



**DECISION
OF AGENCY
ON APPEAL**

In the Appeal of: [REDACTED]
For: Qualified Health Plan
Agency: MNSure Board
Docket: 165620

On September 1, 2015, Appeals Examiner Kulani R. Moti held an evidentiary hearing under 42 United States Code §18081(f) and Minnesota Statutes, section 62V.05, subdivision 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, the Appeals Examiner recommends the following findings of fact, conclusions of law, and order.

STATEMENT OF ISSUE

Whether the MNsure Board properly determined that Appellant, was eligible for enrollment in a Qualified Health Plan effective June 1, 2015.

FINDINGS OF FACT

1. On May 29, 2015 MNsure manually enrolled ██████████ in a QHP effective June 1, 2015. *Exhibit 1.* Appellant filed a request challenging the start date of his QHP enrollment, which was received by MNsure on July 20, 2015. *Exhibit A.* On September 1, 2015, Appeals Examiner Kulani R. Moti held an evidentiary hearing via telephone conference. On September 1, 2015, three exhibits¹ were received and the record was closed at the conclusion of the hearing. .

2. On May 21, 2015, Appellant submitted an application for health care coverage through the MNsure eligibility system. *Exhibit 1.* At the time of application, Appellant was the only member of his household requesting coverage. *Exhibit 1.* MNsure determined Appellant was eligible for a QHP and for tax credits of \$376 per month. *Exhibit 1.* On May 27, 2015, Appellant contacted MNsure to report that his Medical Assistance would end May 31, 2015. *Exhibit 1.* On May 29, 2015, MNsure manually enrolled Appellant in a QHP with an effective date of June 1, 2015. Appellant selected a plan through Blue Cross Blue Shield. *Exhibit 1.*

3. On June 11, 2015, Appellant contacted MNsure regarding his enrollment in his selected QHP and was advised it can take up to 60 days for enrollment to be processed and that the enrollment information had been sent to Blue Cross. *Exhibit 1.* MNsure sent Appellant's enrollment information to Blue Cross Blue Shield on June 15, 2015 for effective date of June 1, 2015. *Exhibit 1.*

4. Appellant contends that he did not learn he had coverage through Blue Cross until he called carrier on July 2, 2015. *Testimony of Appellant.* On July 16, 2015, Appellant received a premium bill for June, July and August 2015 totaling \$1,392. *Testimony of Appellant.* Appellant does not believe he should have to pay premiums for June 2015 because he did not know he had coverage for that month. Appellant believes his coverage should begin on July 1, 2015. *Testimony of Appellant.* Appellant argues that when he was manually enrolled in a QHP he was informed by MNsure that his preliminary start date would be June 1, 2015 but was not told for sure when his coverage would begin. Appellant does not believe it is fair that he is required to pay premiums for a month coverage that he could not use. *Testimony of Appellant.*

5. Appellant does not dispute the projected income calculations or the calculation of his advanced premium tax credit by MNsure. *Testimony of Appellant.*

¹ Exhibit 1 – MNsure Appeal Summary; Exhibit 2 – DHS Appeal Summary; Exhibit A – Appeal Request.

APPLICABLE LAW

1. Pursuant to 45 C.F.R. § 155.520(b)(1) and Minnesota Rule 770.0105, subpart 2(D) an appeal must be received within 90 days from the date of the notice of eligibility determination. Minnesota Statutes sections 256.045, subdivision 3 256L.10 provide that a person may request a state fair hearing by filing an appeal either: (a) within thirty days of receiving written notice of the action or (b) within ninety days of such notice if the Appellant can show good cause why the request for an appeal was not submitted within the thirty day time limit.

2. The MNsure Board has the legal authority to review and decide issues in this appeal regarding Appellant'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. The Commissioner of the Minnesota Department of Human Services has the legal authority to review and decide issues in this appeal regarding Appellant's eligibility for medical assistance and MinnesotaCare. *Minn. Stat. § 256.045, subd. 3*.

3. Federal regulations for health insurance exchanges created under the Affordable Care Act state that during the open enrollment period for the benefit year beginning on January 1, 2015, the Exchange must ensure coverage is effective: (a) January 1, 2015, for QHP selections received by the Exchange on or before December 15, 2014; (b) February 1, 2015, for QHP selections received by the Exchange from December 16, 2014, through January 15, 2015; and (c) March 1, 2015, for QHP selections received by the Exchange from January 16, 2015, through February 15, 2015. *45 C.F.R. § 155.410(f)*.

4. Loses medically needy coverage as described under section 1902(a)(10)(C) of the Social Security Act (Medical Assistance) only once per calendar year. The date of the loss of coverage is the last day the consumer would have medically needy coverage. *45 C.F.R. § 155.420 (d)(iv)*. If a consumer loses coverage as described in paragraph (d)(1) and if the plan selection is made on or before the day of the triggering event, the Exchange must ensure that the coverage effective date is on the first day of the month following the loss of coverage. *45 C.F.R. § 155.420 (b)(2)(iv)*.

CONCLUSIONS OF LAW

5. This appeal of MNsure's determination regarding the Appellant's enrollment start date in a QHP is timely. The Appellant is not contesting the household's ineligibility for Medical Assistance or MinnesotaCare coverage or the amounts of premium tax credits and cost-sharing reductions.

6. Appellant was determined eligible for enrollment in a QHP on May 21, 2015. . Appellant was determined eligible for a special enrollment period on May 27, 2015 because his

Medical Assistance coverage was ending May 31, 2015. Appellant selected a QHP and was manually enrolled on May 29, 2015 and was notified that coverage would start June 1, 2015. MNsure sent Appellant's enrollment information to Blue Cross on June 15, 2015. MNsure correctly determined Appellant's QHP coverage start date as June 1, 2015 because Appellant reported a loss of Medical Assistance, was found eligible for a QHP, and selected a QHP before his Medical Assistance ended on May 30, 2015. Thus, I find that MNsure acted correctly with regard to the effective date of the Appellant's QHP coverage.

RECOMMENDED ORDER

THE APPEALS EXAMINER RECOMMENDS THAT:

The MNsure Board AFFIRM the Agency's determination to ensure enrollment of Appellant in a Qualified Health Plan effective June 1, 2015.

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

September 14, 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.

/s/ Louis Thayer
Louis Thayer
Co-Chief Human Services Judge

September 15, 2015
Date

cc: [REDACTED] Appellant
Michael Turpin, MNsure General Counsel
Teressa Saybe, DHS 0838

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.