kynect/benefind Navigational Guide for Agents and kynectors

REVISED APRIL 12, 2016

This Quick Reference Guide (QRG) is designed to introduce you to benefind, Kentucky's new online application system for SNAP, K-TAP, and Medicaid. This QRG provides information on when an application will be transferred from kynect to benefind and guidance for Agents and kynectors on their roles and responsibilities.

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1. Overview

Context

This Navigational Guide provides guidance for Agents and kynectors who assist individuals with applications and programs via kynect and how they will now interact with benefind.

In kynect, you can complete and submit applications for individuals for:

- MAGI Medicaid, including KCHIP
- Qualified Health Plans (QHPs) with or without Advanced Premium Tax Credits (APTC) and/or Cost Sharing Reductions (CSRs)
- Employer Sponsored Insurance through the Small Business Health Options Program (SHOP)

Through benefind, citizens can apply for the following programs:

- Food assistance (SNAP)
- Cash assistance (TANF or K-TAP)
- Health coverage, including traditional Non-MAGI Medicaid.

benefind and kynect look very similar. A transition screen will display to notify you when you must transition from one site to the other. However, you can always differentiate between each site by the different logos that display in the upper left hand corner. Since the same database is shared between kynect and benefind, if you make a change (i.e. report a change in circumstances) the change will be applied to all programs in both kynect and benefind that use that information.

kynect Kentucky's Healthcare Connection benefind Assistance & Support Programs for Kentuckians

Individuals

Individuals can apply for one or more of the following programs on benefind:

- Food assistance through Supplemental Nutrition Assistance Program (SNAP)
- Cash assistance through Kentucky Transitional Assistance (KTAP) or TANF
- Health coverage through Medicaid or a QHP (see below)

If an individual enters the system through benefind and is ONLY applying for health coverage and all the applicants in the household satisfy the following criteria, their application transitions to kynect.

- The applicants in the household are not 65 or older
- The applicants in the household are not blind, or disabled. Note that disabled means that the individual has an official determination of disability from the Social Security Administration (SSA).
- MAGI Medicaid individuals (income-based only Medicaid eligibility determination)

Agents and kynectors

Agents and kynectors need to continue to use kynect for health coverage applications and managing their account information. Agents and kynectors cannot initiate SNAP or KTAP applications in kynect or benefind. Agents and kynectors do not have accounts in benefind and should **not** create benefind accounts for themselves or on behalf of individuals. The one login that agents and kynectors currently have for the kynect SSP remains the same for benefind since they share the same database; therefore, you only need to log in through the kynect SSP. If an agent or kynector attempts to login to benefind, they will be directed to their landing page on kynect.

There are situations when you may be automatically transferred to benefind. See section 2. kynect and benefind Transitions for more details. Contracted kynectors (KIPDA, CAK, KyPCA) should keep in mind

that they only receive contract required credit for completed applications that are e-signed and submitted and eligibility determined for health insurance coverage. kynect cannot reimburse contracted agencies for time spent helping clients with benefind applications or the other DCBS state assistance programs. kynect can reimburse for time spent on the benefind site working on kynect applications and maintenance, for example, renewals or reporting a change.

Agents and kynectors **should not** initiate the Medicaid Waiver Services application when assisting individuals. This is different than the Waiver Gatepost questions that display in the Post-Eligibility section, which should be answered. This guide provides additional clarification in Section 2 and Appendix C.

However, if you are a kynector **and also** a Waiver Case Manager, continue to benefind and assist the individual with their Waiver Services application if they would like to apply for a Medicaid Waiver.

Agents and kynectors are not responsible for completing applications for food (SNAP) and cash (KTAP) assistance. When entering a new application there is no option for an agent or kynector to select other programs to apply for. If an individual wants to apply for any of these programs, agents and kynectors should refer them to the Department of Community Based Services (DCBS), or benefind where the individual can apply for those programs themselves. However, an agent or kynector can initiate Medicaid or QHP application for an individual who already has SNAP or KTAP.

Transition Overview

Even though kynect and benefind have different capabilities, they have a similar look and feel. They also share the same back-end database which allows individuals to sign into either portal, and automatically transition to the appropriate portal based on what they are applying for.

2. kynect and benefind Transitions

When completing applications for individuals in the scenarios described below, you will be transferred from kynect to benefind when:

- You are starting a new application and the application includes one or more household members who are either: 65 or older, blind, or disabled.
- You are reporting a change on an existing Medicaid case that includes an applicant who is 65 or older, blind, or disabled, regardless of the type of change you are reporting
- You are reporting a change on an existing case that includes programs like SNAP and KTAP, regardless of the type of change you are reporting
- You are working with an individual who wants to apply for Medicaid Waiver Services (the individual can choose to continue and apply or to not apply). A Waiver application must be completed in benefind by a Waiver Case Manager or a Waiver Facility.
- You are adding/removing an Authorized Representative/kynector/Agent on a case that includes SNAP and KTAP
- You are adding/updating enrollment for an applicant who is on a case that includes SNAP and KTAP

Following is a review of each scenario and recommendations on how to proceed. Appendix C is an in depth "How to Guide" that includes steps and screenshots to guide you through the process.

Scenarios covered:

1 New application with a Non-MAGI member
2 Reporting a change for a Medicaid/APTC/CSR only case which includes a Non-MAGI Member
3 Applying for someone who may qualify for a Medicaid Waiver
4 Multiple Program Applicant
5 Add/update an Authorized Representative for a case that includes SNAP, KTAP or Non-MAGI Medicaid individuals
6 Updating enrollments for an individual/family who is applying or receives assistance for SNAP, KTAP or Non-MAGI Medicaid
7 Reporting a change on a case that receives SNAP, KTAP or Non-MAGI Medicaid and MAGI, APTC or QHP

Scenario 1: New application with a Non-MAGI member

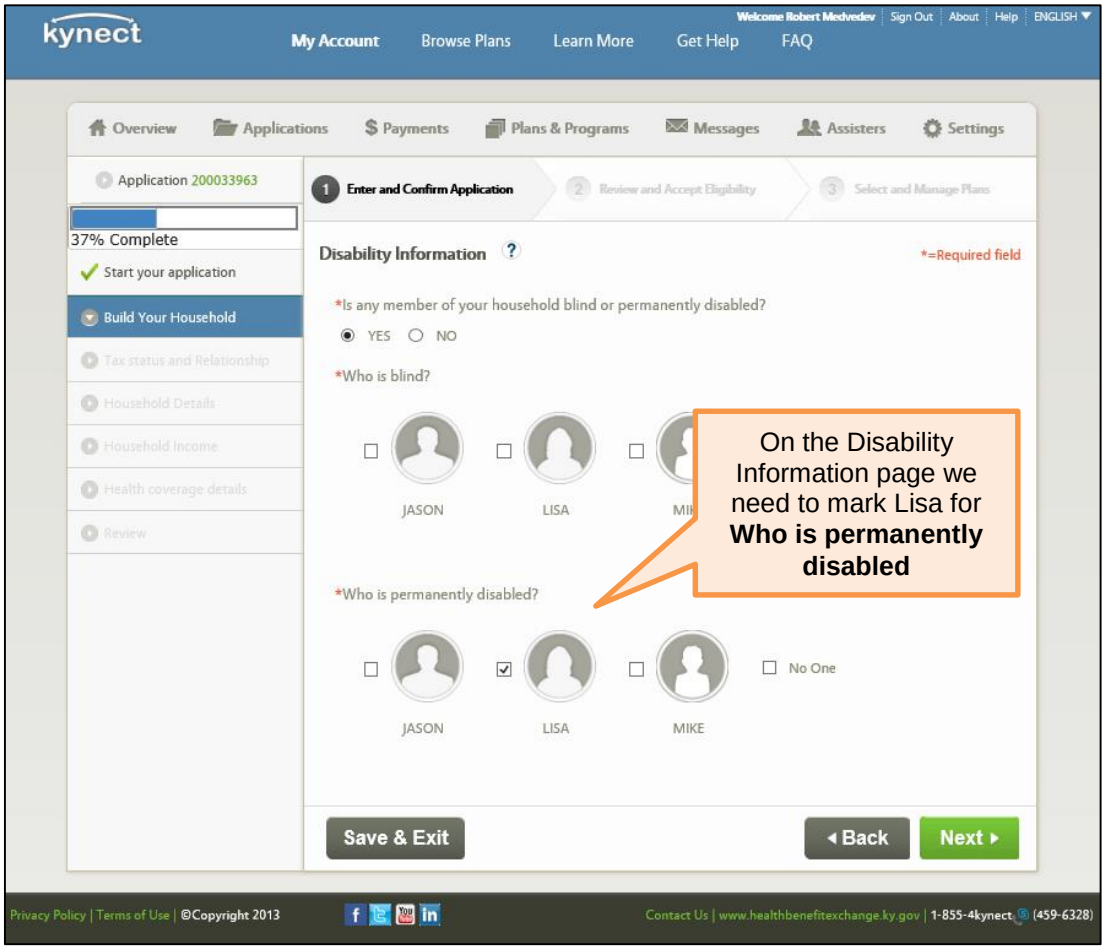
Jason, Lisa, and their son Mike want to apply for health coverage for the first time. Lisa is disabled which makes her potentially eligible for Non-MAGI Medicaid. Even though you know she may be able to apply for Non-MAGI Medicaid, you should begin her application on kynect. The application will automatically transfer to benefind because it includes a household member who is disabled. However, as a reminder, kynectors will only receive credit for completed applications for health care coverage (QHP or Medicaid).

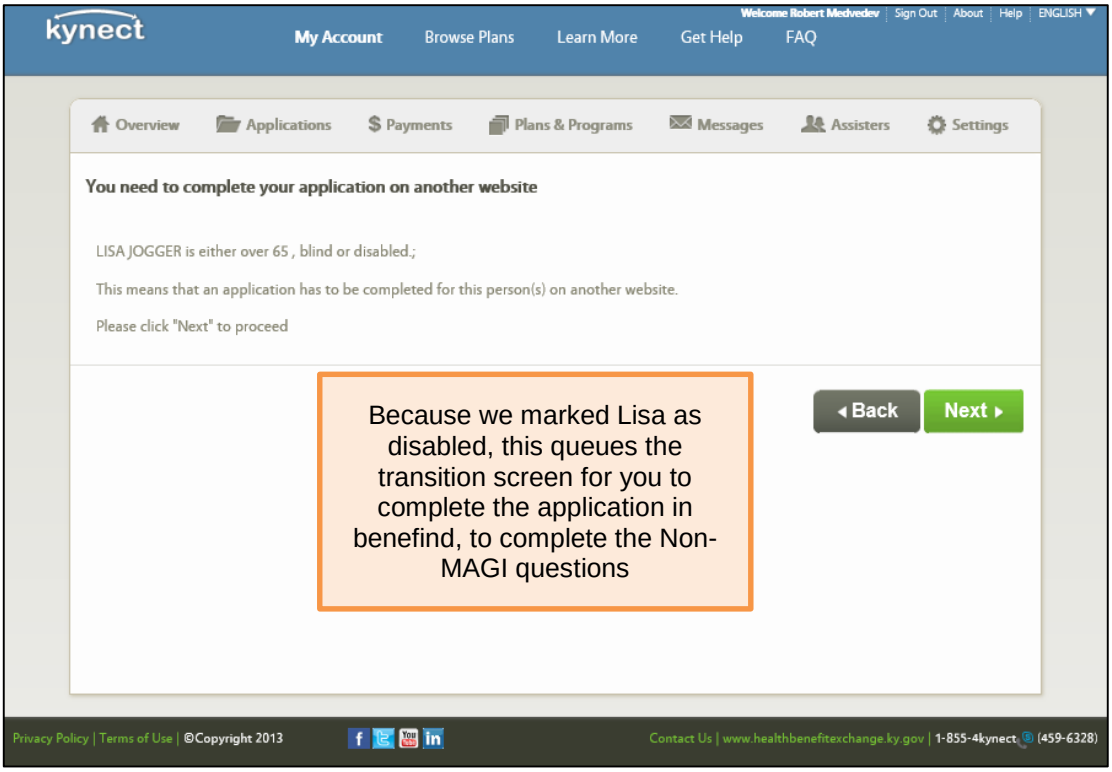
When you begin an application in kynect, nothing has changed. You will fill out the same information that you are used to seeing, such as:

- What programs the household is applying for
- Household and contact information
- Personal information

Once you get to the Disability Information screen, you should answer "Yes" that a member of the household is blind or permanently disabled. Mark **Lisa** as **permanently disabled.** When you click **Next**,

this queues the transition screen. The transition screen notifies you that the application has been transferred to benefind and must be completed in benefind.





Because we marked Lisa as disabled, this queues the transition screen for you to complete the application in benefind, to complete the Non-MAGI questions

If you click **Next**, you will complete the application in benefind which looks very similar to kynect. A logo will display in the upper left hand corner of the site that identifies which site you are on.

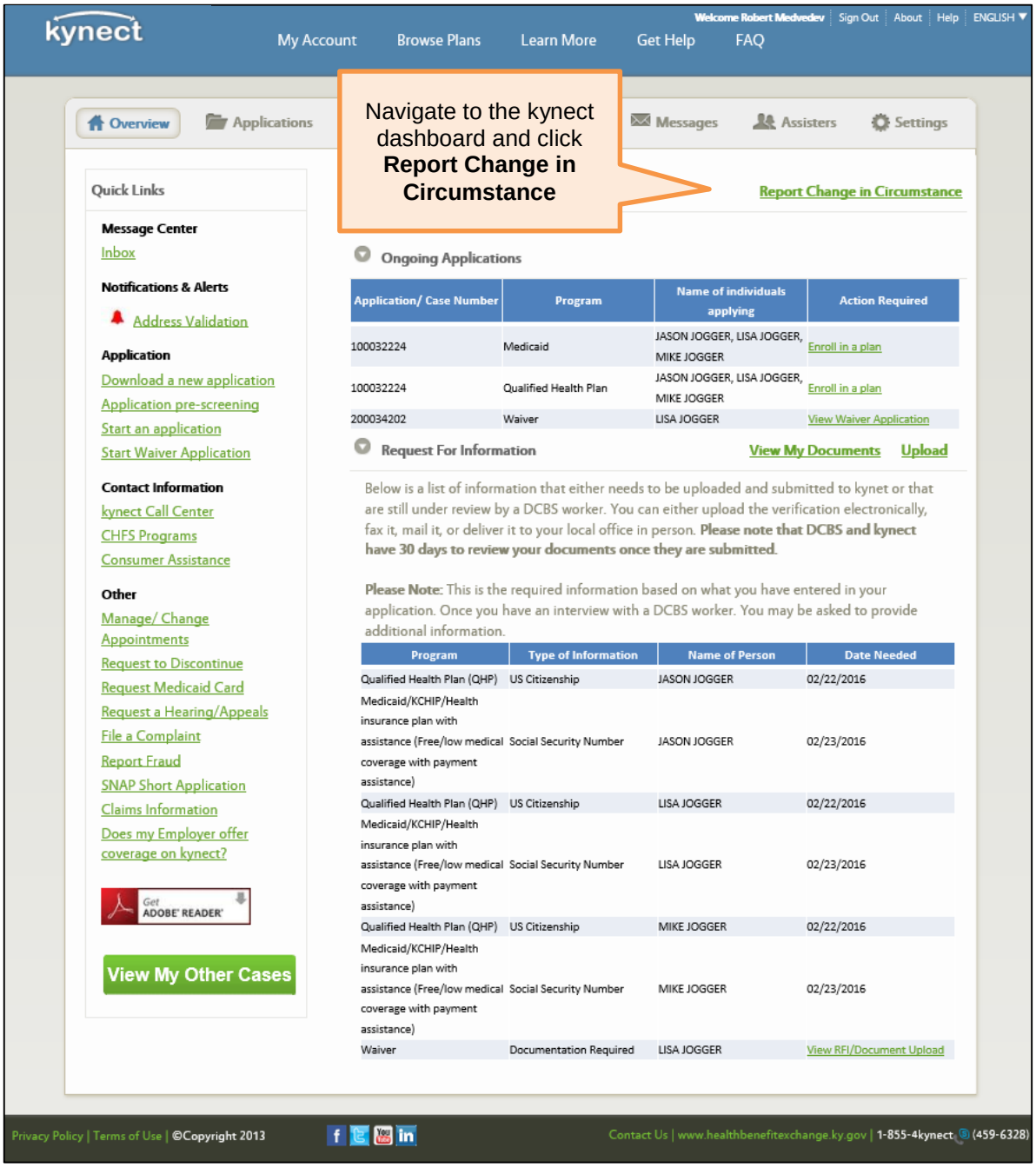
Once you click **Next,** you see some screens that you are familiar with, such as Relationships and Tax Filing Status. There are also new screens that request information and resources and expenses. These screens are Non-MAGI Medicaid specific and must be completed for the household. Even though the specific questions may be new to you, the way each screen works should be familiar. Based on the answers to each question the system then queues additional screens that you must provide.

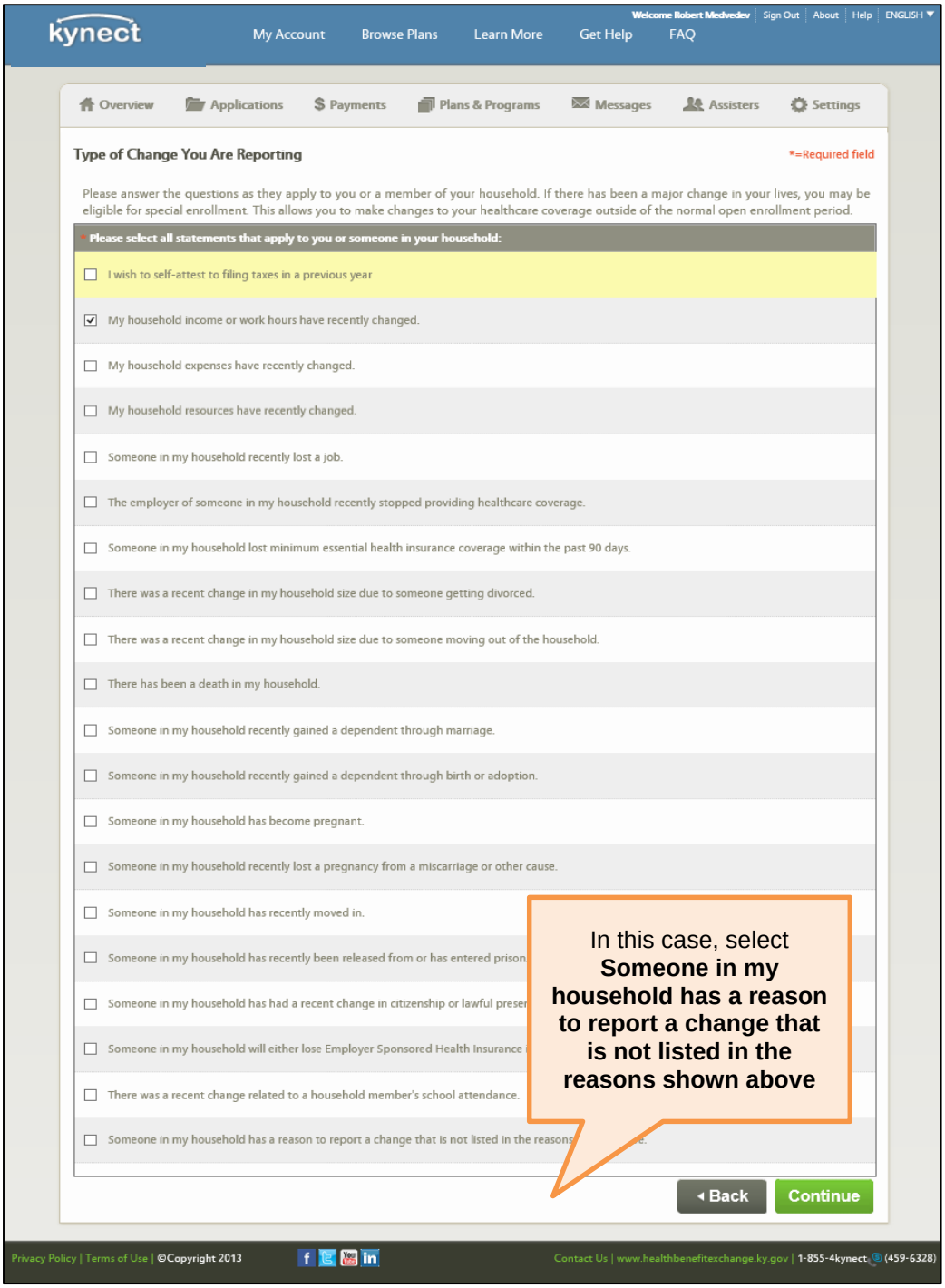
Appendix C provides information on completing a Non-MAGI application. In a household with a Non-MAGI applicant and a MAGI or QHP applicant, the MAGI/QHP eligible individual(s) can be approved and complete their enrollments, even though the Non-MAGI individual's status will be pending for an interview. The Non-MAGI applicant must follow the instructions located on the **Next Steps screen** (which queues after application submission) to call DCBS and schedule the required interview in order to be approved.

Scenario 2: Reporting a Change for a Medicaid only case which includes a Non-MAGI Member

Jason returns to report a change to his household. He and Lisa's son, Mike, was injured and is now disabled. At this point, Mike's disability makes him potentially eligible for Non-MAGI Medicaid.

Select the **Report a Change in Circumstance** link in kynect which is accessed from the dashboard. Select the type of change you are reporting; in this case, because there is not a specific selection for disability changes, select **Someone in my household has a reason to report a change that is not listed in the reasons shown above.**





Report the change by marking Mike as **Permanently Disabled** on the Disability Information page. The transition screen then queues and notifies you that you must complete the change in benefind.
After clicking **Next**, you will see familiar screens asking for information that you should be familiar with such as Relationships and Tax Filing status. You will also need to answer questions about Resources and Expenses which are used to determine eligibility Non-MAGI Medicaid. You can refer to Appendix C for information on completing these screens.

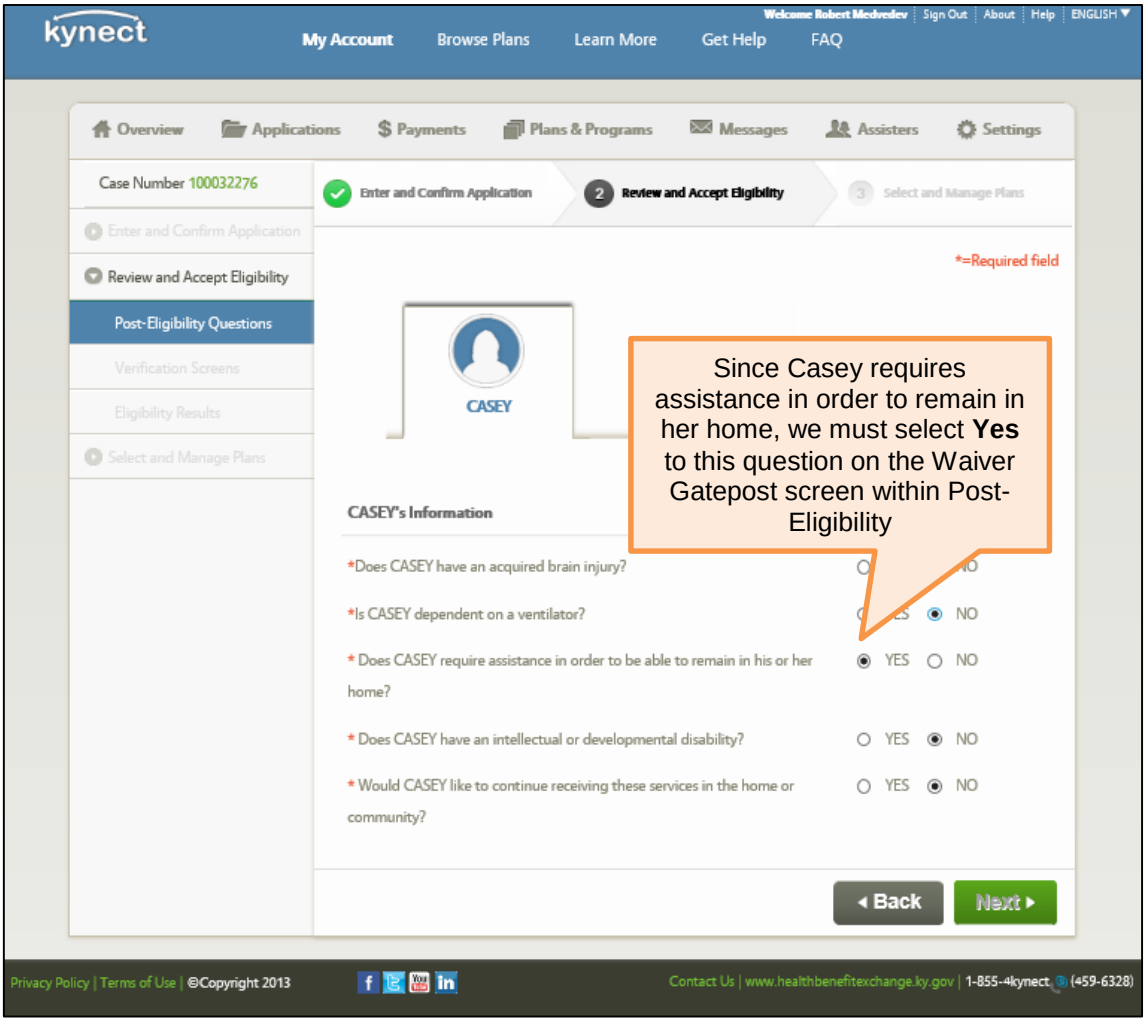
Scenario 3: Applying for someone who May qualify for a Medicaid Waiver

Casey wants to apply for Medicaid Waiver Services. Even though she is not considered disabled, she requires help to remain in her home and will be asked questions about the help she needs on the Waiver Gatepost screen.

Initiate the application through kynect as you normally would and enter in Casey's information to continue through the application. Once you complete the application, you will reach the Waiver Gatepost questions in the Post-Eligibility section.

Agents and kynectors should complete all the Waiver Gatepost questions in Post-Eligibility. In the Waiver Gatepost, you need to select **Yes**, that Casey does **Require assistance in order to be able to remain in his or her home**.

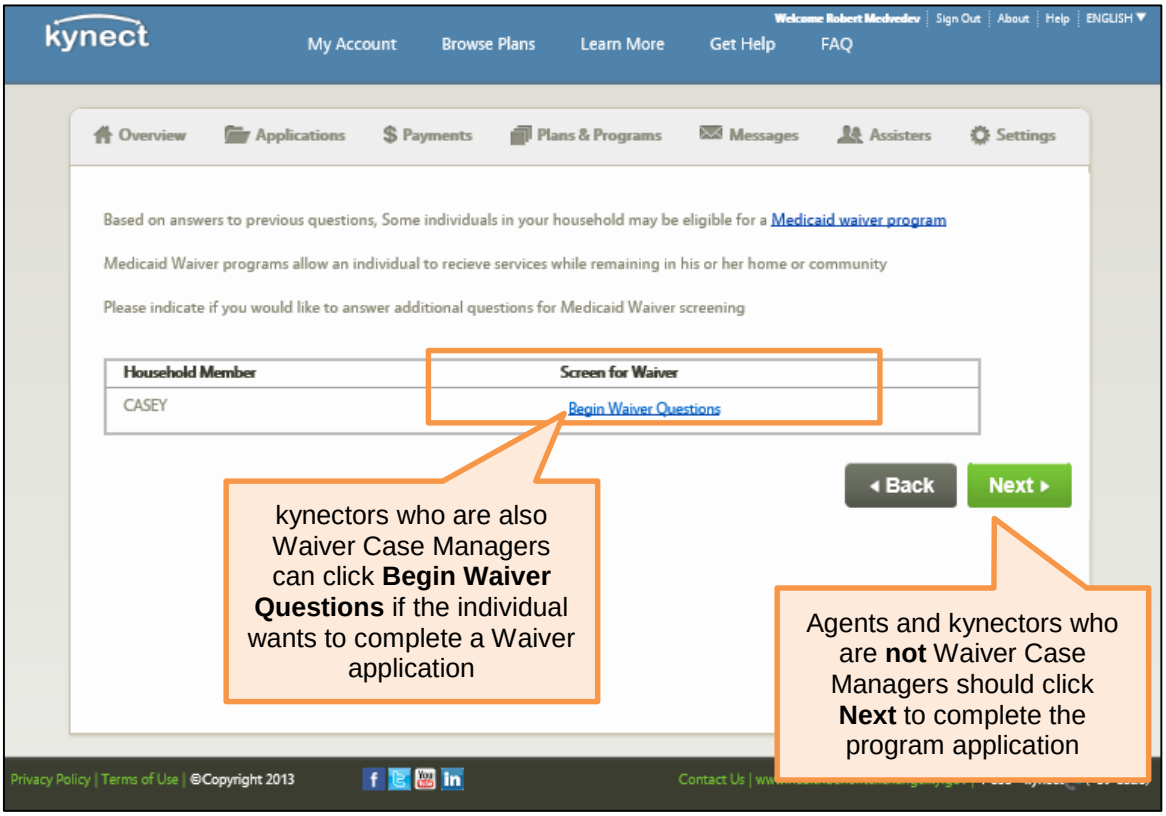
Selecting **Yes** to any of the questions on the Waiver Gatepost screen will trigger the option for Casey to apply for Medicaid Waiver services.



Indicating **Yes** to any one of these questions triggers the Medicaid Waiver application link on the following screen. Agents and kynectors should complete the Medicaid or QHP portion of the application through enrollment but **should not initiate the Medicaid Waiver application.** You should refer clients who are interested in applying for Medicaid Waivers to the Department of Medicaid Services (DMS)

website at http://chfs.ky.gov/dms/. It is optional for the individual to submit a Medicaid Waiver application but it will be available if they indicate **Yes** to any of the Waiver Gatepost questions.

As previously stated, only kynectors who are Waiver Case Managers should click on the **Begin Waiver Service Questions** link if the individual wants to apply for a Medicaid Waiver.



Scenario 4: Multiple Program Applicant

Amber wants to apply for both QHP and SNAP. She visits an agent or kynector for help with her application. You should inform Amber that you can assist her with the QHP portion of the application only. She can then complete the SNAP application in benefind or by contacting DCBS. Remember you **cannot** complete a SNAP or K-TAP application in benefind or kynect. You can begin a Medicaid or QHP application in kynect and then refer Amber to DCBS or direct them to benefind to complete the SNAP application themselves: benefind.ky.gov.

Agents and kynectors can make changes to an individual's case in kynect, excluding the following:

- Changes have been reported to DCBS and the case is being processed. In this situation, wait until the case status has been processed to update.
- Inconsistencies between existing case data and a converted case from the legacy system (KAMES) require the information to be examined by DCBS. For example, on the family's legacy SNAP case they had different reported income than on their MAGI Medicaid case. This scenario will be resolved once DCBS has reviewed and processed the cases.

Scenario 5: Updating case information when DCBS is processing a case for an individual/family receiving or recently received SNAP, KTAP, Non-MAGI Medicaid

There are two reasons why agents and kynectors will not be able to update a household's information based on individuals DCBS actively processing the case. This is caused by two reasons

- Changes have been reported to DCBS and the case is being processed. In this situation, wait until the case status has been processed to update.
- Inconsistencies between existing case data and a converted case from the legacy system (KAMES) which holds previous database information, the information is required to be examined by DCBS. For example, on the family's legacy SNAP case they had different reported income than on their MAGI Medicaid case. This scenario will be resolved once DCBS has reviewed and processed the cases.
- You will not be able to make any updates to the case while the case is being reviewed by DCBS including changes like adding a kynector or agent to a case. DCBS is working as fast as they can to process these cases.
- You will see the message below if this is the situation:

kynect

Welcome Will4 Cooper | Sign Out | About | Help | ENGLISH

My Account | Browse Plans | Learn More | Get Help | FAQ

Overview | Applications | Payments | Plans & Programs | Messages | Assisters | Settings

At this time, you are unable to make changes since a kynect Worker is updating information for your case. Please check back later or contact Customer Service at 1-855-4kynect(459-6328)

Quick Links

Message Center
Inbox
Tax Information
Reprint 1095A

Notifications & Alerts
Address Validation

Application
Download a new application
Application pre-screening
Start an application
Start Waiver Application

Contact Information
kynect Call Center
CHFS Programs
Consumer Assistance

Other
Manage/ Change Appointments
Request Medicaid Card
Request a Hearing/Appeals
File a Complaint
Report Fraud
Claims Information

Get ADOBE® READER®

Current Benefits

Plans & Programs

Case Number: 100018851

View/Edit Enrollments

Enrollment	Enrolled Individuals
Humana – CareSource	TAYLOR WRIGHT

Ongoing Applications

No ongoing applications

Request For Information — View My Documents — Upload

No documents pending for verification

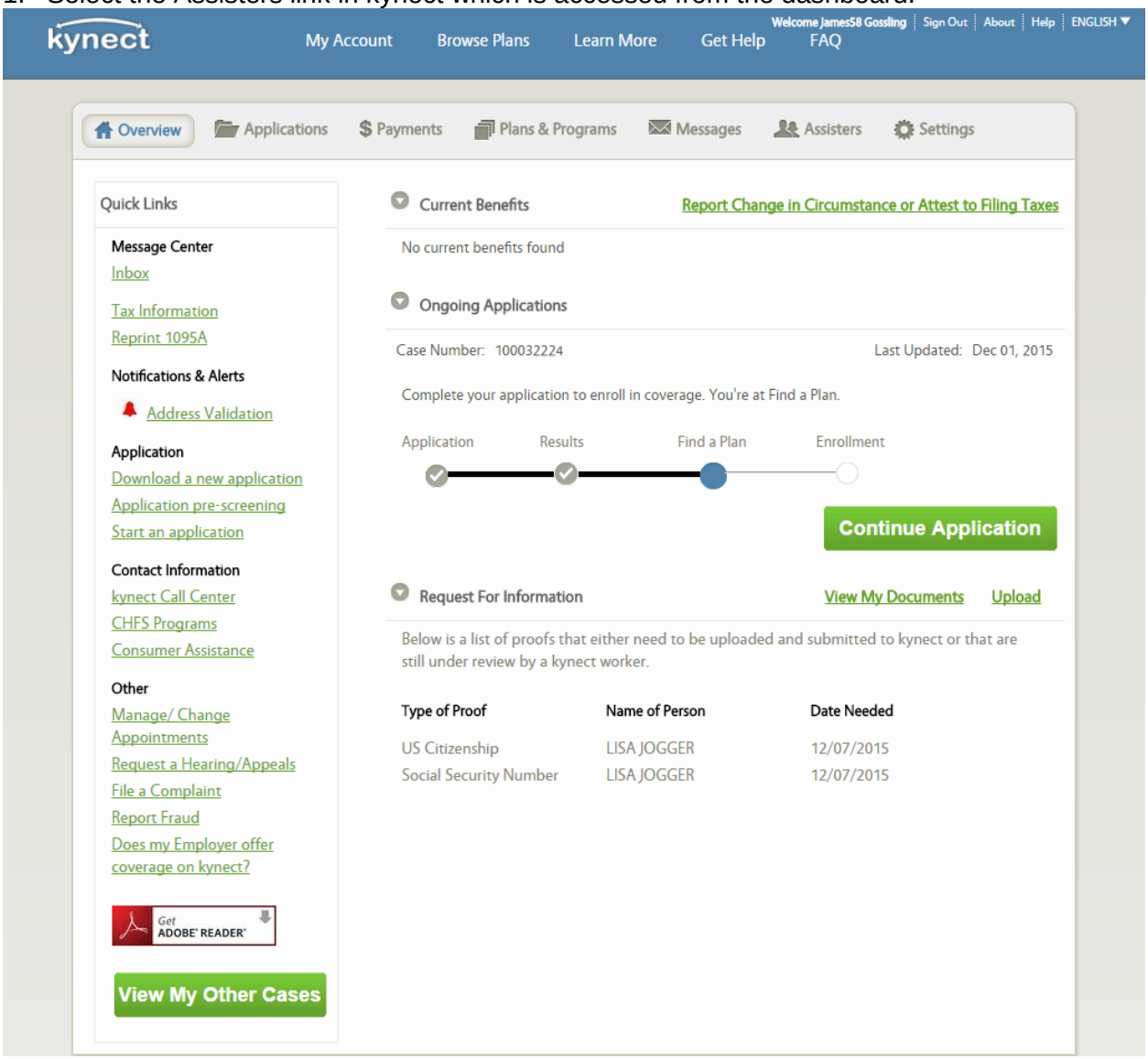
Privacy Policy | Terms of Use | ©Copyright 2013

Contact Us | www.healthbenefitexchange.ky.gov | 1-855-4kynect (459-6328)

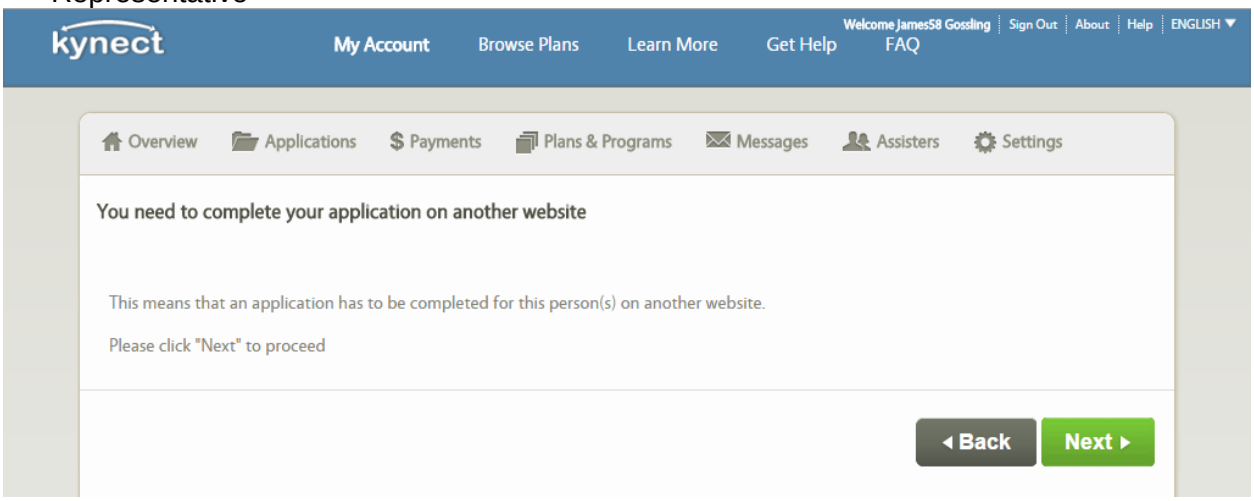
Scenario 6: Add/update an Authorized Representative for a case that includes SNAP, KTAP or Non-MAGI Medicaid individual

Lisa wants to add/update information about an Authorized Representative for her existing case. She visits an agent or kynector for help. She is on a case that includes SNAP, KTAP or a Non-MAGI Medicaid applicant.

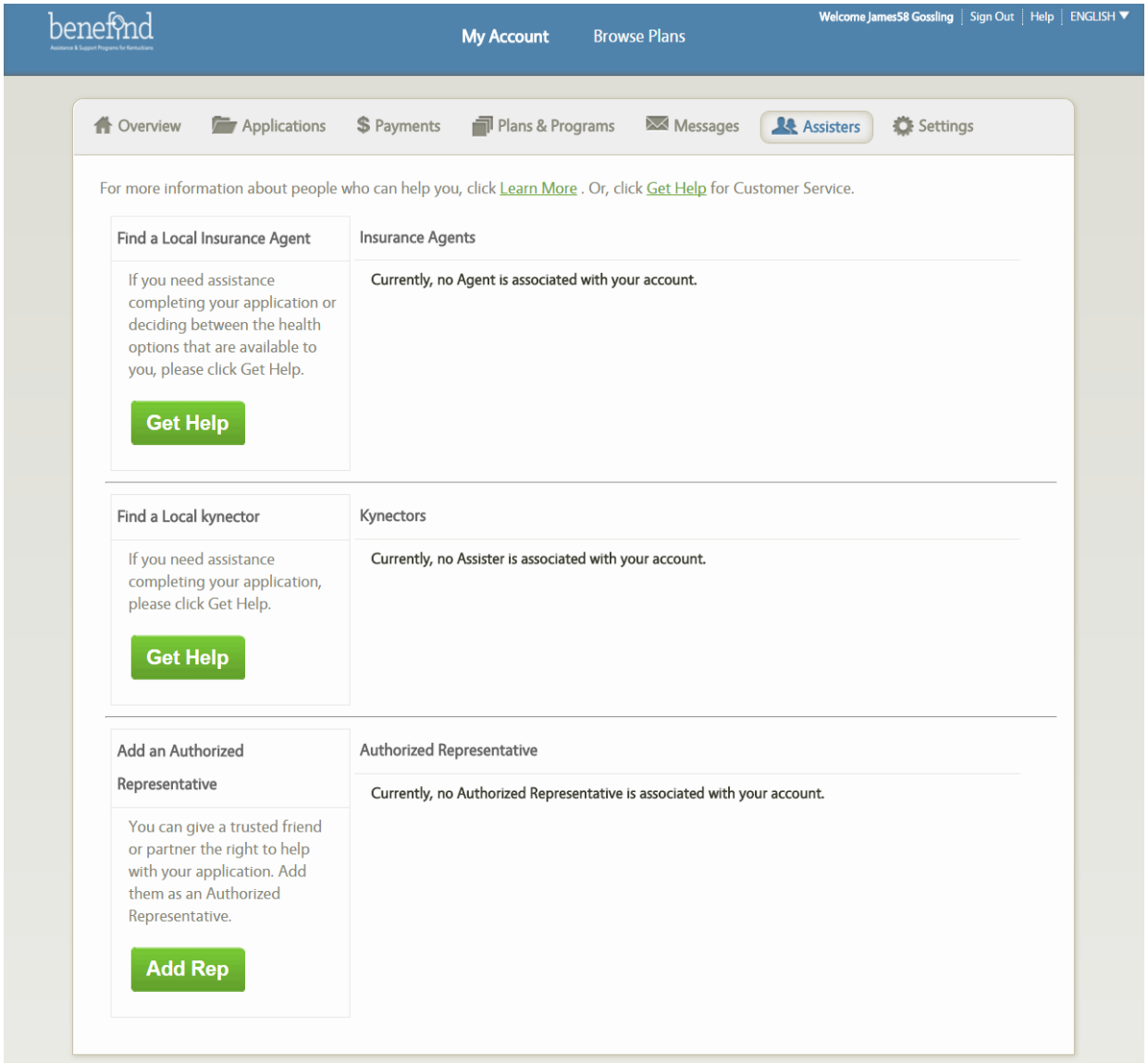
1. Select the Assisters link in kynect which is accessed from the dashboard.



2. Since this case includes SNAP, you will be transitioned to benefind to add/update Authorized Representative



3. Through the next 3 screens on benefind, you can add/update Authorized Representative/Agent/ Assistor information. Click **Get Help** under Find a Local Insurance Agent to add an agent. Click **Get Help** under Find a Local kynector to add a kynector. Finally, click **Add Rep** to add a new Authorized Representative.



4. Add or update agent, kynector or authorized representative information.

benefind

My Account | Browse Plans

Welcome James58 Gossling | Sign Out | Help | ENGLISH

Overview | Applications | Payments | Plans & Programs | Messages | Assisters | Settings

Case Number 100032224

- Start Application
- Household Member Information
- Financial Information
- Additional Medical Assistance Questions
- Authorized Representative Information
- Review and Submit
- Post Application Submission

Enter and Confirm Application | Review and Accept Eligibility | Select and Manage Plans | Submit Application

Authorized Representative Information

*=Required field

An Authorized Representative is someone you name to make decisions for you about your household's benefits. You may want or need an Authorized Representative if you are physically or mentally unable to fill out this form, have given someone Power of Attorney, or need other help. If you name an Authorized Representative, he or she can help you with the following:

- apply or make decisions about your benefits for you
- receive healthcare coverage notices for you
- if allowed, use KTAP or SNAP benefits on your behalf

If you do not need an Authorized Representative, click "Next".

* Would you like to choose one or more Authorized Representatives? (•) YES ( ) NO

About Your Authorized Representative

Please tell us about your Authorized Representative

* First Name	M.I.	* Last Name	Suffix
JOHN		GOSSLING	--Select--

SSN	Gender	Date of Birth (MM/DD/YYYY)
	--Select--	

* What is this person's relationship to you? Legal Guardian

* Does your Authorized Representative belong to an organization that helps you? NO

Level of Permission

Please tell us about the permissions you would like to give to your Authorized Representative.

* Program	* Level of Permission	Action
Medicaid/KCHIP/Health in	Apply, Report Changes , Recertify	✕

Add Another Permission

How do we reach your Authorized Representative?

* Address Line 1: 12 SMITH LANE

Address Line 2:

* City	* State	* Zip Code	Zip +4	* County
FRANKFORT	KENTUCKY	40601		FRANKLIN

Primary Phone	Ext.	Primary Phone Type
		--Select--

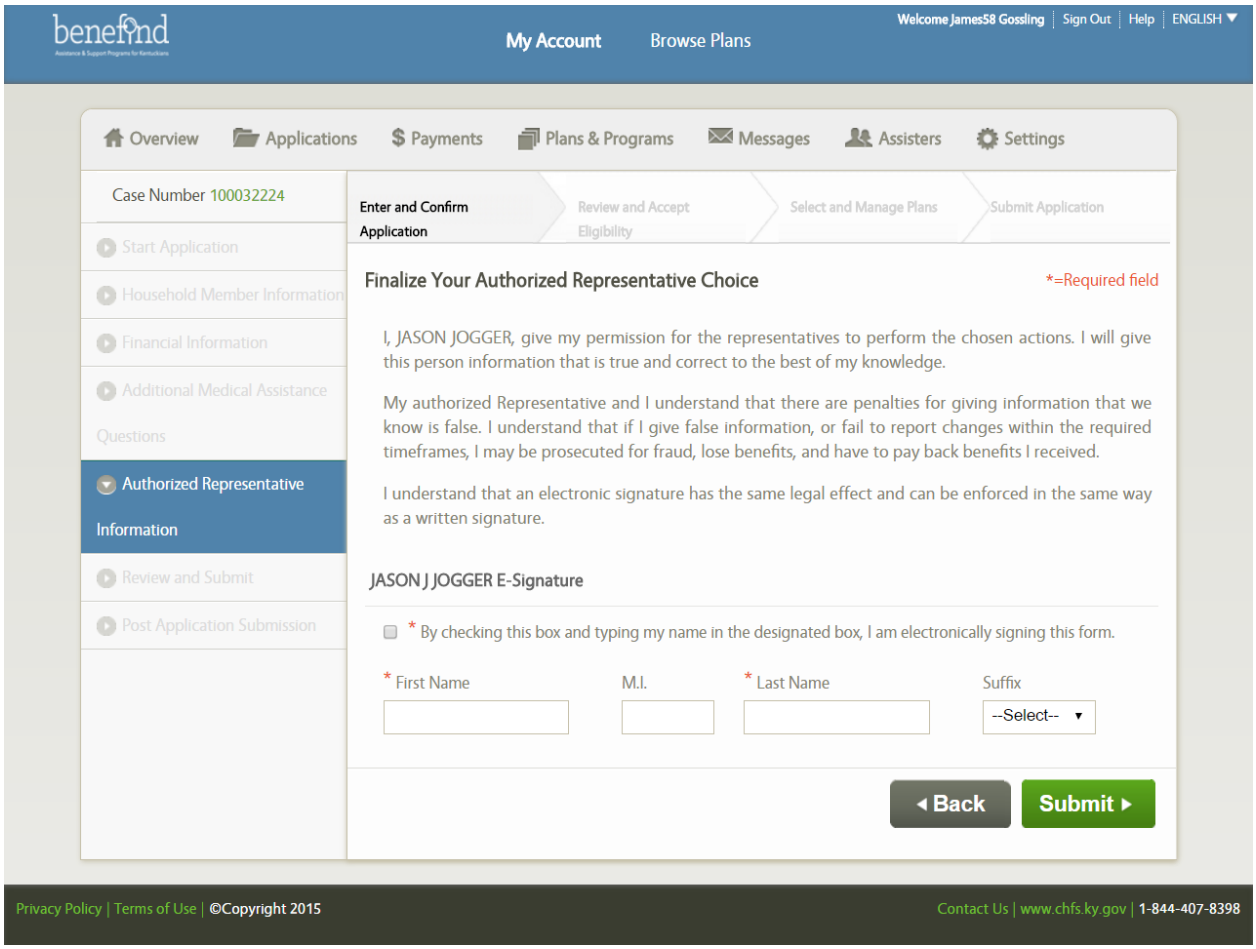
Secondary Phone	Ext.	Secondary Phone Type
		--Select--

Email Address	Preferred Language
	English

Add Representative

Save & Exit | Back | Next

5. Electronically sign the changes to the case. Click **Submit**.

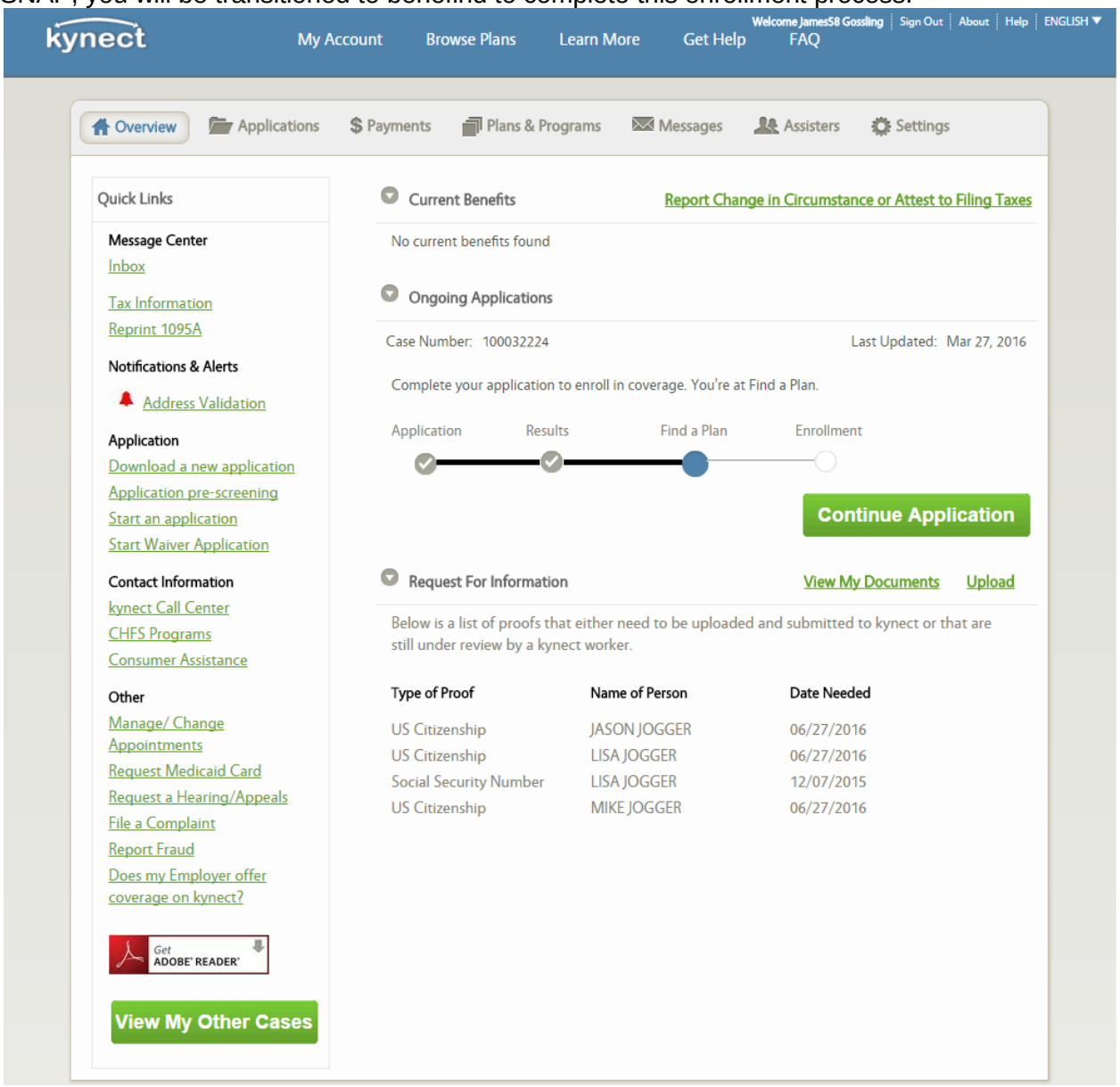


6. Once the changes have been completed, click on My Account to transition back to the kynect homepage.

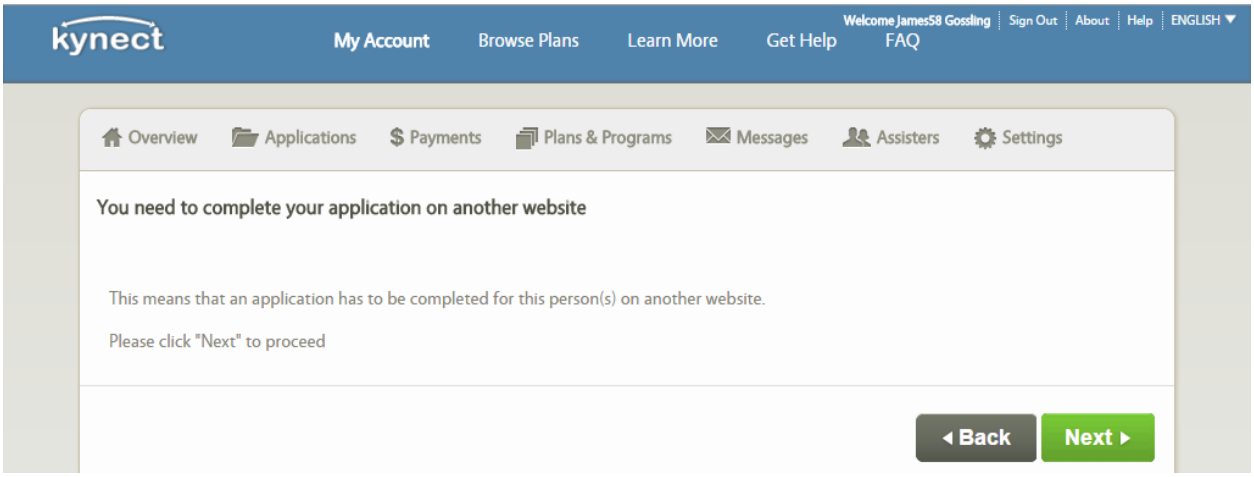
Scenario 7: Updating enrollments for an individual/family who is applying or receives assistance for SNAP, KTAP or Non-MAGI Medicaid

You need to add/update enrollments for Lisa who receives SNAP and Medicaid. Agents and kynectors can continue to make updates to enrollments when an individual applies for or is receiving benefits being processed by DCBS.

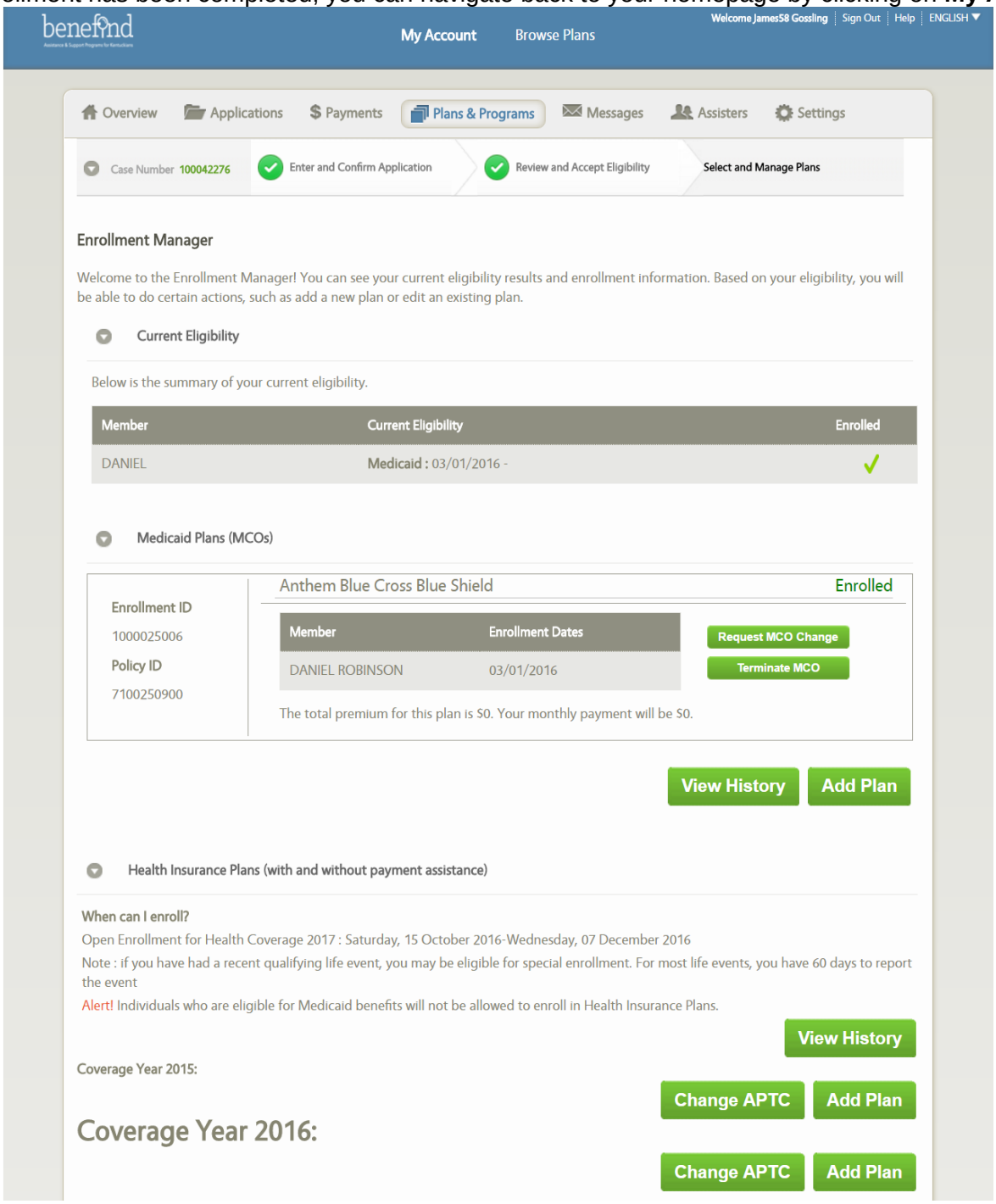
1. Click on Plans & Programs through the Dashboard. Since Lisa is on a case that includes Medicaid and SNAP, you will be transitioned to benefind to complete this enrollment process.



2. You will see the transition screen, click Next. You will be directed to the Enrollment Manager screen on benefind.



3. You are directed to the Shopping Portal where you can update enrollments for the applicant. Once enrollment has been completed, you can navigate back to your homepage by clicking on **My Account**.



Scenario 8: Reporting a change on a case that receives SNAP, KTAP or Non-MAGI Medicaid and MAGI, APTC or QHP

Lisa reported a change in income. She visits an agent or kynector for help. She is on a case that includes SNAP, KTAP or a Non-MAGI Medicaid.

1. Navigate to the individual's case as you normally would and click the **Report a Change** in Circumstance link from the kynect dashboard

2. The transition screen queues, notifying you that you must complete reporting the change in benefind. If agents/kynectors see the transition screen and the benefind logo while making a change this simply means that the information being updates is shared by multiple programs. Continue to make the change to the health insurance information as you have in the past. The impacts of changes to the other programs will be processed by DCBS.

3. Select the type of change you are reporting; in this case, select **My household income or work hours have recently changed**.

4. Once all Financial information is completed, eligibility is determined for all members of the household

5. If eligible, the individual can upload any document verification. Any pending Request for Information (RFIs) is sent to the individual. There may be pending RFIs that are new to agents and kynectors. This means that the other programs require different verification for information in the case. These new pending RFIs which are applicable to the new programs are not displayed on the kynect dashboard of the individual. They will be displayed on the benefind dashboard for the individual's reference. Remember RFIs need to be submitted as PDFs and not images.

    a. To submit RFIs not related to kynect use this fax number: 502-573-2007
    b. To submit RFIs related to kynect continue to use this fax number: 502-573-2007

These steps apply to all types of changes reported: adding and removing individual to the household, addresses, wages, etc.

3. Appendix A: Contact/Referral Information

Appendix A provides contact information for referral agencies.

Department or Entity Name	Phone Number	Website	Reason(s) to Call
Department for Community Based Services (DCBS) Each county has its own DCBS office. Please refer to the website for more information.	855-306-8959	http://chfs.ky.gov/dcbs/	If you have questions regarding the following programs and/or need to refer an individual to complete their application: 1. SNAP 2. KTAP 3. Medicaid eligibility 4. Child Care
Department for Medicaid Services (DMS)	800-635-2570	http://chfs.ky.gov/dms/	If you have questions regarding the following programs and/or need to refer an individual to complete their application: 1. Kentucky Medicaid Program 2. Kentucky Children's Health Insurance Program 3. Member services information 4. Medicaid Waiver program

4. Appendix B: Program Overview

Appendix B provides you with basic overviews of the programs individuals can apply for in kynect or in benefind.

kynect

- Qualified Health Plans (QHPs)
- Financial Assistance:
  - MAGI Medicaid
  - Advanced Premium Tax Credits (APTC)
  - Cost Sharing Reductions (CSR)
- Employer Sponsored Insurance (ESI)

benefind

- Qualified Health Plans (QHPs)
- Supplemental Nutrition Assistance Program (SNAP)
- Kentucky Transitional Assistance Program (KTAP)
- Medicaid:
  - Non-MAGI Medicaid
  - MAGI Medicaid
  - APTC
  - CSR

Through benefind, individuals are able to apply for:

Supplemental Nutrition Assistance Program (SNAP)

- SNAP provides eligible households with benefits that they can use to purchase eligible food items in stores that are authorized by the USDA, Food and Nutrition Service (FNS) to accept those benefits
- In order to be eligible for SNAP, an individual must meet the following basic eligibility criteria
  - Be a resident of Kentucky
  - Have U.S. citizenship or meet the immigration status program
  - Agree to work register
  - Meet the resource limits established for the program; no one in the household can have more than $2,000 in cash and bank account assets
  - Meet the income limits established for the program

Kentucky Transitional Assistance Program (KTAP)

- KTAP provides eligible households with financial and health coverage to needy dependent children and the parents or relatives with whom the children are living. KTAP also helps families find jobs or get training that leads to a job
- In order to be eligible for SNAP, an individual must meet the following basic eligibility criteria
  - Be a resident of Kentucky
  - Have U.S. citizenship or meet the immigration status for the program
  - Be unemployed, or under employed
  - Be a parent/relative caregiver who is caring for a child (under 19, if meeting school attendance requirements)
  - Meet the income limits established by the program

MAGI Medicaid

- Medicaid is a program for families and individuals who have income and resources within the established guidelines.
- To be eligible for MAGI Medicaid, an individual must belong to one of the following groups:
  - Children under age 19 with certain school attendance requirements
  - Pregnant women, or in postpartum, whose income is under or equal to 195% FPL (may be increased to 200% only if needed to gain eligibility)
  - Parents and caretaker relatives of a dependent child in the home whose income is under or equal to 133% (may be increased to 138% only if needed to gain eligibility)

- Low income adults ages 19-64 who are not: pregnant, enrolled in Medicare A or B, or eligible for another Medicaid eligibility group, and who have income less than or equal to 133% of FPL (may be increased to 138% if needed to gain eligibility)

Non-MAGI Medicaid

- Non-MAGI Medicaid is a program for expanded groups that have income and resources within established guidelines
- In order to be Non-MAGI eligible, an individual must fall into one of the following groups:
  - Aged; 65 and over with certain income and resource requirements
  - Blind or disabled with certain income and resource requirements
- For additional information on MAGI and non-MAGI Medicaid, you can reference the kynect Training Manual for Agents and kynectors, Section 5

Medicaid Waivers

- Waiver services provide coverage for specific services that enable elderly or disabled individuals to remain in their home. Waiver services include:
  - Acquired Brain Injury Waiver Services
  - Acquired Brain Injury Long Term Care Waiver
  - Home and Community Based Wavier Services
  - Michelle P. Waiver Services
  - Model II Waiver Services
  - Supports for Community Living Waiver Services
- For additional information on the different types of waiver programs, you can access:
  - The Medicaid Waiver Services website at http://chfs.ky.gov/dms/mws.htm

Child Care Assistance

- The Child Care program provides access to quality child care, allowing parents to work, attend education and training programs, and/or participate in KTAP
- In order to be eligible for Child Care Assistance, the following basic eligibility criteria must be met:
  - 1 parent households must abide by the 20 hours/week work requirement, while 2 parent households must meet 40 hours/week
  - If school-aged, the child must be enrolled in school
  - Household must reside and intend to remain in Kentucky
  - Child must be a US citizen

Qualified Health Plans (QHPs)

- QHPs provide individuals with health care plan options they can purchase through kynect. In addition to enrolling in a QHP, eligible individuals can also receive financial assistance through Advanced Premium Tax Credits (APTC) and Cost Sharing Reductions (CSR)
- If someone is applying for QHP only in benefind, they will be transferred to kynect to complete the application.
- For additional information about QHP eligibility, see the kynect Training Manual for Agents and kynectors, Section 4.

5. Appendix C: Step-by-Step Scenario Guides

Appendix C provides detailed steps for completing an application in benefind. Please keep in mind:

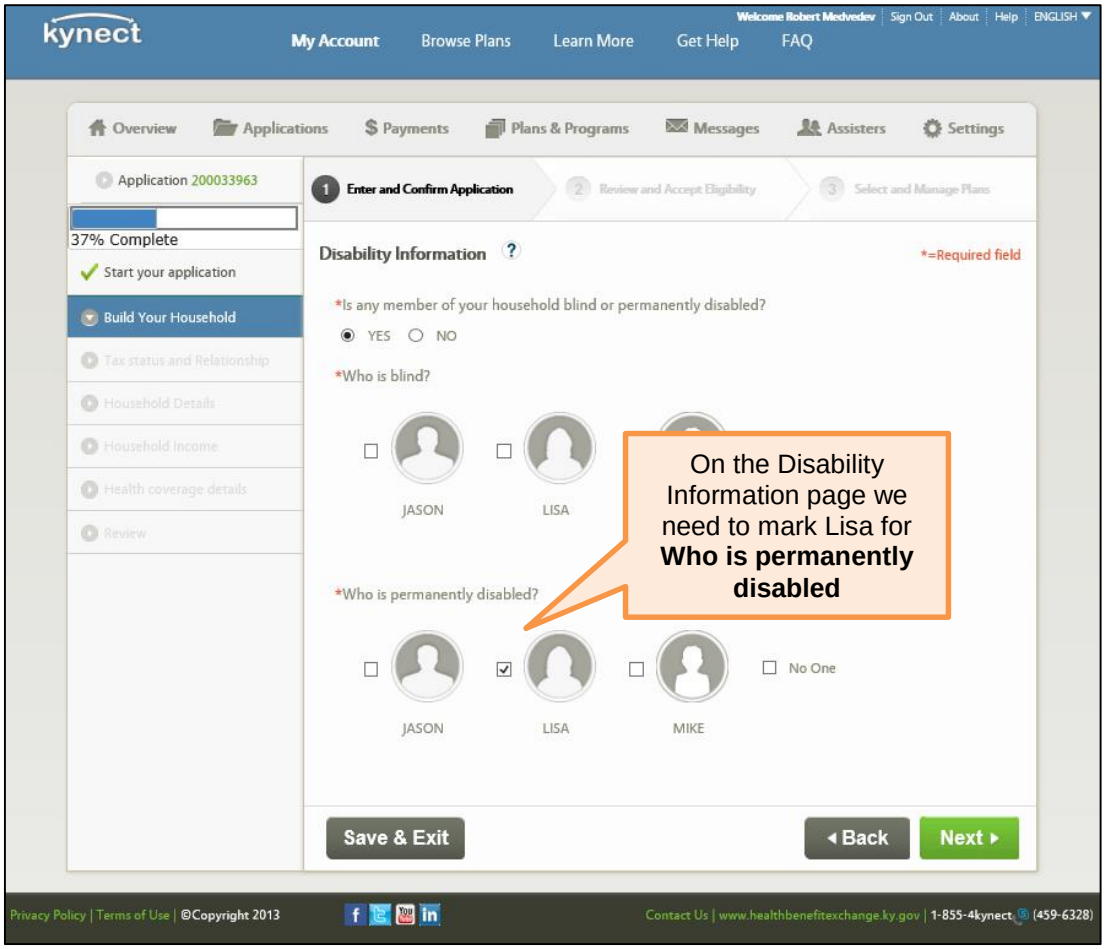
- Agents and kynectors **should not** initiate a Medicaid Waiver Services application and must instead refer the individual to the Department of Medicaid Services (DMS) website at http://chfs.ky.gov/dms/the only exception is if you are a kynector who is also a Waiver Case Manager
- Contracted kynectors (KIPDA, CAK, KyPCA) will only receive credit for completed applications
- Agents and kynectors **cannot** initiate SNAP or K-TAP applications

Also, please note that when you are in benefind, you can click **Save and Exit** at any time during the application. This saves the application information and allows the applicant to come back at a later time to complete as shown in Scenario 1 below.

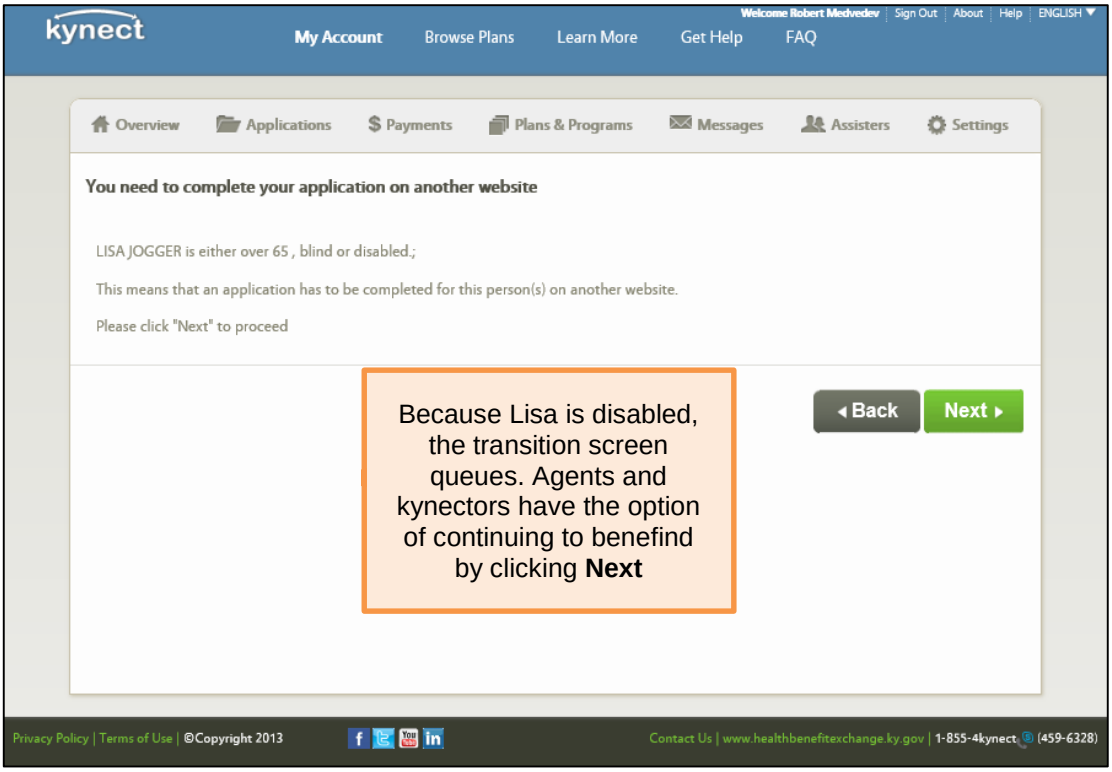
Scenario 1: Household with a Disabled Member, Eligible for Waiver Services

Jason, Lisa, and their son Mike would like to apply for health coverage on kynect. Lisa is disabled which makes her potentially eligible for Non-MAGI Medicaid. Even though you know that she may be able to apply for a Non-MAGI Medicaid, you should start her application on kynect. You will be automatically transferred to benefind based on your responses.

1. Begin an application as you would in kynect; you will need to fill out the same information on the screens you are familiar with seeing, such as:
    - What programs the household is applying for
    - Household and contact information
    - Personal information
2. Once you get to the Disability Information page, select the members of the household who are blind or permanently disabled. In this case, **Lisa is permanently disabled**
3. Click **Next**



4. A transition screen queues notifying you that the application needs to be completed on benefind, click **Next.**



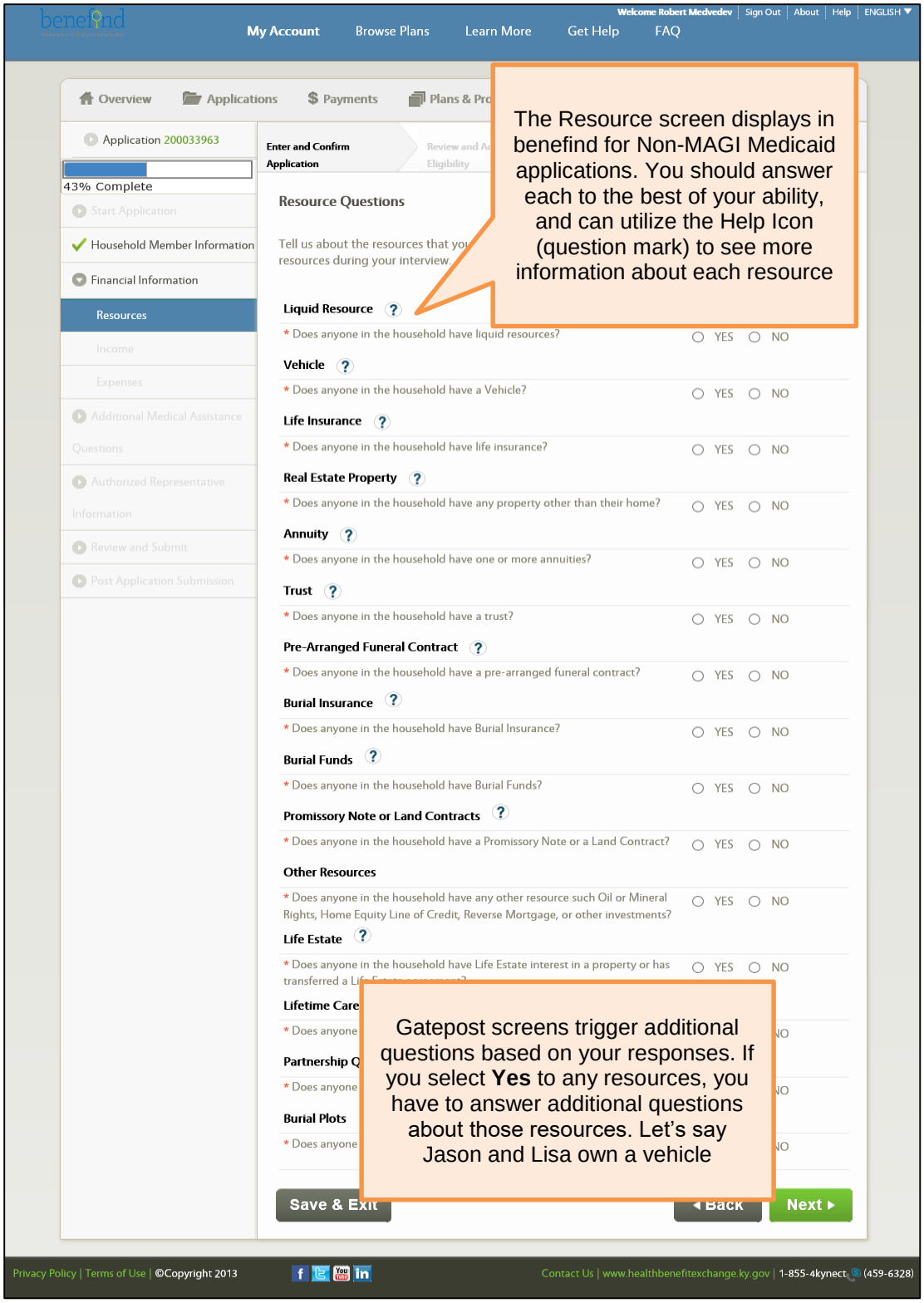
Because Lisa is disabled, the transition screen queues. Agents and kynectors have the option of continuing to benefind by clicking **Next**

5. You are then automatically transitioned to benefind where you will continue to collect information for all household members, even though Jason and Mike are not eligible for Non-MAGI Medicaid eligible. Note that the logo in the upper left-hand corner changes from kynect to benefind. You will see the same questions and screens you would see in kynect, such as Relationships and Tax Filing status.

6. This screen is an example of a Gatepost Screen. If you/an individual selects **Yes** to any one of the questions on the Resource Gatepost, the next screen that queues will ask for additional information on whatever you selected **Yes** to. For example, Jason and Lisa have a car, so select **Yes** under Vehicle and click **Next.** This triggers additional questions about their vehicle.

   You can reference the chart below to understand each resource in more detail.

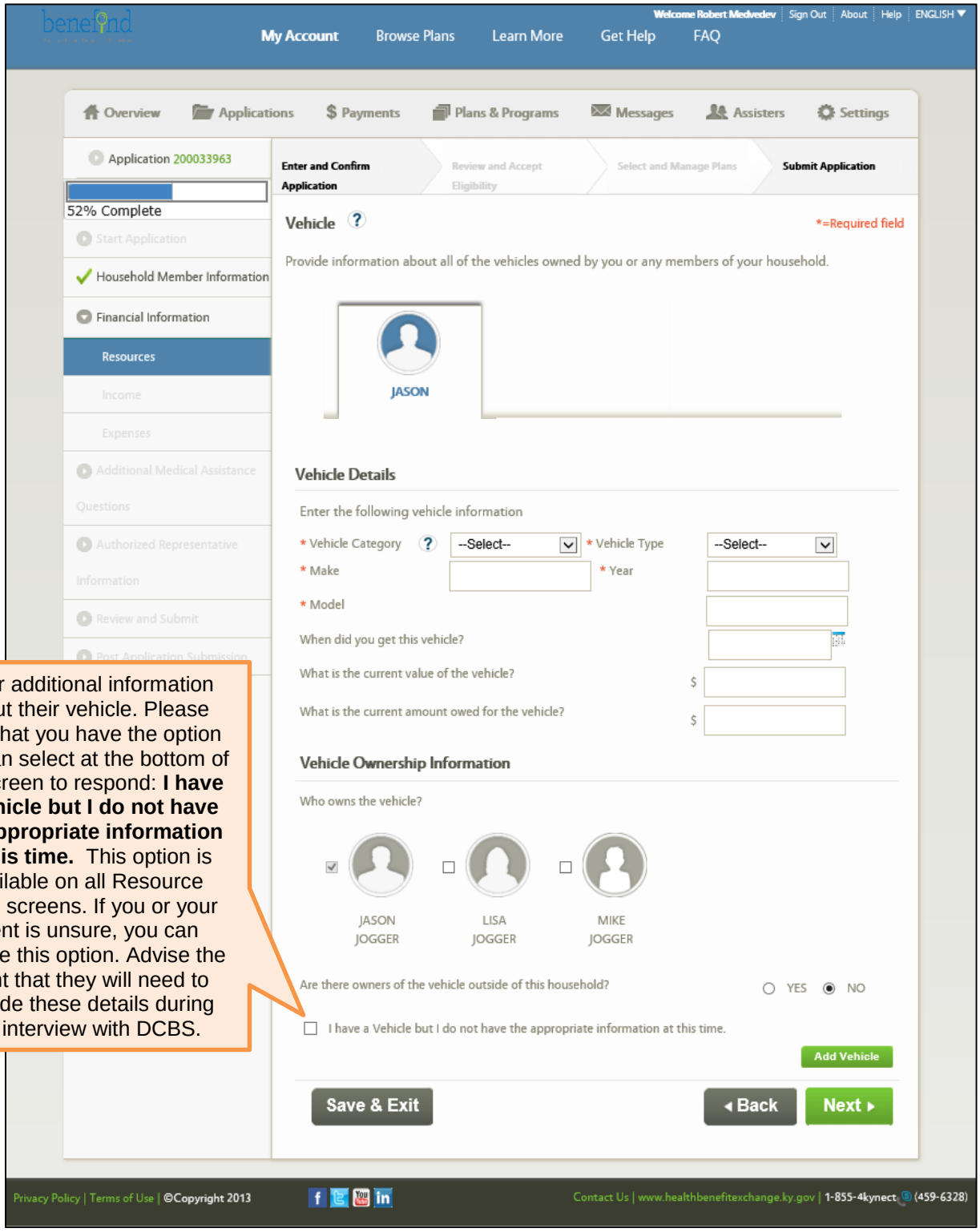
Liquid Resource	A liquid resource includes cash, checking accounts, savings accounts, certificates of deposit, stocks, bonds, money market accounts, and other accessible funds.
Vehicles	Vehicles include cars, trucks, SUVs, boats, motorcycles, RVs, tractors, planes, ATVs, etc.
Life Insurance	Life insurance is an insurance policy that will provide money to be used at the time of the individual's death.
Pre-Arranged Funeral Contract	A pre-arranged funeral contract is a contract with a funeral home to specify funeral details.
Real Estate Property	Real estate property includes any land, building, or house that you own.
Annuity	An annuity is an investment account from which you may or may not receive regular payments.
Trust	A written legal arrangement created to hold resources for the benefit of a certain person(s).
Burial Insurance	Burial insurance is an insurance policy that can only be used for burial expenses of the insured.
Burial Funds	Money deposited in a financial institution under a contractual agreement which designates that the funds deposited are for burial purposes and payable upon death only.
Promissory Note or Land Contract	A promissory note or land contract is a written promise or contract for which payments are received over a period of time.
Life Estate	A life estate is when an individual keeps their interest in a property, but the ownership of the property has been transferred to another individual.
Lifetime Care Agreements	A lifetime care agreement is a private contract with another individual to provide care of an individual in exchange for resources.
Partnership Qualified LTC Policy	A partnership qualified Long Term Care (LTC) policy provides coverage of LTC costs to the consumer and may allow the consumer to protect their assets from Medicaid spend down requirements



The Resource screen displays in benefind for Non-MAGI Medicaid applications. You should answer each to the best of your ability, and can utilize the Help Icon (question mark) to see more information about each resource

Gatepost screens trigger additional questions based on your responses. If you select **Yes** to any resources, you have to answer additional questions about those resources. Let's say Jason and Lisa own a vehicle

7. The Vehicle screen displays

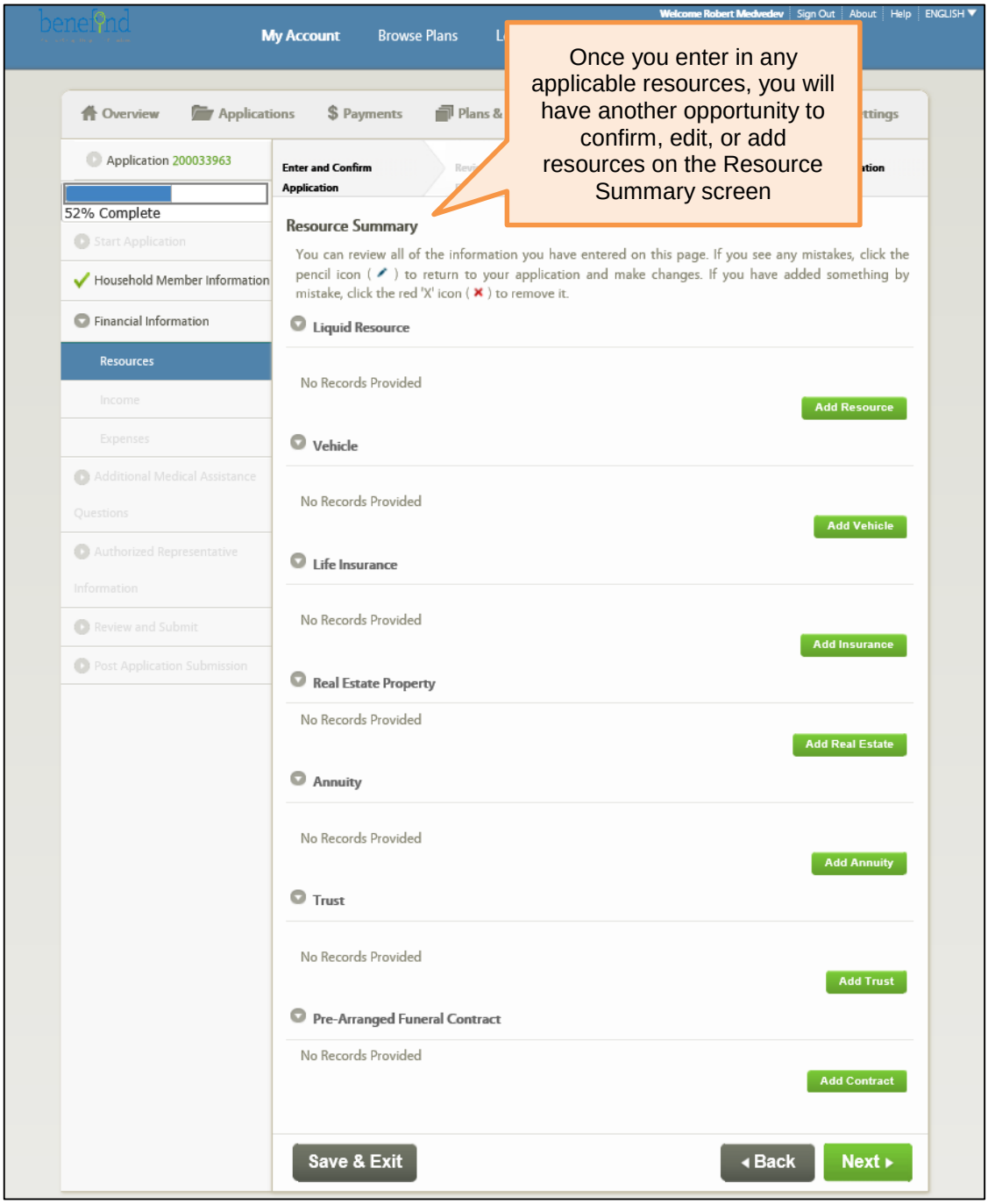


Enter additional information about their vehicle. Please note that you have the option you can select at the bottom of the screen to respond: **I have a Vehicle but I do not have the appropriate information at this time.** This option is available on all Resource detail screens. If you or your client is unsure, you can choose this option. Advise the client that they will need to provide these details during the interview with DCBS.

Even though you may not have experience with Non-MAGI Medicaid, the system allows you to easily complete these required screens. Each program's policies are built into the system. All you need to do is answer the questions. The system uses this information to determine eligibility for Non-MAGI Medicaid.

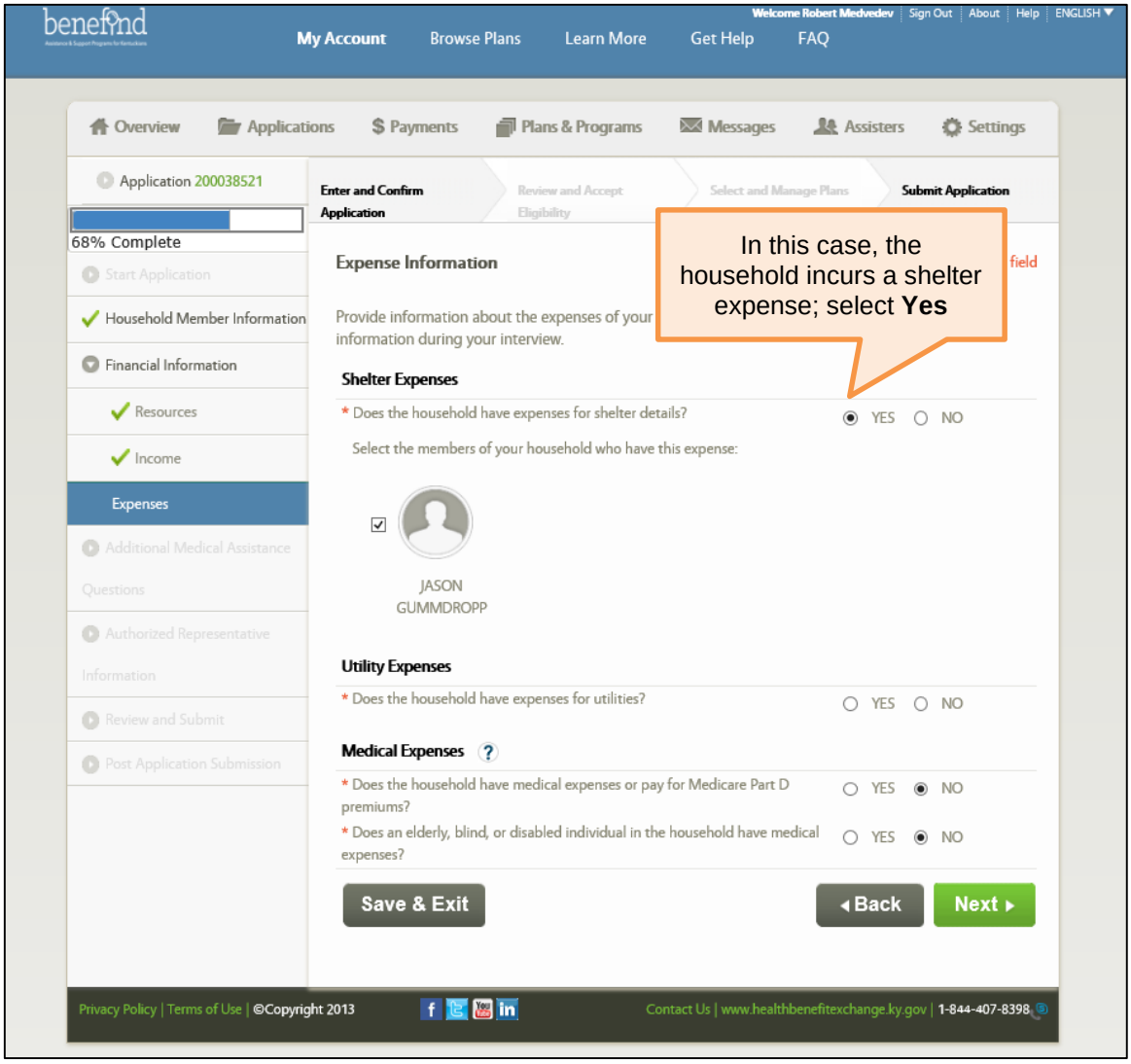
You always have the option to select **I have a Vehicle but do not have the appropriate information at this time.** This option is available for completing all resource information. If you do not feel confident or certain about the information you enter you can utilize this option. However, you should advise the client that they will need to provide these details during their interview with DCBS.

8. Once you enter in all the resources, the Resource Summary screen displays; check to make sure all appropriate resources have been entered and click **Next**

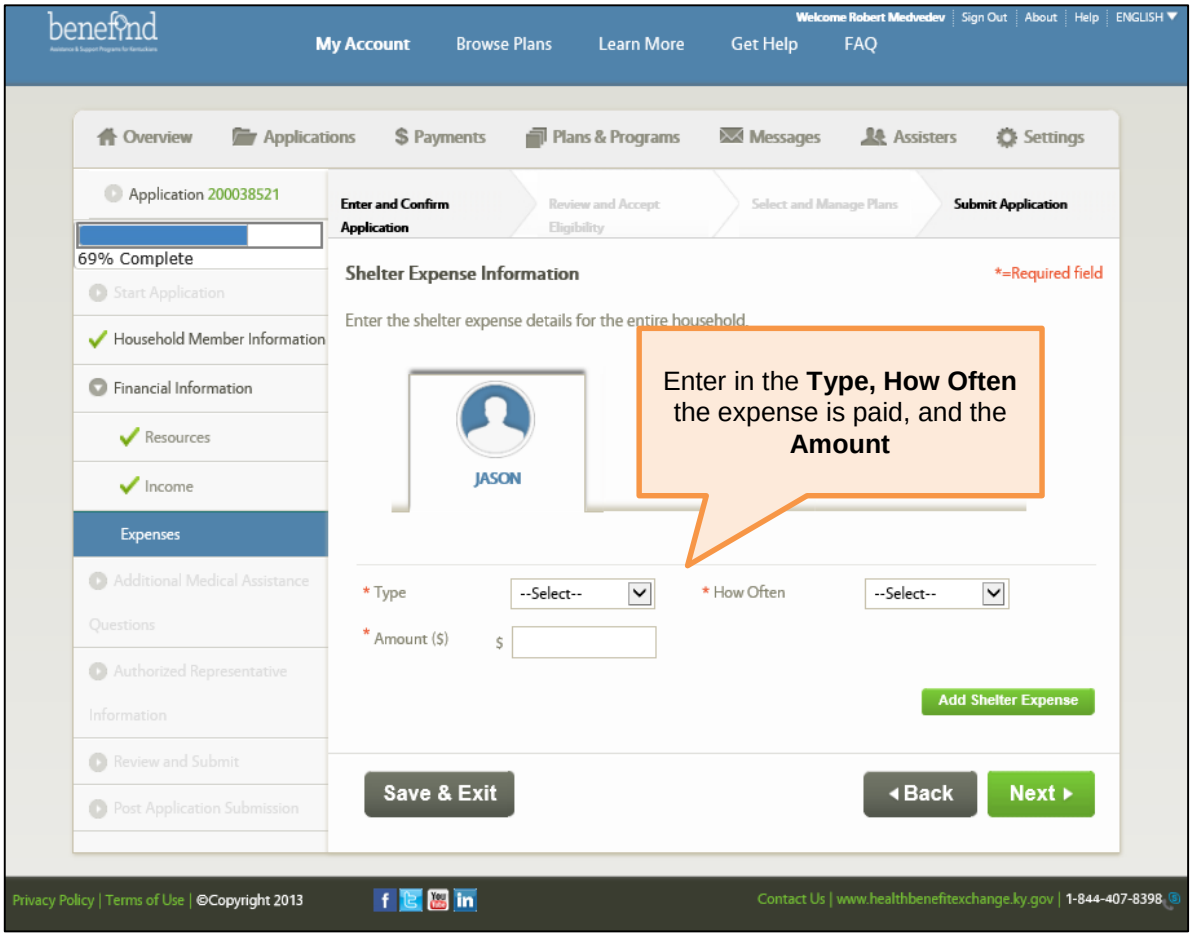


9. Continue to fill out information such as Income and Expenses; select **Yes** to enter Shelter Expenses

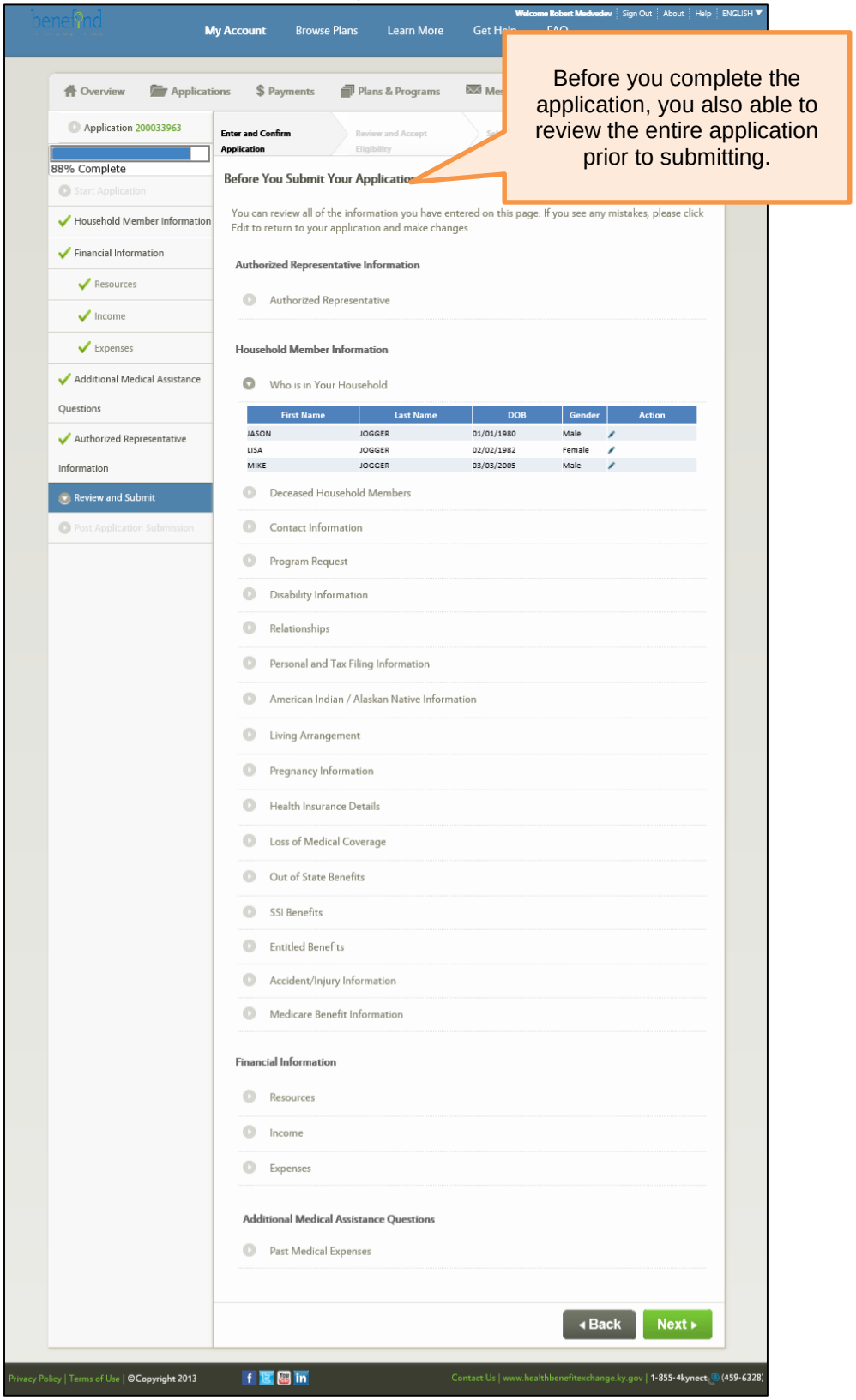
The Expense screen may also seem new and unfamiliar to you. The Expense screen asks about an individual's Shelter, Utility, and Medical expenses. For example, an individual pays rent each month. You would enter this as a Shelter Expense. Click **Yes** to Shelter Expenses and click **Next**



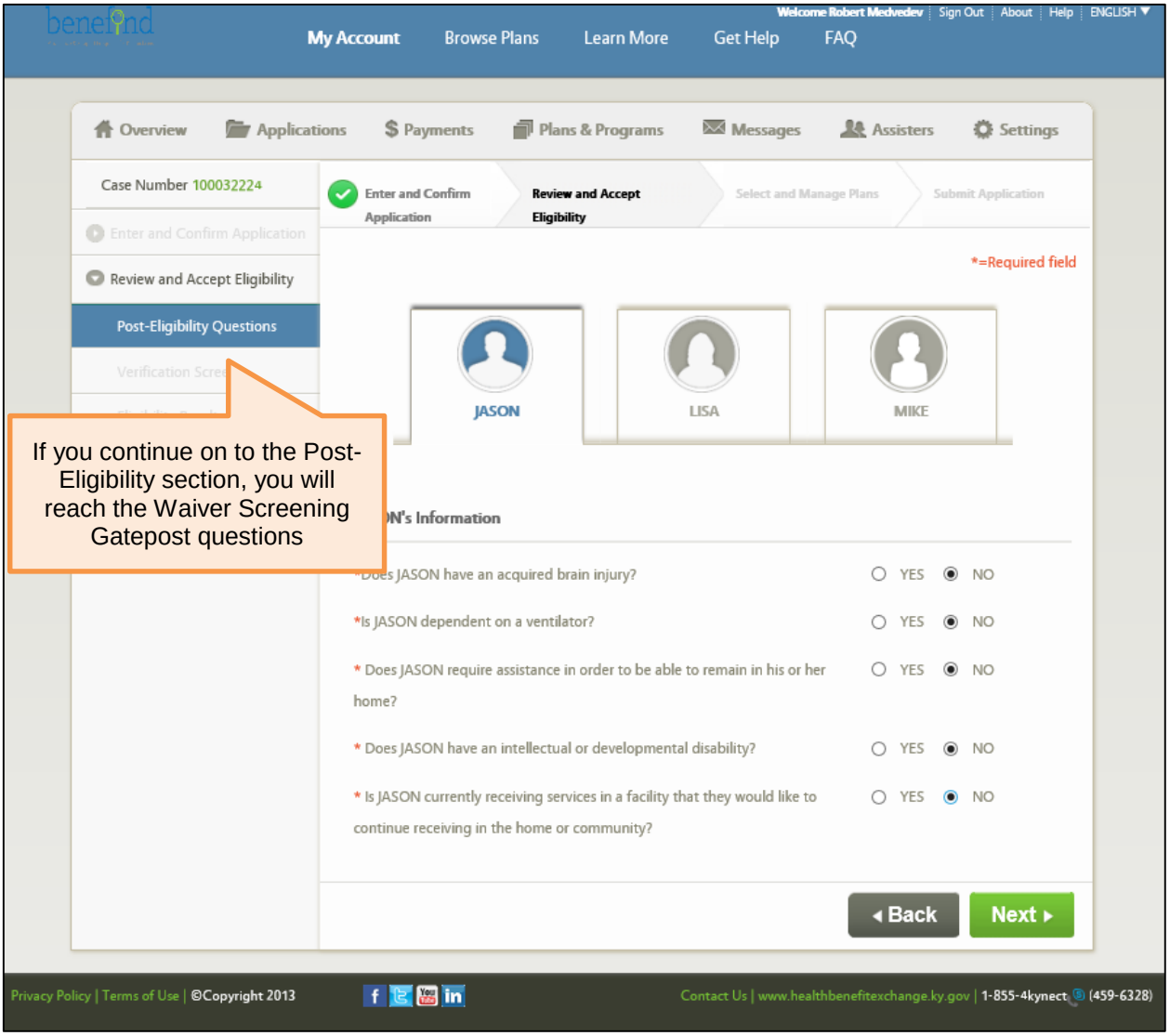
10. The Shelter Expense information page displays; enter in the appropriate amount and frequency of the household's Shelter expenses



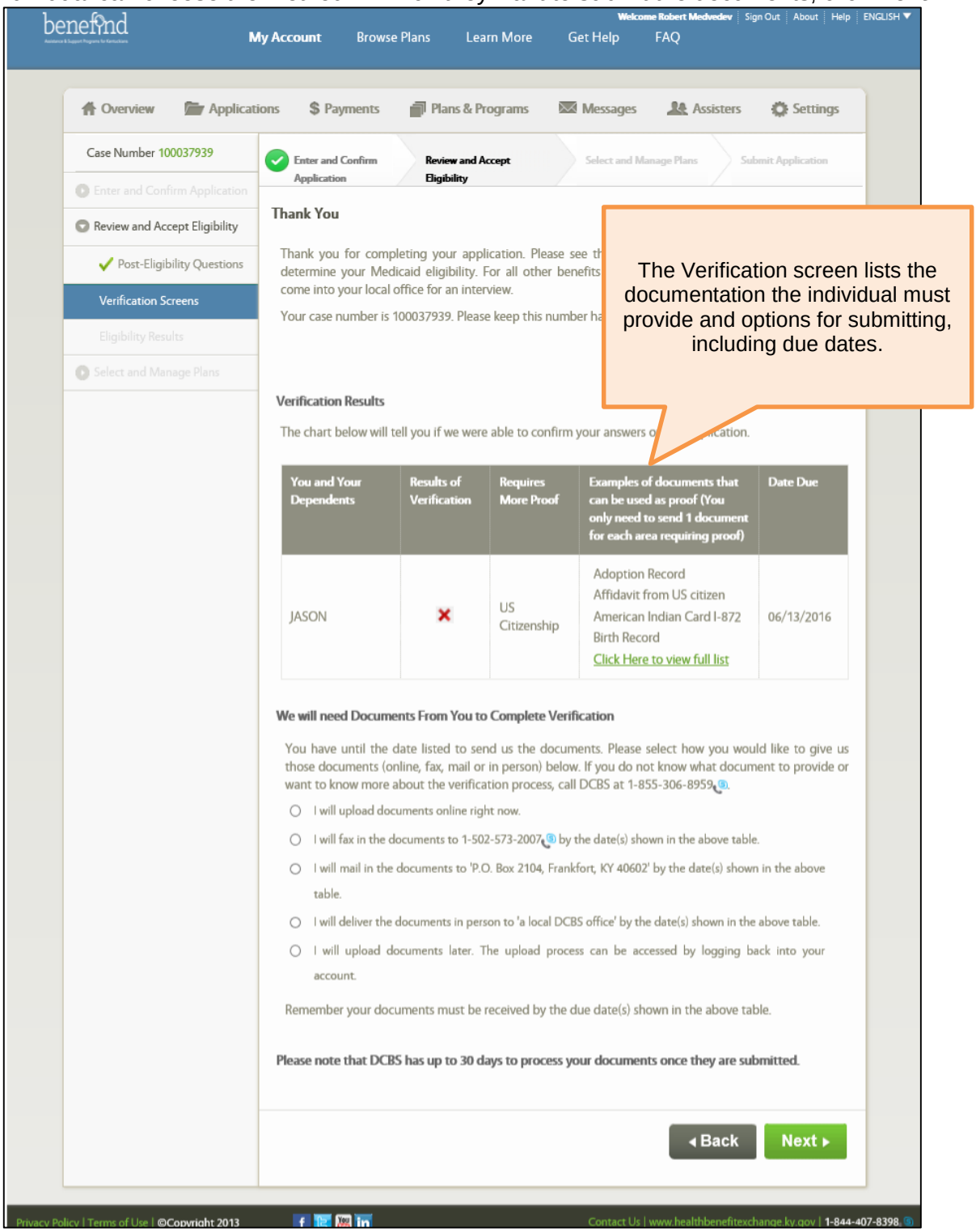
11. As you continue through the application, a Summary page displays where you can review and confirm all the information and edit as needed; click **Next**



12. Fill out and **Submit** the Sign & Submit page
13. Once you submit and continue on, you reach the Post-Eligibility Questions of the application. A new section of the Post-Eligibility section is Waiver Screening. In this scenario, we will select **No** to all questions for all individuals and click **Next**



14. The Verification screen displays, notifying you of the documents needed for verification. Here, the individual can choose the method in which they want to submit the documents; click **Next**



17. The Eligibility Results screen displays; note that family members are eligible for different programs. Lisa will need to complete an interview to determine her eligibility for Non-MAGI Medicaid. Once you review the results, click **Next**

benefind

Welcome Robert Medvedev | Sign Out | About | Help | ENGLISH

My Account | Browse Plans | Learn More | Get Help | FAQ

Overview | Applications | $ Payments | Plans & Programs | Messages | Assisters | Settings

Case Number 100038081

- Enter and Confirm Application
- Review and Accept Eligibility
  - Post-Eligibility Questions
  - Verification Screens
  - Eligibility Results
- Select and Manage Plans

Enter and Confirm Application | Review and Accept Eligibility | Select and Manage Plans | Submit Application

This is the Eligibility Results Screen; note that this is a mixed eligibility household. You can continue and enroll any members whose eligibility is not pending.

Programs You Qualify For

Below you will see a summary of your eligibility results. These eligibility
you have told us. Each and every person's situation is different. Some
required to complete an interview due to the type of assistance they
pages, we will give you more information. You must click **Click Next** to

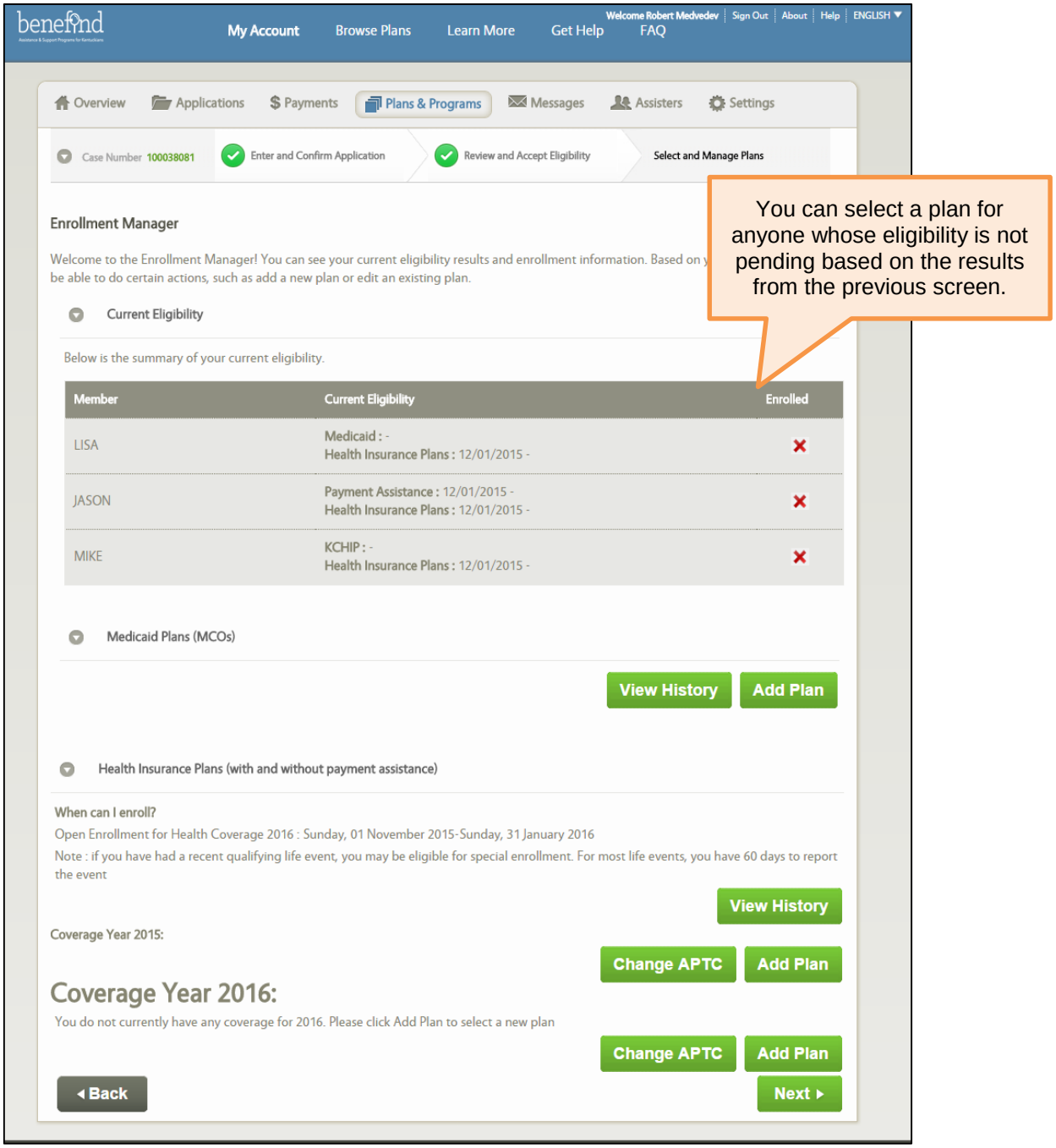
Household Member		Results
LISA	Medicaid	Eligibility Decision Pending Interview
	KCHIP	Not Eligible
	Payment Assistance	Not Eligible
	Health Insurance Plans	Eligible
JASON	Medicaid	Not Eligible
	KCHIP	Not Eligible
	Payment Assistance and Special Discounts Category B	Eligible
	Health Insurance Plans	Eligible
MIKE	Medicaid	Not Eligible
	KCHIP	Pending
	Payment Assistance	Not Eligible
	Health Insurance Plans	Eligible

Special discounts are determined based on income. Please click here to view details.

Individuals who are eligible for Medicaid may not be eligible for claims payment or MCO enrollment. The recipient must call the Department for Community Based Services (DCBS) at 855-306-8959, call kynect at 1-855-4kynect (459-6328), or use the Report A Change in Circumstance link from the Overview to make changes to their case.

◂ Back | Next ▸

15. The Enrollment Manager screen displays. Based on the individuals' eligibility results, you can select a Managed Care Organization (MCO) or a Qualified Health Plan. In this case we will proceed by clicking **Next**;

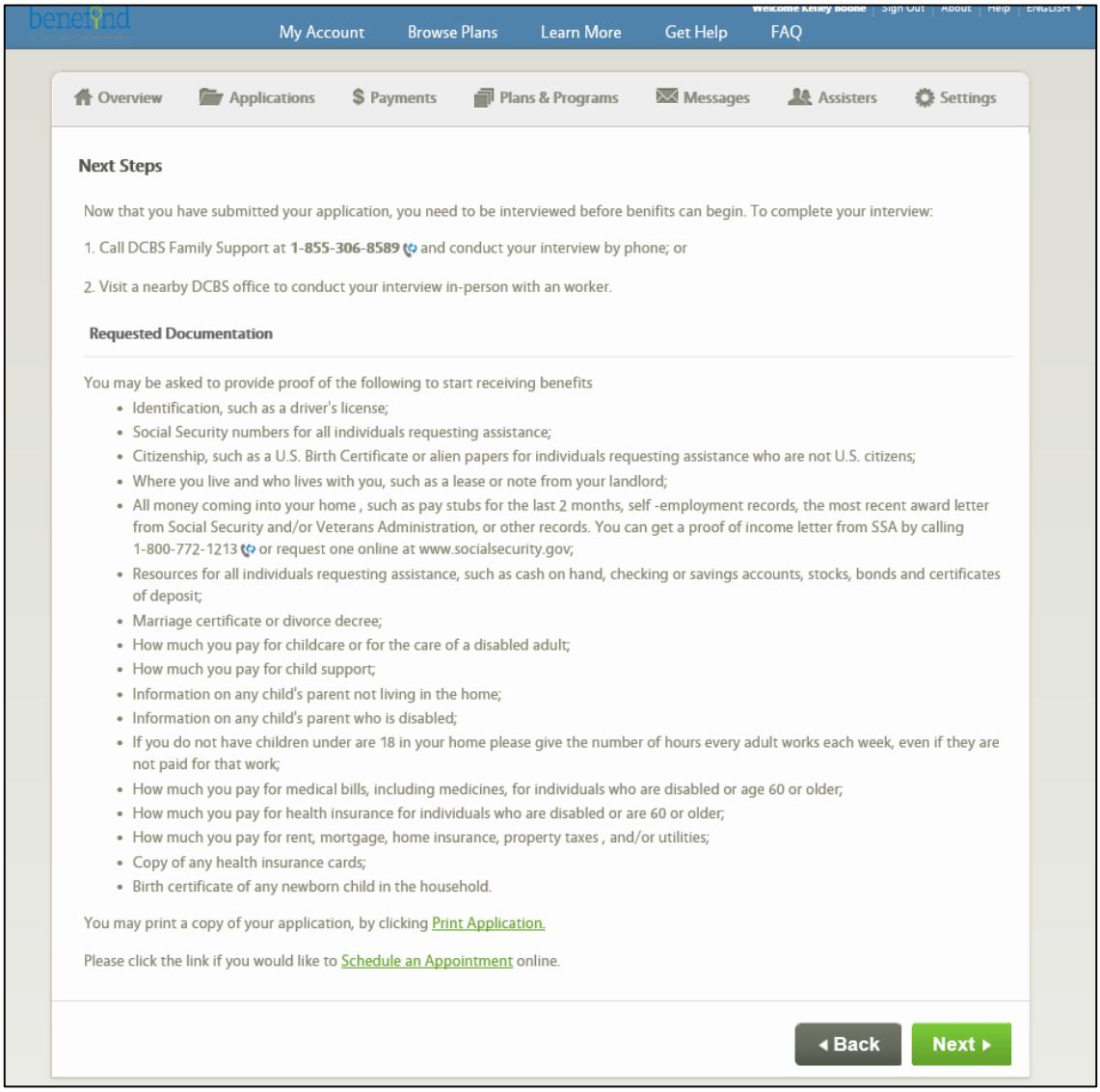


In some instances, an agent/kynector will not be able to complete an enrollment or MCO update until DCBS has finished processing the case. The following lists a few additional scenarios that do not allow an agent/kynector to complete enrollments or updates to MCO requests:

- Case is actively being processed by DCBS: For example, if the family was receiving SNAP and their SNAP recertification was being processed by DCBS, no changes can be made until the recertification is complete.

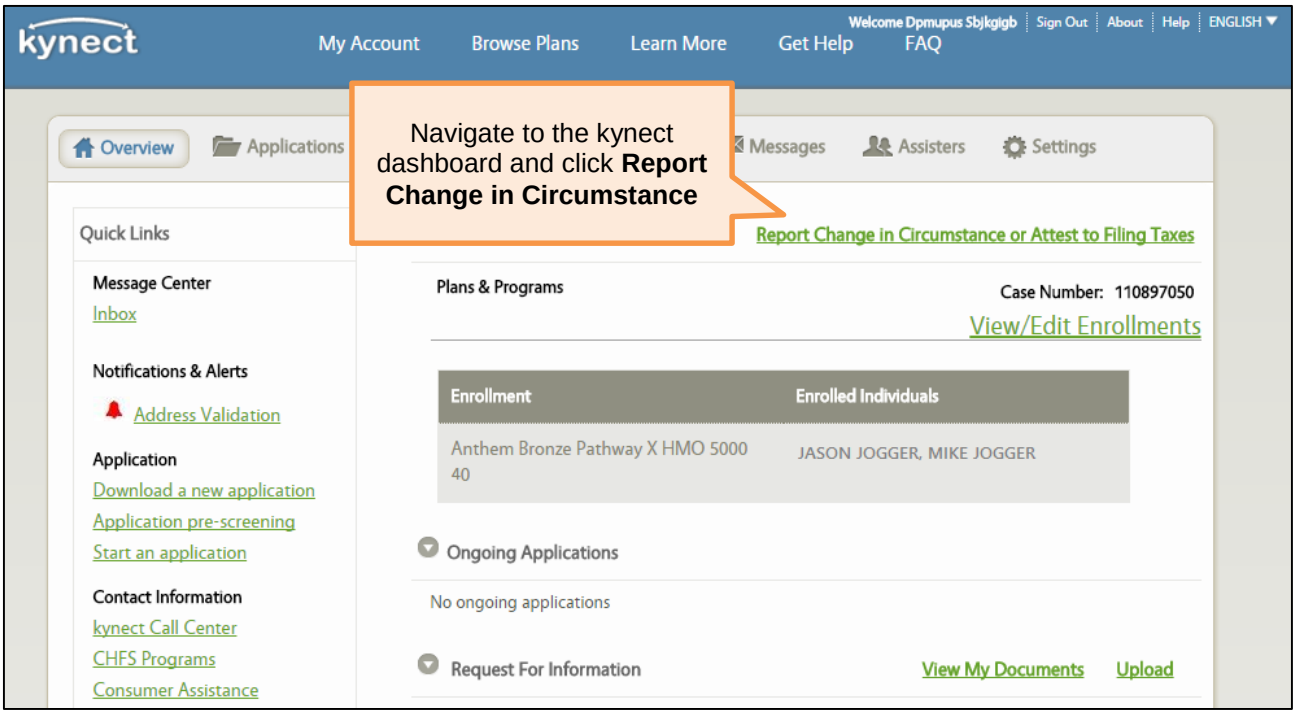
- The final eligibility determination for an individual who qualifies for financial assistance for health care (APTC, MAGI and/or Non-MAGI Medicaid) has not been finalized. Often this is due to missing verifications from citizens.

16. After you complete enrollment, the Next Steps screen displays notifying you that Lisa must be interviewed for benefits to begin; click **Next.** Advise Lisa that her application is pending and that she must complete an interview with DCBS**.**

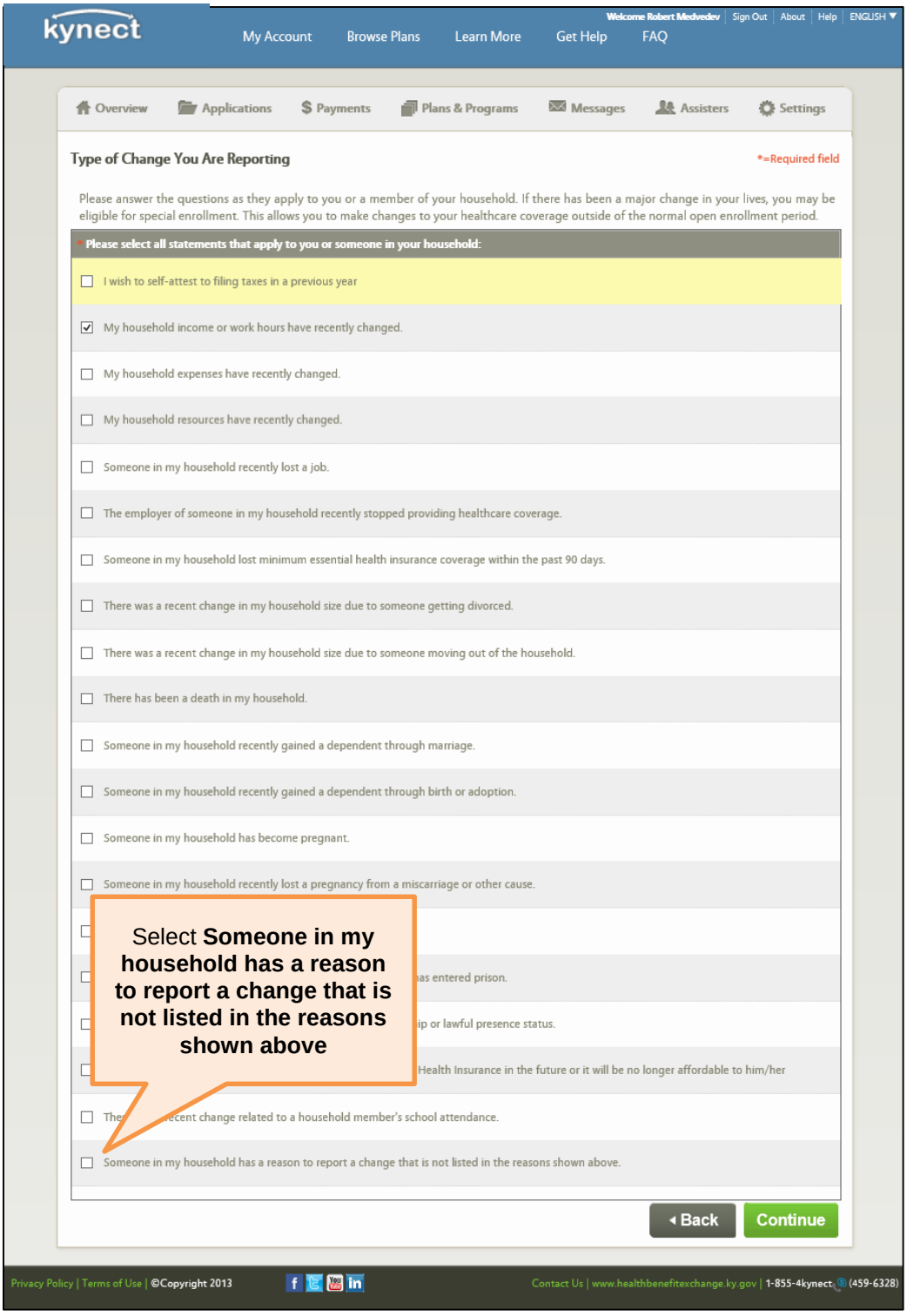


Scenario 2: Reporting a Change in a MAGI/non-MAGI Mixed Household
Jason returns to report a change to his household. His and Lisa's son, Mike, was injured and is now disabled. Remember, in order to be considered disabled, the individual must have a determination of disability from the SSA.

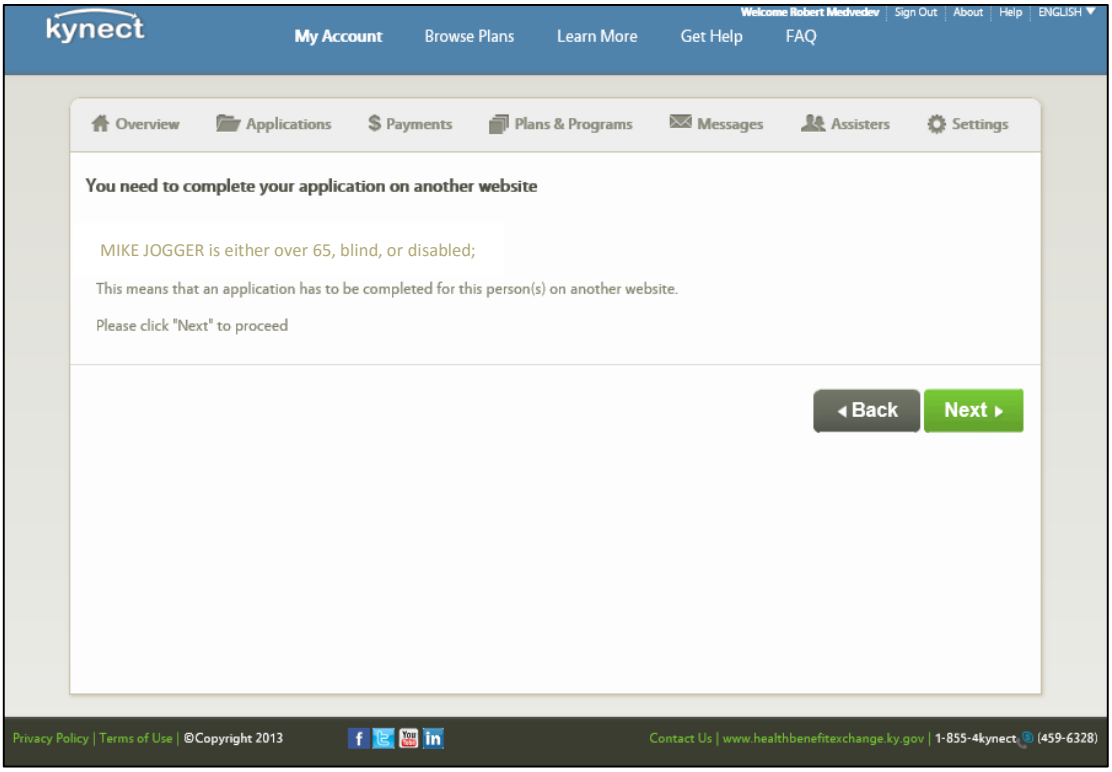
1. Navigate to his case as you normally would and click the **Report a Change in Circumstance** link from the kynect dashboard



2. Select the type of change you are reporting; in this case, select **Someone in my household has a reason to report a change that is not listed in the reasons shown above.**



3. Proceed through the remaining individual information, such as demographic and contact information
4. Indicate that **Mike** is **permanently disabled** on the Disability Information screen
5. Click **Next**.

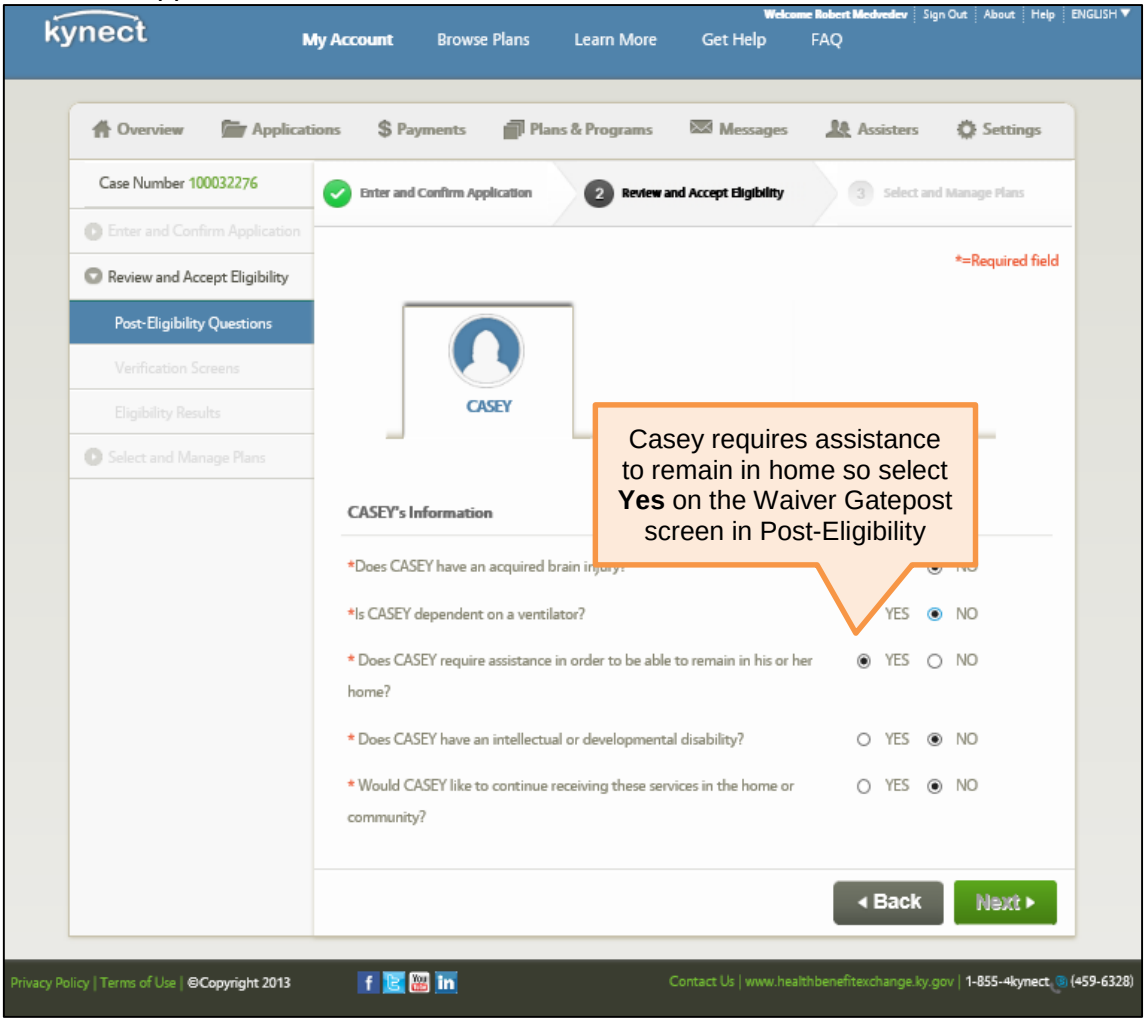


6. Continue through the application to add any additional changes to Income, Expenses, or Resources if applicable.
7. Once all Individual, Non-Financial, and Financial information is completed, eligibility is determined for all members of the household
8. If eligible, the individual can upload any document verification and the MAGI Medicaid individuals can shop for a plan. Any pending Request for Information will be sent to the individual.

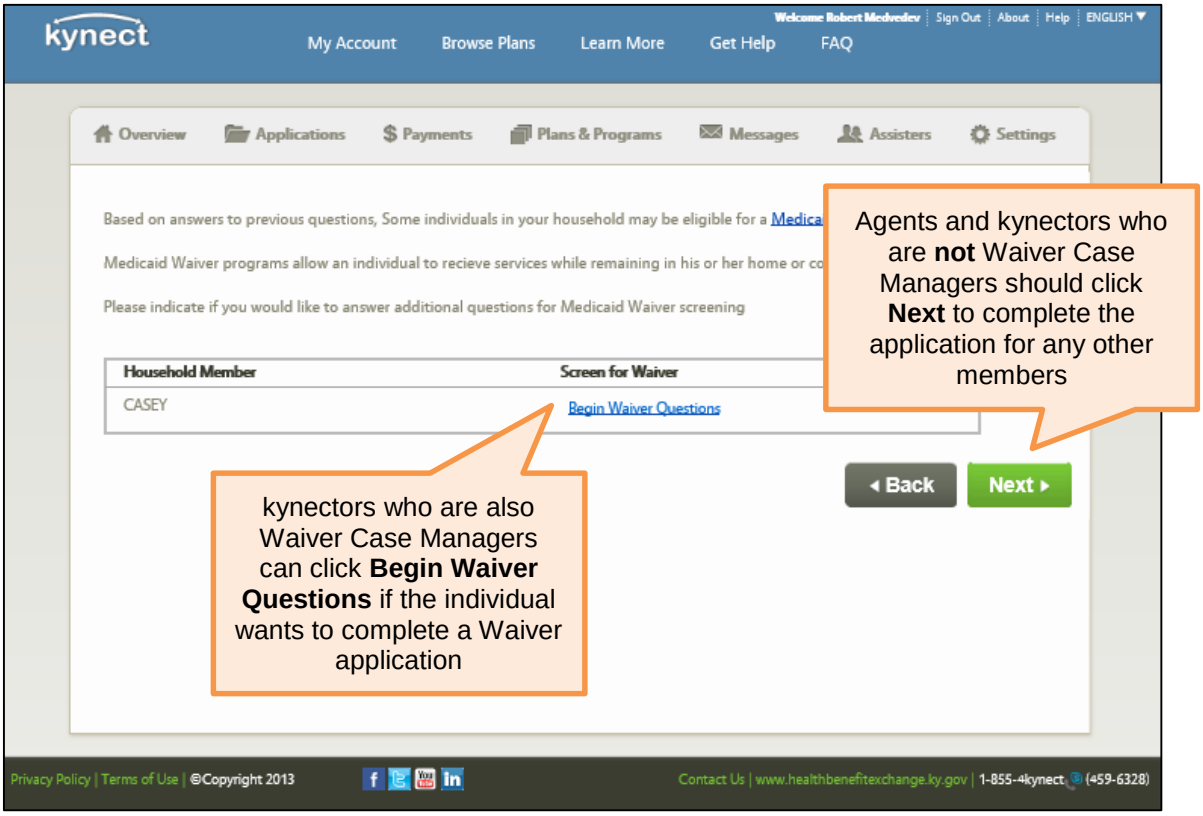
Scenario 3: Waiver Services

Casey wants to apply for Waiver Services. Even though she is not considered disabled, she requires help to remain in her home so she will mark that on the Waiver Gatepost.

1. Initiate the application through kynect as you normally would, and fill out Casey's information
2. Continue on until you reach the Waiver Gatepost in Post-Eligibility
3. Select **Yes**, that Casey requires assistance in order to remain in her home and click **Next** to enable the Waiver application



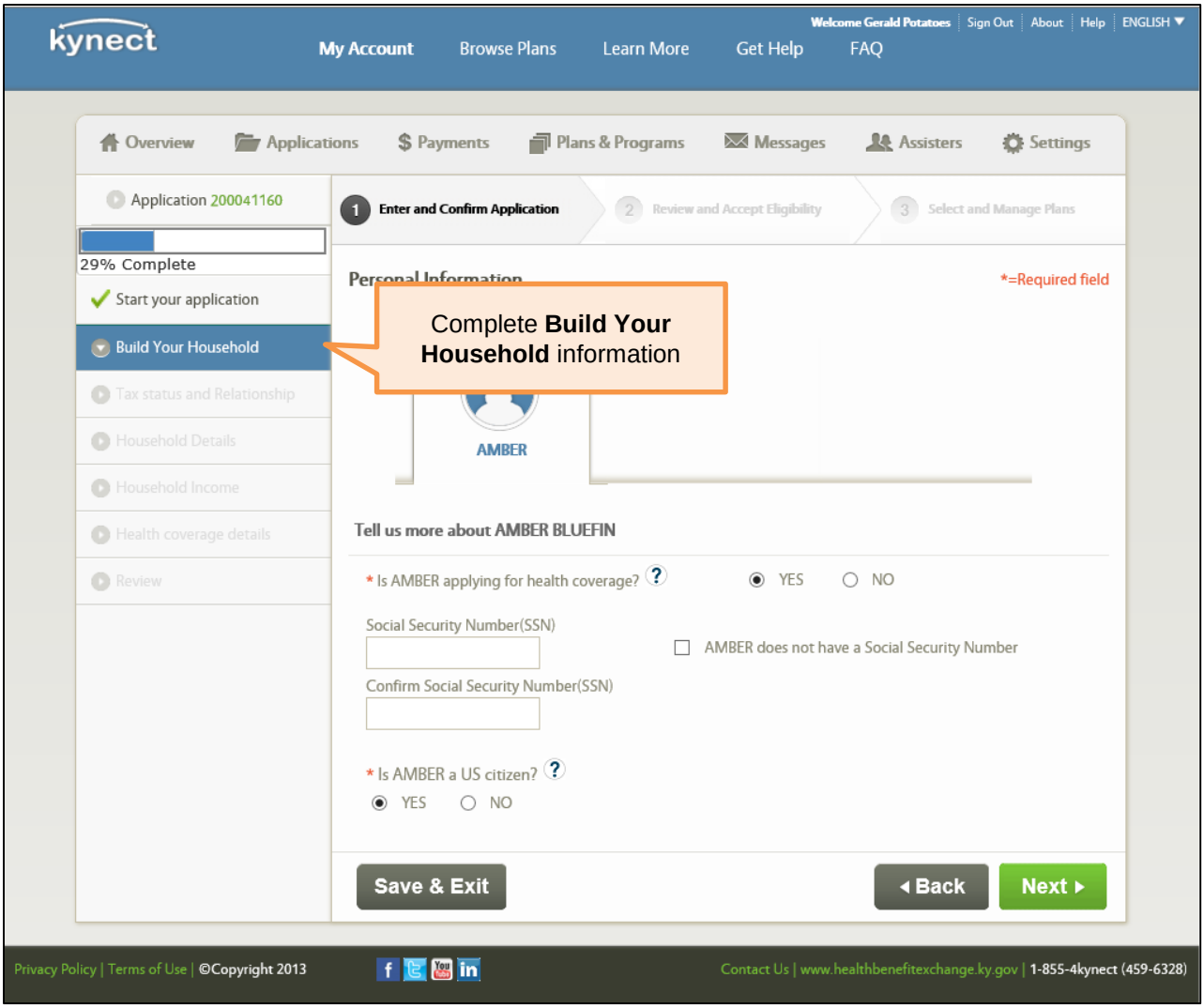
4. Continue through Post-Eligibility until you reach the Medicaid waiver program screen. Do not click **Begin Waiver Questions**. Refer the individual to the Department of Medicaid Services (DMS) website at http://chfs.ky.gov/dms/ if they wish to submit a Waiver Services application. You can complete any MAGI Medicaid or QHP enrollments but do not initiate a Medicaid Waiver application.

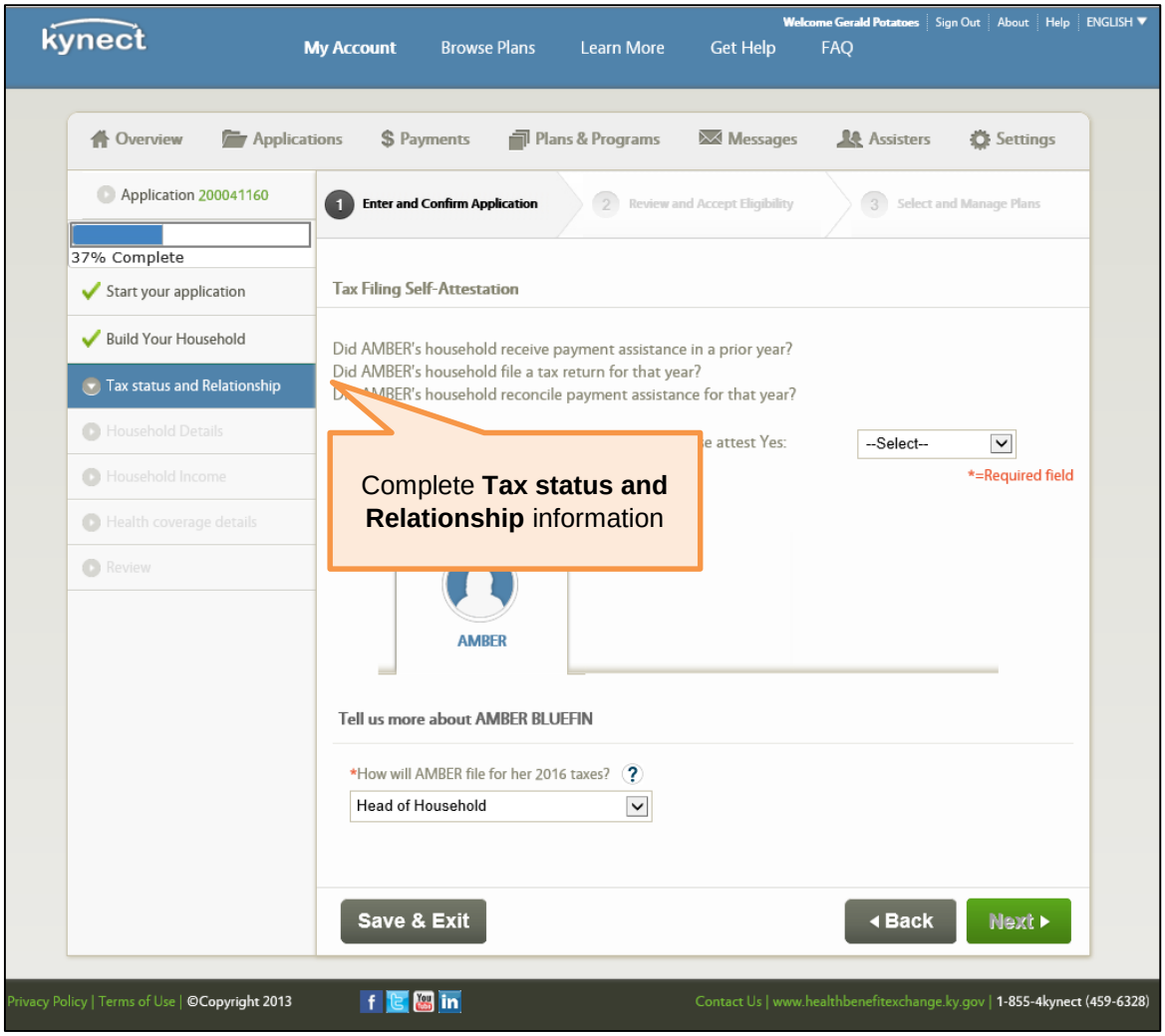


Scenario 4: Multiple Program Applicant

Amber wants to apply for both QHP and SNAP and logs in to kynect. In kynect, she will only have the option to apply for QHP. As an agent or kynector, you can help her complete her QHP application as you normally would through kynect. You can refer the individual to benefind or to DCBS to complete these applications.

1. Log in to kynect and indicate Amber wants to apply for QHP.
2. You can complete the QHP application for Amber. On her kynect Dashboard, there will be a link to apply for other programs. This link will transfer Amber to benefind. You cannot help Amber through this application so it is best to refer her to DCBS if she needs assistance.

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Get Help
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Payments
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Messages
Assisters
Settings
Application 200041160
37% Complete
Start your application
Build Your Household
Tax status and Relationship
Household Details
Household Income
Health coverage details
Review
1 Enter and Confirm Application
2 Review and Accept Eligibility
3 Select and Manage Plans
Tax Filing Self-Attestation
Did AMBER's household receive payment assistance in a prior year?
Did AMBER's household file a tax return for that year?
Did AMBER's household reconcile payment assistance for that year?
--Select--
*=Required field
Complete **Tax status and Relationship** information
AMBER
Tell us more about AMBER BLUEFIN
*How will AMBER file for her 2016 taxes?
Head of Household
Save & Exit
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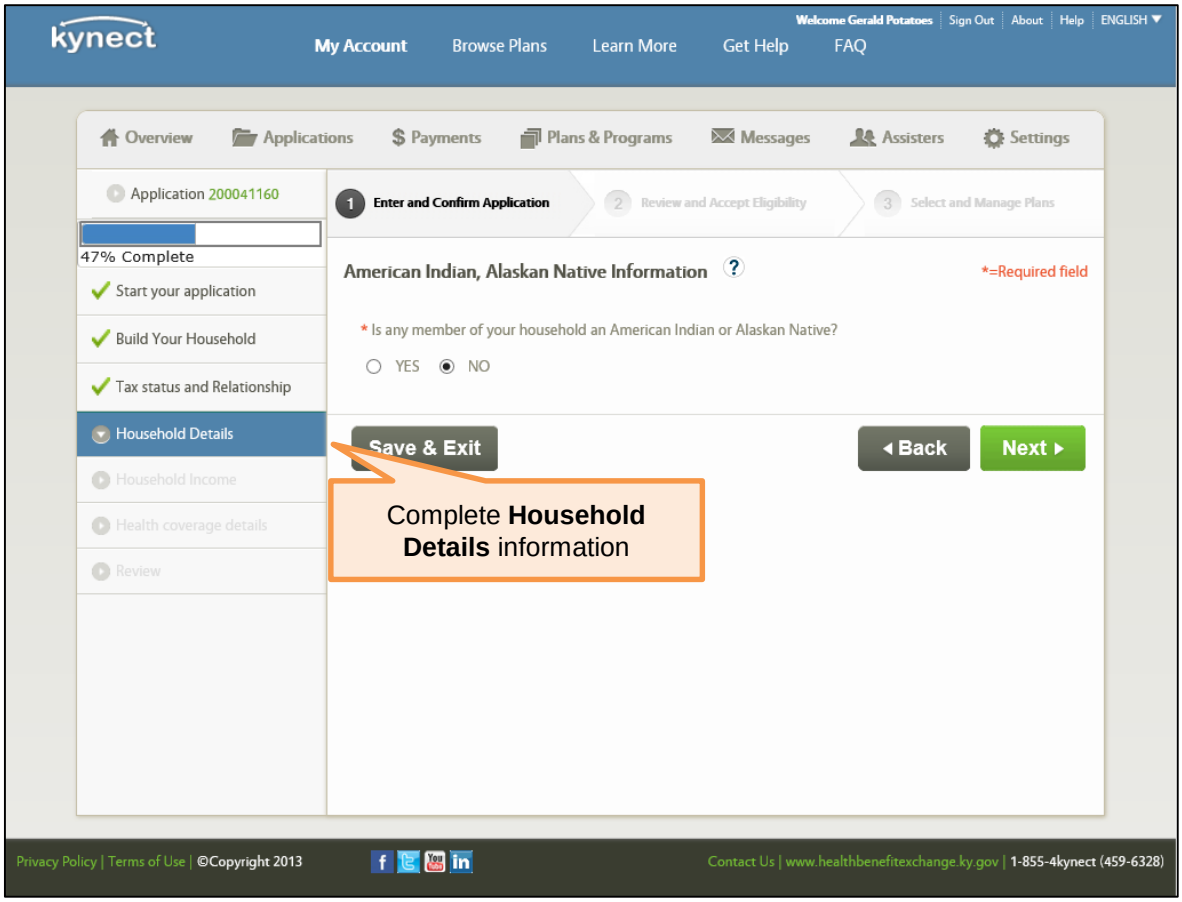
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47% Complete
Start your application
Build Your Household
Tax status and Relationship
Household Details
Household Income
Health coverage details
Review
1 Enter and Confirm Application
2 Review and Accept Eligibility
3 Select and Manage Plans
American Indian, Alaskan Native Information
*=Required field
* Is any member of your household an American Indian or Alaskan Native?
YES
NO
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Complete **Household Details** information
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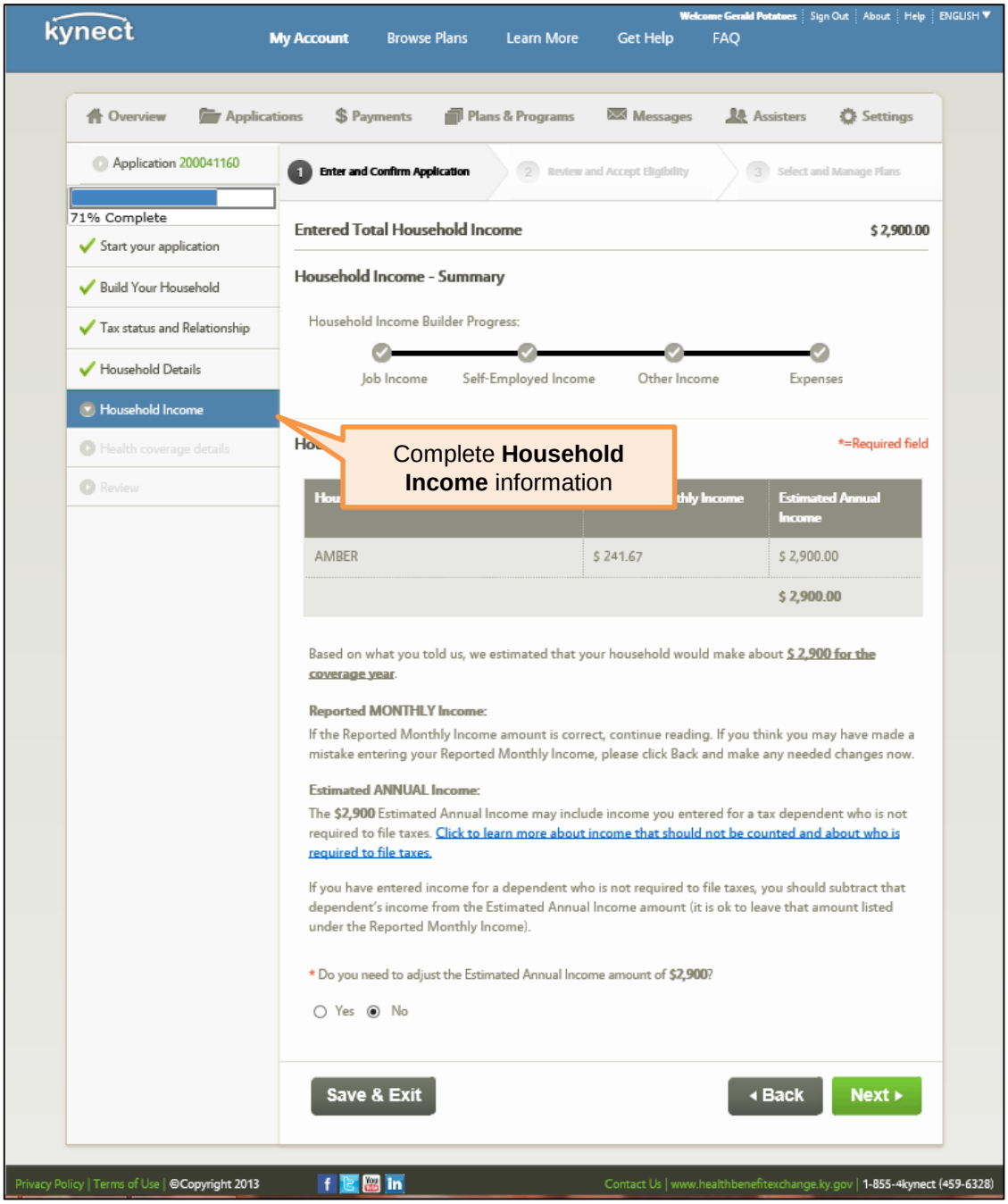
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Application 200041160
71% Complete
Start your application
Build Your Household
Tax status and Relationship
Household Details
Household Income
Health coverage details
Review
1 Enter and Confirm Application
2 Review and Accept Eligibility
3 Select and Manage Plans
Entered Total Household Income
$ 2,900.00
Household Income - Summary
Household Income Builder Progress:
Job Income
Self-Employed Income
Other Income
Expenses
Complete Household Income information
*=Required field
Estimated Annual Income
AMBER
$ 241.67
$ 2,900.00
$ 2,900.00
Based on what you told us, we estimated that your household would make about $ 2,900 for the coverage year.
Reported MONTHLY Income:
If the Reported Monthly Income amount is correct, continue reading. If you think you may have made a mistake entering your Reported Monthly Income, please click Back and make any needed changes now.
Estimated ANNUAL Income:
The $2,900 Estimated Annual Income may include income you entered for a tax dependent who is not required to file taxes. Click to learn more about income that should not be counted and about who is required to file taxes.
If you have entered income for a dependent who is not required to file taxes, you should subtract that dependent's income from the Estimated Annual Income amount (it is ok to leave that amount listed under the Reported Monthly Income).
* Do you need to adjust the Estimated Annual Income amount of $2,900?
Yes
No
Save & Exit
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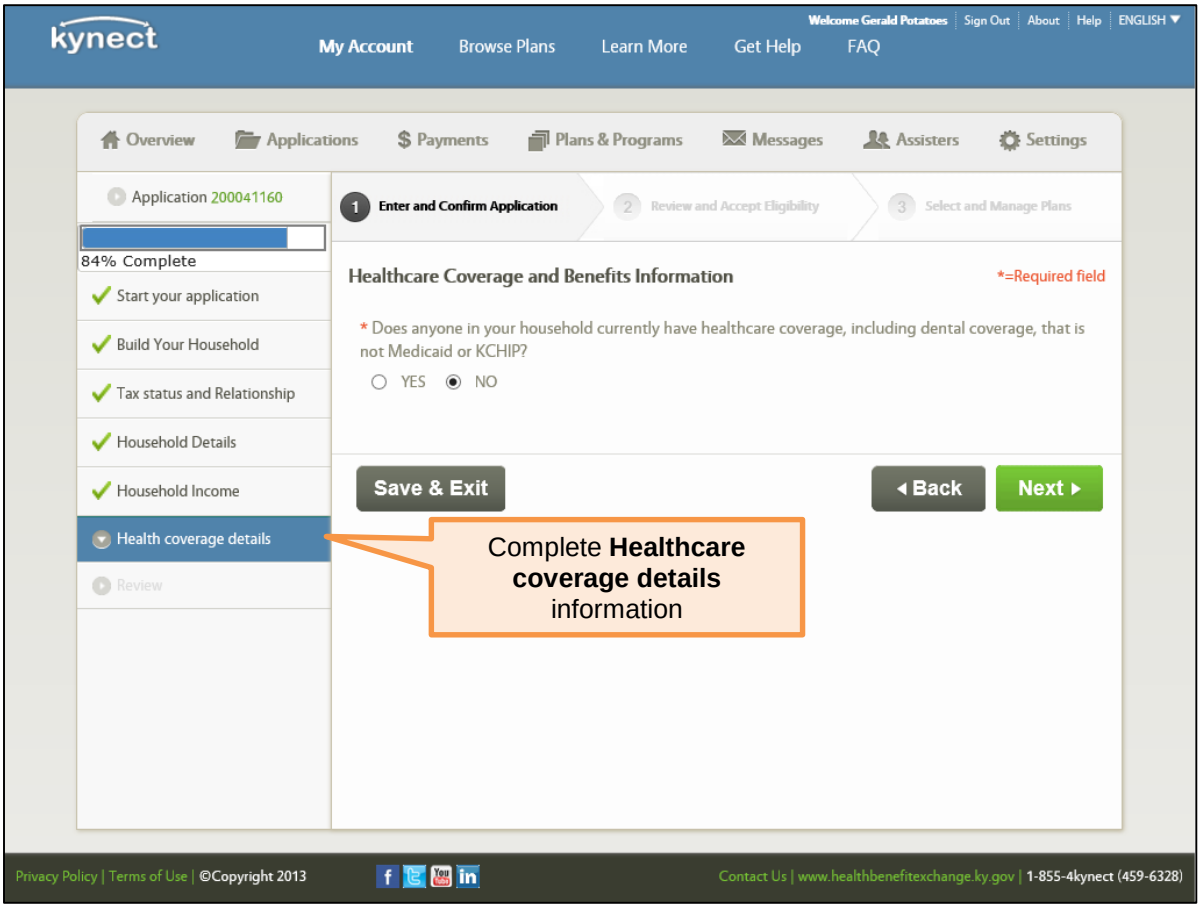
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Application 200041160
84% Complete
Start your application
Build Your Household
Tax status and Relationship
Household Details
Household Income
Health coverage details
Review
1 Enter and Confirm Application
2 Review and Accept Eligibility
3 Select and Manage Plans
Healthcare Coverage and Benefits Information
*=Required field
* Does anyone in your household currently have healthcare coverage, including dental coverage, that is not Medicaid or KCHIP?
YES
NO
Save & Exit
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Next
Complete **Healthcare coverage details** information
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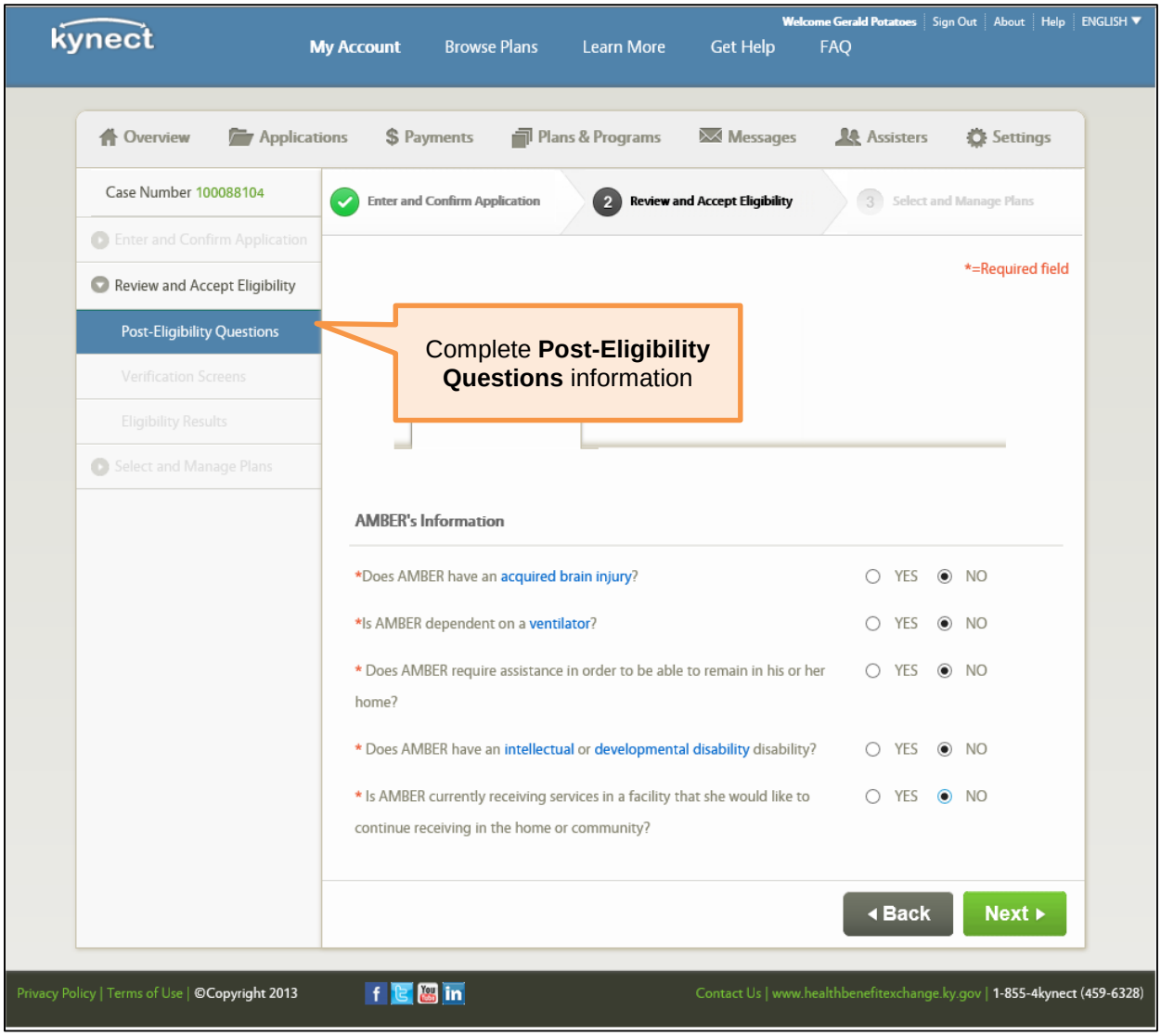
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Case Number 100088104
Enter and Confirm Application
Review and Accept Eligibility
Post-Eligibility Questions
Verification Screens
Eligibility Results
Select and Manage Plans
Enter and Confirm Application
2 Review and Accept Eligibility
3 Select and Manage Plans
*=Required field
Complete **Post-Eligibility Questions** information
AMBER's Information
*Does AMBER have an acquired brain injury? YES NO
*Is AMBER dependent on a ventilator? YES NO
* Does AMBER require assistance in order to be able to remain in his or her home? YES NO
* Does AMBER have an intellectual or developmental disability disability? YES NO
* Is AMBER currently receiving services in a facility that she would like to continue receiving in the home or community? YES NO
Back
Next
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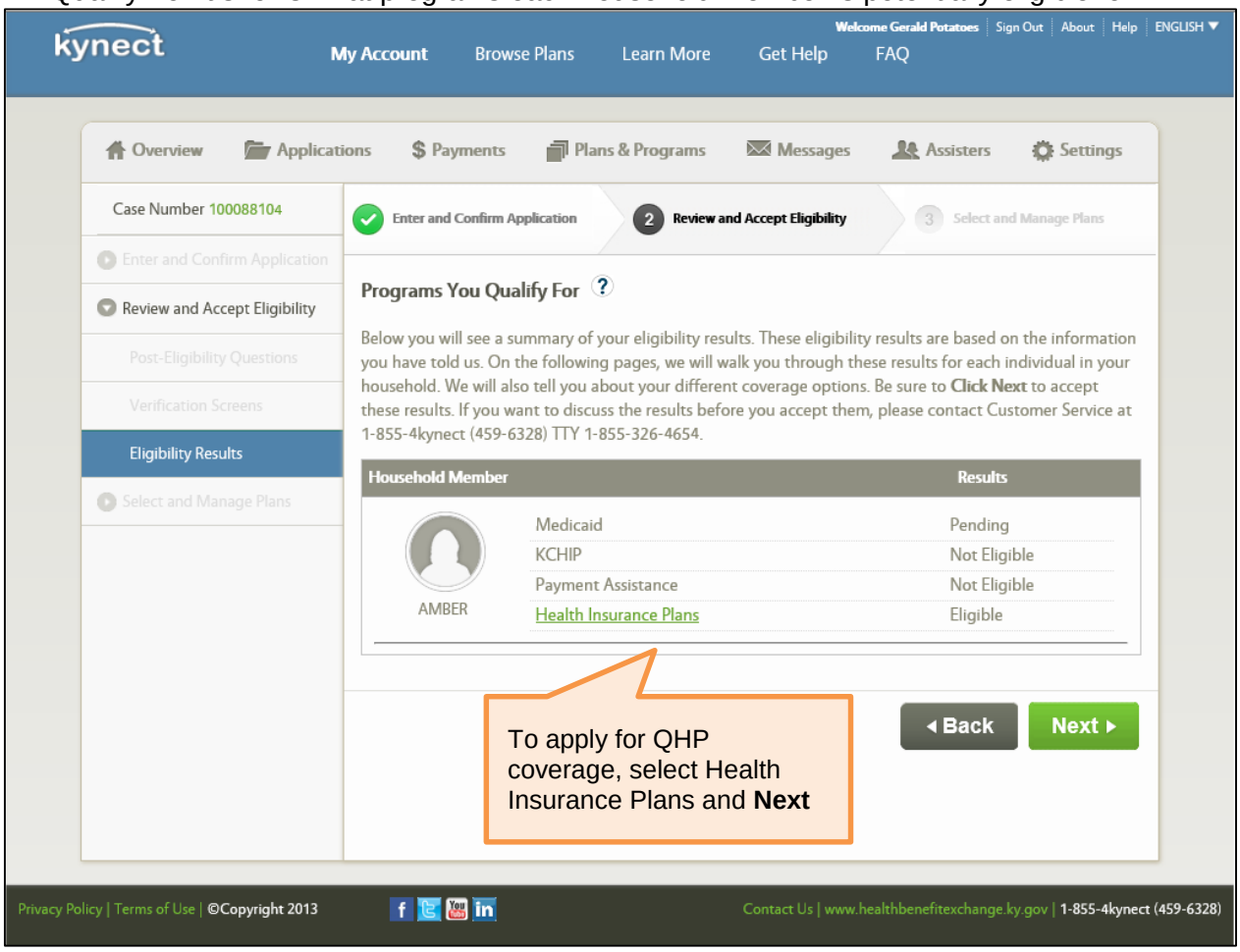
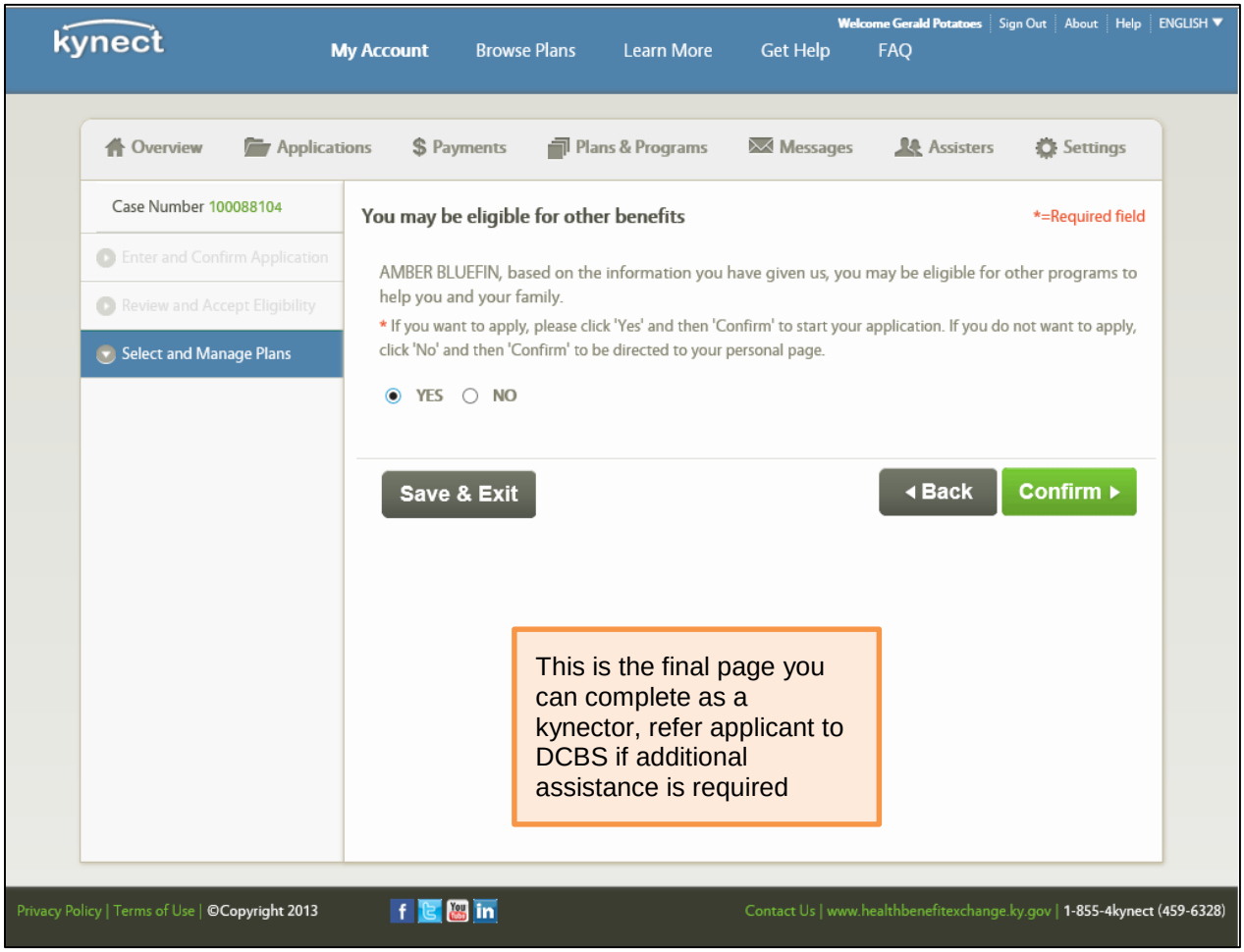
3. To apply for QHP for Amber, select **Health Insurance Plans** and click **Next**. Under Programs You Qualify For it shows what programs each household member is potentially eligible for.



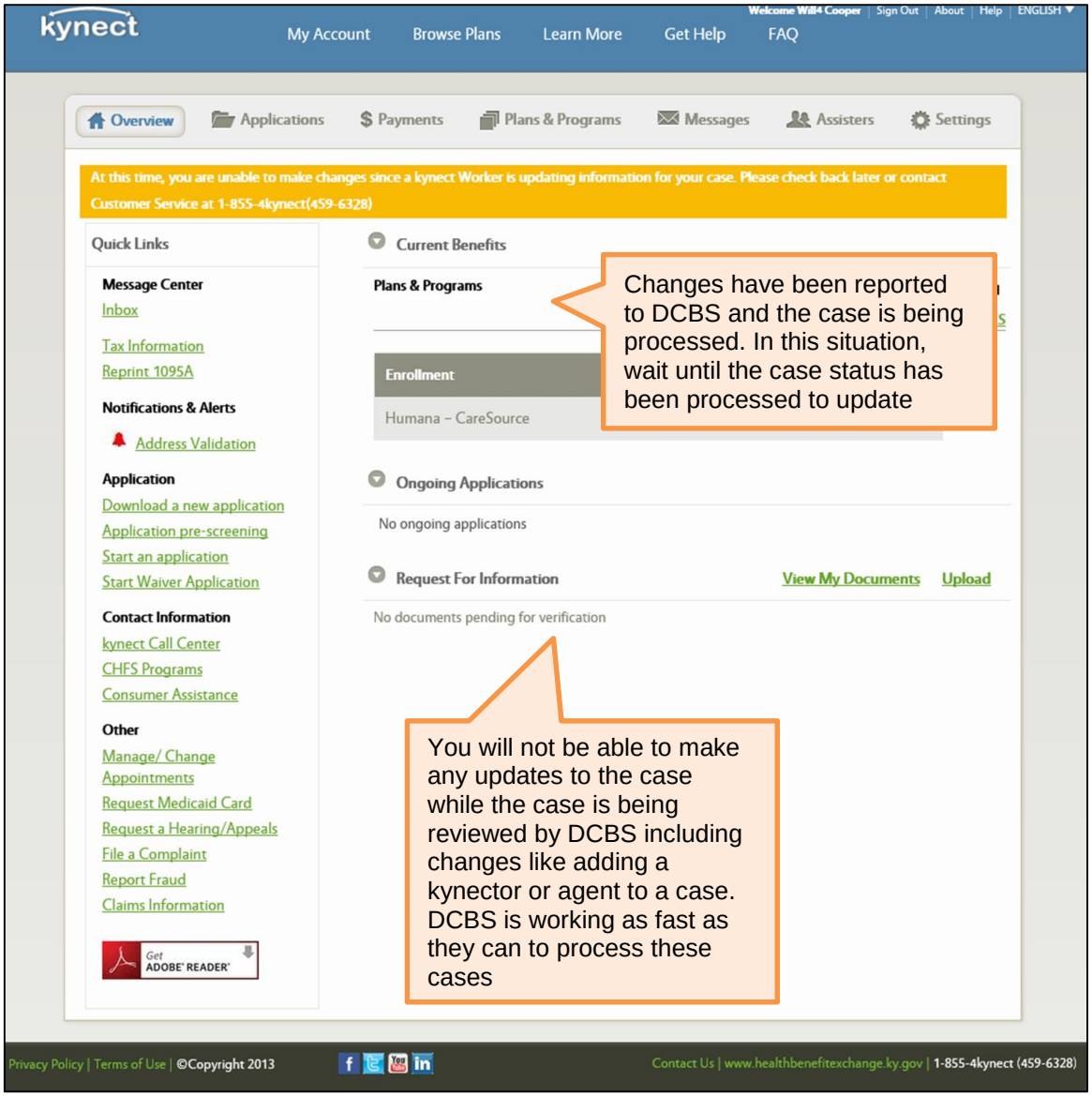
4. This is the final screen you are able to complete as a kynector. If the applicant needs additional assistance, refer the applicant to DCBS. Select **Yes** or **No** and click **Confirm** to confirm the applicant's decision to apply or not apply for other programs and to be directed back to the applicant's personal page.



Scenario 5: Updating case information when DCBS is processing a case for an individual/family receiving or recently received SNAP, KTAP, Non-MAGI Medicaid

There are two reasons why agents and kynectors will not be able to update a household's information based on individuals DCBS actively processing the case. This is caused by two reasons

1. Log in to kynect and click **overview.**
2. Changes have been reported to DCBS and the case is being processed. In this situation, wait until the case status has been processed to update.
3. Inconsistencies between existing case data and a converted case from the legacy system (KAMES) which holds previous database information, the information is required to be examined by DCBS. For example, on the family's legacy SNAP case they had different reported income than on their MAGI Medicaid case. This scenario will be resolved once DCBS has reviewed and processed the cases.
4. You will not be able to make any updates to the case while the case is being reviewed by DCBS including changes like adding a kynector or agent to a case. DCBS is working as fast as they can to process these cases.
5. You will see the message below if this is the situation:


kynect
Welcome Will4 Cooper | Sign Out | About | Help | ENGLISH
My Account
Browse Plans
Learn More
Get Help
FAQ
Overview
Applications
Payments
Plans & Programs
Messages
Assisters
Settings
At this time, you are unable to make changes since a kynect Worker is updating information for your case. Please check back later or contact Customer Service at 1-855-4kynect(459-6328)
Quick Links
Message Center
Inbox
Tax Information
Reprint 1095A
Notifications & Alerts
Address Validation
Application
Download a new application
Application pre-screening
Start an application
Start Waiver Application
Contact Information
kynect Call Center
CHFS Programs
Consumer Assistance
Other
Manage/ Change Appointments
Request Medicaid Card
Request a Hearing/Appeals
File a Complaint
Report Fraud
Claims Information
Get ADOBE READER
Current Benefits
Plans & Programs
Enrollment
Humana – CareSource
Ongoing Applications
No ongoing applications
Request For Information
View My Documents
Upload
No documents pending for verification
Changes have been reported to DCBS and the case is being processed. In this situation, wait until the case status has been processed to update
You will not be able to make any updates to the case while the case is being reviewed by DCBS including changes like adding a kynector or agent to a case. DCBS is working as fast as they can to process these cases
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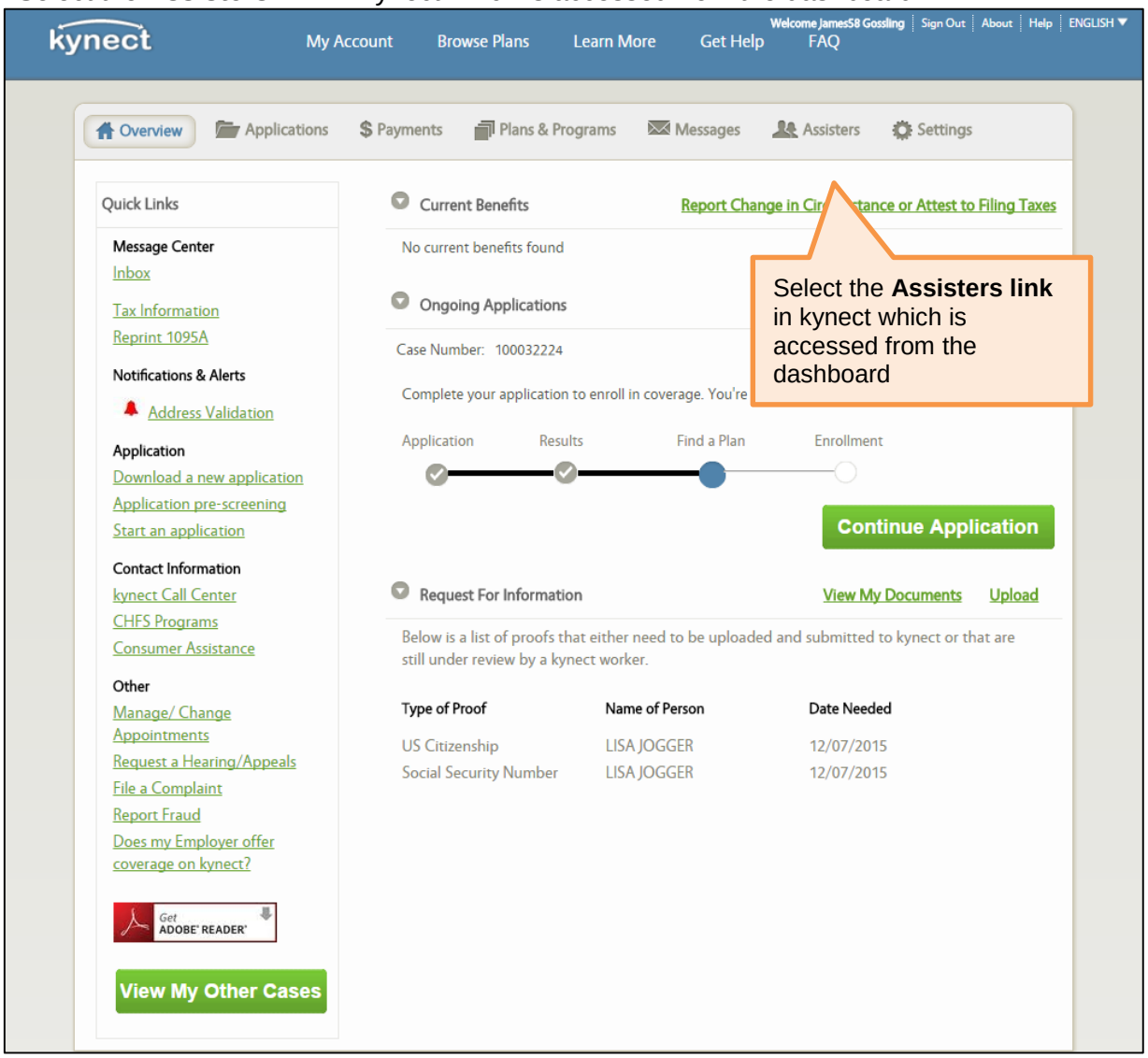
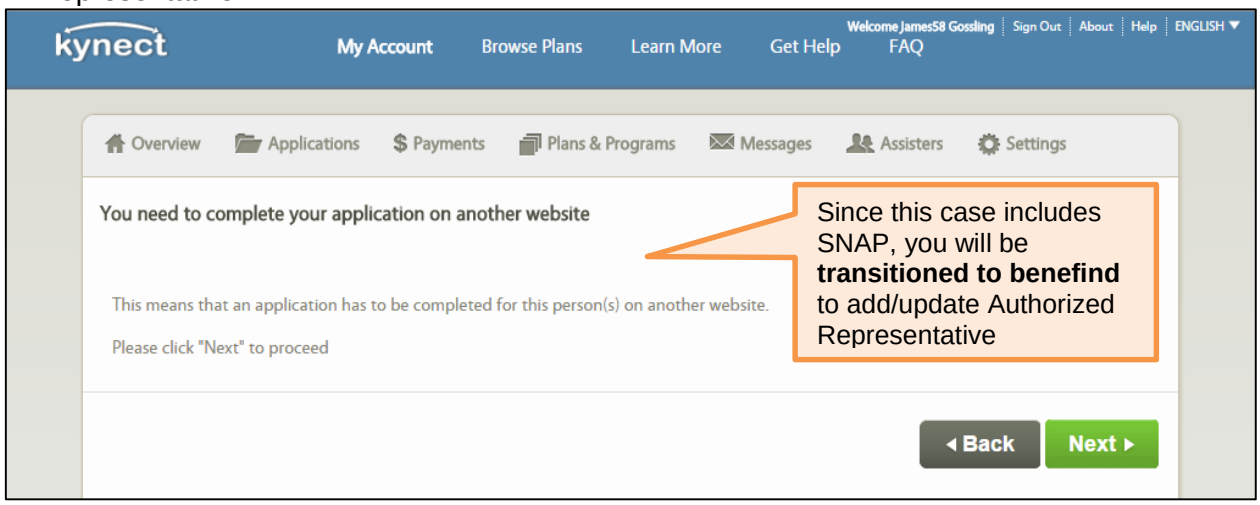
Scenario 6: Add/update an Authorized Representative for a case that includes SNAP, KTAP or Non-MAGI Medicaid individual

Lisa wants to add/update information about an Authorized Representative for her existing case. She visits an agent or kynector for help. She is on a case that includes SNAP, KTAP or a Non-MAGI Medicaid applicant.

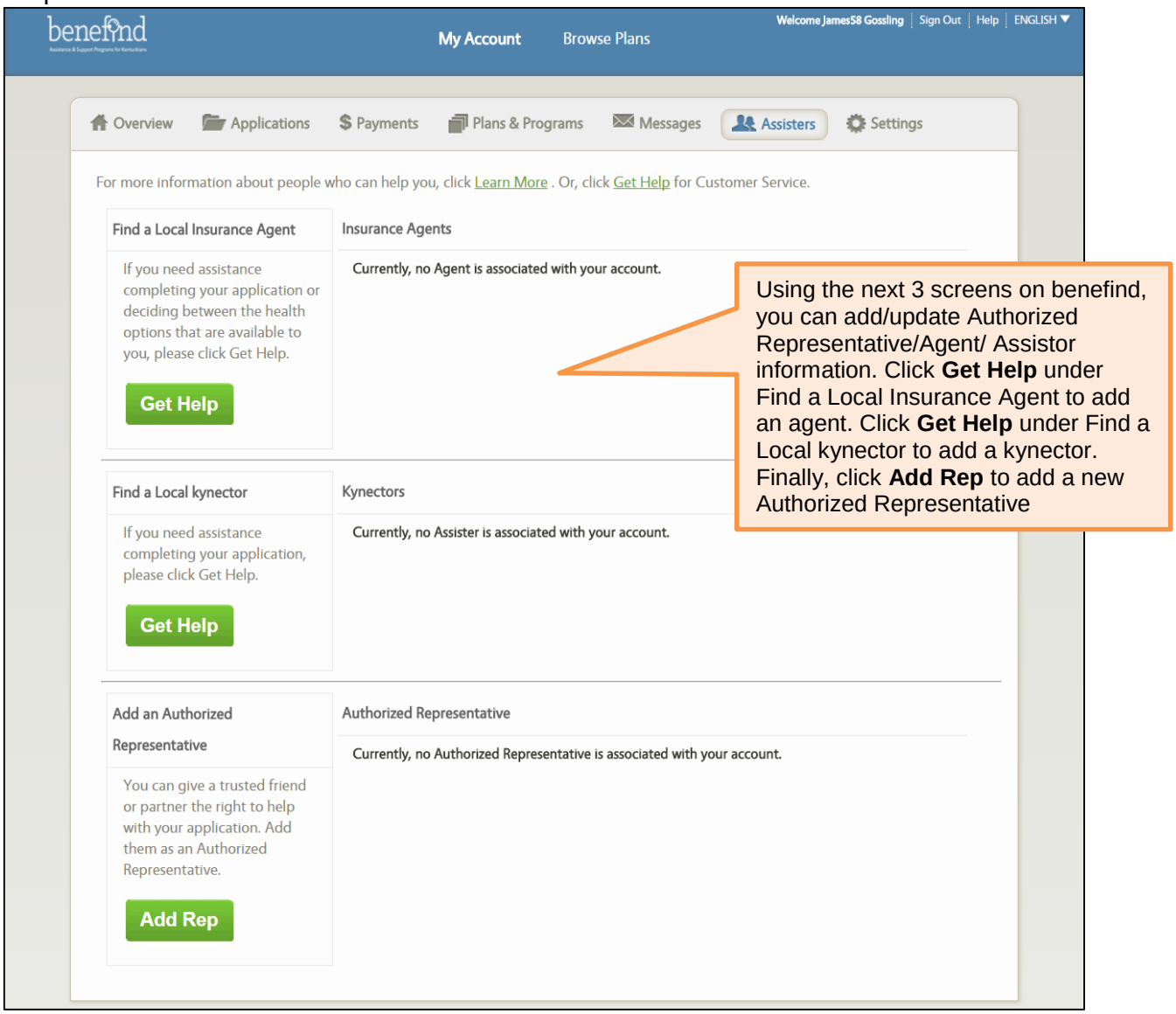
1. Select the **Assisters link** in kynect which is accessed from the dashboard.



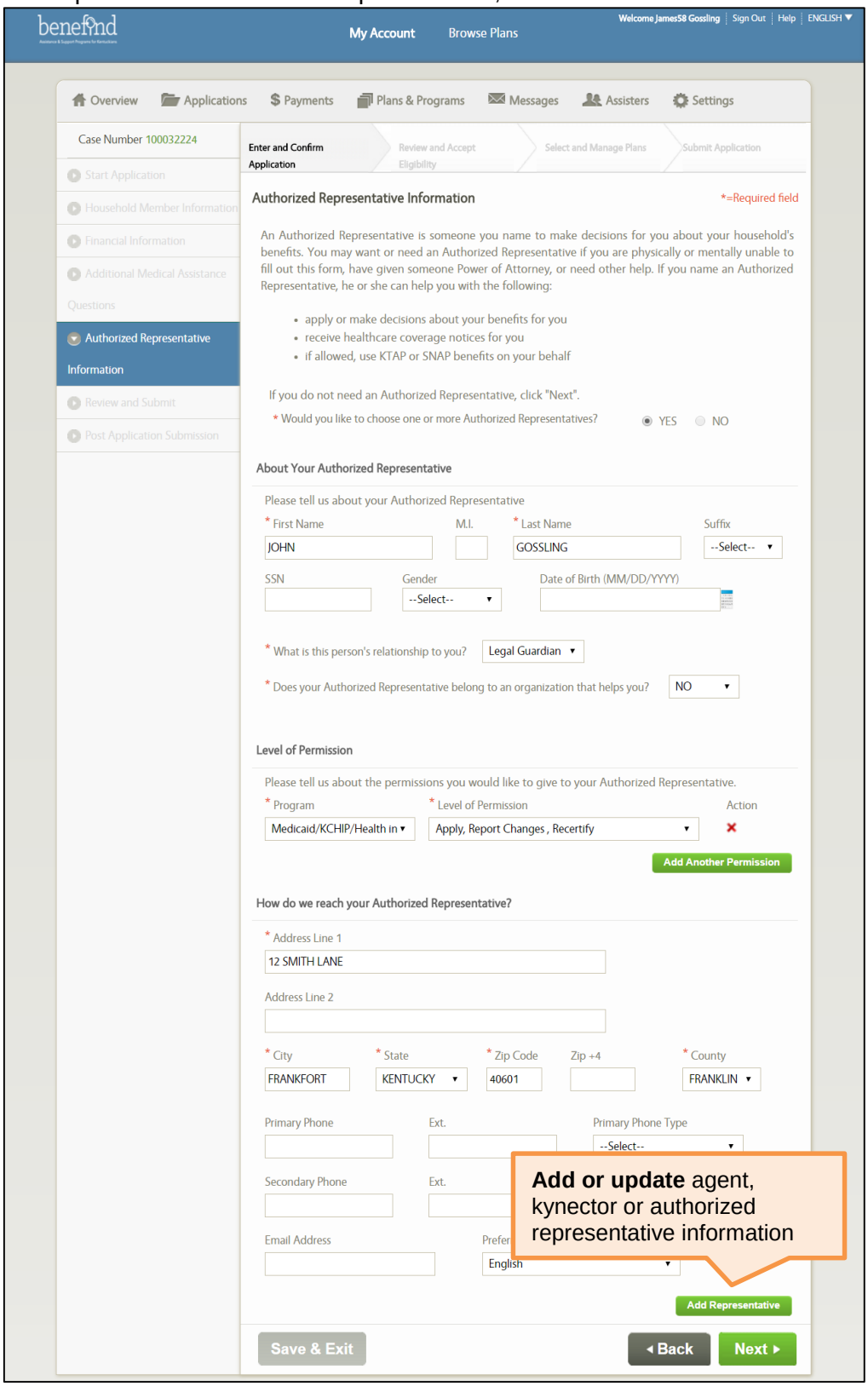
2. Since this case includes SNAP, you will be transitioned to benefind to add/update Authorized Representative.



3. Using the next 3 screens on benefind, you can add/update Authorized Representative/Agent/ Assistor information. Click **Get Help** under Find a Local Insurance Agent to add an agent. Click **Get Help** under Find a Local kynector to add a kynector. Finally, click **Add Rep** to add a new Authorized Representative.

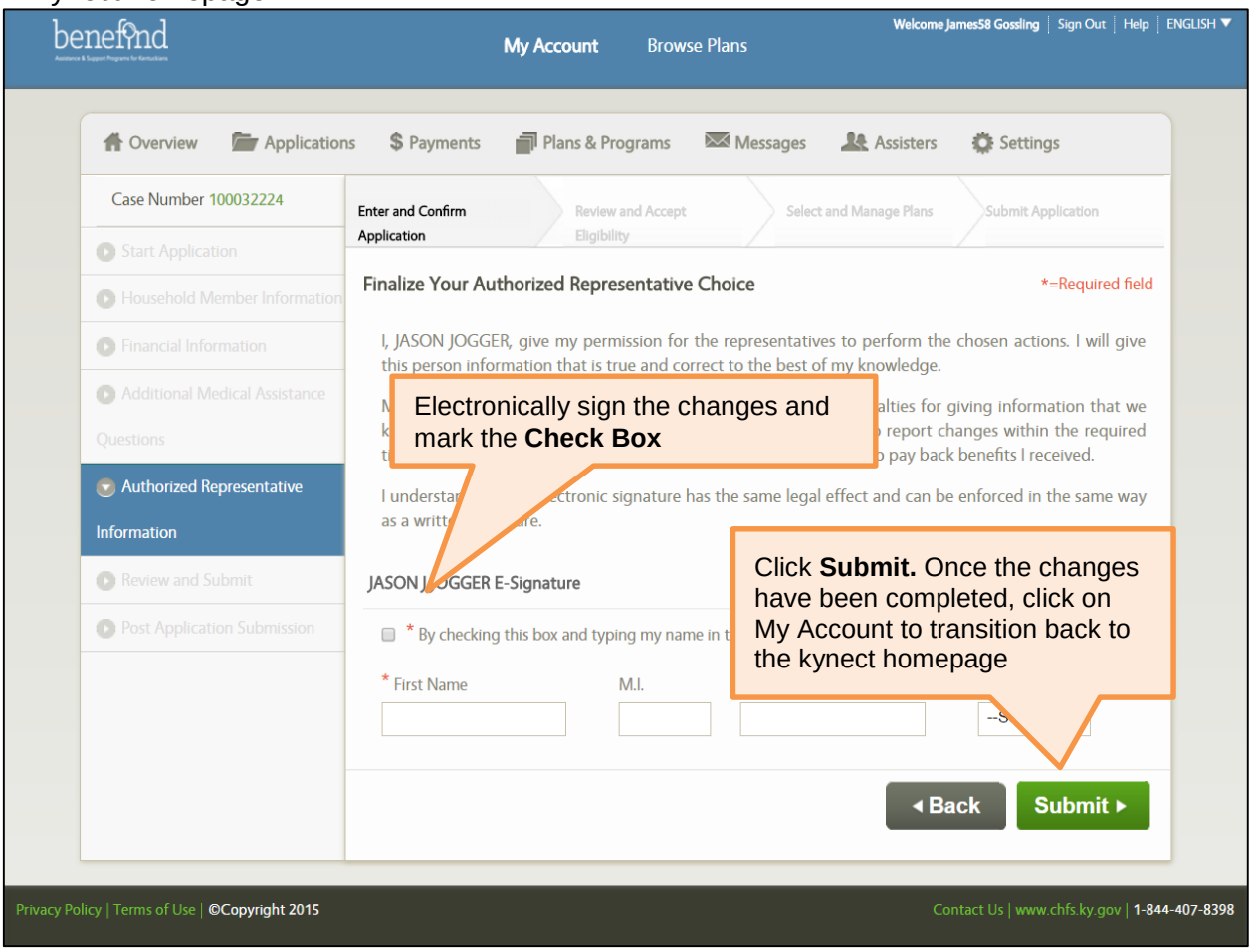


4. Add or update the Authorized Representative's information including basic information (name, SSN, gender, relationship), Level of Permission, and the Authorized Representative's contact information.
5. Click **Add** Representative to add the representative, click **Next** to continue.



6. Electronically sign the changes to the case and mark the check box.

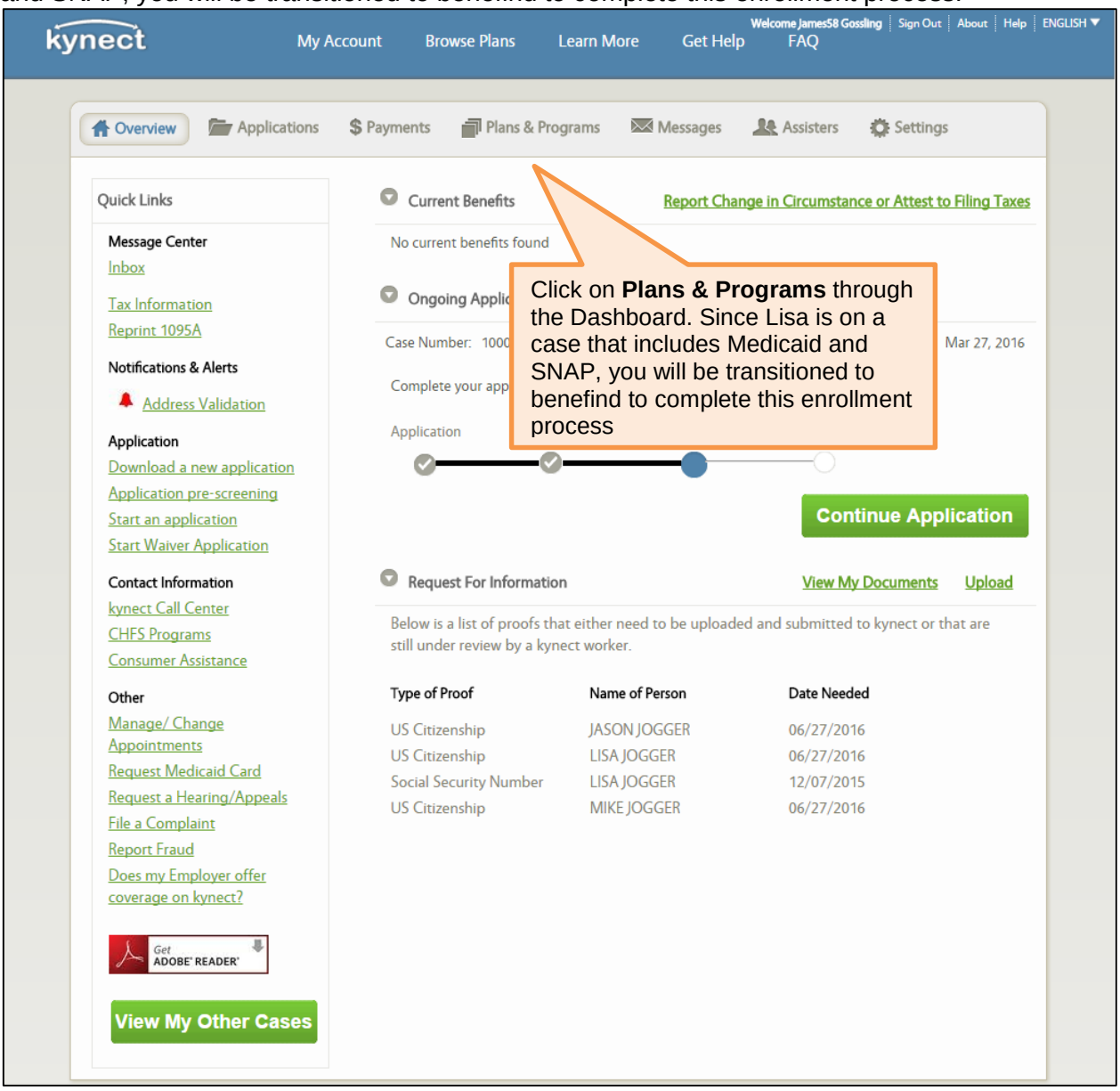
7. Click **Submit**. Once the changes have been completed, click **My Account** to transition back to the kynect homepage.



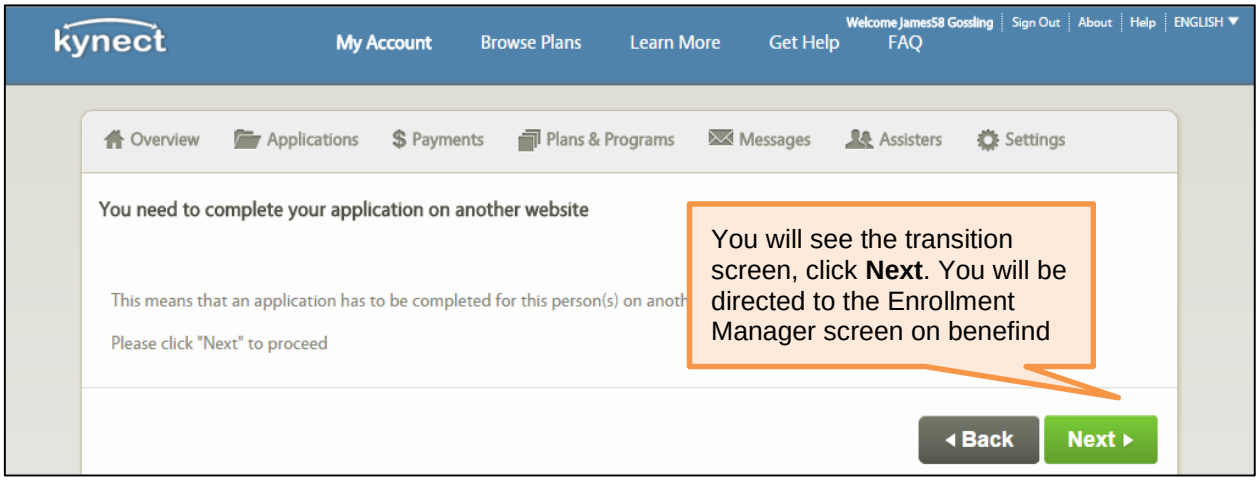
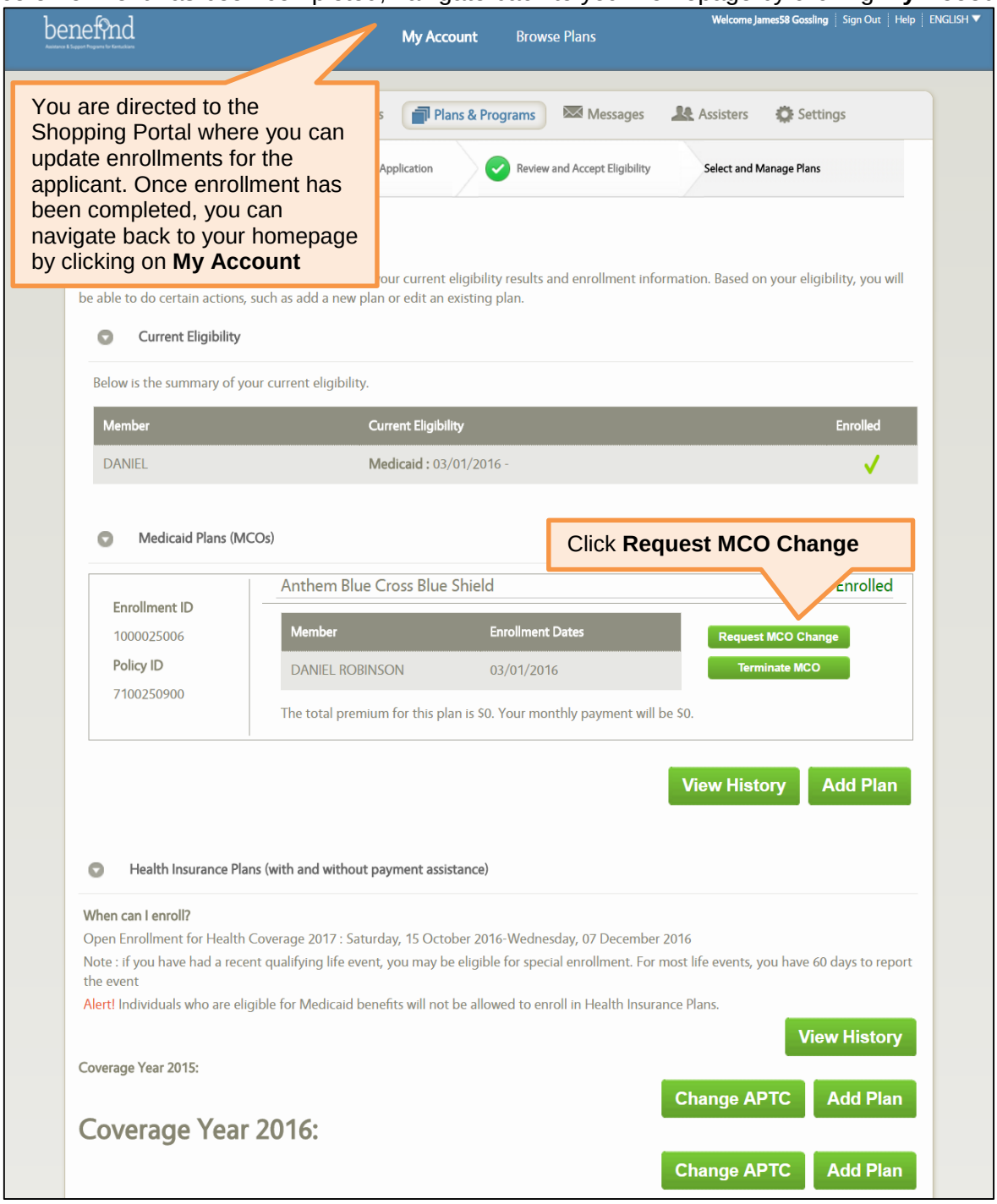
Scenario 7: Updating enrollments for an individual/family who is applying or receives assistance for SNAP, KTAP or Non-MAGI Medicaid

You need to add/update enrollments for Lisa who receives SNAP and Medicaid. Agents and kynectors can continue to make updates to enrollments when an individual applies for or is receiving benefits being processed by DCBS.

1. Click on **Plans & Programs** through the Dashboard. Since Lisa is on a case that includes Medicaid and SNAP, you will be transitioned to benefind to complete this enrollment process.



2. You will see the transition screen, click **Next**. You will be directed to the Enrollment Manager screen on benefind.



3. You are directed to the Shopping Portal where you are able to update enrollments for the applicant. Once enrollment has been completed, navigate back to your homepage by clicking **My Account**.