

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

Notice of Decision

Decision Date: February 3, 2017

NY State of Health Account ID: Appeal Identification Number: AP000000010457

Dear

On January 5, 2017, your authorized representative appeared by telephone at a hearing on your appeal of NY State of Health's June 21, 2016 enrollment 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 at the top of this notice.

Legal Authority

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

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

Decision

Decision Date: February 3, 2017

NY State of Health Account ID: Appeal Identification Number: AP000000010457

lssue

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

Did New York State of Health (NYSOH) properly determine that your Essential Plan should have an enrollment start date of July 1, 2016?

Procedural History

On May 28, 2016, a NYSOH account was recreated and your Jamaica Passport was faxed to NYSOH

On June 2, 2016, NYSOH issued an eligibility determination stating that you were eligible for Medicaid coverage for the treatment of emergency medical conditions only as of June 1, 2016.

On June 20, 2016, your NYSOH account was updated.

On June 21, 2016, NYSOH issued three notices:

(a) An eligibility determination notice stating that you were eligible to enroll in the Essential Plan effective as of July 1, 2016;
(b) A disenrollment notice stating that your Medicaid fee-for-service coverage through NYSOH would be discontinued June 30, 2016;
(c) An enrollment notice confirming that as of June 20, 2016, you were

enrolled in an Essential Plan with an enrollment start date of July 1, 2016.

On June 22, 2016, you spoke to NYSOH's Account Review Unit and requested an appeal insofar as the enrollment start date of your Essential Plan. On January 5, 2017, you had a telephone hearing with a Hearing Officer from NYSOH Appeals Unit. You authorized your daughter, **and the second second**

Findings of Fact

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

- 1) According to your NYSOH account, your account was created on May 28, 2016.
- 2) Your Jamaica Passport, which was illegible, was faxed to NYSOH on May 28, 2016 (
- 3) According to your June 1, 2016 application, your citizenship/immigration status was indicated as "Other."
- According to your NYSOH account, your application was updated on June 20, 2016, to reflect that you were an "Immigrant Non-Citizen" with an "I-551 Permanent Resident Card."
- 5) Your authorized representative testified that you were issued a Permanent Resident Card on April 9, 2016, and the card expires on April 9, 2016.
- 6) Your authorized representative testified that you were hospitalized at the end of May 2016 and have incurred medical bills.
- 7) Your authorized representative testified that you were are seeking to have your Essential Plan backdated to cover the month of May 2016.
- 8) According to your NYSOH account, you were enrolled in an Essential Plan on June 20, 2016, with a plan enrollment start date of July 1, 2016.

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

Applicable Law and Regulations

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)(i)).

Legal Analysis

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

You testified, and the record indicates, that your NYSOH account was updated on June 20, 2016 to indicate that you a permanent resident of the United States. As a result, you were found eligible for the Essential Plan and enrolled into a plan that day.

The date on which enrollment in an Essential 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 goes into effect on the first day of the following month. A plan that is selected from the sixteenth day of the month to the end of the month goes into effect on the first day of the second following month.

On June 20, 2016 you were enrolled in an Essential Plan, so your enrollment should have been effective on the first day of the second month following June 20, 2016; that is, on August 1, 2016.

Therefore, the June 21, 2016 enrollment confirmation notice is MODIFIED to state that you were eligible to enroll in the Essential Plan with an enrollment start date of August 1, 2016.

Decision

The June 21, 2016 enrollment confirmation notice is MODIFIED to state that you were eligible to enroll in the Essential Plan with an enrollment start date of August 1, 2016.

Effective Date of this Decision: February 3, 2017

How this Decision Affects Your Eligibility

The plan enrollment start date of your Essential Plan was August 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.

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 June 21, 2016 enrollment confirmation notice is MODIFIED to state that you were eligible to enroll in the Essential Plan with an enrollment start date of August 1, 2016.

The plan enrollment start date of your Essential Plan should have been August 1, 2016.

Legal Authority

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

A Copy of this Decision Has Been Provided To:



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).