DECISION

OF AGENCY

ON APPEAL

In the Appeal of: [redacted]

For: Qualified Health Plan Premium Amount

Agency: MNsure Board
Minnesota Department of Human Services

Docket: 151556

On April 21, 2014 Appeals Examiner David E. Gassoway held an evidentiary hearing under 42 U.S.C. §18081(f) and Minnesota Statute §62V.05, subdivision 6(a).

The following people appeared at the hearing:

[redacted] Appellant
[redacted] MNsure Representative

Based on the evidence in the record and considering the arguments of the parties, I recommend the following findings of fact, conclusions of law, and order.

STATEMENT OF ISSUE

Whether Appellant is entitled to an Order lowering her Qualified Health Plan premium after the appellant canceled her private insurance coverage.

FINDINGS OF FACT

1. On December 3, 2013, the appellant submitted an application for healthcare coverage through the online MNsure eligibility system.[1]

2. The MNsure eligibility system determined that the appellant was eligible for a Qualified Health Plan and eligible for Advanced Payment of Premium Tax Credits (APTC) in the amount of $0.[2]

3. The state of Minnesota created MNsure as its marketplace or exchange for individuals, families and small employers to access health insurance and tax credits or assistance to help pay for coverage through the Affordable Care Act. The appellant enrolled in healthcare coverage through the marketplace on an unspecified date.[3] The marketplace system did not include the appellant's spouse in the calculation of the premium quoted due to a system error.[4] The marketplace system initially determined that the appellant's monthly premium amount was $217.[5] The appellant canceled her existing health insurance coverage based on the $217 premium determination.[6]

4. On an unspecified date, the appellant learned that the premium amount initially determined by the insurance marketplace was incorrect and that the amount would be doubled since the appellant's spouse was subsequently included.[7]

5. The appellant contends that she and her spouse should be allowed to have insurance coverage paying only the initial premium amount of $217.[8]

6. On March 24, 2014, the Appellant submitted an appeal.[9] An evidentiary hearing was conducted by telephone on April 21, 2014. The record, consisting of two exhibits[10], was closed on that date.

---

[1] Exh. 1, p. 3. See also Test. of [redacted]
[2] Exh. 1, p. 3. See also Test. of [redacted]
[3] Exh. 1, p. 3. See also Test. of [redacted]
[4] Exh. 1, p. 3. See also Test. of [redacted]
[5] Test. of Appellant.
[6] Test. of Appellant.
[7] Test. of Appellant.
[8] Test. of Appellant.
[9] Exh. 1.
[10] Exhibit 1 – Agency Appeal Summary; Exhibit 2 - Appellant's Appeal Request.

CONCLUSIONS OF LAW

1. This appeal is timely under 45 C.F.R. §155.520(b).

2. The MNsure Board lacks jurisdiction over this appeal under Minn. Stat. §62V.05, Subd. 6(a). Pursuant to Minn. R. 7700.0105, Subpart 1, MNsure appeals are available for the following actions:

> (1) initial determinations and redeterminations made by MNsure of individual eligibility to purchase a qualified health plan through MNsure, made in accordance with Code of Federal Regulations, title 45, sections 155.305, (a) and (b); 155.330; and 155.335;
>
> (2) initial determinations and redeterminations made by MNsure of eligibility for and level of advanced payment of premium tax credit, and eligibility for and level of cost sharing reductions, made in accordance with Code of Federal Regulations, title 45, sections 155.305 (f) to (g); 155.330; and 155.335;
>
> (3) initial determinations and redeterminations made by MNsure of employer eligibility to purchase coverage for qualified employees through the Small Business Health Options Program under Code of Federal Regulations, title 45, section 155.710 (a);
>
> (4) initial determinations and redeterminations made by MNsure of employee eligibility to purchase coverage through the Small Business Health Options Program under Code of Federal Regulations, title 45, section 155.710 (e);
>
> (5) initial determinations and redeterminations made by MNsure of individual eligibility for an exemption from the individual responsibility requirement made in accordance with Code of Federal Regulations, title 45, section 155.605;
>
> (6) a failure by MNsure to provide timely notice of an eligibility determination in accordance with Code of Federal Regulations, title 45, sections 155.310 (g); 155.330 (e)(1)(ii); 155.335 (h)(ii); 155.610 (i); and 155.715 (e) and (f);
>
> (7) in response to a notice from MNsure under Code of Federal Regulations, title 45, section 155.310 (h), a determination by MNsure that an employer does not provide minimum essential coverage through an employer-sponsored plan or that the employer does provide coverage but is

not affordable coverage with respect to an employee; and

(8) in response to a denial of a request to vacate a dismissal made according to this chapter and in accordance with Code of Federal Regulations, title 45, section 155.530 (d)(2).

In this case, there is no issue under dispute for which an appeal is available. The Appeals Examiner does not have jurisdiction to consider the issue appealed by the appellant. As such, the appellant's appeal must be dismissed.

3. This decision is effective April 1, 2014.

RECOMMENDED ORDER

THE APPEALS EXAMINER RECOMMENDS THAT:

The MNsure Board and the Commissioner of Human Services DISMISS the appellant's appeal for lack of jurisdiction.

/s/ David E. Gassoway
David E. Gassoway
Appeals Examiner

May 4, 2014
Date

ORDER

IT IS THEREFORE ORDERED THAT based upon all the evidence and proceedings, the MNsure Board and the Commissioner of Human Services adopt the Appeals Examiner's findings of fact, conclusions of law and order as each agency's final decision.

FOR THE COMMISSIONER OF HUMAN SERVICES as to any effect the decision has on Appellant's eligibility for Medical Assistance and/or MinnesotaCare benefits.

FOR THE MNSURE BOARD as to any effect the decision has on Appellant's eligibility through MNsure for Advance Premium Tax Credits, Cost Sharing Reductions, Qualified Health Plan, and/or the Small Business Health Insurance Options Program.

_____

_____
Date

FURTHER APPEAL RIGHTS

This decision is final, unless you take further action.

Appellants who disagree with this decision should consider seeking legal counsel to identify further legal recourse.

If you disagree with the effect this decision has on your eligibility for **Advance Premium Tax Credits, Cost Sharing Reductions, Qualified Health Plan, and/or the Small Business Health Insurance Options Program**, you may:

- **Appeal to the United States Department of Health and Human Services (DHHS)** under 42 U.S.C. § 18081(f) and 45 C.F.R. § 155.520(c). This decision is the final decision of MNsure, unless an appeal is made to DHHS. An appeal request may be made to DHHS ***within 30 days of the date of this decision*** by calling the Marketplace Call Center at 1-800-318-2596 (TTY 855-889-4325); or by downloading the appeals form for Minnesota from the appeals landing page on www.healthcare.gov.
- **Seek judicial review** to the extent it is available by law.

If you disagree with this effect this decision has on your eligibility for **Medical Assistance and/or MinnesotaCare** benefits, you may:

- **Request the Appeals Office reconsider this decision.** The request must state the reasons why you believe your appeal should be reconsidered. The request may include legal arguments and may include proposed additional evidence supporting the request; however, if you submit additional evidence, you must explain why it was not provided at the time of the hearing. The request must be ***in writing***, be made ***within 30 days of the date of this decision,*** and a ***copy of the request must be sent to the other parties***. Send your written request, with your docket number listed, to:

  Appeals Office
  Minnesota Department of Human Services
  P.O. Box 64941
  St. Paul, MN 55164-0941
  Fax: (651) 431-7523

- **Start an appeal in the district court.** This is a separate legal proceeding, and you must start this ***within 30 days of the date of this decision*** by serving a notice of appeal upon the other parties and the Commissioner. The law that describes this process is Minnesota Statute § 256.045, subdivision 7.

cc: [redacted] Appellant
[redacted] MNsure
[redacted] Minnesota Department of Human Services - 0989