

The Commonwealth of Kentucky



Quick Reference Guide
Resident Dashboard





This Quick Reference Guide is designed to help Residents, kynectors, and other kynect benefits users complete the necessary steps to use the Resident Dashboard.

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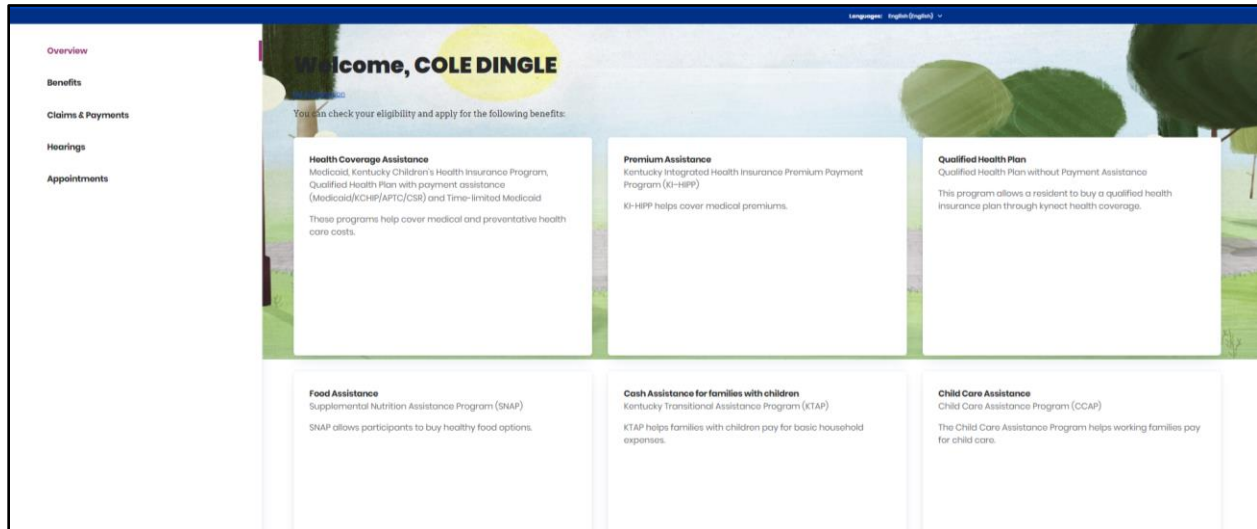


Please Note: Residents who still need help after referencing this Quick Reference Guide can call **(855) 459-6328** for additional assistance.



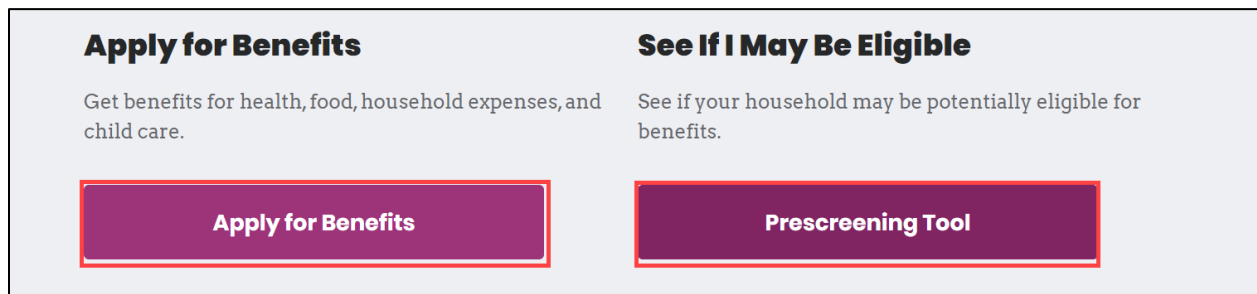
Resident Dashboard Overview

Residents use their Kentucky Online Gateway (KOG) account information to log into kynect benefits. Residents are presented with the **Resident Dashboard** when they log into kynect benefits. The Dashboard provides an overview of important benefits information.



If the Resident is new to kynect benefits and does not have a case, the Dashboard displays a link to *Apply for Benefits* at the bottom of the page.

- Residents can also click **Prescreening Tool** to take a quick survey to see their household's potential eligibility.



Basic Navigation Overview

kynect benefits has two important features that help users navigate through the system.

- ✓ The Top Navigation Menu
- ✓ The Side Navigation Menu
- ✓ The top and side menus are found in the menu icon at the top left of the screen on a mobile device.



Please Note: After an application has been completed, the Dashboard displays the Benefits, Message Center, Health Plans (for Medicaid), and the Reps, kynectors, & Agents dashboard tiles. It also displays critical notifications near the top, and the *I want to...* section at the bottom.



Please Note: The menu icon can be accessed from any screen while logged into kynect benefits on a mobile device. See the **Basic Navigation** Quick Reference Guide for more information.

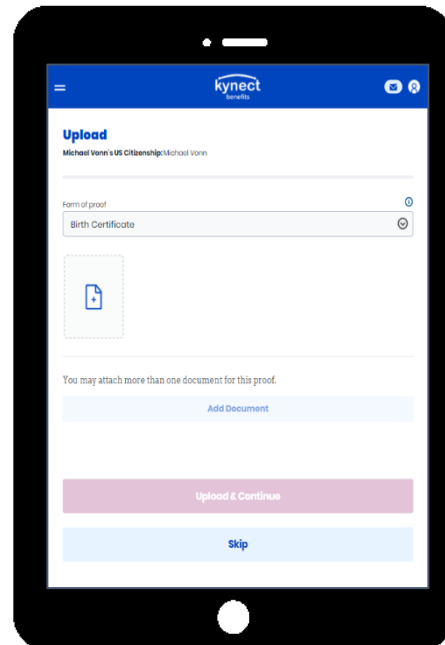
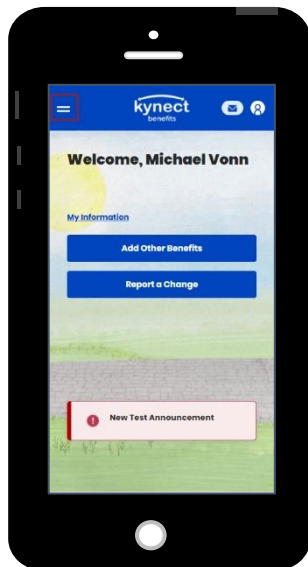


Please Note: The **Case Summary** link appears on the left side for active cases that currently or previously had Medicaid (MA) or Qualified Health Plan (QHP) present, where the individual is the Head of Household. If the case is not active, or the individual is not the Head of Household, the link is not available.

Mobile-Friendly Design

kynect benefits has a new mobile friendly, mobile first design for easy connections to benefits and community resources. Residents, kynectors, and additional users can complete all the available actions in kynect benefits from any mobile device. Some of these actions include:

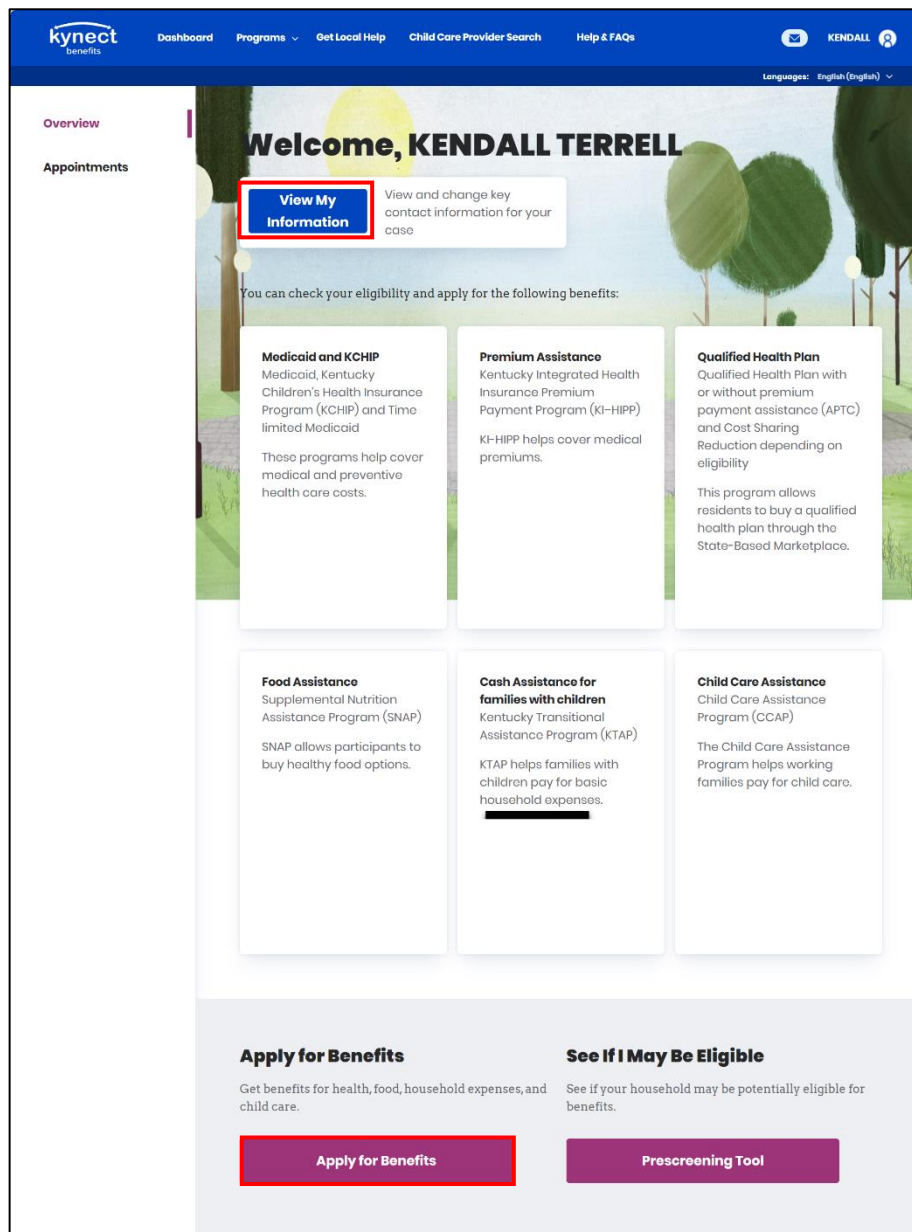
- ✓ Apply for Benefits
- ✓ Upload Documents
- ✓ Report a Change



Top of the Dashboard

The top of the **Resident Dashboard** provides an overview of important benefits information, links to personal information, action buttons, and critical notifications and to-do items.

- Click **View My Information** to view the **My Info** page.
- Click **Apply for Benefits** at the bottom of the **Resident Dashboard** to start a new benefits application.
 - This button changes to **Add Other Benefits** and is displayed at the top of the **Resident Dashboard** when a Resident has at least one active case.
 - This button changes to **Continue Application** if there is a benefits application in progress.



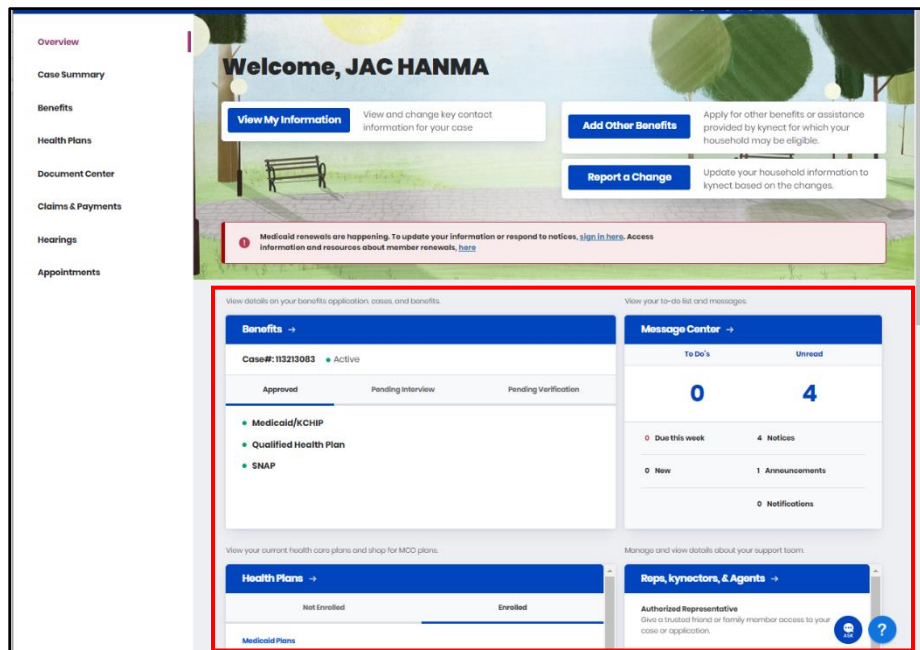
- View Announcements, Critical Notifications, and To-Do items when they appear.



Please Note: If a Resident is a dependent or spouse, a banner displays at the top of the **Resident Dashboard** which indicates that the Resident is not the Head of Household and tells who is.

Dashboard Tiles

After an application has been submitted, the **Resident Dashboard** displays the *Benefits*, *Message Center*, *Health Plans* (for Qualified Health Plans and Medicaid Plans), and the *Reps, kynectors, & Agents* dashboard tiles.



Below is additional information for each dashboard tile found in kynect benefits.

Benefits

The *Benefits* tile displays the status of Resident benefits and their cases. The case statuses include active, pending, and inactive.

1. Click the *Benefits* tile from the **Resident Dashboard** to go to the **Benefits** module.

View details on your benefits application, cases, and benefits.

Benefits →

Case#: 112834386 ● Active

Approved	Pending Interview	Pending Verification
<ul style="list-style-type: none"> ● Medicaid/KCHIP ● Qualified Health Plans 		

2. View and manage approved programs. Ensure that information is up-to-date as changes to information may affect benefits.

Benefits

View and manage your approved programs. Ensure your information is up-to-date as changes to your information may affect your benefits.

Interested in other state programs and resources?

Active & Pending Cases

Case #112834386

SNAP

NIKKI FLASH
 ● Pending Interview
 Complete an interview by visiting your local office or by contacting a DCBS office at [1-855-305-8959](tel:1-855-305-8959)

Medicaid/KCHIP

NIKKI FLASH
 ● Approved

Type	Benefit Period
Medicaid	09/01/2021 - 08/31/2022

[Request Medicaid Card](#)
[View/Download Medicaid Card](#)
[Check Eligibility for Waiver Programs](#)

Qualified Health Plans (QHP)

NIKKI FLASH
 ● Approved

Type	Benefit Period
Qualified Health Plan	01/01/2022 - 12/31/2022

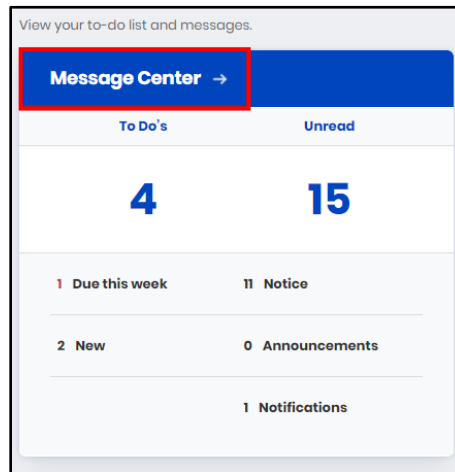
3. Click **Dashboard** on the top menu on a computer or in the menu button on a mobile device to return to the Dashboard.

Message Center

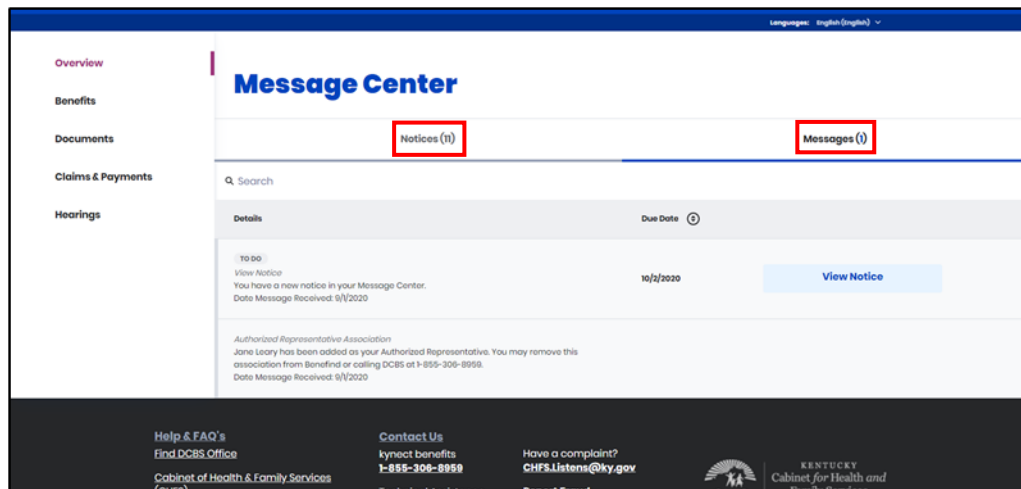
The *Message Center* tile displays the number of *To Do's* and Unread messages to complete for the benefits application.

- *To Do's* that are new or due this week are displayed below the total To-Do number.
- Messages are divided by message type such as *Notices*, *Announcements*, and *Notifications*.

1. Click the *Message Center* tile to go to the Message Center.



2. Click **Messages** to view messages about updates to benefits and important announcements.
3. Click **Notices** to view notices to see digital copies of mail sent to Residents.



4. Click **Dashboard** on the top menu to return to the **Resident Dashboard**.



The Message Center Notices table is sorted by the most recent Date Generated to the oldest Date Generated. The table displays 10 records per page– Residents can use the pagination at the bottom of the table and select a new page number or Next to see more Notices. Residents can filter *Notices* by *Notice Type*, *Name*, *Case/Application Number*, *Action Due by Date*, and *Date Generated*.



Please Note: The Message Center Notices tab displays the 100 most recent notices by default. To view more, Residents can select the “here” hyperlink.



Please Note: If the Individual is Head of Household (HOH), the Message Center displays notices regarding cases in which they are HOH, provided the case is currently active or made inactive/closed within the previous 90 days. For non-citizen user roles like Authorized Representatives, Agents, and kynectors, only notices for cases where a relevant association exists are displayed. If the Individual is not HOH, notices display for cases where they are active and associated only to the Individual. If the Individual is out of household, then notices are not displayed for that Individual. Notices generated for out of household Individuals do display for the HOH.

Below are the steps to select and apply filters on the Notices table, if desired.

1. Click **Notices** to view **Notices**.
2. Click **Filter** to view **Filter** options. Select from the following Filter options to narrow down the results.

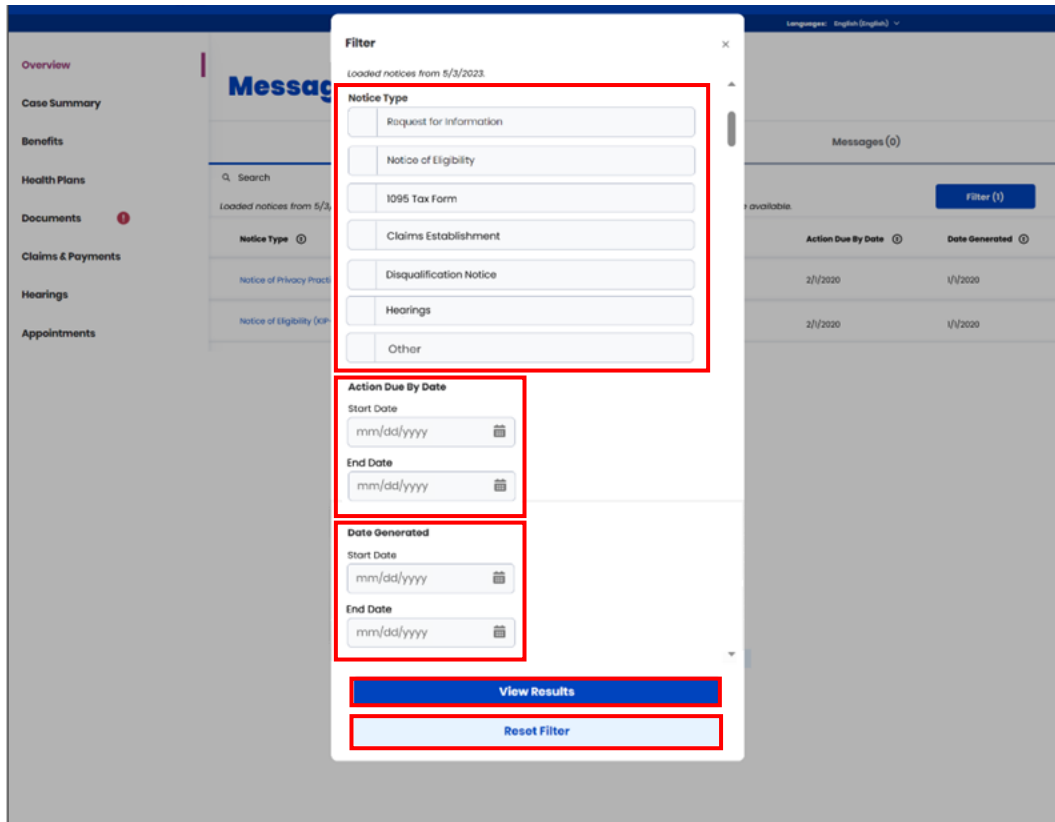
The screenshot shows the 'Message Center' header. Below it, there are two tabs: 'Notices (75)' and 'Messages (0)'. The 'Notices (75)' tab is selected and highlighted with a red box. Below the tabs is a search bar with a magnifying glass icon and the text 'Search'. Below the search bar is a status message: 'You have 75 notices from 2/1/2023. Currently loaded 50 notices from 4/3/2023 - to see more, click [here](#).' To the right of the status message is a blue button labeled 'Filter (1)' with a red box around it.

- a. Under **Notice Type**, select one or more options: **Request for Information**, **Notice of Eligibility**, **1095 Tax Form**, **Claims Establishment**, **Disqualification Notice**, **Hearings**, or **Other**.



Please Note: The following Hearing types will be filtered if the user selects hearings: Recommended Order, Final Order, Notice of Hearings. The Other notice type filters all other types of notices that do not fall under the above categories in the current record set.

- b. Under **Action Due By Date**,
 - i. Enter the **Start Date** or click the calendar icon and select a **Start Date**.
 - ii. Enter the **End Date** or click the calendar icon and select an **End Date**.
- c. Under **Date Generated**,
 - i. Enter the **Start Date** or click the calendar icon and select a **Start Date**.
 - ii. Enter the **End Date** or click the calendar icon and select an **End Date**.



The screenshot shows a 'Filter' dialog box with the following sections:

- Notice Type**: A list of checkboxes for 'Request for Information', 'Notice of Eligibility', '1095 Tax Form', 'Claims Establishment', 'Disqualification Notice', 'Hearings', and 'Other'.
- Action Due By Date**: Fields for 'Start Date' and 'End Date', each with a calendar icon.
- Date Generated**: Fields for 'Start Date' and 'End Date', each with a calendar icon.
- Buttons**: 'View Results' (blue) and 'Reset Filter' (light blue).

The background shows a sidebar with navigation links: Overview, Case Summary, Benefits, Health Plans, Documents, Claims & Payments, Hearings, and Appointments. The main content area displays a table of messages with columns for 'Action Due By Date' and 'Date Generated'.



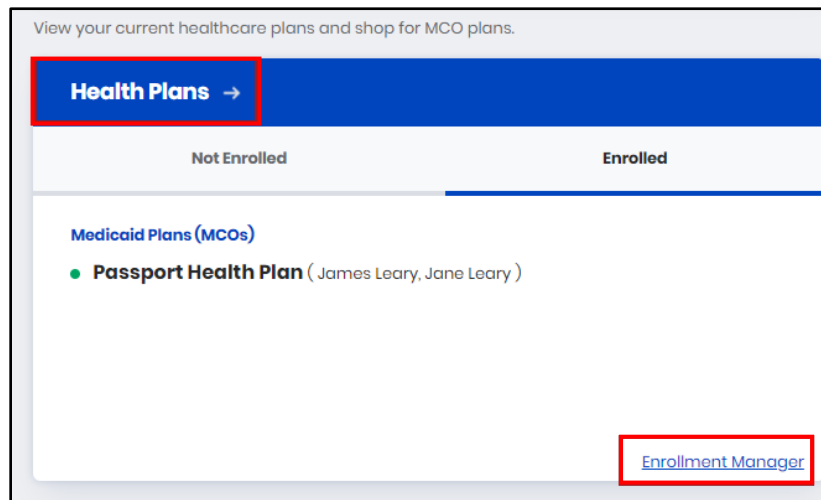
Please Note: Click **View Results** to view the Notices associated with the selected filters. Click **Reset Filter** to remove all selected filters.

Health Plans

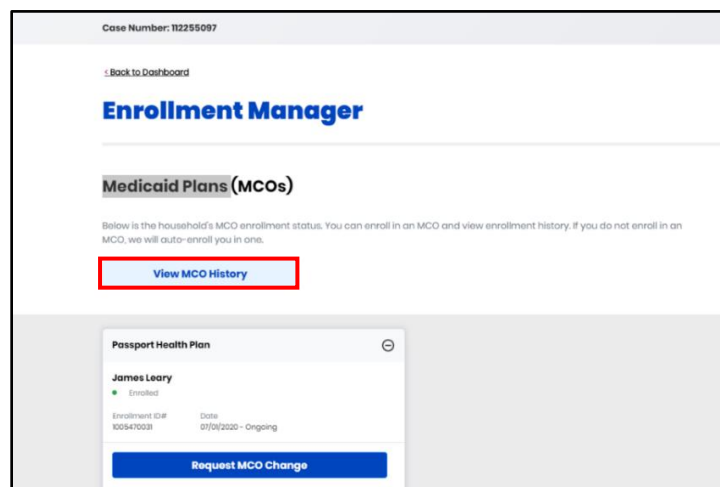
The *Health Plans* tile displays for individuals that have applied for Medicaid/KCHIP or a Qualified Health Plan (QHP) and have the option to enroll in a health care plan with a Managed Care Organization (MCO). The *Health Plans* tile displays the health care plan enrollment status for individuals in the household. The tab options include: *Not Enrolled* and *Enrolled* Residents.

Below are the steps to Request an MCO Change.

1. Click the **Health Plans** tile or **Enrollment Manager** to go to the **Enrollment Manager** module.



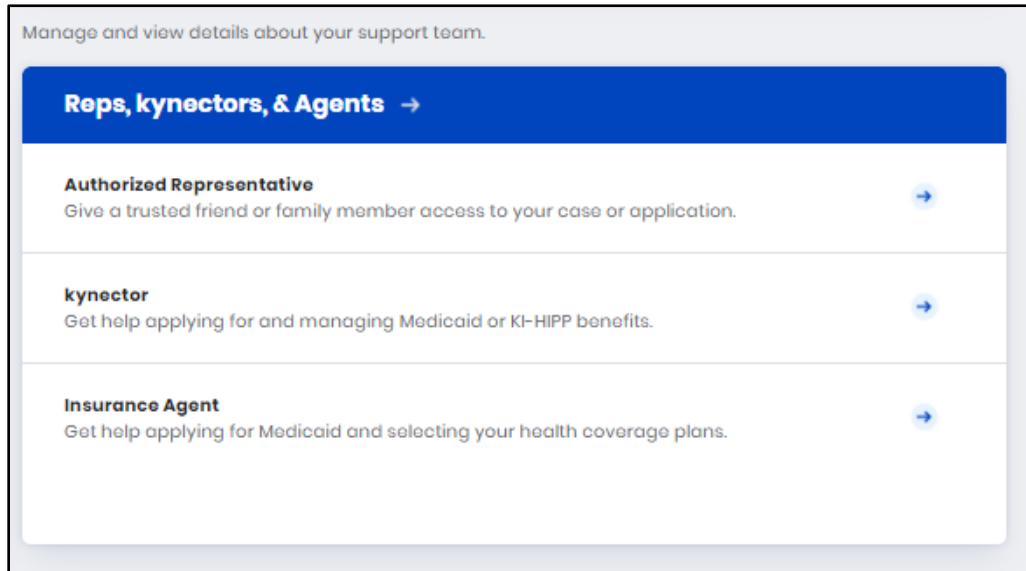
2. Click **Request MCO Change** to start the process to request a change in a Resident's Managed Care Organization (MCOs).
3. Click **View MCO History** to view past MCO enrollment history.
4. Click **Back to Dashboard** to return to the **Resident Dashboard**.





Reps, kynectors, & Agents

The *Reps, kynectors, & Agents* tile connects Residents to their support team that can help them apply for and receive benefits. Residents can click either the **Authorized Representative**, **kynector**, or **Insurance Agent** links to view and manage the support role associations. If Residents have added any of these roles, this information is displayed here.



- ✓ Authorized Representatives are a family member, a family friend, or other trusted individual who can access a Resident's case or application.
- ✓ kynectors help Residents apply for Qualified Health Plans (QHP), Medicaid, KI-HIPP, SNAP, and/or the Child Care Assistance Program (CCAP).
- ✓ Insurance Agents help select health coverage plans.

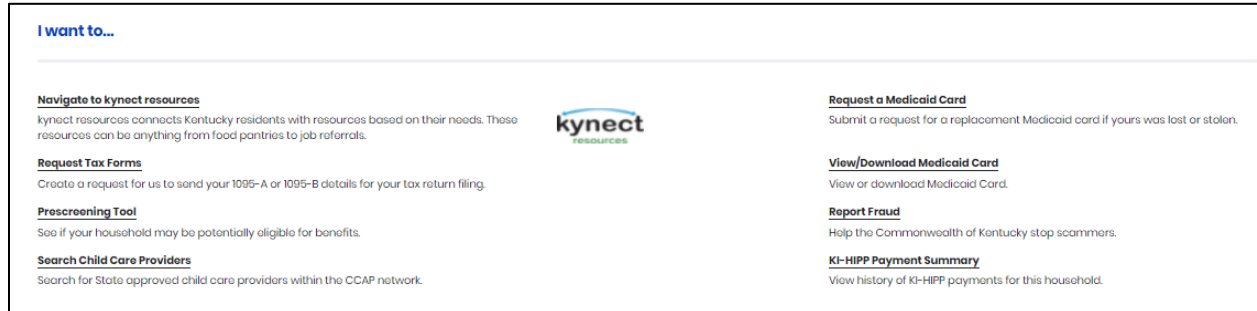


Please Note: See the **Add, Edit, and Remove an Authorized Representative** and **Adding and Removing kynectors and Agents** Quick Reference Guide for step by step instructions to complete these processes.



I want to... Section

The *I want to...* section is located at the bottom of the **Resident Dashboard**. This section was created to connect Residents to specific actions within kynect benefits. The options that appear in the *I want to...* section are program and role specific.



The *I want to...* section may include links to the following actions:

- Navigate to kynect resources.
- Request Tax Forms.
- Prescreening Tool.
- Search Child Care Providers.
- Request a Medicaid Card.
- View/Download Medicaid Card.
- Report Fraud.
- KI-HIPP Payment Summary.



Please Note: Fraud is defined as an intentional deception or intentional misrepresentation made by a person with the knowledge that this deception could result in authorized personal benefit. This includes abuse of the Medicaid Programs.

Reported fraud is investigated by the Office of the Inspector General. It is encouraged that as much information is provided about the suspected fraud as possible. For additional questions related to fraud, please call **(800) 372-2970**