

Preventing & Resolving Data Matching Issues

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 - You can also email your questions during and after the webinar to <u>beyondthebasics@cbpp.org</u>





Webinar Schedule

Preventing Autoand El Mercado Renewal Resolving de Seguros **Process** Medicos: **Data** on **Novedades** Matching HealthC **Immigrant** para 2025 Issues are.gov Households Eligibility (delivered in (Tues. and Income Part 1 (Tues. (Tues. Spanish) 10/1) (Tues. 9/3) 9/17) 10/22) (Thurs. 10/10) The Enrollment **Immigrant** What's Plan Design and Plan Trivia Premium Eligibility New Part 2 (Tues. Tax Credit for Comparison Challenge 9/24)2025 Tues. (Tues. (Tues. 9/10) (Tues. 10/15) 10/29) 10/8) **Trivia** Quiz!

Register and find recordings and materials from past webinars in the series at: https://www.healthreformbeyondthebasics.org/category/webinars/



Agenda

- Overview of Data Matching Issues (DMIs)
- Verification of Citizenship and Immigration Status
- Verification of Household Income
- Verification of Other Minimum Essential Coverage
- General Tips to Prevent and Resolve DMIs
- Identity Proofing for HealthCare.gov



Overview of Data Matching Issues

Eligibility Must Be Verified

People seeking enrollment in marketplace plans attest to information regarding relevant eligibility factors:

- Some factors are determined based on the applicant's attestation
 - Ex: State residency
- Certain eligibility factors must be verified through electronic data matching or through documents applicants provide
 - Ex: Citizenship, immigration status, or income



Limitations to Electronic Data Matching

A Data Matching Issue (DMI) occurs when attestations can't be verified through data matching

- **Data may not be available** through the federal data hub to verify attestations for some applicants, examples include:
 - Applicants who haven't filed taxes in past years
 - Individuals who became U.S. citizens after completing the naturalization process
 - Recent graduates new to the workforce
- Or data in the hub may not be "reasonably compatible" with an applicant's attestations in situations
 - Changes in employment
 - Changes in household composition



What Happens When There is a DMI

When a DMI occurs because information can't be verified through data matching:

- Eligibility determination notice explains that the applicant needs to provide more information to verify one or more attestations on the application
- Generally, applicants can temporarily enroll in a marketplace plan based on the attestations they provided, and in most cases they can receive the advance premium tax credit (APTC) and cost-sharing reductions (CSR) while they resolve the DMI
- Consumers have a 90- or 95-day period from the date of the eligibility determination to send in documents to resolve a DMI:
 - 95 days for DMIs related to citizenship and immigration status
 - 90 days for all other eligibility factors (with an automatic 60-day extension for incomerelated DMIs)



Notice of a Data Matching Issue: Eligibility Results

For sample notices, see https://www.cms.gov/market place/in-person-assisters/applications-forms-notices/notices

 On-screen notice of DMI when application is submitted

- Eligibility
 determination notice
 (EDN) will detail
 eligibility and next
 steps
- EDN shows which people have DMIs and the deadline to submit documents

Your eligibility is temporary: By [DATE] you must submit documents to confirm some information. See your eligibility notice for details and deadlines.

Health Insurance Marketplace

November 10, 2023

Application ID # ######## Application date: November 10, 2023	2024
Primary contact	Marketplace Eligibility Notice
[Name 1]	Remember to update your application during the year with any changes.
[Address]	
[City, State, ZIP]	

Results	
Premium tax credit available for this household: \$1,074/month	Estimated 2024 income used to determine eligibility for financial help: \$45,000/year

	[Name 1]	[Name 2]
Applied for coverage.	•	•
Eligible to enroll in a Marketplace plan until January 15, 2024.	•	•
Eligible to use the premium tax credit to pay for a Marketplace plan. Can use up to \$1,074/month for this household.	•	•
Eligible for extra savings (cost-sharing reductions). Will pay less for copayments, coinsurance, and deductibles when you're enrolled in a Silver plan.	•	•

ACTION: Next steps		
By December 15, 2023, choose a Marketplace plan for coverage to start January 1. See Eligibility Guide, page 4.	•	•
By December 8, 2023, submit documents to confirm household income. See Submitting Documents, attached.		•
By December 13, 2023, submit documents to confirm citizenship. See Submitting Documents, attached.	•	•



Multiple Notices Are Sent to Consumers With DMIs

For sample notices, see https://www.cms.gov/market-place/in-person-assisters/applications-forms-notices/notices

Requests for documents:

- 90-day warning notice
- 60-day warning notice and text
- 30-day warning notice and text __
- 15-day warning telephone call

Electronically or via paper, depending on the communications preferences in the account

- **X** If DMI is not resolved: Expiration notice sent
- When documents are submitted:
- ✓ If sufficient, DMI is resolved and marketplace sends a notice
- X If insufficient, marketplace sends Insufficient Document Notice and warning phone call



Verification of Citizenship and Immigration Status

How the Marketplace Verifies Citizenship

- "Naturalized" citizen is used to describe individuals born outside of the U.S. who become U.S. citizens after completing certain requirements and the "naturalization" process.
 "Derived" citizen refers to U.S.
- **"Derived" citizen** refers to U.S. citizens who obtain citizenship through U.S. citizen parents.

- Applicant provides Social Security number (SSN)
- Applicant attests to being a U.S. citizen



 HealthCare.gov verifies citizenship through a data match with Social Security Administration (SSA) records



- If SSA can't substantiate citizenship, the applicant is asked if they are a naturalized or derived citizen and if so, is asked to provide:
 - Information related to their Naturalization Certificate or Certificate of Citizenship
 - HealthCare.gov then tries to verify citizenship through data match with Systematic Alien Verification for Entitlements (SAVE) program

No	
	Is Jane a naturalized or derived citizen? Learn more about naturalized or derived citizenship.
	✓ Yes
	○ No
	Does Jane have one of these documents? Optional. Learn more about these documents.
	Naturalization Certificate
	Certificate of Citizenship

Is Jane a U.S. citizen or U.S. national?

<u>Learn more about being a U.S. citizen or U.S. national.</u>



Documents Used to Prove U.S. Citizenship

Submit any one of the following documents to verify citizenship

U.S. Passport



Certificate of Citizenship



Certificate of Naturalization



State-issued enhanced driver's license (EDL)

 Currently available in Michigan, Minnesota, New York, Vermont, and Washington



Document from a federally recognized Indian tribe that includes the individual's name, the name of the tribe, and shows membership, enrollment, or affiliation with the tribe

- A tribal enrollment card
- A Certificate of Degree of Indian Blood
- A tribal census document
- Documents on tribal letterhead signed by a tribal leader

NOTE: If a person does not have one of these documents, they will need two documents to prove citizenship.



If None of the Previous Documents Are Available

Submit ONE document from EACH column (total of TWO documents)

One of the following documents:

- 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
- 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 documents:

Document must have a photograph or other information, like 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 card
- Voter Registration Card
- A clinic, doctor, hospital, or school record, including preschool or day care records (for children under 19 years old)
- 2 documents containing consistent information that proves your identity, like employer IDs, high school and college diplomas, marriage certificates, divorce decrees, property deeds, or titles



How the Marketplace Verifies Immigration Status

Does Jane have eligible immigration status?Not sure? See a list of eligible statuses.

Yes, Jane has eligible immigration status.

I would like to continue the application without answering this question. I understand that if I don't answer it, **Jane won't be eligible for full Medicaid or Marketplace coverage** and will be considered only for coverage of emergency services, including labor and delivery services.

Select the document type that corresponds with Jane's most current documentation and status.

Optional

- Permanent Resident Card (Green Card) or Reentry Permit I-551, Temporary I-551 stamp, I-327
- Machine Readable Immigrant Visa with temporary I-551 language
- Employment Authorization Card
- Arrival/Departure Record
- Refugee Travel Document
- Nonimmigrant Student or Exchange Visitor Status I-20, DS2019
- Notice of Action
- Other document or status
- Unexpired foreign passport

- Applicants attest to having an "eligible immigration status"
- Applicants select a document type and submits applicable document numbers
- Marketplace verify status through SAVE tries to



Document Types & Needed Document Numbers

Document Type:	What to List for Document ID:
Permanent Resident Card (I-551)	✓ "USCIS" registration number✓ Card number
Temporary I-551 stamp (on passport or I-94, I-94A)	✓ "USCIS" registration number
Machine Readable Immigrant Visa (with temporary I-551 language)	✓ USCIS registration number✓ Passport number✓ Country of issuance
Employment Authorization Card (I-766)	 ✓ "USCIS" registration number ✓ Card number ✓ Expiration date ✓ Category code
Arrival/Departure Record (I-94/I-94A)	✓ I-94 number
Arrival/Departure Record in foreign passport (I-94)	 ✓ I-94 number ✓ Passport number ✓ Expiration date ✓ Country of issuance
Foreign passport	✓ Passport number✓ Expiration date✓ Country of issuance

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Document Types & Needed Document Numbers

Document Type:	What to List for Document ID:
Reentry Permit (I-327)	✓ "USCIS" registration number
Refugee Travel Document (I-571)	✓ "USCIS" registration number
Certificate of Eligibility for Nonimmigrant Student Status (I-20)	✓ Student and Exchange Visitor Information System (SEVIS) ID
Certificate of Eligibility for Exchange Visitor Status (DS2019)	✓ SEVIS ID
Notice of Action (I-797)	 ✓ "USCIS" registration number or an I-94 number ✓ Description of the type or name of the document
Other documents	 ✓ "USCIS" registration number or an I-94 number ✓ Description of the type or name of the document





Examples of Document Types

Reference Guide: <u>Documents Used</u> to <u>Verify Immigration Status</u>

 Walks through examples of the different immigration document types that can be used in HealthCare.gov and notes where different document numbers are located



Permanent Resident Card ("Green card", I-551)

USCIS Registration # (may be referred to as USCIS #)



Card Number



If DMI Related to Status Is Not Resolved

- If an applicant is unable to have their citizenship or immigration status verified within the 95-day DMI window, their coverage will be terminated
- If they submit documents after coverage has been terminated and resolve the DMI, they are eligible for a special enrollment period (SEP) to reenroll in coverage
 - SEP will begin the day their DMI is resolved: Will have 60 days from that date to reenroll in coverage
- Can choose to have coverage begin:
 - Retroactively to the date of termination (will need to pay any retroactive premiums)
 - Prospectively, after a plan is selected (in states that use HealthCare.gov, coverage is effective the first of the month following plan selection, regardless of date plan is selected)





- Laura lives with her mother, Julieta and her daughter, Martina and they are all applying for health coverage on HealthCare.gov:
 - Laura completed the naturalization process to become a U.S. citizen
 - Julieta has been in the U.S. for eight months and is applying for asylum, she recently obtained authorization to work.
 - Martina was born in North Carolina and has U.S. citizenship





On the Application:

- All family members provide SSNs on the application
- Laura and Martina attest to being U.S. citizens
 - Laura is asked if she is a naturalized or derived citizen and she answers "yes"
 - Laura does not have her Certificate of Naturalization, so she skips the questions asking for document numbers
 - No additional information is asked for Martina after her citizenship attestation
- Julieta attests to having an eligible immigration status
 - She provides her USCIS number only





Data Matching Results

Applicant:	Data Match: SSA	Data Match: SAVE
Laura	No match	No match
Martina	Match	N/A
Julieta	No Match	No Match







- Laura and Julieta are instructed to provide documents to prove their status within 95 days
- All family members are approved to buy a Marketplace plan and are awarded advance premium tax credits (APTC)

Applicant:	Eligible for:	Next steps:
Laura	Marketplace plan with APTC	 Pick a plan and pay first month's premium Provide documentation to prove citizenship
Julieta	Marketplace plan with APTC	 Pick a plan and pay first month's premium Provide documentation to prove immigration status
Martina	Marketplace plan with APTC	Pick a plan and pay first month's premium
		Beyond

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Laura and Julieta get warning notices and emails explaining their coverage will end if sufficient documents are not submitted

Laura sends in a copy of her U.S. passport



Laura clears the DMI, is notified and remains enrolled

Julieta is confused about what to send in, so she sends in a letter from DHS



X

Julieta later gets a datamatching expiration notice explaining that her coverage will end because she did not provide documentation to prove her immigration status









How Julieta Can Regain Coverage

- Julieta can still regain coverage if she sends in necessary documents
- After resolving the DMI, she can re-enroll in a Marketplace plan prospectively or retroactively with a special enrollment period

May 1	May 3	May 20	June 1
Julieta is no longer covered	Julieta uploads her work authorization card to her HealthCare.gov account	Julieta's DMI is resolved	
Mentily Bourney of Max Gargerinin Services Servi	TEST V Company Care V ST V S	 She is eligible for a special enrollment period: — Can have coverage and APTC going forward (SEP available for 60 days to enroll in coverage) — OR can have coverage and APTC retroactive to May 1 	Beyon

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Verification of Household Income

Applicants Attest to Their Projected Income for 2025

- Applicants must project the source and amount of income for everyone in the household, even if only some family members are applying for coverage
- Attestations on the application are usually matched with IRS tax return data in the federal hub
 - The most recent tax data during open enrollment for 2025 will be from the 2023 tax year
- If there is no income data available from the IRS, the marketplace must accept a person's income attestation. The marketplace will not require additional income verification for these individuals.



Reasons Data Matching May Not Verify Income

- Change in a job or hours of employment
- Receipt of unemployment that is significantly different than the wages it replaces
- Change in household (divorce, separation, marriage)
- Retirement (losing wages and gaining retirement or Social Security benefits)
- Irregular freelance or self-employment income
- One-time income, such as an IRA withdrawal or a death benefit (could be in previous tax year or future coverage year)

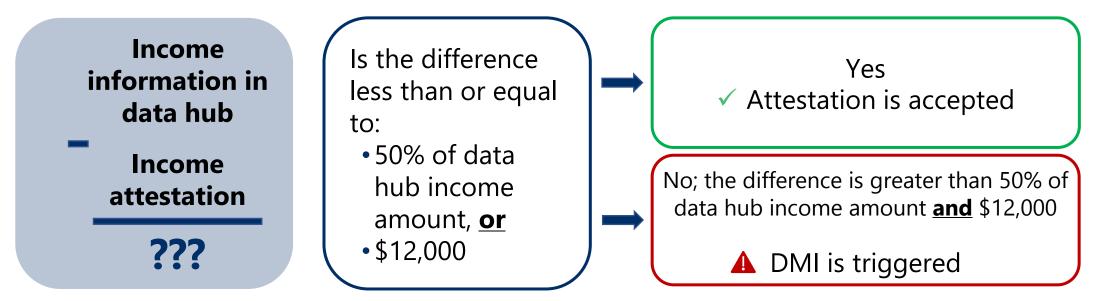




Verification of Income: General Rules

✓ Attestation is accepted if projected income is higher than the income in the data hub

If attestation is *lower* than the income in the data hub, apply the **50% or \$12,000 rule**:



State based marketplaces can use these thresholds or set their own (but it cannot be <10%)



Documents That Can Be Used to Verify Income

If income listed on application includes	Acceptable forms of proof include
Wages (gross)	 Most recent 1040 tax return* or state tax return Most recent W-2 A recent pay stub A letter from your employer A copy of a check paid to you as wages Signed time sheets
Self-employment income	 Federal 1040 Schedule C, F, or SE Federal 1065 Schedule K1 with Schedule E Most recent 1099-MISC Bookkeeping records or a self-prepared ledger that shows income and deductible expenses Bank statements that show deposits and expenses from your business Most recent quarterly or year-to-date profit and loss statement
Social Security	 Federal 1040 tax return or state tax return Form SSA-1099 Social Security benefits statement Any correspondence from the Social Security Administration that shows your benefit amount, including a Cost of Living Adjustment letter A bank statement that shows the monthly Social Security amount deposited into your bank account
Unemployment compensation	 Most recent 1040 tax return or state tax return Most recent 1099-G showing unemployment compensation An Unemployment Insurance Benefit Wage Statement that shows the weekly and total benefit you will receive
Retirement income	 Federal 1040 tax return or state tax return Most recent 1099 for Retirement/Pension source Retirement/Pension documents
Withdrawal of taxable savings	 Bank or investment fund statement A statement of your intent to withdraw funds from an IRA or other retirement fund. Include the amount you expect to withdraw and when. Do not include non-taxable withdrawals, such as those from a bank savings account.
Rental income	 Federal 1040 tax return or state tax return A lease agreement that shows income from rental property. Most recent 1099-MISC

^{*}The federal tax return should include Schedule 1. For more information on documents to send to resolve a DMI, see www.healthcare.gov/help/how-do-i-resolve-an-inconsistency

Marketplace Guide for Income DMIs



Guide to Confirming Your Income Information This official government booklet explains:

- How income affects your eligibility for financial help through the Marketplace
- How the Marketplace confirms your financial information
- How to submit documents requested by the Marketplace, including the best documents to send

Available at: <u>marketplace.cms.gov/outreach-and-education/household-income-data-matching-issues.pdf</u>

Includes:

- A list of example documentation to help resolve an income DMI
- A worksheet to help collect the documents needed to verify household income

Cover page for income documents

You're not required to submit this worksheet unless you're also submitting a self-employment chart (see page 15). However, the Marketplace may be able to verify your income and process your application faster if you include it when you submit your document copies.

Use another sheet of paper to add rows. See instructions for completing this worksheet on page 16.

My household information

Household contact
Other household members

Eligibility no

State of app

Phone

Today's date

My household

Name of household member

Worksheet with a self-employment chart

You can include this when you send documents to verify each income source from self-employment in the year you need coverage. This income should also be counted in "My household's expected income" if you submit the "Cover page for household income documents" shown on page 14.

Use another sheet of paper to add rows. To learn more, visit HealthCare.gov/self-employed/income. See instructions for completing this worksheet on page 16.

My household information

Household contact	
Other household members	
Eligibility notice "Application ID"	
State of application	
Phone	
Today's date	

My household's expected income during the year I want coverage

1	2	3	4	5	6
Name of household member	Type of income	Document you'll send to verify this income	Gross income amount in document	Multiply by how often this person gets the income	Total





What if Documents Aren't Available?

- When proof of income isn't available, a signed statement is acceptable.
- This statement should include household income information and an explanation for the income projection.
- Template available for HealthCare.gov states: https://www.healthcare.gov/downloads/annual-income-letter-explanation.pdf

Primary Household Contact:	Nancy Wright[DOB]	
Other Household Members:	Terrence Wright [DOB and income]	
Application ID:	#	
State of Application:	Texas	
Phone Number:	xxx-xxx-xxxx	
Today's Date:	12/12/2024	
Projected Annual Income for 2025 as Stated on Application:	\$30,000	
Explanation for income projection: This year I worked a full-ti	me job and made about \$55,000	
(~\$26/hour). I will start college courses in Jan. 2025 and will a result. I anticipate my annual income for 2025 will drop to		

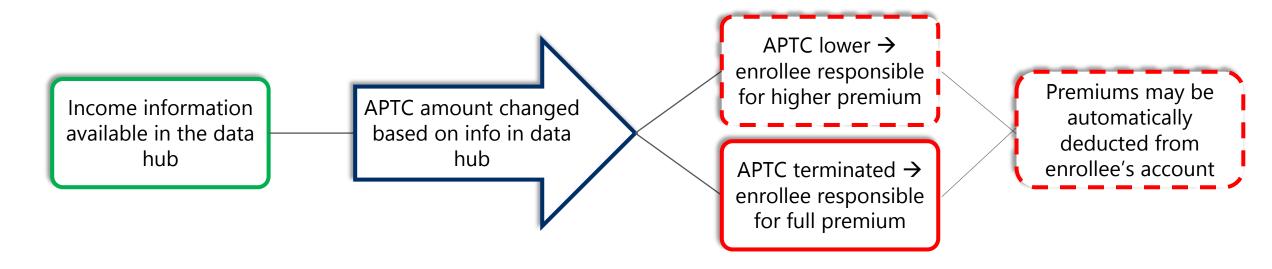


If Income DMIs Are Not Resolved

For more info on grace period rules, see *Health Reform:*Beyond the Basics Key Facts
on Premium Payments and
Grace Periods

Marketplace enrollees will receive an <u>automatic</u> 60-day extension if they are unable to resolve an DMI related to income within the first 90 days.

• If an income DMI remains unresolved at the end of the 60-day extension:



Tip: A consumer can still request additional time beyond the 90 + 60 days by calling the Marketplace Call Center (800-318-2596) and demonstrating that they've made a good faith effort to obtain the required documents during the 90 + 60 days.



Example: Household Income Goes Down, DMI IS Triggered





- Neil and Medha are married. Medha is pregnant and expects to deliver in February 2025. On their 2023 tax return (the basis for income verification), their gross income was \$74,000: \$35,000 from Neil's full-time job and \$39,000 from Medha's full-time job.
- Medha plan to stop working at the end of 2024 and does not plan to return after she delivers.
- When applying for 2025 coverage:
 - They attest to projected annual gross income of \$35,000 in 2025
 \$35,000 from Neil's job
 - Subtract their projected 2025 income from their 2023 income.
 \$74,000 (2023 MAGI) \$35,000 (projected 2025 MAGI) = \$39,000



The difference is **more** than \$12,000, **and more** than 50% of their 2023 income (\$37,000). This **does** trigger a DMI. Neil and Medha need to take action to resolve the DMI and keep APTC and CSR.



Example: Household Income Goes Down, DMI IS Triggered



Neil and Medha can select a plan and enroll when they receive their eligibility determination notice. The notice will explain that they have 90 days to submit:

- A **statement** explaining why their income will go down in 2025, without documentation:
 - Medha is pregnant and will no longer be working after the end of 2024. Our only source of income will be Neil's job, and he expects to make about the same in 2025 as he did in 2023 and 2024 (\$35,000).

They should also return to the marketplace within 60 days after Medha delivers to update their family size. The infant will be eligible for Medicaid, and Neil and Medha will qualify for a higher PTC because their household size has changed.





Enrollees Can Restore APTC

- A person can resolve the DMI and restore APTC by:
 - Submitting documentation
 - Correcting the projection in the application to align with the data in the hub, if the consumer realizes their income projection wasn't correct
 - Filing an appeal
 - o **If the appeal is successful**, the enrollee can get retroactive APTC
 - o **If a person doesn't appeal or the appeal is unsuccessful**, PTC for the gap months may still be available on the tax return, as long as the person remained enrolled in a marketplace plan and paid the premium for those months



Example: Connor and Lily Fail to Resolve Their DMI





- Connor and Lily attest to annual projected income of \$40,000 (~196% FPL) for 2025, but their income on their 2023 tax return was \$85,000 (~416% FPL). They enroll in a marketplace plan with APTC and CSR (based on their \$40,000 income), and an income DMI is generated.
- They are in the middle of a local move when the notices arrive in the mail, and they don't respond.
- Their APTCs and CSRs are eliminated after 150 days (90 days plus the automatic 60-day extension).
- Now Connor and Lily have three options:
 - 1) They can submit documents now. If they remain covered and verify their income, they can restore their previous level of APTC and their CSRs.
 - 2) They can stay in their plan and pay higher premiums. They would receive any additional PTC they are eligible for when they file their taxes in 2026 (but not CSRs). If they fail to pay the premium and their coverage lapses, they may need to wait for the next open enrollment period to reenroll.
 - **3) They can appeal**. If they lost coverage, they can submit a marketplace appeal to re-enroll in coverage. They just have to submit the information that was requested to resolve the DMI as part of the appeal. If they are successful, they can get their full APTC and CSR retroactively or prospectively.



Verification of Other Minimum Essential Coverage

Minimum Essential Coverage (MEC) DMIs

For more information on documents to send to resolve an MEC DMI, see www.healthcare.gov/help/how-do-i-resolve-an-inconsistency

Electronic match with Medicaid agencies, Medicare, or Office of Personnel Management may show that the applicant is enrolled in or eligible for other MEC



In that case they will have to prove they are *not* eligible and/or enrolled in other MEC



The consumer can enroll in coverage with APTC based on their attestation but needs to submit documents to prove that they are not enrolled in other coverage



If not resolved in 90 days, the consumer loses APTC

Documentation to verify *lack* of other Minimum Essential Coverage

- Letter from an insurer with a termination date
- Medicaid/CHIP termination notice



Periodic Data Matching (PDM) Notices

- During the coverage year, the marketplace will periodically check enrollment in Medicaid, CHIP, and Medicare
- If a person enrolled with APTC is also found to be enrolled in public coverage, they will receive a periodic data matching (PDM) notice and have 30 days to respond
- The Medicaid/CHIP PDM notice asks the enrollee to:
 - If enrolled in Medicaid/CHIP, end their marketplace coverage, or
 - If not enrolled in Medicaid/CHIP, update their marketplace application
- If the consumer doesn't act, APTC will end and the consumer will be billed for the full premium
- A Medicare PDM notice will either:
 - Terminate APTC but leave the marketplace plan in effect at full cost, or
 - Terminate both the plan and APTC if a person elected to do so on their application
- If the plan is terminated, other members of the person's family get a SEP to re-enroll in coverage

 Beyond

Identity Proofing for HealthCare.gov

Importance of ID Proofing

- ID proofing is <u>NOT</u> an eligibility requirement, but a person can't have full access to an online Marketplace account until ID proofing is complete
- This means a person can't complete many tasks online like:
 - Submitting an application
 - Selecting a plan, or
 - Reporting changes
 - Canceling enrollment





HealthCare.gov Process for ID Proofing

Online ID proofing:

- The HealthCare.gov ID proofing service generates customized questions based on available credit history (and other electronic data) for the person completing the application
- Not everyone will have enough information to generate questions

Telephonic ID proofing:

- Some people will be instructed to call Experian to complete ID proofing
- They will be provided a unique reference code → Must call Experian to proceed with ID proofing if asked to complete this step

Providing documents for ID proofing:

- Consumers who can't complete the ID process online or over the phone can submit copies of certain documents to prove their identity
- Important! They can continue with their application via phone while documents are being processed



Consumers Prove Identity by Mailing or Uploading

One of these:	Alternatively, two of these:
 Driver's license issued by state or territory School identification card Voter identification card U.S. military draft card or draft record Identification card issued by the federal, state, or local government U.S. passport or U.S. passport 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 that contains a photograph (Form I-766) Military dependent's identification card Native American tribal document U.S. Coast Guard Merchant Mariner card Foreign passport or identification card issued by a foreign embassy or consulate that contains a photograph 	 Birth certificate Social Security card Marriage certificate Divorce decree Employer identification card High school or college diploma (including high school equivalency diplomas) Property deed or title

Beyond

People Unable to Complete Identity Proofing

For more info, see *Health Reform: Beyond the Basics*Troubleshooting Failed
Identity Verification on
HealthCare.gov

- HealthCare.gov gives people two attempts to complete the ID proofing process, if both attempts are unsuccessful, you will see this screen
- Upload documents immediately, if they're available
- Complete the family & household and income sections of the application
- Then call the marketplace call center to have them finish and submit the application
- After the call center pushes the application through, log back into the account and complete the enrollment process

Your identity wasn't verified.

You need to submit documents to prove your identity. You won't be able to submit your application for health coverage until your identity is verified.

Once you upload your documents, they'll be reviewed. The results of your identity verification will be emailed to you at ict7381@helpenroll.org.

UPLOAD DOCUMENTS

If you aren't able to upload your documents now, return to My Profile,



Q&A

Resources

Beyond the Basics Resources:

- Reference Guide to Immigration Documents
- <u>Troubleshooting Failed Identity Verification on HealthCare.gov</u>
- Helping Families That Include Immigrants Apply for Health Coverage

HealthCare.gov Resources:

- Tips on Sending Documents to Resolve a DMI
- How to Resolve a DMI: Acceptable Document List
- Consumer Guide for Annual Household Income DMIs (PDF)
- Annual Income Letter of Explanation Template (PDF)
- Sample Notices (Data Matching Notices)





Upcoming Webinars

El Mercado Autode Seguros Renewal Preventing Medicos: **Process** and **Novedades** on Resolving para 2025 HealthC Data **Immigrant** (delivered in are.gov Eligibility Households Matching Spanish) and Income Part 1 Issues (Tues. (Tues. (Thurs. (Tues. 9/3) (Tues. 9/17) 10/1) 10/22) 10/10) Enrollment The **Immigrant** Plan Design What's Trivia Premium Eligibility and Plan **New for** Tax Credit Part 2 Comparison Challenge 2025 (Tues. 9/24) (Tues. Tues. (Tues. (Tues. 9/10) 10/15) 10/29)

Register and find recordings and materials from past webinars in the series at: https://www.healthreformbeyondthebasics.org/category/webinars/

10/8)



Trivia Quiz!

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