



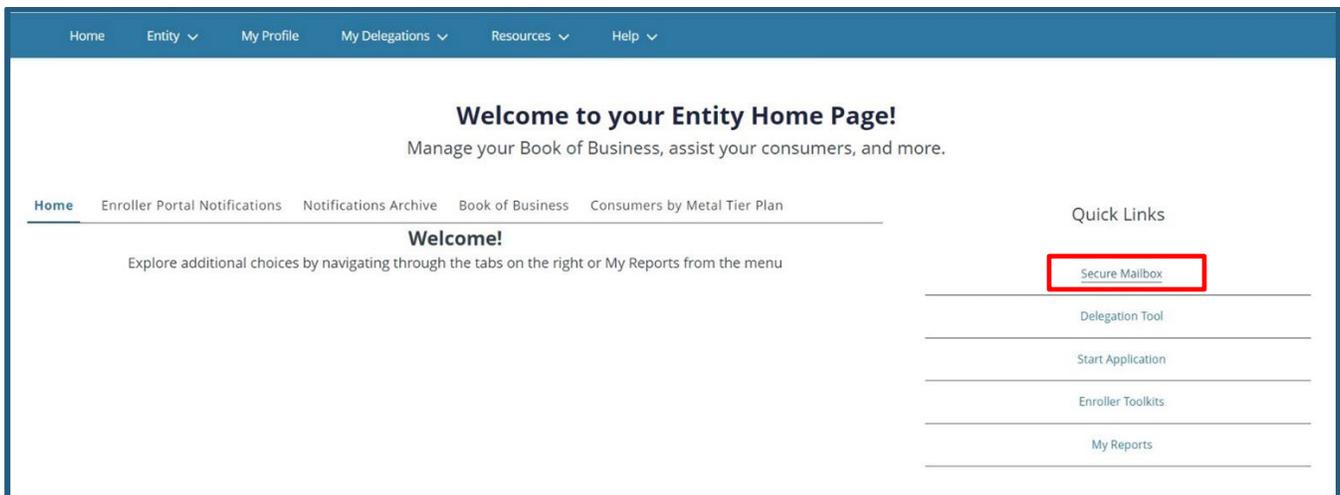
Daily Summary Emails – Notices Description Guide

Overview

CalHEERS sends out a daily summary notification alert and an Excel file to Enrollers on the Secure Mailbox page. Daily Summary Emails serve as an important enroller tool to help identify and assist any consumers in your book of business who need to take action on their CalHEERS case. Agency Managers and Primary Contacts (Entity) receive daily emails regarding all consumers within the Agency Book of Business. Agents and CECs receive daily emails regarding all consumers within their Book of Business. If there are no alerts for any consumers within your Book of Business, you will still receive a summary titled “no alerts”.

Steps

To access Portal Alerts, click on the **Secure Mailbox** link on the Agent Portal dashboard:



CalHEERS sends a *Daily Email Summary* notification Excel file to the Agency Manager, Agent, Entity Manager, and Certified Enrollment Counselor **Secure Mailbox** page.

Alert instances include:

- **Binder Payment Pending** – Every 7 days
- **Consent Valid Thru** – Sent on August 1, September 1, October 1
- **Actions Requested for Consumer** – Daily alert: Consumer has a home page alert for action(s) needed.
- **NOD Notice** – One-time alert: The consumer has received a notice that requires action
- **Enrollment Cancelled** – One-time alert
- **Enrollment Terminated** – One-time alert
- **Medicare Aged Out** – Daily alert
- **Enrollment Updates Pending** – Daily alert: An update to the enrollment is needed after a consumer completes a Report a Change (RAC).



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Below is a list of the notices that currently generate portal alerts. Included is the user-friendly name that displays in CalHEERS along with a brief description of the notice and its purpose so you can better determine what actions or communications need to occur with consumers.

Notice ID	Portal Alerts Notification Topic	Notice Name/Document Type in CalHEERS (Documents and Correspondence)	Description of Notice Type
1	CaINOD01	<p>Eligibility Notice - Initial Determination</p> <p>Eligibility Notice - Re-determination</p> <p>Eligibility Notice - Renewal Determination</p>	The Covered California combined notice of action communicates the eligibility determination decision for each household member on the application. The notice is addressed to the primary contact. Depending on the household’s situation, the notice may also tell the consumer about any verification inconsistencies and request more information.
2	CaINOD01X	Eligibility Notice – Medi-Cal to Covered California	CalHEERS determines the lowest cost Silver plan to be displayed on the consumer’s Manual APS MCT Dashboard and in the consumer’s eligibility notice. Consumer will need to confirm their information and can proceed to keep the recommended plan or select a different plan.
3	CaINOD01T	Eligibility Notice – Medi-Cal to Covered California	This notice is sent to consumers who are APTC eligible and have a new Covered California health plan automatically selected. It is sent the day after their plan is automatically selected. The notice explains that the consumer can keep, change, or cancel their Covered California plan automatically selected for them.



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4	CalNOD03	Warning - Documents Needed	One or more members in the household has conditional eligibility and needs to provide documents.
5	CalNOD11a	Reminder - Update Consent	The purpose of this notice is to inform individuals that their consent for verification has expired and they must update their consent to Covered California so their health plan can be automatically renewed.
6	CalNOD12a	Annual Renewal Notice - A	This notice contains details regarding the upcoming renewal period and encourages consumers to renew their insurance for the next benefit year. The NOD12A is sent to households with one or more individuals who are currently enrolled in a CCA health plan.
7	CalNOD12d	Annual Renewal Notice - Dental	This notice contains details regarding the upcoming renewal period and encourages consumers to renew their insurance for the next benefit year. The NOD12D is sent to households currently enrolled in only a dental plan.
8	CalNOD12e	Open Enrollment Reminder Notice	



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Notice ID	Portal Alerts Notification Topic	Notice Name/Document Type in CalHEERS (Documents and Correspondence)	Description of Notice Type
9	CaINOD62a	{TAX_YEAR} Federal Tax Form (1095-A) - Original	In early January, CalHEERS generates original 2024 forms. Wait until 1/31/2025 to report a missing form (original).
10	CaINOD62B	{TAX_YEAR} Federal Tax Form (1095-A) - Revised	This notice informs the consumer that a change to the consumer’s 1095A has been processed.
11	CaINOD63	CCHIP Notice	<p>The purpose of NOD63 Age Out Pre-notice is to provide information for the primary contact of the household for information regarding the individual(s) who is currently under CCHIP coverage and why he or she may not be eligible for CCHIP in 60 days</p> <p>The NOD63 Age Out notice will be triggered 60 days prior to the 19th birthday for the individual who is at the time under CCHIP Coverage.</p>



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12	CalNOD64	Updated Family Member(s) Eligibility	The purpose of CalNOD64 Covered California Carry Forward Informational Notice is to provide information to the consumer regarding the carry forward status. An individual who is currently eligible or conditionally eligible for APTC/CSR/CCP, and re-determined eligible, conditionally eligible, or pending eligible for MAGI Medi-Cal, will be in carry forward status until MAGI Medi-Cal eligibility is determined by county workers.
13	CalNOD69	Plan Selection Summary	This notice gives consumers information about a new enrollment, a newly added member to an existing enrollment, or a change to an existing enrollment. It will not generate if an NOD01 has generated with that enrollment update.



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14	NOD62C	{TAX_YEAR} California Tax Form (3895) - Original	The purpose of the CalNOD62C and CalNOD62D notices is to provide at the end of the tax year, FTB Form 3895 California Health Insurance Marketplace Statement to each individual (Primary Tax Filer or Primary Contact if no tax filer is indicated) who has purchased a Qualified Health Plan (QHP) policy through the Covered California Marketplace regardless of if financial assistance was accepted (subsidized or unsubsidized), along with a relevant explanatory letter.
15	NOD62D	{TAX_YEAR} California Tax Form (3895) - Revised	This notice informs the consumer that a change to the consumer's 3895 has been processed.
16	NOD70A	Medicare Alert - Response Needed	The NOD70A is sent to consumers when the PDM verification returns the consumer is eligible for or enrolled in Medicare.
17	NOD70B	Deceased Alert - Response Needed	The NOD70B is sent to consumers when the PDM verification returns the consumer as Deceased.



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18	NOD78	Medicare Age Notice	This notice communicates to consumers that they may be eligible for Medicare either in the near future, or that they may already be eligible for Medicare because they are 65 or older. It advised them to end their Covered California plan with financial help if they are eligible for Medicare.
19	NOD80	Medi-Cal Procedural Discontinuance	Informs consumers Medi-Cal is ending. The county did not receive your renewal form or other information to keep your household covered with Medi-Cal. Provides information to update to find out if you qualify for Medi-Cal or Covered California with financial help to lower the cost of a health plan.
20	NOD82	SSDI_Notice	This notice is sent to consumers when someone in their tax household is enrolled in a Covered California health plan and reported SSDI income.
21	NOD83	Over-Age_Dependent_Info	This notice is sent to consumers who have over-age dependents (OADs) enrolled in their health plans.



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22	NOD84	Plan Removal Notice	This notice is for consumers who have plans leaving Covered CA for the next benefit year. Covered CA will send the notice during the renewal period. The letter will have instructions for the consumer to update their Covered CA application and select a new plan.
23	Social Security Number Error	Social_Security_Number_Error	This notice is sent to consumers when there is an error with their Social Security number (SSN).
24	Social Security Number Needed	SSN_Needed_Notice	This notice is sent to consumers when a Social Security number (SSN) was not provided.
25	Returned Mail	Returned Mail	This notice is sent to consumers when Covered California received returned mail and we updated the home address based on the USPS.