Health-e-Arizona Plus (www.healthearizonaplus.gov)

Q1. If a consumer wants to call AHCCCS/HEA-Plus to apply by phone, what number should they call?
DES processes most of AHCCCS Medical Benefit applications. A consumer can call: 1-855-432-7587 (1-800-HEA-PLUS) to submit an application. However, because of higher call volume at this time, it is recommended that consumers create an account and access HEA-Plus at www.healthearizonaplus.gov themselves to submit applications or contact an assistor organization for help.

Q1 a. Is DES expanding staff?
In early March, DES started the process to increase hiring for key positions in efforts to provide timely service.

Q1 b. What is the average wait, and are there times or days that have a shorter wait?
For the month of March, the average wait time was between 8 and 10 minutes. In the month of April, wait times have increased as a result of the COVID-19 crisis. Wednesday and Thursday afternoons have shorter wait times.

Q2. If an Assister or Consumer has a question about an application that has been submitted, what number do they call?
Assistors can access HEA-Plus and check on the status of applications themselves. If they need further assistance, they can email the Assistor Hotline at HEAAHCCCS@azahcccs.gov or they can call 602-542-5802 or toll free at 1-855-572-4958.

Customers need to call the HEA-plus Customer Support line at 1-855-432-7587 / 1-855-HEA-PLUS or log into their HEA-Plus account and check on the status themselves.

Q3. Are notices going to KidsCare families regarding premiums and past due amounts being waived during this crisis?
Yes, notices went out to customers regarding the waiving of premiums. Sample notices regarding the waiving of premiums were sent to the assistors via normal HEA-Plus communication methods.
Q4. Can a HEA-Plus Assister complete an application for AHCCCS, KidsCare and/or SNAP over the phone, without seeing the consumer face to face?
Yes. There are multiple methods for a consumer and assister to complete an application without meeting face to face. Listed below are directions regarding the different ways you can complete a consent using the phone.

Using an AHCCCS fillable PDF
The purpose of the updated forms is to offer multiple options to fulfill the “Assistor Consent” signature requirements for consumers utilizing community assistor organizations to submit applications.

- There are two versions. English and Spanish.
- The forms are fillable pdf’s and contain an E-Signature option.

The forms can be filled out in the following ways
- The form can be saved to a computer and filled out and sent to assistants via email or fax.
- The form can be filled out in HEA-Plus, customer can take a picture of the pages and send to assistants via email.

Below is a sample of how it would work by filling it out in HEA-Plus and taking a picture of it with a smartphone. The same process can be used if the form itself was downloaded from HEA-Plus to a computer/device and filled out, etc.

The new fillable PDFs can be found on the HEA+ main page, under “Help” (upper right corner).
From here you can search for Assistor Consent.
Using recorded consent
If your laptop/computer does not have microphone capabilities, you can use your work cellphone to record. Most cellphones come with a voice recorder already. If it doesn’t, go to your phone’s store (ex. Google play, Galaxy store, App store on iPhone), type in “voice recorder” and download. Anything with 4.5 stars should be sufficient. Once you’ve recorded the consent, you can transfer the file via cable cord from your phone to the computer.

If the assister does not have access to a work cellphone (potential security issues if they’re using a personal cellphone), a digital recorder (like this) is being used as a viable alternative.

Remember: Make sure consumer is on speaker phone so your work cellphone’s recorder/digital recorder captures both of your voices.

Once you have uploaded the consent to HEA-Plus and have confirmed that it has been attached to the consumer’s application, permanently delete the consent (including in recycling bin). You will have access to it on HEA-Plus.

The information below is from AHCCCS. The document can be found in HEA+ Links & Contacts. The script pops up when you check the box next to “Help text for voice signature.” Before getting the actual voice signature, provide a disclaimer to the consumer that a portion of your conversation will be recorded for consent/signature purposes.

VOICE SIGNATURE OPTION IN HEA-PLUS

You can upload the following types of documents: JPG, JPEG, BMP, PNG, GIF, PDF, TIF, TIFF, WAV, MP3, WMA.
Do not upload documents that are password protected. Password protected documents cannot be read and will delay your application.
Word and HTML documents cannot be uploaded.
Files with the following in the file names may cause errors: #, %, (, ), @. ^, &, !, $.
You cannot upload documents larger than 6 MB.

Assistor organizations wishing to practice “Social Distancing” may utilize the voice signature options available in HEAplus.

This will require the ability to record both the assistor reading the script at the left AND the customer answering the questions

Once recorded, the assistor may upload the voice signature to HEAplus
Script for Consent

Please say your full name.
Please say you date of birth.
Please say you address and zip code.
Please say today’s date.
Please say the name of the organization that is helping you.

The state of Arizona needs your consent for the Assister and their organization to continue helping you with this application. Any reference to Assister Organization includes the Assister, their organization, its employees, agents and contractors.

Option to Give Consent
When you give consent for an Assister Organization to help you apply using Health-e-Arizona (HEA-Plus), the Assister Organization will be able to see private, personal information in HEA-Plus for all persons in your application. The private and personal information includes:

- Information received from the Federal and State data sources, which may include, but not limited to, citizenship and immigration status and income and employment information.
- Letters sent to you by the state, and
- Eligibility decisions made by the state for your applications.

The State requires the Assister Organization to promise to keep information for the persons in your application private and not to use this information for any purposes other than to help with your applications. The State will stop access to HEA-Plus for the Assister Organization if they do not keep the information private. However, the state is required to inform you that the information disclosed to the Assister Organization may not be protected by the federal Health Information Privacy Rules found at 45 C.F.R. Part 164. If you chose to give consent for the State to release information to the Assister Organization, this consent will stop one year from today. To cancel consent earlier, contact the HEA-Plus Customer Support Center at 1-885-432-7587.

Option to Refuse Consent:
When you do not give consent for the Assister Organization to help you or you cancel consent, it will not affect eligibility for assistance.

You may apply, renew or report changes for Medical Assistance, Nutrition Assistance and Cash Assistance, without help of an Assister Organization.

- You may create your own HEA-Plus account at [http://www.healtharizonaplus.gov](http://www.healtharizonaplus.gov) to create applications yourself.
- You may complete a paper application and submit it to any DES/FAA office.

Do you give consent for the State of Arizona to show personal information for the persons in your application to the Assister Organization so they can help you with your application?

Please answer Yes or No.
Things to consider prior to using a voice recorder
If you have never used a voice recorder before, you might want to try it out with a coworker (calling in) to make sure it works properly/you’re confident in the process before a phone appointment.

- How does the voice recorder itself work? What buttons need to be pressed to make sure it’s recording properly (start and stop)?
- How close do you and consumer on speaker phone have to be to your computer/laptop/cellphone/digital recorder for it to record clearly?
- Where does the file save on your computer/laptop/cellphone/digital recorder?
- If using a cellphone/digital recorder, do you know how/where to attach the cable cord to transfer

Those who are already regularly doing by phone applications are reporting that they generally take longer than face-to-face applications. During a face-to-face, the Assister can anticipate and make entries by looking at the applicant and looking at documents, etc. Over the phone eliminates observations that may speed up the application process. And, depending on the consumer, they may not have the information at hand that is needed. If you are scheduling over the phone appointments, it is a good practice to review or send the items that they need to have available, just as you would for face to face appointments.

Using photos for documents

<table>
<thead>
<tr>
<th>Photo – Mobile Scanning</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Photo:</strong> A quality photo of the pages requiring signature may be uploaded to HEAplus for verification. Please note: If we are unable to clearly see the document, it will be marked “Insufficient” by the eligibility worker.</td>
</tr>
<tr>
<td><strong>Mobile Scanning:</strong> Free mobile scanning applications are available for customers with access to a smartphone. Link: <a href="#">Scanning Documents with a smartphone</a></td>
</tr>
</tbody>
</table>
Health Insurance Marketplace (www.healthcare.gov)

Q1. Some consumers may lose coverage because of COVID-19, they should be eligible for a Marketplace SEP. Can I help them apply over-the-phone? **Navigators and CACs should follow the same process.**


**Example 1—Assisting a Homebound Consumer over the Telephone**

Scenario: You are assisting a consumer for the first time. The consumer is homebound, and you are providing assistance over the telephone.

Authorization: You may obtain the consumer’s authorization by reading them your organization’s standard written authorization form or a script that contains, at a minimum, the required elements of the authorization that are summarized above. You must record in writing that the consumer’s authorization was obtained. The record of the authorization must include, at a minimum, the required elements summarized above. Be sure to make special notations documenting all consents provided by the consumer and any limitations placed by the consumer on their consents. We strongly recommend that you create a record of the authorization as it is being provided, and then read back the content of the record to the consumer once it is complete, so that the consumer can confirm that the record is accurate and complete, and correct it if it is not. We also recommend that you provide a copy of the record to the consumer at the earliest available opportunity.

- The Assister should verify the correct mailing address and send a copy of the authorization form to the consumer as soon as possible after the call.

The big thing is definitely to make sure that the Assisters document the consumers’ verbal consent **at the beginning of the call**. They can even use the same consent form that they typically have the consumers complete in person and, instead, have the Navigator read it to the consumer **before providing any assistance** and then make notations along the form for record purposes everywhere that the consumer would typically sign. (If the consumer doesn’t understand or refuses to give consent, then the Navigator cannot provide any consumer-specific enrollment assistance over the phone and should refer the consumer to the Marketplace Call Center.)

As for the application, the Assisters should print and then also mail to the consumer the screen(s) at the end of the online application that shows the consumer enrollment application has been successfully submitted. If the consumer doesn’t readily have access to a computer and wants a copy of their application, this is ok – just confirm the correct mailing address, preferably note confidential on the envelope, and mail it so the consumer has to sign for it since PII would most likely be included.

**Q2. Can an Assister or Consumer call HC.gov and request approval of a Special Enrollment Period (SEP)?**

Loss of Coverage is likely to be the most frequent reason for a SEP. Call HealthCare.gov at 1-800-318-2596 (TTY: 1-855-889-4325). They will be prompted to select a language.
The Assister and Consumer (or only the Consumer) can contact HC.gov to assist with submitting an SEP application and if the consumer is eligible, HC.gov should provide next steps to the Assister/consumer. An Assister or consumer can go to HC.gov and follow the questions to see if the consumer may qualify for an SEP. If they do, they can submit an application and may be asked for proof of loss of coverage which can be uploaded.

Q3. How long does the consumer have to file an SEP?
The consumer needs to apply within 60 days of the qualifying event, such as loss of coverage. The consumer will have 30 days after plan selection to get documentation submitted that proves their SEP. Once the documents are reviewed and found acceptable, the consumer would be notified via email or regular mail (depends on what the consumer selected in the application).

Q4. Does the consumer get an email letting them know or directing them to their HC.gov account so they know when they SEP was approved?
Yes, if they selected the email option within the application.

Q5. Is it true that the SEP must be approved in 30 days and if it is not, the consumer then needs to submit a new application?
No. the consumer has 30 days to get the required documentation (SEP proof) in once a plan selection is made.

Q6. If I apply using HEA+ and am not Medicaid eligible and my app is forwarded to HC.gov, how am I informed that I need proof of loss of coverage?
Either email message or paper notices will be sent to the consumer. That is if they provided an email on the AHCCCS application.

Other Insurance or Coverage Options

COBRA coverage may be offered to some employees who lose employer coverage. In most cases, Marketplace coverage will be less expensive than COBRA. However, if an employee enrolls in COBRA, they cannot drop COBRA to switch to Marketplace coverage. An employee can enroll in Marketplace coverage when COBRA coverage ends, because they will once again have loss of qualified coverage.

Health Sharing Ministries is available year around and provides coverage but it is not insurance. While it acts like insurance, it is not regulated by state or federal agencies. You pay a premium and after you have a medical expense, you submit a bill and the Health Sharing Ministry will reimburse you based on their list of covered conditions and treatments. Many people are very happy with this coverage. However, if a Health Sharing Ministry has a big increase in claims and if those claims exceed the funds they have available, you are not protected.

Short term health insurance is available year around and provides coverage that is not comprehensive and may not cover care that you need. While short term costs less, the consumer receives limited benefits. Consumers need to be very careful to review what medical services are covered. The details make a big difference. Consumers with preexisting conditions may not qualify for this coverage.