Serving Special Populations: Immigrants

Fast Facts for Agents & Brokers

This Fact Sheet Applies If You:

- Are an agent or broker in a state with a Federally-facilitated Marketplace (FFM) or State Partnership Marketplace (SPM), and/or
- Are assisting immigrant applicants explore their health care and coverage options.

Consumers Who Are Immigrants: Overview

Many immigrants are eligible for health coverage through the Health Insurance Marketplace (Marketplace)\(^1\) or through Medicaid or the Children’s Health Insurance Program (CHIP). A consumer does not have to be a U.S. citizen or U.S. national to qualify for Medicaid or CHIP, or to enroll in a qualified health plan (QHP) through the Marketplace.

As an agent or broker, you may help immigrant applicants enroll in new health coverage, and you must be aware of federal and state rules that affect these consumers’ eligibility for different health care and coverage options. You should also understand the application and enrollment process to help immigrant consumers evaluate their health care coverage options. Additionally, you should provide assistance that is culturally and linguistically appropriate.

Depending on their immigration status and other eligibility criteria, immigrants may be eligible for health coverage through the Marketplace, Medicaid, or CHIP. Medicaid provides payment for treatment of an emergency medical condition if consumers meet all Medicaid eligibility criteria in the state (e.g., income and state residency), regardless of immigration status. In addition, Community Health Centers (CHCs) and Migrant Health Centers (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.

You should be familiar with the topics below which pertain to immigrant consumers:

1. **Marketplace Eligibility**: Immigrants who are lawfully present and meet other basic Marketplace eligibility requirements may be eligible for coverage through the Marketplace. See Exhibit 1 for a summary of lawfully present immigration statuses. These applicants may also be eligible for financial assistance through the Marketplace, depending on some additional eligibility criteria, including household income and family size.

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\(^1\) Health Insurance MarketplaceSM and MarketplaceSM are service marks of the United States Department of Health & Human Services. When used in this document, the term “Health Insurance Marketplace” or “Marketplace” refers to FFMs, including FFMs where states perform plan management functions and State-based Marketplaces on the Federal Platform (SBM-FPs).
### Exhibit 1: Immigration Statuses Eligible for Marketplace Coverage

<table>
<thead>
<tr>
<th>Lawfully Present Immigration Statuses</th>
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<tbody>
<tr>
<td><strong>Marketplace eligible status only</strong></td>
</tr>
<tr>
<td>- Individual with valid nonimmigrant status (includes worker visas (e.g., H1, H-2A, H-2B), student visas, U-visa, T-visa, and other visas, and citizens of Micronesia, the Marshall Islands, and Palau)</td>
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<tr>
<td>- Aliens whose visa petitions have been approved and who have a pending application for adjustment of status</td>
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<td>- Individuals granted employment authorization</td>
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<td>- Temporary Protected Status (TPS)</td>
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<tr>
<td>- Paroled into the United States</td>
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<tr>
<td>- Deferred Action Status (Exception: Deferred Action for Childhood Arrivals [DACA] are not considered lawfully present)</td>
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<tr>
<td>- Deferred Enforced Departure (DED)</td>
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<tr>
<td>- A child who has a pending application for Special Immigrant Juvenile status</td>
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<tr>
<td>- Granted relief under the Convention Against Torture (CAT)</td>
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<tr>
<td>- Lawful Temporary Resident</td>
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<tr>
<td>- Family Unity beneficiaries</td>
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<tr>
<td>- All of the Medicaid-eligible statuses listed below</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Medicaid eligible status (if 5-year bar is met)*</th>
<th>Medicaid eligible status (5-year bar does not apply)**</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Lawful permanent resident (LPR/Green Card holder)</td>
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<tr>
<td>- Conditional Entrant</td>
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<tr>
<td>- Paroled into the United States for 1 year or more</td>
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<tr>
<td>- Battered spouse, child, or parent who has a pending or approved petition with the Department of Homeland Security (DHS)</td>
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<td>- Trafficking survivors and their spouses, children, siblings, or parents</td>
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<tr>
<td>- Lawful Permanent Residents who adjusted from a status exempt from the 5-year bar</td>
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<tr>
<td>- Veterans or active duty military, and their spouses or unmarried dependents who also have a “qualified non-citizen” status</td>
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<tr>
<td>- Refugee</td>
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<td>- Asylee</td>
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<td>- Cuban/Haitian Entrants</td>
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<tr>
<td>- Granted Withholding of Deportation or Withholding of Removal</td>
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<tr>
<td>- Member of a Federally-recognized Indian tribe or American Indian Born in Canada</td>
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<tr>
<td>- Certain Amerasian Immigrants</td>
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</tbody>
</table>

For more lawfully present immigration statuses, visit: [www.healthcare.gov/immigrants/immigration-status/](http://www.healthcare.gov/immigrants/immigration-status/).

* Indicates lawfully present immigration statuses that are considered qualified non-citizen statuses for purposes of Medicaid eligibility

** Indicates lawfully present immigration statuses that are considered qualified non-citizen statuses for purposes of Medicaid eligibility and that are NOT subject to the Medicaid 5-year bar

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.
2. Medicaid or CHIP Eligibility: Generally, individuals who are non-citizens and who have a “qualified non-citizen” immigration status are eligible to enroll in Medicaid or CHIP, if they are otherwise eligible for Medicaid or CHIP in their state of residence (i.e., they meet income and state residency criteria). “Qualified non-citizen” immigration statuses are identified with one asterisk in Exhibit 1 above. Further, federal law requires that many qualified non-citizens meet a five-year waiting period (also called the “five-year bar”) before becoming eligible for Medicaid or CHIP. This five-year waiting period begins when consumers receive their qualifying immigration status, not when they first enter the United States. However, consumers with certain immigration statuses are exempt from the five-year waiting period. “Qualified non-citizen” immigration statuses exempt from the 5-year waiting period (such as refugees, asylees, and Cuban-Haitian entrants) are identified with two asterisks in Exhibit 1: Immigration Statuses Eligible for Marketplace Coverage above.

Important: Some states have expanded coverage for Medicaid and CHIP to lawfully present children and/or pregnant women, regardless of whether they are considered “qualified non-citizens” or have met the five-year waiting period, if otherwise eligible for Medicaid or CHIP in the state.

- This link shows which states cover lawfully present children and/or pregnant women:

- This link has information on each state’s Medicaid eligibility criteria:

For more specific information about Medicaid eligibility, contact your state’s Medicaid office by using the state drop down menu at: [https://www.healthcare.gov/medicaidchip/eligibility/](https://www.healthcare.gov/medicaidchip/eligibility/).

Some non-citizens are not eligible for Medicaid, either because they are lawfully present, but do not have “qualified non-citizen” immigration status or because they are “qualified non-citizens,” but have not met the five-year waiting period. However, these non-citizen consumers may be eligible for financial assistance through the Marketplace if they otherwise meet Marketplace eligibility requirements. In addition, Medicaid provides payment for emergency services for treatment of emergency medical conditions if consumers meet all other Medicaid eligibility rules in the state, but do not have an eligible immigration status.

3. Undocumented Immigrants Are Not Eligible for Marketplace Coverage: Undocumented immigrants are not eligible to enroll in coverage through the Marketplace, even at full cost, although they may be able to purchase coverage outside the Marketplace. Medicaid provides payment for emergency services for treatment of emergency medical conditions if the individual meets all other Medicaid eligibility rules in the state (e.g. income and state residency) but does not have an eligible immigration status. In addition, in certain states, some pregnant women may be able to get health coverage during pregnancy regardless of immigration status.

4. Individuals Granted DACA Are Not Eligible for Marketplace Coverage: Individuals granted deferred action under DHS guidance issued on June 15, 2012 are not eligible to purchase coverage through the Marketplace.2

5. Lawfully Present Immigrants May Be Eligible for Subsidized Marketplace Coverage Even if Their Income is Below the Federal Poverty Level (FPL): Most consumers must have an annual tax household income between 100% and 400% of the FPL to be eligible for financial assistance. However,  

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2 This guide was current at the time it was published or uploaded onto the web. Eligibility policies may change frequently.
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% of the FPL.

Attesting to and Verifying Immigration Status

The Marketplace application asks applicants about citizenship and immigration status to determine their eligibility for health coverage options. Citizenship and immigration information is collected and verified by the Marketplace only for family members who are applying for coverage. This information will only be used to determine consumers’ eligibility, and will not be used for immigration enforcement purposes. For more information, please see the following memorandum (in English and Spanish) from the U.S. Immigration Customs and Enforcement (ICE): https://www.ice.gov/doclib/ero-outreach/pdf/ice-aca-memo.pdf; www.ice.gov/espanol/factsheets/aca-memoSP.

Mixed Immigration Status Households

You should be aware that 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.

Applying for Coverage on Behalf of Family Members

You should also be aware that consumers can apply for coverage on behalf of their eligible dependents, even if they are not eligible for coverage themselves.

Consumers Seeking Comprehensive Health Coverage for Themselves

Consumers seeking comprehensive health coverage for themselves must be able to attest to having an eligible immigration status or being a citizen or national, which will be verified by the Marketplace through the Social Security Administration (SSA) and/or the DHS. Consumers who attest to having an eligible immigration status should provide their immigration document type and all document numbers they have available, as requested by the Marketplace application (see Exhibit 2). Providing this information along with the application makes the verification and eligibility determination process faster, and makes individuals less likely to run into unnecessary hurdles, such as data matching issues or “inconsistencies” (described below). 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 treatment of emergency medical conditions or services for pregnant women in certain states through Medicaid if they meet other eligibility criteria for Medicaid or CHIP in their state.

Consumers may apply for coverage through the Marketplace, Medicaid, or CHIP on behalf of their family members, regardless of their own eligibility statuses.

For example, undocumented parents of U.S. citizens can apply for coverage on behalf of their children as the application filer. 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. When applying for other family members and not seeking coverage for themselves, application filers are not required to provide information about their own citizenship or immigration status; rather, they are only required to provide citizenship and immigration information for the family members seeking coverage. The information in their application will not be used for immigration enforcement purposes. If these application filers need help with the verification process, they can call the Marketplace Call Center.
Verifying Identity and Eligibility Information

When consumers apply for coverage, the Marketplace needs to verify their identities as well as other information about them that determines the coverage and financial assistance they may be eligible for. Identity verification is also referred to as “identity (ID) proofing,” and it protects consumers’ personal information by ensuring that each applicant is who he or she claims to be, preventing fraudulent creation of a Marketplace account and applying for health coverage in another consumer’s name without his or her knowledge. ID proofing is an important part of the Marketplace application and unresolved ID proofing issues can prevent consumers from completing an online application. To complete ID proofing, consumers enter personal information about themselves, such as where they used to live or where they hold a bank account. (Please see Tips to Handle Eligibility and Enrollment Challenges below for more information.)

Data Matching Issues

Data matching issues are also referred to as “inconsistencies,” and occur when information a consumer enters in his or her Marketplace application doesn’t match the data that the Marketplace has from trusted data.

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3 Please note that the information included in this presentation is solely illustrative. Slides contain screenshots with names and/or specific issuers/plans. The purpose of these screenshots is to provide examples. Names presented are made up and issuer/plan names displayed were selected at random. These examples do not include personally identifiable information and are not an endorsement of specific issuers/plans.
sources, like SSA records or Internal Revenue Service (IRS) databases. The most common types of data matching issues are related to income, citizenship, and immigration information.

Consumers can find out if they have a data matching issue by checking the eligibility notice they receive from the Marketplace once they have applied. If a consumer has a data matching issue, the eligibility notice will say “Send the Marketplace more information.” Consumers must respond to this request within the timeframe indicated in the notification and resolve the data matching issue or their enrollment will be terminated. Uploading all of the requested documents electronically to consumers’ HealthCare.gov accounts is the preferred and most efficient method for resolving inconsistencies. Consumers also have the option of mailing copies of their documents directly to the Marketplace.

You should encourage consumers to read their eligibility notices carefully to make sure that they submit:

- All information that is requested;
- The correct documents, if applicable; and
- Information for the correct member of the enrollment group.

For example, the Marketplace may request additional information for someone other than the application filer. Submitting all of the correct information and documents, if applicable, for the correct member of the enrollment group will help the Marketplace resolve the data matching issue as soon as possible.

Consumers who do not submit additional information, or do not submit the correct information for the correct individual risk losing their coverage through the Marketplace. Consumers with immigration status or citizenship inconsistencies will get two warning notices: one 60 days before, and one 30 days before their deadline to resolve the issue. The subject line of the warning notices will read “Important: Respond by the dates below to keep your Marketplace coverage or the help you are getting to pay for your Marketplace coverage.” Each notice includes a list of acceptable documents and instructions for sending them, which consumers should read closely to make sure they are submitting the correct information. Consumers will also get a phone call 14 days before their deadline to resolve their data matching issue.

**How Agents and Brokers Can Help Immigrants during the Enrollment Process**

The following best practices can help you talk with immigrant consumers who are seeking health coverage for themselves or on behalf of someone else:

- Start by giving consumers who are immigrants reassuring messages about privacy and confidentiality, especially about their citizenship or immigration statuses and Social Security numbers (SSNs). Let consumers know that information they provide will not be used by government agencies to enforce immigration laws or policies.
- Share information about eligible immigration statuses and acceptable immigration documents with consumers to help them decide who in their family may be eligible to apply for health coverage.
- Be prepared to refer consumers to non-profit immigration attorneys to help consumers who are not sure if they have eligible immigration statuses or to help them obtain immigration documents if they do not have them readily available.
- Be sure to correctly identify the consumer or consumers who are applying for health coverage by asking them if they are seeking health coverage for themselves or on behalf of someone else.
You should help ensure that language or cultural barriers do not interfere with consumers’ understanding of the Marketplace application and enrollment process. Oral interpreters or translated materials are available through the Marketplace call center free of charge, and may be required in order to make information completely accessible and understandable. You should access these services and provide them to applicants or their family members, if needed. Since these services are available for free, there should be no charge to an applicant or their family member.

If consumers speak languages other than English and would like to get personal assistance in another language, they can call the Marketplace at 1-800-318-2596. Explain to consumers that the Marketplace provides assistance in other languages free of charge.

**Tips to Handle Eligibility and Enrollment Challenges**

When helping immigrant consumers, you should be aware of the following potential challenges:

- You should be familiar with different sources of income common to immigrant consumers, including seasonal workers with no fixed income, foreign income, or self-employed business income. These different types of income can affect eligibility for insurance affordability programs that lower the cost of health coverage.

- You should help consumers identify what documents they should bring with them to an appointment, and give examples of acceptable documentation (e.g., SSN card, Permanent Resident Card or “Green Card,” employment authorization card, refugee card). This can be done when consumers call to make an appointment, but also can be done at outreach events with flyers, brochures, or other handouts explaining what documentation is needed to enroll. For a list of acceptable documentation, visit: [https://www.healthcare.gov/immigrants/documentation/](https://www.healthcare.gov/immigrants/documentation/).

- You should 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.

- You should encourage consumers to include all immigration information that is requested on the online application, if the document type and number is known and available. This will increase the probability that consumers’ immigration and citizenship status will be successfully verified.

- You should be aware that consumers may not know that they need to have an email account to enroll online. Extra time may need to be allotted for working with consumers to set up email accounts. Consumers can also enroll over the phone by calling the Marketplace at 1-800-318-2596.

- You should consider developing a form that consumers can fill out with information like:
  - Their HealthCare.gov account information;
  - A hint that reminds them what their password is;
  - Details about their health insurance plan, including the amount of their premiums, deductibles and coinsurance; and
  - Any other information that would help consumers keep important information about their health care coverage handy.

Providing this information on a sheet with your name and contact information can help consumers contact you if they have questions. This information can also be condensed onto an index or business card that consumers can keep in their wallets.
Immigrants may have problems satisfying the ID proofing part of the application as they are less likely to have the credit history required for ID proofing. Be prepared to assist consumers with the ID proofing process, including any challenges they may have. To complete ID proofing, consumers will need to answer questions on topics like:

- Addresses of current and past places they’ve lived;
- Names of current and past employers; and
- Information about mortgages, credit cards, and/or loans that they have.

Click here for a full list of potential question categories. CMS uses credit reporting agencies like Experian and Equifax to verify consumers’ application information, so they may see an inquiry from CMS when checking their credit scores. This CMS inquiry does not affect consumers’ credit scores.

You should be prepared to help consumers with data matching issues that they may have. Encourage consumers to read their eligibility notices carefully, as well as any reminder notices they receive, in order to make sure that they submit the correct information for the correct member of the enrollment group. Consumers can also determine whether or not they have unresolved data matching issues by checking their Marketplace account, where there will be a list of all unresolved inconsistencies under “Applications details.” Consumers who have questions about the status of documents they have submitted to the Marketplace should call the Marketplace Call Center.

You should be aware that consumers with data matching issues can still apply for coverage before the issue is resolved. If consumers’ issues with immigration or citizenship data matching go unresolved, they may lose eligibility for coverage through the Marketplace. If consumers’ issues with income data matching issues go unresolved; they may experience a modification of their premium tax credits and cost-sharing reductions.

Immigrant Consumer Eligibility Scenario

Eva and Adan Santos, both 28-years old, are married and recently had a baby, Serena, who was born in the United States. Adan became a citizen this year. Eva is applying to become a lawful permanent resident and Adan submitted a visa petition on her behalf that was approved in September. Their annual household income is $24,000 or 121% of the FPL. Adan and Eva file taxes jointly and claim Serena as a dependent. Eva approaches an agent 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?

Answer: Adan, Eva, and Serena may not be able to enroll in the same type of coverage because of their different citizenship 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. If his state expanded Medicaid up to 138% of the FPL, Adan’s income qualifies him for Medicaid coverage. Note that in a Medicaid expansion state, Adan would not be eligible for APTC or CSR through the Marketplace. If Adan lives in a Medicaid non-expansion state and enrolls in coverage through the Marketplace, Adan would likely be eligible for APTC and CSR through the Marketplace.
- **Eva:** Eva is considered lawfully present and may therefore be eligible for Marketplace coverage. Eva is not yet considered a “qualified non-citizen” for purposes of Medicaid eligibility. If Eva enrolls in coverage through the Marketplace, she may be eligible for APTC and CSR through the Marketplace.

- **Serena:** Because Serena was born in the United States, she is a citizen and is eligible for Medicaid coverage, if she otherwise meets the eligibility criteria in the state.

**Additional Resources**

**For More Information Visit:**

- HealthCare.gov: [What Do Immigrant Families Need to Know](https://www.healthcare.gov/what-do-immigrant-families-need-to-know/)