### kynector and Agent Escalation Process (page 1 of 6)



### Updated: June 03 2024

Incident Description	Check These Materials First	I still have questions, who do I contact?
	kynect Self-Ser	vice Portal (SSP) Incidents
kynect incidents and technical incidents	<ul> <li>kynect training materials on the DMS website: kynect benefits - Cabinet for Health and Family Services</li> <li>Release Notes – KHBE will share Release Notes as applicable</li> <li>kynector and Agent Resources at KHBE.ky.gov</li> <li>Agent Training Materials, kynector Training Materials</li> </ul>	<ul> <li>Call the Professional Services Line (PSL): 1-855-326-4650</li> <li>For any Incident that remains unresolved or requires further escalation, notify KHBE by email <u>KHBE.Program@ky.gov</u>. KHBE will review and escalate further as appropriate.</li> <li>When emailing KHBE, kynectors and Agents should include ticket number from PSL, case number, description of Incident, and screenshot of Incident. No PII can be included in the email.</li> </ul>
Department for Medicaid Services (DMS) Incidents		
DMS incidents related to eligibility requirements for Residents	CHFS Policy Manuals on the DCBS <u>website</u> , training manuals on MyPurpose LMS     Dire Need	<ul> <li>For any Incident that remains unresolved or requires further escalation, notify KHBE by email <u>KHBE.Program@ky.gov</u>.</li> <li>KHBE will review and escalate further as appropriate.</li> </ul>
Dire Needs where an individual needs access to medical care that cannot be missed and needs immediate active health coverage.	When submitting any request as Dire Need (APTC or Medicaid) it is imperative that you indicate that the individual is facing an Access to Care. Only include a simple/general statement about situation	<ul> <li>Email <u>kynectdireneed@ky.gov</u> for Dire Need Incidents.</li> <li>kynectors should use the subject line "Dire Need" and indicate whether the Dire Need is for a Medicaid, Qualified Health Plan (QHP), or another case.</li> <li>These cases are given highest priority by KHBE/DMS.</li> </ul>
Kentucky Online Gateway (KOG) Incidents		
Kentucky Online Gateway (KOG) account related Incidents	<ul> <li><u>Agent Welcome Packet</u></li> <li><u>New kynector Welcome Packet</u></li> <li><u>kynector KOG QRG</u></li> <li><u>Agent KOG QRG</u></li> </ul>	<ul> <li>These unresolved Incidents should be emailed to <u>KOGHelpdesk@ky.gov</u></li> <li>When emailing the KOG helpdesk, agents and kynectors should include a brief description and screenshot of the Incident. No Personally Identifiable Information (PII) can be included in the email.</li> </ul>

## kynector and Agent Escalation Process (page 2 of 6)



### Updated: June 03 2024

Incident Description	Check These Materials First	I still have questions, who do I contact?	
	APTC Missin	g from Previous Months	
Individual needs APTC applied to missing months	<ul> <li>The mid-month rule also applies to when changes in the amount of tax credit you receive each</li> <li>month take effect.</li> </ul>		
	834	Transactions	
834 Transaction is electronic communication amongst kynect and Insurers that relates to the provision of health coverage	• CHFS Policy Manuals on the DCBS website, training manuals on MyPurpose LMS	• If an Individual has not received an ID Card or Invoice from their Insurer but they are showing a status of <i>Enrollment Sent to Insurer</i> in the kynect system, Agents and kynectors should email <u>KHBE.Program@ky.gov</u> using the Subject Line "834 Transaction" and provide brief details in order to request further action from KHBE.	
T 1' ' 1 1 ' ' 1 1		2P Overrides	
Individual requires an override due to a Special Enrollment Period (SEP)	• The mid-month rule also applies to when changes in the amount of tax credit you receive each	Contact <u>KHBE.Program@ky.gov</u>	
		e Association	
Individual would like to add a kynector, Agent, or Rep to their case	<ul> <li><u>kynector Association Protocol</u></li> <li><u>Agent Association to Client Case by</u> <u>Paper or Phone</u></li> <li><u>Agent Association to Client Case by</u> <u>Electronic or Verbal Consent</u></li> </ul>	<ol> <li>kynector/Agent contacts the PSL at 1-855-326-4650 with the Individual, kynector/Agent, and PSL rep on the line.</li> <li>Individual calls the Contact Center.</li> <li>Individual can add the Agent/kynector through the "Authorized Reps, kynectors, and Agents" tile on the kynect Resident Dashboard.</li> <li>Agent can use electronic association from Agent Portal</li> </ol>	
Waiver Questions			
Individual interested in Medicaid Waiver	<ul> <li><u>CHFS Waiver Page</u></li> <li><u>How to Apply for Waiver Services</u></li> </ul>	<ul> <li>For questions about applying for waiver-supportive Medicaid, contact DCBS at (855) 306-8959 or</li> <li><u>DFS.Medicaid@ky.gov.</u> For questions about applying for waiver services, contact the 1915(c) Waiver Help Desk at (844) 784-5614 or <u>1915cWaiverHelpDesk@ky.gov.</u></li> </ul>	

## kynector and Agent Escalation Process (page 3 of 6)



### Updated: June 03 2024

Incident Description	Check These Materials First	I still have questions, who do I contact?	
Retroactive Medicaid Requests			
Individual requesting retroactive coverage for Medicaid	<ul> <li>CHFS Policy Manuals on the DCBS <u>website</u>, training manuals on MyPurpose LMS</li> </ul>	Contact <u>DFS.Medicaid@ky.gov</u> and explain the reason for requesting retroactive coverage and be prepared to provide necessary verifications	
	<b>Retroactive QHP Start Da</b>	te During Open Enrollment	
Individual requesting a January 1 start date after December 15	• The mid-month rule also applies to when changes in the amount of tax credit you receive each month take effect.	<ul> <li>Call the Professional Services Line (PSL): 1-855-326-4650</li> <li>Ask them to submit an SR&amp;I Ticket to have start date changed to January 1st and why client missed December 15 deadline (reason is needed)</li> </ul>	
	<b>Retroactive QHP Start Date</b>	After Open Enrollment Ends	
Individual requesting a change in start date, term date, or plan outside of Open Enrollment	• <u>Special Enrollment Fact Sheet</u>	<ul> <li>Call the Professional Services Line (PSL): 1-855-326-4650</li> <li>Ask them to submit an SR&amp;I Ticket to have start date changed and provide reasons or circumstances</li> </ul>	
	Exceptional Spe	ecial Enrollments	
Individual requesting to enroll in or change a QHP Outside Open Enrollment	• <u>ESE Factsheet</u>	Submit an email to <u>kynectESE@ky.gov</u> and explain the reasons and circumstances	
Name/DOB Changes			
Individual requires a name or DOB change in kynect	CHFS Policy Manuals on the DCBS <u>website</u> , training manuals on MyPurpose LMS	<ul> <li>Contact <u>KHBE.Program@ky.gov</u> and explain the reason for the change in name, DOB, etc.</li> </ul>	

# kynector and Agent Escalation Process (page 4 of 6)



#### Updated: June 03 2024

Incident Description	Check These Materials First	I still have questions, who do I contact?	
Managed Care Organization (MCO) Changes			
Individual requesting to change their MCO outside of their initial enrollment period.	• Utilize the "Request MCO Change" from Self Service Portal client dashboard "Health Plans" Sidebar	Contact <u>MS.Services@ky.gov</u> if further issues remain	
Medicaid Incarceration Suspensions			
Individual needs to have incarceration suspension lifted by Medicaid	• DMS Member Services <u>website</u> .	• Contact <u>DMS.Eligibility@ky.gov</u> and ask for suspension to be lifted.	
Help with SNAP or CCAP Cases			
• Questions or trouble with SNAP or CCAP applications.	<ul> <li>CHFS SNAP <u>website</u> page.</li> <li>CHFS CCAP <u>website</u> page.</li> </ul>	Contact <u>Famsupportkynectors@ky.gov</u> with case information and description of the incident.	

For any other concerns or questions after utilizing the above resources please contact <u>KHBE.Program@ky.gov</u>

We are here to help!

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QHP Issuer Incident Escalation (APTC)			
Plan Type	Issuer	Phone	Website
	Anthem Blu	e Cross Blue Shield	
Stand Alone Dental Plan	Anthem Blue Cross and Blue Shield	855-769-1464	Anthem.com
Qualified Health Plan	Anthem Blue Cross and Blue Shield	855-738-6671	Anthem.com
SHOP (Small Group) Health Plan	Anthem Blue Cross and Blue Shield	855-738-6673	Anthem.com
Best Life and Health Insurance Company			
Stand Alone Dental Plan	BEST Life and Health Insurance Company	877-205-8767	bestlife.com/exchange
CareSource			
Qualified Health Plan	CareSource	833-230-2099	caresource.com/marketplace
Passport Health Plan by Molina Healthcare			
Qualified Health Plan	Passport Health Plan by Molina Healthcare	833-644-1621 for Member Services or 888-466-4477 for billing and payment services	passporthealthplan.com/marketplace
Ambetter from WellCare of Kentucky			
Qualified Health Plan	Ambetter from WellCare of Kentucky	1-833-705-2175	Ambetter.WellCareKY.com



Managed Care Organization Incident Escalation (Medicaid)			
Plan Type	Issuer	Phone Number	Website
Managed Care Organization	Aetna Better Health of Kentucky	(855) 300-5528	https://www.aetnabetterhealth.com/kentucky/index.html
Managed Care Organization	Anthem Blue Cross Blue Shield	(855) 690-7784	https://mss.anthem.com/ky/home.html
Managed Care Organization	Humana Healthy Horizons in Kentucky	(800) 444-9137	https://www.humana.com/medicaid/kentucky-medicaid
Managed Care Organization	Passport Health Plan by Molina Healthcare	(844) 778-2700	https://www.passporthealthplan.com/members/ky/en - US/pages/home.aspx
Managed Care Organization	UnitedHealthcare Community Plan	(866) 293-1796	https://www.uhc.com/communityplan/kentucky/plans
Managed Care Organization	WellCare of Kentucky	(877) 389-9457	https://www.wellcare.com/Kentucky