



# Executive Director's Report

Jessica Altman, Executive Director  
Covered California Board Meeting

April 16, 2026



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# Covered California 2026 Board Meeting Dates

All meetings will be held at Covered CA Headquarters,  
1601 Exposition Boulevard, Sacramento.  
Unless otherwise notified, meetings will begin at 10:00 am  
and are held on the third Thursday of the month.

**January 15**  
**March 19**  
**April 16**  
**May 21**

**June 18**  
**July 16 \***  
**August 20 \***  
**September 17**

**October 15 \***  
**November 19**  
**December 17 \***

*\*Possibly no meeting*

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# Welcome Deepshikha (Dee) Kumar

- Dee joined Covered California April 1 as the Chief Audit Executive in the Office of Audit Services.
- Brings 20 years of experience in audit governance, risk management, and strategic planning; most recently at the Department of Child Support Services.
- Outside of work, Dee enjoys travel, mountain biking, paddleboarding, and time with her niece, nephew, and beloved dog Betty.



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# Executive Director's Report

- 01** Executive Director's Update
- 02** State and Federal Policy/Legislative Update
- 03** Data and Research



# State and Federal Policy & Legislative Updates

Jessica Altman, Executive Director

## State Legislation

The State Legislature is continuing to hear and amend legislation. Most legislation is going through the policy and fiscal committees of the house of origin. As we are tracking the process, the following two Medi-Cal related bills have been identified as key bills for Covered California::

- **AB 2208 (Bonta)** would revise state law regarding change retroactive Medi-Cal coverage and cost sharing in response to federal action. Would require the acceptance of self-attestation in meeting certain application requirements for insurance affordability programs.
- **SB 1202 (Weber Pierson)** would require the Department of Health Care Services and local Medi-Cal agencies to engage in specified data collection and outreach activities in relation to loss of Medi-Cal coverage due to federal action. These activities include the development of a dashboard, in consultation with Covered California, for the purposes of tracking stratified Medi-Cal application, enrollment, redetermination and termination data.

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## Federal Update: Engagement with Congress and the Federal Administration

This month, Covered California will join state-based marketplaces from around the country in a State Marketplace Network Fly-In to Washington, DC. Covered California, along with the other state-based marketplaces will meet with federal administration officials and with representatives of Congressional leadership and committees of jurisdiction.

Covered California will also meet with members of the California Congressional delegation to share the latest updates from California and inform the policy dialogue surrounding health coverage and care.

## Federal Update: CMS Call Letter for the 2026 QRS and Enrollee Survey

On March 20, Covered California partnered with the Oregon Health Insurance Marketplace and the Washington Health Benefit Exchange to submit joint [comments](#) to the Centers for Medicare & Medicaid Services (CMS) on the Draft 2026 Call Letter for the QRS and QHP Enrollee Experience Survey, urging measure-set stability, state flexibility, and phased implementation to protect continuity in quality monitoring and improvement. The letter:

- Recommended retaining key immunization and new asthma care measures in reporting-only status (tested first with existing federal data) rather than eliminating them, to preserve accountability and data continuity.
- Supported retiring outdated measures and adding a modernized tobacco cessation measure starting in 2027.
- Backed survey and data-collection changes—including added screening questions, a longer outreach window, updated race and ethnicity questions, and dual reporting with continued benchmarks—to improve response rates, data accuracy, and transparency.
- Urged CMS to harmonize quality measures across Medicaid, the individual marketplace, and Medicare and to focus on a smaller set of high-impact metrics and clearer scoring so consumers can better distinguish plan quality.

## Federal Update: CMS RFI to Uncover Fraudulent Activity in Federal Health Care Programs

On March 30, Covered California submitted [comments](#) to CMS' request for information (RFI) on potential regulatory changes to combat fraud, waste and abuse across federal healthcare programs, including Marketplaces. While supporting strengthening program integrity, Covered California emphasized that the vulnerabilities described in the RFI are specific to the Federally-Facilitated Marketplace and do not reflect State-Based Marketplaces (SBMs), which already employ more robust front-end controls and consumer protections. The letter:

- Called for a targeted, risk-based approach focused on agent and broker conduct and FFM enrollment pathways, rather than consumer behavior, and described Covered California's safeguards, including affirmative, verifiable consumer consent and AI-enabled identity proofing that blocks nearly all fraudulent attempts while maintaining a 95–98% success rate for legitimate consumers.
- Highlighted Covered California's centralized fraud management team, continuous monitoring, and graduated enforcement model, which together have resulted in no recent complaints of unauthorized enrollments and only one agent decertification in the past two years.
- Urged CMS to avoid one-size-fits-all rules and preserve operational discretion for SBMs with proven controls.



# Data and Research

Isaac Menashe, , Deputy Director, Evaluation and Research  
Policy, Eligibility & Research Division

# 2026 Renewal Retention



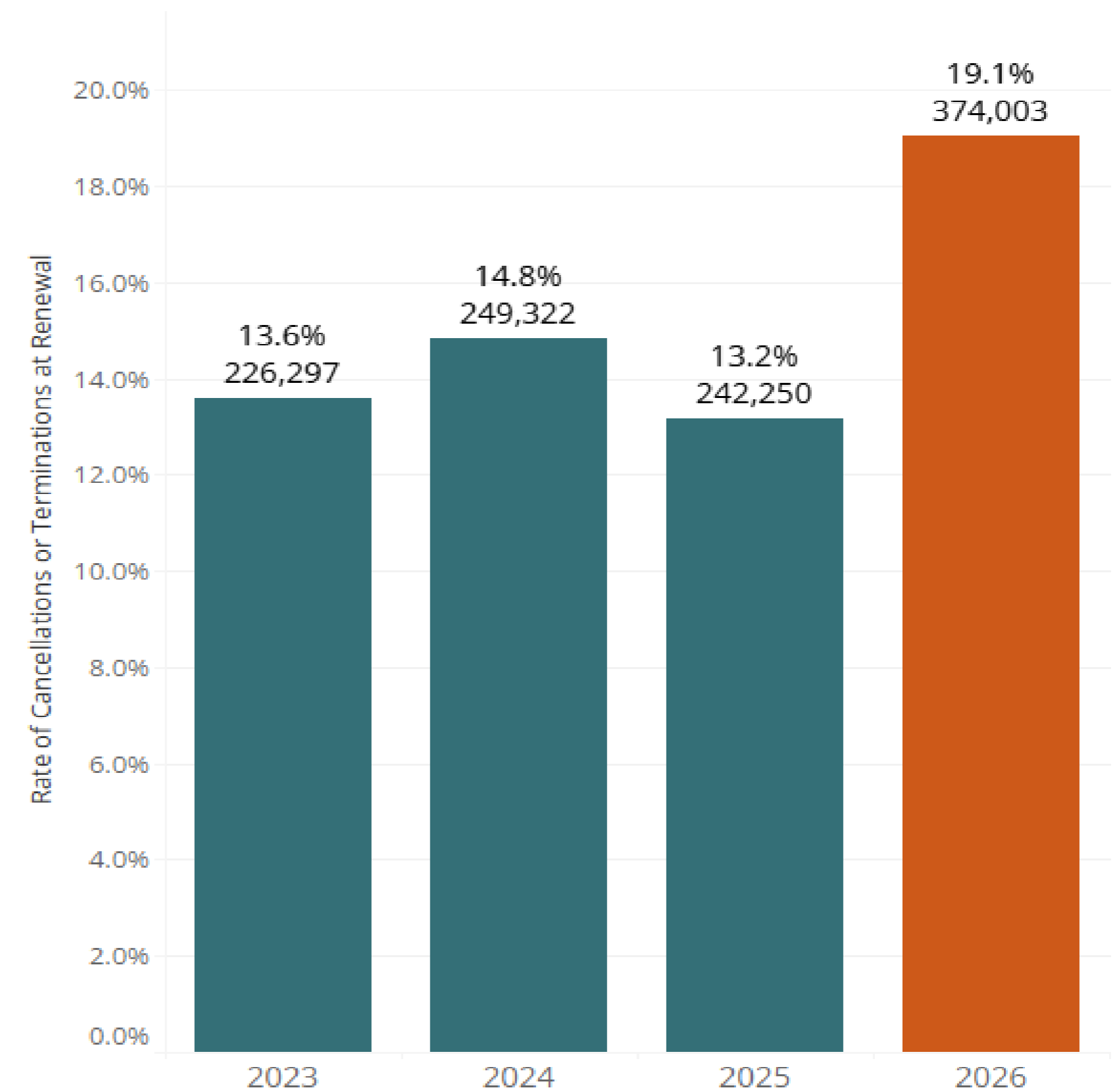
# Renewal Retention Update

- During the renewal process for plan year 2026, Covered California enrollees faced an unprecedented increase in costs due to the expiration of the enhanced Premium Tax Credit that had lowered costs for all enrollees since plan year 2021.
- Previous Open Enrollment and Renewal reporting focused on the count of individuals who were still enrolled or pending enrollment for a health plan at the close of the Open Enrollment Period (January 31st).
- However, with 90-day grace periods to make premium payments, consumers may not be cancelled for non-payment until early April.
- With settled data reflecting cancellations for non-payments, the following slides provide an update on renewal retention in 2026.

## Renewal Cancellation Trends

- By the end of payment grace periods, nearly 374,000 renewing consumers had cancelled or terminated their renewal plan.
- This represents 19% of renewing consumers, compared to 13% to 14% of renewing consumers cancelling their coverage in prior years.
- In the renewal cycle for 2026, this increase equates to over 130,000 additional enrollees cancelling or terminating their renewal.

Cancellation Rates among Renewing Consumers, 2023-2026

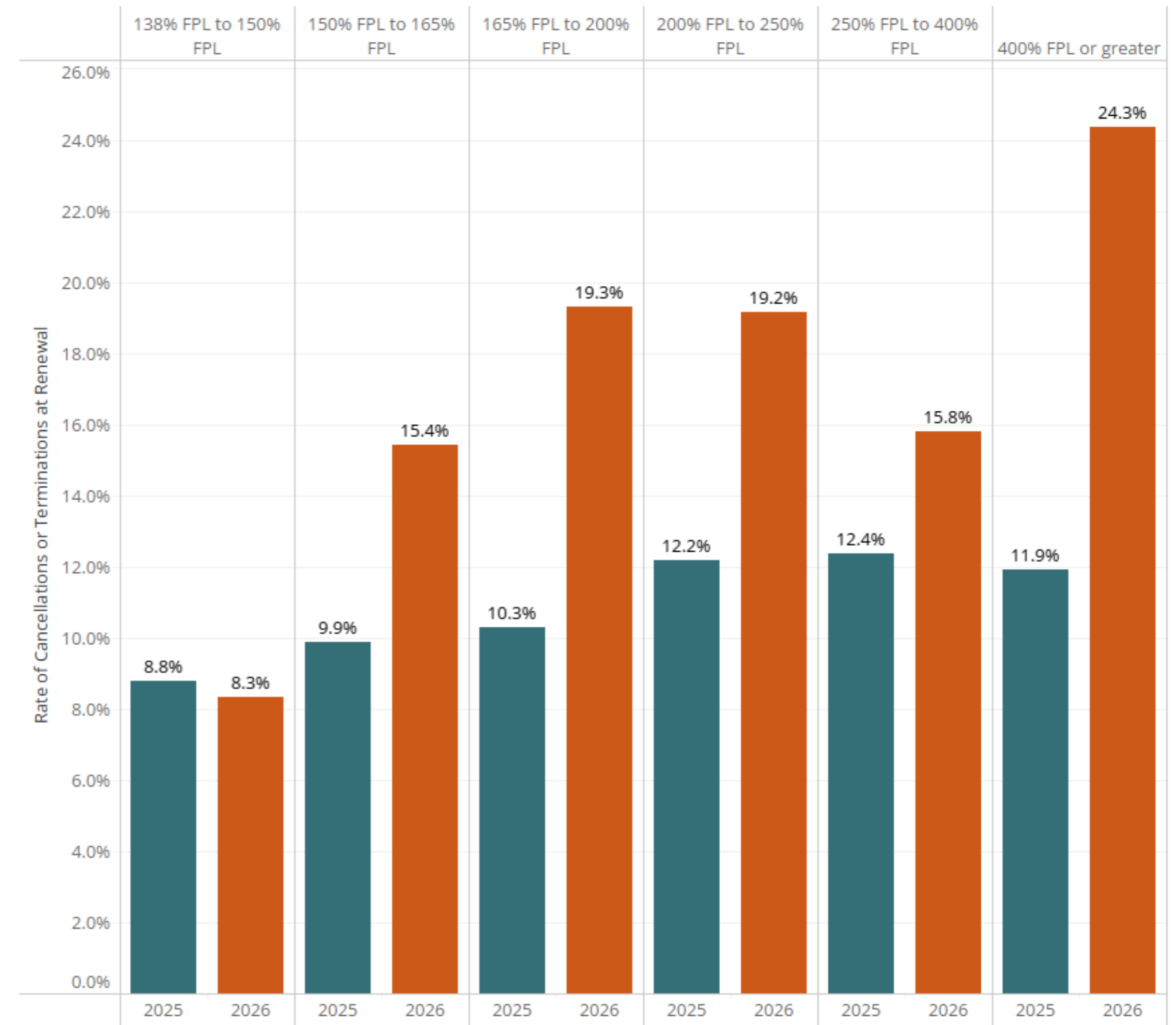


Renewing consumers are considered cancelled if their latest enrollment during OEP is cancelled or terminated as of April 6<sup>th</sup> of each plan year with a coverage end date of 1/31 or earlier.

# Renewal Cancellation Trends: Income

- For middle income consumers who lost all eligibility for tax credits in 2026, cancellation rates more than doubled, rising to 24.3% in 2026 from 11.9% in 2025.
- For the lowest-income consumers – who retained affordability similar to 2025 thanks to state premium subsidies – cancellation rates fell from 8.8% to 8.3%.

Cancellation Rates among Renewing Consumers, by FPL

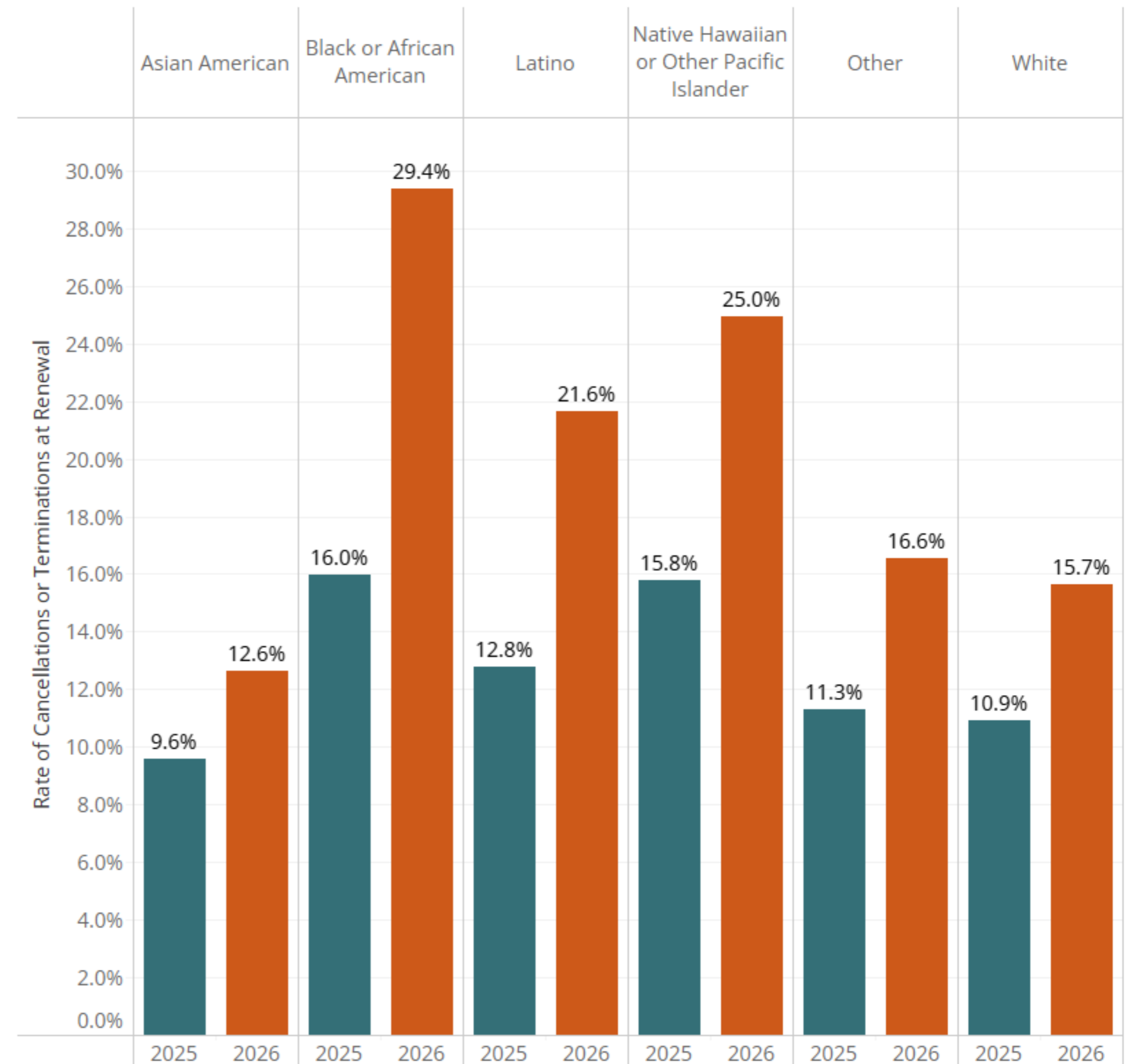


Renewing consumers are considered cancelled if their latest enrollment during OEP is cancelled or terminated as of April 6<sup>th</sup> of each plan year with a coverage end date of 1/31 or earlier.

## Renewal Cancellation Trends: Race/Ethnicity

- Focusing on consumers with incomes between 150% FPL and 400% FPL, who retained eligibility for APTC but still experienced substantial premium increases, there are significant disparities in renewal cancellation rates.
- Consumers who identify as Black or African American saw cancellation rates nearly double (29.4% in 2026 vs 16% in 2025).
- For the consumers with state subsidies that preserved ePTC affordability (between 138% FPL and 150% FPL), no such differences in cancellation rates were observed by race/ethnicity.

Cancellation Rates among Renewing Consumers, (150% to 400% FPL)



Renewing consumers are considered cancelled if their latest enrollment during OEP is cancelled or terminated as of April 6<sup>th</sup> of each plan year with a coverage end date of 1/31 or earlier.

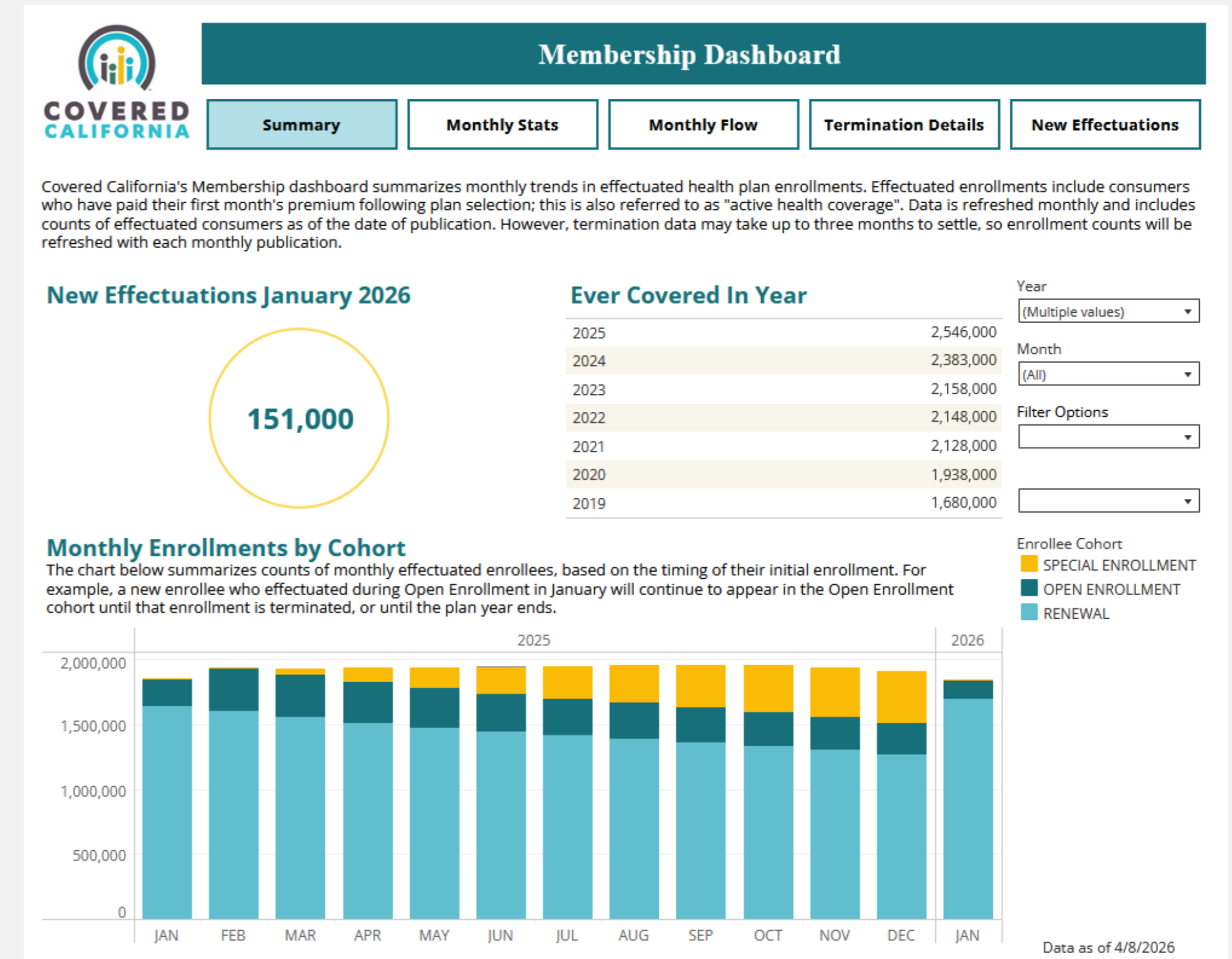
# New Public Reporting on Monthly Enrollment

A new product, Covered California’s “Membership Dashboard” has been published at [hbex.coveredca.com](https://hbex.coveredca.com)

The dashboard will provide monthly updates on Covered California’s effectuated enrollment, following the end of payment grace periods. (For example, in late April, data for the coverage month of January will be published.)

Users will be able to view demographic variations and compare to prior years for a variety of metrics:

- Monthly effectuated enrollment totals
- Monthly termination rates
- New enrollments and net changes in enrollment



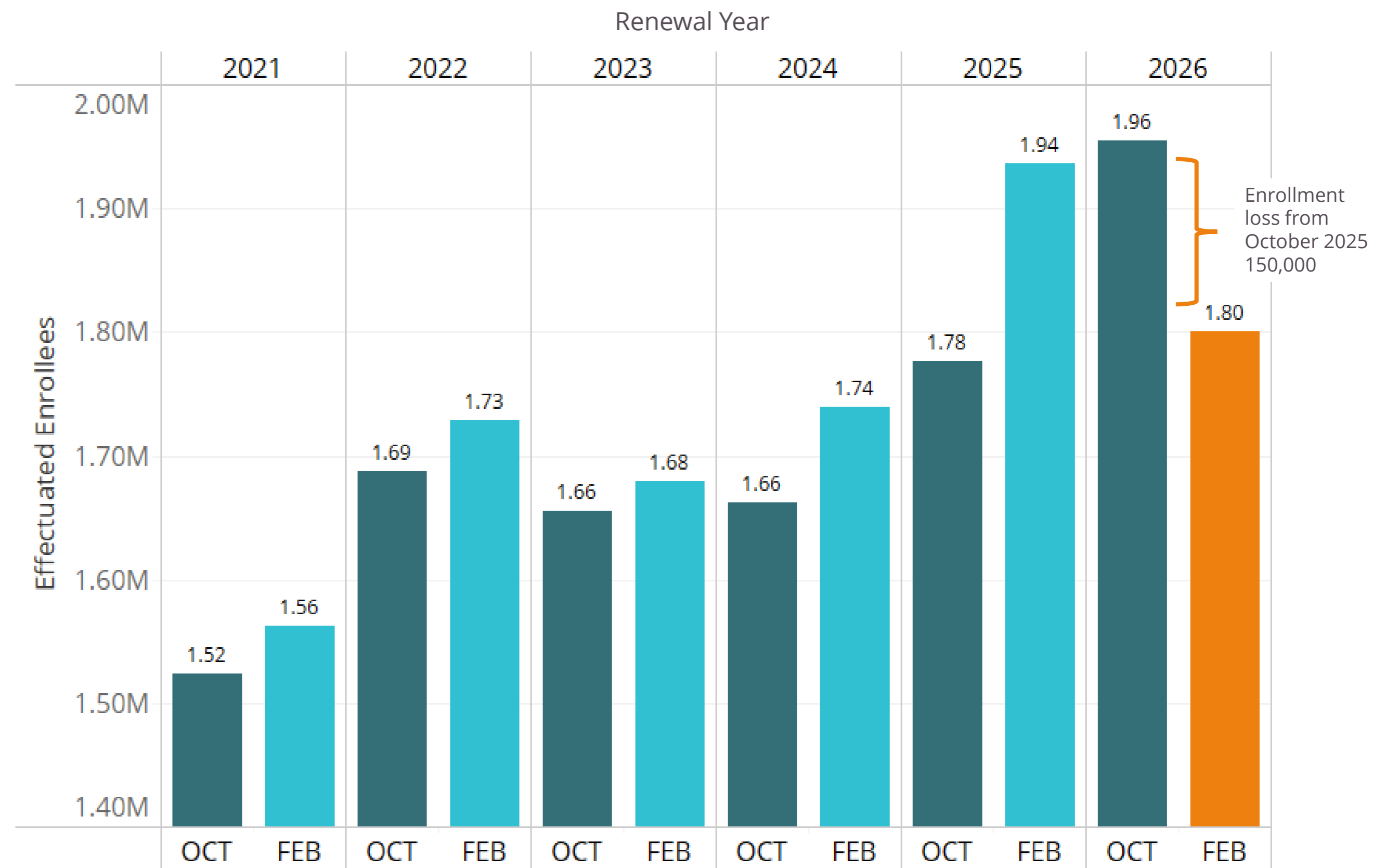
Dashboard link: <https://hbex.coveredca.com/data-research/dashboards/membership-dashboard/>

# Membership: 2026 Open Enrollment Results in First Ever Net Decrease

- February 2026 enrollment is currently estimated at 1.80 million enrollees, a decrease of 135,000 (7 percent) from the 1.94 million enrolled in February 2025.\*
- Before 2026, Covered California always increased net membership between October and February, averaging 60,000 enrollees from 2021 to 2025.
- In 2026, the marketplace shrank by over 150,000 enrollees between October and February, from a record-high 1.96 million in October 2025 down to 1.80 million in February 2026.
- Had Covered California maintained typical open enrollment experience for 2026, enrollment in February might be 210,000 higher than it is today.

**2026 First Covered California Open Enrollment To Decrease Membership**

Monthly Membership from Prior October to February or Renewal Year, 2021-2026



\* February enrollment data is as of April 8, 2026 and may not yet be settled; may be revised in final reporting.

# PUBLIC COMMENT

Call: (877) 336-4440

Participant Code: 6981308

- ❑ To request to make a comment, press 10; you will hear a tone indicating you are in the queue for comment. Please wait until the operator has introduced you before you make your comments.
- ❑ If watching via the live webcast, please mute your computer to eliminate audio feedback while calling in. Note, there is a delay in the webcast.
- ❑ The call-in instructions can also be found on page two of the Agenda.

EACH CALLER WILL BE LIMITED TO TWO MINUTES PER AGENDA ITEM.

Written comments can be submitted to [BoardComments@covered.ca.gov](mailto:BoardComments@covered.ca.gov)





# Appendix

# Appendix: Table of Contents

- 01** Service Center Update
- 02** Covered California for Small Business Update
- 03** CalHEERS Update
- 04** Outreach and Sales Update



# Service Center Update

## Comparing February 2026 vs. 2025 call statistics

Year	Calls to IVR	Calls Offered to SCR	Abandoned %	Calls Handled	ASA	AHT	Service Level %
2026	349,462	227,267	8.62%	202,185	0:12:09	0:20:44	16.64%
2025	338,234	219,962	6.29%	204,665	0:04:29	0:19:48	29.77%
<b>Percent Change</b>	3% Increase	3% Increase	37% Increase	1% Decrease	171% Increase	5% Increase	44% Decrease

*\*For 2024, Comparable: Some data may be unavailable due to AWS system transition.*

- ❑ The total Calls Offered increased from 2025 by 3%.
- ❑ Calls Handled decreased from 2025 by 1%.
- ❑ The Abandoned % increased from 2025 by 37%.
- ❑ Service Level decreased from 2025 by 44%.

## February Weekly Quick Sort Transfers

Week 1	Week 2	Week 3*	Week 4	Total
02/01 – 02/07	02/08 – 02/14	02/15 – 02/21	02/22 – 02/28	
885	870	732	1,037	3,524

\*Partial Week – All Covered CA Service Centers were closed Monday, February 16, 2026, in observance of President’s Day.

## February Consortia Statistics

SAWS Consortia	Calls Offered	Service Level %	Calls Abandoned %	ASA
CalSAWS	2,000	90.85%	1.85%	0:00:27

\*CalSAWS = Statewide Automated Welfare System (consortia). November 2023 all SAWS consortiums were combined.

## Improving Customer Service

- New Employee Training for Service Center
- Extended hours of Operation on 1/30– 8am to 8pm and 1/31 8am – 10pm

## Enhancing Technology Solutions

- Partnered with CCIT on Tax season messaging

## Staffing Updates

- Vacancy rate of 4.2 percent (2026) comparable to prior year of 5.9 percent (2025)



# Covered California for Small Business Update

# Covered California for Small Business

## Group Membership & New Sales Updates

### Group Membership

- **Total Groups:** 9,632
- **Total Members:** 80,148
- **Member Retention:** 85%
- **Average Group Size:** 8.3 members



### Sales Updates

#### Membership by Health Plans:

- **Blue Shield of California:** 35,054
- **Kaiser Permanente:** 41,761
- **Sharp Health Plan:** 3,333
- **Delta Dental:** 9,150 (*not included in total member count*)

#### Year-to-Date (YTD) New Sales: 4,170

- *Membership reconciled through 3/16/2026*



# CalHEERS Update

## CalHEERS | Admin Portal Updates

The screenshot shows the 'Case Overview Hub' interface. At the top, there's a navigation bar with 'Case Overview Hub' and 'Enrollments' tabs. Below this is a header with 'Account Info', 'Important Dates (3)', and 'Quick Links'. A 'Select Year' dropdown is set to 2025. The main content area is divided into several sections:

- Case Overview:** A grid of key information including Case Status (Active), Case ID (1234567890), Application ID (1234567890), and Delegated Enroller. It also shows the last application update, consent for verification, and case tags (Mixed Household).
- Household Information:** A list of household members on the left (Jason Doe, Jennifer Doe, Jimmy Doe, Jamie Doe) and a detailed profile for Jason Doe on the right. The profile includes basic information, active enrollment status, and contact information (phone, email, mailing and home addresses).

## Admin Portal Updates

CalHEERS will introduce a unified Case Overview Hub for Admins and Enrollers, consolidating case, household, eligibility, and enrollment details with quick links and benefit-year toggles.

A shortened contact-update flow from the Case Overview Hub lets staff quickly correct key information during renewals without re-entering full applications, reducing errors and rework.

Enhanced enrollment views and logs — including SCR-only changes, updated SEP end dates, and visible enroller delegation — improve issue resolution, transparency, and trust for consumers and partners.

**Clear, actionable case views help consumers get the right coverage faster.**

## CalHEERS | Go Green Campaign

### Contact Details and Preferences

**[HHM]'s Contact Information**

You must provide a cell phone number or email address. We want to make sure we can contact you with important information and updates about this application and your eligibility.


**Email address**

**Cell phone number**

**Home phone number** *Optional* Remove


[+ Add work phone number](#)

**How would [HHM] like to get letters and messages from us?**



**Online Mailbox**  
*Sent right away*

✓



**Paper Mail**  
*Arrives in 5-7 business days*

You will get your letters in your online mailbox. In some cases, we may still send letters to your home address.

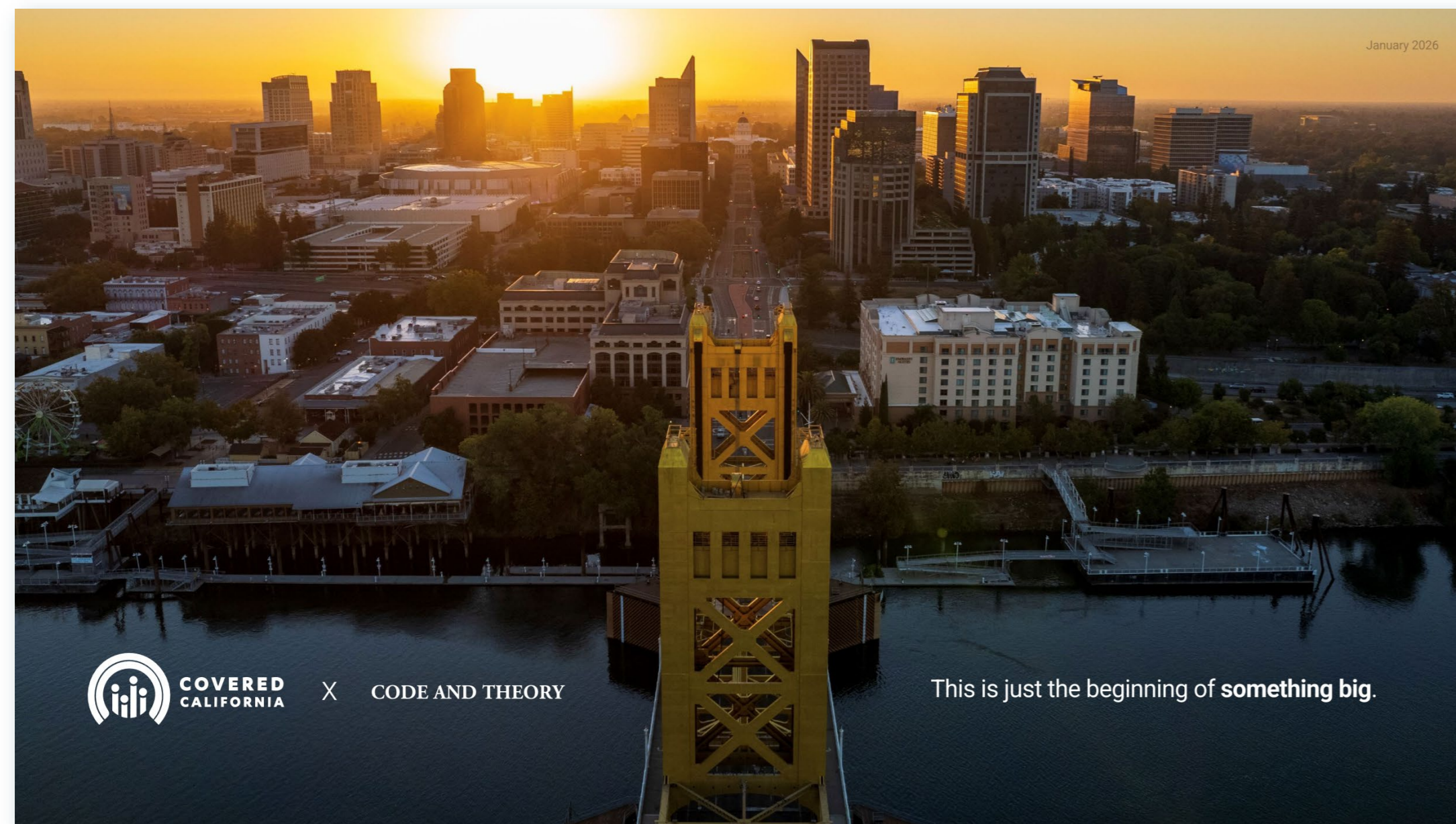
[What is the online mailbox?](#)

## Go Green Campaign Contact Info and Address Update

CalHEERS will default new applications to electronic notices and add clear “Go Paperless” prompts so consumers who currently receive mail are encouraged to move to secure online mailbox, email, or text. A new Contact Information & Preferences page, backed by MFA-like email and cell-phone verification, lets consumers and their helpers quickly review and update contact details without a full Report a Change, while keeping notices accurate and timely. Together, these changes make it easier for consumers to know when action is needed on their coverage and meaningfully lower mailing costs for Covered California.

**Easy paperless notices keep consumers informed while reducing printing and postage costs.**

## Dotcom | Website Redesign Activities Kickoff



### First steps with Code & Theory

Successfully onboarded Code & Theory as our website redesign vendor, establishing a strong foundation for the project through a structured kickoff process.

This included coordinating and facilitating stakeholder interviews across the organization to capture diverse perspectives, business requirements, and user needs that will directly inform the redesign strategy. By engaging cross-functional voices early, we ensured alignment on project goals and set the stage for a research-driven approach that positions Covered California's digital presence for meaningful improvement.

**Let's build a robust digital product for Californians.**



# Outreach and Sales Update

## Uncompensated partners supporting enrollment assistance efforts

Enrollment Assistance Program	Entities	Counselors
Certified Application Counselor	181	1,274
Plan-Based Enroller	12	835
Medi-Cal Managed Care Plan	3	33

# Outreach and Sales Non-English Enrollment Support

DATA AS OF APRIL 2, 2026

## 12,311 Certified Insurance Agents

- 20.8% Spanish
- 10.6% Chinese
- 4.1% Vietnamese
- 4.3% Korean
- 21.6% Other Languages

## 1,268 Navigator: Certified Enrollment Counselors (CEC)

- 31.8% Spanish
- 4.3% Chinese
- 1.5% Vietnamese
- 0.3% Korean
- 3.1% Other Languages

## 1,274 Certified Application Counselors (CAC)

- 28.0% Spanish
- 1.7% Chinese
- 0.3% Vietnamese
- 0.1% Korean
- 1.3% Other Languages

## 835 Certified Plan-Based Enrollers (PBE)

- 6.7% Spanish
- 1.1% Chinese
- 0.6% Vietnamese
- 0.4% Korean
- 0.7% Other Languages

## 33 Certified Medi-Cal Managed Care Plan Enrollers (MMCPE)

- 15.2% Spanish
- 3.0% Chinese
- 3.0% Vietnamese
- 0.0% Korean
- 0.0% Other Languages

