The Commonwealth of Kentucky

kynect State-Based Marketplace

kynector 2027 Refresher Training

July 9, 2026

Document Control Information

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Introduction

This training is for kynectors who have completed certification/refresher for Plan Year 2026 and are currently active. If you are a new kynector or did not complete certification/refresher for 2026, DO NOT COMPLETE THIS TRAINING. You must take the Full kynector Certification Training.

This guide covers the high-priority content for Plan Year 2027 to help kynectors participate effectively in the State-Based Marketplace.

Refresher Assessment: kynectors will have 3 attempts to take the Refresher Assessment at the end of the Refresher Training. The assessment questions will be composed of questions from the knowledge checks in this course and the Privacy and Security course. If you are unable to pass within 2 attempts, you will need to contact your Organization Administrator and email the KHBE.Program@ky.gov inbox to request a 3rd attempt. If you do not successfully complete the 3rd attempt with a score of 80% or above, you will not be able to participate for a year.

Table of Contents

1. Open Enrollment

1.1 Enrollment Status

kynect is available to help families stay healthy. Kentucky Residents may qualify for Medicaid or a Qualified Health Plan (QHP). To find out if Residents are eligible, apply and submit all necessary documents.

The Open Enrollment Period typically begins November 1st of the year before the Plan Year.

Note: Medicaid and KCHIP enrollment is available year-round.

2. Medicaid Changes

The federal government makes rules that Kentucky Medicaid must follow when providing health care coverage. A federal law passed in July 2025 is changing the rules about who can get Medicaid and what they must do to keep it. The new rules do not apply to all Kentucky Medicaid members and Medicaid Work Requirements start on January 1, 2027. There are additional in-person trainings and web-based trainings that cover these changes in detail. You can find more information about these changes by visiting the Medicaid Changes website page or the KHBE Website.

3. Transition to Medicare

Understanding the policies and procedures for transitioning to Medicare is essential.

3.1 Transitioning from a QHP

If Residents are approaching their **65th birthday** and are enrolled through kynect, it is recommended to sign up for Medicare Parts A and B **three months** before their **65th birthday** to prevent any delay in coverage and avoid potential penalties.

3.2 Transitioning from Medicaid

In Kentucky, if Residents are turning 65 and are eligible for Medicare, they should enroll in Medicare Parts A and B during their Initial Enrollment Period. This period begins **three months** before their **65th birthday** month and ends three months after.

Please Note: For more information on the Transition to Medicare, please visit our Transition to Medicare Fact Sheet on the KHBE Website.

4. Immigration

Immigrants in Kentucky might qualify for several health insurance programs. The following sections outline important eligibility requirements.

4.1 Five-Year Bar

In Kentucky, many lawful permanent residents (green card holders) and other qualified immigrants who entered the U.S. on or after August 22, 1996, must wait five years after obtaining their "qualified" status to be eligible for Medicaid or CHIP. This is commonly known as the "five-year bar."

4.2 QHP with APTC Changes

In Kentucky, lawfully present immigrants can enroll in Qualified Health Plans (QHPs) through kynect and may qualify for Advance Premium Tax Credits (APTC) to help cover premium costs.

Starting January 1, 2027, only certain lawfully present immigrants or non-citizens will qualify for APTC.

You will only be able to get or keep APTC if you are a:

- Lawful Permanent Resident (LPR) **after** a five-year waiting period, unless you are exempt from the waiting period; or
- Cuban-Haitian Entrant; or
- Compacts of Free Association (COFA) Entrant; or

You will no longer qualify for APTC if you are:

- A refugee; or
- An asylee; or
- Paroled for at least one year; or
- A conditional Entrant; or
- Granted withholding of deportation; or
- Granted conditional entry prior to April 1, 1980; or
- Amerasian; or
- A survivor of domestic violence or human trafficking, and you have a pending status.

If you are enrolled in a QHP with APTC and are affected by changes to eligibility due to your immigration or non-citizen status, you will be contacted and will not be passively renewed.

4.3 Medicaid Changes for Immigrants

Starting October 1, 2026, only certain lawfully present immigrants or non-citizens will qualify for Medicaid.

You will only be able to get or keep Medicaid if you are a:

- Lawful Permanent Resident (LPR) **after** a five-year waiting period, unless you are exempt from the waiting period; or
- Cuban-Haitian Entrant; or
- Compacts of Free Association (COFA) Entrant; or
- Lawfully present children and pregnant women regardless of immigration status.

You will no longer qualify for Medicaid if you are:

- A refugee; or
- An asylee; or
- Paroled for at least one year; or
- A conditional Entrant; or
- Granted withholding of deportation; or
- Granted conditional entry prior to April 1, 1980; or
- Amerasian; or
- A survivor of domestic violence or human trafficking, and you have a pending status.

Emergency Medicaid will still be available to cover life-threatening medical conditions, regardless of immigration status, if you meet income requirements and reside in Kentucky.

If you are enrolled in Medicaid and affected by changes to eligibility due to your immigration or non-citizen status, you will be contacted.

Please Note: For more information on Immigration Policies, please visit our Immigration Quick Reference Guide and Immigration Fact Sheet on the KHBE Website.

5. Special Enrollment Periods

Special Enrollment allows individuals to enroll in health coverage outside the Open Enrollment Period if they experience a qualifying life event. Depending on the event, Residents may have 60 days before or after the event to enroll. Medicaid and KCHIP enrollment is available year-round.

5.1 Special Enrollment Period (SEP)

A Special Enrollment Period (SEP) allows Residents to enroll in or change health coverage outside of Open Enrollment, typically due to qualifying life events like job loss, change in employment, or loss of Medicaid.

Some Special Enrollments will require verification. Coverage will not be active, and you will not be able to make a payment until verification is received.

Examples of qualifying life events are:

- Getting married.
- Having a baby or adopting a child.
- Medically Confirmed Pregnancy.
- Moving to the state (may require that you had previous coverage).
- Turning 26 and losing coverage through your parents' plan.
- Losing your employer-sponsored insurance. This can be due to a job loss, change in employment status, or your employer no longer offering coverage.
- Losing coverage through Consolidated Omnibus Budget Reconciliation Act (COBRA); including when an employer stops contributing toward the COBRA premium.
- Losing other private health insurance.
- Getting divorced and losing coverage because of the divorce.
- Losing Medicaid or KCHIP.
- Experiencing exceptional circumstances other than traditional qualifying life events.
- Experiencing household income changes such as:
    - Now qualifying for Payment Assistance or Special Discounts on Cost-Sharing.
    - No longer qualifying for Payment Assistance or Special Discounts on Cost-Sharing.

Please Note: Individuals with a medically confirmed pregnancy can enroll in a Qualified Health Plan outside of Open Enrollment through a Special Enrollment Period. Coverage will begin on the first day of the month the pregnancy started, or on a later date if chosen by the enrollee.

Please Note: For more information, please visit the Special Enrollment Details Fact Sheet and the Exceptional Special Enrollment Fact Sheet on the KHBE Website.

5.2 Exceptional Special Enrollment (ESE)

Exceptional Special Enrollment (ESE) is available for Residents who face extraordinary circumstances preventing them from enrolling during standard enrollment periods.

Residents can request an ESE by emailing kynectESE@ky.gov or by mailing the request to:

Kentucky Health Benefit Exchange
Attention: ESE
275 East Main Street, 4WE
Frankfort, KY 40621

6. Income Verification and Written Statement Fillable Form

kynect verifies information on a Resident's benefits application using federal and state data sources. If the income reported differs by 25% or more from these records, a Request for Information (RFI) is issued, requiring additional documentation. This may result in a change to the reported income, potentially affecting Advance Premium Tax Credit (APTC) or Medicaid eligibility.

For clients with APTC, please watch for letters requesting verification of current income levels and encourage your clients to update their income information as needed. Starting Plan Year 2027, clients will have 150 days to submit requested documentation, or they may lose their benefits.

6.1 APTC vs. Medicaid Income Verification

The following table outlines the differences between APTC and Medicaid income verification:

APTC	Medicaid
APTC assesses income on an annual basis. Preferred verification for APTC includes: 1. A written statement outlining projected annual income. Use the Written Statement of Yearly Income Fillable Form, located on the KHBE website. For APTC income verification, this form is recommended to satisfy the requirement. Best practice is to submit/upload documents at the time of	Medicaid assesses income on a monthly basis. Preferred verification for Medicaid includes: 1. Original documentation showing the last two (2) months of earned income.

APTC	Medicaid
application or renewal.	

Please Note: For more information, please visit the Income Fact Sheet on the KHBE Website.

7. Premium Tax Credit Reconciliation

Starting Plan Year 2027, recipients of Advance Premium Tax Credits (APTC) are required to repay the full amount of any excess APTC received.

7.1 Scenario: Jill and Bill

Jill and Bill are a young married couple in their early thirties and have signed up for marketplace insurance. They have reported they expect to make about $500 less than the 400% Federal Poverty Level (FPL) cutoff for APTC. A couple of months into the year, Bill, who is self-employed, takes on a larger contract, making significantly more money. But Bill does not report this additional income to kynect, and both Bill and Jill continue to receive APTC based on the income they reported. Next year, when filing taxes, they discover they owe back ALL of the APTC they received for the previous year because they were no longer eligible based on the increased income, making them ineligible for APTC. This results in tens of thousands of dollars that they must repay.

8. Form 1095-A

Form 1095-A is a federal tax document issued by kynect detailing the amount of APTC used throughout the year for health insurance premiums. 1095-A documents cannot be sent via email to the client, Agent, or kynector per federal law. The client can request a new document to be mailed to them through the 1095-A Portal or find it located in their document center on kynect.

8.1 For QHPs With APTC

kynect sends one form, per policy, per tax household.

Enrollment Period. Coverage will begin on the first day of the month the pregnancy started, or on a later date if chosen by the enrollee.

Which is **NOT** a qualifying life event for a Special Enrollment Period (SEP)?

- ○ Having a baby
- ○ Losing Medicaid
- ○ Client's preferred provider moves out of network
- ○ Turning 26 and losing coverage through your parent's plan

SUBMIT

Complete the content above before moving on.

Income Verification

Form 1095-A — Health Insurance Marketplace Statement (QHP with APTC)

8.2 For QHPs Without APTC

For QHPs without APTC, kynect sends one form, per policy, for everyone enrolled, even if enrollees are in different tax households.

APTC	APTC assesses income on an **annual basis**. Preferred verification for APTC includes: 1. A written statement outlining projected annual income. Use the Written Statement of
Medicaid	Medicaid assesses income on a **monthly basis**. Preferred verification for Medicaid includes: 1. Original documentation showing the last two (2) months of earned income.

Please Download Now for your Records:

For **APTC income verification**, please download the Written Statement of Yearly

Form 1095-A — Health Insurance Marketplace Statement (QHP without APTC)

Please Note: For more information regarding Form 1095-A, please visit our 1095-A Fact Sheet on the KHBE Website.

9. kynector Responsibilities

1. 1. Please refer to the Escalation Path when you encounter Account, Case, or other issues. If you have a case that you need assistance with, email the KHBE Program inbox with the case number and a description of the issue. Do not email individual members of the KHBE staff with these cases, unless asked to by KHBE staff.

2. Do not send Personal Identifiable Information (PII) via email to the inboxes.
3. If you would like to receive weekly information about important updates and currently do not, please email the KHBE Program Inbox and request to be added to the Friday Facts mailing list.

10. Assessment Questions

The following questions are drawn from the knowledge checks in this course. They will also appear in the Refresher Assessment on COLT.

1. When do the Medicaid Work Requirements start?

a. July 2025
b. January 2027
c. April 2027
d. October 2029

2. When does Open Enrollment typically begin?

a. November 1st
b. October 15th
c. December 1st
d. December 15th

3. When is it recommended that a person sign up for Medicare Parts A and B?

a. The month after their 55th birthday
b. When a person retires at 62
c. 3 months before their 65th birthday
d. The month they turn 65

4. True or False: Starting January 1, 2027, only certain lawfully present immigrants or non-citizens will qualify for APTC. These groups are: Lawful Permanent Resident (LPR) after a five-year waiting period (unless exempt), Cuban-Haitian Entrant, and Compacts of Free Association (COFA) Entrant.

a. True
b. False

5. True or False: Starting October 1, 2026, only certain lawfully present immigrants or non-citizens will qualify for Medicaid. These groups are: Lawful Permanent Resident (LPR) after a five-year waiting period (unless exempt), Cuban-Haitian Entrant, Compacts of Free Association (COFA) Entrant, and lawfully present children and pregnant women regardless of immigration status.

a. True
b. False

6. If a client is enrolled in a QHP with APTC and they lose their APTC due to immigration status, will their enrollment for Plan Year 2027 be passively renewed?

a. Yes
b. No

7. In Kentucky, many lawful permanent residents (green card holders) and other qualified immigrants who entered the U.S. on or after August 22, 1996, must wait ______ after obtaining their "qualified" status to be eligible for Medicaid or CHIP.

a. 4 months
b. 5 years
c. 10 years
d. 18 months

8. Which is NOT a qualifying life event for a Special Enrollment Period (SEP)?

a. Having a baby
b. Losing Medicaid
c. Client's preferred provider moves out of network
d. Turning 26 and losing coverage through your parent's plan

9. True or False: For APTC income verification, it is recommended to use the Written Statement of Yearly Income Fillable Form.

a. True
b. False

10. The time frame to submit the request for income verification for APTC is:

a. 7 days
b. 150 days
c. 360 days
d. 30 days

11. Starting Plan Year 2027, if a person receives an overpayment of APTC, how much of it will they have to repay?

a. There is a cap of $3,000 maximum
b. 25% of the APTC overpayment total
c. All of it
d. None if they are over 400% FPL actual income vs 300% FPL reported income

12. If a client needs a copy of their 1095-A, how can they get one?

a. Requesting it through the 1095-A Portal
b. By visiting a local DCBS office
c. Locating it in their Resident Dashboard via the Message Center
d. All of the above

13. When encountering an issue, what should you do first?

a. Fax your question to the KHBE Team
b. Refer to the Escalation Path
c. Call a KHBE Team Member’s personal phone
d. Go to the local DCBS Office and submit a ticket

14. True or False: Emergency Medicaid will still be available to cover life-threatening medical conditions regardless of immigration status, provided income requirements are met and the individual resides in Kentucky.

a. True
b. False

15. True or False: kynectors may email a client’s 1095-A document directly to the client or to the KHBE inbox.

a. True
b. False