NJ FamilyCare/Medicaid – Non-Citizen Disenrollment Outreach

UPDATED Quick Reference Guide for Frontline Staff – After 10/1/2026

Non-citizen eligibility: what changed as of 10/01/2026:

- A new federal law (H.R. 1 / OBBBA) changed which non-citizens can get NJ FamilyCare/Medicaid
- Effective October 1, 2026, some non-citizens *lost coverage* based on their immigration status
- Between July and September 2026, NJ FamilyCare sent a letter to members whose qualifying immigration status could not be verified
    - Members who received outreach letters were required to submit the necessary documents to help DMAHS verify their status
    - Members who did not respond or were found ineligible were disenrolled on September 30, 2026
- After October 1, 2026, new non-citizen rules will be incorporated into standard eligibility and enrollment processes

Key guidance to help members after 10/01/2026:

- If a member submitted documents before 9/30/2026 and has not received an eligibility determination, they will remain covered while DMAHS completes their review. Members will receive a letter letting them know they still have coverage and another letter once their outcome is determined.
- **It is not too late to submit documents** – members who did not respond before 9/30/2026 can still submit their documents until 12/31/2026. Documents should be submitted to HMS (the State's vendor) using one of these three ways:
    - **Online (preferred):** www.VerifyOS.com —
        - Log in with their reference number and date of birth (a password is not necessary)
        - Use browser settings to translate the portal if needed by the client
    - **Fax:** 1-877-223-8478 —
        - One fax transmission per member
    - **Mail:** PO Box 165308, Irving, TX 75016-9923 —
        - **Do not** mail original documents, **only copies**
        - **Do not** mail multiple members' documents in the same envelope
- If a member submits documents for the first time after 9/30, it may take 30 days or longer to get a result. Members will receive a letter with their outcome once DMAHS finishes their review.
    - If the member is found eligible, their coverage will be reinstated back to 10/1
    - If the member is found ineligible, the member will not receive coverage
- If a member believes NJ FamilyCare terminated (ended) their coverage by mistake, they may appeal the decision within 30 days of the determination, using the Fair Hearing Form attached to their outcome letter
- If a member is up for renewal or submits a new application, their eligibility will be determined using the new non-citizen H.R.1 rules
- If members/applicants need more help, refer them to Legal Services of New Jersey: 1-833-576-5776 (TTY: 711)

Please do not provide an educated guess on a member's continued eligibility. It is important to submit all documents to HMS because electronic verifications may pick up on something you missed.

More information for members: www.nj.gov/humanservices/dmahs/obbba/noncitizen.shtml

More information for stakeholders: https://www.nj.gov/humanservices/dmahs/obbba/stakeholders/

Questions? Email: MAHS.FederalChanges@dhs.nj.gov