

Agents & kynectors

Bi-Weekly Insight Newsletter



Please note:

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

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Open Enrollment Support

Open Enrollment Support is available for Agents and kynectors

October 2, 2023 – January 16, 2024.

[Open Enrollment Incident Tracker](#)

[Micro Video](#)

[Open Enrollment Incident Tracker](#)

Upcoming Office Hours:

- December 21 at 1PM ET (Register [Here](#))
- January 11 at 1PM ET

Helpdesk Contacts

Inbox for Requesting Retroactive Coverage of Medicaid

DFS.Medicaid@ky.gov

Inbox for Requesting Name or Date of Birth Change

KHBE.Program@ky.gov

Professional Services Line (PSL)

855-326-4650

Hours: Mon-Fri 8am-7pm / Sat 8am-5pm (EST)

Department for Medicaid Services (DMS)

855-4kynect (459-6328)

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

kynect benefits/Contact Center (Public)

855-4kynect (459-6328)

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

kynect technical Issues (Public)

844-407-8398

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

Department for Community Based Services (DCBS)

855-306-8959

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

KHBE Program Inbox

KHBE.Program@ky.gov

[kynector and Agent Escalation Process](#)

SNAP and CCAP Questions unable to be resolved by Organization Administrators, please email:

famsupportkynectors@ky.gov

Exceptional Special Enrollment

Exceptional Special Enrollment (ESE) is reserved for circumstances where Individuals experienced circumstances other than a traditional qualifying event that prevented them from enrolling in coverage during an enrollment period. This can be used for retroactive coverage if the following circumstances are met:

- Being incapacitated
- Being affected by a natural disaster
- Experiencing domestic abuse/violence
- Experiencing spousal abandonment
- Having experienced technical or system issues that prevented enrollment

How to Request ESE

To request ESE, Individuals, or Agents and kynectors on their behalf, can apply by submitting a statement to kynectESE@ky.gov. The statement should include:

- First and last names of those who wish to enroll
- Case number (if known)
- Agent or kynector name (if known)
- Reason(s) for requesting ESE
- Details of desired plan and start date
- Contact information for follow-up purposes

Individuals may also submit by standard mail to:

Attn: ESE

Division of Kentucky Health Benefit Exchange

275 East Main Street 4WE

Frankfort, KY 40621



Did You Know?

Postpartum Medicaid

In 2022, changes were made to postpartum Medicaid coverage by extending coverage from 60 days to 12 months after the pregnancy end date. Coverage for pregnant Residents was also added to the Kentucky Children's Health Insurance Program (KCHIP). Individuals must have income less than 218% of the Federal Poverty Level (FPL) to qualify for benefits. The financial test is only applicable for the application month and Individuals are deemed eligible for benefits until their postpartum period ends.

Example:

Jane applies for Medicaid on 11/1/23. She is 20 years old and reports pregnancy with a due date of 6/30/23. Jane reports income of \$3,100. When eligibility is evaluated on 11/1/23, she will be approved for benefits starting 11/1/23 - Ongoing until the end of her postpartum period.



Immigration Eligibility

Overview

Immigrants in Kentucky may be eligible for a variety of health insurance programs in the Commonwealth. Immigrants who are “Qualified Immigrants” are generally eligible for Qualified Health Plans (QHP), Advance Premium Tax Credits (APTC), Medicaid, and KCHIP coverage if they meet income eligibility rules and are adults that have met the five-year bar. The table below provides an overview of eligibility for these programs based on immigration status.

	“Qualified Immigrants”			Other Lawfully Present Individuals (except DACA)	Undocumented Immigrants and DACA Immigrants
	Refugees, Asylees, and Other Humanitarian Immigrants	Lawful Permanent Residents (Green Card Holders)			
		Adults 19 and Over	Children under 19		
Medicaid	✓	NO. Must wait 5 years	YES. During first 5 years	Only if under 19 years old	NO. (except emergency services)
KCHIP	✓	N/A	YES. During first 5 years	Only if under 19 years old	NO
Qualified Health Plans (QHP)	✓	✓	✓	✓	NO
Advance Premium Tax Credit (APTC)	✓	✓	✓	✓	NO

Five-Year Bar

Federal law requires most Qualified Immigrants meet a five-year waiting period (known as the five-year bar) before becoming eligible for Medicaid unless an exemption is met. The five-year bar is not applicable to children or Lawfully Present pregnant Individuals. The table below provides an overview of scenarios in which the five-year bar applies and exemptions for the rule. The table below provides an overview of scenarios in which the five-year bar applies and exemptions for the rule.

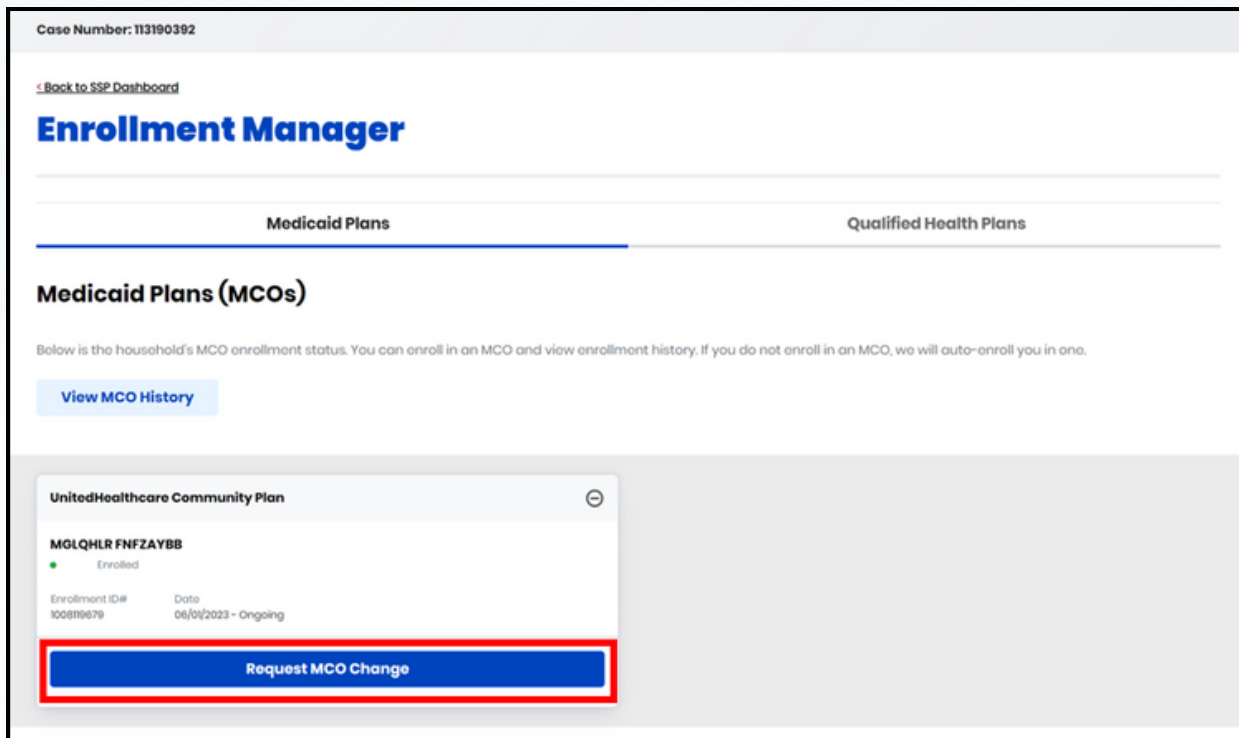
Medicaid Eligible Status (“Qualified Immigrant”)	
Medicaid Eligible Status (if 5 year-bar is met)	Medicaid Eligible Status (5-year bar does not apply)
<ul style="list-style-type: none"> • Lawful Permanent Resident (LPR/Green Card holder) • Conditional entrant • Paroled into the United States for 1 year or more • Victims of human trafficking, and eligible relatives that do not have a final, non-appealable, legally enforceable order of deportation or exclusion entered against them • Battered spouse, child, or parent with a pending or approved petition with the Department of Homeland Security (DHS) 	<ul style="list-style-type: none"> • Individuals who entered the U.S. before August 22, 1996, and remained continuously • Trafficking survivors and their spouses, children, siblings, or parents • Lawful Permanent Residents who adjusted from a status exempt from the five-year bar • Veterans or active-duty military and their spouses or unmarried dependents who also have a qualified non-citizen status • Refugees and asylees • Cuban/Haitian entrants • Granted withholding of deportation or of removal • Member of a Federally-recognized Indian tribe or American Indian born in Canada • Children who are lawfully present • Afghans or Iraqis with special immigrant status

Refer to the [Immigrant Eligibility for Health Coverage Fact Sheet](#) for more information on health coverage available to Kentucky’s immigrant population.

Managed Care Organization Changes Without Cause

How to Change Managed Care Organizations (MCO)

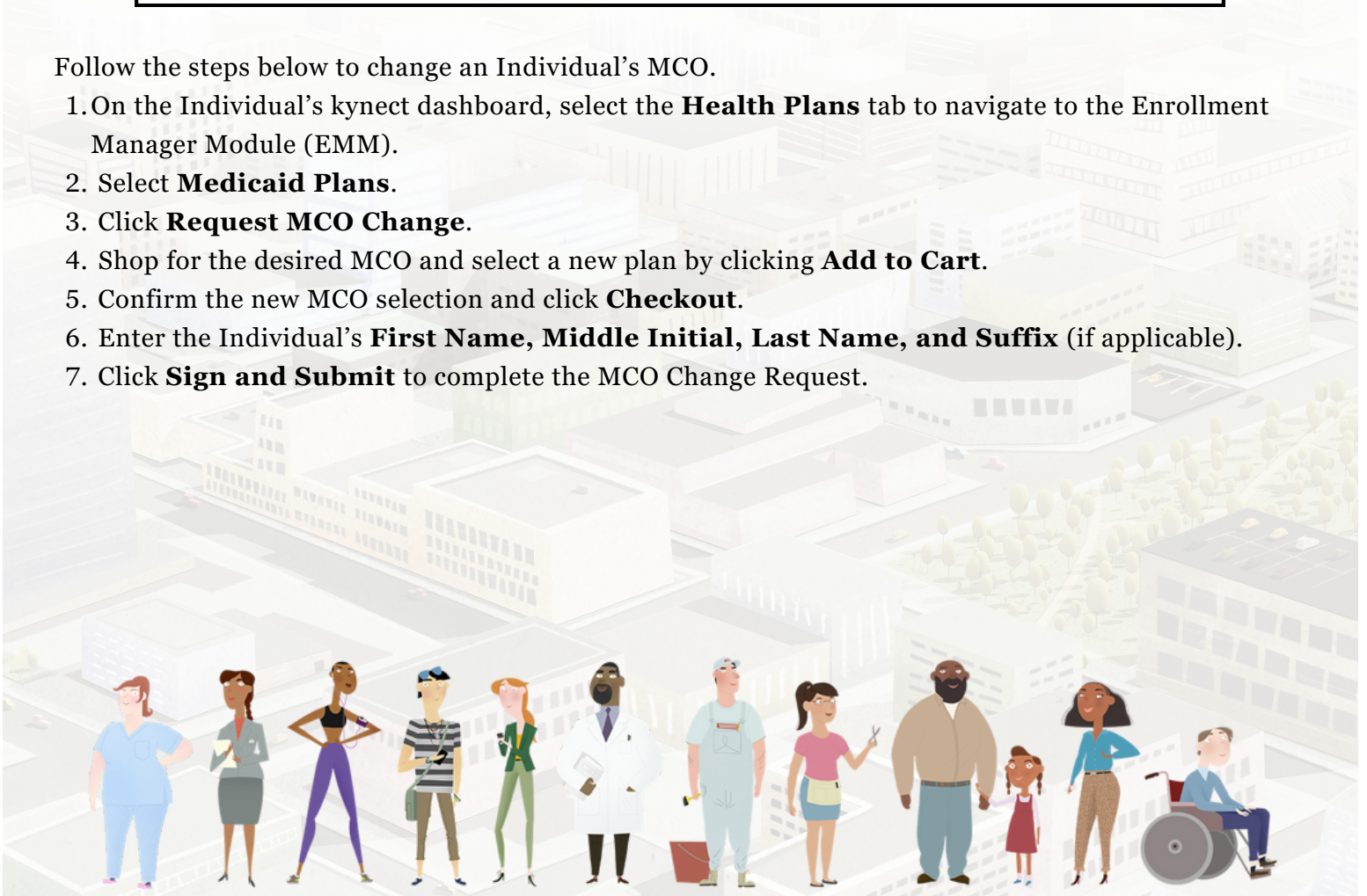
Individuals, Agents, and kynectors now have the ability to change their MCO at any point in time through December 2024.



The screenshot shows the 'Enrollment Manager' interface. At the top, it displays 'Case Number: 113190392' and a link to 'Back to SSP Dashboard'. Below this, the 'Enrollment Manager' title is prominently displayed. There are two tabs: 'Medicaid Plans' (which is selected and underlined) and 'Qualified Health Plans'. Under the 'Medicaid Plans' tab, the section is titled 'Medicaid Plans (MCOs)'. A note states: 'Below is the household's MCO enrollment status. You can enroll in an MCO and view enrollment history. If you do not enroll in an MCO, we will auto-enroll you in one.' A 'View MCO History' button is located below the note. A modal window is open, showing details for the 'UnitedHealthcare Community Plan'. The plan ID is 'MQLQHLR FNFZAYBB' and it is marked as 'Enrolled'. The enrollment ID is '100819679' and the date is '06/01/2023 - Ongoing'. A blue button labeled 'Request MCO Change' is highlighted with a red border at the bottom of the modal.

Follow the steps below to change an Individual's MCO.

1. On the Individual's kynect dashboard, select the **Health Plans** tab to navigate to the Enrollment Manager Module (EMM).
2. Select **Medicaid Plans**.
3. Click **Request MCO Change**.
4. Shop for the desired MCO and select a new plan by clicking **Add to Cart**.
5. Confirm the new MCO selection and click **Checkout**.
6. Enter the Individual's **First Name, Middle Initial, Last Name, and Suffix** (if applicable).
7. Click **Sign and Submit** to complete the MCO Change Request.



New Releases

As of December 15, 2023, the following updates were deployed as part of Release 23.12:

- **Household Member Details in kynect** – During the application process, household details such as full name and total annual APTC income displays in kynect for each household member.
- **Head of Household Search Functionality** – An enhancement was added to kynect allowing Individuals to search by the primary applicant to easily find the Head of Household.
- **MCO Change Without Cause** – An addition was made to kynect that allows Individuals the option to request an MCO change at any point up through December 2024.
- **My Policies Screen Improvements** – Enhancements were made to the My Policies screen in Agent Portal allowing entire client lists to be exported to Excel at any time. Agents can now pull reports and may filter by Issuer, Plan Type, MCO Type, and Enrollment Status to locate specific information for an Individual's case.



kynect