



**IN THE REAL WORLD  
BONES BREAK.  
SO DO BANK ACCOUNTS.**

Your Health  
**IDAHO**

# Your Health Idaho Training

Open Enrollment 2020



# Welcome!

Thank you for your interest in becoming Your Health Idaho-certified Consumer Connectors (CCs)! Your participation is key to ensuring that Idahoans have the best insurance experience.

- Because of CCs like you, Idaho consistently ranks among the highest in the country for enrollments per capita.
- YHI-certified CCs include agents, brokers, and enrollment counselors.
- CCs play a vital role in helping Idahoans understand health insurance options at YHI.

# YHI Basics

## Agenda

- Welcome
- History
- State Based Marketplace (SBM)
  - How does a SBM work
- Partners
- Open Enrollment (OE) vs Special Enrollment Period (SEP) dates
- Basic Processes
  - Certification/Decertification
  - Account set up
  - Account management
  - Consumer account set up
  - Consumer account management

# History

## YHI Beginnings

# ABOUT YHI

The Idaho legislature voted to establish a state-based marketplace, now known as YHI, through House Bill 248. The bill was signed into law by Governor C.L. “Butch” Otter on March 21, 2013.

The legislation established YHI as an independent entity, overseen by an 18-member board of directors. The board includes agents, brokers, physicians, business owners, legislators, and non-profit representatives from Idaho. Directors of the Idaho Department of Insurance (DOI) and Idaho Department of Health and Welfare (DHW) are on the board as non-voting members.

# History

## What is YHI?

# CREATION OF MARKETPLACES

To engage and implement the enrollment requirements for newly established Qualified Health Plans (QHPs), the Affordable Care Act (ACA) required that each state create or subscribe to a Marketplace program, operated by a state, the federal government, or a combination of both.




### State- Based Marketplace

States manage all marketplace functions, with federal oversight.



### State- Partnership Marketplace

States partner with the federal government, engaging with the federal government in operation of certain aspects of the federally-facilitated marketplace.



### Federally- Facilitated Marketplace

States choose to have the federal government manage all marketplace functions in their state.

- Each state chooses how to design its marketplace.
- Your Health Idaho is a state-based marketplace.



# YOUR HEALTH IDAHO TECHNOLOGY

After using the federal platform for one year, the YHI Board of Directors decided in 2014 YHI would transition to an Idaho-run technology solution. Because of this, borrowed technology from the federal government was used during the 2014 OE to facilitate online enrollment into health plans.

- Since October 2014, YHI has used and grown its own technology solution to create the best experience for Idahoans.
- A major component of this training is to review the features and functionality of the technology system so that you can best assist your customers.
- Updates are made frequently to the system based on feedback, experience, and changes in regulations; these are sometimes referred to as 'releases.'
- In designing the technology and state-based marketplace, YHI partnered with DHW to use their existing eligibility system to determine consumers' cost savings including Advanced Premium Tax Credit (APTC).

# YOUR HEALTH IDAHO COMMITMENTS

- Allow individuals in Idaho to compare health insurance and buy plans via mail, phone, through an agent, or online
- Display health plan information in a uniform format, using plain language for easy comparison
- Work with the Idaho DOI to certify QHPs from Idaho carriers, and ensure every plan meets Idaho state standards including the required Essential Health Benefit (EHB) package
- Display accurate plan information, facilitate enrollment in health insurance plans in the marketplace, and share information with the Internal Revenue Service
- Partner with DHW to determine eligibility for APTC and Cost-Sharing Reduction (CSR)

# Partners

- **Idaho Department of Health and Welfare**
  - Facilitates and completes APTC and CSR determination (financial eligibility)
- **Carrier**
  - Design and sell insurance plans
  - Manage payment process and tracking
- **YHI**
  - Consumer Connectors (Agents/Brokers, Enrollment Counselors)
    - Assist consumers in completing and managing financial eligibility process
    - Support and explain insurance options (agents/brokers only)

# OE vs SEP

# 2020 Open Enrollment

## November 1, 2019 - December 16, 2019

Open Enrollment (OE) happens once per year, between set dates. Coverage is effective January 1, 2020.

The date that consumers can begin receiving benefits from their selected QHP depends on when they enrolled in the QHP. When a consumer enrolls in a QHP, YHI notifies the health plan issuer of the effective date of coverage (the date that the consumer should be able to access health benefits).

**Note:** Consumers must first pay any premium they owe to the health plan before they can receive plan benefits. Open Enrollment for Medicaid/Children's Health Insurance Program (CHIP) occurs throughout the year. Consumers that are not already enrolled in a state program can enroll in those programs at any time if they are eligible. For clarification please see [YHI Policy Manual](#).

# Special Enrollment Periods in Idaho

## Qualifying Life Events (QLEs) for consumers:

- Changes in household size, including birth, adoption, or foster care placement; or marriage or divorce
- Death of primary insurance subscriber
- Changes in residence, including permanent moves within the United States, with demonstrated coverage of one or more days in the 60 days prior to move
- Gaining or continuing American Indian or Alaska Native status
- Changes in eligibility for financial assistance, including gaining APTC eligibility or changing CSR level due to change in income

See the [YHI Policy Manual](#) for a complete list of Special Enrollment Periods (SEPs) and validation requirements.

# YHI POLICY MANUAL

# Policy Manual Training

## Objectives

- History
- What is the Policy Manual
- How to use the Policy Manual



# History

YHI was initially approved in 2010. The Process Steering Team (PST) was created to be a best practice group responsible for identifying:

- Risks
- Policy
- Decisions on processes
- Plan a new program

They met daily until 2014. The group included stakeholders from our external partners to ensure accuracy and validity.

Much of the YHI policy history is rooted in the analysis from this group, a comparison to the Code of Federal Regulations (CFR), Center for Medicaid & Medicare Services (CMS) guidance, and Idaho-specific goals and regulation.

# What is the Policy Manual?

This is one of the only consumer-facing policy manuals in the country. It is one of the best tools YHI and our partners utilize in order to speak a common language and support consumers.

These rules align with federal and state regulations and requirements. They are made Idaho-specific to best support Idahoans.

Consumer Connectors, consumers, DHW, and carriers should reference the YHI Policy Manual in their enrollment process.

# What is the Policy Manual?

## The New Policy Steering Team

The YHI Policy Manual reflects federal and state regulations, it is regularly updated and reviewed based on changes in administration. Additionally, the policy manual is reviewed for adjustments in human behavior or trends, as well as changes in process between our partners.

The group reviewing and approving the policies has been renamed the Policy Steering Team, or PST, and they meet monthly. The representation is the same as initially included but has encompassed a few more representatives across fields.

# Consumer Account Management

## New Account Set-Up

## Your Health Idaho Applications

There are two ways that a consumer can apply for coverage on Your Health Idaho. Below is a chart that you can use when helping consumers.

	Applying for Cost-Savings	Applying without Cost-Savings
Who?	Idahoans who want to determine their eligibility to enroll in coverage on Your Health Idaho with a premium tax credit should apply for cost-savings.	Idahoans who want to determine their ability to enroll in a qualified health plan on Your Health Idaho without the premium tax credit or Cost-Sharing Reduction (CSR).
What information is required?	Consumers will be asked for information including names of household members, Social Security numbers, dates of birth, citizenship status, and information about income.	Consumers will be asked for information including names of household members, Social Security numbers, dates of birth, and citizenship status.
Where is the application processed?	Consumers that apply for cost-savings are taken to an application processed by the Idaho Department of Health and Welfare (DHW) through an online portal known as idalink.	These applications are processed by Your Health Idaho.

# Account Creation

Based on feedback and poor consumer experiences reported, YHI updated the system to automate linking DHW eligibility to YHI enrollments.

Because of this update:

- For new consumers, the path to create an account will now **START** with YHI. *This is a process change different than in the past and will significantly reduce the amount of applications to be linked.*
- Creating an account with YHI and DHW should reflect consistent information
  - YHI - Primary account holder
  - DHW - Primary account holder = Primary Tax filer = First consumer on the application

**NOTE: All demographics should be identical on both accounts to include the primary account holder.**

# Account Creation

**Step 1:** Create an account with YHI ([www.yourhealthidaho.org](http://www.yourhealthidaho.org))

- Create non-financial application
- Designate Agent of Record (AOR)/enrollment counselor
- Review Pre-eligibility and Shop for Plans
- Add plan to cart

**Step 2:** Create an account with DHW

- Complete authorized rep request with consumer
- Process a financial application to determine:
  - Medicaid/CHIP
  - APTC/CSR

# Account Creation

**Step 3:** Once YHI receives the financial application, both AOR and consumer will receive notification to act.

- Enroll the member and make the binder payment.

**Step 4:** Carrier confirms enrollment and sends monthly updates through electronic data interface for reconciliation purposes.



# Consumer Connector Tools

# Designations

- Consumer Connectors (CCs) who set up the consumers account must designate themselves and accept the designation.

**OR**

- CCs working with consumers must advise the consumer to add them as the designated agent of record (AOR).
  - AORs must accept the designation in order to receive commissions and have permission to support the consumer via phone, email, or portals.

# Designations

## How to designate

**Step 1.** From the consumers dashboard click **Find Local Assistance**


Quick Links

[Find Local Assistance](#)

**Step 2.** Click “Find a Certified Agent or Broker Near You” **or** “Find a YHI Certified Enrollment Counselor Near You”


Note: To search for an Enrollment Counselor, search by location **or** by Organization Name.

### Find Local Assistance at No Cost to You



Agents and brokers are licensed by Idaho's Department of Insurance and have completed additional training to become certified with Your Health Idaho. Only an agent or broker can make specific recommendations about which plan you should buy. Note that some agents and brokers may only be able to sell plans from specific health insurance companies.

[FIND A YHI CERTIFIED AGENT OR BROKER NEAR YOU](#)



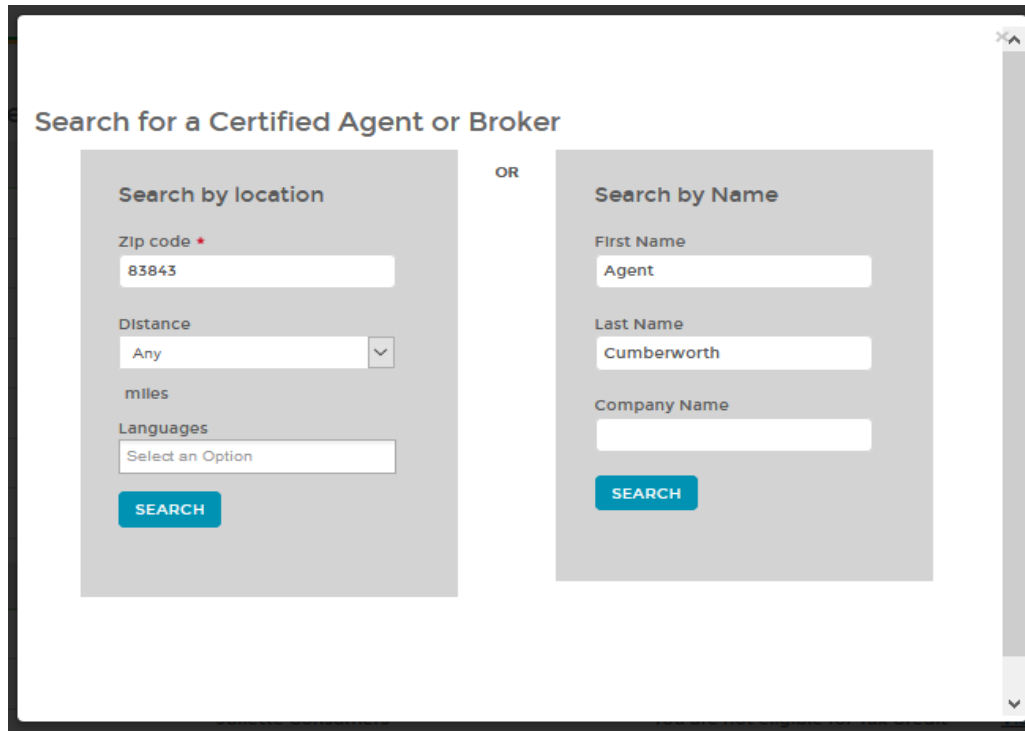
Your Health Idaho Certified Enrollment Counselors belong to Enrollment Entities, which include hospitals and not-for-profit organizations from around the state that have been trained by Your Health Idaho to help you understand what options are available to you and your family. They cannot make specific recommendations about which plan you should buy.

[FIND A YHI CERTIFIED ENROLLMENT COUNSELOR NEAR YOU](#)

# Designations

## How to designate

**Step 3.** To locate an AOR, Search by Location or Search by Name



The screenshot displays a search interface titled "Search for a Certified Agent or Broker". It features two search options separated by "OR".

**Search by location:**

- Zip code: 83843
- Distance: Any (dropdown menu)
- Unit: miles
- Languages: Select an Option (dropdown menu)
- SEARCH button

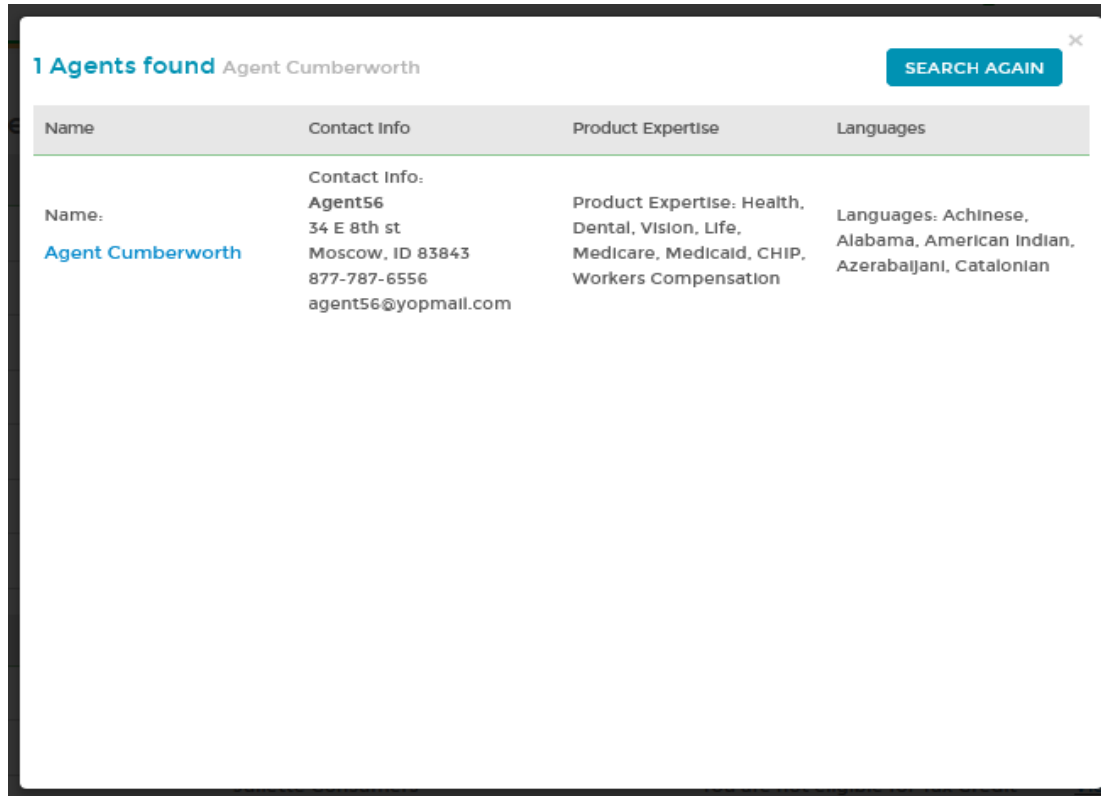
**Search by Name:**

- First Name: Agent
- Last Name: Cumberworth
- Company Name: (empty field)
- SEARCH button

# Designations

## How to designate

**Step 4.** Click name of the agent highlighted in blue



1 Agents found Agent Cumberworth SEARCH AGAIN ×

Name	Contact Info	Product Expertise	Languages
Name: <b>Agent Cumberworth</b>	Contact Info: Agent56 34 E 8th st Moscow, ID 83843 877-787-6556 agent56@yopmail.com	Product Expertise: Health, Dental, Vision, Life, Medicare, Medicaid, CHIP, Workers Compensation	Languages: Achinese, Alabama, American Indian, Azerabajani, Catalanian

## Designations

### How to designate

#### Step 5. Click Continue

### Agent Selection

Selecting an agent as your representative allows them to access your account, see your information, and make changes on your behalf.

[BACK](#) [SEARCH AGAIN](#) [CONTINUE](#)

**Broker profile photo thumbnail**

**Agent Cumberworth**  
34 E 8th st, Moscow, ID 83843  
877-787-6556  
agent56@yopmail.com

Product Expertise	Health, Dental, Vision, Life, Medicare, Medicaid, CHIP, Workers Compensation
Languages Spoken	Achinese, Alabama, American Indian, Azerabaljani, Catalanian
State License Number	4354354353
Clients Served	Individuals / Families

**E 8th St**  
[View larger map](#)

Map data ©2019 Terms of Use Report a map error

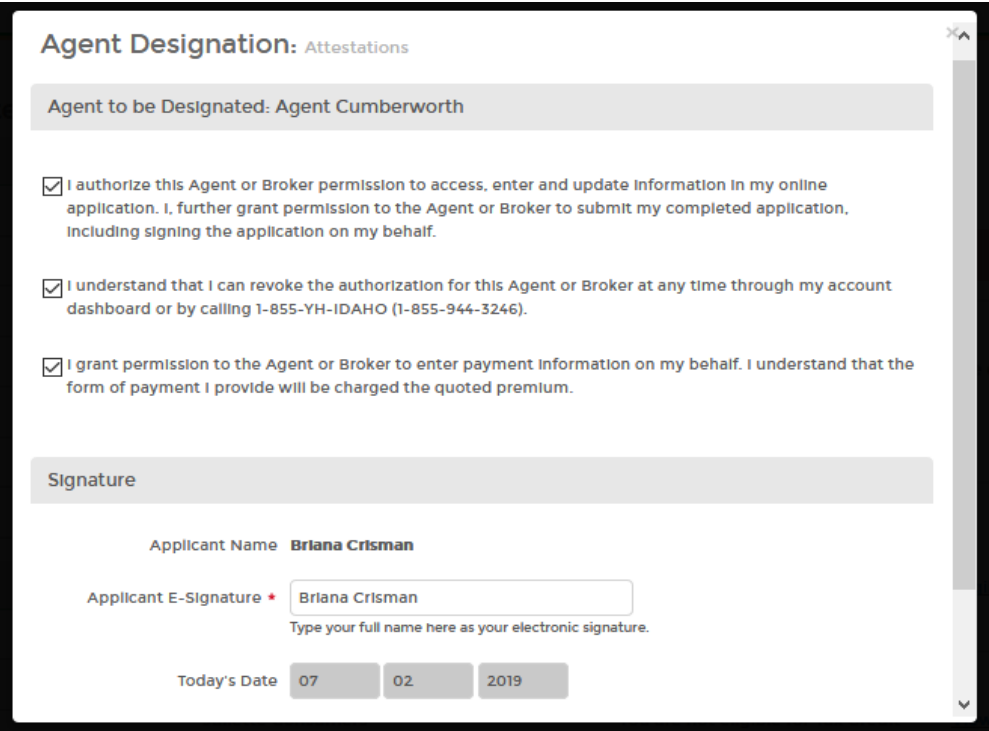
# Designations

## How to designate

**Note:** The consumer must agree and check the following statements.

**Step 6.** Click each check box and enter consumers name in the e-Signature.

**Step 7.** Scroll down to click **Confirm**.



The screenshot shows a web form titled "Agent Designation: Attestations". At the top, it says "Agent to be Designated: Agent Cumberworth". Below this are three checked checkboxes with the following text:

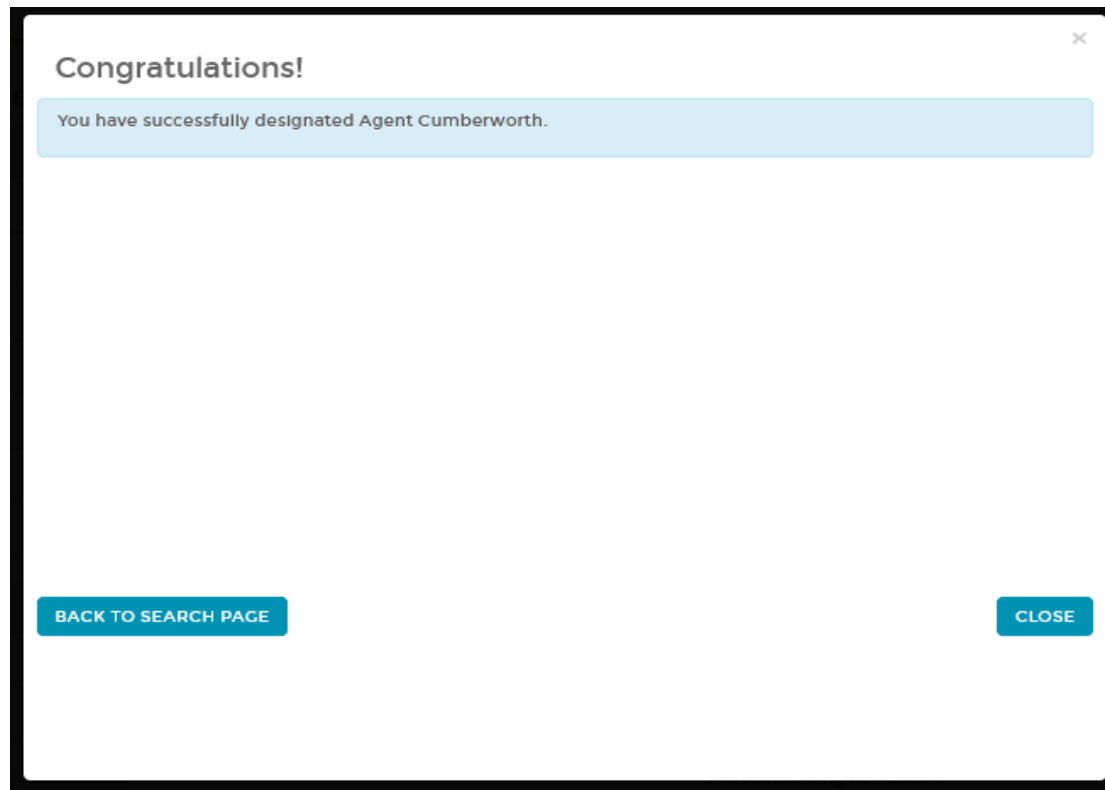
- I authorize this Agent or Broker permission to access, enter and update information in my online application. I further grant permission to the Agent or Broker to submit my completed application, including signing the application on my behalf.
- I understand that I can revoke the authorization for this Agent or Broker at any time through my account dashboard or by calling 1-855-YH-IDAHO (1-855-944-3246).
- I grant permission to the Agent or Broker to enter payment information on my behalf. I understand that the form of payment I provide will be charged the quoted premium.

Below the checkboxes is a "Signature" section. It includes the text "Applicant Name Briana Crisman" and "Applicant E-Signature \* Briana Crisman". A note below the signature field says "Type your full name here as your electronic signature." At the bottom, there is a "Today's Date" field with three dropdown menus showing "07", "02", and "2019".

# Designations

## How to designate

### Step 8. Click **Close**



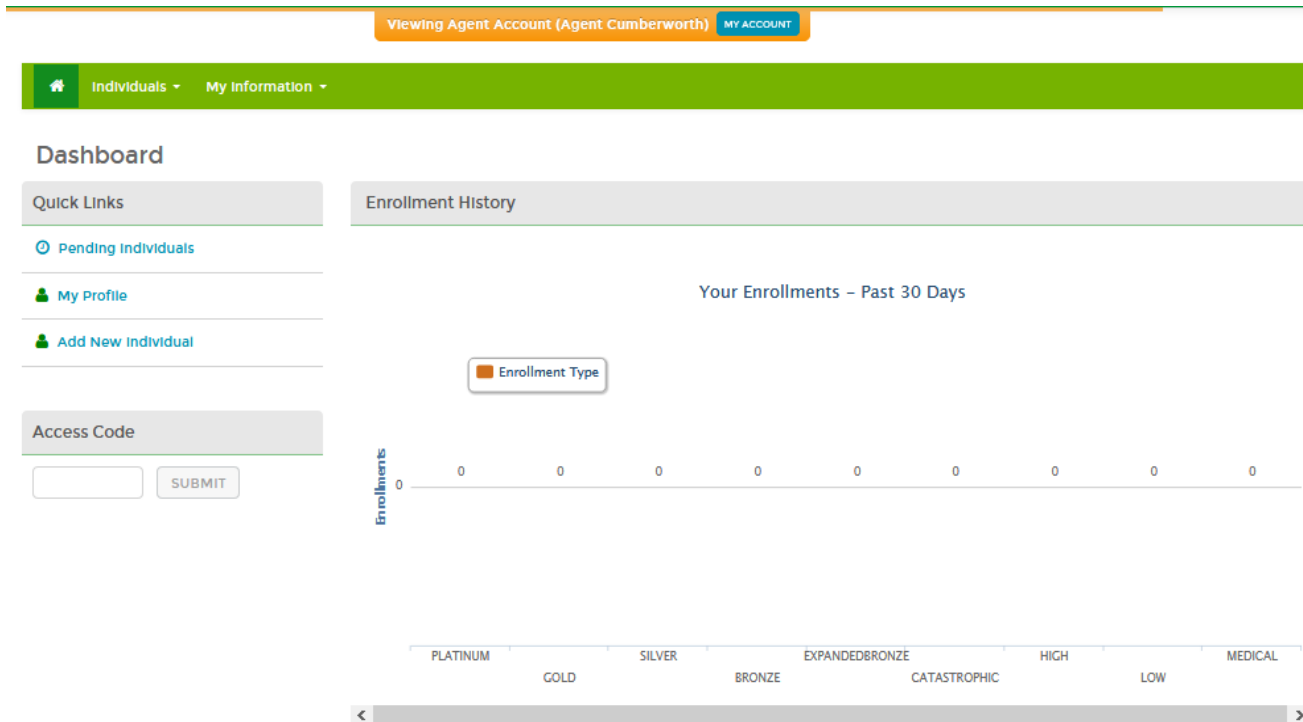


# ACCEPTING DESIGNATIONS

## Accepting the Designation

Step 1. Log-in to Agent Portal

Step 2. Click Pending Individuals under Quick Links



## Accepting the Designation

**Step 3.** Click the consumers name in blue or gear under “Actions”  
Clicking the gear Icon will allow to accept from a drop down.

Viewing Agent Account (Agent Cumberworth) [MY ACCOUNT](#)

Individuals ▾ My Information ▾

Individuals 1 Pending Individual

Refine Results By [\(Reset all\)](#)

First Name

Last Name

Request Sent

From:

To:

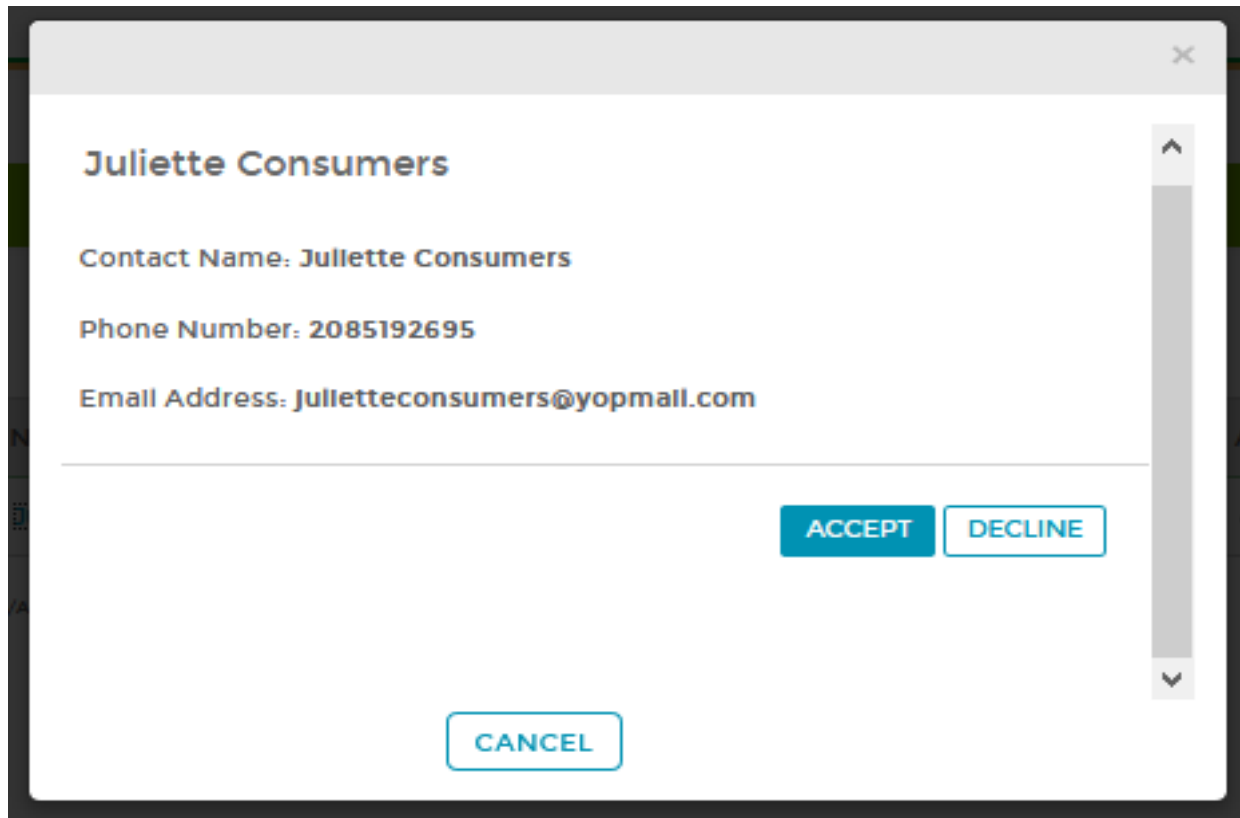
[GO](#)

Name	FAMILY SIZE	Request Sent	Actions
<a href="#">Juliette Consumers</a>	1	07/02/2019	 Accept Decline

N/A - Not Available

# Accepting the Designation

## Step 4. Click Accept



A screenshot of a web-based dialog box titled "Juliette Consumers". The dialog box has a light gray header with a close button (X) in the top right corner. The main content area is white and contains the following text:

**Juliette Consumers**

Contact Name: Juliette Consumers

Phone Number: 2085192695

Email Address: julietteconsumers@yopmail.com

Below the text, there is a horizontal line. To the right of the line, there are two buttons: "ACCEPT" (a solid teal button) and "DECLINE" (a white button with a teal border). At the bottom center of the dialog box, there is a "CANCEL" button (a white button with a teal border). A vertical scrollbar is visible on the right side of the dialog box.

# Consumer Connector Tools

## Book of Business

## Objectives

- About the YHI Book of Business (BoB)
- Efficient & Effective BoB Practices
  - Download your BoB report
  - Navigating your BoB report
  - Tips and tricks
- Conducting a BoB Transfer

# YHI Book of Business

## What is it?

- Client management system
- Formatted in a MS Excel spreadsheet
- Contains a list of your designated consumers
- Contains data specific to the consumers YHI enrollment

# YHI Book of Business

## Why should you use it?

- Organize and prioritize consumer cases
- Easily navigate the consumer's enrollment needs
- To better assist your consumer in the enrollment process
- To maintain closer relationships with highly valued consumers
- Simultaneously nurture less urgent consumer cases



# Efficient & Effective BoB Practices

## Daily downloads

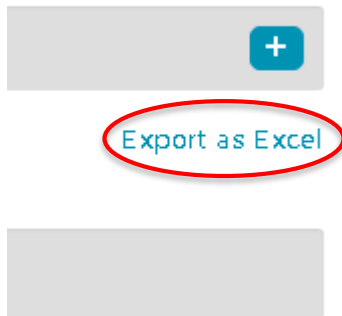
- Log into your YHI Portal
- Click the “Individuals” drop down in the horizontal tool bar
- Select “Active Individuals”



# Efficient & Effective BoB Practices

## Daily downloads

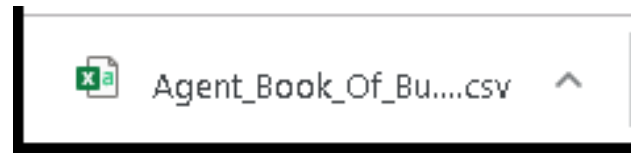
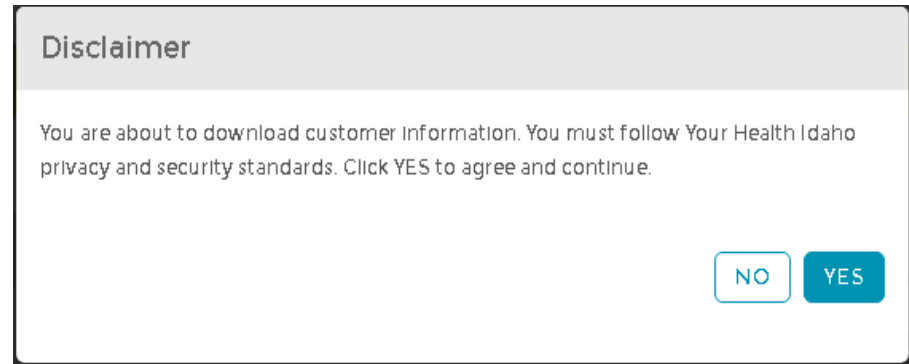
- A new page containing the list of active individuals in your Book of Business will populate
- Click the “Export as Excel” below the horizontal search bar to download your daily Book of Business report



# Efficient & Effective BoB Practices

## Daily downloads

- A disclaimer will pop up
- Click “Yes” to proceed
- The report will download, and the icon will appear at the bottom-left of your browser screen
- Click the icon to open the report



# Efficient & Effective BoB Practices

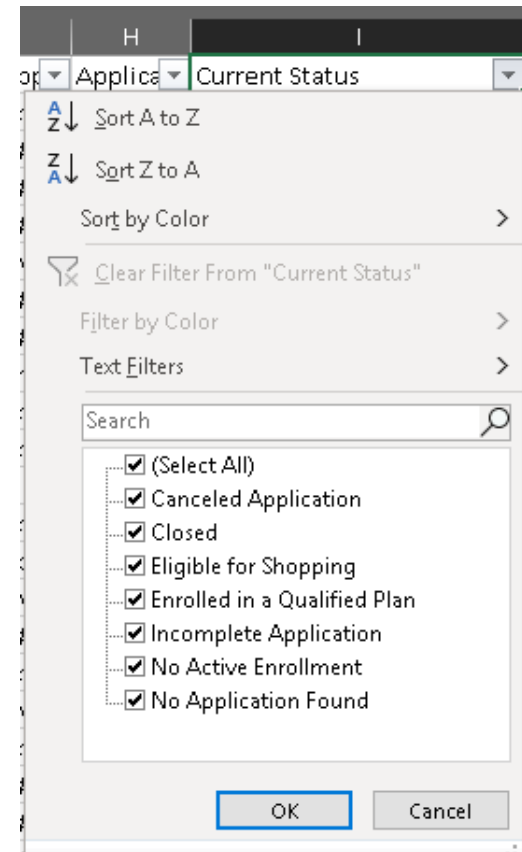
## Navigating your report

- The report will indicate:
  - Consumer's name
  - Consumer's contact information
  - Details about the household application
  - Details about the plan in which the consumer is enrolled

# Efficient & Effective BoB Practices

## Navigating your report

- Each column contains different information
- For example, “Current status” contains information regarding the status of the consumer’s account



# Efficient & Effective BoB Practices

## Tips and Tricks

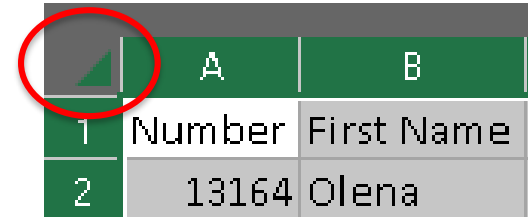
- Navigating your BoB is much easier when you have the proper settings.
- The following slides will teach to how to adjust your spreadsheet for easier navigation, widen columns, filter data, temporarily hide information, and permanently remove unnecessary data.

# Efficient & Effective BoB Practices

## Tips and Tricks

### Step 1: “Select All”

- Use to adjust the entire worksheet
- Click the diagonal triangle at the top left to highlight the entire spreadsheet
- Every cell will be highlighted, except for the first cell



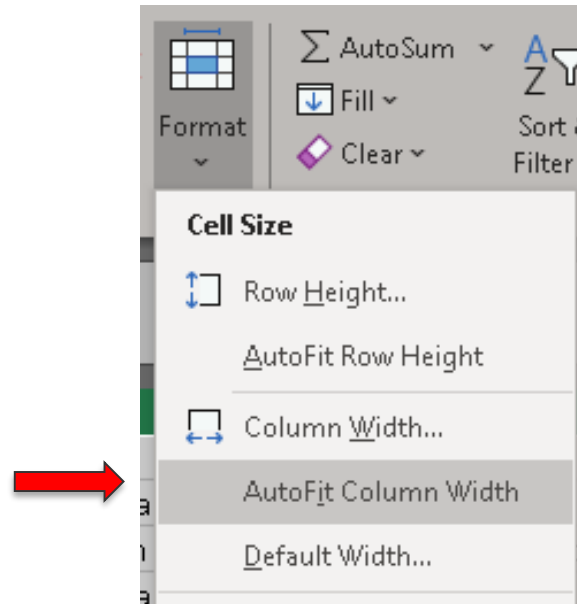
	A	B
1	Number	First Name
2	13164	Olena

# Efficient & Effective BoB Practices

## Tips and Tricks

### Step 2: “AutoFit”

- Use to evenly widen every column
- Click the “Home” tab
- Click “Format” in the top-right of the tool bar under the “Cells” section
- Select “AutoFit Column Width” in the drop-down menu



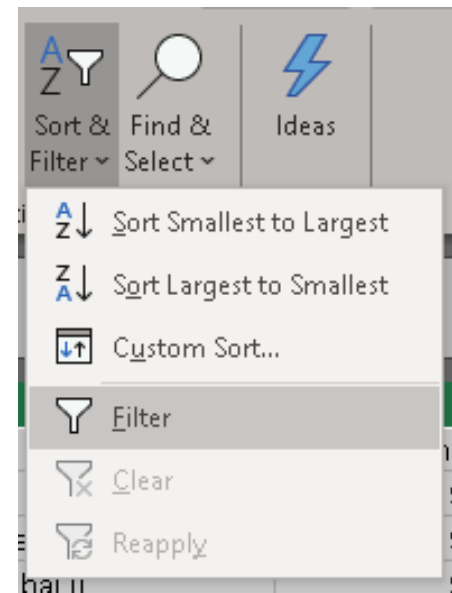


# Efficient & Effective BoB Practices

## Tips and Tricks

### Step 3: “Filter”

- Use to sort the data contained in each column
- Click the any cell in the first row
- Click “Sort & Filter” in the top-right of the tool bar under the “Editing” section
- Select “Filter” in the drop-down menu




# Efficient & Effective BoB Practices

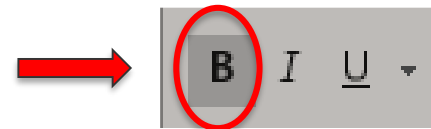
## Tips and Tricks

### Step 4: “Bold”

- Use to distinguish the top title row from the data below
- Click the number “1” to highlight the title row
- Click “B” in the top-right of the tool bar under the “Cells” section
- These steps can be used to bold any information within the spreadsheet



	A	B	C
1	Number	First Name	Last Name
2	13164	Olena	Smith

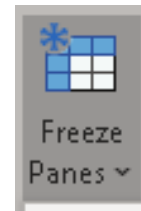


# Efficient & Effective BoB Practices

## Tips and Tricks

### Step 5: “Pane Freeze”

- Use to keep the title row visible as you scroll throughout the spreadsheet
- Click any cell in the title row
- Select the “View” tab above the tool bar
- Click Freeze Panes
- Select Freeze Top Row

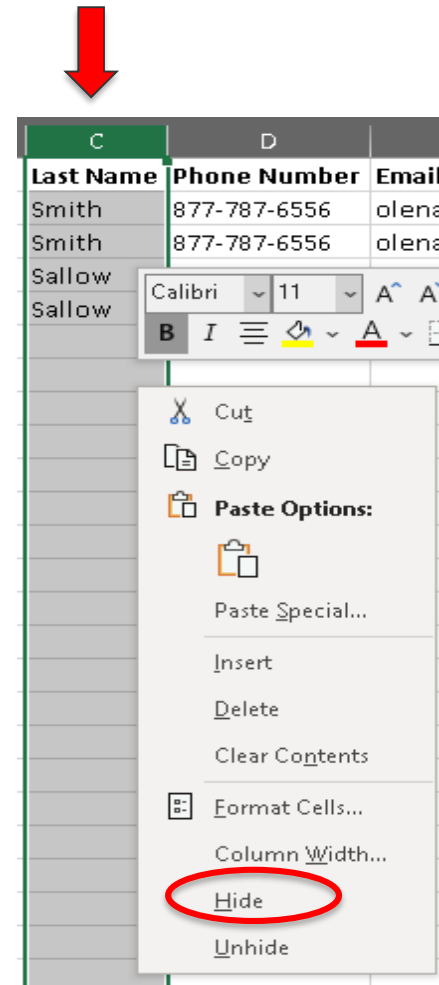


# Efficient & Effective BoB Practices

## Tips and Tricks

### Step 6: “Hide Data”

- Use to temporarily hide data you don't need now, but may want later
- Click and highlight the column(s) or row(s) you wish to hide
- Right-click using your mouse to open the drop-down menu
- Select “Hide”
- To unhide, follow the same steps. Then, click “unhide”

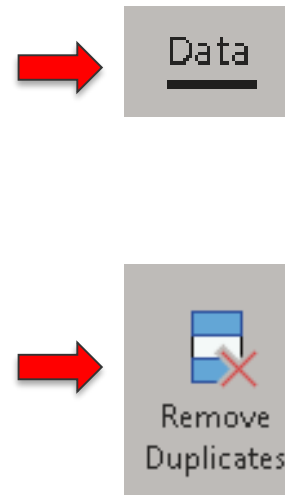


# Efficient & Effective BoB Practices

## Tips and Tricks

### Step 7: “Remove Duplicates”

- Use to remove duplicate households
- Follow steps to “Select All”
- Click the “Data” tab above the tool bar
- Click “Remove Duplicates”

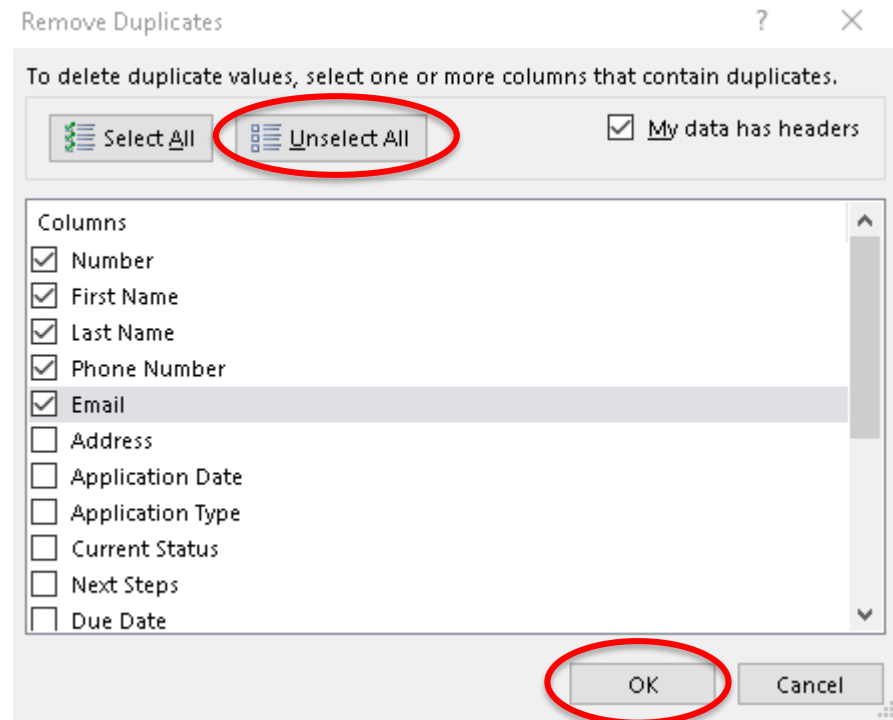


# Efficient & Effective BoB Practices

## Tips and Tricks

### Step 7: “Remove Duplicates”

- Click “Unselect All”
- Check mark the boxes next to the following data fields:
  - ✓ Numbers
  - ✓ First Name
  - ✓ Phone Number
  - ✓ Email
- Click “OK” when finished
- Households with identical data in the above fields are often duplicates due to various factors



# Book of Business Transfers

- Book of Business (BoB) transfers are conducted when an agent or broker wants to sell or transfer their Book of Business to another YHI certified agent
- YHI recognizes an agent-to-consumer relationship
- The transaction can be conducted between two agents, agent to agency, or agency to agency

# Book of Business Transfers

## BoB Transfer Requirements

1. Complete the **Book of Business Transfer Request** form
  - The “selling” and “purchasing” agents must sign
2. Submit a list of consumers in excel sheet format
  - If transferring entire BoB, the consumer list is not required
3. Email documents to [Connectors@yourhealthidaho.org](mailto:Connectors@yourhealthidaho.org)



# Book of Business Transfers

## Special Circumstances

- For agencies that own the BoB upon termination of an agent, the agency must submit the signed contract indicating agency ownership
- Consumers have the right to choose their preferred Agent of Record (AOR)
- YHI certified agents leaving an agency while maintaining YHI certification, must update YHI by contacting [Connectors@yourhealthidaho.org](mailto:Connectors@yourhealthidaho.org)

# Book of Business Transfers

## Maintaining YHI Certification after BoB Transfer

- Agents leaving an agency must complete the following:
- Update YHI by contacting [Connectors@yourhealthidaho.org](mailto:Connectors@yourhealthidaho.org)
- Update their YHI agent portal log-in credentials, if email has changed
- Update their YHI agent portal profile with their new contact information (email, phone number, office address, etc.)
- Update their log-in credentials for Edvance360, the learning management system (LMS), if email has changed

### Our Partners

Additional resources and tools for Consumer Connectors can be found within the [Our Partners](#) section of the YHI website.

- From the YHI home page, scroll to the very bottom.
- [Our Partners](#) is located under "Opportunities"
- [www.yourhealthidaho.org](http://www.yourhealthidaho.org) > Opportunities > [Our Partners](#)

# YHI Systems and Tools for Consumer Connectors

- Edvance360 (LMS)
  - All PowerPoints and trainings
  - Important dates
- YHI Policy Manual, Code of Federal Regulations, state regulations
- YHI Website
- Consumer Support: [support@yourhealthidaho.org](mailto:support@yourhealthidaho.org)  
**OR** 1-855-YH-IDAHO (1-855-944-3246)
- Consumer Connector support: [connectors@yourhealthidaho.org](mailto:connectors@yourhealthidaho.org)

# YHI Notices

# YHI Notices

## Secure In-Box

- Notifications regarding certain changes to your consumer's account will be sent to via your secure inbox
- Be sure to check your inbox regularly
- Message cannot be deleted from your secure inbox
- The following list contains a few reasons you may receive a notification:
  - Changes in Eligibility
  - Status change: Non-Financial to Financial
  - Financial: Life Changing Event (LCE) Notice
  - LCE: Loss of Coverage
  - LCE: SEP Granted

## YHI Notices

### Daily Notice Summary

🏠 Individuals ▾ My Information ▾

Notifications 703 items in Inbox; 0 unread

Search

Folders

Inbox 0

✉	From ↕	Subject ↕	Date ↕	📎
	Exchange Admin	Book of Business Notice Summary	01:09 AM	📎
	Exchange Admin	Book of Business Notice Summary	Tue Jul 30	📎
	Exchange Admin	Book of Business Notice Summary	Wed Jul 24	📎
	Exchange Admin	Book of Business Notice Summary	Tue Jul 23	📎
	Exchange Admin	Book of Business Notice Summary	Fri Jul 19	📎
	Exchange Admin	Book of Business Notice Summary	Tue Jul 16	📎
	Exchange Admin	Book of Business Notice Summary	Thu Jul 11	📎
	Exchange Admin	Book of Business Notice Summary	Wed Jul 03	📎
	Exchange Admin	Book of Business Notice Summary	Tue Jul 02	📎
	Exchange	Book of Business Notice Summarv	Thu Jun 27	📎

# YHI Notices

## Daily Notice Summary

July 31, 2019

Dear David

1 Customer have received one or more notices on July 30, 2019.

---

### Notice Summary

---

1. Carlota

Phone: 208-670-

Email: \_\_\_\_\_@pmt.org

\_\_\_\_\_, ID # \_\_\_\_\_

1. SEP Event Notice-Your Special Enrollment Period Expires on 09/27/2019



# **New Account Management**

## **Financial Application**

# Financial Eligibility

- All consumers who want to apply for APTC or CSR must submit an application with DHW, <https://idalink.idaho.gov/>
- The application process can be done completely online through the idalink system or by calling 1-877-456-1233. All contact with DHW should be made via 1-877-456-1233 unless a specific number is listed on the notice
- Have your client designate you as the Agent Authorized Representative at DHW (this designation does not apply to YHI accounts)
- The *Agent Guide to idalink* is available on the **Partner Tools** page at YourHealthIdaho.org

# Prepare to Apply

Consumers need to provide information about each member of their tax household to apply. Tell consumers to be prepared with the following information:

- Birthdates
- Social Security numbers (or document numbers for legal immigrants)
- Citizenship or immigration status
- IRS tax returns for previous years
- Employer and income information (i.e., pay stubs, and W-2 forms)
- Information on current health insurance or employer-sponsored coverage for which anyone in their household is eligible

# ACCOUNT MANAGEMENT TOOLS

## Managing personal information

DO	DON'T
Use an email account that the consumer has access to	Don't create a new account that the consumer doesn't have access to
Help the consumer to set up password manager, like LastPass or KeyPass	Don't hand the consumer a paper copy of all their passwords and logins
Set up your own password manager, like LastPass, Keypass, or other similar programs	Don't store consumers' information in writing
Send secure emails to <a href="mailto:support@yourhealthidaho.org">support</a> or <a href="mailto:connectors@yourhealthidaho.org">connectors@yourhealthidaho.org</a>	Don't send PII unprotected to YHI (ie; SSN, first and last name, DOB, addresses, etc.)
Learn more about how to secure and protect both your and your consumers' PII	Don't assume that emails are always secure.

# ACCOUNT MANAGEMENT TOOLS

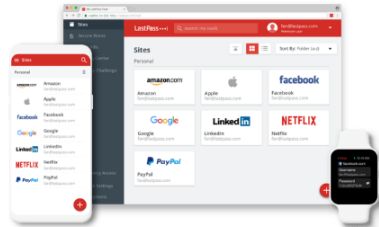
## Managing personal information

LastPass

Get the #1 most reliable password manager and try LastPass Premium for 30 days.

**One password.  
Zero headaches.**

| LastPass takes care of the rest.



### Free features

- ✓ Secure password vault ⓘ
- ✓ Access on all devices ⓘ
- ✓ One-to-one sharing ⓘ
- ✓ Save and fill passwords ⓘ
- ✓ Password generator ⓘ

Create an account

[or Log In](#)

Email

Master Password

Strength

Confirm Master Password

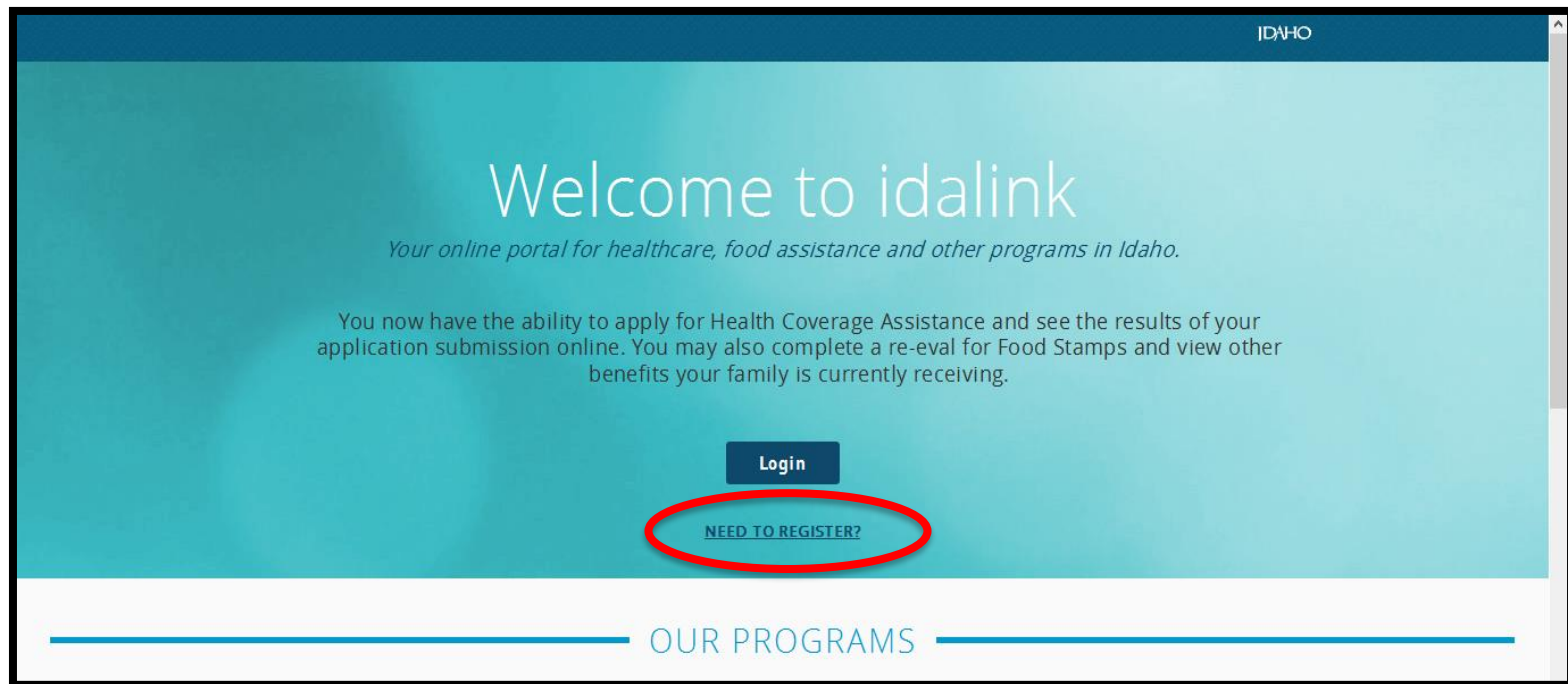
Reminder (Optional)

Sign Up - It's Free

By completing this form, I agree to the [Terms](#) and [Privacy Policy](#). I want to receive promotional emails, unless I [opt out](#).

# The Application Process

- To set up a consumer account, go to [idalink](#).
- Click **Need to Register?**



# The Application Process

- Enter the consumer's information and click **Register**.

*\* All fields are required*

**Name:**  First Name  Last Name


**Date of Birth:**  MM /  DD /  YYYY

**Social Security Number:**  -  -  [Don't have a SSN?](#)

**Email Address:**  Email Address

**Confirm Email Address:**  Confirm Email Address

**Security Check**

I'm not a robot  reCAPTCHA  
Privacy - Terms


Please complete the reCaptcha security check by clicking the checkbox.

# The Application Process

click **Start Now** in the **Apply for Health Coverage Assistance** section.

### MY BENEFITS


Your household is not currently receiving benefits (such as Food Stamps and Health Coverage Assistance). You may [Apply for Health Coverage Assistance](#) or access [Frequently Used Forms](#).



#### APPLY FOR HEALTH COVERAGE ASSISTANCE

The Health Coverage Assistance Program provides health coverage assistance according to individuals needs. Eligible families may qualify for Medicaid or Advance Payment of Premium Tax Credits to help pay health coverage premiums or affordable private health insurance plans.

**START NOW**



#### FREQUENTLY USED FORMS

To access a list of the most commonly used forms, click the link below. You may download and print any form from the Forms page.

**START NOW**



# The Application Process

Click **Next** to continue.

The screenshot shows a web application interface for applying for health coverage assistance. At the top, there is a navigation bar with links for 'My Benefits', 'My Account', 'Actions', 'Forms', 'Logout', and 'Help'. A user profile for 'Randy Gardner' is visible on the left, with sections for 'Personal Info', 'Income', and 'Review & Submit'. A 'Time Remaining: 55h' indicator is present in the top right. The main heading is 'Applying for Health Coverage Assistance Online'. Below this, three steps are outlined: 'Enter Your Information', 'Review & Submit', and 'Eligibility Determination'. A 'Next >' button is highlighted with a red circle at the bottom right of the page.

Welcome,  
**Randy Gardner**

Personal Info  
Income  
Review & Submit

My Benefits | My Account | Actions | Forms | Logout | Help

Time Remaining: 55h

## Applying for Health Coverage Assistance Online

**Enter Your Information**  
You will be asked a series of questions to determine whether you or other members of your household are eligible to receive Health Coverage Assistance.

**Review & Submit**  
You will have an opportunity to review your completed form before submitting it to us.

**Eligibility Determination**  
You will receive an eligibility determination after your application has been submitted. If you are not eligible for Medicaid, your information will be used to determine eligibility for tax credits to help pay health coverage premiums or affordable private health insurance plans.

**Next >**

# The Application Process

Click **Next** to continue.

Last saved Jun 28, 2016 4:23 PM IDAHO

Welcome,  
**Randy Gardner**

My Benefits | My Account | Actions | Forms | Logout | Help |

**Personal Info**

Income

Review & Submit

### Terms & Conditions

By choosing to apply for a subsidy for healthcare assistance, please be aware of the following conditions:

- Healthcare assistance may come in the form of a tax credit to assist in paying insurance premiums through the Marketplace or Medicaid coverage. By applying for this subsidy, you will be considered for both programs.
- If you, or members of your family, are found eligible for Medicaid, you will receive Medicaid for those family members and not a tax credit.
- If your child is eligible for Medicaid and has a non-custodial parent, cooperation with a child support order is required.
- In order to receive a Premium Tax Credit to purchase insurance, you must file taxes for the current calendar year.
- If you are already receiving health insurance from VA, Peace Corp, Tri-Care, Medicare OR if your employer offers coverage that meets the minimum value standards, you will not be eligible to receive a tax credit.

[← Back](#) [Next →](#)

Forms | Contact Us | Privacy & Security

IDAHO DEPARTMENT OF  
HEALTH & WELFARE

# The Application Process

Click **Next** to continue.

The screenshot displays the Idaho Health Coverage Assistance application interface. The top navigation bar includes 'Welcome', 'Last saved Aug 4, 2014 2:00 PM', 'My Account', 'Logout', 'Help', and the 'IDaho' logo. A 'Time Remaining: 71h' indicator is visible. The main content area is titled 'Personal Info' and includes a sub-section 'YOU MAY NEED:' with the following items:

- Birth Dates
- Social Security Numbers
- 🕒 **Estimated Time needed to complete this section: 5 minutes**

At the bottom of the page, there are two buttons: a blue 'Back <' button and a green 'Next >' button, which is circled in red. The footer contains 'Contact Us | Privacy & Security'.

The **You May Need** section provides tips for what information the consumer needs to complete each section, along with a time estimate.

# The Application Process: Agent Authorized Representative

Have the consumer select you as their Agent Authorized Representative.

Select **Yes** and select your name in **Agent Name**.

The screenshot shows a web application interface for IDVHO. The top navigation bar includes "My Benefits", "My Account", "Actions", "Forms", "Logout", and "Help". The main content area is titled "Designate an Agent Authorized Representative".

On the left, a sidebar menu shows "Personal Info" expanded, with sub-items: "About You", "Your Household", "Tax Status", "Income", and "Review & Submit".

The main form contains the following sections:

- Designate an Agent Authorized Representative:** A heading followed by explanatory text. Below it, the question "Would you like to designate an Agent Authorized Representative?" has two radio buttons: "Yes" (which is selected and circled in red) and "No".
- Designate an Authorized Representative:** A heading followed by text explaining that agents are selected from a list. Below this is a dropdown menu for "Agent Name:" which is open, showing a search bar and a list of options: "No Agent Authorized Representative", "Annie Agent (123456)", and three "Other Agent (000000)" entries.
- Basic Info:** A heading followed by input fields for "Name" (First Name, Middle, Last Name, Suffix) and "Former Name(s)" (First Name, Middle, Last Name, Suffix). There are "Remove" and "Add Another Former Name" buttons below.

At the top right of the page, it says "Last saved Jun 28, 2016 4:27 PM" and "IDVHO".

# The Application Process: Contact Information

The consumer must select which method of communication they prefer.

**IMPORTANT:** DHW does not send consumer notices via email, but YHI does. If email is not selected as the preferred method of contact, only paper copy is sent from YHI, which delays the notification process.

The screenshot shows a web form titled 'Contact Information' with a dark blue header. The header contains the text 'Last saved May 5, 2016 4:15 PM' and navigation links for 'My Benefits', 'My Account', 'Forms', 'Logout', and 'Help'. The 'ida link' logo is in the top right corner. The form fields are as follows:

- Physical Address:** A link '(clear)' is next to the label. There are three input fields: 'Physical Address, including Apt/Unit/Bldg Number', 'C/O, Attn, etc.', and a row with 'City', 'State' (dropdown), 'Zipcode', and 'County'.
- No fixed address:** A checkbox labeled 'No fixed address'.
- Mailing Address is different than Physical?:** Radio buttons for 'Yes' and 'No' (selected).
- Contact phone:** Three rows of phone number input fields, each with a dropdown menu for area code.
- Preferred Method of Contact:** A dropdown menu currently set to 'Email'.
- Language Preference:** Two dropdown menus: 'Primary Language' (set to 'Select Language') and 'Written Language' (set to 'English').

# The Application Process: Identity Verification

Once the consumer enters their personal information, verify their identity. The application uses Experian (a credit reporting company) to generate address and credit-related questions to verify identity.

Welcome, [Name] Last saved Aug 4, 2014 3:04 PM My Account Logout Help

Time Remaining: 70h

### Identity Verification

Terms & Conditions

To protect your privacy, you will need to complete Identity Verification successfully, before requesting higher account privileges. You are providing consent to Experian to access your personal information to conduct ID Verification on behalf of CMS. Below are a few items to keep in mind.

- Ensure that you have entered your legal name, current home address, primary phone number, date of birth and email address correctly. We will only collect personal information to verify your identity with Experian, an external identity verification provider.
- Identity Verification involves Experian using information from your consumer report profile to help confirm your identity. As a result, you may see an entry called a "soft inquiry" on your Experian consumer report. Soft inquiries are only visible to you, will never be presented to third parties, and do not affect your credit score. The soft inquiry will be titled "CMS Proofing Services" and will be removed from your Experian consumer report after 25 months.
- You may need to have access to your personal and consumer report information, as the Experian application will pose questions to you, based on data in their files.

Progress: Personal Info (checked), About You (checked), Identity Verification (active), Your Household (checked), Tax Status (checked), Member Profiles (checked), Income (checked), Additional Questions (checked), Review & Submit (disabled)

Navigation: Back, Next

Contact Us | Privacy & Security

Welcome My Details My Account Logout Help

### Identity Verification

In order to establish your identity we need to ask you a series of questions that enable us to prove you are who you say you are. If you answer these questions correctly, you will be able to proceed with your Health Coverage Assistance application.

Please select the number of bedrooms in your home from the following choices. If the number of bedrooms in your home is not one of the choices, please select "None of the above?"

2  
 3  
 4  
 5  
 None of the above

Using your date of birth, please select your astrological sun sign of the zodiac from the following choices?

Aquarius  
 Pisces  
 Scorpio  
 Taurus  
 None of the above

Which of the following is a current or previous employer? If there is not a matched employer, please select "None of the above"

Transwestern Publishing  
 USPS  
 Northrup Grumman  
 Arlys Road Beef  
 None of the above

According to your credit profile, you may have opened an auto loan in or around April 1998. What was the make and model of the car for which you took out this loan? If you do not have such an auto loan, select "None of the above"

Honda Civic  
 Toyota Jariis  
 Nissan Sentra  
 Ford Focus  
 None of the above

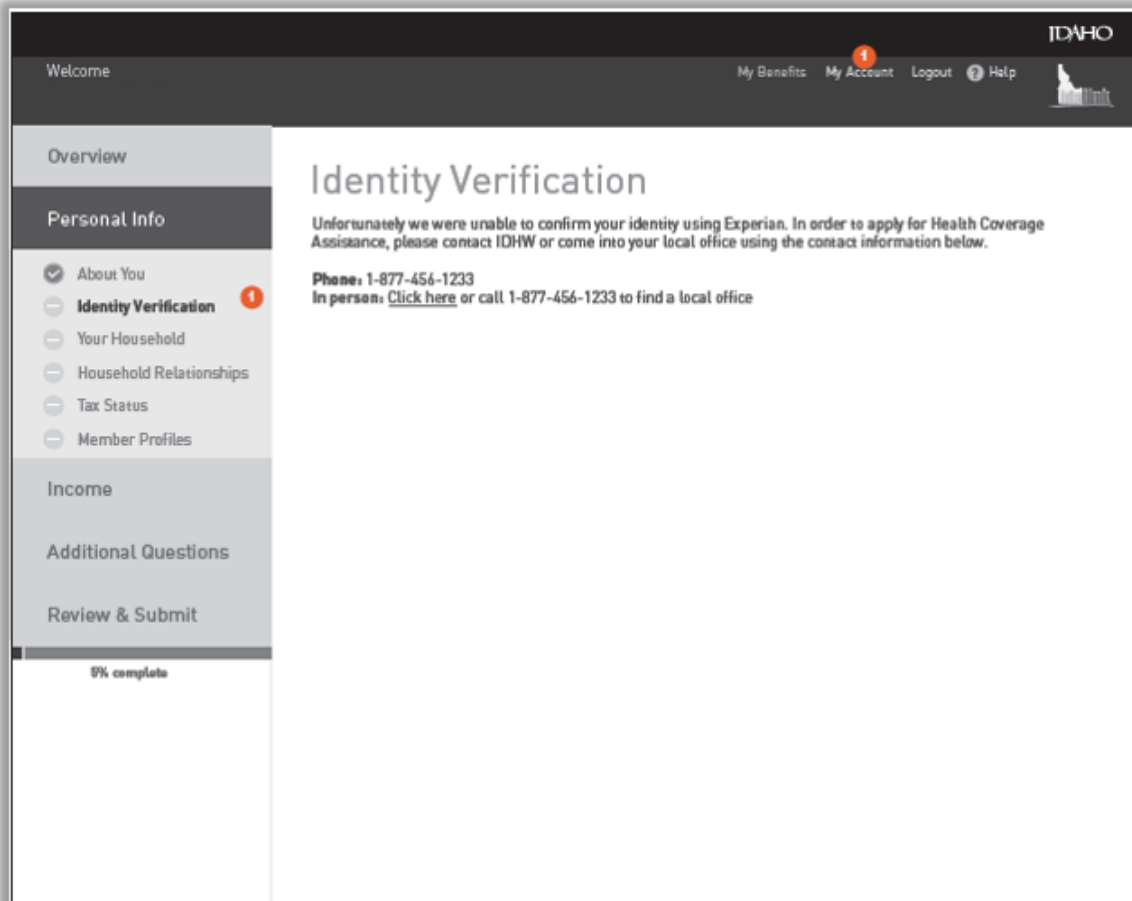
Navigation: Back, Next

# The Application Process: Identity Verification

The screenshot shows a web application interface for IDAHO. At the top, there is a navigation bar with "Welcome" on the left and "My Benefits", "My Account", "Logout", and "Help" on the right. The main content area is titled "Identity Verification" and contains a message: "Thank you! We were able to securely verify your identity using Experian and you can now proceed to the next step in your Health Coverage Assistance application." On the left side, there is a sidebar menu with sections: "Overview", "Personal Info", "Income", "Additional Questions", and "Review & Submit". Under "Personal Info", there are several items with checkboxes: "About You" (checked), "Identity Verification" (checked), "Your Household", "Household Relationships", "Tax Status", and "Member Profiles". At the bottom of the sidebar, there is a progress indicator showing "5% complete". At the bottom of the main content area, there are two buttons: "< Back" and "Next >".

If the consumer's application is entered correctly, a confirmation appears that their identity is verified. Move to the next part of the application process.

# The Application Process: Identity Verification Failed



If the system is unable to verify identity automatically, follow the on-screen instructions for the manual verification process.



# The Application Process: Your Household

The screenshot shows a web application interface for 'Your Household'. The top navigation bar includes 'Welcome', 'Last saved Aug 5, 2014 9:38 AM', 'My Account', 'Logout', 'Help', and 'Link'. A 'Time Remaining 52h' indicator is present. The left sidebar contains a progress menu with sections: 'Personal Info' (checked), 'About You' (checked), 'Identity Verification' (unchecked), 'Your Household' (checked), 'Tax Status' (checked), 'Member Profiles' (checked), 'Income' (checked), 'Additional Questions' (checked), and 'Review & Submit' (unchecked). The main content area is titled 'Your Household' and asks 'How many people are in your household, even if they are not applying for health coverage assistance?'. A counter shows '2' with minus and plus buttons. Below, there are two household member sections. 'Household member 1 of 2' includes fields for Name, 'Applying for health coverage assistance?' (radio buttons), Social Security Number, Date of Birth, and Gender. 'Household member 2 of 2' includes fields for Name, 'Applying for health coverage assistance?' (radio buttons), Social Security Number (with 'SSN Unknown' checkbox), Date of Birth, Gender (radio buttons), and 'Your Relationship to Member' (dropdown menu). A 'Remove Member' button is next to the second member section. At the bottom, there are 'Back' and 'Next' buttons. The footer contains 'Contact Us | Privacy & Security' and the 'HEALTH & WELFARE' logo.

Enter information about members of the consumer's household and whether they are applying for coverage.

The consumer must include *all* household members in this reporting section.

# The Application Process: Tax Status

The screenshot shows a web application interface for the Idaho Department of Health & Welfare (IDVHO). The page is titled "Tax Status" and includes a sidebar with navigation options: Personal Info, About You, Identity Verification, Your Household, Tax Status (highlighted), Member Profiles, Income, Additional Questions, and Review & Submit. The main content area contains the following sections:

- Time Remaining:** 52h
- Introduction:** "In this section, we want you to tell us about your household's tax situation. You do not need to file taxes to apply for Health Coverage Assistance. If you do file taxes, you should include anyone you include on your tax return as a dependent, even if they don't live with you. You should also include any children who live with you, even if they make enough money to file a tax return themselves, and anyone else under 21 who you take care of and who lives with you."
- Question:** "Does this household plan to file taxes for the 2014 tax year?" with radio buttons for Yes and No.
- Household Members Tax Status:** A table with columns for Name, Filing Status, and Primary Filer. The table contains two entries: "Primary Tax Filer" and "Claimed as Dependent by non-Household member".
- Dependents Living Outside the Home:** A question "Are there any dependents who are living outside the home?" with radio buttons for Yes and No.

At the bottom of the form, there are "Back" and "Next" buttons. The footer includes "Contact Us | Privacy & Security" and the IDVHO logo.

Provide information about the consumer's tax status.

**It is not** a requirement to have filed taxes in previous years, but the consumer must file taxes in the upcoming year to receive the premium tax credit for the current enrollment period.

# The Application Process: Member Profiles

Enter details for each member of the consumer's household.

Welcome, [Name] Last saved Aug 4, 2014 2:41 PM My Account Logout Help

Time Remaining 71h

## Member Profiles

Please ensure the information is accurate and complete for each household member.  
When you have completed all the sections for each household member, click **NEXT** to move forward.

**About** (Member 2 of 2)

Name:

Former Name(s):

Date of Birth:

Is Nancy applying for Health Coverage Assistance?  
 Yes  No

Social Security Number:  [Why do we need this?](#)  
 SSN Unknown

Gender:  Male  Female

**Race and Ethnicity**

Is [ ] Hispanic or Latino?  
 Yes  No  Unknown

What is [ ] race and ethnicity?  
White

**Marital Status**

What is [ ] marital status?  
Never Married

**Citizenship**

Is [ ] a U.S. Citizen?  
 Yes  No

**Disability**

Is [ ] disabled?  
 Yes  No

**Pregnancy**

Is [ ] pregnant?  
 Yes  No

[Back](#) [Next](#)

Contact Us | Privacy & Security

IDWHO DEPARTMENT OF HEALTH & WELFARE

# The Application Process: Household Income

Follow the prompts on-screen to enter the consumer's information about household income. Enter income from a job, self-employment, and other sources.

The consumer should consult a tax professional if they have further questions about what should be counted as income.

The screenshot shows a web application interface for IDHIO. The top navigation bar includes 'Welcome', 'Last saved Aug 4, 2014 2:41 PM', 'My Account', 'Logout', 'Help', and a 'link' icon. A 'Time Remaining 71h' indicator is visible in the top right. The left sidebar contains a navigation menu with 'Personal Info' (checked), 'Income', 'Additional Questions', and 'Review & Submit'. The 'Income' section is expanded, showing 'Job Income', 'Self Employment Income', and 'Other Income'. The main content area features a large illustration of money (bills and coins) and a section titled 'Income' with a description: 'In this section, you will be asked to tell us about all the income your household receives. We want to know about the most recent 4 weeks, as well as any money received quarterly or annually. In some cases, we may already have some information about your household income from your prior tax filing, interfaces, or other sources. We will show you that information and you will be able to update it or confirm it. We will walk you through three sections: Job Income, Self Employment Income and Other Income.' A 'YOU MAY NEED:' box lists 'Wage Stubs for the last 30 days' and 'Tax Returns', with an 'Estimated Time needed to complete this section: 10 minutes'. At the bottom, there are 'Back' and 'Next' buttons. The footer contains 'Contact Us | Privacy & Security'.

# The Application Process: Income Summary

After completing income, a summary page appears with the annual household income that is used by DHW to determine the consumer's eligibility for cost-savings programs.

Welcome, Last saved Aug 4, 2014 2:41 PM My Account Logout Help IDH10

Time Remaining 71h

**Personal Info** ✓

**Income**

- Job Income
- Self Employment Income
- Other Income
- Income Summary**

**Additional Questions**

Review & Submit

## Income

In this section, you will be asked to tell us about all the income your household receives. We want to know about the most recent 4 weeks, as well as any money received quarterly or annually. In some cases, we may already have some information about your household income from your prior tax filing, interfaces, or other sources. We will show you that information and you will be able to update it or confirm it.

We will walk you through three sections: Job Income, Self Employment Income and Other Income.

**YOU MAY NEED:**

- Wage Stubs for the last 30 days
- Tax Returns
- ⌚ **Estimated Time needed to complete this section: 10 minutes**

← Back Next →

Contact Us | Privacy & Security

# The Application Process: Additional Questions

The last section of the application asks about access to other types of private or public health coverage for which they may be enrolled or eligible.

The screenshot shows the 'Additional Questions' section of the application. The top navigation bar includes 'Welcome', 'Last saved Aug 4, 2014 2:49 PM', 'My Account', 'Logout', 'Help', and 'IDWHO'. A sidebar on the left lists 'Personal Info', 'Income', 'Additional Questions', 'Household Members', and 'Review & Submit'. The main content area features a large graphic with question marks and a 'Time Remaining 71h' indicator. Below the graphic, the section is titled 'Additional Questions' and includes a brief description: 'In this section, you will be asked additional information about your family's situation. These are the final questions needed to complete your application for Health Coverage Assistance.' A 'YOU MAY NEED:' box lists: 'Information about employer benefits or other health coverage', 'Information about your family's health care needs', and 'Estimated Time needed to complete this section: 10 minutes'. Navigation buttons for 'Back' and 'Next' are at the bottom.

The screenshot shows the 'Additional Questions for' section of the application. The top navigation bar includes 'Welcome', 'Last saved Aug 4, 2014 2:55 PM', 'My Account', 'Logout', 'Help', and 'IDWHO'. A sidebar on the left lists 'Personal Info', 'Income', 'Additional Questions', 'Household Members', and 'Review & Submit'. The main content area is titled 'Additional Questions for' and includes a 'Clear Remaining 71h' button. The section is divided into 'Health Coverage' and 'Medical and Living Situation'. The 'Health Coverage' section asks: 'Does [Check all that apply] currently have health coverage through any of these sources?' with options for Medicaid, CHIP, Medicare, None of the above, TRICARE, VA Health Care, and Peace Corps. It also asks 'Does [radio] have Employer Insurance?' and 'Does [radio] have any other Health Insurance?'. The 'Medical and Living Situation' section asks: 'Does [radio] need help paying for medical costs from the last 3 months?', 'Does [radio] need medical services provided in the home?', 'Does [radio] live in a medical care facility?', 'Was [radio] in foster care when she turned 18?', and 'Is [radio] incarcerated?'. Navigation buttons for 'Back' and 'Next' are at the bottom.

## Review the Application

Review the application information in detail because once submitted, the consumer cannot edit or view the information online.

Once the information is confirmed, it is highly recommended that you print two copies (one for you and one for your client). The information is needed again after the application is received by YHI.

**Application Summary**

Carefully review the information you are about to submit to ensure its accuracy. You can always print or save a copy of this information to make a hard copy of your application for Health Coverage Assistance, as long as there is still time indicated at the top of each page. Simply click on the button "header" and this will take you to the information where you can begin editing. Once your application has been submitted, no further edits are allowed.

If you would like a copy of your application, please print or save a copy using the Print button. After submission, it will no longer be available.

**About You**

BASIC INFO	
Name:	Applying for Health Coverage Assistance: Yes
State of Birth:	
Social Security No.:	
Gender:	

CONTACT INFO	
Physical Address:	
Mailing Address:	
Contact Phone:	
Preferred Method of Contact:	Email
Phone Language:	English
Preferred Written Language:	English

CITIZENSHIP	
Citizenship Status:	US Citizen

HOUSEHOLD RELATIONSHIPS	
PARENT	

HOUSEHOLD MEMBERS TAX STATUS		
Name	Filing Status	Primary Taxer
	Primary Taxer	
	Self Not Filer	

**Spouse Outside Home**

You have no spouses outside the home.

**Dependents Outside Home**

You have no dependents outside the home.

**Basic Information**

BASIC INFO	
Name:	Not Qualified
Date of Birth:	
Social Security No.:	
Gender:	
Health Coverage:	
Applying for Health Coverage Assistance:	Yes

MARRIAGE STATUS	
Married:	Never Married

CITIZENSHIP	
Citizenship Status:	US Citizen

**Job Income**

The Current Year (2010)	2010-01-01 to 2010-06-30	2010-07-01 to 2010-12-31	2011-01-01 to 2011-06-30
Estimated Annual Household Income:	\$1200.00 (26 weeks)	All three pay each	\$16.00 per hour
Date of Hire:	Date of Last Paycheck:		

**Self Employment**

No self-employment income.

**Other Income**

No other income.

**Income Summary**

Current Monthly Household Income	\$2475
Estimated Annual Household Income	\$29700

**Additional Questions for Health Coverage**

Current source of health coverage:	Other
Employer Insurance:	None
Other Insurance:	None
Access to health coverage from a job?	No
Additional Received from Another State:	None

**Medical and Living Situation**

Needs help paying for medical costs from the last 3 months?	No
Needs medical services provided in the home?	No
Lives in a medical care facility?	No
Was in foster care at age 20?	No
Is incarcerated?	No

**Additional Questions for Health Coverage**

Current source of health coverage:	Other
Employer Insurance:	None
Other Insurance:	None
Access to health coverage from a job?	No
Additional Received from Another State:	None

If there is any additional information you would like to provide, please enter it here:

[Print](#)

Continue to > | Privacy & Security

YOUTH DEVELOPMENT OF HEALTH & WELFARE

# Submit the Application

Read the agreement, enter the **eSignature**, and click **Submit Your Application** to continue. The consumer receives an email confirmation that the application was received.

The consumer might be contacted by DHW if any additional documents are needed to process the eligibility determination. **If documents are not provided in the specified timeframe, consumers will lose their eligibility for APTC/CSR.**

The screenshot shows the 'Rights & Responsibilities' page. The top navigation bar includes 'Welcome', 'Last saved Aug 5, 2014 9:27 AM', 'My Account', 'Logout', 'Help', and 'IDV-IO'. A sidebar on the left lists 'Personal Info', 'Income', 'Additional Questions', and 'Review & Submit', each with a green checkmark. The main content area has a 'Time Remaining: 72h' indicator and a 'Review and Sign' section. It contains a consent statement: 'I understand that... My signature certifies that the information on this application is true and accurate... I consent to the gathering, use and disclosure of my information by the Idaho Department of Health and Welfare or its designees... I have the right to revoke this consent, in writing, at any time except to the extent the Department has...'. Below this is a checkbox: 'Under penalty of perjury, I swear or affirm the information I have provided is true and complete. My signature confirms that I have read and understand the Rights and Responsibilities listed on this page.' There are input fields for 'PRIMARY APPLICANT', 'PRIMARY APPLICANT'S E-SIGNATURE', and 'TODAY'S DATE' (which contains '08/05/2014'). At the bottom, there are 'Back' and 'Submit your Application' buttons, and a footer with 'Contact Us | Privacy & Security' and the Idaho Department of Health & Welfare logo.

The screenshot shows the 'Submission Confirmation' page. The top navigation bar is identical to the previous page. The sidebar on the left shows 'Personal Info', 'Income', 'Additional Questions', and 'Review & Submit', all with green checkmarks. The main content area has a 'Submission Confirmation' heading and a message: 'Your application for Health Coverage Assistance was successfully submitted. An email confirmation has been sent to [redacted]. The Department will review the information you have submitted and notify you if we need additional information to process your application. Once we process your application, you will receive an eligibility determination. Return to [Benefits Home](#)'. At the bottom, there is a 'Back' button and a 'Submit your Application' button. The footer is the same as the previous page.



# Verification & Eligibility Determination

DHW determines consumers' eligibility for Medicaid, CHIP, and the premium tax credit (APTC) or CSR.

If a consumer is eligible for a premium tax credit or CSR, the application information is transferred to the consumer's YHI account. During Open Enrollment, this allows the consumer to shop, compare, and choose a QHP with the applicable cost-savings program.

**NOTE: DHW will process and transfer the consumer's application to YHI in two to ten (2 to 10) days.**

# Consumer Notification of Eligibility

DHW notifies the consumer of their eligibility determination. If eligible for cost-savings programs, the consumer receives a notice via email and/or mail from YHI to link the DHW application to their YHI account.

**The designated agent, broker, or enrollment counselor is also notified when action is required.** Consumer Connectors receive a daily digest of notifications that are sent to their designated clients. Log in and check the **Inbox** to view these notifications.

YHI recommends that agents, brokers, and enrollment counselors follow up with their customers 2-5 business days after the DHW application to see if the consumer has received an email to link the account. Let the consumer know you can assist with the linking process.

**IMPORTANT: If you attempt to use the consumer's special URL with your own agent or broker account, you might void the completed application. It is CRITICAL the consumer uses the URL with their own account.**

# Linking Financial Eligibility

## Access Codes, Linking, and Automation

# Link the DHW Application to Your Health Idaho

### Includes these topics:

- Link a DHW Application to Your Health Idaho with an Access Code
- Review consumer eligibility results.

**Note: If account creation and application is done at YHI, application from DHW should automatically link to consumer's account.**

### Link a DHW Account to a Your Health Idaho Account

- After the consumer applies for cost-savings, DHW makes the determination for eligibility. Once APTC eligibility is determined, DHW sends an account transfer to YHI (approx. 2-10 days).
- YHI sends the consumer a notification stating the APTC determination is received. The notification contains a link and an access code that links the information in the DHW account to the YHI account.

**IMPORTANT:** If email is not selected as the preferred method of contact, only a paper notice is sent, which delays the notification process.

## Notification of APTC and Access Code

This example shows the notification from Your Health Idaho for the consumer's APTC determination. The consumer clicks or enters the link in a browser to open YourHealthIdaho.org.

Dear Consumer,

You have been approved for an Advanced Premium Tax Credit (APTC). Here are your next steps:

If you are currently enrolled in a health plan with Your Health Idaho, please contact us so that we can link your new tax credit to your account.

If you are not currently enrolled, we can help you get started shopping for a new insurance plan!

1. **Click here** or go to <https://idahohix.yourhealthidaho.org/hix/>
2. Enter your Access Code **S{ACCESS CODE}**
3. Answer the security questions based on your tax credit application.
4. Set up a personal username and password to log in.
5. Complete your communication preferences. Get your messages in your secure inbox by selecting e-mail as your preference for receiving communication.
6. If you are enrolling outside of the open enrollment period, you may be asked a series of questions to confirm you are eligible to enroll. Choose the best answer for your circumstances, and include the date when any change occurred.
7. The exchange will approve or deny your request and display the results. You will also receive a notice in your secure inbox for your records. You may be required to provide proof of the change in your situation. You may be asked to provide this information more than once.
8. If you're approved, follow the prompts on the screen to complete the enrollment process.

**Reminders:**

- Coverage typically begins the month following your submitted enrollment.
- Your initial payment to your health insurance company is due immediately after enrollment to ensure your coverage begins on time.
- If you have a tax credit, contact the Department of Health and Welfare any time your household information or your income changes.
- Contact your agent or broker for additional information regarding plan benefits. If you do not have an agent or broker, visit our website to find help near you. There is no cost to use these services.

# Use the Access Code

Enter the access code from the notification you receive in the consumers YHI account inbox.

You can do this by following the link in the notification or by going to [YourHealthIdaho.org](https://YourHealthIdaho.org) and clicking on the Access Code tab or “Have an Access Code? Click Here” on the home page.

# Application Linking

## Verify Identity

The consumer answers verification questions, which can include their name, DOB, phone number, email address, gender, county of residence, and total members in household. This information can be found on the copy that was printed for application with DHW(mentioned in previous slide).

Authentication Information

- Before we can link your application to your account, you will need to enter information to confirm your identity.
- Once you have successfully entered this information, you can view your eligibility results and shop for plans.

First Name \*

Last Name \*

Date of Birth \*

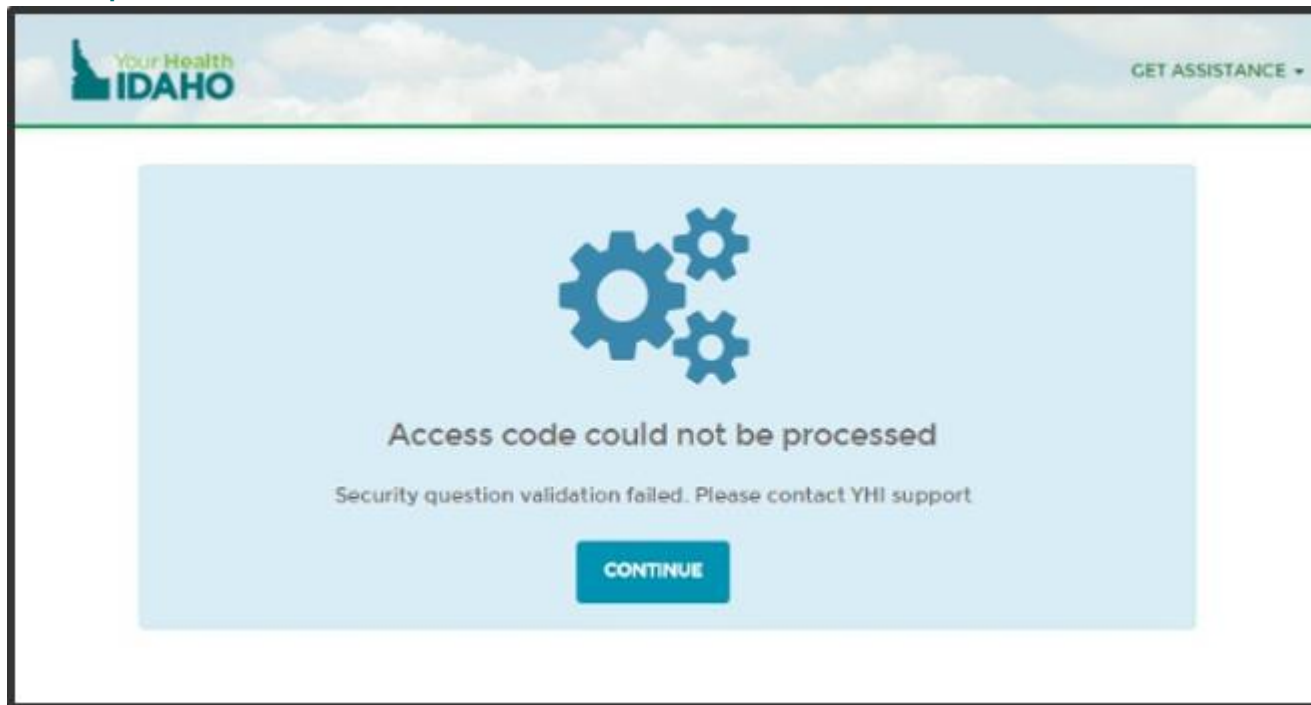
Gender \*  Male  Female

Phone \*



### Access Code Could Not Be Processed Message

If the link is unsuccessful, an error message will appear. Email [support@yourhealthidaho.org](mailto:support@yourhealthidaho.org) for assistance with any error you receive during this process.



## Successful Links

Enter and save the consumer's communication preferences. The dashboard opens.

**NOTE:** If email is not the primary method of contact, the consumer receives only paper notices in the mail.

The DHW application is now linked to the consumer's account at Your Health Idaho.

### Communication Preferences

Please set your communication preferences. Fields marked with an asterisk (\*) are required.

Mailing Address 1 \*

Mailing Address 2

City \*

State \* Idaho

ZIP Code \*

County \* Please Select

Phone Number \*

Email Address

# Consumer Eligibility Results

YHI Consumer or Agent Portal

# Review Eligibility Results

## Search the Consumer's Account

You can see the consumer's eligibility results in their linked account. To view the results, log in to your account, select **Individuals > Active Individuals**.

Search for the consumer by name, application type, current status, next steps, due date, issuer, or coverage year.

The screenshot shows a web interface for searching individuals. A green navigation bar at the top contains a home icon, a dropdown menu labeled 'Individuals', and another dropdown labeled 'My Information'. Below this, the page title is 'Individuals'. A search panel is displayed with a 'Q Search' header and a minus sign icon. The search panel contains several input fields and dropdown menus: 'First Name' (highlighted with a red box and callout '2'), 'Last Name', 'Application Type' (dropdown with 'Select Application Type'), 'Issuer' (dropdown with 'Select Issuer'), 'Current Status' (dropdown with 'Select Current Status'), 'Next Steps' (dropdown with 'None'), 'Due Date' (dropdown with 'Select Due Date'), and 'Coverage Year' (dropdown with 'Select Year'). A blue 'GO' button is at the bottom right of the search panel. Below the search panel, there is a link for 'Export as Excel' and a 'Sort by:' dropdown menu currently set to 'Due Date (first due)'. A callout '1' points to the 'Individuals' dropdown in the navigation bar.

# Review Eligibility Results

## View the Consumer's Account

After you enter the search criteria, a scrollable list will populate below. To view an individual consumer, click their name or **Account** on the bottom toolbar.

#	HOUSEHOLD	STATUS	COVERAGE
1	<b>Joe Consumer</b>		
Phone:		Application Type: Financial	
Email:		Current Status: Eligible for Shopping	
Address:		Next Steps: <a href="#">Shop for Plans</a>	
		Due Date: Sep 02, 2015	
	<b>Account</b>	Household	Eligibility  Comments  Resend Activation Email  Mark As Inactive  Contact Your Health Idaho

View Individual Account ×

Clicking "Individual View" will take you to the Individual's portal for Kifer Nifer. Through this portal you will be able to take actions on behalf of this individual, such as view plans, fill out individual eligibility, etc.

Proceed to Individual view?

Don't show this message again.

To continue, click **Individual View** in **View Individual Account**.

# Review Eligibility Results

## View the Eligibility Results

On the consumer's dashboard, click **Eligibility Details** to view their eligibility results.

Welcome, Jack Consumer

My Stuff

 My Dashboard

 My Applications

 My Enrollments

 My Inbox

 My Appeals

 My Account Settings

 My Preferences

Quick Links

 Find Local Assistance

 Download Appeals Form

Access Code

SUBMIT

2019

### NEXT STEPS

You have successfully completed your application and confirmed a life event. Please click on the button below to start shopping.

SHOP FOR PLANS

### Overview

#### Your Application Status

2019 Application  
For 1 members

Complete

[Eligibility Details](#)

#### Your Household Eligibility

Jack Consumer

You are not eligible for Tax Credit  
or cost sharing reduction

[View Details](#)

[Report a Change](#)

#### Your Health Plans

You will be able to see your health plan(s) here once you have completed plan shopping.

### Families with Differing Eligibility Results

Financial eligibility is determined by DHW at the individual level because there are multiple coverage options available between Medicaid, CHIP, and the premium tax credit. In some cases, parents and children might qualify for different programs.

For example, in a household that is at 180% of the Federal Poverty Level, parents might be eligible for the premium tax credit, but their children might be eligible for CHIP.

In these cases, DHW notifies the family by mail that the parents qualify for the premium tax credit and the children qualify for CHIP.

# Review/Survey

## Next steps

- Break
- Complete in-person training
- Complete online survey
- Complete all required online 2020 Consumer Connector courses