

Immigrant Inconsistency Responses

Do not select "Permanent Legal Resident". Instead, choose 'Other' and enter description as 'GreenCard' and enter Alien or A-Number

You need to tell us if the applicant has an eligible immigration status. You can continue the application now, and we'll send you a reminder notice.

Document description *(35 characters maximum)*

GreenCard

Enter one of these numbers

Alien number Enter the Alien number *optional*

A- Enter #

EXAMPLE Letter request INCONSISTENCY be resolved:

2014 application for Individuals & Families (ID#: 2000000000) View all applications

- My plans & programs
- Eligibility & appeals
- Applications details**
- Report a life change
- Communication preferences
- Authorized users
- Exemptions

Application details

Here's your current application information:

Status: Complete ID#: [REDACTED]

Your application is complete [VIEW ELIGIBILITY RESULTS](#)

Your Marketplace application is complete and has been processed. View your eligibility results to find out if you can enroll in health coverage. [REMOVE MY APPLICATION](#)

Qualified Health Plan eligibility

You have unresolved inconsistencies. You need to provide additional documentation.

Verify s yearly income [VERIFY](#)
Submit before 5/27/2014

Immigrants Eligible for tax credits/discounts with (a) Household BELOW 100% FPL, **and** (b) meet category for TennCare eligibility (parent, child or pregnant), **and** (c) in US less than 5 years and therefore NOT eligible for TennCare.

Questions:

- 1) Applied since Oct 2013
- 2) Eligible?
- 3) Immigration status (based on date of issue on Permanent Legal Resident card)

These questions are new and now allow the person(s) described above to be fully eligible for discounts.

Were any of these people found not eligible to get Medicaid and Children's Health Insurance Program (CHIP) since October 1, 2013?

Check the box only if a person was found not eligible for this coverage by their state, not by the Marketplace, and if the family's income or household size haven't changed since the person was found not eligible.

[Learn more about how to answer this question](#)

[Person Name]

[Person Name]

Was this person found not eligible by their state because of their immigration status?

Yes

No

None of these people

Did any of these people apply for coverage between 10/01/2013 – 03/31/2014? (Select their name if they applied through their state or the Marketplace.)

[Person Name]

[Person Name]

None of these people

When did [Person Name] get her current immigration status?

optional

Month

August ▼

Year

2011 ▼