



2017 Consumer Renewal Journey & Feature Release 16.9

The Outreach and Sales Distribution Services Team

September 22, 2016

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1. **Consumer Renewal Journey**
2. **Updates to the Online Application – Release 16.9**
3. **PCP Matching**
4. **Agent Agreement Amendment**
5. **Questions**

AGENDA

September 22, 2016



- Visit www.CoveredCA.com
- In the footer, click “Enrollment Partners”
- Click “Partner Tool Kit”

PARTNER TOOLKIT

2017 Renewal Tool Kit

A "one-stop shop" for information and resources in order to support Covered California members through the renewal process. Check back frequently for updates.

Renewal			
Resource	Type	Description	Date Updated
Renewal Quick Guide	Quick Guide	Tips and reminders for the renewal process including links and information on Renewal Notices.	9/9/2016
Consent for Verification Quick Guide	Quick Guide	Information on consumer consent for verification to avoid loss of Advanced Premium Tax Credit (APTC) or Cost-Sharing Reductions in 2017.	9/2/2016
Quick Facts about Renewal Implications for Non-Tax Filers	Quick Guide	Quick facts about renewal implications for non-tax filers and a link to the IRS page for more information on IRS Notice 5858.	9/9/2016
Guidance on Consumer Delegation for Certified Enrollers	Policy	Guidance on consumer delegation for Certified Enrollers.	9/13/2016
Instructions for How to Create a Consumer Renewal and Link it to an Existing Plan	Webinar	Instructions for how to create a consumer renewal and link it to an existing plan.	7/26/2014

2017 Renewal Quick Guide Certified Enrollers

Webinars & Briefings for Certified Enrollment Representatives

- Webinars
- Agent Briefing
- Community Partner Briefing
- Downloads

Enrollers

- 2017 Renewal Tool Kit ▶
- Webinars & Briefings ▶
- Agent Extranet Tool Kit ▶
- Social Media Tool Kit ▶
- Subsidy-Eligible Maps Tool Kit ▶
- Storefront Tool Kit ▶
- Small Business Tool Kit ▶



Certified Enrollment Partners have the support they need during Renewal and Open Enrollment

- Additional Service Center Representatives
- Service Center Training
- Covered California Field Team
- CalHEERS system improvements
- Enrollment Partner Toolkit

We are here to support your enrollment efforts!



CONSUMER RENEWAL JOURNEY



Renewal - What You Need to Know

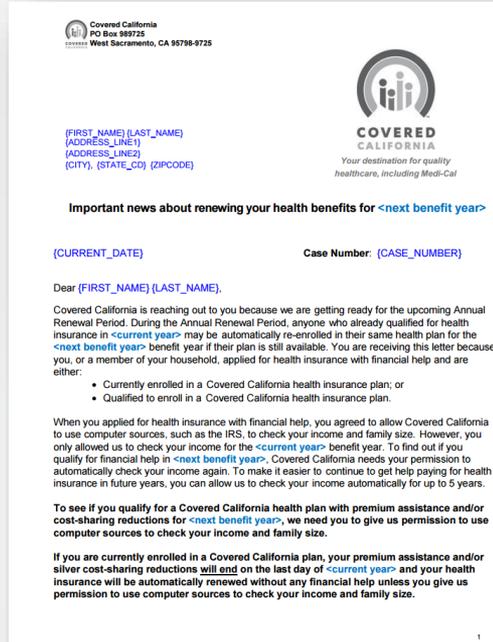
- Covered California will automatically renew consumers into Covered California Health & Dental Plans
- “Shopping Makes Cents!” – Actively renew consumers
- Renewal begins as of 9/26/16 with CalHEERS Release 16.9
- [2017 Renewal Tool Kit](#) now available
- Open Enrollment November 1, 2016 – January 31, 2017

CONSUMER RENEWAL JOURNEY



Renewal Journey

- **August 25, 2016:** Consent for Verification “CaINOD11” mailed
- **Provide consent by September 30, 2016** without losing Advanced Premium Tax Credit (APTC) in renewal.
- Review the [Consent for Verification Notice](#) & [Consent for Verification Quick Guide](#) for more information.
- Ensure to update consumer contact and demographic information!
 - **Agents:** Access the Agent Return Mail Report in the Extranet.



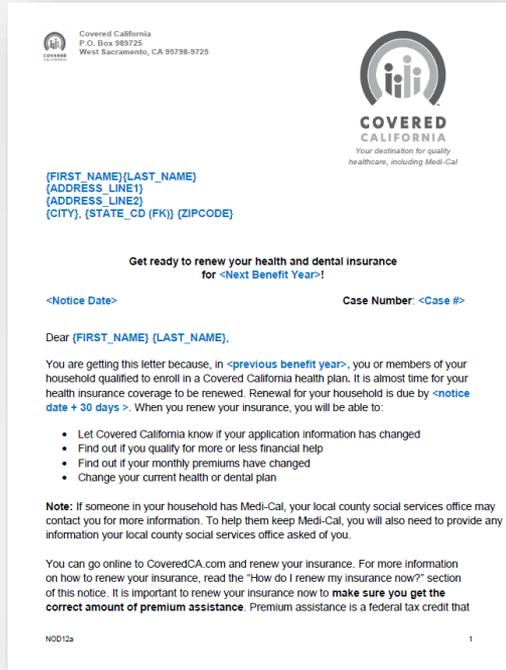
CONSUMER RENEWAL JOURNEY



Renewal Journey

October 3, 2016: First batch of Renewal Notice “CaINOD12” mailed to consumers

- Health Plans will have mailed consumers renewal notices with 2017 premium info by this date
- Covered California Renewal notices continue to send October through November
- **Automatic Renewal** – begins 30 days from the date of the Renewal Notice “CaINOD12”
- Mailed to consumers in an **enrolled** or **pending** status



CONSUMER RENEWAL JOURNEY



Review Consumer Health Coverage Options

Shopping Makes Cents!

- [2017 Covered California Health Plans Rate Book](#) and [2017 Health and Dental Plans/Benefit webinar Slide Deck](#)
- [2017 Statewide Regional Rate Analysis webinar Slide Deck](#)
- Shop and Compare (9/26 – Release 16.9)



CONSUMER RENEWAL JOURNEY



Renewal Reminders

- For consumers who wish to shop, complete renewal by **December 15, 2016 for coverage effective January 1, 2017**
- Consumer can change plans throughout Open Enrollment Period
 - Most changes to cases in a “pending” status will cancel the application
- Consumers who do not wish to renew *and* who have not terminated coverage by **10/15** must contact Covered California to opt-out of 2017 Renewal

CONSUMER RENEWAL JOURNEY



MAGI Medi-Cal Renewals (“Redeterminations”)

- **Every 12 months** following the initial eligibility determination for a Medi-Cal case.
- **Consumer redetermination notices** are sent by local county social services office.
- **Completed online** by consumers or by County Eligibility Workers (CEWs).
- **Changes to households with Medi-Cal members:** to be completed at the county; NOT by Agents, CECs, and other Certified Enrollment Representatives.
- **Plan selection:** CEWs should help the consumer and/or Agents and other Certified Enrollment Counselors can help with plan selection after the county has updated the application with the household changes.

CONSUMER RENEWAL JOURNEY



Outreach and Sales Webinar Series

Webinar Series	Date	Time	Registration
Helping Consumers in Medi-Cal	Tuesday, 10/11/16	1:00m – 2:00pm	10/6/16 Registration Link
Open Enrollment Consumer Journey	Thursday, 10/20/16	11:00am – 12:00pm	10/20/16 Registration Link

<http://hbex.coveredca.com/toolkit/webinars-briefings/>

Video Walkthroughs of the following 16.9 functionality:

- [Agent Portal](#)
- [Certified Enrollment Counselor Portal](#)
- [Shop & Compare on CoveredCA.com](#)

CONSUMER RENEWAL JOURNEY



UPDATES TO THE ONLINE APPLICATION



8 Major Updates

1. Consumer Shopping Experience & Plan Selection
2. Consumer Transitions To Medi-Cal
3. Optional Medi-Cal coverage for pregnant women
4. Auto Disenrollment due to Verification Inconsistencies
5. Self Employment and Projected Annual Income
6. Dental Plan Enrollment
7. Updated Consumer Consent to Share PII
8. Agent & CEC Portals

[CalHEERS Release Notes - 16.9](#)

UPDATES TO THE ONLINE APPLICATION



Consumer Shopping Experience & Plan Selection

- Access Shop and Compare tool on www.CoveredCA.com
- Integrates the Preview Plans page to function as the plan benefit estimator
- Video walkthrough available Friday, September 23, 2016

◀ Back to preferences **HEALTH PLANS** DENTAL PLANS CART 0

Shop for a Health Plan

36 plans for 1 adult in ZIP code 95815.
Coverage could start on 08/01/2017 once your monthly premium has been paid to your selected health plan.
Monthly premiums displayed have been reduced by your estimated monthly tax credit of **\$258.81**.

Sort By
Total Expense Estimate

Filter By

Plan Type

HMO
 EPO
 PPO

Plan Features

CSR Eligible
Includes cost sharing reductions (lower out-of-pocket costs)

HSA Compatible
Can be used with a Health Savings Account

Plan Name	Plan Type	Monthly Premium	Primary Care Visits	Generic Drugs	Yearly Deductible	Total Expense Estimate	Overall Quality Rating
KAISER PERMANENTE Silver 87 HMO	SILVER HMO	\$56.43 after \$258.81 tax credit	\$10.00	\$5.00	\$650 / \$50 (May Not Apply)	Lower	Quality Rating in future
Western Health Advantage Silver 87 HMO	SILVER HMO	\$74.65 after \$258.81 tax credit	\$10.00	\$5.00	\$650 / \$50 (May Not Apply)	Lower	Quality Rating in future
Anthem BlueCross Silver 87 EPO, an MSP	SILVER EPO	\$109.65 after \$258.81 tax credit	\$10.00	\$5.00	\$650 / \$50 (May Not Apply)	Lower	Quality Rating in future

1 2 3 >

ADD TO CART

ADD TO CART

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COMPARE VIEW DETAIL

COMPARE VIEW DETAIL

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UPDATES TO THE ONLINE APPLICATION



Consumer Transitions To Medi-Cal *“Carry Forward Status”*

Covered California consumers who report a change and become eligible or conditionally eligible for MAGI Medi-Cal will retain their Covered California health plan enrollment until a County Eligibility Worker (CEW) makes a final eligibility determination.

- Intended to protect consumers from a gap in coverage
- Eligibility page will display *“Carry Forward Status”*
- Consumers will receive a notice with details on status
- Advanced Premium Tax Credit (APTC), and/or Cost Sharing Reductions (CSR) will be maintained during *“Carry Forward Status”*

UPDATES TO THE ONLINE APPLICATION



Consumer Transitions To Medi-Cal *“Carry Forward Status”*

- If Medi-Cal eligible, CEWs will prospectively terminate Covered California coverage following the 15 day business rule
- After review consumers will retain their enrollment status with their same Covered California health plan (APTC may be updated) in deemed ineligible

UPDATES TO THE ONLINE APPLICATION



Optional Medi-Cal Coverage for Pregnant Women

- Eligible Pregnant Covered California members now have option to **stay or transition** to Medi-Cal
- Added: **Keep or Switch Coverage** link
- **Renewal:** Option to keep or switch coverage continues to the upcoming year when reporting a pregnancy

Keep or Switch Coverage

If you are enrolled in a Covered California health plan and you are pregnant, you can keep your current plan and coverage. But you may be eligible to switch to Medi-Cal during your pregnancy instead.

Below are some key points to consider:

Cost

- Medi-Cal is free with no premiums, copayments, or deductibles.
- Your Covered California plan requires copayments and deductibles for hospital labor and delivery services.

Providers

- You may have to change doctors, midwives, or hospitals if you switch from Covered California to Medi-Cal.
- Check first to see if your providers take Medi-Cal before you ask us to end your Covered California coverage.

Coverage for Your Baby

- Medi-Cal covers your baby for the first year of life at no cost to you.
- Covered California adds your baby to your family plan after you tell us that the baby was born.

Coverage After Your Pregnancy

- When your pregnancy ends, you may qualify for a different program based on your family size and income at that time.
- For Medi-Cal, we check to see what coverage you qualify for after a postpartum period of 60 days.
- For Covered California, we check to see what coverage you qualify for when you tell us about the birth of the baby, or report other changes about your income and family size.

Limitations on Returning to Covered California

- If you decide to switch and enroll in another program during your pregnancy, you can only later re-enroll in Covered California during open enrollment or if you experience a qualifying life event for special enrollment.

More Information

Contact the Covered California Service Center at 1-800-300-1506 for more information about these options.

Please choose:

Name	Date of Birth	Keep or Switch Coverage
Mackenzie Alphonso	10/10/1978	<input type="checkbox"/> Keep me in my Covered California plan with premium assistance. <input type="checkbox"/> Switch me to Medi-Cal.

ACTIONS

- [Update Consent for Verification and Tax Filing Attestation](#)
- [Report a Change for <current_yr>](#)
- Continue Change Report for <current_yr>
- Withdraw Change Report for <current_yr>
- Withdraw Application
- Report a Change
- Continue Change Report
- Withdraw Change Report
- Select Health/ Dental Plan
- Terminate Participation
- [Manage Verification](#)
- Enter Access Code
- Request Exemption
- Submit/Manage Appeal
- Discontinue from County Children's Health
- Keep or Switch Coverage**

RESOURCES

- [Manage Delegates](#)
- [Download PDF Application](#)
- [Get Adobe PDF Reader](#)

MORE OPTIONS

- [Authorized Representative](#)

UPDATES TO THE ONLINE APPLICATION



Auto Disenrollment Due to Verification Inconsistencies

- CalHEERS will **automatically** discontinue consumers conditionally eligible for Covered California coverage due to inconsistencies
- Consumers have 90 days to submit requested documents
 - Citizenship
 - Lawful Presence
 - Incarceration
 - Deceased
- An eligibility determination displays on the **Eligibility Results** page:
 - *You qualify for only {#} days because the information you put on your application does not match the information in the records we checked. To Keep your health insurance, you must submit the following documents by {date}.*
 - CalHEERS displays all outstanding verifications
- Reminder notice & discontinuance notice sent to consumer

UPDATES TO THE ONLINE APPLICATION



Self Employment and Projected Annual Income

- New question added: How Often?
- Dropdown values: Monthly and Annual
- New text to guide user in entering the correct income
- Navigates user to the IRS Schedule C form in a new window
- Displays Net Income (Amount of Gross Self Employment Income minus Gross Self Employment Expenses)
- Allows user to overwrite calculation of net income

The screenshot shows a user interface for a self-employment application. At the top, a progress bar indicates the user is currently in the 'INCOME' step, with previous steps (START, HOUSEHOLD, APPLICANTS) completed and subsequent steps (ELIGIBILITY, ENROLLMENT) pending. The user's name is John Doe, and the application and case numbers are displayed. A yellow banner prompts the user to review information and update as necessary, with a 'Cancel all changes' link. The main form area is titled 'Add Self - Employment Income' and includes a sidebar with navigation options: Introduction, Employment Income, Self-Employment Income (highlighted), Other Income, Income Deductions, and Income Summary. The form fields include: 'Household member' (John Doe), 'Type of work' (empty), and 'How often' (Select One). Below these fields, there is explanatory text and two input fields for 'Enter your Gross Self Employment Income' and 'Enter your Gross Self Employment Expenses'. A link is provided for more help determining net income.

UPDATES TO THE ONLINE APPLICATION



Dental Plan Enrollment

CalHEERS Dental Plan enrollment is now similar to the current health plan experience

- Passive Renewal enrolls consumer in same dental plan as current benefit year
- Active Renewal allows consumer to add or change a dental plan more efficiently with the new button: *Choose Dental and Health Plan*
- *Decline Optional Dental Insurance* button text changed to **Opt Out of Dental Insurance** on *Plan Selection* page
- **Terminate Plan Participation** adds the ability to terminate either health and/or dental plan
- Plan Selection checkbox on *Plan Selection* page is pre-checked for household members already enrolled in a dental plan

UPDATES TO THE ONLINE APPLICATION



Updated Consumer Consent to Share PII

CalHEERS displays a new required question, which asks the consumer if they wish to consent to receive text messages or phone calls regarding their health coverage:

*Click Yes to receive text messages and calls about your health coverage: **Yes or No***

By clicking Yes, I consent to receive autodialed and pre-recorded calls and/or text/SMS messages at the telephone number I provided (including my cell phone number), from or on behalf of Covered California. I understand this is not a condition of purchase, and that message and data rates may apply

- Displays question on all Signature pages for all users at Application, Report a Change, and Renewals
- CalHEERS does not redetermine eligibility if the only change is an update to this question

UPDATES TO THE ONLINE APPLICATION



Agent & CEC Portals – Enhanced Search

- Integrated Sort and Filter Capabilities
- Search for consumers who need to complete renewal or plan selection

The screenshot displays the search interface for the Covered California Agent & CEC Portals. The header includes the Covered California logo, customer service information (1-800-300-1506), and navigation links for Online chat, Help, My Profile, Logout, and Español. The main content area is titled "Active Consumers" and features a search bar with the following fields:

- First Name
- Last Name
- Application Type (dropdown menu open showing: Select Application Type, Subsidized, Unsubsidized)
- Issuer (dropdown menu open showing: All Health Issuers, All Dental Issuers, QHP only, Health Net-HMO, Anthem, Health Net-PPO, Blue Shield, Kaiser Permanente, Oscar, SHARP Health Plan, Valley Health, Chinese Community, Western Health, LA Care Covered, Molina Health Care, QDP only, Anthem, Blue Shield, Delta Dental, MetLife - PPO/EPO)
- Current Status (dropdown menu open showing: Select Current Status, Application Not Started, Application In Progress, Application Withdrawn, Case Inactive, Renewal Opt Out)
- Next Steps (dropdown menu open showing: None, ROP Expiring, Complete Report a Change, Complete Plan Selection, Complete Renewal)
- Select Enrollment Status (dropdown menu open showing: Select Enrollment Status, Pending, Enrolled, Terminated, Cancelled)
- Application Year (dropdown menu open showing: Select Year, Last Year, Current Year, Next Year)
- Select Year (dropdown menu open showing: Select Year, Last Year, Current Year, Next Year)

Red arrows indicate the open state of the dropdown menus for Application Type, Issuer, Current Status, Next Steps, Select Enrollment Status, and Select Year.

UPDATES TO THE ONLINE APPLICATION



Agent & CEC Portals – My Security Profile

- Enables users to self-serve
- Change their Covered California password
- Reset their Security Questions and responses
- Reset their PIN
- Register for [One Time Passcode](#) or opt-out at any time

COVERED CALIFORNIA Customer Service 1-800-300-1506 | Online chat | Help | **My Profile** | Logout | Secure Mailbox | Enrollment

Delegations Account

Agent Portal

Quick Links Enrollment Dashboard

Pending Delegation Requests

My Profile

Start New Application

Enrollments

PLATINUM

MY PROFILE

* Indicates a required field

Enroll

▼ User ID & Password

Username uatkenny1

Current Password ②

New Password ②

Re-enter Password : ②

[Reset Security Questions & Answers?](#)

UPDATES TO THE ONLINE APPLICATION



Agent & CEC Portals – Enhanced Dashboards

Enhanced Household, Enrollment, Eligibility and Carrier Information*

1	MARTIN WELLS	Case ID: 20981093	Blue Cross Blue Shield of California Silver Connect Pacific 3000 POS \$139.77/month
Phone:	Application Type: Subsidized		
Email:	Application Year: 2016		
Address:	Current Status: Enrolled in a Qualified Plan		
 Application  Household  Eligibility  Comments  Mark As Inactive			

UPDATES TO THE ONLINE APPLICATION

*Data in screenshot is for educational purposes only. Consumer data was not used.



2017 PRIMARY CARE PHYSICIAN (PCP) MATCHING



Overview

- Beginning January 1, 2017
- Health plans are required to ensure **ALL** Covered California members either select a Primary Care Physician (PCP) or have one recommended
 - Selection will occur within 60 days of the consumer's effective date with the health plan
- If the health plan selects the PCP, consumers will be able to change to another physician at any time
- Consumers are **NOT** required to see the PCP
- PPO plan members may see in and out-of-network physicians without a referral
- EPO plan members may only see in-network physicians, but do not need a referral
- Does not impact Covered California for Small Business (CCSB) consumers

2017 PCP Matching



What You Need to Know

- During renewal a PCP will be matched to consumers who do not currently have one
- When possible, matching is based on physician consumer currently has been seeing
- If the consumer has not been seeing a specific physician or is renewing with a new provider, a physician will be matched to the consumer that is as near to their home as possible
- A consumer can change this matching **AT ANY TIME** by contacting their [Covered California health plan](#)
- Consumers will receive notification from their health plan indicating which PCP has been matched to them or get confirmation of the consumer's PCP selection

2017 PCP Matching



Frequently Asked Questions

Will the PCP be required to accept the consumer as a new patient?

- In-network PCPs must schedule an appointment if the consumer is requesting an office visit. The consumer can visit another PCP, or request to select a different PCP, if the next available appointment is not offered within the timeframe in which the consumer would like an office visit.

Will the PCP reach out to consumers initially or after an event such as hospitalization?

- PCPs will only reach out to consumers after a relationship is established

Will the consumer's medical history be sent this new PCP?

- No, but the consumer can request their medical records be forwarded to the PCP once a relationship has been established.

Learn more here: <http://bit.ly/2cXBMDm>

2017 PCP Matching



AGENT AGREEMENT AMENDMENT



Look For It!

- Agent Agreements are valid for five years
- Amendments are required to be completed and signed as a result of changes to the contract
- Email from DocuSign® with subject line “Covered CA Agent Agreement Amendment - 2016”
- DocuSign® automatically resends notifications every three days until a submitted response has been received with the package expiring 60 days from the initial date sent
- Must sign or respond to a request to sign an amended Agent Agreement to maintain certification with Covered California by **November 1, 2016**
- **If you are declining your agent agreement for changes, clearly state all necessary corrected information in the pop-up box or email the corrected information to AgentContracts@covered.ca.gov**

AGENT AGREEMENT AMENDMENT



Termination

- Terminated agents will be removed from any cases they had previously been delegated to, and commissions will cease to be paid as of the termination date

If I become terminated what can I do?

- Agents can reinstate certification by sending a request for re-certification to Agents@covered.ca.gov.

More Information

- [Agent Agreement Amendment Quick Guide](#)

AGENT AGREEMENT AMENDMENT



QUESTIONS?

OutreachandSales@covered.ca.gov



THANK YOU!

OutreachandSales@covered.ca.gov

