



Qualified Immigration Statuses
and
Acceptable Documents to Resolve a Data Matching Issue
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You can upload your documents through your online account.
It is important to submit required documents before due dates.
You may lose your financial help or coverage if you fail to submit documentation.
If you need help, you can call GetCoveredNJ at 833-677-1010 or you can find local assistance on
GetCovered.NJ.gov.

Qualified Immigration Statuses for GetCoveredNJ Eligibility ¹	
All “Qualified” Immigrants for the Purposes of Medicaid/CHIP Eligibility	
Lawful Permanent Resident (LPR, green card holder, Temp status of I-551)*	Conditional Entrant*
Refugee	Battered Spouse, Child, and Parent
Asylee	Trafficking Survivor and his/her Spouse, Child, Sibling, or Parent
Cuban/Haitian Entrant	Granted Withholding of Deportation or Withholding of Removal
Paroled into the United States*	Certain American Indians
PLUS Other Lawfully Present Immigrants	
Deferred Action, except for individuals granted Deferred Action for Childhood Arrivals (DACA) program (DACA are not eligible to buy coverage from the marketplace)	Individual with Nonimmigrant Status (includes worker visa (E,H, I, L, O, P, R visa); student visas (F,M, J visa); U visas, citizens of Micronesia, the Marshall Islands, and Palau; and many others)
Temporary Protected Status (TPS)	Administrative order staying removal issued by the Dept. of Homeland Security
Deferred Enforced Departure (DED)	Lawful Temporary Resident
Granted relief under the Convention Against Torture (CAT)	
Applicant for Any of These Statuses	
Lawful Permanent Resident (LPR/green card holder)	Victim of Trafficking Visa
Special Immigrant Juvenile Status	Withholding of Deportation and Withholding of Removal, under the immigration laws or under the CAT
Asylum	
With Employment Authorization	
Applicant for TPS	Application for Cancellation of Removal or Suspension of Deportation
Registry Applicants	Applicant for Legalization under IRCA
Order of Supervision	Legalization under the LIFE Act

¹ “Key Facts: Immigrant Eligibility for Health Insurance Affordability Programs.” Washington DC: Center on Budget and Policy Priorities; December 2015. <https://www.healthreformbeyondthebasics.org/key-facts-immigrant-eligibility-for-coverage-programs/>.

Citizenship

- Certificate of U.S. citizenship (N-560, N-561) or Certificate of Naturalization (N-550, N-570)
- U.S. Passport book or card (acceptable even if expired)
- NJ Enhanced Driver's License or NJ Enhanced State ID
- Document from federally recognized Indian tribe that includes name and the name of the federally recognized Indian tribe that issued the document, and shows membership, enrollment, or affiliation with the tribe

For US citizen, if you do not have one of the 4 documents above:

- United States birth certificate or a birth certificate from a US territory **and** a copy of one of the following:
 - Valid driver license with photo or detailed description
 - School photo ID
 - U.S. Military card or draft record, Military dependent's ID card
 - Federal, state, or local government issued photo and/or description ID card
 - Certificate of degree of Indian blood U.S. Native American/Alaska native tribal document with photo or other identifying information
 - U.S. Coast Guard Merchant Mariner card
 - Final Adoption Decree '
 - For children under 19, a clinic, doctor, hospital, or school record including preschool or daycare records.
- For children under age 16, you may use an affidavit (a notarized statement) if you cannot provide one of the documents above.
- For children: (1) a school record showing the child's name and U.S. place of birth, or (2) documentation that a child meets the requirements Child Citizenship Act of 2000 (for children born outside the U.S. of current citizens), or (3) an unnotarized affidavit signed under penalty of perjury by a third party attesting to the child's name, date of birth, and place of birth.

For Northern Mariana Islands citizenship or residency:

- Northern Mariana Card I-873

From Puerto Rico Island:

- Puerto Rican Birth Certificate or proof of Puerto Rican citizenship
- Evidence of birth in Puerto Rico on or after April 11, 1899 and the applicant's statement that they resided in the U.S., a U.S. possession, or Puerto Rico on January 13, 1941

From other US Territories:

- Evidence of Birth in Guam, U.S. Virgin Islands, Northern Mariana Islands, American Samoa, Swains Island or other U.S. Territories: U.S. Virgin Island citizenship or residency:

For Native American, a member of a federally recognized tribe, born outside US or born in Canada :

- A tribal membership card with photo
- Tribal papers showing membership in a federally recognized Indian tribe under section 4(E) of the Self Determination and Education Assistance and proof of birth outside the U.S.

Immigration Status – Immigrant Non-Citizen or Non-Immigrant Visa

Documents need to demonstrate **current** immigration status

- I-551 Permanent Resident card (green card), Acceptable even if expired
- Temporary I-551 resident alien card (temporary green card), Machine Readable Immigrant Visa (with Temporary I-551 language), I-155 stamp on Passport (temporary green card)). To be valid, a temporary I-551 annotation on a visa or passport needs a valid I-94 stamp.
- I-766 employment authorization card (as known as EAD card) (except for Deferred Action for Childhood Arrival (DACA))
- Proof of current visa status (for example, a stamp in your passport, or an approval letter from United States Citizenship and Immigration Services (USCIS))
- Proof of resolution in immigration court
- Notice of hearing from the Executive Office for Immigration Review
- Documents you provided to or received from USCIS or ICE (Immigration and Customs Enforcement), such as:
 - Proof that you sent your application for immigration status
 - I-797 USCIS Notice of Action (This document should contain your immigration status, otherwise may not be proof of immigration status)
 - Order of Supervision from ICE
 - Other documents to or from USCIS or ICE that show your current status
- DS2019 (SEVIS ID, Certification of Eligibility for Exchange Visitor (J-1) Status)
- I-589 Asylum Application
- I-20 (SEVIS ID, Certificate of Eligibility for Nonimmigrant (F-1) Student Status)
- I-327 Permit to Re-enter the United States
- Proof of Current Visas Status (Stamped Passport); to be valid needs a valid I-94 stamp.
- I-571 (Refugee Travel Document)
- I-221S (Order to Show Cause)
- I-130 Approved Petition
- Trafficking Certification Letter or Eligibility Letter for Victims of Trafficking
- Office of Refugee Resettlement or Office of Trafficking in Persons certification or eligibility letter
- I-94 arrival/departure record (also shows visa status)
- Refugee Travel Document (I-571)
- Immigration or another official document showing grant of:
 - Withholding of Removal
 - Asylum
 - Cancellation of Removal
 - Administrative Closure
 - Administrative Order Staying Removal
 - Order of Supervision
- Proof that you lived continuously in the U.S. before 1972 (for example, your lease agreement, proof of employment)
- Approval Letter from the US Citizenship and Immigration Service (USCIS) (I-797A Action)

Battered Immigrant Non-Citizen:

You may be eligible for health coverage if you are an immigrant who is either the spouse, parent or child of a U.S. Citizen or Lawful Permanent Resident who has caused you to live in fear or danger by being emotionally and/or physically abusive to you. To qualify, we will need:

1. Proof of your immigration status
2. Proof/evidence of the harm or abuse (if your immigration document isn't based on being battered)
3. Proof of your relationship with the abuser (if your immigration document isn't based on being battered)
4. Proof that you no longer reside with the abuser.

Household Income

(provide documents for *each member* of your tax household if they have income)

Choose the best documents to support your entire tax household's annual expected income attested to on your application.

Estimating annual tax household income accurately is important to avoid paying back extra advance premium tax credits when you file taxes next year.

Modified Adjusted Gross Income: Including Tax household's Adjusted Gross Income, foreign income, Nontaxable social security benefits (but not SSI benefits), and tax-exempt interest.

Consider whether your tax household's income is similar to last year. If so, last year's 1040 can be used to verify expected income this year. Or if your income source or amounts have changed for any member of your tax household, recent pay stubs or other documents can be used to verify each member of your tax household's expected annual income.

✓ **Income from Job:**

- Current valid pay stubs for 4 weeks with employer information, income amount, pay period or frequency of pay with the date of payment. If a pay stub includes overtime, indicate average overtime amount per paycheck.
- Most recent 1040 (filed federal taxes) with Schedule 1, Schedule 1 shows additional income and adjustments, like capital gains, unemployment compensation, student loan interest, or self-employment tax
- Wage and tax statements: W-2 (if you worked for the same company from the last year)

✓ **Self-Employment Income:**

- Most recent 1040 with Schedule 1.
- Profit and loss statements with company name and time from accounting software or hand-written if you never filed a tax return before as self-employed.
- 1099 forms

✓ **Other Income:**

- **Unemployment Benefits:** Award Letter/Notice of Benefit Determination, monthly or weekly benefit statement from NJ Dept. of Labor
- **Rental Income:** Most recent 1040 with schedule 1, rent checks or receipts, current lease
- **Social Security Income (Retirement, Disability, or Survivors Benefits):** Award letter/Certificate, annual benefit statement, SSA correspondence with award status, current direct deposit statement, SSA-1099
- **Employer letter** on letterhead (with employer information) stating your wage (salary), confirming employment.
- **Alimony for divorces or settlements** prior to 1/1/2019: Court order with alimony amount, signed statement from individual providing alimony with amount and frequency
- **Other Taxable Income** (Interest, Capital Gains, Ordinary/Qualified Dividends, IRA, Pensions & Annuities, Stock Options, Cancelled Debt, Foreign Income (even if it's non-taxable), Gambling Income, Royalty Income, Prizes; Taxable Settlements, Annuity): Proof of strike pay and other benefits from unions

✓ **No income:**

- Any letter or notice from Department of Labor about unemployment (accepted or rejected)
- Letter from a previous employer with termination date
- Self-attestation of no-income

✓ Attestation of Other Income (if other documentation in this list is not available)

✓ Attestation of Frequently Changing Monthly Income (if income changes throughout the year and it is not possible to submit any other income proof)

✓ Proof of bonus/incentive payments

✓ Proof of severance pay

✓ Proof of residuals

✓ Sales receipts or other proof of money received from the sale or exchange of things you own

✓ Work Study: documentation showing hours worked and rate of pay, award letter totaling full amount worked by student for a semester

**Other Minimum Essential Coverage -
Job-based coverage or other Public program coverage**

- ✓ **Loss of Public Coverage/Non-Employer Sponsored Insurance (non-ESI) Minimum Essential Coverage (MEC)**
 - **Medicare A (premium-free Medicare Part A is MEC):** Dated letter or statement from Social Security Administration about you or your family's Medicare eligibility or enrollment records.
 - **Medicaid/CHIP ("NJ FamilyCare"):** Letter or statement from NJ FamilyCare or Medicaid showing your eligibility was denied due to ineligibility for the program or termination, or showing that you get benefits from a program like NJ FamilyCare's "Plan First" which is not minimum essential coverage. Being denied for failure to respond to requests from NJ FamilyCare to verify eligibility information does not qualify as being denied for Medicaid/CHIP.
 - **Veteran's Benefits:** Dated letter from agency indicating loss of coverage; copy of card issued or letter from agency showing future coverage start date; a letter from a government health program.
 - **Peace Corps:** Dated letter with the expiration date for any previous or future health coverage or a letter showing that you never had this type of coverage.
- ✓ **Loss of Job-based coverage (on official stationery if appropriate):**
 - Health Insurance Cards showing coverage end date or a letter containing confirmation of health coverage and expiration date
 - Letter or other documentation from an employer or other documentation with termination of the health coverage
 - Letter from an insurance company, including you or your dependent's cancellation/termination from health coverage
 - A letter regarding start or end of COBRA coverage
 - The following documents may include only some of the information needed to confirm loss or upcoming loss of coverage, so more than one document may need to be submitted to prove loss of coverage---
 - Pay stubs, if you lost employer-sponsored coverage, including:
 - 2 pay stubs from the past 1-3 months, one that shows a deduction for health coverage and another which shows that the deduction ended in the past 60 days
 - If a reduction in work hours caused you to lose coverage, you can submit one previous pay stub that shows that you worked 30 or more hours and a deduction for health coverage, and a pay stub from the past 60 days that shows that you worked less than 30 hours and no deduction for health coverage.
- ✓ **Loss of coverage due to divorce, legal separation, or death:**
 - Document showing you lost coverage because of divorce, legal separation, custody agreement, or annulment within 60 days of submitting your application, including: Divorce or annulment papers that show the date responsibility ends for providing health coverage or proof that you stopped getting health coverage because of your relationship to your former spouse.
 - A death certificate or public notice of death and proof that you were getting health coverage because of your relationship to the deceased person, like a letter from an insurance company or employer that shows the names of the people on the health plan.
- ✓ **If enrolled in a plan that ended before the end of the calendar year:**
 - A dated and signed copy of written verification from an insurance agent
 - A dated letter from your insurance company stating when the coverage year ends.
- ✓ **If do not have a document showing loss of MEC**
 - Submit a letter explaining the coverage you had, why and when you lost it or will lose it, and the reason you cannot provide documents, and include a copy of any other documents that support the loss such as terminations papers that do not mention insurance coverage.

Residency

- ✓ Valid Driver's License or State ID card with address
- ✓ Copy of mortgage or documentation that verifies mortgage payments are being made, if applicable (including Rent/Mortgage receipt)
- ✓ Letter from mortgage holder (financial institution)
- ✓ Lease agreement (or letter from landlord)
- ✓ Bank statement, Utility bills, valid driver's license, other ID with a name and address

Social Security Number

- ✓ Social Security Card
- ✓ Letter from Social security administration stating you are ineligible for Social Security number (SSN) based on immigration status
- ✓ Attestation of having No Social Security Number

Incarceration

- ✓ Release paperwork
- ✓ Documentation providing custody status as 'released' or providing release date
- ✓ Current income documentation (check income section)
- ✓ Signed statement from Parole or probation officer
- ✓ Signed letter from broker, navigator, assister, or community designate organization (such as hospital, re-entry organization, with photo ID)
- ✓ Collateral contact