

# Small Business Guide to



**A resource for users of the DC Health Link  
Small Business Marketplace,  
including employers and their brokers.**

A screenshot of the DC Health Link Small Business Marketplace website. The top navigation bar includes links for 'ABOUT US', 'INDIVIDUALS & FAMILIES', 'SMALL BUSINESSES', 'BROKERS', and 'INSURERS'. The main content area features a large image of a man in a striped shirt and orange apron standing in a kitchen. Overlaid on the image is the text 'Welcome to the District's New Health Insurance Marketplace' and two buttons: 'Apply Now' (blue) and 'Learn More' (green).

**ABOUT US**   **INDIVIDUALS & FAMILIES**   **SMALL BUSINESSES**   **BROKERS**   **INSURERS**

Welcome to the District's  
New Health Insurance  
Marketplace

[Apply Now](#)   [Learn More](#)

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# 1 What is DC Health Link?

DC Health Link is an online marketplace where individuals, families, and small businesses can shop for high-quality, affordable coverage.

DC Health Link's small business marketplace provides small businesses:

- The same **clout in the health insurance market** that large companies already enjoy.
- **Access to a wide array of health insurance options** for their employees, instead of the limited choice of health plans most employers and employees have in today's market.
- **Transparency in prices and benefits which** requires health insurance companies to compete for your business based on price and quality.

## 1.1 Who Can Participate in DC Health Link for Small Businesses?

There are four criteria for employers to be eligible to offer coverage through DC Health Link:

1. Have a business location in the District of Columbia;
2. Have 1-50 full-time equivalent employees (in the prior calendar year);
3. Offer coverage through DC Health Link to at least all full-time employees working on average at least 30 hours per week; and
4. Have a valid federal employer identification number (EIN).

The District of Columbia is establishing one big marketplace for the sale of all small business health insurance coverage in order to provide small businesses and nonprofit organizations the same clout in the health insurance market that large companies already enjoy. Small employers that do not offer health insurance as of December 31, 2013, but wish to do so, will only be able to shop through DC Health Link. A transition period enables small businesses currently providing health benefits to their employees to wait until their plan's renewal in 2015 to purchase coverage through DC Health Link.

### 1.1.1 DC Location

DC Health Link eligible employers must either:

- (a) be headquartered in the District of Columbia, or
- (b) have a business location in the District of Columbia.

Employers that are headquartered outside of the District of Columbia can offer coverage through DC Health Link to their DC-based workers, and must offer coverage to employees in other work locations through that state's exchange.

## 1.1.2 Employer Size

DC Health Link eligible employers must have 1-50 full-time equivalent (FTEs) employees in the prior calendar year. If you are shopping for coverage effective in 2014, count the number of employees in 2013.

In 2016, employers with 1-100 FTEs will be eligible for coverage through DC Health Link.

**What are “full-time equivalent employees” (FTEs)?** FTEs is a way of calculating your total number of employees that takes into account both your full-time workers and your part-time workers as a fraction of a part-time worker. For example, if a part-time employee works 15 hours per week, that is the equivalent of 0.5 full-time workers (working 30 hours per week).

**Which employees are counted? Which employees are not counted?** Count all common law employees, not just those that are eligible for health benefits. Do not count independent contractors, leased employees, sole proprietors, partners in a partnership, or shareholders who own of 2% or more of an S corporation.

**What about self-employed individuals, including sole proprietors, partnerships, and S-corporations?** DC Health Link’s small business marketplace is designed for employers with at least one employee (not including owners). If you are self-employed, a sole proprietorship, partnership, or an S-Corporation that only employs owners, you will instead be eligible to shop in the DC Health Link’s individual and family marketplace. The individual and family marketplace also offers numerous plan options, and lower-income and middle-income individuals may be eligible for tax credits to help them purchase insurance.

**To calculate the number of “full-time equivalent (FTE)” employees you have, follow these 3 steps:**

1. Count all employees who worked on average 30 hours per week or more
2. Count the number of hours worked by part-time employees and divide by 30, rounding up to the next higher number for any fractions
3. Add the two numbers together

For example: SmallCo has 20 full-time employees working 30 hours per week and 4 part-time employees working 15 hours per week. Only full-time employees are eligible for health coverage.

- |                                  |          |
|----------------------------------|----------|
| 1. Full-time employees           | 20       |
| 2. Part time hours divided by 30 | <u>2</u> |

Total Full-Time Equivalent (FTEs) 22



**TIP: Use the simple calculator available at the beginning of the employer application to determine if you have 50 or fewer FTEs.**

**How many employees do you have?**

Full-Time  Avg. hours per part-time employee

Part Time

### Is your organization eligible to participate in DC Health Link?



**Congratulations!**

Based on the information you have provided, your organization may be eligible to participate in DC Health Link.

---

**Did you Know?**

Small employers with up to 25 employees may qualify for a tax credit to help pay for their employees health insurance premiums.

[Calculate Tax Credit](#)



**TIP:** If the simple calculator says that you may not be eligible for DC Health Link, you can still look around. This calculator is simply an estimate of your eligibility for DC Health Link. A final determination of your eligibility for DC Health Link will occur during the “Eligibility” portion of your application.

### 1.1.3 Offer Coverage to All Full-Time Employees

Employers must offer coverage to all full-time employees working on average 30 hours per week or more. Employers can choose to offer coverage to other employees include part-time employees, and choose whether or not to offer coverage to family members of employees, including spouses, domestic partners, and children.

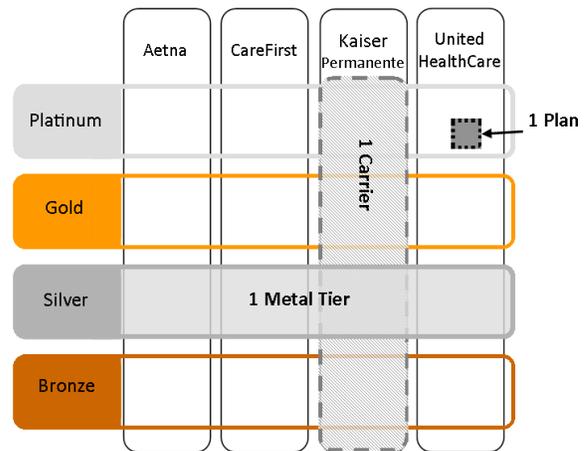
## 1.2 Open Enrollment for Small Businesses

Small businesses can enroll in DC Health Link at any time during the year. For small businesses who are unable to satisfy the minimum contribution and minimum participation requirements, there is a special annual enrollment period at the end of each calendar year where you can enroll in DC Health Link without having to satisfy these requirements. See Section 10.2 for more details.

## 1.3 Plan Selection Options

How much choice and what kind of choice are best for both you and your employees? There's no one right or wrong answer. DC Health Link gives each employer the power to decide what is best for their business.

Employers will be able to choose how many plans to offer to their employees. In DC Health Link, employers can choose from one of three options:



**Option 1:** Employer chooses **one metal level** for all employees. Employees can select plans offered by any carrier at the selected metal level. A metal level offers a simple way of estimating on average how much the carrier will pay for benefits, and how much the member will pay.

Metal Level	Plan Pays	Member Pays	Number of Plans Offered in 2014
Platinum	90%	10%	48 plans
Gold	80%	20%	112 plans
Silver	70%	30%	89 plans
Bronze	60%	40%	18 plans

**Option 2:** Employer chooses **one carrier**. Employees can select any plan offered by that carrier.

Carrier	Number of Plans Offered in 2014
Aetna	14 plans
CareFirst BlueCross BlueShield	54 plans
Kaiser Permanente	22 plans
United Healthcare	177 plans

**Option 3:** Employer chooses **one plan**. Employees choose whether to enroll in that plan.

### 1.3.1 Multi-State Plans

The U.S. Office of Personnel Management (OPM) will contract with insurers to offer multi-state plans that will be offered across multiple state exchanges. In 2014, DC Health Link's Small Business Marketplace will offer 2 multi-state plans through CareFirst BlueCross BlueShield. These plans are identified by "Multi-State" in the plan name.

## 1.4 Getting Help

Employers and their employees can get help with using DC Health Link from a licensed insurance broker, an assister, and DC Health Link Customer Service.



### What is a Broker?

Insurance brokers are licensed professionals with expertise and long-standing relationships with EMPLOYERS and INDIVIDUALS and FAMILIES, helping them identify their options and make a choice that is in their best interest. To serve these consumers brokers must have an active DC license in good standing, complete training on DC Health Link, and have contractual relationships with each carrier in DC Health Link for the market in which he/she intends to sell. There is no cost to consumers to obtain or use an insurance broker.

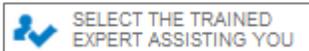


### What is an Assister?

Assisters help INDIVIDUALS, FAMILIES, and SMALL BUSINESSES in the District find quality, affordable health insurance through the new DC Health Link marketplace. Assisters are trained experts with deep roots and trusted relationships in the District and its communities. They include consumer and patient advocates, civic and faith-based organizations, business leaders, and others. To serve the needs of individuals, families, and small businesses, Assisters must complete more than 30 hours of rigorous training and pass criminal background checks prior to service. There is no cost to consumers to obtain or use a DC Health Link Assister.

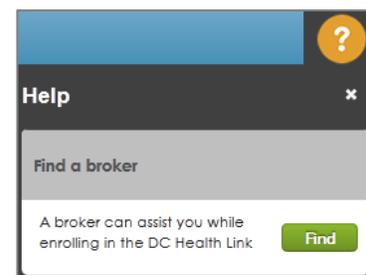
### Individuals, Families, & Employees:

Click on  at the top of the page at any time to get assistance.

If you are already working with a trained expert, click on .

### Employers:

Click on the  icon at the top right corner of the page and select “Find a Broker.”



HAVE  
QUESTIONS?



CALL US  
(855) 532-5465



SEND US  
AN EMAIL



READ THE  
FAQS

[info@DCHealthLink.com](mailto:info@DCHealthLink.com) [dhealthlink.force.com/help](https://dhealthlink.force.com/help)

## 1.4.1 Working with Your Broker

Employers are encouraged to continue working with brokers, who can assist them in offering coverage through DC Health Link. Brokers registered with DC Health Link are licensed professionals who have passed a training program to participate in DC Health Link; they understand DC Health Link plan choices, rating, policies and procedures, and health care reform on both a state and national level.

Registered brokers must be appointed by the carriers in DC Health Link; this means that in addition to meeting Exchange requirements, they have also carrier-specific training requirements on benefits and rating. Carriers also require appointed brokers to enroll in special insurance called “errors and omissions” (E&O) coverage.

The cost of using a broker is built in to the premium rates for small group insurance, both in and outside of DC Health Link. It doesn’t cost an employer anything extra to utilize the services of a broker; in fact, it’s a professional service you pay for whether you use it or not. The savvy buyer takes full advantage of this.

Brokers not only help the employer but they are also available to help employees choose the best health coverage available for the employee and his/her dependents.



**TIP:** To work with a broker in DC Health Link, click on the  icon at the top right corner of the page and select “Find a Broker.” You will be able to search for your broker by location, by language, or by name.

**During the Quoting stage of the employer application, your broker can work with you side-by-side in your account. In the Eligibility and Enrollment stages, you can assign your broker to your employer account by searching for your broker and clicking on the “Select this Broker” button. Then, your broker can pick up right where you left off and help you through the rest of the application.**

The screenshot shows a web form titled "Find a Broker:" with a close button "I'm Finished" in the top right. Below the title is the instruction "Search for assistance near my location". The form contains several input fields: "My Location" (a text box), "My Zip Code" (a text box), "Distance From Location" (a dropdown menu currently set to "Within 5 miles"), and "Language(s) Spoken" (a text box). An orange "Search" button is positioned to the right of the language field. At the bottom of the form is a blue button with the text "I know the name of who I want assistance from".

The screenshot shows a web form titled "Find a Broker:" with a close button "I'm Finished" in the top right. Below the title is the instruction "I know the name of who I want assistance from". The form contains a "Full name of Broker" text box with a "Name" label to its left. Below this is the instruction "Search for assistance by program type" followed by a list of checkboxes: "AHBE", "CHIP", "Medicaid", and "SHOP" (which is checked). There is also a link for "More Search Options". An orange "Search" button is located at the bottom right of the form. At the bottom of the form is a blue button with the text "I don't know my Broker's name".

## 2 Health Insurance in 2014 and Beyond

The federal health care reform law, the Affordable Care Act (ACA), implements many changes to small business health insurance plans beginning in 2014.

### 2.1 Metal Levels

Health insurance plans in DC Health Link are categorized into four “metal levels” (or tiers) to make it easier for employers and consumers to compare plans. The metal level provides a general idea of what portion of covered healthcare expenses will be paid by the plan, with the remaining portion to be paid by the consumer. Even though plans within the same metal level pay the same overall portion of health expenses, plans differ in other ways, such as deductibles, copayments, and coinsurance. In general, Platinum and Gold plans will have higher premiums and lower out-of-pocket costs (deductible, coinsurance, and copayments); Silver and Bronze plans will have lower premiums and higher out-of-pocket costs. The four metal levels are:

					
	Bronze	Silver	Gold	Platinum	
Plan pays...	60%	70%	80%	90%	...of health expenses.
You pay...	40%	30%	20%	10%	...in deductibles, co-pays, and coinsurance.

### 2.2 Essential Health Benefits

Beginning in 2014, all new health insurance plans must cover a comprehensive package of “essential health benefits.” DC Health Link’s benefits are based on those covered in the most popular small group health insurance policy currently sold in the District market. The benefits cover:

- Doctor visits
- Hospital stays
- Emergency room care
- Maternity and newborn care
- Prescription drugs
- Lab tests
- Preventive tests and services
- Rehabilitative and habilitative services and devices
- Chronic disease management
- Mental health care
- Substance use disorder services
- Dental care for children
- Vision care for children

In addition, plans must cover mental health and substance use disorder services at the same level as medical benefits and behavioral health services must have no day or visit limitations. Coverage for habilitative services must include applied behavioral analysis (ABA) for the treatment of autism spectrum disorder.

Insurers can also offer additional benefits beyond the essential health benefit package.

## 2.2.1 Preventive Services

The ACA requires certain preventive care services be covered with NO cost-sharing when provided by a network physician. These preventive care services are determined through evidenced-based recommendations by the U.S. Preventive Services Task Force. Covered preventive services include:

- Routine immunizations
- Smoking cessation
- Annual physical exams
- Cancer screenings
- FDA-approved contraceptives, sterilization procedures, and counseling
- Lactation support and equipment rental
- And more...

A full list of covered preventive services can be found here:

<http://www.healthcare.gov/law/about/provisions/services/lists.html>

Note that cost-sharing is permitted for office visits when preventive services are billed separately or are not the primary purpose of the visit. Also, insurance companies are allowed to use reasonable medical management techniques to determine coverage limitations, i.e. frequency, method, treatment, or setting.

## 2.2.2 Emergency Services

Small business health insurance plans must also cover emergency services out-of-network with the same level of cost-sharing as emergency services provided in-network.

“Emergency services” are acute symptoms that a prudent layperson with average knowledge of health and medicine would expect that in the absence of medical attention would place the individual’s health in serious jeopardy, or seriously impair bodily functions, body organs or parts.

Note that out-of-network providers are permitted to balance bill if permitted by state laws.

## 2.3 Member-Level Age Rates

Beginning in 2014, rates based on health status or gender are not allowed. Instead, the ACA requires that small business health plan rates be based only on the age of each employee and each family member. In other words, each employee will have a different premium based on his/her age.

Family premiums will be the total of each family member’s own age rate. Family premiums equal the sum of the employee’s premium, the spouse/partner’s premium, and the children’s premiums. Family

premiums only count the first 3 children under age 21 – any additional children under age 21 are included in the family premium at no additional cost.

There is a 3-to-1 age band limitation on rating; this means that the highest age rate can be no more than three times the lowest age rate.

While the ACA does allow carriers to charge surcharges for tobacco users, the District of Columbia does not permit any rating differences for tobacco users.

## **2.4 Out-of-Pocket and Deductible Limits**

The ACA established maximum out-of-pocket limits equal to the limits for HSA-compatible plans, indexed annually. All out-of-pocket costs, including deductibles, co-pays, and co-insurance, apply towards the out-of-pocket limit. In 2014, the out-of-pocket limit is \$6,350 for individuals, and \$12,700 for families.

In addition, small business plans can generally have in-network deductibles up to a maximum of \$2,000 individual and \$4,000 family. Some Bronze plans may have a higher deductible if needed in order to satisfy the metal level requirements.

## **2.5 Waiting Periods**

Effective in 2014, group health plans cannot make eligible employees wait more than 90 days before coverage takes effect.

### 3 Employers



**MORE CHOICES**



**MORE COMPETITION**



**MORE CONTROL**



**MORE OPTIONS**



**HELP TO REDUCE  
YOUR COSTS**



## 3.1 Five Steps to Offering Coverage through DC Health Link

Employers will need to complete five easy steps in order to enroll employees through DC Health Link: Quoting, Eligibility, Enrollment, Open Enrollment, and Payment.



**Company & Employee Information** - Provide basic information about your company, the coverage effective date you are shopping for, and a basic census of eligible employees.

**Select Plan Options & Contributions** - Review the available plans and determine which plans you want to make available to your employees. You can select one metal level, one carrier, or one plan. Select a reference plan and enter the percentage contribution you will make for each employee and/or their family members towards their premium in the reference plan.



**Select a Broker** – If you are working with a broker, assign your broker to your account. Your broker can complete the rest of your application on your behalf.

**Verify Your Employees and DC Location** - Verify your eligibility to offer employer-sponsored health insurance through DC Health Link.



**Select Open Enrollment Dates** - Select the dates for your employee open enrollment period.

**Select Eligibility Rules** - Select when coverage is effective for newly eligible employees.



**Employee Open Enrollment** - DC Health Link will send an email to your eligible employees with the open enrollment start and end dates and instructions on what they should do to view plans available through DC Health Link. You can review employee elections during the open enrollment period.



**Pay 1st Month's Premium** - For employers new to DC Health Link, you must pay the first month's premium before coverage can take effect. Payment must be received by the 12th day of the month in order for coverage to be effective on the 1st of the following month.

**Coverage Effective** - Once the first payment has been made, your group's coverage will take effect. Carriers will send enrollees member ID cards and additional information about how to access their plans.

## 3.2 What Information Do I Need to Get Started?

- Federal Employer Identification Number (EIN)**
- DC Business Address**
- Number of Full-Time Equivalent Employees (FTEs) in Prior Calendar Year**
- Employee Census** - for each eligible employee
  - **Date of Birth**
  - **Social Security Number (SSN) or Tax Identification Number (TIN)**
  - **Employee Email Address** (*for open enrollment notice only*)
  - **Date of Birth for all Dependents** (*optional – for cost estimations only*)

***Why are dates of birth important?*** Rates will be determined based on the ages of all actual enrollees, but minimum participation requirements are based on the total number of eligible employees (minus employees who have coverage elsewhere and qualify for a waiver). Additional information on member age rating and minimum participation requirements can be found in Section 2.

### 3.3 How Long Does It Take?

For planning purposes, employers (and brokers) should note that DC Health Link’s initial group set up and employee enrollment timeline will run a minimum of 34 days (“fast-track”) and no more than 90 days (longest), with the typical employer taking 45 days.

When determining when you should begin the process of offering health coverage through DC Health Link, be sure to allow adequate time for:

- Employer to review plan and contribution options and finalize offerings;
- Employees to review plan offerings and make an enrollment decision; and
- Employer to make the first premium payment no later than the 12<sup>th</sup> day of the month prior to the coverage effective date.

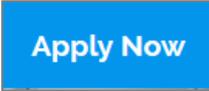
	Fast Track	Longest Track
Employer: Select Plans & Contributions	Days <b>1-7</b>	Days <b>30</b>
Employee: Open Enrollment	Days <b>14</b>	Days <b>30</b>
First Premium Payment	Days <b>1</b>	Days <b>12</b>
Carrier Administration	Days <b>18</b>	
Total	<b>34 days (minimum)</b>	<b>90 days (maximum)</b>
Example: Jan 1, 2014 Coverage	<b>Begin by Nov 26, 2013</b>	<b>Begin as early as Oct 1, 2013</b>

Sample Timeline for January 1, 2014 Coverage Effective				
Item	Fast Track		Longest Track	
	Date	Days Prior to Coverage Effective Date	Date	Days Prior to Coverage Effective Date
Employer selects plan offerings, employer contributions, and employee eligibility.	Nov 26, 2013	36 days prior	Oct 1, 2013	90 days prior
Begin Employee Open Enrollment.	Nov 27, 2013	35 days prior	Nov 1, 2013	60 days prior
End Employee Open Enrollment.	Dec 10, 2013	10 <sup>th</sup> day of the prior month	Nov 30, 2013	31 days prior
1 <sup>st</sup> month’s premium payment due.	Dec 12, 2013 <i>(by Bank Withdrawal only)</i>	12 <sup>th</sup> day of the prior month	Dec 1, 2013 <i>(by mail)</i>  Dec 12, 2013 <i>(by Bank Withdrawal)</i>	30 days prior
Coverage effective.	January 1, 2014			

## 3.4 Tips for Using DC Health Link

### 3.4.1 How to Setup an Account

**Step 1:** Click on the “Apply Now” button on the DCHealthLink.com home page.



**Step 2:** Create an Account. Be sure to select the right user type.

Register as:



Individual or Family

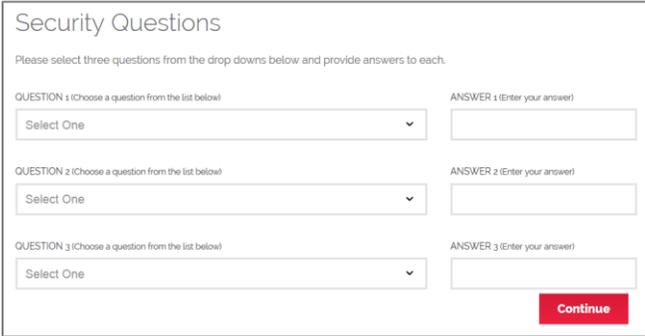


Small Business



Employee

**Step 3:** Choose your security questions and answers.



Security Questions

Please select three questions from the drop downs below and provide answers to each.

QUESTION 1 (Choose a question from the list below)

Select One

ANSWER 1 (Enter your answer)

QUESTION 2 (Choose a question from the list below)

Select One

ANSWER 2 (Enter your answer)

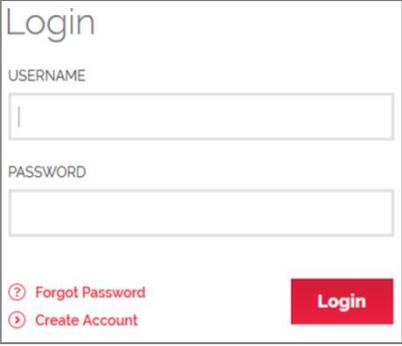
QUESTION 3 (Choose a question from the list below)

Select One

ANSWER 3 (Enter your answer)

Continue

**Step 4:** Login.



Login

USERNAME

PASSWORD

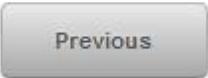
Forgot Password

Create Account

Login

Once you’ve created your account, login at any time using the  button at the top of any page. To logout, click the Logout button at the top right corner of the page. We recommend also closing your web browser for an extra measure of security.

To access your employer account at any time during the application, click the  button. To navigate to other sections of your application or your employer account:

Use  or  buttons, or click on the section you want to navigate to in the application header. Do not use your web browser’s back button.

## 4 Employer Workflow Step-By-Step

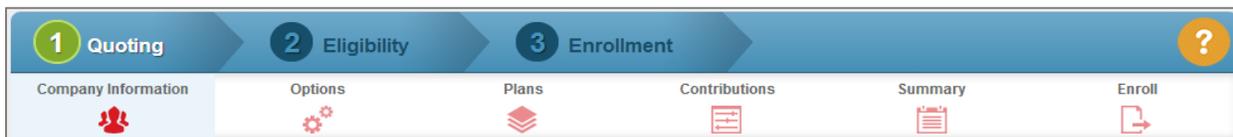
### 4.1 Quoting



**Company & Employee Information** - Provide some basic information about your company, the coverage effective date you are shopping for, and a basic census of eligible employees.

**Select Plan Options & Contributions** - Review the available plans and determine which plans you want to make available to your employees. You can select 1 metal level, 1 carrier, or 1 plan. Select a reference plan and enter the percentage contribution you will make for each employee and/or their family members towards their premium in the reference plan.

#### 4.1.1 Quoting: Company Information



##### Company Name

For company name, enter the name you do business under. You will be able to enter the legal name of the company later on in the process.

##### Coverage Effective Date

For the effective date of coverage, you may choose the first of any month you wish. If you already offer group health insurance coverage, enter your current plan's anniversary or renewal date.

You can shop for coverage effective up to six months from the date you begin your application. Small group health plan rates are based on the coverage effective date you select. Therefore, you can only see plans available in the current and next quarter. See the table on the right.

**Tell us about your company**

\*Company Name

\*Effective Date of Coverage

**DC Location**

\*Primary Location Name

\*State

\*ZIP Code

**Plan Coverage**

Who will be offered health coverage?  Employee(s) Only  Employee(s) & Dependent(s)

	Shopping	Available Effective Dates
Q1	January – March	January – June
Q2	April – June	April – September
Q3	July – September	July – December
Q4	October – December	October – March

## Locations

Enter the zip code for your DC location.

For employers with one more than one location, you can click on “Add Location” button to group your employees by the different business locations.



**TIP: You can also use the Locations feature to differentiate employee groups, such as Full-Time Employees, Part-Time Employees. You will be able to select different contributions for each Location.**

## Plan Coverage

Employers can choose to offer coverage to employees only, or employees and their family members. If you select “Employee(s) & Dependent(s)”, your eligible employees will be able to enroll a spouse, domestic partner, and children up to the age of 26. Employers who do not wish to offer coverage to all of these family members must communicate their policy to their employees. You will be able to monitor employee and dependent enrollments through the Employer Portal.

### 4.1.2 Quoting: Employee Census

Enter information about all of your employees who are eligible for health coverage. You can choose one of two methods:

1. Upload Census Template (Excel format)
2. Manual Entry

First Name	Last Name	DOB	Zip Code	EE Class	Tobacco Users
No Employees have been entered					

#### Upload Census Template

Click on “Import Census” link. In the Census Import Window, you can download the template by clicking on the “Import Census Template.xls” link.

Once you have completed the census template, click on the “Choose File” button to select your completed census file. Click on the “Import Census” button.

Download the [Import Census Template.xls](#)

Upload An Existing Template: \*  No file chosen



**TIP: When completing the census template, here’s some things to keep in mind:**

- **Enter the employee’s name carefully.** When the employee completes his/her application, the name must match exactly to what you entered on the census.
- **Employee email address is required in order for us to send your employees a notice explaining how to enroll for open enrollment.** If your employees do not have email addresses or you prefer to notify your employees yourself, enter your email address instead.

- **Dependent information is not required on the census** – if you choose to offer coverage to family members of your employees, they will be able to enter their family members when they enroll regardless of whether you included them on the census. However, we recommend including as much dependent information as you have to have a more accurate cost estimate when viewing plan and contribution options later in the Quoting process.
- **Use the Family ID # to identify which employee the dependents are family members of.** Family ID # can be any number you choose to use, but must be listed in increasing order.
- **Leave the County field blank.** The system will calculate the County based on the other address information you entered.
- **Enter the State as the two letter abbreviation in all capital letters.**

For employees or spouses under the age of 18, you may get an error while uploading them on the census. Instead, manually add those employee(s) and spouse(s).

### Manually Add Employees

If you prefer, you can manually enter each employee’s information instead of completing a census template file. Click on the “Add Employee” button. Enter your employee’s information.

Click on the “Save & Add” button if you have additional employees to enter. When you have entered your last employee’s information, click the “Save & Close” button.



#### TIPS:

- **Name** - Enter the employee’s name carefully. When the employee completes his/her application, the name must match exactly to what you entered on the census.
- **Gender** – Does not impact rates.
- **Location** – If you elected to use the Locations feature, be sure to select the appropriate Location for each employee.
- **Status** – Select “Full-Time” for each employee.
- **Average Hours Per Week** –Enter 30 hr/week.
- **Annual Income** –Disregard.
- **Tobacco Use** – Select “No” for all employees. The District of Columbia does not charge a surcharge for tobacco users.

#### General information

**Name** First Name  Middle Initial  Last Name

Suffix

**Address** Address Line 1  Address Line 2

City

Zip Code \* State \* County \*  -  -

Email

SSN

Gender

#### Employment Information

Location

Class \*

Status

Date Of Hire

Average Hours Per week

Annual Income

#### Tobacco use

Does this employee use tobacco? \*  Yes  No

#### Dependent information

Would you like to add dependents for this employee?  Yes  No

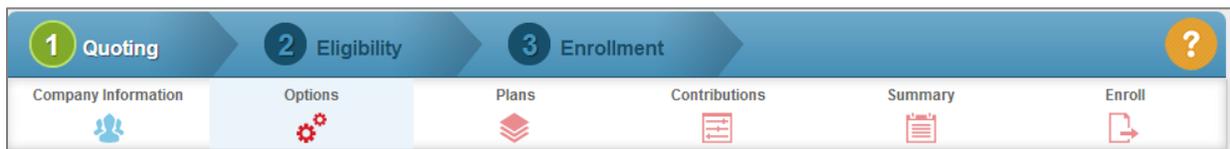
## Completed Employee Census

When you have finished entering information for all of your eligible employees and their family members, you will see a summary of your census. If you need to make any changes to an employee's information, click on the pencil icon  .

You will be able to review your census again later in the process if you need to make any changes.

Employee Details						<a href="#">Import Census</a>
▼ DC Location State:DC, ZIP Code: 20002						Employee Count: <b>20</b>
First Name	Last Name	DOB	Zip Code	EE Class	Tobacco Users	
Erma	Smith	10/10/1993	20707	All Employees	0	 
Employee Dependents: Spouse						
Jay	Jones	10/10/1992	20707	All Employees	0	 
Employee Dependents: None						
Benito	Ramirez	10/10/1991	20720	All Employees	0	 
Employee Dependents: None						
Suzie	Jackson	10/10/1990	20015	All Employees	0	 
Employee Dependents: None						
Desiree	Matthews	10/10/1989	20009	All Employees	0	 
Employee Dependents: Spouse, 4 Dependents						

### 4.1.3 Quoting: Plan Options



Next, you will select which plans to offer to your eligible employees. DC Health Link offers employers three choices for employee plan shopping:

#### Select “Multiple Carriers” Option

1. Choose ONE metal level and allow employees to choose from any plans on that metal level

#### Select “One Carrier” Option

2. Choose ONE carrier and allow employees to choose from any plans offered by that carrier
3. Choose ONE plan for the consideration of all employees

For more information on the plan selection options, see Section 1.3.

### 4.1.3.1 Multiple Carriers

If you choose to offer your employees coverage from multiple carriers, next you will need to select a Metal Level for the plans you would like to offer. The total number of plans available in each metal level is listed here for your reference.

If you want to see the plans that are available in each metal level, click on the “View Plans” link. A plan list will open below. Click on “View Plan Details” for more information on any particular plan. The premium listed next to each plan shows the total monthly cost if all employees (and their dependents) from the census enrolled in that particular plan. If you click on the total monthly premium, you can see the cost broken down for each employee and their dependents.

**Select one Metal Level**

You will choose one Metal Level (bronze, silver, gold, platinum)

Your employees can choose any plan from any Carrier within that selected Metal Level.

---

**Available Plans for: DC Location**



**Bronze**

[View Plans](#)

10 plans

Lowest Monthly premiums; Highest out of pocket costs.



**Silver**

[View Plans](#)

80 plans



**Gold**

[View Plans](#)

97 plans



**Platinum**

[View Plans](#)

39 plans

Highest monthly premiums; Lowest out of pocket costs.

**Viewing Gold Plans** Hide Plans

Show 10 entries Search:

Tier	Company	Plan	Deductible	Monthly Premium
Gold	GHMSI	<a href="#">BluePreferred PPO HSA/HRA \$1,400</a>	\$1400.00	<a href="#">\$9856.34</a>
Gold	GHMSI	<a href="#">BluePreferred PPO \$1,000 80%/60%</a>	\$1000.00	<a href="#">\$10226.53</a>
Gold	GHMSI	<a href="#">BluePreferred PPO \$2,000</a>	\$2000.00	<a href="#">\$9710.15</a>
Gold	GHMSI	<a href="#">BluePreferred PPO \$1,200</a>	\$1200.00	<a href="#">\$10185.85</a>
Gold	GHMSI	<a href="#">BluePreferred PPO \$1,000 100%/80%</a>	\$1000.00	<a href="#">\$10388.25</a>
Gold	GHMSI	<a href="#">HealthyBlue PPO \$1,500</a>	\$1500.00	<a href="#">\$10327.51</a>
Gold	GHMSI	<a href="#">BlueCross BlueShield Preferred 1000_A Multi-State Plan</a>	\$1000.00	<a href="#">\$10372.22</a>
Gold	Optimum Choice Inc.	<a href="#">GLD_OCI #2 RX-C (V79)</a>	\$1500.00	<a href="#">\$9757.54</a>
Gold	Optimum Choice Inc.	<a href="#">GLD_OCI #2 RX-C_POS (V8K)</a>	\$1500.00	<a href="#">\$9981.46</a>
Gold	Optimum Choice Inc.	<a href="#">GLD_OCI #2 RX-% (V79)</a>	\$1500.00	<a href="#">\$9862.87</a>

Showing 1 to 10 of 107 entries First Previous 1 2 3 4 5 Next Last

**Cost Impact**

Employee cost impact for BluePreferred PPO HSA/HRA \$1,400

First Name	Last Name	EE Dependents	Total
Erma	Smith	1	<a href="#">\$498.08</a>
Jay	Jones	0	\$276.83
Benito	Ramirez	0	\$276.83
Suzie	Jackson	0	\$276.83
Desiree	Matthews	5	<a href="#">\$1,335.06</a>

Primary: \$276.83  
 Spouse: \$311.11  
 Dependent: \$249.04  
 Dependent: \$249.04  
 Dependent: Included

\* Employee is not responsible for paying rates for more than 3 children under the age of 21.

### 4.1.3.2 One Carrier

If you choose to offer your employees coverage from one carrier, you have to decide if you will offer all plans offered by that carrier, or one plan.

On the next page, you can select which carrier you’d like to offer. The total number of plans offered by the carrier is listed next to each carrier’s name.



**TIP: You can change the carrier on the following page if you want to see the options offered by different carriers.**

#### 4.1.3.2.1 One Carrier – All Plans

If you selected all plans from one carrier, you will see a list of all of the plans offered by the selected carrier. All of the plans are selected – you cannot choose to offer only some of these plans.

You can change carriers by clicking on another carrier’s name in the “Narrow Plans By” list on the left side of the page. When you have made your decision, select the carrier and click on the “Continue” button.



#### TIPS:

- Click on “**View Plan Details**” to see the benefits for a particular plan
- “**Total Monthly Cost**” displayed is the total premium if every employee and family member entered on the census were to enroll in that particular plan. Click on “**Cost Breakdown**” to see the cost broken down for each employee.

1 - DC Location Plans 89 Continue

Compare Plans Email Plans **Sort By:** Premium

**My Preferences:**

HSA

Pediatric Dental

89 of 89 plans available.

**Narrow Plans by:**

**Carrier**

Aetna

CareFirst BCBS

Kaiser

United Healthcare

**Available Plans for: DC Location**

**UnitedHealthcare** [View Plan Details](#)

BRZ CH #1 RX-C HSA (VDK) - No Fund

Deductible \$8,000

My Preference Match 100%

**Total Monthly Cost: \$6,720.19 per month**

[Cost Breakdown](#)

✓ Plan Selected

**UnitedHealthcare** [View Plan Details](#)

BRZ CH #3 RX-C HSA (VDL) - No Fund

Deductible \$7,000

My Preference Match 100%

**Total Monthly Cost: \$6,774.76 per month**

[Cost Breakdown](#)

✓ Plan Selected

#### 4.1.3.2.2 One Carrier – One Plan

If you selected to offer one plan, you will see a list of all of the plans offered by the carrier you selected on the previous page. You can review the plans in more detail by clicking on “View Plan Details.” The “Total Monthly Cost” displayed is the total premium if every employee and family member entered on the census were to enroll in that particular plan. Click on “Cost Breakdown” to see the cost broken down for each employee.



**TIP: You can change carriers by clicking on another carrier’s name in the “Narrow Plans By” list on the left side of the page.**

When you have decided which plan you would like to offer, click on the “Select Plan” button and then click on the “Continue” button at the top of the page.

The screenshot displays the 'Available Plans for: DC Location' interface. On the left sidebar, there are filters for 'My Preferences' (HSA, Pediatric Dental), 'Narrow Plans by:' (Metal level: Bronze, Silver, Gold, Platinum; Deductible: Select All; Carrier: Aetna, CareFirst BCBS, Kaiser, United Healthcare). The main area shows three plan cards, each with a 'View Plan Details' link and a 'Select Plan' button. The plans are sorted by Premium.

Plan Name	Deductible	Total Monthly Cost (per month)
BRZ CH #1 RX-C HSA (VDK) - No Fund	\$8,000	\$6,720.19
BRZ CH #3 RX-C HSA (VDL) - No Fund	\$7,000	\$6,774.76
BRZ CH #3 RX-C HSA (VDM) - No Fund	\$10,000	\$7,559.54



**TIP: Due to the large number of plans available to small businesses in DC Health Link, you may occasionally see a “Warning” message. Click the “Continue” button once and you should be able to proceed without any further issues.**

## 4.1.4 Quoting: Contributions



Once you have selected the plans that you will offer to your employees, next you will select your employer contribution.

You will select one of the plans offered to your employees to serve as the “**reference plan.**” You will select a percentage to contribute towards each employee’s and dependent’s cost to enroll in the reference plan. Your contribution will remain fixed based on the reference plan. Employees enrolling in any other available plan will pay the difference in premium to “buy-up” or “buy-down.”

You must contribute at least 50% for employees, unless you are enrolling during the annual special enrollment period at the end of each calendar year. See Section 10.2 for more information about minimum contribution and the special annual enrollment period. There is no minimum contribution required for dependents.

If you used the Locations feature to designate certain groups of employees, you can set up different contributions for each Location at this time.

### Steps for Selecting a Reference Plan:

**Step 1:** Enter the percentage you wish to contribute towards employee coverage, and a percentage you wish to contribute towards dependent coverage, if available.

**All Employees: Reference plan contributions**

Enter the percentage that you would like to contribute for your employees and dependents that are listed on your roster. Choose a reference plan to calculate your estimated costs.  
[Change Contribution Type](#)

▼ DC Location  
**All Employees**

**Employer Contribution:**

20 \* Employees       12 \* Dependents

**Reference plan** [Select Reference Plan](#)

**Step 2:** Click on the “Select Reference Plan” link. A list of all available plans will appear along with the total monthly premium if all employees and dependents from your census enrolled in that plan. Select the plan you would like to use as your reference plan.

Plan Name	Est. Total Monthly Cost
UnitedHealthcare BRZ CH #1 RX-C HSA (VDK) - No Fund	\$6,720.19
UnitedHealthcare BRZ CH #3 RX-C HSA (VDL) - No Fund	\$6,774.76



**TIP:** You can view plan details after you have selected the reference plan. If you want to change reference plans, click on the “Change Reference Plan” link.

**Step 3:** Review the Contribution Summary showing the average employer contribution for employees and average employer contribution for dependents, if applicable. Remember, since each employee’s premiums will vary based on his/her age, this is just an average per-employee contribution amount.

If you want to change your percentage contribution, the Contribution Summary will be updated to reflect the new contribution amounts. You can also change your reference plan by clicking on the “Change Reference Plan” link.

When you are satisfied with your contributions, click on Continue.

**All Employees: Reference plan contributions**

Enter the percentage that you would like to contribute for your employees and dependents that are listed on your roster. Choose a reference plan to calculate your estimated costs.  
[Change Contribution Type](#)

▼ DC Location

**All Employees**

**Employer Contribution:**  
 20\* Employees       12\* Dependents

**Reference plan** [Change Reference Plan](#)

UnitedHealthcare  
 BRZ CH #1 RX-C HSA (VDK) - No Fund  
[View Plan Details](#)      Est. Total Monthly Cost **\$6,720.19**

**Contribution Summary**

Employee Only	Dependents
Avg. Employer Contribution <b>\$214.93</b>	Avg. Employer Contribution <b>\$100.90</b>
<b>Total Employer Contribution</b>	
20 Employees	<b>\$4,298.67</b>
12 Dependents	<b>\$1,210.76</b>
<b>Monthly Total</b>	<b>\$5,509.43</b>

## 4.1.5 Quoting: Summary

On the Summary page, you will see:

- Coverage Effective Date
- Locations
- Plan Selection Type (for each location, if applicable)
- Contribution Percentage & Reference Plan (for each location, if applicable)
- Total Monthly Costs

Review your summary. If you want to make any changes, click on the “Edit” link for the particular area you would like to change.



**TIP: Total Monthly Costs – Employer Contribution illustrates your monthly cost if all employees and dependents listed on the census enroll in any of the available plans. The Employee Contribution shows the range of total employee contributions each month, depending on whether or not employees enroll in a plan that is more or less expensive than the reference plan you selected.**

When you are ready to proceed, click on the “Proceed to Eligibility Application” button.

**1 Quoting**   **2 Eligibility**   **3 Enrollment**   ?

Company Information   Options   Plans   Contributions   **Summary**   Enroll

### Company Profile Summary: SmallCo

**Effective date of coverage:**  
01/01/2014

**Company And Employee Information** [Edit](#)

**Locations:** **DC Location**  
State: DC  
Zip Code: 20002

**Plan Selection Type: Metal Level** [Edit](#)

▼ DC Location  
**All Employees**  
Gold Tier - 97 Plans

**Contribution Type: Reference Plan** [Edit](#)

▼ DC Location  
**All Employees**  
**Selected Reference Plan**  
BRZ CH #1 RX-C HSA (VDK) - No Fund

**Employee:** 100.00%   **Dependents:** 50.00%

### Total Monthly Costs

**Employer Contribution**  
**\$5,509.43**  
per month

**Employee Contribution**  
Low: **\$1,210.76** per month   High: **\$7,688.58** per month

**Summary Details**  
Your company's summary has been saved. Feel free to print or share your company's profile summary for future use.

[Print](#)

[Previous](#)   [Proceed to Eligibility Application](#)

## 4.2 Eligibility



In the Eligibility section, you will be asked to provide some additional information to verify if your business is eligible to participate in DC Health Link, including:

- Your Federal Employer Identification Number (EIN);
- The number of full-time and part-time employees you had in the prior calendar year; and
- Your District of Columbia business location.

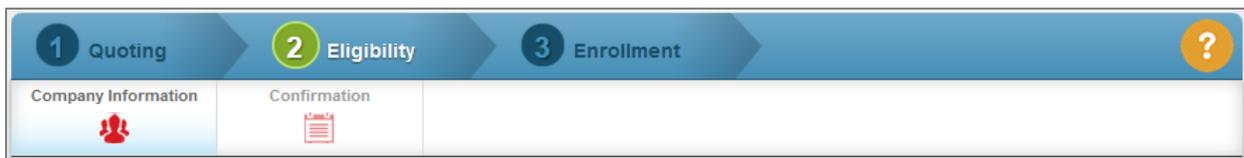
At the end of this section, you will be determined eligible or ineligible to participate in DC Health Link’s Small Business Marketplace.



**TIP:** If you are working with a broker, assign your broker to your account now. Your broker can complete the rest of your application on your behalf.

To assign your broker to your employer account, click on the  icon at the top right corner of the page and select “Find a Broker.” You will be able to search for your broker by location, by language, or by name. Click “Select this Broker” button to allow your broker to complete you application on your behalf.

### 4.2.1 Eligibility: Company Information



#### Employer Name

Enter your legal business name.

#### Doing Business As Name

This is the name your employees will see when they log in to enroll with DC Health Link.

#### Employer & Business Type

Select the appropriate options from the drop-down menu:

- Private Sector
  - C-Corporation,
  - S-Corporation,
  - Partnership, or
  - Tax-Exempt Organization
- Church/Church-Affiliated
- State/Local Government
- Foreign Government

A screenshot of the 'Employer name & address' form. It contains several input fields: '\*Employer name' with 'SmallCo, Inc.', 'Doing business as(name)' with 'SmallCo', '\*Federal Employer Identification Number(EIN)' with '89-8989898', '\*Employer Type' with a dropdown menu showing 'Private sector', and '\*Business Type' with 'S Corporation'.

## Number of Full-Time Equivalents (FTEs) in Prior Calendar Year

To calculate the number of FTEs:

$$\begin{aligned} & \text{Average Number of Part-Time Employees} \\ & \times \text{Average Weekly Hours for Part-Time Employees} \\ & \div 30 \\ & + \text{Average Number of Full-Time Employees (30+ hours/week)} \\ & = \text{Number of FTEs in Prior Calendar Year} \end{aligned}$$

Average Number of Full-Time Employees (in Prior Calendar Year)	20
Average Number of Part-Time Employees (in Prior Calendar Year)	4
Average Weekly Hours Worked by Part-Time Employees	15
*Number of Full-Time Equivalents (FTEs) in Prior Calendar Year	22

## Primary Business Address

Enter your District of Columbia business address.

## Contact Name & Address

Enter the primary contact for your business. This is an individual who will be responsible for signing your application for health coverage through DC Health Link.

You will be able to setup additional contacts later in the process, including a specific billing contact.

## Contact Preferences

All notices from DC Health Link, including your monthly invoice, will be sent via email to the primary or billing contact. If you would like to receive paper copies of the notices by mail, check the appropriate box.

### Contact preferences

Preferred phone number	*Phone type Work	*Phone number (202)555-5555	Phone number Ext. 
Secondary phone number	Phone type	Phone number (###) ###-####	Phone number Ext. 
Fax number	(###) ###-####		
Preferred spoken language	English		
Preferred written language	English		
<input type="checkbox"/> Notices and monthly invoices will be sent electronically. Check here if you also want to get paper notices by mail.			
<input type="checkbox"/> Would you like to add a secondary contact?			

## Review Your Employee Census

Review your employee census and make any changes as needed. You can import a new census template by using the “Import Census” link, or export your current census by clicking on the “Export Census” link at the bottom of the page. You can also choose to manually add additional employees using the “Add Employees” button, edit an existing employee by using the pencil  icon, or delete employees using the red **X** icon.

When you have finalized your census of eligible employees, click the “Continue” button.

### Finalize Employees

Finalize Your Employee Information. Complete the roster to confirm the employees who will be eligible to enroll in coverage.

[Import Census](#)

**DC Location** Employee Count : **20**  
State:DC, Zip Code : 20002

First Name	Last Name	Date of Birth	ZIP Code	EE Class	Tobacco Users	
Erma	Smith	10/10/1993	20707	All Employees	0	 
Employee Dependents: Spouse						
Jay	Jones	10/10/1992	20707	All Employees	0	 
Employee Dependents: None						
Benito	Ramirez	10/10/1991	20720	All Employees	0	 
Employee Dependents: None						
Suzie	Jackson	10/10/1990	20015	All Employees	0	 
Employee Dependents: None						
Desiree	Matthews	10/10/1989	20009	All Employees	0	 
Employee Dependents: Spouse, 4 Dependents						
Marcy	Ngyuen	10/10/1975	21401	All Employees	0	 
Employee Dependents: None						
Zoe	Rose	10/10/1974	20002	All Employees	0	 
Employee Dependents: None						

[Add Employee](#)

[Export Census](#)

## 4.2.2 Eligibility: Confirmation

1 Quoting    2 Eligibility    3 Enrollment    ?

Company Information    Confirmation

To confirm your eligibility for DC Health Link, check the boxes at the top of the page to verify that:

- You have 50 or fewer full-time equivalent (FTE) employees
- You will offer coverage to all full-time employees working at least 30 hours per week.

### Confirmation

\*  I attest that I employ 50 or fewer full time equivalent employees.

According to the Affordable Care Act, one of the eligibility requirements for a small employer to participate in an exchange is to provide coverage to all full time employees. By clicking on the check box below, that you are attesting that you are providing coverage to all your full time employees.

\*  I attest that I will offer coverage to all full-time employees working an average of 30 hours per week through DC Health Link (or, for multi-state employers, any other exchange serving those work locations outside of DC).

We will verify the information you provided with the state/federal database in order to confirm eligibility. By clicking on the 'Submit' button below, you agree to let us verify your information

The primary contact must provide an electronic signature.



**TIP: The name you enter for the electronic signature must match exactly how you entered your name earlier.**

## Electronic Signature

I've provided true and correct answers to all the questions on this form to the best of my knowledge. I know that if I'm not truthful there may be a penalty. I know that I must tell (DC Health Link) if anything changes about what I wrote on this application.

\*  I agree

**Job Title from Your Company**

**Signature:**

*First Name	<input type="text" value="John"/>	Middle Initial	<input type="text"/>
*Last Name	<input type="text" value="Doe"/>	Suffix	<input type="text" value=""/>

\*Date

After clicking the “Submit” button, you see the following screen confirming that you are eligible to participate in DC Health Link. You can proceed with the Enrollment process.

### Welcome SmallCo

#### Congratulations!

You have been determined eligible to participate on DC Health Link in order to provide health coverage to your employees. You should sign and submit an application to enroll on DC Health Link.

Please make sure to complete enrollment on the DC Health Link by 10/16/2013 to ensure DC Health Link participation for the requested coverage effective date of 01/01/2014.

#### Quick Links

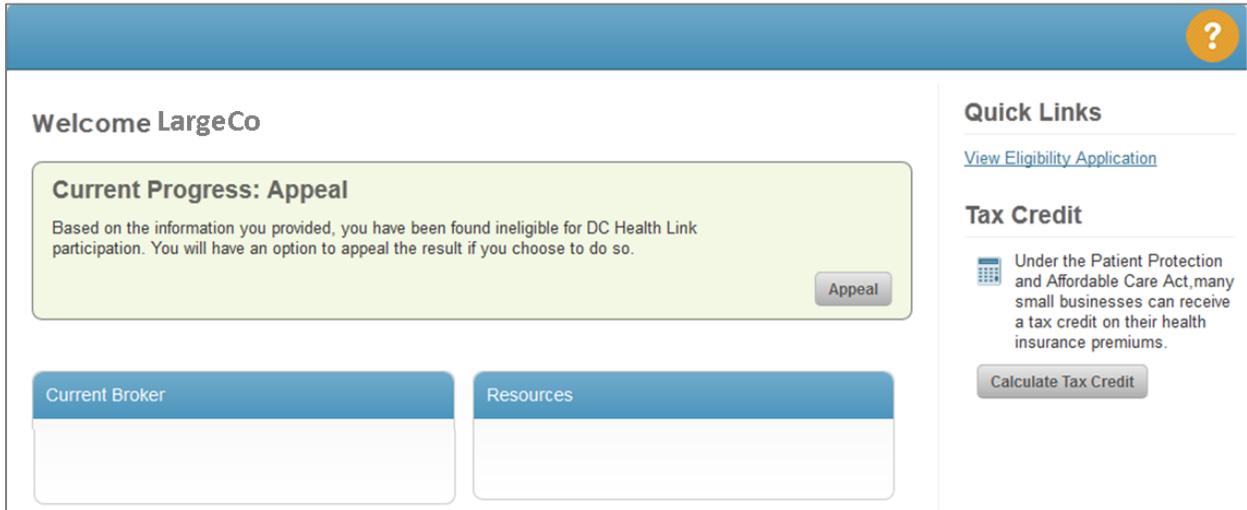
[View Eligibility Application](#)

#### Tax Credit

Under the Patient Protection and Affordable Care Act, many small businesses can receive a tax credit on their health insurance premiums.

## 4.2.3 Eligibility: Appeals

If you are determined ineligible, the employer dashboard will say: “Current Progress: Appeal” (see screenshot below). You can appeal and provide additional information to request a redetermination of your eligibility. See Section 9.1 for more details on this process.



The screenshot shows an employer dashboard interface. At the top right, there is a blue header bar with a white question mark icon. Below the header, the main content area is divided into several sections:

- Welcome LargeCo**: A greeting message.
- Current Progress: Appeal**: A prominent green box containing the text: "Based on the information you provided, you have been found ineligible for DC Health Link participation. You will have an option to appeal the result if you choose to do so." To the right of this text is a grey button labeled "Appeal".
- Current Broker**: A blue header for a section that is currently empty.
- Resources**: A blue header for another empty section.
- Quick Links**: A section on the right side with a blue header and a link: [View Eligibility Application](#).
- Tax Credit**: A section on the right side with a blue header, a small icon of a calculator, and the text: "Under the Patient Protection and Affordable Care Act, many small businesses can receive a tax credit on their health insurance premiums." Below this text is a grey button labeled "Calculate Tax Credit".

## 4.3 Enrollment



**Select Open Enrollment Dates** - Select the dates you wish to have for your employee open enrollment period. If you are new to DC Health Link, your open enrollment period must be a minimum of 14 days long. Otherwise, it must be a minimum of 30 days long. Open enrollment must close by the 10<sup>th</sup> day of the month prior to the coverage effective date.

**Select Eligibility Rules** - Select when coverage is effective for newly eligible employees.

### 4.3.1 Enrollment: Company Information



#### Select Open Enrollment Dates

Open enrollment can begin as early as 2 months prior to your coverage effective date, and must end no later than the 10<sup>th</sup> day of the month prior to your coverage effective date.

For employers new to DC Health Link, open enrollment must be at least 14 days long. When the employer renews coverage in DC Health Link in future years, open enrollment must be at least 30 days long.

#### Open Enrollment Period

\* Coverage Effective Date 01/01/2014

\*Enrollment Start Date

\*Enrollment End Date

For example, for coverage effective 1/1/2014:

	Fast Track	Longer Track
Start of Open Enrollment	11/26/2013	11/1/2013
End of Open Enrollment	12/10/2013	11/30/2013
Length of Open Enrollment	14 days	30 days



**TIP:** Keep in mind that your first premium payment is due by the 12<sup>th</sup> day of the month prior to your coverage effective date. If you follow the “Fast Track” and end open enrollment on the 10<sup>th</sup> day of the month, you will not have time to mail in your first premium payment. You will have to make your first premium payment online through our secure Bank Withdrawal.

## Review Employee Census

You will have one final opportunity to review your census of eligible employees. Use the pencil icon  to make any edits.

DC Location						Employee Count : 20
State:DC, Zip Code : 20002						
First Name	Last Name	Date of Birth	ZIP Code	EE Class	Tobacco Users	
Erma	Smith	10/10/1993	20707	All Employees	0	
Employee Dependents: Spouse						
Jay	Jones	10/10/1992	20707	All Employees	0	
Employee Dependents: None						
Benito	Ramirez	10/10/1991	20720	All Employees	0	
Employee Dependents: None						
Suzie	Jackson	10/10/1990	20015	All Employees	0	
Employee Dependents: None						
Desiree	Matthews	10/10/1989	20009	All Employees	0	
Employee Dependents: Spouse, 4 Dependents						
Gayle	Norton	10/10/1977	21042	All Employees	0	
Employee Dependents: None						
Ada	Taylor	10/10/1976	21401	All Employees	0	
Employee Dependents: None						
Marcy	Ngyuen	10/10/1975	21401	All Employees	0	
Employee Dependents: None						
Zoe	Rose	10/10/1974	20002	All Employees	0	
Employee Dependents: None						

## 4.3.2 Enrollment: Company Contribution



Review your contribution amount and reference plan selection. Click on “View Plan Details” to see more information on the reference plan you have selected.

### Company Contribution

Please confirm the company contributions for your employees.

▼ DC Location

**All Employees**

Employee \*       Dependent \*

Reference Plan: BRZ CH #1 RX-C HSA (VDK) - No Fund



[View Plan Details](#)

### 4.3.3 Enrollment: Eligibility Rules



In this section, you can select the eligibility rules for new employees.

#### New Hire Effective Date (Coverage Start Date)

You can choose any of the following:

New Hire Effective Date	Ex: Date of Hire 2/15/2014 Coverage Starts...
• Date of Hire equal to Effective Date	2/15/2014
• 1 <sup>st</sup> of the Month Following Date of Hire	3/1/2014
• 1 <sup>st</sup> of the Month Following 30 days	4/1/2014
• 1 <sup>st</sup> of the Month Following 60 days	5/1/2014

#### Coverage Termination Date

Choose one of the following:

Coverage Termination Date	Ex: Termination of Employment 2/15/2014 Coverage Ends...
• Last day of the month in which the event date occurred	3/1/2014
• Date of the event	2/15/2014

#### Special Enrollments

Coverage effective dates for employees experiencing a special enrollment are the same for all employers offering coverage through DC Health Link.

- Birth, adoption, or placement for adoption - Coverage effective on the date of the event
- Any other events - Coverage effective 1<sup>st</sup> day of the month following the event

Examples of special enrollment effective dates are illustrated in the tables on the following pages.

Date	<b>Special Enrollment – Birth, Adoption, or Placement for Adoption</b>	
March 23, 2014	Employee gains a new dependent due to birth, adoption, or placement for adoption.	
April 22, 2014	LAST DAY of 30-day Special Enrollment Period. Employee can:	
	<ul style="list-style-type: none"> <li>• Add new child,</li> <li>• Add spouse (if not already enrolled),</li> <li>• Add other existing child(ren) (even if not already enrolled), and</li> <li>• Change carrier / plan;</li> </ul>	Effective on the date of the triggering event <b>(March 23, 2014)</b> .
	<ul style="list-style-type: none"> <li>• Drop coverage (e.g. to enroll in spouse’s employer-sponsored coverage).</li> </ul>	Effective on the day prior to the triggering event <b>(March 22, 2014)</b> .

Date	<b>Special Enrollment – Any Event Other than Birth, Adoption, or Placement for Adoption</b>	
March 23, 2014	Employee gets married.	
April 22, 2014	LAST DAY of 30-day Special Enrollment Period. Employee can:	
	<ul style="list-style-type: none"> <li>• Add spouse,</li> <li>• Add new child(ren), and</li> <li>• Change carrier / plan;</li> </ul>	Effective 1 <sup>st</sup> of the month following the triggering event <b>(April 1, 2014)</b> .
	<ul style="list-style-type: none"> <li>• Drop coverage (e.g. to enroll in spouse’s employer-sponsored coverage).</li> </ul>	Effective last day of the month in which the triggering event occurred <b>(March 31, 2014)</b> .

## 4.3.4 Enrollment: Confirmation



Review the Terms & Conditions and sign the Enrollment Application. Only the primary contact will be able to sign the Enrollment Application.



**TIP:** Once you click the “Submit” button, you will not be able to make any changes to your plan selection, contributions, census of eligible employees, or your open enrollment dates.

### Terms and Conditions

The Employer agrees that in the making of this Application, it is acting for and on behalf of itself and as the agent representative of its employees and COBRA participants, and their dependents; and it is agreed and understood that the Employer is not the agent or representative of DC Health Link or the insurers participating in DC Health Link.

The Employer agrees to receive on behalf of its eligible employees and their dependents and COBRA participants the Evidence of Coverage, including attachments and all relevant notices furnished by the insurers offering coverage to the Employer through DC Health Link, and to forward such materials to these individuals.

This Group Application is part of the agreement between the Group and the insurance company or companies offering coverage to the Employer through DC Health Link.

**WARNING:** It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines.

### Electronic Signature

I've provided true and correct answers to all the questions on this form to the best of my knowledge. I know that if I'm not truthful there may be a penalty. I know that I must tell (DC Health Link) if anything changes about what I wrote on this application.

\*  I agree

\*Job Title from Your Company

Signature: \*First Name  Middle Initial

\*Last Name  Suffix

\*Date

When your enrollment application has been processed, you will be directed back to your employer account dashboard with the status of “Enrollment Completed.”



**TIP:** It may take several minutes to process after clicking the “Submit” button, before you. Do not close your browser or click the back button until this process is completed.

The screenshot displays the SmallCo employer account dashboard. At the top, there is a navigation bar with "Company" and "Employees" dropdown menus. The main content area is titled "Welcome SmallCo" and features a prominent green box with the heading "Current Progress: Enrollment Completed". Below this heading, a message states: "Our records indicate that you are enrolled with DC Health Link. By using the navigation menu you can manage your company's account." To the right of the main content is a sidebar with two sections: "Quick Links" containing "View Eligibility Application" and "View Enrollment Application" (both underlined), and "Tax Credit" containing a calendar icon, a paragraph about the Patient Protection and Affordable Care Act, and a "Calculate Tax Credit" button. At the bottom of the main content area, there are two blue-titled boxes: "Current Broker" and "Resources", both of which are currently empty.

## 4.4 Open Enrollment



At the start of your open enrollment period, we will send an email notice to your eligible employees telling them that they can now enroll in DC Health Link coverage. If you did not provide an employee email address in your census, you will need to notify employees about open enrollment separately.

Employees will be able to go to [www.DCHealthLink.com](http://www.DCHealthLink.com) at any time during the Open Enrollment period, create an account, fill out an application, and shop for plans. When shopping for plans, your employees will see the cost of the plan less your employer contribution. We take care of the member-level age rates for you.

During open enrollment, you can review the progress of your employees' elections through the Employer Portal and the Manage Open Enrollment functionality. See Section 5.3 for more information.

### Sample Employee Open Enrollment Notice

**To:** employee@SmallCo.com  
**Date:** November 1, 2013  
**Subject:** Enroll Now: Your Health Plan Open Enrollment Period has Begun

Dear Jay Jones,

Good News! Your employer, SmallCo, is making health care coverage available to its employees and contributing to the monthly premium to make the cost of coverage affordable.

You must complete an application for enrollment by December 1, 2013, for coverage effective January 1, 2014.

#### What is Open Enrollment?

Open enrollment is your annual opportunity to enroll in your employer's health plan and change plan selections. Outside of this annual open enrollment period, you will only be allowed to make changes to your health plan enrollment if you experience certain life events such as marriage, birth, adoption, etc.

#### To See Plan Options and Enroll:

If you have not already done so, you will need to create an account to initiate your enrollment by accessing DC Health Link through the following link: [www.DCHealthLink.com](http://www.DCHealthLink.com)

## 4.5 Payment



When open enrollment has ended, you need to pay the first month’s invoice. Employers are responsible for all payments to DC Health Link. DC Health Link will not accept payments from employees.



**Remember:** The first month’s premium must be paid by the 12<sup>th</sup> day of the month prior to the coverage effective date. Late payment will delay your coverage, potentially leaving employees with a gap in coverage.

Log in to your Employer Account. Click on the “Proceed to Payment” button. You can make a one-time payment, or setup automatic monthly payments.

Company ▾ Employees ▾

Welcome SmallCo

**Current Progress: Enrollment Completed**

Our records indicate that you are enrolled with DC Health Link. By using the navigation menu you can manage your company’s account.

[Proceed to Payment](#)

**Quick Links**

- [View Eligibility Application](#)
- [View Enrollment Application](#)

**Tax Credit**

Under the Patient Protection and Affordable Care Act, many small businesses can receive a tax credit on their health insurance premiums.

[Calculate Tax Credit](#)

Current Broker

Resources

**Fastest Payment Option:** Online secure Bank Withdrawal.

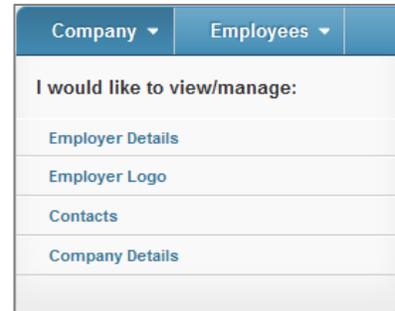
**Slower Payment Options:** Personal, business, or cashier’s check sent by US Mail. If payment is mailed, it must be received by the due date so please allow plenty of time for mail processing.

## 5 Your Employer Account

In your DC Health Link Employer Account, you will be able to manage your employee roster, add/terminate employees, and add/change your broker.

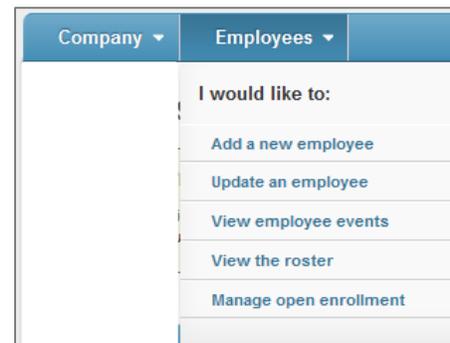
### 5.1 View Your Plans

To view your plans, go to the “Company” menu and select “Employer Details.” Click on your “DC Location” (or others if you utilized the Locations feature) and see a list of plans available to employees in that Location.



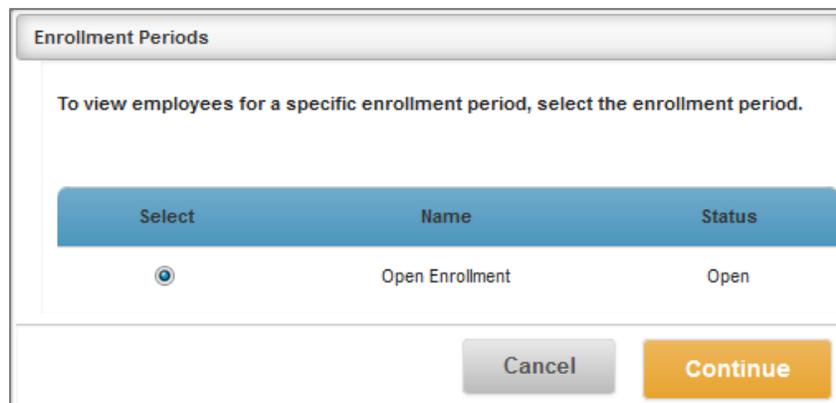
### 5.2 View Employee Roster

To view your employee roster, go to the “Employees” menu and select “View the Roster.” You will see a list of all of your employees. Click on each employee to view details including their dependent information.



### 5.3 Manage Open Enrollment

During your employee open enrollment, you can view the status of your employee enrollments by going to the “Employees” menu and selecting “Manage Open Enrollment.” In the pop-up window, you will see the status of your open enrollment period. “Scheduled” means the open enrollment period has not begun. “Open” means the open enrollment period is in progress. “Closed” means the open enrollment period has ended.



Click on the “Continue” button to see a list of your eligible employees with a progress display. Employees will initially be displayed as 50% complete meaning that you have entered them as eligible

employees on the census. Once an employee completes his/her enrollment, the employee will be shown as 100% complete .

Company		Employees																																																																																																													
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<b>Effective Date</b> 01/01/2014		<table border="1"> <thead> <tr> <th>Name</th> <th>Location</th> <th>Status</th> <th>Percent Complete</th> <th>Actions</th> </tr> </thead> <tbody> <tr><td><a href="#">Allton, Chad</a></td><td>DC Location</td><td>In Process</td><td><div style="width: 50%;"></div></td><td>Select an action</td></tr> <tr><td><a href="#">Brown, Louis</a></td><td>DC Location</td><td>In Process</td><td><div style="width: 50%;"></div></td><td>Select an action</td></tr> <tr><td><a href="#">Gonzalez, Prudence</a></td><td>DC Location</td><td>In Process</td><td><div style="width: 50%;"></div></td><td>Select an action</td></tr> <tr><td><a href="#">Gray, Nate</a></td><td>DC Location</td><td>In Process</td><td><div style="width: 50%;"></div></td><td>Select an action</td></tr> <tr><td><a href="#">Jackson, Suzie</a></td><td>DC Location</td><td>In Process</td><td><div style="width: 50%;"></div></td><td>Select an action</td></tr> <tr><td><a href="#">Jeffreys, Eve</a></td><td>DC 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## 6 Employees & DC Health Link

Employees will be able to shop for health plans when the employer's open enrollment period begins, as earlier as November 1, 2013.

Employees will complete a simple application to verify their eligibility for your health coverage and add any family members they wish to enroll. Once we have verified that the employee is eligible for your health coverage, he/she will be able to shop for all of the plans you elected to make available. The cost for each plan will be based on the age of the employee and all of his family members, if applicable, less your employer contribution amount. Employees will be able to view plan details and compare plans side by side. Once the employee has selected a plan, he/she simply clicks "Enroll" and signs the enrollment form.

More information on the employee application and plan shopping experience is coming soon.



## 7 Brokers Working With Employers

Brokers working with employers in DC Health Link will be able to complete the Eligibility & Enrollment sections of the employer’s application on behalf of the employer, once the employer has assigned the broker to his/her account. Simply find the client in your Broker Dashboard of Employer Clients and select “Continue” to pick up the employer’s application right where he/she left off.

After the broker completes each section of the employer’s application, the broker will be redirected to the Broker Dashboard where he/she can resume the next section(s) of the employer’s application.



### 7.1 Assigning Broker to Employees

In order for the broker to be assigned to employee accounts, each employee must assign the broker to his/her own account. Brokers are encouraged to work with their employer clients to communicate the broker’s information to the employees so that they know who is available to assist them with their account.

While an employee could assign any broker to his/her account, only the broker assigned to the employer’s account will be provided to carriers as the broker of record.

### 7.2 Designating a GA or TPA for Payment of Commissions

For brokers who work through a General Agency (GA) or Third Party Administrator (TPA), you can assign an employer account to a particular GA or TPA during the Enrollment section of the employer’s application.

In the Enrollment section, on the Company Information page, when the broker is completing this page, you will see a “GA/TPA #” field at the bottom of the page. Enter the federal tax identification number for the GA or TPA you work through.

GA/TPA # <input type="text"/>
-------------------------------

Carriers will be provided this information, along with the broker’s national producer number (NPN), and will use this information to pay commissions either directly to the broker or indirectly through the GA or TPA based on whatever contractual arrangements the broker has with the carrier(s).



**TIP: When the employer is completing this page of the application him/herself, the GA/TPA # field will not be available.**

## 8 Billing & Payment Information

Employers are responsible for all payments to DC Health Link. DC Health Link will not accept payments from employees.

### 8.1 Streamlined Administration

DC Health Link offers employers more choices than they currently have, including the ability to offer plans from multiple carriers. DC Health Link will make administration of your health plans simpler with one monthly invoice, regardless of how many carriers you offer to your employees.

Your monthly DC Health Link invoice will include:

- Age rates and employee contributions calculated for you
- Invoice reports all employee payroll deductions that need to be made
- Invoice and payment history can be viewed online anytime

Premiums are paid directly to DC Health Link. Even if employees choose different plans, the employer only issues a single payment.

Multiple payment methods are available including online secure Bank Withdrawal with the option to setup automatic monthly payments, phone payments, and check payments by mail.

### 8.2 Overview of Payment Methods

#### 8.2.1 Types of Payments Accepted

DC Health Link offers multiple payment methods for employers. Payment can be made online via secure Bank Withdrawal. Or employers can choose to make payment by mailing a personal, business, or cashier's check to the address on the invoice.

In addition, you can setup automatic monthly payments to further simplify the administration of your health benefits.

#### 8.2.2 Partial Payments & Excess Payments

Any partial payments received will be applied to the balance owed, but payment is not considered made until the full payment has been received. The employer will be notified that a balance is still owed and that the original due dates and grace periods continue to apply until the full payment has been received.

If your payment exceeds the amount owed, we will apply the excess amount as a credit on your next regular monthly invoice. We will only issue a refund when an employer terminates participation in DC Health Link.

## 8.3 First Premium Payment – Due by 12<sup>th</sup> of Month

Before DC Health Link can notify carriers of group enrollments, the employer binder payment must be received no later than the 12<sup>th</sup> day of the month prior to the coverage effective date. A “binder” payment represents the estimated payment for the first month of coverage for all enrollees and represents the employer’s commitment to participate in DC Health Link. Only the first month’s coverage represents a binder payment; all subsequent months will be invoiced prior to the start of the month and payment is due before the 1<sup>st</sup> of each month.

As mailing a check can take a week or more, employers should plan accordingly. For binder payments, we recommend payment be made online through secure Bank Withdrawal.



**If an employer does not submit the first premium binder payment by the due date, the group’s coverage effective date will be delayed and employees may have a gap in coverage.**

## 8.4 Monthly Invoices

A preliminary invoice is generated on the 1<sup>st</sup> day of the month prior to the coverage period being invoiced. Employers will have an opportunity to make enrollment changes during the first 14 days of the month, before a final invoice is generated on the 15<sup>th</sup> day of the month prior to the coverage period. Any enrollment changes reported after the final monthly invoice has been generated on the 15<sup>th</sup> of the month will be included as adjustments on the next month’s invoice. Payment is due on the 1<sup>st</sup> day of the coverage period.

Example: Invoice for June 2014 coverage period.	
Date	Item
May 1, 2014	Preliminary invoice generated for June coverage period.
May 14, 2014	Last day for Employer to report any Employee enrollment changes that would be reflected on an adjusted June invoice on May 15 <sup>th</sup>
May 15, 2014	Final June invoice generated, reflecting any enrollment changes reported by the employer by May 14 <sup>th</sup> .
May 31, 2014	June Premium Due Date.
June 1, 2014	Preliminary invoice generated for July coverage period.

### 8.4.1 Partial Month Premium

When coverage is in effect for only a portion of a calendar month, the regular monthly premium will be prorated to reflect the portion of the month for which coverage was in effect.

For example, coverage effective June 21<sup>st</sup>, regular monthly premium of \$600.

$$\text{June's premium (partial coverage month)} = \$600 \times (10 \text{ days} / 30 \text{ days}) = \$200$$

## 8.4.2 Late Payment Grace Periods

Employers will have a 60 day grace period before coverage will be terminated due to non-payment of premiums. If payment in full is not received at the end of the 60 day grace period, the group's coverage will be terminated retroactive to the last date for which coverage was paid.

If the employer is past due in premiums, a notice will be sent to all employees on the 25<sup>th</sup> day of the coverage period telling them that their employer has not paid premiums and if premiums are not paid by the end of the 60 day grace period, the employee's coverage will be terminated retroactively. This notice is being provided to comply with ACA regulations 45 CFR §156.270(b)(1).

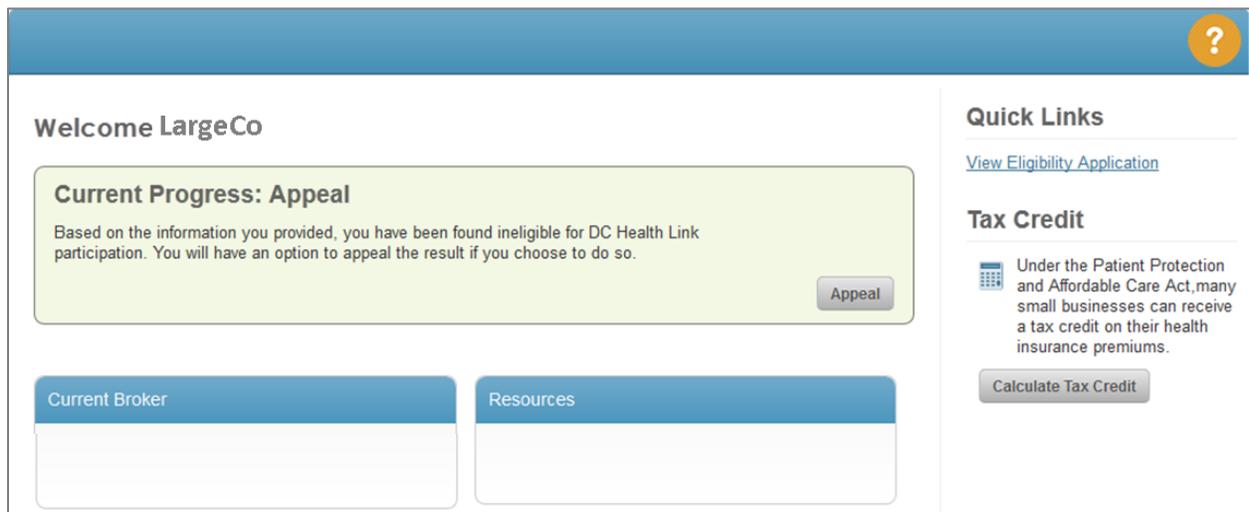
If a group's coverage is terminated, the group will be allowed to reinstate coverage within 30 days as long as all past due and currently owed premiums are paid in full. Reinstatements will be capped at twice in the lifetime of the small employer's participation in DC Health Link.

## 9 Appeals

When an employer or an employee is determined ineligible for DC Health Link, he/she has 30 days to provide additional information to the DC Health Benefit Exchange Authority to resolve the eligibility issue. If the issue cannot be resolved during the 30 day period, then he/she can file a formal appeal.

### 9.1 Employers: Appealing Ineligibility for DC Health Link

If an employer is determined ineligible for DC Health Link, he/she should attempt to resolve the issue by contacting DC Health Link Customer Service at 1-855-532-5465 or [info@DCHealthLink.com](mailto:info@DCHealthLink.com). Staff will work with the employer to resolve any discrepancy in the information provided during the application process.



The screenshot shows a user interface for an employer. At the top right, there is a blue header with a white question mark icon. Below the header, the main content area is divided into several sections. On the left, a green box titled 'Current Progress: Appeal' contains the text: 'Based on the information you provided, you have been found ineligible for DC Health Link participation. You will have an option to appeal the result if you choose to do so.' To the right of this text is a grey button labeled 'Appeal'. Below this green box are two blue-topped boxes: 'Current Broker' and 'Resources', both of which are currently empty. On the right side of the page, there is a 'Quick Links' section with a link for 'View Eligibility Application'. Below that is a 'Tax Credit' section with a small icon of a calendar and the text: 'Under the Patient Protection and Affordable Care Act, many small businesses can receive a tax credit on their health insurance premiums.' At the bottom of this section is a grey button labeled 'Calculate Tax Credit'.

If the employer and DC Health Link are unable to resolve the issue within 30 days, the employer can file a formal request for an appeal hearing. Appeals hearings are conducted by the Office of Administrative Hearings (OAH). Employers can download the appeals form from [www.DCHealthLink.com](http://www.DCHealthLink.com).

Appeals can be submitted through multiple avenues:

- Online: Login to your DC Health Link account at [www.DCHealthLink.com](http://www.DCHealthLink.com)
- Email: [info@DCHealthLink.com](mailto:info@DCHealthLink.com)
- Fax: (202) 442-4789
- Mail: DC Health Link  
Attn: Employer Eligibility Review  
Office of Administrative Hearings,  
441 Fourth Street, NW, Suite 450N,  
Washington, DC 20001

Employers should attach their Eligibility Application to their request for an appeal. The Eligibility Application can be downloaded by logging in to the Employer Account and clicking on the “View Eligibility Application” link on the right side of the page.

**Welcome LargeCo**

**Current Progress: Appeal in Review**

Our records indicate that you have submitted an appeal request regarding your eligibility determination. The request will be reviewed and you will be notified of the decision reached after review. If any additional information is needed, you will be notified of the same.

**Quick Links**

[View Eligibility Application](#)

**Tax Credit**

Under the Patient Protection and Affordable Care Act, many small businesses can receive a tax credit on their health insurance premiums.

[Calculate Tax Credit](#)

**Current Broker**

**Resources**

## 9.2 Employees: Appealing Ineligibility for DC Health Link

If an employee is determined ineligible for DC Health Link, he/she should contact the employer to resolve the discrepancy. Likely, there was a data mismatch between the information entered on the employer's census and the information entered on the employee's application. If the employee and employer are not able to resolve the issue, the employee should contact DC Health Link Customer Service at 1-855-532-5465 or [info@DCHealthLink.com](mailto:info@DCHealthLink.com).

After 30 days, if the eligibility discrepancy cannot be resolved by the employee, employer, and DC Health Link staff, the employee can file a formal request for an appeal hearing. Appeals hearings are conducted by the Office of Administrative Hearings (OAH). Employees can download the appeals form from [www.DCHealthLink.com](http://www.DCHealthLink.com).

Appeals can be submitted through multiple avenues:

- Online: Login to your DC Health Link account at [www.DCHealthLink.com](http://www.DCHealthLink.com)
- Email: [info@DCHealthLink.com](mailto:info@DCHealthLink.com)
- Fax: (202) 442-4789
- Mail: DC Health Link  
Attn: Employer Eligibility Review  
Office of Administrative Hearings,  
442 Fourth Street, NW, Suite 450N,  
Washington, DC 20001

When an employee files a formal request for an appeal hearing, the employer will receive a copy of the appeal request. Employers have a right to participate in their employee's appeal hearing, if they choose to do so.

## 10 Additional Information

### 10.1 Reference Plan Contributions

DC Health Link will allow a small employer to select its contribution level using a reference plan model. With member-level age rates and a wide array of choices of plans, the reference plan model allows employers to more accurately predict their costs. Regardless of which plan the employee chooses to enroll in, the employer's cost always remains fixed based on the cost for the employee to enroll in the reference plan.

1. Select one plan to base contributions on, the "reference plan"
2. Select a percentage to contribute for employees and dependents to enroll in the reference plan
3. The contribution remains fixed based on the reference plan. Employees enrolling in any other allowed plan will pay the difference in premium to "buy-up" or "buy-down."

Age		Reference Plan			Enrolled Plan		
		Gold PPO Premium	Employer Pays (80%)	Employee Pays	Platinum PPO Premium	Employer Pays (same as Ref Plan)	Employee Pays
Vince	27	\$275	\$220	\$ 55	\$310	\$220	\$ 90
Joyce	40	\$365	\$292	\$ 73	\$417	\$292	\$125

### 10.2 Minimum Contribution & Minimum Participation

To participate in DC Health Link, employers must make a minimum contribution of 50% of employee-only coverage in the reference plan, and must meet a minimum level of participation of 2/3 of eligible employees (not including waivers).

Employees declining to enroll because of other coverage do not count against participation requirements if their other coverage is either (a) another employer's health plan (spouse's employer plan), or (b) governmental health plan (Medicare, Medicaid, TRICARE).



**TIP: Employers who cannot satisfy minimum participation and/or minimum contribution requirements will be able to enroll during special annual enrollment period at the end of each year (beginning in 2013) with a coverage effective date of January 1.**

## 10.3 Small Business Tax Credit

Certain small businesses and nonprofit organizations are eligible for federal tax credits that will help offset some of their cost of offering health insurance to their employees. The tax credit will cover up to 50% of an employer's costs (up to 35% for a non-profit organization). To be eligible, a District employer must:

- Have fewer than 25 full-time equivalent employees (FTEs);
- Have average employee wages of less than \$50,000 a year;
- Purchase coverage through DC Health Link;
- Pay at least 50% of the cost of single coverage for each employee.

Use this online calculator for a quick look at your eligibility and for more detailed information, go to <http://www.irs.gov/uac/Small-Business-Health-Care-Tax-Credit-for-Small-Employers>.

For-profit businesses can claim the tax credit on the organization's tax return. S-corporations and partnerships claim the tax credit on the owners' K-1.

Nonprofit employers can claim the tax credit against the employment taxes.



**TIP: DC Health Link has small business tax credit calculators available to help you estimate your organization's eligibility.**

The screenshot shows a web-based calculator interface. On the left, there is a blue sidebar with a calculator icon, the text "Small Business Calculator", and a "Start Over" link. The main area has three input fields: "NUMBER OF EMPLOYEES (full-time equivalent) ?" with a white input box, "TOTAL ANNUAL WAGES paid for all employees ?" with a white input box and a dollar sign icon, and "TOTAL CONTRIBUTION annual employer premium ?" with a white input box and a dollar sign icon. Below these is a checkbox labeled "I am a tax-exempt employer". A green "Calculate" button is on the right. At the bottom, it displays "Your estimated Annual Tax Credit" with two dollar signs and lines for the years 2013 and 2014.

# 11 List of Resources

## Frequently Asked Questions

[DC Health Link FAQs - General](#)

[DC Health Link FAQs - For Small Business](#)

[DC Health Link FAQs - For Brokers](#)

## Small Business Health Care Tax Credit

[DC Health Link Small Business Tax Credit Calculator](#)

[Small Business Health Care Tax Credit for Small Employers](#)

[IRS Taxpayer Advocate Service - The Small Business Health Care Tax Credit Estimator](#)

## Eligibility Appeals

[Employee Eligibility Appeal Form](#)

[Employer Eligibility Appeal Form](#)

## Plan Benefit Information

[Summary of Benefits & Coverage \(SAMPLE\)](#)

[Glossary of Health Coverage and Medical Terms](#)

## Other Resources

[Sample Employee Application \(for brokers only\)](#)

*Note: DC Health Link does not accept paper applications. The sample employee application is a tool for brokers to utilize in assisting their clients if they choose to do so.*