

Health Insurance Coverage for Temporary Employees



District Personnel Instruction No. 21B-18

Effective Date	Expiration Date	Related DPM Chapters
October 29, 2015	Retain Until Superseded	21B

Overview

To further the goal of providing affordable health insurance to employees in the District government, certain employees in temporary appointments and their dependents are eligible to enroll in the District of Columbia Employees’ Health Benefits Program (DCEHB). The DCEHB is the health benefits program applicable to persons first employed by the District government on or after October 1, 1987.

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Health Benefits for Temporary Employees

Health insurance benefits will be extended to certain employees in temporary appointments and their dependents under the DCEHB during the annual open enrollment period. Eligible employees will have an opportunity to select a health maintenance organization (HMO) health benefits plan, as provided in this instruction. This coverage does not extend to dental or vision care insurance.

Eligibility for DCEHB Benefits

District government employees serving in temporary appointments may be eligible for health benefits under the DCEHB if he or she meets the following eligibility requirements:

1. Be an employee of the District government who is serving in a temporary appointment (i.e., full-time, when-actually employed);
2. Worked 90 or more days within the last 12 months; and
3. Received compensation for an average of 30 hours a week or 120 hours a month.

Exclusion from the DCEHB Benefits

The provisions of this instruction do not apply to District government retirees (annuitants) who are reemployed in the District government under a temporary appointment.

Health Benefits Plans

2016 TEMPORARY EMPLOYEE HEALTH BENEFITS PLANS¹

Carrier	Family Status	Monthly Employee Contribution	Monthly District Contributions	Biweekly Employee Contribution	Biweekly District Contribution
Kaiser HMO	Self-Only	\$140.70	\$422.09	\$64.94	\$194.81
	Self + 1	\$268.73	\$806.20	\$124.03	\$372.09
	Family	\$412.24	\$1,236.72	\$190.26	\$570.80

¹ The rates listed above are subject to change. Please visit the DCHR's website for the most up-to-date rates at www.dchr.dc.gov.

2016 TEMPORARY EMPLOYEE HEALTH BENEFITS PLANS²

United Healthcare HMO	Self-Only	\$152.34	\$457.01	\$70.31	\$210.93
	Self + 1	\$290.97	\$872.90	\$134.29	\$402.88
	Family	\$446.35	\$1,339.05	\$206.01	\$618.02
Aetna HMO	Self-Only	\$76.65	\$229.95	\$35.38	\$106.13
	Self + 1	\$150.67	\$452.01	\$69.54	\$208.62
	Family	\$221.50	\$664.50	\$102.23	\$306.69

Enrolling in Health Benefits Plan

Full-Time Temporary Appointments

1. Effective November 2, 2015, appointees hired in full-time temporary appointments will be eligible to enroll in health benefits on the effective date of his or her appointment. He or she will have 30 days to enroll in a health benefits plan.
2. Beginning January 10, 2016, current temporary employees who received notice from the D.C. Department of Human Resources (DCHR) that he or she met the eligibility requirements to enroll in a health benefits plan will have an opportunity to enroll in health benefits during the 2016 Open Enrollment.
3. Eligible employees participating in the DCEHB program must elect to participate in the premium conversion at the time of election, unless they elect to waive participation. Under premium conversion, an employee elects to have the cost of the health insurance plan taken from his or her gross salary instead of the after-tax salary. There are tax benefits for participating in premium conversion, and employees may cancel or change to a “Self Only” plan only during annual open enrollment or when a Qualifying Life Event occurs.
4. Eligible employees who decline the initial offer of coverage can enroll midyear if a Qualifying Life Event occurs or during the open enrollment period.

²The rates listed above are subject to change. Please visit the DCHR’s website for the most up-to-date rates at www.dchr.dc.gov.

5. Eligible employees who separate prior to receiving health benefits will be sent notice of his or her eligibility for health benefits under the Temporary Continuation of Coverage during the open enrollment period.

When-Actually-Employed (WAE) Temporary Appointments

1. DCHR has established an evaluation period of 12-months to determine the eligibility of employees hired in WAE Temporary Appointments who are employed on an intermittent basis, that is, non-full-time without a prescribed regular tour of duty. DCHR will evaluate the personnel records of these employees (i.e., intermittent or seasonal workers) who work less than 30 hours a week or 120 hours per month, and less than 90 days, after 12-months into the appointment, to determine whether they meet the eligibility requirements.
2. DCHR will generate a report annually from PeopleSoft, prior to the health benefits open enrollment period, that will determine eligibility based on the hours worked by the employee throughout the past 12 months to identify individuals who meet the eligibility requirements.
3. WAE temporary employees who have been evaluated and found to have met the eligibility requirement will be identified in PeopleSoft as eligible and provided an opportunity to enroll in health benefits during the next available open enrollment period.
4. Once it is determined by the annual report that the an employee meets the eligibility requirement, he or she will be notified by the DCHR via email of their eligibility for health benefits and when they can participate in an open enrollment period.

Documentation Required for Family Coverage

Proof of Eligibility Requirements

1. An employee who is enrolling or changing to “Self + 1” or “Family” under the DCEHB shall submit the following proof of eligibility of a family member(s) to the DCHR’s Benefits & Retirement Administration (BRA). The document(s) submitted must show the employee or spouse/domestic partner as parent:
 - a. *Spouse: Marriage certificate;*
 - b. *Domestic Partner: Copy of Domestic partnership certification;*
 - c. *Biological child: Copy of Birth Certificate;*
 - d. *Adopted Child: Copy of Adoption or Placement for Adoption Papers;*
 - e. *Step Child: Birth Certificate, Copy of Marriage Certificate, Divorce Decree or Custody Papers;*
 - f. *Foster Child: Original Foster child certification and copy of documentation of regular and substantial support of the child;*
 - g. *Disabled Child: Medical verification of disability prior to age 26; or*
 - h. *Legal Custody: Copy of Court Order granting legal custody.*

2. More than one of the following proofs may be required to show support of a recognized natural child who does not live with the enrollee in a regular parent-child relationship and for whom a judicial determination of support has not been obtained.
 - a. *Evidence of eligibility as a dependent child for benefits under other State or Federal programs;*
 - b. *Income tax return(s) showing the child as a dependent;*
 - c. *Canceled checks, money orders, or receipts for periodic payments from the enrollee for or on behalf of the child;*
 - d. *Evidence of goods or services which show regular and substantial contributions of considerable value; or*
 - e. *Any other evidence deemed sufficient proof of paternity, maternity or support by DCHR.*
3. Employees must submit the above supporting documentation within 60 days of health benefits enrollment or change to the DCHR via email at dchr.benefits@dc.gov. Failure to submit supporting documentation may result in cancellation of health benefits.

Designation and Notice of Eligibility

1. For current temporary employees who meet the eligibility requirements, DCHR shall notify these employees of their eligibility to enroll during the 2016 open enrollment period. This notice shall provide information on the employee's eligibility and instructions on how to enroll for health insurance benefits in PeopleSoft.
2. DCHR, agencies with delegated personnel authority, and independent personnel authorities, are responsible for ensuring that appointees to temporary positions are informed of his or her eligibility for health benefits in the offer letter. For appointees who meet the eligibility requirements, the following statement must be included in the offer letter:

Benefits Eligibility Statement

As a temporary benefits eligible employee, you will be eligible to participate in our HMO health benefits plan, 457 deferred compensation, and 529 college savings plans.

3. For appointees who do not meet the eligibility requirements, the following statement must be included in the offer letter:

Benefits Eligibility Statement

Currently, your appointment is ineligible for benefits; however, if you remain employed in this appointment beyond your not-to-exceed date, your eligibility for health benefits will be evaluated within 12-months of your appointment.

DCHR and Agency Coordination

1. DCHR shall coordinate with subordinate and independent agencies on an annual basis to notify all temporary employees identified as “To Be Determined” in PeopleSoft of their eligibility to enroll in health benefits.
2. Prior to the health benefits open enrollment period each year, DCHR will execute an automated process to determine employees’ eligibility based on the hours worked throughout the past 12-months of employment.

Entering Eligibility Status in PeopleSoft

1. DCHR, agencies with delegated personnel authority, and independent personnel authorities shall ensure that all initial temporary appointment personnel actions have the required benefits eligibility status field completed in PeopleSoft.

All initial temporary appointment personnel actions shall be coded in PeopleSoft as follows:

ACA Eligibility Status	Type of Temporary Appointment
Eligible	<ul style="list-style-type: none"> • Full-Time Appointment; and • WAE Appointment in excess of 90 days and average 30 hours a week/120 hours a month.
To Be Determined	<ul style="list-style-type: none"> • WAE Appointment less than 90 days and less than 30 hours a week/120 hours a month. <p>[Note: The employees in this category will not be immediately eligible for health benefits. An automated process will be executed annually, prior to the benefits open enrollment period that will determine eligibility based on the hours worked by the employee throughout the past 12-months.]</p>
Ineligible	<ul style="list-style-type: none"> • For temporary employees that were identified with a status of “To Be Determined,” after the annual eligibility program is executed in PeopleSoft, those temporary employees who did not meet the criteria for eligibility will have their ACA Eligibility Status changed to “Ineligible” for the current evaluation period. If the temporary employee is still active, a new eligibility record will be entered for the next evaluation period. This value cannot be selected manually and is displayed to the HR Specialist for informational purposes only.

Legal Authorities and Applicability

Legal Authorities

- The Patient Protection and Affordable Care Act (42 U.S. C. § 18001), effective March 23, 2010.
- Mayor's Order 2012-28, Sub-delegation and Delegation of Personnel Authority – Director, D.C. Department of Human Resources and Chief of Police, dated February 21, 2012.

Applicability

The provisions of this instruction apply to those District government employees in agencies which are subordinate to the Mayor's personnel authority. Other personnel authorities or independent agencies may adopt any or all of these procedures to provide guidance to employees under their respective jurisdiction.

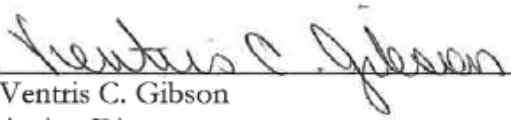
Definitions

As used in this bulletin –

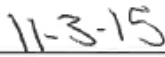
- “Qualifying life event (QLE)” means a change in an employee's life deemed acceptable by the Internal Revenue Service that may allow the premium conversion participants to change their participation election for premium conversion outside of an Open Season.

Additional Information

For additional information concerning this instruction, please contact the DCHR's Benefits and Retirement, Administration by calling (202) 442-9700 or by sending an e-mail to dchr.benefits@dc.gov.



Ventris C. Gibson
Acting Director



Date