

2026 ACA Renewal Review Checklist for Agents

Use this checklist before letting a Marketplace client passively renew, switch plans, or update an ACA application.

1. Client basics

Client name:	Marketplace application ID, if applicable:
Current plan:	Current carrier:
Current premium:	Renewal or crosswalk plan:
Projected renewal premium:	Review date:
Agent name:	Agency name:

2. Household and subsidy review

- Confirm household income estimate
- Confirm address
- Confirm employer coverage availability
- Check whether client is near the subsidy cliff
- Confirm household size
- Confirm tax filing status
- Confirm Medicaid or CHIP changes
- Ask whether income is variable or self-employment based
- Ask whether client understands subsidy reconciliation risk

Notes:

3. Passive renewal risk

- Client actively renewed
- Client has not reviewed renewal option
- Current plan crosswalked
- Premium changed
- Network changed
- Client passively renewed
- Current plan continues
- Current plan discontinued
- Deductible changed
- Prescription coverage changed

Notes:

4. Provider and prescription review

- Primary doctor checked
- Hospital or facility checked
- Prescriptions reviewed
- Prior authorization or restrictions reviewed
- Specialists checked
- Preferred pharmacy checked
- Tiers reviewed
- Expected care usage discussed

Notes:

5. DMI and document review

- Marketplace notice reviewed
- Income document needed
- Immigration document needed
- Employer coverage information needed
- Documents uploaded or mailed
- DMI pending
- Citizenship document needed
- SEP document needed
- Deadline confirmed
- Follow-up scheduled

Notes:

6. Three-option plan comparison

Option 1: Keep current or closest renewal plan

Premium:

Deductible:

MOOP:

Doctors:

Prescriptions:

Option 2: Lower premium option

Premium:

Deductible:

MOOP:

Doctors:

Prescriptions:

Option 3: Better-fit option

Premium:

Deductible:

MOOP:

Doctors:

Prescriptions:

Risk notes:

Risk notes:

Risk notes:

7. Payment and effectuation

- First premium required
- Client understands coverage does not start until first premium is paid
- Carrier portal or payment confirmation checked, if available
- Carrier payment instructions provided
- Payment follow-up scheduled

Notes:

8. Documentation

- Consumer consent captured, if applicable
- Plan comparison stored
- DMI documents stored
- Client messages stored
- Eligibility application review captured, if applicable
- Renewal notes stored
- Call recording stored, if used
- Follow-up date scheduled

Retention reminder: ACA consumer consent and eligibility application review documentation must be maintained for at least 10 years. Keep renewal records organized, searchable, and exportable.