



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: [REDACTED]  
Appeal Identification Number: AP000000012024

[REDACTED]

[REDACTED]

On December 15, 2016, you appeared by telephone with aid of Mandarin Interpreter number 225817 at a hearing on your appeal of NY State of Health's March 3, 2016 eligibility redetermination notice, and April 19, 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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## Decision

Decision Date: January 06, 2017

NY State of Health Account ID: [REDACTED]  
Appeal Identification Number: AP000000012024



## Issues

The issues presented for review by the Appeals Unit of NY State of Health are:

Did NY State of Health properly determine that your eligibility for financial assistance and enrollment in your Essential Plan ended effective March 31, 2016?

Did NY State of Health properly determine that your enrollment in an Essential Plan was effective June 1, 2016?

## Procedural History

On November 25, 2015, NY State of Health (NYSOH) issued a notice of eligibility based on you November 24, 2015, application finding you eligible to enroll in the Essential Plan effective January 1, 2016. The determination was conditional, and based on the condition that you provide citizenship documentation before February 22, 2016.

On November 25, 2015, an enrollment confirmation notice was issued based on your plan selection on November 24, 2015.

No documentation was received before February 22, 2016.

On March 3, 2016, an eligibility redetermination notice was issued finding you no longer eligible to remain enrolled in your Essential Plan effective March 31, 2016. The notice stated this was because you did not provide information confirming your citizenship status by the requested deadline.

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On April 18, 2016, NYSOH received your updated application for financial assistance.

On April 19, 2016, NYSOH issued an eligibility determination notice finding you conditionally eligible for the Essential plan effective June 1, 2016. The notice stated the determination was based on the condition you provide documentation confirming your citizenship status before July 17, 2016.

Also on April 19, 2016, NYSOH issued a notice of enrollment, based on your plan selection on April 18, 2016, confirming your enrollment in an Essential Plan effective June 1, 2016.

On May 2, 2016, NYSOH received your immigration documentation in the form of a U.S. Passport. See Document: [REDACTED]. On July 11, 2016, your immigration documentation was verified.

On September 16, 2016, you spoke to NYSOH's Account Review Unit and appealed the start date of your enrollment in the Essential insofar as it did not begin April 1, 2016

On December 15, 2016, you had a telephone hearing with a Hearing Officer from NYSOH's Appeals Unit with aid of Mandarin Interpreter number [REDACTED]. 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 are seeking insurance for yourself.
- 2) You submitted an application to NYSOH for financial assistance on November 24, 2015.
- 3) The record reflects you receive your notices via regular U.S. Mail.
- 4) The record supports the November 25, 2015, eligibility determination requesting you provide citizenship documentation to confirm your eligibility was sent to your correct address. The notice was not returned as undeliverable.
- 5) Your November 24, 2015 application states you are a U.S. Citizen.
- 6) The record indicates you filed an incident in which you believe your certified application counselor answered the question of your citizenship status incorrectly.

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- 7) You testified the first time you realized you were disenrolled from your Essential Plan for failing to provide the requested documentation was when you received a bill from your doctor in April, 2016.
- 8) You testified, and the record reflects, that you enrolled in an Essential Plan on April 18, 2016.
- 9) NYSOH received your immigration documentation in the form of a U.S. Passport on May 2, 2016. The documentation was verified on July 11, 2016. See Document: [REDACTED].
- 10) You testified that you wanted your enrollment in an Essential Plan to begin on April 1, 2016 because you incurred a medical bill of \$540.00 for the months you were without coverage.

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

## **Applicable Law and Regulations**

### Citizenship and Immigration Status

To enroll in a plan through NYSOH, an applicant must be a citizen or national of the United States, or a non-citizen who is lawfully present in the United States and reasonably expects to become a citizen or remain a lawfully present noncitizen for the entire period for which enrollment is being sought (45 CFR § 155.305(a)(1), New York's Basic Health Plan Blueprint, as approved January 2016; see <https://www.medicaid.gov/basic-health-program/basic-health-program.html>).

NYSOH must verify or obtain information in order to determine that an applicant is eligible for enrollment, including the certification of citizenship, status as a national, or lawful presence (45 CFR § 155.315(a), (c), New York's Basic Health Plan Blueprint, as approved January 2016; see <https://www.medicaid.gov/basic-health-program/basic-health-program.html>).

If an applicant attests to citizenship, status as a national, or lawful presence, and NYSOH is unable to verify such attestation, NYSOH must provide the applicant with notice of the inconsistency. NYSOH must then provide the applicant with 90 days to provide satisfactory documentary evidence, from the date the notice of inconsistency is received by the applicant. Notice is considered received 5 days after the date on the notice, unless the applicant demonstrates that he or she did not receive the notice within the 5 day period. (45 CFR § 155.315(c)(3), (f)(2)(i)).

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If NYSOH remains unable to verify the citizenship attestation after the 90 day period ends, it must determine the applicant's eligibility based on the information available (45 CFR § 155.315(f)(5)).

### 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 under review is whether NYSOH properly determined that you were no longer eligible to enroll in the Essential Plan through NYSOH, effective March 31, 2016.

NYSOH is required to determine whether individuals are eligible to enroll in coverage through NYSOH, and must confirm, among other things, that their citizenship status is satisfactory.

If NYSOH cannot verify an individual's citizenship status, it must provide the individual with notice of the inconsistency. NYSOH must then provide the individual with a period of 90 days from the date notice is received to resolve the inconsistency. For purposes of verifying citizenship, notice is considered received 5 days after the date on the notice.

In the eligibility determination issued on November 25, 2015, you were advised that your eligibility was only conditional, and that you needed to confirm your citizenship status before February 22, 2016.

The record reflects that NYSOH did not receive the requested citizenship documentation before the deadline.

The record further supports you receive your notices via regular U.S. Mail, and the November 25, 2015, eligibility determination was sent to your correct address. This notice was not returned as undeliverable to NYSOH.

Therefore, NYSOH properly notified you of an inconsistency in your account and you did not submit the requested citizenship documentation before the deadline.

If NYSOH remains unable to verify the inconsistency after the 90 day period ends, then it must determine the applicant's eligibility based on the information available in the data sources.

Since the requested citizenship documentation was not received within the 90 day period, NYSOH was required to redetermine your eligibility without verification of your citizenship status. As a result, NYSOH properly determined that you were no longer eligible to enroll in the Essential Plan through NYSOH effective March 31, 2016, because you did not provide the information requested by NYSOH.

Therefore, NYSOH's March 3, 2016 eligibility redetermination notice is correct and is AFFIRMED.

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

You testified, and the record indicates, that you updated your NYSOH application on April 18, 2016. As a result, you were found eligible for the Essential Plan as of June 1, 2016 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 April 18, 2016, you selected an Essential Plan, so your enrollment properly took effect on the first day of the first month following May; that is, on June 1, 2016.

Therefore, the April 19, 2016, enrollment confirmation notice stating that your enrollment in the Essential Plan was effective June 1, 2016, is correct and must be AFFIRMED.

## **Decision**

The March 3, 2016 eligibility redetermination notice is AFFIRMED.

The April 19, 2016, enrollment confirmation notice is AFFIRMED.

**Effective Date of this Decision:** January 06, 2017

## **How this Decision Affects Your Eligibility**

NYSOH properly found you not eligible to enroll in the Essential Plan because you did not submit proof of your citizenship status.

The effective date of your Essential Health Plan is June 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):**

You can contact us in any of the following ways:

- By calling the Customer Service Center at 1-855-355-5777

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## **Summary**

The March 3, 2016 eligibility redetermination notice is AFFIRMED.

The April 19, 2016, enrollment confirmation notice is AFFIRMED.

NYSOH properly found you not eligible to enroll in the Essential Plan because you did not submit proof of your citizenship status.

The effective date of your Essential Health Plan is June 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:**

