

COVERED CALIFORNIA FOR SMALL BUSINESS

MyCCSB Enrollment Online Portal Certified Agent & General Agent User Guide



TABLE OF CONTENTS

| Certified Agent & General Agent Account Creation: | 3 |
|---|-----|
| Certified Agent & General Agent Dashboard | 3 |
| Viewing Full Book of Business for Both Certified Agents and General Agents: | 5 |
| Employer Dashboard: | 7 |
| Creating an Employer Application | 8 |
| How to Add an Employee | .12 |
| To Add a Spouse or Dependent | .13 |
| To Terminate an Employee, Spouse, and/or Dependent (or all of the above) | .14 |
| Notifications | .15 |



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CERTIFIED AGENT & GENERAL AGENT ACCOUNT CREATION:

Certified Agents and General Agents will receive an email providing an invitation to create their online account through our new web portal (shown below).

Thank you for creating an account with Covered California for Small Business (CCSB).

Now, you can conduct all of your client's business online. No more completing stacks of paperwork!

Please click the following link to finish setting up your account.

Click here on your e-mail to register.

Click on "your account" to create a unique username and password. After successfully creating your account, you will receive the following confirmation notice that your account has been created.



General Agent Account Created.

Your account has been successfully created. Please sign into the Covered California website using the link below.

Click the login button and use your newly created credentials to log in to your account.

CERTIFIED AGENT & GENERAL AGENT DASHBOARD:

<u>Certified Agent Dashboard View</u> - Once logged into MyCCSB, you will be directed to your Certified Agent Dashboard which will automatically display (if applicable) any employer groups that are currently delinquent on their premium payments. You will be provided important information for delinquent groups such as: Employer Group Name, Delinquency Notice Date, Delinquency Notice Due Date, Delinquency Notice Type, Current Amount Due, and Paid Through Date.

Please Note: Customer Code is the same as Group ID Number. Within the system, the term Group, Customer, and Company are interchangeable terms.

The options available under a Certified Agent login are:

Dashboard: Default home page after login, displays any current delinquent groups under a Certified Agents book of business.

Quote: Generate New Quote or View Quotes. All generated quotes will be saved.



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Enroll: Within the enroll section you can search, locate, and/or continue processing group requests. The option of **Create a Company** allows you to begin a new group application.

Documents: Under the documents tab, there are two options to choose from:

Review – The review option will allow you to view any documents uploaded for any of your assigned groups.

Reports - The reports option has 3 reports currently available: New Business Report, Agent Renewal Report and Agent Delinquent Customers.

Agent Delinquent Customers Report: This report showcases the delinquent customers listed on the Certified agent's dashboard. Within this report are the details necessary to avoid group termination.

Delinquency Notice Date: Date delinquency notice was sent.

Delinquency Notice Due Date: Date payment is due to avoid termination.

Delinquency Notice Type: Intent to Term means the group will be terminated effective on the first of the month following a 30-day grace period from their last paid through date.

Delinquency Notice Due: Is the Amount due to avoid termination, however the current amount due, is the amount necessary to continue coverage and to avoid another delinquency notice.

CERTIFIED AGENT DASHBOARD IMAGE:

| COVERED CALIFORNIA SMALL BUSINESS | | | Llame a nuestro | centro de ayuda gi | ratis al (855) 777-6782 | l. Para obtener una copia | de este formulario en | Español, llame (855) 7 | 77-6782. GCustome | er Service: 1-855-683-6757 | 🔔 10 👗 ss |
|--------------------------------------|------------------------------------|------------------|------------------|-----------------------|----------------------------|--------------------------------|----------------------------|---------------------------|----------------------------|-------------------------------------|-------------------------|
| ll @ board Quo | | Cuments | | | | | | | | | |
| ent Dash | board | | | | | | | | | | |
| gent Delinquen | t Customers | | | | | | | | | | Click for More Repo |
| Customer Code | Customer Name | Contact Name | Contact Phone | Current Amount Due | Delinquency Notice Date | Delinquency Notice Due Date | Delinquency Notice Type | Delinquency Notice Due | Delinquency Notice Paid | Delinquency Notice Remaining Due | Paid Through Date |
| 500004 | Barry's Boating Supply_KR | Barry Hampton | 0000000000 | 13430.81 | 06/01/2021 | 02/28/2021 | Intent to Term | 67154.05 | 0 | 13430.81 | 01/31/2021 |
| 500401 | UAT Group 8 (Shannon- COBRA) | Rob Miller | 444444444 | 89110.43 | 06/01/2021 | 06/30/2021 | Intent to Term | 44567.13 | 0 | 44567.13 | 05/31/2021 |
| 500355 | Regression Test 7_04.09.21 | Regression 7 | 2342342343 | 14376.88 | 06/01/2021 | 06/30/2021 | Intent to Term | 7188.44 | 0 | 7188.44 | 05/31/2021 |
| 500357 | Regression Test 2 4/9/21 | jr | 5484964616 | 6564.5 | 06/01/2021 | 06/30/2021 | Intent to Term | 3006.7 | 0 | 3006.7 | 05/31/2021 |
| | Harvey Mudd's 55 | David Wolf | 4564654654 | 96688.68 | 06/01/2021 | 06/30/2021 | Intent to Term | 48344.34 | 0 | 48344.34 | 05/31/2021 |



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<u>General Agent Dashboard View</u> – Once logged into MyCCSB, you will be directed to your General Agent Dashboard, which will display (if applicable) any delinquent groups that are delinquent on their premium payment. The options available under the Covered California for Small Business logo for General Agents are as follows:

Dashboard: Default home page after login, displays any current delinquent groups under a Certified Agents book of business.

Enroll: Within the enroll section you can search, locate, and/or continue processing group requests. The option of **Create a Company** will allow you to begin a new group application.

Please Note: Customer Code is the same as Group ID Number. Within the system, the term Group, Customer, and Company are interchangeable terms.

| (i;j) | COVERED CALIFORNIA SMALL BUSINESS | | Llame a nuestro centro de ayuda graf |
|-------------------------|--------------------------------------|--|--------------------------------------|
| .lı Dashboard | € Enroll ↓ | | |
| General | Agent Dashboard | | |
| General Ag | ency Delinquent Customers | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

VIEWING FULL BOOK OF BUSINESS FOR CERTIFIED AGENTS AND GENERAL AGENTS:

To view your full book of business, scroll over the Enroll Option and click Search Company.





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In the Company Name Window (Enter a blank space and select Search to see all results). This will list your full book of business in descending order from newest customer account number (Group ID Number) to oldest customer account number.

There are five statuses for a Company's application:

In Progress – The Company application has been started, and you have made it past the employee roster page, however the application has not been submitted.

Submitted – The Company application has been submitted, Employees may be in the initial open enrollment process

Completed – The Company and Employee applications has been approved, and the company has been sent the Initial invoice (24 hours after completed status), and any concurrent invoices.

Expired – An in-Progress Company application which was never completed will become expired prior to the company's effectuation date

Blank/No Status – The company information page has been submitted; no additional information has been submitted. These applications will not expire but will only have a future effectuation date.

| 1 C 15 1 | | | | | | | | |
|---------------------------------|-------------------------------|----------------|--|-----------------------|----------------|--------------|----------------|-------------|
| ishboard Quote Enroll Document: | 1 | | | | | | | |
| λ Search | | I | | | | | | |
| stomer Account Number | | Company Name: | Enter a blank space and select Search to see all results | | E | fective Date | | |
| Customer Account Number | | | | | | | | |
| oup Application Status | | ❤ Search Q | | | | | | |
| | | | | | | | | Search |
| | | | | Enrollment Applicatio | n | | | |
| Customer Account Number | Company Name | Effective Date | Creation Date | Last Updated Date | Current Status | Prior Status | Action | Summary |
| 500472 9 500472 | The Agent Team, LLC. | | | | | | @View Details | Download |
| 500461 © 500461 | Number46 | 07-01-2021 | 06-07-2021 | 06-08-2021 | Submitted | InProgress | @View Details | Download |
| 500401 9 500401 | UAT Group 8 (Shannon- COBRA) | 04-01-2021 | 05-07-2021 | 05-08-2021 | Completed | Submitted | @View Details | Download |
| 500388 D 500388 | UAT Group 1 (LINDA Cal COBRA) | 03-01-2021 | 05-06-2021 | 05-07-2021 | Completed | Submitted | ©View Details | Download |
| 500382 D 500382 | Shark Food | 06-01-2021 | 04-29-2021 | 06-01-2021 | Expired | InProgress | @View Details | Download |
| 500375 D 500375 | Joe Car Company | 06-01-2021 | 04-27-2021 | 05-25-2021 | Submitted | InProgress | @View Details | Download |
| 500372 9 500372 | Testing 123 | 06-01-2021 | 04-26-2021 | 06-01-2021 | Cancelled | Completed | @View Details | Download |
| 500357 9 500357 | Regression Test 2 4/9/21 | 07-01-2021 | 05-01-2021 | 06-21-2021 | Completed | Submitted | @View Details | Download |
| 500355 D 500355 | Regression Test 7_04.09.21 | 05-01-2021 | 04-09-2021 | 04-12-2021 | Completed | Submitted | @View Details | Download |
| 500354 Э 500354 | Regression test 6_04.09.21 | 05-01-2021 | 04-09-2021 | 05-01-2021 | Expired | InProgress | ®\view Details | Download |
| | | | | | | | | s c 1 2 3 x |

This page will also provide a brief overview of the company's application process, it provides the Customer Account Number, Company Name, along with the company Effective Date, Creation Date, Last Updated Date, Current Status and the Prior Status.

To select the employer group - select View Details



EMPLOYER DASHBOARD:

Employer Dashboard – As a Certified agent and general agent, you are able to proxy into the Employer's dashboard and see most of the options available to your employer groups. Employer groups do have an additional billing dashboard, which is unavailable to Certified agents, and general agents.

Scroll over Enroll and click Search Company. Enter any of the three search criteria: Customer Account Number, Company Name or Effective Date.

Once result is listed, click View Details.

| COVERED CALIFORNIA SMALL BUSINESS | Llame a nuestro centro de ayuda gratis al (855) 777-6782. Para obtener u | a copia de este formulario en Español, llame (855) 777-6782 | • GCustomer Service: 1-855-777-678 | 2 🥵 🎝 AgentTwaddell 🗸 |
|--|--|---|------------------------------------|-----------------------|
| 💼 🗭 🖪 Encoll Documents | | | | |
| Q. Search | | | | |
| Customer Account Number | Company Name(" Enter a blank space and select Search to see all results) | Effective Date | | |
| | Bob | | | |
| Group Application Status | ✓ Search Q | | | |
| | | | s | iearch Q - |
| | | | | |
| Customer Account Number Company Name Effecti | | | | Summary |
| 500559 Bob's Burgers 08-01-2 D 500559 | 21 07-01-2021 08-01-2021 | Cancelled Completed | View Details | Download |

You will then be sent to the Company Customer Details Page, which will provide a summary of the company's information. On the bottom of the page there are three options:

Go to Employer Billing Dashboard – The Employer Billing Dashboard provides a brief overview of the companies account summary.

Go to Employer Dashboard – The Employer Dashboard is where the employer application is saved, employer selections, employee roster, Employer billing, and the documents submitted with the group's application. This is also the exact same look that the employer will have if they access the account.

Invite Employer to Manage Account – Select this to send an e-mail to the employer contact and allow them to help self-manage their account.

To go to the Employer Dashboard click Go to Employer Dashboard (bottom right of screen).



You will now be directed to the Employer Dashboard. The Employer Dashboard provides access to any employer documents or processes, such as submitting an employer application, payment history, invoices, employee roster, submitting employee applications, and viewing and updating employer or employee demographics.



| ili Dashboard | Employees Application | to te | Documents V | 🗐 Company Profile | | | | | |
|-----------------------|--|---|---------------------|----------------------|--|--------------------------|------------------------|--------------------------------|--|
| 🕀 Briar | | | | | | | | | |
| Plan | Benefits | _ | | | Payment Overview | v | _ | | |
| ■ Sel 요Sub 요Dep | Medical Reference Plans Select Metal Level Options &Subscribers: 2 &Dependents: 0 BiGroup 10: 500415 | ealifornia Platinum 90 PPO 0/ | 15 + Child Dental I | INF | From Last Statement | \$23,595.59 Total Due | \$2,156.41 Past Due | \$2,156.41 Previous Balance | |
| | | % <u>View Summary of Be</u> | nefits | | Current (Reflects changes since last statement) | \$23,595.59 Total Due | \$2,156.41 Past Due | Delingency Status | |
| 요Sub &Dep | ect Metal Level Options scribers: 1 endents: 1 up ID: 500415 | Silver 70 PPO 2250/ | | INF | statementj | | | | |
| | BGroup ID: 500415 | % <u>View Summary of Be</u> | nefits | | | | | | |

Creating a New Business Employer Application

From the General Agent or Certified Agent Dashboard, select Enroll, and then Create Company.

| (ij) | | BUSINES | | |
|-------------------------|-------------|-----------|-----------|--|
| .lı Dashboard | لک Quote | Enroll | Documents | |
| Agent D | ashboa | Search Co | ompany | |
| Agent Deli | nquent Cus | Create Co | mpany | |

From here you will be automatically transferred into the Employer Application screens. Please input all applicable fields for the Employer.

| Company Information | | |
|--|--|-------------------------------|
| Doing Business As* | Federal Employer Identification Number (FEIN)* | Email* |
| ACME LLC | 123456789 | email@domain.com |
| | If you are a Sole Proprietor and do not have an FEIN, enter the identifier used during tax filing. | |
| Business Legal Name | Organization Type | Class of Business* |
| | ~ | ~ |
| First Name* | Middle Name | Last Name* |
| First Name | Middle Name | Last Name |
| Suffix | Phone Number* | Phone Type* |
| ~ | () | ~ |
| Preferred Language (written/spoken - if not English) | How Long Have You Been in Business?* | Do you want to go paperless?* |
| | ~ | No |
| | | |
| | | |



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As the Certified agent of record, please have the Agent of Record Form, which is located towards the bottom of the page, filled out and signed by the employer.

Please note: When signed in as a Certified Agent, you will automatically be assigned to any New Business Application, along with the General Agency, if applicable, that you work with.

| Agent |
|---|
| |
| 1 If you are an agent, or adding an agent on behalf of this employer group, you must upload either an Agent of Record (AOR) Form, or other documentation where the employer attests that you are allowed to work on their behalt. |

After all Employer demographics have been entered, you can select *Next* to move to the Employee Roster input page. This page also covers the application questions regarding Coverage Start Date, Infertility Selections, number of Full Time Employees, and if the Employer is covering Employee only or Employee+Family, etc.

| 1 Employee Detail | | | | |
|--|--|---|--|-----|
| Our Employees Will Start Coverage on 08/01/2021 V | Your Employer Application deadline is: 07/09/2021 | Your Open Enrollment deadline is: 07/18/2021 | Your Binder Payment is due on: 07/23/2021 | |
| I attest that I employ at least one enrolling employee who is not an owner or a spouse of an owner and that I am offering coverage to all Number of Full Time Equivalents (FTE) employed FTE Calculator Do you wish to offer infertility coverage as part of your health insurance? Yes No For more information , please visit this link. Do you intend to take advantage of the small business health care tax credit? Yes No I am offering coverage to domestic partners? Yes No | full-time employees. Yes No | | | |
| Do you currently offer health coverage? Yes No Number of Eligible Employees I'm Offering Health Covera | ge to** 🗸 🗸 | SIC Coc | le SIC Sea | rch |

The next step is completion of the Employee Roster. For each Full Time Employee, please input their demographics under the Employee Roster screen. To delete an employee, you can use the red X in the green banner. To add a spouse or child, please use the blue +Spouse/Domestic Partner or +Child button. To add an additional employee, select the +Add New Employee Button on the bottom left side of the Employee page.

| Emp. # | Туре | First Name | Middle Name | Last Name | Suffix | Birth Date | Actions | |
|-------------|-----------------|-------------------------------|---------------------------|-----------------------|--------------------------------|------------------------|------------------------------------|--|
| 1 | Employee | First Name | Middle Name | Last Name | | MM/DD/YYYY | + Spouse/DomesticPartner + Child 0 | |
| Emplo | yee #1-Details | | | | | | | |
| SSN: | | Re-Ent SSN: Phone: | () Phone Type: | ✓ Secondary Phone: () | Phone Type: | • | | |
| Add1: | | Add2: | Zip: | City: State: | California (CA) | | | |
| Gender: | ~ | Contribution Group: Group 1 🗸 | Email: | Is Native American | Is the employee an owner or an | owner's spouse? Yes No | | |
| Preferred L | anguage Written | • | Preferred Language Spoken | Y Tell US | s About Your Race | ~ | | |

Once the employee roster is filled out in its entirety, then the Employers Metal Tier selection must be completed. Employers have the option to choose up to four contiguous metal tiers.



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| Select Metal Level Options | |
|--|---|
| | Why Choose This? As an Employer, you can control costs by specifying the available metal levels of the plans that employees can choose from. Platinum Gold Silver Bronze Metal Levels must be contiguous in order to proceed. |
| How it works: | |
| Select one or more neighboring metal levels. | |

Select your financial contribution.

Once metal tiers are selected, the Medical Reference plan selection screen is next. To select the plan, press the "Select Plan." button

| Benefit Plan Selectio | | | | | | | | |
|----------------------------------|--|--|----------------------------------|---------|--|--|---|---------|
| Company | Displaying 39 Medical Plan(s |) | | | Sorted by | y Price (Low) 🗸 | | |
| Annoyance Inc | Compare Selected Plans Bronze 60 HDHP HMO 7000/09 | 6 | | | Oscar Circle Bronze 60 HDHF | P EPO 7000/0% + Child De | _ | |
| Employees: 1 Dependents: 0 | | Expanded Br | HHO | Compare | oscar | Expanded Bronze | EO | Compare |
| 👑 Total: 🕕 | Deductible 😧 \$7,000 / \$14000 | Out-Of-Pocket Max 🚱 \$7,000 / \$14000 | Premium / Month 😵 \$229.42 | | Deductible 🚱 \$7,000 / \$14000 | Out-Of-Pocket Max 📀 \$7,000 / \$14000 | Premium / Month 🕑 \$237.08 | |
| Average Age: 20 Change Roster | Other Plan Details Coinsurance: 0.00% | | More Information Plan Summary | | Other Plan Details Coinsurance: 0.00% | | More Information Plan Summary Providers | |
| Shopping Filters | View Details/Print | | | _ | View Details/Print | | | |
| Price Range | | Select Plan 🔰 | | | | Select Plan 🔰 | | |

After the Medical Reference selection, employers have the option to offer their employees dental coverage. If they do not wish to offer dental coverage, there is an attestation at the top of the screen which state "I do not wish to offer dental, I offer this benefit to my employees outside of Covered California."

Please note: If the group is selecting to offer dental coverage, then they will have to select a dental reference plan. However, contribution to the employee's dental coverage is optional.

| Benefit Plan Selection - Dental | | | | | | | | |
|-------------------------------------|---|---|---------------------------|---------|------------------------|--------------------------|----------------------------|---------|
| Company | Dental coverage is required | Dental coverage is required | | | | | | |
| | I do not wish to offer dental, I offer t | his benefit to my employees outside of Covere | d California | | | | | |
| Employees: 1 Dependents: 0 Total: 1 | Displaying s Dental Plan(s) Compare Selected Plans | | | | Sorted by | Price (Low) | | |
| Average Age: 20 | Family Dental HMO | | | _ | Family Dental HMO | | | |
| Change Roster | California Dental Network | High HNO | | Compare | Dental Health Services | High HHO | | Compare |
| | Deductible 😧 | Annual Benefit Maximum 📀 | Premium / Month \$7.59 | | Deductible 😧 | Annual Benefit Maximum 🕢 | Premium / Month \$10.39 | |
| Shopping Filters | Other Plan Details | | More Information | | Other Plan Details | | More Information | |
| 97 559 | View Details/Print | | Reproviders | | View Details/Print | | Reviders | |
| Range: \$45 | | | | | | | | |

After reference plans have been selected, then the Contribution amount can be selected. For the contribution amount, the percentage contribution can be set by entering the percentage amount numerically (highlighted box shown below) or by using the percentage sliding scale.



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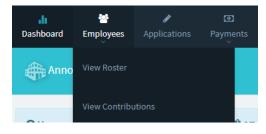
There is an option to create two contribution groups, if the employer wants to create different contribution amounts for their employees. The employer can identify the different Groups (Group 1 or Group 2) to indicate the different contribution amount. The employer will need to ensure that each of their employees are appropriately assigned to the correct Group during the enrollment application process.

For Example: The employer has decided that for their employees, they want to contribute 75% of their medical premiums. In addition, the employer would like to contribute 100% towards their management employees.

| Expand Group | | | |
|------------------------|-------------------|--------|------|
| Group 1 | Your Contribution | | |
| Employee Contribution | 0% | 50.00% | 100% |
| Dependent Contribution | 0% | • | 100% |
| Group 2 | Your Contribution | | |
| Employee Contribution | 0% 50 | 50.00% | 100% |
| Dependent Contribution | 0% | • | 100% |

After selections are complete, the final page is the arbitration page. Once the application is completed, it will be submitted to Covered California for Small Business for review.

You can then proceed to the Employer Dashboard to view the employee roster. Employee enrollments can be managed from this location.



Once in the employee roster, you can:

Invite Employees – Select the Invite Employees, to select a box on the lefthand side of the Employee image, and then select Send Invitation Email. By doing so, you will trigger a notice to the employee that they are able to selfservice within the portal. Self-serving within the portal allows the employee to update their demographics and complete the employee application. They will have the option to research plan options, see contribution amounts, and learn about the benefits of each of our carrier plans.

View Application – By selecting this option, you can go into the Employee application, and select the plan options that they want to select.



Update / View Employee Dashboard – By selecting

Update/View Employee Dashboard, you can update the Employee demographics.



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View Details – By selecting View Details, you will be moved into the employee dashboard. From here you can update the employee demographics in full, including, their name, Social security number, and date of birth.

HOW TO ADD A NEW EMPLOYEE -

Under Employees - Select View Roster

There is an Add Employee Button at the bottom right hand corner of the screen to start the add process. Select the Add Employee Button and enter in the employee's demographics. Once demographics are submitted click add employee with New Plan.

Please Note: If you are adding a spouse or dependent child, select the light blue buttons on the top right of the employee demographic screen.

| | First Name | Middle Name | Last Name | Suffix | Birth Date | Actions | |
|-------------|--------------------------|---------------------|---------------------|------------------|--------------------------------------|--------------------------|---------|
| L Emp. | John | | Doe | ~ | 10/01/1990 | + Spouse/DomesticPartner | + Child |
| Employ | vee #3-Details | | | | | | |
| SSN: | 111-11-1112 Re-Ent SS | N: 111-11-1112 Phot | ne: () | Phone Type: Home | Secondary Phone: | | |
| | | | | | Phone Type: | ~ | |
| Add1: | 1601 Exposition Blvd | Add2: | Zip | 95815 | City: Sacramento | | |
| | | State: Californ | ia (CA) 🗸 🗸 | | | | |
| Secondary A | Add1: 1 Hill Street | Add2: | Zip | | City: | | |
| | | State: Californ | ia (CA) 🗸 🗸 | | | | |
| Gender: | Male 🗸 Group: | Group 1 🗸 Email: | john.doe@yopmail.co | om 📕 Enrolling i | n Medical Insurance | | |
| Enroll | ling in Dental Insurance | Is Native America | an | | | | |

Once the employee is added, you will be taken to the Update Enrollment screen, which will ask for the Qualifying Life Event. Enter the date of the qualifying life event, which will provide you will a coverage start date.

Please note: If the coverage start date that the employer is requesting is not available, please submit the completed Employee application to <u>CCSBeligibility@covered.ca.gov</u>. The CCSB team will review the application and reach out to the point of contact if there are any inconsistencies.

From this screen you can select "Create New Enrollment". From here, select the Open Dashboard button to Complete Enrollment which will take you to the employee dashboard to process the application and for the employee plan selections. You can also invite the employee to access their account and self-serve.



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TO ADD A SPOUSE OR DEPENDENT

From the employer dashboard, locate the Employee roster and find the applicable member. Select Update/View Employee Dashboard and then select Update Policy in the Dark Blue Banner.



Once selected you will have two options to choose from:

Select **Changing or Adding Coverage –** Select this if the member is adding a spouse or dependent, or is qualified for a policy change due to a Qualifying Life Event. Select **Next**.

| What update are you making? | Ending coverage for one or more | emebers |
|-----------------------------|---------------------------------|---------|
| | Changing or adding coverage | |
| | X Cancel | Next > |

Please note: The ability to add a dependent or spouse is 30 days from the Qualifying Life Event (QLE) Date for most QLEs. Within the Portal, as an agent, you are only able to add within the past 30 days from today's date. To correctly add a dependent or spouse, the QLE date should be within the past 30 day period. If the Qualifying Life Event date is greater than 30 days from today's date, please submit the completed employee application to <u>CCSBEligibility@covered.ca.gov</u>

Follow the prompts to input all the necessary information. Once completed select **Confirm** for this change to become active within the system.

| Dependents Being | g Added | | | | | | | |
|--|--------------|------------------------------------|------------|---------------------------------|-----------|-----------------------------------|------------------------------|--|
| Dependent | First | Last | DOB | | Gender | Medical | Dental | |
| child | Johnnie | Walker | 06/16/2023 | 1 | Male | × | × | |
| | | | | | | | | |
| New Estimated Co | osts Startir | ng 07/01/2021 | | | | | | |
| Plan Name: Platinum 90 EPO 0/15 + Child Dental | | Employee Monthly Cost: \$359.07 | | Plan Name: Family Dental PPO | | Employee Monthly Cost: \$83.98 | | |
| | ar | Employer Monthly Cost: \$578.24 | : | ∆ DEL | TA DENTAL | Employer I \$0.00 | Monthly Cost: | |
| | | Total Monthly Cost: \$937.31 | | | | Total Mont \$83.98 | hly Cost: | |
| Estimated Gran | d Totals | | | | | | | |
| | | | | | | Employee Mo | onthly Cost: \$443.05 | |
| | | | | | | Employer Mo | onthly Cost: \$578.24 | |
| | | | | | | Total Mon | thly Cost: \$1,021.29 | |



TO TERMINATE AN EMPLOYEE, SPOUSE, AND/OR DEPENDENT (OR ALL OF THE ABOVE)

From the employer dashboard, locate the employee roster under the Employee section. Identify the employee who wants to terminate a spouse and/or dependent and select Update/View Employee Dashboard.

| di | O | 1 | | ۵ |
|--------------------|-------------------------|---------------|----------|------------------|
| Employee Dashboard | Employee Policy History | Update Policy | Document | Employee Profile |

To process a termination of an employee, spouse, and/or dependent, select **Ending Coverage for one or more members** and then select **Next**. From here you will have a drop down to select the termination reason or the qualifying life event and then then you will select the effective date of the termination.

| What is the reason for the termination ? | Term | ninatio | n of C | overag | ge | | | ~ |
|--|--------|----------|----------|---------|-----|-----|-----|------------------|
| | « Redo | < | Back | | | | | Next > |
| What is the date of the event? | 07/ | 14/202 | 21 | | | | | |
| Termination of Coverage | < | | J | uly 202 | 21 | | > | |
| | Sun | Mon | Tue | Wed | Thu | Fri | Sat | |
| | | | 10000 | 30 | 01 | 02 | 03 | |
| | 27 | 28 | 29 | 30 | 01 | UZ | 03 | |
| | 27 | 28 05 | 29 06 | 07 | 08 | 02 | 10 | Next > |

Once the termination date of event is selected, the health plan will be terminated first of the following month from the event date.

| When will the coverage | termination | take | effect | ? |
|-------------------------------|-------------|------|--------|---|
| Termination of Coverage on 07 | /14/2021 | | | |

For an event of *Termination of Coverage* on *07/14/2021*, the last day of coverage would occur on:

07/31/2021

Any coverage under an altered policy would begin on:

08/01/2021



Okay, Next >

Next, you select the individuals who will no longer be eligible for coverage. If you terminate the subscriber, then all dependents will also be removed from coverage.



NOTIFICATIONS

When you log into the system, there will be a small bell on the top right-hand corner of the screen, which may have a red circle with a numeric within. This is the notifications section, which will showcase any updates which may have occurred to any accounts under your purview. For every notification that you receive you will also receive an e-mail detailing what occurred.

ACCOUNT SETTINGS

To update profile User Name or password, select the username then Account Settings.



When you select Account Settings, you will be taken into the Profile and account settings page. From here you can update your Username or Password. Click the change or update button, and from here you will be prompted to update your username or password.

| Profile | | | Account Settings | |
|---------|-------------|-------------------|------------------|---------------------------------|
| | Lily Farms | | Change Password: | Last Updated: 07-12-2021 Update |
| | Account ID: | 10501 | | |
| | User Name: | LFarms Charge | | |
| | Email: | lfarm@yopmail.com | | |
| | | | | |
| | | | | |
| | | | | |

Please note: Usernames must be unique; you are not allowed the same username as another user on the system.