



Live Community Partner Q&A Session

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The Outreach and Sales Team

December 22, 2015

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OVERVIEW

- Open Enrollment Update
- Subsidy-Eligible “Heat” Maps
- Service Center Update
- 2015 Accomplishments – Year in Review
- 2016 And Beyond
- Questions and Answers

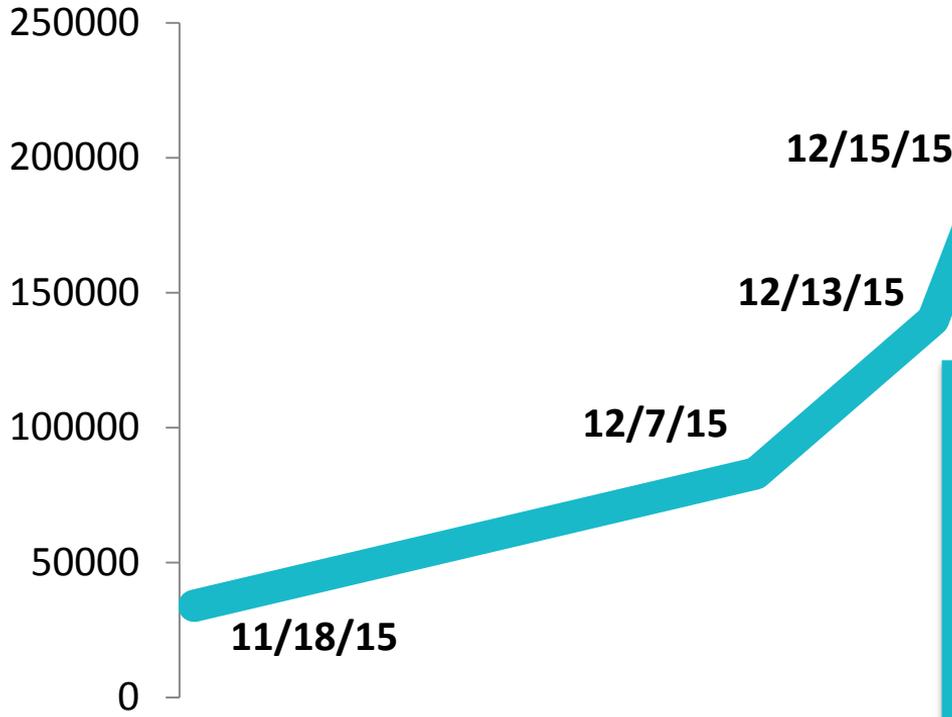
OPEN ENROLLMENT UPDATE



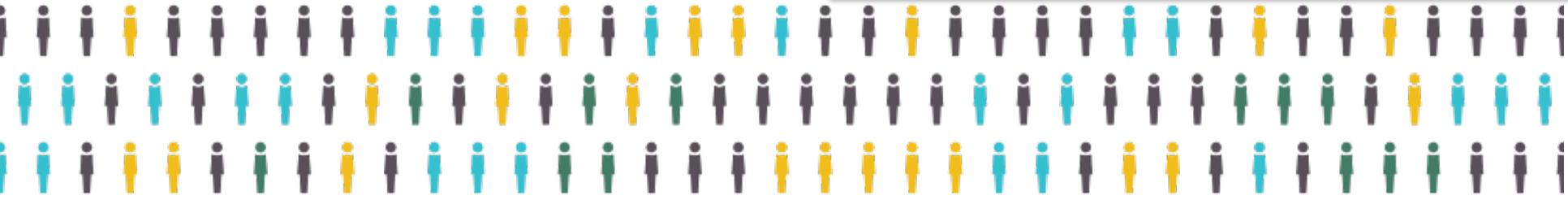


**295,000 to
450,000**

consumers will
newly enroll in
coverage during
open enrollment.



197,000
NEW ENROLLMENTS

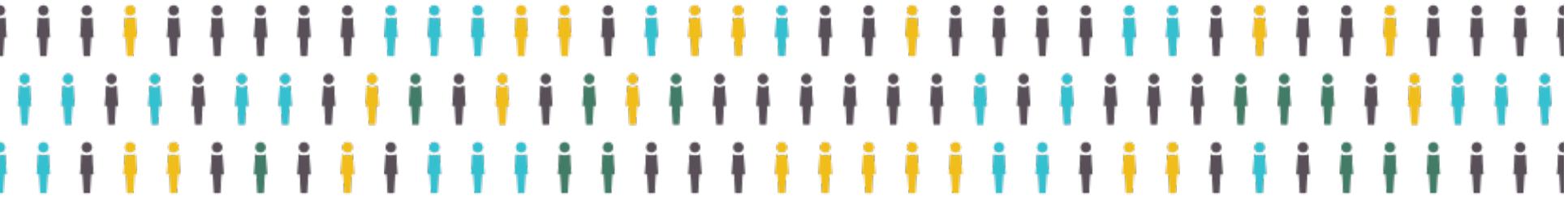




MORE THAN

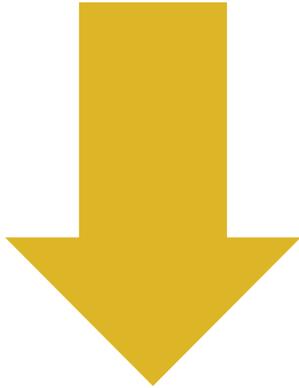
55,000

NEW ENROLLMENTS



OPEN ENROLLMENT UPDATE

In California, we have reduced the uninsured rate



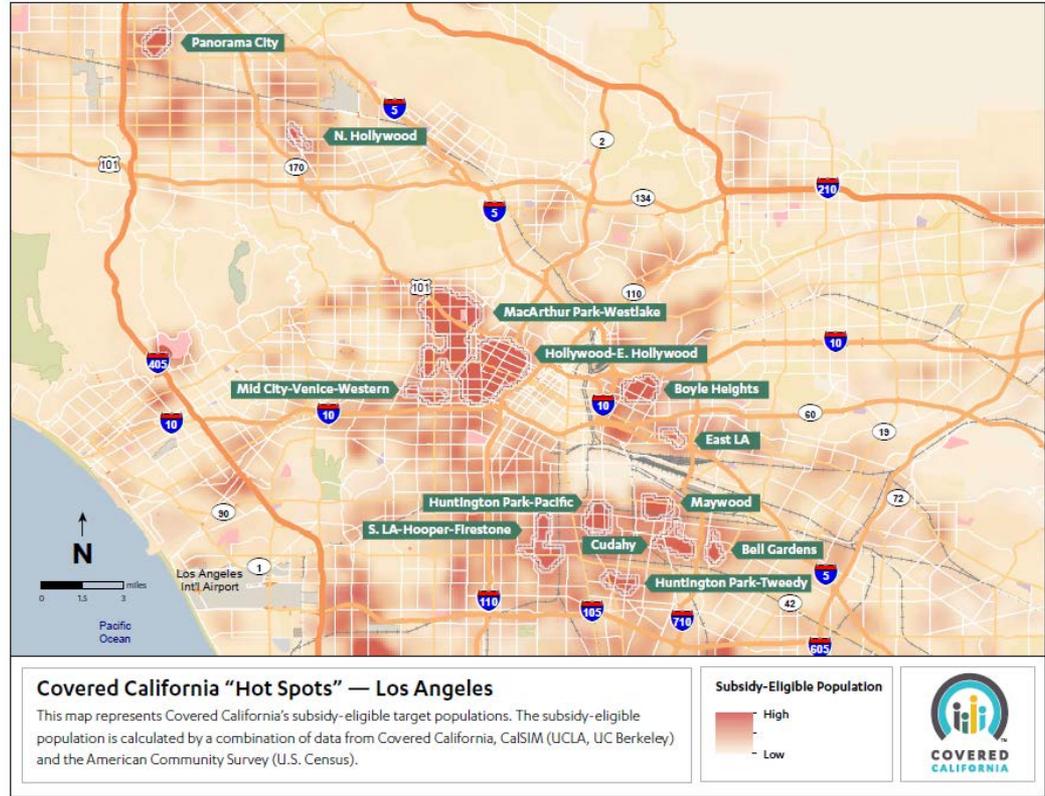
2013	17%
2015	8.6%



750,000

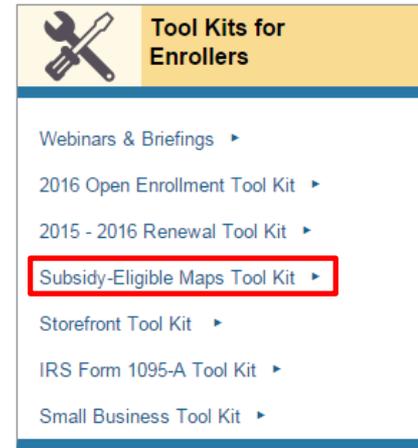
uninsured
Californians eligible
for subsidies

SUBSIDY-ELIGIBLE MAPS



SUBSIDY-ELIGIBLE MAPS

- Identify high density subsidy-eligible populations at a census track level
- Help you plan and strategize your outreach, education, and enrollment efforts
- Organized by 8 sales areas and 19 pricing regions
- To access the maps visit:
 - CoveredCA.com
 - In the footer click “Enrollment Partners”
 - Click “Partner Tool Kit”
 - Click “Subsidy-Eligible Maps Tool Kit”



SERVICE CENTER UPDATE

CEC/PBE Help Line

Phone: (855) 324-3147

Open Enrollment Extended Hours

Monday thru Friday, 8:00 a.m. to 8:00 p.m.

Saturdays and Sundays, Closed

Holiday Hours

Thursday, December 24, 2015, 8:00 a.m. to 4:30 p.m.

Friday, December 25, 2015, Closed

Thursday, December 31, 2016, 8:00a.m. to 4:30 p.m.

Friday, January 1, 2016, Closed

Special Weekend Hours

Saturday, January 30, 2016, 8:00 a.m. to 10:00 p.m.

Sunday, January 31, 2016, 8:00 a.m. to 10:00 p.m.

Consumer Service Center

Phone: (800) 300-1506

Consumer Service Center Hours:

Open Enrollment Extended Hours

Monday thru Friday, 8:00 a.m. to 8:00 p.m.

Saturday, 8:00 a.m. to 6 p.m.

Holiday Closures

Friday, December 25, 2015, Closed

Friday, January 1, 2016, Closed

2015 ACCOMPLISHMENTS – Storefront Program



- Storefront Toolkit
- Storefront Finder User Manual
- Streamlined Eligibility and Criteria
- New email: Storefront@covered.ca.gov

- Events Program
- Events@covered.ca.gov

Consumers have access to almost 600 storefronts statewide.

2015 ACCOMPLISHMENTS – Access to the Print Store



NEW! 2015/2016 Open Enrollment Paper Calculator

All versions are double-sided with English on one side, and your chosen language on the other.

- Spanish
- Korean
- Chinese
- Tagalog
- Vietnamese
- Arabic
- Armenian
- Farsi
- Hmong
- Khmer
- Lao
- Russian



New! 2015/2016 Enrolling in Quality Health Coverage

A Step-by-Step Guide

- English
- Spanish
- Arabic
- Armenian
- Chinese
- Farsi
- Hmong
- Khmer
- Korean
- Lao
- Russian
- Tagalog
- Vietnamese



Enrolling in Quality Health Coverage

Enhanced Silver Plans

- English & Spanish



Getting Affordable Health Coverage in California

What You Need to Know

- English
- Spanish
- Arabic
- Chinese
- Farsi
- Hmong
- Khmer
- Korean
- Lao
- Armenian
- Russian
- Tagalog
- Vietnamese



Now That You're Enrolled

Using Your Plan

- English
- Spanish



ToolKits for Enrollers

Webinars & Briefings ▶

- 2016 Open Enrollment ToolKit ▶
- 2015 - 2016 Renewal ToolKit ▶
- Subsidy-Eligible Maps Toolkit ▶
- IRS Form 1095-A ToolKit ▶
- Small Business ToolKit ▶



Presentations and Handouts

- Covered California 101 Presentation ▶

Printable Materials, such as brochures and fact sheets ▶

2015 ACCOMPLISHMENTS – Shop & Compare App

SHOP AND COMPARE UPDATES

- Updated October 12, 2015
- Enhancement on November 1, 2015 for Dental Plans
- Personal Proposal – Now Available
 - Download a PDF on the dotcom and tablet versions
 - Mail a copy to consumers with your contact information (Android and iOS mobile apps)
 - Personal Proposal User Guide

Why choose Enhanced Silver 73
Enhanced Silver Coverage: = enhancedLevel %

Provider	Plan Name	Overall Quality	Your Total Monthly Payment (w/ tax credit)	Monthly Premium Assistance (Tax Credit)	Total Monthly Premiums
CCHP	CCHP Silver 70 HMO	★★★★☆	\$151	\$148	\$300
Blue Shield of California	Blue Shield Silver 70 PPO	★★★★☆	\$181	\$148	\$330
Kaiser Permanente	Kaiser Permanente Silver 70 HMO	★★★★★	\$203	\$148	\$352
Health Net	Health Net Silver 70 EPO	★★★★★	\$224	\$148	\$373

Shop and Compare Tool clearly shows bottom-line payment information.

2015 ACCOMPLISHMENTS – Shop & Compare Proposal

HOME SHOP AND COMPARE ABOUT ESPAÑOL

AGENT/CEC



Welcome to the Covered California Shop and Compare Tool

In just one click, you can find out what health insurance plans you can buy, and if you qualify for monthly premium assistance or Medi-Cal.

[Get Started](#)

What is Covered California?



TAX PENALTY INFORMATION



HEALTH INSURANCE BENEFITS



HELP WITH YOUR COSTS



INCOME GUIDELINES

Personal Proposal

If you are a Certified Agent or a Certified Enrollment Counselor and you would like to send a customized proposal to consumers with your contact information, enter it in the fields below.

Name *

Agent Number

Street address

City

State

California

ZIP

5 digit ZIP code

Email

Phone *

* These are required fields.

Clear

Submit



2015 ACCOMPLISHMENTS – Shop & Compare Proposal

HOME SHOP AND COMPARE ABOUT ESPAÑOL

AGENT/CEC ✓



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In just one click, you can find out what health insurance plans you can buy, and if you qualify for monthly premium assistance or Medi-Cal.

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What is Covered California?



TAX PENALTY INFORMATION



HEALTH INSURANCE BENEFITS



HELP WITH YOUR COSTS



INCOME GUIDELINES

Household Information

Household income * Annual

ZIP Code * San Diego County

Enter the **AGE** of each person, whether they are enrolling or not. Uncheck the **ENROLLING** box next to the age for those household members not enrolling. Note: Premium estimates assume same age for each member as of coverage effective date.

	Age	Enrolling	
Person 1	<input type="text" value="30"/>	<input checked="" type="checkbox"/>	Remove
+ Add person			
Total Enrolling:	<input type="text" value="1"/>		
Number of people in the household	<input type="text" value="1"/>		

\$ Breaking Down the Monthly Cost

Good news! You may qualify for help with paying for health insurance through Covered California. Now, let's take a look at the health insurance plans that may be available in your area!

* Indicates required field

[Clear](#) [See My Options](#)

Your Options

[Request your Personal Proposal](#) [Enroll](#)

[Bronze/Silver](#) [Gold/Platinum](#) [Family Dental Plans](#)



2015 ACCOMPLISHMENTS – Shop & Compare Proposal

Get Personal Proposal

Fill out this form to get your personal proposal

Download Mail to me

Enter the information below to have mailed to you or to download a free personal proposal for your household.

Enter the first and last name of the person whose household information will appear in the personal proposal.

Covered California can not email your personal quote due to US privacy laws protecting Personally Identifiable information (PII). You can Download and Print your personal quote or have a copy mailed to you.

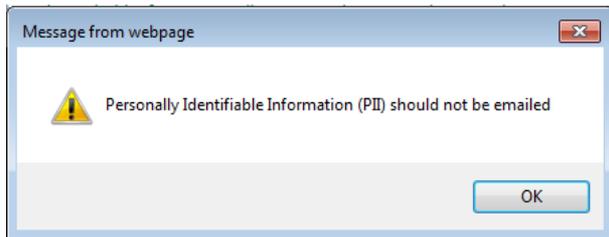
First Name *

Last Name *

Covered California is dedicated to safeguarding the privacy and security of your personal information, you can read our [Notice of Privacy Practices](#).

Download and Print

* Indicates required field



Get Personal Proposal

Fill out this form to get your personal proposal

Download **Mail to me**

Enter the information below to have mailed to you or to download a free personal proposal for your household.

Enter the first and last name of the person whose household information will appear in the personal proposal.

Covered California can not email your personal quote due to US privacy laws protecting Personally Identifiable information (PII). You can Download and Print your personal quote or have a copy mailed to you.

First Name *

Last Name *

Street address *

City *

State *

ZIP *

Send a copy of the proposal to the following address:

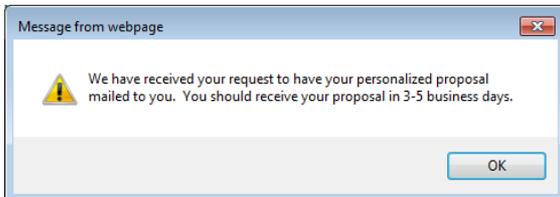
Gil Duran, 717 23rd St, Sacramento CA 95811

Covered California is dedicated to safeguarding the privacy and security of your personal information, you can read our [Notice of Privacy Practices](#).

Have one mailed to me

* Indicates required field

2015 ACCOMPLISHMENTS – Shop & Compare Proposal



To the name family:

Congratulations on taking another step on your journey to find affordable, quality health insurance through Covered California, California's new health insurance marketplace.

This proposal reflects your situation based on the information you provided, summarized below:

Household Information		Enrollee Information	
Number of people in the household	1	Adult 1 Age	24
Household income (Annual)	\$24,000		
ZIP Code	90209		

Based on this information, you and your family qualify for the following programs

- Monthly Premium Assistance of \$69 to help pay for your adult health care.
- The adults are eligible for the Enhanced Silver 73 plan which help pay for out-of-pocket costs

Your Premium Assistance \$70

Bronze⁶⁰

Insurance Provider	Monthly Premium	Your Tax Credit	Your Monthly Premium (after tax credit)
CCHP Bronze 60 HMO	\$266	- \$70	= \$195
Kaiser Permanente Bronze 60 HSA HMO	\$307	- \$70	= \$236
Kaiser Permanente Bronze 60 HMO	\$315	- \$70	= \$244
Anthem Bronze 60 HSA PPO	\$319	- \$70	= \$248
Blue Shield Bronze 60 PPO	\$332	- \$70	= \$262
Blue Shield Bronze 60 HSA PPO	\$335	- \$70	= \$264
Health Net Bronze 60 EPO	\$336	- \$70	= \$265
Anthem Bronze 60 PPO	\$342	- \$70	= \$271

Silver⁷⁰

Insurance Provider	Monthly Premium	Your Tax Credit	Your Monthly Premium (after tax credit)
CCHP Silver 70 HMO	\$352	- \$70	= \$282
Blue Shield Silver 70 PPO	\$388	- \$70	= \$317

Understanding Your Benefit Choices

For each level or type of plan, all insurance plans offer the same benefits. It is important to understand the benefits and risks of each level of plan and determine how much health care you need or expect to use.

The chart below shows how much you will pay for covered services under each level of plan offered by each health insurance company. You should understand the terms on the next page when reviewing the chart.

Benefit Comparison

Key Benefits	Minimum Coverage	Bronze ⁶⁰	Enhanced Silver ⁷³	Gold ⁸⁰	Platinum ⁹⁰
Individual Deductible	\$6,850 deductible for medical & drugs	\$4,000 medical deductible pharmacy deductible \$500	\$1,900 medical deductible pharmacy deductible \$250	no deductible	no deductible
Family Deductible	\$13,700 deductible	\$12,000 medical deductible pharmacy deductible \$1,000	\$3,800 medical deductible pharmacy deductible \$500	no deductible	no deductible
Preventative Care Copay	no cost	no cost	no cost	no cost	no cost
Primary Care Visit Copay	No cost for first 3 non-preventive visits*	\$70*	\$40	\$35	\$20
Specialty Care Visit Copay	To see what you pay see below *	\$90*	\$55	\$55	\$40
Urgent Care Visit Copay	No cost for first 3 non-preventive visits*	\$120*	\$80	\$60	\$40
Tier 1 (most generics) Drug Copay	To see what you pay see below *	100% up to \$500 per script after deductible	\$15	\$15	\$5
Lab Testing Copay	To see what you pay see below *	\$40	\$35	\$35	\$20
X-Ray Copay	To see what you pay see below *	100% of your plan's negotiated rate	\$50	\$50	\$40
Emergency Room Copay	To see what you pay see below *	100% of your plan's negotiated rate	\$250	\$250	\$150
High cost and infrequent services (e.g. Hospital Stay)	To see what you pay see below *	100% of your plan's negotiated rate	20% of your plan's negotiated rate	HMO Outpatient Surgery - \$600 Hospital - \$600/day up to 5 days PPO - 20%	HMO Hospital - \$700/day up to 5 days PPO - 10%
Hospital Stay Physician Fee	To see what you pay see below *	100%	20% of your plan's negotiated rate	HMO—\$55 PPO—20%	HMO—\$40 PPO—10%
Tier 2 (preferred brand) Drug Copay after Pharmacy Deductible (if any)	To see what you pay see below *	100% up to \$500 per script after deductible	\$45	\$50	\$15
Tier 3 (non-preferred brand) Drug Copay after Pharmacy Deductible (if any)	To see what you pay see below *	100% up to \$500 per script after deductible	\$70	\$70	\$25

2016 AND BEYOND

- Service Center Surge Strategy
- Navigator Grant Program
- CEE/CEC Portal Enhancements

QUESTIONS AND ANSWERS

HAPPY HOLIDAYS FROM COVERED CALIFORNIA