The Commonwealth of Kentucky



Frequently Asked Questions



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General kynect benefits Information

Q1. What is kynect benefits?

kynect benefits is a self-service portal used by the Commonwealth to provide Kentuckians with assistance benefits from a variety of benefit programs including Medicaid, Supplemental Nutrition Assistance Program (SNAP), Kentucky Transitional Assistance Program (KTAP), Family Assistance Short Tem (FAST), Child Care Assistance Program (CCAP), and Kentucky Integrated Health Insurance Premium Payment (KI-HIPP) Program.

Q2. How do each of the kynect benefits programs assist Kentuckians?

Descriptions of the benefit programs Kentuckians can access through kynect benefits are provided below.

- **Medicaid:** provides health care for eligible low-income Kentucky Residents including children, families, pregnant women, the aged and the disabled. Medicaid offers different programs and services depending on eligibility and medical needs
- **Qualified Health Plans:** allows a Resident to buy a qualified health insurance plan through kynect health coverage
- **SNAP (Supplemental Nutrition Assistance Program):** helps people with little or no money buy food for healthy meals at participating stores. SNAP benefits increase a household's food buying power when added to the household's money
- **KTAP (Kentucky Transitional Assistance Program) / TANF (Temporary Assistance for Needy Families):** provides financial and medical assistance and supportive services to help families achieve economic self-sufficiency
- **FAST (Family Assisitance Short Term):** provides financial assistance to help families resolve short-term needs (i.e., rent, mortgage, transportation fees) and achieve economic self-sufficiency. FAST benefits last up to three months and may be an alternative to ongoing KTAP benefits.
- **CCAP (Child Care Assistance Program):** provides subsidies to help families pay for quality childcare while enabling parents to work, further their education, etc.
- **KI-HIPP (Kentucky Integrated Health Insurance Premium Payment):** a voluntary Medicaid program that helps eligible policy holders pay for the cost of an **Employer-Sponsored Insurance (ESI)** plan though reimbursements

Q3. Who is using kynect benefits?

kynect benefits is used by stakeholders across the Commonwealth including Kentucky Residents, kynectors, Authorized Representatives, community partners, DCBS staff, and more.

Q4. What languages are available in kynect benefits?

Residents may change the language of kynect benefits to *English* or *Spanish* and get interpreter information for other languages from the language drop-down in the navigation pane.

If the Resident selects *English* or *Spanish* from the navigation pane, and the selection is different from the current site language, the website is reloaded in the new chosen site language.

Q5. Why was I automatically logged out of kynect benefits?

kynect benefits automatically logs Residents out of the system after fifteen minutes of inactivity.

Q6. What can I access from the kynect benefits footer?

The footer is the same for all Residents on all screens in kynect benefits and contains the following actions:

Item:	Action:
Help & FAQs	The Help & FAQs screen is opened in a new browser tab
FAQs	The FAQs screen is opened in a new browser tab
Find DCBS Office	The Resident is taken to the Find DCBS Office screen
Cabinet of Health & Family Services (CHFS)	The Cabinet of Health & Family Services homepage is opened in a new browser tab
Privacy Policy & Terms of Use	The Privacy Policy & Terms of Use screen is be opened in a new browser tab
Contact Us	The Contact Us screen is opened in a new browser tab
(kynect benefits) 1-855- 306-8959	This triggers a mobile phone to dial: <1-855-306-8959>
(Technical Assistance) 1-844-407-8398	This triggers a mobile phone to dial: <1-844-407-8398>
CHFS.Listens@ky.gov	This triggers a mobile phone to draft an email message to: <u>CHFS.Listens@ky.gov</u> - This email address is for reporting complaints.
Report Fraud	The Resident is taken to the Report Fraud screen
Get Local Help	The Resident is taken to the Get Local Help screen

Kentucky Online Gateway

Q7. What is the Kentucky Online Gateway?

To access a variety of systems across the Commonwealth including kynect benefits, Residents must create a registration with the Kentucky Online Gateway, also known as KOG. To begin this registration process, Residents can go to the kynect benefits home page and select **sign up**.

Q8. Does a Resident need a KOG account to access kynect benefits?

Yes – Residents must have a KOG account to access kynect benefits, as they use their KOG username and password to access kynect benefits. KOG accounts and passwords must not be shared.

However, Residents can still access kynect benefits without creating a KOG account but cannot access the personalized dashboard and other features that allow Residents and additional kynect benefits users to follow or track progress. Additionally, Residents cannot initiate or submit a benefits application through kynect benefits without a KOG account.

Q9. Can I reset my KOG password?

Yes – a Resident can click **Forgot/Reset Password** if they forget their KOG password. This link is located in the KOG sign-in box, right under the *Email Address* field.

Q10. What if I already have an account with KOG?

Someone with an existing KOG account should use the same account information when applying for benefits through kynect benefits.

Q11. What are some tips for navigating KOG?

Some tips and best practices for navigating KOG include:

- KOG performs optimally in Google Chrome.
- Use Incognito on Google Chrome if multiple Residents, each with a KOG account, access the same computer.
- The Resident's email address should be unique and valid this is used to verify the KOG account and reset passwords. The email address is equivalent to the KOG username.
- Make sure to remember the security questions and answers since these are used to reset a password.

Q12. What is Identity/ID proofing?

Identity proofing is an additional layer of security during the KOG onboarding process. When creating a KOG account, Residents are asked to provide a set of core credentials including:

Required:

- Full Legal Name
- Date of Birth
- Gender

- Optional:
 - Social Security Number
 - Current Residential Address
 - Personal Telephone Number

Experian uses these core credentials to locate personal information in Experian and generate a set of questions to verify a Resident's identity to the appropriate level of assurance with the information provided. Most Residents can complete the ID proofing process in less than five minutes. Experian is required by law to securely maintain this data for seven years.

kynectors

Q13. Who are kynectors?

kynectors are trained individuals in the community who assist Kentucky Residents in applying for health coverage, specifically Medicaid and KI-HIPP.

Q14. What displays on the kynect benefits Dashboard for kynectors?

The kynect benefits Dashboard for kynectors displays key KOG information for kynectors such as their kynector ID, their Organization, Coverage Area, their **Public** vs. **Private** status, and the number of Residents the kynector is serving. kynectors can also search for individuals they serve.

Q15. How can kynectors become a Resident's kynector?

The kynect benefits redesign increases the ability for kynectors to become the kynector on a Resident's case. In addition to the **Appendix B** form, kynect benefits allows kynectors the ability to request access to a Resident's case through a request notification sent to Residents based on entered communication preferences or through verbal consent provided by the

Resident. Requesting access to a Resident case begins from the **Request Access** button from the kynect benefits kynector Dashboard.

Q16. How can kynectors manage Residents from the kynect benefits kynector Dashboard?

Kynectors can manage their Residents from the kynect benefits kynector Dashboard by:

- Searching for Residents
- Downloading Resident lists to an excel file
- Viewing Residents' notifications
- Requesting access to a Resident's case
- Organization Administrators can reassign Residents to another kynector

Q17. How can Residents find a kynector?

Residents can find a kynector by using **Get Local Help**. Residents are directed to the **Get Local Help** screen. Here Residents click the **Find a kynector** button.

Q18. What is an authorized representative?

An authorized representative is a trusted family member who can access a Resident's case or application.

Q19. What is an insurance agent?

An insurance agent is an individual who can help Residents apply for Medicaid or select health coverage plans.

Q20. How can Residents find an insurance agent?

Residents can find an insurance agent using the **Get Contacted** button in the top navigation of kynect to navigate to the **Get Local Help** screen. On the **Get Local Help** screen, Residents can select **Get Contacted** to fill out a kynect On Demand form which allows a local insurance agent to contact the Resident back via email or call to help them with selecting a health plan. Residents can also click **Find an Insurance Agent** to look for an insurance agent to add to their case.

Application Intake

Q21. What is the Benefits Application?

The Benefits Application allows Residents to apply to receive benefits from any of the available programs in kynect benefits. The Resident inputs basic contact information for all household members, selects the programs for which they are applying, and enters basic household information.

Q22. What is the process to submit my Benefits Application?

 Navigate to the kynect benefits home page, click Apply for Benefits and then select Start Application 	\rightarrow	2. Select a program to apply for, then navigate to the Application Summary screen	\rightarrow	3. Complete the Household Member and Individual Program Selection sections
V				
4. Complete the Contact Information section for all household members	\rightarrow	5. If applicable, fill out the <i>Reps, kynectors, and</i> <i>Agents</i> section	\rightarrow	6. If prompted, fill out the Relationships and Tax Filing section
7. If prompted, fill out the <i>Household</i> <i>Information</i> section and complete the <i>Member</i> <i>Details</i> section for each household member	\rightarrow	8. If prompted, fill out all applicable fields in the <i>Health Care</i> <i>Coverage</i> section and review/complete consents for the applied programs	\rightarrow	9. Sign and Submit the application - Eligibility processing has successfully been initiated

Q23. How do I know which fields to fill out in my application?

The kynect benefits system prompts Residents to answer questions specific to the program they are applying for; if Residents do not fill out a required field for their program application, the system notifies them before they can move forward in the application.

Q24. How many days do I have to complete my Benefits Application?

A Resident may have only one unsubmitted application at any given time and the Resident has 8 calendar days to submit the application they have started.

Q25. What are the sections statuses during Application intake?

Section Status:	Description:	Action Available:
Not Started	Section has not been started	Start
In Progress	Section started but not completed	Continue
Completed	Section completed	Edit
Review Required	An already completed section is affected by changes you have made	Edit

Below are the descriptions of the section statuses seen in kynect benefits application.

Q26. Will kynect benefits contact me If I enter my cell phone number during Application intake?

The phone number is used to send text messages if the Resident chooses to opt in to receive text messages. Selected contact method preferences are used for correspondences and tax-related forms. DCBS case workers may contact Residents at this number if clarification or additional verification is needed. This may occur if an application is initiated on kynect benefits and then later requires worker action.

Q27. How is the "Tax Filing" section completed during Open Enrollment?

During open enrollment period, the Resident indicates whether a Resident has the same tax status next year as the current year and, if not, enters the information for that Resident's tax status for the next year.

Q28. Can I apply for benefits if I am not a U.S. citizen?

Yes. If Residents indicate they are not a U.S. citizen, the **Not a U.S. Citizen** screen appears where they must fill out details on their immigration status and whether they have an alien sponsor. This screen appears during the *Member Details* portion of the application. After completing all fields on this screen and selecting **Next**, a services call is made to verify entered citizen identification information.

Q29. What Steps should I take to complete the "Sign & Submit" section of the application?

In the *Sign & Submit* section, Residents can review relevant policies and then sign their application to submit it. Residents may also request a voter registration application to be mailed to them.

On the **Signature Page** for Benefits Application, Residents must do the following in order to submit their application:

- 1. Read and agree to the **Terms of Agreement** for applying for benefits
 - a. Note: The Terms of Agreement vary based on program
- 2. Answer minimal final questions
- 3. Enter the Resident's name to electronically sign

Application Results and Next Steps

Q30. What are my "eligibility results"?

The **Eligibility Results** screen provides Residents with the requested benefits results for the household members, based on the information provided within the Application intake. The results are organized by program and the household members' names are listed with tiles for each of the programs for which each Resident applied.

Q31. How do I know next steps after signing and submitting my application?

Next steps associated with the actionable statuses are displayed after a Resident signs and submits their application and views their eligibility results.

Possible Next Steps include:

- Upload Verification Documents
- Complete an Interview
- Apply for a Medicaid Waiver
- Visit HealthCare.gov
- Residents may be eligible for other programs
- Need more help or information?

Child Care

Q32. How are Residents able to find Child Care providers in kynect benefits?

The *Child Care Provider Search* section allows Residents to search for Child Care Providers and find Child Care provider information such as provider name, All STARS level rating, location, and phone number. The kynect benefits provider search allows Residents to favorite providers and filter by provider location, All STARS level rating, name, type, availability, and services provided.

Q33. What is the All STARS rating system?

The All STARS rating system is administered by the Cabinet for Health and Family Services and provides Kentuckians a five-star rating on the quality of Child Care Providers. kynect benefits shows Residents the All STARS level rating of Child Care providers and allows them to filter based on a provider's rating.

MCO Selection

Q34. How are Residents able to select an MCO in kynect benefits?

Certain Residents approved for Medicaid benefits can select an MCO from the kynect benefits Enrollment Manager screen. This screen is the entry point to MCO shopping and shows a summary of current plans, members that are eligible to shop but are not active on any plan, and members that are not eligible to shop.

Q35. How will Residents know if their Primary Care Physician (PCP) accepts their Managed Care Organization (MCO)?

On the **Plan Search** screen in kynect benefits, Residents are able to search and select a PCP, filter MCO plans, and compare MCO plans. Please note, Residents can only change their MCOs during Open Enrollment or if a Special Enrollment period is triggered per their circumstance.

Presumptive Eligibility (PE) and BCCTP

Q36. What is Presumptive Eligibility?

Presumptive Eligibility is a process in Kentucky which expedites a Resident's ability to receive temporary coverage for Medicaid services. Employees of qualified entities (QE) can run a simplified eligibility review through kynect benefits for Kentuckians, which grants immediate medical assistance to Kentucky Residents at the time that they require medical coverage.

Q37. What is the Breast and Cervical Cancer Treatment Program (BCCTP)?

BCCTP is for women who have been screened by the Kentucky Women's Cancer Screening Program and found to need treatment for breast or cervical cancer can receive treatment through Kentucky Medicaid Services

Report a Change

Q38. What does it mean to "Report a Change"?

If Residents have had any changes to their information after submitting an application, they need to **report a change** to that information.

Q39. What information do I need to "Report a Change" for in kynect benefits?

Residents must report any changes to the following information:

- Contact Information (Phone, Email, Address)
- Relationship and Tax filing Status
- Medicare Coverage
- Health Care Coverage
- Pregnancy
- Education

- Income (Any Income)
- Resource (Any Resource)
- Expense (Any Expense)
- Living Arrangement
- Emergency Medical Condition and Disability
- Member Information
- Q40. How do I "Report a Change" in kynect benefits?

To Report a Change in kynect benefits, Residents must do the following:

- 1. Click **Report a Change** on the **Benefits** screen or **Dashboard** in kynect benefits.
- 2. Select the type of change you want to report. This includes either adding or removing a household member or modifying other information. After selecting the type of change, click **Continue**.
- 3. Select which information from the list of options you need to change and click **Continue**.

- 4. Select the household member(s) whose information needs to be changed and click **Continue**.
- 5. You are now brought to the **Change Summary** screen, where the information is editable for items you indicated you needed to change.
- 6. Make necessary updates to the information. Then, review the application sections potentially affected by the information change.

7. Sign & Submit.

8. Review eligibility results and next steps.

Q41. Can I complete a renewal in kynect benefits?

Only renewals for Medicaid can be completed in kynect benefits. When a Resident is completing a Medicaid renewal with a mixed program case, only screens and questions which are applicable to Medicaid are available. This allows Residents to review their case information and initiate a renewal of their Medicaid benefits.

Please Note: The **Report a Change** button is not available when the **Renewal** button is available. However, a Resident can change their information if needed during the renewal process.

Q42. Can I update my basic information in kynect benefits?

Yes. In the *My Information* section of the **Resident Dashboard**, Residents can **view** and **edit** the information provided during the application that does not require a **Report a Change** to be submitted. These details include *email address*, *primary* and *secondary phone numbers*, *preferred written* and *spoken languages*, *preferred contact method*, and *tax form preferences*.

Resident Dashboard

Q43. What is the Dashboard in kynect benefits?

Based on a Resident's benefit program, the **Resident Dashboard** may contain any of the below fields:

- **Benefits:** This section displays the names of programs the Resident is receiving, the names of programs they have applied for, and relevant application statuses.
- **Message Center:** This section displays **To Do** items to complete and messages received in kynect benefits.
- **Health Plans (MCOs):** This section appears for Residents who are enrolled in Medicaid or KCHIP. This section shows MCO enrollments and statuses.
- Authorized Reps, kynectors, & Agents: This section appears if a Resident has an authorized rep, kynector, or agent assigned to their case.
- **I Want To...:** This section contains quick actions for Residents to complete and frequently used links.
- There are also navigation actions on a **Resident's Dashboard**:

- Overview
- Benefits
- Health Plans
- Appointments

- Documents
- Claims & Payments
- Hearings

Q44. Can I request a hearing or appeal in kynect benefits?

Yes. Residents may request hearings through the **Hearings** tab accessed through the **Resident Dashboard**. After clicking, **Request a Hearing**, the Resident may choose to request a hearing/appeal for the following programs:

- Kinship Care
- Medicaid

•

- Child Care Assistance
- Cost Sharing Reduction
 - FAST

Advanced Premium Tax Credit

К-Тар

SNAP

•

• Qualified Health Plan

Residents need to answer questions about their specific hearing request and upload any notices they wish to appeal.

Q45. How do I know if I have any active claims?

The **Claims Overview** screen presents a summary of all active claims that are associated to Residents or a case number in which Residents are the primary applicant, and the balance of each of those claims. This screen also allows Residents to pay for claims which have an outstanding balance.

Document Center

Q46. Where can I upload documents in kynect benefits?

Upload documents in the **Document Center** in kynect benefits. Residents can access this screen by clicking on **Documents** on their **Dashboard**. On this screen, Residents can do the following:

- View a list of documents needed due to Requests for Information (RFIs) or needed for KI-HIPP eligibility
- Upload documents via a guided document Wizard or with an ad hoc document upload form
- View recently approved documentation

Residents can navigate to the **Document Center** screen and click the **Document Wizard** button to walk through the process of uploading a document.

Residents can also click **Upload Document** from the **To Do** list on their **Dashboard** to begin the document upload process.

Q47. What document sizes are acceptable?

For RFIs and KI-HIPP documents, files can be 5MB for *.JPEG, *.JPG, and *.PNG files and 2MB for all other acceptable types (*.PDF, *.TIFF, *.TIF).

kynect benefits Acronyms

	Acronym Key:
ABAWD	Able-bodied Adults Without Dependents
ССАР	Child Care Assistance Program
СОРРА	Child Online Privacy Protection Act
DCBS	Department of Community Based Services
DOB	Date of Birth
EBT	Electronic Benefit Transfer
FAST	Family Assistance Short Term
FFM	Federally Facilitated Marketplace
НОН	Head of Household
IEES	Integrated Eligibility and Enrollment System
KASES	Kentucky Automated Support and Enforcement System
КСНІР	Kentucky Children's Health Insurance Program
KI-HIPP	Kentucky Integrated Health Insurance Premium Payment
KOG	Kentucky Online Gateway
КТАР	Kentucky Transitional Assistance Program
KYHBE DB	Kentucky Health Benefits Exchange Database
LTC	Long Term Care
MCI	Master Client Index
МСО	Managed Care Organization
MRT	Medical Review Team
OIG	Office of Inspector General
PRTF	Psychiatric Residential Treatment Facility
RAC	Report a Change
RFI	Request for Information
RSDI	Retirement, Survivors, and Disability Insurance
SF	Salesforce
SNAP	Supplemental Nutrition Assistance Program
SSA	Social Security Administration
SSI	Supplemental Security Income
SSN	Social Security Number

Below is a table of common acronyms used throughout kynect benefits

TANF	Temporary Assistance for Needy Families
VLP	Verify Lawful Presence
WIC	Women, Infants, and Children