

**Deloitte.**



washington  
**healthplanfinder**

click. compare. covered.

# Healthplanfinder Release 2.0 Overview for HCA Community Partners

# Topics

---

## Release 2.0 Overview for HCA Community Partners

---

**Lesson 1: Release 2.0 & Open Enrollment Year 2**

---

**Lesson 2: Screen Updates**

---

**Lesson 3: Change Reporting**

---

**Lesson 4: Correspondence Updates**

---

**Lesson 5: Updated Application for Health Care Coverage (18-001P)**

---

**Lesson 6: Resource Information**

---

# Healthplanfinder Release 2.0 & Open Enrollment Year 2

## Lesson 1

# Healthplanfinder Release 2.0 and HBE Open Enrollment

- Effective Sunday - **November 2, 2014**, new system enhancements for Healthplanfinder Release 2.0 will go-live!
- You will see new screens in Healthplanfinder as part of Release 2.0.
- This training will cover the Washington Healthplanfinder (HPF) system enhancements for Release 2.0. These updates affect screens for individuals applying and renewing coverage for Washington Apple Health (WAH), Health Insurance Premium Tax Credits (HIPTC) and Qualified Health Plans (QHP).
- Health insurance Open Enrollment Year 2 will take place **November 15, 2014 through February 15, 2015**.
- Enrollment for Washington Apple Health (Medicaid) is year-round.

# Knowledge Check

What are the start and end dates for Open Enrollment Year 2?

Answer:

Start Date: November 15, 2014

End Date: February 15, 2015



# Knowledge Check

Washington Healthplanfinder 2.0 system enhancements "go live" on November 2, 2014. (True or False)

A. True

B. False



# Healthplanfinder Screen Updates

## Lesson 2

# Updated Healthplanfinder Home Page

HOME | EN ESPAÑOL SIGN IN | CUSTOMER SUPPORT ?



Are you an existing customer? Sign in to renew coverage, report a change in your household or pay your monthly health plan premium.

INDIVIDUALS & FAMILIES	WASHINGTON APPLE HEALTH	WASHINGTON BUSINESSES
 <p>Looking for health care coverage?</p> <p><b>Qualified Health Plan Open Enrollment: Nov. 15, 2014 to Feb. 15, 2015</b></p> <p>Compare health insurance options for you and your family. You may qualify for financial help.</p> <p><a href="#">Shop For A Health Plan ▶</a></p>	 <p>Applying for or renewing Apple Health?</p> <p><b>Washington Apple Health Enrollment: Year-round</b></p> <p>The Washington Health Care Authority oversees this health care program. It's easy to apply for or renew coverage.</p> <p><a href="#">Apple Health Coverage ▶</a></p>	 <p>Shopping to cover your employees?</p> <p><b>Washington Healthplanfinder Business Enrollment: Year-round</b></p> <p>If you're an employer with up to 50 employees in Washington, you can shop for employee health insurance.</p> <p><a href="#">Cover Your Employees ▶</a></p>

# New Home Page Section for Washington Apple Health

- Individuals can easily apply or renew their Apple Health by clicking “Apple Health Coverage”
- Apple Health enrollment is year-round



WASHINGTON APPLE HEALTH

Applying for or renewing Apple Health?

**Washington Apple Health Enrollment: Year-round**

The Washington Health Care Authority oversees this health care program. It's easy to apply for or renew coverage.

[Apple Health Coverage ▶](#)

# Adult Disabled Question for HIPTC/WAH Flow

The screenshot shows a questionnaire interface with two questions. The first question is "Are all household members on this application residents of the State of Washington?" with radio buttons for YES and NO. The second question is "Is any member on this application a child 26 or older, seeking adult disabled dependent coverage?" with radio buttons for YES and NO. Below the second question is a note: "Please check the box for any member who is over the age of 26 and considered an adult disabled." Underneath are two checkboxes labeled "Billy Jones" and "Marry Jones". A blue arrow points from the text box below to the second question.

*The HIPTC/WAH questionnaire has one new question related to adult disabled dependents.*

This question is related to the age/relationship rule. If a child is over 26, they are not eligible to apply with a household application for HIPTC/QHP unless they are disabled.

An adult disabled child is an individual who is not capable of employment due to a disability and is dependent on a household member for support.

**An individual's response to this question does not affect their eligibility for Apple Health.**

# New QHP Questions

*The QHP questionnaire has two new questions: one on Medicare and the other about adult disabled dependents.*

The screenshot shows a web-based questionnaire with the following questions and options:

- Is any household member on this application currently enrolled in Medicare? \*  YES  NO
  - Marry Jones
- Have any of your children lost health insurance within the last four months? \*  YES  NO
- Are all household members on this application residents of the State of Washington? \*  YES  NO
- Do you have an adult child who is a disabled dependent 26 years or older? \*  YES  NO
  - Please select who is an adult disabled dependent.
  - Billy Jones
  - Marry Jones

Navigation buttons: [← Back](#), [Save and Exit](#), [Next](#)

If the applicant is covered by Medicare, they are not eligible to apply for QHP coverage.

# Updated Voter Registration Section

IF YOU ARE NOT REGISTERED TO VOTE WHERE YOU LIVE NOW, WOULD YOU LIKE TO APPLY TO REGISTER TO VOTE? \* 

YES

NO

If you click "Yes" you will be able to register online or request a registration form to be sent to you.

Applying to register or declining to register to vote will not affect the amount of assistance that you will be provided, or your eligibility.

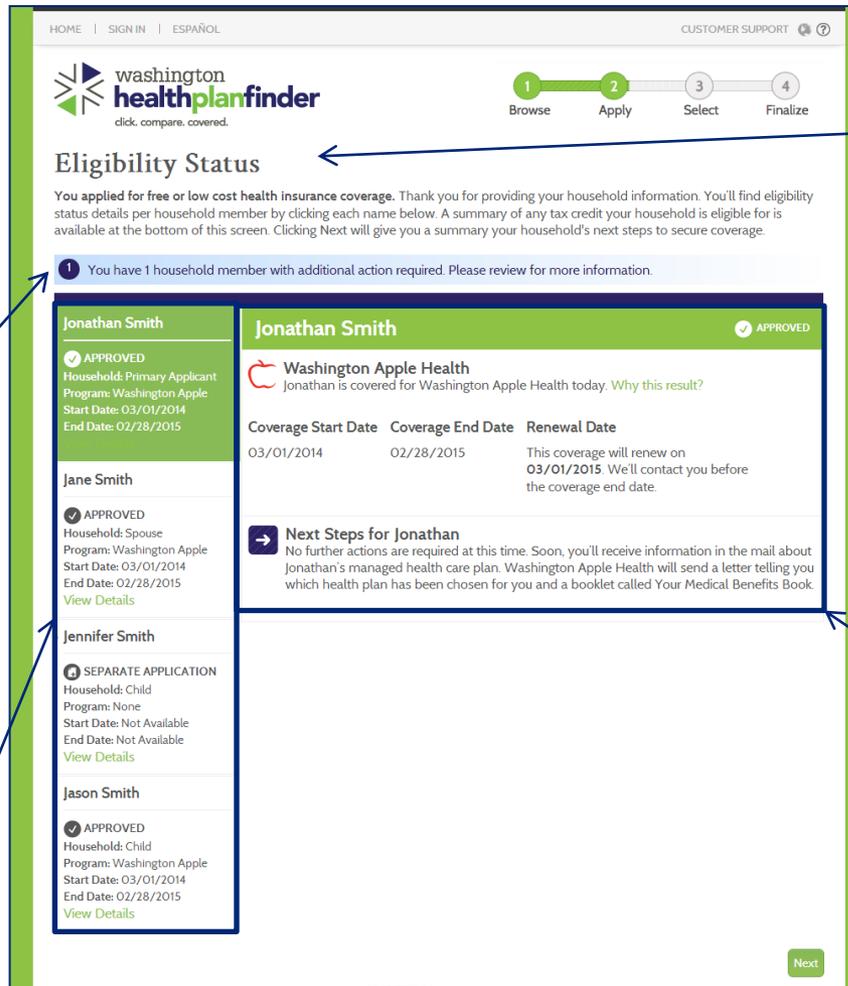
*If you would like help in filling out the voter registration application, you can receive assistance at Washington's toll free Voter Registration Hotline, 1-800-448-4881. The decision whether to seek or accept help is yours. You may fill out the application in private.*

*If you believe that someone has interfered with your right to register or to decline to register to vote, or your right to privacy in deciding whether to register, you may file a complaint with the Washington State Elections Division, PO Box 40229, Olympia, WA 98504, email [elections@sos.wa.gov](mailto:elections@sos.wa.gov), or call 1-800-448-4881.*

Next

# New Eligibility Status Screen

The new eligibility status screen provides the individual with detailed information on eligibility status and additional cost actions required for each household member with just a few simple clicks from the home screen.



The screen title has changed from *Eligibility Results* to **Eligibility Status**

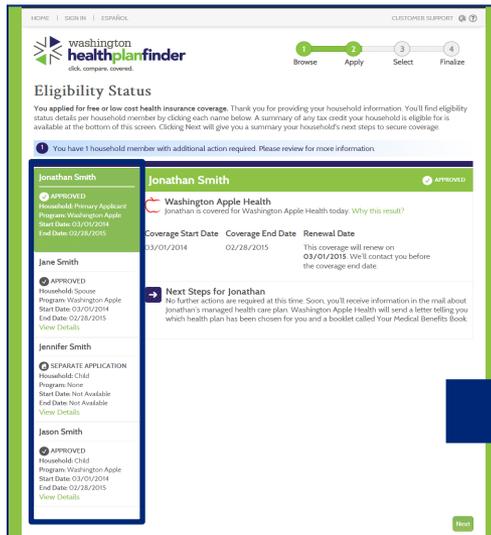
The **alert bar** indicates how many household members require further action

The **individual tabs** provide a quick summary of eligibility status for the entire household

A dynamic status display provides details of each eligibility status and next steps

# Eligibility Status Individual Tabs

To quickly scan the eligibility status key elements for the entire household, the individual tabs give a high-level overview of each household member's eligibility status.



**Jonathan Smith**

✓ APPROVED  
Household: Primary Applicant  
Program: Washington Apple  
Start Date: 03/01/2014  
End Date: 02/28/2015

---

**Jane Smith**

✓ APPROVED  
Household: Spouse  
Program: Washington Apple  
Start Date: 03/01/2014  
End Date: 02/28/2015  
[View Details](#)

---

**Jennifer Smith**

⚙ SEPARATE APPLICATION  
Household: Child  
Program: None  
Start Date: Not Available  
End Date: Not Available  
[View Details](#)

---

**Jason Smith**

✓ APPROVED  
Household: Child  
Program: Washington Apple  
Start Date: 03/01/2014  
End Date: 02/28/2015  
[View Details](#)

*When an individual's tab is selected, his or her detailed eligibility status will be displayed. The selected individual's tab will be highlighted in green.*

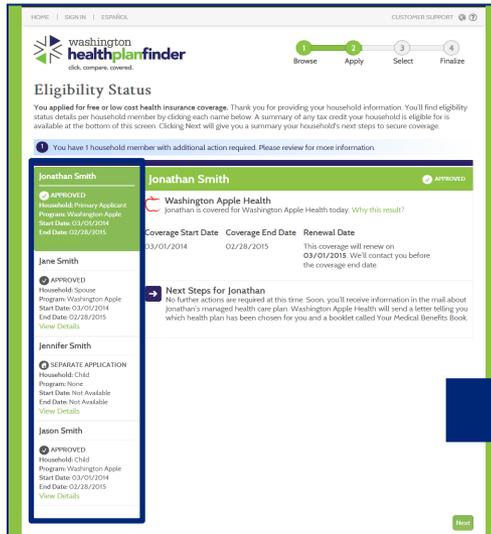
*\*Exception: Tabs for individuals not seeking coverage cannot be selected.*

*Each tab will display the following key elements in the order listed below:*

- **Person Name**
- **Eligibility Status**
- **Relationship to Primary Applicant**
- **Program Name**
- **Coverage Dates**

# Eligibility Status Individual Tabs

To quickly scan the eligibility status key elements for the entire household, the individual tabs give a high-level overview of each household member's eligibility status.



**Jonathan Smith**

APPROVED  
 Household: Primary Applicant  
 Program: Washington Apple  
 Start Date: 03/01/2014  
 End Date: 02/28/2015

---

**Jane Smith**

APPROVED  
 Household: Spouse  
 Program: Washington Apple  
 Start Date: 03/01/2014  
 End Date: 02/28/2015  
[View Details](#)

---

**Jennifer Smith**

SEPARATE APPLICATION  
 Household: Child  
 Program: None  
 Start Date: Not Available  
 End Date: Not Available  
[View Details](#)

---

**Jason Smith**

APPROVED  
 Household: Child  
 Program: Washington Apple  
 Start Date: 03/01/2014  
 End Date: 02/28/2015  
[View Details](#)

**Eligibility Status** – Displayed as one of the following options:

- Approved
- Ineligible
- Separate Application Needed
- Closed
- Pending
- Conditional
- Not Seeking Coverage

**Program Name** – Displayed as “None” for any non-approved eligibility status. Approved options are as follows:

- QHP
- QHP w/ Tax Credits
- WAH (Adult, AEM, w/ Premiums, Pregnancy, Kids)
- None

**Coverage Dates** – Displayed as “Not Available” if a program was not approved

# Individual Details – Key Elements

The eligibility status screens for each individual display four key coverage elements. Explanations of these elements are described below:

washington healthplanfinder  
click. compare. covered.

1 Browse 2 Apply 3 Select 4 Finalize

## Eligibility Status

You applied for free or low cost health insurance coverage. Thank you for providing your household information. You'll find eligibility status details per household member by clicking each name below. A summary of any tax credit your household is eligible for is available at the bottom of this screen. Clicking Next will give you a summary your household's next steps to secure coverage.

1 You have 1 household member with additional action required. Please review for more information.

Jonathan Smith	Jonathan Smith						
<p>APPROVED</p> <p>Household: Primary</p> <p>Program: Washington Apple Health</p> <p>Start Date: 03/01/2014</p> <p>End Date: 02/28/2015</p>	<p>Washington Apple Health</p> <p>Jonathan is covered for Washington Apple Health today. <a href="#">Why this result?</a></p> <table border="1"><thead><tr><th>Coverage Start Date</th><th>Coverage End Date</th><th>Renewal Date</th></tr></thead><tbody><tr><td>03/01/2014</td><td>02/28/2015</td><td>This coverage will renew on 03/01/2015. We'll contact you before the coverage end date.</td></tr></tbody></table> <p>Next Steps for Jonathan</p> <p>No further actions are required at this time. Soon, you'll receive information in the mail about Jonathan's managed health care plan. Washington Apple Health will send a letter telling you which health plan has been chosen for you and a booklet called Your Medical Benefits Book.</p>	Coverage Start Date	Coverage End Date	Renewal Date	03/01/2014	02/28/2015	This coverage will renew on 03/01/2015. We'll contact you before the coverage end date.
Coverage Start Date	Coverage End Date	Renewal Date					
03/01/2014	02/28/2015	This coverage will renew on 03/01/2015. We'll contact you before the coverage end date.					

Jane Smith

APPROVED

Household: Spouse

Program: Washington Apple Health

Start Date: 03/01/2014

End Date: 02/28/2015

[View Details](#)

Jennifer Smith

SEPARATE APPLICATION

Household: Child

Program: None

Start Date: Not Available

End Date: Not Available

[View Details](#)

Jason Smith

APPROVED

Household: Child

Program: Washington Apple Health

Start Date: 03/01/2014

End Date: 02/28/2015

[View Details](#)

Next

**1 Program Name** – Lists any programs the individual has qualified for. This will appear as one of the following:

- **Program Options:** Qualified Health Plan, Qualified Health Plan with Tax Credits, Washington Apple Health (Adult, Kids, Alien Emergency Medical, With Premiums, Pregnancy)
- **Non-Approval Options:** Separate Application Needed, Ineligible, Closed, Pending, Conditional

**2 Coverage Dates** – Start and end dates for current or upcoming coverage, followed by the renewal dates. These will appear as N/A if the individual was not approved for any of the programs listed.

# Individual Details – Key Elements (continued)

The eligibility status screens for each individual display four key coverage elements. Explanations of these elements are described below:

washington healthplanfinder  
click. compare. covered.

1 Browse 2 Apply 3 Select 4 Finalize

## Eligibility Status

You applied for free or low cost health insurance coverage. Thank you for providing your household information. You'll find eligibility status details per household member by clicking each name below. A summary of any tax credit your household is eligible for is available at the bottom of this screen. Clicking Next will give you a summary your household's next steps to secure coverage.

Individual	Status	Program	Start Date	End Date
Scott Young	APPROVED	Qualified Health Plan	04/01/2014	12/31/2014
Angela Young	DENIED	None	Not Available	Not Available
Jessica Young	APPROVED	Qualified Health Plan	04/01/2014	12/31/2014

**3 Tax Credits**  
Scott is included in the tax unit that has been approved for tax credits. See more information at the bottom of this screen.

**4 Next Steps for Scott**  
On the next page, please review and purchase a Qualified Health Plan. The premium amount shown includes the tax credit.

### Health Insurance Premium Tax Credits

This tax unit has been approved for \$500 in tax credits, which can be used to help lower the cost of insurance.

COVERAGE PERIOD 04/01/2014 - 12/31/2014

Tax Unit 1	Monthly Credit Amount
Scott	\$500
Jessica	
Angela	Not Eligible
Zach	Not Eligible

Tax Unit 2 Credit Amount

### How Is This Calculated?

The amount is based on information you provided in your application such as household income and number of dependents. To see the full explanation click the button below.

Tax Credit Information

**3 Tax Credit Information (if eligible)** – An individual's tax credit details will be listed at the bottom of the page. This will include tax credit amounts and calculations

**4 Next Steps** – Any additional steps or actions required will be listed at the bottom of the status screen.

# Eligibility Status (Washington Apple Health – Adult)

*This is a sample version of the standard Washington Apple Health – Adult screen.*

## Eligibility Status

You applied for free or low-cost health insurance coverage. Thank you for providing your household information. To see Eligibility Status details per household member click each name below. Clicking "Next" will give you a summary of your households next steps to finalize your coverage.

<b>Tony Lewis</b> <hr/>  <b>APPROVED</b> Household: Primary Applicant Coverage: WAH - Adult Start Date: 11/01/2014 End Date: 10/31/2015	<b>Tony Lewis</b>  <b>APPROVED</b>  <b>Washington Apple Health Adult Coverage</b> Tony Lewis has been enrolled in Washington Apple Health Adult Coverage. <a href="#">Why this result?</a> <table><thead><tr><th>Coverage Start Date</th><th>Coverage End Date</th><th>Renewal Information</th></tr></thead><tbody><tr><td>11/01/2014</td><td>10/31/2015</td><td>Tony Lewis will need to renew coverage by 10/31/2015. We will contact you with more information when its time to renew.</td></tr></tbody></table>	Coverage Start Date	Coverage End Date	Renewal Information	11/01/2014	10/31/2015	Tony Lewis will need to renew coverage by 10/31/2015. We will contact you with more information when its time to renew.
Coverage Start Date	Coverage End Date	Renewal Information					
11/01/2014	10/31/2015	Tony Lewis will need to renew coverage by 10/31/2015. We will contact you with more information when its time to renew.					

[← Return to Dashboard](#)

# Eligibility Status (Washington Apple Health – Kids)

*This is a sample version of the standard Washington Apple Health – Kids screen.*

## Eligibility Status

You applied for free or low-cost health insurance coverage. Thank you for providing your household information. To see Eligibility Status details per household member click each name below. Clicking "Next" will give you a summary of your households next steps to finalize your coverage.

<b>Tom Weber</b> <hr/> <p>✓ APPROVED Household: Child Coverage: WAH - Kids Start Date: 11/01/2014 End Date: 10/31/2015</p>	<b>Tom Weber</b> ✓ APPROVED <hr/> <p> <b>Washington Apple Health for Kids Coverage</b> Tom Weber has been enrolled in Washington Apple Health for Kids Coverage. <a href="#">Why this result?</a></p> <table><thead><tr><th>Coverage Start Date</th><th>Coverage End Date</th><th>Renewal Information</th></tr></thead><tbody><tr><td>11/01/2014</td><td>10/31/2015</td><td>Tom Weber will need to renew coverage by 10/31/2015. We will contact you with more information when its time to renew.</td></tr></tbody></table> <p> <b>Next Steps for Tom Weber</b> Starting 11/01/2014 Tom Weber will be covered by Washington Apple Health for Kids Coverage Washington Apple Health benefit information is provided by the Washington State Health Care Authority. To learn more about what comes next, including health plan options, <a href="#">click here</a>.</p>	Coverage Start Date	Coverage End Date	Renewal Information	11/01/2014	10/31/2015	Tom Weber will need to renew coverage by 10/31/2015. We will contact you with more information when its time to renew.
Coverage Start Date	Coverage End Date	Renewal Information					
11/01/2014	10/31/2015	Tom Weber will need to renew coverage by 10/31/2015. We will contact you with more information when its time to renew.					
<b>Tamara Weber</b> <hr/> <p>✓ APPROVED Household: Child Coverage: WAH - Kids Start Date: 11/01/2014 End Date: 10/31/2015 <a href="#">View Details</a></p>							
<b>Elvira Weber</b> <hr/> <p>NOT SEEKING COVERAGE Household: Primary Applicant Coverage: Not Applicable Start Date: Not Applicable End Date: Not Applicable</p>							

[Next](#)

# Eligibility Status (Washington Apple Health – Multi-Years)

## Eligibility Status

You applied for free or low-cost health insurance coverage. Thank you for providing your household information. To see Eligibility Status details per household member click each name below. Clicking "Next" will give you a summary of your households next steps to finalize your coverage.

**Amanda Brown** APPROVED

**Amanda Brown** APPROVED

**Washington Apple Health for Kids Coverage**

Amanda Brown has been enrolled in Washington Apple Health for Kids Coverage. [Why this result?](#)

Washington Apple Health for Kids Coverage coverage ends on 12/31/2014. Starting on 01/01/2015, Amanda Brown will be covered by Washington Apple Health Adult Coverage. [Why this result?](#)

Coverage Dates	Program	Renewal Information
12/01/2014 to 12/31/2014	Washington Apple Health for Kids Coverage	N/A
01/01/2015 to 11/30/2015	Washington Apple Health Adult Coverage	

**Renewal Information**

Amanda Brown will need to renew coverage by 11/30/2015. We will contact you with more information when its time to renew.

[Next Steps for Amanda Brown](#)

*This is a sample version of the standard **Washington Apple Health – Multi-Segment** screen.*

# Eligibility Status (Multiple Year Eligibility Displays)

If an individual is QHP/HIPTC eligible and enrolled for coverage over two years, the detailed status screen will show displays for those multiple years of coverage

## Eligibility Status

You applied for free or low-cost health insurance coverage. Thank you for providing your household information. To see Eligibility Status details per household member click each name below. Clicking "Next" will give you a summary of your households next steps to finalize your coverage.

Kara John	2014 Coverage:	2015 Coverage:
<p>APPROVED</p> <p>Household: Primary Applicant</p> <p>Coverage: QHP</p> <p>Start Date: 12/01/2014</p> <p>End Date: 12/31/2014</p>	<p><b>Qualified Health Plan</b></p> <p>Kara John is not eligible for coverage until 11/01/2014.</p>	<p><b>Qualified Health Plan</b></p> <p>Kara John is eligible for Qualified Health Plan coverage. <a href="#">Why this result?</a></p>
	<p><b>Coverage Dates</b></p> <p>12/01/2014</p>	<p><b>Coverage Dates</b></p> <p>01/01/2015</p>
	<p>to</p> <p>12/31/2014</p>	<p>to</p> <p>12/31/2015</p>
	<p><b>Program</b></p> <p>Qualified Health Plan</p>	<p><b>Program</b></p> <p>Qualified Health Plan</p>
	<p><b>Renewal Information</b></p> <p>N/A</p>	<p><b>Renewal Information</b></p> <p>Kara John will need to renew coverage by 12/31/2015. We will contact you with more information when its time to renew.</p>
	<p><b>Next Steps for Kara John</b></p>	<p>*Please purchase your Qualified Health Plan by 5:00 p.m. on 11/23, to start coverage on 12/1.</p>
		<p><b>Next Steps for Kara John</b></p> <p>On the next page, please review and purchase a Qualified Health Plan.</p>

Next

## Potential scenarios for individuals that will display multiple year eligibilities are listed below:

- An individual qualified for the following programs over two years:
  - HIPTC 2014 and HIPTC 2015
  - QHP 2014 and HIPTC 2015
  - WAH and HIPTC 2014 and HIPTC 2015

# Program Status – Why this result

For an explanation behind why an individual received a particular eligibility status, the individual can access the “Why this result?” modal from the status details screen.

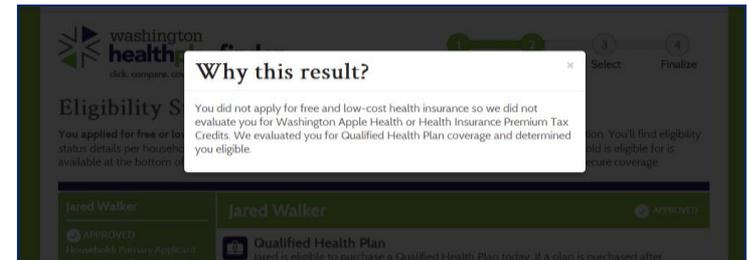
### Eligibility Status

You applied for free or low-cost health insurance coverage. Thank you for providing your household information. To see Eligibility Status details per household member click each name below. Clicking “Next” will give you a summary of your households next steps to finalize your coverage.

	2014 Coverage:	2015 Coverage:
<b>Kara John</b>  APPROVED Household: Primary Applicant Coverage: QHP Start Date: 12/01/2014 End Date: 12/31/2014	<b>Qualified Health Plan</b> Kara John is not eligible for coverage until 11/01/2014.  <b>Coverage Dates</b> 12/01/2014 to 12/31/2014  <b>Program</b> Qualified Health Plan  <b>Renewal Information</b> N/A  <b>Next Steps for Kara John</b>	<b>Qualified Health Plan</b> Kara John is eligible for Qualified Health Plan coverage. <a href="#">Why this result?</a>  <b>Coverage Dates</b> 01/01/2015 to 12/31/2015  <b>Program</b> Qualified Health Plan  <b>Renewal Information</b> Kara John will need to renew coverage by 12/31/2015. We will contact you with more information when its time to renew.  *Please purchase your Qualified Health Plan by 5:00 p.m. on 11/23, to start coverage on 12/1.  <b>Next Steps for Kara John</b> On the next page, please review and purchase a Qualified Health Plan.

Next

*This modal will display the reason codes for an individual's eligibility status*



A unique “Why this result?” modal will appear describing the eligibility status reason codes.

# Program Status – Why this result (continued)

For an explanation behind why an individual received a particular eligibility status, the individual can access the “Why this result?” modal from the status details screen.

## Sample “Why this Result” Modals:

- **Washington Apple Health** – “You applied for free and low-cost health insurance. Given your income and household information, we evaluated you first for Washington Apple Health and determined you eligible. As a result we did not evaluate you for Health Insurance Premium Tax Credits and Qualified Health Plan Coverage.”
- **QHP with Tax Credits** – “You applied for free and low-cost health insurance. Given your income and household information, we evaluated you first for Washington Apple Health and you were ineligible for the following reasons
  - *Your income is over the limit that is allowed for this program*We then evaluated you for Health Insurance Premium Tax Credits and determined you eligible.”
- **QHP** – “You did not apply for free and low-cost health insurance so we did not evaluate you for Washington Apple Health or Health Insurance Premium Tax Credits. We evaluated you for Qualified Health Plan coverage and determined you eligible.”

# Household Summary

The Household Summary modal provides the individual with a summary of next steps required for each individual. Customers are not required to click through each household member's eligibility status tab to proceed to the Household Summary modal.

HOME | SIGN IN | ESPAÑOL CUSTOMER SUPPORT

washington healthplanfinder  
click. compare. covered.

1 Browse 2 Apply 3 Select 4 Finalize

### Eligibility Status

You applied for free or low cost health insurance coverage. Thank you for providing your household information. You'll find eligibility status details per household member by clicking each name below. A summary of any tax credit your household is eligible for is available at the bottom of this screen. Clicking Next will give you a summary your household's next steps to secure coverage.

1 You have 1 household member with additional action required. Please review for more information.

Jonathan Smith	Jonathan Smith						
APPROVED Household: Primary Applicant Program: Washington Apple Start Date: 03/01/2014 End Date: 02/28/2015	APPROVED <b>Washington Apple Health</b> Jonathan is covered for Washington Apple Health today. <a href="#">Why this result?</a> <table border="1"><thead><tr><th>Coverage Start Date</th><th>Coverage End Date</th><th>Renewal Date</th></tr></thead><tbody><tr><td>03/01/2014</td><td>02/28/2015</td><td>This coverage will renew on 03/01/2015. We'll contact you before the coverage end date.</td></tr></tbody></table> <p><b>Next Steps for Jonathan</b> No further actions are required at this time. Soon, you'll receive information in the mail about Jonathan's managed health care plan. Washington Apple Health will send a letter telling you which health plan has been chosen for you and a booklet called <i>Your Medical Benefits Book</i>.</p>	Coverage Start Date	Coverage End Date	Renewal Date	03/01/2014	02/28/2015	This coverage will renew on 03/01/2015. We'll contact you before the coverage end date.
Coverage Start Date	Coverage End Date	Renewal Date					
03/01/2014	02/28/2015	This coverage will renew on 03/01/2015. We'll contact you before the coverage end date.					
Jane Smith APPROVED Household: Spouse Program: Washington Apple Start Date: 03/01/2014 End Date: 02/28/2015 <a href="#">View Details</a>							
Jennifer Smith SEPARATE APPLICATION Household: Child Program: None Start Date: Not Available End Date: Not Available <a href="#">View Details</a>							
Jason Smith APPROVED Household: Child Program: Washington Apple Start Date: 03/01/2014 End Date: 02/28/2015 <a href="#">View Details</a>							

Next

*The Household Summary modal is accessed by clicking the next button at the bottom of the screen.*

*\*This will not appear if accessed from a dashboard.*

### Household Summary

PRINT

Please review the next steps for each member of your household. Each member may have a different action to take based on his or her eligibility. Make sure to print this page for your records.

**Scott Young**  
Next Steps: On the next page, please review and purchase a Qualified Health Plan. The premium amount shown includes the tax credit.

**Angela Young**  
Next Steps: No further actions are required at this time.

**Jessica Young**  
Next Steps: On the next page, please review and purchase a Qualified Health Plan. The premium amount shown includes the tax credit.

**Josephine Young**

Continue

# Household Summary (continued)

The Household Summary modal provides the individual with a summary of next steps required for each individual. Customers are not required to click through each household member's eligibility status tab to proceed to the Household Summary modal.

The screenshot shows a modal window titled "Household Summary" with a "PRINT" icon. The text inside reads: "Please review the **next** steps for each member of your household. Each member may have a different action to take based on his or her eligibility. Make sure to print this page for your records." Below this, there are four entries for household members:

- Scott Young**  
Next Steps: On the next page, please review and purchase a Qualified Health Plan. The premium amount shown includes the tax credit.
- Angela Young**  
Next Steps: No further actions are required at this time.
- Jessica Young**  
Next Steps: On the next page, please review and purchase a Qualified Health Plan. The premium amount shown includes the tax credit.
- Josephine Young**

A green "Continue" button is located at the bottom right of the modal. A blue arrow points from the top-right corner of the modal to a callout box on the right.

*After reading through the next steps required for each household member, the individual can click the "Continue" button to move forward with the eligibility process.*

*If coverage is being determined for the current and next year, both summaries will display on this modal.*

\*The only change in the application flow following this modal is the document upload process. If additional documents are required, customers will no longer view the "Document Checklist" and instead will be required to upload documents prior to moving forward with the plan selection process (details to follow).

# Separate Application Needed

The “Separate Application Needed” notification will appear for any household member that will need to file a separate application to receive coverage.

HOME | SIGN IN | ESPAÑOL | CUSTOMER SUPPORT ?

washington healthplanfinder  
click. compare. covered.

1 Browse 2 Apply 3 Select 4 Finalize

## Eligibility Status

You applied for free or low cost health insurance coverage. Thank you for providing your household information. You'll find eligibility status details per household member by clicking each name below. A summary of any tax credit your household is eligible for is available at the bottom of this screen. Clicking Next will give you a summary your household's next steps to secure coverage.

1 You have 1 household member with additional action required. Please review for more information.

<b>Jonathan Smith</b> ✓ APPROVED Household: Primary Applicant Program: Washington Apple Start Date: 03/01/2014 End Date: 02/28/2015 <a href="#">View Details</a>	<b>Jennifer Smith</b> SEPARATE APPLICATION + Separate Application Needed A separate application is required due the following reasons: <b>REASON(S)</b> Washington Apple Health requires adults 19 and older to submit a separate application.	<b>Jane Smith</b> ✓ APPROVED Household: Spouse Program: Washington Apple Start Date: 03/01/2014 End Date: 02/28/2015 <a href="#">View Details</a>
<b>Jennifer Smith</b> SEPARATE APPLICATION Household: Child	→ Next Steps for Jennifer Please complete and submit a new application.	

*The notification will display reason codes for why a separate application is needed (both for program type and eligibility)*

# Coverage Ineligible

If an individual is determined ineligible for coverage, a “Reasons for Denial” notification will appear that explains why the individual received this result.

**Eligibility Status**

You applied for free or low-cost health insurance coverage. Thank you for providing your household information. To see Eligibility Status details per household member click each name below. Clicking "Next" will give you a summary of your households next steps to finalize your coverage.

**Jeremy Holt** ✕ DENIED

**✕ DENIED**  
Household: Primary Applicant  
Coverage: None  
Start Date: Not Applicable  
End Date: Not Applicable

**Ineligible**  
We were unable to provide coverage to all household members on this application for the reasons below. Please review the reasons and update any information you may have mistakenly provided by clicking the "Start New Application" button.

**REASON(S) FOR DENIAL**

We first evaluated you for Washington Apple Health coverage. You are not eligible for the following reasons:

- Income is over the limit that is allowed for this program
- Washington State residency requirement not met

[Start New Application](#)

**→ Next Steps for Jeremy Holt**  
No further actions are required at this time.

*The “Reasons for Denial” box displays reason codes per program type describing why the individual was denied.*

*The “Start New Application” button will display when a household member is ineligible. This will take the individual to the start of the application flow.*

# Pending Coverage

If an individual's coverage status is "Pending," additional header text will display that indicates that the individual needs to provide documentation to receive coverage.

HOME | SIGN IN | ESPAÑOL CUSTOMER SUPPORT

washington healthplanfinder  
click. compare. covered.

1 Browse 2 Apply 3 Select 4 Finalize

## Eligibility Status

You applied for free or low cost health insurance coverage. Thank you for providing your household information. You'll find eligibility status details per household member by clicking each name below. A summary of any tax credit your household is eligible for is available at the bottom of this screen. Clicking Next will give you a summary your household's next steps to secure coverage.

<b>Michael Patterson</b> PENDING Household: Primary Applicant Program: Washington Apple Health Start Date: N/A End Date: N/A	<b>Michael Patterson</b> PENDING We were unable to verify Michael's lawful presence status. Washington Apple Health coverage will be available once we receive some additional information. <b>Washington Apple Health</b> Michael is pending Washington Apple Health - Alien Emergency Medical coverage.
<b>Millie Patterson</b> APPROVED Household: Spouse Program: Washington Apple Health Start Date: 03/01/2014 End Date: 02/28/2015 View Details	<b>ADDITIONAL DOCUMENTS REQUIRED</b> You can upload the required documents here. To find out what types of documents we will accept, click on the document names. } <a href="#">Proof of Lawful Presence</a> <a href="#">Upload Documents</a>

The header text will explain why HPF was unable to verify the individual's status.

The "upload documents" button will open the Document Upload modal. A separate "upload documents" button will appear for each type of document required

# Document Upload Modal

If an individual is pending coverage, they will no longer be able to move forward with the application prior to uploading the appropriate documents. There will no longer be a document checklist that the individual will reference.

The screenshot shows a web modal titled "Document Upload" with a close button (X) in the top right corner. Below the title is a grey instruction box: "Use this page to upload and submit documents to the washington Healthplaninfer. For each document, select the household member(s) that each document applies to." Below this is a yellow header for "REQUIRED DOCUMENTS". Underneath, there is a section for "Proof of Law Presence" with a dropdown arrow and the text "Acceptable Documents". A list of document types follows: "Entry VISA Number", "I-551 Alien Number", "I-94 Card Number", "INS Notice Receipt Number", "Passport Number", "Permanent Resident Card with Photograph (Form I-151)", and "U.S. Military Card or Draft Record". At the bottom left of this section is a "Choose File" button and the text "No file chosen". Below the document list is an "Applies to:" label. At the bottom right of the modal is a green "Submit and return to application" button. Two blue arrows point from the text boxes on the right to the "Choose File" button and the "Submit and return to application" button.

*The "Document Upload" modal will list the required documents and acceptable forms of each document. The individual will then choose a file to upload using the "Choose File" button. When an individual chooses a file, they will then be taken to a drop-down menu to index the document.*

*Once a file is selected, the individual will click submit and return to the application. This process will be repeated for each household member requiring additional documents.*

# Knowledge Check

How would an individual navigate to the household summary screen?

Answer: The individual would click the “next” button on the eligibility status screen.

What type of information does the summary screen provide?

Answer: The household summary provides the individual with a summary of next steps required for each household member.



# Knowledge Check

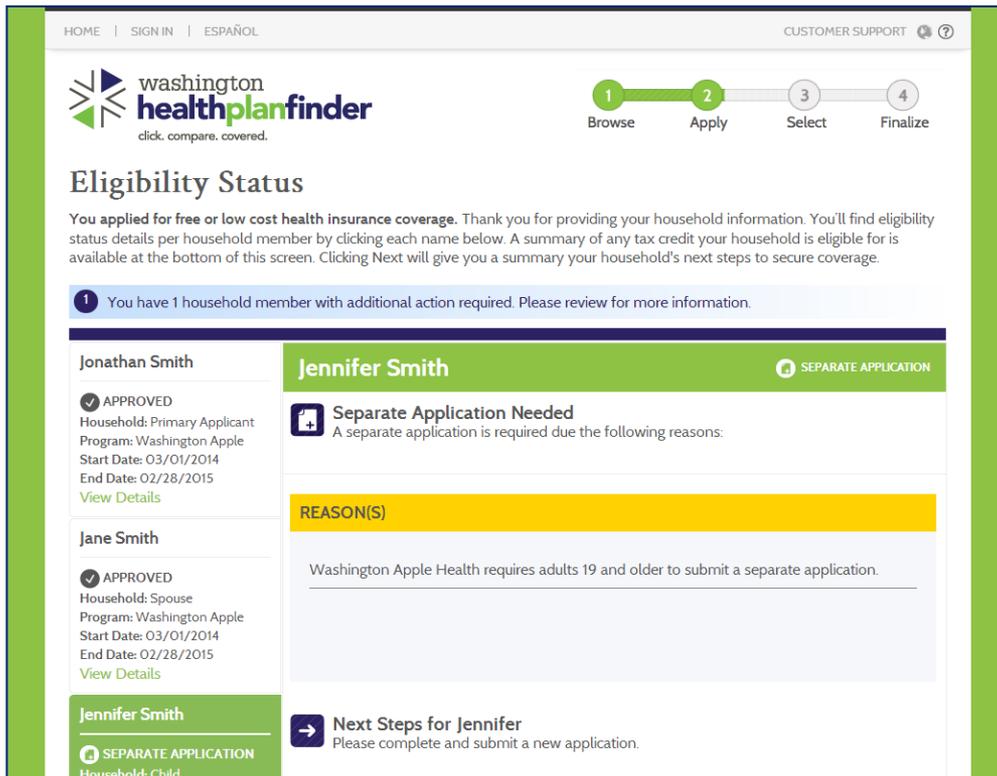
What are the four key elements shown on the detailed eligibility status screen for each individual?

- a) Coverage dates, program name, tax credit information, CSR data
- b) Program name, coverage dates, tax credit information, next steps
- c) Tax credit information, coverage dates, billing information, next steps



# Knowledge Check

What should Jennifer do if she receives this eligibility status, but still wants to seek coverage?



The screenshot shows the Washington Health Plan Finder website. At the top, there is a navigation bar with "HOME | SIGN IN | ESPAÑOL" and "CUSTOMER SUPPORT". The logo for "washington healthplanfinder" is on the left, with the tagline "click. compare. covered.". A progress bar at the top right shows four steps: 1. Browse, 2. Apply, 3. Select, and 4. Finalize. The main heading is "Eligibility Status". Below it, a message states: "You applied for free or low cost health insurance coverage. Thank you for providing your household information. You'll find eligibility status details per household member by clicking each name below. A summary of any tax credit your household is eligible for is available at the bottom of this screen. Clicking Next will give you a summary your household's next steps to secure coverage." A notification bar indicates: "1 You have 1 household member with additional action required. Please review for more information." The main content area is divided into three columns for household members: Jonathan Smith (APPROVED), Jane Smith (APPROVED), and Jennifer Smith (SEPARATE APPLICATION). Jennifer's status is highlighted in green. A "Separate Application Needed" section for Jennifer explains: "A separate application is required due the following reasons:" followed by a yellow box labeled "REASON(S)" containing the text: "Washington Apple Health requires adults 19 and older to submit a separate application." Below this, a "Next Steps for Jennifer" section says: "Please complete and submit a new application."

**Answer: Jennifer is 19 years of age and must apply on her own for Apple Health. She will need to go back to the Home page and start a new application**



# Knowledge Check

What will an individual need to do if he/she is pending coverage?

a) Start a new application

b) Report a change

c) Verify status using the document upload prompts



# Change Reporting

## Lesson 3

# Reporting a Change without Selecting a Plan

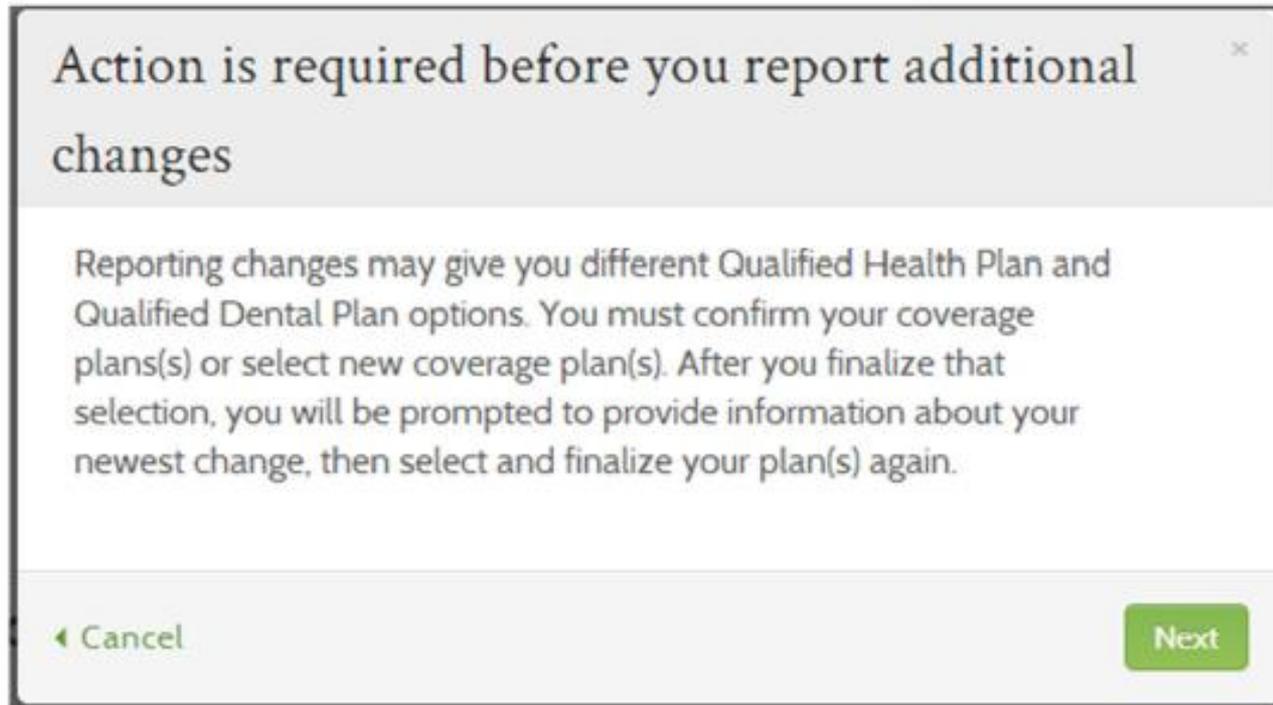
This system enhancement will allow customers to report changes and view eligibility results without having to select and purchase a plan.

Prior to selecting and paying for a plan customers can report changes for mixed households without the requirement to select a plan.



## How it used to work

If a change is attempted without a plan selection, the system displays a modal that prevents the user from continuing with the application.



## How it works now

Customers can now report changes and view how each change affects their eligibility without having to select and purchase a plan.

Are you sure you want to report another change? ×

Based on a previously reported change to your application, your household is currently eligible for Qualified Health Plan Special Enrollment and may select a health plan or change health plans for current year coverage.

Reporting another change without confirming health plan selection may impact the current Special Enrollment period, and could result in a later effective date for coverage.

Click 'Continue' to report another change now. Click 'Cancel' to return to your account dashboard. From your dashboard, you can complete your household enrollment based on your previously reported change.

[← Cancel](#) [Continue](#)

# Knowledge Check

An individual must select and purchase a plan before reporting a change.  
(True/False)

Answer: False – New system enhancements on 11/2 allow an individual to report a change without selecting and purchasing a plan.



# Correspondence Updates

## Lesson 4

# About Correspondences



**Correspondences** are **notices** sent by the Washington Healthplanfinder to customers. There are over 50 different types.

**Customers receive these messages** in a variety of different ways, based on their account preferences. These ways include:



- Upload to the customer's account dashboard in HPF
- Mail
- Email

Correspondences can be **generated** for any of the following **types**:



- Eligibility and Enrollment
- Plan Management
- Payment / Financial Management
- HPF Business
- General Administration

# What has Changed

## Individual and HPF Business

- **Many correspondences have been completely updated**
- The changes made to each one are unique and apply specifically to that particular correspondence
- The customer will receive clearer information and instructions from the new correspondences

**70–80%** of the standard text for **25** unique correspondences has changed

# Knowledge Check

No correspondence updates are included in Healthplanfinder Release 2.0.  
(True/False)

Answer: False – New system enhancements on 11/2 will provide updates to roughly 25 communications sent to applicants and recipients. .These updated letters will make instructions and information clearer.



# Updated Application for Health Care Coverage (HCA18-001P)

## Lesson 5

# Application for Health Care Coverage (HCA 18-001P)

- Syncing of the 18-001P paper application with the online messaging in the Healthplanfinder system
- Addition of Voter's Registration language
- New Tax Filing Status' updated now for HPF Release 2.1 coming in January 2015
- Coming Soon: Updated 18-001P application will be available on the HCA Forms website **on November 14th**

<http://www.hca.wa.gov/medicaid/forms/Documents/18-001P.pdf>

Washington State Health Care Authority		 <small>click, compare, covered.</small>	
<b>Application for Health Care Coverage</b>			
<b>PART 1</b>			
<b>Applicant Name and Contact Information</b>			
<small>If you don't have all the information we ask for, you can start your application by filling in your name, signature, and address and sending in this page.</small>			
First Name, Middle Initial, Last Name & Suffix		Signature of Applicant or Authorized Representative (Required) X_____	
Are You Without A Fixed Address? <input type="checkbox"/> No <input type="checkbox"/> Yes <small>Check yes if you do not have a home address. You still need to provide a mailing address.</small>			
If yes, in what county would you like to receive health care services? _____			
Address Where You Live		City	County
		State	Zip Code
Mailing Address (If Different)		City	State
		State	Zip Code
Primary Phone Number <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work (    )		Secondary Phone Number <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work (    )	
E-mail Address			
<small>Washington Healthplanfinder may need to contact you regarding the status of your application and/or request additional information. What is your preferred method of contact? <input type="checkbox"/> Phone <input type="checkbox"/> E-mail <input type="checkbox"/> USPS Mail</small>			
<b>Language Information</b>			
<small>Do you or anyone you are applying for want an interpreter and to receive documents in a language other than English? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, what language or alternative format do you need? List all that apply: _____</small>			
<b>Authorized Representative Information</b>			
1. An authorized representative is any adult who is sufficiently aware of the household circumstances and is authorized by the household to act on behalf of the household for eligibility purposes.			
2. <i>Please note:</i> This is different than partnering with a Navigator or a Broker.			
3. By designating an authorized representative, you are giving permission for your authorized representative to:			
• Sign the application on your behalf;			
• Receive notices related to your application and account; and			
• Act on your behalf for all matters related to the application and account.			
a. Are you designating an authorized representative? <input type="checkbox"/> No <input type="checkbox"/> Yes			
b. Do you want your authorized representative to receive notices related to your application and account? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Authorized Representative Name / Organization		Phone Number (    )	
Mailing Address of Authorized Representative		E-mail Address	
<small>HCA 18-001P (10/14)</small>			
1			
 <small>18001</small>			

# Knowledge Check

When will the updated 18-001P Application for Health Care Coverage be available to print or order?

Answer: The updated 18-001P will be available on **November 14<sup>th</sup>**.

This updated application form will be available on this date to locally print in 9 languages.

There will be an option to ORDER the updated application in limited quantities.

<http://www.hca.wa.gov/medicaid/forms/Pages/index.aspx>



# Resource Information

Lesson 6

**You have completed the Healthplanfinder 2.0 Overview for Health Care Authority (HCA) Community Partners.**

**Questions regarding how to apply or renew Washington Apple Health (Medicaid) in Healthplanfinder may be directed to [medicaidexpansion2014@hca.wa.gov](mailto:medicaidexpansion2014@hca.wa.gov)**

**For more information or instructions on how to become a volunteer HCA Community Partner with Enhanced Access in Healthplanfinder, please visit the HCA Training & Education web page:**

**[http://www.hca.wa.gov/hcr/me/Pages/training\\_education.aspx](http://www.hca.wa.gov/hcr/me/Pages/training_education.aspx)**

**Thank you!**