

Executive Director's Report

Jessica Altman, Executive Director

November 19, 2026 Board Meeting

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
August 20
September 17
November 19
December 17 *

**Possibly no meeting*

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January 21
February 25
March 18 *
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May 20
June 17
July 15 *
August 19
September 16
October 21 *
November 18
December 16 *

**Possibly no meeting*

Executive Director’s Report

01 Farewell to Board Member Jerry Fleming

02 Farewell to Board Member Craig Cornett

03 Welcome, Mary Watanabe!

04 ANA Awards Recognitions

05 State and Federal Policy/Legislative Update

06 Data and Research

07 Appendix

Thank you, Jerry!



Thank you, Craig!



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*

Welcome back, Mary Watanabe!





ASSOCIATION OF NATIONAL ADVERTISERS

2026 MARKETING TEAM OF THE YEAR

2026 ANA MULTICULTURAL AND INCLUSIVE MARKETING EXCELLENCE AWARDS

2026 WINNER

CATEGORY

Purpose/Socially Responsible Marketing

AWARD LEVEL

Gold

CAMPAIGN NAME

“For the Love of Californians”

CLIENT

Covered California

AGENCY

IW Group, Sensis Agency, VML

ANA

ANAMulticulturalAwards.org

2026 ANA MULTICULTURAL AND INCLUSIVE MARKETING EXCELLENCE AWARDS

2026 WINNER

CATEGORY

Local/Regional/Market Specific Marketing

AWARD LEVEL

Silver

CAMPAIGN NAME

“For the Love of Californians”

CLIENT

Covered California

AGENCY

IW Group, Sensis Agency, VML

ANA

ANAMulticulturalAwards.org

2026 ANA MULTICULTURAL AND INCLUSIVE MARKETING EXCELLENCE AWARDS

2026 WINNER

CATEGORY

Health and Wellness

AWARD LEVEL

Gold

CAMPAIGN NAME

“For the Love of Californians”

CLIENT

Covered California

AGENCY

IW Group, Sensis Agency, VML

ANA

ANAMulticulturalAwards.org

2026 ANA MULTICULTURAL AND INCLUSIVE MARKETING EXCELLENCE AWARDS

2026 WINNER

CATEGORY

Media Strategy and Planning

AWARD LEVEL

Gold

CAMPAIGN NAME

“For the Love of Californians”

CLIENT

Covered California

AGENCY

IW Group, Sensis Agency, VML

ANA

ANAMulticulturalAwards.org

State and Federal Policy & Legislative Updates

Jessica Altman, Executive Director

Federal Update: 2026 Mid-term Elections

Election day in the nation was Tuesday, November 3, 2026.

- A new Congress will commence in 2027. Leadership majorities in both the U.S. Senate and House of Representatives will change.
- While policy outcomes in a divided government are uncertain, the incoming Congressional leadership has been clear that affordability and healthcare are priorities.
- In press conferences after the midterm elections, presumptive Speaker Hakeem Jeffries (D – New York) listed specific priorities on affordability, including an extension of enhanced premium tax credits.

Federal Update: 2026 Mid-term Elections

Election day in the nation was Tuesday, November 3, 2026.

- California will have a new governor in 2027. Xavier Becerra is California's Governor-elect, bringing an extensive history of leadership with the Affordable Care Act through his prior service as a California Congressmember, California Attorney General, and former Secretary of the U.S. Health and Human Services Department.
- A new state legislative session will begin on December 7, 2026, and will include newly elected members of the legislature.

Covered California is poised to engage with the new Congress, new governor's administration, and the legislature in its ongoing effort to educate and inform national and state health policy.

Federal Update: Proposed Regulations Implementing H.R. 1 Premium Tax Credit Provisions

On October 15, 2026, the U.S. Department of the Treasury, Internal Revenue Service (IRS) proposed regulations implementing premium tax credit (PTC) amendments enacted in H.R. 1. The proposal makes conforming changes to existing PTC regulations and provides operational details for changes already enacted by Congress:

- Eliminates the limitation (or cap) on repayment of excess advance payments of the PTC (APTC).
- Excludes lawfully present individuals who are not "eligible aliens" from PTC calculations. The proposed regulations would establish related reductions to enrollment and benchmark premiums and applicable-percentage calculations.
- Revises Exchange reporting requirements, including Form 1095-A reporting of enrollment premiums and applicable benchmark plan premiums after excluding amounts allocable to individuals who are not lawfully present or who are lawfully present but not eligible aliens.
- Treats an individual as eligible for Medicaid minimum essential coverage—and therefore generally ineligible for PTC—for months the individual is ineligible for Medicaid solely because of failure to meet the community-engagement requirement.
- Requires Exchange to provide a pre-enrollment verification process.

Covered California continues to analyze the proposed regulations and their potential impacts on consumers and Exchange operations, including eligibility, financial assistance, enrollment, reporting, and consumer communications. The comment deadline is November 30, 2026.

Federal Update: Proposed Regulations on Exchange Pre-Eligibility Verification

On October 27, 2026, the Centers for Medicare & Medicaid Services (CMS) proposed regulations implementing pre-enrollment verification statutory changes enacted in H.R. 1. The proposal adds an annual pre-open enrollment verification process and revises how unresolved data matching issues (DMIs) affect financial assistance and enrollment.

- Beginning plan year 2028, consumers seeking advance payments of the premium tax credit (APTC) or cost-sharing reductions (CSRs) would need to verify certain information including household income and family size, citizenship or eligible noncitizen status, other coverage, and residence. If specified DMIs remain unresolved, APTC and CSRs must be withheld until completing verification, although consumers could still enroll in a qualified health plan (QHP).
- After verification, APTC and CSRs could take effect retroactively under proposed effective date provisions.
- Consumers could pend plan selections while an applicable DMI is resolved. Proposed effective date rules would determine when coverage starts based on DMI resolution timing.
- Beginning August 1, 2027, Exchanges must offer a pre-open enrollment verification period for consumers to submit or confirm information for the upcoming plan year. If current enrollees do not take an active step to verify their information for the following plan year or certain DMIs extend beyond year-end, Exchanges would be required to withhold APTC and CSRs when renewing or effectuating coverage.

Covered California continues to analyze the proposed regulations and their potential impacts on consumers and Exchange operations, including eligibility, financial assistance, enrollment, reporting, and consumer communications. The comment deadline is November 27, 2026.

Federal Update: Joint Support on Physician Payment

On September 14, 2026, Covered California and the California Public Employees Retirement System (CalPERS) submitted joint comments to the Centers for Medicare & Medicaid Services (CMS) on the Calendar Year 2027 Medicare Physician Fee Schedule proposed rule, supporting reforms to improve affordability, access, quality, and efficiency in health care. The letter specifically:

- Supported payment reforms to strengthen primary care, better recognize complex and longitudinal care, support site-neutral payment for nursing facility visits, and shift primary care payment toward value-based models
- Supported expanded telehealth access, including audio-only and tele-mental health services, and urged CMS to integrate behavioral health and multidisciplinary teams into primary care

Federal Update: Federal Vaccine Recommendations

On September 15, 2026, Covered California and CalPERS submitted joint comments to the U.S. Department of Health and Human Services (HHS) on federal vaccine recommendations, supporting an evidence-based framework that promotes clear guidance, patient choice, and public trust. The letter specifically:

- Recommended retaining the current vaccine recommendation framework and clarifying—not renaming—shared clinical decision-making (SCDM), which involves individualized assessment rather than a universal default to vaccinate.
- Urged HHS to clarify that SCDM recommendation remains a federal recommendation and is covered when adopted by the Centers for Disease Control and Prevention Director, and to coordinate coverage messaging among payers, state Medicaid agencies, Vaccines for Children administrators, and providers.
- Supported reliance on the best available scientific and clinical evidence, communication through trusted providers, and childhood immunization rates as a key measure of success.

Federal Update: Request For Information — "Health Coverage That Works for Everyone"

In early October, Covered California provided comments in response to a recent Request for Information (RFI) from US Senate Finance Committee Ranking Member Ron Wyden. The RFI solicited input from stakeholders on federal policy approaches that advance "Health Coverage That Works for Everyone."

Covered California's comments draw on our data, operational experience, and perspective as a state-based marketplace and share practical considerations that would improve access to affordable and high-quality coverage, improve value, and strengthen the consumer experience. The comments highlight:

- Opportunities to address federal policies that reduce health coverage access and affordability.
- Supporting policy innovations to bolster outreach, enrollment, choice, and the consumer experience.
- Common-sense approaches to program integrity and fraud prevention.
- Commercial and employer market policy considerations, including marketplace role and authority, cost containment, purchaser alignment, and improving value.

State Update: 2026 Legislative Outcomes

Governor Newsom took the following action on key bills for Covered California:

Chaptered:

- **AB 1907 (Addis, Chapter 204, Statutes of 2026)** extends Covered California's automatic enrollment process to individuals who newly apply for coverage at the county level, and who are determined ineligible for Medi-Cal, but eligible for Covered California. Also amends state law to ensure that Covered California's Open Enrollment Period comports with federal regulation.

The Legislature and Governor also took the following State Budget Action at the end of this legislative session:

- **AB 113 (Gabriel, Chapter 248, Statutes of 2026)** and **AB 173 (Committee on Budget, Chapter 252, Statutes of 2026)** provide an appropriation of $8 million of HCARF funds for FY 2026-27 and authorization to provide dialysis services for restricted-scope Medi-Cal beneficiaries. This was in response to the federal government pulling dialysis maintenance services as an emergency benefit last year.

COVERED CALIFORNIA

Data and Research

Katie Ravel, Director
Policy, Eligibility & Research Division

SB 260: a policy to automatically enroll individuals who lose Medi-Cal coverage

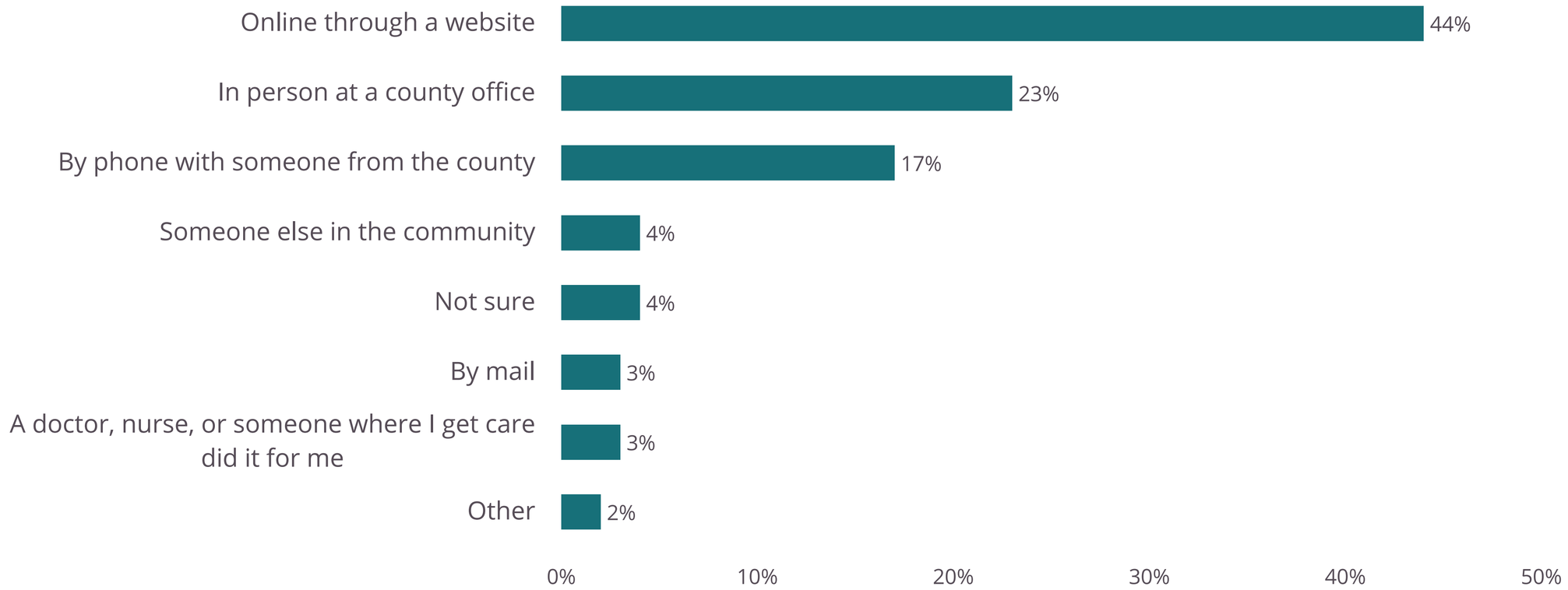
- California Senate Bill 260 (Chapter 845, Statutes of 2019) leverages California's integrated eligibility system for health care programs to direct Covered California to automatically enroll individuals who lose Medi-Cal coverage and gain eligibility for subsidized coverage.
- Individuals will be enrolled in the lowest cost silver plan available.
- Enrollment is to occur before the Medi-Cal termination date.
- Consumers must effectuate coverage either by opting in if they don't have a premium or by making their binder payment.
- Consumers can switch plans and they have the full 60-day SEP window after losing Medi-Cal take action.
- SB 260 launched in June 2023 to coincide with the start of the Medicaid continuous coverage unwinding period.

AB 1907 opportunity: a policy to automatically enroll consumers who newly apply through the county system

- SB 260 does not apply to consumers who apply for coverage through the county system and are found eligible for Covered California, though were never enrolled in Medi-Cal.
- Analysis of subsidy-eligible consumers who did not pick a plan found a substantial volume of consumers who transitioned from county referrals but were not eligible for the SB 260 process.
    - More than 100,000 subsidy-eligible applicants were referred to CalHEERS from CalSAWS during the 2024 open enrollment and no plan selection was made.
    - Tens of thousands more were eligible during the special enrollment period but did not pick a plan.
- AB 1907 will give Covered California the ability to auto-enroll these individuals into the lowest cost Silver plan beginning July 2027.
- Covered California used the annual member survey to gather information about these consumers to help inform program design.

Mode of Providing Application Information Among County-Referred Consumers

Q. Which of the following was the main way that you (or someone else) provided information to see if you were eligible for Medi-Cal?
Among county-referred consumers who recall providing information for Medi-Cal eligibility (n=1,110)



Source: 2025 California Health Coverage Survey.

Consumer Characteristics

Demographics & Related Characteristics: Compared to their other Open Enrollment consumer counterparts, county-referred consumers tend to:

- Have lower incomes and less formal education
- Identify as Latino and to speak other languages
- Be married and live in households with multiple members

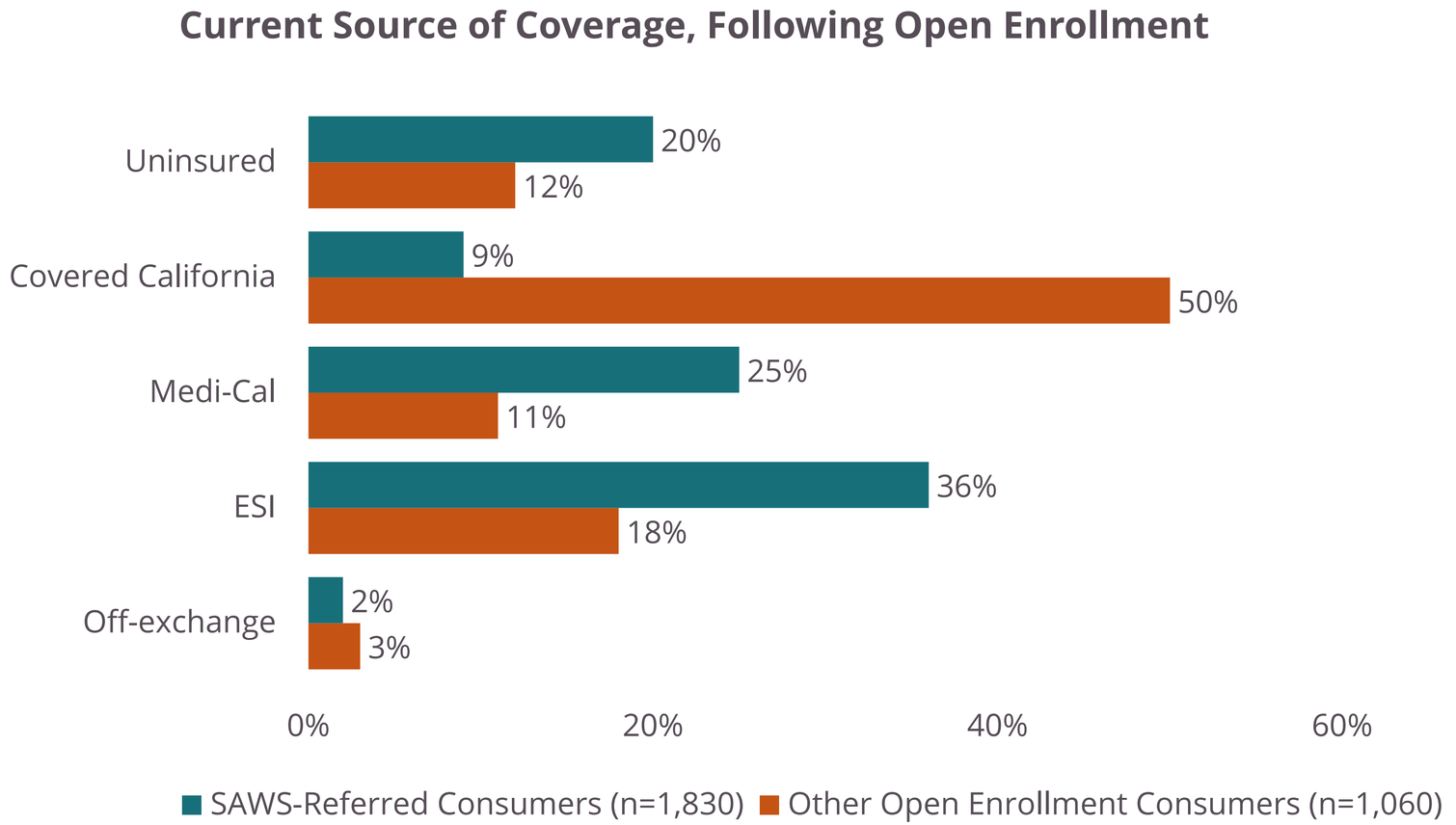
Other Characteristics: Compared to their other Open Enrollment consumer counterparts, county-referred consumers tend to:

- Have worse (self-reported) health status
- Have more social needs generally
- Live in places with lower Healthy Places Index (HPI)

Consumer Profiles: While many county-referred consumers have prior experience with Medi-Cal, others are looking for Medi-Cal or Covered California for the first time, after experiencing a qualifying life event such as losing employer coverage or moving to the state.

Current Coverage: County-Referred vs. Other Open Enrollment Consumers

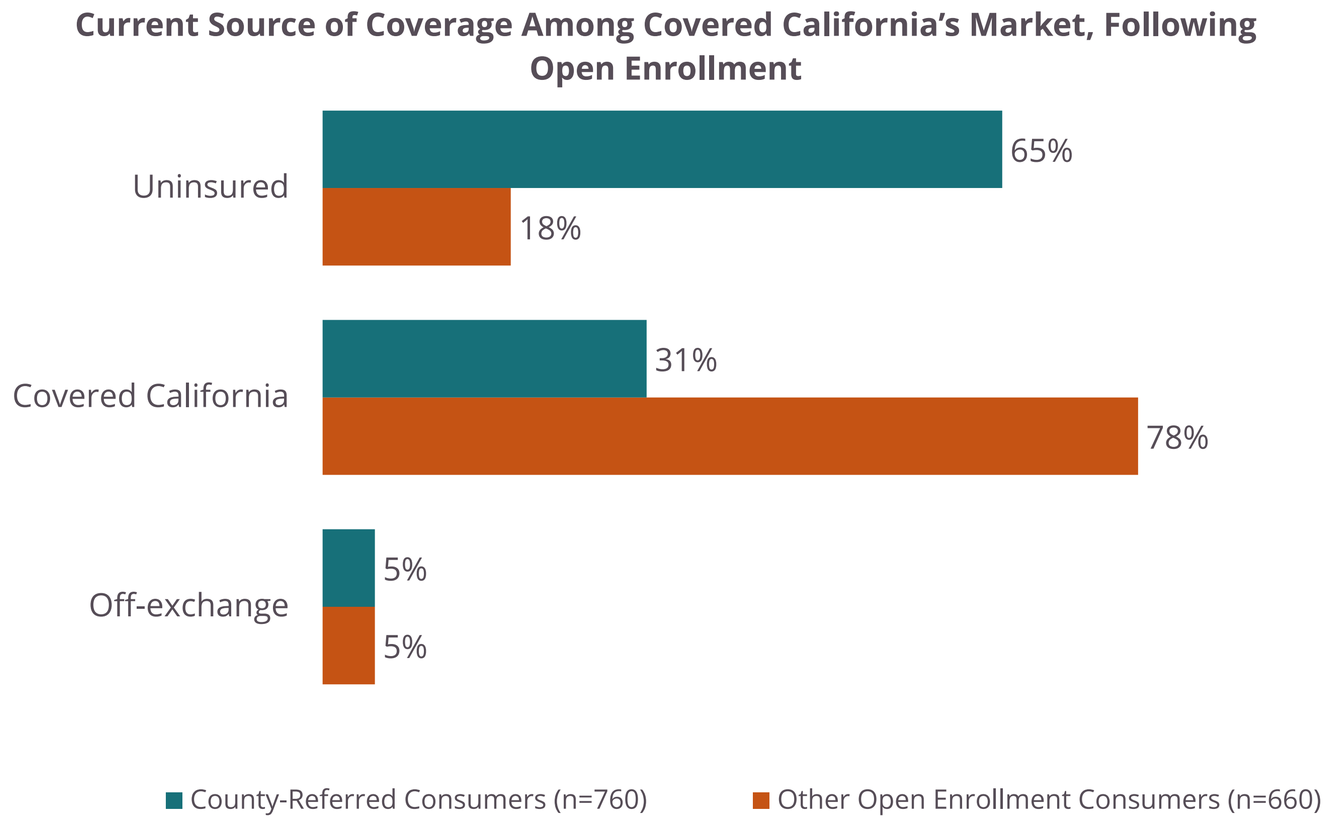
While significant shares of county-referred consumers reported Medi-Cal or employer-sponsored insurance (ESI) at the time of the survey after open enrollment in 2025, they also were far more likely to report being uninsured (20% for county-referred compared to 12% for other consumers).



Source: 2025 California Health Coverage Survey. Current coverage questions: "Do you have health coverage *right now*?" "What is your *main* source of health coverage *right now*? "

Current Coverage Among Those in Covered California's Market: County-Referred vs. Other Open Enrollment Consumers

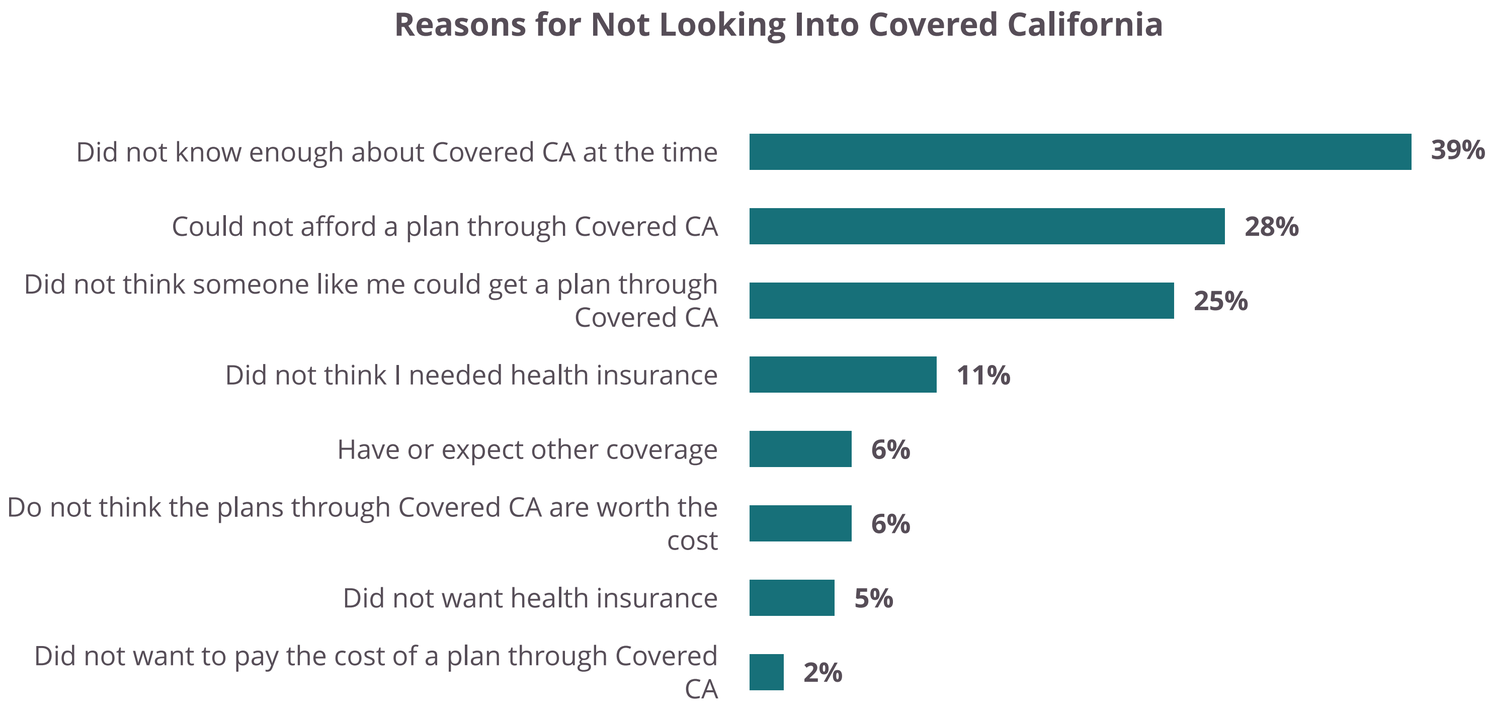
When looking only at those consumers who did not have another source of coverage (such as Medi-Cal or employer-sponsored insurance) at the time of the survey, approximately two-thirds of the county-referred consumers reported being uninsured, compared to less than one-fifth of other applicants (65% uninsured compared to 18%).



Source: 2025 California Health Coverage Survey. Current coverage questions: "Do you have health coverage *right now*?" "What is your *main* source of health coverage *right now*? "

Reasons for Not Looking Into a Covered California Plan Among Uninsured

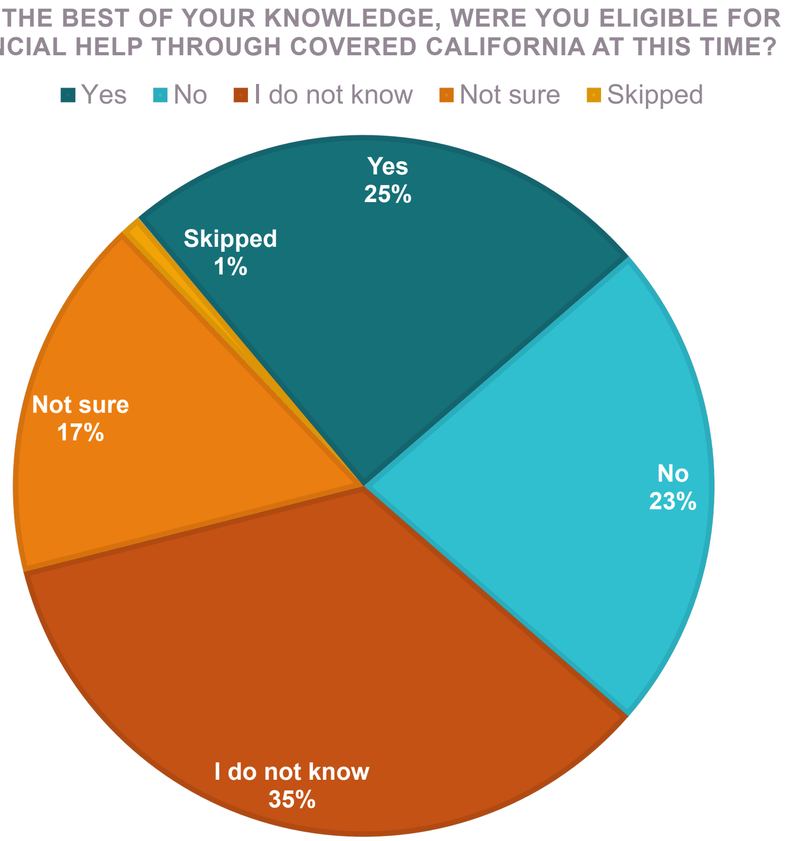
Among county-referred consumers who were uninsured and did not look into Covered California, the most common reasons were not knowing enough about Covered California, affordability concerns, and believing someone like them could not get a plan.



Source: 2025 California Health Coverage Survey. *"Which of the following statements describe why you did NOT look into getting a health plan through Covered California?"* Note: 13% of county-referred respondents in the OE Pool chose 'not sure' and less than 1% skipped this question (data not shown).

Self-report of Eligibility for Financial Help

52% of county-referred consumers express uncertainty around whether they were eligible for financial help through Covered California.

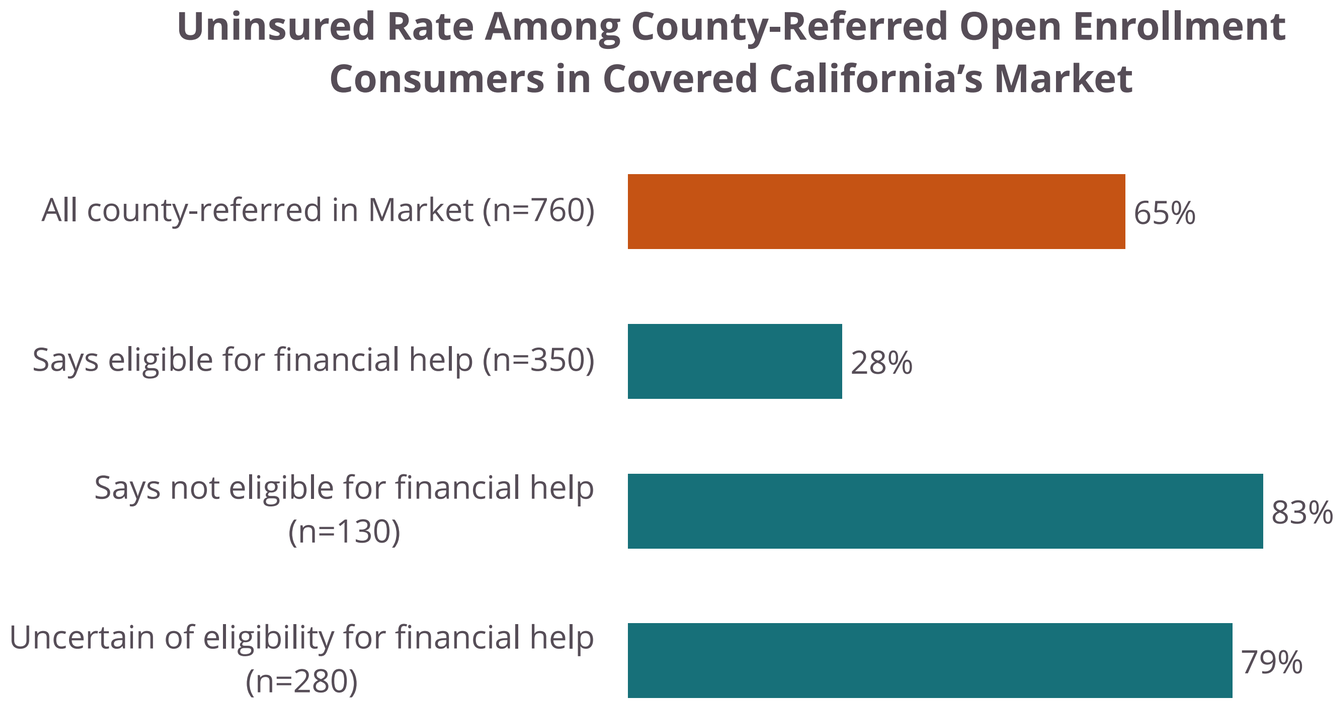


Among all County-referred consumers, n=1,830

Source: 2025 California Health Coverage Survey.

Proportion of Market Going Uninsured, by Self-report of Eligibility for Financial Help

Among county-referred consumers in Covered California's market, those unaware of their eligibility for financial help were much more likely to report being uninsured.



Source: 2025 California Health Coverage Survey. Current coverage question: "Do you have health coverage *right now*?" Awareness of financial help: "*To the best of your knowledge, were you eligible for financial help through Covered California at this time?*"

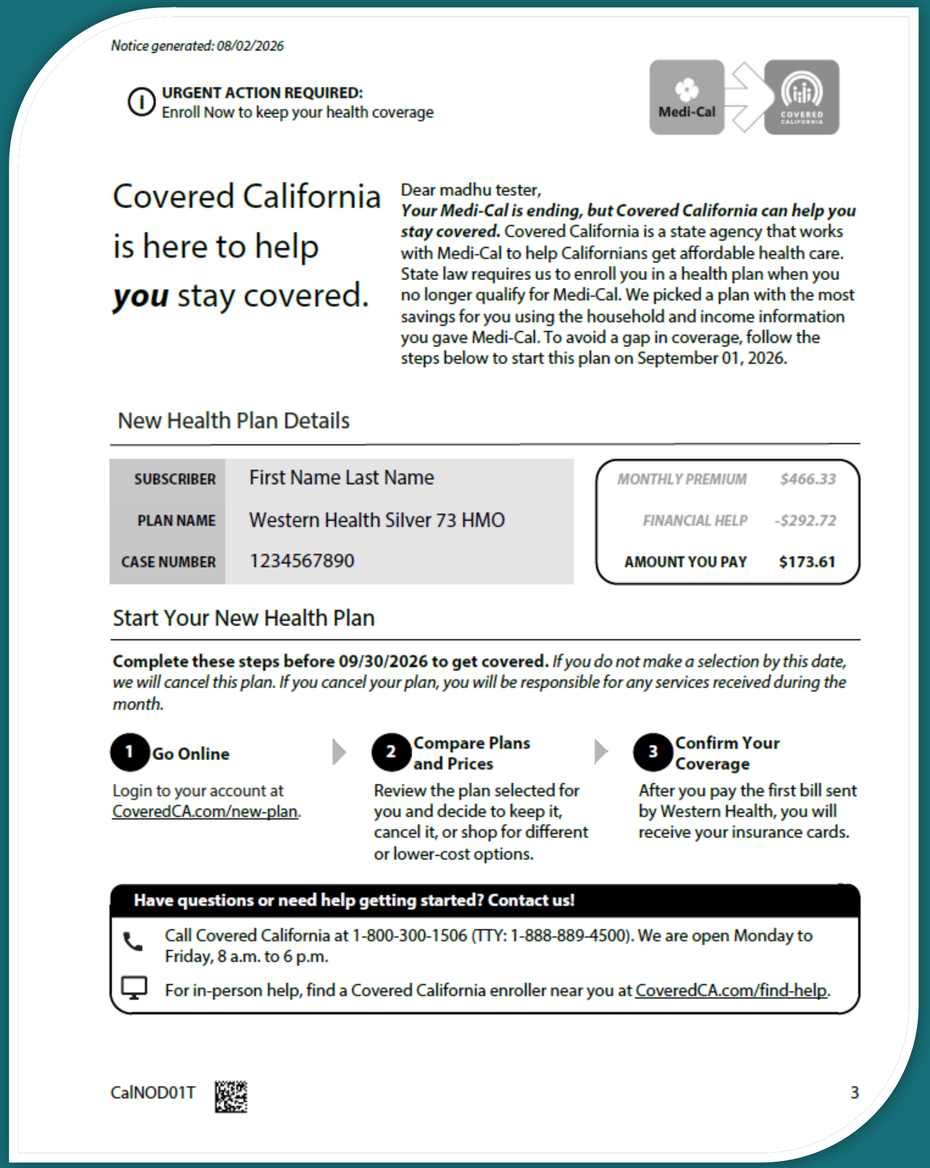
Covered California will leverage the successful approach from SB 260 in implementing AB 1907:

Similar to SB 260, consumers will receive a customized notice and online experience to clearly communicate financial assistance, net premium, plan details and enrollment steps.

Covered California will conduct outbound outreach – including direct mail, email, text messages and phone calls – as enrollment deadlines approach.

Individuals will be offered assistance through Agents and Navigators – including those they worked with during prior Covered California enrollment.

Covered California will begin personalized outreach to this population during Open Enrollment while we build auto-enrollment functionality.



Notice generated: 08/02/2026

URGENT ACTION REQUIRED:
Enroll Now to keep your health coverage

Medi-Cal → Covered California

Covered California is here to help ***you*** stay covered.

Dear madhu tester,
Your Medi-Cal is ending, but Covered California can help you stay covered. Covered California is a state agency that works with Medi-Cal to help Californians get affordable health care. State law requires us to enroll you in a health plan when you no longer qualify for Medi-Cal. We picked a plan with the most savings for you using the household and income information you gave Medi-Cal. To avoid a gap in coverage, follow the steps below to start this plan on September 01, 2026.

New Health Plan Details

SUBSCRIBER	First Name Last Name
PLAN NAME	Western Health Silver 73 HMO
CASE NUMBER	1234567890

MONTHLY PREMIUM	$466.33
FINANCIAL HELP	-$292.72
AMOUNT YOU PAY	$173.61

Start Your New Health Plan

Complete these steps before 09/30/2026 to get covered. *If you do not make a selection by this date, we will cancel this plan. If you cancel your plan, you will be responsible for any services received during the month.*

1 Go Online
Login to your account at CoveredCA.com/new-plan.

2 Compare Plans and Prices
Review the plan selected for you and decide to keep it, cancel it, or shop for different or lower-cost options.

3 Confirm Your Coverage
After you pay the first bill sent by Western Health, you will receive your insurance cards.

Have questions or need help getting started? Contact us!

Call Covered California at 1-800-300-1506 (TTY: 1-888-889-4500). We are open Monday to Friday, 8 a.m. to 6 p.m.

For in-person help, find a Covered California enroller near you at CoveredCA.com/find-help.

CalNOD01T

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PUBLIC COMMENT
Call: (877) 336-4440
Participant Code: 6981308

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Appendix

Appendix: Table of Contents

01 Service Center Update

02 Covered California for Small Business Update

03 CalHEERS Update

04 Outreach and Sales Update

COVERED CALIFORNIA

Service Center Update

Comparing September 2026 vs. 2025 Call Statistics

Year	Calls to IVR	Calls Offered to SCR	Abandoned %	Calls Handled	ASA	AHT	Service Level %
2026	195,534	132,625	2.08%	129,788	0:01:24	0:20:26	73.50%
2025	218,534	151,421	2.16%	148,104	0:01:06	0:20:23	67.59%
Percent Change	11% Decrease	12% Decrease	4% Decrease	12% Decrease	27% Increase	0.25% Increase	9% Increase

- The total Calls Offered decreased from 2025 by 12%.
- Calls Handled decreased from 2025 by 12%.
- The Abandoned % decreased from 2025 by 4%.
- Service Level increased from 2025 by 9%.

September Weekly Quick Sort Transfers

Week 1	Week 2	Week 3	Week 4	Week 5	Total
09/01 – 09/05	09/06 – 09/12	09/13 – 09/19	09/20 – 09/26	09/27 – 09/30	
663	742	807	811	635	3,658

**Partial Week - All CoveredCA service centers were closed Monday, September 07, 2026, in observance of Labor Day.*

September Weekly Quick Sort Transfers

SAWS Consortia	Calls Offered	Service Level %	Calls Abandoned %	ASA
CalSAWS	2,122	85.58%	3.06%	0:00:40

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

Improving Customer Service

- Partnered with Covered California University (CCU) to ramp up Surge Vendor staffing for Open Enrollment
- Partnered with Covered California University (CCU) for New Employee Training

Enhancing Technology Solutions

- CR&R partnered with CCIT to roll out a new Salesforce tools for automating case assignments that will improve workflow efficiency.

Staffing Updates

- Vacancy rate of 2.8 percent (2026) comparable to prior year of 5.8 percent (2025)

COVERED CALIFORNIA

Covered California for Small Business Update

COVERED CALIFORNIA FOR SMALL BUSINESS

Membership Updates – **November 2026**

Group Membership

- **Total Groups**: 9,956
- **Total Members**: 82,336
- **Retention Numbers:** 88%
- **Average Group Size**: 8.3 members



Enrollment Updates

- **Membership by Health Plan:**
  - **Blue Shield of California:** 36,162
  - **Kaiser Permanente:** 42,684
  - **Sharp Health Plan:** 3,490
  - **Delta Dental:** 9,204 (*not included in total member count*)
- **Year-to-Date (YTD) New Sales**: 10,008

Membership reconciled through 10/19/2026

CCSB Welcomes Back Western Health Advantage for 2027 Plan Year

Western Health Advantage Returns to Covered California for Small Business

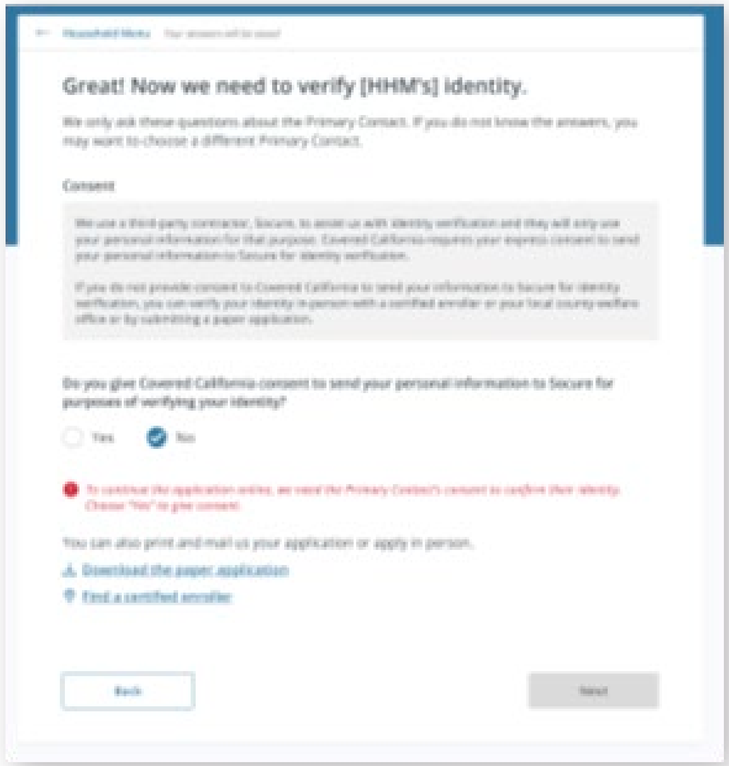
- **Expanded Choice and Affordability:** Enhancing access to competitive, quality coverage for small businesses in Sacramento and North Bay regions.
- **Availability Timeline:** Plans available for quoting in October for January 1 effective dates.
- **Looking Ahead:** Excited to deliver added value to brokers and employer groups, with more details about 2027 plans coming soon.

Current CCSB Health Plan Partners

COVERED CALIFORNIA

CalHEERS Update

CalHEERS | 26.12 UI Enhancements



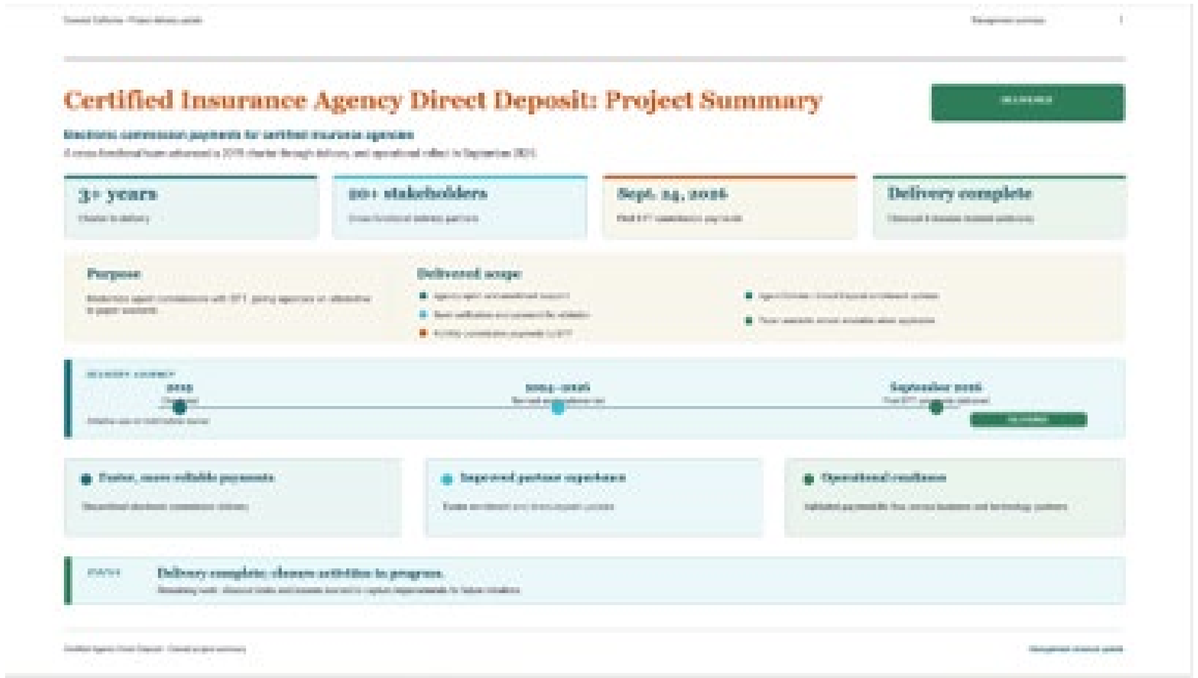
26.12 UI Enhancements

CalHEERS will improve the consumer and assister experience by correcting English and Spanish content, making case and enrollment information easier to understand, and simplifying review and configuration workflows.

The release will improve language and document links; clarify “Same as Primary Contact” behavior; organize and color-code Case Overview tags, including new OAD, FEMD, and subsidized/unsubsidized indicators; streamline enrollment details; and make OSEP QLE configuration more precise.

Clearer information helps consumers understand coverage and take the right next step.

CCSB Direct Deposit Release — Delivered Value for Certified Agencies



Board takeaway

DELIVERED

What the release is: Delivered an electronic funds transfer (EFT) option for certified insurance agencies, including agency opt-in, bank verification, enrollment support, and agent-enroller updates; first EFT commission payments were delivered on September 24, 2026.

Value to the CCSB business: Provides agencies with a faster, more reliable alternative to paper warrants, improves the partner payment experience, and strengthens operational readiness through a validated end-to-end payment process.

COVERED CALIFORNIA

Outreach and Sales Update

Uncompensated Partners Supporting Enrollment Assistance Efforts

Enrollment Assistance Program	Entities	Counselors
Certified Application Counselor	197	1,456
Plan-Based Enroller	12	683
Medi-Cal Managed Care Plan	3	35

Outreach and Sales Non-English Enrollment Support

DATA AS OF OCTOBER 15, 2026

12,823 Certified Insurance Agents
- 20.9% Spanish
- 10.4% Chinese
- 4.1% Vietnamese
- 4.3% Korean
- 21.6% Other Languages

1,233 Navigator: Certified Enrollment Counselors (CEC)
- 31.5% Spanish
- 4.2% Chinese
- 1.5% Vietnamese
- 0.3% Korean
- 3.1% Other Languages

1,456 Certified Application Counselors (CAC)
- 23.6% Spanish
- 1.5% Chinese
- 0.3% Vietnamese
- 0.3% Korean
- 1.2% Other Languages

683 Certified Plan-Based Enrollers (PBE)
- 7.2% Spanish
- 1.3% Chinese
- 0.7% Vietnamese
- 0.4% Korean
- 0.8% Other Languages

35 Certified Medi-Cal Managed Care Plan Enrollers (MMCPE)
- 14.3% Spanish
- 2.9% Chinese
- 2.9% Vietnamese
- 0.0% Korean
- 0.0% Other Languages

