

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

Notice of Decision

Decision Date: January 06, 2017

NY State of Health Account ID: Appeal Identification Number: AP00000010101



On December 16, 2016 you appeared by telephone at a hearing on your appeal of NY State of Health's May 7, 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 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 (CFR) § 155.545.



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

Decision

Decision Date: January 06, 2017

NY State of Health Account ID:

Appeal Identification Number: AP00000010101



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 children's enrollment in their Child Health Plus plans was effective June 1, 2016?

Procedural History

On December 9, 2015, NY State of Health (NYSOH) issued a notice of eligibility determination, based on your December 8, 2015 updated application, stating that your children were eligible to enroll in Child Health Plus with \$45.00 monthly premiums, effective January 1, 2016.

Also on December 9, 2015, NYSOH issued a notice of enrollment confirmation stating that your children were enrolled in Child Health Plus plans with a start date of January 1, 2016.

On January 15, 2016, NYSOH issued a notice of eligibility redetermination, based on your January 14, 2016 updated application, stating that your children were conditionally eligible to enroll in Child Health Plus with \$45.00 monthly premiums, effective February 1, 2016, pending proof of income for your oldest two children and confirmation of citizenship status and a social security number for your youngest child.

On March 23, 2016, NYSOH issued a notice of eligibility redetermination stating that your oldest two children were eligible to enroll in full price Child Health Plus plans or child-only qualified health plans, effective May 1, 2016. The notice

stated that your youngest child was conditionally eligible to enroll in full price Child Health Plus plans or child-only qualified health plans, effective May 1, 2016, pending confirmation of his citizenship status and a social security number.

Also on March 23, 2016, NYSOH issued a disenrollment notice stating that your children's Child Health Plus coverage was terminated, effective April 30, 2016, because they were no longer eligible to remain enrolled in their plans.

Additionally, on March 23, 2016, NYSOH issued a notice directing you to pick health plans for your children stating that their health coverage with Child Health Plus would not begin until you picked plans.

On March 29, 2016, NYSOH issued a notice of eligibility redetermination, based on your March, 28, 2016 updated application, stating that your children were eligible to enroll in Child Health Plus with \$45.00 monthly premiums, effective May 1, 2016.

On May 7, 2016, NYSOH issued a notice of enrollment confirmation, stating that your children were enrolled in Child Health Plus plans on March 28, 2016, with a start date of June 1, 2016.

On June 6, 2016 you spoke to NYSOH's Account Review Unit and appealed the start date of your children's Child Health Plus plans insofar as they did not begin May 1, 2016.

On December 16, 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.

NYSOH Appeals Unit reviewed telephone calls you made to NYSOH on the following dates: March 28, 2016, May 6, 2016, May 11, 2016, May 13, 2016, May 19, 2016, May 20, 2016, and May 25, 2016.

Findings of Fact

A review of the record supports the following findings of fact:

- 1) You testified that you are appealing only your children's enrollment start dates.
- 2) The record reflects that your youngest child was added to your account on January 14, 2016.
- 3) On March 22, 2016, the "system" ran your children's eligibility and deleted your children's enrollments in their Child Health Plus plans.

- 4) You testified that you learned your children were being dis-enrolled from their Child Health Plus plans when you received the March 23, 2016 disenrollment notice from NYSOH.
- 5) You testified that you contacted NYSOH, following receipt of the March 23, 2016 dis-enrollment notice, wherein you attempted to re-enroll your children in Child Health Plus plans.
- 6) NYSOH Appeals Unit reviewed the March 28, 2016 telephone call and confirmed that you were advised your children were dis-enrolled from their plans in error due to a "system" initiated application update. You updated the information in your account and were advised that your children were eligible to enroll in Child Health Plus plans with \$45.00 monthly premiums. The representative confirmed that your children were re-enrolled into the same plans as of May 1, 2016 and that there would not be a gap in their coverage.
- 7) The record reflects that your children were dis-enrolled from their Child Health Plus plans on April 30, 2016 and not re-enrolled into plans until June 1, 2016.
- 8) You testified that your children were without health coverage in May 2016 and that you paid out of pocket for their medical expenses during that time.
- 9) You testified that you are seeking to have your children's enrollment in their Child Health Plus plans backdated to May 1, 2016, because you tried to reenroll them into coverage on March 28, 2016.

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

Applicable Law and Regulations

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).

Legal Analysis

The issue is whether NYSOH properly determined that your children's enrollment in their Child Health Plus plans was effective June 1, 2016.

The record reflects that your children were enrolled in Child Health Plus plans for the 2016 coverage year starting on January 1, 2016. On January 14, 2016 you contacted NYSOH to update your account by adding your newborn child. As a result of this update, your children were determined to be conditionally eligible for Child Health Plus pending receipt of income documentation by March 14, 2016.

The record reflects that on March 22, 2016, the "system" ran your eligibility and deleted your children's enrollments in their Child Health Plus plans. Thereafter, on March 28, 2016 you contacted NYSOH wherein you were advised your children were dis-enrolled from their plans in error due to a "system" initiated application update. During the call, you updated the information in your account and were advised that your children were fully eligible to enroll in Child Health Plus plans with \$45.00 monthly premiums. The representative confirmed that your children were re-enrolled into the same plans as of May 1, 2016 and that there would not be a gap in their coverage.

The record reflects that your children were dis-enrolled from their Child Health Plus plans as of April 30, 2016 due to the "system" deleting their enrollments on March 22, 2016. Notwithstanding confirmation from NYSOH on March 28, 2016 that your children were re-enrolled into Child Health Plus plans, effective May 1, 2016, your children were not re-enrolled into plans until you called on May 6, 2016, resulting in a June 1, 2016 start date. Accordingly, your children were without health coverage for the month of May 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 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.

The record establishes that you attempted to re-enroll your children into their Child Health Plus plans on March 28, 2016 for a May 1, 2016 start date. In fact, the May 7, 2016 enrollment confirmation notice confirms your plan selections "as of March 28, 2016". Accordingly, since you selected new plans for your children after the fifteenth day of the month the plans should have gone into effect on the first day of the second following month; that is May 1, 2016.

Therefore, the May 7, 2016, enrollment confirmation notice is MODIFIED to state that your children's enrollment in their Child Health Plus plans was effective May 1, 2016.

Your case is RETURNED to NYSOH to reinstate your children in their Child Health Plus plans for the month of May 2016.

Decision

The May 7, 2016, enrollment confirmation notice is MODIFIED to state that your children's enrollment in their Child Health Plus plans was effective May 1, 2016.

Your case is RETURNED to NYSOH to reinstate your children in their Child Health Plus plans for the month of May 2016.

Effective Date of this Decision: January 06, 2017

How this Decision Affects Your Eligibility

The effective date of your child's Child Health Plus plan is May 1, 2016.

Your case is being sent back to NYSOH to reinstate your children into their Child Health Plus plans for the month of May 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):

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 May 7, 2016, enrollment confirmation notice is MODIFIED to state that your children's enrollment in their Child Health Plus plans was effective May 1, 2016.

Your case is RETURNED to NYSOH to reinstate your children in their Child Health Plus plans for the month of May 2016.

The effective date of your child's Child Health Plus plan is May 1, 2016.

Your case is being sent back to NYSOH to reinstate your children into their Child Health Plus plans for the month of May 2016.

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

A Copy of this Decision Has Been Provided To:

