

ACA Reporting

Revised 12/28/2015

Covered Individual Data extracted by OGB to provide to agencies/reporting entities

Field #	CSV Column / Row	Field Name	Size	Start	End	Description	values/format
File Data							
1	A1	File date	8	1	9	Date file was created	ccyymmdd
2	B1	Reporting Year	4	10	13	Reporting period	ccyy
3	C1	Reporting Entity	50	14	63	Entity Name	
4	D1	Agency Code	4	64	67	OGB Agency code	
Subscriber Information							
5	E1	Employee Status	1	68	68		A=Active/Rehired Retiree, R=Retired, C=Cobra (COB), S=Survivor (SV), O=Other
6	F1	Employee SSN	9	69	77	Subscriber SSN	no dashes
Member/Individual Information							
7	G1	Individual Status	1	78	78		1=Employee, 2=Retiree/Rehired Retiree, 3=Non-Employee (COB/SV/Other), 4=Dependent
8	H1	Last Name	20	79	98		
9	I1	First name	15	99	113		
10	J1	SSN	9	114	122	Individual SSN	
11	K1	DOB	8	123	130		ccyymmdd
Subscriber Address Information (for 1095B/C - Part I)							
Fields populated only on Employee records							
12	L1	Street Address1	35	131	165		
13	M1	Street Address2	35	166	200		
14	N1	City	30	201	230		
15	O1	State/province	2	231	232		
16	P1	Zip/country and Postal code	10	233	242		
Employer Information (for 1095B -- Part II; 1095C - Part I)							
17	Q1	Name of Employer	30	243	272		

18	R1	Employer EIN	9	273	281		
19	S1	Employer Street Address1	35	282	316		
20	T1	Employer Street Address2	35	317	351		
21	U1	Employer Telephone	10	352	361		
22	V1	Employer City	30	362	391		
23	W1	Employer State	2	392	393		
24	X1	Employer Zip Code	10	394	403		
Medicare Information (for 1095B - Part III)							
These fields populated only on individual records for Retirees/COBRA/Survivors who have Medicare							
25	Y1	Medicare A eff	8	404	411		ccyymmdd
26	Z1	Medicare B eff	8	412	419		ccyymmdd
27	AA1	Medicare HICN	12	420	431		
Offer Information (for 1095C - Part II/Line 14)							
28	AB1	Offer -- 12 months	2	432	433		May be populated when covered all 12 months with same code
29	AC1	Offer -- Jan	2	434	435		Active FT Employees and Rehired Retirees will be blank
30	AD1	Offer -- Feb	2	436	437		
31	AE1	Offer -- Mar	2	438	439		May be populated on subscriber records of:
32	AF1	Offer -- Apr	2	440	441		Survivors, Retirees, COBRA, and Others.
33	AG1	Offer -- May	2	442	443		See below scenario documentation.
34	AH1	Offer -- Jun	2	444	445		
35	AI1	Offer -- Jul	2	446	447		
36	AJ1	Offer -- Aug	2	448	449		
37	AK1	Offer -- Sep	2	450	451		
38	AL1	Offer -- Oct	2	452	453		
39	AM1	Offer -- Nov	2	454	455		
40	AN1	Offer -- Dec	2	456	457		
Cost Information (for 1095C - Part II/Line 15)							
41	AO1	Low Prem -- 12mos	10	458	467		
42	AP1	Low Prem -- Jan	10	468	477		May be populated on subscriber records of:
43	AQ1	Low Prem -- Feb	10	478	487		Active Employees, Rehired Retirees, Retirees, and COBRA.

44	AR1	Low Prem -- Mar	10	488	497		See below scenario documentation.
45	AS1	Low Prem -- Apr	10	498	507		
46	AT1	Low Prem -- May	10	508	517		
47	AU1	Low Prem -- Jun	10	518	527		
48	AV1	Low Prem -- Jul	10	528	537		
49	AW1	Low Prem -- Aug	10	538	547		
50	AX1	Low Prem -- Sep	10	548	557		
51	AY1	Low Prem -- Oct	10	558	567		
52	AZ1	Low Prem -- Nov	10	568	577		
53	BA1	Low Prem -- Dec	10	578	587		
Coverage Code (for 1095C - Part II/Line 16)							
These fields populated on all covered subscribers							
54	BB1	Coverage code -- 12 mos	2	588	589		May be populated when covered all 12 months.
55	BC1	Coverage code -- Jan	2	590	591		If covered all 12 months -- individual months will be blank
56	BD1	Coverage code -- Feb	2	592	593		See below scenario documentation.
57	BE1	Coverage code -- Mar	2	594	595		
58	BF1	Coverage code -- Apr	2	596	597		
59	BG1	Coverage code -- May	2	598	599		
60	BH1	Coverage code -- Jun	2	600	601		
61	BI1	Coverage code -- Jul	2	602	603		
62	BJ1	Coverage code -- Aug	2	604	605		
63	BK1	Coverage code -- Sep	2	606	607		
64	BL1	Coverage code -- Oct	2	608	609		
65	BM1	Coverage code -- Nov	2	610	611		
66	BN1	Coverage code -- Dec	2	612	613		
Coverage Information (for 1095B - Part IV; 1095C - Part III)							
These fields populated for each covered individual							
67	BO1	Covered all 12 months	1	614	614		May be populated when covered all 12 months with same code.
68	BP1	Covered January	1	615	615		If covered all 12 months -- individual months will be blank
69	BQ1	Covered February	1	616	616		

70	BR1	Covered March	1	617	617		F=Fully-Insured (Vantage Plan - Report for Actives & Rehired Retirees)
71	BS1	Covered April	1	618	618		S = Self-Insured (BCBS Plans & LSU Plans - for Actives, Rehired Retirees, COBRA, Survivors & Others)
72	BT1	Covered May	1	619	619		
73	BU1	Covered June	1	620	620		
74	BV1	Covered July	1	621	621		
75	BW1	Covered August	1	622	622		
76	BX1	Covered September	1	623	623		
77	BY1	Covered October	1	624	624		
78	BZ1	Covered November	1	625	625		
79	CA1	Covered December	1	626	626		

Scenario	Line 14	Line 15	Line 16	Additional Comments
Active Employees				
Active FT employee	Blank	Lowest self-only rate offered	2C	OGB will provide data for line 15, 2C and Part III data.
COBRA Offer Scenarios				
FT to PT and did not enroll in COBRA	1E	Lowest self-only rate for COBRA	2B	OGB will provide a separate file, "ACA Part-Time COBRA Offer" for this scenario only. OGB will provide data for lines 14, 15, and 16 for 18 months unless the employee picks up OGB coverage.
Employee was FT and went to PT, receives an offer of COBRA coverage and enrolled	1E	Lowest self-only rate for COBRA	2C	If self-insured, complete Part III for all enrolled individuals and in column (e) check applicable months that COBRA coverage was provided for at least one day in the month. OGB will provide 1E, data for line 15, 2C and Part III data.
During a previous calendar year, the employee went from FT to PT, receives an offer of COBRA and enrolls . For the current calendar year, the employee is still enrolled in COBRA coverage	1G	Blank	2C	If self-insured, complete Part III for all enrolled individuals and in column (e) check applicable months that COBRA coverage was provided for at least one day in the month. OGB will provide 1G, 2C, and Part III data.
The employee terminates employment and enrolls in COBRA coverage (same calendar year they terminated employment)	1H	Blank	2A	If self-insured, complete Part III for all enrolled individuals and in column (e) check applicable months that COBRA coverage was provided for at least one day in the month. OGB will provide 1H, 2A, and Part III data.
In a previous year, the employee terminated employment and enrolled in COBRA coverage.	Blank	Blank	Blank	This is the coding for the calendar year after termination and still enrolled in COBRA. If self-insured, complete Part III for all enrolled individuals and in column (e) check applicable months that COBRA coverage was provided for at least one day in the month. OGB will not send anything for Line 14, 15 or 16, but will send Part III data.

Scenario	Line 14	Line 15	Line 16	Additional Comments
Other Non-Employee Scenarios				
Covered Retirees, Survivors, and Others that were not employees any time during the calendar year	1G	Blank	2A	Part III is also completed for covered individuals of covered retirees and survivors for self-insured plans. OGB will provide 1G, 2A, and Part III data
Retired during the calendar year, has coverage as a retiree.	1H	Blank	2A	Enter these codes for months after retirement, same calendar year of retirement. OGB will provide 1H, 2A, and Part III data.
Rehired Retirees				
FT rehired retiree that waives coverage as an active FT employee and retired from an agency with same EIN, has OGB coverage	Blank	Lowest self-only rate available to the rehired retiree	2C	Rehired retiree will be on the OGB flat file of the agency paying the premium. OGB will send Line 15 data, 2C, and Part III data.

**Employee Share of Lowest Cost Self-Only Premium Rates
2015 OGB Plan Year**

Begin Date	End Date	Plan	Description	Rate
01/01/2015	02/28/2015	CDHP	ACTIVE (WITHOUT MEDICARE)	115.28
03/01/2015	06/30/2015	HSA	ACTIVE (WITHOUT MEDICARE)	56.96
07/01/2015	12/31/2015	HSA	ACTIVE (WITHOUT MEDICARE)	59.24
01/01/2015	02/28/2015	HMO	ACTIVE (WITH MEDICARE)	140.28
03/01/2015	06/30/2015	HRA	ACTIVE (WITH MEDICARE)	98.52
07/01/2015	12/31/2015	HRA	ACTIVE (WITH MEDICARE)	102.46
01/01/2015	02/28/2015	HMO	REHIRED RETIREE - EARLY RETIREMENT ACT 322 & ACT 992 56%	626.48
03/01/2015	06/30/2015	HRA	REHIRED RETIREE - EARLY RETIREMENT ACT 322 & ACT 992 56%	437.65
07/01/2015	12/31/2015	HRA	REHIRED RETIREE - EARLY RETIREMENT ACT 322 & ACT 992 56%	455.14
01/01/2015	02/28/2015	HMO	REHIRED RETIREE - EARLY RETIREMENT ACT 322 & ACT 992 75%	626.48
03/01/2015	06/30/2015	HRA	REHIRED RETIREE - EARLY RETIREMENT ACT 322 & ACT 992 75%	437.65
07/01/2015	12/31/2015	HRA	REHIRED RETIREE - EARLY RETIREMENT ACT 322 & ACT 992 75%	455.14
01/01/2015	02/28/2015	HMO	REHIRED RETIREE 19%	848.38
03/01/2015	06/30/2015	HRA	REHIRED RETIREE 19%	593.93
07/01/2015	12/31/2015	HRA	REHIRED RETIREE 19%	617.68
01/01/2015	02/28/2015	HMO	REHIRED RETIREE 38%	649.38
03/01/2015	06/30/2015	HRA	REHIRED RETIREE 38%	454.61
07/01/2015	12/31/2015	HRA	REHIRED RETIREE 38%	472.80
01/01/2015	02/28/2015	HMO	REHIRED RETIREE 56%	460.85
03/01/2015	06/30/2015	HRA	REHIRED RETIREE 56%	322.63
07/01/2015	12/31/2015	HRA	REHIRED RETIREE 56%	335.54
01/01/2015	02/28/2015	HMO	REHIRED RETIREE 75%	140.28
03/01/2015	06/30/2015	HRA	REHIRED RETIREE 75%	98.52
07/01/2015	12/31/2015	HRA	REHIRED RETIREE 75%	102.46

Provided by OGB 1/14/2016