, 2016, NYSOH issued an enrollment confirmation notice stating that you were enrolled in an Essential Plan effective March 1, 2016.

On February 2, 2016, you spoke to NYSOH's Account Review Unit and appealed the start date of your enrollment in the Essential Plan insofar as it did not begin January 1, 2016.

On June 14, 2016, you were scheduled to have a telephone hearing with a Hearing Officer from NYSOH's Appeals Unit. You requested that your hearing be adjourned to a later date.

On June 22, 2016 you had an adjourned 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 were enrolled into a Health Republic plan through your employer up until November 30, 2015.
- 2) You testified that you went from a full time schedule with your employer to part time schedule, and as a result you were eligible for financial assistance to pay for health insurance through NYSOH because your employer coverage was unaffordable.
- 3) The record indicates that on November 30, 2015, your NYSOH Account was updated and you were found eligible for the Essential Plan. You enrolled into a plan that was effective January 1, 2016.
- 4) You testified that you were going to forgo having coverage for the month of December but then decided to enroll into a qualified health plan for December only until your Essential Plan started in January.
- 5) The record indicates that a NYSOH representative enrolled you into a bronze level qualified health plan on December 3, 2015 for December coverage. The Appeal Note in relation to this event ask for someone to reach out to you to complete 2016 coverage.
- 6) You testified that you never received a phone call from NYSOH to complete your 2016 coverage again.
- 7) You testified that you attempted to complete an application for 2016 coverage and reenroll into an Essential Plan yourself.
- 8) The events tab in your NYSOH account indicates that on December 14, 2015 and on December 19, 2015 you accessed your NYSOH account.
- 9) You testified that you attempted to call NYSOH for assistance numerous times in December.
- 10)The record indicates that you were able to select an Essential Plan for enrollment on January 29, 2016 and that plan was originally effective as of March 1, 2016.
- 11)The record indicates that NYSOH backdated your Essential Plan to begin February 1, 2016 due to a defect being present on your account.

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

# **Applicable Law and Regulations**

#### Essential Plan Effective Date

For individuals seeking enrollment in an Essential Plan, New York State has elected to follow the same rules that NYSOH uses in determining effective dates for individuals seeking enrollment in qualified health plans (NY Social Services Law § 369-gg(4)(c); New York's Basic Health Plan Blueprint, p. 16, as approved January 2016; see https://www.medicaid.gov/basic-health-program/basic-health-program.html).

The effective date of coverage by an Essential Plan is determined by the date on which an applicant selects a plan for enrollment. For individuals who are eligible for enrollment, NYSOH must generally ensure that coverage is effective the first day of the following month for selections received by NYSOH from the first to the fifteenth of any month (45 CFR §§ 155.410(f)(2), 155.420(b)(1)(i); see also 42 CFR § 600.320). For selections received by NYSOH from the sixteenth to the last day of any month, NYSOH must ensure coverage is effective the first day of the second following month (45 CFR §§ 155.410(f)(2), 155.420(b)(1)(i)).

## Legal Analysis

The issue is whether NYSOH properly determined that your eligibility for and enrollment in the Essential Plan was effective February 1, 2016.

Prior to November 30, 2015 you were enrolled in employer sponsored health insurance coverage. You testified that you were going to forgo having coverage for the month of December but then decided to enroll into a qualified health plan for December only.

The record indicates that a NYSOH representative enrolled you into a bronze level qualified health plan on December 3, 2015 for December coverage. The Appeal Note in relation to this event asked for someone to reach out to you to complete 2016 coverage. However, the record indicates that on November 30, 2015, your NYSOH Account was updated and you were found eligible for the Essential Plan. You enrolled into a plan that was effective January 1, 2016.

When the NYSOH representative enrolled you into coverage for December 2015, it removed you from your January 1, 2016 coverage in the Essential Plan. You testified that you never received a phone call from NYSOH to complete your 2016 coverage again. You testified, and the events tab in your NYSOH account confirms, that you attempted to complete an application for 2016 coverage and reenroll into an Essential Plan yourself but you were unable to. You also

attempted to call NYSOH for assistance numerous times in December but you were unable to reselect an Essential Plan for enrollment until January 29, 2016. Your Essential Plan was originally effective as of March 1, 2016 but NYSOH backdated it to begin February 1, 2016 due to a defect being present on your account

The date on which enrollment in an Essential Plan can take effect depends on the day a person selects the plan for enrollment.

A plan that is selected from the first day to and including the 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 to the end of the month goes into effect on the first day of the second following month.

Since you originally selected the Essential Plan on November 30, 2015 that you intended to be effective as of January 1, 2016, and the subsequent events that removed you from that plan occurred because of the actions and inactions of NYSOH representatives, enrollment in the Essential Plan, should have taken effect on the first day of the second month following November; that is, on January 1, 2016.

Therefore, the January 13, 2016 notice of eligibility redetermination is MODIFIED to state that, effective January 1, 2016, you are eligible to enroll in the Essential Plan, and the January 30, 2016 notice of enrollment confirmation is MODIFIED to state that your enrollment in an Essential Plan is effective January 1, 2016.

#### Decision

The January 13, 2016 notice of eligibility redetermination is MODIFIED to state that, effective January 1, 2016, you are eligible to enroll in the Essential Plan.

The January 30, 2016 notice of enrollment confirmation is MODIFIED to state that your enrollment in an Essential Plan is effective January 1, 2016.

Your case is RETURNED to NYSOH to reinstate you into your Essential Plan as of January 1, 2016.

#### Effective Date of this Decision: June 28, 2016

## How this Decision Affects Your Eligibility

The effective date of your Essential Health Plan is January 1, 2016.

Your case is being sent back to NYSOH to facilitate this change.

# 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:

NY State of Health Appeals P.O. Box 11729 Albany, NY 12211

• By fax: 1-855-900-5557

# Summary

The January 13, 2016 notice of eligibility redetermination is MODIFIED to state that, effective January 1, 2016, you are eligible to enroll in the Essential Plan.

The January 30, 2016 notice of enrollment confirmation is MODIFIED to state that your enrollment in an Essential Plan is effective January 1, 2016.

The effective date of your Essential Health Plan is January 1, 2016.

Your case is being sent back to NYSOH to facilitate this change.

# Legal Authority

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

A Copy of this Decision Has Been Provided To:



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).