

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

<b>Document Name</b>	Report a Change and Case Maintenance Introduction
<b>Project Name</b>	kynect State-Based Marketplace (SBM)
<b>Client</b>	Kentucky Cabinet for Health and Family Services
<b>Document Author</b>	Deloitte Consulting
<b>Document Version</b>	2.0
<b>Document Status</b>	Final Submission
<b>Date Released</b>	September 17, 2021

### Document Edit History

Version	Date	Additions/Modifications	Prepared/Revised by
1.0	August 27, 2021	Final Submission	Deloitte Consulting
2.0	September 17, 2021	Revised Submission	Deloitte Consulting

## 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.**
3. **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.

**Existing Cases**

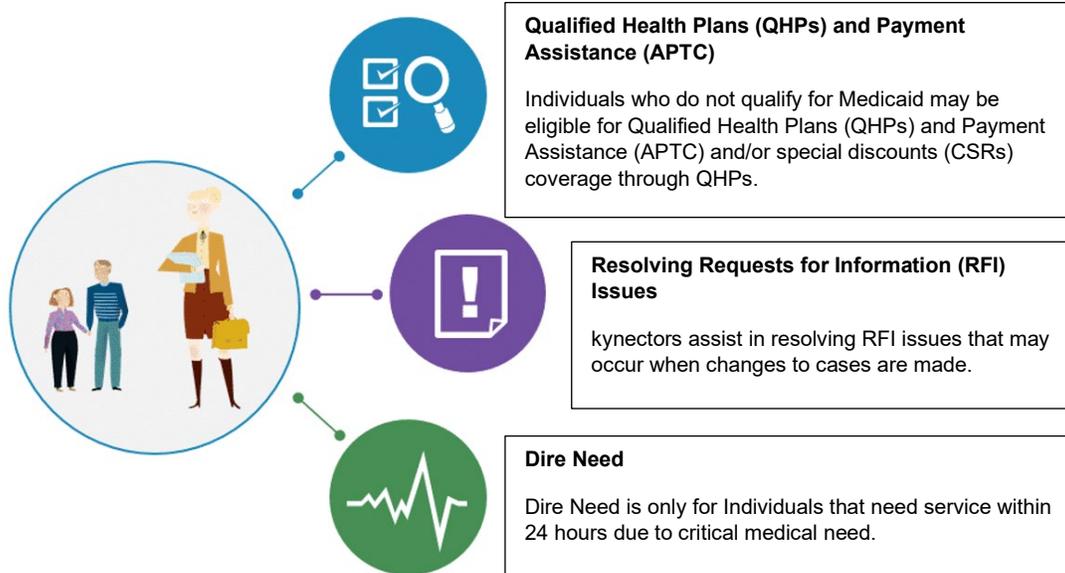
Updating a Resident's case could result in additional Requests for Information (RFI) or impact other programs (SNAP/KTAP/ Child Care). **It is important that kynectors inform Residents of any RFI.**

**Adding/Removing Individuals**

If an Individual is on an existing case, remove the Individual from that case before adding to a new case.

**Updating Income**

When updating income, **do not** delete the existing income reported. Add an end date for the existing income, and then add any new income.



## 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:

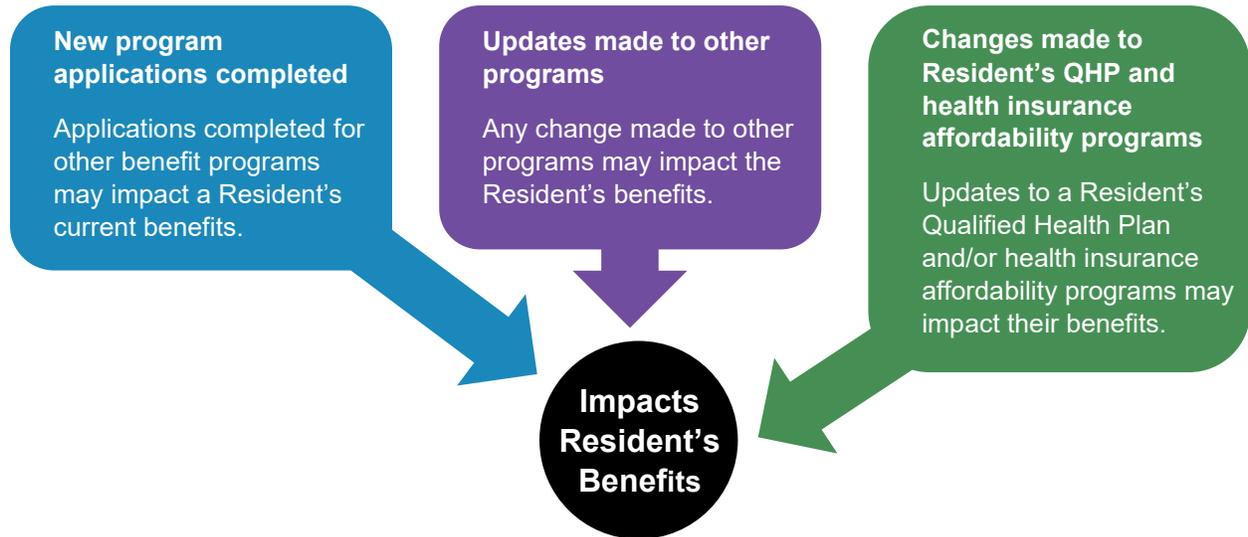
### Editable Information in kynect when Reporting a Change

- 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)

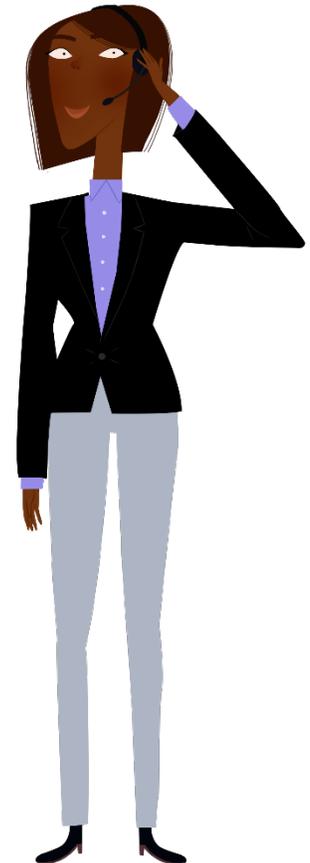
Any changes made to a Resident's case may generate a Request for Information (RFI) that the Resident is required to resolve. Be sure to make Residents aware of any RFI because they may directly impact their benefits.

**Pending Questions** An RFI is an indication that important information is needed to confirm outstanding questions for a Resident's case.

**Make Residents Aware of a RFI** When Reporting a Change or making any updates to a Resident's case, make them aware that a RFI may be generated.

**RFI Impacts on Other Benefits** For example, if you report a change in address on a Resident receiving Medicaid and SNAP benefits, they will receive an RFI requesting verification for shelter and utility expenses.

- The RFI may pend their case if they have SNAP benefits, but their Medicaid benefits would be approved.
- The case will show pending due to the household composition RFI. When a new address is reported SNAP also re-verifies Household Composition which is a required verification and if not returned SNAP eligibility will discontinue.



## 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

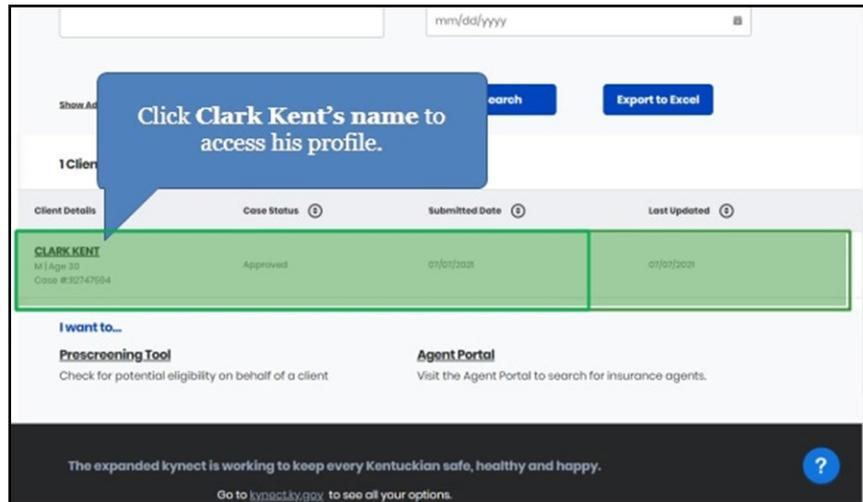
1. Enter the Individual's **Case Number** to begin the reported change.

The screenshot shows a search form with fields for First Name, Last Name, Case Number, Application Number, and Date of Birth. A green box highlights the Case Number field. A blue callout box contains the text: "Enter 112747594 then click Enter on your keyboard." A purple callout box contains the text: "For this example, the Individual we are assisting is Clark Kent. To access Clark's information enter his case number." The form includes "Search" and "Export to Excel" buttons. At the bottom, there is an "Agent Portal" link and a help icon.

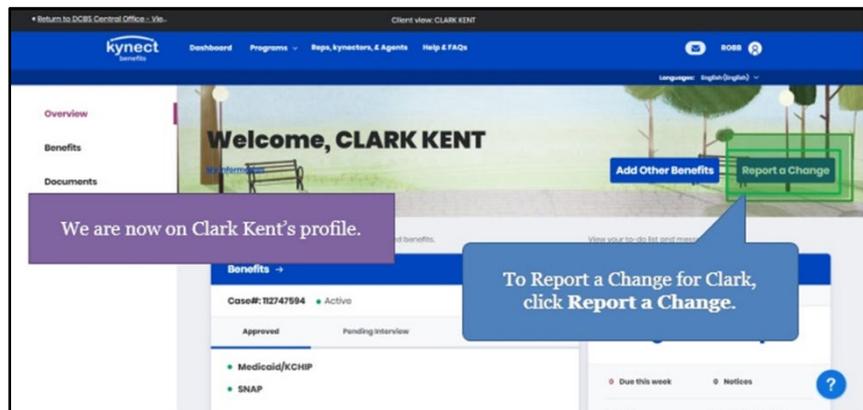
2. Click **Search** to search for the desired Individual.

The screenshot shows the search form with the Case Number field filled with "112747594". A blue callout box contains the text: "Click Search." The "Search" button is highlighted with a green box. The form includes "Reset" and "Export to Excel" buttons. At the bottom, there is an "Agent Portal" link and a help icon.

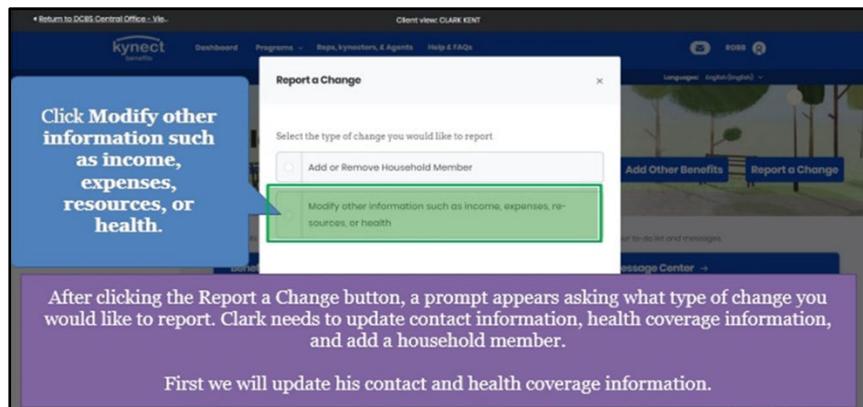
3. Click the **Individual's Name** to access their profile.



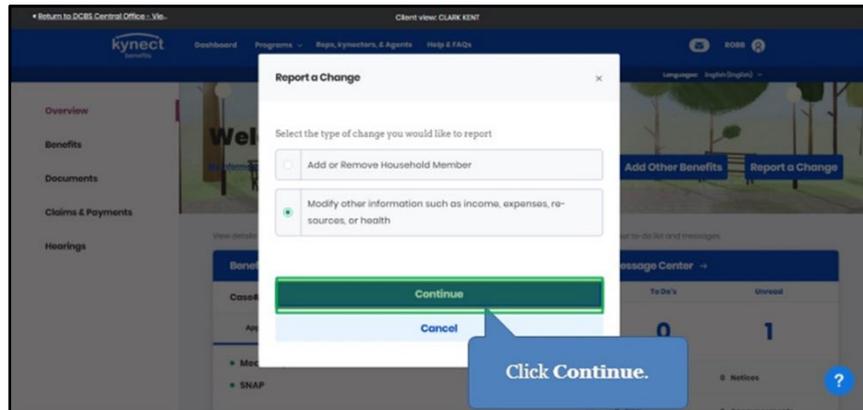
4. To Report a Change for the Individual, click **Report a Change**.



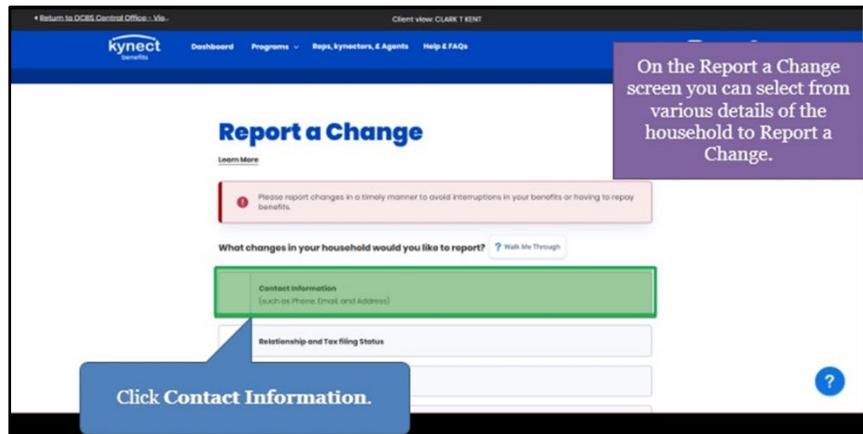
5. After clicking **Report a Change**, a prompt appears asking what type of change the Individual would like to report. Click **Modify other information such as income, expenses, resources, or health**.



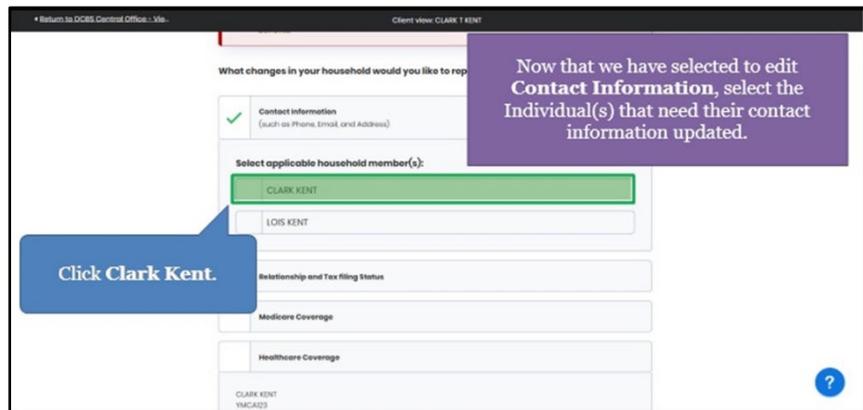
6. Click **Continue**.



7. Click **Contact Information**.



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



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

What changes in your household would you like to report? [Walk Me Through](#)

Contact Information  
(such as Phone, Email, and Address)

Select applicable household member(s):

CLARK KENT

LOIS KENT

Relationship and Tax filing Status

Medicare Coverage

Healthcare Coverage

CLARK KENT  
YMCA123

CLARK KENT  
YMCA123

Click Lois Kent.

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

Relationship and Tax filing Status

Medicare Coverage

Healthcare Coverage

CLARK KENT  
YMCA123  
Insurance through an employer, including the parent's employer

CLARK KENT  
YMCA123  
Insurance through an employer, including the parent's employer  
Policy ID: YMCA123

Emergency Medical Condition and Disability

Pregnancy

Member Information

Clark also needs to update his healthcare coverage information.

Click Healthcare Coverage.

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

Expense [?](#)  
(such as child support or medical)

Living Arrangement [?](#)

Education

If you would like to report a change for something not listed above, call DCBS at 1 (855) 306-8952

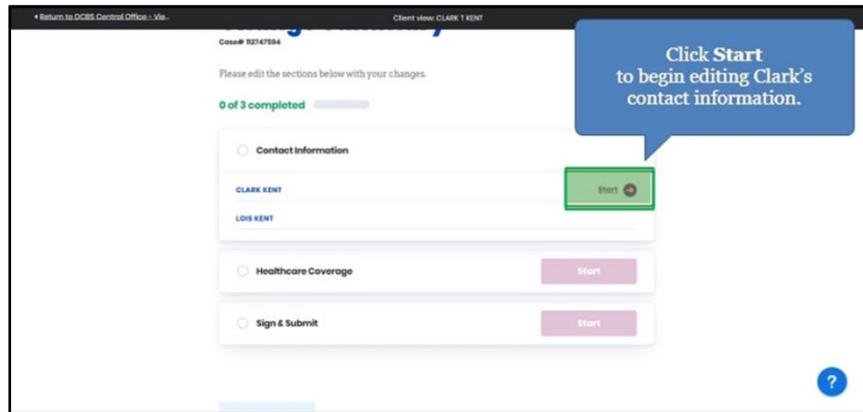
Exit

Continue

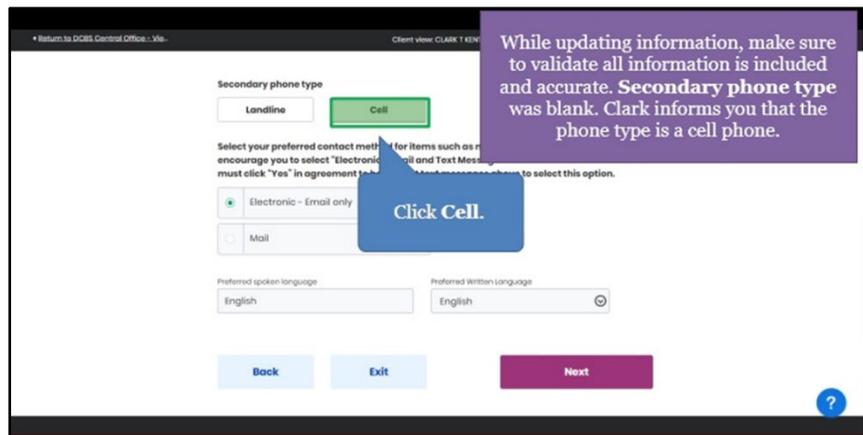
Click Continue.

## 2.2 Reporting a Change for Resident's Contact Information

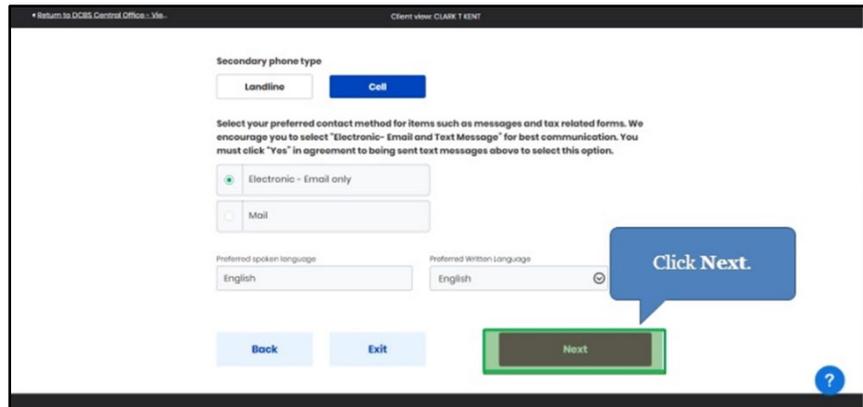
12. Click **Start** to edit the Individual's contact information.



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



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



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

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.

Enter **200 Meridian Ave** then click **Enter** on your keyboard to update Clark's address.

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

Click the **top address option** from the address list.

- Click **Yes** or **No** for *Does the Individual have a different mailing address?*

Click **No** since Clark does not have a different mailing address.

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

This screenshot shows the 'Client view: CLARK T KENT' page. At the top, there are two address input fields: 'Address' with the value '200, MERIDIAN AVENUE, LOUISVILLE, JEFFERSON' and 'Address Line 2' with the value 'IE, APT. #, SUITE, UNIT, BUILDING, FLOOR, P.O. BI'. Below these are two confirmation questions: 'Does CLARK KENT have a different mailing address?' with 'Yes' and 'No' radio buttons, and 'Does everyone in CLARK KENT's household have the same address information?' with 'Yes' and 'No' radio buttons. A blue callout box with the text 'Click Next.' points to a green-bordered 'Next' button. At the bottom, a footer reads 'The expanded kynect is working to keep every Kentuckian safe, healthy and happy.' with a help icon.

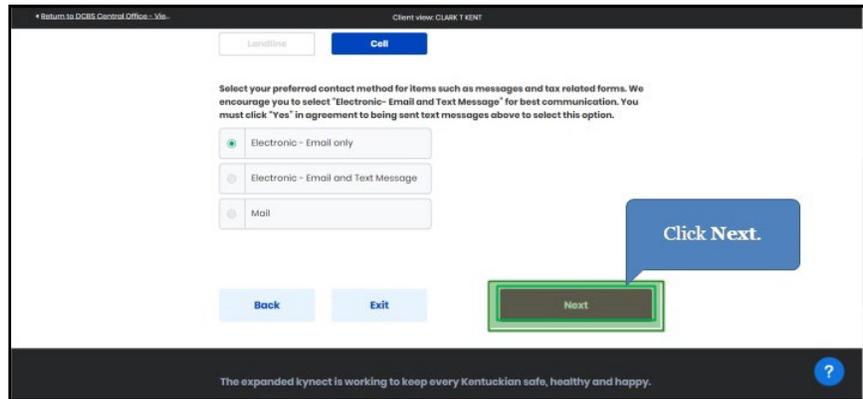
19. Click **Start** to update the Household Member(s) contact information.

This screenshot shows the 'Client view: CLARK T KENT' page with a progress bar indicating '0 of 4 completed'. A purple callout box says 'Now we will update contact information for Lois Kent.' Below the progress bar is a list of household members: 'CLARK KENT' and 'LOIS KENT'. A green-bordered 'Start' button is next to 'LOIS KENT'. A blue callout box with the text 'Click Start.' points to this button. Below the list are sections for 'Member Details', 'Healthcare Coverage', and 'Sign & Submit', each with its own 'Start' button. A help icon is in the bottom right corner.

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

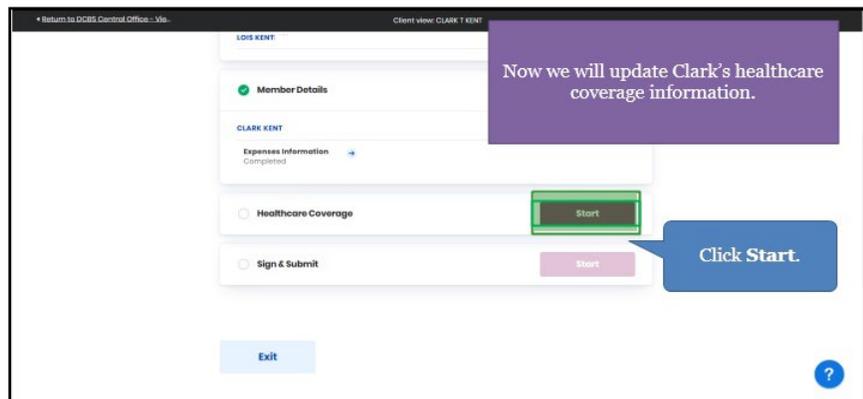
This screenshot shows the 'Client view: CLARK T KENT' page with a purple callout box saying 'Lois and Clark share the same contact information.' Below this is a 'Contact Information' section for 'LOIS KENT'. A green-bordered box contains the text 'LOIS KENT (MCI) has the same contact information as CLARK KENT'. Below this are input fields for 'Email' (value: 'kent@mailinator.com'), 'Phone Number' (value: '005-0937'), and 'Ext.'. A blue callout box with the text 'Click the box.' points to the green-bordered box. A help icon is in the bottom right corner.

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

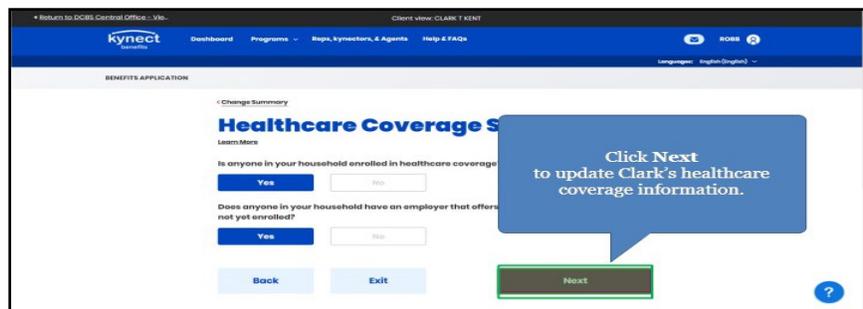


### 2.3 Reporting a Change for Resident's Health Coverage

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

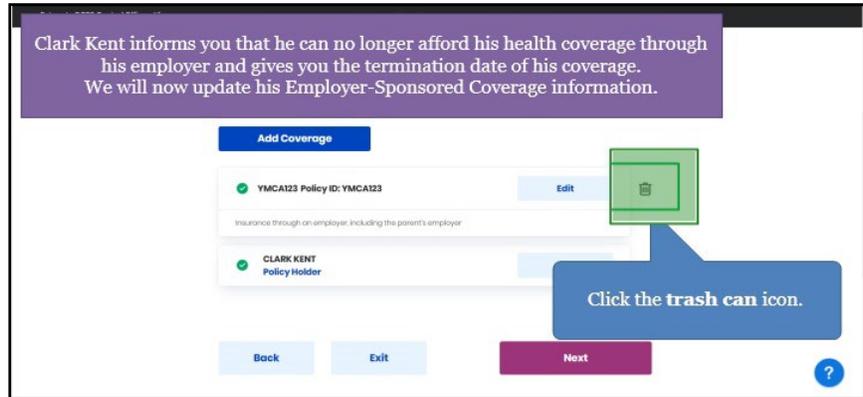


23. Click **Next** to update the Individual's healthcare coverage information.

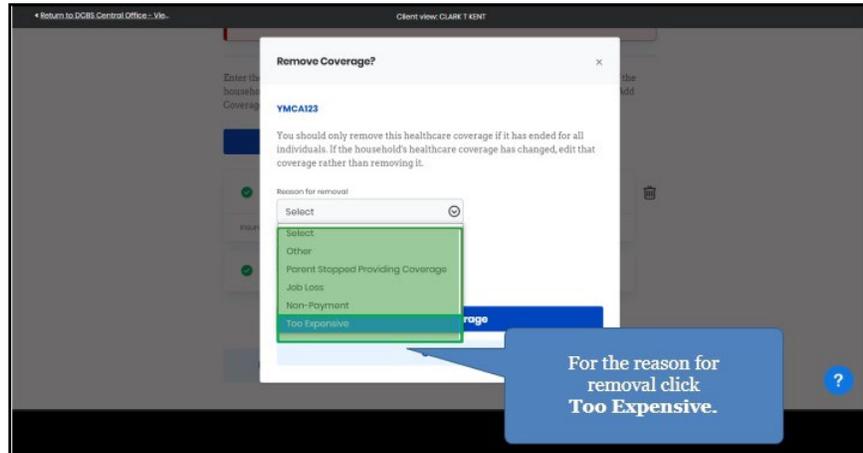


## 2.4 Reporting a Change with loss of Employer-Sponsored Insurance (ESI)

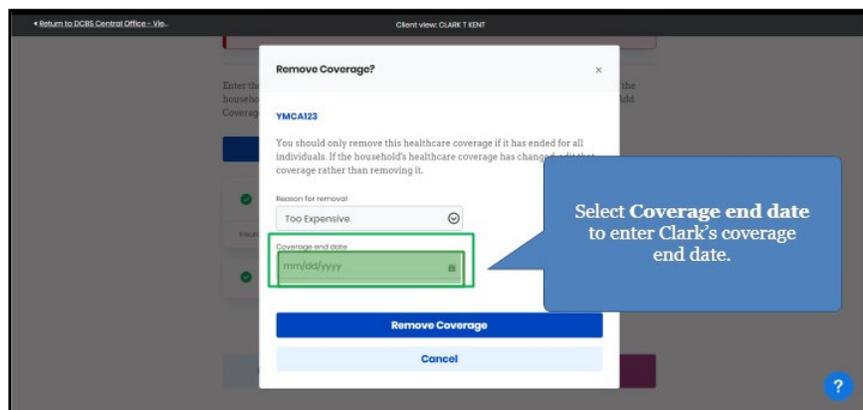
24. Click the **trash can** icon next to the Employer-Sponsored Insurance plan being terminated.



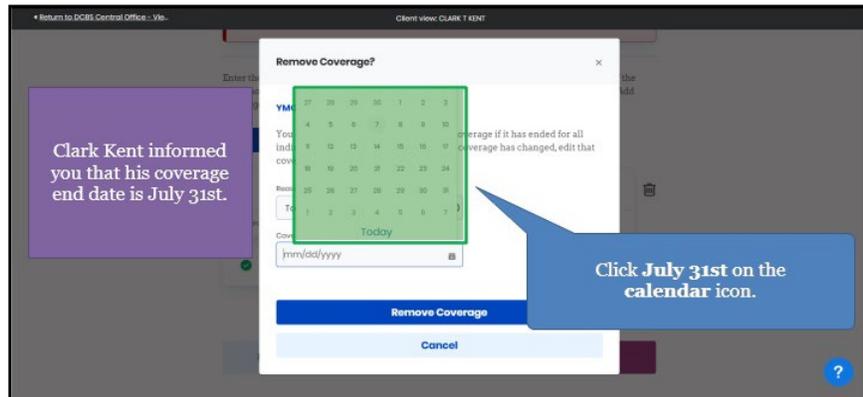
25. Select the **Reason for removal** from the drop-down.



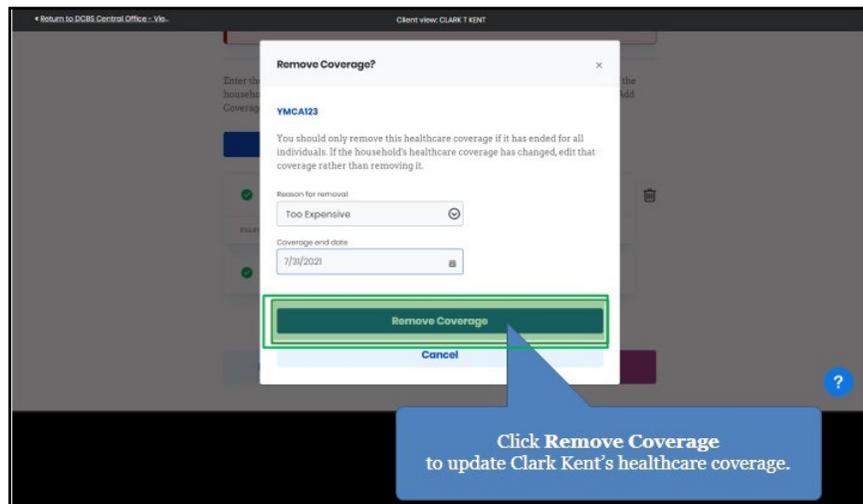
26. Enter the **Individual's Coverage end date**.



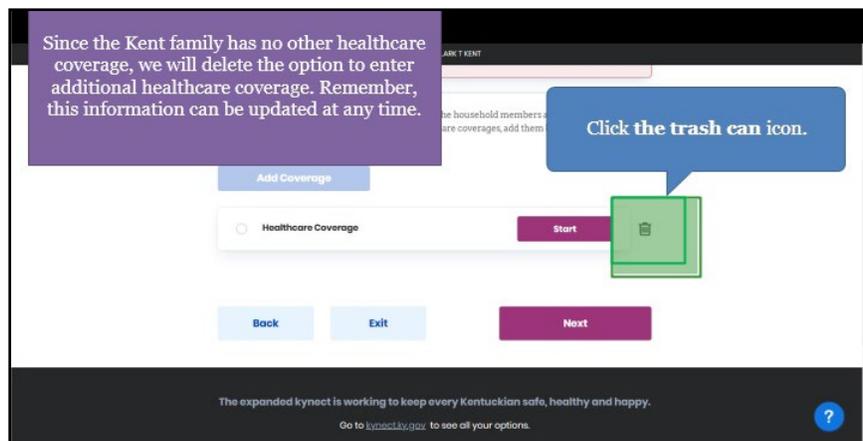
27. Select the appropriate **Year**, **Month**, and **Day** for the coverage end date from the calendar.



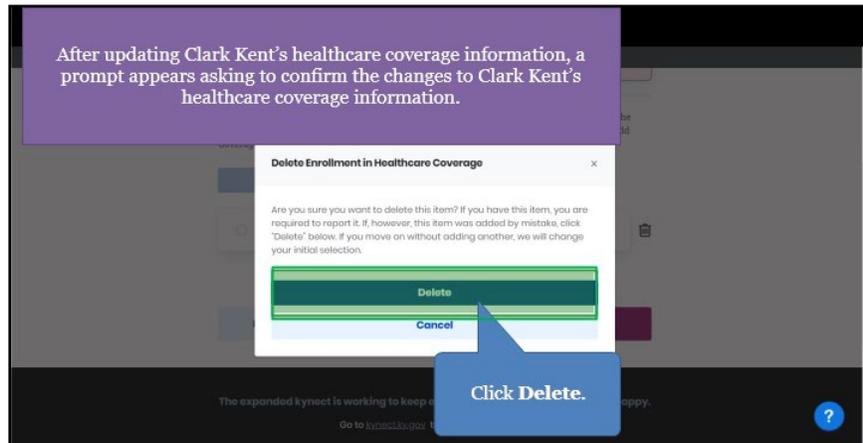
28. Click **Remove Coverage** to update the Individual's health coverage.



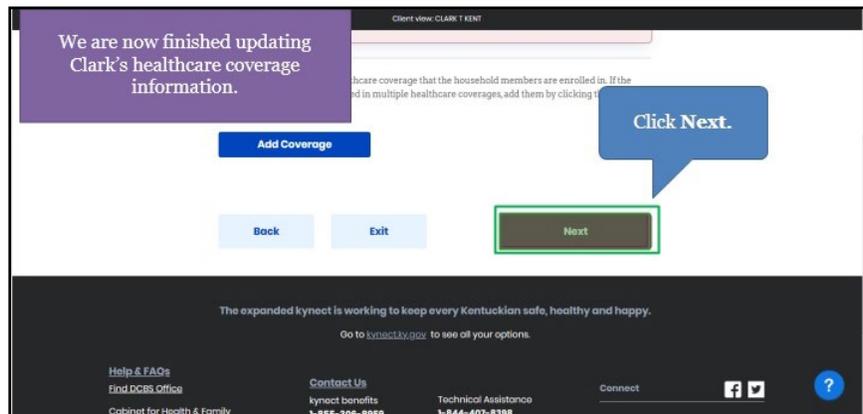
29. If the Individual has no other health coverage, delete the option to enter additional healthcare coverage by clicking the **trash can icon**.



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

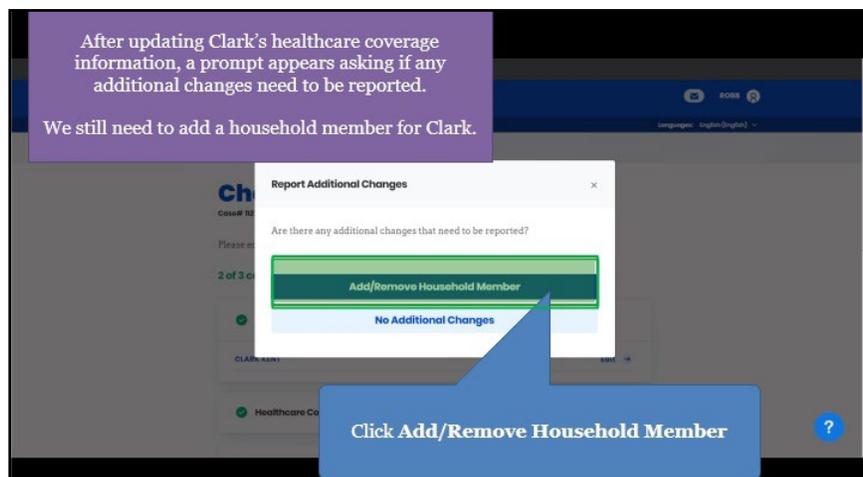


31. Click **Next** after the healthcare coverage information has been updated.

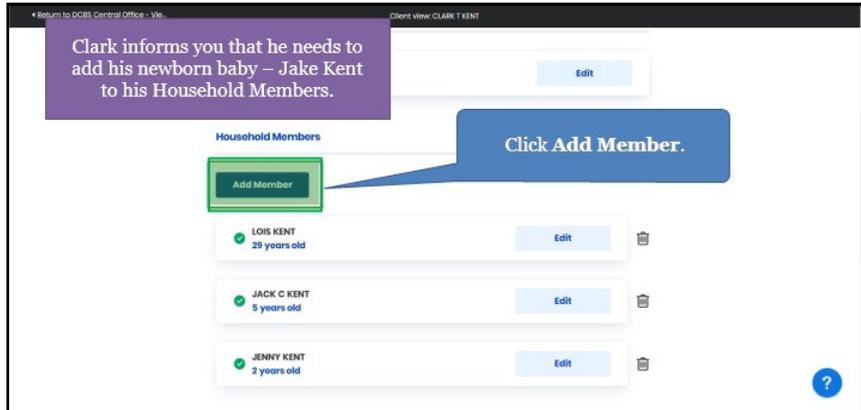


## 2.5 Reporting a Change to add a Resident to a case

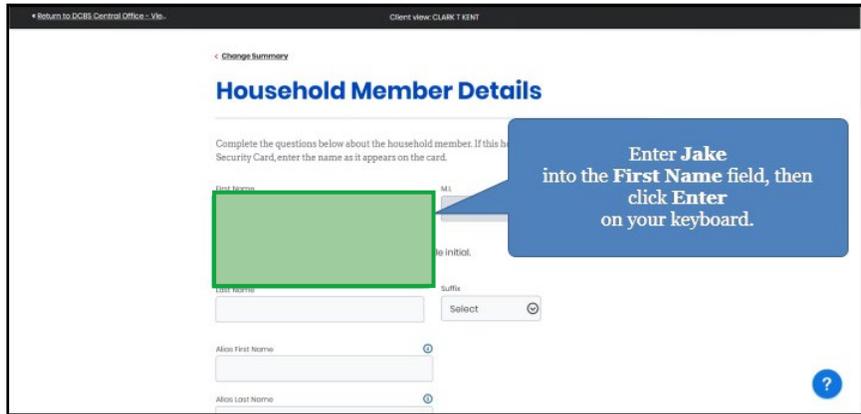
32. Click **Add/Remove Household Member** when the **Report Additional Changes** prompt displays.



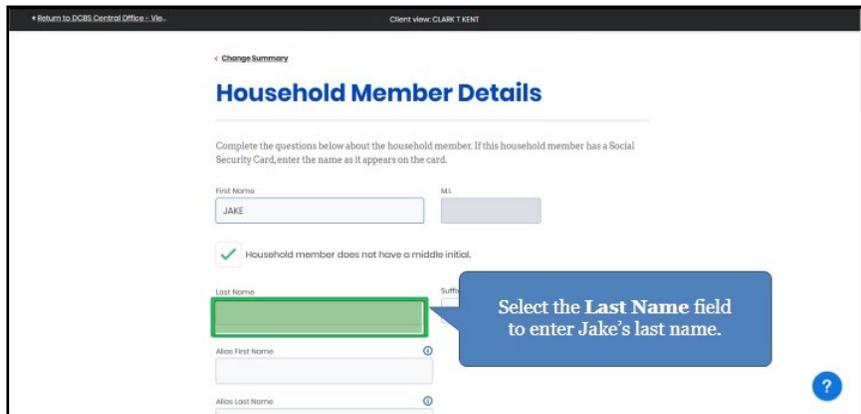
33. Click Add Member.



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



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



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

Form fields include: Name (JAKE), Household member does not have a middle initial (checked), Last Name (KENT), Suffix (Select), Alias First Name, Alias Last Name, Sex (dropdown), Date of Birth (mm/dd/yyyy), Does this individual have a Social Security Number? (Yes/No), and Is this individual a resident of the Commonwealth of Kentucky? (Yes/No).

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

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

Form fields include: Does this individual have a Social Security Number? (Yes/No), Is this individual a resident of the Commonwealth of Kentucky? (Yes/No), Select this individual's race(s) (American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian/Other Pacific Islander, White, Unknown), and Is this individual Hispanic/Latino? (Yes/No).

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

Client view: CLARK 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
- Does not have an SSN and may only be issued an SSN for a valid non-work reason
- Refuses to provide an SSN
- Newborn without SSN
- Without SSN Card

Click Newborn without SSN.

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?*

Is this individual a resident of the Commonwealth of Kentucky?

Yes  No

Select this individual's race(s)

- American Indian or Alaskan Native
- Asian
- Black or African American
- Native Hawaiian/Other Pacific Islander
- White
- Unknown

Is this individual Hispanic/Latino?

Yes  No

We have to ask for ethnicity and race to ensure that program benefits are distributed without regard to race, color or national origin, but you don't have to answer. Your answer won't affect how many benefits you get or how soon you get them.

Click Yes since Jake is a Kentucky Resident.

41. Select the Household Member's **Race**.

Is this individual a resident of the Commonwealth of Kentucky?

Yes  No

Select this individual's race(s)

- American Indian or Alaskan Native
- Asian
- Black or African American
- Native Hawaiian/Other Pacific Islander
- White
- Unknown

Is this individual Hispanic/Latino?

Yes  No

We have to ask for ethnicity and race to ensure that program benefits are distributed without regard to race, color or national origin, but you don't have to answer. Your answer won't affect how many benefits you get or how soon you get them.

Click White for Jake's race.

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

The screenshot shows a form with a dropdown menu at the top set to 'Unknown'. Below it is the question 'Is this Individual Hispanic/Latino?' with radio buttons for 'Yes' and 'No'. The 'No' button is highlighted with a green box. A blue callout box points to the 'No' button with the text: 'Click No since Jake is not Hispanic/Latino.' Below the question is a checkbox for 'This household member passed away in the last three months'. Under the 'Program Selection' heading, there is a question 'What programs would this individual like to apply for?' with two radio button options: 'Medicaid/KCHIP/Qualified Health Plan with payment assistance (APTC)' and 'QHP (Medical and Dental insurance plans without payment assistance)'. At the bottom are 'Cancel' and 'Save' buttons, and a help icon.

2.6 Applying for Medicaid/KCHIP

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

The screenshot shows the same form as in step 42. A purple callout box on the right says 'Clark wants to apply for Medicaid/KCHIP for Jake.' A blue callout box at the bottom left points to the 'Medicaid/KCHIP/Qualified Health Plan with payment assistance (APTC)' radio button, which is selected and highlighted with a green box. The 'Save' button is visible at the bottom right.

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

The screenshot shows the form with the 'Medicaid/KCHIP/Qualified Health Plan with payment assistance (APTC)' and 'QHP (Medical and Dental insurance plans without payment assistance)' radio buttons selected. Below them is the question 'Is this Individual a U.S. Citizen or a U.S. National?' with radio buttons for 'Yes' and 'No'. The 'Yes' button is highlighted with a green box. A blue callout box at the bottom left points to the 'Yes' button with the text: 'Click Yes since Jake is a U.S. Citizen.' The 'Save' button is visible at the bottom right.

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

The screenshot shows a web form with the following elements:

- Section: "What programs would this individual like to apply for?" with two checked options: "Medicaid/CHIP/Qualified Health Plan with payment assistance (APTC)" and "QIP (Medical and Dental Insurance plans without payment assistance)".
- Question: "Is this individual a U.S. Citizen or a U.S. National?" with "Yes" selected.
- Question: "Is the individual a naturalized or derived citizen?" with "No" selected and highlighted by a green box.
- Buttons: "Cancel" and "Save".
- Callout box: A blue speech bubble pointing to the "No" option with the text "Click No since Jake was born in the U.S.".

46. Click **Save** to confirm the selection.

The screenshot shows the same web form as above, but with the "Save" button highlighted by a green box. A blue callout box points to the "Save" button with the text "Click Save.".

## 2.7 Confirming and Saving Household Members Information

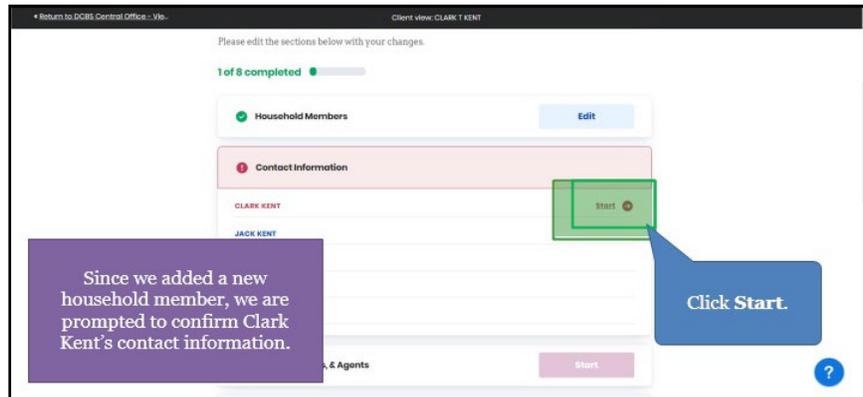
47. Click **Next** once all Household Members have been added.

The screenshot shows a list of household members for "CLARK T KENT":

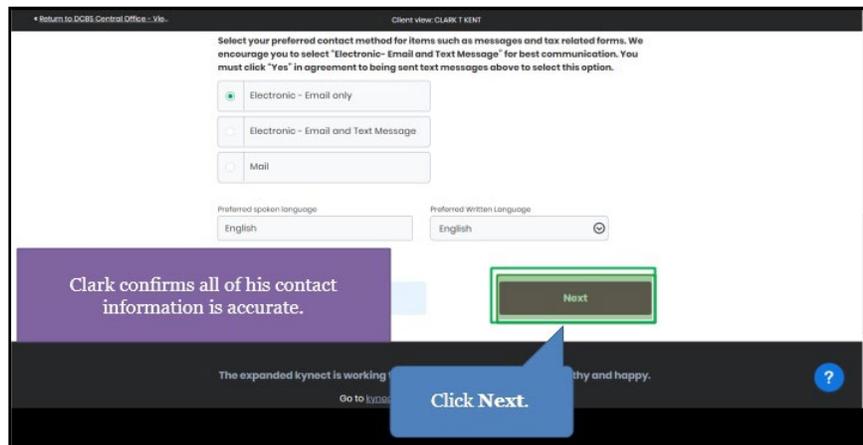
- LOIS KENT, 29 years old
- JACK C KENT, 5 years old
- JENNY KENT, 2 years old
- JAKE KENT, 0 years old

Each entry has an "Edit" button and a trash icon. At the bottom, there are "Exit" and "Next" buttons. A blue callout box points to the "Next" button with the text "Click Next." A purple box on the left contains the text "We are finished adding household members.".

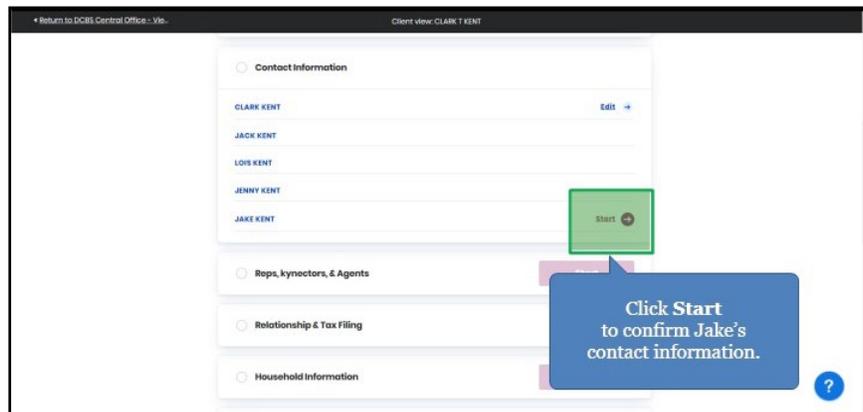
48. Click **Start** to confirm the Individual's contact information.



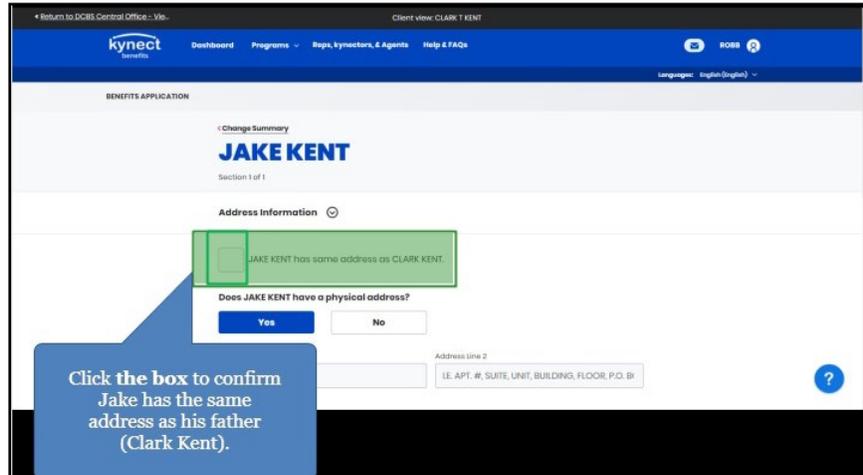
49. Click **Next** after confirming the Individual's information is accurate.



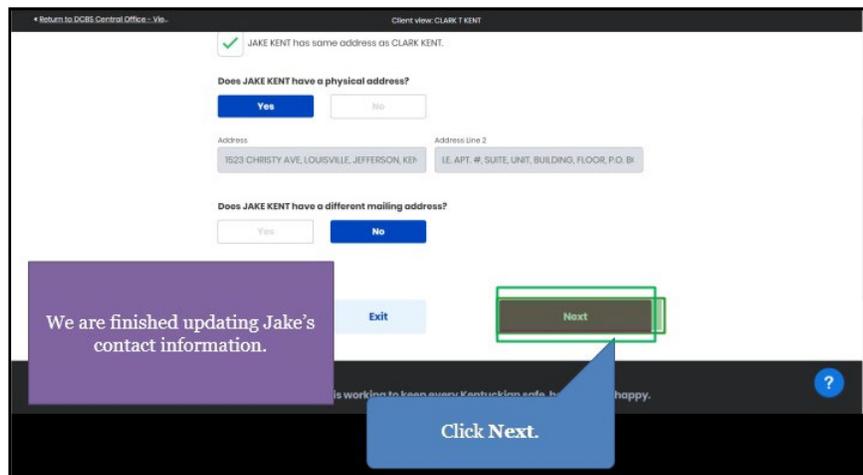
50. Click **Start** to confirm that the new Household Member's information is correct.



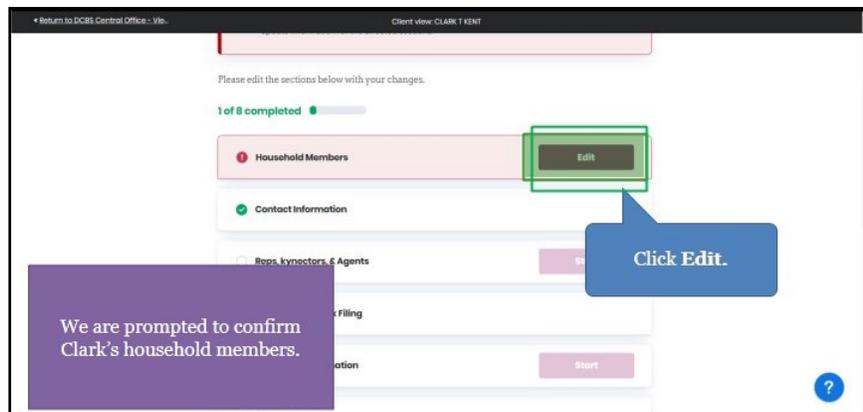
51. Check the **box** to confirm that the Individual and Household Member have the same address.



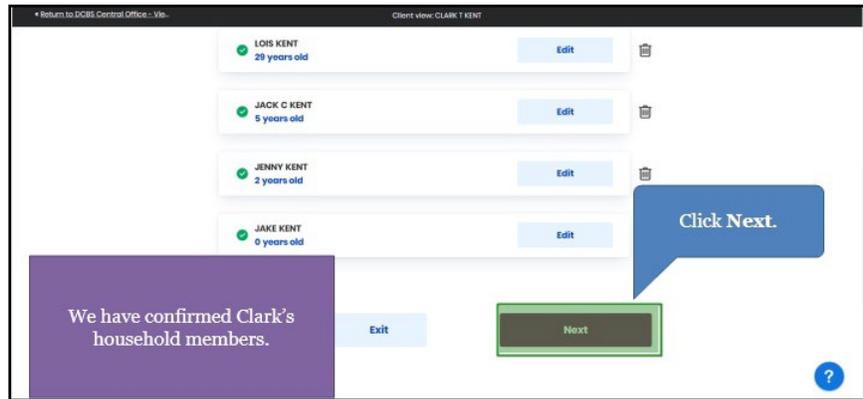
52. Click **Next** once the Household Member's information is updated.



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

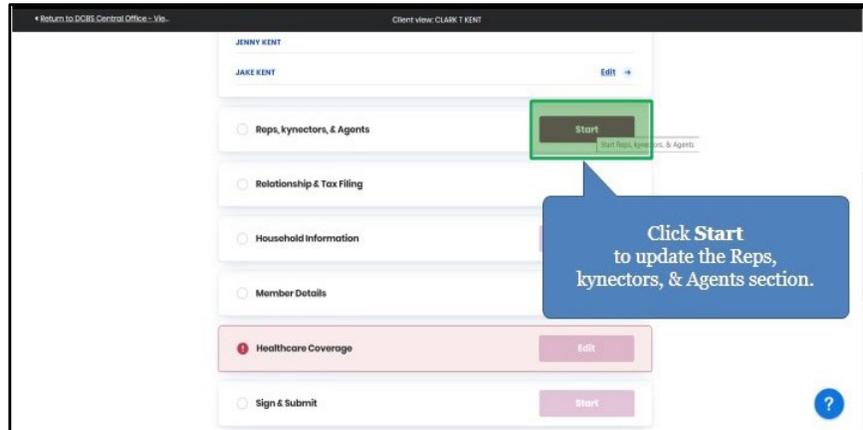


54. Click **Next** once all Household Members' information has been confirmed.

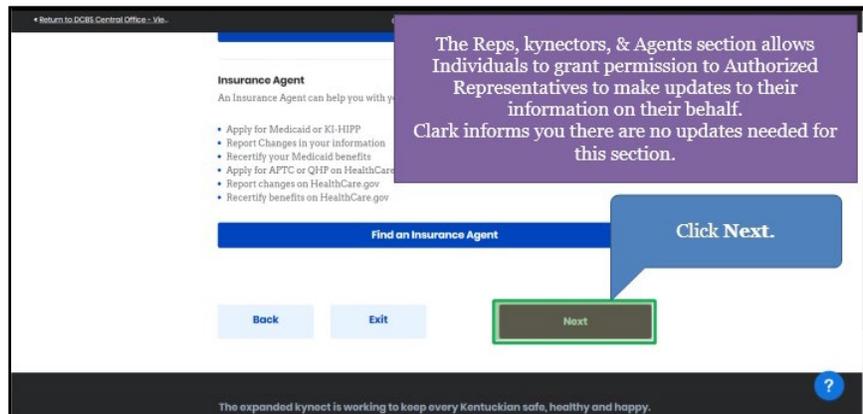


## 2.8 Reporting a Change to update the Authorized Representative, kynector, or Agent on a Resident's case

55. Click **Start** to navigate to the **Reps, kynectors, & Agents** screen.

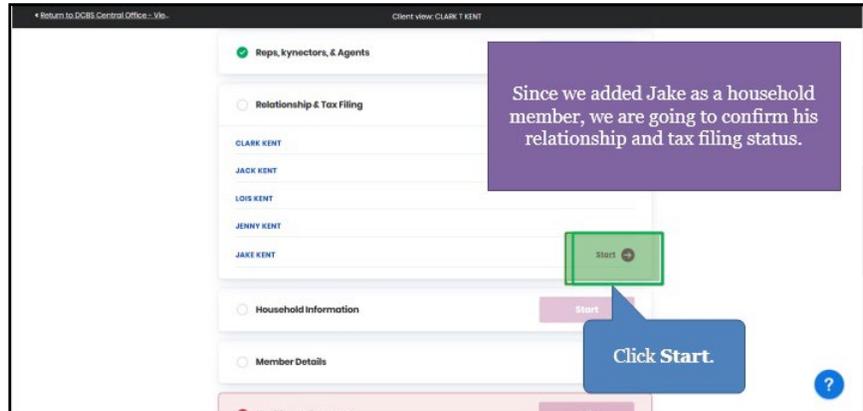


56. Click **Next** to continue with no updates.

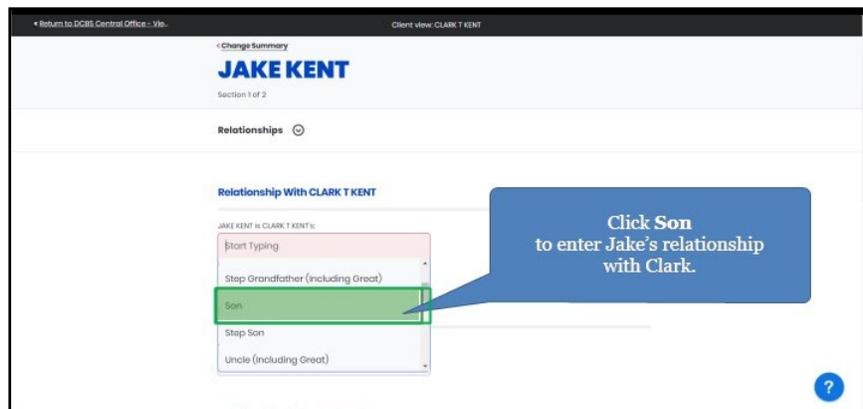


## 2.9 Confirming Relationships and Tax Filing Status

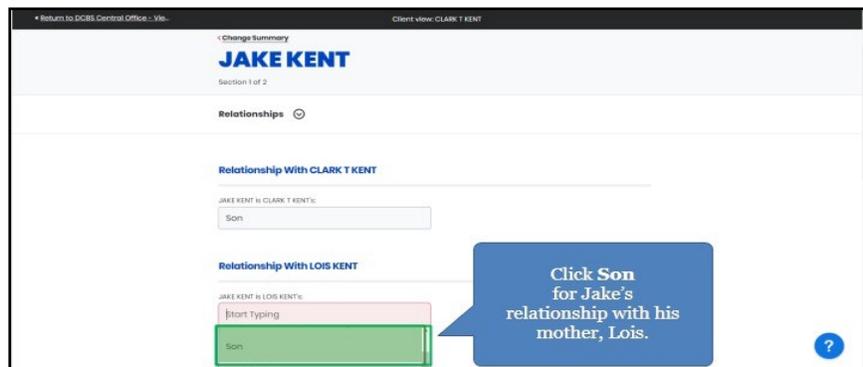
57. Click **Start** to confirm the new Household Member's relationship to the Individual and their tax filing status.



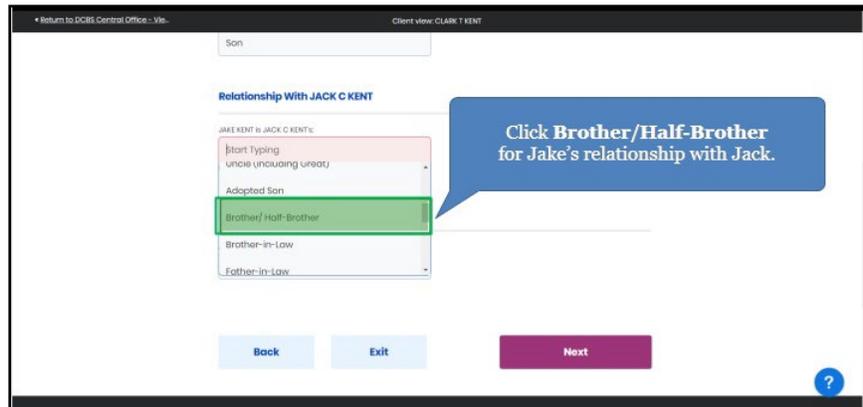
58. Select the primary Individual's **Relationship** to the new Household Member from the drop-down.



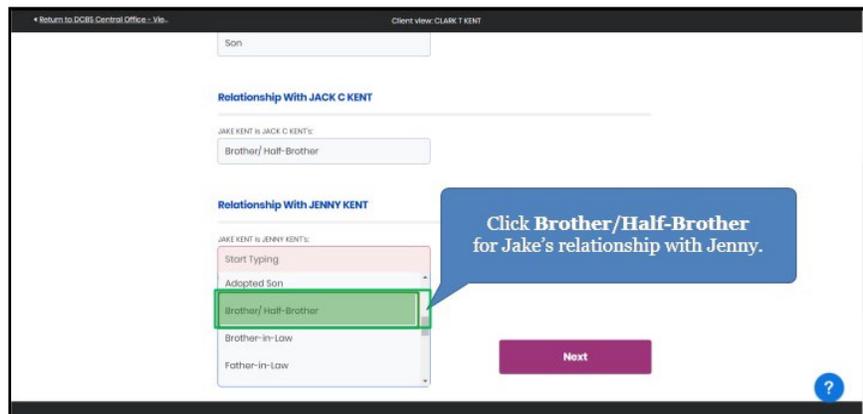
59. Select the Household Member(s) **Relationship** to the new Household Member from the drop-down.



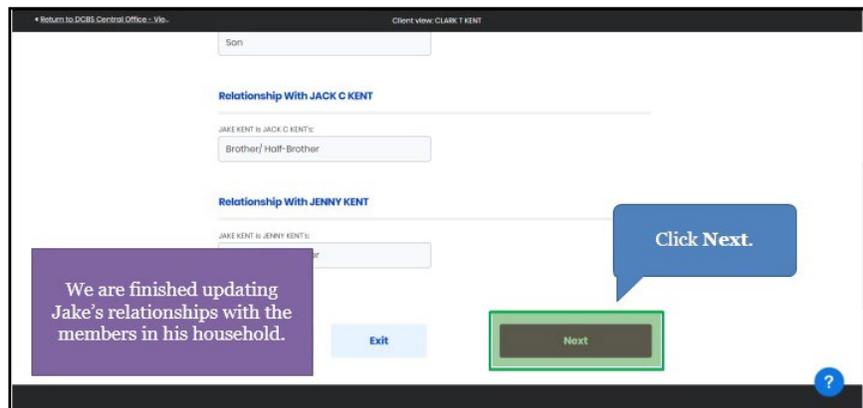
60. Select the Household Member(s) **Relationship** to the new Household Member from the drop-down.



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



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



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

Return to DCBS Central Office - Vis. 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
- Married Filing Jointly
- Qualifying Widow(er)

Now we will update Jake's tax filing status. Jake is a dependent of his father, Clark.

Click Dependent of individual in the household.

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

Return to DCBS Central Office - Vis. Client view: CLARK T KENT

Who is JAKE KENT a dependent of?

- CLARK T KENT
- LOIS KENT

Back Exit Next

Jake is a tax dependent of his father, Clark. Click Clark T Kent.

65. Click **Next**.

Return to DCBS Central Office - Vis. Client view: CLARK T KENT

Who is JAKE KENT a dependent of?

- CLARK T KENT
- LOIS KENT

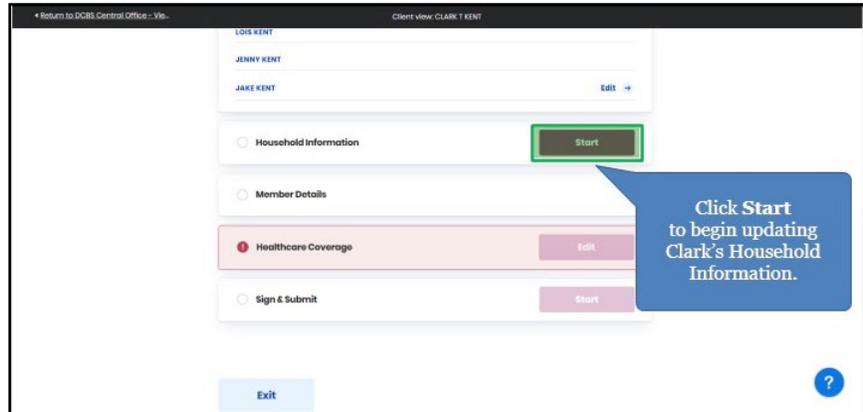
Back Exit Next

We are finished updating Jake's tax filing information.

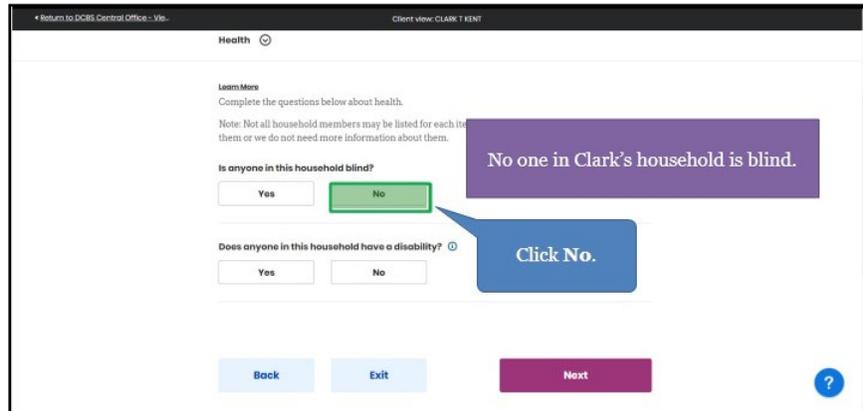
Click Next.

## 2.10 Updating Household Information

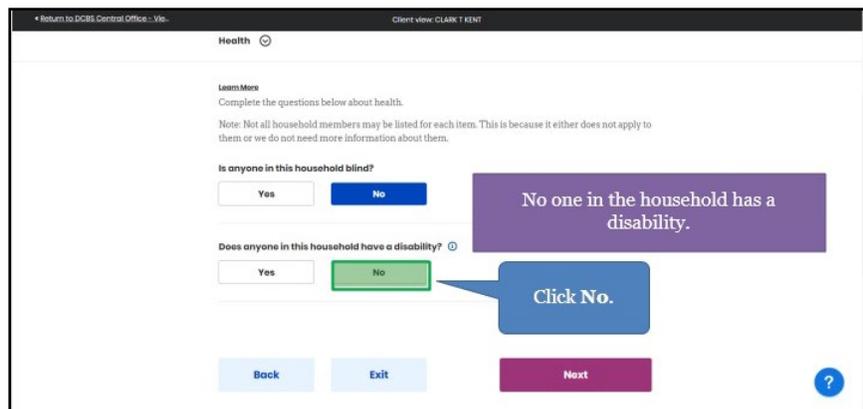
66. Click **Start** to update the Individual's household information.



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



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



69. Click **Next** to continue.

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

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

72. Click **Yes** or **No** for *Is anyone in the household currently enrolled in school.*

Client view: CLARK, T KENT

Is anyone in this household a migrant or seasonal farmworker?

Yes No

Is anyone in this household eligible for entitled income, unemployment income, Black Lung, or VA pension?

Yes No

Is anyone in this household currently enrolled in school?

Yes No

Was anyone in Foster Care?

Yes No

Back Exit Next

No one in household is currently enrolled in school.

Click No.

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

Client view: CLARK, 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 Social Security income, unemployment income, Black Lung, or VA pension?

Yes No

Is anyone in this household currently enrolled in school?

Yes No

Was anyone in Foster Care?

Yes No

Back Exit Next

No one in the household was in Foster Care.

Click No.

74. Click **Next** to continue.

Client view: CLARK, 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 Social Security income, unemployment income, Black Lung, or VA pension?

Yes No

Is anyone in this household currently enrolled in school?

Yes No

Was anyone in Foster Care?

Yes No

Back Exit Next

Click Next.

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

Return to DCBS Central Office - Vis. Client view: CLARK T KENT

Yes No

Does anyone in this household have investments such as stocks or bonds?

Yes No

Does anyone in this household have other liquid/spendable resources such as cash, direct express card, or reloadable money card?

Yes No

Clark confirms there are no updates needed.

Exit Next

The expanded kynect is working to keep every Kentuckian safe, healthy and happy.

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

Return to DCBS Central Office - Vis. Client view: CLARK T KENT

Does anyone in this household have job income from employer?

Yes No

Click Yes.

Both Clark and Lois work at the YMCA.

Does anyone in this household have self-employment income?

Yes No

Does anyone in this household receive income from Social Security, retirement, or a pension?

Yes No

Does anyone in this household receive income from dividends, interest, or royalties?

Yes No

Does anyone in this household receive support or maintenance income, such as alimony, child support, adoption subsidy payments, or foster care income?

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

Return to DCBS Central Office - Vis. Client view: CLARK T KENT

Does anyone in this household have job income from employer?

Yes No

Does anyone in this household have self-employment income?

Yes No

Click No.

No one in the household has self-employment income.

Does anyone in this household receive income from Social Security, retirement, or a pension?

Yes No

Does anyone in this household receive income from dividends, interest, or royalties?

Yes No

Does anyone in this household receive support or maintenance income, such as alimony, child support, adoption subsidy payments, or foster care income?

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

Return to DCBS Central Office - Vis. Client view: CLARK T KENT

Does anyone in this household have job income from employer?  
 Yes  No

Does anyone in this household have self-employment income? ⓘ  
 Yes  No

Does anyone in this household receive income from Social Security, retirement, or a pension? ⓘ  
 Yes  No

Does anyone in this household receive income from dividends, interest, or royalties? ⓘ  
 Yes  No

Does anyone in this household receive support or maintenance income, such as alimony, child support, adoption subsidy payments, or foster care income? ⓘ  
 Yes  No

Does anyone in this household receive any other type of goods, services, or payments? ⓘ

No one in the household receives income from Social Security, retirement, or pension.

Click No.

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

Return to DCBS Central Office - Vis. Client view: CLARK T KENT

Does anyone in this household receive income from Social Security, retirement, or a pension? ⓘ  
 Yes  No

Does anyone in this household receive income from dividends, interest, or royalties? ⓘ  
 Yes  No

Does anyone in this household receive support or maintenance income, such as alimony, child support, adoption subsidy payments, or foster care income? ⓘ  
 Yes  No

Does anyone in the household receive income from an insurance settlement or unemployment benefit? ⓘ  
 Yes  No

Does anyone in this household receive any other type of goods, services, or payments? ⓘ

No one in the household receives income from dividends, interest, or royalties.

Click No.

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

Return to DCBS Central Office - Vis. Client view: CLARK T KENT

Does anyone in this household receive income from Social Security, retirement, or a pension? ⓘ  
 Yes  No

Does anyone in this household receive income from dividends, interest, or royalties? ⓘ  
 Yes  No

Does anyone in this household receive support or maintenance income, such as alimony, child support, adoption subsidy payments, or foster care income? ⓘ  
 Yes  No

Does anyone in the household receive income from an insurance settlement or unemployment benefit? ⓘ  
 Yes  No

Does anyone in this household receive any other type of goods, services, or payments? ⓘ

No one in the household receives support or maintenance income, such as alimony, child support, adoption subsidy payments, or foster care income.

Click No.

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

Return to DCBS Central Office - Vis... Client view: CLARK, KENT

Does anyone in this household receive income from Social Security, retirement, or a pension?  Yes  No

Does anyone in this household receive income from dividends, interest, or royalties?  Yes  No

Does anyone in this household receive support or maintenance, child support, adoption subsidy payments, or foster care payments?  Yes  No

Does anyone in this household receive income from an insurance settlement or unemployment benefit?  Yes  No

Does anyone in this household receive any other type of goods, services, or payments?  Yes  No

No one in the household receives income from an insurance settlement or unemployment benefits.

Click No.

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

Return to DCBS Central Office - Vis... Client view: CLARK, KENT

Does anyone in this household receive any other type of goods, services, or payments?  Yes  No

Does anyone in this household currently receive income from lottery or gambling winnings or has anyone received income from lottery or gambling winnings or has anyone received income from winnings in the last 3 months?  Yes  No

Does anyone in this household receive Medicaid, SNAP, or TANF benefits in another state in the month of July or expect to receive benefits in the month of August?  Yes  No

No one in the household receives any other type of goods, services, or payments.

Click No.

Back Exit Next

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

Return to DCBS Central Office - Vis... Client view: CLARK, KENT

Does anyone in this household currently receive income from lottery or gambling winnings or has anyone received income from lottery or gambling winnings or has anyone received income from winnings in the last 3 months?  Yes  No

Does anyone in this household receive Medicaid, SNAP, or TANF benefits in another state in the month of July or expect to receive benefits in the month of August?  Yes  No

No one in the household gambles or plays the lottery.

Click No.

Back Exit Next

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 - Yes Client view: CLARK T KENT

Does anyone in this household receive any other type of goods, services, or payments?

Yes  No

Does anyone in this household have any other income from lottery or gambling winnings or has anyone received income from lottery or gambling winnings in the last 3 months?

Yes  No

Does anyone in this household receive Medicaid, SNAP, or TANF benefits in another state in the month of July or expect to receive benefits in the month of August?

Yes  No

Click No.

No one in the household receives any out of state benefits.

85. Click **Next** to continue.

Return to DCBS Central Office - Yes Client view: CLARK T KENT

Does anyone in this household receive any other type of goods, services, or payments?

Yes  No

Does anyone in this household currently receive income from lottery or gambling winnings or has anyone received income from lottery or gambling winnings in the last 3 months?

Yes  No

Does anyone in this household receive Medicaid, SNAP, or TANF benefits in another state in the month of July or expect to receive benefits in the month of August?

Yes  No

Click Next.

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

Return to DCBS Central Office - Yes 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 your household have a Medicare Part B enrollment?

Yes  No

Does anyone in your household have medical expenses for someone who is a senior citizen, blind, or has a disability?

Yes  No

Does anyone in this household pay child support?

Yes  No

Does anyone in this household pay for child care or other dependent care?

Yes  No

Click Yes.

Clark says Yes, due to the birth claims for Jake that he and Lois are responsible for.

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

Return to DCBS Central Office - Vis. Client view

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 medical expenses for a senior citizen, blind, or has a disability?  Yes  No

Does anyone in this household pay child support?  Yes  No

Does anyone in this household pay for child care or other dependent care?  Yes  No

No one in the household has Medicare.

Click 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 - Vis. 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 Part D premium?  Yes  No

Does anyone in this household have medical expenses for someone who is a senior citizen, blind, or has a disability?  Yes  No

Does anyone in this household pay child support?  Yes  No

Does anyone in this household pay for child care or other dependent care?  Yes  No

No one in the household has medical expenses for a senior citizen, blind, or disabled Individual.

Click No.

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

Return to DCBS Central Office - Vis. 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 Part D premium?  Yes  No

Does anyone in this household have medical expenses for someone who is a senior citizen, blind, or has a disability?  Yes  No

Does anyone in this household pay child support?  Yes  No

Does anyone in this household pay for child care or other dependent care?  Yes  No

No one in the household pays child support.

Click No.

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

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 Part D premium?  Yes  No

Does anyone in this household have medical expenses for someone who is a senior citizen, blind, or has a disability?  Yes  No

Does anyone in this household pay child support?  Yes  No

Does anyone in this household pay for child care or other dependent care?  Yes  No

No one in the household pays for Child Care or other dependent care.

Click No.

91. Click **Next** to continue.

Client view: CLARK T KENT

Does anyone in this household pay child support?  Yes  No

Does anyone in this household pay for child care or other dependent care?  Yes  No

Click Next.

Back Exit Next

The expanded kynect is working to keep every Kentuckian safe, healthy and happy.  
Go to [kynect.ky.gov](http://kynect.ky.gov) to see all your options.

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

Client view: CLARK T KENT

Member Details

- CLARK KENT
- JACK KENT
- LOIS KENT
- JENNY KENT
- JAKE KENT

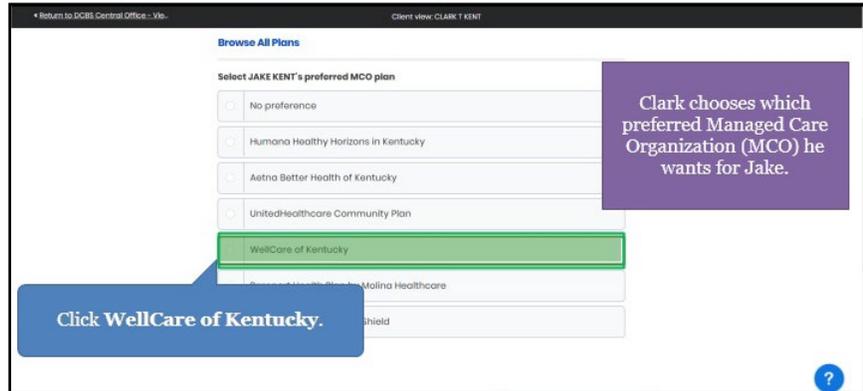
Individual Information Not Started

Healthcare Coverage Edit

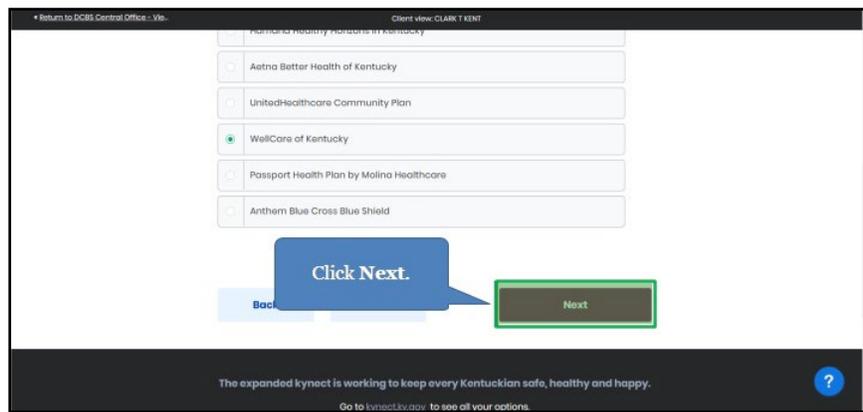
Sign & Submit Start

Click Start to confirm the Member Details for the household.

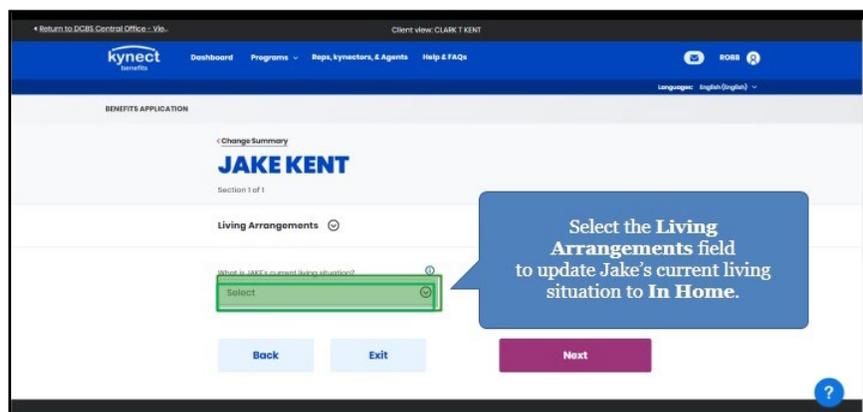
93. Check the **box** to choose the new Household Member's preferred Managed Care Organization (MCO) plan.



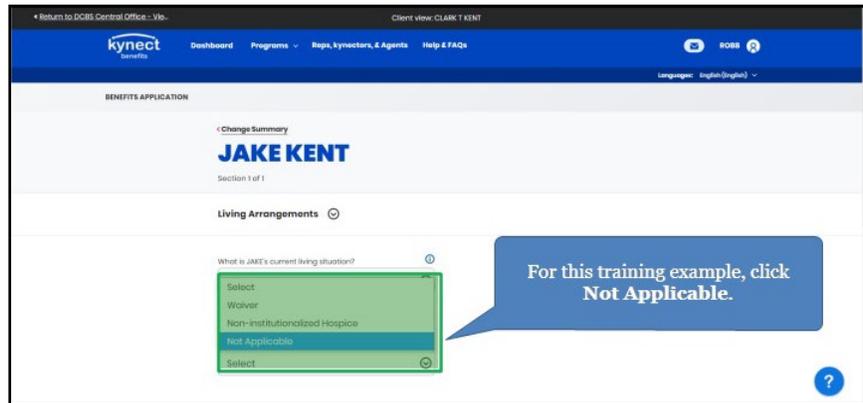
94. Click **Next** to continue.



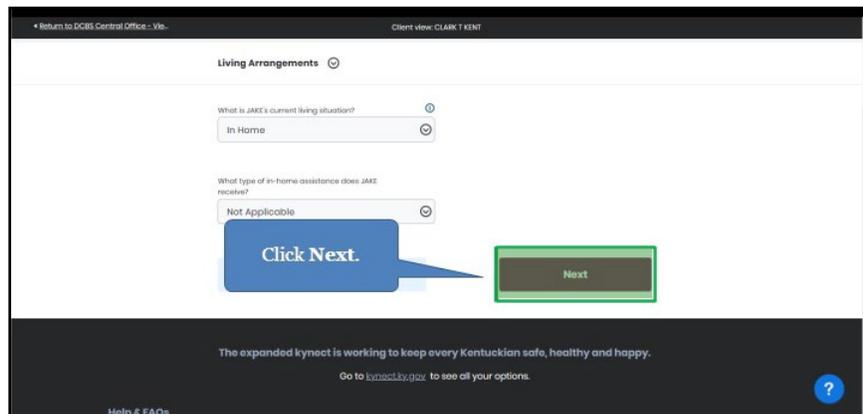
95. Select the **Living Arrangements** field to update the new Household Member's current living situation.



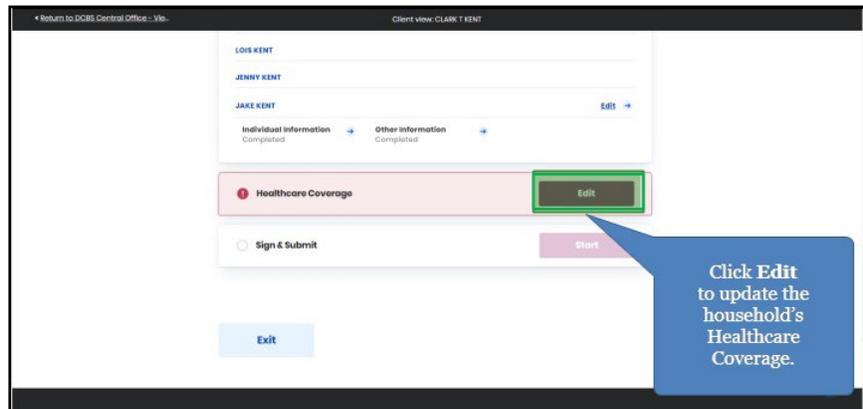
96. Select the appropriate in-home assistance from the drop-down.



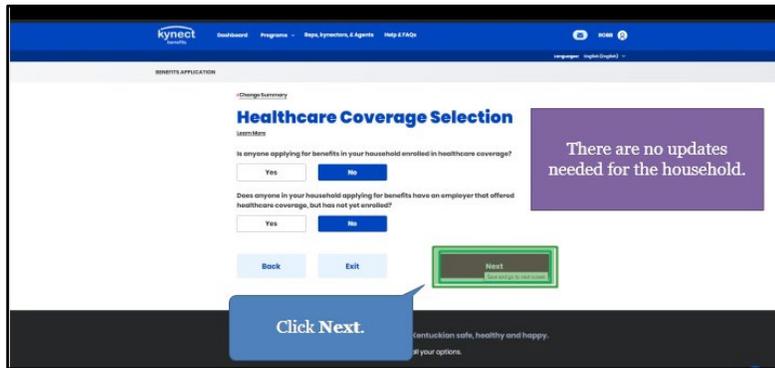
97. Click **Next** to continue.



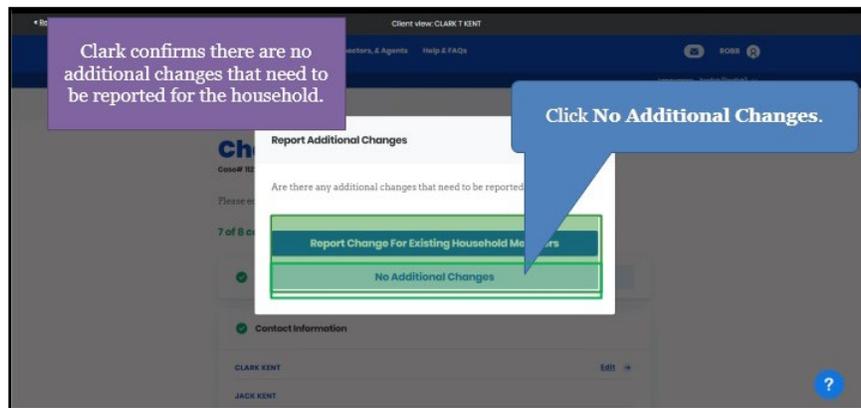
98. Click **Edit** to update the household's Health Coverage.



99. Click **Next**.

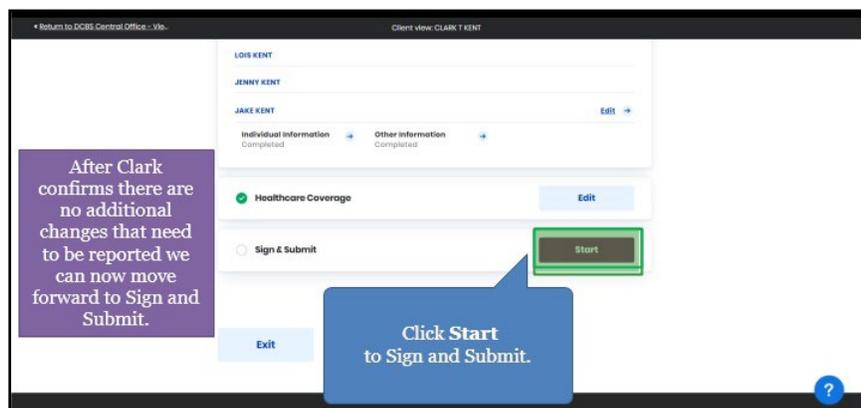


100. Select **Report Change for Existing Household Members or No Additional Changes**.

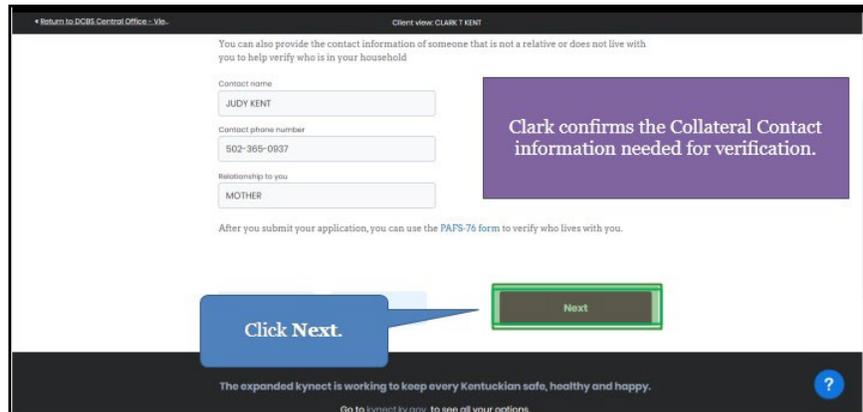


## 2.11 Sign & Submit Process

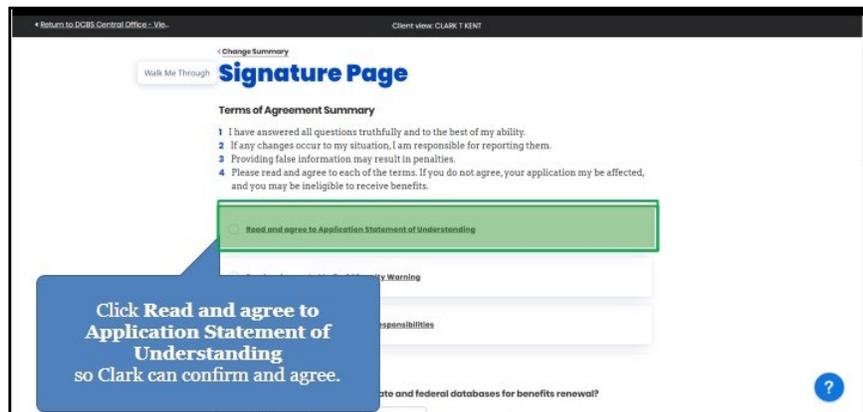
101. Click **Start** to Sign & Submit.



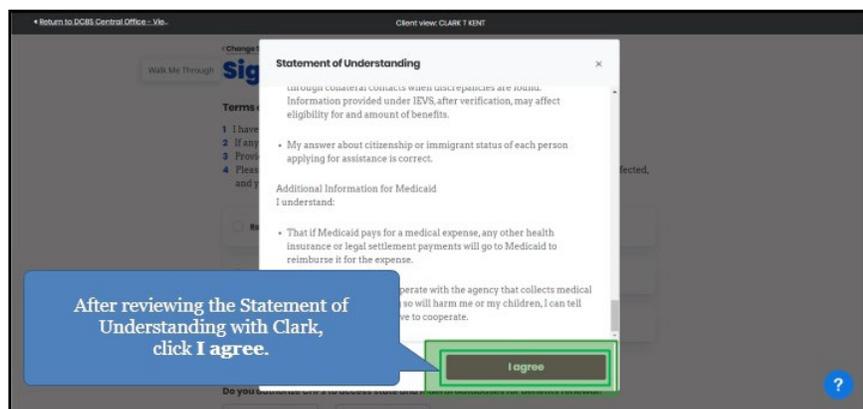
102. Click **Next** to confirm the Collateral Contact information needed for verification.



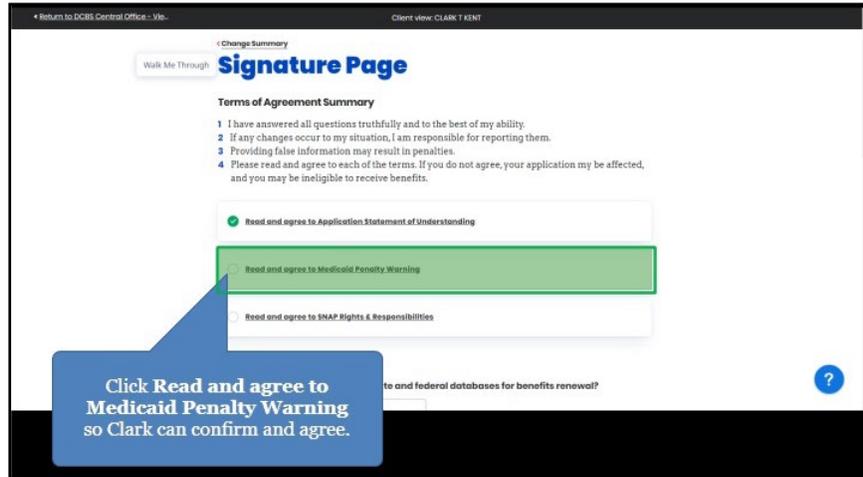
103. Click **Read and agree to Application Statement of Understanding** so the Individual can confirm and agree.



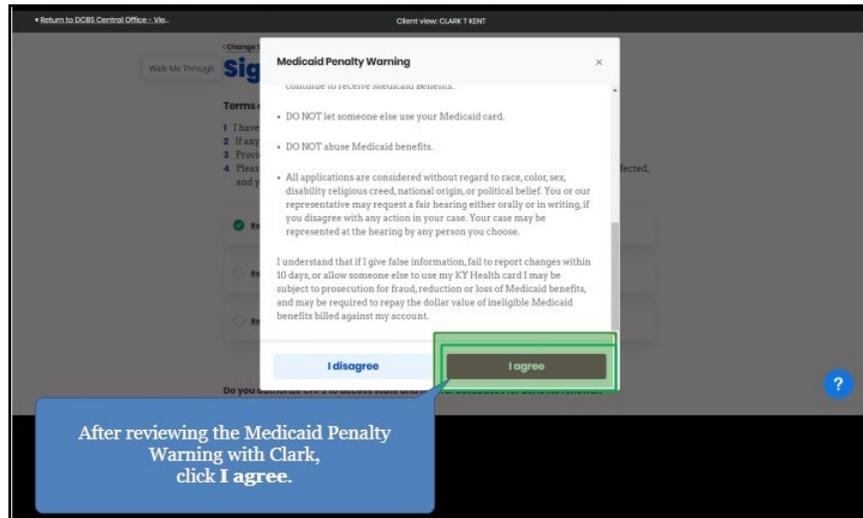
104. After reviewing the Statement of Understanding with the Individual, click **I agree**.



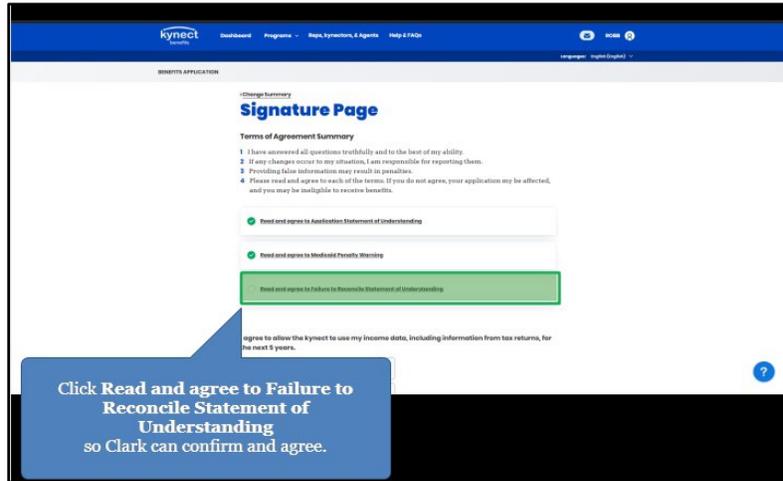
105. Click **Read and agree to Medicaid Penalty Warning** so the Individual can confirm and agree.



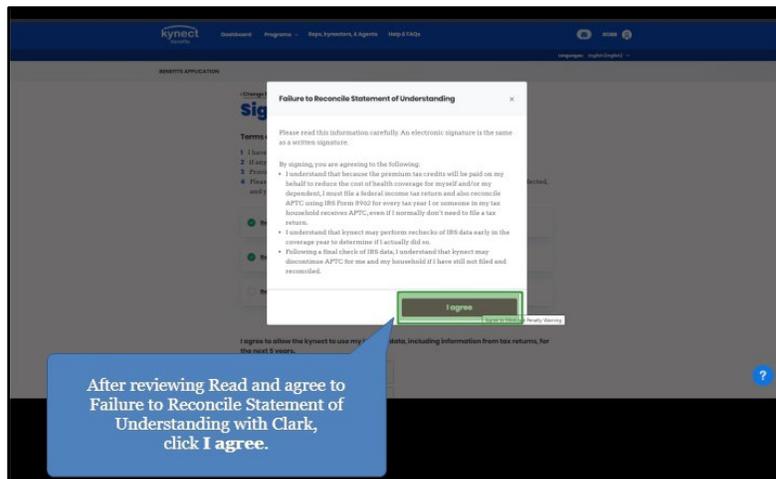
106. After reviewing the Medicaid Penalty Warning with the Individual, click **I agree**.



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.

This screenshot shows the top portion of a web form. At the top, there is a radio button labeled "I Disagree". Below it is a paragraph of text explaining that if an application is enrolled in kynect and later found to have other qualifying health coverage (like Medicare, Medicaid, or CHIP), kynect will automatically end their kynect medical plan and dental coverage. Below the text are two radio buttons: "I Agree" (highlighted with a green box) and "I Disagree". A blue callout box on the left contains the text: "Click I Agree to the kynect qualifying health coverage statement." Below the radio buttons is a section for entering the user's name, with fields for First Name, Middle Initial, Last Name, and Suffix. A date field is also present. At the bottom, there is a "Voter Registration" section with a radio button for "Would you like to register to vote?".

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

This screenshot shows the "Voter Registration" section of the form. The "Would you like to register to vote?" radio button is selected. Below it are two buttons: "Yes" and "No" (highlighted with a green box). A blue callout box on the right contains the text: "Click No." Above the "No" button, a purple callout box contains the text: "Clark is already registered to vote." The form also shows the "Voter Registration" heading and a "Back" button.

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

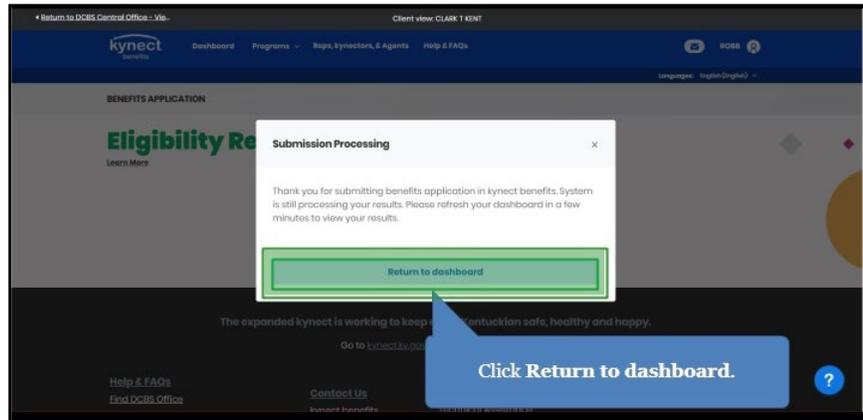
This screenshot shows the bottom portion of the web form. The "Voter Registration" section is visible, with the "No" button selected. Below this is a "Back" button and a "Submit Benefits Application" button (highlighted with a green box). A blue callout box at the bottom left contains the text: "Click Submit Benefits Application to submit the updates." A purple callout box on the right contains the text: "After entering Clark's name to electronically sign the application, we are finished Reporting Changes for Clark Kent and his family." The form also shows the "Voter Registration" heading and a "Back" button.

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

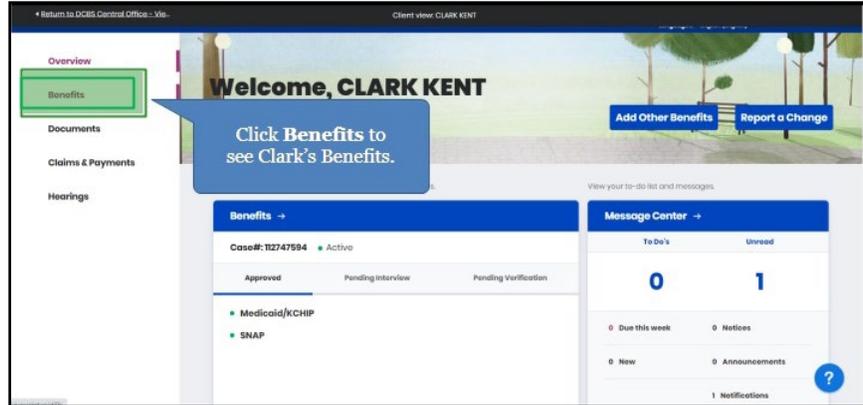


## 2.12 End of Reporting a Change Steps

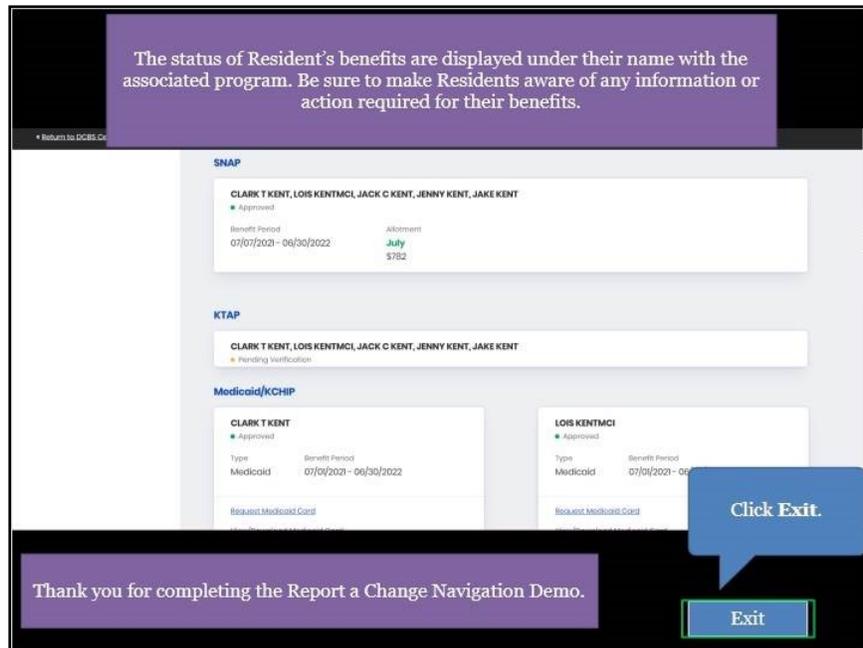
113. Click **Return to dashboard**.



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



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



### 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
2. 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
7. 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