



Covered California
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**COVERED
 CALIFORNIA**

*Your destination for quality
 healthcare, including Medi-Cal*

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Get ready to renew your health insurance for <Next Benefit Year>!

<Notice Date>

Case Number: <Case #>

Dear {FIRST_NAME} {LAST_NAME},

You are getting this letter because, in <previous benefit year>, you or members of your household qualified to enroll in a Covered California health plan. Your health insurance coverage is coming up for renewal. Renewal for your household is due by <notice date + 34 days >. When you renew your insurance, you will be able to:

- Let Covered California know if any of your application information has changed
- Find out if you qualify for a different program
- Find out if your costs have changed
- Change your current health plan
- Get help if you need it!

Note: If someone in your household has Medi-Cal, your county social services agency may contact you for more information. To help them keep Medi-Cal, you will also need to provide any information asked of you from your county social services agency.

You can go online to CoveredCA.com and renew your insurance. For more information on how to renew your insurance now, read the **“How do I renew my insurance now?”** section. It is important to renew your insurance now to **make sure you get the correct amount of premium assistance**. Premium assistance is a federal tax credit that helps make health insurance more affordable. When you qualify for premium assistance, there are three ways you can use it:

- Apply **all** of your tax credits in advance to lower the amount you pay each month
- Take **some** of the tax credits each month and get the rest at the end of the year
- **Wait** until the end of the year to apply the credit when you file taxes

The amount of premium assistance depends on your household size, family income, and where you live. If it is used in advance, the tax credit is paid directly to your health plan.

What if I do not renew my insurance?

If you do not renew your insurance, Covered California will automatically re-enroll you or members of your household into your current health plan by December 15, **<current year>**. **We will renew your insurance using the most recent household size and income information you gave us.**

What will change for you next year?

The amount of premium you pay

The amount you pay for health coverage may change each year. You will receive a letter from your health plan in the fall. The letter will show your new monthly premium amount for **<next benefit year>** and your **<previous benefit year>** premium assistance amount. After you renew you will get more notices that will include your **<next benefit year>** premium assistance amount. Make sure to pay your premium directly to your health plan by the due date so your coverage can start on **January 1, <next benefit year>**. Please do not send your payment to Covered California.

If you change your plan after December 15, **<previous benefit year>**, your coverage start date will change.

(Do not translate: Use this snippet if the consumer chose a health plan in 2014 (previous benefit year))

<For **<previous benefit year>**, you chose **<Health Insurance Plan Name, e.g. Blue Shield Silver 94 HMO>**. You will receive a letter from **<Health Insurance Company>** in the fall will show your new monthly premium amount for **<next benefit year>**. Make sure to pay your premium directly to your health plan by the due date so your coverage can start on **January 1, <next benefit year>**. Please do not send your payment to Covered California.>

The amount of premium assistance you receive

For **<previous benefit year>**, you qualified for up to \$**<2014 APTC>** per month in premium assistance (a tax credit). This amount may change in **<next benefit year>**. This was based on the income that you said your tax household expected to receive in

<current year>. Your tax household includes all of the people that were listed on your taxes. Our records show that your annual tax household income is **<\$annual income>** (or \$ **<monthly income>** per month). It is important that you let us know if you moved or if your household income or family size has changed.

The level of out-of-pocket savings you qualify for

The level of cost share reduction you qualify for may be different too. Or, you may be newly eligible for a cost share reduction. A cost share reduction lowers the amount you have to pay out-of-pocket when you use your health plan. You can only get these savings if your income qualifies and you choose a **silver health plan**. With silver cost share reduction, you will save money on co-pays and deductibles.

The benefits you receive

Great News about dental insurance!

- If you have children covered, all Covered California health plans now include pediatric (children’s) dental coverage. When you renew, you don’t have to pay for a separate dental plan for your children.
- In early **<next benefit year>** Covered California will offer family dental insurance at an additional cost. You can enroll in a dental plan for this optional coverage.

How do I renew my insurance now?

To renew the insurance for your household before **<notice date + 34 days >**, follow the three steps below:

 **Step 1: Log in to your CoveredCA.com account**

 **Step 2: Click the yellow “Renew” button**

 **Step 3: Check your application information**

Make sure your information is correct by **<notice date + 34 days>** to get the coverage that’s right for you.

If your application information has not changed, confirm your current information by clicking **“Continue”** until you get to Step 4 (see below).

What if my information has changed?

If your application information has changed, you must report the changes. Click the **“Edit”** button next to the information you want to change. Changes can affect the amount

of premium assistance you receive through Covered California or whether you qualify for free or low-cost Medi-Cal. Report changes including:

- Change in income (employment, self-employment, income tax deductions or other types of income)
- Adding or removing a household member (birth, adoption, marriage, etc.)
- Permanent move out of or within California
- Start receiving health insurance such as through job, Medicare, etc.
- Change in citizenship/immigration status

Once you report your changes, your household may qualify for different programs or health plans available through Covered California. If you agree with the decision that we made when we processed your changes, you can choose your health and/or dental plans by **<notice date + 34 days >**. You will pay your premium directly to the plan. Pay by the due date so your coverage can start on **January 1, <next benefit year>**. You may contact your insurance plan or wait for them to bill you. Please do not send your payment to Covered California. To report changes, you can also call the Service Center at 1-800-300-1506.

Note: If you or someone in your household has Medi-Cal, report changes to your local county office within 10 days.

Step 4: Shop and pick the best plan for you

Once you confirm your application information, you will be able to stay in your current health plan. If you do not choose a new health plan by **<notice date + 34 days>**, we will keep you in your current health plan. Or, you can compare rates and shop for a new health plan or enroll in a dental plan. If you're thinking about changing plans, you may want to check whether the plans you're looking at have your current doctors or hospitals. At CoveredCA.com, there are links to each health plan provider directory. There you can check to see which doctors are available.

Covered California offers a range of choices of private health insurance plans. You can choose the health plan and level of coverage that best meets your health needs and budget. You can choose to pay a higher monthly cost (called a premium) so that you pay less out of pocket when you need medical care. Or, you can choose to pay a lower monthly cost but pay more out of pocket when you need care.

What if I want to change plans after <notice date + 34 days>?

If you change your mind and want to pick a new plan after **<notice date + 34 days>**, you still can during the Open Enrollment period. The **<next benefit year>** Open Enrollment period is from November 15, **<previous benefit year>** to February 15, **<next benefit year>**. Open Enrollment allows you to:

- Change health plans for any reason
- Add new members to your coverage

- Enroll in a dental plan

Please remind your family and friends that the Open Enrollment period is coming and send them to CoveredCA.com.

For Open Enrollment you can:

- Go online to CoveredCA.com and log into your Covered California account
- Call our Customer Service Center at 1-800-300-1506 or (TTY: 1-888-889-4500). Starting now and until the end of Open Enrollment, the Service Center has extended hours.
- Get free help in person from trained Certified Enrollment Counselors and Certified Insurance Agents who can help you. See **Need Help?** Below.

Need help?

Covered California wants to make renewing your coverage as easy possible. A Covered California Certified Enrollment Counselor or Certified Insurance Agent can help you.

Use this snippet if the consumer did not have a counselor or agent

<Don't have an Enrollment Counselor or Agent? To find an Enrollment Counselor or Agent close to your home, go to CoveredCA.com and click *Find Help Near You*. Or call a Covered California Service Center.

Use this snippet if the consumer already has a delegated counselor or agent for 2014 (or say: previous benefit year)

<Our records show that you were helped by a Covered California Certified Enrollment Counselor or Agent from {Entity Name or Agent Name}. You may reach your Certified Enrollment Counselor or Agent at:

{Entity Name or Agent Name}
{Entity/Agent Address Line 1}
{Entity/Agent Address Line 2}
{Entity/Agent City}, {Entity/Agent State} {Entity/Agent Zip Code}
{Entity/Agent 1Phone Number}
{Entity/Agent Email}>

Why is it important to keep your health insurance?

Health insurance helps make sure you get the care you need to keep you healthy. Insurance helps with unplanned emergencies. It protects your peace of mind because you know you'll have help when you need it.

Starting January 1, 2014, most people must have health insurance. This may be through your employer, coverage you buy for yourself, Medicare, or Medi-Cal. Consumers who don't have health insurance may have to pay a "shared responsibility fee."

The "shared responsibility fee" amount is based on how many people are in the household and the household income. The fee goes up each year, to a maximum amount. In 2015, the fee will be 2% of the annual household income or \$325 per adult and \$162.50 for each child under 18, whichever is greater. For example, a household with 2 adults and 2 children that earns \$40,000 in 2015 would pay \$325 for each adult and \$162.50 for each child. The total fee for this family would be \$975. This fee would go up to 2.5% of the yearly household income in 2016 or \$695 per adult and \$347.50 for each child.

If you don't have health care coverage, you may have to pay any fee you owe when you file your federal taxes at tax time.

Remember, if you are uninsured you also pay 100% of your medical costs.

Questions?

- If you have created a CoveredCA account, go to www.CoveredCA.com and log in.
- Or call the Covered California Service Center at 1-800-300-1506 or 1-888-889-4500 (1-888-TTY-4500).
- Starting now and until the end of Open Enrollment, the Service Center has extended hours. Monday through Friday 8 a.m. to 8 p.m. and Saturdays 8 a.m. to 6 p.m. Open Enrollment begins November 15, [<previous benefit year>](#) and February 15, [<next benefit year>](#).

This letter is being sent to you in compliance with the Affordable Care Act:
45 CFR 155 § 335(c) Notice to enrollee.