

FAQ on Remote Identity Proofing, Remote Identity Proofing Failures and Application Inconsistencies (Federally-facilitated Marketplace)

This document outlines information on identity (ID) proofing and on application inconsistencies. These are two different topics and two different stages in applying for health coverage through the Federally-facilitated Marketplace (FFM).

ID proofing is one of the first steps to set up your online Marketplace account. ID proofing must be completed in order for you to submit an online application for coverage through the FFM.

Application inconsistencies occur when some of the information in your application for coverage does not match information in data sources we check to verify your eligibility.

Identity Proofing:

What is ID Proofing?

ID proofing is one of the first steps of the process to apply for health coverage through the Federally-facilitated Marketplace. ID proofing must be completed in order for you to create an account for the Marketplace and submit an online application. ID proofing is used to verify your identity and is done by asking you questions based on your personal and financial history.

Why do I need to verify my identity?

To protect your personal information, you have to take a few steps to verify your identity before you can create a Marketplace account and complete an application. The ID proofing process will ask you questions that only you would be likely to know the answers to, based on your financial accounts and personal information in your credit report. This process is meant to prevent an unauthorized person from creating an account and applying for health coverage in your name without your knowledge.

What information will I need to verify my identity?

You should be prepared to provide accurate answers to questions about your personal and financial history. You will not be asked about all of these issues, but having this information handy will be helpful:

- Addresses of current and past residences
- Names of counties resided in, past and present
- Auto ownership – Details of the car, the license plate, and any auto loans
- Names of current and previous employers
- Credit cards – Name of lenders, year and month the account was opened
- Mortgages - Name of the lenders, amount of mortgage, and the term (the number of months or years) of the loan
- Loans (including Auto, Student, and Home Equity Loans) - including the name of the lender, amount of loan, and term (the number of months or years) of the loan



What does it mean when the Marketplace tells me that my identity couldn't be verified?

If the Marketplace tells you that your identity couldn't be verified, it simply means that we couldn't match all of the information you provided with the information available in the electronic records we use for verification. It does not mean that we will not be able to verify your identity, but that we need to take some additional steps to do so.

If the Marketplace tells me that my identity couldn't be verified, what is the next step?

If the Marketplace informs you that your identity couldn't be verified, you'll need to take an additional step to verify your identity. You'll need to complete this process before you can complete your online application for coverage.

- First, you'll be directed to call the Experian Help Desk at (866) 578-5409 and provide the reference code displayed on the screen notifying you to call Experian so the help desk representative can help you verify your identity. Experian is the contractor the FFM uses to complete the ID proofing process.
- If your identity cannot be verified by the Experian Help Desk, you may also be asked to upload documents showing your identity to your My Account on **HealthCare.gov**, or mail documentation to the Marketplace for review at the address below. For a list of possible documents please refer to the notice you receive upon failing identity proofing.

HEALTH INSURANCE MARKETPLACE
465 INDUSTRIAL BLVD
LONDON, KY 40750-0001

- Although documents may be uploaded to My Account or mailed, uploading them to My Account may result in your identity being verified sooner. Also, if you mail them, be sure to mail a COPY of your documents and keep the originals.
- If you must send in documentation to verify your identity, you can expect your paperwork to be processed and turned around quickly, **typically within 7-10 business days after we receive the documentation, if not sooner.**
- After your documentation is processed, you will receive a written notice that either your identity was verified or further information is still required.

Note—Marketplaces are required to abide by strict privacy and security standards to make sure your information is protected.

What if I have sent in documents but I have not yet received a notice informing me that my identity verification has been processed?

Please contact the Marketplace Call Center at 1-800-318-2596 (or TTY: 1-855-889-4325) to ask for an update.

The Call Center will ask for some information, such as your name and date of birth, and should be able to provide you with an update. In the event the Call Center is not able to provide a status update, the Call Center will contact an advanced casework team to look into the status of your case and the Marketplace will be in touch with you once your case has been reviewed.

I continue to have issues verifying my identity; how can I apply for coverage?

If, after following the instructions provided during the RIDP process you continue to have issues verifying your identity you can:

- Call the Call Center and you can complete the online application with a Call Center Representative, or
- Mail in a paper application to the Marketplace. See above for the Marketplace address.

What if I already submitted a paper application or I applied through the Call Center and I received a notice with my eligibility determination, but now I am having difficulty creating an online account to enroll in coverage?

Don't worry! Your eligibility determination will be maintained until you are able to select and enroll in a plan, as long as you do so before the end of the enrollment period. Please follow the steps above in order for the Marketplace to verify your identity.

You can also call the Call Center for assistance with selecting and enrolling in a plan.

Application Inconsistencies:

What is an inconsistency?

When you fill out your application for Marketplace coverage, you enter certain information about yourself and, in many cases, your family, like your state of residence, your citizenship or immigration status and, if you are applying for help paying for coverage, your income. The Marketplace will attempt to match the information you provide with information contained in data sources we use for eligibility verification. If any of the information you provide does not match information contained in data sources we use for eligibility verification, we call this an application inconsistency.

If my eligibility determination notice asks me to provide additional information to the Marketplace, can I still enroll in a plan?

Yes, if your eligibility notice tells you that you are eligible to purchase health coverage through the Marketplace but more information is needed, you can continue to choose and enroll in a health plan. You do not have to wait until you receive a notice telling you that your inconsistency has been cleared before enrolling in coverage.

If there is an application inconsistency, the Marketplace will still provide you with eligibility while your inconsistency is being resolved based on the information you have provided. However, you will be asked to provide additional information or documentation for the Marketplace to review in order to resolve the inconsistency. Your eligibility determination notice will tell you what kind of documentation is needed, and the date we must receive it by in order to make a final eligibility determination. If you do not submit information or documentation sufficient to resolve the inconsistency, the Marketplace will make a final eligibility determination based on the information in the data sources.

What is the next step if the Marketplace asks me to provide more information?

You can either upload a copy of the requested document(s) showing your information to your My Account on [HealthCare.gov](https://www.healthcare.gov), or mail a copy of your document(s) to the Marketplace:

HEALTH INSURANCE MARKETPLACE
465 INDUSTRIAL BLVD
LONDON, KY 40750-0001

Although you may either upload your documents to your My Account or mail them, they will be processed more quickly if you upload them to My Account. If you mail documents, please be sure to mail a COPY, and keep the originals for your records.

Your eligibility determination notice will provide a list of documentation that will help the Marketplace resolve your inconsistency. See here for a list of documents that you can submit to provide more information about different types of inconsistencies: <https://www.healthcare.gov/help/how-do-i-resolve-an-inconsistency/>.

- For example, if you are asked to provide more information about your Social Security Number (SSN), you may submit a Social Security Card, or a Tax form that includes your SSN.

What happens once I submit additional information to the Marketplace?

Once you upload documentation to your My Account or mail it to the Marketplace, the Marketplace will (1) match your documentation with your application, (2) review your documentation to determine whether it supports the information provided on the application, and (3) send you a notice to let you know that your inconsistency has been cleared, or if more information is still needed.

When reviewing the documentation you provide, the Marketplace may need to re-assess your eligibility so that you receive the most accurate eligibility determination based on your information. If you have not yet received a notice from the Marketplace about your inconsistency, please be patient as you will still be eligible for health coverage and you can continue on to enroll in coverage consistent with the eligibility you were provided by the Marketplace. The Marketplace will inform you of your final eligibility determination after the inconsistency is resolved.

I have sent the Marketplace more information, as requested in my eligibility determination notice, but have not yet heard anything back. How do I get a status update?

If you have sent in documents but have not yet received a notice telling you the result or status of your inconsistency, your information is likely still being processed. You do not need to take any action unless you hear from the Marketplace that more information is needed. When your paperwork is processed, you will receive a written notice. If you would like to follow up with the Marketplace for a status update or for more information:

- Please contact the Marketplace Call Center at 1-800-318-2596 (or TTY: 1-855-889-4325) and ask for a status update.
- The Call Center will ask for some information, such as your name, date of birth, or application ID. In the event they cannot provide you with a status update, the Call Center will contact an advanced casework team to look into the status of your case and the Marketplace will be in touch with you.

You will still be eligible for health coverage and you can continue on to enroll in coverage consistent with the eligibility you were provided by the Marketplace. This is true even if the deadline for submitting documents listed on your eligibility determination notice is very soon or has already passed. The Marketplace will inform you of your final eligibility determination after the inconsistency is resolved.