Tips for Submitting Supporting Documents to the Health Insurance Marketplace

Center for Consumer Information and Insurance Oversight (CCIIO)

Updated November 2016
Pre-Application:

1. Failed identification (ID) proofing
   • ID proofing must be completed in order for a consumer to submit an online application and enroll in a plan.
   • If consumer fails online process, a manual process is needed to verify identity so the consumer can submit an online application.

Post-Application:

2. Resolve application Data Matching Issues (DMIs)
   • When a consumer provides information on a Marketplace application, it is compared to information from other trusted data sources. If eligibility information from the application and other trusted data sources does not match, or if other trusted data sources are not available, an application inconsistency or “data matching issue” is created.
     — Note: “Data matching issue” and “application inconsistency” are two different terms for the same issue.
   • The Marketplace needs information to resolve an inconsistency in order to make a final eligibility determination.
   • Examples of DMIs include: projected household income amount, citizenship, immigration status, employer coverage, Social Security number, American Indian status.

3. Special Enrollment Period (SEP) eligibility
   • Consumers may need to provide documents to verify eligibility for a SEP qualifying life event.
     — Examples of SEP qualifying life events: Loss of Minimum Essential Coverage (MEC); Change in primary place of living (permanent move); Marriage; Birth of a child or Gaining a dependent through adoption, foster care placement or child support or other court order.
Application and DMIs

• **Important notice to be aware of:**
  – “The Privacy & Use of Your Information” page lets consumers know how the information they entered will be used, and that data from other sources will be accessed to verify their information.

  • Integrated systems will check applicants’ eligibility by retrieving information from other federal agencies, including the Social Security Administration (SSA) and the Department of Homeland Security (DHS).

  • If consumers applied for help paying for coverage through insurance affordability programs, these integrated systems will also retrieve information from additional agencies, such as: the Internal Revenue Services (IRS) and state Medicaid and Children’s Health Insurance Program (CHIP) agencies.
ID proofing is used to verify a consumer’s identity. It’s important because it helps protect personal information, and helps prevent someone else from creating a Marketplace account and applying for health coverage in the individual’s name without his or her knowledge.
Steps to ID Proof

If consumers would like to complete an application on the Marketplace, they will log in and select “Start a new application or update an existing one.”
Steps to ID Proof

- Consumers will then select their state and click “Start my application.”
Steps to ID Proof

• To start the application, consumers will need to complete their identity verification. The consumer will log back in to HealthCare.gov to complete identity verification.
• The identity verification will be auto-populated with information entered when the consumer first created a Marketplace account.
Steps to ID Proof

• If consumers pass the identity proofing process, they will be taken to the “Your Identity has been Verified” page.
Steps to ID Proof

Consumers may be unsuccessful in verifying their identity. If they failed the identity verification, this notice will be shown.
Steps to ID Proof

Consumers who are unable to verify their identity will be provided with “Verification Assistance” to assist them in the process.
Verifying ID Over the Phone

If online ID proofing is unsuccessful after two tries, a reference code will appear to use when calling Experian at (866) 578-5409. The consumer should write down his or her reference code from the screen to give to the Experian representative when the consumer calls.
Verifying ID Over the Phone

After calling Experian, the consumer should click “I have verified my identity over the phone” to complete the ID proofing process.
Verifying ID

- If the consumer cannot verify his or her identity online or by phone, the consumer can submit updated contact information and upload identity verification documents to finalize the verification process. This may take 7 to 10 days, after which the consumer profile will be updated to “Identity Verified.”

- This also means that consumers may not be able to finalize their ID proofing if verification information does not match.
Uploading ID Proofing Documents if ID Cannot be Verified

Consumers may be taken directly to “Upload Documents” instead of being told to call Experian if there’s not enough information to be able to proof by phone.
Consumers are allowed to submit and upload documents for ID proofing.
Submit Supporting Documents

Once consumers have submitted their supporting documents, they will receive this notification:
Two Ways to Submit Supporting Documents

1. Upload document to online Marketplace account:
   - The consumer uploads a copy of one or two documents to verify his or her identity
     • The list of acceptable documents is available on Slide 19 or HealthCare.gov

2. Mail a physical copy of the document to the Marketplace processing center:

   Health Insurance Marketplace
   465 Industrial Blvd
   London, KY 40750-0001

   - Include the printed bar code page that came with the notice sent by the Marketplace.
     • Notices are sent via email or U.S. mail, based on the communication preference the consumer selected.
   - If the consumer doesn’t have a bar code, include his or her printed name and application ID number.
   - **DO NOT MAIL ORIGINAL DOCUMENTS.**
   - Keep a copy of what was mailed, including proof of mailing (if available).
Important: If you mail in your documentation, please also include this page in the same envelope, which includes a barcode, along with any documents. This page helps the Marketplace make sure your documents can easily be associated with your application.

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# Document Types for ID Proofing

<table>
<thead>
<tr>
<th>Column A: Documents that may be submitted alone:*</th>
<th>Column B: If individual does not have document from Column A, submit 2 from B*</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Driver’s license issued by state or territory</td>
<td>• Birth certificate</td>
</tr>
<tr>
<td>• School Identification card</td>
<td>• Social Security card</td>
</tr>
<tr>
<td>• Voter registration card</td>
<td>• Marriage certificate</td>
</tr>
<tr>
<td>• U.S. military draft card or draft record</td>
<td>• Divorce decree</td>
</tr>
<tr>
<td>• U.S. passport or U.S. passport card</td>
<td>• Employer identification card</td>
</tr>
<tr>
<td>• Certificate of Naturalization (Form N-550 or N-570) or Certificate of U.S. Citizenship (Form N-560 or N-561)</td>
<td>• High school or college diploma (including high school equivalency diplomas)</td>
</tr>
<tr>
<td>• Permanent Resident Card or Alien Registration Receipt Card (Form I-551)</td>
<td>• Property deed or title</td>
</tr>
<tr>
<td>• Employment Authorization Document that contains a photograph (Form I-766)</td>
<td></td>
</tr>
<tr>
<td>• Military dependent’s identification card</td>
<td></td>
</tr>
<tr>
<td>• Native American tribal document</td>
<td></td>
</tr>
<tr>
<td>• U.S. Coast Guard Merchant Mariner card</td>
<td></td>
</tr>
<tr>
<td>• Foreign passport, or identification card issued by a foreign embassy or consulate that contains a photograph</td>
<td></td>
</tr>
</tbody>
</table>

*Document lists are not exhaustive. For the comprehensive list, please see: [https://www.healthcare.gov/help/how-do-i-resolve-an-inconsistency/](https://www.healthcare.gov/help/how-do-i-resolve-an-inconsistency/)
Uploading ID Proofing Documents

- If the consumer submits a copy of a document that is not listed in Column A in the previous slide, the consumer must submit copies of two documents listed in Column B.
- **Documents will be processed more quickly if uploaded.**

Example: Social Security card and Property deed or title
You can expect identity verification documents to be processed and turned around quickly, typically within 7-10 business days.

After identity verification documents are processed, the status in the consumer’s account should change “Identity verified.”
Section 2: Application Data Matching Issues

An application data matching issue (inconsistency) happens when information a consumer enters in a Marketplace application doesn’t match the data the Marketplace checks in trusted resources, like Social Security records or IRS databases. The most common types of data matching issue is related to income, citizenship, or immigration status.

These issues are also called "data matching issues" (DMIs), but both terms mean the same thing.

Consumers may not know the term “application inconsistency,” as the notice they receive simply says “send the Marketplace more information.”

The consumer will still be eligible for health coverage through the Marketplace and can continue to enroll in coverage consistent with the eligibility provided by the Marketplace.

– However, the consumer must take action within the period provided to resolve the inconsistency and keep his or her health coverage and/or financial assistance through the Marketplace.
Understanding if a Consumer has an Application DMI

Q: How do I know if the consumer has an application DMI?
A: The consumer’s eligibility determination notice will say “We need more information before you can complete an application for the Marketplace” and give a list of what to send. If the notice requests information for other people on the application, the consumer must respond to all the requests.

- A DMI will only be listed in the consumer’s eligibility notice. A message does NOT appear on screen during the application.
Q: What does the consumer have to do to resolve an application DMI (data matching issue)?

A: In the consumer’s Marketplace account, under “Applications details,” there will be a list of all unresolved DMIs, what needs to be submitted, and the dates by which the DMI must be resolved.
• The consumer reviews his or her eligibility notice to determine which household member(s) need(s) to provide more information.
  – A list of acceptable documents will be in the consumer’s notice, or can be viewed on HealthCare.gov: [www.healthcare.gov/help/how-do-i-resolve-an-inconsistency/](http://www.healthcare.gov/help/how-do-i-resolve-an-inconsistency/).

• The consumer makes a copy of the needed document(s) and submits the copy and keeps the original.

• Consumers will receive 90, 60, and 30 day notices, advising them to submit requested information to resolve their application DMI. If the consumer does not provide the requested information, he or she could lose health coverage and/or financial assistance through the Marketplace.

• If a consumer does not provide the requested documentation, he or she will receive a notice and phone call advising that the Marketplace needs additional documentation.

• When the DMI is resolved, the consumer will receive a new eligibility determination notice.
Uploading Documents to Resolve Application DMIs

• Have the consumer log into his or her Marketplace account and select the submitted application. Then click “Application details” from the left navigation. This displays the screen shown here.

• Next, the consumer clicks the “Verify” button next to the information that needs to be uploaded.

• The consumer should not use these characters in the name of the file that he or she uploads: / \ : * ? “ < > |
After choosing “Verify,” the consumer selects a document type to **upload** from the list, then clicks on “Select file to upload.”

- The document must be a .pdf, .jpeg, .jpg, .gif, .xml, .png, .tiff or .bmp
- The document cannot be bigger than 10 MB
- The consumer cannot use these characters in the name of the file that he or she uploads: / \ : * ? “ < > |

If the consumer gets an error message, make sure he or she uploaded the right **type** of document (e.g., PDF, not an Excel file)
Sending Documents to Resolve DMIs by Mail

• If **mailing** documents intended to resolve an inconsistency, advise consumer to include the barcode page from the **eligibility determination notice** in the same envelope

• If the consumer doesn’t have the barcode page, write the consumer’s application ID number and full name on the documents

• Consumers should keep a copy of all documents mailed to the Marketplace, including proof of mailing (if they have one)

• Send to:
  Health Insurance Marketplace
  465 Industrial Blvd.
  London, KY  40750-0001
• If the consumer has sent in documents via upload or mail, but has not yet received a notice with the result or status, the information is likely still being processed.

• The consumer does not need to take any action unless he or she hears from the Marketplace that more information is needed. When paperwork is processed, the consumer will receive a written notice via their preferred choice of communication (Email or U.S. mail).

• The consumer will still be eligible for health coverage through the Marketplace and can continue to enroll in coverage consistent with the eligibility provided by the Marketplace.
  – However, the consumer must take action within the period provided to resolve the inconsistency and keep his or her health coverage and/or financial assistance through the Marketplace.
Status of Submitted ID Proofing or Documents to Resolve Inconsistency

• If a consumer would like to follow up with the Marketplace for a status update on his or her documents submitted via upload or mail, he or she can contact the Marketplace Call Center at 1-800-318-2596 (or TTY: 1-855-889-4325).

• The Call Center will ask for some information, like name, date of birth, or application ID number.

• In the event it cannot provide a status update, the Call Center will contact an advanced casework team to look into the status of the case and the Marketplace will be in touch with the consumer.
Section 3: Special Enrollment Period (SEP) Eligibility

• An eligible individual enrolling in a plan after the annual Open Enrollment period may need to provide documents to verify eligibility for an SEP qualifying life event.

• Examples of SEP qualifying life events include:
  – Loss of Minimum Essential Coverage (MEC);
  – Change in primary place of living (permanent move);
  – Marriage;
  – Birth of a child; or
  – Gaining a dependent through adoption, foster care placement or child support or other court order.

Note: Eligible individuals can enroll in Medicaid and CHIP any time of year, regardless of whether they qualify for a Marketplace SEP
After the eligible individual logs into the Marketplace account, go to “Existing Applications,” then “Application Details.”

If proof is needed, it will say: “Send proof for your Special Enrollment Period.”

There are two ways for the consumer to send proof for his or her Special Enrollment Period

For each qualifying life event requiring verification, select the green “Upload documents” or “Upload more documents.”

- Upload documents one at a time.

Copies of documents can be sent by U.S. mail to:

Health Insurance Marketplace
Attn: Coverage Processing
465 Industrial Blvd
London, KY 40750-0001

The consumer should include the printed bar code page that came with his or her notice. Notice is sent via the consumer’s preferred communication option (Email or U.S. mail).

If the consumer does not have a bar code, advise the consumer to print his or her name and application ID on each copy the consumer sends.
Resources