

Unanswered Questions from TSGACE Webinar on
Maximizing Tribal Premium Sponsorship and Open Q & A Session
May 15, 2015

Q.1. Federal law requires employers to offer coverage to children of employees under 26 years old IF the employer offers dependent coverage. How does this requirement interact with eligibility for Marketplace coverage and premium tax credits?

A.1. At the HealthCare.gov website, there is a series of questions and answers that address this and other questions pertaining to the provision on offer of coverage to children under 26 years old. The link is: <https://www.healthcare.gov/young-adults/children-under-26/>

Q.2. What is the process for resolving discrepancies between information provided by a Marketplace applicant regarding income and other issues and information the Marketplace receives from the IRS of other federal agencies?

A.2. The Center on Budget and Policy Priorities will be hosting a Webinar on Thursday, May 28 from 2:00 pm–3:30 pm (Eastern) titled Data-Matching Issues and Resolving Inconsistencies. This Webinar will address issues and processes regarding data inconsistencies. Registration for the Webinar can be accessed through the following link: <http://www.healthreformbeyondthebasics.org/events/>.

Q.3. I applied for Medicaid coverage with my state, but was determined to be ineligible. If I apply for coverage through the Marketplace, will the Marketplace send me back to the state to re-apply for Medicaid?

A.3. When applying for coverage through the Marketplace (at HealthCare.gov), if your income is within or near a state's eligibility levels for Medicaid, the Marketplace will typically ask if you have been denied Medicaid or CHIP coverage by your state agency since October 1, 2013. Be sure to answer "Yes" to this question. This should allow you to continue with your Marketplace application and not be referred back to your state Medicaid agency.

If you previously applied through the Marketplace, were referred to your state Medicaid agency to determine Medicaid eligibility, and then were determined ineligible for Medicaid by the state, the state will send you a notice explaining this. The state will also send this information to the Marketplace. The Marketplace is to reach out to you indicating you were denied Medicaid, that you may be eligible for Marketplace coverage, and to explain the process to apply for coverage through the Marketplace.

Additional information on the Marketplace application process can be found at the following link: <https://www.healthcare.gov/medicaid-chip/denied-medicaid-coverage/>