

# CR 160531 - Medi-Cal Transition Auto-Enrollment per SB260 Part I

Overview of SB260

May 2022



# Overview of CR 160531 Changes

## Overview

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## As-Is:

- CalHEERS does not auto plan select a plan for MAGI Medi-Cal, MCAP, or CCHIP Consumers who are discontinued from their existing coverage and become Eligible for Covered CA programs.

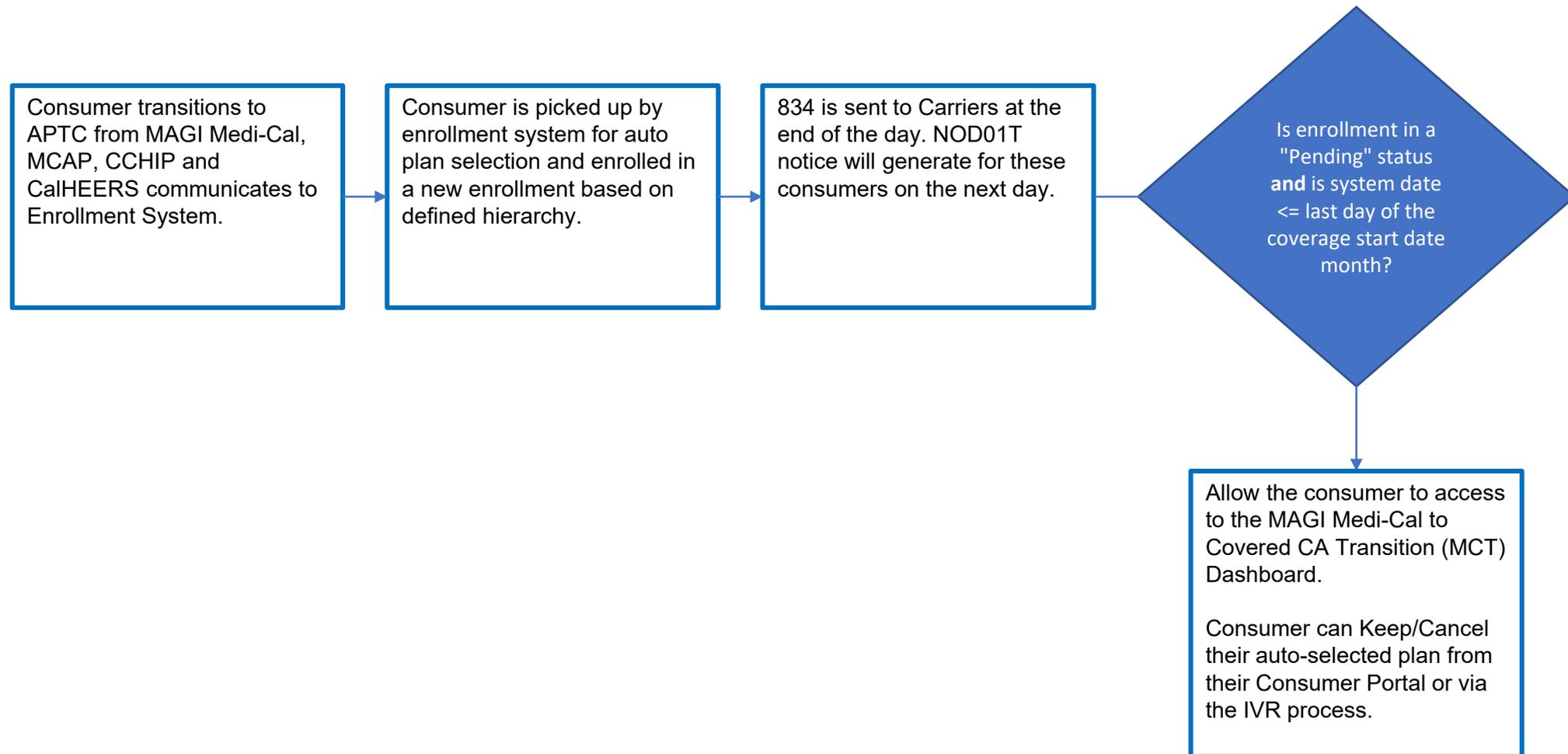
## To-Be Overview:

- MAGI Medi-Cal/MCAP/CCHIP Consumers can report a change which discontinues them from their existing benefits to Covered California programs due to various reasons. Due to California's continued care policy, these discontinued Household Members are auto transitioned into a Covered California Plan with a Qualified Life Event (QLE) of Lost or will lose health coverage. New functionality includes:
  - Auto-Plan Selection (APS) transitioning household members to an appropriate plan available based on Covered California's hierarchy matrix
  - A transitioning household account creation process flow
  - An alert on the Consumer Home page for transitioning households
  - A Confirm Health Plan action needed on the *[YYYY] Household Summary* popup
  - A Plan Selection Dashboard that assists the household in confirming, changing or cancelling the Auto Plan Selection
  - A banner on the *Welcome to Your Household Eligibility Results Summary* page
  - An APS transaction type for actions related to auto-enrollment

## SB260 High Level Flow

### High Level SB260 Flow Diagram

## High Level Flow – Consumer Enrolled into APS – New Plan



## Account Creation Flow

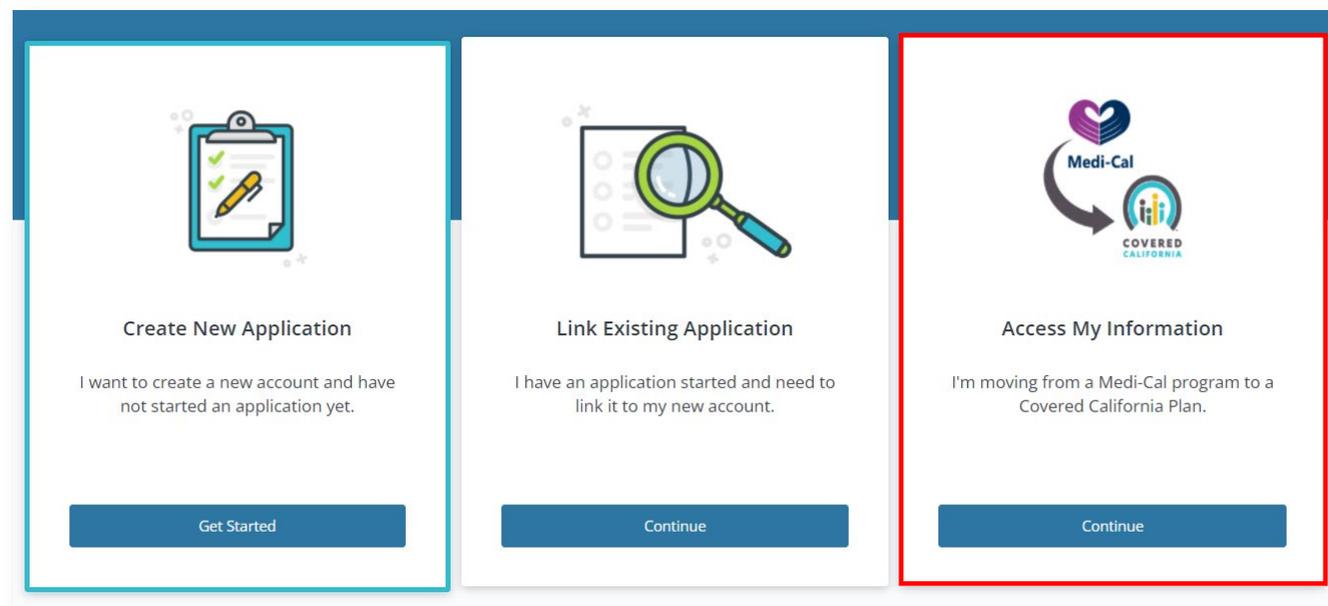
# New Streamlined Account Creation Process for Transition Consumers

# Streamlined Account Creation Flow

A new **Access My Information** tile displays when creating a new account.

Clicking the **Access My Information** tile or **Continue** button on the tile navigates the Consumer to the new *Create an Account to See Details* page.

Or the consumer can directly access the new Account Creation flow from the Microsite developed by Covered CA on their NOD01T notice.



# Streamlined Account Creation Flow

The *Create an Account to See Plan Details* page displays messaging and assists the user in retrieving their access code in *Step 1 of 2*, similar to the *Create and Account to Apply* page.

Clicking the **Back** button closes the page.

Clicking the **Next** button navigates the Consumer to Step 2 of the *Create an Account to See Plan Details* page.

This screen can also be accessed from the tile on the previous slide or from the Microsite link provided on the consumer's NOD01T notice.

The screenshot shows a web form titled "Create an Account to See Plan Details" with a link to "Log In to Your Account". It is labeled "Step 1 of 2" and asks the user to provide information to view their plan details. The form includes fields for Access Code, Case Number, First name, Last name, Date of birth, and Social Security number (SSN). A "Back" button is located at the bottom left, and a "Next" button is at the bottom right.

Create an Account to See Plan Details  
or [Log In to Your Account](#)

Step 1 of 2

Let us show you the plan we picked for you

To see the details of your plan, we need the name of the person, access code and case number listed on the letter you received from Covered California.

Access Code ⓘ

Case Number ⓘ

First name

Last name

Date of birth

Social Security number (SSN) *Optional*

# Streamlined Account Creation Flow

The *Create an Account to See Plan Details* page *Step 2 of 2* assists the Consumer in creating a username and password with PIN, similar to the *Create and Account to Apply* page.

Clicking the **Next** button displays the *Review Information* page where the user can review and edit the information or continue with the account creation.

This will allow consumer to successfully complete Account Creation process.

Create an Account to See Plan Details

Step 2 of 2

Let us show you the plan we picked for you

To complete the process, create a username, password, and PIN so you can come back and access your account when you need to.

Username

- ✓ Must be at least 8 characters
- ✓ Cannot be more than 50 characters
- ✓ May have numbers, letters, hyphens (-) and periods (.)

Password

- ✓ Must be at least 8 characters
- ✓ Cannot be more than 50 characters
- ✓ Cannot contain dictionary words, name, and common keyboard patterns (example: Qwerty1!)
- ✓ And must contain at least 3 of the following:
  - ✓ UPPERCASE letter (A-Z)
  - ✓ Lowercase letter (a-z)
  - ✓ Number (0-9)
  - ✓ Special character ~ ! @ # \$ % ^ & \* ( ) \_ + = [ ] \ { } ; : ' " , . / < > ?

Re-enter password

PIN

Hint: Use 4 numbers you will remember. You will use this PIN to e-sign your application.

Re-enter PIN

I understand and agree to the Terms and Conditions of Use and Notice of Privacy Practices.

# Account Home Alerts / Eligibility Results Alerts

## Notifying APS Consumer of Outstanding Actions

# Account Home Alert

A new alert displays in the *Account Alerts* section of the Consumer Home page when at least one HHM is transitioning from MAGI Medi-Cal, MCAP, or CCHIP to a Covered California Plan. Clicking the **here** link navigates the Consumer to the MCT Dashboard.

The screenshot shows the Covered California website interface. At the top left is the logo for Covered California. To the right of the logo are navigation icons for a calendar, globe, help, home, mail, and user profile. The main heading reads "Welcome back, Qacec!". Below this is a "Select Year:" dropdown menu with "2021" and "2022" options. The central content area features a "Complete Coverage" section with a folder icon, a "Choose Plan" button, and a "Report a Change" button. Below this is an "Account Alerts" section containing a red-bordered alert box with a red exclamation mark icon and the text: "You are now eligible for Covered California. Please [review your options](#)."

# Household Summary Alert

A new *Actions Needed* displays on the *Household Summary* popup for HHMs transitioning from MAGI Medi-Cal, MCAP, or CCHIP.

Clicking the **click here** link navigates the user to the MCT Dashboard

2022 Household Summary  
Please review all alerts and actions for your household. Complete all actions needed to get coverage.

Case #: 5000039913 | [View Program Eligibility by Person](#)

**Action Required By 08/31/2022:** Confirm a Covered California plan for your household. Please [click here](#) to review.

Household Members (2):	Program Eligibility	Covered By	Actions Needed
Qacec C. 52 yrs	Covered California	Kaiser	<b>Urgent</b> Confirm Health Plan
Beca G. 32 yrs	Covered California	No Plan Selected	<b>Urgent</b> <a href="#">Choose Plan</a>

**Beca has until 09/29/2022 to choose a plan** and needs to make the first payment by the carrier's due date. For more information, please view Beca's program eligibility .

**Primary Contact Info:**

Qacec C.  
52 yrs

Qacec told us the best way to contact them is by **Mail**.

**Home/Mailing address:** 2329 Gateway Oaks Drive  
Sacramento, California 95833

**Email:** None provided

**Phone:** None provided

[Close and view Account Home.](#)

# Eligibility Results Page Alert

The *Welcome to Your Household Eligibility Results Summary* page displays a new banner for transitioning Consumers.

The banner informs the Consumer that an action is required.

Clicking the **Account Home** button navigates to the MCT Dashboard if they have any pending actions to take.

**COVERED CALIFORNIA**

## Welcome to Your Household Eligibility Results Summary

### Let's take a look at your Household.

Please review each member's program eligibility below.

**!** A change was reported. Visit your Account Home to see if there are any actions you need to take. [Account Home](#)

**!** [Choose a plan](#) by 07/31/2022 to start your coverage on 08/01/2022. View: [Card](#) [Table](#)

Member Name	Age	Program Eligibility	Financial Help	Enhanced Silver Benefits	Action
Qacec C.	52 years old	Covered California Plan	Financial Help	Enhanced Silver Benefits	<a href="#">See Full Details</a>
Beca G.	32 years old	Covered California Plan	Financial Help	Enhanced Silver Benefits	<a href="#">See Full Details</a>

**MCT Dashboard Flow**

**APS – New Consumers**

# MCT Dashboard – APS – New Consumers

The *Get Your Coverage Started* section displays the enrollment in which the HHMs were enrolled with a summary of enrollment information:

- Clicking the **Keep or Cancel Plan** button navigates the user to the *Choose Enrollment Groups* page
- The plan details include:
  - Plan Name and Metal Tier
  - Enrollment Status
  - *Enrollment ID*
  - *[X] Days Left* – Number of days to confirm enrollment
  - Coverage Date message
  - Carrier Logo
  - *Covered Household Members*
  - Monthly Premium

**Note:** A monthly batch job identifies Consumers that have not responded and auto-cancels the APS.

The screenshot shows the user interface for a new consumer. At the top, the Covered California logo is on the left, and navigation icons (calendar, globe, help, home, mail, profile) are on the right. A greeting reads "Hi Qacec, Welcome to Covered California!" with a "Medi-Cal" logo and a circular arrow icon. Below this is a link to "Account Home" with the text "You can return to this page later from Account Home". The main content area is titled "Get Your Coverage Started" and features a "Keep or Cancel Plan" button. The enrollment details for "Kaiser Silver 87 HMO" are shown as "Pending" with an enrollment ID of 28455 and 58 days left. A message states: "Your coverage will start on 08/01/2022 as long as you confirm your plan by 08/31/2022. Once that's done, your health provider will mail your ID card and policy details." The Kaiser Permanente logo is displayed. Under "What You'll Pay", the premium is \$0/month, with \$15 copay for primary care visits and \$5 copay for generic drugs. The "Covered Household Members" section lists "Qacec C." as a member, 52 years old.

# MCT Dashboard – APS – New Consumers

The *You Have Options* is the second section on the Plan Selection Dashboard and displays the following:

- A **Change Plan** button and an **Enrollment Dashboard** link that both navigate to the *My Enrollment Dashboard* page
  - The APS is cancelled when the Consumer enrolls in a different plan
- Logos for all available carriers in the Consumer's County of Responsibility (COR)

The *Report a Change* section displays messaging and a **Report a Change** button allowing the Consumer to enter a change on their application.

The *Contact Us* section displays the following:

- *Covered California Phone Number*
- *County Office Phone Number*
- Clicking the **click here** link navigates the user to the DHCS website with a list of County offices

**You Have Options** [Change Plan](#)

If you do not think this plan will work for you, there may be other insurance companies in your area.

Visit your [Enrollment Dashboard](#) to:

- See the full details of your plan
- Find your doctor
- Compare other plans
- Change plans

Bright HealthCare MOLINA HEALTHCARE L.A. Care HEALTH PLAN

health net Anthem BlueCross blue california

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 **Report a Change** [Report a Change](#)

Report any changes to your household information that may affect your eligibility, like your address or income.

**Contact Us**

Have more questions? Call Covered California for help.

Covered California  
Phone Number: 1-800-816-4725

[Location] County Office  
Phone Number: [phone number]

Please [click here](#) to view a full list of locations.

# MCT Dashboard – APS – New Consumers

The *Choose Enrollment Groups* page displays only for households that have more than one enrollment when consumer clicks “Keep or Cancel Plan”

Consumer can choose a group(s) by clicking on one or more enrollment tiles. Selecting a tile displays a blue checkmark in the top right corner.

Clicking the **Back** button closes the page.

Clicking the **Next** button navigates to the *Choose Household Members* page.

# MCT Dashboard – APS – New Consumers

A new *Choose Household Members* page allows Consumers to **Keep** or **Cancel** the auto-enrollment for each HHM.

The **Plan Selection Dashboard** link navigates the Consumer to the Plan Selection Dashboard and displays on all subsequent pages.

The **Back** button navigates to the *Choose Enrollment Groups* page for multiple enrollments, otherwise it navigates to the Plan Selection Dashboard.

The **Next** button dynamically navigates the Consumer:

- **Keep** - to the *Your Coverage from Covered California* page
- **Cancel** - to the *What will be your main source of health coverage after cancelling your plan from Covered California?* popup

The screenshot shows a 'Plan Selection Dashboard' with a back arrow and the title 'Plan Selection Dashboard'. Below the title is the heading 'Choose Household Members' and a question: 'Would you like to keep or cancel the Covered California Plan for the following household members?'. There are two enrollment groups listed. The first group is 'Kaiser Permanente Silver 87 HMO' with 'Enrollment ID 123456'. It lists three members: John W. (49), Mary W. (39), and Sally W. (19). Each member has a radio button for 'Keep' (which is selected) and a radio button for 'Cancel'. The second group is 'Kaiser Permanente Silver 87 HMO' with 'Enrollment ID 654321'. It lists one member: Ted W. (49), who also has a selected 'Keep' radio button and an unselected 'Cancel' radio button. At the bottom, there is a 'Back' button and a 'Next' button.

# MCT Dashboard – APS – New Consumers

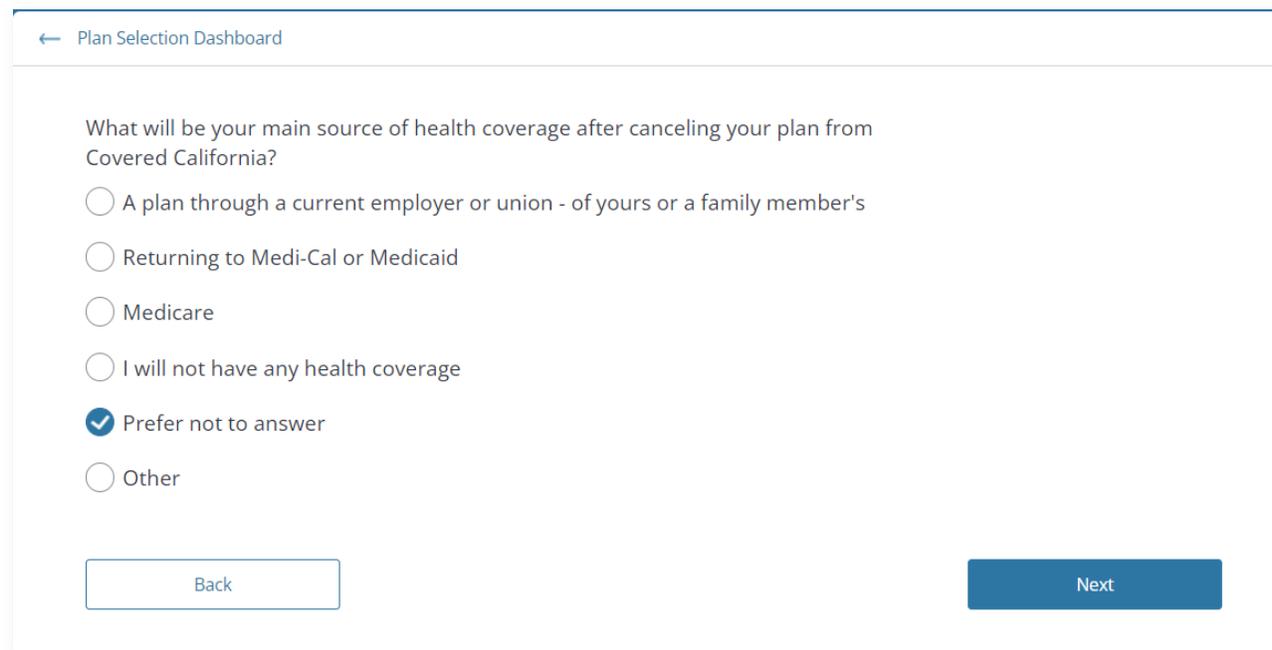
The *What will be your main source of health coverage after cancelling your plan from Covered California?* page displays:

- A list of required options
- *Other* dynamically displays a text field

At least one selection is required to continue.

Clicking the **Back** button closes the page.

Clicking the **Next** button navigates the user to the *Your Coverage from Covered California* page.



← Plan Selection Dashboard

What will be your main source of health coverage after canceling your plan from Covered California?

- A plan through a current employer or union - of yours or a family member's
- Returning to Medi-Cal or Medicaid
- Medicare
- I will not have any health coverage
- Prefer not to answer
- Other

Back Next

# MCT Dashboard – APS – New Consumers

The *Your Coverage from Covered California* page displays different when the entire Household decides to cancel, the page dynamically displays:

- A *Household Members Canceling [Plan Name Metal Tier]* section
- Enrollments previously selected with the Attestation acknowledgement section
- The Cancel confirmation checkbox

Clicking the **Back** button closes the page.

Clicking the **Submit** button navigates the Consumer to the *My Enrollment Dashboard*.

The screenshot shows a web interface titled "Plan Selection Dashboard". The main heading is "Your Coverage from Covered California". Below this, there is a warning: "Carefully review your household selections below. If you see a mistake, click 'Change' to update who is enrolled before you sign and submit." A "Change" button is visible. The section "Household Members Canceling [Plan Name Metal Tier]" lists three members: John W. (49 yrs), Mary W. (49 yrs), and Sally W. (19 yrs), all with "Kaiser Permanente Silver 87 HMO Enrollment ID 123456". A confirmation checkbox is present with the text: "By checking the box below you are canceling Covered California health insurance coverage.  I confirm that I have read and agree to the terms and conditions stated above." Below this is a "Review & Sign" section with the text: "By entering my PIN and typing my full name I certify under penalty of perjury that I have read and understand the terms and conditions above." There are two input fields: "Electronic Signature PIN" (with a help icon) and "Electronic Signature" (with a placeholder "Type your full name to sign"). At the bottom, there are "Back" and "Submit" buttons.

# MCT Dashboard – APS – New Consumers

A new Transaction Type displays on the *Case Transaction History* page, *APS Choice*, for the following Auto-Plan Selection conditions:

- *Keep Plan*
- *Cancel Plan*
- *No Response* – No action by the last day following the transition month

Transactions Table
Transactions Per Page

Transaction ID ▲	Transaction Name ▲	User ID ▲	Date/Time ▲	Determination Start ▲
289681	APS Response	testcase036d	2022/08/20 15:14:01	
289671	Report A Change/Eligibility Update	System-CW-Sacramento	2022/07/05 01:22:08	08/01/2022
289605	Report A Change/Eligibility Update	testcase036d	2022/07/01 00:32:12	07/01/2022
289568	Employer Contact Information	testcase036d	2022/01/05 23:40:51	
289567	Initial Application	testcase036d	2022/01/05 23:40:51	01/01/2022
289553	Application Started	testcase036d	2022/01/05 23:40:50	01/01/2022

1-1 of 1 items 1

Change Log Table
Transactions Per Page

Transaction ID ▲	Change Type ▲	User ID ▲	Date/Time ▲	Change Element ▲	Old Value	New Value
289681	APS Choice	testcase036d	2022-08-20 15:14:01	Keep or Cancel		Keep Plan
289671	Miscellaneous Information Change	System-CW-Sacramento	2022-07-05 01:22:08	Has this person ever gotten a service from the Indian Health Service, a tribal health program, or an urban Indian health program or through a referral from one of these programs?		N
289671	Miscellaneous Information Change	System-CW-Sacramento	2022-07-05 01:22:08	Has this person ever gotten a service from the Indian Health Service, a tribal health program, or an urban Indian health program or through a referral from one of these programs?		N

## MCT Dashboard Flow

# Transition Unsubsidized CCP Consumers

# MCT Dashboard – Unsubsidized CCP

The *More Household Members* section displays for HHMs that do not qualify for financial assistance with the following:

- Qualifying Life Event (QLE) End Date message that informs Consumer they have until that date (60 days) to choose a plan
- **Review Application** button that allows Consumer to review their application
- **Choose a Plan** button that navigates the user to the *My Enrollment Dashboard*
- *Members Needing Coverage* status includes a message as to why they do not qualify for financial help and that they may still choose a plan
- *Why don't I qualify for financial help?* banner includes an **Eligibility Results** link that navigates to the *Welcome to Your Eligibility Results Summary* page

## More Household Members

### Get Your Coverage Started

[Review Application](#)

To make sure your information is correct, we recommend that you review your application first. Then, you can choose a plan.

[Choose a Plan](#)

You have until 09/29/2022 to choose a plan.

### Members Needing Coverage No Plan Selected

We did not choose a plan for these household members because they do not qualify for financial help. You can still shop for a plan with Covered California that doesn't have financial help.



Beca G.  
32 yrs

### Why don't I qualify for financial help?



There are many reasons you may not qualify. It could be your tax filing status, or you may have other health insurance. For details, see your [Eligibility Results](#) summary.

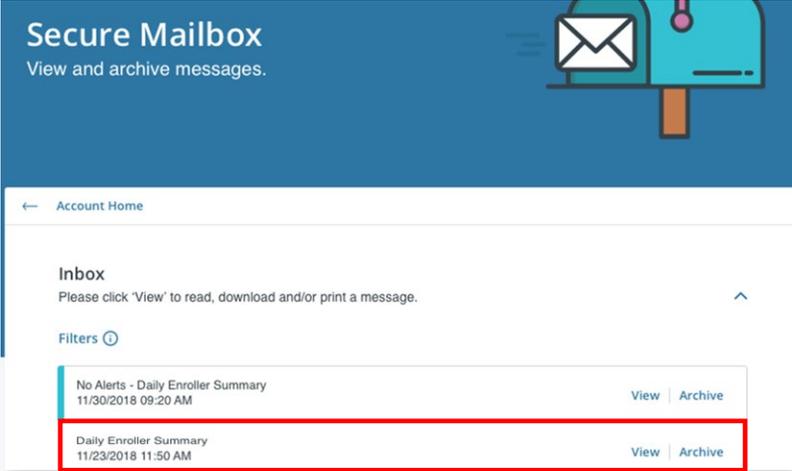
## Enroller Portal Alerts

### Enroller Alerts for APS – New Consumers

# Enroller Portal Alerts

A new Enroller Portal Alert displays on the *Secure Mailbox* page for designated enrollers when a Consumer has been Auto-Plan Selected so they can reach out and complete the process such as assisting consumer with taking Keep/Cancel actions.

Clicking the **View** link displays an Excel spreadsheet with the new *Notification Topic Auto Plan Selection*.



The screenshot shows an Excel spreadsheet with the following data:

HBX Case ID	Enrollment Year	Notification Topic
5000000001	2021	Binder Payment Pending
5000000003	2021	Binder Payment Pending
5000000002	2021	CalNOD03
5000000002	2021	Enrollment Updates Pending
5000000004	2021	Enrollment Updates Pending
5000000005	2021	CalNOD01
5000000006	2022	CalNOD69
5000000021	2021	Consent Valid Thru
5000000023	2021	Actions requested for Consumer
5000000024	2022	Auto Plan Selection

The row containing '5000000024' is highlighted with a red box, and a red arrow points from the 'View' link in the mailbox screenshot above to this row.