



ACA Tracking and Reporting Data Specification - Dependent Offer of Coverage (Only needed for self-funded medical plans)

Version 3.0 - 8/14/2015

This file provides information on the benefits offered under self-funded medical plans and will be used to populate form 1095-C or 1095-B.

Please note that file specifications can change due to modifications in Affordable Care Act legislation and/or enhancements or other changes to the ACA Tracking and Reporting Service. If you begin the process of creating these data files prior to the beginning of the service activation project, it is possible that some of the information will have to be modified, removed or added.

File Name	AcctNumber_Dependents_YYYYMMDD.csv
Transfer Method	Upload to my.setseg.org or automatic upload available - ask for details
Transfer Frequency	Monthly or as needed
Import Type	Cumulative - Update existing records based on key fields, otherwise adds as new record
Misc Notes	All fields marked with an N in the "Allow Blank?" column cannot contain empty strings

Column Header	Allow Blank?	Key Fields	Format	Allowable Values	Description
EmployerFEIN	N	Y	ALPHANUM(9) String with leading zeros and no other formatting such as hyphens	Only federally provided FEIN values with leading zeros intact	Federal Employment Identification Number Required for IRS reports and optionally for creation of controlled groups or employee groups
EmployeeFirstName	N		ALPHANUM(1-255)		
EmployeeLastName	N		ALPHANUM(1-255)		
EmployeeSSN	N	Y	ALPHANUM(9) String with leading zeros and no other formatting such as hyphens	Only federally provided SSN values with leading zeros intact	
EmployeeID	Y		ALPHANUM(1-255)	Any available value from your source system.	The Employee ID
JobTitle	N		ALPHANUM(1-255)	e.g. Teacher, Custodian, etc.	The specific title of the employee. This is often referred to as "business card title" in HRMS systems.

Column Header	Allow Blank?	Key Fields	Format	Allowable Values	Description
DependentFirstName	N	Y	ALPHANUM(1-255)	Any available value from your source system.	The first name for this dependent
DependentMiddleName	Y		ALPHANUM(1-255)	Any available value from your source system.	The middle name for this dependent
DependentLastName	N	Y	ALPHANUM(1-255)	Any available value from your source system.	The last name for this dependent
DependentSuffix	Y	Y	ALPHANUM(1-255)	Any available value from your source system.	The suffix for this dependent
DependentType	Y		ALPHA(1)	Send only the code value: S = Spouse O = Other	Whether the dependent is a spouse or a child. Coding for spouse is entirely up to your organization.
DependentSSN	N*	Y	ALPHANUM(9) String with leading zeros and no other formatting such as hyphens	Only federally provided SSN values with leading zeros intact	* The SSN can only be missing for dependents if the Date of Birth is provided. This is mainly for the scenario where a newborn does not have an SSN, yet they are provided for enrollment.
DependentDOB	N*	Y	DATE(MM/DD/YYYY)	Date value in format MM/DD/YYYY	The date of birth for this dependent. * If the SSN for the dependent is not provided, then the Date of Birth is required.
BenefitsEffectiveDate	N	Y	DATE(MM/DD/YYYY[HH:mm:ss])	Date value in format MM/DD/YYYY with an optional time component in the format HH:mm:ss	This is used to denote when the dependent benefit change became effective.