Enrollment Report for ACA reporting



Employer Reporting

Applicable Large Employers (ALEs) and self-insured employers are required to fulfill employer reporting requirements under the Affordable Care Act (ACA). An ALE is an employer with more than 50 full-time equivalent employees. Under the Employer Shared Responsibility (Pay or Play) provision of the ACA, ALEs and self-insured groups are required to provide either a 1095-B or 1095-C statement to employees or policyholders by **January 31, 2022** and to the IRS by **February 28, 2022** (for paper filing), or **March 31, 2022** (for electronic filing).

The 1095-B form from HealthPartners shows months of minimum essential coverage for each member under an insured plan. The 1095-C form from an ALE shows whether or not they offered affordable, minimum value coverage to their full time employees (generally defined as working 30 or more hours/week on average). Self-insured ALEs will also report whether an employee and his or her dependents were covered under the plan.

Detail record format

The enrollment report file is a comma separated values (CSV) file, which automatically converts and loads in Excel.

- Any column with an embedded comma will be enclosed in quotes (ex. "Acme, Inc")
- Any embedded quote (") characters in the date are translated to a single quote (') character (ex. John "Buddy" Smith becomes John 'Buddy' Smith)
- The final record on the file will be a trailer record with the "Subscriber Count:" + number of contracts and "Member Count:" + number of members
- The sort order will be by contract number and dependent sequence number

For quick reference, visit irs.gov to view samples of the 1095-B and 1095-C forms.

Column	Data Type	Form Box and/or Comment	
		Does not appear on the IRS 1095-B form	
HEALTHPARTNERS GROUP NUMBER	ALPHANUM(10)	External Group Number that is also part of the file name.	
TAX YEAR	NUMBER	Ex: 2018	
1095-B PART I, POLICY HOLDER INFORMATION REPEATS FOR EVERY MEMBER UNDER THE CONTRACT			
CORRECTED_FLG	ALPHANUM(1)	Y: Form has the CORRECTED box checked	
CONTRACT_NO	NUMBER	Does not appear on the IRS 1095-B form	
PH_MEMBER_NO	NUMBER	Does not appear on the IRS 1095-B form. The external member number.	
1 POLICYHOLDER FIRST NM	ALPHANUM(30)	1	
1 POLICYHOLDER MIDDLE NM	ALPHANUM(1)	1	
1 POLICYHOLDER LAST NM	ALPHANUM(30)	1	
1 POLICYHOLDER SUFFIX	ALPHANUM(10)	1	
2 POLICYHOLDER SSN	ALPHANUM(20)	2	
3 POLICYHOLDER DOB	DATE	3 Filled only if the POLICYHOLDER SSN is not available	
4 POLICYHOLDER ADDRESS1	ALPHANUM(50)	4	
4 POLICYHOLDER ADDRESS 2	ALPHANUM(50)	4	
5 POLICYHOLDER CITY	ALPHANUM(30)	5	
		Does not appear on the IRS 1095-B form If Y, the US address fields are blank and the foreign address fields	
FOREIGN_ADDRESS_FLG	ALPHANUM(1)	are filled in.	
6 POLICYHOLDER STATE	ALPHANUM(20)	6	
7 POLICYHOLDER ZIP5	ALPHANUM(5)	7	
7 POLICYHOLDER ZIP4	ALPHANUM(4)	7	
6 POLICYHOLDER FOREIGN PROVINCE	ALPHANUM(30)	6	
7 POLICYHOLDER FOREIGN COUNTRY CODE	ALPHANUM(10)	7	

Enrollment Report for ACA reporting



POLICYHOLDER FOREIGN COUNTRY	Column	Data Type	Form Box and/or Comment	
POLICY ORIGIN ALPHANUM[1] 8. A: SHOP, 8: Group, D: Individual, Blank: Self-Insured 9 SHOP MARKET ALPHANUM[20] 9. This column is NULL for tax year 2018.	7 POLICYHOLDER FOREIGN COUNTRY	ALPHANUM(50)	7	
SHOP MARKET	7 POLICYHOLDER FOREIGN POSTAL CODE	ALPHANUM(20)	7	
1095-0 PART II GROUP INFORMATION REPEATS FOR EVERY ROW	8 POLICY ORIGIN	ALPHANUM(1)	8. A: SHOP, B: Group, D: Individual, Blank: Self-Insured	
10 GROUP NAME	9 SHOP MARKET	ALPHANUM(20)	9. This column is NULL for tax year 2018.	
11 1 1 1 1 1 1 1 1	· · ·			
12 GROUP ADDRESS1	10 GROUP NAME	ALPHANUM(75)	10	
12 GROUP CITY ALPHANUM(30) 13 13 GROUP CITY ALPHANUM(30) 14 15 GROUP CITY ALPHANUM(30) 14 15 GROUP ZIPS ALPHANUM(4) 15 GROUP ZIPS ALPHANUM(4) 15 GROUP ZIPS ALPHANUM(4) 15 GROUP ZIPS ALPHANUM(4) 15 15 GROUP ZIPS ALPHANUM(4) 16 17 15 15 GROUP ZIPS ALPHANUM(4) 17 16 16 17 17 17 17 17	11 GROUP EIN	ALPHANUM(20)	11	
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23D NOV ENROLLED ALPHANUM(1)	23D OCT ENROLLED	ALPHANUM(1)	1	
		` '	1	
	23D DEC ENROLLED	ALPHANUM(1)	1	

Consult with your tax advisor with questions.