



**DECISION OF
STATE AGENCY
ON APPEAL**

In the Appeal of: [REDACTED]
For: MinnesotaCare
Agency: Minnesota Department of Human Services
Docket: 160521

On March 26, 2015, Human Services Judge Christopher Cimafranca held an evidentiary hearing under Minn. Stat. § 256.045, subd. 3.

The following person appeared at the hearing:

[REDACTED], Appellant.

The Human Services Judge, based on the evidence in the record and considering the arguments of the parties, recommends the following findings of fact, conclusions of law, and order.

STATEMENT OF ISSUE

The issue raised in this appeal is:

Whether the Appellant could prevent the Agency from enforcing payment of past due MinnesotaCare premiums even though the Agency has not taken any adverse action.

FINDINGS OF FACT

1. On November 18, 2014, the Appellant applied for healthcare coverage on the MNsure eligibility system. *Exhibit 2*. The Agency determined that the Appellant was eligible for MinnesotaCare. *Exhibit 2*.
2. The Appellant does not recall enrolling in MinnesotaCare. *Exhibit 3; Testimony of Appellant*. She does not want to have MinnesotaCare coverage. *Exhibit 3; Testimony of Appellant*. The Appellant has not paid the MinnesotaCare premiums. *Exhibit 2; Testimony of Appellant*.
3. The Agency sent the Appellant MinnesotaCare premium bills on January 16, 2015, February 2, 2015, and March 2, 2015. *Exhibit 2*. The Agency began the Appellant's coverage effective December 1, 2014 even though the Appellant did not make a premium payment because of Agency system and billing limitations. *Exhibit 2*.
4. On February 10, 2015, the Appellant requested that the Agency terminate her MinnesotaCare coverage. *Exhibit 2*. The Agency terminated the Appellant's MinnesotaCare benefits effective March 31, 2015. *Exhibit 2*. The Agency has not taken any action to enforce payment of the premiums. *Exhibit 2*.
5. On February 17, 2015, the Appellant requested a state fair hearing. *Exhibit 3*.
6. On March 26, 2015, Human Services Judge Christopher Cimafranca held an evidentiary hearing by telephone conference. The record was closed at the conclusion of the hearing, consisting of three exhibits.¹

CONCLUSIONS OF LAW

1. The Agency has not taken any action to enforce payment of the past due MinnesotaCare premiums. The evidence does not show that the Agency will hold the Appellant accountable for the premiums. Therefore, I conclude that the issue is not ripe for appeal and the Commissioner of Human Services does not have jurisdiction over this

¹ MNsure Appeal Summary with attachments, Exhibit 1; State Agency Appeal Summary with attachments, Exhibit 2; Appeal Statement, Exhibit 3.

appeal under Minnesota Statutes, § 256.045 subdivision 3. This appeal should be dismissed.

2. The Appellant may file an appeal if the Agency enforces payment of the MinnesotaCare premiums.

RECOMMENDED ORDER

THE HUMAN SERVICES JUDGE RECOMMENDS THAT the Commissioner of Human Services DISMISS the Appellant’s appeal for lack of jurisdiction.

Christopher Cimafranca
Human Services Judge

Date

ORDER OF THE COMMISSIONER

IT IS THEREFORE ORDERED THAT based upon all the evidence and proceedings, the Commissioner of Human Services adopts the Human Services Judge’s recommendation as her final decision.

FOR THE COMMISSIONER OF HUMAN SERVICES:

Date

cc: [REDACTED], Appellant
Teressa Saybe, Minnesota Department of Human Services
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 this decision, 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 that you must start *within 30 days of the date of this decision*. You start this proceeding by serving a notice of appeal upon the other parties and the Commissioner, and filing the original notice and proof of service with the county district court. The law that describes this process is Minnesota Statute § 256.045, subdivision 7.²

² County agencies do not have the option of appealing decisions about Supplemental Nutrition Assistance Program (SNAP), Minnesota Family Investment Program (MFIP), or Diversionary Work Program (DWP) benefits to district court under 7 C.F.R. § 273.15(q)(2) and Minnesota Statute § 256J.40.

