



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

Notice of Decision

Decision Date: November 7, 2016

NY State of Health Account ID: [REDACTED]
Appeal Identification Number: AP000000008758

[REDACTED]

Dear [REDACTED]

On October 27, 2016, you appeared by telephone at a hearing on your appeal of NY State of Health's December 24, 2015 and February 25, 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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DEPARTMENT OF HEALTH
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Decision

Decision Date: November 7, 2016

NY State of Health Account ID: [REDACTED]
Appeal Identification Number: AP000000008758

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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 properly determine that your enrollment in an Essential Plan was effective April 1, 2016?

Procedural History

On February 16, 2015, NY State of Health (NYSOH) issued a notice of eligibility determination, based on your February 15, 2015 application, stating that you were eligible to receive advanced premium tax credits (APTC) in an amount of up to \$248.00 per month, effective March 1, 2015.

On October 23, 2015, NYSOH issued a renewal notice, stating that it was time to renew your health insurance for the upcoming coverage year. That notice stated that, based on information from federal and state sources, NYSOH could not make a decision about whether you would qualify for financial help paying for your health coverage, and that you needed to update your account by December 15, 2015 or you might lose the financial assistance you were 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 you were newly eligible to purchase a qualified health plan (QHP) at full cost. That notice also state that you were not eligible for Medicaid, Child Health Plus, the Essential Plan or to receive tax credits or cost-sharing reductions to help pay

for the cost of insurance. This was because you had not responded to the renewal notice and had not completed your renewal within the required time frame. Your eligibility was to end effective January 1, 2016.

On February 24, 2016, NYSOH received your updated application for health insurance.

On February 25, 2016, NYSOH issued an eligibility redetermination notice stating that you were eligible for the Essential Plan, and that your coverage for the Essential Plan would be effective April 1, 2016.

Also on February 25, 2016, NYSOH issued a notice of enrollment, based on your plan selection on February 24, 2016, stating that you were enrolled in the Essential Plan, and that your plan would start April 1, 2016.

Also on February 25, 2016, NYSOH issued a disenrollment notice stating that your coverage in your QHP would end effective March 31, 2016.

On April 7, 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 on January 1, 2016.

On October 27, 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 your testimony, you receive all of your notices from NYSOH via regular mail.
- 2) You testified that you did not receive any notice by regular mail regarding any notice telling you that you needed to update your application in order to renew your eligibility. You testified that the notice must have been sent to the incorrect address.
- 3) According to your NYSOH account, your mailing address remained the same prior to the October 23, 2015 renewal notice being issued, but NYSOH mailed your notice, as well as your December 2015 notices, to the legal address on file instead of your mailing address on your NYSOH account.

- 4) You testified that you did not know that you needed to update your account or that you had been enrolled in a QHP at full cost as of January 1, 2016.
- 5) You further testified that you had authorized automatic withdrawal in 2015, which the QHP used to deduct \$139.00 per month in 2016.
- 6) You testified that you were unaware that the terms of the health plan had changed to include a \$2,000.00 deductible.
- 7) You testified that you have \$1,500.00 in hospital bills for the period of time that you were enrolled in the QHP at full cost because of the deductible terms of that QHP.
- 8) You testified that the hospital bills prompted you to contact your QHP, at which time you first learned that the premium amount and terms of coverage had changed significantly.
- 9) The record reflects that on February 24, 2016, NYSOH received your updated application for health insurance and redetermined you eligible for the Essential Plan, effective April 1, 2016. You enrolled in a plan on that same day, also effective April 1, 2016.
- 10) You testified that you wanted your enrollment in the Essential Plan to begin on January 1, 2016, because you did not receive notice to renew or notice that the terms of your health plan had changed, you had higher premiums, and owed a balance of premiums for the months of January, February, and March 2016, since only \$139.00 was being deducted for each month and not the full cost of coverage.

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 affordability programs for the upcoming year, such as tax credits and cost-sharing reductions, Medicaid, Essential Plan 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)).

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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 and projected 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)). The rules specified in 45 CFR § 155.330(f) are not pertinent here.

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)(ii)).

Legal Analysis

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

NYSOH must redetermine a qualified individual's eligibility for health insurance and financial assistance to help pay for that health insurance annually. NYSOH must issue a renewal notice that contains the individual's projected eligibility. If an individual does not respond to this notice, NYSOH must issue an eligibility determination for the upcoming coverage year based on the information contained in the renewal notice.

On October 23, 2015, NYSOH issued an annual renewal notice in your case. That notice stated that based on information from federal and state sources, NYSOH could not make a decision about whether or not you would qualify for

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financial help with paying for your health coverage. You were asked to update the information in your account by December 15, 2015 or the financial help you were receiving might end.

Because there was no timely response to this notice, your eligibility for financial assistance and your enrollment in a qualified health plan was terminated effective December 31, 2015 and, lacking updated income information, you were enrolled in a QHP at full cost, effective January 1, 2016.

Notwithstanding, you testified that you did not receive any notice from NYSOH telling you that you needed to update the information in your NYSOH account. You further testified that, having no notice, you did not know that you needed to update your account or that your health plan terms had changed until you incurred hospital bills during the months at issue. At that time, you called your health plan to find out why the terms of your health plan had changed including having a \$2,000.00 deductible.

You testified, and your NYSOH account confirms, that you elected to receive notifications by regular mail.

However, your NYSOH account also reflects that prior to your October 2015 renewal notice being issued, you listed two addresses, a residential address and a mailing address. You stated that your notices were sent to an incorrect address and it's because of this fact that you didn't receive the renewal notice. A review of your NYSOH account confirms that the October 2015 renewal notice, along with your December 2015 notices were sent to your residential address, instead of the mailing address.

Therefore, it is concluded that NYSOH did not give you the required notice to you that you needed to update your account.

You first renewed your eligibility for financial assistance through NYSOH for the upcoming coverage year on February 24, 2015 and, therefore, we must assume that the information you provided at that time is the information that would have been used had you been timely informed of the need to update your account, as stated in the renewal notice.

Had the information been submitted at that time, your enrollment in your Essential Plan would have begun on January 1, 2016.

Therefore, the February 25, 2016 notice of enrollment confirmation is MODIFIED to state that your enrollment in your Essential Plan was effective January 1, 2016.

Decision

The February 25, 2016 notice of enrollment confirmation is MODIFIED to state that your enrollment in your Essential Plan was effective January 1, 2016.

Your case is RETURNED to NYSOH to facilitate correcting your enrollment in your Essential Plan to the effective date of January 1, 2016, and to notify you accordingly.

Effective Date of this Decision: November 7, 2016

How this Decision Affects Your Eligibility

Your enrollment in your Essential Plan should have been effective as of January 1, 2016.

Your case is being sent back to NYSOH to enroll you in your Essential Plan as of January 1, 2016. NYSOH will notify you once your enrollment has been effectuated.

Since the QHP you were enrolled from January 1, 2016 through March 31, 2016 is the same insurer of your Essential Plan, adjustments to your premium, deductibles, and claims will be needed. You can contact your insurer directly to facilitate these adjustments.

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)).

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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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P.O. Box 11729
Albany, NY 12211
- By fax: 1-855-900-5557

Summary

The February 25, 2016 notice of enrollment confirmation is MODIFIED to state that your enrollment in your Essential Plan was effective January 1, 2016.

Your case is RETURNED to NYSOH to facilitate correcting your enrollment in your Essential Plan to the effective date of January 1, 2016, and to notify you accordingly.

Your enrollment in your Essential Plan should have been effective as of January 1, 2016.

Your case is being sent back to NYSOH to enroll you in your Essential Plan as of January 1, 2016. NYSOH will notify you once your enrollment has been effectuated.

Since the QHP you were enrolled from January 1, 2016 through March 31, 2016 is the same insurer of your Essential Plan, adjustments to your premium, deductibles, and claims will be needed. You can contact your insurer directly to facilitate these adjustments.

Legal Authority

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A Copy of this Decision Has Been Provided To:

