The Commonwealth of Kentucky kynect State-Based Marketplace



# Report a Change and Case Maintenance Training Guide

Kentucky's transition to a State-Based Marketplace (SBM) is pending official authorization from the Centers for Medicare & Medicaid Services (CMS). Final approval is anticipated to occur later this summer. Future updates will be shared as appropriate.

September 17, 2021

# **Document Control Information**

# **Document Information**

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# Introduction

This course highlights some of the Report a Change and Case Maintenance processes used in kynect benefit. Agents and kynectors need to familiarize themselves with Report a Change and Case Maintenance processes to better assist Residents with their health coverage cases.

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# **1** Report a Change and Case Maintenance in kynect benefits

The Report a Change and Case Maintenance processes in kynect benefits are designed to make updating a Resident's case straightforward for Agents, kynectors, and Residents. Residents should **report all changes in their information** in a timely manner to avoid interruptions in their benefits or having to repay benefits. Use the Report a Change process to complete the three categories of change:

- 1. Add or Remove Household Members.
- 2. Modify other information such as income, expenses, resources, health, or health coverage.
- Assist with life changes that may trigger a Special Enrollment Period (SEP).
   A SEP is triggered once the change is entered in kynect benefits.

**Please note:** The Special Enrollment Period Reason Screen is triggered in the Enrollment Manager Module.



## 1.1 Reporting a Change: What to Know

Agents and kynectors assist Residents with making updates to their cases in kynect benefits. These updates involve Residents reporting changes to their information. Correctly navigating these changes in kynect is key to appropriately updating a Resident's case. Agents and kynectors should be aware of the helpful Report a Change tips below.



## Report a Change and Case Maintenance Training Guide



#### 1.2 Modifying Information

When Residents select "Modify other information such as income, expenses, resources, or health", they are prompted to change any of the following information:

#### Editable Information in kynect when Reporting a Change

- Contact Information (Phone, Email Address)
- Relationship and Tax Filing Status
- Medicare Coverage
- Health Coverage
- Pregnancy
- Education
- Disability
- Citizenship
- Income
- Resources
- Expenses
- Living Arrangements
- Emergency Medical Condition (only prompted in kynect for non-citizens when modifying information)
- Member Information

#### 1.3 The One Case Concept

The One Case Concept is important to keep in mind when assisting Residents. Even though Residents may have access to different programs and benefits, they essentially have one case that acts as a comprehensive profile for their personal information. Therefore, any changes

made to their information impacts all programs with which they are associated. **Be sure to make Residents aware of these impacts**. The following may change a Resident's benefits.



# 1.4 Request for Information (RFI)

Any changes made to a Resident's case may generate a Request for Information (RFI) that the Resident is required to resolve. Be sure to make Residents aware of any RFI because they may directly impact their benefits.



# 2 Report a Change Navigation

The Report a Change navigation demonstration walks through how to Report a Change in kynect benefits and highlights the following kynect benefits navigation process:

- 1. Reporting a Change for Resident's contact information.
- 2. Reporting a Change to add a Resident to a case.
- 3. Reporting a Change with loss of Employer-Sponsored Insurance (ESI).
- 4. Displaying Report a Change eligibility results.

The following interactive navigation demonstration will walk you through assisting the Kent family in kynect benefits.

#### 2.1 Accessing an Individual's Information

Search First home	Lost Name	Individual we are assisting is Clark Kent. To access Clark's information enter his case number.
Case Number	Application Num	
	Dote of Birth mm/dd/yyyy	a
Enter 112747594	Search	Export to Excel
then click Enter	Agent Portal Visit the Agent Portal t	to search for insurance agents.

1. Enter the Individual's **Case Number** to begin the reported change.

2. Click **Search** to search for the desired Individual.

All a destruction of the second	Editaria de la companya de la company
Search	
First Name	Lost Name
Cose Number	Click Search.
112747594	
Social Security Number (4 digits)	Dete of Birth mm/dd/yyyy B
Show Advanced Search Ro	Search Export to Excel
I want to	
Prescreening Tool	Agent Portal
Check for potential eligibility on behalf of a client	Visit the Agent Portal to search for insurance agents.



3. Click the Individual's Name to access their profile.

4. To Report a Change for the Individual, click **Report a Change**.



5. After clicking **Report a Change**, a prompt appears asking what type of change the Individual would like to report. Click **Modify other information such as income**, expenses, resources, or health.

Return to DCBS Central Office - Vie.	Client view: CLARK KENT	
kynect Desinted	ard Programs v Reps, kynectors, & Agents Help & FAQs	(C) 1000 (C)
Click Modify other information such as income, expenses, resources, or health.	Report a Change Select the type of change you would like to report Add or Remove Household Memiber Modify other information such as income, expenses, re- sources, or health	Add Other Benefits Report a Change
After clicking the Rep would like to report. ( First w	port a Change button, a prompt appears as Clark needs to update contact information and add a household member. e will update his contact and health covera	sking what type of change you , health coverage information, age information.

# 6. Click **Continue**.

Return to DCBS Central Office - Vie-		Client view: CLARK KENT		
kynect	Dashboard Programs v Reps, kyn	uctors, & Aganta Holp & FAQs		C) *** ()
	Report a Chang	30	× Lingung	er Englan(Inglin) -
Overview				
Benefits	Wei Select the type of	change you would like to report		-
Documents	Add or Re	move Household Member	Add Other Be	enefits Report a Change
Claims & Payments	Modify oth     sources, o	her information such as income, expenses, re- or health		
Hearings	View details		we tak an internation	neadar.
	Bonot		essage Cente	r o
	Case#	Continue	TeDe's	Unread
	Apr	Cancel	0	1
	+ Mec + SNAP	Click C	Continue.	0 Meticos
				A Annual sector

7. Click Contact Information.

Kyrnett         Dealbhoard         Programs         Report a Change         On the Report a Change           Report a Change         various details of the household to Report a Change.         Change.
Report a Change Change Change.
Pressee report changes in a timely manner to avoid interruptions in your benefits or having to report     benefits.     What changes in your household would you like to report?     ? Walk live Through
Contact Information (nuch on Phone Email and Address)
Relationship and Tax filing Status
Click Contact Information.

8. Select the **Individual(s)** who need their contact information updated.

Return to DCBS Central Office - Vie-	Client view: CLARK 1 KB	п
	What changes in your household would you like to rep	Now that we have selected to edit Contact Information, select the
	Centact Information     (such as Phone, Ernal, and Address)	Individual(s) that need their contact information updated.
	Select applicable household member(s):	
	CLARK KENT	
	LOIS KENT	
Click Clark Kent.	Relationship and Tax filing Status	
	Medicare Coverage	
	Healthcare Coverage	
	CLARK KENT YMCAI23	2

9. Select the **Household Member(s)** who need their contact information updated.

Return to DCBS Central Office - Vie-	Client view: CLARK T KENT	
L.	hat changes in your household would you like to report? ? Nuk Mr Through	
	Centest Information (such as Read, brief, and Address)	
	Select applicable household member(s):	
	LOIS KENT	
Click Lois Kent.	Relationship and Tex filing Status	
	Neutron Coverage	
	CLARK KINT VILAK KINT	2

10. Click **Healthcare Coverage** to update the Individual's healthcare coverage information.

Return to DCBS Central Office - Vie-	Client view: CLARK	TKENT
	Relationship and Tax filing Status	
	Medicare Coverage	Clark also needs to update his healthcare coverage information
	Healthcare Coverage	inclution coverage information.
Click Healthcare Coverage.	CARK KINT VALCAS Paulance Brough an employer, inducting the power's emptor CARK KINT VALCAS Insurance through an employer, including the power's emptor Pelley ID: YMCASS	yur .
	Emergency Medical Condition and Disability	
	Prognancy	
	Member Information	

11. Click **Continue** to navigate to the **Change Summary** screen.

Return to DCBS Central Office - Vie-	Client view: CLARK T KENT	
	Expense () (such as child support or medical)	
	Living Arrangement ()	
	Education	Click
	If you would like to report a change for something not listed above, call DCBS at <u>1(855) 306-8959</u>	Continue.
	Exit Continue	

# 2.2 Reporting a Change for Resident's Contact Information

12. Click Start to edit the Individual's contact information.

• Return to DOBS Central Office :: Vie-	Client view: CLARK T KENT	
	Cate# 112747594	Click Start
	Please edit the sections below with your changes.	to begin editing Clark's
	0 of 3 completed	contact information.
	Contact Information	
	CLARK KENT	stor: 💿
	LOIS KENT	
	Healthcare Coverage	Start
	Sign & Submit	Start
		?

13. Click the **Cell** or **Landline box** to update the Individual's contact information.

Refers to DOBS Canton Office - Ma-	Secondary phone type Landline Ce Select your preferred contect meth encourage you to select "Bectrone must click. "Yes" in agreement 1 and Electronic - Email only Mail	While updating informat to validate all informati and accurate. Secondar was blank. Clark inform phone type is a ce rend for there	tion, make sure on is included <b>ry phone type</b> is you that the ll phone.
	Preferred spoken longuage	Preferred Written Longuage	
	English	English	
	Bock Ex	Next	0

14. Click **Next** to continue updating the Individual's contact information.

Return to DCBS Central Office - Vie	Cleni	VIEW CLARK T KENT
	Secondary phone type Landline Cell	
	Select your preferred contact method for i encourage you to select "Electronic- Email must click "Yes" in agreement to being ser	tems such as messages and tax related forms. We land Text Message" for best communication, You it text messages above to select this option.
	Moil	
	Preferred spoken longuage English	Inglish O
	Back Exit	Next

15. Enter the **Individual's Household Address**. Make the Individual aware that updating an address may create a Request for Information (RFI).

Return to DOBS Cantral Office -: Me-	Change Summary CLARK T KENT Section 2 of 2 Address Information ⓒ	Clark informs you that he needs to update his address for the household. Updating an address for the household may create a Request for Information (RFI). Be sure to make Clark aware of this and any necessary steps he needs to take to resolve the RFI.
	Does CLARK KINT have a physical address? Yes No M320000 M32000 M320000 M320000 M32000 M30000 M30000 M30000 M	Enter <b>200 Meridian Ave</b> then click <b>Enter</b> on your keyboard to update Clark's address.
	Does everyone in CLARK KENT's household have th Yes No	e same address information?

16. Select the Individual's Address from the drop-down.

Return to DOBS Central Office - Vie.	Client view CLARK T KINT	
	Section 2 of 2	
	Address Information $ igoralde{}$	
	Does CLARK KENT have a physical address?	
	Yes No	
	200 MERDIAN AVE LE APT. 4, SUITE UNIT, BUILDING, FLOOR, P.O. BI	
	200 Meridian Avenue, Coulyville, KY, USA 200 South Meridian Street, indianapoli.	
	200 Meridian Avenue, Taylors, SC, USA from the address list.	
	200 Meridian Way, Richmond, KY, USA are the same uparess smorthadots.	
		2

17. Click **Yes** or **No** for *Does the Individual have a different mailing address*.

Return to DCBS Central Office - Vie-	Client view: CLARE 1 KEN1
	CLARK TKENT
	Address Information $ \odot $
	Dees CLARK KENT have a physical address? Yes No
	Address Une 2 200, MERDIAN AVINUE, LOUISVILLE, JEFFERSOP ILE, APT. #, SUITE, UNIT, BUILDING, FLOOR, P.O. BI
	Does CLARK KENT have a different mailing address?     Click No since Clark does not have a different mailing address.
	Does everyone in CLARK KENT's household have the same address information?
	Yes No

18. Click **Next** to continue updating contact information.

Return to DCBS Central Office - Vie-	Client vie	W CUART FENT
	Addross	Address Lino 2
	200, MERIDIAN AVENUE, LOUISVILLE, JEFFERSON	LE. APT. #, SUITE, UNIT, BUILDING, FLOOR, P.O. BI
	Does CLARK KENT have a different mailing add Yes No Does everyone in CLARK KENT's household her Yes No	tress? ve the same address information?
	Ba Click Next.	Next
	The expanded kynect is working to keep	every Kentuckian safe, healthy and happy.

19. Click **Start** to update the Household Member(s) contact information.

< Return to DCBS Central Office - Vie	Client view: CLARK T KENT	
	Flease edit the sections below with your changes. O of 4 completed	Now we will update contact information for Lois Kent.
	Contact Information	
	CLARK KENT	Start O
	Member Details	Tlick Start
	Healthcare Coverage	
	Sign & Submit	Stort

20. If the Individual and Household Member(s) share the same contact information, check the **box** that says they have the same contact information.

Return to DCBS Central Office - Vis-	Client vi	W. CLARK T KENT	-
	ard Programs v Reps, kynectors, & Agents	Help & FAQs	C ROBB (2)
		Longu	ngan: trglish(trglish) ~
BENEFITS APPLICATION			
	Change Summary LOIS KENT Section 1 of 2	Lois and Clark share the information	same contact
	Contact Information	ormation as CLARK KENT	
Click the <b>box</b> .	kent@mailinator.com Phane Number 185-0937	Int.	0
	Primary Phone Type		<u> </u>

21. Click **Next** to complete the contact information update.

Return to DCBS Central Office - Vis-	Client view. CLARK 1 KENT	
	Landline	
	Select your preferred contact method for items such as messages and tax related forms. We encourage you to select "Electronic- Email and Text Message" for best communication. You must click "Yes" in agreement to being sent text messages above to select this option.	
	Electronic - Email only	
	Electronic - Email and Text Message	
	Moil     Click Next.	
	Back Exit Noxt	
ń		
	The expanded kynect is working to keep every Kentuckian safe, healthy and happy.	<b>U</b>

#### 2.3 Reporting a Change for Resident's Health Coverage

22. Click **Start** to update the Individual's Healthcare Coverage.

Return to DCBS Central Office - Vis-	Client view: CLARK T KENT	
	🔗 Member Details	Now we will update Clark's healthcare coverage information.
	CLARK KENT	
	Expenses Information   Completed	
	Healthcare Coverage	Stort
	🔘 Sign & Submit	Stort Click Start.
	Exit	0

23. Click **Next** to update the Individual's healthcare coverage information.

Return to DCBS Central Office Vie-		Client view: CLARK T KE	ы	
kynect	Dashboard Programs - Re	ps, kynectors, & Agents Help & FAQs	С кова 😥	
			Languages: English(English) ~	
BENEFITS APPLICAT	ON			
	< Change Summary			
	Learn Mers Is anyone in your hous Ves Does anyone in your ho not yet enrolled?	ehold enrolled in healthcare cove	e S Click Next to update Clark's healthcare coverage information.	
	Yes	No		
	Back	Exit	Next	?

# 2.4 Reporting a Change with loss of Employer-Sponsored Insurance (ESI)

24. Click the **trash can** icon next to the Employer-Sponsored Insurance plan being terminated.

Clark Kent informs his employ We will now	you that he can no longer afford his he er and gives you the termination date c	ealth coverage through of his coverage.	
we will now	Add Coverage		
	YMCA123 Policy ID: YMCA123	Edit	
	insurance through an employer, including the parent's employer		
	CLARK KENT Policy Holder		
		Click the <b>trash can</b> icor	1.
	Back Exit	Next	?

25. Select the **Reason for removal** from the drop-down.

< Return to DCBS Central Office Vie-	Cilent view: CLARK T KENT	
Enter th	Remove Coverage?	×
househi Coverag	YMCA123	udd
	You should only remove this healthcare coverage if it has ended for all individuals. If the household's healthcare coverage has changed, edit that coverage rather than removing it.	
0	Select	8
mur	Select Other	
0	Parent Stapped Providing Coverage Job Loss	
	Non-Payment Too Expansive	
	For	• the reason for emoval click ?

26. Enter the **Individual's Coverage end date**.

Return to DCBS Central Office - Vie.	Client view: CLARK T KENT	
	Remove Coverage? × Enter the the	
	boostho         kdd           Coverage         YMCA123           You should only remove this healthcare coverage if it has ended for all individuals. If the household's healthcare coverage has changed of it has coverage rather than removing it.	
	Select Coverage end date to enter Clark's coverage end date.	
	Remove Coverage Cancel	
		9

27. Select the appropriate **Year**, **Month**, and **Day** for the coverage end date from the calendar.



28. Click **Remove Coverage** to update the Individual's health coverage.

Return to DCBS Central Office Via	Cilient view: CLARK T KENT	
Inter	Remove Coverage?	×
house Cover	9 YMCA123	udd
	You should only remove this healthcare coverage if it he individuals. If the household's healthcare coverage has a coverage rather than removing it.	as ended for all changed, edit that
e	Reason for removal	8
	Coverage end date	
C		
	Remove Coverage	
	Cancel	2
	Cli	ick Remove Coverage
	to update C	lark Kent's healthcare coverage.

29. If the Individual has no other health coverage, delete the option to enter additional healthcare coverage by clicking the **trash can** icon.

Since the Kent coverage, we	family has no other healthcare will delete the option to enter	ARCT KINT
additional hea this informatio	Ithcare coverage. Remember, on can be updated at any time.	be household members are coverages add them Click <b>the trash can</b> icon.
	Add Coverage	
	Healthcare Coverage	Start
	Bock Exit	Next
	The expanded kynect is working to keep a Go to kynact ky gov	every Kentuckian safe, healthy and happy.

30. A prompt will appear asking to confirm the changes to the Individual's healthcare coverage information. Click **Delete** to confirm.



31. Click **Next** after the healthcare coverage information has been updated.

	Clien	t viow: CLARK T KENT			
We are now finished upd Clark's healthcare cover information.	ating rage din multiple	e that the household members are e healthcare coverages, add them by cl	nrolled in. If the licking t	Next.	
Ba	ck Exit		Next		
The expa	nded kynect is working to ke Go to <u>kynectky</u>	eep every Kentuckian safe, he gov to see all your options.	althy and happy.		
Help <u>&amp; FAQ</u> s Find DCBS Office Cobinet for Health & Family	Contact Us kynoct benefits 1-855-306-8959	Technical Assistance 1-844-407-8398	Connect	FI 🗹	?

- 2.5 Reporting a Change to add a Resident to a case
  - 32. Click Add/Remove Household Member when the Report Additional Changes prompt displays.



33. Click Add Member.

Clark informs you that he n	eeds to				
add his newborn baby – Jak to his Household Memb	ke Kent ers.		Edit		
Household Memb	pers	Cli	ck Add M	Aember.	
Add Member					
<ul> <li>LOIS KENT</li> <li>29 years old</li> </ul>	4		Edit	ê	
System of the second se	π		Edit	Ê	
SENNY KENT	r.		Edit	Û	3

34. Enter the Household Member's **First Name** into the field.

Return to DCBS Central Office - Vie		Client view: CLARK T KENT	
	< Charge Summary Household N	lember Detai	ls
	Complete the questions below abou Security Card, enter the name as it a part forms	it the household member. If this hyppears on the card.	Enter <b>Jake</b> into the <b>First Name</b> field, then click <b>Enter</b> on your keyboard.
	LOSE NORTHU	Suffix	
		Select	Θ
	Alices First Nome	٥	
	Alias Last Name	0	?

35. Enter the Household Member's Last Name into the field.

Return to DCBS Central Office Vie-	Cilent view: CLARK 7 KENT	ŕ
	< Starge kummery Household Member Details	
	Complete the questions below about the household member. If this household member has a Social Security Card, enter the name as it appears on the card.	
	Fint Nome ML	_
	Household member does not have a middle initial.	
	Alor Last Norme O	?

36. Select the Household Member's **Sex** from the drop-down.

JAKE					
V Household m	ember does not have a	midd	le initial.		
Lost Name			Suffix		
KENT			Seluct 🔘		
Alion First Norme		0			
Alice Lost Nome		0			
bes.	Dote of Birth				
Select Q	mm/dd/yyyy	-			
Select					
Mole		-		Click Male.	
Female	ave a Social Security I	Numl	Der? 0		
Yes	No				
is this individual a n	asident of the Common	wealt	th of Kentuckyr		
Yes	No				

37. Select the appropriate **Year**, **Month**, and **Day** for the Household Member's Date of Birth from the calendar.

JAKE		
Household member does not have a middle	le initial.	
KENT	Selucit O	
Alico First Nome		
Alias Lost Norme		
Sex Core of Sem Mole  mm/dd/yyyy		
		Click the <b>Calendar</b> icon to enter Jake's date of birth (6/30/2021).
30         31         21         21           Is this individual a reside         27         28         29         52           Yes         4         1         7         1	· 2 · 3	

38. Click Yes or No for Does this Individual have a Social Security Number.

Extent tils indrividuurf a recol()       American indrin or Abaiton Nativo       Aktion       Black av Abiton American       Inbrin + Hausdrau/Oner Procific Islander       Winbu	Interfect this individual * relea(s)       Amorican indian or Abation Native       Asian       Bick or African American       Bick or African American       Wate       Wate       Wate	   	Yes No	Click <b>No</b> since Jake does not have his Social Security Number.
Black or African American Notice HouseCom (Company) Notice HouseCom (Company) Whate	Buck or Ahlored       Health - Houndamy/Chine or Pocsific Isoander       White       Untersount	•	elect this Individual's rece(s) American Indian or Alaskan Hative Asian	
xhitu	White Untroven		Black or African American Native Howellan/Other Pocific Islander	
	Uränden		White	

?

Beturn to DCBS Central Office - Vie.	Client view: CLABK T KENT
	Not eligible to receive SSN based on immigrant status
	Applied for SSN
	Refuses to obtain an SSN because of a well-established religious objective
	O Does not have an SSN and may only be issued an SSN for a valid non-work reason
	C Refuses to provide an SSN
	Newborn without SSN
	Without SSN Card

39. Check why the Individual does not have a Social Security Number.

Has this individual served in the U.S. military?

40. Click **Yes** or **No** for *Is this Individual a Resident of the Commonwealth of Kentucky?* 

Select th	s indivíduol's roce(s)	Click <b>Yes</b> since Jake is a Kentucky Resident.
An	nerican Indian or Alaxisan Notive	
	ack or African American	
No	the Hawalion/Other Pacific Islander	
w	vite	
UP	ánown	
is this inc	lividual Hispanic/Latino? 💿	
	Yes No	

41. Select the Household Member's Race.

	Yes No	
	Select this individual is race(s)	
	American Indian or Alaskan Native	
	Asian Block or African American	
	Native Howelion/Other Pacific Handler	
	White	
	Unknown	
Click White	Is this individual Hispanic/Latine?	

42. Click **Yes** or **No** for *Is this Individual Hispanic/Latino* 

Unknown	
te teks individual ritegan ( <u>k. attract</u> )	Click <b>No</b> since Jake is not Hispanic/Latino.
This household member possed away in the lost three months.	
What programs would this individual like to apply for?	
CHP (Medical and Dental Insurance plans without payment assistance)	
Cancel Serve	3

# 2.6 Applying for Medicaid/KCHIP

We have to disk for ethnicity and or reduced angle, but you, clean he you, get them.	aan to amure that program banefits are dehiftuited eitheut regard to noor, outer, and to answer, how amover world affect how many banefits you get at her abon	
This household member	ir passed oway in the last three months.	Clark wants to apply for
What programs would this ins Medicate/COURT	Bividual like to apply for 1 (2) ad risoltin Plan with poyment osoblances (APTC) ad Insurance plans without payment assistance)	Medicaid/KCHIP for Jake.
Click Medicaid/KCHIP/	Save	
Qualified Health Plan with payment assistance (APTC).	ng to keep every Kentuckian safe, healthy and happy. stanticide to we all your options.	

43. If the Individual wants to apply for Medicaid/KCHIP, check the **box** for Medicaid/KCHIP.

44. Click Yes or No for Is this Individual a U.S. Citizen or U.S. National?

	This household member passed onery in the lost three months.
	Program Selection
	What programs would this individual like to apply for?
	Medicaid/RCHP/Qudified Health Han with payment axiistance (APIC)
	QPP (Medical and Dental Insurance plans without payment assistance)
	Is this hadhdaal d.U.C. Chines ar d.U.J. Netional? O
	Cancel Sine
Click <b>Yes</b> since Jake is a U.S. Ci	ectis working to keep every Kentuckian safe, healthy and happy. Go to basicilization to see all your options.

- 45. Click Yes or No for Is this Individual a naturalized or derived citizen?

46. Click Save to confirm the selection.

	What programs would this individual like to apply fort 💿	
	Medicaid(kCHP)Qualified Health Plan with payment assistance (APTC)	
	QHP (Medical and Dental Insurance plans without payment assistance)	
	is this individual a U.S. Citizen or a U.S National?	
	Yes No	
	is the individual a noturalized or derived citizen?	
	Cancel Save	
	The exp	
	Click Save.	
14		

#### 2.7 Confirming and Saving Household Members Information

47. Click **Next** once all Household Members have been added.

< Return to DCBS Central Office - Vie.		Client view: CLABK T K	ENT	
	LOIS KENT 29 years old		Edit	
	JACK C KENT 5 years old		Edit	
	JENNY KENT 2 years old		Edit	Û
	O years old		Edit	8
We are finished household men	adding nbers.	Exit	Next	Click Next.
				?

48. Click Start to confirm the Individual's contact information.

return to boos central onde _ vis-	Please edit the sections below with your channes.	KENI	
	1 of 8 completed		
	Household Members	Edit	
	Contact Information		
	CLARK KENT	Start O	
	JACK KENT		
Since we ac household me prompted to o Kent's contact	lded a new mber, we are confirm Clark information.		Click Start.
	and the second se	and the second se	

49. Click **Next** after confirming the Individual's information is accurate.

Return to DCBS Central Office - Vie.	Client vie	WC CLARK T KENT		-
Selec enco musi	et your preferred contact method for iter urage you to select "Electronic- Email ar t click "Yes" in agreement to being sent t	ms such as messages and t nd Text Message" for best c ext messages above to sel	tax related forms. We communication. You oct this option.	
Electronic - Email only				
	Electronic - Email and Text Message			
	Mail			
Profer	red spoken language	Preferred Written Language		
Eng	lish	English	$\odot$	
Clark confirms all of information is ac	his contact ccurate.		Next	
The	expanded kynect is working f Go to <u>kyner</u>	Click Next.	thy and happy.	(2)

50. Click **Start** to confirm that the new Household Member's information is correct.

Return to DCBS Central Office - Vie.	Client view: CLARK T	KENT
	Contact Information	
	CLARK KENT	Edit -+
	JACK KENT	
	LOIS KENT	
	JENNY KENT	Start O
	Reps, kynectors, & Agents	
	Relationship & Tax Filing	Click <b>Start</b> to confirm Jake's
	Household Information	contact information.
		<b>(</b>

51. Check the **box** to confirm that the Individual and Household Member have the same address.

< Return to DCBS Central Office - Vie.		Client	VIOW: CLARK T KENT		î
kynect	Dashboard Programs v	Reps, kynectors, & Agents	Help £ TAQa	ROBB 🔕	
				Languages: English(English) ~	
BENEFITS APPLICATIO	DN				
	Change Summary	ENT			
	JAKE KENT has	same address as CLAR	K KENT.		
	Doos JAKE KENT HOV	e a physical adaress?			
			Address Line 2		
Click the box	x to confirm		LE. APT. #, SUITE, UNIT, BUILDING, FLOOR, P.O. BI		?
Jake has t	the same		2 68		-
address as (Clark )	his father Kent).				

52. Click **Next** once the Household Member's information is updated.

< Return to DCBS Central Office Vie.		Client vier	W: CLARK T KENT		•
	JAKE KENT has same	e address as CLARK K	ENT.		
	Does JAKE KENT have a ph	nysical address?			
	Yes	No			
	Address		Address Line 2		
	1523 CHRISTY AVE, LOUISV	ILLE, JEFFERSON, KEN	LE, APT. #, SUITE, UNIT, BUILDING, FL	OOR, P.O. BK	
	Does JAKE KENT have a di	fferent mailing addr	oss?		
	Yes	No			
We are finished up contact inform	dating Jake's nation.	Exit	Nox		
		is working to keep	avanı Kantuckinn enla h	happy.	2
			Click Next.		

53. Click **Edit** to continue to confirm the Household Members.

Return to DCBS Central Office Vie.	Client view CLAIX T KENT	
	Please edit the sections below with your changes.	
	1 of 8 completed	
	Household Members  Edit	
	Contact Information	
	Reps kymotors & Agents Click Ed	lit.
We are prompte	d to confirm	
Clark 5 Housello	ation Start	?



54. Click **Next** once all Household Members' information has been confirmed.

- 2.8 Reporting a Change to update the Authorized Representative, kynector, or Agent on a Resident's case
  - 55. Click Start to navigate to the Reps, kynectors, & Agents screen.

• Return to DCBS Central Office Vie.	Client view: CLARK T KE	a
	JENNY KENT	
	JAKE KENT	Edit 👄
	🚫 Rops, kynectors, & Agents	Stort Striftus, type os. & Agenta
	🚫 Rolationship & Tax Filing	
	Household Information	Click <b>Start</b> to update the Reps,
	Member Details	kynectors, & Agents section.
	Healthcare Coverage	Edit
	🚫 Sign & Submit	Start.

56. Click **Next** to continue with no updates.

<ul> <li>Return to DOBIS Central Office Vie.</li> </ul>	Insurance Agent An Insurance Agent can I • Apply for Medicaid or F • Report Changes in your • Recertify your Medicai • Apply for APTC or QHP	cl-HIPP information d benefits on HealthCare lthCare.gov	The Reps, kynectors, & Agents section allows Individuals to grant permission to Authorized Representatives to make updates to their information on their behalf. Clark informs you there are no updates needed for this section.	
	Recertify benefits on H	ealthCare.gov Find c Exit	an Insurance Agent Click Next.	
	The expanded kynect	t is working to	Next Reep every Kentuckian safe, healthy and happy.	

# 2.9 Confirming Relationships and Tax Filing Status

57. Click **Start** to confirm the new Household Member's relationship to the Individual and their tax filing status.

< securi to Duas Central Office - Vie.	Client view: 0	CLARK T KENT
	🥝 Reps, kynectors, & Agents	
	Relationship & Tax Filing	Since we added Jake as a household member, we are going to confirm his
	CLARK KENT	relationship and tax filing status.
	JACK KENT	
	LOIS KENT	
	JENNY KENT	
	JAKE KENT	start 🕥
	Household Information	Stort
	Member Details	Click Start.

58. Select the primary Individual's **Relationship** to the new Household Member from the drop-down.

< Return to DCBS Central Office - Vie.	Client view: CLARK	r KENT	
	< Change Summary		
	JAKE KENT		
	Section 1 of 2		
	Relationships 📀		
	Relationship With CLARK T KENT		
	JAKE KENT IS CLARK T KENT'S:	Click Son	
	Start Typing	to enter Jake's relationship	
	Step Grandfather (including Great)	with Clark.	
	Son		
	Step Son		
	Uncle (Including Great)		
	5		?
			-

59. Select the Household Member(s) **Relationship** to the new Household Member from the drop-down.

Return to DCBS Central Office - Vie.		Client view: CLARK T KENT		
	«Ghange Summary JAKE KENT Section 1 of 2			
	Relationships 💮			
	Relationship With CLARK T KENT			
	JAKE KENT IS CLARK T KENT'S: Son			
	Relationship With LOIS KENT		Click Son	
	JAKE KENT IS LOIS KENT'S:		for Jake's	
	Start Typing		relationship with his	2532
	Son		momer, Lois.	•
	Step Son			

60. Select the Household Member(s) **Relationship** to the new Household Member from the drop-down.

Relationship With JACK C KENT			
JAKE KENT IS JACK C KENT'S:	Cli	ick Brother/Halt	f-Brother
Start Typing uncle (including ureat)	for	Jake's relationship	o with Jack.
Adopted Son			
Brother/ Holf-Brother			
Brother-in-Low			
Father-in-Law	-		

61. Select the Household Member(s) **Relationship** to the new Household Member from the drop-down.

Return to DCBS Central Office - Vie.	Client v	INVE CLARK T KENT	
	Son		
	Relationship With JACK C KENT		
	JAKE KENT IS JACK C KENT'S:		
	Brother/ Half-Brother		
	Relationship With JENNY KENT	Click Brother/Half-Brother	
	Start Typing	for Jake's relationship with Jenny.	
	Adopted Son Brother/ Half-Brother		
	Brother-in-Low	Next	
	Father-In-Law		?

62. Once all household relationships for the new Household Member are updated, click **Next** to navigate to the **Tax Filing** screen.

Return to DCBS Central Office - Vie.		Clent view: CLARK T KENT	
	Son		
	Relationship With JACK C KENT		
	JAKE KENT IS JACK C KENT'S:		
	Brother/ Half-Brother		
	Relationship With JENNY KENT		
We are finished u Jake's relationship members in his h	updating os with the ousehold.	Next	Click Next.

63. Click **Dependent of individual in the household** to update the tax filing status of the new Household Member.

Return to DCBS Central Office Vie.	Client view: CLARK T KENT	
	Tax Filing 💿	
	How does JAKE KENT intend to file taxes this year?	
	Dependent of individual in the household	
	Dependent of individual not in the household	
	C Married Filing Jointly	Click <b>Dependent of</b>
Now we will upda status. Jake is a father	te Jake's tax filing dependent of his , Clark.	household.
	Qualifying Widaw(er)	?

64. Select who the Household Member is a dependent of.

Return to DCBS Central Office - Vie.	Client New CLARK T KENT	
0	I do not intend to file taxes	
0	Qualifying Widow(er)	
0	Single	
Who	IS JAKE KENT a dependent of? CLARK T KENT LOS KENT Jake is a tax dependent of his father, Clark. Click Clark T Kent.	
	Book Exit Next	?

65. Click Next.

Return to DCBS Central Office - Vie.	Client view: CLASK T KENT	
	I do not intend to file taxes	
	Qualifying Widow(er)	
	Single	
Who	s JAKE KENT a dependent of?	
•	LOIS KENT	Click Next.
We are finished updat tax filing informa	ing Jake's tion. Exit Next	

# 2.10 Updating Household Information

66. Click Start to update the Individual's household information.

LOIS KENT		
JENNY KENY		
JAKEKENT	Edit 🔿	
Household Information	Start	
O Member Details		Click Start
Healthcare Coverage	Edit	to begin updating Clark's Household Information
Sign & Submit	Start	
Evit		(?
	LOK KINT JUNITY KENT JAKE KENT Household Information Member Details Healthcare Coverage Sign & Submit	Los KHY JENY KENT JAKE KNT Mousehold Information Momber Details Healthcare Coverage Edit Sign & Submit Start

67. Click **Yes** or **No** for *Is anyone in the household blind*.

< Return to DCBS Central Office - Vie.	Client view: CLARK T KENT	
	Health ⊙	
	Maximum       Complete the questions below about health.       Note: Not all household members may be listed for each its them or we do not need more information about them.       Is onyone in this household blind?       Ves       Does onyone in this household have a disability?       Ves       No	e in Clark's household is blind. ck <b>No</b> .
	Bock Exit	Next

68. Click **Yes** or **No** for *Does anyone in the household have a disability*.

Return to DCBS Central Office - Vie-		Client view: CLARK T	KENT	
	Health 😔			
	Learn Mers Complete the questions bel Note: Not all household mer them or we do not need mor Is anyone in this househo Yes Does anyone in this house	ow about health. mbers may be listed for each lu te information about them. Id blind? No ahold have a disability? ①	m. This in because it either does not apply to No one in the household disability.	has a
	Yes	No	Click No.	
	Back	Exit	Noxt	?

69. Click **Next** to continue.

Return to DCBS Central Office - Vie	Client view: GLAISC T KENT	^
	Health 😔	
	Loam More	
	Complete the questions below about health.	
	Note: Not all household members may be listed for each item. This is be them or we do not need more information about them.	cause it either does not apply to
	Is anyone in this household blind?	
	Yes No	
	Does anyone in this household have a disability?	Click Next.
	Yes No	
	Back Exit	Next

70. Click **Yes** or **No** for *Is anyone in the household a migrant or seasonal farmworker*.

Return to DCBS Central Office - Vie.		Client view: CLARK T	CENT	•
	Is anyone in this house Yes	nold a migrant or seasonal farm	No one in the ho migrant or seasona	usehold is a l farmworker.
	Is anyone in this house unemployment income Yes	nold eligible for entitled income , Black Lung, or VA pension? No	Click No.	
	Is anyone in this house Yes	nold currently enrolled in schoo	517	
	Was anyone in Foster C	are?		
	res	NO		2
	Back	Exit	Noxt	•

71. Click **Yes** or **No** for *Is anyone in the household eligible for entitled income*.

• Return to DCBS Central Office - Vie-	Is anyone in this house	Client view: CLAP hold a migrant or seasonal fe	No one in the household is eligible for entitled income, such as Social	•
	Yes	No	Security Income, unemployment income, Black Lung, or VA pension.	
	is anyone in this house unemployment incom Yes	hold eligible for entitled incon e, Black Lung, or VA pension? No	ne, such as Social Security Income,	
	Is anyone in this house	hold currently enrolled in sch	Click No.	
	Yes	No		
	Yes	No		
	Back	Exit	Noxt	?

- IT VIEW CLARK T KENT Is anyone in this household a migrant or seasonal farmworker? () Yes No Is anyone in this household eligible for entitled in unemployment income, Black Lung, or VA pensic No one in household is currently enrolled in school. No Yes e in this ho Click No. Yes nyone in Foster Care Yes No Exit Back
- 72. Click **Yes** or **No** for *Is anyone in the household currently enrolled in school.*

73. Click **Yes** or **No** for *Is anyone in the household in Foster Care*.

< Return to DCBS Central Office - Vie.		Client view	CLARK T KENT	
	Is anyone in this househ	hold a migrant or seaso	nal farmworker? 🛈	
	Yes	No		
	Is anyone in this househ unemployment income Yes	nold eligible for entitled , Black Lung, or VA pens No	income, such as Social Security Income, sion?	
	Is anyone in this househ	nold currently enrolle No	No one in the household	was in Foster Care.
	Was anyone in Foster C Yes	are?	Click No.	
	Back	Exit	Noxt	?

74. Click Next to continue.

Return to DCBS Central Office - Vie.	Client view: CLAXY T KENT	•
	Is anyone in this household a migrant or seasonal farmworker? 🔘	
	Yes No	
	Is anyone in this household eligible for entitled income, such as Sociel Security Income, unemployment income, Black Lung, or VA pension?	
	705 <del>70</del> 5	
	Is anyone in this household surrently enrolled in school? Ves No	
	Was anyone in Foster Care? Click Next.	
	Ves No	
	Bock Exit Next	?

75. Click **Next** to continue with no updates.

Return to DCBS Central Office - Vie.		Client view: Cl	ARK T KENT		
	Yes	No			
	Does anyone in this ho Yes	uschold have investments	such as stocks or bonds?		
	Does anyone in this ho express card, or reload Yes	usehold have other liquid/ able money card? No	spendable resources such as cash,	direct Click Next.	
Clark confirms the updates need	re are no led.	Exit	Next		
	The expanded kyne	ct is working to keep ev	ery Kentuckian safe, healthy ar	nd happy.	2

76. Click **Yes** or **No** for Does anyone in this household have job income from an employer.

Return to DCBS Central Office - Vie		Client view: CLARK T KENT	
	Does anyone in this hos	No	er Both Clark and Lois work
Click Yes.	Does anyone in this how	schold have self-employment income	at the YMCA.
	Does anyone in this hor ① Yes	sehold receive income from Social Sec	curity, retirement, or a pension?
	Does anyone in this ho Yes	schold receive income from dividends	s, interest, or royalties?
	Does anyone in this hos	ischold receive support or maintenance	ce income, such as alimony,

77. Click **Yes** or **No** for Does anyone in the household have self-employment income.

< Return to DCBS Central Office Vie-	CI	Shert view: CLARK T KENT	
	Does anyone in this household have job	No one in the household has self-employment income.	
	Yes No Does anyone in this household receive in	Click No.	
	Yes No		
	Does anyone in this household receive ir	income from dividends, interest, or royalties?	
	Yes No		
	Does anyone in this household receive s child support, adoption subsidy paymer	support or maintenance income, such as alimony, ents, or foster care income? ©	

78. Click **Yes** or **No** for *Does anyone in the household receive income from Social Security, retirement, or pension.* 

Does anyone in this hou	usehold have job income from employer		
Yes	No	No on	e in the household
Does anyone in this household have self-employment income? O Yes No		• receives Secur	receives income from Social Security, retirement, or pension.
Does anyone in this hou ①	usehold receive income from Social Secu	rity, retirement, or a pensior	19
Yes	No	- Automatica s	
Does anyone in this hou	usehold receive income from dividenc	Click No.	
Yes	No		

79. Click **Yes** or **No** for *Does anyone in the household receive income from dividends, interest, or royalties.* 

• Return to DOBS Central Office - Vie.	Client view: CLARK T KENT		
	Does anyone in this hou Yes	usehold receive income from Social Securi	No one in the household receives income from dividends, interest, or royalties.
	Does anyone in this hou Yes	usehold receive income from dividends, in	terest, or royalties?
	Does anyone in this household receive support or maintenance inc child support, adoption subsidy payments, or faster care income?		
	Yes Does anyone in the hou unemployment benefit	No isohold receive income from an insurance i? ③	settlement or
	Yes	No	0

80. Click **Yes** or **No** for *Does anyone in the household receive support or maintenance income.* 

Return to DCBS Central Office Vie.	Client view: CLASK T KENT	
	Does anyone in this household receive income from Social Security, retirem	ent, or a pension?
	Yes No No on suppo	e in the household receives rt or maintenance income,
	Does anyone in this household receive income from divide adop	tion subsidy payments, or foster care income.
	Does anyone in this household receive support or maintenance income, suc child support, adoption subsidy payments, or foster care income? ①	th as alimony,
	Yos	
	Does anyone in the household receive income from an insu unemployment benefit?	k No.
	Yes No	2

81. Click **Yes** or **No** for *Does anyone in the household receive income from an insurance settlement or unemployment benefits.* 

Return to DGBS Central Office Vie-	Cflent view: CLARK T KE	a
	Ves         No	ai security, reurement, or a ponsion:
	Does anyone in this household receive income from div	dends, interest, or royaltios? ()
	Does anyone in this household receive support or main child support, adoption subsidy payments, or foster car	No one in the household receives income from an insurance settlement
	Yos No	or unemployment benefits.
	Does anyone in the household receive income from an in unemployment benefit? ①	nsurance settlement or
	Yes No	Click No.

82. Click **Yes** or **No** for *Does anyone in the household receive any other type of goods, services, or payments.* 

	Does anyone in this	household receive any other ty	e of goods, services, or payments? 💿	
Clic	Click No.	No hohold currently receive ome from lottery or gan the last 3 months?	No one in the household receives any oth type of goods, services, or payments.	ıer
	Does anyone in this month of July or ex	household receive Medicaid, SM pect to receive benefits in the m	AP, or TANF benefits in enother state in the with of August? $\odot$	
	Yes	No		

83. Click **Yes** or **No** for *Does anyone in the household gamble or play the lottery*.

• Return to DOBS Central Office Vis.	Does anyone in this househo Yes	No one in the ho	usehold gambles or play	rs the lottery.
	Does anyone in this household has anyone received income income from winnings in the l Yes	d currently receive income from lotte rom lottery or gambling winnings of ast 3 months?	ery or gambling winnings or r has anyone received	
	Does anyone in this household month of July or expect to rec Yes	frecoive Medicaid, SNAP, or TA eive benefits in the month of August	Click No.	
	Back	Exit	Noxt	0

84. Click **Yes** or **No** for *Does anyone in the household receive or expect to receive Medicaid, SNAP, or TANF benefits in another state.* 

Return to DCBS Central Office - Vie.		Client view: CLARK T KENT		
	Does anyone in this househo	ld receive any other type of goo	ds, services, or payments? 🛈	
	Yes	No		
	Does anyone in this hour has anyone received inc income from winnings ir Yes	No one in the	household receives any o benefits.	out of state
	Does anyone in this househo month of July or expect to re Yes	Id receive Medicaid, SNAP, or TA ceive benefits in the month of A No	NF benefits in another state in the ugust?	
			Click No.	
	Back	Exit	Next	?

85. Click **Next** to continue.

Return to DCBS Central Office Vie-		Client view: CL	ARK T KENT	*
	Does anyone in this hou	schold receive any other	type of goods, services, or payments? ()	
	Yes	No		
	Does anyone in this hour has anyone received inc income from winnings in Yes	sehold currently receive i come from lottery or gam n the last 3 months? No	ncome from lottery or gambiling winnings or biling winnings or has anyone received	
	Does anyone in this hour month of July or expect Yes	sehold receive Medicaid, to receive benefits in the No	snap, or TANF month of Aug Click Next.	
	Back	Exit	Noxt	2

86. Click **Yes** or **No** for *Does anyone in hour household need help paying medical bills from the last three months.* 

Return to DCBS Central Office Vie.		Client view: CLARK	r KeNT
	Does anyone in you Yes	r household need help paying me	dical bills from the last three months? 0
	Does anyone in	usehold have a Medicare Pe	Clark says <b>Yes,</b> due to the birth claims for Jake that he and Lois are responsible for.
C	lick <b>Yes</b> .	No	
	blind, or has a disat	usehold have medical expension of the second s	es for someone who is a senior citizen,
	Yes	No	
	Does anyone in this	household pay child support?	
	Yes	No	
	Does anyone in this	household pay for child care or o	ther dependent care? ()
	Yes	No	

87. Click **Yes** or **No** for *Does anyone in the household have Medicare Part D Premium*.

Return to DCBS Central Office - Vie-		Client view.	
	Does anyone in your household need help payi		No one in the household has Medicare
	Yes	No	to one in the nonschold has incurcate.
	Does anyone in this hous	ehold have a Medicare Pa	rt D premium? ①
	Yes	No	
	Does anyone in this hous blind, or has a disability?	ehold have medical exper ①	Click No. <sup>2011,</sup>
	Yes	No	
	Does anyone in this hous	ehold pay child support?	
	Yes	No	
	Does anyone in this hous	ehold pay for child care or	other dependent care? 0
	Vae	No	

88. Click **Yes** or **No** for *Does anyone in the household have medical expenses for a senior citizen, blind, or disabled Individual.* 

Return to DCBS Central Office Vie.	Client view: CLARK T KENT				
	Does anyone in your household need help paying medical bills from the last three months? 🛛				
	Yes	No			
	Does anyone in this household have a Medicare l		No one in the household has medical expenses for a senior citizen, blind, or disabled		
	Does anyone in this household have medical expenses for someone who is a senior citizen.				
	blind, or has a disability? 0 Yes	No	Click No.		
	Does anyone in this househo	old pay child support	,		
	Yes	No			
	Does anyone in this househo	old pay for child care	or other dependent care? 0		
	Yes	No			

89. Click **Yes** or **No** for *Does anyone in the household pay child support.* 

Return to DCBS Central Office - Vie.	Client wow. CLABI T KENT
	Does anyone in your household need help paying medical bills from the last three months? 🛈
	Yes No
	Does anyone in this household have a Medicare Part D premium?
	Yes No
	Does anyone in this household have medicate blind, or has a disability? O Yes No one in the household pays child support.
	Does anyone in this household pay child support?           Yes         No         Click No.
	Does anyone in this household pay for child care or other dependent care? 0 ?
	Yes No

90. Click **Yes** or **No** for *Does anyone in the household pay for child care or other dependent care.* 

< Return to DCBS Central Office - Vie	Client view:	CLASK T KENT
	Does anyone in your household need help payi	ng medical bills from the last three months? 🛈
	Yes No	
	Does anyone in this household have a Medicar	Part D premium? ()
	Yes No	
	Does anyone in this household have medical ex blind, or has a disability? ①	rpenses for someone who is a senior citizen,
	Yes No	
	Does anyone in this household pay child suppr	No one in the household pays for Child Care or other dependent care.
	Does anyone in this household pay for child ca	re or other dependent care? 0
	Yes No	
		Click No.

91. Click **Next** to continue.

Return to DCBS Central Office - Vie.	Citers view: CLARK T XENT
	Does anyone in this household pay child support? Ves No
	Does anyone in this household pay for child care or other dependent care?            Yes         No
	Click Next.
	The expanded kynect is working to keep every Kentuckian safe, healthy and happy. Go to <u>kynectikyger</u> to see all your options.

92. Click **Start** to confirm the Member Details for the household.

Return to DCBS Central Office Vie-	Client view: CLARK T KENT	
	Member Details	Click Start
	CLARK KENT	to confirm the Member Details for
	JACK KENT	the household.
	JENNY KENT	
	JAKE KENT	ztart 💿
	Individual Information	
	Healthcare Coverage	Edit
	Sign & Submit	Start
		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~

93. Check the **box** to choose the new Household Member's preferred Managed Care Organization (MCO) plan.

< Return to DCBS Central Office Vie.	Client view: CLARK T KENT	
	Browse All Plans	
	Select JAKE KENT's preferred MCO plan	
	No preference	Clark chooses which
	Humana Healthy Horizons in Kentucky	Organization (MCO) he
	Aetna Better Health of Kentucky	wants for Jake.
	UnitedHealthcare Community Plan	
	WellCare of Kentucky	
0	Molina Healthcare	
Click WellCare	of Kentucky.	
		?

94. Click **Next** to continue.

ter Health of Kentucky
althcare Community Plan
of Kentucky
Health Plan by Molina Healthcare
lue Cross Blue Shield
Click Next.
Next
kynect is working to keep overy Kontuckian safe, healthy and happy.
at a t

95. Select the **Living Arrangements** field to update the new Household Member's current living situation.



96. Select the appropriate in-home assistance from the drop-down.



97. Click **Next** to continue.

Living Arrangements 💿		
What is JAKE's current living situation?	0	
In Home	$\odot$	
What type of in-home assistance does JAKE receive?		
Not Applicable	0	
Click Next.	Next	
The expanded kypect is working to	keen every Kentuckien safe bealthy and banny	
The expended kyneet is working o	koop every kundukian sale, neariny and happy.	

98. Click **Edit** to update the household's Health Coverage.

Return to DCBS Central Office Vie.	Client view: CLASK T KENT	
	LOIS KENT	
	JENNY KENT	
	JAKE KENT Edit 🤿	
	Individual Information  Completed Completed	
	Healthcare Coverage     Edit	
	sign & Submit Start	cli l T li
		to update the household's
	Exit	Healthcare Coverage

99. Click Next.

kynect •	ashboord Programs v Rep	n, kynectors, & Aganta H	NEP & FAQU	Ø ∞= 0
BINEFITS APPLICATION				sadandar: ardingful) -
	«Change Summary			
	Healthcc Leanites Is anyone applying for I Yes Dees anyone in your he healthcare coverage, b	tre Cove benefits in your house No usehold applying for b tut has not yet anrolled No	rage Selection and envalued in healthcare coverage? enablishave an employer that affered ?	There are no updates needed for the household.
	Back	Exit	Next Environment	
	Click	Next.	Centuckian safe, healthy and ho sil your options.	ppy.

100. Select Report Change for Existing Household Members or No Additional Changes.

+ Ra	Client view: CLARK T KENT	
Clark confirms there additional changes tha	are no ectors, £ Agents Help £ 7AQs t need to	<b>60 8068</b> (2)
be reported for the not	Report Additional Changes	Click No Additional Changes.
Cosoff HE Please et	Are there any additional changes that need to be reported	
7 of 8 c	Report Change For Existing Household Me	
0	No Additional Changes	
CLAR	( KENT	set +

# 2.11 Sign & Submit Process

101. Click **Start** to Sign & Submit.

Return to DCBS Central Office - Vie.	Client view: CLARK T KENT	
	LOIS KENT	
	JENNY KENT	
	JAKE KENT	Edit >
-	Individual Information - Other Information - Completed	
After Clark		
no additional	Healthcare Coverage	Edit
changes that need	le la constante de la constante	
to be reported we	Sign & Submit	Start
forward to Sign and		
Submit.	Click Start	
	to Sign and Submit.	
		—



102. Click **Next** to confirm the Collateral Contact information needed for verification.

103. Click **Read and agree to Application Statement of Understanding** so the Individual can confirm and agree.

Return to DCBS Central Office - Vie.	Cilent view: CLARK T KENT	*
Walk Me Through	Computantary Signature Page	
	Terms of Agrooment Summary           1 I have answered all questions truthfully and to the best of my ability.           2 If any changes occur to my situation, I are responsible for reporting them.           3 Providing Islash information may result in penalize.           4 Please read and agree to each of the terms. If you do not agree, your application my be affected, and you may be nellipible to receive benefits.	
	Read and agree to Application Statement of Understanding  y.Warning	
Click Read a Application S Underst so Clark can con	nd agree to Statement of assessment tanding firm and agree	
so clark can con	ate and federal databases for benefits renewal?	?

104. After reviewing the Statement of Understanding with the Individual, click I agree.



105. Click **Read and agree to Medicaid Penalty Warning** so the Individual can confirm and agree.

Return to DCBS Central Office - Vie.	Client view: CLARK T KENT	
	< Change Summary	Î
Walk Me Through	Signature Page	I.
	Terms of Agreement Summary	I.
	I have answered all questions truthfully and to the best of my ability.     I have changes occur to my situation. I am responsible for reporting them.	I.
	This interfection in any memory memory in parameters of type into a set of type into a set of type into a set of the terms. If you do not agree, your application my be affected, and you may be ineligible to receive benefits.	
	Read and agree to Application Statement al Understanding	
	Read and agree to Medicald Penalty Warning	
	Read and agree to SMAR Rights & Responsibilities	
Click Read a Medicaid Per so Clark can co	and agree to alty Warning nfirm and agree.	

106. After reviewing the Medicaid Penalty Warning with the Individual, click I agree.



107. Click **Read and agree to Failure to Reconcile Statement of Understanding** so the Individual can confirm and agree.



108. After reviewing SNAP Rights and Responsibilities with the Individual, click I agree.



109. Click **I agree** to the kynect qualifying health coverage statement.

Click <b>I Agree</b> to the kynect qualifying health coverage statement.	IDroggee	
	Vater Registration	0

110. Click **Yes** or **No** for *Would the Individual like to register to vote*.

< Return to DCBS Central Office - Vie.	Client view	HE CLARK T KENT	, in the second s
	ast kone	Hly signing this application.	
	ком Jote 7/7/2021	Clark is already registered to vote	
va	Voter Registration Would you like to register to vote? ① Yes No	Click No.	
			?

111. Click **Submit Benefits Application** to submit the updates once the electronic signature of the Individual is accounted for.

	Disagree Dy entering your name below, you are eff rent some Clark	ectronic •	ally signing this ML T	dia application.
	Household member does not ho	ve a mic	Suffix Reduct	9
	Cote 10/18/2021	-	and fet	After optoring Clark's name to
	Voter Registration			electronically sign the application, we are finished Reporting Changes for
	Would you like to register to vote? ③ Yes No			Clark Kent and his family.
	Bock			Submit Burafite Application
Click Su Ap to subn	<b>bmit Benefits</b> <b>plication</b> iit the updates.			

112. kynect benefits will now process the changes the Individual has reported and update their benefits based on those changes. Click **Continue**.



# 2.12 End of Reporting a Change Steps

113. Click Return to dashboard.

Return to DCBS Central Office - Vie	Client view: CLARK T KENT	
kynect Door		CD ROEB (9
		Longuages: English(English) >
BENEFITS APPLICATION		
Eligibilit	Submission Processing	× •
	Thank you for submitting benefits application in kynect benefits. System is still processing your results. Please refresh your dashboard in a fer minutes to view your results.	stem w
	Roturn to dashboard	
	The expanded kynect is working to keep a contuckian safe, heat	ithy and happy.
Holp & FAQS Find DOBS Office	Contact Us	rn to dashboard.

114. Click **Benefits** to view the Individual's Benefits.

Return to DCBS Central Office - Vie -	Client view: CLARK KENT		
Overview Benefits	Welcome, CLARK KENT	1	
Documents Claims & Payments	Click <b>Benefits</b> to see Clark's Benefits.	Add Other Ben	efits Report a Change
Hearings		View your te-do list and me	eoger
	Benefits →	Message Center	<b>→</b>
	Case#:112747594 • Active	To Do's	Unread
	Approved Pending Interview Pending Verification	0	1
	<ul> <li>Medicaid/KCHIP</li> <li>SNAP</li> </ul>	0 Due this week	0 Notices
		0 New	0 Announcements
			1 Notifications

115. The **Benefits** screen displays all Benefits associated with the Individual and their household.

SNAP		
CLARK T KENT, LOIS KENTMCI, JACK C KENT	JENNY KENT, JAKE KENT	
Benefit Period Allottes		
07/07/2021-06/30/2022 July		
\$782		
Pandry Sufficien  Modiocid/KCHIP		
CLARK T KENT Approved	LOIS KENTMCI Approved	
Type Benefit Period	Type Ben	efft Period
Medicaid 07/01/2021-06/30/2022	Medicaid 07/0	pi/2021 - 06/
		olish Pasta
	David Long & Brown and Provide Property	

# 3 Assessment

- 1. Residents should report \_\_\_\_\_\_ in a timely manner to avoid interruptions in their benefits or having to repay benefits.
  - a. Taxes
  - b. All changes in information
  - c. 401k retirement plans
  - d. Medicare plans
- The One Case Concept highlights that any changes made to a Resident's information impacts \_\_\_\_\_.
  - a. Their taxes
  - b. Their child care
  - c. All programs with which they are associated
  - d. Their job
- 3. A \_\_\_\_\_ is an indication that important information is needed to confirm outstanding questions for a Resident's case.
  - a. Warrant
  - b. Late notice
  - c. Request for Information (RFI)
  - d. Policy
- 4. Any changes made to a Resident's case may generate a \_\_\_\_\_\_ that the Resident is required to resolve.
  - a. Request for Information (RFI)
  - b. Email
  - c. Tax
  - d. Late fee
- 5. Are Agents and kynectors able to assist Residents with updates to their information in kynect benefits?

- a. Only on Tuesdays
- b. No
- c. Yes
- d. Only with certain Residents
- 6. \_\_\_\_\_ completed for other benefit programs impact a Resident's benefits.
  - a. Training videos
  - b. Applications
  - c. Doctor visits
  - d. Webinars
- Be sure to make Residents aware of any Request for Information (RFI) because they may \_\_\_\_\_.
  - a. Call the police.
  - b. Directly impact their benefits.
  - c. Contact their family members.
  - d. Fine them \$1,000.
- 8. Which information is editable when Reporting a Change in kynect?
  - a. Contact information
  - b. Prescription medications
  - c. Vehicle registration number
  - d. Grandparent's primary care doctor
- 9. Which of the following changes in information needs to be reported by the Resident?
  - a. Address change
  - b. Medication changes
  - c. Changes in paid time off
  - d. Doctor visits
- 10. Which information can you use to access a Resident's case?
  - a. Their employee ID number
  - b. Their case number
  - c. Their job's tax number
  - d. Their spouse's job's tax number