

2015 Affordable Care Act Presentation

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Important!

All customers should gain an understanding of the ACA laws and how to apply them.

Please contact your tax advisor to clear up any confusion about the law.

Armed with the knowledge of the ACA reporting requirements, follow the steps in the detailed documentation provided on our website to gain an understanding of the fields that have been added to eCMS in order to populate the appropriate information and produce the 1094C and 1095C eForms and XML's.

After viewing this video and reading the detailed documentation, any further questions **regarding eCMS** should be submitted via the online support process.

Any questions pertaining to the ACA law should either be submitted to your tax advisor or researched on the IRS website.



ACA Documentation on Website



CGC Customer Support Website

http://www.computerguidance.com

Login Requirements:

User Name:

Customer Number

Password:

Postal Code

Documentation Available under:

Resources >

QE and YE Documentation >

Affordable Care Act – ACA

ACA Setup and Implementation Instructions

Handling Union Employee Enrollment In HR for ACA

Dependent Import

Instruction for populating the "ACA Produce Reporting Field" in HR



ACA Phase I



HR Defaults

Admin > Application Installation > Setup Default Values > HR Default > Screen 4





ACA Maintain Lowest Self Premium Rate HR > ACA

Hum

an Resources	Self Premium Rate	HRP40401
	Co 15 Div 0 Effective Date > 01/01/2015	
	1095-C Line 15	
	Complete line 15 only if code 1B, 1C, 1D, or 1E is entered on lin the "All 12 Months" box or in any of the monthly boxes.	ne 14 either in
	User can enter more than one record for a given year. Cover overlap years due to coverage start date	age can also





ACA Maintain Lowest Self Premium Rate (cont.)

Human Resources	Self Premium Rate	Mode: Update HRP40402
	Effective Date01/01/2015Lowest Self Premium94.00	
	1095-C Line 15 (cont.)	
	Lowest-cost monthly premium for self-only minim providing minimum value that is offered to the employ not be the amount the employee is paying for the cove employee chose to enroll in more expensive co coverage.	oum essential coverage byee. This amount may erage, for example, if the verage such as family
	Enter the amount including any cents.	





H/R Benefit Master Maintenance

HR > Maintenance >

Human Resources Benefit Number: 800 UDC	Benefit Master Maintenance	Field must be entered exactly as it is in HR Default.
Description: ACA HIR Deduction	~ ~	Unable to select from prompt – Tip – Use Copy/Paste
Reporting Benefit: 0 Benefit Type: 2-Deductions IV Benefit Value: 0.00 Value Description: Image: Constraint of the second	Unit Cost: 0.00 Unit Limit: 0 Unit of Measure: E Match Maximum: 0.00 Employee Maximum: 0.00 Percent of Wage: 0.00 Include Commission	HRSS Benefit Category: Medical Ins Provider Phone Number: Provider Website: Identifies if the Benefit or Deduction is exposed
Benefit Deduction Calculation Fixed Amount: 0.00 or or or O Percent Rate: 0.00 Arrears Deduction Percent: 0.00 Percent Code: V or Calculation Method: or V Regular Hour Rate: 0.000 Overtime Hour Rate: 0.000 Other Hour Rate: 0.000 Gross Pay Code: 0-All Houry Gross Maximum Hours: 0.00 Image: Per Pay Period Associated Ben/Ded:	Benefit Match Calculation Match this Benefit: Employee Deduction: 0 Matching Percent 0.00 Pay Period Maximum: 0.00 Maximum Code: Image: Second Maximum: 0.00 COBRA Eligible: FSA Code: Processing Sequence: 0	Taxable:



H/R Employee Data Maintenance HR > Maintenance > Personnel Data > General Screen

Human Resources								Employee Data I	laintenance				Mod	e: Update	HRP12001	HRPM06 - 4
Social Security Num	ber: 000-00-0800	1		Employee	Name: Albert C Ame	s										
General	General 2	Attendance	Behavioral Prof	Benefit/Deducti	Benefits Select	Comment	Comp Time	Company Prop	ert Contact	Dependents	Education	Emp Deductions	Employment	Events	Grievance	History
Ind Specialty	Insurance	Language Skills	Medical	Memberships	Military Servic	Occupation Hist	References	Resume	Salary Review	Skill History	Skill Inventory	State/Local	Termination His	Termination Lis	Training	UDC
Vac/Sick/Comp																
Full Name:			Albert C Ames						Address 1:			875 S Fork Road				
First Name:			Albert						Address 2:							
Middle Name 1:			Charles						Address 3:							
Middle Name 2:									City:			Gilbert				
Last Name:			Ames						State:			AZ <				
Name Suffix:									Zip/Postal Code:			85800				
Name Abbreviatio	n:		AMES A]					Phone Number:			480 8008888				
Employee Class:		0				Payroll Employee				Date	35			D	river's License	
Employee Type:		<		Employe	e Number:		800		Hire:		01/01/20	07	Number:			
Marital Status:		Married 🗸		Compa	ny Number:		15		Rehire:		01/01/20	07	Expiration:			
Gender:		Male 🗸		Divisio	n Number:		0 <		Adjusted Date of Hire:				Class:			
Handicap Code:				Depart	ment Number:		100 <		Available:				Issuing Author	ity:		
Minority Code:		1 <		Security	Rating:		0 <		Review:							
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Permanent Reside	ent:	•		Blood T	pe:				Birth Place:				Employee Stat	e:	UC	<
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Security Level:		1-Craft Lbr	V			ACA	-						Dhone Number			
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Rec	uirec	l in 20	16	Full Tim	e Date:		01/01/2007			-	1					
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		_		10950 L	no 16:				Company:	0			Company:		0	
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	-			Floduce	noporung.		2									





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H/R Employee Data Maintenance (cont.) HR > Maintenance > Personnel Data > General Screen

- ACA fields on the 1st screen of employee Personal Data
- Full Time Employee identify if the employee is full time and is informational only for eCMS.
 Optional field for eCMS
- Date Full Time date employee became full time and is informational only for eCMS. Optional field for eCMS
- Plan Start Month if populated this value will be used as the reported month the employee's plan started. Optional field for eCMS for 2015. Will be required for 2016.
- 1095C Line 14 if populated this value may be used for line 14 for each month the employee is reported. Optional field for eCMS
- 1095C Line 16 if populated this value may be used for line 16 for each month the employee is reported. Optional field for eCMS
- Produce Reporting required field for employee to be included in ACA Reporting both forms and XML; a utility function has been developed to allow one to populate this value en masse.





H/R Employee Data Maintenance (cont.)

HR > Maintenance > Personnel Data > **Benefit / Deduction Screen**

Human Resource	S						E	Benefit/Deduction E	nrollment				Mod	e: Update	HRP12801	н	IRPM06 - I
Social Security Nu	mber: 000-00-1	0800		Employee I	ame: Albert C Ame	es											
General	General 2	Attendance	Behavioral Prof	Benefit/Deducti	Benefits Select	Comment	Comp Time	Company Propert	Contact	Dependents	Education	Emp Deductions	Employment	Events	Grievance	History	
Ind Specialty	Insurance	Language Skills	Medical	Memberships	Military Servic	Occupation Hist	References	Resume	Salary Review	Skill History	Skill Inventory	State/Local	Termination His	Termination Lis	Training	UDC	
Vac/Sick/Comp																	
Benefit Number:	800			ACA H/R Dedu	tion												
		Frequency Code:			7-Every pay p	eriod 🗸					Deductio	n/Benefit Amounts					
		Start Date:			01/01/2007						Year-to-Date	To	-Date	Remainir	g		
		End Date:			12/31/2099			E	mployee:		125.00		125.00		0.00		
		Declined:				10000		E	mployer:		0.00	L	0.00				
		Date Declined:		Γ													
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H/R Employee Data Maintenance (cont.)

HR > Maintenance > Personnel Data > Benefit / Deduction Screen > Override ACA







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H/R Employee Data Maintenance (cont.)

HR > Maintenance > Personnel Data > Benefit / Deduction Screen > Override ACA







H/R Employee Data Maintenance (cont.) HR > Maintenance > Personnel Data > Benefit / Dependents

Social									Deben	Jent Lindin	iem					Mou	e. opuate	TIRE 125	02
	Security/SI Numb	ver: 000-00-080	00		Em	ployee Name: A	lbert C Ames				6				1				
G	eneral G	General 2	Attendance	Behavioral Prot	Benetit/D	educti Benet	tits Select Comment	Comp Tim	e Compar	iy Propert	Contact	Dependents	Education	Emp Deductions	Employm	ent	Events	Gne	vance
Vac/S	ick/Comp	nsurance	Language Skills	Medical	Member	snips Minita	Ty Servic Occupation Hist	Reference	s Re	sume	Salary Review	Skill History	Skill inventory	State/Local	Termination	THIS	Termination Lis	Ina	Jining
Bene	fit Number:						800						A	CA H/R Deducti					
Enroll		Name		Relationship	Gender	Birth Date	Social Security/SI Number	Handicapped	Marital Status	Court Orde	er Addre	ess 1	Address 2	С	ity	State	Zip/Postal Code	e Country	Eligi
4	Annable C Ames			100	Female 🗸	01/28/1972	000-00-0801		Married 🗸										
•	Beverly B Ames			100	Female 🗸	02/03/2004	000-00-0802		Married 🗸										
•	Justin J Ames			100	Male 🗸	12/31/2012	000-00-0803		Married 🗸										
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H/R Employee Data Maintenance (cont.) HR > Maintenance > Personnel Data > Benefit / Dependents > Override ACA





H/R Employee Data Maintenance (cont.) HR > Maintenance > Personnel Data > Benefit / Dependents > Override ACA

Image: 2015 Dependent Name Monthle C Arnes Image: I
Dependent Name Month: 1 2 3 4 5 6 7 8 9 10 11 12 Annable CAmes .
Setup Dependents Coverage by Month for each dependent



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ACA Reporting Considerations

- ACA Create Union HR Enrollment Records this feature creates benefit enrollment records for use in ACA reporting for employees that belong to a union that provides the union member with health benefits.
- **HR Dependent Import** using the options on the Dependents Import menu, you can import, print, edit, and update Dependents Import records.
- ACA Populate Produce Reporting Field this feature will check the ACA Produce Reporting field in the Employee Personal Data Extension File (HRTEMPXT) which is required for an employee to be included in ACA Reporting.
- The documentation for all three options can be found on the 'ACA Documentation on Website' slide above.





ACA Phase II

During Phase II of the following will occur

- Intermediate files will be created
- These files will be used to produce the 1094C and 1095C Content tables (and registers)
- These registers will be used to audit what will be reported





HR > ACA > Screen 1

Human Resources	Create 1094C/1095C Content	HRP40601 -
All Co/All Div Security Input Fields Company Division Federal Id (EIN)	Company Name for Co/Div 15 Include Co(s)/Div(s) with a Common Federal ID# 123-456789 Year 2015 Authoritative Tran Default Offer of Coverage 1H 🗸 Member of Aggreg Default Section 4980H Safe HarborCode 2E 🗸 Year	Company smittal Y Division ated ALE Group V Fed ID -EIN
	Contact Person FRIST (First) MIDDLE (Middle) LAST (Last)	
Single Co/All Div Security Input Fields Division Federal Id (EIN)	Telephone 123 1234567 Ext 1234 Run Comment RUN JOB ID FOR 165638 Run Job ID 165638 Supplied by Run) SSN Last 4 Digits Image: Control of the second	





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ACA Create1094C/1095C Content

HR > ACA (cont.) > Screen 1

- **Year** 4 digit long
- Authoritative Transmittal is hard coded as 'Y' output only, the 1094-C transmittal being produced is the final.
- Member of Aggregated ALE Group is a 'Y'/'N' checkbox. If 'Member of Aggregated ALE Group' is checked 'yes' additional input fields for 'Other ALE Members of Aggregated ALE Group Member names and EIN numbers will be displayed on the next screen.
- Default Offer of Coverage Used to populate line 14 if no values exist in either the Employee ACA Override or the Personnel Data General tab.
 - If no value is found for Line 14 and the H/R Default flag for Qualified Offer Method is 'Y', then line 14 value(s) will be populated with '1A' (Qualifying Offer)





HR > ACA (cont.) > Screen 1

- Default Section 4980H Safe Harbor Code Used to populate line 16 if no values exist in either the Employee ACA Override or the Personnel Data General tab.
- Contact Person name fields are 25 long. Both First and Last names are required
- **Telephone** input is required for area code and phone number
- Run Comment is a 50 long alpha field to be used to help user identify content for the run. This field is required; each run is retained for later potential use
- Run Job ID is the job number found in the program SDS and is inhibited/protected – it is being used to help insure uniqueness of the run content; each run is retained for later potential use



HR > ACA (cont.) > Screen 1

- SSN Last 4 Digits is a 'Y' or ''N' value used to determine if the listing/register is to print the entire SSN or just the last four digits
- Outq/Hold/Save used to control the output specifics of the listing/register





HR > ACA > Screen 2

Human Resources

				(Create 1094C/1095C Content	HRP40602
	MEC Offer	ALE Member Full Time	Empl Counts Total	Aggregated Group Ind	Section 4980H Trans Relief Indicator	Other ALE Members of Aggregated ALE Group Name EIN
All 12 Months:		0	0		V	
January :		0	0		V	
February :		0	0		V	
March :		0	0		V	
April :		0	0		V	
May :		0	0		V	
June :		0	0		V	
July :		0	0		V	
August :		0	0		V	
September:		0	0		V	
October :		0	0		V	In order to understand this
November :		0	0		V	screen you will need to read IRS
December :		0	0		V	specifications



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ACA Create1094C/1095C Content

HR > ACA > Screen 2

- Values can be entered once for 'All 12 Months' or per month
- MEC Offer Indicator is a checkbox 'Y' or 'N'
- If the Offer Method Trans Relief is 'Y' in the HR defaults, then the 'All 12 Months' value must be checkbox 'Y' or some (or all) of the twelve monthly must be checkbox 'Y' (and the 'All 12 Months' value is 'N').
- The same rules apply if the **98% Offer Method is 'Y'** in the HR defaults.
- ALE Member Emp Count Full-Time if the 98% Offer Method is 'Y' in the HR Defaults, 'All 12 Months' and the twelve monthly buckets can all be zero.
- ALE Member Emp Counts Total total values (for both the 'All 12 Months': value and the twelve monthly buckets) must be greater than or equal to the corresponding 'ALE Member Emp Counts' 'Full-Time' values





HR > ACA > Screen 2

- Aggregated Group Ind is a 'Y'/'N' checkbox
- Section 4980H Trans Relief Indicator (A/B) -
 - If the H/R Default Section 4980H Trans Relief value is 'N', the 'All 12 Months' value and the twelve monthly buckets must be blank
 - If the H/R Default Section 4980H Trans Relief value is 'Y', then either the 'All 12 Months' value or the twelve monthly buckets are populated.
- Other ALE Members of Aggregated ALE Group -
 - Name is 30 long alpha
 - EIN is 15 long alpha. The actual federal awarded ID's are 9 digits long with a dash
 - Note: both name and EIN values must be entered if either value is entered per pair.
 25



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Phase II – Register 1094C

DATE Y Form	12/18/15 HRP4(ear of Run: 201 1094-C Trans)7 15 Federal Id No: 11-223344 mmittal of Employer-Provided	H/R - ACA 15 Job Number: 448 COM Health Insurance Offer a	: Report for 770 MENT FOR RJID nd Coverage I	HRP94C/HRP95C/HRP95CCV Conte Run Co: 15 Run Div: 000 448770 nformation Returns	ent SSN Last 4 Digi	ts: Y	TIME 8.21	PAGE
Part	I - Applicable	e Large Employer Member (ALE	Member)						
1 Na PC's 3 St 1 Ea 4 Ci Gold 7 Na PENN 9 Na	me of ALE Member Construction - reet Address (: sy Street SUITH ty or town Canyon me of person to Y J CHAMBERS me of Designate	er (Employer) • 40.0 including room or suite no.) 1 123 • contact •d Government Entity (only if	5 State or province MD : applicable)	2 Employer 11-2233445 6 Country a US 12345-67 8 Contact t (480) 444-7 10 Employer	identification number (EIN) nd Zip or foreign postal cod 89 elephone number 000 identification number (EIN)	le			
11 S	treet Address(i	including room or suite no.)							
12 C	ity or town		13 State or province	14 Country	and Zip or foreign postal co	ode			
15 N	ame of person t	o contact		16 Contact	telephone number				
18 T 19 I 	otal number of s this the auth II - ALE Membe	Forms 1095-C submitted with horitative transmittal for the er Information	this transmital his ALE Member? If "Yes,"	check the bo	x and continue. If "No," see	instructions	x	1	
21 1 1 22 C X Part	s ALE Member a f "No," do not ertifications o A. Qualifying o III - ALE Memb	member of an Aggregated ALE complete Part IV. of Eligibility (select all th offer Method X E. Qualifyin ber Information Monthly (a) Minimum Essential Com	Group?	n Relief X	C. Section 4980H Transition (c) Total Employee Count	Relief D. 98% (d) Aggregated	Ves X No Offer Method (e) Section	4980H	
		Offer Indicator Yes No	for ALE	Member	for ALE Member	Group Indicator	Transition Relief	Indicator	
23	All 12 Months	Y N		350	355	Y	А		
24	Jan	N Y				N			
25	Feb Mar	N Y N Y				N			
27	Apr	N Y				N			
28	May	N Y				N			
29	June	N Y				N			
30	Aug	N Y				N			
32	Sept	N Y				N			
33	Oct	N Y				N			
34 35	Nov Dec	N Y N Y				N			
Part	IV - Other AL	E Members of Aggregated ALE (roup						
	Nar	ne EIN							
36	JB CONTRUCTION	86-444444	l de la companya de la company						
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Phase II – Register 1095C

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DATE 12/18/15 HRP40 Year of Run: 201	07 15 Federal I	d No: 11-2	233445	Job	H/R - Number:	ACA: Re 448770 COMMENT	port for FOR RJID	HRP94C/H Run Co 448770	RP95C/HRF : 15 Ru	95CCV Co in Div: 0	ntent 00 S	SN Last	4 Di	gits: Y		1	FIME (8.21	PAGE	2
Form 1095-C Emplo	oyer-Provided	Health Ins	urance (offer and	Coverage															
Part I - Employee							Applic	able Lar	ge Employ	ver Membe	r (Emp	loyer)								
1 Name of employee Albert C Ames 3 Street address (i 875 S Fork Road 4 City or town	including apar 5 State	tment no.) or provin	2 Soc: xxx-x	al securi C-0800 6 Country	ty number	er (SSN)	7 Name PC's C 9 Stre 1 Easy 11 Cit	of empl construct et addre Street y or tow	oyer ion – 40. ss (inclu suite 123 n	.0 nding roo 12 Sta	m or s te or j	uite no province	.) e	8 Em 11-2 10 C (480 13 C	ployer 233445 ontact) 444-7 ountry	identif telepho 000 and ZIH	ficatio one num p	on num mber	ber (EI)	N)
Gilbert	AZ			US 85800			Gold C	anyon		MD				1234	5-6789					
Part II - Employee	Offer and Cov	erage					Plan S	tart Mon	th(Enter	2-digit	number): 01								
14 Offer of	All 12 Months	Jan	Feb	Mar		Apr	May	Jun	J	Jul	Aug	5	Sep	0	ct	Nov		Dec		
required code)		1H	1H	1H		1A	1A	1A	1	A	1A	:	LA	1	A	1A		1A		
15 Employee Share of Lowest Cost Monthly Premium, for Self-Only Minimum Value Coverage	\$.00\$.00	\$.00\$.00\$.00:	ş .	00\$.00\$.00\$.00\$.00\$. 00	Ş	.00\$.00	
16 Applicable Section 4980H Safe Harbor (enter code, if applicable	,													2	с					
Part III - Covered If Empl	Individuals loyer provided	self-insu	red cove	erage, che	ck the b	ox and en	nter the	informat	ion for e	ach cove	red in	dividual	L. X							
(a) Name	e of covered i	ndividual(s)	(b) SSN	(c) DOB not	(If SSN availabl	is (d) e all	Covered 12 months	3 Jan Fe	b Mar i	(e) Mo Apr May	onths June	of Cov July A	erage ug Sept	Oct No	ov Dec			
17 Albert C Ames				xxx-	xx-0800											x				
18 Beverly B Ames				xxx-	xx-0802							x	x	x	x x	x x	x x			
19																				
20																				
21																				
22																				



Important Links to IRS ACA Instruction Guides and Forms

- We highly recommend you access these sites They contain information you will need to complete your ACA forms and XML properly
- Affordable Care Act Information Returns (AIR) Program
- <u>http://www.irs.gov/for-Tax-Pros/Software-Developers/Information-Returns/Affordable-Care-Act-Information-Return-AIR-Program</u>
- 1094-C and 1095-C Instructions
- http://www.irs.gov/pub/irs-pdf/i109495c.pdf
- Form 1094-C Link

- http://www.irs.gov/pub/irs-pdf/f1094c.pdf
- Form 1095-C Link
- http://www.irs.gov/pub/irs-pdf/f1095c.pdf



2016

Important Links to IRS ACA Instruction Guides and Forms (cont.)

- ACA Information Center for Applicable Large Employers (ALEs)
- <u>http://www.irs.gov/Affordable-Care-Act/Employers/ACA-Information-Center-for-Applicable-Large-Employers-ALEs</u>
- The new ACA Information Center for Applicable Large Employers page on IRS.gov <u>http://www.irs.gov</u> Affordable-Care-Act/Employers/ACA-Information-Center-for-Applicable-Large-Employers-(ALEs) features information and resources for employers of all sizes on how the health care law may affect them if they fit the definition of an applicable large employer.
- The web page includes the following sections: (1) What's Trending for ALEs, (2) How to Determine if You are an ALE, (3) Resources for Applicable Large Employers, and (4) Outreach Materials.
- Visitors to the new page will find links to: (1) Detailed information about tax provisions including information reporting requirements for employers, (2) Questions and answers, and (3) Forms, instructions, publications, health care tax tips, flyers and videos.



2016 Focus ACA Issues Break Out

- Miscellaneous (housekeeping/cleanup)
- Rejects/Corrections Handling
- Changes/Enhancements to the Algorithmic Approach



Current Items

- 1095-C-Eform print order (SS#, employee name, employee #)
- Delete function (of intermediate (content)) tables by year/run-job-id
- "Override ACA" panels need employee co/div/name/number (Hrp131FM(01,02) and Hrp133FM(01,02))



Override ACA

Employ	ee ACA Values	
Year	<u> </u>	
	Employ Year	Year

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• employee # on content report

- Hrtemp95c table name (is ACA 1095C Emp Offer & Coverage)
- Hrtdpn95c presentation (can't have coverage end date in HrtDpn?)
- ? Hrt95ccv dependent presentation
- AGI indicator couple with "member of Aggregated ALE Group" (Hrp406FM(01,02))
- edit ALE group member EIN when creating content tables
- Hrt95ccv -> name in last, first, middle order
- comma in eForms mail page between city and state of addressee address
- plan start month "00" (must populate for TY 2016 forward)
- manifest: transmitter name versus company to contact name

Current Items

- maintain employee 1095-C Part III coverage (content tables)
- maintain content tables (Hrt94c, Hrt95c, and Hrt95ccv) before create of xml

- edit full-time count after content creation (content tables)
- employee not covered but have other covered individuals (dependents)

CF 2016

ACA Corrections Submissions

New menu options 7 - 9a):





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Record Transmission Status Details





Maintain ACA Records for Re-Submission

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1095-C maintenance

• if "Covered Individuals" button selected, then one sees the next panel



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2016

Changes/Enhancements to the Algorithmic Approach

- Multiple benefits providing enrollment in a given year
- Hire dates in "algorithm"
- Hire dates usage (original, adjusted, and re-hire)
- Replace ACA "Y" in Hrtben maint (Hrp028/FM) with an actual line 14 value?

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Offer and enrollment are not the same thing; possible candidates: 1B, 1C, 1D, 1E, 1F, 1G?



Changes/Enhancements to the Algorithmic Approach

- Allow user to build algorithm
- How to handle ACA exposed deduction on the p/r side (via miscellaneous deduction and/or union deduction (type)); decline issue
- Decline change approach (how get from p/r side?)
- eForm/xml union employee versus non-covered employee in a self-insured situation



Near Future

- Multiple submissions within one transmission (all EIN submissions sent in one transmission)
- Employee counts (full-time and total) tool outside content create step
- Split plan years
- Authoritative vs non-authoritative transmittal
- Exception reports (blanks in line 1095-C line 14, no covered year/months in 1095-C Part III)



Future

• HrtAcaTs -> SysAcaTs -> infrastructure table

