

STATE OF RHODE ISLAND
EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES
APPEALS OFFICE

V.

DOCKET No. 25-2346

HealthSource Rhode Island

DECISION

I. INTRODUCTION

A Microsoft Teams hearing on the above-entitled matter came before an Appeals Officer on June 23, 2025. The Appellant, [REDACTED] (hereinafter the “Appellant”), initiated this matter to appeal the April 29, 2025, deadline to enroll in health coverage through HealthSource Rhode Island (HSRI) as stated in the Benefit Decision Notice (BDN) dated April 29, 2025. The Appellant testified that they should still be allowed to enroll in health coverage through HSRI despite the April 29, 2025, deadline due to the emotional hardship they endured when they were discharged from their previous employer on February 28, 2025. HSRI testified that the April 29, 2025, deadline to enroll in health coverage is correct because federal regulations only allow for a 60-day Special Enrollment Period (SEP) once a qualifying life event occurs. HSRI further testified that because there is no new qualifying life event since February 28, 2025, they are unable to offer the Appellant a new SEP. For the reasons discussed in more detail below, the Appellant’s Appeal is denied.

II. JURISDICTION

The Executive Office of Health and Human Services (EOHHS) is authorized and designated by R.I.G.L. § 42-7.2-6.1, EOHHS regulation 210-RICR-10-05-2, and HSRI regulation 220-RICR-90-00-1.14 to be the entity responsible for appeals and hearings related to HSRI and the Health Exchange. The Administrative Hearing was held in accordance with the Administrative Procedures Act, R.I.G.L. § 42-35-1 et seq., and EOHHS regulation 210-RICR-10-05-2.

III. ISSUE

Did HSRI provide the Appellant with a SEP in compliance with Federal and State Policy?

IV. STANDARD OF PROOF

It is well settled that in formal or informal adjudications modeled on the Federal Administrative Procedures Act, unless otherwise specified, a preponderance of the evidence is generally required to prevail. See 2 Richard J. Pierce, *Administrative Law Treaties* §10.7 (2002) & *Lyons v. Rhode Island Pub. Employees Council* 94, 559 A.2d 130, 134 (R.I. 1989) (preponderance standard is the “normal” standard in civil cases). This means that for each element to be proven, the factfinder must believe that the facts asserted by the proponent are more probably true than false. When there is no direct evidence on a particular issue, a fair preponderance of the evidence may be supported by circumstantial evidence. See *Narragansett Electric Co. vs. Carbone*, 898 A.2d 87 (R.I. 2006).

V. PARTIES AND EXHIBITS

General Counsel for HSRI, Ben Gagliardi Esq. attended the hearing as well as HSRI Appeals Specialist, Mary Laurila, who provided testimony and offered the following exhibit into evidence:

Exhibit #1 – BDN, Date: April 29, 2025.

The Appellant was present and testified on their own behalf. The Appellant presented the following exhibit into evidence:

VI. RELEVANT LAW/REGULATIONS

The Patient Protection and Affordable Care Act provides the legal authority for states to establish health insurance exchanges, which are designed to provide affordable health insurance to eligible individuals and small business through Qualified Health Plans (QHPs). The rules and regulations pertaining to HSRI can be found in Title 220 – Department of Administration, Chapter 90 – Health Benefits Exchange Part 1 of the Rhode Island Code of Regulations.

Subject to paragraphs (a)(3) through (5) of this section, as applicable, the Exchange must allow a qualified individual or enrollee to enroll in or change from one QHP to another if they lose minimum essential coverage. The date of the loss of coverage is the last day the consumer would have coverage under his or her previous plan or coverage. See 45 C.F.R. § 155.420(d)(1)(i).

Unless specifically stated otherwise herein, a qualified individual or enrollee has 60 days from the date of a triggering event to select a QHP. See 45 C.F.R. § 155.420(c)(1).

VII. FINDINGS OF FACT

1. The Appellant was discharged from their previous employer on February 28, 2025.
2. When the Appellant was discharged from their previous employer, they lost their minimum essential coverage. This triggered the beginning of their 60-day SEP to enroll in a QHP.
3. The Appellant applied for a QHP on April 29, 2025. The Appellant's application was approved, and they were issued a BDN stating that they had until April 29, 2025, to enroll in health coverage through HSRI.
4. The Appellant did not enroll in health coverage through HSRI before the end of their SEP on April 29, 2025.

VIII. DISCUSSION

As stated above HSRI must allow a qualified individual or enrollee to enroll in or change from one QHP to another if they lose minimum essential coverage and a qualified individual or enrollee has 60 days from the date of a triggering event to select a QHP.

HSRI testified that the Appellant's SEP began on February 28, 2025, and ended on April 29, 2025. HSRI further testified that the BDN issued on April 29, 2025, informed the Appellant of their deadline to enroll in health coverage with HSRI and the Appellant failed to enroll before the deadline. Lastly, HSRI testified that because there is no new qualifying life event, they are unable to offer the Appellant a new SEP.

The Appellant did not dispute that they did not enroll in health coverage through HSRI before April 29, 2025. The Appellant testified that they failed to enroll in health coverage due to the emotional hardship they endured after being discharged from their previous employer of four years. The Appellant further testified that they are hoping to be allowed to enroll in health coverage with HSRI, despite having missed the SEP deadline of April 29, 2025.

Because HSRI provided the Appellant with a SEP from February 28, 2025, through April 29, 2025, there is a preponderance of evidence to show that HSRI provided the Appellant with a SEP in compliance with Federal and State Policy. Furthermore, because the Appellant has not experienced a new qualifying life event since their loss of coverage on February 28, 2025, HSRI is unable to offer the Appellant a new SEP.

IX. CONCLUSION OF LAW

After careful review of the testimony and evidence present at the administrative hearing, this Appeals Officer concludes that:

1. There is a preponderance of evidence to show that HSRI provided the Appellant with a SEP in compliance with Federal and State Policy.

2. Because the Appellant has not experienced a new qualifying life event since their loss of coverage on February 28, 2025, HSRI is unable to offer the Appellant a new SEP.

X. DECISION

Based on the foregoing findings of fact, conclusions of law, evidence, and testimony it is found that a final order be entered that there is sufficient evidence to support the SEP awarded to the Appellant by HSRI.

APPEAL DENIED

/s/ Jack Peloquin

Jack Peloquin

Appeals Officer

NOTICE OF APPELLATE RIGHTS

This hearing decision constitutes a final order pursuant to R.I.G.L. § 42-35-12. An appellant may seek judicial review to the extent it is available by law. 45 C.F.R. § 155.520 grants appellants who disagree with the decision of a State Exchange appeals entity, the ability to appeal to the U.S. Department of Health and Human Services (HHS) appeals entity within thirty (30) days of the mailing date of this decision. The act of filing an appeal with HHS does not prevent or delay the enforcement of this final order. You can file an appeal with HHS at <https://www.healthcare.gov/downloads/marketplace-appeal-request-form-a.pdf> or by calling 1.800.318.2596.

This final order constitutes a final order of the Department of Human Services pursuant to R.I.G.L. § 42-35-12. Pursuant to R.I.G.L. § 42-35-15, a final order may be appealed to the Superior Court sitting in and for the county of Providence within thirty (30) days of the mailing date of this decision. Such an appeal, if taken, must be completed by filing a petition for review in Superior Court. The filing of the complaint does not itself stay enforcement of this order. The agency may grant, or the reviewing court may order, a stay upon the appropriate terms.

CERTIFICATION

I hereby certify that I mailed, via regular mail, postage prepaid, a true copy of the foregoing to [REDACTED]; copies were sent, via email, to [REDACTED]
[REDACTED], Vianchell Tiburcio, Mary Laurila, Ben Gagliardi, Esq., and Lindsay Lang on
this 26th day of June, 2025.

Rebecca A. [Signature]