

Qualifying Life Events (QLEs) Enrolling in a New Plan

Throughout the year your circumstances may change which may make you eligible for a Special Enrollment Period (SEP). If you have a baby, you or your dependent gain or lose other coverage, etc., you may be able to change your plan, enroll in a plan for the first time, add or drop family members, or terminate your plan. You must report the event **WITHIN 30 DAYS** of the event to be eligible for an SEP. Once you report the event in your account, DC Health Link will guide you through the options available to you and your family.

Step 1: Report the Qualifying Life Event – In order to change a health plan outside of open enrollment, an employee must experience a QLE. In each employee's account, consumers will have the option to report a QLE. Please select the life event that applies to the primary subscriber or dependent (For Example: Married, Had a Baby, Lost or will soon lose other Health Insurance).

The screenshot shows the 'My DC Health Link' dashboard. On the left, there are navigation links for 'Documents' and 'Messages'. The main content area displays '2015 HEALTH COVERAGE • STACY'S FLOWER STORE' with 'Carefirst HealthyBlue Plus \$1,500' coverage selected. A 'Have life changes?' sidebar on the right is highlighted with a red box and contains a list of 'TOP LIFE CHANGES' including 'Started a new job', 'Married', 'Entered into a legal domestic partnership', 'Had a baby', and 'Adopted a child'. A red arrow points to the 'Married' option.

Note: There are three different pages of QLEs that can be viewed by clicking the arrow


Step 2: Enter the Date of QLE- Report the date that of the qualifying life event.

The screenshot shows the 'REPORT LIFE CHANGES' page for the 'Married' event. The 'Date of married' field is highlighted, and a date picker calendar is overlaid, showing the month of March 2016. The calendar has the 30th of March selected. A 'CONTINUE' button is visible next to the date input field.

Step 3: Confirm the QLE – Click “Continue” to proceed.

REPORT LIFE CHANGES ✕

Based on the information you entered, you may be eligible to enroll now but there is limited time.

 **Continue**

Step 4: Add Member to Household – Adding a member to the household does not add them to the policy, in the next steps you will have the option to add/remove any dependent from the policy.

Married, on: 03/08/2016 25% Complete

Household Info: Family Members

If you need to get insurance coverage for other members of your household, select 'Add Member'. When you're finished, select CONTINUE.


- Household
- Plan Selection
- Review
- Complete

* = required field

NAME	RELATION
Stacy Stewart	Self

FIRST NAME	MIDDLE NAME	LAST NAME
Jason		Stewart

DATE OF BIRTH	SOCIAL SECURITY	RELATIONSHIP	GENDER
03/15/2016	--	Child	Male

Add Member  **CONTINUE**

Step 5: Enter dependent information – Enter the date of birth, gender and relationship to primary. Check the “NO SSN” box if the SSN is not available. The mailing address is also optional.

FIRST NAME * **Kenny** MIDDLE NAME LAST NAME * **Smith** ✕

DATE OF BIRTH * **04/08/1980** SOCIAL SECURITY I don't have an SSN RELATION * **MALE** FEMALE

NEW ADDRESS **Home Address** RELATION * **Spouse**

ADDRESS LINE 1 ADDRESS **Life partner**

CITY SELECT STATE **Child**

Add Mailing Address **Adopted child**

Annuitant

Aunt or uncle

Brother or **CONFIRM MEMBER**

Cancel

Step 6: Confirm Household – Once you have added all your dependents, please click “Continue”.

* = required field

NAME Stacy Stewart		RELATION Self
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FIRST NAME Jason	MIDDLE NAME	LAST NAME Stewart	
DATE OF BIRTH 03/15/2016	SOCIAL SECURITY –	RELATIONSHIP Child	GENDER Male

FIRST NAME Kenny	MIDDLE NAME	LAST NAME Smith	
DATE OF BIRTH 04/08/1980	SOCIAL SECURITY –	RELATIONSHIP Spouse	GENDER Male

[Add Member](#) [CONTINUE](#)

Step 7: Choose Coverage for Your Household – Select the members in your household you would like to cover in your health plan by selecting the boxes next to their name.

Choose Coverage for your Household

Select who needs coverage and the type of coverage needed. When you're finished, select CONTINUE.

Who Needs Coverage?

<input checked="" type="checkbox"/> Stacy Stewart (Age : 30 years)
<input checked="" type="checkbox"/> Jason Stewart (Age : 0 years)
<input checked="" type="checkbox"/> Kenny Smith (Age : 35 years)

Benefit Type

<input checked="" type="radio"/> Health

50% Complete

- Household
- Plan Selection
- Review
- Complete

Step 8: Select “Shop for New Plan” - You can browse your plan options and select a new plan for you and your dependents by selecting “Shop for New Plan”.

What would you like to do?

[SHOP FOR NEW PLAN](#) [KEEP EXISTING PLAN](#) [SELECT PLAN TO TERMINATE](#)

[Back to my account](#)

Step 9: Plan Shopping - You can now brows plans offered to you by your employer. You are able to 'Filter Results' on the left side to change the plans displayed for you. You are able to 'Sort By' at the top to change the order in which plans are displayed for you. You can compare up to three plans at once by clicking "Compare" in the plan tile and then a "Compare Plans" button will appear in the top right of the screen that you will click to see a side-by-side comparison of the chosen plans.

When you have chosen your health plan, please click "Select Plan"

Choose Plan 50% Complete

Find a quality, affordable health insurance plan that's right for you, or for you and your family. Use 'Filter Results', 'Compare' and 'Details' features to narrow your choices. When you find the plan you want, 'Select Plan'.

COVERAGE FOR: **Stacy Stewart** (employee) + **2 dependent(s)** Employer: **Stacy's Flower Store** PLANS: **1**

Find Your Doctor Sort By Plan Name Premium Amount Deductible Carrier

Filter Results

Plan Type

- HMO
- PPO
- POS

★ **YOUR CURRENT 2015 PLAN**

CareFirst **HealthyBlue Plus \$1,500** \$770.14 /Month

CareFirst

TYPE	LEVEL	NETWORK	DEDUCTIBLE
POS	Gold	DC-Metro	\$1,500

Compare Summary of Benefits and Coverage [Details](#) [Select Plan](#)

Step 10: Confirm Plan Selection- Before you finalize your health plan, you will be have the option to review your plan selection, effective date, and household members covered. To submit your plan selection, click "Confirm"

Confirm Your Plan Selection 75% Complete

Please review your current plan selection. Select PREVIOUS if you want to change your plan selection. When you're satisfied with your plan, carefully review and acknowledge the Agreement below along with the Terms and Conditions. You must also provide an electronic signature at the bottom of the page. When you're finished, select CONFIRM to submit your enrollment to your insurance company. You don't have to pay today.

Stacy's Flower Store
CareFirst HealthyBlue Plus \$1,500
 Metal level : Gold

Name	Relationship	Age	Premium	Employer Contribution	You Pay
Stacy Stewart	self	30	\$312.55	\$156.28	\$156.27
Jason Stewart	child	15 days	\$262.40	\$0.00	\$262.40
Kenny Smith	spouse	35	\$351.47	\$0.00	\$351.47
TOTALS			\$926.42	\$156.28	\$770.14
Your coverage start date :					04/01/2016

[PREVIOUS](#)

Step 11: Finalize Plan Selection- This is the receipt of your enrollment. When you are done click “Go to My Account” to return to your homepage where you can view your new enrollment and the date it was submitted.

Enrollment Submitted

Your enrollment has been submitted as of 03/30/2016 11:02 EDT -04:00.
Please print this page for your records. A copy of this confirmation has also been emailed to you.

Stacy's Flower Store
CareFirst HealthyBlue Plus \$1,500
Metal level : gold

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Your coverage start date : 04/01/2016

[Print](#)

100% Complete

- Household
- Plan Selection
- Review
- Complete**

[GO TO MY ACCOUNT](#)