



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

Notice of Decision

Decision Date: January 6, 2017

NY State of Health Account ID: [REDACTED]
Appeal Identification Number: AP000000012899

[REDACTED]

[REDACTED]

On January 3, 2017, you appeared by telephone at a hearing on your appeal of NY State of Health's October 25, 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 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.

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 the NY State of Health (NYSOH) properly determine that your child's enrollment in his Child Health Plus plan was effective December 1, 2016?

Procedural History

On October 25, 2016, NYSOH issued an eligibility determination notice, based on your October 24, 2016 application, stating that your child was eligible to enroll in Child Health Plus (CHP) with a \$45.00 monthly premium, effective December 1, 2016.

Also on October 25, 2016, NYSOH issued a notice of enrollment, based on your plan selection on October 24, 2016, stating that your child was enrolled in a CHP plan, and that this enrollment in the CHP plan would start December 1, 2016.

On October 28, 2016, you spoke to NYSOH's Account Review Unit and appealed the start date of your child's CHP plan insofar as it began on December 1, 2016, rather than November 1, 2016.

On January 3, 2017, 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 support the following findings of fact:

- 1) You testified that you are appealing only the eligibility of your child, [REDACTED]
- 2) You submitted your initial application to NYSOH for financial assistance on October 24, 2016.
- 3) You testified, and the record reflects, that you enrolled your child into a CHP plan on October 24, 2016.
- 4) You testified that you need your child's CHP plan to begin on November 1, 2016 because you incurred approximately \$4,000.00 in medical expenses associated with his hospitalization during the month of November 2016.
- 5) You testified that your spouse lost his employer-sponsored insurance coverage effective October 31, 2016 as a result of the closing of his employer's plant.
- 6) You testified that you learned that your spouse's insurance coverage would be ending about a week prior to the termination of his coverage on October 31, 2016.
- 7) You testified that you continued your child's coverage under your spouse's health employer-sponsored health insurance plan for the month of November 2016 through COBRA, which costed approximately \$680.00 for the month.
- 8) You testified that you believed there should be an exception to the CHP coverage start date regulations to prevent children with special needs to have a gap in health insurance coverage.

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

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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 child’s enrollment in his CHP plan was effective December 1, 2016.

You testified, and the record reflects, that you first contacted NYSOH on October 24, 2016 and enrolled your child into a CHP plan on that same day.

The date on which a CHP 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.

Therefore, the October 25, 2016 enrollment notice stating that your child’s enrollment in his CHP plan was effective December 1, 2016, is correct and must be AFFIRMED.

Decision

The October 25, 2016 enrollment notice is AFFIRMED.

Effective Date of this Decision: January 6, 2017

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How this Decision Affects Your Eligibility

This decision does not change your child's eligibility.

The effective date of your child's CHP plan is December 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 October 25, 2016 enrollment notice is AFFIRMED.

This decision does not change your child's eligibility.

The effective date of your child's CHP plan is December 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:

