



September 8, 2015

Key Facts You Need to Know About: Helping Families That Include Immigrants Apply for Health Coverage

Families that include immigrants may experience barriers when applying for health coverage. The following key facts explain issues that families may face and provides information about key concerns families with immigrants may have when completing the application process. (*For more information on immigrant eligibility, please see [Key Facts You Need to Know About Immigrant Eligibility for Health Insurance Affordability Programs](#).*)

PART I: Eligibility policies affecting immigrants in Medicaid, the Children's Health Insurance Program (CHIP), and the federal and state Marketplaces.

Will enrolling in insurance affordability programs have an impact on immigrants when they apply to change their immigration status?

No. When individuals apply for legal permanent resident status, immigration authorities determine whether someone is likely to become dependent on the government for subsistence, commonly referred to as a "public charge." This evaluation does *not* take into account whether someone applied for or received Medicaid, CHIP, or subsidized coverage in the Marketplaces. Thus, applying for or receiving these benefits does not have a negative impact on immigrants when they apply to change their status. There is an exception: people receiving long-term institutional care through Medicaid may be considered dependent on the government.

Can people apply for health coverage for other household members even if they are not applying for coverage for themselves (or are ineligible)?

Yes, households of people applying for insurance affordability programs can include both applicants and non-applicants. During the application process, the person completing the application will state who is in the household and which household members are applying for coverage. Non-applicants must include information such as their income and plans for tax filing, but they are not required to provide information about their immigration or citizenship status.

Is having a Social Security number (SSN) an eligibility requirement for insurance affordability programs?

For Medicaid and CHIP, individuals seeking coverage for themselves are generally required to provide their SSNs if they are eligible for one (unless they have a religious objection to getting an SSN). If they are eligible for but do not have an SSN, they must apply for one and the



Medicaid or CHIP agency must offer to help them apply. They cannot be denied coverage while their application for an SSN is being processed.

Individuals seeking to enroll in a Marketplace plan for themselves must provide an SSN if they have one.

Is an SSN required if an individual is applying for premium tax credits for a family member and not himself?

Individuals applying for premium tax credits for their dependents or spouse and not for themselves only need to provide their SSN if: (1) they have an SSN, and (2) they filed a tax return for the year for which tax data would be used to verify their household income and family size. (Eligibility for the 2015 coverage year uses information from the 2013 tax return year to verify that information.) Providing SSNs of non-applicants who have them is strongly encouraged. The Marketplaces use SSNs to conduct data matches with trusted data sources like the Social Security Administration (SSA) and the Internal Revenue Service (IRS). When these matches can successfully verify key information like income, consumers may not have to submit proof of their circumstances.

Will a parent applying for Medicaid or CHIP coverage for his child but not for himself be required to provide an SSN?

Parents who apply for Medicaid or CHIP for their children do not have to provide an SSN. If they have one and choose to provide it, this may help the Medicaid agency electronically verify income for the family, but it is not required.

Can a person who has an Individual Taxpayer Identification Number (ITIN) to file taxes use that number instead of an SSN on the application?

No. ITINs are not the same as SSNs. The application will verify SSNs with the Social Security Administration, which cannot verify ITINs. Someone who uses an ITIN to file taxes is not required to provide an SSN on the application and should skip the question in the application. (The application will make multiple requests for the SSN; each time the consumer should skip it.)

Can someone include a tax dependent that lives abroad in his application?

Applicants must include information on all members of the household, including any tax dependents living abroad, for the purpose of determining the applicant's household size and income. Dependents living abroad will generally not be eligible to enroll in health insurance coverage. The Healthcare.gov application asks for the address of all tax dependents but does not accept foreign addresses. Consumers can put in the address of the tax filer in place of the address for tax dependents who live abroad.

Can information provided in the application be used for immigration civil enforcement purposes?

No. Medicaid, CHIP, and the Marketplaces use the U.S. Citizenship and Immigration Services' (USCIS) Systematic Alien Verification for Entitlements (SAVE) program to verify the citizenship or immigration status of people applying for coverage. However, this data match is only for the purpose of confirming that applicants meet the immigration or citizenship status requirement to enroll in an insurance affordability program. The USCIS has issued [guidance](#) that information about applicants or households obtained for health insurance eligibility will not be used for civil immigration enforcement purposes.



PART II: Applying for premium tax credits in the Federally-Facilitated Marketplace

Who needs to complete remote identity proofing (i.e. ID proofing) to submit an application on Healthcare.gov?

The Federally-Facilitated Marketplace (FFM) uses Healthcare.gov to process applications for and enroll eligible applicants in health coverage. Healthcare.gov requires the person designated as the household contact in an application (who must be an adult) to successfully complete ID proofing to ensure that he is who he says he is before he can use the online process to apply for coverage, select health insurance plans, report changes, or renew coverage.

Why are some people not able to complete the ID proofing process on Healthcare.gov?

Experian, the entity that verifies identity for Healthcare.gov, creates personalized questions that the household contact must answer to prove his identity in the application. Experian often cannot generate a sufficient number of questions for household contacts with limited or no credit history. Also, consumers have sometimes found questions generated by Experian difficult to answer.

What happens when ID proofing cannot be completed on Healthcare.gov?

When Healthcare.gov cannot complete ID proofing online, it gives household contacts a unique reference code and instructs them to call the Experian Help Desk to complete ID proofing over the phone.

What happens when ID proofing cannot be completed over the phone with Experian?

Household contacts who cannot complete ID proofing over the phone have to submit supporting documents to prove their identity if they wish to submit an application online. They can upload electronic versions of the documents to their Healthcare.gov accounts, or can mail copies to:

Health Insurance Marketplace
465 Industrial Boulevard
London, KY 40750-0001

Table 1 lists the documents that can be used to verify identity. When mailing copies, it is important to include the unique reference ID number provided during the online ID proofing process so the documents can be matched to the correct account.

What if consumers do not have any of the documents listed to complete Healthcare.gov's ID proofing process?

Household contacts who do not have any of the documents needed to complete the ID proofing process will not be able to submit an application online on Healthcare.gov. Instead, they may complete the application by mailing a completed paper application form or may apply over the phone by contacting the Marketplace call center at 1-800-318-2596 (TTY: 1-855-889-4325). They should ask to receive notices about their application by mail. If they qualify for Marketplace coverage, they will need to go through the Marketplace call center to select and enroll in a plan. To evaluate their health plan options before enrolling, applicants can use the "[See plans](#)" tool on Healthcare.gov. Once enrolled, they will need to report any changes and complete the renewal process through the Marketplace call center.

How does Healthcare.gov verify citizenship?

In the FFM, when applicants attest to being U.S. citizens and provide an SSN, their information is

checked against information in SSA's records to verify citizenship.

SSA does not have citizenship records for some citizens, including many who were born outside the U.S. If citizenship cannot be verified electronically through SSA, applicants are asked if they are a naturalized or derived citizen. Some applicants who are naturalized or derived citizens can have their status verified instantly by providing numbers found in their Certificate of Citizenship or Certificate of Naturalization that will be matched with information in the SAVE program.

The SAVE program cannot immediately verify citizenship status of all derived and naturalized citizens. When this occurs, applicants will have to upload proof of their citizenship to their Healthcare.gov accounts (see list of acceptable proof in Table 2). Applicants can also mail document copies to:

Health Insurance Marketplace
465 Industrial Boulevard
London, KY 40750-0001

While their citizenship is being verified, applicants who otherwise meet all eligibility requirements can enroll in Medicaid, CHIP, or a Marketplace plan during a "reasonable opportunity period" or "inconsistency period."

How does Healthcare.gov verify immigration status?

In the FFM, all non-citizens applying for coverage for themselves must attest to having an "eligible immigration status." They then must select a document type to use to prove their immigration status. They will be asked to provide one or two numbers from their document; Healthcare.gov will use this information to attempt to immediately verify their immigration status through the SAVE program.

The SAVE program cannot immediately verify the status of all immigrants. When this occurs,

applicants will have to upload proof of their immigration status to their Healthcare.gov accounts (see list of acceptable proof in Table 3). Applicants can also mail document copies to:

Health Insurance Marketplace
465 Industrial Boulevard
London, KY 40750-0001

While the applicant gathers and sends in documents and the agency receives and processes them, the applicant can enroll in Medicaid, CHIP, or a Marketplace plan if he meets all other eligibility requirements during a "reasonable opportunity period" or "inconsistency period."

Why are some lawfully present immigrants who are eligible for subsidies not able to immediately enroll in subsidized coverage?

Lawfully present immigrants who have income within the Medicaid eligibility range but are ineligible for Medicaid due to their immigration status can qualify for premium tax credits and cost-sharing reductions even if their income falls below the poverty line. (Generally, consumers must have income between 100-400 percent of the poverty line to qualify for premium tax credits and cost sharing reductions.) However, Healthcare.gov has system limitations that can result in an incorrect eligibility determination for some of these individuals.

If Healthcare.gov can instantly verify that a consumer is lawfully present but ineligible for Medicaid because of his immigration status, the applicant should receive the correct determination of eligibility for subsidies.

If Healthcare.gov cannot instantly verify that the consumer's immigration status makes him ineligible for Medicaid, then the consumer will receive an incorrect eligibility determination for subsidies. This is because Healthcare.gov will



assume the consumer is eligible for Medicaid based on immigration status until the consumer provides proof of his immigration status, which shows he is ineligible for Medicaid. One of two erroneous determinations will occur:

- **Healthcare.gov incorrectly assesses or determines he is eligible for Medicaid** if the consumer otherwise appears to meet the income and other applicable requirements for Medicaid eligibility.
- **Healthcare.gov incorrectly determines he is ineligible for Marketplace subsidies and he is treated as if he were in the coverage gap.** This can occur in states that have not expanded Medicaid. If the consumer does not meet the Medicaid income or other applicable requirement and his income is below the poverty line, Healthcare.gov assumes the consumer is in the coverage gap and does not send his case file to Medicaid. These individuals are told they are only eligible to purchase a Marketplace plan at full cost — without subsidies.

What steps need to be taken to get the correct determination for individuals incorrectly assessed or determined eligible for Medicaid?

Consumers must be determined ineligible for Medicaid based on their immigration status before they can get the correct eligibility determination for Marketplace subsidies. When Healthcare.gov incorrectly assesses or determines individuals as eligible for Medicaid, it sends the individual's case file to the state Medicaid agency. The Medicaid agency will ask the consumer to provide proof of his immigration status. After the consumer provides proof and is denied Medicaid based on his immigration status, he will be referred back to Healthcare.gov and instructed to update his application to indicate he has been

denied eligibility for Medicaid based on immigration status.

After a consumer notes on the application that he has been denied Medicaid due to immigration status, he should receive a correct determination of eligibility for premium tax credits and cost-sharing reductions.

What steps need to be taken to get the correct determination for individuals incorrectly determined ineligible for Marketplace subsidies and treated as if they were in the coverage gap?

These consumers must also be determined ineligible for Medicaid based on their immigration status before they can get the correct eligibility determination for Marketplace subsidies. Healthcare.gov periodically sends these consumers who may have gotten an incorrect eligibility determination a notice informing them that they may qualify for premium tax credits and cost-sharing reductions and that they must submit documents to prove their immigration status. When documents are received and processed by the Marketplace, eligible consumers are instructed to return to Healthcare.gov and indicate they have been denied Medicaid due to their immigration status.

Are there any alternative steps individuals can take to get the correct eligibility determination?

In some cases consumers can get a Medicaid denial due to immigration status more quickly by applying for Medicaid directly through the state Medicaid agency. Once denied Medicaid eligibility based on immigration status by the state agency, consumers can return to Healthcare.gov and indicate they have been denied Medicaid due to immigration status.

Table 1: Documents to Satisfy the Identity Proofing Requirement	
ONE of the following:	
Driver's license (issued by state or territory)	
Voter registration card	
U.S. passport or U.S passport card	
U.S. military draft card or record	
School identification card	
Certificate of Naturalization (Form N-550 or N-570) or Certificate of U.S. Citizenship (Form N-560 or N-561)	
Permanent Resident Card or Alien Registration Receipt Card (Form I-551)	
Employment Authorization Document containing a photograph (Form I-766)	
Identification card issued by the federal, state, or local government	
Foreign passport, or identification card issued by a foreign embassy or consulate containing a photograph	
Military dependent identification card	
Native American tribal document	
U.S. Coast Guard Merchant Mariner document	
or, TWO of the following:	
U.S. public birth record	
Marriage certificate	
Employer identification card	
Property deed or title	
Social Security card	
Divorce decree	
High school or college diploma (including high school equivalency diplomas)	
Source: www.healthcare.gov/help/how-do-i-resolve-an-inconsistency	

**Table 2:
Documents to Verify Citizenship**

- U.S. passport
- Certificate of Citizenship
- Certificate of Naturalization
- State-issued enhanced driver's license (currently available from Michigan, Vermont, New York, and Washington)
- Document from a federally recognized Indian tribe that includes the individual's name, the name of the tribe, and membership, enrollment, or affiliation with the tribe

Individuals who do not have one of the above documents can provide one document from each of the lists below (totaling two documents)

ONE of the following:

- U.S. public birth certificate
- Consular Report of Birth Abroad (FS-240, CRBA)
- Certification of Report of Birth (DS-1350)
- Certification of Birth Abroad (FS-545)
- U.S. Citizen Identification Card (I-197 or the prior version, I-179)
- Northern Mariana Card (I-873)
- Final adoption decree showing the person's name and U.S. place of birth
- U.S. Civil Service Employment Record showing employment before June 1, 1976
- Military record showing U.S. place of birth
- U.S. medical record from a clinic, hospital, physician, midwife, or institution showing a U.S. place of birth
- U.S. life, health, or other insurance record showing U.S. place of birth
- Religious record showing U.S. place of birth recorded in the U.S.
- School record showing the child's name and U.S. place of birth
- Federal or state census record showing U.S. citizenship or U.S. place of birth
- Documentation of a foreign-born adopted child who received automatic U.S. citizenship (IR3 or IH3)

AND ONE of the following:

(that has a photograph or other information, like your name, age, race, height, weight, eye color, or address)

- Driver's license issued by a state or territory or ID card issued by the federal, state, or local government
- School identification card
- U.S. military card or draft record or military dependent's identification card
- U.S. Coast Guard Merchant Mariner document
- Voter registration card
- A clinic, doctor, hospital, or school record, including preschool or day care records (for children under 19 years old)
- Two documents containing consistent information that proves your identity, like employer IDs, high school or college diplomas, marriage certificates, divorce decrees, property deeds, or titles

Source: www.healthcare.gov/help/how-do-i-resolve-an-inconsistency



**Table 3:
Documents to Verify Immigration Status**

Permanent Resident Card, "Green Card" (I-551)
Refugee travel document (I-571)
Temporary I-551 stamp (on Passport or I-94/I-94A)
Arrival/Departure Record (I-94/I-94A)
Certificate of Eligibility for Nonimmigrant Student Status (I-20)
Employment Authorization Card (I-766)
Certification from U.S. Department of Health and Human Services (HHS) Office of Refugee Resettlement (ORR)
Administrative order staying removal issued by Department of Homeland Security
Office of Refugee Resettlement eligibility letter (if under 18)
Reentry Permit (I-327)
Machine-readable immigrant visa (with temporary I-551 language)
Foreign passport
Arrival/Departure Record in foreign passport (I-94)
Certificate of Eligibility for Exchange Visitor Status (DS-2019)
Notice of Action (I-797)
Document indicating withholding of removal (or withholding of deportation)
Document indicating a member of a federally recognized Indian tribe or American Indian born in Canada
Resident of American Samoa card
Other documents

Source: www.healthcare.gov/help/immigration-document-types