

Attachment 1 – **When to contact your health insurance company and when to contact DC Health Link**

Example: 11/1/2016 renewal date	Current Plan Year (prior to 11/1/2016)	Open Enrollment Period for Upcoming Plan Year (8/1/2016 – 10/30/2016)		Start of new plan year (11/1/2016 and forward)	
	Health Insurance Company	Health Insurance Company	DC Health Link	Health Insurance Company	DC Health Link
Enrollment	Eligibility questions Enrollment status Enrollment Changes	Enrollment status	Eligibility questions Enrollment status Enrollment Changes	Enrollment status	Eligibility questions Enrollment status Enrollment Changes
Life changes	Life change reporting Address/email update Name, TIN, Last Name changes	Life change reporting Address update Name, TIN, Last Name changes	Life change reporting Address/email update Name, TIN, Last Name changes		Life change reporting Address/email update Name, TIN, Last Name changes
Billing	Invoice questions Payment Delinquency	Invoice questions Payment Delinquency			Invoice questions Payment Delinquency
Cards/Plan Information	Health insurance cards Benefit Booklet Benefit questions/issues Network questions/issues	Health insurance cards Benefit Booklet Benefit questions/issues Network questions/issues		Health insurance cards Benefit Booklet Benefit questions/issues Network questions/issues	
Claims	Claims status Appeals for claims	Claims status Appeals for claims		Claims status Appeals for claims	
Brokers	Commissions payment	Commissions payment	Training on DC Health Link System Client assignment/manageme nt	Commissions payment	Training on DC Health Link System Client assignment/manageme nt

Attachment 2 – **Creating your Employer Account on DC Health Link**

1. Create your account

Go to dchealthlink.com and under Small Business click on “Get Started”. Enter the requested information for your company and click “continue”. You should see the information provided to us by the insurance company, including the 2017 equivalents of your current plan offerings and a list of your enrolled employees. If the system does not display this information, the FEIN entered may be different from what we have on file. Please contact us right away at 855-532-5465.

2. Update List of Eligible Employees on the “Employees” tab

The information uploaded from your health insurance company only contains employees and dependents that were enrolled 3 months prior to the start of your new plan year. At a minimum, you must offer coverage to all employees working 30 hours or more per week. The employee roster must include all full-time employees, not just enrolled employees. If these eligible employees are not currently on your employee roster you will need to add any eligible employees. If these employees do not choose to enroll in coverage, their waiver will still help the group reach the required minimum participation and reserve their rights for special enrollment periods throughout the plan year.

3. Review “Draft Renewal Plan Year” on the Benefits tab of your DC Health Link employer account.

Your draft renewal plan year is setup with the same selections you made for your current plan year, including plan offerings, reference plan, contributions, and family member eligibility. You can make changes to these selections for the upcoming plan year if you’d like by clicking the *Edit Plan Year* button. On DC Health Link you are able to offer plans in one of three ways, you can offer all plans from one carrier, plans in one metal level from all carriers, or a single plan. You have until the 5th of the month prior to your renewal plan year start date to finalize your plan offerings, see the deadlines chart, <https://www.dchealthlink.com/smallbusiness/employer-coverage-deadlines>.

Open Enrollment Dates

Please select your Open Enrollment dates early so your employees can maximize their time to review their plan options. Your open enrollment period must be completed prior to the 13th of the month prior to your renewal plan year start date.

New Hire Eligibility

Small Businesses joining DC Health Link can choose the coverage effective date for new hires from these options:

- First of the month following or coinciding with date of hire
- First of the month following 30 days after date of hire
- First of the month following 60 days after date of hire.

Premium Contribution/Dependent Coverage

You must contribute at least 50 percent of the cost of coverage for employees. When you select a “reference plan”, the financial amount of the contribution will be determined. You will select a percentage to contribute toward each employee’s and dependent’s cost to enroll in the reference plan. You are not required to cover or contribute to dependent coverage.

Plan Offerings

Please select from the following employee choice offerings to decide what plan(s) you will make available to your employees.

You select:	Your employees can select:
1 Metal Level (Bronze, Silver, Gold or Platinum)	Any plan from any health insurance company within the selected metal level
1 Health Insurance Company (Aetna, CareFirst, Kaiser, or United Healthcare)	Any plan offered by the selected health insurance company, regardless of metal level
1 Plan	Whether or not to enroll in the selected plan

Note: If you offer two or more plans from a single health insurance company, you will be defaulted to offer all plans from that health insurance company to your employees.

Reference Plan

From your plan offerings you will select one plan to serve as your “reference plan.” Your contribution will remain fixed based on the percentage contribution set for your reference plan. Employees enrolling in any other available plan will pay the difference in premium to “buy-up” or “buy-down”. If you are unable to contribute at least 50 percent of the cost of single coverage, you will only be able to offer coverage through DC Health Link during a special annual open enrollment period as described below. For more information about reference plans, see here: <https://www.dchealthlink.com/node/1629>.

Minimum Participation

To obtain coverage, 2/3 of eligible employees must enroll in coverage or waive due to having other minimum essential coverage during the annual open enrollment period. All small groups must also have one non-owner employee enroll in coverage. If all three of these criteria are met, the group will be able to enroll in coverage. If a group is unable to contribute 50% to employee premiums or meet the 2/3 minimum participation rate, they may enroll during the exception period for January 1st coverage each year.

4. Publish your Plan Year

To finalize your plan offerings for your employees in the upcoming plan year, select the “Publish” button on the Draft Renewal Plan Year. Once you publish the plan year, your employees will receive a notice that they can come in to review the plans available to them. If you do not “publish” your plan year by the 5th of the month prior to your renewal plan year start date, your plan will be automatically published.

5. Review Employee Enrollments

After your plan year has been published, encourage your employees to enroll or waive coverage so you can meet the required minimum participation rate of two-thirds. At the end of Open Enrollment, you will receive a report of your employee elections, including a breakdown of employer and employee premium contributions. One non-owner employee must enroll for your group coverage for your group to be written.

- If you are choosing to offer the same plan(s) as were offered in the 2016 Plan Year AND your employees want to keep their current enrollment (including plan selection and enrolled family members), your employees will **not** need to take any action - we will automatically re-enroll them into the 2017 version of their current plan, which may differ slightly.
- If you want to enroll in coverage under your group, please follow the steps in this guide to access plan shopping, <https://dchealthlink.com/sites/default/files/v2/forms/Employers-Enrolling-as-Employees.pdf>.

6. Payment

Once your new plan year starts, all invoices will be sent from DC Health Link and all payments should be remitted to DC Health Link. Payments can be made online, over the phone, or via mail.