



Immigrant Eligibility for Marketplace and Medicaid and CHIP Coverage



June 2022

The information provided in this document is intended only to be a general informal summary of technical legal standards. It is not intended to take the place of the statutes, regulations, or formal policy guidance upon which it is based. This document summarizes current policy and operations as of the date it was presented. We encourage readers to refer to the applicable statutes, regulations, and other interpretive materials for complete and current information. This communication was printed, published, or produced and disseminated at U.S. taxpayer expense. The contents of this document do not have the force and effect of law and are not meant to bind the public in any way, unless specifically incorporated into a contract. This document is intended only to provide clarity to the public regarding existing requirements under the law.

Agenda

- Eligibility for Marketplace and Medicaid and CHIP Coverage
- Citizenship/Immigration DMIs
- Application Functionality for Consumers with DMIs
- Complex Case Scenarios



A Note About This Presentation



- This presentation addresses specific requirements for Navigators and certified application counselors (CACs) in Federally-facilitated Marketplaces (FFMs) (collectively referred to as “assisters”).
- This presentation represents a summary of complex federal statutes relating to immigration status. As a summary, it does not include all relevant detail. This publication is not a legal document and does not grant rights or impose obligations. It is not intended to take the place of either the written law or regulations.

Brainstorming Questions

1. How often do you assist consumers with multiple immigration statuses?
2. What is your comfort level with this topic?
 - A. Inexperienced
 - B. Somewhat experienced
 - C. Very experienced



Immigrant Eligibility Requirements for Marketplace vs. Medicaid: Overview

- Eligibility for Marketplace coverage through a qualified health plan (QHP) = Lawfully present.
- Eligibility for Medicaid = Immigrants who are “qualified non-citizens” and have met the five-year waiting period (if it applies to them) are generally eligible for coverage through Medicaid or the Children’s Health Insurance Program (CHIP) if they meet their state’s income and residency rules.
 - Generally, fewer immigration statuses are considered Medicaid- or CHIP-eligible than eligible for Marketplace coverage.
 - In addition, as of 2021, 35 states, D.C., American Samoa, the Commonwealth of the Northern Mariana Islands (CNMI), and the U.S. Virgin Islands (USVI) also cover “lawfully present” children and/or pregnant women, including those within their first five years of having certain legal status, under Section 214 of the Children’s Health Insurance Program Reauthorization Act (CHIPRA).
 - Includes a new provision for states to provide Medicaid and CHIP coverage to children and pregnant women who are lawfully residing in the U.S.



Immigrant Eligibility Requirements for Marketplace vs. Medicaid: Overview (Cont.)

- As of December 27, 2020, states and D.C. are required to provide Medicaid coverage for individuals who are considered Compact of Free Association (COFA) migrants, including those within their first five years of having legal status, if they are otherwise eligible. Territories may choose to cover COFA migrants at their option.



- This policy change does not apply to coverage through separate CHIP programs, except for states that have elected to cover children and/or pregnant women in CHIP under the CHIPRA 214 option. States that have elected the CHIPRA 214 option to cover lawfully residing pregnant women and children in CHIP may continue to cover eligible COFA migrants under that provision.
- Applying for or receiving Medicaid or CHIP benefits or getting savings for health insurance costs in the Marketplace doesn't make someone a "public charge." This means it won't affect their chances of becoming a Lawful Permanent Resident (LPR) or U.S. citizen.
 - **Exception:** Individuals who are institutionalized for long-term care in an institution at government expense (such as nursing facility residents or residents of mental health institutions) and are receiving Medicaid coverage for their institutional services are considered as part of the public charge determination.

Marketplace Eligibility

- Lawfully present immigrants who meet other basic Marketplace eligibility requirements may be eligible for coverage through the Marketplace. Immigration status information will only be used to determine consumers' eligibility and will not be used for immigration enforcement purposes.

Marketplace-eligible Lawfully Present Immigrant Status

- | | |
|---|--|
| <ul style="list-style-type: none">Lawful Permanent Resident (LPR/Green Card holder)AsyleeRefugeeCuban/Haitian entrantParoled into the U.S.Conditional entrant granted before 1980Battered spouse, child, and parentVictim of trafficking and their spouse, child, sibling, or parentNon-citizen granted withholding of deportation or withholding of removal under the immigration laws or under the Convention Against Torture (CAT) | <ul style="list-style-type: none">Member of a federally recognized Indian tribe or American Indian born in CanadaIndividual with non-immigrant status, including worker visas (e.g., H1, H-2A, H-2B), student visas, U-visa, T-visa, and other visas and citizens of the Federated States of Micronesia, the Marshall Islands, and the Republic of Palau who are lawfully residing in the U.S.Temporary Protected Status (TPS)Deferred Enforced Departure (DED)Deferred Action (except DACA)Lawfully temporary resident |
|---|--|

This chart represents a summary of complex federal statutes relating to immigration status. As a summary, it does not include all relevant detail. This publication is not a legal document and does not grant rights or impose obligations. It is not intended to take the place of either the written law or regulations.

- For a complete list of eligible statuses, visit [HealthCare.gov/immigrants/immigration-status](https://www.healthcare.gov/immigrants/immigration-status).

Marketplace Financial Assistance

Eligibility

- Lawfully present immigrants may apply for advance payments of the premium tax credit (APTC) and cost-sharing reductions (CSRs) to help lower their costs based on their household size, income, and other eligibility criteria.
- Most consumers must have an annual household income between 100 percent and 400 percent of the federal poverty level (FPL) to be eligible for financial assistance. However, lawfully present immigrants who are not eligible for Medicaid because of immigration status may be eligible for financial assistance even if their income is below 100 percent of the FPL.
- Note: The American Rescue Plan Act of 2021 (ARP) makes the premium tax credit (PTC) available to consumers with household income above 400 percent of the FPL and caps how much of a family's household income the family will pay towards the premiums for a benchmark plan at 8.5 percent for Plan Years 2021 and 2022.



Mixed Immigration Status Households

- Some consumers live in a mixed immigration status household, which is a household made up of people holding different citizenship or immigration statuses.
- In this situation, each household member may be eligible for different health coverage options based on their citizenship or immigration status.
- The Marketplace collects citizenship and immigration information only for applicants and/or their household members who are applying for coverage to determine consumers' eligibility for health coverage options.



Applying for Coverage on Behalf of Family Members

- Consumers may apply for coverage through the Marketplace, Medicaid, and/or CHIP on behalf of their family members, even if they are not eligible for coverage themselves and regardless of their own eligibility statuses. For example, undocumented parents of U.S. citizens can apply for coverage as the application filer on behalf of their children.
- In this case, the application filer is attesting that the family member who is applying for coverage is a U.S. citizen or has an eligible immigration status.
- Federal and state Marketplaces and state Medicaid and CHIP agencies will not ask applicants to provide information about the citizenship or immigration status of any family or household members who aren't applying for coverage. States also will not deny benefits to an applicant because a family or household member who isn't applying hasn't disclosed their citizenship or immigration status.



Applying for Coverage on Behalf of Family Members (Cont.)

- If application filers need help with the identity verification process, they can call the Marketplace Call Center at 1-800-318-2596 (TTY: 1-855-889-4325). Identity verification is also referred to as “identity (ID) proofing,” and it protects consumers’ personal information by ensuring that each applicant is who they claim to be and preventing fraudulent creation of a Marketplace account and applying for health coverage in another consumer’s name without their knowledge.
 - ID proofing is an important part of the Marketplace application, and unresolved ID proofing issues can prevent consumers from completing an online application.



Knowledge Check #1

True or false: Non-citizens can be eligible for APTC and CSRs through the Marketplace.



Knowledge Check #1 Answer

True. Lawfully present immigrants may apply for APTC and CSRs to help lower their costs based on their household size, income, and other eligibility criteria. Lawfully present immigrants who are not eligible for Medicaid because of immigration status may be eligible for financial assistance even if their income is below 100 percent of the FPL.



Medicaid and CHIP Eligibility

- Immigrants who are “qualified non-citizens” are generally eligible for coverage through Medicaid and CHIP if they meet their state’s income and residency rules.
- Many qualified non-citizens have a five-year waiting period to get Medicaid and CHIP coverage (also called the “five-year bar”). This five-year waiting period begins when consumers receive their qualifying immigration status, not when they first enter the U.S.
- Many immigrants, such as refugees, asylees, COFA migrants, veterans, and LPRs, who used to be refugees or asylees don’t have to wait five years for Medicaid.
 - The same rules do not apply in CHIP except when the state exercises a CHIPRA 214 option.



Medicaid and CHIP Eligibility (Cont.)

Medicaid- and CHIP-eligible Qualified Non-citizen Immigrant Statuses

- | | |
|--|---|
| <ul style="list-style-type: none">• LPR/Green Card holder• Asylees• Refugees• Cuban/Haitian entrants• Paroled into the U.S. for at least one year• Conditional entrant granted before 1980• Battered non-citizens, spouses, children, or parents | <ul style="list-style-type: none">• Victims of trafficking and their spouse, child, sibling, or parent or individuals with a pending application for a victim of trafficking visa• Granted withholding of deportation• Member of a federally recognized Indian tribe or American Indian born in Canada• Citizens of the Federated States of Micronesia, the Marshall Islands, and the Republic of Palau (also known as COFA migrants)* |
|--|---|

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*Effective December 27, 2020, COFA migrants are now considered qualified non-citizens for the purposes of Medicaid eligibility.

- For a complete list of eligible statuses, visit [HealthCare.gov/immigrants/lawfully-present-immigrants](https://www.healthcare.gov/immigrants/lawfully-present-immigrants).

COFA Migrants are Eligible for Medicaid Coverage

- Effective December 27, 2020, migrants under COFA are generally eligible for Medicaid, if they meet all of the eligibility criteria in their state.
- COFA migrants are citizens of the Marshall Islands, Federated States of Micronesia, and the Republic of Palau who are lawfully residing in one of the U.S. states. Territories may choose to cover COFA migrants at their option.
- Under the new statute, COFA migrants are now considered qualified non-citizens for the purposes of Medicaid eligibility and do not have to wait for five years after receiving their status before qualifying for Medicaid coverage, if otherwise eligible.
- This policy change does not apply to coverage through separate CHIP programs. States may cover COFA migrants in separate CHIP programs that have elected to cover children and/or pregnant women in CHIP under the CHIPRA 214 option.



Other Medicaid and CHIP Options



- Lawfully residing children and pregnant women: States have the option to cover lawfully residing children and/or pregnant women without the five-year waiting period in Medicaid or CHIP. A child or pregnant woman is "lawfully residing" if they're "lawfully present" as described under 8 U.S.C. § 1641.



- As of 2021, 35 states plus D.C., American Samoa, CNMI, and USVI have chosen to provide Medicaid coverage to lawfully residing children and/or pregnant women without a five-year waiting period. Twenty-eight of these states also cover lawfully residing children or pregnant women in CHIP. For a list of states that provide this option, visit [Medicaid.gov/medicaid/enrollment-strategies/medicaid-and-chip-coverage-lawfully-residing-children-pregnant-women](https://www.Medicaid.gov/medicaid/enrollment-strategies/medicaid-and-chip-coverage-lawfully-residing-children-pregnant-women).



- Emergency Medicaid: Medicaid provides payment for treatment of an emergency medical condition if consumers otherwise meet all Medicaid eligibility criteria in the state (such as income and state residency), regardless of immigration status.

Other Coverage Options

Consumers who aren't lawfully present may be eligible for:

- Emergency Medicaid that can pay for care and services necessary to treat an emergency medical condition.
- Prenatal coverage through the CHIP “unborn child option” in states that have elected this option. The “unborn child” option allows states to consider an unborn child to be a targeted low-income child and therefore eligible for CHIP coverage, if other applicable eligibility criteria are met.
- Private coverage offered outside the Marketplaces at full price.
- Free or low-cost health care options, including community health centers (CHCs) and migrant health centers (MHCs). Both CHCs and MHCs offer comprehensive primary care regardless of ability to pay or immigration status. MHCs, however, only serve migrant and seasonal farm workers and their families.



Verifying Immigration Status

- Consumers who attest to having an eligible immigration status should provide the immigration document type and document numbers they have available.

Acceptable Documents to Verify Immigration Status

- | | |
|---|---|
| <ul style="list-style-type: none">Permanent Resident card (Green Card/I-551)Reentry permit (I-327)Refugee travel document (I-571)Employment authorization document (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 passportCertificate of eligibility for nonimmigrant student status (I-20)Notice of action (I-797) | <ul style="list-style-type: none">Certificate of eligibility for exchange visitor status (DS-2019)Document indicating membership in a federally recognized Indian tribe or American Indian born in CanadaCertification from the U.S. Department of Health and Human Services (HHS) Office of Refugee Resettlement (ORR)Document indicating withholding of removalORR eligibility letter (if under 18)Resident of American Samoa cardAlien number (also called alien registration number or USCIS number) or I-94 number |
|---|---|

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- For a full list, visit [HealthCare.gov/immigrants/documentation](https://www.healthcare.gov/immigrants/documentation).

Verifying Immigration Status (Cont.)

- The Marketplace verifies citizenship and immigration status through the Social Security Administration (SSA) and/or the Department of Homeland Security (DHS); this information will only be used to determine consumers' eligibility and will not be used for immigration enforcement purposes. For more information, refer to the Immigration, Customs, and Enforcement (ICE) memorandum at [ICE.gov/doclib/ero-outreach/pdf/ice-aca-memo.pdf](https://ice.dhs.gov/doclib/ero-outreach/pdf/ice-aca-memo.pdf) (Spanish: [ICE.gov/espanol/factsheets/aca-memoSP](https://ice.dhs.gov/espanol/factsheets/aca-memoSP)).
- Consumers who do not attest to being U.S. citizens or having an eligible immigration status cannot get health coverage through the Marketplace but may still complete a Marketplace application to learn if they may be eligible to receive emergency Medicaid or CHIP for an unborn child in certain states, if they meet other eligibility criteria for Medicaid or CHIP in their state.



Citizenship/Immigration Data Matching Issues



- Data matching issues (DMIs), or “inconsistencies,” occur when information a consumer enters in their Marketplace application doesn’t match the data that the Marketplace has from trusted data sources, like SSA records or Internal Revenue Service (IRS) databases.
- The most common types of DMIs are related to income, citizenship, and immigration information.
- Consumers with citizenship/immigration DMIs have 95 days from the date of the eligibility notice to resolve the issue.
- If consumers don’t resolve their citizenship or immigration DMIs, they may lose eligibility for coverage through the Marketplace.

Tips for Preventing Citizenship/Immigration DMIs

- Complete the whole application. While some fields of the application are labeled as optional, we highly recommend that consumers fill out as many of the fields as possible.
- Encourage applicants to select an appropriate immigration document type and provide all document numbers and ID numbers, if applicable [e.g., Alien Number or “A#” (sometimes also called the USCIS number) or I-94 number].
- If a consumer’s name used for the Marketplace application differs from how it appears on their immigration document or other documents (such as a Social Security card), advise the applicants to provide their name as written on those documents.
 - When providing document types, a question will appear asking the consumer if the name they provided on the application matches what appears on their immigration documents. If the name matches exactly, the consumer should select **Yes**, and if not, they should select **No** and enter their name as it appears on their documents, as shown in the screenshot.

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

Kelly Johnson

Yes

No

[Clear your selection](#)

Update Kelly's information so that it matches their card.

First name

Kellyann

Middle name

Optional

Last name

Johnson

Suffix

Optional

Tips for Preventing Citizenship/Immigration DMIs (Cont.)

- Non-applicants are strongly encouraged to provide a Social Security Number (SSN) if they have one, but it is not required. Providing SSNs helps make sure eligibility is correct, helps the application process go smoother and faster, and makes it less likely a consumer will need to submit more information later.
- **Note:** People who apply for health coverage need to provide an SSN, if they have one.
- Double check that the information on the application is complete and that there are no errors or typos. Consumers should confirm that name, birth date, and SSN are correct and complete for all applicants.
- State Medicaid agencies are required to assist applicants who do not provide an SSN with assistance in obtaining their SSN and may not deny or delay services to an individual who meets all other eligibility requirements, pending issuance or verification of the individual's SSN.



Entering SSNs on a Marketplace Application is Recommended

Spouse's information

What's Spouse's Social Security Number (SSN)?

Optional. Enter Spouse's 9-digit SSN. We verify the SSN with Social Security based on the consent you gave at the start of the application.

[Learn more about entering SSNs.](#)



Continue without entering an SSN?

Enter Spouse's SSN, so we can check household eligibility for savings. Providing SSNs helps make sure eligibility is correct, helps the application process go smoother and faster, and makes it less likely you'll need to submit more information later.

Enter SSN now

Continue without entering SSN

Best Practices for Discussing Consumers' Immigration Status

- Let consumers know that information about immigration status will be used **only** to determine eligibility for coverage and not for immigration enforcement.
- Ensure that consumers know that documentation of citizenship and immigration status is only necessary for those applying for coverage, not for other members of the household.
- Provide information about eligible immigration statuses and acceptable immigration documents to help consumers decide who in their family may have an eligible immigration status to apply for health coverage.
- Provide current information about the Public Charge Rule and eligibility for health coverage.



Best Practices for Discussing Consumers' Immigration Status (Cont.)

- Avoid unnecessary questions, especially questions about the immigration status of consumers who aren't applying for health coverage and live in mixed immigration status households. Asking unnecessary questions regarding the immigration status of non-applicant family or household members could violate Title VI of the Civil Rights Act of 1964 or Section 1557 of the Affordable Care Act.
- Avoid words such as "undocumented," "unauthorized," or "illegal."
- Know that the ethnicity and race questions are optional. This information will help HHS better understand and improve health care for all Americans. Providing this information won't impact an applicant's eligibility for health coverage, health plan options, or costs in any way.



Providing Assistance to LEP Consumers



- Assisters should be prepared to help consumers with Limited English Proficiency (LEP) and provide:
 - Fact sheets and other materials that describe lawfully present immigration status. Ensure the materials are in a language consumers can understand.
 - Free interpretation services and translated documents to consumers who don't speak English or with LEP. For more information, refer to [Serving Consumers with Limited English Proficiency](#).
 - Information to consumers in plain language. Information assisters share with LEP consumers should always be timely and accessible. To do this, assisters may need to provide LEP consumers with free written translations and oral interpretation services.
- Assisters can also call the Marketplace if consumers speak languages other than English and would like to get personal assistance in another language at 1-800-318-2596. Explain to consumers that the Marketplace provides assistance in other languages free of charge.
- You may visit HealthCare.gov to search for in-person assister organizations that offer help in languages other than English.

FFM Application Functionality:

Step 1

- The Marketplace identifies consumers who:
 - Have an eligible immigration status,
 - Have an immigration status DMI,
 - Have annual household income under 100 percent of the FPL,
 - Are otherwise not eligible for Medicaid based on income or other factors, **and**
 - Are eligible for Marketplace coverage.
- Consumers may contact assisters for help to:
 - Understand notices.
 - Determine correct documentation to submit to resolve a DMI.
 - Enroll in Marketplace coverage with or without APTC and CSRs.
 - File an appeal.



FFM Application Functionality:

Step 2

- The Marketplace notifies consumers of immigration status DMIs and potential eligibility for APTC. New language in the eligibility notice encourages consumers to send immigration documents so consumers can be evaluated for APTC eligibility if their income is under 100 percent of the FPL.
- Consumers have 95 days to provide documentation, but they do not receive APTC or CSRs during that period.

Household member(s)	Results	Next steps
Susan Griffith	<ul style="list-style-type: none"> • Until June 5, 2021, you're eligible to buy a 2021 Marketplace plan through a Special Enrollment Period. 	<p>Important: You must submit documents. This notice includes deadlines and details.</p> <ul style="list-style-type: none"> • Choose a plan.
Susan Griffith	<ul style="list-style-type: none"> • Eligible to buy a 2021 Marketplace plan, but we need more information from you. • Eligible for advance payments of the premium tax credit to help pay for a Marketplace plan. You can use up to this much of the tax credit: <ul style="list-style-type: none"> • \$279.00 each month, which is \$3,348.00 for the year, for your tax household. • This is based on the yearly household income of \$20,400.00—the amount that you put on your application, or that came from other recent information sources. 	<ul style="list-style-type: none"> • Choose a plan by June 5, 2021 and pay your first month's premium. • You must choose a Silver plan to get cost-sharing reductions, which provide extra savings on out-of-pocket costs. Choosing a Silver plan instead of a Bronze plan may save you thousands of dollars if you use a lot of medical services. • By July 6, 2021, send documents to confirm: <ul style="list-style-type: none"> • Susan Griffith's immigration status
	<ul style="list-style-type: none"> • Can choose a Silver plan with lower copayments, coinsurance, and deductibles (cost-sharing reductions). 	

FFM Application Functionality: Step 2 (Cont.)

- The consumer's "My Account" page contains language in red describing their temporary eligibility.

The screenshot displays a user interface for the FFM application. On the left is a navigation menu with the following items: "Eligibility & appeals" (highlighted), "Applications details", "Report a life change", "Communication preferences", "Exemptions", and "Tax forms". The main content area features a green status bar at the top with a checkmark icon and the text "Your application was received and has been processed." Below this is a large blue header with the text "Eligibility results". Underneath the header, a paragraph states: "Results based on your application (ID 158299277) submitted on 05/05/2021. Follow these steps below to complete your enrollment. [Learn more about your eligibility results](#)". A section titled "Eligibility overview" contains a light blue box with the following information: "Susan Griffith" is listed as "Eligible" with a green checkmark icon. To the right, it lists benefits: "To buy a Marketplace plan", "For a premium tax credit of up to \$279 each month for your tax household", and "For lower copayments, coinsurance, and deductibles (cost-sharing reductions) on Silver plans". A red warning message states: "Your eligibility is temporary: By July 6, you must submit documents to confirm some information. See your eligibility notice for details and deadlines." Below this is a section titled "Required action: View your eligibility notice" with a light blue background. It contains the text: "Your eligibility notice explains your options for coverage, costs, deadlines and next steps. If you're eligible for coverage through a Marketplace plan, you can enroll after you view your notice." and "You're eligible for a Special Enrollment Period. You must pick a plan by June 5. If you don't, you may not be able to enroll until the next yearly Open Enrollment Period." At the bottom of this section is a green button labeled "VIEW ELIGIBILITY NOTICE (PDF)".

FFM Application Functionality:

Step 3

- Consumers should respond to the notice by uploading requested documents through their account on HealthCare.gov or by mailing copies of documents to the Marketplace to resolve their immigration status DMI. This allows the Marketplace to verify the applicant's immigration status.



- Assister tip: Uploading documents is the fastest way to submit documents to the Marketplace.

- For the list of acceptable documents for resolving each type of DMI, visit [HealthCare.gov/help/how-do-i-resolve-an-inconsistency](https://www.healthcare.gov/help/how-do-i-resolve-an-inconsistency).



- Assister tip: Remember, there are different documents to submit for immigration status, citizenship, income, and other DMIs.

FFM Application Functionality:

Step 4

- The Marketplace verifies whether a consumer's immigration status meets Marketplace and/or Medicaid eligibility requirements using immigration documentation.
- The Marketplace notifies consumer of their final eligibility determination via mail or email based on the consumer's communication preferences.



- Assister tip: Consumers should be sure that the communication preference they indicated in their HealthCare.gov account is the method of communication they check most often.

FFM Application Functionality:

Step 5

- If the applicant applies during an Open Enrollment Period (OEP) or due to a Special Enrollment Period (SEP) qualifying event and they are lawfully present but determined ineligible for Medicaid based on immigration status, the applicant is eligible for:

- A QHP through the Marketplace with APTC and CSRs, if otherwise eligible.
- If they are determined ineligible for Medicaid after the OEP has ended or after more than 60 days have passed since their SEP qualifying event, they are eligible for an SEP to enroll in Marketplace coverage or change Marketplace plans, if needed.
 - Consumers can apply for an SEP through HealthCare.gov or the Marketplace Call Center (1-800-318-2596).
 - To qualify for this SEP, consumers must apply or re-apply for Marketplace coverage and attest to being denied Medicaid within the last 60 days. Once granted an SEP, eligible consumers should continue directly to “Plan Compare” to enroll in a plan or apply financial assistance to the cost of their current plan. They do not need to update their application or answer additional application questions.
 - SEPs are available 60 days from the date on the consumer’s eligibility determination notice (EDN). The EDN lists the due date for enrollment.

FFM Application Functionality: Step 5 (Cont.)

- If the applicant is lawfully present and is eligible for Medicaid based on immigration status, the applicant is eligible for:
 - Medicaid, or
 - A QHP through the Marketplace without APTC and CSRs.
- The applicant's eligibility results in the EDN remain the same.

You're getting this notice because we successfully verified citizenship or immigration status for the individual listed above using one or more documents you submitted. You don't need to take any further action to verify this information.

However, if you have received other notices asking for additional documents to confirm other information you included on your coverage application (like household income), you still need to submit those documents to the Marketplace so that you can keep your health insurance, along with any financial help you may be getting.

FFM Application Functionality: Medicaid and CHIP Considerations

- Answering application questions after being denied Medicaid or CHIP eligibility will still help HealthCare.gov properly determine eligibility for low-income immigrant applicants, including those with income under 100 percent of the FPL who were denied Medicaid or CHIP due to immigration status.
- The Marketplace will send the applications for consumers to the Medicaid/CHIP agency if they appear eligible for Medicaid or CHIP coverage based on income or other factors, even if we can't verify their immigration status. The state Medicaid or CHIP agency may ask the consumer for additional information.
- Consumers who appear to be eligible for Medicaid or CHIP but for whom the state Medicaid agency is unable to verify citizenship or eligible immigration status receive a 90-day “reasonable opportunity period” from the state Medicaid agency, during which time the state must provide benefits to these consumers.

FFM Application Functionality: Medicaid and CHIP Considerations (Cont.)

- During the reasonable opportunity period, the state agency must continue its efforts to verify the consumer's citizenship or eligible immigration status, including requesting additional documentation from the consumer, if necessary.
 - If these consumers are later denied eligibility for Medicaid or CHIP based on immigration status, they can return to the Marketplace to receive APTC and CSRs by attesting that they were denied Medicaid or CHIP.

Medicaid or CHIP denial

Were any of these people found not eligible for Delaware Medicaid or Delaware Healthy Children Program (CHIP) based on their immigration status since 2016?

You can usually find this information on the notice from the Medicaid or CHIP agency or the Marketplace saying they weren't eligible for coverage.

- Susan Griffith
- Steven Griffith
- Jerry Griffith

None of these people

Has Susan had their current immigration status since 2016?

- Yes
- No

Has Steven had their current immigration status since 2016?

- Yes
- No

Has Jerry had their current immigration status since 2016?

- Yes
- No

Save & continue

Complex Hypothetical Case Scenario #1: A Mixed Immigration Status Family's Options

Note: These are hypothetical examples. Actual applicant names have not been used in these scenarios.

- Eva and Adan Santos live in Colorado. They are both 28 years old, are married and have a two-year-old child, Serena, who was born in the U.S.
- Adan became a citizen this year. Adan submitted an LPR petition on Eva's behalf that was approved in March 2021. Eva received her Green Card two years ago and is five months pregnant.
- Their annual household income is \$24,000, or 111 percent of the FPL, for a three-person household. Adan and Eva filed taxes jointly and claimed Serena as a dependent.
- Eva approaches an assister to help her entire family enroll in health coverage, but she is not sure if they are all eligible.



What will be the eligibility determinations for the Santos household? Will Adan, Eva, and Serena be able to enroll in the same type of coverage?

Complex Hypothetical Case Scenario

#1 (Cont.)

Answer: Adan, Eva, and Serena may not be able to enroll in the same type of coverage because of their different citizenship and immigration statuses. Their eligibility for enrollment may also depend on whether they live in a state that has expanded Medicaid coverage. The eligibility determinations for the Santos household would be as follows:



- **Adan:** As a U.S. citizen, Adan is likely eligible to enroll in a QHP through the Marketplace, and he may be eligible for Medicaid. Because Adan's home state of Colorado has expanded Medicaid up to 138 percent of the FPL, Adan's income qualifies him for Medicaid coverage. As Adan resides in a Medicaid expansion state and therefore qualifies for Medicaid, he is ineligible for APTC or CSRs through the Marketplace. If Adan lived in a Medicaid non-expansion state and enrolled in coverage through the Marketplace, he would likely be eligible for APTC and CSRs through the Marketplace.

Complex Hypothetical Case Scenario #1 (Cont.)

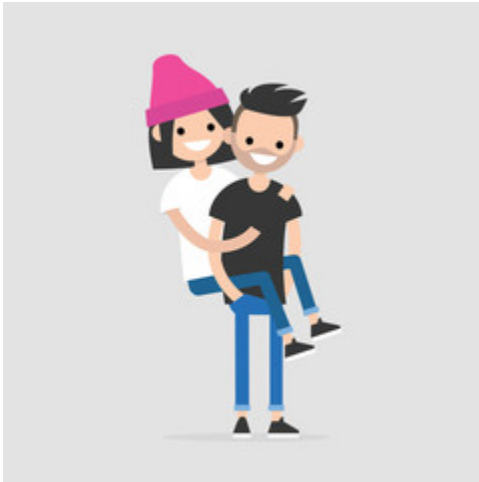


- **Eva:** Eva is considered lawfully present and a “qualified non-citizen” for purposes of Medicaid eligibility, but she has not yet met the five-year waiting period. However, because Eva resides in Colorado, she is eligible for Medicaid; Colorado is a state that has elected the CHIPRA 214 option and therefore offers Medicaid/CHIP coverage for lawfully residing pregnant women, including those within their first five years of having certain legal status.



- **Serena:** Because Serena was born in the U.S., she is a citizen and is eligible for Medicaid coverage, if she otherwise meets the eligibility criteria in the state. Serena is NOT eligible for CHIP because her modified adjusted gross income (MAGI) income for the child is above 133 percent of the FPL.

Complex Hypothetical Case Scenario #2: The Kim Family & the Marketplace Application



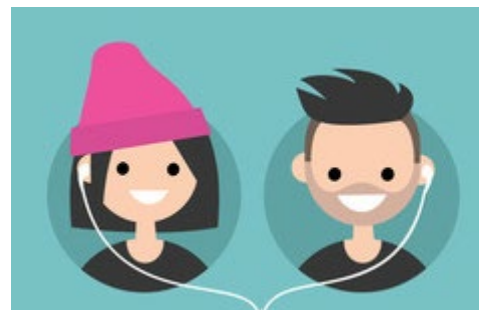
- Kiyung has been a Green Card holder for one year and lives in Pennsylvania.
- His wife, Esther, has just arrived in the U.S. to live with her husband on a student visa. She has only been here for three months.

Kiyung and Esther want to know their coverage options through the Marketplace.

Complex Hypothetical Case Scenario

#2 (Cont.)

- Kiyung has only been a Green Card holder for one year. Kiyung has not met the five-year waiting period required of most Green Card holders, and Esther does not have a “qualified” immigration status; therefore, they will not be eligible for full Medicaid.
- They might be eligible to purchase a QHP through the Marketplace or emergency Medicaid because they are both lawfully present in the U.S. for services necessary to treat an emergency medical condition under 42 CFR § 440.255.



Complex Hypothetical Case Scenario #2: Tax Relationships Application Questions

- So far, Kiyung and Esther have completed the “Contact information” section of the Marketplace application and indicated which family members are applying for coverage.
- Now they must answer questions about their tax relationship within the household. Kiyung plans on filing a joint tax return with no dependents for 2020 and completes the questions in this section.

Tax relationships

Now, tell us about the household's federal income tax returns. We'll use this information to see who's eligible for savings, like premium tax credits.

Kiyung's tax relationships

Will Kiyung file a 2021 joint federal income tax return with Esther?

[Learn more about joint tax filing.](#)

- Yes
 No

Will Kiyung and Esther claim any dependents on their 2021 federal tax return?

[Learn more about dependents.](#)

- Yes
 No

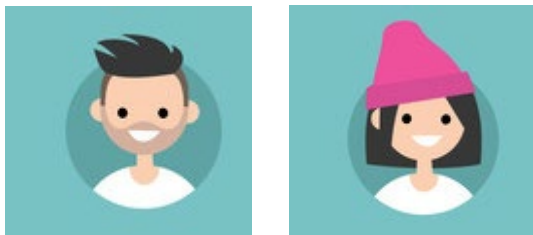
Save & continue



Complex Hypothetical Case Scenario #2: Citizenship and Immigration Status Application Questions

Next, Kiyung and Esther will answer questions about their citizenship and immigration statuses.

- Since Kiyung and Esther are not U.S. citizens or U.S. nationals, they should select **No** to answer the first question.



- A second question will appear asking which individual is not a U.S. citizen or U.S. national. Kiyung and Esther should select the check box next to their names and then select **Save & continue**.

Citizenship & immigration status

Is every person applying for coverage a U.S. citizen or U.S. national?

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

- Yes
 No

Which of these people aren't U.S. citizens or U.S. nationals?

Select all that apply. People who aren't U.S. citizens or U.S. nationals can still apply for coverage.

- Kiyung Kim
 Esther Kim

Save & continue

Kiyung's immigration status

Does Kiyung have eligible immigration status?

[Learn more about eligible immigration status.](#)

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

Complex Hypothetical Case Scenario #2: Verifying Immigration Status

- Now Esther is completing her portion of the application.

- Esther states she is lawfully present and has a student visa.
- To verify her immigrant status, Esther selects the drop-down arrow next to the “Nonimmigrant Student or Exchange Visitor Status” document type. She chooses **Certificate of Eligibility for Nonimmigrant (F-1) Student Status (I-20)** and fills out the rest of the information from that document.

- At this point, Kiyung and Esther have verified their immigration status and may complete their Marketplace application.



Esther's immigration status

Does Esther have eligible immigration status?

[Learn more about eligible immigration status.](#)

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

Select the document type that corresponds with Esther'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
- Certificate of Eligibility for Nonimmigrant (F-1) Student St ▾
- Notice of Action I-797
 - Other document or status
 - Unexpired foreign passport

None of these

[Clear your selection](#)

[Save & continue](#)

Navigator Duties

- As a Navigator, remember that even when consumers are of the same nationality, each person is unique. When you meet with a consumer, you shouldn't assume that they will be like other consumers you have assisted.
- As an HHS Navigator grant recipient, your organization receives federal financial assistance (FFA). Therefore, remember that you must comply with Section 1557 of the ACA and Title VI of the Civil Rights Act of 1964, which prohibit discrimination on the basis of race, color, or national origin. Failing to take reasonable steps to provide meaningful access to consumers with LEP might result in discrimination against consumers based on their national origin.



Additional Resources

- HealthCare.gov resources:
 - HealthCare.gov general instructions on enrolling in Marketplace coverage with APTC/CSRs: [HealthCare.gov/apply-and-enroll/get-ready-to-apply](https://www.healthcare.gov/apply-and-enroll/get-ready-to-apply)
 - HealthCare.gov information on health coverage for immigrants: [HealthCare.gov/immigrants](https://www.healthcare.gov/immigrants)
 - HealthCare.gov information on appeals: [HealthCare.gov/marketplace-appeals/what-you-can-appeal](https://www.healthcare.gov/marketplace-appeals/what-you-can-appeal)
 - HealthCare.gov information on resolving a DMI: [HealthCare.gov/help/how-do-i-resolve-an-inconsistency](https://www.healthcare.gov/help/how-do-i-resolve-an-inconsistency)
 - Serving Special Populations: Immigration Fast Facts for Assisters: [Marketplace.cms.gov/technical-assistance-resources/immigration-fast-facts.pdf](https://marketplace.cms.gov/technical-assistance-resources/immigration-fast-facts.pdf)
- Assister Guide to the Immigration Section of the Online Marketplace Application: [Marketplace.cms.gov/technical-assistance-resources/assister-guide-to-immigration-section.PDF](https://marketplace.cms.gov/technical-assistance-resources/assister-guide-to-immigration-section.PDF)



Additional Resources (Cont.)

- DHS Memo on Existing Practices Related to Certain Healthcare Information: [ICE.gov/doclib/ero-outreach/pdf/ice-aca-memo.pdf](https://ice.dhs.gov/doclib/ero-outreach/pdf/ice-aca-memo.pdf)
- Public Charge and Safeguarding Beneficiary Information: [Medicaid.gov/federal-policy-guidance/downloads/cib072221.pdf](https://www.medicaid.gov/federal-policy-guidance/downloads/cib072221.pdf)
- Medicaid Policy Guidance: [Medicaid.gov/federal-policy-guidance/index.html](https://www.medicaid.gov/federal-policy-guidance/index.html)
- CHIPRA of 2009: [Govinfo.gov/content/pkg/PLAW-111publ3/pdf/PLAW-111publ3.pdf](https://www.govinfo.gov/content/pkg/PLAW-111publ3/pdf/PLAW-111publ3.pdf)
- CMS Guidance on Medicaid and CHIP Coverage of “Lawfully Residing” Children and Pregnant Women: [CMS.gov/cmsgov/archived-downloads/SMDL/downloads/sho10006.pdf](https://www.cms.gov/cmsgov/archived-downloads/SMDL/downloads/sho10006.pdf)

