

Talking Points for Issuers Responding to Data Matching Issues

What are Data Matching Issues/Inconsistencies?

- When people apply for coverage through the Marketplaces, including through [HealthCare.gov](https://www.healthcare.gov), the applicable Marketplace verifies information that is provided by the consumer on his or her application.
- Most consumers' information is immediately verified by the Marketplace. But in some cases, the information the applicant provided doesn't match up right away with existing records or the applicant does not provide enough information to match with trusted data sources.
- These types of situations are called data matching issues or inconsistencies.
- Examples of data matching issues or inconsistencies, include:
 - Citizenship
 - Immigration status
 - Projected annual household income
 - Access to or enrollment in employer-sponsored minimum essential coverage or health coverage from another public entity
 - American Indian/Alaska Native status

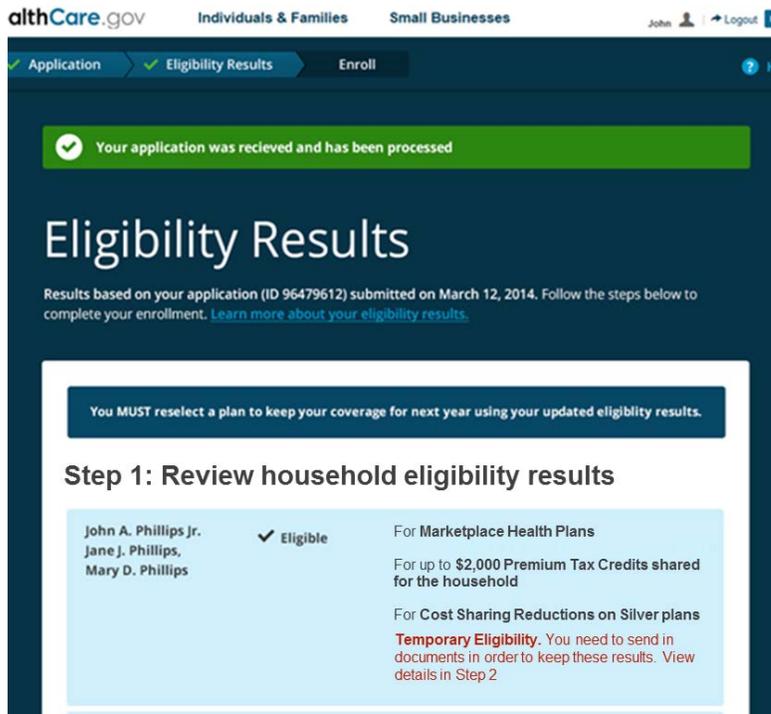
Preventing Data Matching Issues

- Consumers should include a Social Security Number (SSN) for ALL members of a household who have a SSN, not just the head of household. This also includes individuals who are not requesting coverage, but are part of the tax filing household. Failure to provide SSNs will automatically trigger annual income and citizenship data matching issues.
- When estimating income on the application, consumers must include income from ALL household members, not just the income of the person seeking coverage.
- If asked for identification or document numbers, all consumers should include those numbers on the application (e.g., alien ID number or I-94 number).

Double check to make sure that there are no typos on the application and that all information is accurate—including name, date of birth, SSN and document numbers.

How Does a Consumer Know if They Have an Income Data Matching Issue?

- Consumers are informed of a data matching issue in their initial Eligibility Notice. The notice will let them know that they need to verify information on their application. At this time the 90-day clock for provision of acceptable documentation is started. For citizenship and immigration data matching issues, consumers have a 95-day clock.
- Consumers can also view whether they have a data matching issue in their online Marketplace account under the Eligibility Results page.



- Consumers receive a series of “warning notices” and phone calls that update them on how much time they have left to resolve their data matching issue.
 - Consumers receive a 60-day notice, a 30-day notice, and a reminder phone call approximately 14 days before their deadline to resolve the issue.
 - Note: Consumers may also receive emails or texts from the Marketplace if a consumer selected email or text as their preferred form of communication.

Process and Impact on Consumers

- Consumers must resolve their data matching issues by providing additional information to the Marketplace within 90 days (95 days for citizenship or immigration status data matching issues). This is referred to as the inconsistency period.
- Consumers with data matching issues who are otherwise eligible are able to enroll in coverage through the Marketplace during their inconsistency period.
- If sufficient documentation is received during the inconsistency period to resolve a data matching issue, the Marketplace finalizes the eligibility determination using the applicant’s verified attested application information at the end of the 90/95 day period.
- It is critical that consumers submit the requested information as soon as possible. If they do not, consumers with citizenship or immigration status data matching issues may lose eligibility for coverage through the Marketplace and consumers with other data matching issues may undergo a loss or adjustment of their advance payments of the premium tax credit and/or cost-sharing reductions that could make their monthly health care expenses less affordable.

- The amount of advance payments of the premium tax credit paid on behalf of consumers throughout the year may have implications at tax time. The advance payment of the premium tax credit is reconciled at tax time, and based on the tax filer’s actual household income and other eligibility information for the year, they may need to pay more or less taxes at tax time.

What Documents Should a Consumer Submit to Resolve a Data Matching Issue?

1) To Prove Citizenship or US National Status

Documents to Prove Status as a U.S. Citizen or U.S. National

A copy of one document from the first list below to prove U.S. citizenship or nationality:

- U.S. passport
- Certificate of Naturalization (N-550/N-570)
- Certificate of Citizenship (N-560/N-561)
- State-issued Enhanced Driver's License (available in Michigan, New York, Vermont and Washington)
- Document from a Federally recognized Indian Tribe that includes the person's name, the name of the Federally recognized Indian Tribe that issued the document, and shows the person's membership, enrollment or affiliation with the Tribe. Documents you can provide include:
 - A Tribal enrollment card
 - A Certificate of Degree of Indian Blood
 - A Tribal census document
 - Documents on Tribal letterhead signed by a Tribal official

To prove U.S. citizenship or national status in the absence of the documents listed above, send copies of documents from the lists below, including one from List A and one from List B OR one from List A and two from List C:

List A. Select 1 document	List B. 1 document from List B (plus 1 from List A):
<ul style="list-style-type: none"> - 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 a 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 	<ul style="list-style-type: none"> - Driver's license issued by a State or Territory or Identification 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 card - Voter Registration Card <p>The documents above must have a photograph or other information such as name, age, sex, race, height, weight, eye color, or address</p> <ul style="list-style-type: none"> - For children under 19, a clinic, doctor, hospital, or school record, including preschool or day care records
	<p>List C. Or 2 documents from List C (plus 1 from List A):</p> <ul style="list-style-type: none"> - Two documents containing consistent information about an applicant's identity, such as employer IDs, high school and college diplomas, marriage certificates, divorce decrees, property deeds or

List A. Select 1 document	List B. 1 document from List B (plus 1 from List A):
<ul style="list-style-type: none"> - 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) 	titles

2) To Prove Immigration Status

Documents to Prove Immigration Status

Send us your most recent immigration document that shows your current immigration status. Send us a copy of one of the following documents:

- Permanent Resident Card, "Green Card" (I-551)
- Reentry Permit (I-327)
- Refugee Travel Document (I-571)
- Employment Authorization Card (I-766)
- Machine Readable Immigrant Visa (with temporary I-551 language)
- Temporary I-551 Stamp (on passport or I-94/I-94A)
- Arrival/Departure Record (I-94/I-94A)
- Arrival/Departure Record in foreign passport (I-94)
- Foreign Passport
- Certificate of Eligibility for Nonimmigrant Student Status (I-20)
- Certificate of Eligibility for Exchange Visitor Status (DS2019)
- Notice of Action (I-797)
- Document indicating membership in a federally recognized Indian tribe or American Indian born in Canada
- Certification from U.S. Department of Health and Human Services (HHS) Office of Refugee Resettlement (ORR)
- Office of Refugee Resettlement (ORR) eligibility letter (if under 18)
- Certification from U.S. HHS ORR
- Document indicating withholding of removal
- Administrative order staying removal issued by the Department of Homeland Security

3) To Prove Household Yearly Income for 2015

Documents to Prove Household Yearly Income

For each individual that earns income:

- 1040 Tax Return (Federal or State Versions) - Must contain first and last name, income amount, and tax year.
- W2s and/or 1099s (includes 1099 MISC, 1099G, 1099R, 1099SSA, 1099DIV, 1099S, 1099INT) - Must contain first and last name, income amount, year, and employer name (if applicable).
- Pay Stub - Must contain first and last name, income amount, and pay period or frequency of pay with date of payment. If a pay stub includes overtime, please indicate average overtime amount per paycheck.
- Self-Employment Documentation (includes 1040 Schedule C, most recent quarterly or year-to-date profit and loss statement, self-employment ledger) - Must contain first and last name, company name, and income amount. If submitting a self-employment ledger, include dates covered by the ledger, and the net income from profit/loss.
- Social Security Administration Statements (Social Security Benefits Letter) - Must contain first and last

Documents to Prove Household Yearly Income

- name, benefit amount, and frequency of pay.
- Unemployment Benefits (Unemployment Benefits Letter) - Must contain first and last name, source/agency, benefits amount, and duration (start and end date, if applicable).

The dates on these documents may be from last year. You can provide recent pay stubs if you don't expect your income to change. If you do expect your income to go up or down this year, you can provide other documents, like a document that states when contract work will end or what your new wages will be. If any of your income comes from freelance work, you can fill out a self-employment ledger that includes your expected income.

- If expected household income changed since application submission, a consumer should update his/her application on the My Account page on [HealthCare.gov](https://www.healthcare.gov), or by calling the Marketplace Call Center at 1-800-318-2596.
- For the purposes of consumers with seasonal income, QHP income is verified on an annual basis, not a monthly basis. Additionally, consumers are able to indicate that they do not know if their income will be the same as the prior year. If consumers' income varies from month to month, they may want to use tax return information or a W-2 as documentation rather than a pay stub.

4) To Prove Consumer Not Enrolled Or Eligible For Employer-Sponsored Coverage

Documents to Prove Employer Sponsored Coverage Status

- Employer Coverage Tool (available at <https://www.healthcare.gov/downloads/employer-coverage-tool.pdf>)
- Letter or other documentation from an employer or other documentation with this information:
 - The dates that the employee (or employee's family member) is eligible for employer coverage (if applicable), **and**
 - Attestation that the employer doesn't offer coverage to the employee (or the employee's family member), **or**
 - Attestation that the employer doesn't provide coverage that meets the minimum value standard, **or**
 - If the employer offers a plan to the employee that meets the minimum value standard, the cost of the employee's share of the premium for the lowest-cost self only plan that meets the minimum value standard (factoring in wellness incentives)
- Health insurance letter that contains confirmation of health coverage and expiration dates

5) To Verify Consumer Not Currently Receiving Minimum Essential Coverage (MEC) From Another Public Entity

Documents to Verify Not Currently Receiving MEC from Another Public Entity

- Letter from health insurer including coverage termination date
- Statement of health benefits that provides confirmation of health coverage and expiration dates
- Letter from Veterans Administration that provides confirmation of health coverage and expiration dates
- Letter from Peace Corps that provides confirmation of health coverage and expiration dates
- Letter or statement of Medicare or Medicaid benefits that proves confirmation of health coverage and expiration dates
- Letter or statement of Medicaid or Children's Health Insurance Program (CHIP) benefits that proves

Documents to Verify Not Currently Receiving MEC from Another Public Entity

confirmation of health coverage and expiration dates

- Consumers should note that some state Medicaid and/or CHIP programs are known by names specific to that state.

6) To Prove American Indian or Alaska Native Status

Documents to Verify American Indian / Alaska Native Status

- Tribal card
- Authentic document from a tribe declaring membership for an individual
- Document issued by the Bureau of Indian Affairs (BIA) recognizing an individual as American Indian/Alaska Native
- Certificate of Degree of Indian Blood
- Certificate of Indian status card
- I-872 American Indian Card
- Document issued by the Indian Health Service (IHS) indicating individual is/was eligible for IHS services as an American Indian/Alaska Native
- U.S. American Indian/Alaska Native tribal enrollment documentation
- Document that shows a relationship to an individual listed on an Indian Census Roll
- Document showing residency in an urban Indian center

Helping Consumers Submit Documentation

Follow these steps:

- [Log in to your Marketplace account.](#)
- Select your current application
- Use the menu on the left side of your screen to click on Application Details.
- On the next screen, you'll see a list of any data matching issues (called "inconsistencies" on the screen) in your application.
- Follow the steps for each inconsistency to upload the documents needed to fix the issue.

Or, mail a copy to the Marketplace. Don't mail original documents. Make sure to include the printed bar code page that came with your notice. If you don't have a bar code, include your printed name and the application ID from your notice when you send your documents.

Mail to:

Health Insurance Marketplace
Department of Health & Human Services
465 Industrial Blvd.
London, KY 40750

If you're sending your documents via US mail, write your name and application ID number on every document. Mail all household documents together at one time.

Helping Consumers Update Their Application

Follow these steps:

- [Log in to your Marketplace account.](#)
- Select your current application
- Select "Report a life change" from the menu on the left
- Select the "Report a life change" button
- Update your application with [changes to your income, household members, new health coverage offers, and other information.](#)
- You'll get new eligibility results. Make sure you finish all steps on the to-do list to complete your update or a new enrollment if you qualify to change plans.

Report changes by phone

- [Contact the Marketplace Call Center](#) at 1-800-318-2596.

Report changes in person

- [Find Local Help](#) through people and organizations in your community who can help you report changes, update your information, and answer your questions.

Resolving Data Matching Issues

- Consumers must submit certain documentation in order to be able to resolve their data matching issue. If the documentation is insufficient to verify the consumer's attested application information, it will not resolve the inconsistency.
- The Marketplace can resolve a data matching issue if the documents that a consumer submits confirm the information that the consumer included in his/her original application for coverage.
- Electronically submitted information becomes available for verification/review the day after it is uploaded. Information received in the mailroom is scanned and associated to an individual on a Marketplace application. It then becomes available for verification/review. If insufficient identifying information is included with the documentation, we may not be able to match it to an individual.
- The Marketplace will send a resolution notice that indicates nothing further is needed for a specific data matching issue or an insufficient documentation notice that indicates additional information is needed for a specific data matching issue. The resolution notices are issue specific. For example, a citizenship/immigration status inconsistency could be resolved, while an annual income inconsistency is still open after provision of insufficient documentation. Separate notices will be sent to convey the status on each of these issues.
- After action is taken on all data matching issue types, a final eligibility determination is made for the application. Then a new 834 is generated and sent to issuers with information about the enrollment.

What Do Consumers Do after They Have Received a Letter Adjusting Financial Assistance or a Termination for Citizenship/Immigration Status Data Matching Issues?

- After the Marketplace terminates an enrollment based on a citizenship/immigration status data matching issue, consumers may submit documentation of citizenship or immigration status. If the documentation is sufficient, the consumer will be eligible for an SEP to reenroll either prospectively or retroactively to the day after the termination date. The consumer must submit documentation and select a new plan within 60 days of the date of the notice informing the consumer that his or her documentation is sufficient to resolve his or her citizenship or immigration data matching issue.
- After APTC adjustment for an annual income data matching issue, an enrolled consumer may return to their application to make any necessary updates that will be processed on a prospective basis according to regular effective dates.

Information on Marketplace Appeals

In general, Eligibility Determination Notices that may be appealed contain information about how the consumer may appeal if he or she thinks an eligibility determination was wrong. A consumer may appeal the Eligibility Determination Notice received along with the notice telling him/her that the inconsistency has expired. This Eligibility Determination notice follows an adjustment or termination based on an unresolved data matching issue. For example, a consumer might contend that he or she provided the requested documentary proof needed to resolve the data matching issue or simply disagrees with the revised eligibility determination.

Consumers have 90 days to request an appeal with the Marketplace from the date of their eligibility determination notice.

Consumers should go to <https://www.healthcare.gov/can-i-appeal-a-marketplace-decision/> to find and complete the appeal request form for their state and mail it to:

Health Insurance Marketplace
465 Industrial Blvd.
London, KY 40750-0061.

If the consumer is able to do so, he/she should include a copy of the Eligibility Determination Notice with the appeal request form or mailed letter requesting an appeal. If consumers write their own letters, they should include their name, address, and the reason for requesting the appeal. If they are requesting an appeal for someone else (like a child), they should also include the name of the person for whom they are filing the appeal.

Resources

<https://www.healthcare.gov/help/how-do-i-resolve-an-inconsistency/>