



Health Reform: **Beyond the Basics**

healthreformbeyondthebasics.org

Part IV:

Preventing & Resolving Data-Matching Issues

Process in HealthCare.gov

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Presented by the Center on Budget and Policy Priorities

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Part V: Plan Design

- Thursday, October 1 | 2 pm ET (11 am PT)

Part VI: Plan Selection Strategies

- Tuesday, October 6 | 2 pm ET (11 am PT)

Part VII: Part VII: Auto-Renewal Process

- Thursday, October 8 | 2 pm ET (11 am PT)

Part VIII: Special Topics on Providing Enrollment Assistance to Immigrants and Their Families

- Thursday, October 15 | 2 pm ET (11 am PT)

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Overview of Data Matching Issues

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



When Attestations Can't Be Verified Through Data Matching → A Data Matching Issue (DMI) Occurs:

- 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 information in the hub may not be “reasonably compatible” with an applicant's attestations in situations
 - Changes in employment
 - Changes in household composition

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 DMI's related to citizenship and immigration status
 - 90 days for all other eligibility factors

Notice of a Data Matching Issue: Eligibility Results

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- On-screen notice of DMI when application is submitted

Your eligibility is temporary: By January 11, you must submit documents to confirm some information. See your eligibility notice for details and deadlines.

- Eligibility determination notice (EDN) will detail eligibility and next steps

Eligibility Results

Review the table below for the results of your application.

Family member(s)	Results
May Leon	<ul style="list-style-type: none">Eligible to purchase health coverage through the Marketplace, but more information is neededEligible for a tax credit (\$355.00 each month, which is \$4,260.00 for the year, for your tax household), but we need more information from you. This calculation is based on the yearly household income of \$75,000.00. This is the amount that you provided on your Marketplace application or the amount that came from the most recent income data sources available.

SAMPLE NOTICE

Next steps

Important: You must send documents. This notice includes deadlines and details.

- Choose a plan and pay your first month's premium.
- By January 11, 2021, send documents to confirm:
 - your household income
- By January 11, 2021, send documents to confirm:
 - Keeley Forrester's TRICARE coverage status
- You'll get information about when your coverage will begin and how to access services from the Alabama Department of Public Health.



Requests for documents:

- Warning Notices (written notices sent 90, 60 and 30 days before the DMI period ends)
- Emails and text message alerts
- 15-day warning telephone calls

Requests for additional documents:

- Insufficient Document Notice (written notice when documents are submitted but found insufficient)
- Telephone call

✗ **If DMI is not resolved:** Expiration notice sent

✓ **If DMI is resolved:** Notice sent

Verification of Citizenship and Immigration Status

- 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

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

[Learn more about being a U.S. citizen or U.S. national.](#)

☒ Yes

☐ 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

“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. citizens who obtain citizenship through U.S. citizen parents.



Verification of Citizenship

- Failure to provide SSN or other document numbers, or wrong number provided
- Name, date of birth and SSN provided on the application do not match what is in SSA or SAVE records:
 - Typos
 - Name changes
- Data matching limitations:
 - SSA can't verify citizenship for many citizens who were born outside of the U.S.
 - Some consumers may not have certificate numbers readily available
- Wrong attestation



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, 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.

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

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

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
I-766
- ☐ Arrival/Departure Record
I-94, I-94A
- ☐ Refugee Travel Document
I-571
- ☐ Nonimmigrant Student or Exchange Visitor Status
I-20, DS2019
- ☐ Notice of Action
I-797
- ☐ Other document or status
- ☐ Unexpired foreign passport



Verification of Immigration Status

- Failure to provide document numbers, or wrong number provided
- Name, date of birth and document numbers provided on the application do not match SAVE records:
 - Typos
 - Name changes
- Data matching limitations:
 - SAVE may not be able to verify immigration status instantly for some applicants

Document Types and Needed Document Numbers

Document Type:	What to List for Document ID:
Permanent Resident Card (I-551)	<ul style="list-style-type: none">✓ “Alien” registration number✓ Card number
Temporary I-551 stamp (on passport or I-94, I-94A)	<ul style="list-style-type: none">✓ “Alien” registration number
Machine Readable Immigrant Visa (with temporary I-551 language)	<ul style="list-style-type: none">✓ “Alien” registration number✓ Passport number✓ Country of issuance
Employment Authorization Card (I-766)	<ul style="list-style-type: none">✓ “Alien” registration number✓ Card number✓ Expiration date✓ Category code
Arrival/Departure Record (I-94/I-94A)	<ul style="list-style-type: none">✓ I-94 number
Arrival/Departure Record in foreign passport (I-94)	<ul style="list-style-type: none">✓ I-94 number✓ Passport number✓ Expiration date✓ Country of issuance
Foreign passport	<ul style="list-style-type: none">✓ Passport number✓ Expiration date✓ Country of issuance

Document Type:	What to List for Document ID:
Reentry Permit (I-327)	✓ “Alien” registration number
Refugee Travel Document (I-571)	✓ “Alien” 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)	✓ “Alien” registration number or an I-94 number
Other documents	<ul style="list-style-type: none">✓ “Alien” registration number or an I-94 number✓ Description of the type or name of the document

Reference Guide: Documents Used to Verify Immigration Status


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

→ Download at:
www.healthreformbeyondthebasics.org/reference-guide-to-immigration-documents

REFERENCE GUIDE: DOCUMENTS USED TO VERIFY IMMIGRATION STATUS PAGE 2 OF 10

EXAMPLES OF DOCUMENT TYPES

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



A#
(may be referred to as USCIS #)

Card number

Notes

- USCIS # = "Alien" number (A#)
- If A# does not have 9 digits, add 1 or 2 zeros before the A# in Healthcare.gov
- Card number can be found on the back or front of the card and will contain 13 characters:
 - » Begins with 3 letters
 - » Followed by 10 numbers
- Older cards may NOT have card numbers
 - » Choose "Other documents" and enter only A#; or
 - » Enter "AAA000000000" as the card number

Other card variations:



PERMANENT RESIDENT CARD

NAME CRITTENDEN, LEE W.

INS A# 022-345-679

Birthdate 10/01/49 Category P26 Sex M

Country of Birth Canada

CARD EXPIRES 11/01/34

Resident Since 11/01/97

RESIDENT ALIEN

U.S. Department of Justice-Immigration and Naturalization Service

CHOW, LAI PING

NAME

DOB 07 10 50

ALIEN NUMBER A028256001

CARD EXPIRES 07 17 01

SAMPLE CARD

2 | Reference Guide, November 2017

Health Reform: Beyond the Basics

- If an applicant is unable to prove their citizenship or immigration status 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 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




- Roberto and Monica are married and have two children, Miguel and Elena
- Monica was born in Germany and is a derived U.S. citizen
- Roberto has been a lawful permanent resident (LPR) for 7 years
- Miguel and Elena were born in the U.S.






On the Application:

- All family members provide SSNs on the application
- Monica, Miguel and Elena attest to being U.S. citizens
 - Monica is asked if she is a naturalized or derived citizen and she answers “yes”
 - Monica does not have a Certificate of Citizenship, so she skips the questions asking for document numbers
- Roberto attests to having an eligible immigration status
 - He provides his “A” number but not his card number



Applicant:		Data Match: SSA	Data Match: SAVE
Monica		No match	No match
Roberto		N/A	No match
Miguel & Elena		Match	N/A

- Monica and Roberto 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:
Monica		• Marketplace plan with APTC	• Pick a plan and pay first month's premium • Provide documentation to prove citizenship
Roberto		• Marketplace plan with APTC	• Pick a plan and pay first month's premium • Provide documentation to prove immigration status
Miguel & Elena		• Marketplace plan with APTC	• Pick a plan and pay first month's premium

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

- Monica and Roberto submitted documents, but they were not sufficient:
 - Monica sent in her Consular Report of Birth Abroad, but she also needs to send in a document that includes a photo or other identifying information
 - Roberto sent in his foreign passport, which in some cases may be used to prove lawful permanent residence, but in his case the passport did not contain the necessary information

- Roberto then sends in a copy of his LPR document (“Green Card”)
- Monica does not have a document from the list of options provided on her eligibility notice so she does not send in additional documents



- She later gets a **data-matching expiration notice** explaining that her coverage will end because she did not provide documentation to prove her citizenship

If you're a citizen, you only need 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

If you are a U.S. citizen or national but you don't have any of the documents listed above, you need to send in two documents: one from each of the lists below:

Send in one document from this list A:

- 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)

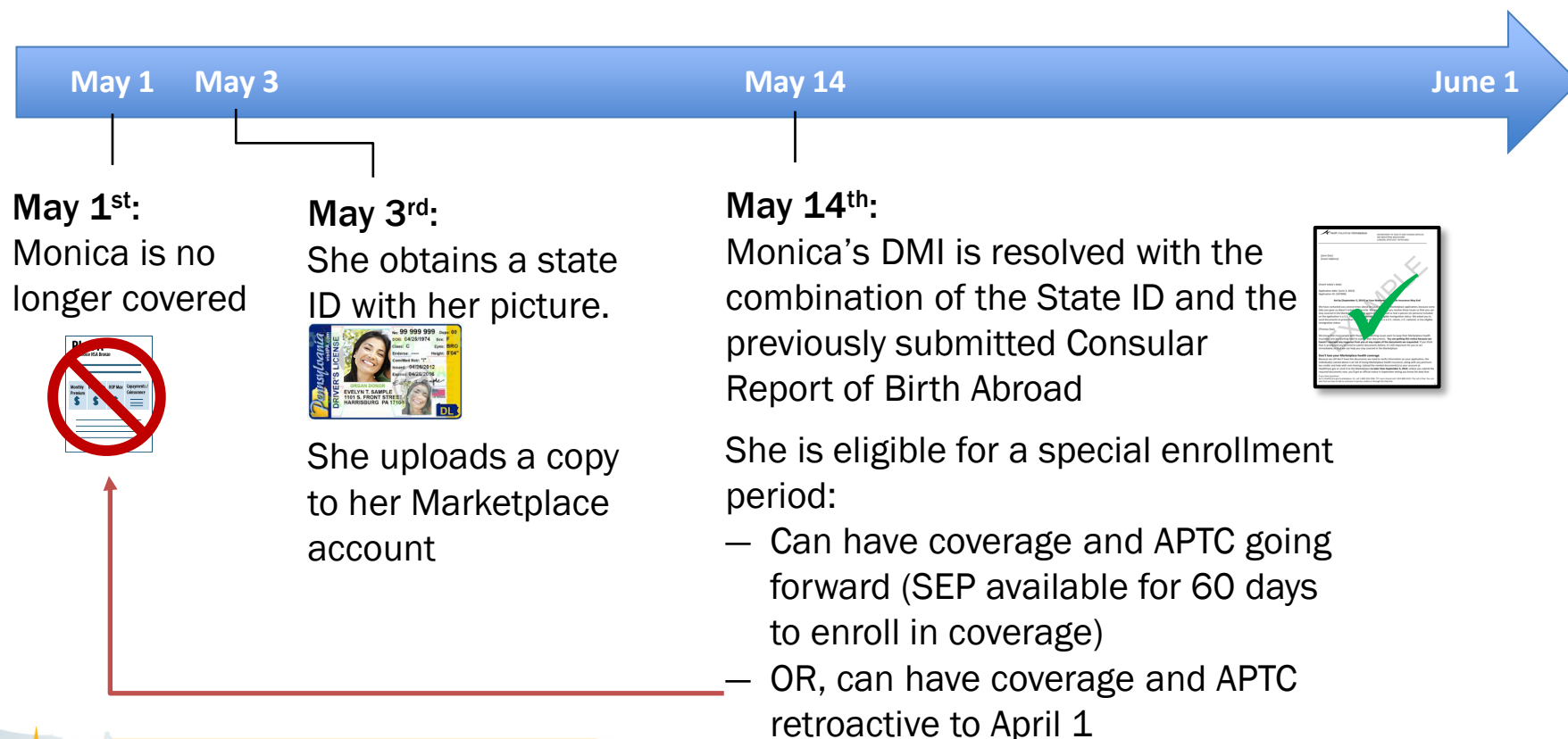
And one document from this list B:

- 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
- For children under 19, a clinic, doctor, hospital, or school record, including preschool or day care records

A consumer can also provide the following in combination with one document from list A:

- 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 titles

- Monica 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.





Verification of Household Income

Applicants Attest to Their Projected Income for 2021

- Applicants must project the source and amount of income for everyone in the household, even if only some family members are applying for coverage
 - Exception: Only include dependent income if they have a tax-filing requirement. See [this resource](#) to help consumers make that projection.
- Attestations on the application are matched with data in the federal hub

You can enter amounts now, then update Jane's income later in the year if Jane's situation changes.

i If Jane has more than one source of income, you'll be able to enter more later.

Select a type of income Jane currently gets this month.

[Learn more about types of income to report.](#)

Job (like salary, wages, commissions, or tips) ▾

Self-employment (like own business, consulting, or freelance work) ▲

Farming or fishing

Unemployment

Social Security benefits (retirement and disability)

Retirement (like IRA and 401(k) withdrawals)

Pension benefits

Investment (including interest and dividend income)

Capital gains

Rental or royalty

Alimony received

Scholarship

More income sources

Canceled debt

Cash support

Court awards

Gambling, prizes, or awards

Jury duty pay

Other income ▼

- Change in a job or hours of employment*
- 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)
- No tax data available because didn't file taxes in prior years



* Income DMIs may be more common this year because 2019 tax information may be significantly different from 2021 projections.

✓ *Attestation is Accepted*

- Income attestation is usually accepted if:
 - The attestation is *higher than* the income in the data hub, regardless of income difference, or
 - The attestation is lower but not low enough to trigger the threshold
 - **Threshold:** 25% and \$6,000 *lower than* the data available in the hub

! *DMI is Triggered*

- Applicant is awarded subsidies based on income attestation but must provide documents to verify household income because:
 - There is no income information in the data hub, or
 - Attestation is 25% and \$6,000 *lower than* the data available in the hub, or
 - Attestation is above the poverty line but data sources suggest that income is below the poverty line (difference must be 25% and \$6,000 *higher than* income in hub)

Income DMI will be triggered if:

- An applicant attests to projected income between 100-400% FPL (and is otherwise eligible for APTC),
 - But the data hub indicates income below 100% FPL, and
 - Attested projected income is more than a reasonable threshold higher than income in the data hub
 - 25% more than income in the data hub *and at least* a difference of \$6,000
- In practice, this only impacts consumers in states that have not expanded Medicaid
 - Will not apply to non-citizens who are lawfully present and ineligible for Medicaid due to immigration status since they are eligible for APTC below 100% FPL

- Walt lives in Birmingham, AL (a state that hasn't expanded Medicaid)
- Since 2019, Walt has worked part-time (20 hours/week) as a bookkeeper earning \$11/hour
 - His annual earnings: \$11,440 (90% FPL)
 - This is just under the poverty line making him ineligible for APTC and ineligible for Medicaid
- He gets a raise to \$13/hour starting January 1, 2021. He will also work more hours (25 hours/week).
 - He projects earning \$16,900 in 2021 (132% FPL)



- His projected income exceeds his prior income by more than 25%, but there is *less than* a \$6,000 difference → No income DMI is triggered

- Instead, since 2018, he has worked only 15 hours/week earning \$11/hour
 - His annual earnings: **\$8,580** (67% FPL)
 - This is under the poverty line, making him ineligible for APTC and ineligible for Medicaid
- He gets a raise to \$13/hour starting January 1, 2021. He will also work more hours (25 hours/week).
 - He projects earning \$16,900 in 2021 (132% FPL)



- His projected income exceeds his prior income by more than 25% and \$6,000 → Income DMI is triggered



Documents That Can Be Used to Verify Income

If income listed on application includes...	Acceptable forms of proof include...
Wages (gross)	<ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • Federal 1040 Schedule C/F • 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
Social Security	<ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • Federal 1040 tax return or state tax return • Most recent 1099 for Retirement/Pension source • Retirement/Pension documents
Withdrawal of taxable savings	<ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • 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*

- Guide from the Marketplace to help consumers understand and resolve income DMIs
- Includes list of example documentation to help resolve an income DMI
- Includes worksheet to help collect the documents needed to verify household income

Consumer Guide for Annual Household Income Data Matching Issues: marketplace.cms.gov/outreach-and-education/household-income-data-matching-issues.pdf

Your household's expected income

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	How often does this person get this amount?	Annual Total
EXAMPLE: John Doe	Job income	Paystub	\$2,000	Every two weeks (26 times a year)	\$52,000 (\$2,000*26)
EXAMPLE: John Doe	Rental income	Rental agreement	\$1,000	Every month (12 times a year)	\$24,000 (\$1,000*12)
				\$	\$
				\$	\$
Expected Total Household Income					\$
My household's expected income in 2017 on my Marketplace application					\$

Self-employment chart

1	2	3	4	5	6	7
Name of household member	Self-employment business name/type of work	Gross income each month (average)	Expenses each month (average)	Monthly average net income (average)	# of months each year you get this income	Annual total
EXAMPLE: John Doe	Real Estate			\$1,000	12	\$12,000
				\$	\$	
				\$	\$	
Expected total household income from self-employment						\$

Your household's income from self-employment

You can upload or mail a "Self-employment chart" to verify each type of income that a household member gets from self-employment. You'll also need to upload or mail documents to verify each income source from self-employment in 2017. This income should also be included in "Your household's expected income" above. To learn more, visit HealthCare.gov/self-employed/income/.

Walt's projected income triggers a DMI. What happens now?

- Walt can still enroll in coverage with APTC and CSR, but he must submit documents to prove his attested income within 90 days
- To prove his new income, Walt can submit:
 - A letter from his employer with the increase in wages and hours
 - A paystub or check paid to him as wages showing the pay raise and increased hours once he gets the raise
- In January, Walt submits a paystub with his higher hourly wage and increased hours with a letter explaining his new hours and expected annual projection
 - His DMI is resolved February 1 and his APTC continues without interruption



- In some cases, such as when income is expected to change and proof isn't available, a signed statement may be accepted
- This statement should include household information and explanation for income projection

Primary Household Contact:	Kala Mehta
Other Household Members:	None
Application ID:	#
State of Application:	Virginia
Phone Number:	xxx-xxx-xxxx
Today's Date:	12/15/2020
Projected Annual Income for 2021 as Stated on Application:	\$21,000

Explanation for income projection:

I will be starting school in the fall and will be quitting my job in August. My current job pays \$15/hour and I work 40 hours a week. By the time I quit at the end of August, I should make around \$21,000. I expect to have no income from September through the end of the year.

Example: Household Income Goes Down

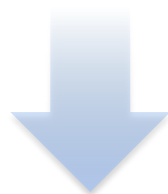
- Jaylen is self-employed and Mia works part-time at a bookstore
- On the family's 2019 tax return:
 - Jaylen reported self-employment income of \$50,000
 - Mia earned \$25,000 at her job
 - Total: \$75,000
- Jaylen lost his best customer in 2020 and he expects his income will be only \$25,000 in 2021 (after allowable deductions). Because of the loss of income, they expect to withdraw \$5,000 from an IRA.
- When applying for 2021 coverage:
 - The family attests to projected annual income of \$55,000 for 2021 (\$25,000 from Jaylen, \$25,000 from Mia, and \$5,000 from the retirement account)
 - The attestation is more than 25% **and** \$6,000 below what their 2019 tax return shows. It triggers a DMI.



- The family attests to projected annual income of \$55,000 for 2021 → a DMI is triggered



- The Marketplace provides APTC based on the attestation and gives the family 90 days to submit documentation of their income



- If they fail to submit documentation, the Marketplace will use their 2019 tax return as the basis for determining their APTC.



Example: Household Income Goes Down

Documents family can submit:

- Ledger showing projected business income and expenses
- Mia's most recent pay stub
- A statement explaining that:
 - Jaylen lost a client from 2019 and does not expect to replace the lost income
 - They'll take money out of an IRA
 - If Mia's pay stub is for 2020, an explanation that her income will be the same in 2021



	\$28,000	Jaylen's projected income (ledger plus explanation of lost client)
Total projected income = \$55,000	- \$3,000	Jaylen's projected expenses (ledger)
	+\$25,000	Mia's projected income (pay stubs)
	+ \$5,000	IRA withdrawal (explanation)

Tip: A consumer can request additional time beyond the 90 days by calling the Marketplace Call Center and demonstrating that they've made a good faith effort to obtain the required documents during the 90 days.

- **If income information is available in the data hub**, the APTC will be changed based on the information in the hub
 - If available information shows income under the poverty line or over 400 percent of the poverty line, subsidies are terminated
- **If income information is not available in the data hub**, APTC is terminated
- If subsidies are reduced or terminated, the enrollee remains enrolled and will be responsible for a higher share or the entire premium
 - New premium amount may be withdrawn from consumer's bank account if they have authorized automatic payments
 - If enrollee does not pay the full premium, grace period begins



- A person can resolve the DMI and restore APTC by:
 - Submitting documentation
 - Correcting the projection in the application, if the consumer realizes their projection was mistaken
 - Filing an appeal
 - **If the appeal is successful**, the enrollee can get retroactive APTC
 - **If a person doesn't appeal or the appeal is unsuccessful**, a 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



- John has never filed taxes
 - He attests to annual projected income of \$22,000 for 2021
 - No tax information is available to verify his projection
 - John moved shortly after he enrolled and never got the reminder notice to submit documents to resolve his inconsistency
 - His APTC and CSR were terminated after 90 days
- **John can submit documents now.** If he verifies his income, he can restore his APTC/CSR. If he lost coverage, he can re-enroll via an SEP and opt for retroactive or prospective coverage.
 - **John can appeal.** If his appeal is successful, he can get APTC/CSR retroactively or prospectively.
 - **John can stay in his plan and pay the full premium.** If John stays in his plan and pays the premium, he can claim the PTC on his tax return for all months in which he was eligible. If he fails to pay the premium and his coverage lapses, he may need to wait for the next open enrollment period.

Verification of Other Minimum Essential Coverage

- Electronic match with Medicaid agencies, Medicare, Office of Personnel Management, or databases of employer-sponsored coverage may show that 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 MEC



- Can enroll in coverage with APTC based on attestation but will need to submit documentation that they are not enrolled in other coverage
 - For example: a letter from insurer showing coverage termination date, notice from Medicaid or CHIP agency, or other proof from the other source of coverage



- If not resolved in 90 days, the consumer loses eligibility for APTC

- Throughout the coverage year, the marketplace will periodically check enrollment in Medicaid, CHIP, and Medicare.
- If a person is found to be enrolled in public coverage AND coverage with APTC, they will receive a periodic data matching (PDM) notice and will 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 fails to act, APTC will be terminated, but the plan will stay in effect *at full cost*.
- A **Medicare PDM notice** will either:
 - Terminate APTC but leave the marketplace coverage in effect *at full cost*, or
 - Terminate both the QHP and APTC if a person elected to do so on their application
 - ! If the QHP is terminated, other members of the individual's family get a SEP to re-enroll in coverage.



Identity Proofing for HealthCare.gov

ID proofing is **NOT** 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



The screenshot shows a web interface for reporting a life change. On the left is a sidebar menu with the following items: 'My plans & programs', 'Eligibility & appeals', 'Applications details', 'Report a life change' (highlighted with a blue background), 'Communication preferences', 'Authorized users', and 'Exemptions'. The main content area is titled 'Report a life change' and contains the text: 'Do you want to report a change in circumstances that may qualify you or your dependents for a Special Enrollment Period?'. Below this is a section titled 'What kinds of changes should be reported?' with the text: 'Changes in your household or income can affect the programs you qualify for to lower costs on health coverage. As soon as you have a change, come back here to report it.' This is followed by a section titled 'Here are some examples of the changes you should report:' which lists six items in two columns: 'Change in citizenship or immigration status', 'Add or remove members of household', 'Change status as American Indian/Alaska Native, or member of federally recognized tribe', 'Marriage, birth or adoption', and 'Gain or loss of health coverage'. At the bottom of the main content area is a green button labeled 'REPORT A LIFE CHANGE'.

Online ID proofing:

- Experian tries to provide 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 or paper while documents are being processed



One of these:	Alternatively, two of these:
<ul style="list-style-type: none">• 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	<ul style="list-style-type: none">• 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

- Use HealthCare.gov's [See Plans and Prices](#) tool to browse plans online
- Complete the application using a paper form or over the telephone
- Select a plan through the call center
- Request paper notices
- Report changes and complete renewals through the call center

HealthCare.gov Individuals & Families Small Businesses Log In ESPAÑOL

2016 health insurance plans & prices

People covered: Primary (Age 35) [EDIT](#)

34 plans available SORT BY: Premium PLAN TYPE: Health plans

FILTERS

Monthly premium

- less than \$200 (1)
- less than \$300 (18)
- less than \$400 (30)
- less than \$500 (33)
- less than \$600 (34)

Plan category

- Bronze plans (12)
- Silver plans (11)
- Gold plans (10)
- Platinum plans (1)

Plan type

- PPO (10)
- HMO (21)
- POS (3)

Medical management programs

- Asthma (28)
- Heart Disease (34)
- Depression (25)
- Diabetes (34)
- High Blood Pressure and High Cholesterol (28)
- Low Back Pain (28)
- Pain Management (28)
- Pregnancy (34)
- Weight Loss Programs (25)

Insurance companies

Innovation Health Insurance Company · Innovation Health Leap Bronze Basic
Bronze PPO | Plan ID: 12028VA0120028

Estimated monthly premium \$198	Deductible \$6,850 Estimated Individual Total	Out-of-pocket maximum \$6,850 Estimated Individual Total
Estimated total yearly costs CALCULATE	Your doctors and prescription drugs EDIT	Copayments / Coinsurance Emergency room care: Generic drugs: Primary doctor: Specialist doctor:

[LEARN MORE ABOUT THIS PLAN](#) [COMPARE](#)

Innovation Health Insurance Company · Innovation Health Leap Bronze HSA
Bronze PPO | Plan ID: 12028VA0120019

Estimated monthly premium \$203	Deductible \$6,450 Estimated Individual Total	Out-of-pocket maximum \$6,450 Estimated Individual Total
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General Tips to Prevent and Resolve DMIs

- Provide complete information:
 - Answer as many questions in the application as possible
 - Double check that name, birth date, SSN and immigrant/citizenship document numbers have been provided accurately
 - Double check attestations made and update as needed
 - Provide SSNs for everyone in the household who has one, even if some members are not applying for coverage
 - If the name the applicant is using in the application does not match what is on his SSN card or immigrant/citizenship document, then use option to provide that information

Does the name below match the name on the I-551?

Optional.

Jane Smith

☐ Yes

☒ No

[Clear your selection](#)

Update Jane's information so that it matches their card

First name

Middle name

Optional

Last name

Suffix

Optional

- Uploading documents to the marketplace is faster than mail
 - It must be a .pdf, .jpeg, .jpg, .gif, .xml, .png, .tiff, or .bmp
 - It can't be bigger than 10 MB
 - The file name can't include a colon, semicolon, asterisk, or any other special character. Here are a few examples of special characters that can't be in the file name: / \ : * ? " < > |
 - If the upload menu does not include the document type the consumer is trying to upload, the consumers can select "other"
- If mailing documents, provide information needed to match to application
 - Include the page in the notice that includes a bar code if available
 - If bar code is not available, write the name, state and application ID number on the each of the documents being submitted
 - Mail all documents together at one time
 - Keep record of date and what was mailed, including a certified mail receipt if possible

- Reference Guide: [Documents Used to Verify Immigration Status](#)
-

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 \(PDF\)](#)
- Sample Notices: marketplace.cms.gov/applications-and-forms/notices.html

Part V: Plan Design

- Thursday, October 1 | 2 pm ET (11 am PT)

Part VI: Plan Selection Strategies

- Tuesday, October 6 | 2 pm ET (11 am PT)

Part VII: Part VII: Auto-Renewal Process

- Thursday, October 8 | 2 pm ET (11 am PT)

Part VIII: Special Topics on Providing Enrollment Assistance to Immigrants and Their Families

- Thursday, October 15 | 2 pm ET (11 am PT)

Register for upcoming webinars at

www.healthreformbeyondthebasics.org/events

- Shelby Gonzales, gonzales@cbpp.org,
→ Twitter: @shelbytg74
- Tara Straw, tstraw@cbpp.org
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For more information and resources, please visit:

www.healthreformbeyondthebasics.org

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