



**DECISION
OF AGENCY
ON APPEAL**

In the Appeal of: [REDACTED]
For: Advanced Premium Tax Credit/Cost Sharing Reduction
Agency: MNSure Board
Docket: 160596

On March 17, 2015, Appeals Examiner Ngoc Nguyen held an evidentiary hearing by telephone conference under 42 United States Code §18081(f), Minnesota Statute §62V.05, subdivision 6(a).

The following persons 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 ISSUE

Whether the MNsure Board properly determined the effective date of the Appellant's Qualified Health Plan as provided in the Affordable Care Act and its policies.

FINDINGS OF FACT

1. On March 17, 2015, Appeals Examiner Ngoc Nguyen held an evidentiary hearing by telephone conference. The record, consisting of three exhibits¹, was closed at the end of the hearing.
2. On July 21, 2014, Appellant applied for health care coverage as a single individual. *Exhibit 1.* MNsure determined that Appellant qualified for Medical Assistance pending verification. *Id.* On November 9, 2015, MNsure and DHS sent a written notice that Appellant's application for a qualified health plan was pending because it was outside open enrollment. *Id.*
3. On December 16, 2014, MNsure and DHS sent another eligibility notice. *Exhibit 1.* Appellant did not enroll in a qualified health plan in 2014. Appellant reported on her application a projected annual income of \$23,472.28. *Id.*
4. On January 9, 2015, during MNsure's 2015 open enrollment, Appellant manually enrolled in a qualified health plan. *Exhibit 1.* Appellant reported an address of [REDACTED], Minnesota. *Id.* MNsure determined that Appellant was eligible for \$35.59 in tax credits and 73 percent cost sharing reduction. *Id.* Appellant selected her qualified health plan on January 9, 2015; therefore coverage must begin the first day of the first following month. *Id.*
5. On March 10, 2015, Appellant reported income changes to DHS. Her weekly income is \$400 and updated projected income is \$20,800. *Exhibit 1.* Appellant's income is below 200% of the Federal Poverty Level. *Id.*
6. Appellant does not dispute that she applied for health care coverage on January 9, 2015 and selected a qualified health plan on that date. *Testimony of Appellant.* Appellant does not dispute that she provided the agency with the [REDACTED] address. *Id.* Appellant's house does not have a mailbox and everyone in the town has a PO Box that mail is sent to. Appellant did not report the PO Box address. *Id.* When she did not receive any notification in February regarding her application, she contacted the agency. The agency informed her that a notice was mailed to the home address listed on the application. Appellant then provided the agency with the PO Box address and soon after received a notice. *Id.* Appellant argued that she did not know she had insurance and did not receive a notice. Appellant made a payment of \$113 in mid-February for March 2015. She does not feel that she should pay for February premium

¹ Exhibit 1 – MNsure Appeals Summary with attachments; Exhibit 2 – DHS Appeals Summary; Exhibit 3 – Appellant's appeal.

because she was not aware that she had coverage. *Id.* Appellant is working with the agency to update her health care for April based on the change of income reported on March 10, 2015. *Id.*

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).* Appellant filed an appeal within the time frame.

2. 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.

3. 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).* Enrollment must begin the first day of the following month if a qualified health plan is selected between the first and the fifteenth day of the any month. *45 C.F.R. § 155.420(b)(i).*

4. There is also no dispute that Appellant submitted her application for health care coverage to MNsure on January 9, 2015 and selected a qualified health plan. Based on federal regulations, the agency was correct in determining Appellant's effective date as February 1, 2015. The fact that Appellant failed to provide an accurate mailing address and thus did not receive notice of coverage is not a sufficient basis for changing the effective date of her health care coverage. For these reasons, the agency correctly determined the effective date of Appellant's coverage to be February 1, 2015.

RECOMMENDED ORDER

THE APPEALS EXAMINER RECOMMENDS THAT:

- The MNSure Board AFFIRM the Agency's determination of the qualified health plan effective date as February 1, 2015.

Ngoc Nguyen
Appeals Examiner

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
Michael Turpin, 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.
- **Seek judicial review** to the extent it is available by law.