New Employers - How to Offer Health Coverage through DC Health Link

Who is this guide for? Employers who are offering coverage through DC Health Link for the first time. New employers may be offering health coverage to their employees for the first time, OR they may have previously offered employer-sponsored coverage outside of DC Health Link.

Get Started - Setup Your Account

Click on the “GET STARTED” button under Small Business on DCHealthLink.com

Business Ballpark Cost Estimator (optional)

To use our Business Ballpark Cost Estimator to see an overview of your options and costs without completing an application, click on the “CONTINUE” button. If you want to skip ahead to start an application, click on the “Skip to STEP 2” button and continue to Create Your Employer Account.
**Business Ballpark Eligibility Estimator:** Fill in the number of full time and part-time employees you have and then click the “SEE IF YOU’RE ELIGIBLE” button.

If you are eligible, click on the “NEXT” button; if not, click “Recalculate” and double check your number of employees.
Business Ballpark Cost Estimator: Explore your different plan offering and contribution options while considering your costs. Use the slider to select your reference plan.

What is a reference plan? The reference plan is a tool that allows you to offer your employees a choice of plans while also allowing you to fix your costs to a specific plan, so that costs are predictable and fit within your budget. You can offer plan participants the opportunity to choose any plan by metal level, insurance company or a single plan. Since your costs are tied to the reference plan, it will NEVER cost you more to offer your employees a choice of plans.

You’ll need to provide an estimate of the number of employees (and family members, if applicable) that will be covered along with their average age since health insurance premiums are based on the enrollee’s age. The more accurate the information, the more accurate your cost estimate will be. Once you’re ready to move on, click on the “START” button to get started offering health coverage to your employees.
Create Your Employer Account

Fill out your email address and create a password (8 characters minimum) and then click the “CREATE ACCOUNT” button.

Please be sure to record your password somewhere secure. You’ll use your email address as your username to log-in in the future.

Next, provide some basic information about you and your business. As the point of contact for the small business, provide your name and date of birth. Then, provide information about the small business, including company legal name, DBA name, federal employer identification number (FEIN), entity kind, and primary office location before clicking the “Confirm” button. If you have more than one office location, click “Add Office Location” and fill in the information for your other location(s) before proceeding.

NOTE: Embassy or consular employers that do not have an FEIN should contact the Small Business Support Team (employer.hbx@dc.gov) for assistance in completing an employer application.

NOTE: Brokers setting up accounts on the behalf of employers MUST use the information for the employer’s POC, and not their own information, when filling out this section.
Add Your Eligible Employees to Roster

Creating Your Employee Roster:

- IMPORTANT - Make sure that the date of birth and SSN is accurate for each of your employees. We use these to match the employee to your coverage. If the information is not correct, the employee will not be able to shop for health coverage until the discrepancy is resolved.

- Adding employee family members is not required but will help provide you a more accurate cost estimate.

- When adding employees to your roster, you can fill out the work address as the employee(s)’s address. When the employee(s) create their own account, they will be able to change their address.

- You have the option to upload your employee roster in one click through a spreadsheet. You can download the spreadsheet template from the roster upload page or on the Forms section of DCHealthLink.com.

**Add Employees to Roster - Step 1:** Select the ‘Employees’ tab on the left side of your screen and click the “ADD NEW EMPLOYEE” button.

**NOTE:** For the most accurate cost estimate, include as much dependent information as possible on the roster. The cost of dependent coverage will not reflect in your cost estimates unless they are on the roster.
Add Employees to Roster - Step 2: Enter the information for your employee and click “Create Employee”.

Continue to click “ADD NEW EMPLOYEE” AND “Add Family Member” until your roster is complete. Fill out the employee’s information, as well as any applicable dependents. Your employees are able to add dependents when they create their accounts if you do not want to include dependent information at this time.

NOTE: If you have not created your benefit offerings for your employees at this time, the benefit group will not be available. In this case, you must come back and edit the employee to add the benefit group once your plan offerings are finalized. If you create multiple benefit groups, please ensure that you select the correct one for each employee.

Add Employees to Roster - Bulk Upload: To use a roster template, click the “Upload Employee Roster” button, then select ‘Download it now’, and fill out the applicable information. Click the “SELECT FILE TO UPLOAD” button to upload the completed roster.
Create Your Plan Year

What is a Plan Year? A Plan Year is comprised of all of the coverage options and contributions you are offering to your employees, as well as any covered dependents, for an entire year. This year begins when your group’s coverage starts and ends 12 months later. If you have multiple office locations, they are all part of the same plan year. Likewise, if you offer health and dental coverage, both types of benefits are included in the same plan year.

To create a plan year, click the ‘click here’ text.

Plan Year Creation - Step 1: Click “SELECT START ON” drop-down to select your plan year start date.

NOTE: Under “My Account” the “MY EMPLOYEES” count includes all employees - active and terminated.
**Plan Year Creation - Step 2:** On the same page, under “Add the total number of employees in your workforce,” enter in your number of ‘FULL TIME EMPLOYEES’, ‘PART TIME EMPLOYEES’, AND ‘MEDICARE SECOND PAYERS’. Once your dates are set, click the “CONTINUE” button.

**NOTE:** Your potential open enrollment start and end dates will automatically populate with the earliest start date and the latest end date possible. The open enrollment period may start no earlier than two months prior to the coverage start date and must end by the 10th day of the month prior to the plan year start date. Your application and payment deadlines will appear on the screen.

### Add Benefit Group to Your Plan Year

Your employees will each belong to a benefit group. The benefit group determines the plan offerings, contributions, and eligibility rules available to employees in the benefit group. Employers may offer health plans and have the option to offer dental plans if they choose. Dental coverage is only available to small businesses that offer health coverage through DC Health Link.

Most employers will only have one group of benefits that they offer to all of their eligible employees. However, employers can set-up multiple benefit groups within a single plan year if they’d like to offer different sets of benefits to different groups of employees.

**Plan Year Creation - Step 3:** Enter your benefit group name (do not include a date as the name will remain the same in future plan years) under “NAME YOUR BENEFIT PACKAGE.”
Plan Year Creation - Step 4: On the same page you must select a coverage effective date rule for new hires from the “WHEN WOULD YOU LIKE YOUR NEWLY HIRED EMPLOYEES TO START THEIR COVERAGE?” drop-down.

NOTE: You have three options when offering coverage to new hires throughout the plan year:

- 1st day of the month following or coinciding with date of hire,
- 1st day of the month following 30 days after the date of hire, or
- 1st day of the month following 60 days after the date of hire.

Select Which Family Members are Eligible for Coverage

Plan Year Creation - Step 5: First, check the types of family members that are eligible for coverage. Next, select how much you want to pay towards premiums for each type of enrollee.

NOTE: You must contribute at least 50% towards employee premiums and you can contribute any percentage you would like for each type of family member.

Annually, employers have a special opportunity to enroll without having to contribute at least 50% of employee premiums. This is only available for employers enrolling for a 1/1 plan year start date.
Select Which Health Plans to Offer

You will now select which health plans to offer to your employees. You have three options:

- **Insurance Company** - Selecting to offer plans from one insurance company allows your plan participants to choose any plan offered by that insurance company on DC Health Link. This will allow your employees to choose from across metal levels within the same insurance company.

- **Metal Level** - Selecting to offer plans from one metal level allows your plan participants to choose any plan offered by any insurance company offering health plans on DC Health Link in your selected metal level. This allows your employees to choose from different insurance companies within the same metal level.

- **Single Plan** - Selecting a single plan only requires that plan participants to choose that plan if they wish to enroll in employer-sponsored coverage through DC Health Link.

**Plan Year Creation - Step 6:** On the same page, select the plan offering you want for your employees by clicking the button on the left of your selection. If you click ‘BY CARRIER’ you will need to select the carrier and if you click ‘BY METAL LEVEL’ you will need to select the metal level.
Plan Year Creation - Step 7: On the same page, select your reference plan by clicking the button to the left of the plan you would like to choose. You can view the plan summary Coverage by clicking “View Summary” below the plan name.

NOTE: The reference plan is a tool that allows you to offer your employees a choice of plans while also allowing you to fix your costs to a specific plan so that costs are predictable and fit within your budget. You can offer plan participants the opportunity to choose any plan by metal level, insurance company or a single plan. Since your costs are tied to the reference plan, it will NEVER cost you more to offer your employees a choice of plans.

Plan Year Creation - Step 8: Once you select your reference plan you can see each employee’s estimated cost breakdown by clicking “Employee Detail Costs.” You can click “View Plan Summary” to view details of the reference plan.
NOTE: If you want to create multiple benefit groups, click the “Add Benefit Group” button on the left side of the screen and fill in the required information.

NOTE: Your Estimated Month Cost will show as $0.00 if you do not have any employees added to your roster when you are creating your plan year. As you add employees, you will see the cost reflected under the ‘Benefits’ tab.

Select Which Dental Plans to Offer

Employers have the option to offer dental coverage to their employees through DC Health Link. Employers are not required to offer dental coverage, but must offer health coverage if they wish to offer dental benefits. Employers can choose one product, all products from an insurance company, or any combination of products and insurance companies to make available to employees. There is no minimum contribution amount required of the employer, nor is there a minimum participation rate.

Plan Year Creation - Step 8: If you would like to offer dental benefits to your employees, click “Add Dental Plans” at the bottom of your benefits package page.

Plan Year Creation - Step 9: Next, check the types of family members that are eligible for dental coverage and select how much you want to pay towards premiums for each type of enrollee.
Plan Year Creation - Step 10: On the same page, select the plan offering by clicking the button on the left of your selection. If you click ‘CUSTOM’ you will have the option to choose which dental plans to offer and if you click ‘BY CARRIER’ you will need to select the carrier.

Plan Year Creation - Step 11: On the same page, select your reference plan by clicking the button to the left of the plan you choose.

Plan Year Creation - Step 12: Once you have selected your dental reference plan, click “CREATE PLAN YEAR,” which will take you back to the “Benefits” tab.
Finalize Plan Year and Offer to Employees

To finalize your plan year and make plan shopping available to employees, you must ensure all employees on the roster are assigned to a benefit group.

Finalizing Plan Year - Step 1: To assign employees to a benefit group, click the pencil on the right side of the employee’s information line. Once the employee’s information is pulled up, click ‘Benefit Group Name’ and select a benefit group for the employee.

Finalizing Plan Year - Step 2: Once all employees have been assigned to a benefit group, click on the “Benefits” tab on the left side of the screen. You may click “Edit Plan Year” to make changes or “Publish Plan Year” to finalize your plan offering for the year.

Once you publish your plan year a yellow star will appear next to the plan year with a status update.
What’s Next? Manage Your Open Enrollment

Once you publish your plan year, your employees will begin to receive notices informing them when their open enrollment period begins.

Your employer account home page will now have new tools available to you that allow you to track your employee enrollment status and manage your plan year.

Monitor your employee enrollments using the Enrollments and Waivers counter at the top of your account home page. In addition to giving you an overview of how many employees have completed plan selections or waived health coverage, this also notifies you of how many more employees need to enroll or waive health coverage before your group meets the 2/3rds minimum participation requirement (not applicable for 1/1 plan year start dates). Please note that employee enrollments in dental coverage do not count towards your minimum participation requirement.

For more details on your employee enrollments, see the “View Enrollment Report” on the bottom left of your account or click on each employee’s name on the “Employees” tab.