

ACA Reporting Simplified –

What You Need to Know to
Meet the Requirements



Introduction to mandatory ACA reporting

Spanning two presidential terms and involving a landmark Supreme Court decision, the legislative history of the Affordable Care Act (ACA) is full of twists and turns. And at every turn, the sweeping health care law has altered the landscape of the American health insurance system.

It's easy to get caught up in the myriad details of the ACA. For affected employers (and the professionals who support them), however, the keys to compliance are awareness and action.

The Employer Shared Responsibility rule requires employers to file annual information returns with the IRS, as well as provide summary statements to employees. The primary purpose of the ACA reporting requirements is to communicate certain details of health insurance coverage, including verification that the “minimum essential coverage” (MEC) is being met.

In general, the reporting requirement applies to employers with 50 or more full-time employees and all self-insured employers, regardless of size. The IRS forms used to report this information are 1095-B and 1095-C, along with transmittal forms 1094-B and 1094-C.

As you might imagine, the impact of these requirements is tremendous. This report covers the primary aspects of ACA reporting and 1095 filing for you and your clients, including:

- **Origins of ACA reporting**
- **Businesses affected (insured and self-insured)**
- **Definition of “applicable large employer” (ALE)**
- **Understanding minimum essential coverage**
- **Which 1095 forms to file, with tips on proper completion**
- **Deadlines and filing penalties**
- **E-filing as an efficient and secure solution**



Origins of ACA reporting

Signed into law in March 2010 and upheld by a Supreme Court decision in June 2012, the Patient Protection and Affordable Care Act – also known as the Affordable Care Act and casually referred to as ObamaCare – represents the most comprehensive changes to the nation’s health care system in decades. The health care law aims to provide coverage to millions of uninsured Americans through expanded public insurance, as well as federal and state-run health insurance exchanges, or marketplaces.

In March 2014, the IRS released regulations requiring ACA information reporting for certain large employers and smaller, self-insured employers. The rules became mandatory for the 2015 calendar year for all affected employers.

The ACA reporting requirements are mandated by two sections of the Internal Revenue Code. Together, they ensure that employers report health insurance coverage information to the IRS and furnish statements to employees annually. The reported information summarizes who was offered coverage and whether the insurance meets all ACA specifications, including affordability.

Section 6055 reporting requirements apply to health insurance carriers, small employers that sponsor self-funded health plans and other entities that provide minimum essential coverage.

Section 6056 reporting requirements are directed toward applicable large employers (ALEs), which generally include employers with 50 or more full-time employees or full-time equivalent employees (FTEs). Section 6056 also requires ALEs to share coverage details with employees so they can determine if they qualify for a premium tax credit.

Tax code sections 6055 and 6056 – and the related 1095 reporting forms – are designed to work in tandem to help the government enforce the Employer Shared Responsibility provisions. Basically, if an employer doesn’t offer affordable health insurance that provides a minimum level of coverage to its full-time employees and their dependents, it may be subject to a penalty.



Businesses affected – What are ALEs?

Reporting responsibilities depend on employer size and type of insurance the employer maintains, whether insured or self-insured. (For clarification, a self-insured – or self-funded – employer pays for medical claims directly instead of paying premiums to an insurance provider.)

Applicable large employers

For the most part, the biggest impact with the ACA reporting requirements is with applicable large employers with 50 or more full-time or full-time equivalent employees.

An ALE may be a single entity or may consist of a group of related entities (such as parent and subsidiary, or other affiliated entities). If the combined number of full-time and full-time equivalent employees for the group is large enough to meet the definition of an ALE, then each employer in the group (called an ALE member) is part of an ALE – and subject to the Employer Shared Responsibility provision, even if it wouldn't be an ALE separately.

Because the definition of an applicable large employer includes full-time and full-time equivalent employees in a preceding calendar year, it's important to understand the distinctions.

Full-time employee: Averages at least 30 hours of service per week during the calendar month (or 130 hours in a calendar month)

Full-time equivalent employee: Combination of employees, each of whom is not treated as a full-time employee, but that, together, count as a full-time employee

NOTE:

Hours of service represent each hour an employee is paid or entitled to payment, including vacation, leave, holiday, illness, incapacity, layoff, jury duty, military duty and other leaves of absence.

Smaller, self-insured employers and the 1095-B

There is considerably less reporting responsibility for smaller businesses, which the ACA defines as those with fewer than 50 full-time employees.

Self-insured businesses will need to fill out the 1095-B (and 1094-B transmittal form) to report the name, address and Social Security number (or date of birth) of employees and family members who have coverage under the plan.

Small businesses that aren't self-insured don't need to file anything.

Because the number of employers that fall under this category is minimal, this white paper focuses primarily on ALEs and their responsibilities.

3 steps to determine the number of full-time equivalent employees (FTEs) for a month:

- 1 Calculate the total part-time service hours in a month.
(up to 120 hours per employee)
- 2 Divide the total by 120.
- 3 If this results in a fraction, round down to the next whole number.

example:

If **7** employees work **20** hours/week, the employer would have **4** FTEs.

7 employees X **20** hours/week = **140** hrs/wk
140 X **4** wks/month = **560**

560 hours ÷ **120** = **4.66**

4.66 rounded down = **4 FTEs**

COMPLIANCE INSIGHT

Keeping track of the number of full-time and full-time equivalent employees, as it pertains to the ALE classification, is critical. This classification is determined each calendar year and depends on the average size of the employer's workforce in the previous year.

For hourly employees, employers must count the actual hours worked. For non-hourly employees, they should count either: 1) the actual hours worked, 2) days worked equivalence – 8 hours for each day with at least one hour of service or 3) weeks worked

equivalence – 40 hours for each week with at least one hour of service. Not included in the calculation are independent contractors, certain variable-hour workers, seasonal employees working 120 days or less in a year, and COBRA and retired enrollees.

Calculating employee hours for ACA reporting is a huge undertaking. For this reason, many employers will rely on dedicated time-tracking software or choose to outsource this responsibility to a payroll vendor or benefits administrator.

Understanding minimum essential coverage

For purposes of reporting, minimum essential coverage, or MEC, refers to a legally definable level of coverage.

An employer may be penalized if it doesn't offer minimum essential health coverage to at least 95% of its full-time employees and their dependents, and at least one full-time employee received a premium tax credit through the Health Insurance Marketplace.

A second type of penalty may be imposed if an employer offers minimum essential coverage, as described above, but the coverage wasn't affordable or didn't provide minimum value.

Most broad-based medical plans meet the legal parameters for MEC and minimum actuarial value (where the plan pays for at least 60 percent of covered benefits). Regarding affordability, the lowest cost premium for self-only coverage should be less than 9.5% of an employee's gross household income.

Minimum essential coverage includes:

■ **Government-sponsored programs** Medicare part A, most Medicaid programs, CHIP, most TRICARE, most VA programs, Peace Corps, DOD Non-appropriated Fund Program

■ **Employer-sponsored coverage** In general, any plan that is a group health plan under ERISA, which includes both insured and self-insured health plans

■ **Individual market coverage** Includes qualified health plans enrolled in through the federally facilitated and state-based marketplaces, and most health insurance purchased individually and directly from an insurance company

■ **Grandfathered plans** Generally, any plan that existed before the ACA became effective and has not changed

■ **Miscellaneous MEC** Other health benefits coverage recognized by the Department of Health and Human Services as MEC

Minimum essential coverage does not include fixed-indemnity coverage, life insurance or dental or vision coverage.

1095-C filing for ALEs

To satisfy the reporting requirements, fully insured and self-insured applicable large employers must complete Form 1095-C (and the 1094-C transmittal form) for all full-time employees. Self-insured plans will also have to provide information on other covered individuals, such as retirees and former employees on COBRA.

Employers with fully insured plans must complete Parts I and II of the 1095-C, while those with self-insured plans will complete Parts I, II and III.

PART I Employee; Applicable Large Employer Member

PART II Employee Offer and Coverage (including Plan Start Month)

PART III Covered Individuals



1095-C at a glance

To report the necessary information to the IRS and furnish a form to employees, employers will need to capture:

- Who is a full-time employee for each month
- Identifying information for the employee, such as name, address and Social Security number (SSN)
- Identifying information for the employer, such as name, address and Employer Identification Number (EIN)
- Information about the health coverage offered by month, if any
- The employee's share of the monthly premium for lowest-cost, self-only minimum value coverage
- Months the employee was enrolled in coverage
- Months the employer met an affordability safe harbor with respect to an employee and whether other relief applies for an employee for a month
- If the employer offers a self-insured plan, information about the covered individual's enrollment in the plan (including spouses and dependents), by month; this information includes Social Security numbers or, if these numbers aren't available, date of birth

COMPLIANCE INSIGHT

The bulk of the work in completing the 1095-C will be with Lines 14-16 in Part II. Although the subject is too complex to cover fully in this white paper, there are a few points to keep in mind.

The "Offer of Coverage" on **Line 14** (Codes 1A-1I) helps describe whether or not minimum essential coverage was offered to an employee, spouse and/or any dependents.

Employers will generally report the monthly employee contribution for the lowest-cost health option for self-only coverage on **Line 15**. This allows the IRS to determine if affordable coverage was made available to the employee.

Line 16 (Codes 2A-2I) clarifies issues such as whether an individual was employed during the month, whether the employee was eligible and/or enrolled in coverage, if any affordability safe harbors applied when an employee declined coverage and if the employee was in a waiting period or other limited non-assessment period for which the employer wouldn't be liable for a penalty.

1095-C Employer-Provided Health Insurance Offer and Coverage

Form 1095-C (Department of the Treasury, Internal Revenue Service) OMB No. 1545-0047

Part I Employee Information

1. Name of employee: _____ 2. Social security number (SSN): _____ 3. Street address (including apartment no.): _____ 4. City or town: _____ 5. State or province: _____ 6. Country and ZIP or foreign postal code: _____

7. Name of employer: _____ 8. Street address (including room or suite no.): _____ 9. City or town: _____ 10. State or province: _____ 11. Country and ZIP or foreign postal code: _____

Part II Employee Offer and Coverage

14. Offer of Coverage (enter required code)	15. Employee Share of Lowest-Cost Monthly Premium, for Self-Only Minimum Value Coverage	16. Available Months of Coverage (check box and enter information for each covered individual)	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
\$	\$													

Part III Covered Individuals

(b) Name of covered individual(s)	(c) SSN	(d) COB (if SSN is not available)	(e) Covered all 12 months	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
17			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions. Cat. No. 83255M Form 1095-C (2015)

1094-C at a glance

The 1094-C transmittal form represents the total 1095-C filings submitted for the season. Acting as a cover sheet, it includes:

- Identifying information for the organization, such as name, address and Employer Identification Number (EIN)
- Information about whether the organization offered coverage to at least 95% of its full-time employees and their dependents
- Total number of 1095-Cs issued to employees
- Information about members of the aggregated applicable large employer group, if any
- Full-time employee counts by month
- Total employee counts by month
- Whether an organization is eligible for certain transition relief (including certifications)

Form 1094-C Transmittal of Employer-Provided Health Insurance Offer and Coverage Information Returns

Department of the Treasury
Internal Revenue Service

OMB No. 1545-2051

Part I Applicable Large Employer Member (ALE Member)

1 Name of ALE Member (Employer) 2 Employer identification number (EIN)

3 Street address (including room or suite no.)

4 City or town 5 State or province 6 Country and ZIP or foreign postal code

7 Name of person to contact 8 Contact telephone number

9 Name of Designated Government Entity (only if applicable) 10 Employer identification number (EIN)

11 Street address (including room or suite no.)

12 City or town 13 State or province 14 Country and ZIP or foreign postal code

15 Name of person to contact 16 Contact telephone number

17 Reserved

18 Total number of Forms 1095-C submitted with this transmittal

Part II ALE Member Information

19 Is this the authoritative transmittal for this ALE Member? If "Yes," check the box and continue. If "No," see instructions

20 Total number of Forms 1095-C filed by and/or on behalf of ALE Member

21 Is ALE Member a member of an Aggregated ALE Group? Yes No
If "No," do not complete Part IV.

22 Certifications of Eligibility (select all that apply):

A. Qualifying Offer Method B. Qualifying Offer Method Transition Relief C. Section 4980H Transition Relief D. 95% Offer Method

Under penalties of perjury, I declare that I have examined this return and accompanying documents, and to the best of my knowledge and belief, they are true, correct, and complete.

Signature Title Date

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions. Call No. 61571A Form 1094-C (2015)

1095-C filing pointers

As you might imagine, the information-gathering process is challenging for many businesses. To capture all the data required for 1095 reporting, they need to pull from four major sources or internal departments: HR, payroll, benefits and time and attendance management. This requires careful coordination, sharing and monitoring to complete the forms accurately and on time.

Strict security is also necessary. Because the employee's name and health insurer appears on the same form, the data is considered protected health information (PHI). Using a solution that is SOC-certified and HIPAA-compliant, such as [eFile4Biz.com](https://www.eFile4Biz.com), can provide an added layer of protection with this type of data.

A few essential Dos and Don'ts will ensure a smooth filing process for you and your clients:

DO recommend that employers notify their employees that they will be receiving a 1095-C and may need information from it to complete their previous year tax filing.

DO file corrected returns as soon as possible after an error is discovered.

DO file Form 8809, if necessary, for a 30-day extension for filing with the IRS. No signature or explanation is necessary for this extension. A 30-day extension for providing forms to employees, however, is only available by sending a signed letter to the IRS with the reason for the delay.

DON'T file more than one 1095-C per employee. If an organization has different divisions with different benefits – and an employee moves between divisions during the year – you'll need to consolidate data onto one 1095-C.

DON'T file more than one 1094-C authoritative transmittal.

Filing deadlines

February 28, 2017 – Paper filing of 1095s (and 1094 transmittals) to IRS

March 2, 2017 – Form 1095 copies to recipients/employees

March 31, 2017 – E-filing of 1095s (and 1094 transmittals) to IRS

Avoiding penalties

Penalties for Failure to File Correct Information Returns (Code Section 6721) may apply if you:

- Do not file a correct information return by the due date and a reasonable cause is not shown,
- File on paper when you were required to file electronically,
- Fail to file a Taxpayer Identification Number (TIN),
- Report an incorrect TIN, or
- Fail to file paper forms that are machine readable.

Penalties for Failure to Furnish Correct Payee Statements (Code Section 6722) may apply if:

- You do not provide a correct payee statement by the applicable date and a reasonable cause isn't shown,
- All required information isn't shown on the statement, or
- Incorrect information is included on the statement.

The amount of the penalty is based on when you file the correct information return or furnish the correct payee statement. A penalty for failure to file a correct information return is separate from the penalty for failure to furnish the correct payee statement. For example, if you fail to file a correct Form 1099-MISC with the IRS and don't provide a correct Form 1099-MISC statement to the payee, you may be subject to two separate penalties.

NOTE:
Electronic filing
is required if
the employer files
at least 250
forms.

Why e-filing is the ideal solution

We live in an increasingly fast-paced and digital world. As we replace outdated, manual processes with faster, more efficient electronic options, it's not surprising that tax filing is experiencing the same shift. Businesses are no longer restricted to time-consuming and cumbersome paper filing of their taxes. Instead, they can turn to reputable, IRS-authorized e-file providers such as **eFile4biz.com** to file taxes online "in the cloud."

Need help meeting the demands of these ACA reporting requirements for your clients? Choose the all-inclusive print, mail and e-file services for quick, efficient and secure e-filing for ACA forms (in addition to 1099s and W-2s). There's no software to download and no forms to purchase, so you enjoy streamlined, one-step processing. Plus, seamless integrations with apps you already use to run your business, including QuickBooks and Xero, allow you to connect and import data in seconds.

To learn more about ACA Reporting and the advantages of our all-inclusive solution, visit:

www.efile4biz.com

Sources:

1. <https://www.irs.gov/affordable-care-act/employers/information-reporting-by-applicable-large-employers>
2. <https://www.irs.gov/government-entities/federal-state-local-governments/increase-in-information-return-penalties-2>
3. <https://www.irs.gov/affordable-care-act/employers/mark-your-calendar-now-2016-reporting-deadlines-for-employers-and-health-coverage-providers>
4. <https://www.irs.gov/affordable-care-act/employers/questions-and-answers-on-reporting-of-offers-of-health-insurance-coverage-by-employers-section-6056>
5. <https://www.irs.gov/pub/irs-prior/f1095b--2016.pdf>
6. <https://www.irs.gov/pub/irs-prior/f1095c--2016.pdf>
7. <https://www.gpo.gov/fdsys/pkg/FR-2014-02-12/pdf/2014-03082.pdf>

The logo for eFile4biz.com features the word "eFile" in a blue sans-serif font, followed by "4biz.com" in a bold, blue sans-serif font. A stylized blue lightning bolt or starburst graphic is positioned to the left of the "4".