

The Commonwealth of Kentucky



## Frequently Asked Questions



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## General kynect benefits Information

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### Q1. What is kynect benefits?

kynect benefits is a self-service portal used by the Commonwealth to provide Kentuckians with assistance benefits from a variety of benefit programs including Medicaid, Supplemental Nutrition Assistance Program (SNAP), Kentucky Transitional Assistance Program (KTAP), Family Assistance Short Term (FAST), Child Care Assistance Program (CCAP), and Kentucky Integrated Health Insurance Premium Payment (KI-HIPP) Program.

### Q2. How do each of the kynect benefits programs assist Kentuckians?

Descriptions of the benefit programs Kentuckians can access through kynect benefits are provided below.

- **Medicaid:** provides health care for eligible low-income Kentucky Residents including children, families, pregnant women, the aged and the disabled. Medicaid offers different programs and services depending on eligibility and medical needs
- **Qualified Health Plans:** allows a Resident to buy a qualified health insurance plan through kynect health coverage
- **SNAP (Supplemental Nutrition Assistance Program):** helps people with little or no money buy food for healthy meals at participating stores. SNAP benefits increase a household's food buying power when added to the household's money
- **KTAP (Kentucky Transitional Assistance Program) / TANF (Temporary Assistance for Needy Families):** provides financial and medical assistance and supportive services to help families achieve economic self-sufficiency
- **FAST (Family Assistance Short Term):** provides financial assistance to help families resolve short-term needs (i.e., rent, mortgage, transportation fees) and achieve economic self-sufficiency. FAST benefits last up to three months and may be an alternative to ongoing KTAP benefits.
- **CCAP (Child Care Assistance Program):** provides subsidies to help families pay for quality childcare while enabling parents to work, further their education, etc.
- **KI-HIPP (Kentucky Integrated Health Insurance Premium Payment):** a voluntary Medicaid program that helps eligible policy holders pay for the cost of an **Employer-Sponsored Insurance (ESI)** plan through reimbursements

### Q3. Who is using kynect benefits?

kynect benefits is used by stakeholders across the Commonwealth including Kentucky Residents, kynectors, Authorized Representatives, community partners, DCBS staff, and more.

#### Q4. What languages are available in kynect benefits?

Residents may change the language of kynect benefits to *English* or *Spanish* and get interpreter information for other languages from the language drop-down in the navigation pane.

If the Resident selects *English* or *Spanish* from the navigation pane, and the selection is different from the current site language, the website is reloaded in the new chosen site language.

#### Q5. Why was I automatically logged out of kynect benefits?

kynect benefits automatically logs Residents out of the system after fifteen minutes of inactivity.

#### Q6. What can I access from the kynect benefits footer?

The footer is the same for all Residents on all screens in kynect benefits and contains the following actions:

Item:	Action:
Help & FAQs	The <b>Help &amp; FAQs</b> screen is opened in a new browser tab
FAQs	The <b>FAQs</b> screen is opened in a new browser tab
Find DCBS Office	The Resident is taken to the <b>Find DCBS Office</b> screen
Cabinet of Health & Family Services (CHFS)	The <b>Cabinet of Health &amp; Family Services</b> homepage is opened in a new browser tab
Privacy Policy & Terms of Use	The <b>Privacy Policy &amp; Terms of Use</b> screen is be opened in a new browser tab
Contact Us	The <b>Contact Us</b> screen is opened in a new browser tab
(kynect benefits) 1-855-306-8959	This triggers a mobile phone to dial: <1-855-306-8959>
(Technical Assistance) 1-844-407-8398	This triggers a mobile phone to dial: <1-844-407-8398>
CHFS.Listens@ky.gov	This triggers a mobile phone to draft an email message to: <a href="mailto:CHFS.Listens@ky.gov">CHFS.Listens@ky.gov</a> - This email address is for reporting complaints.
Report Fraud	The Resident is taken to the <b>Report Fraud</b> screen
Get Local Help	The Resident is taken to the <b>Get Local Help</b> screen

## KYID

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### Q7. What is KYID?

To access a variety of systems across the Commonwealth including kynect benefits, Residents must create a registration with the KYID. To begin this registration process, Residents can go to the kynect benefits home page and select **sign up**.

### Q8. Does a Resident need a KYID account to access kynect benefits?

Yes – Residents must have a KYID account to access kynect benefits, as they use their KYID username and password to access kynect benefits. KYID accounts and passwords must not be shared.

However, Residents can still access kynect benefits without creating a KYID account but cannot access the personalized dashboard and other features that allow Residents and additional kynect benefits users to follow or track progress. Additionally, Residents cannot initiate or submit a benefits application through kynect benefits without a KYID account.

### Q9. Can I reset my KYID password?

Yes – a Resident can select **Forgot/Reset Password** if they forget their KYID password. Residents enter their primary email and consent to the system notice, and select next. On the Password screen, Residents can select the Forgot Password link.

### Q10. What if I already have an account with KYID?

Someone with an existing KYID account should use the same account information when applying for benefits through kynect benefits.

### Q11. What are some tips for navigating KYID?

Some tips and best practices for navigating KYID include:

- KYID performs optimally in Google Chrome.
- Use Incognito on Google Chrome if multiple Residents, each with a KYID account, access the same computer.
- The Resident's email address should be unique and valid – this is used to verify the KYID account and reset passwords. The email address is equivalent to the KYID username.

### Q12. What is Identity/ID proofing?

Identity proofing is an additional layer of security during the KYID onboarding process. When creating a KYID account, Residents are asked to provide a set of core credentials including:

Required:

- **Full Legal Name**
- **Date of Birth**
- **Gender**

Optional:

- **Social Security Number**
- **Current Residential Address**
- **Personal Telephone Number**

Experian uses these core credentials to locate personal information in Experian and generate a set of questions to verify a Resident's identity to the appropriate level of assurance with the information provided. Most Residents can complete the ID proofing process in less than five minutes. Experian is required by law to securely maintain this data for seven years.

## kynectors

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### Q13. Who are kynectors?

kynectors are trained individuals in the community who assist Kentucky Residents in applying for health coverage, specifically Medicaid and KI-HIPP.

### Q14. What displays on the kynect benefits Dashboard for kynectors?

The kynect benefits Dashboard for kynectors displays key KYID information for kynectors such as their kynector ID, their Organization, Coverage Area, their **Public** vs. **Private** status, and the number of Residents the kynector is serving. kynectors can also search for individuals they serve.

### Q15. How can kynectors become a Resident's kynector?

The kynect benefits redesign increases the ability for kynectors to become the kynector on a Resident's case. In addition to the **Appendix B** form, kynect benefits allows kynectors the ability to request access to a Resident's case through a request notification sent to Residents based on entered communication preferences or through verbal consent provided by the Resident. Requesting access to a Resident case begins from the **Request Access** button from the kynect benefits kynector Dashboard.

### Q16. How can kynectors manage Residents from the kynect benefits kynector Dashboard?

Kynectors can manage their Residents from the kynect benefits kynector Dashboard by:

- **Searching for Residents**
- **Downloading Resident lists to an excel file**
- **Viewing Residents' notifications**
- **Requesting access to a Resident's case**
- **Organization Administrators can reassign Residents to another kynector**

### Q17. How can Residents find a kynector?

Residents can find a kynector by using **Get Local Help**. Residents are directed to the **Get Local Help** screen. Here Residents select the **Find a kynector** button.

### Q18. What is an authorized representative?

An authorized representative is a trusted family member who can access a Resident's case or application.

### Q19. What is an insurance agent?

An insurance agent is an individual who can help Residents apply for Medicaid or select health coverage plans.

**Q20. How can Residents find an insurance agent?**

Residents can find an insurance agent using the **Get Contacted** button in the top navigation of kynect to navigate to the **Get Local Help** screen. On the **Get Local Help** screen, Residents can select **Get Contacted** to fill out a kynect On Demand form which allows a local insurance agent to contact the Resident back via email or call to help them with selecting a health plan. Residents can also select **Find an Insurance Agent** to look for an insurance agent to add to their case.

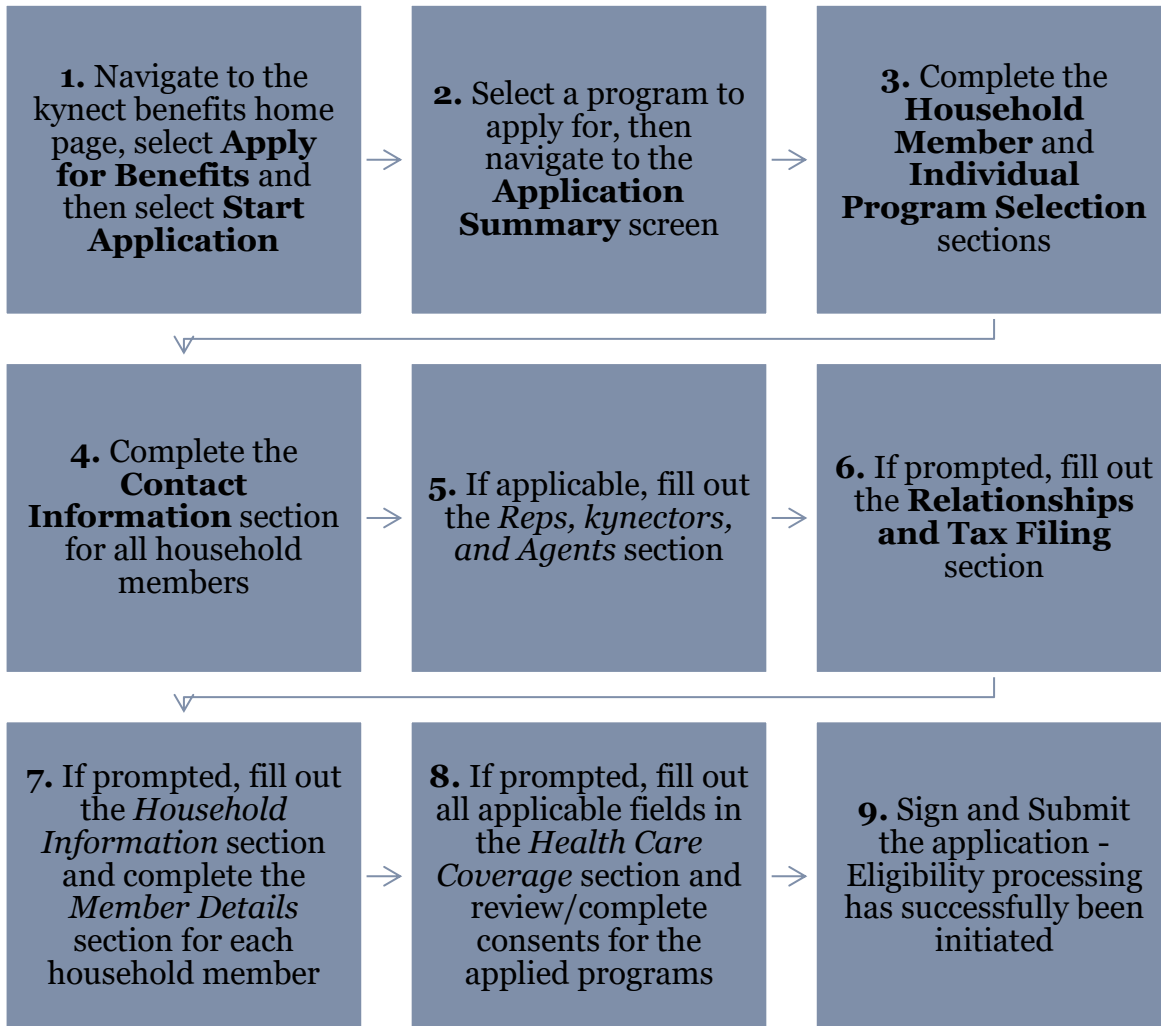
## **Application Intake**

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**Q21. What is the Benefits Application?**

The Benefits Application allows Residents to apply to receive benefits from any of the available programs in kynect benefits. The Resident inputs basic contact information for all household members, selects the programs for which they are applying, and enters basic household information.

**Q22. What is the process to submit my Benefits Application?**



**Q23. How do I know which fields to fill out in my application?**

The kynect benefits system prompts Residents to answer questions specific to the program they are applying for; if Residents do not fill out a required field for their program application, the system notifies them before they can move forward in the application.

**Q24. What is a standard medical deduction (SMD)?**

The standard medical deduction (SMD) is for Residents with medical expense between \$35 and \$172. Residents with verifiable qualifying medical expenses may be entitled to receive a deduction of \$137 when applying for supplemental nutrition assistance program (SNAP) or when they qualify for expedited SNAP benefits.

**Q25. How does a standard medical deduction (SMD) and a medical deduction differ?**

A Resident may have medical expenses for which they may receive a deduction for when calculating their SNAP or expedited SNAP benefit amounts. Residents with verifiable medical expenses of at least \$35 but do not exceed \$172 are eligible for the standard medical deduction of \$137. Residents with verifiable medical expenses exceeding \$172 are eligible to receive an allowable medical deduction of \$35. Any Resident that does not have verifiable medical expenses or those expenses are less than \$35 are not eligible to receive a medical deduction.

**Q26. How many days do I have to complete my Benefits Application?**

A Resident may have only one unsubmitted application at any given time and the Resident has 8 calendar days to submit the application they have started.

**Q27. What are the sections statuses during Application intake?**

Below are the descriptions of the section statuses seen in kynect benefits application.

<b>Section Status:</b>	<b>Description:</b>	<b>Action Available:</b>
<b>Not Started</b>	Section has not been started	<b>Start</b>
<b>In Progress</b>	Section started but not completed	<b>Continue</b>
<b>Completed</b>	Section completed	<b>Edit</b>
<b>Review Required</b>	An already completed section is affected by changes you have made	<b>Edit</b>

**Q28. Will kynect benefits contact me if I enter my cell phone number during Application intake?**

The phone number is used to send text messages if the Resident chooses to opt in to receive text messages. Selected contact method preferences are used for correspondences and tax-related forms. DCBS case workers may contact Residents at this number if clarification or additional verification is needed. This may occur if an application is initiated on kynect benefits and then later requires worker action.

**Q29. How is the “Tax Filing” section completed during Open Enrollment?**

During open enrollment period, the Resident indicates whether a Resident has the same tax status next year as the current year and, if not, enters the information for that Resident’s tax status for the next year.

**Q30. Can I apply for benefits if I am not a U.S. citizen?**

Yes. If Residents indicate they are not a U.S. citizen, the **Not a U.S. Citizen** screen appears where they must fill out details on their immigration status and whether they have an alien sponsor. This screen appears during the *Member Details* portion of the application. After completing all fields on this screen and selecting **Next**, a services call is made to verify entered citizen identification information.

**Q31. What Steps should I take to complete the “Sign & Submit” section of the application?**

In the *Sign & Submit* section, Residents can review relevant policies and then sign their application to submit it. Residents may also request a voter registration application to be mailed to them.

On the **Signature Page** for Benefits Application, Residents must do the following in order to submit their application:

1. Read and agree to the **Terms of Agreement** for applying for benefits
  - a. Note: The **Terms of Agreement** vary based on program
2. Answer minimal final questions
3. Enter the Resident’s name to electronically sign

## **Application Results and Next Steps**

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**Q32. What are my “eligibility results”?**

The **Eligibility Results** screen provides Residents with the requested benefits results for the household members, based on the information provided within the Application intake. The results are organized by program and the household members’ names are listed with tiles for each of the programs for which each Resident applied.

**Q33. How do I know next steps after signing and submitting my application?**

Next steps associated with the actionable statuses are displayed after a Resident signs and submits their application and views their eligibility results.

Possible Next Steps include:

- **Upload Verification Documents**
- **Complete an Interview**
- **Apply for a Medicaid Waiver**
- **Visit HealthCare.gov**
- **Residents may be eligible for other programs**
- **Need more help or information?**

## **Child Care**

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**Q34. How are Residents able to find Child Care providers in kynect benefits?**

The *Child Care Provider Search* section allows Residents to search for Child Care Providers and find Child Care provider information such as provider name, All STARS level rating, location, and phone number. The kynect benefits provider search allows

Residents to favorite providers and filter by provider location, All STARS level rating, name, type, availability, and services provided.

**Q35. What is the All STARS rating system?**

The All STARS rating system is administered by the Cabinet for Health and Family Services and provides Kentuckians a five-star rating on the quality of Child Care Providers. kynect benefits shows Residents the All STARS level rating of Child Care providers and allows them to filter based on a provider's rating.

## **MCO Selection**

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**Q36. How are Residents able to select an MCO in kynect benefits?**

Certain Residents approved for Medicaid benefits can select an MCO from the kynect benefits Enrollment Manager screen. This screen is the entry point to MCO shopping and shows a summary of current plans, members that are eligible to shop but are not active on any plan, and members that are not eligible to shop.

**Q37. How will Residents know if their Primary Care Physician (PCP) accepts their Managed Care Organization (MCO)?**

On the **Plan Search** screen in kynect benefits, Residents are able to search and select a PCP, filter MCO plans, and compare MCO plans. Please note, Residents can only change their MCOs during Open Enrollment or if a Special Enrollment period is triggered per their circumstance.

## **Presumptive Eligibility (PE) and BCCTP**

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**Q38. What is Presumptive Eligibility?**

Presumptive Eligibility is a process in Kentucky which expedites a Resident's ability to receive temporary coverage for Medicaid services. Employees of qualified entities (QE) can run a simplified eligibility review through kynect benefits for Kentuckians, which grants immediate medical assistance to Kentucky Residents at the time that they require medical coverage.

**Q39. What is the Breast and Cervical Cancer Treatment Program (BCCTP)?**

BCCTP is for women who have been screened by the Kentucky Women's Cancer Screening Program and found to need treatment for breast or cervical cancer can receive treatment through Kentucky Medicaid Services

## **Report a Change**

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**Q40. What does it mean to "Report a Change"?**

If Residents have had any changes to their information after submitting an application, they need to **report a change** to that information.

**Q41. What information do I need to "Report a Change" for in kynect benefits?**

Residents must report any changes to the following information:

- **Contact Information (Phone, Email, Address)**
- **Relationship and Tax filing Status**
- **Medicare Coverage**
- **Health Care Coverage**
- **Pregnancy**
- **Education**
- **Income (Any Income)**
- **Resource (Any Resource)**
- **Expense (Any Expense)**
- **Living Arrangement**
- **Emergency Medical Condition and Disability**
- **Member Information**

#### **Q42. How do I “Report a Change” in kynect benefits?**

To **Report a Change** in kynect benefits, Residents must do the following:

1. Select **Report a Change** on the **Benefits** screen or **Dashboard** in kynect benefits.
2. Select the type of change you want to report. This includes either adding or removing a household member or modifying other information. After selecting the type of change, select **Continue**.
3. Select which information from the list of options you need to change and select **Continue**.
4. Select the household member(s) whose information needs to be changed and select **Continue**.
5. You are now brought to the **Change Summary** screen, where the information is editable for items you indicated you needed to change.
6. Make necessary updates to the information. Then, review the application sections potentially affected by the information change.
7. **Sign & Submit**.
8. Review eligibility results and next steps.

#### **Q43. Can I complete a renewal in kynect benefits?**

Only renewals for Medicaid can be completed in kynect benefits. When a Resident is completing a Medicaid renewal with a mixed program case, only screens and questions which are applicable to Medicaid are available. This allows Residents to review their case information and initiate a renewal of their Medicaid benefits.

**Please Note:** The **Report a Change** button is not available when the **Renewal** button is available. However, a Resident can change their information if needed during the renewal process.

#### **Q44. Can I update my basic information in kynect benefits?**

Yes. In the *My Information* section of the **Resident Dashboard**, Residents can **view** and **edit** the information provided during the application that does not require a **Report a Change** to be submitted. These details include *email address, primary and secondary phone numbers, preferred written and spoken languages, preferred contact method, and tax form preferences.*

## Resident Dashboard

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### Q45. What is the Dashboard in kynect benefits?

Based on a Resident's benefit program, the **Resident Dashboard** may contain any of the below fields:

- **Benefits:** This section displays the names of programs the Resident is receiving, the names of programs they have applied for, and relevant application statuses.
- **Message Center:** This section displays **To Do** items to complete and messages received in kynect benefits.
- **Health Plans (MCOs):** This section appears for Residents who are enrolled in Medicaid or KCHIP. This section shows MCO enrollments and statuses.
- **Authorized Reps, kynectors, & Agents:** This section appears if a Resident has an authorized rep, kynector, or agent assigned to their case.
- **I Want To...:** This section contains quick actions for Residents to complete and frequently used links.
- There are also navigation actions on a **Resident's Dashboard:**
  - **Overview**
  - **Benefits**
  - **Health Plans**
  - **Appointments**
  - **Documents**
  - **Claims & Payments**
  - **Hearings**

### Q46. Can I request a hearing or appeal in kynect benefits?

Yes. Residents may request hearings through the **Hearings** tab accessed through the **Resident Dashboard**. After selecting, **Request a Hearing**, the Resident may choose to request a hearing/appeal for the following programs:

- Kinship Care
- Medicaid
- Child Care Assistance
- Cost Sharing Reduction
- FAST
- K-Tap
- SNAP
- Advanced Premium Tax Credit
- Qualified Health Plan

Residents need to answer questions about their specific hearing request and upload any notices they wish to appeal.

#### **Q47. How do I know if I have any active claims?**

The **Claims Overview** screen presents a summary of all active claims that are associated to Residents or a case number in which Residents are the primary applicant, and the balance of each of those claims. This screen also allows Residents to pay for claims which have an outstanding balance.

## **Document Center**

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#### **Q48. Where can I upload documents in kynect benefits?**

Upload documents in the **Document Center** in kynect benefits. Residents can access this screen by selecting on **Documents** on their **Dashboard**. On this screen, Residents can do the following:

- **View a list of documents needed due to Requests for Information (RFIs) or needed for KI-HIPP eligibility**
- **Upload documents via a guided document Wizard or with an ad hoc document upload form**
- **View recently approved documentation**

Residents can navigate to the **Document Center** screen and select the **Document Wizard** button to walk through the process of uploading a document.

Residents can also select **Upload Document** from the **To Do** list on their **Dashboard** to begin the document upload process.

#### **Q49. What document sizes are acceptable?**

For RFIs and KI-HIPP documents, files can be 5MB for \*.JPEG, \*.JPG, and \*.PNG files and 2MB for all other acceptable types (\*.PDF, \*.TIFF, \*.TIF).

## **kynect benefits Acronyms**

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Below is a table of common acronyms used throughout kynect benefits

<b>Acronym Key:</b>	
<b>ABAWD</b>	Able-bodied Adults Without Dependents
<b>CCAP</b>	Child Care Assistance Program
<b>COPPA</b>	Child Online Privacy Protection Act
<b>DCBS</b>	Department of Community Based Services
<b>DOB</b>	Date of Birth
<b>EBT</b>	Electronic Benefit Transfer

<b>Acronym Key:</b>	
<b>FAST</b>	Family Assistance Short Term
<b>FFM</b>	Federally Facilitated Marketplace
<b>HOH</b>	Head of Household
<b>IEES</b>	Integrated Eligibility and Enrollment System
<b>KASES</b>	Kentucky Automated Support and Enforcement System
<b>KCHIP</b>	Kentucky Children's Health Insurance Program
<b>KI-HIPP</b>	Kentucky Integrated Health Insurance Premium Payment
<b>KTAP</b>	Kentucky Transitional Assistance Program
<b>KYHBE DB</b>	Kentucky Health Benefits Exchange Database
<b>LTC</b>	Long Term Care
<b>MCI</b>	Master Client Index
<b>MCO</b>	Managed Care Organization
<b>MRT</b>	Medical Review Team
<b>OIG</b>	Office of Inspector General
<b>PRTF</b>	Psychiatric Residential Treatment Facility
<b>RAC</b>	Report a Change
<b>RFI</b>	Request for Information
<b>RSDI</b>	Retirement, Survivors, and Disability Insurance
<b>SF</b>	Salesforce
<b>SNAP</b>	Supplemental Nutrition Assistance Program
<b>SSA</b>	Social Security Administration
<b>SSI</b>	Supplemental Security Income
<b>SSN</b>	Social Security Number
<b>TANF</b>	Temporary Assistance for Needy Families
<b>VLP</b>	Verify Lawful Presence
<b>WIC</b>	Women, Infants, and Children