



**DECISION OF
MNSURE BOARD
ON APPEAL**

In the Appeal of: [REDACTED]
For: Qualified Health Plan (QHP)
Agency: MNSure Board
Docket: 161021

On March 23, 2015, Appeals Examiner Christopher Cimafranca held an evidentiary hearing under 42 United States Code §18081(f) and Minnesota Statutes, §62V.05, subdivision 6(a).

The following person 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 correctly determined the effective date of the Appellant's health plan coverage.

FINDINGS OF FACT

1. On March 4, 2015, the MNsure Board (herein Agency) sent the Appellant a Health Care Notice which stated that he was eligible to purchase a Qualified Health Plan but that he must meet a qualifying event to be able to enroll outside of open enrollment. *Exhibit 1.*

2. On March 4, 2015, the Appellant filed an appeal with the Appeals Office. *Exhibit 2.* The Appellant filed an appeal because he would like his health plan coverage to be effective on March 1, 2015 instead of April 1, 2015. *Testimony of Appellant.* The Agency determined that the effective date of the Appellant's health plan coverage was on April 1, 2015 because he selected a health plan on March 1, 2015. *Exhibit 1; Testimony of Appellant.*

3. The Appellant initially attempted to apply for health insurance on the MNsure website on December 21, 2014. *Testimony of Appellant.* At that time, the Agency informed the Appellant that he was not eligible to enroll until his Medical Assistance benefits was terminated. *Testimony of Appellant.* Around December 21, 2014, the Appellant asked the Minnesota Department of Human Services to cancel his Medical Assistance benefits. *Testimony of Appellant.*

4. The Appellant had Medical Assistance coverage and health coverage through his employer. *Testimony of Appellant.* The coverage with the employer ended on December 31, 2014. *Testimony of Appellant.* The Appellant did not know he had Medical Assistance. *Testimony of Appellant.*

5. On February 28, 2015, the Appellant received the notice of Medical Assistance termination effective February 27, 2015, which the Minnesota of Department of Human Services mailed to the Appellant on or about February 17, 2015. *Testimony of Appellant; Exhibit 2.* The Appellant informed the Agency of the termination on the same day. *Testimony of Appellant.*

6. The Appellant incurred medical costs in March 2015 and would like to be reimbursed for these costs. *Testimony of Appellant*

7. On March 23, 2015, Appeals Examiner Christopher Cimafranca held an evidentiary hearing by telephone conference. The record was closed at the conclusion of

the hearing, consisting of two exhibits.¹

CONCLUSIONS OF LAW

1. This appeal was started within the allowed time limits under 45 C.F.R. §155.520(b).

2. The MNsure Board has legal authority to review Appellant's household's eligibility for enrollment in a qualified health plan and premium assistance under Minnesota Statute § 62V.05, subdivision 6. The MNsure Board has an agreement with the Minnesota 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)*.

Special Enrollment Period

4. The Exchange must provide special enrollment period during which qualified individuals may enroll in QHPs and enrollees may change QHPs. *45 C.F.R. § 155.420(a)(1)*. One triggering event for a special enrollment period is when the qualified individual or his or her dependent loses minimum essential coverage. *45 C.F.R. § 155.420 (d)*. The date of the loss of coverage is the last day the consumer would have coverage under his or her previous plan or coverage. *45 C.F.R. § 155.420 (d)*. Minimum essential coverage includes government sponsored coverage such as Medical Assistance. *45 C.F.R. §155.20; 26 U.S.C. § 5000A(f)(1)*.

5. In this case, there is not dispute that the Appellant was eligible to enroll in a QHP during a special enrollment period because he lost his Medical Assistance benefits on February 17, 2015.

Regular Effective Dates

6. According to 45 C.F.R. § 155.420(b)(1), except as specified in paragraphs (b)(2) and (3) of this section, for a QHP selection received by the Exchange from a qualified individual—

¹ MNsure Appeal Summary, Exhibit 1; Minnesota of Department of Human Services Appeal Summary, Exhibit 2.

- (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).*

Special Effective Dates

7. 45 C.F.R. § 155.420(b)(2)(iv) states that in a case where a consumer loses coverage as described in paragraph (d)(1) [minimum essential coverage] or (d)(6)(iii) of this section, if the plan selection is made before or on the day of the loss of coverage, the Exchange must ensure that the coverage effective date is on the first day of the month following the loss of coverage. If the plan selection is made after the loss of coverage, the Exchange must ensure that coverage is effective in accordance with paragraph (b)(1) of this section or on the first day of the month following plan selection, at the option of the Exchange. *45 C.F.R. § 155.420(b)(2)(iv).*

8. The record establishes that the Appellant enrolled in a QHP on March 1, 2015. This was after the loss of the Medical Assistance coverage on February 27, 2015. As such, the Agency correctly applied 45 C.F.R. § 155.420(b)(2)(iv) by ensuring coverage beginning April 1, 2015, following either the regular effective dates provision (45 C.F.R. § 155.420(b)(1)) or the provision providing that coverage is effective on the first day of the month following plan selection at the option of the Agency. Applying the law as it is written, it does not matter that the Appellant incurred medical bills in March 2015. Therefore, the Agency’s determination must be affirmed.

RECOMMENDED ORDER

THE APPEALS EXAMINER RECOMMENDS THAT the MNsure Board AFFIRM the Agency’s determination that the health plan coverage is effective on April 1, 2015.

/s/ Christopher Cimafranca
Christopher Cimafranca
Appeals Examiner

April 3, 2015
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:

_____ 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.

cc:  Appellant
 MNSure