Date: September 25, 2024 Time: 10:00am - 11:30am



OPEN ENROLLMENT AND RENEWALS FOR THE 2025 PLAN YEAR

Log into the WebEx <u>first</u>: click <u>HERE</u>

Then, you may connect to audio via computer audio or via telephone audio

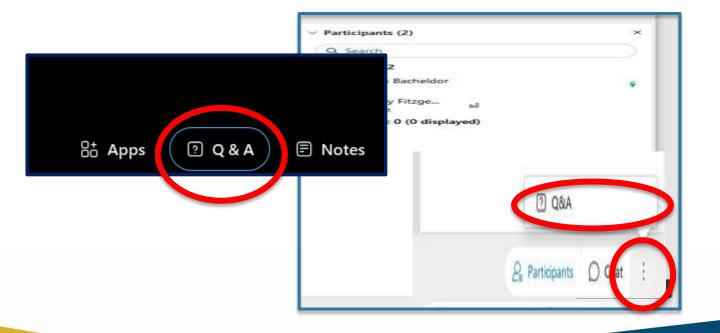
QUESTIONS

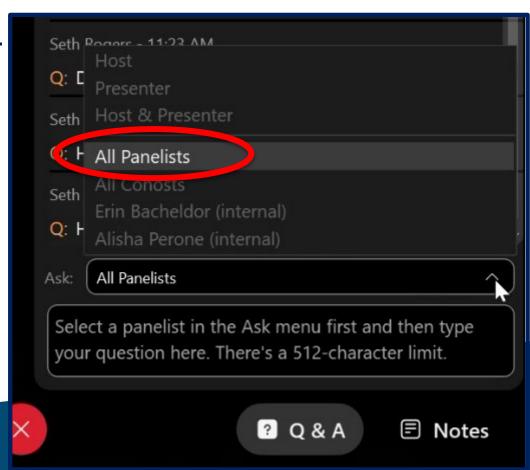


Questions can be submitted using the Q & A function on your Webex control panel.

Chat function is disabled, please use Q & A panel to submit questions.

We'll take questions at the end of today's presentation.





RECORDING AND MATERIALS



A recording of the webinar and any related materials will be available online on our Spring Training webpage. Please visit:

https://info.nystateofhealth.ny.gov/SpringTraining



YOUR FEEDBACK: PRIVACY AND SECURITY



Webinar Statistics:

- Right at 98% of respondents said the webinar increased their knowledge of the topic.
- Over 98% said information from the webinar will allow them to better assist consumers in a safe and secure manner.

Here's what you said:

- "The audio and picture quality were excellent, and the hour and a half spent on the topic was just right"
- "The interactive polls are great learning tools; can we continue to have interactive poll questions?"

TODAY'S PRESENTATION



<u>Introductions</u>

Alicia Neznek Bureau of Consumer Assistance and Training

Panelists

Andrea Heidelmark Bureau of System Quality Assurance and Business Requirements

Kelvin Sapp Deputy Director, Communications, Outreach & Marketing, NY State of Health

Sonia Sekhar Deputy Director, NY State of Health

TODAY'S AGENDA



Open Enrollment and Renewals

- Open Enrollment for Qualified Health Plans
- Important Dates
- The Three Standard Types of Renewals
- Individual Eligibility for Those Who are Due to Renew
- NY State of Health Email, Text, and WhatsApp Messages
- NY State of Health Communication Tools
- Using the Assistor Dashboard



Open Enrollment for Qualified Health Plans (QHPs) for the 2025 Plan Year.

OPEN ENROLLMENT



<u>Annual Open Enrollment – Plan Year 2025</u> <u>Begins November 1, 2024</u>

- NY State of Health expects to renew coverage for nearly 800,000 members and enroll new people into coverage during Open Enrollment.
- Details about 2025 plan options will be released in early October.
- Enrollment in Medicaid, the Essential Plan and Child Health Plus is open all year.

IMPORTANT DATES FOR 2025 OPEN ENROLLMENT AND RENEWALS



Date	Action		
October 1, 2024	2025 plans will appear on the Compare Plans and Estimate Costs Tool (Anonymous Plan Search Tool) for browsing.		
By November 1, 2024	Renewal Notices will be mailed.		
	These notices are sent to individuals eligible for renewal of their:		
	 Qualified Health Plans (QHPs) including subsidized and Full Pay QHPs. 		
November 1, 2024	Open Enrollment begins for <u>new</u> applicants.		
November 16, 2024	2025 QHP Renewals Begin.		
	Renewing consumers may enroll/renew in a QHP.		
	Consumers can update their account if needed and enroll in a plan for coverage		
	starting on January 1, 2025.		
December 15, 2024	Deadline to enroll for January 1, 2025 coverage.		
January 31, 2025	Open Enrollment closes for QHPs.		

IMPORTANT DATES FOR 2025 OPEN ENROLLMENT AND RENEWALS



Individuals enrolling in coverage for the first time during Open Enrollment should review their coverage start date carefully.

For	When Enrollment is Completed	Coverage Begins	
New Application	November 1 - December 15	January 1, 2025	
New Application	December 16 - January 15	February 1, 2025	
New Application	January 16 – January 31	March 1, 2025	

POLL QUESTION #1



Cam Miller contacts you in early October because their current employer-based coverage is ending on December 31, 2024. Cam would like to apply for a subsidized Qualified Health Plan for coverage beginning January 1, 2025, and would like to make an appointment with you today.

How should you proceed to help Cam?

- A. Make an appointment today or tomorrow based on Cam's and your own availability.
- B. Explain that you are busy today, but you can help Cam apply a different day later in the week. Schedule an appointment that works for both of you.
- C. Explain that if Cam wants coverage on January 1st, the appointment should be scheduled between November 1st and December 15th. The sooner the better within this timeframe.
- D. Explain to Cam that an application cannot be completed until after their current coverage ends.



Three Types of Renewals

THREE TYPES OF RENEWALS



- 1. Automatic Renewal With Auto-Enrollment
 - No action required.
- 2. Automatic Renewal Without Auto-Enrollment
 - Action required: Consumer must select and enroll in a plan.
- 3. Manual Renewal
 - Action required: Consumer must update their application.

AUTO-ENROLLMENT AUTO-ENROLLMENT



- Consumers will have their eligibility renewed using verified income from the consumer, along with state and federal data sources.
 - Consumer-documented income must have been verified by the Marketplace within the past five (5) months.

AUTO-ENROLLMENT, CONTINUED



For members renewing a QHP:

- Consumers will receive a notice by November 1st with 2025 premium information, including the APTC applied (if applicable).
 - No action is needed if the consumer agrees with the information in their notice.
 - The notice will list the income used which determines the amount of APTC the consumer is eligible for, in the section titled "How We Made Our Decision."
 - If the consumer does <u>not</u> agree with the automatic renewal determination, they may update their application.
 - □ Updates can be made starting 11/16/2024 and must be completed by 12/15/2024 to ensure no interruption of coverage for 1/1/2025.
- Enrollment into the plan (if the same plan is available in 2025) will be automatically completed by the Marketplace.

AUTOMATIC RENEWALS WITH AUTO-ENROLLMENT, CONTINUED



It is renewal time and NO ACTION is required for the following individuals:

Jo Bernat Marketplace ID: HX000000000

CHANGE IN ELIGIBILITY: You qualify for a premium tax credit to help pay for

your health insurance coverage, effective **January 01**, **2025**. Your tax credit amount for **2025** is **\$719.00** per

month.

You can apply all or part or none of this credit to your

monthly bill.

INSURANCE DETAILS: Insurance Company: MetroPlus Health Plan

Product: BronzePlus-B1, ST, INN, Pediatric Dental,

Dep25, Healthy Living Rewards, Metro-MP

Start Date: January 01, 2025

Your health insurance coverage has not changed. We reenrolled you into the same product that you had before. Contact your insurance company if you have questions about covered services or providers.

If you want to make a change, you must do so between **November 16, 2024** and **December 15, 2024**. See the section of this notice, "*How and When to Make Changes to Your Account or Coverage.*"

AUTOMATIC RENEWALS WITH AUTO-ENROLLMENT, CONTINUED



How and When to Make Changes to Your Account or Coverage

Follow the steps below -

- IF ... NY State of Health has requested that you complete the renewal process by updating some information (for example, pick a health plan or update information in your application);
- IF ... Anything has changed in your life that may affect your health insurance coverage or financial assistance;
- IF ... You are enrolled in a plan and want to see if you have other coverage options.
- **Step 1.** Go to www.nystateofhealth.ny.gov and log into your account.

OR

Contact a Navigator or Certified Application Counselor. These individuals, located at a community-based organizations and health plans, are trained to help you understand your health insurance coverage options and enroll in coverage. If you already are enrolled in a plan, you can also call your health plan for assistance.

Step 2. Make changes for you and/or your household members. You need to make the changes between **November 16**, 2024 and **December 15**, 2024 to see what you qualify for on January 01, 2025.

Below are some events in your life or a household member's life that could affect what health insurance coverage you are re-enrolled in, who is covered, or how much you pay. Tell us if:

- You move
- Your income changes (only if you are receiving financial assistance)
- You get access to or enroll in the New York State Health Insurance Program (NYSHIP)
- Your eligibility for health insurance from a job changes
- The cost of your health insurance premium from a job changes
- Your household changes. For example, you marry/divorce, become pregnant, or have a child; adopt a child, or a child is placed for adoption with you
- You become qualified for other health insurance
- There is a change in full-time student status (if applicable to application members)
- There is a change in immigration status
- You change how you plan to file your taxes. For example, you will claim new dependents (only if you are receiving financial assistance)

If you do not report changes within 30 days and they affect your ability to get government help with insurance costs, you may have to pay back some or all of the subsidies you received.

AUTOMATIC RENEWALS WITH AUTO-ENROLLMENT, CONTINUED



Individuals who were automatically renewed and enrolled in a subsidized QHP for 2025 should read their notice carefully. This information may include their APTC amount which could have changed from last year.

- If a consumer is automatically renewed and the amount of APTC that they are eligible for is **more** than they were eligible for in the previous year, the same amount of APTC will be applied.
 - If the consumer would like to apply that higher APTC amount, help them to access their Plans Tab to do this.
- If the consumer is automatically renewed and eligible for **less** APTC (and they applied the full amount to their premium last year), the full amount of APTC will continue to be applied.

It is renewal time and NO ACTION is required for the following individuals:

Jo Bernat

Marketplace ID: HX0000000000

You qualify for a premium tax credit to help pay for your health insurance coverage, effective January 01, 2025. Your tax credit amount for 2025 is \$719.00 per month.

APTC LEVEL REMINDER



The Inflation Reduction Act extended enhanced tax credits for Qualified Health Plan consumers through 2025.

• The applicable percentage that determines a consumer's expected contribution towards the cost of their health insurance remains the same as last year.

Annual Household Income		Expected Premium Contribution		
% of FPL		% of Income	Annual Dollar Amount**	Monthly Dollar Amount**
>250% - <u><</u> 300%	\$37,650 - \$45,180	4.0% - 6.0%	\$1,506 - \$2,711	\$125 - \$226
>300% - <u><</u> 400%	\$45,180 - \$60,240	6.0% - 8.5%	\$2,711 - 5,120	\$226 - \$427
>400%	> \$60,240	8.5%	> \$5,120	> \$427

^{*}for a household of one (1) based on 2024 FPLs (Used for 2025 QHP Eligibility)
**dollar amounts are if consumer purchased the second lowest cost silver plan

AFFORDABLE COVERAGE IN 2025



Employer Health Insurance Affordability Calculator | NY State of Health

*This tool will be updated for 2025 by the start of Open Enrollment (11/1/2024).

- In 2025, if the employee has an offer of employee-only coverage that is considered affordable (costs them less than 9.02% percent of household income), the employee will not qualify for financial help, but their family members may still be eligible for financial help.
- If the employee must pay more than 9.02% of household income towards the premium for a family plan, the plan is considered unaffordable, and the employee's family members may qualify for financial assistance.

If you as an Assistor, help the consumer to use this calculator and if it shows that they or their family members may qualify for financial help, you may assist them in one of two ways:

- 1. Assist them in calling customer service (1-855-355-5777) to be evaluated further for financial help.
- 2. Assistors can also send the case on an encrypted account review spreadsheet to: Assistor.Cases@health.ny.gov.

AUTO-ENROLLMENT, CONTINUED



https://info.nystateofhealth.ny.gov/arpavideo

Select the "Plans" tab from the Account Dashboard. Click the "Change APTC Amount" button under "Submitted Enrollment" On the Plan Selection Introduction Page, click "Next" On the "Plan Selection Dashboard" click the "Review Plan Selections" button Jo Bernat -Advanced Premium Tax Credit Up to \$144.40/Month or \$1732.80/Year may be applied to qualifying plan purchases. **If your employer helps you pay for health coverage through the Marketplace, you should subtract the amount you get from your employer from your tax credits. Learn more: https://HealthCare.gov/help/qsehra To change the amount of APTC applied, check and edit the box at the bottom of the page, and click the "Confirm Plan Selections" button \$100.28 Receive confirmation of the change

AUTO-ENROLLMENT AUTO-ENROLLMENT



Action Required: Consumer must select and enroll in a plan.

This could happen because:

- The consumer became newly eligible for a QHP.
- The consumer's program eligibility changed, and the current plan does not offer a plan in the new program.
- The consumer's current plan will no longer be offered in NY State of Health for the upcoming year.

AUTOMATIC RENEWALS WITHOUT AUTO-ENROLLMENT, CONTINUED





Contact us for questions or to find in-person help:

(1-855-355-5777 (TTY: 1-800-662-1220)



nystate of health.ny.gov

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Jo Bernat 1 Main Street City, NY 00000-0000

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All decisions described in this notice are based on the information in the application you submitted on October 3, 2024.

> October 15, 2024 Account ID: AC0000000000

Stay Covered! Complete the Renewal for Health Coverage Today!

It's time for you and/or members of your household to renew your health insurance coverage through NY State of Health, The Official Health Plan Marketplace. This letter contains important information about renewing your health insurance coverage.

It is important that you take the steps for each person listed in this notice. If you miss the deadline to pick a new health plan, you are at risk of not having health insurance coverage for the upcoming year.

Log in at www.nystateofhealth.ny.gov to make any changes.

It is renewal time for the following individuals and ACTION IS REQUIRED:

Jo Bernat

Marketplace ID: HX0000000001

CHANGE IN ELIGIBILITY:

You qualify for a premium tax credit to help pay for your health insurance coverage, effective January 01, 2025. Your tax credit amount for 2025 is \$719.00 per month.

ACTION REQUIRED:

Please choose a health plan between November 16, 2024 and December 15, 2024 for the next coverage year. Your coverage will not begin until you choose a plan.

To pick a health plan, see the section of this notice, "How and When to Make Changes to Your Account or Coverage."

MANUAL RENEWALS



- Consumers need to be manually renewed when NY State of Health is unable to automatically renew them based on data sources.
- Consumers due to renew for January coverage MUST update information on or before 12/15/2024 in order to remain enrolled for 1/1/2025.
- Consumers who do not update their information may have a gap in their QHP coverage.
 - MA/CHPlus/EP-eligible consumers may still complete a late renewal after 12/15/2024.

MANUAL RENEWALS, CONTINUED



Contact us for questions or to find in-person help:

() 1

1-855-355-5777 (TTY: 1-800-662-1220)



nystate of health.ny.gov



Jo Bernat 1 Main Street City, NY 00000-0000

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October 15, 2024 Account ID: AC0000000000

Stay Covered! Complete the Renewal for Health Coverage Today!

It's time for you and/or members of your household to renew your health insurance coverage through NY State of Health, The Official Health Plan Marketplace. This letter contains important information about renewing your health insurance coverage.

It is important that you update your NY State of Health application **between November 16, 2024** and December 15, 2024. Log in at www.nystateofhealth.ny.gov to complete your renewal before your current health insurance coverage ends.

ACTION IS REQUIRED or the following individuals to renew their health coverage.

JO Bernat

Marketplace ID: HX0000000001

ACTION REQUIRED:

Based on the information from federal and state sources, we cannot make a decision about whether you qualify for financial help paying for your health insurance coverage.

Please update the information on your NY State of Health account by December 15, 2024 so we can make an appropriate decision.

NOTE: If you miss this deadline, you are at risk of losing your health insurance coverage and if applicable, any financial assistance.

Be aware that you may be able to buy a health plan at NY State of Health at full cost. See the section of this notice titled "How and When to Make Changes to Your Account or Coverage."

ACTION REQUIRED:

Based on the information from federal and state sources, we cannot make a decision about whether you qualify for financial help paying for your health insurance coverage.

Please update the information on your NY State of Health account **by December 15, 2024** so we can make an appropriate decision.

NOTE: If you miss this deadline, you are at risk of losing your health insurance coverage and if applicable, any financial assistance.



Individual Eligibility for Those who are Due to Renew

INDIVIDUAL RENEWAL PROCESSING



NY State of Health has made updates to the renewal process in order to automatically renew as many household members as possible.

Before:

If any household member needed to be manually renewed, then the whole household would be required to manually renew.

· Coverage for the household would not be available until the manual renewal was completed.

Now:

If any household member needs to be manually renewed, NY State of Health will automatically renew the remaining household members (who can be automatically renewed).

INDIVIDUAL RENEWAL PROCESSING



If any household member needs to be manually renewed, NY State of Health will automatically renew the remaining household members (who can be automatically renewed).

- Accounts that have some household members able to be automatically renewed (with or without auto-enrollment)
 and others that need to be manually renewed will be labeled as "Admin & Manual" renewals on the Assistor
 Dashboard.
 - Doing this will increase the number of household members who can be automatically renewed and prevent loss of coverage or gaps in coverage, while still requiring action from household members, as needed.
 - A renewal notice will be sent that gives the renewed household member their updated eligibility, and it will also specify who in the household still needs to take action, and by when.
 - Please note: In an account where one (1) or more household members are able to be automatically renewed without auto-enrollment and another household member(s) needs to be manually renewed, the household member(s) who need to pick a plan will not be able to do so, until the manual renewal has been completed.



Contact us for questions or to find in-person help:

1-855-355-5777 (TTY: 1-800-662-1220)



nystateofhealth.ny.gov

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Mango Banana 1 Street City, State, 00000

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All decisions described in this notice are based on information about you from state and federal data sources obtained as of August 07, 2024.

December 08, 2024

Account ID: AC00000000000

Stay Covered!

Complete the Renewal for Health Coverage Today!

It's time for you and/or members of your household to renew your health insurance coverage through NY State of Health, The Official Health Plan Marketplace. This letter contains important information about renewing your health insurance coverage.

It is important that you take the steps for each person listed in this notice. To renew coverage for members you must update your NY State of Health application between November 16, 2024 and December 15, 2024. You may lose your coverage if you do not finish your renewal ON TIME. If you miss the deadline to pick a new health plan, you are at risk of not having health insurance coverage for the upcoming year.

Log in at www.nystateofhealth.ny.gov to complete your renewal before your current health insurance coverage ends.

ACTION IS REQUIRED for the following individuals to renew their health coverage:

Mango Banana Lime Banana (cVXXXXXX) Marketplace ID: HXXXXXXXXXX01 Marketplace ID: HXXXXXXXXXX02

ACTION REQUIRED:

Based on the information from federal and state sources, we cannot make a decision about whether you qualify for health insurance coverage.

Please update the information on your NY State of Health account by December 15, 2024 so we can make an appropriate decision.

NOTE: If you miss this deadline, you are at risk of losing your health insurance coverage.

See the section of this notice titled "How and When to Make Changes to Your Account or Coverage."

Apple Banana (EZxxxxxZ)	Marketplace ID: HX9990001111				
CHANGE IN ELIGIBILITY:	You qualify for Essential Plan 2, at \$0.00 per month, effective January 1, 2025.				
	The Essential Plan will cover all essential health benefits with low co-pays for certain services and no annual deductible.				
ACTION REQUIRED:	Please choose a health plan between November 16, 2024 and December 15, 2024 for the next coverage year. Your coverage will not begin until you choose a plan.				
	You must update the information in your application for members in your household prior to picking a plan.				
	To pick a health plan, see the section of this notice, "How and When to Make Changes to Your Account or Coverage".				
It is NOT time for the following individuals to renew:					
Joey Chris Banana (EZXXXX3Z)	Marketplace ID: HX9990001112				
NO CHANGE IN ELIGIBILITY:	You qualify for Medicaid, effective November 1, 2024.				
INSURANCE DETAILS:	Insurance Company: Fidelis Care Program: Medicaid through NY State of Health.				
DOCUMENTS ARE REQUIRED:	More information is still needed to determine your eligibility.				
DOCOMENTS ARE REQUIRED:	Provide proof of Citizenship Status by January 1, 2025.				
	Provide proof of Social Security Number by January 1, 2025.				
	Please Note: If you miss the due date(s),NY State of health you may lose your health insurance or receive less help paying for your health coverage.				

How We Made Our Decision

Mango Banana Lime Banana (cVXXXXXX) Marketplace ID: HXXXXXXXXXX01 Marketplace ID: HXXXXXXXXXX02

We need more information to complete your renewal for health insurance through NY State of Health. Log in in at www.nystateofhealth.ny.gov or call us to get started to update the information in your account.

The last day to renew your health insurance coverage is December 15, 2024. You may lose health insurance coverage for you or your household members if you do not complete your renewal.

Joey Chris Banana (ExxxxxZ)

Marketplace ID: HX9990001112

You qualify for Medicaid because the household income listed in your application submitted on July 16, 2023 is between \$0 and \$20,783.00.

This is the allowable income range for Medicaid based on your household size. The household income listed in your application is \$0.00. We used this information to renew your coverage for the upcoming year. Come back and update your account if this is no longer your household income.

We need more information to confirm your eligibility for Medicaid.

If you miss the due date to provide additional information, you may lose your health insurance or receive less help paying for your health coverage.

RULES ON APTC



Consumers who are found ineligible for tax credits due to missing information about their federal taxes should refer to their notice for more information on what to do next to see if they may qualify for APTC. Missing federal tax information could be for one of the following reasons:

- The consumer reported that they do not plan to file a federal tax return.
- The consumer is married and reported that they will file taxes separately from their spouse.
- Advance payments of the premium tax credit were made to their health insurance company to reduce their premium costs within the past 2 years. However, NY State of Health cannot confirm if a federal tax return was filed for those years.

Under federal regulation, consumers may be found ineligible for tax credits in 2025 if they have two consecutive years of failing to file or reconcile their federal tax return.



NY State of Health Open Enrollment and Renewal Email Messages





IT'S TIME TO RENEW YOUR HEALTH INSURANCE



Es momento de renovar su seguro médico

A "Today's the Day to Renew" email will be sent on November 16:

- To QHP consumers who need to manually renew their coverage starting January 1, 2025.
- To inform consumers that the renewal period has started and to encourage them to act between November 16 and December 15, 2024.
- Will be sent in both English and Spanish.





TAKE THE NEXT STEP - ENROLL TODAY



Dé el siguiente paso: inscríbase hoy

A "Reminder to Pick a Plan" email message will be sent throughout Open Enrollment beginning in mid-November:

- During Open Enrollment to new or renewing consumers who have a QHP determination for 2025 but have yet to pick a plan.
 - Renewing consumers who are receiving these emails have already received their renewal notice and have yet to enroll in a plan.
- Will be sent in both English and Spanish.





A "Reminder to Renew" email message will be sent in early December:

- To QHP consumers who need to manually renew for coverage starting January 1, 2025, but have yet to complete their renewal.
- Encourages consumers to review the renewal notice that they have already received and to take action by December 15, 2024.
- Will be sent in both English and Spanish.





DON'T MISS OUT ON 2025 COVERAGE



NO DEJE PASAR SU COBERTURA DE 2025

"Deadline Reminder" email messages will be sent in mid-December and mid-January:

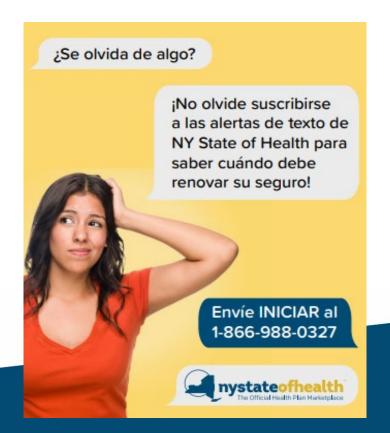
- To QHP consumers who need to manually renew for coverage starting January 1, 2025, but have yet to complete their renewal.
- Encourages consumers to take action by December 15 (in the mid-December message) and January 15 (in the mid-January message).
- Will be sent in both English and Spanish.

RENEWAL TEXT MESSAGES



Assistors should also encourage consumers to watch for text alerts so they can receive updates and enrollment reminders.





WHATSAPP MESSAGING



Assistors should be aware that NY State of Health has started using WhatsApp for messaging to consumers.

- WhatsApp is a free messenger app for smartphones and tablets that lets consumers make video, voice calls, and send messages through the app directly.
- WhatsApp uses Wi-Fi and doesn't require a cellular network.



WHATSAPP MESSAGING



Languages for WhatsApp and SMS:

- Arabic
- Bengali
- English
- French
- Greek
- Hindi
- Italian

- Japanese
- Korean
- Polish
- Russian
- Simplified Chinese
- Spanish
- Urdu
 - Note: Messages are <u>only</u> able to be sent in Urdu when the user opts in using the check box in their electronic account.



NY State of Health

NY State of Health: 请在 Test前续保。 如果您需要帮助, 请拨打 1-855-355-5777 (TTY: 1-800-662-1220)。我们可以您的首选 语言提供帮助。回复"停止"可取消。可 能会收取短信和数据费用。

NY State of Health: продлите свою медицинскую страховку до Test. Если вам нужна помощь, позвоните по телефону 1-855-355-5777 (TTY 1-800-662-1220). Помощь предоставляется на предпочитаемом вами языке. Для отказа от рассылки напишите СТОП в ответном сообщении. Могут применяться тарифы на передачу сообщений и данных.

NY State of Health: Test까지 건강 보험을 갱신하십시오. 도움이 필요하시면 1-855-355-5777(TTY 1-800-662-1220) 로 전화해 주십시오. 선호하는 언어로 지원받으 실 수 있습니다. 취소하려면 중지를 적어 답해 주십시오. 메시지 및 데이터 요금이 부과될 수 있습니다.

NY State of Health: جدد بوليصة تأمينك يرجى الاتصال بـ .Test الصحي بحلول 7-555-355-1-255 (خدمة الهاتف النصى: 1-800-662-1220) إذا احتجت للمساعدة. الدعم متاح باللغة التي تفضلها. يرجى الرد بـ "توقف" للإلغاء. قد تُطبّق الرسوم الخاصة بالرسائل النصية والبيانات



WHATSAPP MESSAGING



Additional Items to Remember

- NY State of Health decided to use WhatsApp messaging to increase communication channels with consumers.
- The goal is to increase communications with consumers in a more accessible manner to try to avoid any lapses or gaps in coverage.
- Please let consumers know that NY State of Health can now send messages via WhatsApp and encourage them to download the App if they would like to begin receiving messages through this channel!



NY State of Health Communication Tools

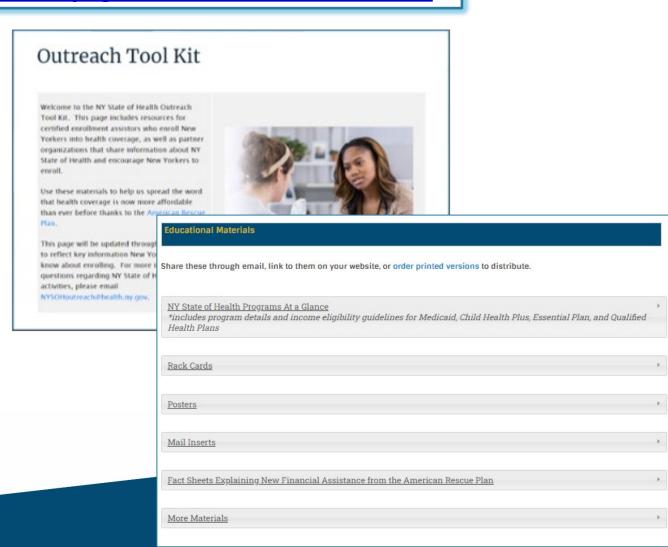
OUTREACH TOOL KIT



https://info.nystateofhealth.ny.gov/OutreachToolKit

The Outreach Tool Kit features:

- NY State of Health Educational Materials
 - Materials You Can Distribute
 - Rack Cards, Posters, Fact Sheets, At-a-Glance Cards
 - Ordering, Printing, Co-Branding
 - Enrollment Tools to Help Consumers
 - How-to Videos, Plan Comparisons, Cost Estimator, Provider Look-Up Tool



OUTREACH TOOL KIT, CONTINUED



https://info.nystateofhealth.ny.gov/OutreachToolKit

- NY State of Health Promotional Resources
 - Social Media Posts with Images
 - Advertising Campaign Videos
 - Email Messages
- Stay Informed with the Latest News
 - Important Reminders
 - Press Releases
 - Enrollment Data

Pre-written posts with photos Posts for Certified Enrollment Assistors to use Posts for Outreach Partners to use Tips for Social Media Recommended Times to Post Helpful Tools & Resources Follow NY State of Health and share what we post: Sample Language for Email and Websites Email message you can send

. Want to create something new to promote NY State of Health? Instructions on how to co-brand m

· Short informative description you can add to your website

Videos

Share these videos on social media, embed them on your website, or play them in your waiting room.

- Ad Campaign Videos
 - English
 - Spanish
 - Mandarin
- An instructional video that explains how enrollees can update their Advance Premium Tax Credit amount

Latest News

NY State of Health News:

- Press Releases
- Enrollment Data
- NY State of Health webpage with American Rescue Plan information
- NY State of Health webpage about Important Changes Coming to New York Medicaid, Child Health Plus and the Essential Plan

Coronavirus (COVID-19) Information:

- Coronavirus (COVID-19) Pandemic Enrollment Resources
- NYS Department of Health Coronavirus (COVID-19) Updates

Plan Selection Resources

Share these on your website, by email, or on social media.

- . Premium Estimator Tool: compare plans and estimate financial help
- Contact information for Enrollment Assistors, who provide free enrollment help:
 - · Find a Navigator here
 - . Find other Enrollment Assistors here
- . How to Find Doctors or Hospitals Working with Health Plans
- Dental Plan Comparison Tool
- . Videos on How to Compare Plans
- Training Webinars for Consumers

POLL QUESTION #2



Mx. Smith has been in the same QHP with APTC for the past three years. They state that they received a notice saying they were automatically renewed, but that action is required, and they need to pick a plan. Mx. Smith contacts you and asks you to enroll them in the same plan they have had for the past three years.

What could you say that might be true?

- A. We need to review your notice more carefully. If you are newly eligible for a full-pay QHP, then we need to review plan product options, services and costs. These will be different in a full-pay QHP.
- B. We need to review your notice more carefully. You may have become eligible for a different program, and your current plan might not be available. Let's look at your options.
- C. Your same QHP product may not be available anymore. Let's review your account and look at your options for 2025.
- D. All the above reasons could be correct.



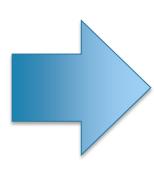
Using the Assistor Dashboard

How can an
Assistor tell if a
consumer on their
Dashboard needs
to be renewed?

MY PROFILE TAB AND RENEWAL REMINDER NOTICES

Account Preferences

- Hide Profile from All Searches
- ☐ Hide Profile from Public Search
- ✓ Send me Client Renewal Reminder Notice



If you have questions about this notice, please contact: <u>Assistor.Cases@health.ny.gov</u>.



Erin Test 1 Main Street Albany NY 12205

> November 16, 2024 Account ID: AC00000000000

Dear Erin Test,

Thank you for enrolling individual clients on NY State of Health. You are receiving this notice to alert you of individuals, on your dashboard, that are due to renew their health coverage. Note that most individuals must update their application by the 15th of month to renew their coverage. Included in this notice, please find a listing of Account IDs for households with one or more members due to renew within the next 45 days through NY State of Health.

The information included in this notice is believed to be accurate and is for general information purposes only. While every effort has been made to ensure an accurate report, NY State of Health provides no guarantee regarding the accuracy of this report, therefore accepts no liability what so ever for any information subsequently proved incorrect.

If you have questions or need assistance, please contact NY State of Health at 1-855-355-5777 or https://www.nystateofhealth.ny.gov. There is no charge for these services.

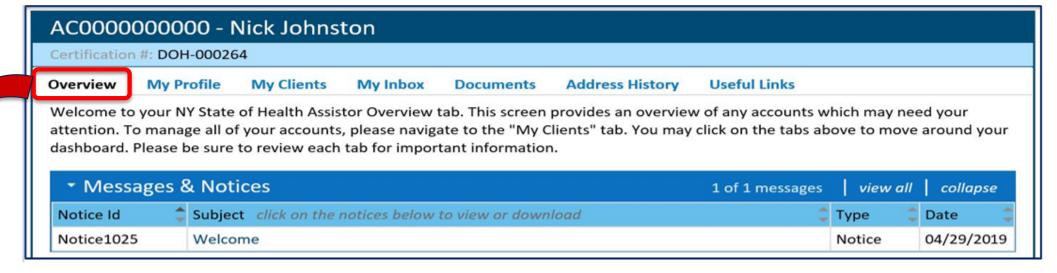
If you need this information in a language other than English, or you need assistance reading this letter we can help you. Call 1-855-355-5777 (TTY - English: 1-800-662-1220; TTY - Spanish: 1-877-662-4886).

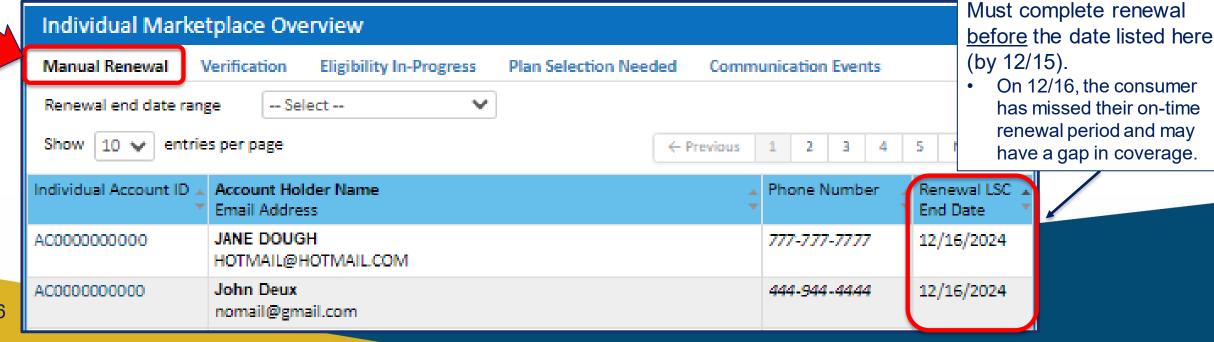
Sincerely, NY State of Health

Account ID	Coverage End Date	Renewal Status
AC0000000000	12/31/2024	Manual
AC000000001	12/31/2024	Admin & Manual
AC0000000002	12/31/2024	Admin & Manual
AC0000000003	12/31/2024	Admin
AC0000000004	12/31/2024	Admin
		7

OVERVIEW AND MANUAL RENEWAL TAB







RENEWAL REMINDERS

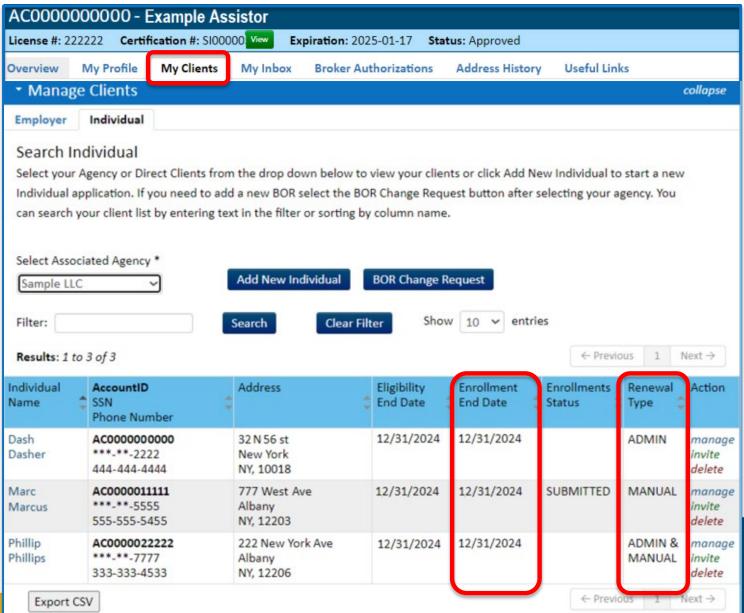


Items for Assistors to remember:

- Only consumers that you are currently authorized to help (consumers on your Dashboard) who are due to renew, will appear on these lists.
- Assistors should check all tabs of the "Individual Marketplace Overview" section
 of their Dashboard regularly, or even daily, to take action on the accounts as they
 appear.
- Once the renewal has been completed, the consumer's account will disappear from the "Manual Renewal" tab of your Dashboard but will continue to be accessible on the "My Clients" tab while you are authorized to assist them.
- Don't assume: Anytime an Assistor is helping a consumer update or renew their application they should review every single question that has been previously answered and make sure the consumer's previously listed answer hasn't changed. If it has, they must update the account with the new information.

MY CLIENTS TAB AND ENROLLMENT END DATE





POLL QUESTION #3



Mark, who has been enrolled in a QHP for 4 years, contacts his Assistor in December stating that his QHP premium bill for January was much higher than in past years. He does not remember completing a renewal. What should the Assistor do?

- A. Tell Mark to contact his health plan directly about the premium charge.
- B. Tell Mark that he should pay the higher premium
- C. Login and check Mark's account to
- D. Ask Mark if his income increased.

The Assistor should login to their Dashboard and look at Mark's account to see if a renewal was completed for him.

- If he was automatically renewed with auto enrollment, his APTC amount could have changed from what it was last year.
- The Assistor should review the details of his application to make sure it is correct.
- If adjustments to his income, household size or any other items are needed the Assistor should help him update the account ASAP.
- The Assistor can also help him look at different QHP products at different metal levels to make sure he enrolls in a plan which meets his needs and works for him.



QUESTIONS?



EMAIL CONTACTS



All Assistors

- If you have general Assistor training questions, or questions about this specific training, please send them to: Eligibility.Training.Support@health.ny.gov.
- If you have a case-specific question that you have already discussed with your supervisor or program manager, the issue should be submitted on an encrypted Account Review Spreadsheet to: <u>Assistor.Cases@health.ny.gov</u>.
- If you need help with your Assistor Account or Oversight Manager Account, or if your agency needs to report staff changes, please send an email to: Assistor.Admin@health.ny.gov.

Navigators Only

- When Navigator Agencies are submitting contract documents (vouchers, annual packet documents, consumer story submissions, site schedules, etc.) and related questions to the New York State Department of Health, please send them to: Navigator.Admin@health.ny.gov.
 - CC your Navigator Contract Manager
- When Navigator Agencies are submitting media approval requests, and educational and marketing material approval requests to the New York State Department of Health, please send them to: Navigator.Media@health.ny.gov.
 - CC your Navigator Contract Manager

RECERTIFICATION PROCESS



- All Assistors and Assistor Oversight Managers who are registered or completed the online Assistor Certification Training by <u>10/31/2024</u> will be required to view the recertification webinars. The material included in each webinar is a supplement to what was provided during the in-person and online courses.
 - https://info.nystateofhealth.ny.gov/SpringTraining.
- Keep track of the date you watched the live webinar or the video for each of this year's recertification webinars.
- Provide your dates to your supervisor so they can complete the Recertification Report.

THANK YOU FOR JOINING US!



- Please complete the survey:
 - Evaluation of Webinar: 2025 Open Enrollment and Renewals
- As always, watch for the video and materials to be posted to: http://info.nystateofhealth.ny.gov/SpringTraining.

Next Recertification Training:

Health Equity Training for NY State of Health Assistors

Date: October 16, 2024

Time: 10:00 – 11:30am

