

MA Health Care Training Forum Summer 2024 Meeting

MA Health Care Learning Series Transcription

[MA Health Care Learning Series, Massachusetts HealthCare Training Forum, Summer 2024, MassHealth and the Health Connector]

Sue Kane: Good afternoon, everyone. I'd like to welcome you to the Massachusetts Health Care Learning Series meeting. Thank you for joining us today. Our presenters today are Kara Chiev, Manager of MassHealth External Training and Communication and Niki Conte, the Director of Outreach and Education at the Health Connector. The subject matter expert joining us is Sarah Buonopane, the Associate Director of Community Assistance Programs.

I'm going to turn it over to Niki Conte to start the presentation. Niki Conte: Thank you, Sue. Thank you, everyone, for joining us today. As Sue mentioned, I will be co-presenting with my colleague Kara Chiev and we thought before we entered into slides in depth, we would try something a little bit new. So, if you go, or a little different, if you go to the next slide, I believe it will be our agenda slide.

[Agenda]

There are five topics that both Kara and I will be covering. I'm from the Health Connector, so, I will be talking about our redetermination and renewals process, as well as our ConnectorCare Premium Hardship Waiver Process. And lastly, our employer sponsored insurance verification process and noticing. Kara is going to talk to you about income verification forms for applicants and members.

And this is something that is related to both MassHealth members and Health Connector members. So we just want to be sure that is understood, as well as system updates for MAhealthconnector.org, which is sometimes you hear us talking about it and calling it the HIX system. So now I wanted to bring you to the part that's a little bit different.

We know that during meetings you have been involved if we do polling questions, but we thought it might be helpful to do polling questions right at the start. So just say get you thinking about the topics and, you know, we can gauge your knowledge, you're understanding. So, without that, with that being said, I know I'm talking a lot.

[Poll Question 1]

So polling question number one, the Health Connector's Redetermination and Renewal process takes place annually. True or False.

[Poll Answer 1]

Yes, this is true. Our Redeterminations and Renewal process is something that takes place each year. And basically, this is our way and our set of processes that helps us prepare for the Health Connector's Open Enrollment that begins with coverage starting on January 1st of the next year.

[Poll Question 2]

So, question number two, the Health Connector's Premium Hardship Waiver Program is available to anyone who is eligible for a Health Connector plan.

Okay. True or False, folks.

[Poll Answer 2]

The answer here is False. So, we're going to talk through this in much more detail, but please, just keep in the back of your mind that this waiver program is only for ConnectorCare members. and it's really for those who may need some help with their premium cost, who have, you know, essentially, who essentially meets certain eligibility criteria.

But we'll go through that in much more detail.

[Poll Question 3]

All right. Question number three. This is also True or False. If an employee is offered coverage that is not comprehensive and considered affordable by state standards, they must shop only with their employer's current carrier for coverage.

[Poll Answer 3]

Great. Thank you so much. So, the answer for this one is in fact, False. So let me just explain why. And then we'll talk about, we'll talk about the letter that is going, that goes

out to certain folks to help identify and also verify that they're properly using Health Connector coverage. So basically, if someone is not offered access to comprehensive and affordable insurance, they're allowed to shop for plans through the state's marketplace and in our case through the Health Connector. I also want to acknowledge that if somebody wants to, they can go directly to a carrier, but consumers should know that they are not limited to shopping only with the carrier from their employer.

[Poll Question 4]

So, poll question number four. True or False? Sometimes applicants are asked to provide proof of income if the income they report on their application doesn't match with state and federal income sources.

[Poll Answer 4]

So, this is True. So, we know you see this quite a bit. folks may need to provide proof, and sometimes they don't have documentation to, basically support what they've entered into the application. So, Kara is going to go through a reminder and show you the different forms that individuals can use, or you can help individuals use, if they need to provide proof of income and they don't otherwise have any, anything to send in.

[Poll Question 5]

All right. Last polling question. The online application at MAhealthconnector.org is an integrated eligibility system, which means that someone can find out if they're eligible for MassHealth or Health Connector coverage, True or False.

[Poll Answer 5]

So, I think I kind of already said this earlier, but it's good to reinforce it. The application at MAhealthconnector.org, you'll also hear us calling it HIX, basically HIX stands for the health insurance exchange. It will determine eligibility for MassHealth, Health Connector, Health Safety Net and the Children's Medical Security Plan. So, really, for those folks who are under 65 years of age who are seeking coverage, this is the system.

So, Kara is going to be providing more detailed system updates, updates that will be going into effect at the end of this week. So really just grateful that is available and all of you are using it.

[Health Connector Updates]

All right. So, I'm going to dive right into some of the Health Connector updates

[Health Connector Redeterminations & Renewals Process]

and specifically talk to you about our Redeterminations and Renewal process.

[Health Connector Annual Redeterminations & Renewals Processes]

So, on this slide here, this really is a visual to show you, kind of all of the activities that the Health Connector goes through each year that need to happen before and during our Open Enrollment Period. And basically, this needs to happen so that we're able to determine that people who are, who currently have health coverage through the Health Connector, remain eligible and get renewed into the best coverage possible for them for the upcoming year.

And when I say the best coverage possible, I'm just saying that if someone has had life changes and they may be eligible for a richer benefit, or in our Health Connector cases, more, lower premiums, we want to be sure that people are getting, the best plan available to them. So, I won't really talk in detail about this process, but just because so many things are coming up, I want to acknowledge for you that we're starting this process for actively enrolled Health Connector members and MassHealth members who are part of mixed households.

That's going to be starting in August and September. So, from your perspective, if anybody is helping someone who is a Health Connector member, they're going to start to see notices beginning next month. And as we go through each step of this process you will be getting email updates through the MTF listserv so that you can stay in the loop and stay ahead of what consumers will be getting as we go through each month so that individuals can renew into their Health Connector plan for January 1st. Now, on the next slide.

[Health Connector Premium Hardship Waiver Process Reminder]

I want to talk more about the Premium Hardship Waiver Process.

[Health Connector Hardship Waiver Process Reminder]

So, if you, we, during the poll we discussed that this is an opportunity or a process for individuals who are ConnectorCare members. So, our assumption is that as folks continue to transition from MassHealth coverage to Health Connector coverage, you know, some of this may be a significant change for some individuals in the community and so we want to just remind everyone that we do have a hardship waiver program for ConnectorCare members who can, who need some assistance with their premium cost.

Now, there are four parts to this, and I don't think any of this is news or new to anyone. However, I think getting into the details are, are kind of important as we're getting, you know, in the summer months and heading into even busier months up ahead. So, in order for someone to become approved, they're going to need to meet certain criteria. and we also encourage people that if you hear, you know, if someone says that they are having a hard time making their payments, the first step, really, in this process is to review the member's application and make any updates, that could impact their eligibility.

Now, if you want to review the policy and the criteria in detail, we have a link to all of that information on the Health Connector's website. And then also, if you are working one on one with someone and you want to help them with this process, you can go to, you can go to our landing page, which is also, this, this slide deck all these links will be sent to you. So again, you don't have to take detailed notes. All of this will be coming. So, let's look at each one of these items in more detail.

[1. Hardship Waivers – General Eligibility]

All right. So general eligibility. So, if a member or an applicant is eligible for or enrolled in a ConnectorCare plan, they might qualify for a premium waiver or reduction of premium through this process.

Members and applicants need to attest to and provide proof in most cases of their hardship. Someone does not need to be fully enrolled into their ConnectorCare plan to request this reduction of premium, but they do need to have selected their ConnectorCare plan if they're enrolled in or eligible for a Health Connector plan with APTCs or an unsubsidized Health Connector plan. And really important ConnectorCare members that have been terminated might also qualify for a premium waiver or

reduction of premium via the hardship waiver process if they are still eligible for ConnectorCare, but has their role and excuse me, but their enrollment has terminated, they can apply for a Premium Waiver and potentially have their past due balance waived, if they have a balance.

[2. Review and Update the Member's Application]

Okay, so we talked about this. What is the first step in this, this process, if someone says, hey, you know, this is unaffordable right now, there's a lot of changes going on in our lives.

If you have the access to the Assister Portal or you have, you know, you're calling customer service with a member, you really want to confirm that their application is up to date, you want to make sure that the application includes their most current income, the amounts they're making, all of the sources of their income. Also, double check how many people are in the household and is everyone applying for coverage or not. Just make sure all of that hasn't changed since they had last updated their application. And then this is another really important thing, in the application, are they indicating that they're applying for financial help, financial assistance? Sometimes people, people complete the shorter application without realizing that they've done that. Now, when you get these slides, you will be able to link to the complete list of allowable reasons. But if you go on to the next slide,

[3. Examples of Financial Hardships]

I believe we're going to show you examples of the categories. So, you can see some images here of, you know, if individuals are homeless, are past due on rent or mortgage, getting an eviction or foreclosure notice, also utilities and so on.

[3a. Housing and Utility Related Questions]

I just want to talk a little bit about the housing and utility related questions. So, you would want to ask the person, are you more than 30 days in arrears for paying rent or mortgage? Have you gotten an eviction or foreclosure notice within the last 60 days? Have they received a shut off notice, or have been shut off? And, you know, and in this goes on in more detail, but for every event, that the member says that they're experiencing, they need to submit proof of that hardship. So, if they have any, bills,

receipts, letters, mortgage, etc., all of these things, need to, need to be submitted.

[3b. Financial Questions]

On the next slide, we have another category, and these are the financial questions and as you can see, these are, you know, unfortunately these things happen. However, you know, these are pretty life challenging, things.

So, are they involved in domestic violence? Was there a death of a spouse, family member? Are they in a position where they suddenly need to provide full time care for themselves or an aging family member? So again, this is much more detailed and as you can see, since Covid-19, we have been able to include some of that information.

At the very bottom, there's a question about bankruptcy. Have they filed for bankruptcy within the last 12 months and have the debts not yet been cleared?

[4. Help the Member Apply for a Premium Hardship Waiver Process]

So, help the member apply for a premium hardship waiver process. So, if you haven't, done this before, you haven't looked at these pages before I think our web site and these web pages are really good to go through on your own first. When you come to this landing page there are a couple of questions that somebody would need to go through. Initially it tries to recommend to the consumer, if they came here on their own, it tries to recommend to them that they update their application.

So, if you go on to the next slide.

[4b. Applications Available in English & Spanish]

I just want to point out applications are available in English and Spanish. So, applications can be downloaded or they can be mailed to someone. If somebody wants to have the application mailed to them, you'll see down at the bottom here that they're asked for their billing account number and other information. So, as you can imagine, you might sometimes have to help someone with this process.

[4c. How are Requests Processed?]

Okay, so, how would the request process. So, this is, I feel like this is detail you may not be

aware of, but once the hardship waiver request comes in, if all the documents submitted are acceptable, the Health Connector is going to calculate the new premium. If the documents come in and they're not acceptable, the Health Connector is going to outreach the member to request more information. And once that member submits the documentation, basically the whole review process begins again.

And as I was going through the description there's going to be exceptions for when someone does not need to send in additional documentation. It is going to be, for example, if somebody is saying that they recently became homeless or if they're a victim of domestic violence, someone just attesting to that is going to be proof of their request.

[5. How Long are Requests in Place?]

All right. This I also feel like is new information for folks. How long are these requests in place? So, if the hardship waiver gets approved, it may be authorized for up to 12 months. Now, when that does get approved, it begins on the first of the month of the next full billing cycle following the date the premium waiver was granted.

The waiver or the reduction can only be applied to the current enrollment year, meaning that the member would need to reapply for a new enrollment year. So, what that really means regular terms, is okay, it's July now, and let's say, someone gets approved for September 1, they would have that approval in place through the end of the calendar year. Beginning on January 1st, they would need to have a new, a new hardship waiver in process, if in fact, they still needed it.

[Employer Sponsored Insurance (ESI) Verification Process and Noticing]

All right. So, one more item here that I want to go through in a bit more detail. And this is a question that we've received quite a bit, from time to time. And it's really around employer sponsored insurance. The verification process we use and noticing. So, as you know, sometimes people do work 35 plus hours, but unfortunately, they are not offered access to affordable and comprehensive health insurance coverage.

[Employer-Sponsored Insurance (ESI) Verification Process]

So, if applicants and members who have affordable ESI are not eligible, excuse me, this is something you know, but maybe just to reiterate as a reminder, so if somebody is offered

affordable ESI, they are not eligible for Advance Premium Tax Credits. So that statement really is for those individuals who are newer to this space. If someone is not offered ESI or is offered an unaffordable plan, they might in fact be eligible for Advanced Premium Tax Credits if they meet all of our other eligibility requirements.

And important to acknowledge, we do not have an electronic data source that verifies someone's access to ESI. So, we rely on the information that's provided by applicants and members. However, what we do is pull a sample of members from our online application when they report working at least 35 hours at a job and report not having an offer of affordable ESI.

[ESI Verification Notices]

So, what happens is a notice will be sent to the member to let them know that the Health Connector will contact their job to verify their ESI access information. Now on that notice it instructs members to update their accounts with the correct ESI information if needed. Members must provide updates within three weeks of getting that notice, and the Health Connector will also contact the employers of those members via mail to verify whether the ESI information they provided in their application is correct.

So, important for all of you to note we, the Health Connector, does not update the member's account without the member's consent, and additional notices will also be set to these members, and all notices that get sent to members are available for download and viewable in the Health Connector Member Portal. And I hope that helps clarify things for folks who have asked these questions in the past.

[Income Verifications for MassHealth and Health Connector Applicants & Members]

So, now I just want to call on my colleague Kara to pick up. I'm gonna hand the slides over to you. Kara Chiev: Thanks, Niki. Hi, everyone. Great to see you this afternoon. Okay, so I will go over the income verification for our applicants and members. And as Niki mentioned, this is for both MassHealth members and applicants, as well as Health Connector, consumers and applicants.

[Income Verification Forms]

Just for those folks that are newer to our community, as Niki mentioned, the application,

the online application at MAhealthconnector.org, is for our under 65 application. And this is the online application for our ACA-3 paper application or the Massachusetts Application for Health and Dental Coverage and Help Paying Costs. It's a joint application for both of our programs.

So, when you're submitting this application we'll look, the system will look to find the best benefit or program the individual qualifies for. The online application is the fastest way to submit an application, as it can provide a real time determination. For us to be able to do that, the system data matches in the back end in real time to state and or federal data sources we have access to. This lowers the rate of individuals needing to submit verifications or proof of their information. So, this is really a helpful system for members as well as new applicants.

Now, in the instance, the system is unable to data match the information like income, which is one factor we use to determine eligibility. They will need to submit proof of that information so it can be verified. So, a request for information or RFI notice will be sent. It's also viewable in real time in the system to see which RFI or which additional documents we need the person to verify. You'll see the income verification or screenshots of the system in a minute.

The income RFI notice is a joint notice which includes a list of each individual in the household and what verification they must submit, the date the information must be received at MassHealth, a list of acceptable verification and a Babel sheet. Just to note the Babel sheet is in 13 different languages that provide notice to the person that this is an important notice and that you should get the information translated. Members applicants can call MassHealth to get that information in their language, so that information is in that notice.

Now, in situations when the individual applying does not have the documents, they can use to verify information, MassHealth and the Health Connector team created templated forms that can be used to satisfy the requirement to submit proof of that income. The three different types of forms that can be used include Self-Employment Income, Zero Income or all other income types.

[Self-Employment Income Form]

So, here you have the Self-Employment Income. This form can be used when the applicant or the member does not have a formalized or current documentation to show self-employment, like a self-employment ledger or a profit or loss statement or a previous 1040.

So, here is the sample screenshot of that form. So, for these members, they're most likely, doing the side job, within the GIG economy there have temporary short-term work like ridesharing, Uber, Lyfts. They may be delivering food or other services.

And also, for folks that would use this form, they may have fluctuation in income that's not easily represented via a current documentation.

[Attestation Form to Verify Income]

Next here is the Attestation Form to Verify Income. This form is used to verify all, all other incomes. Members/applicants, they may use this form if their needed documentation poses a safety risk. So, if they're trying to get their documents in, and it may pose a safety risk to them or any members within their households, they can use this form, or if accessing the document is impossible due to circumstances outside of their control, or they have sent documentation that has repeatedly been rejected and they have no other acceptable proof of this type of document. So, this is available for, for them to submit to MassHealth.

[Affidavit To Verify Zero Income]

For the situations with which the individual is currently not working and was asked to submit proof that they have zero income. They may submit a signed written statement, also called an affidavit. Now the affidavit does not have to be notarized, if they want to use a templated form, we did develop the Affidavit to Verify Zero Income form, and this can be used and submitted.

So, all of these forms can be found on both the MassHealth and the Health Connector's web page. I will note that on the MassHealth website, the forms are available in several languages. They include Chinese, Haitian Creole, Brazilian Portuguese, Spanish and Vietnamese.

So, I'll also note that on the MAhealthconnector.org site, there is a list of different verification documents that's available for those newer to our community, you can find all of that at MAhealthconnector.org. So, what is acceptable for proof of income, there will be a huge list, at the Getting Started Guide.

[MAhealthconnector.org System Updates]

Okay, so moving on to systems update

[System Updates]

for those Assisters out in the audience that, joined earlier this morning for the MassHealth Updates. This information is not new. It really is meant to make sure that we're able to provide as much information and details to those that weren't able to join, this meeting and just making sure that all Assisters are aware of the upcoming systems update.

So, as Niki said, HIX is going to be updated tomorrow night. This is the joint integrated system that both of our programs use to determine eligibility. It will look at if the individual, the applicant, the person applying is eligible for MassHealth first. If they're not, they'll look to see if they're eligible for the Health Connector and also look to see if they're eligible for the Health Safety Net and then CMSP or the Children's Medical Security Plan for certain applicants and members younger than 65.

As a reminder, and for those newer to this work, following any systems update, members with an account and Assisters should clear their cache or internet history before accessing the online application or the Assister Portal for a better web experience. For those unfamiliar with how to clear your cache or your browser history, there is instruction provided in the Getting Started Guide at MAhealthconnector.org.

[What to Expect]

Now going on to the next slide, here are the updates for this release. It's related to address update and the interface at MAhealthconnector.org. So, going into the address update

[Updating Mailing Address]

in a previous release, Release 28, a banner message was added to alert members or account holders to confirm or update their mailing address within 15 days when we found, additional information, additional addresses for, for them through a data match.

So, with Release 29 we extended that timeline. So, now members will have 30 days to update or verify their mailing address. Here is a sample screenshot of that message. When the user moves to the Click here to confirm or update their address. It will navigate the user to additional instructions and other report a change a feature.

[Address Change]

So, moving on to the next slide. If the member doesn't take an action, they may be terminated and will be sent a notice for one of the following reasons: "Whereabouts unknown" or they "Moved out of state" as we have data match for an out of state address for them.

As a reminder to qualify for MassHealth or the Health Connector, the person needs to be a Massachusetts resident or they intend to reside in Massachusetts. So, if we do locate mailing address that is out of state and that is incorrect, they do need to verify and confirm or and update that information with us.

So, this banner message will display for that that instance. And as you know in a number of MTF it's been a year for, for since we've started Redetermination, we've reminded participants as well as Assistors to help members and applicants or really members update their mailing address.

It's really important to make sure that we have the most up to date mailing address for them so that they can get notices, and if those notices have an action, which means that they're required to, to submit verifications or their renewal. We want to make sure that they do get that information they're able to act on those requirements. So, updating their mailing address is really important.

[Returned MassHealth Renewal Notice Due to Incorrect Mailing Address]

Going on to the next slide. This speaks to notices that we get back as return mail. As you know, we send out a lot of notices to members, whether it's RFI notices (requests for

information), address update notices, renewals, job updates, we're receiving a lot of return mail due to incorrect mailing address.

In the instance that the notice that we're receiving back are renewals, MassHealth will attempt to notify these members, via email, if we have an email address in the application for them, also text if we able to, to send out a text message to them, and also a notice that will be sent to their new mailing address as well as their current mailing address we have on file.

So, we're attempting to outreach to them, in a number of ways to alert them that we found a new mailing address for them, we need them to update that information. And as this is related to a renewal notice, the banner message that you just saw will display. Assistors, you'll also see this in the Assister Portal.

The member does need to take an action. They need to update or confirm that mailing address. Members have 30 days to update or confirm that information with us. And in this instance, this situation, they would need to call MassHealth. or send us a letter to let us know what the new mailing address is. Or they can go to any of the MEC, the MassHealth Enrollment Centers across the state to update that information with us.

As this is related to a renewal, they may have lost coverage, so in that instance, they may request a reinstatement of their benefits. If they qualify for reinstatement, a new renewal packet will be sent to the member using the confirmed/updated mailing address, and they will have 45 days to submit their renewal online by paper or calling MassHealth.

[What to Expect]

Okay, the next set of renewals are related to the interface. Really excited to bring this to you. As you'll see, for those that were not on the call earlier this morning it is really a lot more streamlined.

The application, we integrated the interface so that it's modern for members and Assistors, it improved the user interface. It's as I said it's streamlined and intuitive to use. There will be new tooltips for complex topics and other opportunities for users to learn more information about certain topics or questions. You'll notice there will be less text on the main screen. it'll be in plain language and accessibility. So, those are the key improvements for this update.

[System Updates: Sample Landing Page]

So, going on to the next slide here is the sample of what's currently the dashboard when you go into to sign in, to log in.

The first column, the before update is what is currently what you'll see and there's a lot of text there it's a lot of information. and sometimes it's not intuitive as far as which button to select. So, moving into the new interface, as, as you can see it is cleaner a lot more white space. It's clear as far as who should select the Apply Now button versus the Sign In button.

We still have if individuals are newer and they want to shop, they want to check out to see what program they're eligible for they can do that anonymously here still, but it is a lot cleaner and it's, just a few clicks versus having to read a lot of text. Also, I'll note there's a lot more icons now that's going to be used that you'll notice. So, under important dates as you'll see calendar icons to signify the things that may be due. So that'll be in the system in other parts of the application as well. So going on to the next slide,

[Sample Screenshot: Welcome Screen]

here's the sample of the dashboard. This is the new dashboard, it's all in one page. There wasn't a lot of room to get all of that information so that you wouldn't have to squint, but as you'll have this slide and those with access to the Assister Portal, you'll notice it after tomorrow.

A lot of information, a lot of actions that the member needs to take is up front, it's right there, right under the welcome. So, if they have a renewal, it'll be right at the top to make sure that it's front and center under that next steps and then right under that the next box is if they have an RFI that's outstanding, they need to submit verification, it'll have it here. So, they'll see it front and center. They'll also be able to submit those documents using the online system. So, upload documents, that upload documents button, is available for quick access.

Additional information is their coverage type, which program were they determined eligible for, for all members of their household. That information is visible here under the eligibility results.

Also front and center, if they've got premiums, they've got, that information is there and available, what's their premium for either MassHealth or the Health Connector. If they need to report a change that's also a quick access here. So, updating their address, income, adding a new household member or anything that they need to update making sure that we have the latest information for them they can do that through the Report a Change feature.

At the bottom, I'll note, as I mentioned earlier, for those, Certified Application Counselors and Navigators in the audience, when you're meeting a member, if you haven't seen them for a couple of weeks or a couple of months absolutely ask them if they have any updates to their mailing address. As I mentioned, if we are finding a different mailing address for them, the system will now alert, put an alert out for them to require them to update that information.

So, just make sure that we have the latest information for them contact information. Email address, as I mentioned we're trying to outreach to them in a number of ways, it is helpful to have an active email address if they have one available, phone numbers as well.

So, going on

[Sample Screenshot: Primary Contact Information Screen]

Here is the sample of the Primary Contact Information.

Only bringing this up as, some key things that you'll notice is the ability to scroll to get to certain information. I'll hone in on the language information. As you know this is an optional screen, but you've also heard that certain languages that we're able to translate notices for. It's going to be helpful for those members and applicants you're working with to identify if those are their spoken language and that's their preferred way to get written materials. We definitely want to make sure that we have that information.

So, if you select the Preferred Spoken Language, there's now a dropdown. It's not a long list that you'll see, and you'll have to scroll down anymore. And you can actually do a search in that box if you're looking for Vietnamese, just type in, start with "V" it might actually scroll up to Vietnamese to the right language that you're searching for. So, it's a quick search. With Preferred Language, next to it you'll notice that there's additional text. So how is this used? If you click on that and expand it, it'll give you an answer as far as

how Preferred Language is used. So, it's not out there, it doesn't clutter the, the screen anymore and confuse applicants, new applicants and users. So, hopefully this new interface will be a lot more user friendly. As I mentioned, using plain language to help folks understand the information and the materials that they're being asked to provide.

[Sample Screenshot: Income Screen]

So, going on to the next screenshot, here is an example of the income screen. And I wanted to bring this up because here are the other icons that you'll see that will be used. So, with income you can update their job, as always, Social Security benefits, self-employment information, unemployment, capital gains, rental or royalty, retirement or pensions, dividends, interest, so much more.

So, if you're working with an individual or a member that does not have any income to report, you don't need to highlight anything. So, in this screenshot nothing is selected. And if you'll notice at the bottom in the dark blue box, it says continue with no income. And that is because you didn't select any of the icon noting that you wanted to report, or they wanted to report an income update. So, if there's no income, you can continue and select that, the continue button and it'll continue with the application without having to ask the income question if it's not relevant to the individual you're working with.

[Sample Screenshot: Reporting Income]

The next screenshot here is the sample of when a job, an income for a job is selected and you want to update that information and unemployment.

So, at the top of that box where the icon is, you'll notice if it's not selected, you'll notice the cross, but if it is X that, that circle X. And to deselect it all you do is just go back up to the X and select that and it'll deselect that icon and those questions won't be asked.

So, once you select any of these icons to update, you'll just save and continue and the system will ask those appropriate questions to the person you're working with or the applicant using the system.

[Sample Screenshot: Application Summary Screen]

Going into the next slide, here is the eligibility result screen. This is a sample of the screenshot, as you can see lots of information that's provided related to the applicant or

the member's eligibility what program were all of the household members found eligible for. You'll see the start date, and if there are any proofs or any RFI that they'll need to submit. So that information is going to be here.

Also, it'll have that quick link to be able to upload documents quickly so, if they have proof of income that's outstanding and they want to submit one of the affidavits, they can do that quickly here.

[Summary Screen]

So, the next sample screenshot is the review application. Here they've completed, they've gone through the application. The system will provide all of that information, a summary of what they've inputted just to confirm that the information is correct and if there's updates that's needed later on, you may want to check out the, the summary screen to see what information we currently have for them from the, the last time they logged into the system.

So, all of that is here. These are sample screenshots. They're just really to give you an experience of what those pages will look like when you go into HIX come Friday morning.

[Thank You]

Sue Kane: Thanks, Kara, Niki and everybody else for joining us today. We appreciate you taking the time - have a great rest of your week.