

## CONTINUATION OF BENEFITS

0917.11

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Unless an enrollee requests otherwise in writing, continue coverage if the request for an appeal is received before the effective date of the action or within 10 days after the date the notice is mailed, whichever is later. If the end of a notice period falls on a weekend or holiday, consider an appeal the unit makes on the next working day to be timely for the purpose of continued benefits.

See the MinnesotaCare section for information on continued coverage when the appeal is based on cancellation for non-payment.

Notify people that they will be required to repay benefits continued while the appeal is pending if they lose their appeal. Also notify people that they must continue to pay premiums or meet a spenddown if applicable.

If a change not related to the issue under appeal occurs while benefits are continuing, notify the enrollee of any adverse action. Take the action unless it is also appealed.

**EXAMPLE:**

A MinnesotaCare enrollee appeals the removal of a household member from coverage based on availability of other insurance. At the enrollee's request, coverage is continued for the entire household, including the member with other insurance, while the appeal is pending. The household must continue to pay the premium for the entire household.

While the appeal is pending, a new member with income moves into the household resulting in an increased premium. Increase the premium unless the household files a separate appeal of that action.

**EXAMPLE:**

An MA household appeals an increased spenddown due to increased income. At the household's request, coverage is continued at the old spenddown amount while the appeal is pending. Before the appeal is heard, the household fails to submit a scheduled recertification. Send a notice of termination for failure to comply with recertification requirements. Terminate MA unless the household submits a complete recertification before the effective date of termination OR appeals the termination.

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**MinnesotaCare:**

Inform enrollees who wish to continue benefits while an appeal is pending that they must continue to pay premiums. For adverse actions other than cancellation for non-payment, all premiums that are due must be paid before the effective date of the proposed action or within 10 days after the date the notice is mailed, whichever is later, for benefits to continue. For cancellation for non-payment, **coverage will be reinstated if all due premiums are** paid within **20** days after the effective date of cancellation.

**EXAMPLE:**

MinnesotaCare sends Rob a cancellation notice on December 15 due to the availability of other insurance. Rob wishes to appeal the cancellation. In order to continue benefits pending the appeal, he must pay **the January premium by the last working day in December.**

**EXAMPLE:**

MinnesotaCare sends Mary a cancellation notice for non-payment of her December premium on **November 15**. If Mary sends the premium by the last working day of **November**, her coverage will be **continued**. If she does not send the premium, her coverage will be canceled effective **December 1**. If she appeals the cancellation and wishes to continue benefits, she must pay the December **and January premiums** by **December 10**.

If the appeal involves a dispute about the amount of the premium, require the enrollee to pay the premium that was in effect before the action being appealed while the appeal is pending.

**EXAMPLE:**

Based on income information submitted with the annual renewal, MinnesotaCare determines that the McDonald family's premium will increase from \$49 to \$82 per month effective February 1. Mr. McDonald appeals the increased premium. Continue coverage at \$49 per month while the appeal is pending. If the appeal decision upholds the increased premium beginning February 1, the McDonalds will have to pay the \$33 per month difference for all months when the appeal was pending for coverage to continue.

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If the enrollee loses an appeal of cancellation for non-payment of premium and coverage was continued during the appeal, begin the 4-month penalty period with the 1st available month after you receive the appeal decision. See §0915.11 (Fail to Pay Premium/Voluntary Cancellation).

**EXAMPLE:**

Sally appealed her March 1 cancellation for non-payment and requested coverage while the appeal was pending. She paid the **March** premium by March 10 and also paid all premiums due while the appeal was pending. On April 24, MinnesotaCare receives an appeal decision upholding the cancellation. Sally has paid the May premium and the cap payment for May has gone out. Begin the 4-month penalty period in June. If the appeal decision had been received on April 15, the penalty period would begin in May.

**MA/GAMC:**

Follow general provisions.