



**DECISION OF  
MNSURE BOARD  
ON APPEAL**

In the Appeal of: [REDACTED]  
For: Enrollment in a Qualified Health Plan  
Agency: MNSure  
Docket: 157203

On November 12, 2014 Appeals Examiner Jonathan R. Hall 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 correctly determined the start date for the appellant's qualified health plan (QHP).

## FINDINGS OF FACT

1. On an unknown date, MNsure (agency) sent the appellant a written notice of action that the appellant was eligible for enrollment in a Qualified Health Plan (QHP) effective November 1, 2014. Appellant filed a request challenging this action, which the agency received on October 22, 2014. On November 12, 2014, Appeals Examiner Jonathan R. Hall held an evidentiary hearing. The Appeals Examiner closed the record, consisting of two exhibits,<sup>1</sup> on that date.

2. The appellant lost her previous insurance around September 15, 2014. She spoke to agency staff around that time regarding general questions she had. She was told that retroactive coverage was available under medical assistance and MinnesotaCare, but was not informed that choosing a private QHP would not make her eligible for retroactive coverage. *Exhibit 1; Appellant Testimony.*

3. The appellant applied for enrollment as a single adult in a QHP through the MNsure program on September 16, 2014. On October 9, 2014, the appellant called the agency to report that her private insurance ended on September 30, 2014. Based on that information, the agency determined that the appellant was eligible for a special enrollment period. On that date, the appellant selected a QHP. After the agency verified the appellant's information, it determined that the appellant meets the eligibility requirements for enrollment in a QHP, and that her coverage would be effective November 1, 2014. *Exhibit 2.*

4. The appellant incurred medical bills in October 2014 and believes they should be covered retroactively. *Appellant Testimony.*

## CONCLUSIONS OF LAW

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

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<sup>1</sup> Exhibit 1 (Appeal); Exhibit 2 (State Agency Appeal Summary).

2. The MNsure Board has jurisdiction over this appeal under Minn. Stat. §62V.05, Subd. 6(a).

3. ***Special Enrollment Period.*** When an applicant loses essential minimum health care coverage, the agency must allow her to enroll in a QHP via a special enrollment period. *45 C.F.R §155.420*. With the loss of minimum essential coverage, the applicant has 60 days from the last date of coverage to select a QHP. *45 C.F.R §155.420(c)*. When a QHP selection is received by the agency from an applicant in a special enrollment period between the first and fifteenth day of the month, the agency must ensure a coverage effective date of the first day of the following month. *45 C.F.R §155.420(b)(1)*.

4. In this case, the agency received the appellant choice of a QHP on October 9, 2014 and made that choice effective beginning November 1, 2014. For these reasons, I must conclude that the agency's determination of the appellant's QHP effective date was correct and should be affirmed.

5. This decision is effective November 1, 2014.

RECOMMENDED ORDER

THE APPEALS EXAMINER RECOMMENDS THAT:

- The MNsure Board AFFIRM the MNsure Agency's determination that Appellant was eligible to enroll in a qualified health plan effective November 1, 2014.

/s/ Jonathan R. Hall  
Jonathan R. Hall  
Appeals Examiner

February 2, 2015  
Date

ORDER

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

\_\_\_\_\_

\_\_\_\_\_ Date

cc: [REDACTED] Appellant  
DHS 0838, [REDACTED]  
[REDACTED] MNSure

**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.