



**COVERED
CALIFORNIA**

Enroller Portal Plan-Based Enroller

User Guide



Contents

Overview.....	3
New Enroller User.....	3
Plan-Based Enroller Application	6
Background Clearance.....	9
Enroller Certification Training	13
Enroller User Home Page.....	19
Add Counselor Information	3
Need Assistance	27

Overview

The Enroller Portal Plan-Based Enroller User Guide outlines all features and functions available to Plan-Based Entity Enrollers in the Enroller Portal. This document details the functions of an Enroller user, how to complete the Enroller Portal profile, background clearance, and training requirements.

New Enroller User

This section provides instructions for new enroller users. As an Enroller, please complete the Counselor application process.

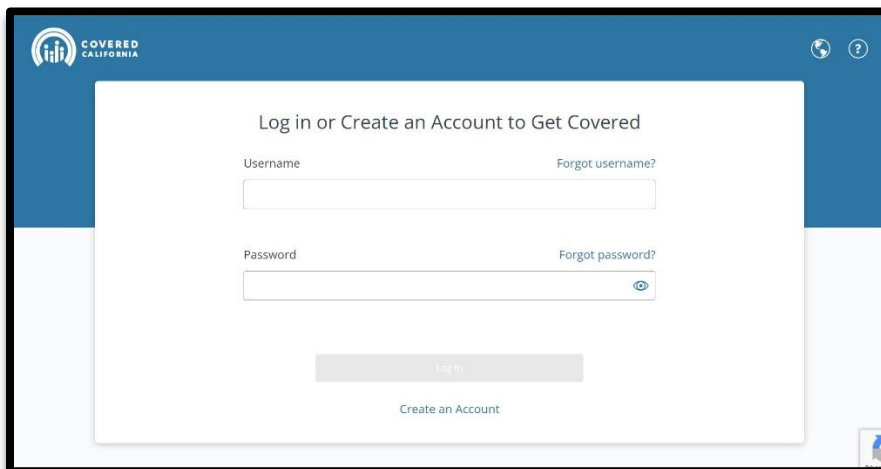
The Authorized Contact (AC) or Primary Contact (PC) listed on the entity roster must create the Enroller user account by completing the steps below.

Note. The PC typically creates the account for the Enroller(s).

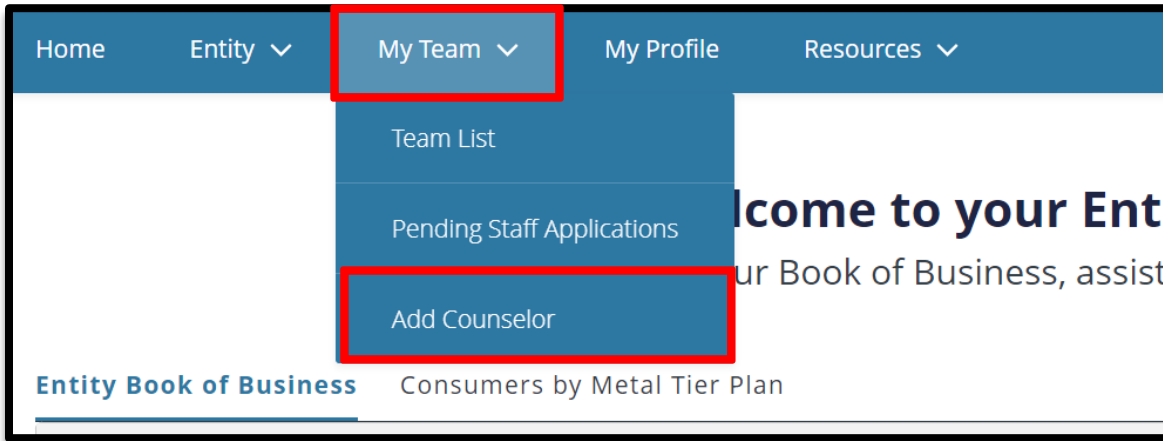
Add Counselor Information (Authorized or Primary Contact Steps)

The Authorized or Primary Contact is responsible for initiating the process to add a new Enroller on behalf of the Entity. The screenshot listed below will assist the AC or PC on how to initiate a Counselor application in the Enroller Portal. Once the information is completed, the AC or PC will submit the information on behalf of the Enroller.

1. Log in to the [Enroller Portal](#). Select **Log In**.



2. From the Entity Home Page. Select **My Team** tab and click on the **Add Counselor** option to continue to the Add Counselor page.



3. The *Add Counselor Information* page displays. Add Counselor details for the newly added Enroller. Select **Next** to continue.

The screenshot shows the 'Add Counselor Information' form. The form is titled 'Welcome to Covered California' and includes a sub-header 'Become a Covered California Certified Counselor and help Californians enroll into quality healthcare coverage!'. The form is divided into several sections: 'Add Counselor Information', 'Personal Mailing Address', and 'Languages'. The 'Add Counselor Information' section includes fields for Counselor First Name, Last Name, Email, Confirm Email, Preferred Method of Communication, Enroller CDI License Status, Enroller CDI License Number, CDI Expiration Date, Select Primary Enroller Location, Show Primary Enroller Location Address in Field Local Help, and Select Other Sites Served. The 'Personal Mailing Address' section includes a checkbox for 'Personal Mailing Address Same as Primary Location Mailing Address' and fields for Address Line 1, Address Line 2, City, State, and ZIP Code. The 'Languages' section includes two dropdown menus for 'Spoken Languages' and 'Written Languages'. The 'Next' button is highlighted with a red box.

Important: Covered California will verify the status of the Enroller's agent license with the California Department of Insurance (CDI) to ensure it is Active and in good standing as outlined under Insurance Code Section 1626 to transact in Accident and Health or Sickness insurance. If the Enroller does not have an Active agent license, the enroller must complete the Criminal Record Disclosure (located in the Enroller Portal) and Live Scan fingerprinting process.

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4. Review the Counselor Application to ensure accuracy. Select **Save and Next** to continue.

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Review Counselor Application Form

To review your application before moving forward, click **Review Counselor Application**.

If you are ready to move forward to add the Counselor's public photo or any other documentation, please click **Save and Next**.

[Review Counselor Application](#) [Save and Next](#)

5. The *Public Photo and Documentation Upload* page will display. No action is required for Plan-Based Enrollers as badge photos are not a requirement for this program. Select **Next**.

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Public Photo and Documentation Upload
Counselors are only required to upload their Enroller Photo.

Primary Contact or Authorized Contacts must upload the following before the Entry can be approved:

1. Proof of Business Status
2. Proof of General Liability Insurance
3. Proof of Worker's Compensation Insurance
4. Proof of Valid Business License
5. Conflict of Interest Prevention Plan

If you are not prepared to provide all required documents at this time, you may upload your required documentation at any time after initial submission.

Accepted Formats: JPG, JPEG, GIF, PNG, BMP, PDF. Maximum File Size: 5 MB per file

Document Category
Enroller Photo

[Upload Files](#) Or [drop files](#)

[Next](#)

6. The *Counselor Application Submission Confirmation* page will display. Select the **Finish** to complete the submission. The application status will now be *Pending Review* with Covered California.

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Counselor Application Submission Confirmation

HIPC

You have successfully submitted the Counselor Application for Rody Balboa.

The application is being reviewed. Rody Balboa will receive two emails with an access code and URL, at michelle.owens@calheers.ca.gov.

The emails will contain information on how to view and edit their personal details.

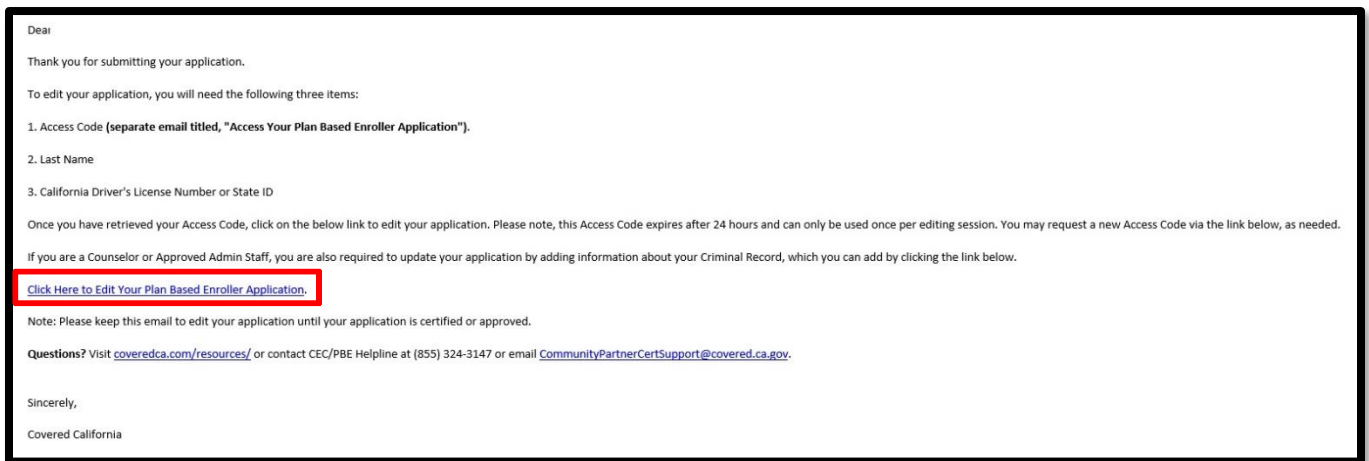
[Finish](#)



Plan-Based Enroller Application Steps

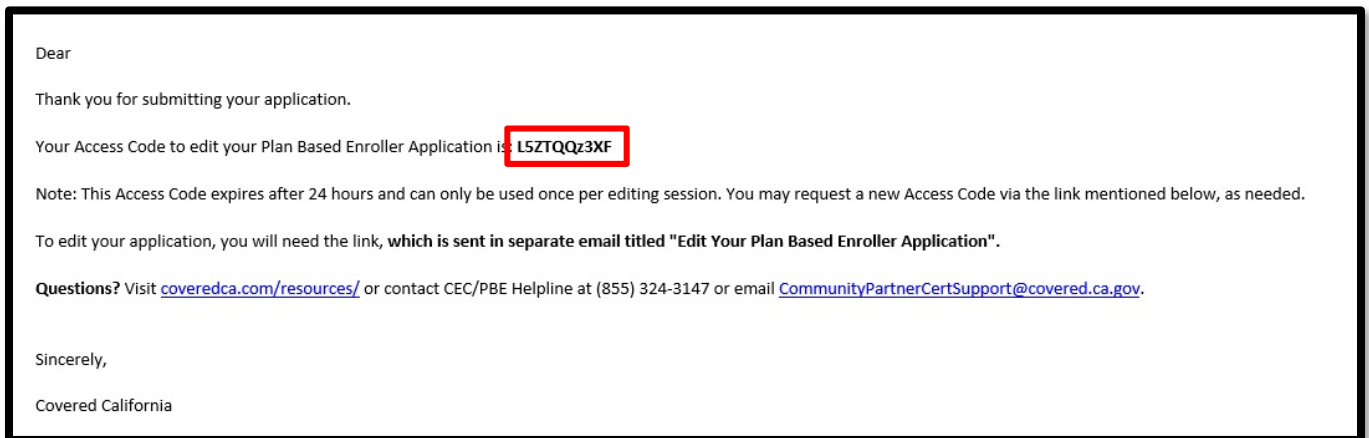
The PBE Enroller will receive two emails from Covered California with the following subject lines: *Edit Your Plan Based Enroller Application* email and *Access Your Plan Based Enroller Application*.

1. The *Edit Your Plan Based Enroller Application* email will include a link to **Edit** the enrollment application and allow the Enroller to update and/or edit the application details entered by the AC or PC.



2. The *Access Your Plan Based Enroller Application* email includes an access code which is needed to gain access to *Edit Your Plan Based Enroller Application*.

Important: The Access Code is **valid for 24 hours only and for one-time use.**



Note: Enrollers can request a new access code by following the instructions at the bottom of the *Access Your Plan Based Enroller Application* email or you can send an email to PBECert@covered.ca.gov.



3. Select the **Yes, I have an Access Code** option and fill out the **Access Code, Last Name, and CA State ID Number** fields.
4. To proceed to the next page, select the **I'm not a robot** checkbox.
5. Select **Next** to continue.

6. The *Counselor Information* page will display. The Enroller will need to verify the information and/or edit any fields, before selecting **Next** to continue.



Note: If any of the greyed-out information needs to be updated, send an email to PBECert@covered.ca.gov to request the change.

7. The *Review Counselor Application Form* page will display. Click **Save and Next** button to continue to the *Public Photo and Documentation Upload* page.

Review Counselor Application Form

To review your application before moving forward, please click **Review Counselor Application**.

Click **Save and Next** to continue your application on the next pages, where you will be asked to:

1. Upload your Enroller Photo
2. Complete your Criminal Record Disclosure form
3. Complete screening questions (Plan Based Enrollers only)

[Review Counselor Application](#) [Save and Next](#)

8. No action is required on the *Public Photo and Documentation Upload* page because Plan-Based Enrollers are not required to maintain a badge photo. Click **Next**.

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Public Photo and Documentation Upload

Accepted Formats: JPG, JPEG, .GIF, .PNG, .BMP, .PDF. Maximum File Size: 5 MB per file

* Document Category

None

You must select the document type for each file uploaded. If you have no files to upload, please select "None."

[Next](#)

9. The Enroller is required to read the *Entity Qualifying Attestations* and acknowledge the organization applying qualifies to participate in the Program as an Entity and that all submitted information is accurate. The Enroller will place a check mark in the box. Select **Submit** to continue.



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Entity Qualifying Attestations

Please respond to the following screening attestations pertaining to the Entity applying for the program.

When you are done reading the qualifying attestations below, please agree to the acknowledgement statement at the bottom of this page and click **Next**.

- Attestation 1** I certify the organization applying is not a health insurance insurer or stop loss issuer, a subsidiary of a health insurance issuer or a stop loss issuer, or an association that includes members of, or lobbies on behalf of, the insurance industry.
- Attestation 2** I certify the organization applying is not receiving any consideration directly or indirectly from a health insurance insurer or stop loss issuer for enrolling individuals and employees into qualified or non-qualified health coverage.
- Attestation 3** I certify the organization applying does not employ any individuals who receive any consideration for enrolling qualified individuals and employees into a qualified or non-qualified health coverage.
- Attestation 4** I certify the organization applying and all of its employees will comply with the conflict of interest standards located at the California Code of Regulations Title 10, Chapter 12, Section 6866.
- Attestation 5** I certify that the entity will serve families of mixed immigration status and individuals with disabilities.

By clicking submit, acknowledgement is made that the organization applying qualifies to participate in the Program as an Entity and that all submitted information is true, correct and accurate.

Previous

Submit

Note: To agree with the attestation statements, select the *By Clicking submit, acknowledgement is made that the organization applying qualifies to participate in the Program as an Entity and that all submitted information is true, correct, and accurate* checkbox.

Background Clearance Steps

The Background Clearance process is comprised of 2 parts: **Criminal Record Disclosure and Live Scan** are completed only when an Enroller *does not have* an Active Insurance Agent License with the Department of Insurance.

Note: If the Enroller has an Active Insurance Agent License with the Department of Insurance the background clearance step is **NOT** required.

1. The Criminal Record Disclosure Form page displays. The Enroller must complete the *Criminal Record Disclosure Form* by providing their social security number and completing **Section B** of the *Criminal History Disclosure* selecting the appropriate dropdown answer for the six criminal history disclosures questions. Select **Next** to continue.



Welcome to Covered California!

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Criminal Record Disclosure Form

A. Personal Information

Counselor Name
Megan Dukerhart

Social Security Number

Instructions and Background Clearance Requirements

i)

In order to become a Certified Enrollment Counselor (CEC), the law requires that you complete a background check (Government Code section 1043) and fill out this form (California Code of Regulations, Title 10 CCR § 6657). Covered California (CC) submits your fingerprints to the Department of Justice (DOJ) to obtain a criminal history report. (California Code of Regulations, Title 10 CCR § 6658). The DOJ criminal history report is compared to your Criminal Record Disclosure (CRD) to identify discrepancies, inconsistencies, or omissions. CC will evaluate the criminal history report, including any information you provide in and with the CRD to make a determination of your eligibility to provide consumer assistance. Failure to complete the CRD in its entirety may delay the certification process and candidates will be required to resubmit prior to completing the certification background clearance.

CC treats all criminal history information as private and confidential. Only CC employees authorized to determine eligibility for consumer assistance are allowed access. Your CRD is retained and revealed in cases of legal action. The CRD is available for your review, but copies are not provided to you.

IMPORTANT! CC will be notified by the DOJ if there is any new information or activity on your record, including all subsequent arrests and convictions, per Government Code Section 1043 and Penal Code 11105.2 (a). CC will make a new determination of your eligibility to provide consumer assistance based upon any updates to your record. CECs shall report to CC any subsequent arrests for which they have been released on bail or personal recognizance, criminal convictions, and administrative actions taken by any other agency within 30 calendar days of the date of each occurrence.

A conviction is any plea of guilty or nolo contendere (no contest) or a verdict of guilty for any crime. Criminal convictions from another State or Federal Court are considered the same as criminal convictions in California. You do not need to list any conviction that has been set aside, dismissed, or sealed, or those which are exempted from disclosure.

You **MUST** disclose convictions and administrative actions even if:

- It happened a long time ago;
- It was only a misdemeanor;
- You didn't have to go to court (your attorney went for you);
- You did not go to jail or prison or the sentence was only a fine or probation;
- You received a certificate of rehabilitation.

The following Convictions do NOT need to be listed on your CRD:

- Any conviction set aside, judicially dismissed, or ordered sealed pursuant to law, including, but not limited to, Sections 1203.4, 1203.4a, 1203.45 AND 1210.1 of the Penal Code.
- Any conviction older than two years from the date of conviction for minor misdemeanor marijuana possession and use offenses, or possession of controlled substances paraphernalia pursuant to Labor Code § 432.8.
- Minor traffic violations (e.g., unsafe driving, running a stop light, seat belt, or parking).
- Offense settled in the juvenile court or under the welfare youth offender law, or if you were discharged from the control of the Youthful Offender Parole Board under the Welfare and Institutions Code §§ 1179 and 1772.
- Conviction which resulted in participation in or completion of a diversion program.
- Conviction which was deleted under the Health and Safety Code § 11361.5.
- Pardon granted under Penal Code § 4852.1c.

ii)

If you need more space or would like to provide additional clarifying comments, including any evidence of rehabilitation, please attach and upload separate sheet(s) that includes your signature, name and date with your information (after saving this record). While additional information is optional, providing details regarding any reportable offenses on your record, and evidence of rehabilitation, allow us to individually assess your record and is strongly recommended. CC will consider any of the following written evidence of rehabilitation or other mitigating factors:

- A letter in your own words explaining any disqualifying offense, your rehabilitation or any mitigating factors;
- Evidence that you received a pardon for any criminal convictions that you believe may still be on your record either because the conviction(s) was dismissed/expunged under Penal Code Section 1203.4 or 1203.4a, or the conviction was overturned;
- Proof you have complied with any terms of parole, probation, restitution or any other sanctions lawfully imposed against you due to the criminal conviction referenced in this application;
- Proof you have performed the same or similar type of work, after the criminal conviction(s) referenced in your application, with the same or a different employer, with no incidents of criminal conduct on the job;
- Proof that you have no other history of discipline for the same or a similar type of conduct referenced in your application;
- Proof of participation in education, training, treatment or rehabilitation programs;
- References from employers, probation officers, parole officers, clergy, etc. who can attest to your character and successful record of job performance;
- Evidence that any pending charges did not result in a criminal conviction; and/or
- Any additional information relevant to demonstrating rehabilitation or other mitigating factors.

B. Criminal History Disclosure

Please answer all criminal history questions

Question 1:

Other than those excluded up above, have you ever been convicted of a misdemeanor?

* Question 1 Response

--None--

Question 2:

Other than those excluded up above, have you ever been convicted of a felony?

* Question 2 Response

--None--

Question 3:

Do you currently have criminal charges pending against you?

* Question 3 Response

--None--

Question 4:

Are you currently out on bail or on your own recognizance for any current arrest?

* Question 4 Response

--None--

Question 5:

Are you currently under any formal or informal supervision, such as probation or parole, for a conviction of any state or federal violation?

* Question 5 Response

--None--

Question 6:

Have you ever had an Administrative Action against you from another State Agency?

* Question 6 Response

--None--

If you answered YES to any of the above questions, give details indicating the date and location of each crime or administrative action and, if desired, the nature and circumstances of the offense. If you need additional space or have more offenses or administrative actions to declare, you must use additional sheets and upload them to this record after saving. Once you are ready to submit the disclosure, click the Submit for Approval button.

Previous

Next



- The *Criminal Records Disclosure – Certification Signature* page will display. The Enroller must enter their full name and select **Yes** or **No** from the *Agree to Electronic Signature* dropdown. Review the information listed on the page. Select the **Next** button.

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Criminal Record Disclosure - Certification Signing
C. Certification - Read Carefully Before Signing
Read Carefully
I declare under penalty of perjury under the laws of the State of California that I have read and understand the information contained in this affidavit and my responses and accompanying attachments are true and correct. I understand that falsification, withholding of information or failure to answer all questions completely and accurately on the CRD may prevent me from being certified as a counselor by CC and/or result in decertification.

Full Name * Agree to electronic signature

Electronic Agreement
Each party agrees that the electronic signatures (whether digital or encrypted) of the parties included in this Agreement are intended to authenticate this writing and to have the same force and effect as manual signatures.
Electronic Signature means any electronic sound, symbol, or process attached to or logically associated with a record and executed and adopted by a party with the intent to sign such record pursuant to the California Uniform Electronic Transactions Act (Cal. Civ. Code § 1633.1 et seq.) as amended from time to time. By electronically signing this Agreement, Certified Enrollment Counselor agrees to comply with the applicable terms, conditions, and certifications set forth therein.

Privacy Statement
Pursuant to the Federal Privacy Act (P.L. 93-579) and the Information Practices Act of 1977 (Civil Code section 1798 et seq.), notice is given for the request of the Social Security Number (SSN) on this form. The California Department of Justice uses a person's SSN as an identifying number. The requested SSN is voluntary. Failure to provide the SSN may delay the processing of this form and the criminal record check.
Covered California will create a file concerning your criminal background check that will contain certain documents, including information that you provide. You have the right to access certain records containing your personal information maintained by the Department (Civil Code section 1798 et seq.).
NOTE: IMPORTANT INFORMATION: Under the California Public Records Act, Covered California may have to provide copies of some of the records in your file to members of the public who ask for them, including newspaper and television reporters. Covered California must also tell people who ask the name of a Certified Enrollment Entity that has a CEC with a criminal record exemption.

Questions?
If you have any questions regarding Certification Status or need further assistance, please email CommunityPartnerCertSupport@covered.ca.gov.
If you have any questions about this form or background status, please email BackgroundChecks@covered.ca.gov.

IMPORTANT NOTICES
APPLICANT FINGERPRINT NOTICE AND RECORDS CORRECTION
Your fingerprints will be used to check the criminal history records of the DOJ and FBI. You have the opportunity to complete or challenge the accuracy of the information contained in the DOJ and FBI identification records. The procedure for obtaining a change, correction, or updating an FBI identification record are set forth in Title 28, CFR, 16.34. To request a change, correction, or update to a DOJ record, you must request a record review with DOJ in accordance with the process outlined in PC Sections 11120-11127.

PRIVACY STATEMENT
Pursuant to the Federal Privacy Act (P.L. 93-579) and the Information Practices Act of 1977 (Civil Code section 1798 et seq.), notice is given for the request of the Social Security Number (SSN) on this form. The California Department of Justice uses a person's SSN as an identifying number. The requested SSN is voluntary. Failure to provide the SSN may delay the processing of this form and the criminal record check. Covered California will create a file concerning your criminal background check that will contain certain documents, including information that you provide. You have the right to access certain records containing your personal information maintained by the Department (Civil Code section 1798 et seq.).

PUBLIC RECORDS ACT
Under the California Public Records Act, Covered California may have to provide copies of some of the records in your file to members of the public who ask for them, including newspaper and television reporters.

Previous **Next**

- The Enroller must read the *Screening Questions for Plan-Based Enroller* and select **Yes** or **No** to acknowledge program qualifying questions. Select **Next** to continue.

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Screening Questions for Plan-Based Enroller
Please respond to the following Screening Questions.

I hereby certify that:

- I shall comply with the PBE Program requirements of Chapter 12, Article 9 and Section 6500(f) of Article 5.
- I am a natural person of not less than 18 years of age.
- The statements made in this application are true, correct and complete to the best of my knowledge and/or belief.
- I will adhere to any applicable State or Federal Laws and regulation.

* Certified Plan-Based Enroller Signature

* Certified Plan-Based Enroller Name * Date

Previous **Next**



4. The Enroller will receive confirmation the application was successfully updated. Select the **Finish** button to submit the application.

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Counselor Application Successfully Updated

Hello

You have successfully updated your Counselor application. Your application is being reviewed. You will receive additional communications from Covered California about your required next steps to the email provided:

For more information, visit www.coveredca.com/resources.

5. If applicable, the Enroller will receive a Live Scan form via DocuSign to complete the background clearance process. If you sign the DocuSign form, you do not need to upload the document as it will automatically be uploaded to the Certification application. If you print the form and sign it, you must upload the signed document to the Enroller Portal.

The Live Scan will have three additional Privacy Notices documents that you must read.

- Print two (2) copies of the pre-populated Live Scan forms to take with you to the Live Scan facility (Capital Live Scan) as they will need to keep the forms.
- Contact the Live Scan facility to schedule a fingerprinting appointment. For a list of locations, download or access the service locations using the following link:
https://www.applicantservices.com/CA-Social-Distancing/Live_Scan_Locations



DocuSign Envelope ID: 0B7ED54C-A57F-4CB9-B16D-476B3C92DC69

START

Covered California Request for Live Scan
Plan-Based Enroller Applicant Form

This form is only intended for the use of the individual listed below. Altering or sharing this document is prohibited. Please complete the document and ensure the information is valid and up-to-date (Print in CAPITAL LETTERS).

ORI (Code assigned by DOJ):	Authorized Applicant Type: Assister Cert 1043 GC
Contract Code (For use at Biometrics4allSAM locations Only): <i>N/A</i>	Type of License/Certification/Permit OR working Title: Plan-Based Enroller

Applicant Information

Name: _____ Suffix: _____
Alias: _____
Gender: Male Female Eye Color: _____
Date of Birth: _____ Hair Color: _____
Social Security Number: _____ Height: _____
California Driver's License: _____ Weight: _____

Home Address

Street Address: _____ City: _____
State: _____ Zip: _____


OCA

Mandalore _____
Name of the Certified Enrollment Entity _____

Live Scan Agency Name	Live Scan Id (LSID)	Date
Name of Operator	ATI Number	OATI (Resubmission Only)

Attestation Acknowledgement

All applicants must acknowledge they have received these Privacy Notices prior to being Live Scanned or Fingerprinted for hard cards, acknowledged by signature on this live scan form:

I have received and  included Privacy Notice, Privacy Act Statement, and Applicant's Privacy Rights.

Applicant Signature _____ Date _____

QUESTIONS?

Regarding the Live Scan process, locations or appointments call: 877-288-5519 (Monday through Saturday, 9:00 AM to 5:00 PM) or email at coveredca@capitalivescan.com
You may also visit the Web page at <http://capitalivescan.com/covered-ca>
Regarding Covered California Enrollment Assistance Program email: CommunityPartnerCertSupport@covered.ca.gov
You may also visit the Covered California Website at www.coveredca.com

livescan PBE 1 of 4

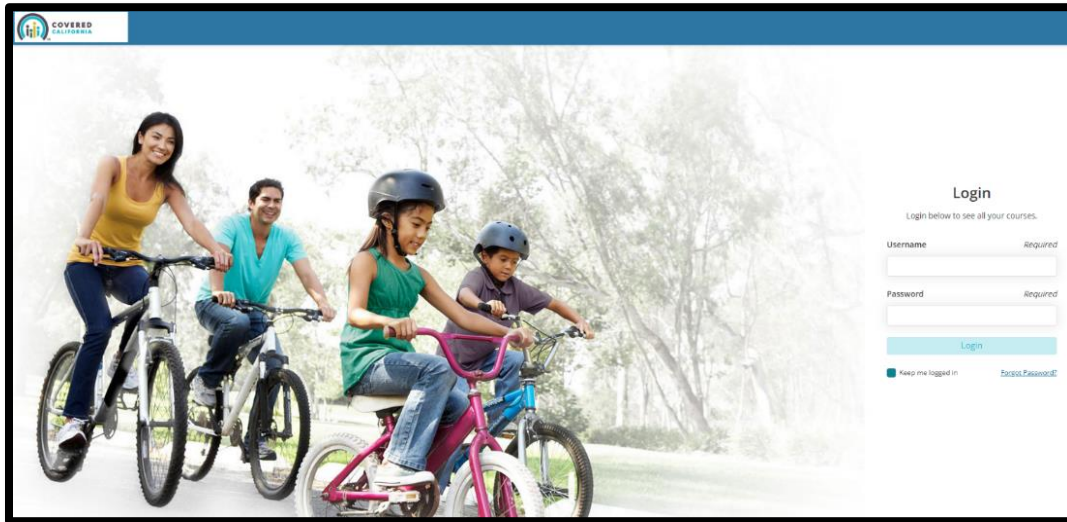
Note: For the purposes of this program, the Covered CA Live Scan form is the only acceptable form. Any other Live Scan form is unacceptable.

If there are issues or you have questions about the background check process, reach out to backgroundchecks@covered.ca.gov for assistance.

Enroller Certification Training Steps

Covered California will enroll you in the [Learning Management Training \(LMS\) Courses](#) once the Enroller eligibility requirements are reviewed. The Enroller will receive an email with their login ID (your email address) and temporary password from LMS.

Use this weblink <https://learning.coveredca.com/#/login> to access and complete the online Certification Training courses.



Training Reminders:

- The Enroller will receive an email with a link to create a password to login to the Learning Management System (LMS).
- Your username will be the same as the email address on the file listed on the Enroller application.
- Enroller(s) **must** complete all courses within 90 days of the date they were enrolled into the Certification Training courses.
- The Enroller must pass the Certification Training exam with a score of 80% or greater.
- The Exam is an open book, and the Enroller is encouraged to use the study guides provided in LMS.
- The Enroll will have 3 attempts to pass the exam. If the Enroller fails, the exam three times they must contact the AC or PC to further request Covered California re-enrolls the Enroller in the LMS training course and exam.

Account Creation Steps

The Account Creation step is the FINAL part of the Certification process.

1. Once the Enroller is certified by Covered California, they will receive two emails from Covered California:
 - The Enroller will receive an email titled *Access Code for Your New Counselor Account* with an Access Code and further instructions awaiting the arrival of the second email. The Access Code is **ONLY** valid for 24 hours and a one-time use.
 - The Enroller will receive an email titled *Your Certified Enrollment Counselor Application is Approved* with instructions and a link to create the account credentials. Click on [Click](#)



[Here to Create Your Counselor Account using Your Access Code](#). The Counselor will be directed to the [Enter Access Code to Create Your Account](#) landing page.

2. Once on the landing page, the Enroller should select **Yes, I have an Access Code**.

3. The Enroller will enter the Access Code, Entity's Federal Tax ID (not social security), and email address listed on the application. Click the **I'm not a robot** checkbox. Select **Next** to continue.

4. Usernames must have at least **8** characters and may contain numbers, letters, hyphens, and periods. Cannot be more than 50 characters. May have numbers, hyphens, and periods.

Important: Once the Username has been created, it cannot be changed.

Password criteria:


- Passwords must have at least **15** characters (no more than 50).
- Passwords must contain **1** of the following:
 - Uppercase letter
 - Lowercase letter
 - Number
 - Special character
- Passwords must not contain dictionary words, names, or common keyboard patterns.
- When re-entering the password, it must match.

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New Password

Your password must:

- Not contain dictionary words, names, or common keyboard patterns (example: Qwerty1!)
- Have at least 15 characters
- Have no more than 50 characters
- Must have at least 1 UPPERCASE letter
- Must have at least 1 lowercase letter
- Must have at least 1 number
- Must have at least 1 special character such as ` ~ ! @ # \$ % ^ & * () _ + - = [] \ { } | ; ' : " , . / < > ?
- Must not be one of your previous 24 passwords



Change Your Password

Enter a new password for Make sure to

include at least:

- 15 characters
- 1 uppercase letter
- 1 lowercase letter
- 1 number
- 1 special character ⓘ

* New Password

* Confirm New Password

Security Question

▼ What is your mother's maiden name?

* Answer

Password was last changed on 11/6/2023 3:15 PM.

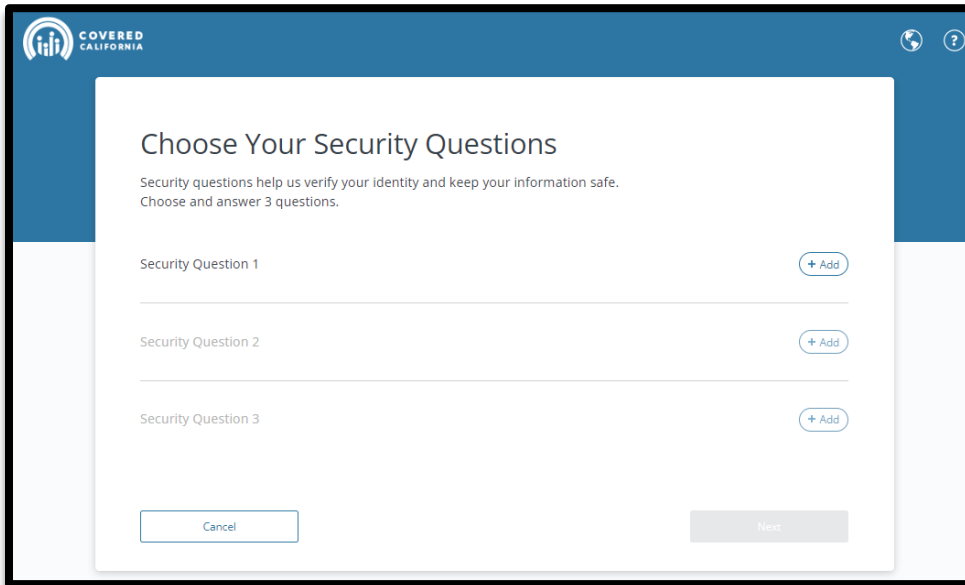
© 2023 Salesforce, Inc. All rights reserved.



6. The Enroller must select a four-digit PIN Number

Note: Save this information for future use – Covered California will not have access to the PIN Number.

7. The system will now ask for the Enroller to select 3 Security Questions from a group of options and to provide answers to each.



8. During your account set up, the enroller is prompted to complete additional account verification steps to prevent fraud.

- Confirm your email address.
- Cell phone number

9. Input the Enroller email address and cell phone number to activate the password reset. This functionality does not require reaching out to Covered California for additional assistance.



Register Your Email

We will send a One Time Passcode to your email address to register your account. Once your email address is confirmed, it can be used to verify your identity if you forget your username, password or need to view your tax forms.

The email address connected to your account is below. If this is not the best email address, update it now.

Enter your email address

Please enter a valid email address. For example, abc@xyz.com.

Re-enter your email address

Please enter a valid email address. For example, abc@xyz.com.

Register Your Cell Phone

We will send a One Time Passcode to your cell phone number to register your account. Once your number is confirmed, it can be used to verify your identity if you forget your password, username or need to view your tax forms.

Enter your cell phone number
Standard text message rate applies.

Please enter a valid 10-digit phone number.

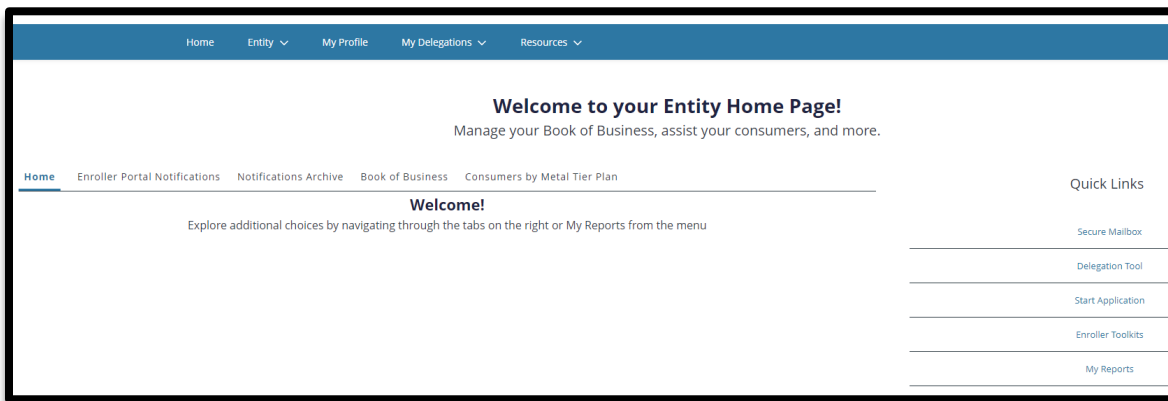
10. For each step, the system will send the Enroller a passcode to validate the email address and/or cell phone number. Input the passcode to set up the password recovery option.
11. Once the Account Creation is complete the Enroller can log in to [Enroller Portal](#) with their username and password to access their Certified account.

Enroller User Home Page

After an Enroller completes their Account Creation process, they will have access to the Enroller Portal to assist and manage consumer they assist with enrollment. The following section provides Enrollers with a navigation overview of the Enroller Portal dashboard tabs frequently used.

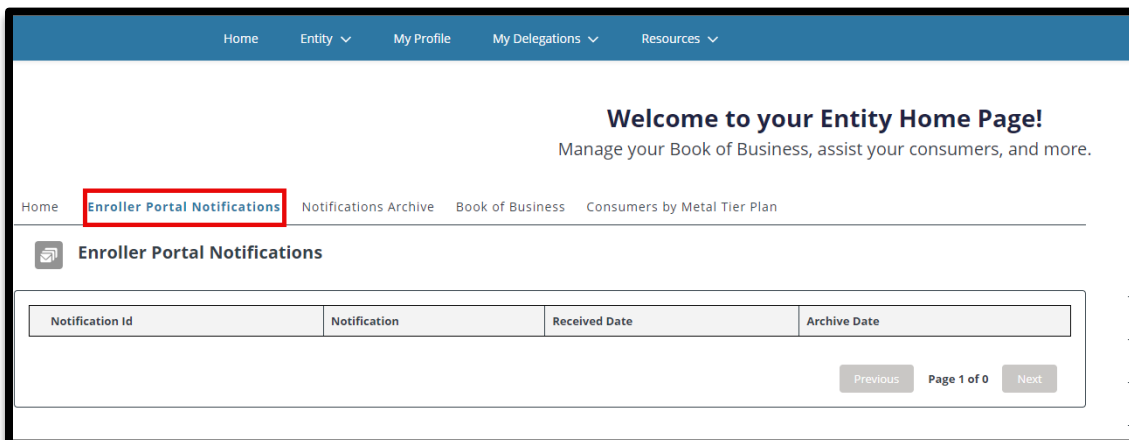
Enroller Home Page tab:

When the Enroller logs in to the system, they will land on the *Welcome to your Entity Home Page*. The Enroller can access high-level information regarding their certification status, starting an application, delegation tool, reports, quick links, and more.



Enroller Portal Notifications tab:

- The **Enroller Portal Notifications** tab displays the Enroller's active notifications sent by the Distribution Services Communications Team. The most recent notification is displayed at the top of the list.
- Clicking a link from the *Notification* column displays a popup with the notification details.





Enroller Portal Notification Notification Archive Book of Business Consumers by Metal Tier Plan

Enroller Portal Notifications

Notification Id	Notification	Received Date	Archive Date
N-000055	Nov 6th Training (**&/**&%)	2023-11-06	2023-11-07
N-000055	Nov 6th Training (**&/**&%)	2023-11-06	2023-11-07
N-000055	Nov 6th Training (**&/**&%)	2023-11-06	2023-11-07
N-000049	Enroller Portal User Survey	2023-11-06	2023-11-07
N-000049	Enroller Portal User Survey	2023-11-06	2023-11-07
N-000049	Enroller Portal User Survey	2023-11-06	2023-11-07
N-000049	Enroller Portal User Survey	2023-11-06	2023-11-07
N-000054	demo test	2023-11-06	2023-11-07
N-000053	Notification For Testing	2023-11-06	2023-11-07
N-000052	All Entity Users Open Survey	2023-11-06	2023-11-08

Previous Page 1 of 2 Next

Notification Archive tab:

- **The Notifications Archive** tab displays a list of the Enroller’s archived notifications sent by the Distribution Services Communications Team. The most recent notification is displayed at the top of the list.
- Clicking a link from the *Notifications* column displays a popup with the notification details.

Enroller Portal Notification **Notification Archive** Book of Business Consumers by Metal Tier Plan

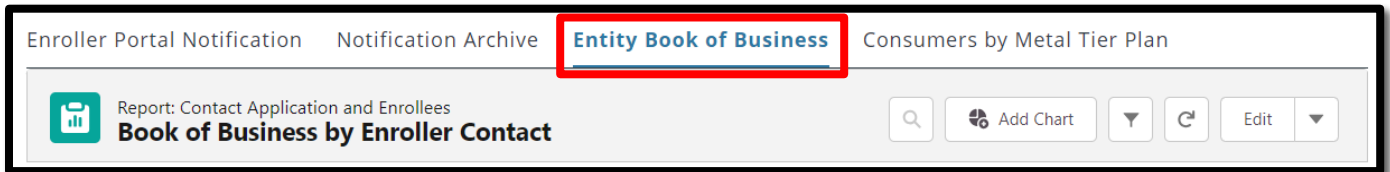
Enroller Portal Notifications Archive

Notification Id	Notification	Received Date	Archive Date
N-000031	Thursday testing	2023-11-02	2023-11-03
N-000011	Notifica	2023-10-30	2023-10-31
N-000010	training demo 1	2023-10-30	2023-10-31
N-000000	Home Page Notification	2023-10-24	2023-10-26

Previous Page 1 of 1 Next

Entity Book of Business tab:

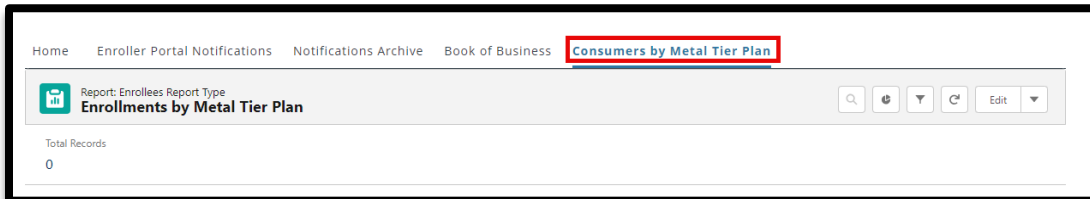
- The **Entity Book of Business** tab displays the *Book of Business by Enroller Contact* report, allowing Enrollers to view Consumers in the Entity’s book of business, apply filters to and edit the book of business, and save or export the book of business. Export options include *Formatted* or *Details Only* views.
- Clicking a Consumer’s name from the Contact: *First Name* or Contact: *Last Name* columns display an individual household account or Consumer contact information.



Note: For Enrollers, a **My Book of Business** tab displays instead, automatically filtered to Consumers with active delegations along with Consumer, application, eligibility, and enrollment details.

Consumers by Metal Tier Plan tab:

The **Consumers by Metal Tier Plan** tab displays the *Enrollment by Metal Tier Plan Type* report, allowing Staff to view the number of Consumers delegated to them for each metal tier plan Level. A *Consumers by Metal Tier* bar graph is also available.



Entity Quick Links

Quick Links display on user role similar to the Agency Home page, the *Welcome to your Entity Home Page!* displays a section. Links display based on user role. The *Quick Links* section may contain the following links:

- **Secure Mailbox** – Navigates the user to the *Secure Mailbox* to view messages
- **Delegation Tool** – Navigates the user to the *Consumer Delegation* page to delegate a CEC to the case
 - Displays only for Counselors
- **Start Application** – Navigates the user to the Consumer Home page to begin a new application on behalf of a Consumer
 - Displays only for Counselors
- **Enroller Toolkits** – Navigates the user to the *Enrollment Partner Toolkit* page
 - Displays for PC, AC and Counselors
- **My Reports** – Navigates the user to the *Reports* page to view, generate, extract and file available reports. The following reports display: *Recent, Created by Me, Private Reports, All Reports*. *Recent* is the default view.

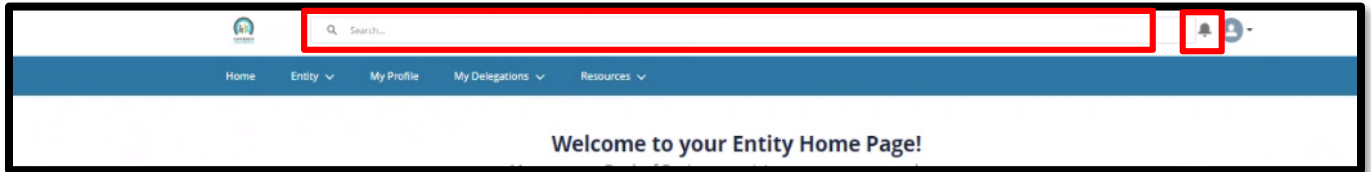
The screenshot shows the 'Entity Home Page' interface. At the top, there is a search bar and navigation links: Home, Entity, My Profile, My Delegations, and Resources. The main heading is 'Welcome to your Entity Home Page!' with the subtext 'Manage your Book of Business, assist your consumers, and more.' Below this, there are tabs for 'Enroller Portal Notification', 'Notification Archive', 'Book of Business', and 'Consumers by Metal Tier Plan'. The 'Enroller Portal Notifications' section is active, displaying a table with columns for Notification Id, Notification, Received Date, and Archive Date. The table contains 12 rows of notification data. To the right of the table, a 'Quick Links' sidebar is highlighted with a red border, containing links for 'Secure Mailbox', 'Delegation Tool', 'Start Application', 'Enroller Toolkits', and 'My Reports'. At the bottom of the table, there are 'Previous', 'Page 1 of 2', and 'Next' navigation buttons.

Notification Id	Notification	Received Date	Archive Date
N-000055	Nov 6th Training (**&%**\$&%)	2023-11-06	2023-11-07
N-000055	Nov 6th Training (**&%**\$&%)	2023-11-06	2023-11-07
N-000055	Nov 6th Training (**&%**\$&%)	2023-11-06	2023-11-07
N-000049	Enroller Portal User Survey	2023-11-06	2023-11-07
N-000049	Enroller Portal User Survey	2023-11-06	2023-11-07
N-000049	Enroller Portal User Survey	2023-11-06	2023-11-07
N-000049	Enroller Portal User Survey	2023-11-06	2023-11-07
N-000054	demo test	2023-11-06	2023-11-07
N-000053	Notification For Testing	2023-11-06	2023-11-07
N-000052	All Entity Users Open Survey	2023-11-06	2023-11-08

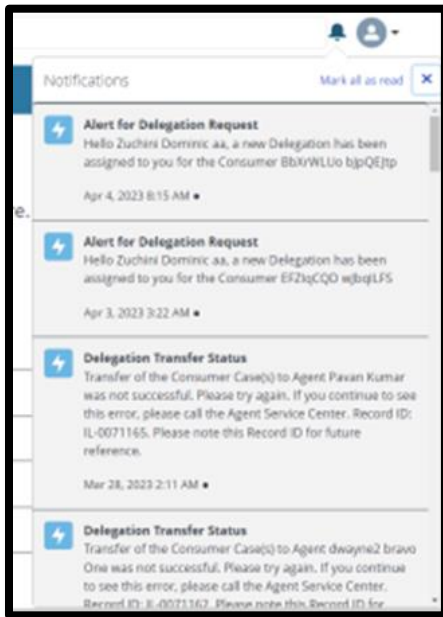
Home Page Navigation

The Entity landing pages are similar and display the following functionality at the top of the page:

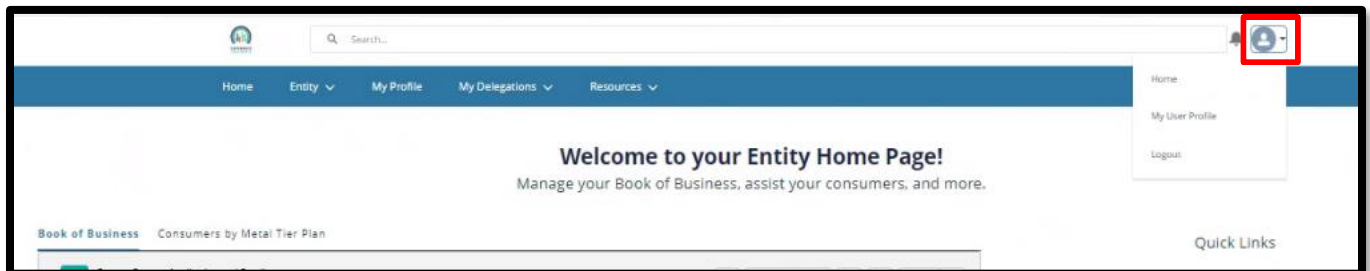
- **Search Field** – Allows staff to search for Contacts, Leads, and Accounts
- **Notifications Bell Icon** – Displays a red number when a pending notification is present



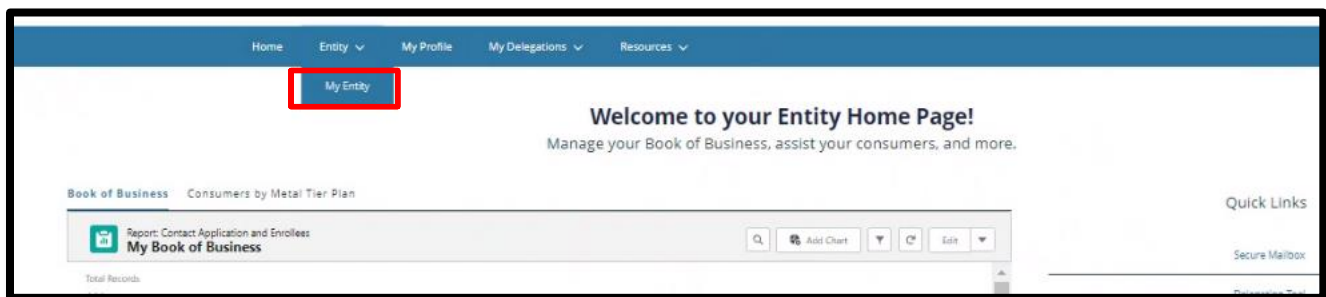
- Notifications may display the following:
 - **Alert for Delegation Request** – Delegation has been assigned
 - **Contract DocuSign Envelope Failed** – Contract DocuSign failed
 - **Delegation Transfer Status** – Indicates the status of a delegation transfer
 - **Live Scan DocuSign Envelope Failed** – The Live Scan DocuSign failed



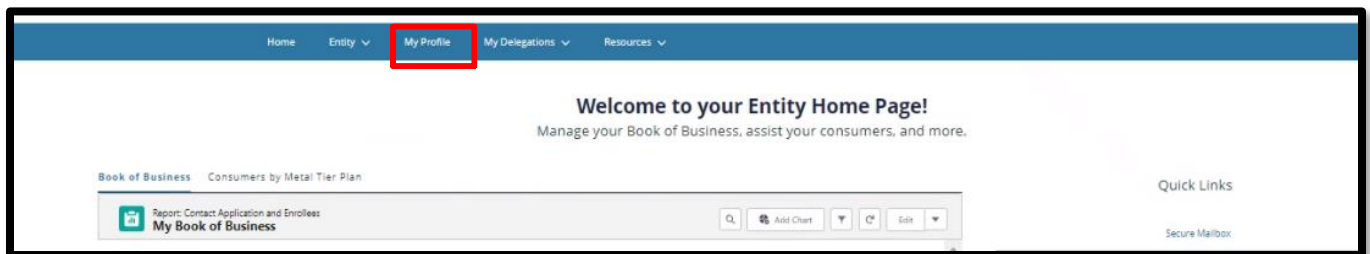
- **Profile icon** – If you hover-over the icon, it will display a dropdown description with the following options:
 - **Home** – Navigates the users to the Welcome to your Entity Home Page!
 - **My User Profile** – Navigates the user to the My Security Profile Page
 - **Logout** – Logs the user out of the system



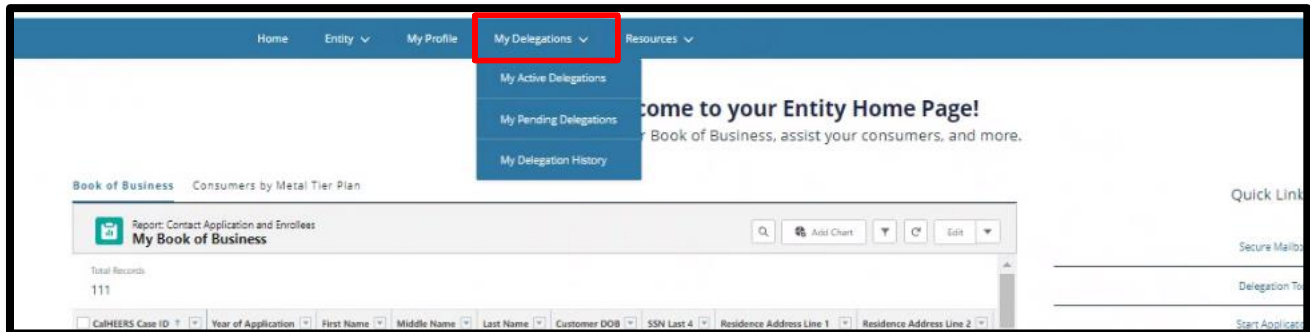
- **Entity tab dropdown** – Displays for all Entity staff with the following link:
 - **My Entity** – Navigates user to Entity account page with navigator contact information, Entity contacts, population served, and certification/approval status



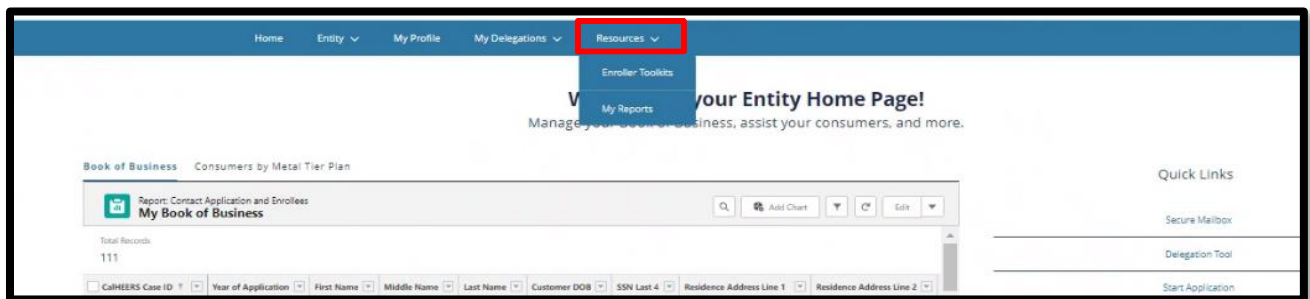
- **My Profile tab** – Navigates the user to the *Contact* page to view their profile.



- **My Delegations** tab –
 - **Active Delegations** – Navigates user to all active delegations
 - **Pending Delegations** – Navigates the user to all pending delegations
 - **My Delegation History** – Navigates the user to the *Entity Delegation History* page



- **Resources** tab dropdown – Displays for all Entity staff with the following links:
 - **Enroller Toolkits** – Navigates the user to the *Enrollment Partner Toolkits and Resources* page of the Covered California website
 - **My Reports** – Navigates the user to *Entity Reports*



Forgot Password or Password Reset

Note: This can only be completed if an email or phone number were provided at the beginning of account username set up. If that information was not provided, email a request to CommunityPartnerCertSupport@covered.ca.gov.

1. On the login page, select **Forgot Password**



Log in or Create an Account to Get Covered

Username [Forgot username?](#)

Password [Forgot password?](#)

[Log In](#)

[Create an Account](#)

2. An email will be sent to the registered email with a link to reset the password
3. The password must be 15 characters long, with 1 uppercase letter, 1 lowercase letter, 1 number, and 1 special character.

salesforce

Change Your Password

Enter a new password for Make sure to

Include at least:

- 15 characters
- 1 uppercase letter
- 1 lowercase letter
- 1 number
- 1 special character ⓘ

* New Password

* Confirm New Password

Security Question

▼ What is your mother's maiden name?

* Answer

[Change Password](#)

Password was last changed on 11/6/2023 3:15 PM.

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Need Assistance

This concludes the Enroller Portal Plan-Based Enroller User Guide training steps. If you have any questions or need assistance regarding the Enroller Portal or the process, please send the Certification Services Section Team at PBECert@covered.ca.gov.
