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IMPORTANT NOTE:

1. Entities that were Active in the old IPAS system ARE NOT REQUIRED to create an account or complete a NEW application in the Certification Portal.

2. If you were an Active entity in the old IPAS system, you will receive an email from the Certification Portal with a username and instructions to login.

3. After you have successfully logged in to the Certification Portal, please skip to the "My Entity" section on Page 18 to begin managing your account.

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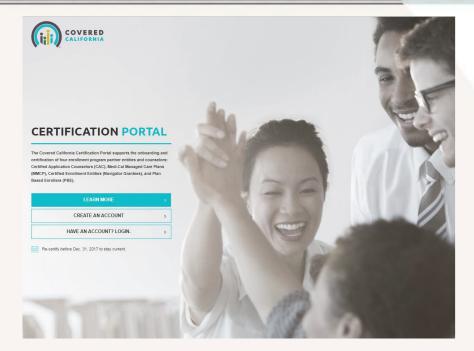
CERTIFICATION PORTAL ENTITY USER OVERVIEW

This document outlines all features and functions available to Entity Business Contacts in the Certification Portal. It details the functions that you as an Entity User have including the account registration process, entity application process, managing counselors, and managing files & required documentation.

COVERED CALIFORNIA ENROLLMENT ASSISTANCE PROGRAM

CERTIFICATION PORTAL ENTITY USER OVERVIEW



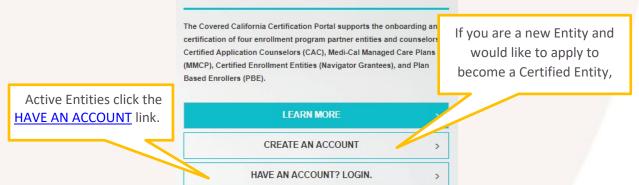


ACCOUNT CREATION PROCESS

IMPORTANT NOTE:

- Entities that were Active in the old IPAS system ARE NOT REQUIRED to create an account or complete a NEW application in the Certification Portal.
- 2. If you were an Active entity in the old IPAS system, you will receive an email from the Certification Portal with a username and instructions to login. To access the Certification Portal, you must navigate to the "Have An Account? Login." button shown below:
- **3.** After you have successfully logged in to the Certification Portal, please skip to the "My Entity" section on Page 22 to begin managing your account.

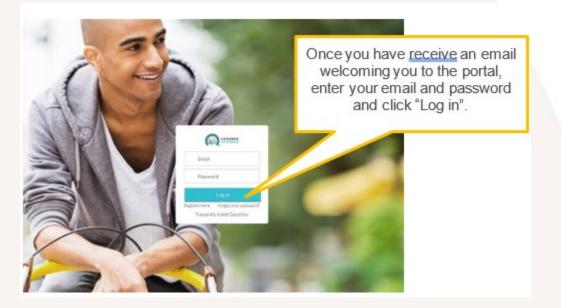
CERTIFICATION PORTAL





LOGIN PAGE

The Certification Portal login page can be found at https://coveredca.force.com/Certification/s/login/



ENTITY REGISTRATION

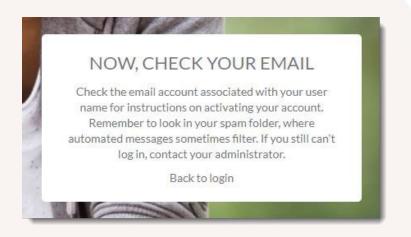
To register as a new Entity applicant, follow the steps below.

- A. All new Entity applicants must populate all fields displayed on the <u>CREATE AN ACCOUNT</u> page and then click "Register". The email address populated in the Email field will also be the username for your new account. Password requirements are as follows:
 - a. Minimum of 10 characters
 - b. Must mix alpha and numeric characters

	COVERED		
France	First Name		I
5	Last Name	B igger	I
	Email		I
	Entity Name		I
	Create Password		
	Confirm Password		٦
· · ·	What year was the entity established?		
and the	Challenge Answer 1		
-	In what month does your fiscal year begin?		
K	Challenge Answer 2		
1	How many conference rooms are there in your main office?		
(a)	Challenge Answer 3	6	
	Register		
1	Frequently Asked Questions	1	1
	Already have an account?		



B. After clicking the "Register" button you will see the following message on your screen. An email notification will be sent with a link to activate the new user account.



C. The System sends an email to the address provided for verification purposes. *Sample of email below. You must click on the link provided in the email.*

Hi	
Welcome to the Portal! To get started, go to the following link: Click Here	
Username:	
Thanks,	
If you have additional questions or need further assistance please email <u>CCCertificationServices@covered.ca.gov</u>	

D. Once you click the link in the email message, you will be directed back to the Login Page. Enter the Email and Password that was entered in the registration process. Click "Log in" once your Email and Password are entered.

(
Emai	0
Pass	word
	Log in
Regist Her	e Forgot your password?
Freque	ently Asked Questions

ENTITY APPLICATION

The steps below indicate the process of completing your Entity Application and submitting it for review by Covered California's Certification Services Section.

1. **INTRODUCTION:** Upon initial login, you will be directed to the Entity Application. Review the information on the page then appropriately click the checkboxes at the bottom of the page to offer certification of the statements. Click "Begin" to advance to the next page and start the application.

MY ENTITY COUNSELORS	COVEREDCA.COM CONTACT SUPPORT
ECTIONS STATUS: DRAFT	Acme Inc. Section 1: Introduction
1. Introduction	Please complete the information thoroughly. For more information please email questions to EnrollmentAssistanceSupport@covered.ca.gov
2. Entity Information	
3. Location and Hours	Use this Enrollment Application to notify Covered o Covered California is seeking Entities to participate in
4. Entity Contacts	California of the intent to participate the enrollment program • Assist uninsured consumers to enroll and retain
5. Counselors/Enrollers	coverage through Covered California Counselors will engage, educate, and enroll eligible
6. Required Documentation	Californians in Covered California Qualified Health Plans (QHP) and other insurance affordability
7. Qualifying Attestations	programs
	Information required to complete this application General information about the entity, such as contact information, populations currently served or intended to reach, and counties served All sub-site locations and hours of operation Information on anticipated Counselors Federal Employment ID Number, State Tax ID Number
Applicant must certify as an authorized representative and click "Begin" to continue	Required documentation to be submitted with this Entity Agreement Proof of Business Status Documentation Proof of Insurance: Liability Insurance and Worker's Compensation Insurance Proof of current or valid license and/or certification Counselor Agreement(s) and Application(s)
Must choose one or both options	I certify that I am an authorized representative for my Entity and that I will provide accurate information within this application. I certify that I am the Primary Contact for my Entity. I certify that I am the Authorized Contact for my Entity. Regin

2. ENTITY INFORMATION: Please choose an Entity Type and then complete all required information in the section. Click "Next" to advance to the next section of the application.

 1. Introduction 2. Entity Information 	Please hover over the ③ icon for more Entity Name	Choose an Entity Type before proceeding through the application	
	Acme Inc.		
3. Location and Hours 4. Entity Contacts	Entity Type* O Certified Application En O Plan Based Enrollment O Medi-Cal Managed Car		
5. Counselors/Enrollers	Business Legal Name *		
6. Required Documentation			
7. Qualifying Attestations	Primary Email Address *		
	Primary Phone Number *	Secondary Phone Number	
		0	
	Website Address		
	Treballe Abbiless		
	Federal Tax ID *	State Tax ID *	
	Pederal lax ID	State lax ID	
	Category* Non Profit		
	Organization Select		-
	Type*		
	Year entity was established? *		1
	Projected Counselors *		
	Resource for Counselor		
	affiliation?*		•

Note: The Entity Application will be saved after each step when "Next" is clicked. Your progress will be saved in case you need to leave and finish later. If you decide to leave the application early, you will be taken back to where you left off next time you log into the system.

3. LOCATION AND HOURS: Next you must setup the Primary Location and any Sub-Site Locations that represent the Entity. The Primary Location is required and will be the first location record added.

MY ENTITY COUNSELORS	COVEREDCA.COM CONTACT SUPPORT	
SECTIONS STATUS, DRAFT	Acme Inc. Section 3: Location and Hours	
 1. Introduction 	Please hover over the () icon for more information about an item Please fill out the dialog boxes for information about the Primary site and any sub-sites for your organization	n Complete
 2. Entity Information 3. Location and Hours 	the information in the following categories. FRIMARY LOCATION Type of Location)
4. Entity Contacts 5. Counselors/Enrollers	Estimated number of individuals served * 0	0
6. Required Documentation 7. Qualifying Attestations	Location Details	٥
	Contact First Name * Contact Last Name *	0
	Email Address *	0
	Phone Number* Secondary Phone Number	0
	County* Select	• 0

Hours of Operation

Indicate the hours of availability to provide enrollment assistance for each day of the week. Select the correct time from the drop down boxes. Each day must be filled out. ()

Same hours M-F? ()				
Open 24/7? (1)				
	Opening Time	Closing Time		
Monday	From 🔻	To 🔻		
Tuesday	From 🔻	To 🔻		
Wednesday	From 🔻	To		
Thursday	From 🔻	To		
Friday	From 🔻	To		
Saturday	From 🔻	To		
Sunday	From 🔻	To		

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CERTIFICATION PORTAL ENTITY USER OVERVIEW

You must save the address information by clicking "Save Location" before clicking on "Next".

Mailing Address		
Mailing Street Address *		3
Mailing City *		3
Mailing State *	Mailing Zip Code *	
Select		٩
Physical Address	Same as Mailing? ()	
Physical Street Address *		()
Physical City *		١
Physical State *	Physical Zip Code *	
Select	▼ ^③ Location information	3
	Save Location	
	Previous Next	

Once a location is saved, a list of all the Entity's locations you have created will be displayed with options to add additional Sub Sites or proceed to the next section of the application.

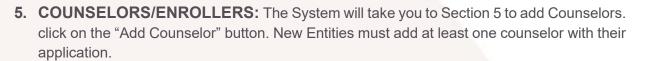
SECTIONS STATUS: DRAFT	Acme Inc. Section 3: Location and Hours Please hover over the () icon for more information about an item Please fill out the dialog boxes for information about the the information in the following categories. Create a Sub Site Location
3. Location and Hours	Site Locations + New Sub Site
4. Entity Contacts	View/Edit existing Locations
5. Counselors/Enrollers	Acme Location 1 PRIMARY LOCATION Proceed to next
6. Required Documentation	Achielocation 1 PRIMARY DOCATION Section
7. Qualifying Attestations	Previous Next

COVERED

4. ENTITY CONTACTS: Next, you must fill out all the information in this section to identify the entity's lead contact persons. Some fields may be pre-populated with your information depending on what was selected in the Introduction section 1 (page 8).

MY ENTITY COUNSELOR	IS COVEREDCA.COM CONTACT SUPPORT			
SECTIONS STATUL DRAFT	Acme Inc. Section 4: Entity Contacts Please hover over the @ Icon for more Infor	mation about ar	ı İtem	
 2. Entity Information 3. Location and Hours 			ila program manager. This Individual will be respon affiliated Counseiors, and maintaining up-to-date f	
4. Entity Contacts	Primary Contact First Name *		Primary Contact Last Name*	
5. Counselors/Enrollers	John	O	Doe	0
6. Required Documentation	Primary Contact Title *			
				0
7. Qualifying Attestations	Primary Contact Email *			
	1023158@mvrht.net			0
	Primary Contact Phone Number *		Primary Contact Secondary Phone Number	
	Frinday Contact Phone Wumber	0	Primary Contact Secondary Phone Humber	0
	Primary Contact Mailling Street *			0
	Primary Contact Mailing City *			0
	Primary Contact Mailing State * - Select	• 0	Primary Contact Mailing Zip Code *	0
	California.	Same as Prim	ity to enter into a contractual agreement with Cov ary Contact? ② Authorized Contact Last Name *	
	John	0	Doe	0
	Authorized Contact Title *			
	Authorized Contact Email *			0
	j1023158@mvrht.net			0
	[1023158@myrht.net			0
			Authorized Contact Second Phone Number	
	1023158@mvrht.net Authorized Contact Phone Number *	0	Authorized Contact Second Phone Number	0
	Authorized Contact Phone Number *	Ø	Authorized Contact Second Phone Number	0
		0	Authorized Contact Second Phone Number	0
	Authorized Contact Phone Number *	0	Authorized Contact Second Phone Number	
	Authorized Contact Phone Number *	0	Authorized Contact Second Phone Number	0
	Authorized Contact Phone Number * Authorized Contact Mailing Street * Authorized Contact Mailing City *			0
	Authorized Contact Phone Number * Authorized Contact Mailing Street * Authorized Contact Mailing City * Authorized Contact Mailing Select Contact Mailing		Authorized Contact Second Phone Number	0
	Authorized Contact Phone Number * Authorized Contact Mailing Street * Authorized Contact Mailing City * Authorized	•		0

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SECTIONS STATUS, DRAFT	CommTestEntity1 Section 5:Counselors			
 1. Introduction 	To add information about individuals that you want to affiliate with the Entity as potential "Counselors", click the button labeled, "Add Counselor". There are 3 categories that need to be completed for each individual affiliated with the Entity			
 2. Entity Information 	as a potential Counselor (Details, Mail	-	, ר	
 3. Location and Hours 	After you have completed the informa complete their profile information and	tion for an i Counselor	with a user account in which they can	
 4. Entity Contacts 				
5. Counselors/Enrollers	Counselors		+ Add Counselor	
6. Required Documentation	NAME CERTIFICATION	PROFILE SITES SERVED	MULTI-AFFILIATE	
7. Qualifying Attestations		Previous Next		

After clicking the "Add Counselor" button you will advance to following screen. Fill out the required information. The new Counselor must be assigned as a resource to one or more of the Locations that you created in Section 3. After the information has been correctly entered, click on the "Create Counselor" button to create and associate the Counselor with your Entity.

Note: A Counselor can be assigned up to two sites.

SECTIONS STATUS: DRAFT	CommTestEntity1 Return to list of all Section 5:Counselors counselors	
 1. Introduction 	Back to Counselors	
2. Entity Information	NEW COUNSELOR	
3. Location and Hours	Please hover over the () icon for more information about an item	
 4. Entity Contacts 	TIP: Each Counselor must have a unique email address, pl individuals Used to look for existing Counselor	
5. Counselors/Enrollers	Details in the system.	
6. Required Documentation	CA Driver's License Number or State ID * ID Type *	
7. Qualifying Attestations	Legal First Name * Will also become Counselor's user name for accessing the portal 0	
and Sub Site Locations created in Section 3.	Confirm Email Address * Creates the new Counselor	
	Sites served by this individual * (Ctrl+Click to select multiple) counselor is recognized from the entered CA License	
	Select Location Main Create Counselor Create Counselor ()	
	Previous Next	

After creating the counselor, select "Back to Counselors" to view a refreshed list of all the counselors (with the option to create more), or proceed to the next section of the application by clicking "Next".



6. REQUIRED DOCUMENTATION:

REQUIRED DOCUMENTATION: Once the Counselors have been entered and clicked "Next" the System will navigate to Section 6: "Required Documentation." Each item in this section must be completed or uploaded as part of the application. The content in each section may vary depending on the entity type that was selected in Section 2.

NOTE: Documents that are missing or filled out incorrectly will delay the approval process. Continue below for a detailed look at each section.

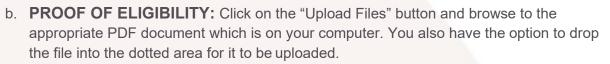
SECTIONS STATUS: DRAFT	John Wayne Medical Cetner Section 6: Required Documentation Only PDFs are allowed to be uploaded. Be sure documents meet specified requirements before uploading.
 2. Entity Information 3. Location and Hours 4. Entity Contacts 5. Counselors/Enrollers 	Entity Agreement Entities must complete, sign and upload the Entity Agreement. To complete the Agreement, click on the button below. The file will open via DocuSign, allowing for the Agreement to be completed and signed. DocuSign CAEAgreement
6. Required Documentation 7. Qualifying Attestations	Proof of Business Status Documentation The required documentation is listed below based on your Entity's category. 1. Tax Identification Number on Institution Letterhead Proof of Eligibility ① Upload Files Or drop files

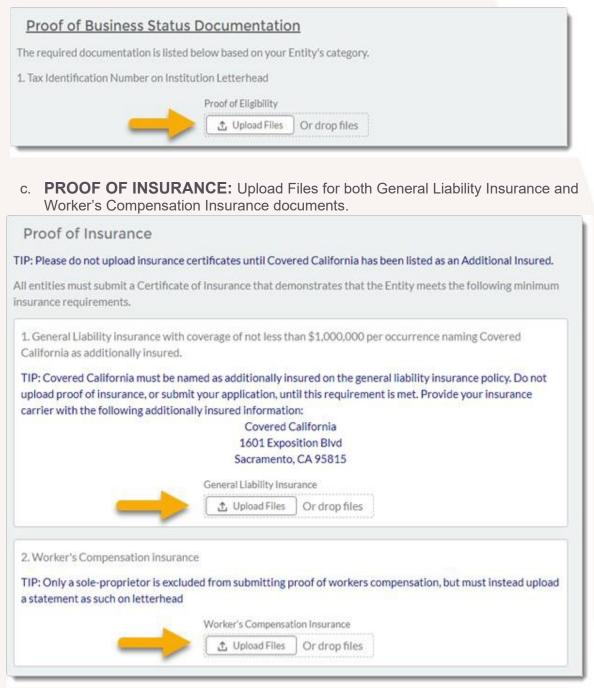
a. ENTITY AGREEMENT: Upon request, the CSS Team (<u>CommunityPartnerCertSupport@covered.ca.gov</u>) will send a valid copy to the Entity directly.

Note: When completing the document, ensure it is filled out by the Authorized Contact

Once all the information has been properly filled out and the document is signed, send the Entity Agreement back to the CSS Team to further be processed and reviewed.

NOTE: If there is nothing to disclose, enter "Nothing to disclose" in those fields.





TIP: Only a **sole-proprietor** is excluded from submitting proof of workers compensation. To validate, the sole proprietor(s) must prepare a statement on their business letterhead noting that because their entity is providing service as a sole proprietor, they are excluded from having Workers Compensation coverage.

COVERED

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- d. **PROOF OF LICENSE:** Click on "Upload Files" to select your Proof of Business License documentation.

NOTE: If you are a school, municipality, or other government agency without a normal business license, submit a signed letter stating this on the official letter head of your organization. If you are a nonprofit organization, submit proof of your 501(c)(3) status.

Proof	of	current	t or	valid	license
-------	----	---------	------	-------	---------

Entities must provide documentation of the business license and other relevant certification of the Entity, including any federal or state designations.



e. **CONFLICT OF INTEREST PREVENTION PLAN:** A template for a Covered California Conflict of Interest Prevention Plan is provided through the Conflict of Interest Prevention Plan blue button. If you have your own conflict of interest prevention plan, please **click** on "Upload Files" to upload your own Conflict of Interest Prevention Plan.

Conflict of Interest Prevention Plan	
Entities must provide a Conflict of Interest Prevention Plan. This Conflict of Interest uploaded, will be submitted to legal team for Review and either approved or returne Conflict of Interest Prevention Plan	
Conflict of Interest Prevention Plan	Template for plan
C Upload Files Or drop files	

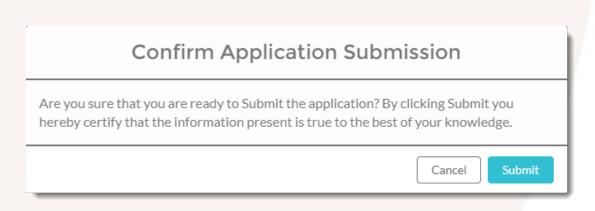
After all the required documentation has been uploaded, click on the "Next" button to advance to the next section.

Note: The maximum file size for an uploaded document is **4 MB** (Megabytes). Please optimize any scanned documents to fit within the upload limit. All required documents must be uploaded to proceed to the next section. A green checkbox indicator will display next to each section when a document is uploaded successfully.

7. QUALIFYING ATTESTATIONS: Read each Qualifying Attestation. Click in the check box to acknowledge your agreement with the attestations and click on "Submit" to initiate application submission.

SECTIONS STATUS: DRAFT	CommTestEntity1	
	Section 7: Qualifying Attestations	
 1. Introduction 	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
 2. Entity Information 	bottom of this page and click "Submit".	
3. Location and Hours	I certify the organization applying is not a health insurance issuer or stop loss issuer,	
 4. Entity Contacts 	Attestation 1 subsidiary of a health insurance issuer or a stop loss insurer, or an association that	a
 5. Counselors/Enrollers 	includes members of, or lobbies on behalf of, the insurance industry.	
 6. Required Documentation 	I certify the organization applying is not receiving any consideration directly or indir Attestation 2 from a health insurance issuer or stop loss insurance issuer for enrolling individuals	· · · ·
7. Qualifying Attestations	Attestation 2 from a health insurance issuer or stop loss insurance issuer for enrolling individuals employees into qualified or non-qualified health coverage.	and
	Attestation 3 I certify the organization applying does not employ any individuals who receive any consideration for enrolling qualified individuals and employees into qualified or non qualified health coverage.	
	Attestation 4 I certify the organization applying and all of its employees will comply with the confl interest standards located at the California Code of Regulations Title 10, Chapter 12 Section 6866.	
Entity User must agree to all Qualifying Attestations	Attestation 5 I certify that the entity will serve families of mixed immigration status and individual with disabilities	ls
	By clicking submit, acknowledgement is made that the organization applying qualifies to participate in the P as an Entity and that all submitted information is true, correct and accurate.	rogram
	Previous Submit	

The following confirmation message will appear after clicking the "Submit" button. Click the "Submit" button again. The Entity Application will be submitted to the Certification Services Section for processing.







ENTITY APPLICATION STATUS – APPROVAL FROM COVERED CALIFORNIA

When the Entity Application is submitted, the user will be directed to the application status page where the application status history and any notes added by the review team will be displayed.

	Application has been su	ubmitted for processing	×
		▼ Manage Entity	
Application Locked	Current status of the application. Click this to get to the status page.	CREATED BY CREATED DATE	
 be reviewed but is locked for editing 	Application Status: Pending		
 5. Counselors/Enrollers 	STATUS Created	DATE Aug 10, 2017 11:34 AM	
 6. Required Documentation 7. Qualifying Attestations 			

- The application status is "Pending" and the application is locked from editing. The application will remain in "Pending" status until it is reviewed and updated by the Certification Services Section (CSS).
- The Entity User will receive an email confirming the submission of the Entity Application and will inform the user when the application will be reviewed.

Once an Entity Application has been submitted for processing, the application is reviewed by Covered California's Certification Services Section. Covered California will review the application and all required documentation. The review team will update the Entity Application Status to one of the following values:

- a. **Draft** The Entity Application requires additional edits and is returned to the Entity User. The review team will provide details on what needs to be corrected.
- b. **Pending** The Entity Application is awaiting a determination from Covered California's review team.
- c. **Approved** The Entity Application has been approved.
- d. **Not Approved** The Entity Application has been reviewed and NOT approved.
- e. **In CC Review** The Application has been initially reviewed, but further review is necessary.
- f. Withdrawn The Application has been withdrawn by request of the Entity.



You will see when the review team updates the status of the application by viewing the application status page.

SECTIONS STATUS: DRAFT		✓ Manage Entity
 1. Introduction 	Application Notes	
Notes added by the Covered CA review team	TITLE BODY Draft Please correct the	Mailing Address on the Primary Location. The Zip Code does not match the city provide
History of status changes	Application Status: Draft	Submitted: 08/11 08:40 AM
6. Required Documentation	STATUS	DATE
 7. Qualifying Attestations 	Draft	Aug 11, 2017 08:52 AM
	Pending	Aug 11, 2017 08:40 AM
	Created	Aug 10, 2017 11:34 AM

You also have the ability to add additional disclosures to your Entity Agreement. This is useful if you have additional items to disclose after you have signed and submitted your application and the application is still under review.

SECTIONS STATUS, DRAFT	✓ Manage Entity
 1. Introduction 	Application Notes
2. Entity Information	TITLE BODY
3. Location and Hours	Draft Please correct the Mailing Address on the Primary Location. The Zip Code does not match the city provide
 4. Entity Contacts 	
5. Counselors/Enrollers	Application Status: Draft Submitted: 08/11 08:40 AM

Once Entity Application is marked as "**Approved**", you will receive an email outlining the next steps in the Entity Certification process (see next page). Next time you log into the Certification Portal with an approved application, you will be directed to the My Entity page instead of the application.

Sample Application Approval Email

	-
Congratulations! Your Entity application has been approved. Here are the next steps:	
NEXT STEPS To Complete Certification Requirements:	
 Within 30 days of this notification, the Primary contact listed in the Entity application must complete the required Entity Management Training by clicking I Be sure to mark the checkbox on your Entity record in the Certification Portal, as instructed at the end of the training. 	HERE
 As your entity's primary contact, you are the designated individual responsible for day-to-day management of your organization's participation in this proc Resource Guide that will help you get oriented and provide you with the tools to assist you in this role. [Need new Link to where this is hosted] 	gram. Click HERE to access a
3. Ensure that your Counselor Roster is finalized in the Entity application by completing all the Counselor candidate information.	
4. The Counselor must complete the following steps for their profile and agreement: a. Complete and submit Criminal Disclosure Form. * NOTE: Any communication in connection with the Criminal Disclosure Form is between the individual California. The Entity must not be involved in the review of the content of this disclosure.	applicant and Covered
b. Complete and download two copies of the Capital Live Scan Form, and call to schedule a fingerprinting appointment at an approved provider for backgro http://www.capitallivescan.com/locations_statewide_network.html	und clearance:
c. Sign & Submit their Counselor agreement	
d.Upload a head shot photo for Counselor badge.	
e. Complete the required training, by logging into the Learning Management System (LMS) and using credentials provided in an LMS email sent to all Coun self-guided via online modules. Training questions should be directed to <u>CCULearning@covered.ca.gov</u> .	selor candidates. Training is
If you have additional questions or need further assistance please email certificationportal@covered.ca.gov,	



MY ENTITY

The "My Entity" page provides a snapshot view of your Entity account information and all items related to your Entity. The related items include:

- Required Documentation: Documents such as, Business License, General Liability and Workers Compensation are submitted here.
- My Files: Any files that are not Required Documents are located here.
- Entity Applications: The application that was filled out and submitted for review.
- Locations: The address information for the Entity and the subsites are found here.
- Entity Change Requests: Any information changed or updated will be logged here.

My Files (3)

Account T. + Follow Edit Covered CA Community Partner STATUS EXPIRATIO. MY FILE ... FILE Test Prode Ŧ MyFile_909. Entity M Any files outside of Required documents are Program Type Primary Ph Primary Location Required Documentation can managed here. Click here (or MyFile 909. Entity Mana Navigator Organization Entity details are View All to view all records. be uploaded and displayed on the left managed here. side of the page. 拱 Strategic Workplans (0) Required Documentation (6+) New ✓ Entity Information Entity Status Account Name REQUIRE... FILE TYPE STATUS EXPIRATIO Progress Reports (0) Covered CA Community Partner General Lia... General Liabilit... Expired ▼ Entity Primary and Program Type Parent Account CAEAgree... CAEAgreement DocuSign Pend.. • Payment Requests (0) ub Site Locations • flower Worker's Com... Submitted Business Legal Name Entity Agreem... ▼ Locations (2) Entity Agre... Submitted Entity documents, job site locations, and CHewie's Li... Proof of License Approved • LOCATIO ... CONTACT L... CONTACT F PHONE NU. change request are Website Address ReaDoc_90... Workers Comp... Approved Secondary S... (559) 555-1234 ▼ John Smith displayed on the right Main Site (555) 698-5126 side of the page. Skyw -Category View All Non Profit View All Entity Change Requests (6+) New CalHEERS CalHEERS Usernar CHANGE ... CREATED D... CREATED BY RECO CalHEERS Password CR-19791 21/2018 10:... Sys Admin Change Reg • CalHEERS Pin Credentials for accessing CR-19790 Char CalHEERS system. There are two types of change CR-19789 Ch Populated once Entity requests: Change Request System Info becomes Active and CR-19788 C Registered with Covered CA and Withdrawal Requests Created By CR-19787 Ch Andy Hilliard 10/15/2015 4:29 PM CR-19785 8/21/2018 10:... Sys Admin Change Request Ŧ

Each of the different sections is described below:



NEW – ENTITY ACCOUNT "MY APPROVAL"

Primary Contacts or Authorized Contacts are required to approve or reject pending requests located under the "Items to Approve" tab.

	Search				SEARCH	9
	NSELORS	COVEREDCA.COM	CONTACT SUPPORT	DASHBOARD	MY APPROVA	ALS
Items to Approve						
		No approval requests	need your attention right n	ow.		

REQUIRED DOCUMENTS & MY FILES

Required Documents and My Files records are used to manage all files associated with your Entity. Required Documents will have been automatically created through the Entity Application process and typically will not need to be created from the My Entity page once an application has been approved. However, certain Required Documents will expire over time and will need to be updated.



Expired Required Documents can be updated through the following procedure: Click on the "New" button next to Required Documents

	Search			Searc	b		
	Jearchim					0	
IFORNIA							
A MY ENTITY C	COUNSELORS	COVEREDCA.COM	CONTACT SUPPORT				
Navigator						+ Follow	Edit
Entity Name Nav Test Entity v.2	Entity Status Active	Phone (916) 228-87	Ownership 95				
Entity Informa	tion	Entity Status	-	Required Docu	FILE TYPE	STATUS	EXP
Nav Test Entity v.2		Active		RegDoc_231_Conflict	Conflict of Interest	23	
5			1		connict of mitchest	Approved	
Parent Entity		Program Type		ReqDoc_231_Busines ReqDoc_231 Worker	Business License	Approved	
-	0	Navigator Organiza		ReqDoc_231_Busines ReqDoc_231_Worker ReqDoc_231_General	Business License Workers Compensatio	Approved	4/1/
Parent Entity Business Legal Name	0			ReqDoc_231_Worker	Business License Workers Compensatio General Liability	Approved	4/1/
	0	Navigator Organiza	0	ReqDoc_231_Worker ReqDoc_231_General	Business License Workers Compensatio General Liability Business License	Approved n Approved Approved Approved	4/1/

1. Complete required fields and click on the "Save" button

Entity Name Nav Test Entity v.2	Create	Entity File	
	* Entity File Name	* Entity	Ĩ.
Fachibus Indiana	Verification Report	Nav Test Entity v.2 ×	
Entity Inforn			New
Entity Name	* File Type 🔘	File Details	TUS EXPIRAT
Nav Test Entity v.	Verification Report	For the Month of June 2017	omitted
Parent Entity			proved
-			proved
Business Legal Nam		Expiration Date	proved
Nav Test Entity 2			proved
Website Address	Created By	Last Modified By	proved

COVERED



2. Click the name of the file you just created

Proof of Eligibility Proof of Eligibility Approved
Proof of Eligibility Proof of Eligibility Approved
Proof of Insurance General Liability Insuran Approved
Proof Of License Proof of License Approved
W9 W9 Approved

3. Click the "Upload Files" button

Notes & Attachments (0	0
	· · · · ·
	L. Openal Plan
	Or drog files
	Or drog-files
	Or drug Nes
Little for how	Or drapfiles
Exelling Film Province	Keens
Extilic File Norme Vertilication Report	Koms Her Tost Existy v.2

4. Select the file you want to upload

Organize + Maurice		H.+ (3) @
Facolas E Destrop A Destroak Coultres for Surre	B Enteringen	Data monthal Papal 628(302) 527 Mar. Microsoft Scott No.
E Anast Pasa Distanta Distanta Distanta Distanta Distanta Distanta Distanta Distanta		
-	rame tradication Report	• All fries •
		1

NOTE: Required Document Entry has now been completed.



CREATING MY FILES:

My Files records are like Required Documents, but they will be used to manage any files that were not required as part of the initial application process.

A. My Files are for documents that are not considered Required Documents and a place to manage these files. To upload a new My File, first click the "**New**" button on the My Files related list.

My Files (6+)				
MY FILE NAME	FILE TYPE	STATUS EXF		
MyFile_2019_Counsel	Counselor Withdraw Re	Submitted		
MyFile_2019_Conflict	Conflict of Interest Plan	Submitted		
MyFile_2019_Other2	Other	Submitted		
MyFile_2019_Other2	Other	Submitted		
MyFile_2019_Other2	Other	Submitted		
MyFile_2019_Counsel	Counselor Withdraw Re	Submitted		
•		۱.		
		View All		

B. The following popup will appear. Enter the appropriate information and then click "**Save**" to create the file detail record.

Create My File				
* My File Name Test Report July 2017	• Entity			
* File Type Productivity Report	Status 🕐			
File Details Sample My File Details	Expiration Date			
Created By	Last Modified By			
	Cancel Save & New Save			

- (iii) COVERED
- C. The record that's created houses details about the file(s) related to it. Now that the record has been created, one or many files can be uploaded to it.

Test Report July 2017	Edit Delete Clone
My File Name Test Report July 2017 	Entity Abrazar Inc. Status and Expiration Date fields will be managed by the internal review team
File Details ① Sample My File Details	Expiration Date 0
Created By 7/27/2017 10:40 AM	Last Modified By , 7/27/2017 10:40 AM
💽 Notes & Attachments (0)	Drag and drop or select "Upload Files" to upload files to the My File record. Note that multiple files could be uploaded to a given My File record.
	frop files



MANAGE LOCATIONS

CREATING A LOCATION: The "Locations" related list, click on the **"New"** button.

	ity1		+ Follow Edit View Website		
Program Type Certified Application Entity	Phone 123-123-1234	Website www.fake.com	Billing Address		
Entity Information			Required Documentation (0)		
Account Name CommTestEntity1	Entity Status Active		My Files (0)		
Parent Account	Program Type Certified Applicat	tion Entity	Locations (1)		
Business Legal Name 0	Primary Email Addro	ess 🛈	LOCATION NAME CONTACT FIRST NAME CONTACT LAST NAME PHO		
Test Business Legal	j988663@mvrht.	net	Sample Location 1 John Smith 123		
Website Address	Primary Phone Num 123-123-1234	ber	View All		

A. Select Primary or Sub Site Location for the Record Type. There should only be one Primary Location.

New Location			
Select a record type O Primary Location Sub Site Location	Ļ		
	Cancel Next		

- B. Once all the information is completed click on the "Save" button to complete the process.

Estimated number of individuals served	Primary Location 🚯
100	Sample Location 1 ×
	Record Type Sub Site Location
ocation Details	
* Location Name	* Entity
Sample Sub Site	CommTestEntity1 ×
* Contact First Name 🕚	Contact Last Name 💿
Jane	Smith
* Phone Number 🕚	Secondary Phone Number 0
111-111-1111	222-222-2222
*Email Address 🕚	*County
jane@sampleco.com	Amador

NOTE: Changes to an existing site in the Certification Portal will initiate a Change Request for CalHEERS so the systems remain in sync. Refer to the Entity Change Requests section on Page 33 for a full list of Entity Change Requests and approvals required for the change to take effect.



ADDING SITES SERVED TO COUNSELORS

Site Served record represents the Location of the Entity, the Counselor Contact records and the Site Served Records are linked. If a Counselor changes the location, they serve the information must be updated in the Certification Portal.

VIEWING SITES SERVED:

Each Location can be associated with a set of Counselors that are responsible for serving the site. These associations are managed through the Sites Served related list. The Sites Served related list is displayed on both the Location and the Counselor Contact record pages.

hysical City Physical State acramento CA	Physical Zip Code 95834	List of Counselors that serve this Location
	73507	
Estimated number of individuals served	Primary Location	Site Served (4) New
21	Comm User Site 1	SITE SERVED NAME COUNSELOR CONTACT
	Record Type	Site-0021 Counselor1 Test
	Sub Site Location	Site-0054 Jimmy Kemmel
Location Details		Site-0059 Jimmy Neutron
Location Name	Entity	Site-0060 Elmer Fudd

Location view of Sites Served

C	ounselor1 Test				+ Follow Edit Send Ema
lei l	Entity Name CommTestEntity1	Phone(2) ¥ 111-222-4337	Email sam@saasfocus.com	Contact Owner	
				-	
lam	e				Related Entities (1)
lame		Entity	Name		ENTITY NAME CALHEERS EMAIL/USER
Couns	elor1 Test	Com	mTestEntity1	5	CommTestEntity1
orti	fication			100	+
eru	lication				View All
Sertific	ation Status	Certif	ication Date		
Certifi	ed	7/11	/2017		Counselor Files (3)
Counse	ior Certification Number	Recen	tification Due Date		COUNSELOR FILE NAME FILE TYPE
10000	10003				CECAgreement.pdf CEC Agreement
	act Information				CMMCPE Insurance A., CMMCPE Insur
ont	act Information		List of Location		CECAgreement.pdf CEC Agreement
mail		Title	that this		
iam@s	aasfocus.com		Counselor serve	s	View All
hone		Depa	tment		
111-2	22-4337				D Site Served (2)
					SITE SERVED NAME LOCATION CF
Other F 144-5	hone 55-6221	Conti	ict Type		Site-0021 Comm 1 Sub Site 3/
					Site-0067 Sub Site 3 7/
	Address	Birthe			*
2340	Council Blvd,	5/13	/1991		View All

Counselor view of Sites Served



CREATING LOCATION SITES SERVED:

Select the "New" button from the Site Served related list.

Sit	ATIONS > COMM 1 SUB SITE e Served is • Updated a few seconds ago	\rightarrow	New
	SITE SERVED NAME	COUNSELOR CONTACT	
1	Site-0021	Counselor1 Test	Ţ
2	Site-0054	Jimmy Kemmel	Ţ
3	Site-0059	Jimmy Neutron	Ţ
4	Site-0060	Elmer Fudd	v

Sites Served related list (View All mode)

Populate the Location field with the name of the site location and populate the Counselor Contact field with the name of the counselor that will serve the site. One of the two fields will automatically be populated depending on which related list was selected from (i.e. Counselor vs. Location). Click "Save" (or Save & New to create another).

	Create Site Served	
Site Served Name		
*Location Comm 1 Sub Site Counselor Contact Tiger Woods	×	
Created By	Last Modified By	
		Cancel Save & New Save

Saving Site Served

CERTIFICATION PORTAL ENTITY USER OVERVIEW



ENTITY CHANGE RQUESTS

CHANGE REQUESTS:

Most changes to your entity's information can be made by simply editing the information. To do so, click the "Edit" button in the upper right side of the "My Entity" page. If you need to edit an existing site, click the down arrow button next to that site, and click "Edit".

	ty1		+ Follow Edit	View Website
rogram Type ertified Application Entity	Phone 123-123-1234	Website www.fake.com	Billing Address	
Entity Information			Required Documentation (0)	New
Account Name	Entity Status			
CommTestEntity1	Active		🖪 My Files (0)	New
Parent Account	Program Type Certified Applic	ation Entity	S Locations (1)	New
Business Legal Name	Primary Email Add	Iress 🚯	LOCATION NAME CONTACT FIRST NAME CONTACT I	AST NAME PHC
Test Business Legal	j988663@mvrh		Sample Location 1 John Smith	123
Website Address	Primary Phone Nu	mber 0	٢)√iour All
www.fake.com	123-123-1234			View All

NOTE: Active Entities Change Request records will automatically be created when information is modified on your Entity or any records related to the Entity (e.g. Contacts, Locations, Sites Served etc.).



Certain changes are tracked by Covered CA and are synced with CalHEERS. There are some changes that require approval by Covered CA before they can be applied. You can make changes to the Entity within the Certification Portal. The table below denotes which changes are tracked and updated in CalHEERS and which changes require approval from Covered CA.

Section	Field	Approval Required	CalHEERS Update
1.0 Entity Information	Entity Name	Y	Y
	Business Legal Name	Y	Y
	Main Email Address	N	Y
	Website Address	N	Y
	Primary Phone	N	Y
	Secondary Phone	N	Y
	FEID	Y	Y
	State Tax ID	Y	Y
	Category Change	Y	Y
1.1 Organization Type	All	Y	Y
1.2 Special Populations Served	All	N	Y
1.3 Counties Served	All	N	Y
1.4 Resource Directory	All	N	Y
2.0 Location and Hours	All	N	Y
2.1 Hours of Operation	All	N	Y
2.2 Site Mailing Address	All	N	Y
2.3 Site Physical Address	All	N	Y
2.4 Spoken Languages	All	N	Y
2.5 Estimate # Individuals	All	N	Y
2.6 % OF Individuals Served	All	N	Y
2.7 Employment Industries	All	N	Y
3.0 Counselor Assignment	All	Y	Y
4.0 Entity Contact Info	All	Y	Y



Entity Change Requests are found on the right column of the 'My Entity' page.

	yl		+ Follow Edit View Website
Program Type Certified Application Entity	Phone 123-123-1234	Website www.fake.com	Billing Address
Entity Information			Required Documentation (0)
Account Name	Entity Status		
CommTestEntity1	Active		My Files (0)
Parent Account	Program Type Certified Applicat	ion Entity	S Locations (1)
Business Legal Name			LOCATION NAME CONTACT FIRST NAME CONTACT LAST NAME PHC
Test Business Legal are cl	nge Request records reated whenever a se racked changed are		Sample Location 1 John Smith 123
Website Address www.newsite.com	captured. 123-123-7890		View All
Category	Secondary Phone Nu	ımber 🕕	Entity Change Requests (2)
Government			CHANGE REQUEST RECORD TYPE CREATED DATE CREATED
Federal Tax ID 🕚	State Tax ID		CR-2944 Change Request 7/28/2017 11:22 AM Comm U
12-3456789	There are three Chang Reque		CP 2942 Change Request 7/28/2017 10:32 AM IPAS Dat
Organization Type 🕕 Labor Unions	Request, Withd Disclosur	rawal Request,	, View All

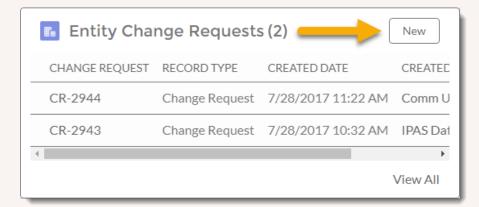
Select a Change Request record in the list to view all the changes associated with it.

			Clor	Submit for Approv
nange Request		Entity		
R-2944		CommTestEntity1		
umber of Changes		Record Type		
		Change Request		
atus				
ubmitted				
Comm User 1, 7,	/28/2017 11:22 AM List w	ill display all changes	(28/2017 11:22 AM	
Comm User 1, 7,	that w	vill display all changes ere captured, showing old and new values.	/28/2017 11:22 AM	
Comm User1, 7,	that w the	ere captured, showing	28/2017 11:22 AM	
	that w the	ere captured, showing	28/2017 11:22 AM	
Entity Ch	that w the	ere captured, showing old and new values.]	*
Entity Cha	anges (4)	ere captured, showing old and new values.	NEW VALUE	v v
Entity Ch. FIELD TYPE Account	that w the anges (4) FIELD NAME Does the entity serve the disabled?	old and new values.	NEW VALUE No	
Entity Ch. FIELD TYPE Account Account	that w the anges (4) FIELD NAME Does the entity serve the disabled? Primary Phone Number	old and new values.	New Value No 123-123-7890	

WITHDRAWAL REQUESTS:

If an Entity would like to withdraw from the program, they can do so by submitting a request through the "Entity Change Request". To submit a Withdrawal Request, follow the steps below.

A. Click on the "New" button on the Entity Change Request related list.



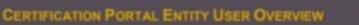
B. Choose Withdrawal Request for the Record Type.

New Enti	ty Change Request
Select a record type	Withdrawal Request Disclosure Update Cancel Next

C. In the 'Reason for Withdrawal' box, indicate the reason and click Save.

Create Entity Change Req	uest: Withdrawal Request
Change Request	•Entity
Status Submitted * Reason for Withdrawal	Record Type Withdrawal Request
Sample reason for withdrawing from the program]	
Created By	Last Modified By
	Cancel Save & New Save

COVERED





Once the record is saved it will be submitted for approval to the Certification Services Section. Your Entity will be withdrawn from the program upon approval of the request.

CR-2945					Cle
Change Request CR-2945			Entity CommTestEntity1		
Status Submitted			Record Type Withdrawal Request		
Reason for Withdrawal Sample reason for withdrawing from t Created By Comm User1, 7/28/2017 11:51 A	M N	/ithdrawal request automatically be ubmitted for appro to the Covered C/	val	2017 11:51 AM	
		review team.			
Approval History (2)	STATUS	COMMENTS		DATE	Recall
	STATUS Pending	COMMENTS		DATE 7/28/2017 11:51 AM	Recall
STEP NAME			uest submitted by com	7/28/2017 11:51 AM	

COUNSELOR WITHDRAWAL:

Entities can withdraw a counselor on their behalf by doing the following steps:

A. Click on the "New" button on the Entity Change Request related list.

Change Re	Record Type	Created Date	Created By	
CR-24874	Change Request	11/15/2019 2:1	Rajender Mittap	-
CR-24400	Change Request	11/7/2018 9:16	Sys Admin	-
CR-24369	Change Request	11/7/2018 9:10	Sys Admin	•
CR-24368	Change Request	11/7/2018 9:10	Sys Admin	-
CR-24367	Change Request	11/7/2018 9:10	Sys Admin	•
CR-24077	Change Request	11/2/2018 11:5	Sys Admin	

B. Choose Withdrawal Request for the Record Type.

Select a record type			
	۲	Withdrawal Request	
	0	Disclosure Update	

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CERTIFICATION PORTAL ENTITY USER OVERVIEW

C. In the 'Reason for Withdrawal' box, indicate the reason and click Save.

142	
Please list the full name of the	e counselor(s) to be withdrawn.
*Entity	
Search Accounts	Q
Courselor	
Search Contacts	q
Draft	for the councelor(s) withdrawal
Draft Make sure to state the reason	n for the counselor(s) withdrawal.
Draft	n for the counselor(s) withdrawal.
	n for the counselor(s) withdrawal.
Draft Make sure to state the reason	n for the counselor(s) withdrawal.
Draft Make sure to state the reason *Reason for Withdrawal	n for the counselor(s) withdrawal.
Draft Make sure to state the reason	n for the counselor(s) withdrawal.
Draft Make sure to state the reason *Reason for Withdrawal @ Information	
Draft Make sure to state the reason *Reason for Withdrawal @ Information	Record Type

COUNSELOR MANAGEMENT

The Counselors tab in the top navigation bar is where all your entity Counselors will be managed. The tab contains a series of sub tabs that are each described below.

ALL COUNSELORS

The All Counselors tab provides a list of all Counselors that are affiliated with the Entity and provides a resource for adding new Counselor users.

♠ MY ENTITY COUNSELORS	COVEREDCA.COM CONTA	CT SUPPORT		
ALL COUNSELORS COUNSE	ELOR OVERVIEW COUNSE	LOR PROGRESS	AGREEMENT STATUS	5 TRAINING MORE
To add information about individuals categories that need to be completed After you have completed the infor- upload their required documentatio	for each individual affiliated with		Add new	beled, "Add Counselor". There are 3 ddress, and profile information). plete their profile information and
Counselors		_		+ Add Counselor
NAME	Click to view Contact	PROFILE	SITES SERVED	MULTI-AFFILIATE
Barker, Sofia	record	Incomplete		
Chao, Janet	Certified		Primary Location	
Cloud, Cumulus		Incomplete		

NOTE: There is no way to delete inactive counselors from this list at this time.



ADDING A NEW COUNSELOR

This tab displays all currently rostered counselors. In order to add a new counselor, select the **Add Counselor** sub tab.

(ii) Sean	ch		SEARCH	A HAN SOLO -
COVERED				
MYENTITY COUNSE	LORS COVEREDCA.COM CON	TACT SUPPORT		
COUNSELORS COUN	SELOR OVERVIEW COUNSELO	R PROGRESS AGREEMEN	IT STATUS TRAINING	
	s that you want to affiliate with the Entity a ted with the Entity as a potential Courselo		button labeled, "Add Counselor". There are 3 office information).	categories that need to be
			ey can complete their profile information and	d upload their required
iunselors (9)				+ Add Courselor
NAME	CERTIFICATION	SITES 5	SERVED	
💌 Calrissian, Lando		Main Si	be	
👻 Fett, Boba				
👻 Kingstonia, Roberto				
👻 Organa, Leia	Pending	Malin Si	be	
	Decertified - Did no	ot complete annual Ce		
👻 Solo, Han				
👻 Solo, Ben	Incomplete Counse	lor Agreement		
👻 Trent, Brian		Main Si	te	
		Page 1 of 1		

Once on this page, fill out all information with an asterisk next to it. When done, select the Create Counselor button to complete the initial onboarding process.

L COUNSELORS				POR	τ		
	COUNSELOR	OVERVIEW 0	OUNSELOR PROGR	ESS	AGREEMENT STATUS TRAINING		
Back to Counselors							
wCounselor							
ise hover over the G	icon for more infor	rmation about an iter	m				
				oddre	ss for different individuals		
Details							
CA Driver's License N	Number or State ID				* ID Type		0
				•	Select	-	
Legal First Name					Select * Legal Last Name	•	
				•		•	0
						•	•
Email						•	
Legal First Name Email Confirm Email Addre	55					•	0
Email Confirm Email Addre						•	•
Email	vidual *					•	0

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The **Counselor Overview** tab displays a report showing the certification overview of all the counselors.

		JNSELOR OVERVI		OGRESS AGREEMEN			
OVERVIEW	OF COUNS	ELOR STATUS					Constitution Carbon
			Record C	Jount			Certification Status Certified
			di Osma				Counselor Ready for Training
			(sk.Osral)				In Training 🥥
			(15,195)				Training Complete
s of Today at 4:	01 PM		1 (205) (207) (207)	CALERO A			
Total Reco	verview	of Counse	lor Status (t)			© T	C Export
Total Reco	verview	PROFILE	COUNSELOR ACTIVE	CERTIFICATION	CERTIFICATION	© 	C C Export
Total Reco 11	verview	PROFILE		CERTIFICATION STATUS	CERTIFICATION	EMAIL	en C' R Export
Total Reco 11	verview	PROFILE STATUS	COUNSELOR ACTIVE				
Total Reco 11 FIRST NAME Magee	LAST NAME	PROFILE STATUS -	COUNSELOR ACTIVE STATUS	STATUS		EMAIL duis-elementu	
Total Reco 11 FIRST NAME Magee Kendall	LAST NAME † Fitzgerald	PROFILE STATUS	COUNSELOR ACTIVE STATUS Active	STATUS Certified		EMAIL duis-elementu	um@amet.com
Total Reco 11 FIRST NAME Magee Kendall Herrod	LAST NAME † Fitzgerald Gallegos	PROFILE STATUS	COUNSELOR ACTIVE STATUS Active Active	STATUS Certified Certified		EMAIL duis-elementu	um@amet.com que@tempor.net
Total Reco 11 FIRST NAME Magee Kendall Herrod Brock	LAST NAME † Fitzgerald Gallegos Hicks	PROFILE STATUS - - -	COUNSELOR ACTIVE STATUS Active Active	STATUS Certified Certified Certified Counselor Ready for	NUMBER - - - -	EMAIL duis.elementu cras.pellentes - mattis@orci.co	im@amet.com que@tempor.net
Total Reco 11 FIRST NAME Magee Kendall Herrod Brock	LAST NAME † Fitzgerald Gallegos Hicks Holmes	PROFILE STATUS - - -	COUNSELOR ACTIVE STATUS Active Active Active	STATUS Certified Certified Certified Counselor Ready for Training	NUMBER	EMAIL duiselementu cras.pellentes - mattis@orci.c mi.lacinia@pe	um@amet.com que@tempor.net om illentesquehabitantmorbi.com
Total Reco 11 FIRST NAME Magee Kendall Herrod Brock Lillith Blaine	LAST NAME T Fitzgerald Gallegos Hicks Holmes Kane	PROFILE STATUS - - - - -	COUNSELOR ACTIVE STATUS Active Active Active	STATUS Certified Certified Certified Counselor Ready for Training Certified	NUMBER	EMAIL duis.elementu cras.pelientes - mattis@orci.c mi.lacinia@pe soliicitudin.ad	um@amet.com que@tempor.net om llentesquehabitantmorbi.com
Total Reco 11 FIRST NAME Magee Kendall Herrod Brock Lillith Blaine August	LAST NAME Trizgerald Gallegos Hicks Holmes Kane Merrill	PROFILE STATUS - - - - -	COUNSELOR ACTIVE STATUS Active Active Active	STATUS Certified Certified Certified Counselor Ready for Training Certified Training Complete	NUMBER	EMAIL duis.elementu cras.pellentes - mattis@orci.c mi.lacinia@pe sollicitudin.ad mattis.ornare	am@amet.com que@tempor.net om illentesquehabitantmorbi.com lipiscing.ligula@lobortistellus.net
Total Reco 11 FIRST NAME Magee Kendall Herrod Brock Blaine August Ethan	LASTNAME Triggerald Gallegos Hicks Holmes Kane Merrill Perry	PROFILE STATUS - - - - -	COUNSELOR ACTIVE STATUS Active Active Active	STATUS Certified Certified Counselor Ready for Training Certified Training Complete Certified	NUMBER - - - - - - - - - - - - - - - - - -	EMAIL duis.elementu cras.pellentes - mil.lacinia@pe sollicitudin.ad mattis.cornare semper.et.laci	im@amet.com que@tempor.net om ilientesquehabitantmorbi.com iipiscing.ligula@lobortistellus.ne @egetmollis.org
Total Reco 11 FIRST Wagee Kendall Herrod Brock Lillith Blaine August Ethan Keane	LAST NAME T Fitzgerald Gallegos Hicks Holmes Kane Merrill Perry Roberson	PROFILE STATUS - - - - - - - - - - - - - -	COUNSELOR ACTIVE STATUS Active Active Active	STATUS Certified Certified Certified Counselor Ready for Training Certified Training Complete Certified In Training	NUMBER - - - - - - - - - - - - - - - - - -	EMAIL duis.elementu cras.pellentes - mattis@orci.c mi.lacinia@pe sollicitudin.ad mattis.ornare semper.et.laci est.congue.a@	im@amet.com que@tempor.net om illentesquehabitantmorbi.com lipiscing.ligula@lobortistellus.ne @egetmollis.org inla@diam.com
Total Reco	LAST NAME T Fitzgerald Gallegos Hicks Holmes Kane Merrill Perry Roberson Russo	PROFILE STATUS - - - - - - - - - - - - - -	COUNSELOR ACTIVE STATUS Active Active Active Active	STATUS Certified Certified Certified Counselor Ready for Training Certified Training Complete Certified In Training Pending	NUMBER - - - - - - - - - - - - - - - - - -	EMAIL duis.elementu cras.pellentes - mattis@orcl.c mi.lacinia@pe sollicitudin.ad amattis.ornare semper.et.laci est.congue.a@ faucibus.lectu	Im@amet.com que@tempor.net om lientesquehabitantmorbi.com lipiscing.ligula@lobortisteilus.ne @egetmollis.org nla@diam.com)purusmaecenaslibero.org

AGREEMENT STATUS

This tab displays the status of all **Counselor Agreements** that have been submitted for approval. "Counselor Name", "Counselor File", and "Account Name" can all be clicked to take you to the related page.

ALL COUNSELOR	S COUNSELOR C	VERVIEW COUN	SELOR PROGRESS	AGREEMENT	STATUS	TRAINI	NG	MORE
Counse	elor Agreeme	nt Status			C		C Ø	Export
Total Records 2								
COUNSELOR: LAST NAME	COUNSELOR: FIRST NAME	COUNSELOR FILE: COU FILE NAME	INSELOR COUNSELOR NAME	: ACCOUNT STAT			FILE TYPE	EXPIRATION DATE
Chao	Janet	CAC Agreement	JesseTest	Subm	nitted -		CAC Agreement	-
Chao	Janet	CAC Agreement	JesseTest	Appr	oved -		CAC Agreement	-
Grand Total (2 records)								



TRAINING

The **Training** tab displays a list of all Counselors enrolled into certification training and the status of the curriculum completed.

COUNSELO	R TRAINING					
						SUA
						Complete In Progress
			9			
		ining (t)			- T # C 8	Export
	unselor Tra	ining (t)			2) (¥ @) (2) (\$	Export
Total Record	unselor Tra	ining (t)	PROGRESS	DATE STARTED	DATE COMPLETED	STATUS
Total Record	unselor Tra		PROGRESS 0%		DATE COMPLETED	STATUS
Total Record	unselor Tra	LMS COURSE Test, CEC/Navigator Certification Curriculum 2015-	10230300000	DATE STARTED	DATE COMPLETED	STATUS Complete
Total Record	unselor Tra	LMS COURSE Test, CEC/Navigator Certification Curriculum 2015- 2016 Test, CEC/Navigator Certification Curriculum 2015-	0%	DATE STARTED 5/16/2017 2:30 PM	DATE COMPLETED 5/16/2017 2:30 PM	STATUS Complete Complete

BACKGROUND CLEARANCE

The **Background Clearance** tab displays all the Counselors that have completed the Background Clearance process.

ALL COUNSELORS CO	UNSELOR OVERVIEW	COUNSELOR PROGRESS	BACKGROUND CLE	ARANCE M	ORE
Total Records	l Clearance Perc	centage	1	6 a G	ஓ Export
Background Cleara	ance Status	3	"True" indicate that Backgroun Clearance ha been complete	nd is	kyround Clearance true • false •
BACKGROUND CLEARANCE	FIRST NAME LAST	NAME BUSINESS LEGAL NAME	PROFILE STATUS	BACKGROUND CLEA	RANCE DATE
true	Janet Chao	Jesse Test	-		7/13/2017
(2 records)	Sofia Barker	Jesse Test	Incomplete		7/11/2017
false (1 record)	Cumulus Cloud	Jesse Test	Incomplete		-
GRAND TOTAL (3 RECORDS)					



NAME BADGE

The **Name Badge** tab will display Counselor Badges that have been processed and completed. This report will display for new badge requests and Badge Replacement requests. "Counselor Name" and "Counselor Badge Name" can be clicked to take you to the related page.

ALL COU	NSELORS	COUNSELOR OVERVIEW	COUNSELOR PR	OGRESS	AGREEN	IENT STATUS	NAME BADGE	MORE
	eport Counse	lor Name Badge Sta	tus (t)				7 (c)	Export
Total Rec 1	cords							
FIRST NAME	LAST NAME	COUNSELOR BADGE: COUNSELOR BADGE NAME	РНОТО	STATUS	PRINTED ON	BADGE REPLACEMENT REASON	BADGE REPLACEN REASON EXPLAIN	IENT OTHER
Sofia	Barker	BN-12760		Printed	7/28/2017	-	-	
Grand Total (1 record)								

DELEGATION CODE

Clicking the counselor's name on the Counselor Delegation Code report will take you to that counselor's Contact Record, where you can find their **Delegation Code** under the "Related" tab

ALL COUNSE	LORS COUNSEL	OR OVERVIEW	COUNSELOR PROG	RESS	AGREEMENT STATUS	DELEGATION CODE	MORE
Cou	स Inselor Delega	ation Code			٢	Texport]
Total Records 5							
			Select a Contact to	-			
FULL NAME	ACTIVATION DATE		view Delegation				
Cumulus Cloud Janet Chao	- 7/13/2017 3:45 PM		Code				
Janet Chao	7/15/2017 5:45 PM	-					
Second Second	-	-					
Sofia Barker	7/14/2017 12:11 PM						
Grand Total (5 records)							

The **Delegation Code** can be found in the counselor's Contact record.

CONTACT	Martinez					+ Follow	Edit	Send Email
Account Name	Title	Phone	Email		Certification Status Decertified - NLI form se	nt to DOJ		
				CalHEERS Delegation Code listed for each affiliated Entity]			
Relate	d Accounts	s (1)						
ACCOUNT N/	ME	DELEGATION	1 CODE	CALHEERS	ASSISTER NUMBER			
All second second		3wqfth					[~
								View All

COVEREDCA.COM

Once the Entity Application is approved, at least one counselor for the entity has been "Certified", and all <u>'required documents</u> from the entity have been reviewed and approved, the entity will then receive credentials to gain access to CoveredCA.com.

CONTACT SUPPORT

If you need assistance regarding the certification process and/or certification portal, email <u>CommunityPartnerCertSupport@covered.ca.gov</u> or select the **Contact Support** tab and select the **My Cases** sub tab. Select the **New** Tab to create a Case to be reviewed and answered by CSS within 48 hours. Ensure to provide full details of your question or issue in the required fields of the support boxes.

		Search			SEARCH	0
ń	MYENTITY	DASHBOARDS	ITEMS TO APPROVE	COVEREDCACOM	CONTACT SUPPORT	
	TACT SUPPOR	RT MY CASES	6			New
ems •		mber • Filtered by my ca	eses • Q. Search t	his list	\$• II • C /	6 7



Once completed with full details, select "Save".

	Account Name	
ohn Doe		
Contact Name	* Status	
	Open	-
Subject	Priority	
testing 2 submitted from Portal	Medium	-
Description		
test submit by counselor		
Case Origin		
Certification Portal		
Veb Email		
Certification Portal		

Existing support cases that have been submitted can be reviewed in the My Cases sub tab.

		Searc	11				30	ARCH		0
	MY ENTITY	DASHE	BOARDS	ITEMS TO APPROV	E COV	/EREDCA		ACT SU	PPORT	
	ACT SUPPO	RT MY	CASES							
1	Cases My Cases Sorted by Case N a minute ago	umber • Filter		• Q Search t	his list			- C) • [New C
(My Cases Sorted by Case N	umber • Filter	red by my cases Subject	• Q. Search t	his list Sta V	Pri V	Date/Time Open			New
ms •	My Cases Sorted by Case N a minute ago	umber • Filter	Subject	Q. Search t		Pri V Medium		ed V		New C Y
ms •	My Cases Sorted by Case N a minute ago Cas 1 V	Cont V	Subject	Q Search t	Sta… ∨		Date/Time Open	ed V	Ca ~	C Y



To add an attachment, select the **Upload Files** button and add your document to your Case.

Case testing	g 2 submitt	ed from Portal		+ Follow
Priority Medium	Status Open	Case Number 00003395		
Case Owner			Account Name Nav Entity ABC	Case Comments (0) New
Contact Name John Doe			Status Open	Related Cases (0)
Subject testing 2 submitted from Portal			Priority Medium	
Description test submit by counselor			Date/Time Opened 12/16/2019 12:16 PM	Activity History (0)
Case Origin Certification Portal		2		Emails (0)
Web Email				
				Files (0) Add Files
				Or drop files