

AGENT & KYNECTOR BI-WEEKLY NEWSLETTER

This Newsletter should NOT be distributed or printed. Hyperlinks can only be accessed in the PDF version attached to this email.

Plan Year 2025: Open Enrollment Periods and Upcoming Support

kynect health coverage: Qualified Health Plan (QHP) | November 1, 2024 - January 15, 2025

Applicants must enroll in kynect health coverage by December 15, 2024, to have coverage start on January 1, 2025. For Applicants that apply between December 16, 2024, and January 15, 2025, their coverage will start on February 1, 2025.

Medicaid: Managed Care Organization (MCO)

At any time throughout the year, Kentucky Residents may apply for and enroll in Medicaid, update their information, or change their MCO.

Medicare | October 15, 2024 – December 7, 2024

Residents cannot apply and enroll in Medicare through kynect. They must contact Social Security to apply and enroll in Medicare.

The Open Enrollment **Incident Tracker** will be live on **November 1** for Plan Year 2025. The Incident Tracker is intended to provide quick resolution to incidents that Agents and kynectors may experience during Open Enrollment.

Virtual One-on-One sessions which offer personalized case support will also be offered during Open Enrollment.

Did you know?

Reminder: Preview Plan Year 2025 Qualified Health Plans

Since October 15, Agents, kynectors, and Residents may view Plan Year 2025 Qualified Health Plans (QHPs) using the [Prescreening Tool](#) within kynect.



Mid-Month Rule

No matter the time of year, if a plan is selected between the 1st and the 15 of the month, coverage starts on the first day of the following month.

However, if a plan is selected between the 16 and the last calendar day of the month, the coverage effective date starts on the first day of the following month.

Examples:

Tom selected his plan on December 11. Tom's coverage will begin on January 1.

Lisa selected her plan on December 18. Lisa's coverage will begin on February 1.

Please note: There are exceptions to most Special Enrollment Periods (SEPs). For example, if Susie gets married and processes a Special Enrollment on June 18. Her coverage will be active beginning July 1.



Reminders:

If an Individual was not passively renewed for Plan Year 2025, they must select their desired plan by December 15 to begin coverage on January 1 or they will have a gap in coverage.

There are certain scenarios that the Mid-Month Rule **does not apply** to such as loss of Medicaid.

Helpful Contacts

Inbox for Requesting Retroactive Coverage of Medicaid

DFS.Medicaid@ky.gov

Inbox for Requesting Name Change, Date of Birth Change, or Case Specific Questions

KHBE.Program@ky.gov

Dire Need (Medically Urgent)

kynectdireneed@ky.gov

Professional Services Line (PSL)

855-326-4650

Hours: Mon-Fri 8am-7pm (EST)

Department for Medicaid Services (DMS)

855-4kynect (459-6328)

Hours: Mon-Fri 8am-7pm (EST)

kynect benefits/Contact Center (Public)

855-4kynect (459-6328)

Hours: Mon-Fri 8am-7pm (EST)

kynect Technical Assistance (Public)

844-407-8398

Hours: Mon-Fri 8am-5pm (EST)

Department for Community Based Services (DCBS)

855-306-8959

Hours: Mon-Fri 8am-4:30pm (EST)/ Sat 9am-2pm (EST)

[kynector and Agent Escalation Process](#)



Medicaid and APTC Income Verification

Medicaid has a higher standard of income verification compared to Advance Premium Tax Credit (APTC). Below are examples of acceptable income verification documents for Medicaid and APTC.

MEDICAID

- | | |
|--|---|
| <input type="checkbox"/> Award letter | <input type="checkbox"/> Income tax return |
| <input type="checkbox"/> Written statement | <input type="checkbox"/> PAFS 700 form |
| <input type="checkbox"/> Personal records or written statement showing income from Self Employment | <input type="checkbox"/> Pay stubs |
| <input type="checkbox"/> Employer statement | Generally speaking, three months of pay stubs |

APTC

- | | |
|---|--|
| <input type="checkbox"/> Award letter | <input type="checkbox"/> Statement from a person, agency, or financial institution |
| <input type="checkbox"/> Business or rental income records | <input type="checkbox"/> Tip log |
| <input type="checkbox"/> Collateral contact | <input type="checkbox"/> Tax return |
| <input type="checkbox"/> Court document | <input type="checkbox"/> Tribal statement regarding income |
| <input type="checkbox"/> Employer statement | <input type="checkbox"/> Written statement |
| <input type="checkbox"/> IRS Income Reporting Form (i.e., 1099, etc.) | |
| <input type="checkbox"/> Pay Stubs | |

Please note: Generally speaking, Medicaid is based on a Resident's current monthly income. APTC is calculated based on annual income during the current tax year. For APTC, an acceptable written statement verification should explain why income is different from the previous year.

For a comprehensive list of countable and non-countable income for Modified Adjusted Gross Income (MAGI) Medicaid, reference the [Countable and Non-Countable Income for MAGI Medicaid Tip Sheet](#).

Change of Unearned Income

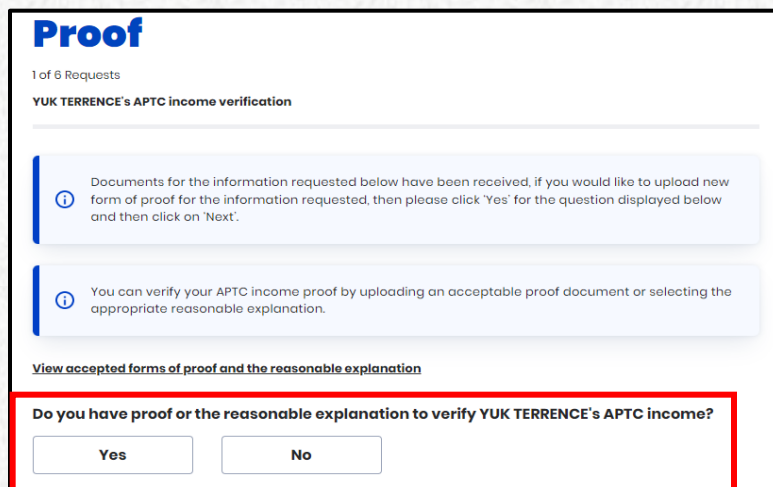
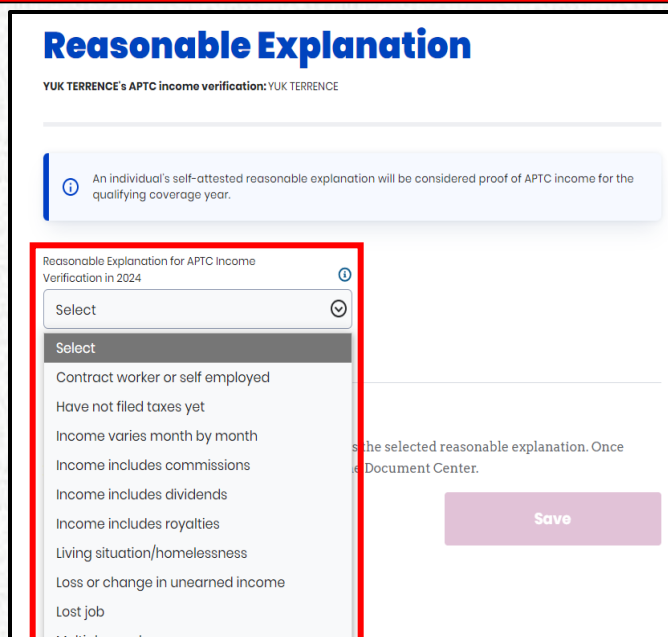
Through the **Document Center**, Agents and kynectors can attest to APTC Income Verification Request for Information (RFI) by selecting an applicable reasonable explanation.

To select a reasonable explanation, follow the steps below:

1. On the **Proof** screen, select **Yes** for *Do you have proof or the reasonable explanation to verify [Applicant Name]'s APTC income?*
2. Next, select **Reasonable Explanation** for *How would you prefer to verify [Applicant Name]'s APTC Income?*
3. Finally, select the **applicable reason** from the drop-down menu for *Reasonable Explanation for APTC Income Verification in [Year]*.



Please note: This reasonable explanation will satisfy the RFI for the Resident's case.

Pregnancy & Deferred Action for Childhood Arrivals Special Enrollment Periods (SEPs)

Pregnancy SEP

Pregnant Residents will now have an SEP to enroll in Qualified Health Plans (QHPs).

Beginning January 1, 2025, pregnant Residents' eligibility can be backdated to the date of the pregnancy determination (retroactive coverage).

This SEP allows a pregnant Resident, and any Individual who is eligible for coverage because of a relationship to a pregnant Resident, to enroll in a QHP at any time during the pregnancy.

The coverage effective date is the first day of the first calendar month in which a medical professional determines that the pregnancy began or a later date if directed by the enrollee.

Deferred Action for Childhood Arrivals (DACA) SEP

DACA recipients now qualify for an SEP to select a QHP through kynect during the 60 days following the effective date of the final rule.

Beginning November 1, 2024, DACA recipients will become eligible for QHPs and APTC.

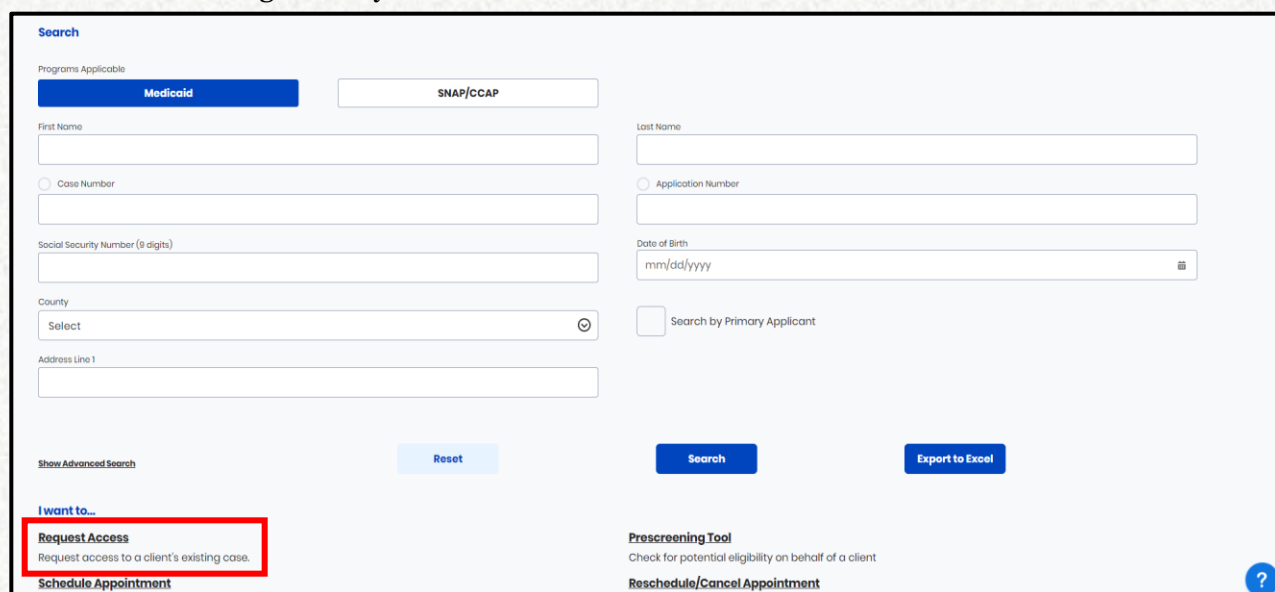
A federal rule amends the definition of "lawfully present" to include DACA recipients for APTC and QHP programs. For additional information regarding SEPs, reference the [Special Enrollment Fact Sheet](#).

Please note: Prior to November 1, DACA was not an eligible immigration status for applying for health insurance.

Case Consent

There are a few ways that Agents and kynectors may request access to a Resident's existing case or remove an existing Agent or kynector:

1. Direct Residents to [Get Local Help](#).
2. Request Access on the Agent or kynector Dashboard.



The screenshot shows a search interface with the following elements:

- Search** header
- Programs Applicable:** Radio buttons for **Medicaid** (selected) and **SNAP/CCAP**.
- Search Fields:**
 - First Name (text input)
 - Last Name (text input)
 - Case Number (radio button and text input)
 - Application Number (radio button and text input)
 - Social Security Number (9 digits) (text input)
 - Date of Birth (text input with mm/dd/yyyy format)
 - County (dropdown menu)
 - Address Line 1 (text input)
 - Search by Primary Applicant (checkbox)
- Buttons:** Show Advanced Search, Reset, Search, Export to Excel.
- I want to...:**
 - Request Access** (highlighted with a red box): Request access to a client's existing case.
 - Schedule Appointment
- Prescreening Tool:** Check for potential eligibility on behalf of a client. Includes a Reschedule/Cancel Appointment link.
- Help icon (?) in the bottom right corner.

3. Call the Professional Services Line (PSL) at (855) 326-4650.

4. Complete and submit an [Appendix B Form](#).

For more information on how to complete Case Consent, reference the [Adding and Removing kynectors and Insurance Agents Quick Reference Guide](#).