Immigrants and NY State of Health

Time: 10:00am – 11:30am
Dial-In Number: 1-855-897-5763
Conference ID: 7935180
Today’s Webinar

– Dial in to listen to the audio portion of the webinar using the audio instructions on your Webex control panel.

– All participants will remain muted for the duration of the program.

– Questions can be submitted using the Q&A function on your Webex control panel; we will pause periodically to take questions.

– A recording of the webinar and any related materials will be available online and emailed to all registrants.
Presenters

• Welcome
  Gabrielle Armenia  Bureau Director of Child Health Plus Policy & Exchange Consumer Assistance

• Today’s Presenter
  Barbara Weiner  Senior Staff Attorney, Empire Justice Center

• Today’s Panelists
  Erin Bacheldor  Medical Assistance Specialist, Division of Eligibility and Marketplace Integration
  Mark Irlando  Assistant Attorney, NY State of Health
  Kathleen Johnson  Director, Bureau of Community Enrollment and WMS Eligibility Processing
  K. Pamela Lavillotti  Project Manager, Bureau of Child Health Plus Policy & Exchange Consumer Assistance
Understanding Household Composition Under MAGI

Here’s what you said:

• More than 97% said it “increased my knowledge of the topic(s).

• More than 97% said “the information will allow me to better assist consumers who have complex household compositions.

“The training was very interesting, the trainers gave clear and accurate explanations!”

“As always, the examples are the most important part to understanding the material. You can never have too many of those. Thank you!”

“Please provide more interactive polling questions. Please also review the questions when people get the answers wrong.”
Quick Review: Identity Proofing

• Identity proofing is the first step in a New York State of Health Application
• The account holder on each application must be identity proofed
• The account holder should be the adult in the household responsible for the application even if the adult is not applying for benefits
We need this if you want health coverage and have a Social Security Number (SSN). Providing your SSN can be helpful even if you do not want health coverage since it can speed up the application process. If you need help getting an SSN, call 1-800-772-1213 or visit www.socialsecurity.gov. TTY users should call 1-800-662-1220.

Social Security Number *

The Marketplace needs a Social Security number (SSN) if you want health coverage and have a SSN or can get one. You may not qualify for health coverage if you do not tell us your SSN, if you have one. We use SSNs to check income and other information to see who is eligible for help paying for health coverage.

Confirms Social Security Number *

I Don't Have One ?
Identity Proofing

Social Security Number *

The Marketplace needs a Social Security number (SSN) if you want health coverage and have a SSN or can get one. You may not qualify for health coverage if you do not tell us your SSN, if you have one. We use SSNs to check income and other information to see who is eligible for help paying for health coverage.

If you do not have a Social Security number (SSN), find out if you can get an SSN and to apply for one: (http://www.socialsecurity.gov/ssnumber/ss5.htm). If you are in the process of applying for or getting an SSN, please check this box.

I Don't Have One

Reason *

Do you have one of the following? *

- New York State Driver’s License
- New York State DMV non-driver ID card
- Client Identification Number (CIN)
- I do not have a driver’s license, non-driver ID card, or CIN
No Documents for Identity Proofing

- Use DOH 5090 – Attestation of Identity
Number Driven System

Rather than requiring paper documentation, NY State of Health asks for:

- The type of document presented
- The numbers that will identify the document holder, e.g.:
  - “A” number
  - I-94 number
Examples of where to find Alien ("A") Number

- **A-number**

- **A-number**

- **A-number**

- **A-number**

- **A-number**

- **A-number**

- Port-of-Entry or office where you were granted adjustment of status
Immigration Agencies

• Department of Homeland Security
  – United States Citizenship and Immigration Service (USCIS)
  – Customs and Border Protection (CBP)
  – Immigration and Customs Enforcement (ICE)
• Department of State – National Visa Center (NVC)
• Department of Justice – Immigration Court
• Office of Refugee Resettlement - ORR
Common Acronyms

- USC – US Citizen
- LPR – Lawful Permanent Resident
- PRUCOL – Permanently Residing Under Color of Law
- VAWA – Violence Against Women Act
- SIV – Special Immigrant Visa (Iraq/Afghanistan)
- SIJ – Special Immigrant Juvenile
- TPS – Temporary Protected Status
- EAD – Employment Authorization Document
- DACA – Deferred Action for Childhood Arrivals
- EWI – Entered Without Inspection
Building the Household
Determining Status

Mark one box that indicates [name]'s current Citizenship or Immigration Status.

- US Citizen
- Naturalized Citizen
- Immigrant Non-Citizen
- Non-Immigrant Visa Holder
- Other
Citizenship or Immigration Status

Immigration status is made up of many different categories. The Marketplace needs to know your immigration status to determine your level of eligibility and the help you may be able to get.

Mark one box that indicates Susanna's current Citizenship or Immigration Status.*

- US Citizen
- Naturalized Citizen
- Immigrant Non-Citizen
- Non-Immigrant Visa Holder
- Other

If you do not fit into any of the Citizenship or Immigration Status categories above but you are lawfully living in the United States, do NOT choose "Other" as your immigration status. Please choose either "Immigrant Non-Citizen" or "Non-Immigrant Visa Holder," depending on which category best describes your immigration status.
“Lawfully living in the U.S.”

- If the consumer does not know the answer to the question “what is your citizenship or immigration status,” before checking “other” ask:
  - Has the consumer had any contact with the immigration service?
  - Is the consumer in the process of applying for an immigration benefit?
  - Does the consumer have evidence of any correspondence with immigration or the Department of State concerning their status?
  - Even if the consumer does not have lawful status, does he or she have permission to reside here, even if not permanently?

- If the consumer answers yes to any of these questions, do NOT check “Other”.
Are you a US Citizen?

- **By Birth** (don’t forget Puerto Rico, US Virgin Islands and Guam)
- **By Acquisition** (born abroad to parents, at least one of whom is a US citizen at the time of your birth)
- **By Derivation** [under 18 when your parent(s) in whose custody you reside naturalize(s)]
- **Through Naturalization**
US Citizen

• If you check US Citizen and your Social Security Number is confirmed as belonging to a US citizen, no documentation will be requested.

• If you’re not a US citizen by being born in the U.S. and your records with Social Security have never been updated to reflect your acquired citizenship status, documentation must be provided.
Certification of Report of Birth

Certification of Report of Birth
of a United States Citizen

This is to certify that the birth of IMA SAMPLE
born at DESOLATION
on APRIL 1, 1996,
was registered with the Consular Service of the United States and a
Consular Report of Birth was issued at BEIJING, CHINA
on SEPTEMBER 10, 1996.

Father

MOTHER SAMPLE

Date of Birth APRIL 1, 1976

Mother

DADDY SAMPLE

Date of Birth APRIL 1, 1975

This certificate is not valid if it has been altered in any way whatever or if it does not bear the seal and signature of the official issuing the same.

Certification of Report of Birth Issued
by the U.S. Department of State (DS-1350)
For naturalized, acquired or citizenship by derivation:

- **Mark Naturalized** and provide one of the following documents:
  - a Certificate of Naturalization OR
  - a Certificate of Citizenship
Where to find Certificate Number

Certificate Number

No. S00000000

No. A50000000

NYSTATEofHealth
The Official Health Plan Marketplace
For non-native born USC who don’t have Certificates...

…but who do have a US Passport, go through the following steps:

• Choose “US Citizen” instead of “Naturalized Citizen”
  o SSA may validate citizenship based on SSN data match.
  o If no data match:
    ➢ upload Passport
    ➢ citizenship can be validated based on this document.
No Certificates and No US Passport

• If consumer has no US passport and has lost his Certificates, he can apply for replacement of the Certificate of Citizenship or Naturalization
• For low income applicants, fee waiver is available (form I-912 on USCIS website)
• Submit proof to the Marketplace that the replacement application has been received by USCIS (I-797 Notice of Action showing receipt).
Citizenship or Immigration Status
Immigrant Non-Citizen

Immigrants and non-citizens usually live and work in the United States with the permission of the United States Citizenship and Immigration Services (USCIS). Some immigrants include: (1) "Green Card" holders also known as Lawful Permanent Residents, (2) people who have been granted asylum because of political or religious persecution, and (3) refugees. Non-citizens also include people living in the U.S. permanently and who have some kind of legal status with the USCIS. Pregnant women and children under 19 may be eligible for health insurance regardless of their immigration status.

If you do not fit into any of the Citizenship or Immigration Status categories above but you are lawfully living in the United States, do NOT choose "Other" as your immigration status. Please choose either "Immigrant Non-Citizen" or "Non-Immigrant Visa Holder," depending on which category best describes your immigration status.
Immigrant Noncitizen

• This is the box to check for consumers who have evidence that the immigration services are aware of their presence and have either given permission for them to remain here or have demonstrated an intent not to pursue their removal.

• Would include all PRUCOL categories as well as most “lawfully present” with the exception of those with nonimmigrant visas.
Immigrant Non-Citizen

Federal Medicaid, CHPlus, QHP and Essential Plan (EP) Eligible

5 Year Bar (Fed. MA)
- Permanent Residents (LPRs)
- Granted Parole for period of more than 1 year (not medical)
- Battered spouses and children of USC or LPR petitioning under VAWA

NOTE: Children and pregnant women in these statuses do not have a 5 year bar.

- Cross border Native Americans
- Refugees, asylees, granted withholding of removal
- Cuban/Haitian Entrants (granted parole status after October 1980)
- Certified victims of Trafficking
- Amerasians
- Iraq or Afghan SIV
Immigrant Non-Citizen

Common Verification Documents

• I-94 Arrival Departure Record
• I-797 Notice of Action
• Immigrant Visa or Green Card
• Refugee Travel Document
• EAD (look at category)
• Immigration Court Orders
• ORR certification (trafficking victims)
Immigrant Non-Citizen

- Refugee I-94
Immigrant Non-Citizen

I-797 Notice of Action

- Battered Immigrant under VAWA
Immigrant Non-Citizen

Green Card

Color-shifting ink (gold to green)

Laser engraved "Swoosh"

Infogram (holographic image)

United States of America PERMANENT RESIDENT

Surname
SPECIMEN

Given Name
TEST V

USCIS#
000-000-001

Category
RE8

Country of Birth
Utopia

Date of Birth
01 JAN 1920

Sex
F

Card Expires:
08/21/07

Resident Since:
08/21/07

Laser engraved fingerprint

Embedded radio frequency identification (RFID) technology

Unique background design
Immigrant Non-Citizen

Employment Authorization (EAD)

- Alien Registration Number
- Card Number
- Category Code
- Expiration Date
Immigrant Non-Citizen

Immigration Court Order

ORDER OF THE IMMIGRATION JUDGE

This is a summary of the oral decision entered on ___________. This memorandum is solely for the convenience of the parties. If the proceedings should be appealed, the Oral Decision will become the official decision in this matter.

☐ The respondent was ordered deported to _________.
☐ The respondent's application for voluntary departure was denied and respondent was ordered deported to _________.
☐ The respondent's application for voluntary departure was granted unless _________, with an alternate order of deportation to _________ or _________.
☐ The respondent's application for asylum was ( ) granted ( ) denied ( ) withdrawn ( ) other.
☐ The respondent's application for withholding of deportation was ( ) granted ( ) denied ( ) withdrawn ( ) other.
☐ The respondent's application for suspension of deportation was ( ) granted ( ) denied ( ) withdrawn ( ) other.
☐ The respondent's application for waiver under Section ___________ of the Immigration and Nationality Act was ( ) granted ( ) denied ( ) withdrawn ( ) other.
☐ The respondent was ( ) granted ( ) denied ( ) withdrawn ( ) other. Proceedings were terminated.

The application for adjustment of status under Sections (216) (216A) (245) (249) was ( ) granted ( ) denied ( ) withdrawn ( ) other. If granted, it was ordered that the respondent be issued all appropriate documents necessary to give effect to this order.

☐ The respondent's status was reissued under Section 246.
☐ Other _________.
☐ The respondent was advised of the limitation on discretionary relief for failure to appear as ordered in the Immigration Judge's oral decision.

Signature of Immigration Judge

Date: _____________

Appeal: RESERVED/REWARDED (A3748) 10-31-79
Immigrant Non-Citizen

**Immigrant Visa**

![Immigrant Visa Image]

- **Issuing Post Name:** US CONSULATE GENERAL LONDON
- **Surname:** TRAVELER
- **Given Name:** HAPPY PERSON
- **Passport Number:** 555123ABC12
- **Registration Number:** LND200416000201
- **Nationality:** GRBR
- **Gender:** F
- **Marital Status:** MARR
- **IV Category:** IR1
- **IV Issue Date:** 24JUN2004
- **IV Expires On:** 23DEC2004

**Disclaimer:**

Upon endorsement serves as temporary I:551 evidencing permanent residence for 1 year.
Lawfully Residing Non-Citizen Immigrants are eligible for State MA, CHPlus, QHPs and EP.
Immigrant Non-Citizen

Lawfully Residing Immigrants

- Approved petition with pending LPR application
- TPS
- Deferred Action (not DACA)
- Parole of < 1 year
- Stay of removal
- Order of Supervision with EAD
- Applicant for SIJ
- Applicant with EAD, applying for:
  - Cancellation of Removal
  - Asylum or Withholding of Removal
  - TPS
  - Registry
  - Adjustment under LIFE Act
PRUCOL Only, Eligible for NYS Medicaid & CHPlus

- Applicants for any immigration benefit
- Immediate relatives with approved I-130
- DACA/DAPA (including applicants)
- Undocumented noncitizen who can show continuous residence since on or before 1/1/1972
- Deferred action request pending for 6 months
- Noncitizen residing in US with knowledge and permission or acquiescence of USCIS/ICE
Residing with Knowledge and Permission or Acquiescence

• Introduction of Prosecutorial Discretion
• Noncitizens encountered by ICE who are not enforcement priorities
  o Not placed into removal proceedings
  o Placed in proceedings but proceedings are terminated or administratively closed
Immigration Court
Order Terminating Proceedings

TO: JOY TROTTER, ESQ.
In the Matter of

Respondent

ORDER OF THE IMMIGRATION JUDGE

This is a summary of the oral decision entered on AUGUST 12, 2009. This memorandum is solely for the convenience of the parties. If the proceedings should be appealed or reopened, the oral decision will become the official opinion in the case.

[ ] The respondent was ordered removed from the United States to or in the alternative to.

[ ] Respondent’s application for voluntary departure was denied and respondent was ordered removed to or in the alternative to.

[ ] Respondent’s application for voluntary departure was granted until with an alternate order of removal to.

Respondent’s application for:
[ ] Withholding of removal was ( ) granted ( ) denied ( ) withdrawn.

[ ] A Waiver under Section ___ was ( ) granted ( ) denied ( ) withdrawn.

[ ] Cancellation of removal under section 240A(a) was ( ) granted ( ) denied ( ) withdrawn.

Respondent’s application for:
[ ] Cancellation under section 240A(b)(1) was ( ) granted ( ) denied ( ) withdrawn. If granted, it is ordered that the respondent be issued all appropriate documents necessary to give effect to this order.

[ ] Cancellation under section 240A(b)(2) was ( ) granted ( ) denied ( ) withdrawn. If granted, it is ordered that the respondent be issued all appropriate documents necessary to give effect to this order.

[ ] Adjustment of Status under Section ___ was ( ) granted ( ) denied ( ) withdrawn. If granted, it is ordered that the respondent be issued all appropriate documents necessary to give effect to this order.

[ ] Respondent’s application of ( ) withholding of removal ( ) deferral of removal under Article III of the Convention Against Torture was ( ) granted ( ) denied ( ) withdrawn.

[ ] Respondent’s status was rescinded under section 246.

[ ] Respondent is admitted to the United States as a ___ until ___.

[ ] As a condition of admission, respondent is to post a $ ___ bond.

[ ] Respondent knowingly filed a frivolous asylum application after proper notice.

[ ] Respondent was advised of the limitation on discretionary relief for failure to appear as ordered in the Immigration Judge’s oral decision.

[XX] RESPONDENT’S MOTION TO TERMINATE IS GRANTED WITH THE CONCURRENCE OF THE U.S. GOVERNMENT.

Date: Aug 28, 2009

PHILIP J. MAVARAS JR
D.SR. Immigration Judge

Appeal: Waived/Reserved

Due By:
Questions?
Non-Immigrant Visa Holders

Eligible for State Medicaid, CHPlus, QHP & EP
Non-immigrants are people with short term visas such as tourists, foreign students, or temporary workers. Some non-immigrant children may be eligible for Child Health Plus. Generally, tourists and foreign students are not eligible for public health care coverage because of residency requirements. You may be eligible Medicaid for the treatment of an emergency medical condition, or a special program for children, pregnant women or people with HIV/AIDS.

If you do not fit into any of the Citizenship or Immigration Status categories above but you are lawfully living in the United States, do NOT choose "Other" as your immigration status. Please choose either "Immigrant Non-Citizen" or "Non-Immigrant Visa Holder," depending on which category best describes your immigration status.
Nonimmigrant Visa Holders

- H visas – worker
- J visas – cultural exchange
- F and M visas – students
- O and P visa – artists, scientists, athletes, etc.
- K3/K4 visas – spouse/child of USC
- U visa – victim of crime
- V visa – spouse of LPR
Common form of Documentation – I-94

• The I-94 Arrival - Departure record is a small white card that may have been given when the consumer arrived in the U.S.
• Customs and Border Protection (CBP) is no longer providing cards since April 30, 2013.
• Now available for download from the border control website.
• Contains the consumer’s name and where they are from. The number needed is across the top.

https://i94.cbp.dhs.gov/I94/request.html

• Website provides the most recent I-94 admission record and limited travel history.
• The most recent I-94 may be printed and used as evidence of a lawful admission.
• The I-94 number is located on the document itself across the top.
Examples of Non-Immigrant I-94

- Paper Card
- Electronic Copy
Non-Immigrant Visa Holder

Non-Immigrant Visa
Your Petition for U Nonimmigrant Status has been approved. Attached below please find a completed Form I-94, Arrival-Departure Record, indicating that you have been granted U nonimmigrant status for a period of 4 years.

Employment Authorization:
You are authorized to work in the United States for the validity period of your U nonimmigrant status. Your Employment Authorization Document will be mailed to you separately.

Adjustment of Status:
Federal law provides that you may be eligible to adjust your status to that of a lawful permanent resident. A U-1 nonimmigrant may submit an application for adjustment of status after he/she has been physically present in the United States for a continuous period of at least 3 years after the date he/she was admitted as a U-1 nonimmigrant.

Derivative U Nonimmigrant Classification:
You may request derivative U nonimmigrant status for qualifying family members. To request derivative status, you must submit a Form I-518 with Supplement A in accordance with the instructions printed on the form. If you included qualifying family members on your original application, a notice of decision on the derivative petition(s) will be mailed to you separately.

Departing from the United States:
Aliens with U nonimmigrant status may travel outside the United States. However, in order to return to the United States, you must obtain a U nonimmigrant visa for re-entry to the United States unless you are visa exempt or obtain a waiver. Also, if you are accused "unlawful presence" prior to obtaining U nonimmigrant status, you may be unable to re-enter the United States and may need to obtain a waiver of inadmissibility prior to or upon your return to the United States.

Please see attached additional information on the back. You will be notified separately about other cases you filed.

U.S. Citizenship and Immigration Services
Vermont Service Center
75 Lowell Street
St. Albans, VT 05479
Customer Service Telephone Number 1-801-527-4888

Please tear off Form I-94 printed below and staple to original I-94 if available.
Non-Immigrant Visa Holders

Residency Review Questions

1. Have you or your child(ren) applied to adjust your status to become a legal permanent resident? Yes/No
   • If yes, please provide a copy of your application to adjust status or some other documentation proving this. Or Mark “Immigrant Non-Citizen”

2. Do you currently work? Yes/No
   • If yes, how long have you worked for your current employer? Please provide pay stubs or letter from your employer. _____ years / _____ months

3. Do your child(ren) go to school? Yes/No
   • If yes, a letter is needed from the school that states that the child attends school there and indicates how long he/she has attended.

4. Do you own your own home? Yes/No
   • If yes, a copy of the mortgage or documentation that verifies that mortgage payments are being made is needed.

5. Do you rent a house or apartment? Yes/No
   • If yes, a copy of lease or rental agreement is needed.
Residency Questions

• All consumers who check “Non-immigrant visa holder” will have to answer these 5 questions.

• If parent answers ‘yes” to any one of these questions, they should also answer “yes” for the child to at least one question. Answering “yes” to the school question is recommended if the child attends school.

  o For children who are not attending school, recommend answering “yes” for the child on the same question to which the parent answered “yes”.

Non-Immigrant Visa Holders
Non-Immigrant Visa Holders

Residency Test

Have you or your child(ren) applied to adjust your status to become a legal permanent resident? *

- Yes
- No

Do you work? *

- Yes
- No

How long have you worked for your current employer? *

1 Years and 3 Months

Does your child(ren) go to school? *

- Yes
- No

Do you own your own home? *

- Yes
- No

Do you rent a house or apartment? *

- Yes
- No
Documents requested when a consumer answers “yes” to residency review questions 2-4

| Residency For certain non-immigrant visa holders | - A letter from the current employer stating how long the individual has worked there. If the individual has recently changed jobs, a letter from the previous employer is also needed with the same information.
- A letter from the school stating that the child attends school there and indicates how long he/she has attended.
- A copy of mortgage or documentation that verifies that mortgage payments are being made, if applicable.
- A copy of the lease agreement, if applicable |
Citizenship or Immigration Status
Other

Check this box if you are not a U.S. citizen or do not have a valid immigration status or visa. Children who are New York State residents and do not have other health insurance qualify regardless of immigration status. You may be eligible Medicaid for the treatment of an emergency medical condition, or a special program for children, pregnant women or people with HIV/AIDS.

If you do not fit into any of the Citizenship or Immigration Status categories above but you are lawfully living in the United States, do NOT choose "Other" as your immigration status. Please choose either "Immigrant Non-Citizen" or "Non-Immigrant Visa Holder," depending on which category best describes your immigration status.
Check “Other” Only If…

- Consumer has no evidence that USCIS or ICE knows they are here and has given them permission to stay or is acquiescing in their continued residence, for example:
  - Consumer entered without inspection or has overstayed his or her visa and has no application pending with immigration
  - Consumer has been ordered removed/deported and does not have a stay and/or is not under an order of supervision
“Other”

Eligible for:
• Emergency Medicaid
• CHPlus
Questions?
We’re here to help!

CACMail@health.ny.gov
- Eligibility Assistance
- Application Errors
- Technical/System Issues with an Application
- Document Review Assistance

Assistor.Admin@health.ny.gov
- Staff Changes
- Assistor Account Issues
- Training/Recertification
Reminder: Recertification Process

• Assistors must attend or view each NY State of Health Recertification Webinar in order to be recertified on NY State of Health.

• Please use the following link to report that you have viewed this https://www.surveymonkey.com/r/Assistor_REPORTING_Immigration

• If you are unable to access Survey Monkey, please have your supervisor contact Assistor.Admin@health.ny.gov and NYSDOH will send your supervisor the manual process for recertification reporting.
Previous NY State of Health Assistor Recertification Reporting Surveys

https://www.surveymonkey.com/r/Assistor_Reporting_Special_Populations_1

https://www.surveymonkey.com/r/Assistor_Reporting_Special_Populations_2

https://www.surveymonkey.com/r/Assistor_Reporting_Household_Composition

https://www.surveymonkey.com/r/Assistor_Reporting_Immigration
NY State of Health Assistor Recertification Reporting

1. Please select your organization’s name from the drop down menu. If your organization's name does not appear in the drop-down, please enter it in the box labeled "Other" just below.

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My Clients

- Employer
- Employee
- Individual

Select Individuals of an Associated Agency or Select All.

Select Associated Agency:
- Department of Health

Search Individual

Filter Options
NY State of Health Assistor Recertification Reporting

Certification Number & Assistor Account Number:

* 5. Please list the first three digits of your Assistor certification number. This number should be the same for all Assistors in your agency.

* 6. Please list the last 6 digits of your Assistor certification number. This number is unique to you.

* 7. Please enter your Assistor account number. Must start with AC followed by 10 numbers, no spaces.
In order to find your **Certification Number & Assistor Account Number**:

- Sign in to your Assistor account
- Generate a token
- Assistor Account Number and Certification Number appear on the left of the page under Account Info
- Identification number is the SAME as Certification Number.
Attest to the Date you watched this Assistor Recertification Webinar

8. Please attest to the date that you watched each Assistor Recertification Webinar.

Special Populations (1) - College Students, Minors Living on Their Own, Former Foster Care Youth, Homeless Individuals, and Survivors of Domestic Abuse.

- Should be the date of the live webinar OR a date after the live webinar.
  - Should never be a date before the live webinar was delivered.
Thank you for joining us!

• Watch for surveys
  o Recertification Evaluation of Webinar: Immigration
  o NY State of Health Assistor Recertification Reporting – Immigration

• Watch for the video to be posted to http://info.nystateofhealth.ny.gov/SpringTraining

Next Recertification Training:
Title: Understanding the Uninsured
Date: September 9, 2015