



COVERED CALIFORNIA
SMALL BUSINESS

plan options available through CCSB



CCSB OFFERS BOTH HMO AND PPO OPTIONS THROUGH BLUE SHIELD OF CALIFORNIA, KAISER PERMANENTE, AND SHARP HEALTH PLAN


CARRIERS	PRODUCTS AVAILABLE
Blue Shield of California	Access+ HMO, Trio HMO, PPO
Kaiser Permanente	HMO
Sharp Health Plan	Premier and Performance HMO



standard and alternate benefit designs



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 2025 Plan Summary Covered California for Small Business						
Light shading indicates plan benefit change from prior year.						
Gold (80%)	Blue Shield 350/25 PCP (PPO) Sharp 350/25 PCP (Performance HMO)	(OON) = Out of Network Blue Shield 350/25 PCP (OON)	Kaiser 250/35 PCP (HMO) Blue Shield 250/35 PCP (Trio HMO, Access +) Sharp 250/35 PCP (Premier HMO)	Kaiser 035 PCP Alt (HMO)	Kaiser 1000/40 Alt PCP (HMO)	Kaiser HDHP 1750/15% PCP ALT PCP (HMO)
Service Type	In-Network	Out of Network	In-Network	In-Network	In-Network	In-Network
Individual Deductible (if any)	Blue Shield: \$350 Sharp: \$350	\$1,000	Kaiser: \$250 Sharp: \$250 Blue Shield: \$250	\$0	\$1,000/\$250 Pharmacy	\$1,750
Family Deductible (if any)	Blue Shield: \$700 Sharp: \$700	\$2,000	Kaiser: \$500 Sharp: \$500 Blue Shield: \$500	\$0	\$2,000/\$500 Pharmacy	\$3,500
Preventive Care/Screening/Immunization	Blue Shield: No Charge Sharp: No Charge	Not Covered	Kaiser: No Charge Sharp: No Charge Blue Shield: No Charge	No Charge	No Charge	No Charge
Primary Care Visit to treat an injury, illness or condition	Blue Shield: \$25 Sharp: \$25	50% Coinsurance after deductible	Kaiser: \$35 Sharp: \$35 Blue Shield: \$35	\$35	\$40	15% Coinsurance after deductible
Other Practitioner Office Visit	Blue Shield: \$25 Sharp: \$25	50% Coinsurance after deductible	Kaiser: \$35 Sharp: \$35 Blue Shield: \$35	\$35	\$40	15% Coinsurance after deductible
Specialist Visit	Blue Shield: \$50 Sharp: \$50	50% Coinsurance after deductible	Kaiser: \$55 Sharp: \$55 Blue Shield: \$55	\$60	\$60	15% Coinsurance after deductible
Prenatal Care and Preconception Visit	Blue Shield: No Charge Sharp: No Charge	50% Coinsurance after deductible	Kaiser: No Charge Sharp: No Charge Blue Shield: No Charge	No Charge	No Charge	No Charge
Urgent Care	Blue Shield: \$25 Sharp: \$25	50% Coinsurance after deductible	Kaiser: \$35 Sharp: \$35 Blue Shield: \$35	\$35	\$40	15% Coinsurance after deductible
Laboratory Tests	Blue Shield: \$25 Sharp: \$25	50% Coinsurance after deductible	Kaiser: \$35 Sharp: \$35 Blue Shield: \$35	\$30	\$30	15% Coinsurance after deductible
X-Rays and Diagnostic Imaging	Blue Shield: \$65 Sharp: \$65	50% Coinsurance after deductible	Kaiser: \$55 Sharp: \$55 Blue Shield: \$55	\$40	\$60	15% Coinsurance after deductible
Emergency Room Facility Fee (waived if admitted)	Blue Shield: 20% Coinsurance after deductible Sharp: 20% Coinsurance after deductible	20% Coinsurance after deductible	Kaiser: \$250 Copay after deductible Sharp: \$250 Copay after deductible Blue Shield: \$250 Copay after deductible	\$350	\$350	15% Coinsurance after deductible
Emergency Room Physician Fee (waived if admitted)	Blue Shield: No Charge Sharp: No Charge	No Charge	Kaiser: No Charge Sharp: No Charge Blue Shield: No Charge	No Charge	No Charge	15% Coinsurance after deductible

- CCSB offers **Standard Benefit Designs** and alternate benefit designs in all four metallic tiers
- Alternate Benefit Designs** include high-deductible health plans compatible with HSAs.

dental insurance plans



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- CCSB offers DHMO and DPPO dental coverage options through Delta Dental.
- Dental insurance plans can be offered as an elective benefit that employers can choose to offer as part of their health insurance program.
- If an employer chooses to offer dental insurance to their employees, they must select a Dental Reference Plan and choose how much they want to contribute to their employee's dental premiums.



key benefits of CCSB



MULTI-CARRIER PORTFOLIO

Featuring Kaiser Permanente, Sharp Health Plan, Blue Shield of California

4-METAL TIER OFFERING

Groups can offer their employees choices from 1-tier, 2-tier, 3-tier or 4-metallic tiers

OUT-OF-STATE COVERAGE

Remote employees can access Blue Shield BlueCard

FEDERAL TAX CREDIT

Lower the cost of coverage for qualifying small businesses

ADMINISTRATION

Simple to understand quote, consolidated applications and **ONE SINGLE BILL.**
No Admin Fees, No Billing Fees, No Late Fees. No Recertification!

RELAXED PARTICIPATION

70% of eligible employees enrolled with CCSB or alternate creditable coverage

exclusive employer tax credits



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CCSB is the only place where qualified small businesses are able to use federal tax credits to help pay for the cost of providing health coverage to employees.

- Small Businesses could be eligible for up to 50% of premium expenses, 35% for Non-Profits
- Companies with less than 25 full-time equivalent employees (FTEs)
- Average wage less than \$65,000 to qualify
- Does not include owner, partner, shareholder, family or in-laws
- The credit is only available for two consecutive years beginning with the first year you claim the credit

COLLATERAL & CALCULATOR AVAILABLE ONLINE:

<https://www.coveredca.com/forsmallbusiness/taxcredit/>

YOUR SMALL BUSINESS COULD BE ELIGIBLE FOR A TAX CREDIT
Only available through Covered California for Small Business (CCSB)

With Covered California for Small Business (CCSB) you decide the level of coverage and provide employees with health insurance that fits your budget. Small businesses that purchase coverage through CCSB may be eligible to receive a federal tax credit to help offset the cost of providing health insurance.

The amount of credit you are eligible to receive works on a sliding scale. The smaller your business and/or the lower your annual average wage, the larger your credit will be.

Up to 50% Credit
For Profit Businesses

Up to 35% Credit
For Profit Businesses

Important Tax Information: HOW TO GET A SMALL BUSINESS CREDIT
Only available through Covered California for Small Business (CCSB)

Small Businesses that purchase coverage through CCSB may be eligible to receive a federal tax credit to help offset the cost of providing health insurance. To claim this tax credit, fill in and submit form **IRS form 8941**.

Your clients could receive*

- ① Employer that CCSB Premiums cover at least 50 percent of the cost of health coverage
- ② Fewer than 25 full-time equivalent employees (FTEs)
- ③ Average annual wage of less than \$65,000* per year per FTE

Eligible Small Business must have:

- ① Employer that CCSB Premiums cover at least 50 percent of the cost of health coverage
- ② Fewer than 25 full-time equivalent employees (FTEs)
- ③ Average annual wage of less than \$65,000* per year per FTE

Easy steps to file:

1. Check "Yes" if health insurance was purchased through CCSB.
2. Enter "California" as the jurisdiction identifier.
3. Enter employee size.
4. Check "Yes" if the Small Business has not previously received a tax credit. (These businesses that have received a credit, and check "Yes" are ineligible to receive the credit again).

Read and fill in any applicable boxes for Items 1a-2b. To complete, gather the following for that calendar year:

- Number of full-time equivalent employees (FTEs)
- Total CCSB premium paid by the employer
- Total wages paid to the employees

For more details visit the IRS Page:
<https://www.irs.gov/foia/irs-form-8941>

Access our online tax credit calculator:
<https://www.coveredca.com/forsmallbusiness/taxcredit/>

Have questions? Call your insurance broker or contact CCSB at 1-844-333-8384 or SmallBusiness@coveredca.gov

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small group eligibility and underwriting guidelines

group eligibility requirements

- Groups must have at least one but no more than 100 full-time-equivalent employees and meet certain contribution and participation requirements.
- They must have at least one employee who receives a W-2.
- The majority of eligible employees live in California.
- Employers must offer CCSB coverage to all eligible employees.
- 70% of eligible employees need to be covered by credible coverage including either CCSB or alternate valid coverage with submission of waivers.
- Employer must contribute a minimum of 50% towards the lowest cost employee only plan.

defining and calculating full-time equivalent employees

- An FTE employee is not an actual employee, but a calculation involving all part-time and full-time employees who worked during the preceding calendar year.
- If the final figure exceeds 100, then the employer is a large employer under California law and not eligible for CCSB.
- Employees who are not eligible for coverage include those employees who work less than 20 hours per week, receive a Form 1099 or are seasonal or temporary employees.
- You can find an FTE calculator within the CCSB website that helps in determining FTE count.

employer reference plan and metal tier selection

- The reference plan the employer chooses determines the amount they will contribute towards employee premiums.
- This plan is selected when the employer enrolls with CCSB and can be changed only during their annual renewal period.
- Employers can elect to offer plans in one metal tier all the way up to four adjoining tiers.
- Employees then have the option to select any plan within those coverage levels

4 METAL TIERS

Employees choose from health plans in **all four metal tiers:**



3 METAL TIERS

Employees choose from health plans in the **three touching metal tiers:**



2 METAL TIERS

Employees choose from health plans in the **two touching metal tiers:**



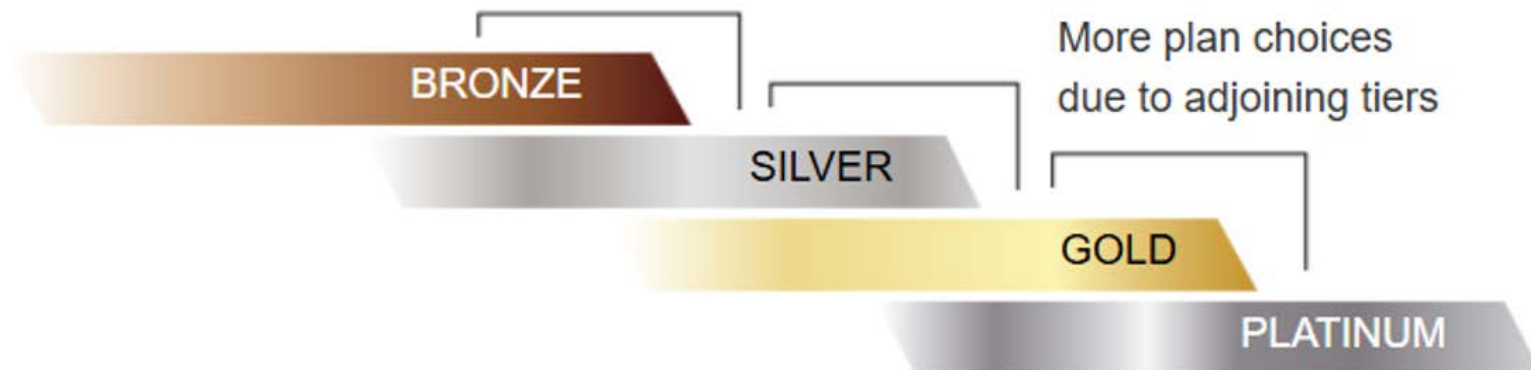
1 METAL TIER

Employees choose from health plans in the **one metal tier:**



overview of employer required premium contribution

- Employers must contribute at least 50% of the lowest cost employee-only plan in their selected metal tier (Bronze, Silver, Gold, Platinum) for eligible employees' premiums.
- They also can opt to contribute towards dependents premiums as well with no minimum contribution requirement.
- Employees' premium contribution and out-of-pocket costs will depend on the reference plan, selected metal tiers and the plan(s) the employee selects.





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new group quoting and enrollment

- CCSB new group enrollment is year-round
- There is also a Special Enrollment period each year between November 15th and December 15th where groups can apply with modified eligibility requirements
- During this period groups can apply without the requirement for 70% participation as well as the 50% minimum employer contribution requirement

resources for new group quoting



CCSB's dedicated sales team is available to support you with new group quote proposals. You can contact them directly over the phone or complete our Quote Template form available on CCSB's broker webpage. To prepare a quote we will need group census information.

First Name	Last Name	Date of Birth*	Age*	Employee Medical Status (See Reference & Examples Below)**	Home Zip Code**	Gender (M,F)	GROUP INFORMATION	
				Click HERE to get started			Company Name:	
							Address:	
							Zip:	
							Contact Name:	
							Title:	
							Phone:	
							Email:	
							Effective Date:	
							# of Eligible Employees:	
							Current Carrier:	
							Current Renewal Date:	
							Contribution:	
							AGENT INFORMATION (optional)	
							Name:	
							Agency Name:	
							Email:	
							Phone:	
							Lic#:	

Training and Certification

Agreements and Compensation

Code of Conduct

Learn About CCSB

Contact Us

CCSB Website



MyCCSB Login



Resources

Quote Template



CCSB Toolkit



general agency partner support



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CCSB partners with seven General Agencies throughout the state who are available to assist you with new group quoting, application submission, and ongoing support for your enrolled groups.



BEERE&PURVES





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enrollment process

2025 new business submission deadlines



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	DATE	WITH SUBMISSION ACKNOWLEDGMENT FORM
JANUARY	12/27/2024	01/07/2025
FEBRUARY	01/27/2025	02/07/2025
MARCH	02/24/2025	03/07/2025
APRIL	03/27/2025	04/07/2025
MAY	04/26/2025	05/07/2025
JUNE	05/27/2025	06/07/2025
JULY	06/26/2025	07/07/2025
AUGUST	07/27/2025	08/07/2025
SEPTEMBER	08/27/2025	09/07/2025
OCTOBER	09/26/2025	10/07/2025
NOVEMBER	10/27/2025	11/07/2025
DECEMBER	11/26/2025	12/07/2025

required new group documentation



- Their employer name, as reported to the California Employment Development Department.
- Their federal Employer Identification Number (FEIN) and state Employer Identification Number (SEIN).
- A copy of their local business license.
- A DE-9C reconciled by the employer or payroll records .
- The total number of full-time employees.
- The total number of part-time employees working 20 to 29 hours per week (if offering part-time employees coverage).
- Their employee roster, including addresses, hire dates, dates of birth and Social Security numbers or tax identification numbers.
- Dependent information (if offering dependents coverage), including the dependents' dates of birth to determine their age.

application submission via the MyCCSB portal or via paper application



Covered California for Small Business (CCSB)



Enrollment Application for Employers

Covered California for Small Business offers a new way for small employers to offer health insurance to employees.

THINGS TO KNOW

Who can use this application?

To be eligible to participate in CCSB, you must indicate that your business or organization meets all of these qualifications:

- Have a primary business address in California, or offer coverage to each eligible employee through CCSB servicing that employee's primary worksite,
- Have 1 to 100 Full-Time Equivalent (FTE) employees*, and
- Offer coverage through CCSB to all full-time employees, that average 30+ hours per week.

What you will need to apply

- A copy of your reconciled DE-9C
- Additional business documentation (see Step 1)
- Eligible employee information
 - Full name
 - Social Security Number or Tax Identification Number
 - Date of birth
- Home address
- Phone number
- COBRA/Cal-COBRA status
- Dependent information (if offering dependent coverage)

Employees who decline coverage must still complete an employee application and sign the appropriate section of the application.

Get help

- Online: www.CoveredCA.com/ForSmallBusiness
- Phone: Call our Service Center at (855) 777-6782
- En Español: Llame a nuestro centro de ayuda gratis al (855) 777-6782

What next?

Your information

- We'll keep your
- Your answers or
- If eligible, to fac

* Please refer to page 3 of

Covered California for Small Business (CCSB)

Enrollment and Change Request for Employees



THINGS TO KNOW

Go online

Visit CoveredCA.com/ForSmallBusiness. You'll be able to see details about Covered California's small business health insurance marketplace.

Get help

- Ask your employer who to call with questions
- Online: CoveredCA.com/ForSmallBusiness
- Phone: Call our Service Center at (855) 777-6782
- En Español: Llame a nuestro centro de ayuda gratis al (855) 777-6782

What happens next?

You'll return your completed, signed application to your employer. Your employer will send us your completed, signed application.

Alternatives

If your share of the cost of employee-only coverage is more than 8.39% of your household income, you may be able to get help paying for coverage through Covered California's individual marketplace. Visit CoveredCA.com to learn more.

Your information is private.

- We'll keep your information private as required by law.
- Your answers on this application will only be used to see if you are eligible to enroll in a Covered California for Small Business plan.

NEED HELP WITH YOUR APPLICATION? Contact your employer or your employer's Covered California Certified Insurance Agent with questions, visit CoveredCA.com/ForSmallBusiness or call us at (855) 777-6782. Para obtener una copia de este formulario en Español, llame (855) 777-6782.

1

My Company

2

Confirm Employees

3

Enrollment Setup

4

Plan Setup

My Company

Employer Information

Doing Business As*

ACME LLC

Business Legal Name

First Name*

First Name

Suffix

Preferred Language (written/spoken - If not English)

Federal COBRA*

Yes No

Federal Employer Identification Number (FEIN)*

123456789

If you are a Sole Proprietor and do not have an FEIN, enter the identifier used during tax filing.

Organization Type

Middle Name

Middle Name

Phone Number*

() _ _ - _ _

How Long Have You Been in Business?*

binder and monthly premium payments



BINDER PAYMENT

Upon submission and approval of the employer and employee applications CCSB will generate a single initial invoice with aggregated premium for all health and dental premiums. CCSB must receive the full payment by the due date indicated on the initial invoice before coverage can be effectuated.

RECURRING PAYMENTS

Recurring monthly ACH payments can be setup via the MyCCSB portal and will pull funds on the 18th of the month.

Payment Details

Note! Employers who set up recurring payment will have their payments pulled on the 18th of each month. The next recurring payment sweep will be on the 18th of current month. If your due date occurs before the next sweep, please make sure you make a one-time payment to avoid loss of coverage.

Customer Name

Lilys Farm

Routing Number*

Bank Name*

Account Number*

Verify Account Number*

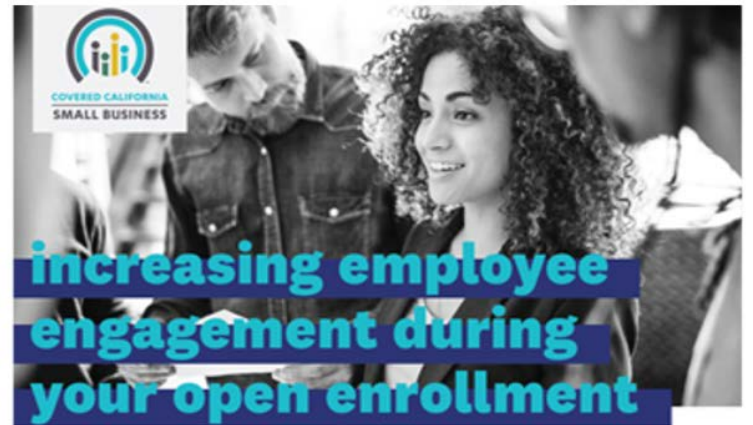


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annual renewals

annual group renewal

- CCSB sends groups written notice of their plan renewal and annual election period 60 days prior to the end of their plan year.
- During this time employers can explore renewal options and make changes to their reference plan and contribution.
- Employees then have a least 20 days to review plan options and make changes for the upcoming plan year.
- CCSB also sends employers monthly email communications beginning six months out from their renewal date to provide useful information for utilization of benefits and specific renewal guidance as they near closer to their annual renewal month.



Open Enrollment Begins in 30 Days!

Your group's Open Enrollment is quickly approaching. This is the perfect time for employees to review and adjust their health plans for the next year, without needing a qualifying event. Whether you're currently going through the process or about to start, Covered California for Small Business is here to support you!

How to Prepare for Open Enrollment

Discuss the plan options with your employees using the information in your Covered California for Small Business renewal packet. Employers should use multiple communication methods to meet the varied preferences of your employees. For example, while some may prefer information via email or in print, others might benefit more from face-to-face meetings.

federal and Cal-COBRA administration



Under **federal COBRA**, the employer must provide qualified beneficiaries with certain notices explaining their COBRA rights, how to elect COBRA, and when it can be terminated in a timely manner when they experience a loss of health coverage.

COVERAGE TYPE	WHO QUALIFIES?	WHO ADMINISTERS?
Federal COBRA	Employers with 20 or more eligible employees	Employer or an employer hired Third Party Administrator (TPA)
Cal-COBRA	Employers with 2-19 eligible employees	CCSB

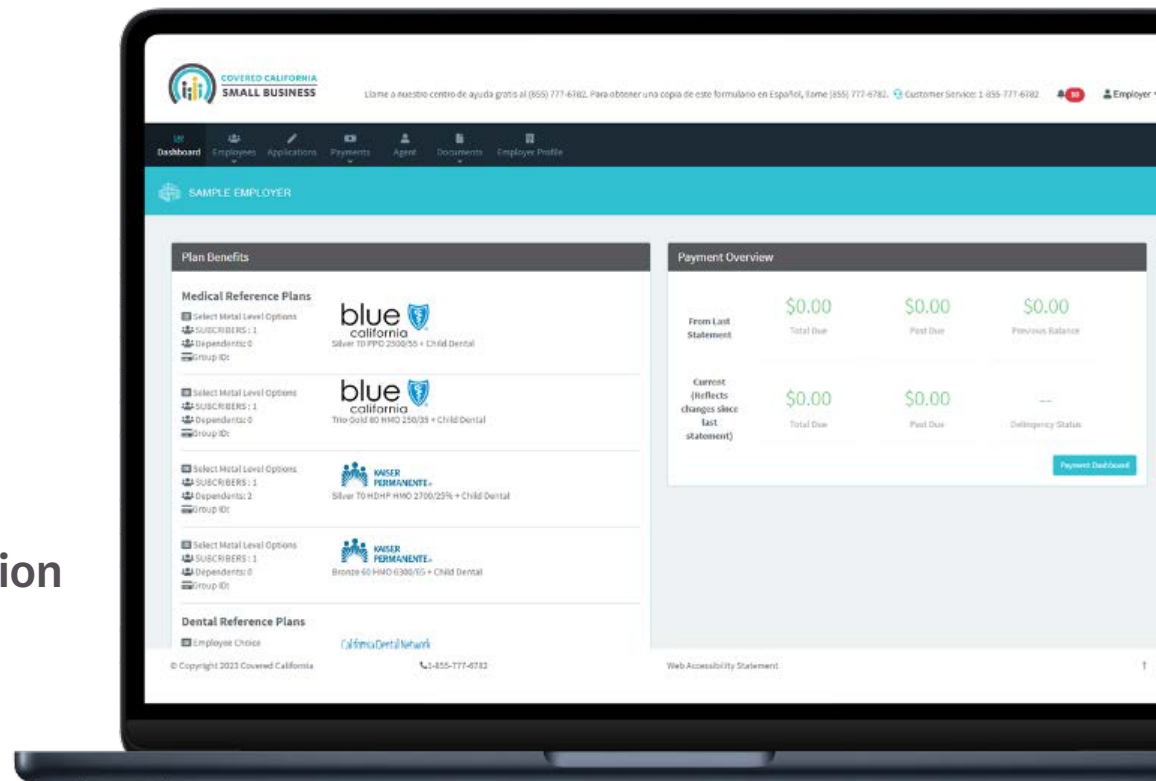
For **Cal-COBRA** (2 to 19 employees), the employer must notify CCSB of any employees or dependents who experience a qualifying event. **CCSB will send eligibility notifications to terminated employees on the employer's behalf.** Former Employees or eligible dependents must notify CCSB of their CAL-COBRA elections.

Premiums for Cal-COBRA coverage will be billed by CCSB directly to the Cal-Cobra participant.

annual group renewal

MANAGE YOUR POLICY AND EMPLOYEES ONLINE

- Easy self-serve employee Adds, Terms and Changes
 - Up to 30 days retroactively!
- Invite new hires to enroll online and compare options
- One-time and Auto-Pay Feature for Employers
- Real-time Account Balances
- View previous invoices, payments, letters and notices
- View all employer details such as reference plan, contribution, COBRA status, addresses and contact information
- Ability to have a secondary account login for employers
- Cal-COBRA packets available electronically and mailed
- Employee Census export tool
- Enhanced Renewal process online



becoming certified to sell CCSB

- Covered California has agency contracts for the sale of both Individual and Family Plan coverage, CCSB, or both.
- It is vital for agencies that wish to sell both lines of business to confirm that they are contracted appropriately.
- To begin your transition to a dual IFP/CCSB Certified Agency, Agency Managers can contact **agentcontracts@covered.ca.gov** to submit your request for a new dual agency contract.
- You can find and review all contact terms and certification details on the CCSB website.

Training and Certification	
Agreements and Compensation	
Code of Conduct	
Learn About CCSB	
Contact Us	
CCSB Website	↗
MyCCSB Login	👤
Resources	
Quote Template	↓
CCSB Toolkit	↓