



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

Notice of Decision

Decision Date: August 22, 2016

NY State of Health Account ID: [REDACTED]
Appeal Identification Number: AP000000007580



Dear [REDACTED],

On August 12, 2016, [REDACTED] [REDACTED] your spouse, appeared by telephone at a hearing on your appeal of NY State of Health's February 17, 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 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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Issue

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

Did NY State of Health (NYSOH) properly determine that your spouse's enrollment in her Medicaid Managed Care plan was effective April 1, 2016, and not March 1, 2016?

Procedural History

On February 17, 2016, NYSOH issued a notice of eligibility redetermination, based on your February 16, 2016 updated application that in part stated your spouse was eligible for Medicaid, effective February 1, 2016.

Also on February 17, 2016, NYSOH issued a notice of enrollment in the plan your spouse selected on February 16, 2016 that stated she was enrolled in a Medicaid Managed Care (MMC) plan, and that her coverage would start on April 1, 2016.

On March 2, 2016, your spouse's eligibility was preliminarily redetermined with the same eligibility findings and enrollment start date in her MMC plan of April 1, 2016.

Also on March 2, 2016, your spouse spoke to NYSOH's Account Review Unit and appealed the start date of her enrollment in her MMC plan, insofar as it did not begin March 1, 2016.

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On August 12, 2016, your spouse 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 and/or your spouse submitted an updated application to NYSOH for financial assistance on January 6, 2016, to add that your spouse was pregnant.
- 2) On January 28, 2016, your spouse's pregnancy was changed to being pregnant with twins.
- 3) On January 6, 2016, January 22, 2016, and January 29, 2016, NYSOH determined your spouse to be eligible to purchase a qualified health plan at full cost because she had coverage on another NYSOH account.
- 4) Your spouse testified that she began the process of switching over from her ex-spouse's NYSOH account and health plan to your NYSOH account in December 2015.
- 5) On December 28, 2015, copies of a 2014 Matrimonial Judgment, filed [REDACTED] with and certified by the New York County Clerk, along with a Judgment of Divorce regarding your spouse, were uploaded to your NYSOH account (see Document [REDACTED]).
- 6) On January 13, 2016, a copy of a January 6, 2016 letter from NYSOH was uploaded that informed you additional information was required to prove your citizenship.
- 7) On January 15, 2016, you uploaded a copy of the front of your permanent resident card (See Document [REDACTED]). On January 22, 2016, NYSOH deemed this submission invalid because important information is contained on the back side of the card.
- 8) On January 28, 2016, a copy of a January 26, 2016 letter from NYSOH was uploaded that informed you additional information was required to prove your immigration.
- 9) On January 30, 2016, a copy of your January 28, 2016 facsimile was uploaded to your NYSOH account, this time, with the front and back of your permanent resident card (see Document [REDACTED]).

- 10) On February 2, 2016, a copy of your January 29, 2016 facsimile was uploaded to your NYSOH account, also including the front and back of your permanent resident card (see Document [REDACTED]).
- 11) Your spouse testified that she contacted NYSOH on Tuesday, February 11, 2016, to obtain an update and to select an MMC plan, and was told by a NYSOH agent that she needed to wait until her paperwork was processed and should call back the following Monday, February 15, 2016.
- 12) Your spouse testified that she called back on February 15, 2016 but it was a national holiday (President's Day) and NYSOH was closed, so she called the next day to select an MMC plan and was told coverage could not start until April 1, 2016, because she selected a plan after the 15th of the month.
- 13) Your spouse testified that she gave birth on [REDACTED] before her due date, and her obstetrician does not participate in Medicaid Fee-For-Service, so the medical services p[rovided were not covered.
- 14) Your spouse testified that you both complied with the document requests on many occasions and the only reason she does not have MMC coverage for March 1, 2016 was because NYSOH had not processed your paperwork on time and told her to call back on February 15, 2016, a date when NYSOH was closed.

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

Applicable Law and Regulations

Medicaid

An individual is eligible for fee-for-service Medicaid effective on the first day of the month if an individual was eligible any time during that month (42 CFR § 435.915(b), Medicaid Eligibility Changes under the Affordable Care Act (ACA) of 2010, 13ADM-03(III)(F)).

Medicaid Managed Care plan enrollments received on or before the fifteenth day of the month are effective the first day of the following month. Enrollments received after the fifteenth day of the month are effective the first day of the second following month (Medicaid Managed Care Model Contract (Appendix H-6(b)(ii) & (iii), effective 3/1/2014 – 2/28/2019; see 42 USC § 1315; § 364-j(1)(c); 18 NYCRR § 360-10.3(h), Medicaid Eligibility Changes under the Affordable Care Act (ACA) of 2010, 13ADM-03(III)(F)).

Legal Analysis

The issue is whether NYSOH properly determined that your spouse's enrollment in her MMC plan was effective April 1, 2016 and not March 1, 2016.

Your spouse testified that she contacted NYSOH on February 11, 2016, after all the required documentation had been submitted to enroll in an MMC plan.

The date on which an MMC 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 will go into effect on the first day of the following month. A plan that is selected on or after the sixteenth day of the month will go into effect on the first day of the second following month.

On February 16, 2016, your spouse selected an MMC plan, so it ordinarily would properly take effect on the first day of the second month following after February 2016; that is, on April 1, 2016.

However, your spouse was told to call back on February 15, 2016 after your document submissions were verified to select an MMC plan. The record reflects that Monday, February 15, 2016 was a national holiday and NYSOH was closed such that she was not able to select an MMC plan by the 15th of February 2016 despite her efforts.

Therefore, given these extenuating circumstances and your and your spouse's repeated efforts to comply with document requests, the February 17, 2016 enrollment confirmation notice stating that your spouse's enrollment in her MMC plan would be effective April 1, 2016, is MODIFIED to state her MMC plan enrollment start date is March 1, 2016.

Your case is returned to NYSOH to effectuate this start date for your spouse in her MMC plan and to notify you accordingly.

Decision

The February 17, 2016 enrollment confirmation notice stating that your spouse's enrollment in her MMC plan would be effective April 1, 2016, is MODIFIED to state her MMC plan enrollment start date is March 1, 2016.

Your case is returned to NYSOH to effectuate this start date for your spouse in her MMC plan and to notify you accordingly.

This decision does not affect any subsequent determinations made by NYSOH.

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).

Effective Date of this Decision: August 22, 2016

How this Decision Affects Your Eligibility

This decision does not change your spouse's eligibility.

The effective date of her MMC plan is being changed from April 1, 2016 to March 1, 2016. NYSOH will notify you once the start date of her enrollment is changed.

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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- By fax: 1-855-900-5557

Summary

The February 17, 2016 enrollment confirmation notice stating that your spouse's enrollment in her MMC plan would be effective April 1, 2016, is MODIFIED to state her MMC plan enrollment start date is March 1, 2016.

Your case is returned to NYSOH to effectuate this start date for your spouse in her MMC plan and to notify you accordingly.

This decision does not affect any subsequent determinations made by NYSOH.

This decision does not change your spouse's eligibility.

The effective date of her MMC plan is being changed from April 1, 2016 to March 1, 2016. NYSOH will notify you once the start date of her enrollment is changed.

Legal Authority

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

A Copy of this Decision Has Been Provided To:

