



**DECISION OF  
MNSURE BOARD  
ON APPEAL**

In the Appeal of: [REDACTED]  
For: Qualified Health Plan  
Agency: MNSure  
Docket: 156249

On October 14, 2014, Appeals Examiner Kulani R. Moti held an evidentiary hearing under 42 U.S.C. §18081(f) and Minn. Stat. §62V.05, Subd. 6(a).

The following people appeared at the hearing:

[REDACTED] Appellant

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 ISSUES

The issue raised in this appeal is whether the agency corectly determined the effective date of Appellant's eligibility for a Qualified Health Plan as provided in the Affordable Care Act.

## FINDINGS OF FACT

1. On unknown date, [REDACTED] ("Appellant") was informed by the MNsure online system that she was eligible to enroll in a Qualified Health Plan ("QHP"). *Exhibit 1*. Appellant called and spoke with an UCare representative who informed Appellant of the amount of her monthly premium. *Testimony of Appellant*. Sometime in September 2014, Appellant received her insurance card and a bill for her premium for the months of August and September 2014. *Testimony of Appellant*. No notices were provided as part of the appeal, and it is unknown if any written notices were sent to Appellant. Appellant challenged the effective date of her QHP eligibility determination, and the appeal was received by MNsure agency on September 18, 2014. *Exhibit A*.

2. On October 14, 2104, Appeals Examiner Kulani R. Moti held an evidentiary hearing by telephone conference. The Appeals Examiner closed the record, consisting of two exhibits<sup>1</sup>, on that date.

3. On June 23, 2014, Appellant submitted her application for health care coverage through the MNsure computer eligibility system. *Exhibit 1*. Appellant applied for coverage because Appellant received a notice from MinnesotaCare stating her coverage was ending July 31, 2014 and that she need to apply through the MNsure online system. *Testimony of Appellant*. MNsure Agency determined Appellant was eligible for a sixty-day special enrollment period because her MinnesotaCare coverage was ending July 31, 2014. *Exhibit 1*.

4. Based on Appellant's application, MNsure Agency determined Appellant was eligible for a qualified health plan and eligible for \$100 in tax credits. *Exhibit 1*. MNsure Agency manually enrolled Appellant in a qualified health plan and determined Appellant's effective date was August 1, 2014. *Exhibit 1*.

5. Appellant wants her effective date to be September 1, 2014 and not August 1, 2014. *Testimony of Appellant*. Appellant paid out of pocket for her prescriptions in August 2014 because she did not know her insurance coverage had started. Appellant did not receive her insurance cards until mid-September 2014. *Testimony of Appellant*. When

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<sup>1</sup> Exhibit 1 – MNsure Appeal Summary; Exhibit A – Appeal Request.

Appellant spoke with the UCare representative she was asked when she wanted her insurance coverage to begin and she stated September 2014. *Testimony of Appellant*. Appellant believes she should not have to pay insurance premiums for August 2014 because she did not know she had insurance coverage for that month and because she had requested a later effective date. *Testimony of Appellant*.

### CONCLUSIONS OF LAW

1. For MNsure appeals, an appeal must be received within 90 days from the date of the notice of eligibility determination. *45 C.F.R. §155.520(b)(1); Minn. R. 7700.0105, subp. 2(D)*. The MNsure board has the legal authority to review and decide issues about a household's eligibility through MNsure for Advance Premium Tax Credits, Cost Sharing Reductions, Qualified Health Plan, and/or the Small Business Health Insurance Options Program. *Minn. Stat. § 62V.05, subd. 6*. The MNsure board has an agreement with the Department of Human Services to hear and decide appeals involving premium assistance. No evidence was provided of any written notice having been given to Appellant, so the time period to appeal did not begin. This appeal was started within the allowed time limits.

2. Federal regulations concerning enrollment in qualified health plans (QHPs) are found at *45 C.F.R. §§155.400 – 155.430*. The Exchange may only permit a qualified individual to enroll in a QHP or an enrollee to change QHPs during the initial open enrollment period, the annual open enrollment period, or a special enrollment period described in §155.420 of this subpart for which the qualified individual has been determined eligible. *45 C.F.R. §155.400(a)(2)*.

3. Except as specified in paragraphs (b)(2)<sup>2</sup> and (3)<sup>3</sup> of this section, for a QHP selection received by the Exchange from a qualified individual—

- (i) Between the first and the fifteenth day of any month, the Exchange must ensure a coverage effective date of the first day of the following month; and
- (ii) Between the sixteenth and the last day of any month, the Exchange must ensure a coverage effective date of the first day of the second following month. *45 C.F.R. §155.420(b)(1)*.

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<sup>2</sup> This section allows special effective dates in the case of birth, adoption, placement for adoption, or placement in foster care.

<sup>3</sup> This section allows *earlier* effective dates if all participating QHP issuers agree.

4. Subject to the Exchange demonstrating to HHS that all of its participating QHP issuers agree to effectuate coverage in a timeframe shorter than discussed in paragraph (b)(1) or (b)(2)(ii) of this section, the Exchange may do one or both of the following for all applicable individuals:

(i) For a QHP selection received by the Exchange from a qualified individual in accordance with the dates specified in paragraph (b)(1) or (b)(2)(ii) of this section, the Exchange may provide a coverage effective date for a qualified individual earlier than specified in such paragraphs.

(ii) For a QHP selection received by the Exchange from a qualified individual on a date set by the Exchange after the fifteenth of the month, the Exchange *may provide a coverage effective date of the first of the following month. 45 C.F.R. §155.420(b)(3).* (emphasis added).

5. Appellant applied for health insurance through MNsure online system on June 20, 2014. Appellant qualified for a special enrollment because her MinnesotaCare coverage was ending on July 31, 2014. MNsure Agency determined Appellant was eligible for a qualified health plan and a \$100 tax credit. MNsure Agency also determined Appellant coverage would be effective August 1, 2014. Federal regulation states for a QHP selection received by the Exchange from a qualified individual on a date set by the Exchange after the fifteenth of the month, the Exchange may provide a coverage effective date of the first of the following month. MNsure Agency may provide a coverage effective date earlier than first of the second month but is not mandated to. Appellant applied for coverage after the fifteenth of June thus her effective date of coverage is August 1, 2014. Even though Appellant did not receive her insurance cards until mid-September 2014, Appellant's insurance coverage correctly began on August 1, 2014. I find that Appellant's effective date for QHP coverage is August 1, 2014.

#### RECOMMENDED ORDER

THE APPEALS EXAMINER RECOMMENDS THAT the MNsure Board AFFIRMS the agency's determination appellant's Qualified Health Plan effective date, August 1, 2014.

/s/ Kulani R. Moti  
Kulani R. Moti  
Appeals Examiner

December 16, 2014  
Date

ORDER OF THE MNSURE BOARD

IT IS THEREFORE ORDERED THAT based upon all the evidence and proceedings, the MNSure Board adopts the Appeals Examiner's recommendation as the final decision.

FOR THE MNSure Board:

/s/ Kenneth M. Mentz  
Kenneth M. Mentz  
Acting Co-Chief Human Services Judge

December 17, 2014  
Date

cc: [REDACTED] Appellant  
Michael Turpin, MNSure General Counsel

**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](http://www.healthcare.gov).
- **Seek judicial review** to the extent it is available by law.