



2021 Renewal Job Aid Certified Enrollers

Overview

Covered California's renewal period (annual redetermination process), **October 1 - December 15, 2021**, is intended to help individuals and families retain health coverage for 2021.

This Job Aid will help guide Certified Enrollers through the process of renewing consumers for the 2021 plan benefit year, with the new online application (CalHEERS) enhancements.

Important 2021 Renewal Information

There are two types of renewal for Covered California consumers:

Renewal Type	Definition	Start Date	End Date
Passive	Occurs when a consumer in <i>renewal mode</i> makes no change to their application information or the health plan. CalHEERS automatically renews the consumer's eligibility and enrollment for the next benefit year.	10/31	11/23
Active	Occurs when the consumer actively makes a change (changes plans or reports a change) during 2021 Sign-up process for the upcoming plan year. *	10/1	12/15

*In most cases, if a consumer starts an Active renewal and does not complete plan selection, the consumer *will* be renewed into a plan for the upcoming benefit year. This occurs when the consumer has not selected a new plan by the due date indicated on the *My Enrollment Dashboard* page.

Please note:

- A renewal due date displays to remind Covered California consumers and enrollers that the current plan will automatically be renewed if changes are not submitted before the date listed.
- If a consumer has no changes, does not want to shop or compare new plans, and wishes to passively renew, there is no action needed or required by the consumer or by the Certified Enroller. When the date on the [Renewal Notice](#) is reached, Covered California will automatically renew the consumer into their same plan with updated pricing, if available.
 - If the same plan is not available, Covered California will automatically renew the consumer into a plan with the same carrier and within the same metal tier.
- Passive renewals will enroll consumers in the same dental plan from 2021 for the 2021 benefit year.
 - **If a consumer terminated their health coverage for the 2021 benefit year, but did not terminate their dental plan, the dental *will* renew.**

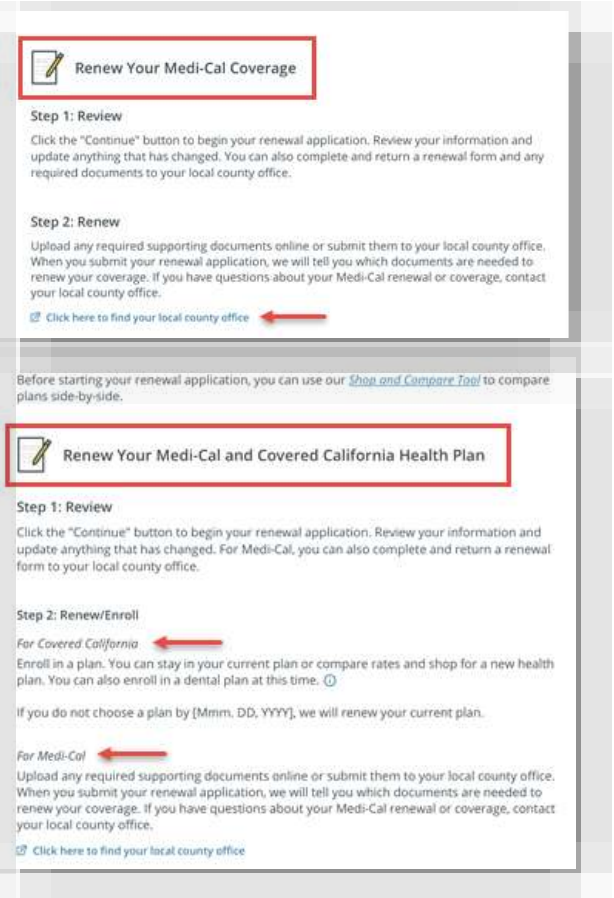
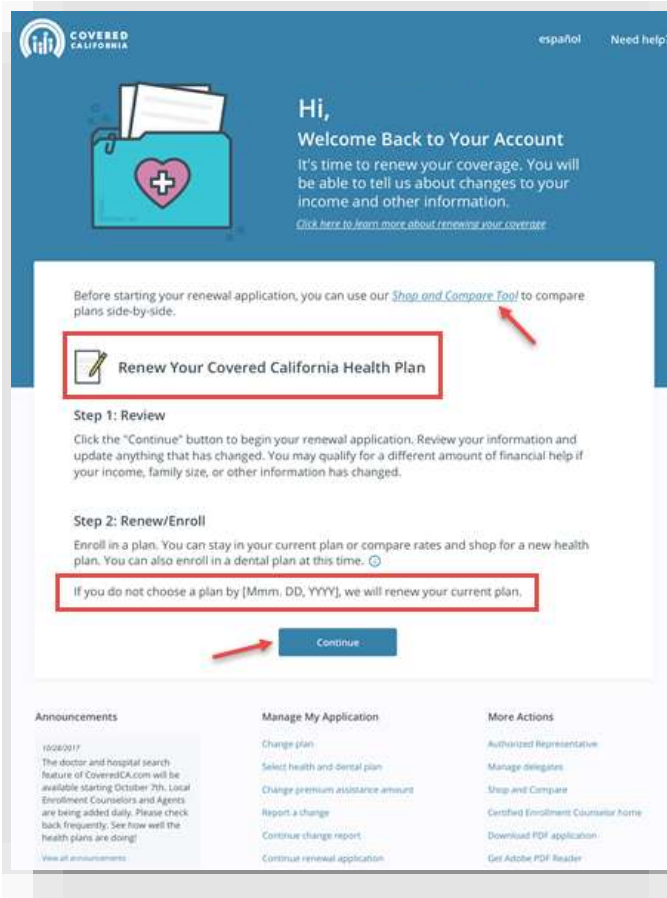
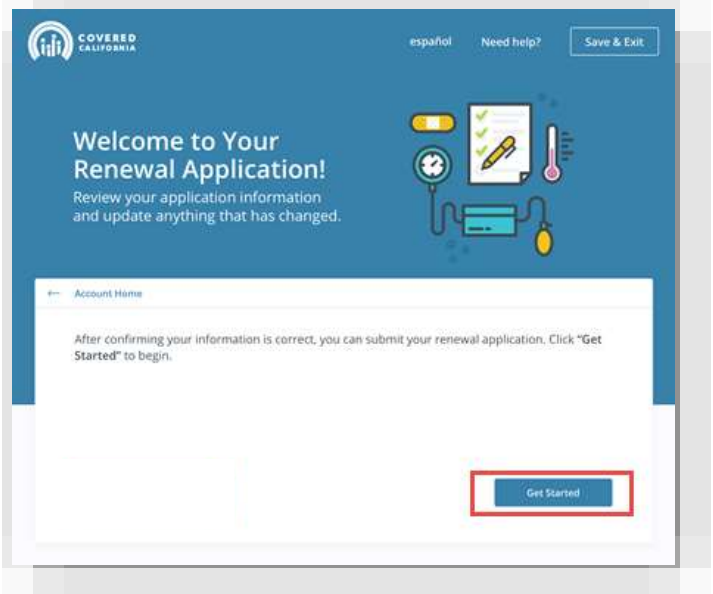
Households Not Eligible for Renewal

- Applications which were withdrawn or terminated
- Cases which opted out of renewal during the renewal timeframe (between the dates of October 1 and December 15, 2021)

Renew Mode

A household in Renew mode displays the Consumer Home page with the message: *Welcome Back to Your Account. It's time to renew your coverage.* Depending on existing coverage one of three program-specific renewal pages displays along with instructions on how to continue coverage for the next benefit year. Program specific renewal pages display for:

- **Covered California Households**
- **Medi-Cal Households**
- **Covered California & Medi-Cal Households (Mixed Households)**

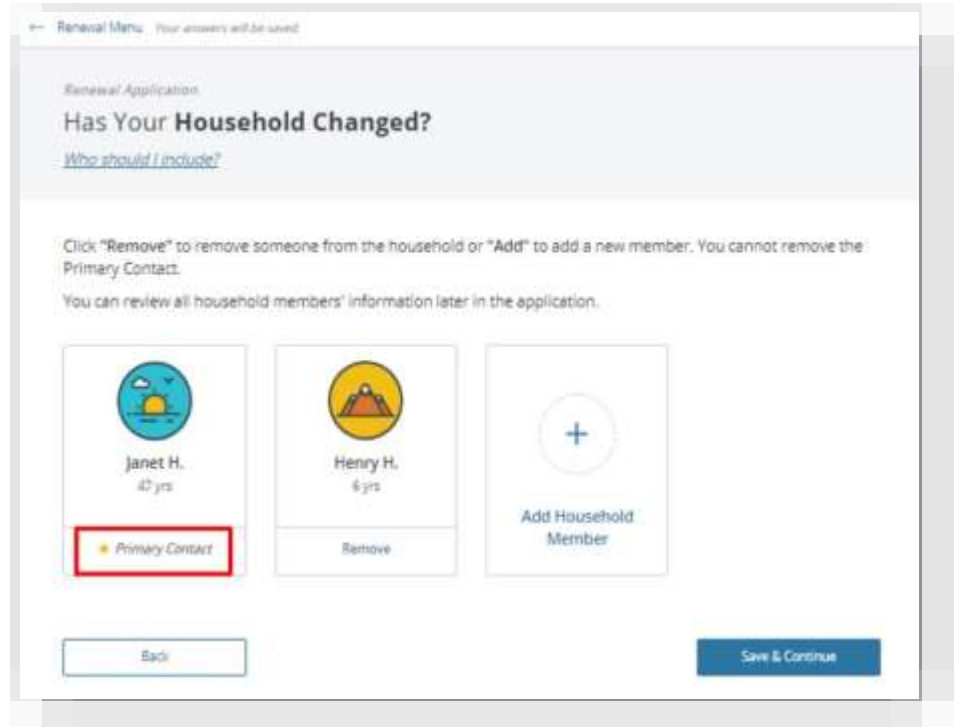


These pages vary slightly in terms of renewal instructions and links needed for renewing.

Some important points about Renewals:

For Covered California and mixed households clicking the **Continue** button navigates consumers to the *Welcome to Your Renewal Application!* page.

From the *Welcome to Your Renewal Application!* page users can click the **Get Started** button, which navigates users to the *Has Your Household Changed?* page.



Renewal Menu Your answers will be saved

Renewal Application

Has Your Household Changed?

Who should I include?

Click "Remove" to remove someone from the household or "Add" to add a new member. You cannot remove the Primary Contact.

You can review all household members' information later in the application.

 Janet H. 47 yrs Primary Contact	 Henry H. 6 yrs Remove	 Add Household Member
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Back Save & Continue

Review All Information

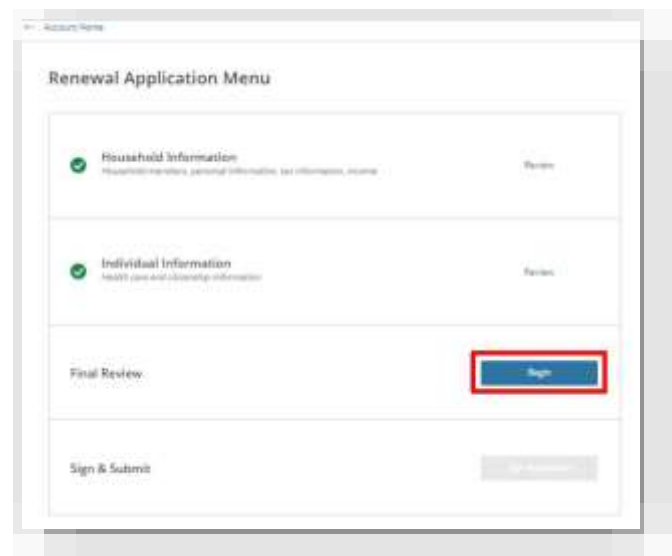
The application will progress through each section. Make sure to verify that the information is correct before moving on to the next screen. Update anything that is out of date, including Household Members and Income.

Renewal Application Menu

The *Renewal Application Menu* page displays 2021 household information. Once the information is submitted, it is used to determine eligibility for 2021.

Click on the **Begin** button to start the Final Review of the application.

If there was any information that was not updated before, click the **Edit** button in the section that needs updating and enter the new information.



Account Home

Renewal Application Menu

 Household Information Household members, personal information, tax information, income	Review
 Individual Information Health plan and coverage information	Review
Final Review	Begin
Sign & Submit	Sign & Submit

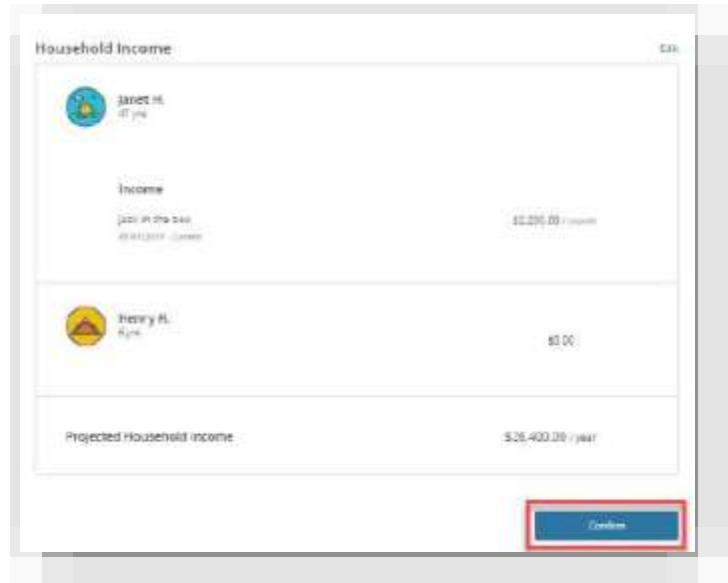
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If there is no new information for 2021, click the **Confirm** button at the bottom of the *Final Review*, and subsequent final *Review* pages, to proceed to the *Signature for Renewal* page to sign and submit the consumer's renewal application.

Note: Information entered during the renewal applies to the upcoming coverage year and may impact eligibility for insurance affordability programs as of January 1, 2021.

Examples of the types of changes that may impact eligibility include:

- Change of physical Address
- Change in Household Income
- Add or Remove a Household Member



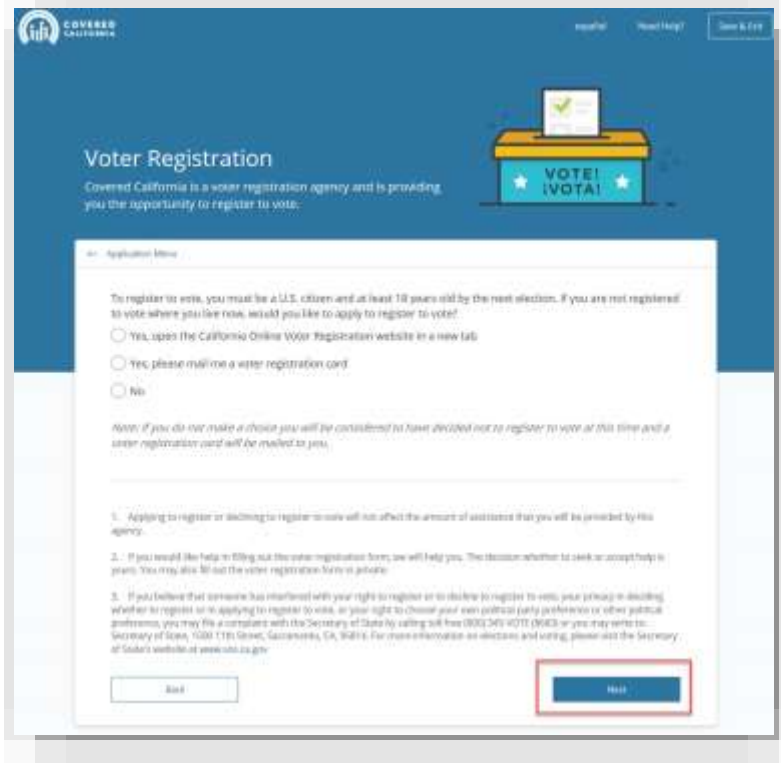
Household Income

Member	Income
Janet H. 47 yrs	\$2,200.00 / month
Henry H. 6 yrs	\$0.00
Projected Household income	\$26,400.00 / year

Confirm

Voter Registration

The *Voter Registration* page displays allowing the enroller the opportunity to register to the consumer to vote. After selecting an option, click the **Continue** button. The *Signature for Renewal* page displays.



Voter Registration

Covered California is a voter registration agency and is providing you the opportunity to register to vote.

To register to vote, you must be a U.S. citizen and at least 18 years old by the next election. If you are not registered to vote where you live now, would you like to apply to register to vote?

☐ Yes, upon the California Online Voter Registration website in a new tab.
☐ Yes, please mail me a voter registration card.
☐ No

Note: If you do not make a choice you will be considered to have decided not to register to vote at this time and a voter registration card will be mailed to you.

1. Applying to register or deciding to register to vote will not affect the amount of assistance that you will be provided by this agency.

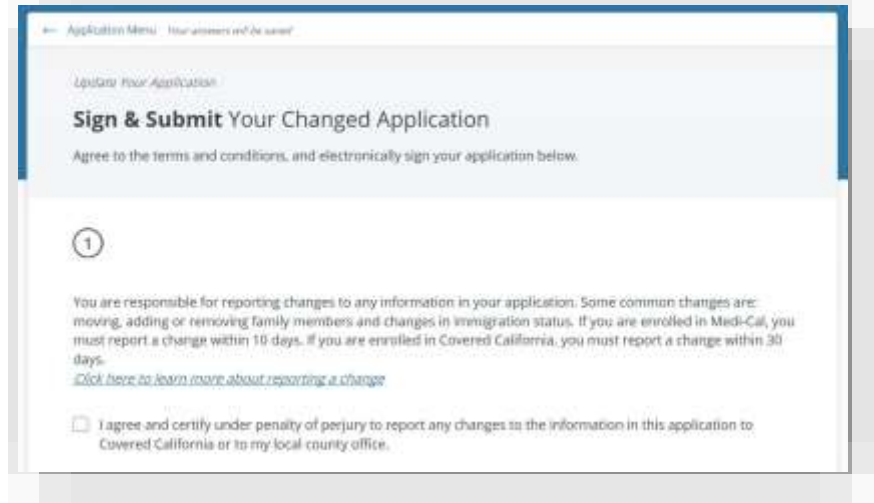
2. If you need help in filling out the voter registration form, we will help you. The decision whether to seek or accept help is yours. You may also fill out the voter registration form on your own.

3. If you believe that someone has interfered with your right to register or to decide to register to vote, your privacy in deciding whether to register or in applying to register to vote, or your right to choose your own political party preference or other political preferences, you may file a complaint with the Secretary of State by calling toll free (800) 345-VOTE (6823) or you may write to: Secretary of State, 1500 17th Street, Sacramento, CA, 95833. For more information on elections and voting, please visit the Secretary of State's website at www.sos.ca.gov.

Next

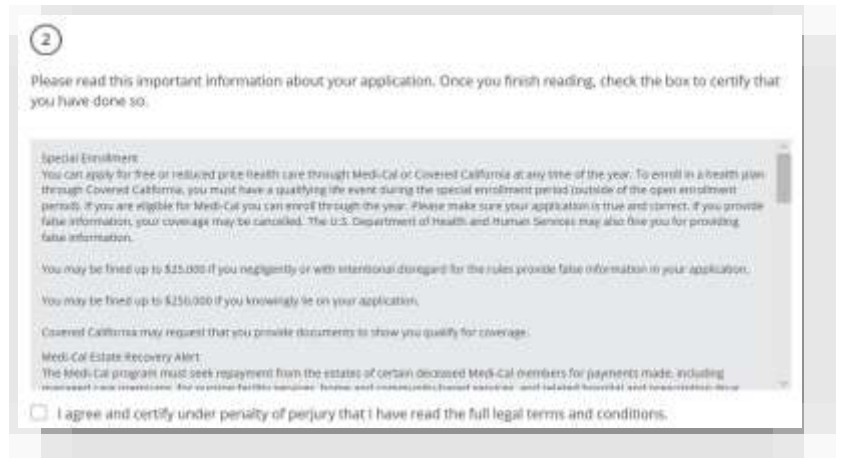
Signature for Renewal

After the *Voter Registration* page, the *Renewal Application Menu* displays, where the consumers can either re-review the Renewal Application sections or continue to the next step of the renewal process. Click the **Sign Application** button and the *Signature for Renewal* page displays.



1. The enroller must check the *I agree and certify under penalty...* checkbox
2. The enroller will click the **Declaration** checkbox in the **Review and Sign** section after obtaining the consumer's consent. Please read this important information about your application. This section requires reading and scrolling through the text in its entirety before the attestation checkbox can be checked.

Note: The **Submit** button at the bottom of the page is disabled until all checkboxes on the **Signature for Renewal** page are checked.



- The enroller enters their **Electronic Signature** and **Electronic PIN** number to sign the renewal. Click the **Submit** button at the bottom of the page to submit the renewal application and initiate the eligibility determination.

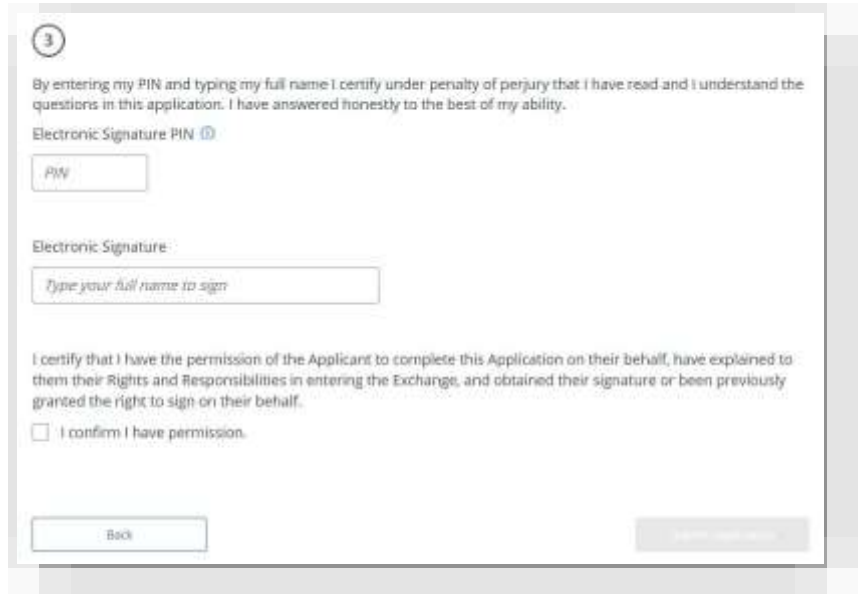
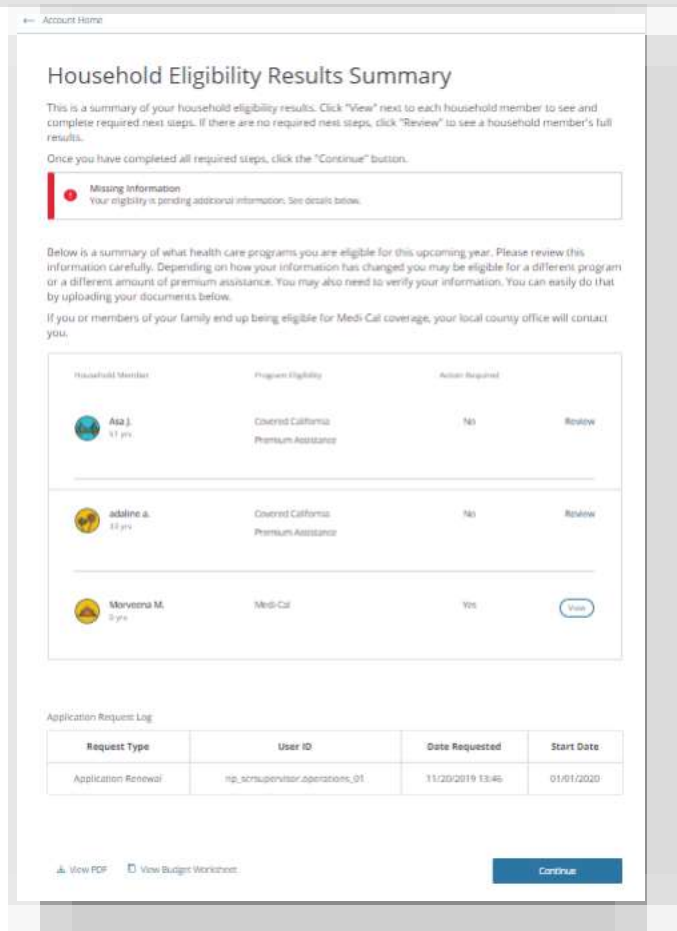
Renewal Results

The *Household Eligibility Results* page displays a summary of health care programs the household is eligible for in the upcoming coverage year.

Carefully review the eligibility information on this page with the Consumer. The household may be eligible for different programs or required to provide documentation to ensure the household obtains or retains coverage for 2021 that is appropriate for their eligibility.

To view a PDF version of the submitted renewal application, click the **View PDF** link at the bottom of the *Household Eligibility Results* page.

To save the consumer's information and exit the renewal, click the **Continue** button. You will be navigated to the *My Enrollment Dashboard* page.

Household Member	Program Eligibility	Action Required
Aja J. 17 yrs	Covered California Premium Assistance	No Review
Adeline A. 17 yrs	Covered California Premium Assistance	No Review
Myriam M. 0 yrs	Medi-Cal	Yes View

Request Type	User ID	Date Requested	Start Date
Application Renewal	hp_scsupervisor_operators_01	11/20/2019 13:46	01/01/2020



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Renew Health Plans

The *My Enrollment Dashboard* page displays the health programs for which the household members are eligible.

Click the **FINALIZE PLANS** button on the Household Eligibility Results Summary page.
Note: If the Renewal is completed via the passive renewal process, the **FINALIZE PLANS** button on the Household Eligibility Results Summary page displays as **CHANGE PLANS**.

The page for enrollment groups displays with a tab to *SHOP FOR HEALTH PLANS* and *SHOP FOR DENTAL PLANS*. The consumer can choose to renew their existing plan if it is available or change their plan for the next benefit year.

To change the existing plan, click the **you can click here to start shopping in new groups** link. The consumer is navigated through the regular Plan Selection process. To keep the current health plan, select the **Renew or Change Plan** button to proceed with the enrollment process

The screenshot shows the '2021' tab selected at the top. A blue banner at the top states: 'Open enrollment period ends on 01/15/2020. You have 56 days to enroll in plan. If you are reporting a change on your current year's enrollment, please click on the 2019 tab to complete your enrollment.'

NEXT STEPS

You have successfully reviewed and completed your application for 2020. Please renew or change your plans by clicking on the 'FINALIZE PLANS' Button.

FINALIZE PLANS

Overview

Your Application Status

2020 Application For 3 members	Complete	Eligibility Details
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Your Household Eligibility

Morveena Morveena Medi-Cal eligible	Federal Advanced Premium Tax Credit	View Details
Asa Jackson	\$728.10 per month	
Adaline Adele	CA Premium Subsidy	Report a Change
	\$36.71 per month	

Your Health Plans

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

Your Dental Plans

You will be able to see your dental plan here once you have completed plan shopping. [Start Shopping](#)

SHOP FOR HEALTH PLANS

SHOP FOR DENTAL PLANS

Renew your current enrollments or change plans for your current enrollment groups as below. If coverage needs for your household members have changed and you would like to enroll them in different groups, you can click here to start shopping in new groups.

2019 Enrollments (2 members)

Federal Advanced Premium Tax Credit for this group in 2020: **\$728.10 per month** and CA Premium Subsidy for this group in 2020: **\$36.71 per month**

☒ Asa Jackson	Western Health
☒ Adaline Adele	Bronze 60 HMO
	\$262.47 per month

Renew or Change Plan

The *SHOP FOR DENTAL PLANS* tab displays.

SHOP FOR HEALTH PLANS

SHOP FOR DENTAL PLANS

Renew or change plans for your current enrollment as below. If coverage needs for your household members have changed and you would like to not renew some members you can [click here to start shopping](#).

2019 Enrollments (2 members)

☒ Asa Jackson
☒ Adaline Adele

Delta Dental
Family Dental HMO
\$29.98 per month

Renew or Change Plan

Similar to renewing or changing the health plan, the dental plan can be renewed or changed by the consumer. Click the **Renew or Change Plan** button to proceed with the enrollment process.

The **Renew Your Plans** page displays with information related to costs associated with coverage for the upcoming year. A user-friendly itemized list of Monthly Premium and net Monthly Premium Amount displays for the consumer.

Click the **Next** button to proceed with the final step in renewing the enrollment plan.

Renew Your Plans

Your existing plan(s) displayed below is available for renewal.
 Helpful Note: Plan details and costs may change from year to year. You are encouraged to carefully review your plan options to make sure you have the plan that best fits your needs and is the best value for you.
 To shop and compare plans click **BACK TO SHOPPING**.

- The monthly premium for your selected health plan increased from \$822.89 to \$851.33.
- Your maximum monthly CA Premium Subsidy increased from \$8.80 to \$26.71.
- Your maximum monthly tax credit increased from \$429.52 to \$726.18. This tax credit reduces the amount you will be required to pay each month for your health plan.

Health Plan: Asa, Adaline		Amount
 Western Health Advantage Coverage Start Date: 01/01/2020	Monthly Premium	\$851.33
	Monthly Federal Tax Credit	-8728.43
	Monthly CA Premium Subsidy	-538.71
HEALTH MONTHLY PAYMENT		\$188.94
Cost Total:		
	Health Monthly Payment	\$188.94
	TOTAL MONTHLY PAYMENT	\$188.94

Back to Shopping

Next

Note: The consumer has the option to change their plan before continuing, the **Back to Shopping** button begins Plan selection.



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The *Provide eSignature* page is the last step in the plan renewal process. The *Provide eSignature* page is no different during renewal as it is during initial application or report a change. Click the **Enroll** button to sign and submit.

Provide eSignature

To checkout, read the agreement here and enter your personal identification number (PIN) and eSignature in the spaces below. When you enter your PIN and eSignature, it means you are sure about the health insurance plans you chose and have read all the terms and conditions.

☒ I agree: *

- To file a federal income tax return on or before the due date for the return (including extensions of time for filing) to claim the Federal Advanced Premium Tax Credit (APTC) if applicable.
- To file a state income tax return on or before the due date for the return (including extensions of time for filing) to claim the CA Premium Subsidy if applicable.
- To report changes to Covered California that affect my eligibility, including: income, household size and address. These changes could affect the plans and Federal APTC subsidies for which I am eligible.
- I cannot switch plans outside of the Open Enrollment Period unless I have a qualifying life event. Some of the qualifying life events are a permanent move that results in access to new plans, birth or adoption of a child, marriage or domestic partnership.

Binding Arbitration Agreement:

Print

I understand that every participating health plan has its own rules for resolving disputes or claims, including, but not limited to, any claim asserted by me, my enrolled dependents, heirs, or authorized representatives against a health plan, any contracted health care providers, administrators, or other associated parties, about the membership in the health plan, the coverage for, or the delivery of, services or items, medical or hospital malpractice (a claim that medical services were unnecessary or unauthorized or were improperly, negligently, or incompetently rendered), or premises liability. I understand that, if I select a

To enter your eSignature, please enter your full name. *

Eva Tomez

☒ I have read and agree to the Binding Arbitration Agreement. *

PIN Number *

....|

Provide eSignature:

Eva Tomez

Date: 11/20/2019

Back

Enroll



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The Confirmation page confirms the enrollment process is complete and the consumer is renewed for the upcoming year. A message displays “You have completed checkout with Covered California. You will be enrolled once you pay your premium bill to the plan(s) you chose. Congratulations!”

Confirmation

You have completed checkout with Covered California. You will be enrolled once you pay your premium bill to the plan(s) you chose. Congratulations!

Health Plans

Asa Jackson, adaline adele

Expected Start Date: 01/01/2020

	Western Health Bronze 60 HMO	Monthly Premium (monthly cost)	\$ 951.35
You will receive billing statements and instructions for paying offline from your insurer.			

Total Monthly Premium Cost	\$ 951.35
Monthly Federal Tax Credit	-\$ 728.10
Monthly CA Premium Subsidy	-\$ 38.71
Your Total Monthly Premium Payments	\$ 186.54

Making Changes to Your Plan

If changes occur in your household, to report them, log in to your account and click on “Report a Change” or “Change Plans”.

Disclaimers

You are not enrolled until your plan(s) receives your premium payment. If you do not pay your first payment(s) your application may expire. If your application expires you may be required to resubmit your application and may have to wait until the next Open Enrollment Period.

[Shop For More Members](#)

[Print Page](#)

[Go to Dashboard](#)



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Covered California Plan Auto-Enrollment

Covered California will automatically enroll eligible household members in their current health plan or similar plan if the Consumer does not select a new plan by the date in their renewal notice, which can be found in the *Documents and Correspondence* page. Note: If the consumer is enrolled in a dental plan and makes no changes to that dental plan, they will automatically be renewed into the same dental plan.

Health insurance carriers will notify consumers of a 2021 plan substitution to a similar plan if their 2021 plan is no longer available. If the current plan is not available for 2021, the consumer must act and select a new plan no later than December 14, 2021 to prevent a break in coverage. (Note: The health insurance carrier will provide notice to the Individual if a plan will not be available in the upcoming coverage year.)

In most cases, if the consumer does not select a plan by the date shown on the *Household Enrollment Introduction* page, Covered California auto-enrolls them in the same plan for the upcoming benefit year.

Passive Renewal

Passive Renewal is a batch process that automatically re-enrolls an eligible household in the same plan for the upcoming coverage year if they have not confirmed their current plan or selected a new plan by the due date indicated on the *My Enrollment Dashboard* page. The last batch run for auto-enrollment will occur 11/29/2020 to enroll with an effective date of 1/1/2021.

Note: Consumers will also be automatically re-enrolled in the same dental plan as well, if still available.