



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

Notice of Decision

Decision Date: November 2, 2016

NY State of Health Account ID: [REDACTED]
Appeal Identification Number: AP000000008963

[REDACTED]

Dear [REDACTED]

On October 25, 2016 you appeared by telephone at a hearing on your appeal of NY State of Health's March 22, 2016 notice of enrollment confirmation.

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

Procedural History

On January 28, 2015, NY State of Health (NYSOH) issued a notice of eligibility determination, based on your January 27, 2015 application, stating that your child was eligible for Child Health Plus, effective March 1, 2015. Your child was subsequently enrolled in a Child Health Plus plan.

On February 8, 2016, NYSOH issued a notice stating that your child was eligible to enroll in a Child Health Plus plan, however, you would need to pick a plan for your son between February 16, 2016 and March 15, 2016. This was because your son could not be enrolled in his current health plan for the next coverage year. The notice advised that you must select a different health plan for your son between February 16, 2016 and March 15, 2016 to continue his coverage.

No updates were made to your account by March 15, 2016.

On March 16, 2016, NYSOH issued a disenrollment notice advising that your child's coverage in his Child Health Plus Plan would end effective March 31, 2016, because your child was no longer eligible to remain in his current health insurance.

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On March 21, 2016, NYSOH received your child's updated application for health insurance.

On March 22, 2016, NYSOH issued a notice of eligibility determination, based on your March 21, 2016 application, stating that your child was eligible to enroll in Child Health Plus with a \$60.00 monthly premium, effective May 1, 2016.

Also on March 22, 2016, NYSOH issued a notice of enrollment, based on your plan selection on May 21, 2016, stating that your child was enrolled in a Child Health Plus plan and that coverage would start on May 1, 2016.

On April 18, 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 April 1, 2016

On October 25, 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) 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 the February 8, 2016 notice telling you that you needed to select a new Child Health Plus plan for your child.
- 3) You testified that you are not sure when you realized your child was disenrolled from his Child Health Plus plan.
- 4) The record reflects that on March 21, 2016, NYSOH received your child's updated application for health insurance.
- 5) You testified that you are seeking that your child be enrolled in his Child Health Plus plan as of April 1, 2016.
- 6) You testified that you were confused because you received several notices at around the same time indicating that your child was disenrolled and that your child's enrollment was accepted.

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 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).

Legal Analysis

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

Your child was originally found eligible for Child Health Plus effective March 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 February 8, 2016 renewal notice stated that your child was eligible to enroll in a Child Health Plus plan effective April 1, 2016, however, your child could not be reenrolled into his current Child Health Plus plan and that you must select a different plan between February 16, 2016 and March 15, 2016.

Because there was no timely response to this notice, your child was terminated from his Child Health Plus plan effective March 31, 2016 and not enrolled into another Child Health Plus plan.

You testified that you did not receive any notice from NYSOH telling you that you needed to select a new Child Health Plus plan 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.

Therefore, the record reflects that NYSOH properly notified you of your child's annual renewal and that you needed to select a new Child Health Plus plan on your child's behalf

The record reflects that you selected a Child Health Plus plan to enroll your child in on March 21, 2016.

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 March 22, 2016 notice of enrollment confirmation is **AFFIRMED** because it properly began your child's enrollment in Child Health Plus on May 1, 2016.

Decision

The March 22, 2016 notice of enrollment confirmation is **AFFIRMED**.

Effective Date of this Decision: November 2, 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 May 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):

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Summary

The March 22, 2016 notice of enrollment confirmation is **AFFIRMED**.

This decision does not change your child's eligibility.

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

