



Affordable Health Care Reporting Preparation and Reporting Procedures

Important Dates:

- Printed 1095 forms are required to be provided to the employees by Jan 31st.
- Printed 1094/5 forms for the IRS (if filing electronically) are due to the IRS by Feb 28th.
- Electronic filing of 1094/5 forms are due to the IRS by April 1st. ADG does not support filing directly to the IRS and uses CLA (CliftonLarsonAllen) to process the file and forward to the IRS. CLA will have their own filing deadline.

In order to assist you in creating the 1094/1095 forms required for Affordable Health Care Reporting (ACA), ADG has built a system to create the necessary information used in printing the 1094 and 1095 forms. Building the ACA data begins with running the P/R Housekeeping Menu, #19. **Build Default ACA Values**. This program will use information in the P/R File Maintenance, Company Master Setup, ACA tab; and information found in the employee master recurring transactions and their contact/dependent records.

Type Code Setup

Employees are processed using the medical type codes as determined from the Payroll Type Code Master Benefit Type flag set to 'M – Medical' in the “Other” tab (example below).

View Type Code Information

General	Additional Defaults	Accumulators	Other
Type Code: 232 Description: HEALTH INS, EMP+1 CIGNA Category Code: 10			
Other Information			
<input checked="" type="checkbox"/> Print Transaction Values On Check Benefit Type: M Medical Insurance Benefit Code: HMO			

Employee Recurring Transactions

Within the employee's recurring table, if a medical type code record exists for the reporting year, the employee will be processed. The record's **Coverage Start Date** must have a blank or have a date through December 31 of the the reporting year. If the **Coverage Start Date** is a blank, a minimum date is determined based on their hire date and the **Wait Months** entered in the “Build Default ACA Values”.

Edit Recurring Transactions

Employee Number:	6	ANT, ATOM
Type Code:	233	HEALTH INS, FAMILY CIGNA
Calculation:	Flat Amount	
Sub Code:	1	
Overriding Cost Center:	0	
Processing Period:	3 - EVERY PAY PERIOD	
Rate/Amount:	100.0000 (0 Uses Type Code Value)	
Limit Basis:	5 - Year To Date	
Limit Calculation To:	0.00	
Miscellaneous Information:		
Payroll Start Date:	01 / 01 / 2013 (blank for Immediate)	
Payroll Stop Date:		
Bond/Life Amount:	0.0000	
Coverage Start Date:	02 / 01 / 2013	
Coverage End Date:		
Qualifying Date:		

An employee's Medical Coverage End date is determined by the medical record's **Coverage End Date**. If no **Coverage End Date** exists, they are assumed to have current coverage. If the employee has a termination date, and no Coverage End Date, coverage is considered as COBRA.

If the employee had coverage within the reporting year, the employee contacts are also processed. If a contact (may or may not be flagged as a dependent) has the **Enrolled in Medical Plan** or **Medical Coverage Start and/or End Date** entered, they will be processed and determined if coverage existed in the reporting year. Only contacts with coverage within the reporting year will be included on the 1095. **** ONLY SELF-INSURED ORGANIZATIONS REPORT DEPENDENT COVERAGE ****

Enter Dependent Information	
Employee Number:	6 ANT, ATOM
Contact Full Name:	ANT, ANNETTE
	<input checked="" type="checkbox"/> Enrolled in Medical Plan
Coverage Start Date:	02 / 01 / 2013
Coverage End Date:	
	<input type="checkbox"/> Enrolled in Dental Plan
Coverage Start Date:	
Coverage End Date:	
	<input type="checkbox"/> Enrolled in Vision Plan
Coverage Start Date:	
Coverage End Date:	
	<input type="checkbox"/> Student
Over 18 Support %:	0

**** Contacts MAY NOT have a Coverage End Date and Enrolled In Medical Plan checked. ****

Processing Procedures:

1. Go to P/R File Maintenance and select - 5. Company Master Setup
2. Select the ACA Tab then select Edit.
3. Update the Information on the page.
 - Employer Information – This organization's information.
 - Issuer/Provider – Insurance company if fully insured, or name of the Government Entity providing the insurance if self-insured.
 - Housekeeping ACA Build Program Default – the Medical Type codes are defaulted from the Type Code Master where the Benefit Type is Medical.
 - Check if “Classified As Self Insured”
 - Check if “Classified As A Large Employer”, more than 50 FT or FTEE employees
 - For Large Employers, Check based on 1094C Box 22 Options
 - Check A. Qualifying Offer A Method if your lowest cost monthly premium for a self-insured only plan is less than the current year requirement (Reports 1A on box 14/15)
 - Check D. 98% Offer Method if you offer minimum essential coverage to 98% of your employees.



General	Hourly Rates	Benefit Codes	Shift Rates	Frequency Codes	Life Ins	Overtime Avg	Deferred Comp	SP Benf Rpt Codes	Retirement Rpt Codes	Open Enrollment	P/R EFT	ACA
<p>This information is only used for print the 1094 & 1095 Health Coverage forms.</p>												
<p>Employer Info (1094B/1095B Part II, 1094C Part I/1095C Part I)</p> <p>Employer Name: AMERICAN DATA GROUP INC Employer Tax ID: *****9999 Contact Name: ROAD RUNNER Contact Phone: (303) 741 - 5711 X Contact Email Address: mjj@adginc.net Number/Street/Unit: 5730 E OTERO AVE STE 300 Extra Address Information: City: ADGVILLE State/Zip: CO 80112-0000</p>						<p>Housekeeping ACA Build Program Defaults</p> <p>Medical Type Codes: 232, 233, 731, 732, 733 <input type="checkbox"/> Disable Penalty Risk Warning <input checked="" type="checkbox"/> Classified As Self Insured Policy Origin Code: B Employer Sponsored Coverage <input checked="" type="checkbox"/> Classified As A Large Employer Large Employer 1094C Part II #22. Cert. of Eligibility (Select all that apply) <input checked="" type="checkbox"/> A. Qualifying Offer Method <input type="checkbox"/> B. Reserved <input type="checkbox"/> C. Reserved <input checked="" type="checkbox"/> D. 98% Offer Method</p>						
<p>Issuer/Provider (1095B Part II OR 1094C Part I DGE)</p> <p>Issuer/Provider Name: ANTHEM BLUE CROSSBLUE SHIELD Tax ID: *****2222 Contact Name: MR BIG BLUE Contact Phone: (202) 111 - 2322 X Number/Street/Unit: BIG BLUE RD STE 10 Extra Address Information: City: WHEREEVER State/Zip: CO 80112-0000</p>						<p>Employee Low Cost Premium Range</p> <p>These values provide a validation range when entering a value for the Employee Low Cost Premium for Offer Codes 1B,1C,1D,1E. If you set a minimum value of zero, this value will be entered onto the 1095-C submission, and not be rejected as an error</p> <p>Minimum Employee Premium Contribution: 0.00 Maximum Employee Premium Contribution: 0.00</p>						
Edit This Information												

Fully Insured Employers:

- Less than 50 FT employees do not report.
- 50+ FT employees report 1094C/1095C Part I and II.

Self Insured Employers:

- Less than 50 FT employees file 1094B/1095B
- 50+ FT employees file 1094C/1095C

4. Update employee recurring records with the correct **Medical Coverage Start/End dates**. Update their contacts with the correct **Enrolled Medical** flag and **Coverage Start/End dates**.
5. Go to the P/R Housekeeping Menu and select #19. Build Default ACA values.
6. In the Build Employee ACA Defaults program:

Section Options

- Coverage year – 2017
- Medical Types Codes - verify the codes are correct (defaulted from the Company Master).
- Classified as Self Insured, (defaulted from the Company Master).
- Classified as a Large Employer, (defaulted from the Company Master).
- Large Employer: A. Qualifying Offer Method, (defaulted from the Company Master).
- Large Employer: B. Reserved (Not used at this time).
- Large Employer: C. Reserved (Not used at this time).
- Large Employer: D. 98% Offer method, (defaulted from the Company Master).

Offer of Coverage (1095C Box 14)

- Offer Outside Employment Period – Generally 1H. Used for each month the person is not employed in the year, and is not in COBRA after termination.
- New Hire Coverage Wait Months - # of months to wait after the hire date before coverage is

allowed. 0 – if coverage allowed in month hired, 1 – if coverage allowed in the following month, 2 – if coverage allowed the first of the month after 30 days of employment.

- Offer While Employed – 1A,1B, 1C, 1D, 1E, 1F, 1I
- Employee Covered in Month of Termination – check if a terminated employee receives coverage for the full month they terminated in. The Offer While Employed is used, else 1H is used if not in COBRA.
- COBRA Offer Code – 1B,1C, 1D, 1E. If employee terminated in the year, and has medical type code, and does not have a **Coverage End Date**, this code is used. The code may be different for each COBRA person based on the selected coverage and will need to be adjusted in Employee Maintenance, Personnel, ACA Tab.

Employee Share of Low Cost Premium (1095C Box 15)

- MEC Offered to Spouse and Employees – check if minimum essential coverage is offered to spouse and children.
- Default Minimum Month Cost Code – the employee's share of the monthly premium for the lowest cost, employee only, plan offered. Required when the “Offer While Employed” code is not 1A or 1I.

Section 4980 Codes (1095C Box 16)

- Code for Outside Employment – Generally 2A, for each month the person is not employed. Code 2B is used in the termination month if the employee is NOT covered in the termination month.
- Code for New Hires – Generally 2D, for the hire month until coverage is offered (the waiting period).
- Code for Current Employees – 2C for employees with medical coverage after the offer is provided. If they have no medical coverage, the employee will have 2G.

Processing Options

- Print Order – Print by Employee Number or Employee Name.
- Listing Mode generates a report without updating any employee ACA information.
- Update Mode creates the report and updates the employee ACA information.
 - Overwrite Existing Records – un-check does not change existing information, only updates new employee information
 - Clear ACA Table For Requested Year – will purge existing employee information and create new records.

The report may be run as many times as needed. You can use the report to review what ACA settings were created for the employee and their covered dependents. Adjust employee recurring medical records and/or dependent information and re-run as needed.

If you do not wish to adjust the medical and/or dependent information, you may make corrections to the employee's ACA information.

Build Employee ACA Defaults For Year

The program allows you to build ACA defaults for employees and dependants.

Selection Options

Coverage Year: 2017

Medical Type Codes:

× 232 - HEALTH INS: EMP+1 CIGNA × 233 - HEALTH INS:FAMILY CIGNA × 731 - HEALTH INS: EMPLOYEE
× 732 - HEALTIN INS: EMP+1 × 733 - HEALTH INS: FAMILY

- Classified As Self Insured
- Classified As A Large Employer
 - A. Qualifying Offer Method
 - B. Reserved
 - C. Reserved
 - D. 98% Offer Method

Offer of Coverage Code (1095C Box 14)

Offer Code For Outside Employment Period: 1H - No offer of coverage

New Hire Coverage Wait Months: 1

Offer Code While Employed: 1A - Qualifying Offer

- Employee Covered In Termination Month

COBRA Offer Code(Termed Emp w/Medical & No End Date): 1B - Minimum essential coverage

Employee Share of Low Cost Premium (1095C Box 15)

- MEC Offered To Spouse And Dependants

Default Minimum Cost: 125.00

Section 4980H Codes (1095C Box 16)

4980 Code For Outside Employment Period: 2A - Employee not employed during the month

4980 Code For New Hires: 2D - Employee In 4980H(b) Limited Non-Assessment Period

4980 Code For Current Employees: 2C - Employee enrolled in coverage offered

Report Sort Order: Employee No Employee Name

Processing Options

Processing Mode: Listing Update

- Overwrite Existing Records
- Clear ACA Table For Requested Calendar Year *Except COBRA Spouse Records

Employee ACA reporting information may be changed via the Employee Maintenance program, or the ACA Record Maintenance program. In Employee Maintenance (in P/R File Maintenance, or Personnel File Maintenance), the ACA tab is in the Personnel Group.

Select the Calendar Year to use if needed (defaults to last year).

The employee's 1095 information will be displayed (1095C is always assumed). If you will be reporting 1095B, ignore the Offer Code, Low Cost Premium, and 4980H Code Columns. The months of the year for the employee Offer Code (Box 14), Low Cost Premium (Box 15), Section 4980H Code (box 16), and Employee/Dependents covered months are displayed.

Affordable Care Act Information

Calendar Year: 2015

	Offer Code	Offer Description	Low Cost Premium	4980H Code	4980 Description	Covered	ALLISON 3131	DANIEL 4213	RICHARD 12/31/1988
Jan	1A	Qualifying Offer	0.00	2C	Employee enrolled in	✓		✓	✓
Feb	1A	Qualifying Offer	0.00	2C	Employee enrolled in	✓		✓	✓
Mar	1A	Qualifying Offer	0.00	2C	Employee enrolled in	✓		✓	✓
Apr	1A	Qualifying Offer	0.00	2C	Employee enrolled in	✓		✓	✓
May	1A	Qualifying Offer	0.00	2C	Employee enrolled in	✓		✓	✓
Jun	1A	Qualifying Offer	0.00	2C	Employee enrolled in	✓	✓	✓	✓
Jul	1A	Qualifying Offer	0.00	2C	Employee enrolled in	✓	✓	✓	✓
Aug	1A	Qualifying Offer	0.00	2C	Employee enrolled in	✓	✓	✓	✓
Sep	1A	Qualifying Offer	0.00	2C	Employee enrolled in	✓	✓	✓	✓
Oct	1A	Qualifying Offer	0.00	2C	Employee enrolled in	✓	✓		✓
Nov	1A	Qualifying Offer	0.00	2C	Employee enrolled in	✓	✓		✓
Dec	1A	Qualifying Offer	0.00	2C	Employee enrolled in	✓	✓		✓

To make changes to any of the records, select * and the “Maintain ACA Information” option. Select the year to maintain, and the dependents maintenance screen is presented. You may add, change, and delete dependents here. If a dependent does not have medical coverage for the report year, they may be deleted (check Del box). To add a dependent, click the + and complete the new empty line. A dependent must have either a Social Security Number or Date of Birth. When you are finished updating the screen, click the NEXT button.

Maintain ACA Information

Spouse and/or Dependant information.

Employee Number: 2 RUNNER, ROAD
Calendar Year: 2015

- Please enter information about spouse and dependants.
- Enter the information even if the coverage is only for part of the year.
- You can change this information later.
- You must enter at least first and last name for a dependant
- Only enter the date of birth if the SSN is not available

Dependants							
No Del	First Name	Middle Name	Last Name	SSN	Birth Date	Relationship	
1 <input type="checkbox"/>	ALLISON	E	RUNNER	313-31-3131		<input checked="" type="radio"/> Dependant	<input type="radio"/> Spouse
2 <input type="checkbox"/>	DANIEL	M	RUNNER	424-32-4213		<input checked="" type="radio"/> Dependant	<input type="radio"/> Spouse
3 <input type="checkbox"/>	RICHARD	C	RUNNER		12/31/1988	<input checked="" type="radio"/> Dependant	<input type="radio"/> Spouse

< Back Next > Cancel

The recap screen is re-displayed, but is now available to update any of the information.

Select Finish to save the changes for reporting the employee's 1095 information.

All Employees that were hired, terminated, or have a change of status (FT/PT) in the reporting year, should be closely reviewed. To print a list of new hires, go to P/R Reports → Government Reports → #9. New Hire Report. To generate a list of terminations, go to P/R Reports → Personnel Reports & Inquiries → #10 Termination Stats Report. There is no report available to show status changes (FT->PT or PT<-FT.)

The ACA Reporting Menu is under Payroll Report → Government Reports.

- Payroll & Human Resources Menu
- Payroll Processing Menu
- P/R Reports
 - Master Listings
 - P/R 3rd Party Interfaces
 - Government Reports
 - ACA Reporting
 - 1. ACA Record Maintenance
 - 2. Affordable Health Care Report
 - 3. ACA1094 Transmittal
 - 4. ACA1095 Form Print
 - 5. ACA 1095C Submission File
 - 6. ACA Mailing Labels

1. ACA Record Maintenance – reference above.
2. Affordable Health Care Report – similar to the Build Defaults ACA values Report. The report is a representation of what will print on the 1095.
3. ACA 1094 Transmittal Form Print
4. ACA 1095 Form Print – prints the 1095B or 1095C for each employee.(see below)
5. ACA 1095C Submission File – creates the text file for submitting to the US government.
6. ACA Mailing Labels – prints mailing labels in the same order the 1095s print.

ACA 1095 Form Print – will print either the 1095B or 1095C form.

ACA Form 1095 Print

This program prints 1095-B and 1095-C forms. It suggests the appropriate form based on your current system configuration.

Based on the following criteria:

- You have self-classified as a large employer
- You are self-insured

The recommended form to print is **1095-C (Part I,II & III)**


Printer Configuration Consideration

Please note that the form is designed to be printed directly to pre-printed paper stock loaded into a laser printer. Data position accuracy is not guaranteed if printed to PDF.

If your printer does not align correctly, or you want to print to PDF prior to printing onto paper stock, you can make micro-adjustments to the position of printed data on the form by clicking [here](#). Different printers may require different settings.

Selection Options

Calendar Year:

Employee Number: 

Form Type:

- Only Print COBRA/Spouse Forms
- 1095-B
- 1095-C Parts I & II
- 1095-C Parts I,II & III
- Print Recipient Copy With Masked SSN

Output Options

File Output

Output Format: [more](#)

Direct To Printer

Printer: [more](#)

- Enter the calendar year to print. Defaults to the current reporting year.
- Enter a single employee number to print. Use the option to reprint a single 1095 form. This option is useful when testing the printing alignment.
- Only Print Cobra/Spouse Forms – when submitted will print all Cobra/Spouse forms ONLY.
- Select which form and sections to print.
- Print Recipient Copy with Masked SSN. For the forms being supplied to the employee, you may optionally mask the SSN so only the last 4 digits of the SSN's are printed. YOU MAY **

**** NOT MASK THE SSN ON THE FORMS BEING SENT TO THE IRS. ****

Because printers do not have the same printable area, the system provides the ability to align the different sections of the form you are printing. You may increase or decrease the starting position of the section by changing the X (horizontal) and/or Y (vertical) value. Click the [HERE](#) in the notes section of the report to display the adjustment screen. Adjustments entered will be saved for the next time you run the program. The settings are NOT saved for someone else running the program.

Maintain ACA Form Adjustment Template



This form allows you to make micro-adjustments to the print positions on different areas of the form. Each integer value is equivalent to approximately 1/16 of 1 inch.

- As guidance, each box printed on an ACA form is 3/16" square
- Move Values LEFT by setting a -ve value to the X axis, RIGHT by setting a +ve value to the X axis
- Move Values UP by setting a -ve value to the Y axis, DOWN by setting a +ve value to the Y axis

Form 1095B

Move All Objects On Form By This Offset [X]:	<input type="text" value="0.000"/>	[Y]:	<input type="text" value="0.000"/>
Move All Objects In Part I (Responsible Individual) [X]:	<input type="text" value="0.000"/>	[Y]:	<input type="text" value="0.000"/>
Move All Objects In Part II (Employer Sponsored Coverage) [X]:	<input type="text" value="0.000"/>	[Y]:	<input type="text" value="0.000"/>
Move All Objects In Part III (Issuer Or Other Coverage Provider) [X]:	<input type="text" value="0.000"/>	[Y]:	<input type="text" value="0.000"/>
Move All Objects In Part IV (Covered Individuals) [X]:	<input type="text" value="0.000"/>	[Y]:	<input type="text" value="0.000"/>

Form 1095C (Parts I,II & I,II,III)

Move All Objects On Form By This Offset [X]:	<input type="text" value="0.000"/>	[Y]:	<input type="text" value="0.000"/>
Move All Objects In Part I (Employee & Employer) [X]:	<input type="text" value="0.000"/>	[Y]:	<input type="text" value="0.000"/>
Move All Objects In Part II (Employee Offer & Coverage) [X]:	<input type="text" value="0.000"/>	[Y]:	<input type="text" value="0.000"/>
Move All Objects In Part III (Covered Individuals) [X]:	<input type="text" value="0.000"/>	[Y]:	<input type="text" value="0.000"/>
Self Insured Flag [X]:	<input type="text" value="0.000"/>	[Y]:	<input type="text" value="0.000"/>

Always print a single form first to verify the settings are appropriate for the printer being used. This will prevent wasting of forms due to printer alignment issues.

ACA Mailing Labels – select the year to print and the mailing label style. The labels are printed in the same order of the 1095 forms. The forms are not designed to fit in a window envelope.

ACA Mailing Labels

This program will print labels for all ACA persons.

Selection Options

Calendar Year:
Label Style:

Output Options

File Output
Output Format: [more](#)
 Direct To Printer
Printer: [more](#)

ACA 1095C Reporting Examples:

New Hire – status FT:

Box 14 – 1H until month coverage starts, then 1? Std Coverage Offer Code

Box 16 – 2A before month of hire, 2D for waiting period, 2C if has medical, 2G if declined.

Regular Employee – status FT:

Box 14 – 1? Std Coverage Offer Code

Box 16 – 2C each month of coverage, 2G if no coverage is in the month.

Employee Terminates In Report Year – status FT, Declines Cobra Coverage

Box 14 - 1? Std Coverage Offer Code until Term Month. Term Month is Std Coverage code if Covered in Termination month; otherwise, 1H. 1H for remaining months in year.

Box 16 – 2C each month covered until Term Month. Term Month is 2C if Covered in Termination month; otherwise, 2B. 2A for remaining months in year.

Employee Terminates In Report Year – status FT, Elects Cobra Coverage

Box 14 - 1? Std Coverage Offer Code for each month covered – employed and cobra. If the Cobra coverage is different then prior coverage, the Cobra covered months would reflect the coverage plan: employee + spouse + children (1B, 1C, 1D, 1E)

Box 16 – 2A or 2C each month covered (discrepancies on the correct value to use)

PT – Employed as FT during the year (Self-Insured Only)

Box 14 – 1G for each month of PT/COBRA and enrolled in coverage

Box 16 – 2A each month covered (discrepancies on the correct value to use)

PT – Employed as PT the entire Year and do not have coverage

These employee ACA records need to be manually deleted

Employee Terminates in a Prior Year and is Cobra Covered (Self-Insured Only)

Box 14 – 1G for each month of Enrolled in COBRA coverage

Box 16 – Blank

Box 15 Values:

If your standard coverage code is 1B, 1C, 1D, 1E, Box 15 value is required. If employed in the month, the value is the employee's share of the lowest cost monthly premium for self-only coverage. If the employee is covered in Cobra for the month, the value is the employee's cost for the lowest cost, employee-only share premium for the month

ACA 1094C/1095C Transmittal Process

At the current time, ADG does not create the transmittal file to send directly to the IRS. We create a specially formatted file for CliftonLarsenAllen CPA firm (CLA). The below is required to create and send the files to CLA. **You must already have an account with CLA to use this process.**

Set the ACA Email Address

In the P/R Company Master, in the ACA tab, put in the email address to be report to the IRS.

View FMS Payroll Master Information

General | Hourly Rates | Benefit Codes | Shift Rates | Frequency Codes | Life Ins | Overtime Avg | Deferred Comp | SP Benf Rpt Codes | Retirement Rpt Codes | Open Enrollment | P/R EFT | **ACA**

This information is only used for print the 1094 & 1095 Health Coverage forms.

Employer Info (1094B/1095B Part II, 1094C Part I/1095C Part I)	Housekeeping ACA Build Program Defaults
Employer Name: AMERICAN DATA GROUP INC	Medical Type Codes: 232, 233, 731, 732, 733
Employer Tax ID: *****9999	Policy Origin Code: <input checked="" type="checkbox"/> Classified As Self Insured
Contact Name: ROAD RUNNER	<input type="checkbox"/> Employer Sponsored Coverage
Contact Phone: (303) 741 - 5711 X	<input checked="" type="checkbox"/> Classified As A Large Employer
Contact Email Address: mjj@adginc.net	Large Employer 1094C Part II #22. Cert. of Eligibility (Select all that apply)
Extra Address Information:	<input checked="" type="checkbox"/> A. Qualifying Offer Method
Number/Street/Unit: 5730 E OTERO AVE STE 300	<input checked="" type="checkbox"/> B. Qualifying Offer Transitional Relief Method
City: ADGVILLE	<input type="checkbox"/> D. 98% Offer Method
State/Zip: CO 80112-0000	

Run the ACA Report In Update Mode

In the ACA Report Menu (P/R Reports → Government Reports → ACA Reporting), Select #2 Affordable Health Care Report. The report must be run in Update Mode. The Update Mode sets values used in creating the 1094 transmittal information.

Affordable Health Care Report

This program reports on previously entered ACA information for the requested calendar year. If run in update mode, the Monthly Full-Time and Total Employee counts for use in 1095-C forms are updated.

Selection Options

Calendar Year: 2015

Medical Type Codes: 232 - HEALTH INS: EMP+1 CIGNA 233 - HEALTH INS: FAMILY CIGNA 731 - HEALTH INS: EMPLOYEE 732 - HEALTH INS: SPOUSE 733 - HEALTH INS: FAMILY Corrected Records Only

Processing Options

Processing Mode: Listing Update

Output Options

Output Format: File Output Direct To Printer

Printer: HP4000 - ADG Office HP

Submit

Run the 1094-C CLA Export

From the ACA Report Menu (P/R Reports → Government Reports → ACA Reporting), Select #5 1094-C CLA Export. The program creates a downloadable attachment which should be saved and then uploaded to CLA for processing along with the 1095-C Export (next step). Complete the information on the screen as required. The number of forms should reflect the grid count from the ACA Record Maintenance program. It reflects the number of forms that have been printed. If the number is not correct – stop and seek assistance. Running the export report in Update Mode will flag the ACA status as being included in a transmittal. Any future reporting will be considered corrective.

ACA 1094-C Electronic Submission File Export



This program creates an export file that includes all the necessary data for electronic submission by Clifton Larson Allen to the IRS for ACA Reporting Purposes.

- If run in Update mode, the forms will be flagged as transmitted, and any changes made to the forms after that point can be processed as Corrections.
- **The program does not create a 1094-C Submission file**

The file created contains personal information in plain text, including Social Security Numbers.

- To transmit to Clifton Larson Allen, use their [Secure File Transmittal](#) service.
- Delete the download file from your workstation once transmitted.

Selection Options

Calendar Year:
Title Of File Creator:
Signature Date:  
 Authoritative Transmittal
 Aggregated ALE Group
Number Of Forms Submitted:

Processing Options

Processing Mode: Listing Update
Download File Name:

Output Options

File Output
Output Format: [more](#)
 Direct To Printer
Printer: [more](#)

Run the 1095-C CLA Export

From ACA Report Menu (P/R Reports → Government Reports → ACA Reporting), Select #6 1095-C CLA Export. The program will create a downloadable attachment which should be saved and then uploaded to CLA along with the 1094-C Export file. If you run the program in Update Mode, its assumed any future transmittals are corrections.

ACA 1095-C Electronic Submission File Export

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- **The program does not create a 1095-C Submission file**

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- To transmit to Clifton Larson Allen, use their [Secure File Transmittal](#) service.
- Delete the download file from your workstation once transmitted.

Selection Options

Calendar Year:

Processing Options

Processing Mode: Listing Update
Download File Name:

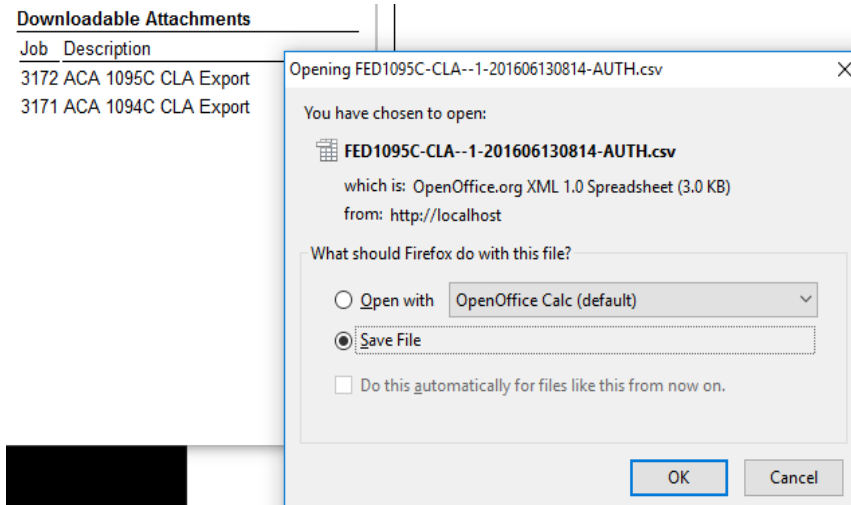
Output Options

File Output
Output Format: [more](#)
 Direct To Printer
Printer: [more](#)

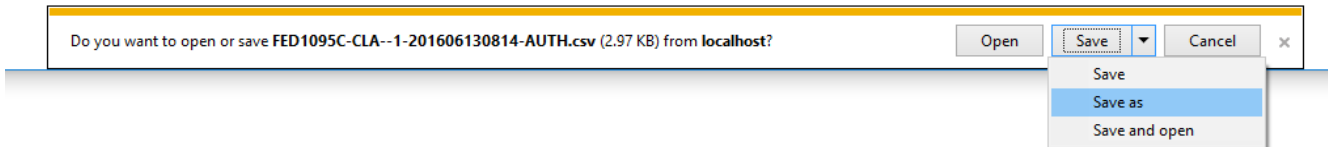
Save and Upload the CLA Export Files to CLA

In your Jobs Tab, there should be two Downloadable Attachments. One for each of the exports. Save each file to your local disk. DO NOT OPEN THE FILE IN A TEXT EDITOR FIRST, save the file to disk.

(Firefox example)



Internet Explorer Example.



Open your web browser to: <https://claconnect.leapfile.net> or select the link built into the 1094/1095 CAL Export Program. From the link entered you will get the CLA Secure upload page.

The screenshot shows the CliftonLarsonAllen 'Secure Upload' page. It features the company logo and the following text:

Secure Upload

Our email address format has changed to firstname.lastname@claconnect.com.

Enter the email of the recipient for this transfer

Recipient Email

Start

Employee Login - Privacy Policy - Security Statement - Copyright ©2016 LeapFILE. All rights reserved.


Powered by LeapFILE™

The file created contains personal information in plain text, including Social Security Numbers.

- To transmit to Clifton Larson Allen, use their [Secure File Transmittal](#) service.
- Delete the download file from your workstation once transmitted.

In Recipient Email field enter:
Richard.Krueger@claconnect.com

Click the Start Button.



Secure Upload

Deliver To: Richard Krueger

Please enter your contact information

Name
Your Name

Email
Your email Address

Confirm Email
Your email Address

Please create a message for the recipient

It's a good idea to describe exactly what you are sending and include any additional contact info.

Subject
1094/1095 Reporting Files

Message/Description/Instructions
Attached are the files for the 1094/1095 per the signed agreement.

Select delivery options

Notify me when the files have been downloaded.

Select files to send (Regular Upload)


Select files and folders to send (Enhanced upload)

Browser Requirement: The Enhanced upload feature is only available in Internet Explorer, Safari, and Fire Fox Browsers using the latest version of Java [download](#) and [install](#) Java from [www.java.com](#).

The following page appears. Enter your name, Email Address and confirming email address, the subject line referencing the 1095/1095 Export Files, and any other information you desire in the Message/Description/Instructions area.

Click “Select Files to Send” to select the two files you downloaded to your system.

Choose File#1 Browse and select the 1094 File.
Choose File#2 Browse and select the 1095 File.
Click the “Upload & Send” button



Secure Upload

Select files to upload

File #1	<input type="button" value="Browse..."/>	FED1094C-CLA--1-201606130808-AUTH.csv
File #2	<input type="button" value="Browse..."/>	FED1095C-CLA--1-201606130814-AUTH.csv
File #3	<input type="button" value="Browse..."/>	No file selected.
File #4	<input type="button" value="Browse..."/>	No file selected.
File #5	<input type="button" value="Browse..."/>	No file selected.
File #6	<input type="button" value="Browse..."/>	No file selected.
File #7	<input type="button" value="Browse..."/>	No file selected.
File #8	<input type="button" value="Browse..."/>	No file selected.
File #9	<input type="button" value="Browse..."/>	No file selected.
File #10	<input type="button" value="Browse..."/>	No file selected.

**** More files selectors will automatically appear if you run out ****

Your files are now sent to CLA. They will be doing tests on the content of the file and will notify of any issues.