



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

Notice of Decision

Decision Date: August 2, 2016

NY State of Health Account ID: [REDACTED]
Appeal Identification Number: AP000000006738

[REDACTED]

Dear [REDACTED],

On July 7, 2016, you appeared by telephone at a hearing on your appeal of NY State of Health's January 15, 2016 and January 27, 2016 enrollment 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 at the top of this notice.

Legal Authority

We are sending you this notice in accordance with federal regulation 45 CFR § 155.545(b).

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).

This page intentionally left blank.



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

Decision

Decision Date: August 2, 2016

NY State of Health Account ID: [REDACTED]
Appeal Identification Number: AP000000006738



Issue

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

Did NY State of Health properly determine that your two youngest children's Child Health Plus plan enrollment start date should be February 1, 2016?

Did NY State of Health properly determine your eldest child's Essential Plan enrollment start date should be March 1, 2016?

Procedural History

On December 16, 2014, NYSOH issued an eligibility determination notice that your three children are eligible to enroll in health coverage through Child Health Plus at no cost, effective as of January 1, 2015.

On October 24, 2015, NYSOH issued a notice that it was time to renew your children'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 children would qualify for financial help paying for their health coverage, and that you needed to update your account by December 15, 2015 or you might lose the financial assistance you are currently receiving.

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

On December 22, 2015, NYSOH issued an eligibility determination notice that your children were not eligible for financial assistance or cannot enroll in a qualified health plan at full cost through NY State of Health. The notice states

that you failed to respond to the renewal notice and that their eligibility will end December 31, 2015.

Also on December 22, 2015, NYSOH issued a disenrollment notice stating that your children's CDPHP coverage would end effective December 31, 2015. The notice stated that your children's coverage was ending because you did not renew their health insurance coverage.

On January 14, 2016, your NYSOH account was updated.

On January 15, 2016, NYSOH issued an eligibility determination notice that your eldest child was eligible to enroll in the Essential Plan effective as of February 1, 2016, and your two youngest children were eligible to enroll in Child Health Plus for a cost of \$9.00 per month effective as of February 1, 2016.

Also on January 15, 2016, NYSOH issued an enrollment notice confirming that on January 14, 2016, your two youngest children were enrolled in Child Health Plus (CDPHP) with a plan enrollment start date of February 1, 2016.

On January 27, 2016, NYSOH issued an enrollment notice confirming that on January 26, 2016, your eldest child was enrolled in Essential Plan 1 (MVP Health Care) with a plan enrollment start date of March 1, 2016.

On February 2, 2016, you spoke to NYSOH's Account Review Unit and requested an appeal insofar as your children's enrollment start dates.

On June 15, 2016, you had a scheduled telephone hearing with a Hearing Officer from NYSOH's Appeals Unit. At that time you stated that you did not receive a Notice of Telephone Hearing and wanted the hearing to be postponed. The hearing was adjourned until July 7, 2016.

On July 7, 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 supports the following findings of fact:

- 1) According to your NYSOH account and testimony, you are applying for health insurance coverage for your three children.
- 2) According to your NYSOH account, your children were originally enrolled in Child Health Plus effective January 1, 2015.

- 3) On October 24, 2015, NYSOH issued a notice that it was time to renew your children's health insurance for 2016. That notice stated that you needed to update your account by December 15, 2015 or you might lose the financial assistance that is currently be received.
- 4) Your NYSOH account indicates that you elected to receive notices from NYSOH via U.S. mail.
- 5) You testified that you do not recall changing your preference on how NYSOH sends you notices.
- 6) You testified that you did receive a notice from NYSOH requesting that you update the information in your NYSOH account to ensure that your children's health insurance coverage would be renewed.
- 7) You testified that you discovered that your children's coverage had been cancelled at a doctor's appointment in January 2016.
- 8) According to your NYSOH account, your two youngest children were enrolled in Child Health Plus on January 14, 2016.
- 9) According to your NYSOH account, your eldest child was enrolled in an Essential Plan on January 26, 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, NYSOH must conduct annual eligibility redeterminations for qualified individuals who are seeking financial assistance through insurance upcoming year, such as tax credits and cost-sharing reductions, Medicaid, or Child Health Plus. In such cases, 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 CFR § 155.335(a) and (b)).

NYSOH must send an annual renewal notice that contains the information by which NYSOH will use to redetermine a qualified individual's projected eligibility for that 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 provided in the annual renewal notice (45 CFR § 155.335(g), (h)).

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).

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

Essential Plan Effective Date

Generally, if the individual enrolls in an Essential Plan between the first and fifteenth day of any month, the Marketplace must ensure a coverage effective date of the first day of the following month.

If an individual enrolls between the sixteenth and last day of the month for any month, NYSOH must ensure a coverage effective date of the first day of the second following month (N.Y. Social Services Law § 369-gg(4)(c)); 45 CFR § 155.420(b)(i-ii)).

However, the enrollment period was further extended to December 19, 2015 for individuals to have coverage effective January 1, 2016 (Press Release: NY State of Health Extends Enrollment Deadline for January 1

Coverage: https://www.health.ny.gov/press/releases/2015/2015-12-15_enrollment_deadline_extension.htm

Legal Analysis

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).

The issue under review is whether NYSOH properly determined that your two youngest children's enrollment in their Child Health Plus plan was effective February 1, 2016.

Your children were 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 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 children were 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 children were terminated from their Child Health Plus plan effective December 31, 2015.

You testified that you did not receive any notices from NYSOH telling you that you needed to update the information in your NYSOH account on your children's behalf. According to your NYSOH account, you elected to receive notifications via regular mail. Furthermore, you testified that you do not recall changing your preference on how you receive notices from NYSOH. There is no evidence in the record that any of the notices that were sent to your mailing address were returned as undeliverable.

The record reflects that NYSOH properly notified you of your children's annual renewal and that information in your NYSOH account needed to be updated in order to ensure your children's coverage through NYSOH would continue.

You first renewed all three of your children's eligibility for financial assistance through NYSOH for 2016 on January 14, 2016, and enrolled your two youngest children into a Child Health Plus plan that same day.

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.

Therefore, NYSOH's January 15, 2016, enrollment notice confirming that your two youngest children's Child Health Plus enrollment start date if February 1, 2016 is correct.

The second issue is whether NYSOH properly determined that your eldest child's enrollment in their Essential plan was effective March 1, 2016.

According to your NYSOH account, your eldest child was enrolled in an Essential plan on January 26, 2016.

The date on which an Essential 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.

Therefore, the January 27, 2016, enrollment notice confirming that your eldest child's Essential Plan enrollment start date was March 1, 2016 is correct.

Decision

The January 15, 2016, enrollment notice confirming that your two youngest children's Child Health Plus plan enrollment start date is February 1, 2016, is **AFFIRMED**.

The January 27, 2016, enrollment notice confirming that your eldest child's Essential Plan enrollment start date is March 1, 2016, is **AFFIRMED**.

Effective Date of this Decision: August 2, 2016

How this Decision Affects Your Eligibility

The enrollment start date of your two youngest children's Child Health Plus (CDPHP) is February 1, 2016.

The enrollment start date of your eldest child's Essential Plan (MVP Health Care) is March 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.

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).

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 January 15, 2016, enrollment notice confirming that your two youngest children's Child Health Plus plan enrollment start date is February 1, 2016, is AFFIRMED.

The January 27, 2016, enrollment notice confirming that your eldest child's Essential Plan enrollment start date is March 1, 2016, is AFFIRMED.

The enrollment start date of your two youngest children's Child Health Plus (CDPHP) is February 1, 2016.

The enrollment start date of your eldest child's Essential Plan (MVP Health Care) is March 1, 2016.

Legal Authority

We are sending you this notice in accordance with 45 CFR § 155.545(a).

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).

A Copy of this Decision Has Been Provided To:

