


AIR Submission: this final phase formally begins the IRS electronic filing process. The service in this phase can vary depending on the number of unique EINs for any given client.

Step	Generating IRS File using AIR Submission within workflow
	<p>This process is performed only <i>AFTER</i> all 1095-C PDF files have been successfully distributed. This would include a file to the client directly for printing/mailing or, if using our fulfillment, sent to Metroplex for completion.</p> <p>The following steps will guide you through the process of:</p> <ol style="list-style-type: none"> 1. Verifying all required data elements will be captured within the AIR Submit file to the IRS 2. Submitting your electronic file to the IRS 3. Correction of errors preventing the production of the AIR file in the IRS required XML format (aka Manifest/Request) 4. Managing the IRS responses and feedback, if applicable 5. Managing TIN (Tax Identification Number) and other required corrections, if applicable 6. Employer follow up with AIR File Transmission Confirmation
Step	Verify All Corrected Data Elements Are Captured, if applicable
1.	<p>Were corrected 1095-C Forms produced or any data correction made <i>AFTER</i> the approval of the final ACA Summary used to generate the finalized 1095-C Forms within the ACA work? If yes, the next step “<u>Revising the Approved ACA Summary</u>” would be required to ensure the ACA Summary within the ACA Workflow is current and contains all data updates/changes.</p>
2.	<p><u>Revising the Approved ACA Summary Report</u> If a revised file is required, the following steps are required:</p> <ol style="list-style-type: none"> 1. Undo Approval of most recent ACA Summary 2. Select Parameters to rename file to capture date & ER details of previously approved file 3. Click “Run Now” to generate a new ACA Summary (*be sure you verify the parameters) 4. Review newly create ACA Summary to ensure no Warnings are triggered
Step	Reviewing ACA Summary Report used to create AIR Submission File
1.	<p>The following outline is intended as a guide to assist in your review of the “Approved” ACA Summary within the workflow to ensure you have the most recent file required for AIR Submission. Please ensure you have verified if any corrected 1095-C Forms were produced and/or if any data corrections were required that would need to be captured. If no corrected 1095-C Forms or data corrections were required proceed to the next step “Reviewing Your 1094-C Output”.</p> <p>Review and Approve: Make sure the approved “Ready for Submission” file was regenerated to capture any required 1095-C Form corrections and/or data corrections to be included in the AIR Submission.</p> 

Step Reviewing Your 1094-C Output

1. The following outline is intended as a guide to assist in your review of the employers 1094-C tab within the ACA Summary. Please ensure you have involved the necessary parties at the Employer level to ensure your data is in line with their expectation, if any elements are unclear within the ACA Setup.

Reviewing Part 1

Lines 1-6: Make sure the address lines up with the employer address used on the Forms 1095-C for employees. This is identified by unique EIN within the case ACA Setup. The 1094-C Form Lines 1 – 6 are identified under columns B – I of the 1094-C Tab of the ACA Summary Report.

B	C	D	E	F	G	H	I
EMPLOYER NAME	EMPLOYER EIN	TAX YEAR	EMPLOYER ADDRESS 1	EMPLOYER CITY	EMPLOYER STATE	EMPLOYER ZIP	EMPLOYER COUNTRY
ABC ELECTRIC SERVICES, LLC	47-0928397	2018	6222 St Louis Street	Meridian	MS	39307	USA

Line 7 – 8: This is the name and number of the person to contact with any questions at the Employer. This contact should be someone at the employer who can speak authoritatively to any questions the forms may raise. This is identified by unique EIN within the case ACA Setup and can differ by EIN. The 1094-C Form Lines 7 – 8 are identified under columns J – K of the 1094-C Tab of the ACA Summary.

J	K
EMPLOYER CONTACT PERSON NAME	EMPLOYER PHONE
Leslie Employer	(601) 483-2384

Lines 9-16: Most companies will leave these blank, unless the employer has a designated government entity filing on behalf of the employer. Full DGE definition is covered in question 24 of the [IRS FAQ Link](#). The 1094-C Form Lines 9 – 16 are identified under columns L – T of the 1094-C Tab of the ACA Summary.

L	M	N	O	P	Q	R	S	T
DESIGNATED GOVT ENTITY	DESIGNATED GOVT EIN	DESIGNATED GOVT ADDRESS 1	DESIGNATED GOVT CITY	DESIGNATED GOVT STATE	DESIGNATED GOVT ZIP	DESIGNATED GOVT COUNTRY	DESIGNATED GOVT CONTACT PERSON NAME	DESIGNATED GOVT PHONE

Line 17: Skip line 17. This line is reserved for future use and is not included on the 1094-C Tab of the ACA Summary.

Line 18: Total number of Forms 1095-C (those going to employees) associated with this EIN filing. Remember, the number of forms should match the final number of 1095-C Forms distributed for this EIN. The 1094-C Form Line 18 is identified under column U of the 1094-C Tab of the ACA Summary.

U
NUM FORMS
591

Line 19: Confirm the authoritative transmittal is indicated. This indicator is required for each unique EIN. The 1094-C Form Line 19 is identified under column X of the 1094-C Tab of the ACA Summary.

X
AUTHORITATIVE TRANSMITTAL
Yes

Reviewing Part 2

Lines 20-21: Line 20 is the aggregated data and total number of 1095-C Filed

For line 21, indicates if during ANY MONTH of the calendar year the Employer (ALE) was a member of an Aggregated ALE Group. Reminder, not all Employers will be identified as an Aggregated Employer. If check yes, you will need to review Parts III and IV. The 1094-C Form Lines 20 – 21 are identified under columns V - Y of the 1094-C Tab of the ACA Summary Report.

V	W	Y
AGGREGATE YES	AGGREGATE NO	ALE NUM FORMS
Yes		591

Line 22: Certifications of Eligibility options: Qualified Offer Method or 98% Offer Method. You will need to ensure the parameter outlined by the Employer (ALE) in the Configuration Guide and outlined in the “parameter” of the ACA Summary matches Line 22. The 1094-C Form Line 22 is identified under columns Z – AA of the 1094-C Tab of the ACA Summary. If elected, a “YES” indicator will be identified under one or both of the Certifications of Eligibility.

Z	AA
QUALIFYING OFFER METHOD	98 PERCENT OFFER METHOD

If the Employer (ALE) is claiming a *Certificate of Eligibility*, it will impact the coverage codes and calculations on Lines 14, 15 and 16 of the Forms 1095-C you file for employees. *This is not a mandatory section.* Keep in mind, the Certificates of Eligibility are “and / or,” meaning it may be appropriate to claim none or more than one.

Reviewing Part 3

Lines 23 – 35: In column A:

- If the employer (ALE) offered minimum essential coverage to at least 95% of its full-time employees and their dependents for the entire calendar year, a “Yes” checkbox on line 23 should be checked for “All 12 Months” or for each of the 12 calendar months. The 1094-C Form Line 23 is identified under column “AC” of the 1094-C Tab of the ACA Summary.
NOTE: If the “All 12 Months” is not populated with a “YES” please bring to the employer’s attention.
- If the employer offered minimum essential coverage to at least 95% of its full-time employees and their dependents only for certain calendar months, a number will be populated for each month minimum essential coverage was offered. The 1094-C Form Line 24 – 35 are identified under columns “AD - AO” of the 1094-C Tab of the ACA Summary.
- For the months, if any, for which the employer did not offer minimum essential coverage to at least 95% of its full-time employees and their dependents, a number will be populated for each month minimum essential coverage was not offered. The 1094-C Form Line 24 – 35 are identified under columns “AP - BB” of the 1094-C Tab of the ACA Summary.
- The 1094-C Form Part III section (b) & (c) are identified under columns “BC - CL” of the 1094-C Tab of the ACA Summary. These represent the FT employee count by month & total employee count by month.

Reviewing Part 4

If the Employer is a member of an aggregated ALE group, the information about your sibling organizations will be displayed here. It can include up to 30. The 1094-C Form Line 36 – 55 are identified under columns “DB - FI” of the 1094-C Tab of the ACA Summary Report.

	DB	DC	DD	DE	DF	DG
ER NAME 36	EIN 36	ER NAME 37	EIN 37	ER NAME 38	EIN 38	
The INDUSTRIAL CONSTRUCTION LLC	274987688	ABC Construction Company	640429766	The Maintenance Company	640920057	

Note: Columns “FJ” of the 1094-C Tab of the ACA Summary Report is the “Override” field and should **not** have a “YES” indicator. Special situations can occur to require and override of the 1094-C data however it is not recommended.

Step Submit AIR

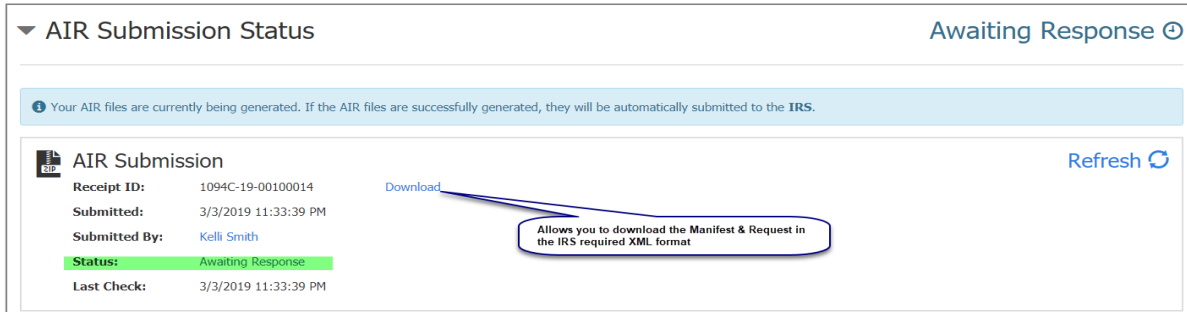
- Once the review of the 1094-C data is complete and accurate the following steps should be completed:
 - Review and Approve:** the revised ACA Summary, if applicable, should be “Approved for Submission” then click “continue”. If the approval is already complete, just click “Continue”
 - Generate 1095s:** click “skip”
 - Submit AIR:** click “Run and Submit” (See below)

You will be prompted to confirm with a pop-up, click “confirm”. The file will begin processing...

Then moves into the AIR Submission Status:

Once the report finishes processing, one of the following scenarios will occur:

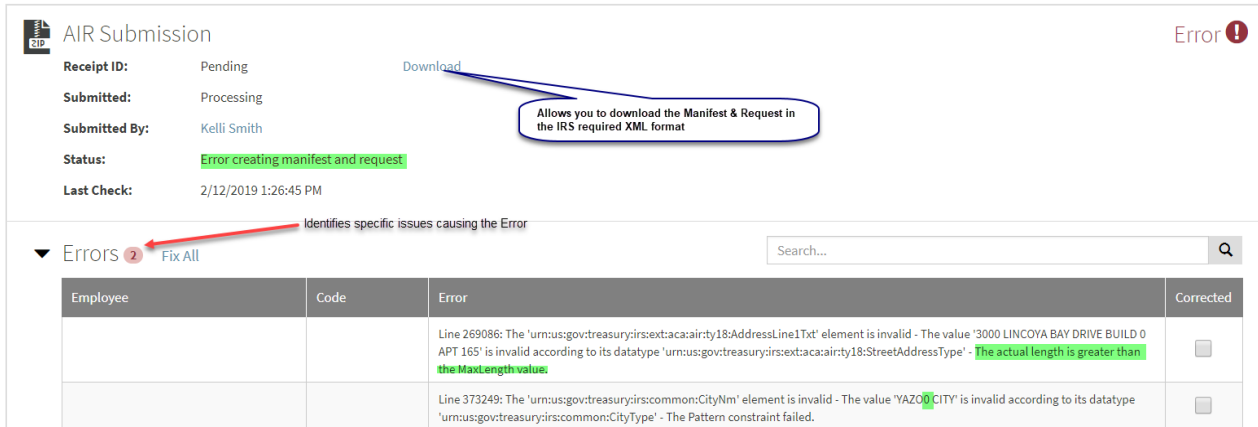
Scenario 1: Manifest/Request XML files completes **without** errors.



In the screenshot above, you will notice the download hyperlink: This hyperlink will open a zip file containing the Request & Manifest files. The Request file contains the 1094 & 1095-C data and the Manifest file contains information about your submission. Both files are in the required IRS XML format.

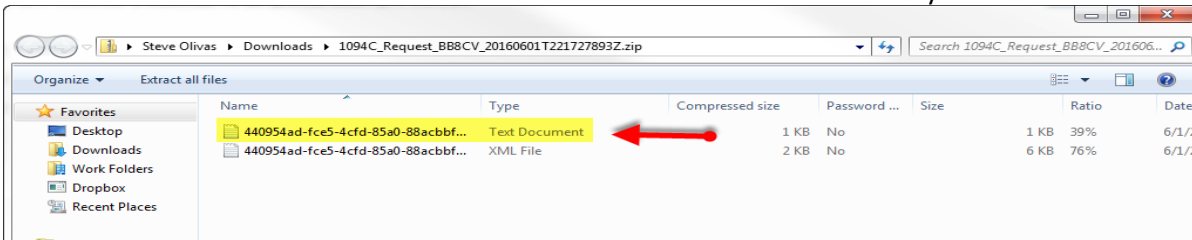
Scenario 2: Manifest/Request XML files completes **with** errors.

If your AIR Submission fails with errors, you will need to expand the “Errors” feature to identify the specific errors. For more details on the errors, click on the download hyperlink that contains the error.

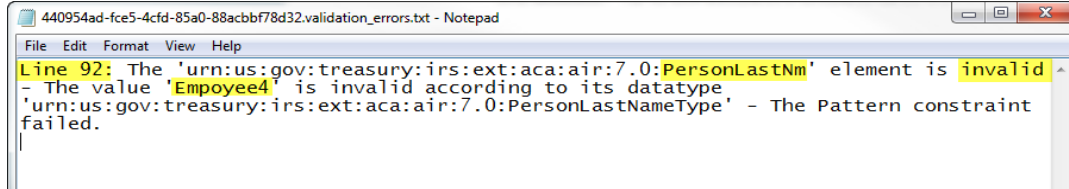


In the screenshot above, you will notice the download hyperlink: The download hyperlink that will open a zip file containing the Request file & the validation error file. The Request file contains the 1094 & 1095-C data and the validation file contain the elements that are triggering the error.

Once the zip file downloads, open the first document listed in the folder, (the text document). This document contains a list of data errors that failed a series of checks defined by the IRS.



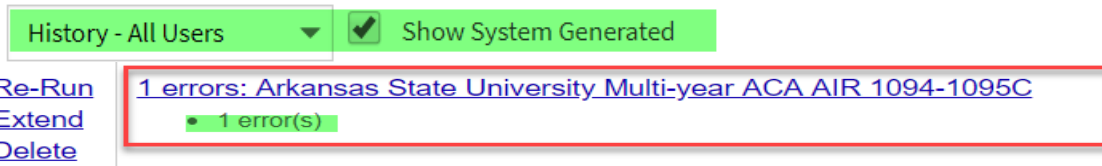
Most of these errors will be tied to data issues/inconsistencies: In the example below, Line 92 of the report failed due to an employee's last name containing an invalid (numeric) character "Employee4".



In the example above, once the Employee last name is corrected in the enrollment site, you are able to re-run the AIR file (**AIR Submit; Steps 3 above**) and the error should be resolved

Scenario 3: The resulting XML file failed schema validation. A validation error list has been enclosed with the XML report.

If your AIR Submission fails and identifies the status outlined above, the validation file is not housed in the workflow (bug in system). For details on the errors, you have to download the validation file from Sent Report using the following parameters.



Please note: If your file completes with a significant amount of errors or if you are unsure of how to proceed, please contact your manager for assistance.

Step AIR Submission Status

1. Once the Submit AIR finishes and is successfully submitted to the IRS, one of the scenarios will occur:

- Processing/Awaiting Response
- Accepted
- Accepted with Errors
- Rejected

Tip: During peak submission time, IRS responses can and will be delayed

Scenario 1: Status: Accepted

No errors were found when processed by the IRS. No further action required with the IRS

▼ AIR Submission Status Complete ✓

📢 Congratulations, your AIR submission has been accepted by the IRS with no errors. The AIR Submission process is complete for the EIN associated with the approval!

AIR Submission Accepted ✓

Receipt ID:	1094C-19-00100021	Download
Submitted:	3/3/2019 11:44:24 PM	
Submitted By:	Kelli Smith	
Status:	Accepted	
Last Check:	3/4/2019 12:22:45 AM	

Allows you to download the Manifest & Request in the IRS required XML format

Scenario 2: Status: Accepted with Errors

This is a result of a “Non-Fatal” error that typically is a TIN (Tax Identification Number) and name mismatch with the IRS. This submission status constitutes a successfully accepted AIR File and a revised file can be submitted to clear the errors if the discrepancy can be corrected.

▼ AIR Submission Status

Complete with Errors ✓

1 Your AIR Submission contained errors identified by the IRS. The IRS will provide a file containing a list of the errors along with a brief explanation of each item. These errors will need to be corrected and resubmitted before the process is complete.

AIR Submission Accepted with Errors ✓

Receipt ID: 1094C-19-00100024
Submitted: 3/3/2019 11:45:34 PM
Submitted By: Kelli Smith
Status: Accepted with Errors
Last Check: 3/4/2019 12:19:41 AM

Errors 2 Fix All Download XML | Excel Search...

Employee	Code	Error	Corrected
DAVID G. EDLESTON	Shared-008	The Information Return 'CoveredIndividualName' and 'SSN' within 'CoveredIndividualGrp' must match the IRS database.	<input type="checkbox"/>

Scenario 3: Status: Rejected

This is a result of a “Fatal” error that the IRS will not accept and requires correction. This submission constitutes a file that was NOT accepted by the IRS and MUST be resubmitted.

AIR Submission Rejected ✗

Receipt ID: 1094C-18-00040362
Submitted: 2/16/2018 12:33:30 AM
Submitted By: Kelli Smith
Status: Rejected
Last Check: 2/16/2018 4:00:33 AM

Errors Download XML | Excel Search...

Employee	Code	Error	Corrected
	1094C-004-01	Form 1094C 'BusinessName' and 'EmployerEIN' in 'EmployerInformationGrp' must match the IRS database.	<input type="checkbox"/>

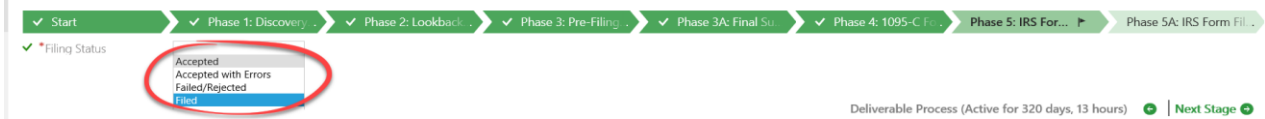
Reviewing IRS feedback statuses

Status	Definition	Action Required
Accepted 	The 1094-C and 1095-Cs transmitted for this EIN were accepted, and no errors were found when processed by the IRS.	No further action is required!
Accepted with Errors 	The entire transmission for this EIN was accepted, which means you have successfully filed as of the date your forms were transmitted, but the IRS identified some records that require correction.	You may need to file a corrected return. Please review the specific IRS feedback to determine which records require attention and how to address them.
Partially Accepted 	This means you have a combination of Accepted and Rejected data: for this EIN, at least one record was Accepted, and at least one record was Rejected.	You may need to file a replacement return. Please review the specific IRS feedback to determine which records require attention, and please see "Rejected" immediately below for more information.
Rejected 	The entire transmission for this FEIN was rejected. You have 60 days from the original transmittal date to re-transmit corrected, acceptable returns and still be timely. If you do successfully retransmit within the 60-day window, you will be treated as having filed on the original transmittal date.	You may need to file a replacement return. Please review the specific IRS feedback to determine which records require attention and how to address them.

The Two Most Common Errors

Error Codes(s)	Description	Cause
1	FEIN and Employer Name Do Not Match	This error occurs when the employer name on Forms 1094-C and 1095-C does not exactly match the legal name stored in the IRS database for that FEIN, which can cause all or part of the transmission to be rejected. The legal employer name is the name that was entered on Form SS-4, Application for Employer Identification Number.
2	SSN and Employee Name Do Not Match	This error occurs when the individual name on a Form 1095-C does not exactly match the legal name stored in the IRS database for that SSN or Tax Identification Number (TIN). Common culprit: dependent SSNs!

CRM should be updated to Phase 5 and include the Filing Status (see below)



Tip: Refer to “Troubleshooting” guide for details on resolving an *Accepted with Error* or *Rejected* status

AIR Submission Error(s): Troubleshooting

FORM 1095-C

Most Common Error: SSN and Employee Name (or covered dependent name) Do Not Match

This error occurs when the individual (Employee and/or covered dependent) name on the Form 1095-C does not exactly match the legal name stored in the IRS database for that SSN or TIN. **Common culprit: dependent SSNs!**

The Full list of IRS Error Code can be found at: [1095C Error Codes](#)

Common Error Codes:


“OtherCompletePersonName” Identifies: *Employee’s data elements*

Error Code/Rule Number	Business Rule Text	Error Category	Severity
1095C-007-02	If 'OtherCompletePersonName' in 'EmployeeInfoGrp' has a value, then 'SSN' must have a value.	Missing Data	Report Error and Reject if over Threshold
1095C-010-01	Form 1095C 'OtherCompletePersonName' and 'SSN' in 'EmployeeInfoGrp' must match IRS database.	Data Mismatch	Report Error and Reject if over Threshold
1095C-011-02	Form 1095C 'MailingAddressGrp' within 'EmployeeInfoGrp' must have a value (either USAddressGrp or ForeignAddressGrp).	Missing Data	Report Error

“CoveredIndividualInd” Identifies: *(Employee, Spouse and/or dependent(s)) under Part III Covered Individual*

Error Code/Rule Number	Business Rule Text	Error Category	Severity
Shared-008	The Information Return 'CoveredIndividualName' and 'SSN' within 'CoveredIndividualGrp' must match the IRS database.	Incorrect Data	Report Error

FORM 1094-C

Status	Definition	Action Required
Rejected 	The entire transmission for this FEIN was rejected. You have 60 days from the original transmittal date to re-transmit corrected, acceptable returns and still be timely. If you do successfully retransmit within the 60-day window, you will be treated as having filed on the original transmittal date.	You may need to file a replacement return. Please review the specific IRS feedback to determine which records require attention and how to address them.

Most Common Error: FIEN and Employer Name Do Not Match

This error occurs when the exact employer name on the Forms 1094-C and 1095-C do not exactly match the legal name stored in the IRS database for that FEIN, which can cause all or part of the AIR Submission to be REJECTED. The legal employer name is the name that was entered on the Form SS-4, Application for Employer Identification Number.

The Full list of IRS Error Code can be found at: [1094C Error Codes](#)

Common Error Codes_TY2018


Rule Number	Business Rule Text	Error Category
1094C-004-01	Form 1094C 'BusinessName' and 'EmployerEIN' in 'EmployerInformationGrp' must match the IRS database.	Data Mismatch
1094C-008-02	Form 1094C 'MailingAddressGrp' within 'EmployerInformationGrp' must have a value (either USAddressGrp or ForeignAddressGrp).	Missing Data
1094C-009-01	If Form 1094C 'BusinessName' in 'EmployerInformationGrp' has a value, then 'ContactNameGrp' within 'EmployerInformationGrp' must have a value.	Missing Data
1094C-010-01	If Form 1094C 'BusinessName' in 'EmployerInformationGrp' has a value, then 'ContactPhoneNum' within 'EmployerInformationGrp' must have a value.	Missing Data

Step Communication: AIR Submission Status to Employer

- IMPORTANT:**
Once you transmit your files, **you will receive a confirmation notification via email with a Receipt ID number.**
This is the key identifier that verifies the AIR Submission was accepted and is required for any future reference to the reporting year filing.


- Follow up to the Employer with the AIR Submission status that includes the AIR Submission Confirmation for each unique EIN. Along with any TIN, errors triggered as part of the Approved with Errors status. Based on the AIR Submission Status one of the email templates will apply.

Status: Accepted

Status	Definition	Action Required
Accepted 	The 1094-C and 1095-Cs transmitted for this EIN were accepted, and no errors were found when processed by the IRS.	No further action is required!

The email would include the AIR Submission confirmation via PDF file format & finalized 1094-C PDF File.

Status: Accepted with Errors

Status	Definition	Action Required
Accepted with Errors 	The entire transmission for this EIN was accepted, which means you have successfully filed as of the date your forms were transmitted, but the IRS identified some records that require correction.	You may need to file a corrected return. Please review the specific IRS feedback to determine which records require attention and how to address them.

The email would include the AIR Submission confirmation via PDF file format and a separate secure email containing the excel error file. The error file is downloaded from the AIR Submission within the workflow as identified below:

Status: Accepted with Errors

Last Check: 3/4/2019 12:19:41 AM

Identifies specific Errors

Errors 2 [Fix All](#) [Download XML](#) [Excel](#)

Provides an .xls file listing of Errors.

Employee	Code	Error	Corrected
DAVID G. EDLESTON	Shared-008	The Information Return 'CoveredIndividualName' and 'SSN' within 'CoveredIndividualGrp' must match the IRS database.	<input type="checkbox"/>

Step ACA Reporting Complete

Once the Employer has completed all TIN error updates, if any, or confirmed no updates are required the next step is to close the loop on the process and remit a formal ACA Reporting Year COMPLETE email.

Glossary of Terms:

Term	Acronym	Definition
Affordable Care Act:	ACA	Patient Protection and Affordable Care Act. The first part of the comprehensive health care reform law enacted on March 23, 2010. The name " Affordable Care Act " is usually used to refer to the final, amended version of the law. (It's sometimes known as "PPACA," " ACA ," or " Obamacare .")
Applicable Large Employer:	ALE	A company is an Applicable Large Employer for a given calendar year if it employed an average of 50 or more full-time employees (including <u>full-time equivalents</u>) in the prior calendar year.
Employer Identification Number:	EIN	Also known as the Federal Employer Identification Number (FEIN) or the Federal Tax Identification Number , is a unique nine-digit number assigned by the Internal Revenue Service (IRS) to business entities operating in the United States for the purposes of identification.
Full Time Employee:	FTE	A full-time employee is, for a calendar month, an employee employed on average at least 30 hours of service per week, or 130 hours of service per month.
Variable Hour (Part Time) Employee:	VHE or PTE	Employees whose hours are unpredictable, such as seasonal or PT (variable hour). In other words, the employee's hours vary such that it is not possible to determine in advance whether the employee will work 30 weekly (or 130 monthly) hours or more during their period of employment.
Full Time Equivalent Employee:	FTE	Refers to a variable hour (PT) employee whose number of hours average at least 30 hours of service per week, or 130 hours of service per month, during the employers defined measurement period. As a result of these hours they are counted as the equivalent of a full-time employee under ACA.
Hour of Service:	HOS	Refers to each hour in which an employee is paid, or entitled to payment, for the performance of duties for the employer, and each hour for which an employee is paid, or entitled to payment, for a period of time during which no duties are performed due to vacation, holiday, illness, incapacity (including disability), layoff, jury duty, military duty or leave of absence.
Affordable Coverage:		A job-based health plan covering only the employee that costs 9.61% or less for 2022 (as adjusted) of the employee's household income. If a job-based plan is " affordable ," and meets the "minimum value" standard, you're not eligible for a premium tax credit if you buy a Marketplace insurance plan instead
Minimum Essential Coverage:		Any insurance plan that meets the Affordable Care Act requirement for having health coverage . To avoid the penalty for not having insurance you must be enrolled in a plan that qualifies as minimum essential coverage (sometimes called "qualifying health coverage ").
Minimum Value:		An employer-sponsored plan provides minimum value if it covers at least 60% of the total allowed cost of medical benefits that are expected to be incurred under the plan.
LookBack Period:	LBP	A period of time in the past that is used to analyze your variable hour (part time) work force. In the case of the ACA, the look back period can range from 3-12 months.
Lookback Report:		Report used to identify variable hour (part time) employees who averages the IRS hours threshold and medical coverage would need to be offered.
Initial Measurement Period:		New employees whose hours are unpredictable, such as seasonal or variable hour, will have their status determined by looking over a period of time called a " initial measurement period ," which can be 3-12 months. The start date of each new employee's Initial Measurement Period is based upon the <u>new employee's hire date</u> . It does not start on the same date as the Standard Measurement Period. The employer then tracks the hours of service of each new employee during his or her Initial Measurement Period.

Term	Acronym	Definition
Initial Administrative Period:		The purpose of the “initial administrative period” is to allow employers time to total and average the hours of service of each employee during the Initial Measurement Period, notify eligible employees, explain coverage available under the plan, answer questions, collect materials from employees, and enroll employees who elect coverage before day one of the Initial Stability Period.
Initial Stability Period:		The period during which the employer must offer coverage to all newly-hired employees who worked on average at least 30 hours per week or 130 hours per month during the Initial Measurement Period.
Standard Measurement Period:		To use the Standard Lookback Measurement Method, an employer first selects a “Look Back” period, called the Standard Measurement Period, which can be anywhere in length between 3 and 12 months. The employer selects the start date as well as the duration of the Standard Measurement Period.
Standard Administrative Period:		The purpose of the Standard Administrative Period is to allow employers time to total and average the hours of service of each employee during the Standard Measurement Period, notify eligible employees, explain coverage available under the plan, answer questions, collect materials from employees, and enroll employees who elect coverage before day one of the Standard Stability Period. The Standard Administrative Period may not exceed ninety (90) days, which may in practice be the first of the month following two months.
Standard Stability Period:		Employees who worked on average at least 30 hours per week or at least 130 hours per month during the Measurement Period (i.e., were full time) should be offered health coverage for the entire Standard Stability Period regardless of the hours they actually work during the Standard Stability Period (unless they cease to be employed by the employer).
Ongoing Employee:		An employee who has been employed by an applicable large employer for at least one complete standard measurement period.
Mainland single federal poverty line		The annual dollar amount in the federal poverty guideline chart for a single-member household in any of the 48 contiguous states \$12,880 (2021). Therefore, qualifying offer means the employee’s cost for employee-only coverage does not exceed \$103.15 per month (2022)
Control Group:		The IRS defines businesses as a group of related businesses that have common ownership. If a controlled group exists as defined by the applicable Internal Revenue Code (Code) sections, the employees of those businesses are considered together for certain qualified plan requirements.
Self-insured health plan:		A self-funded, or self-insured, plan is one where the plan sponsor (employer) operates its own health plan instead of purchasing a fully-insured plan from the insurance carrier.
Fully-insured health plan:		A fully-insured health plan is one where the plan sponsor (employer) contracts with an insurance carrier and pays a fixed premium to the carrier for an annual contract based upon the types of benefits coverage selected.
SSN:		Social Security Number
TIN:		Taxpayer Identification Number
TCC Code:		Transmitter Control Code used to file forms Electronically with the IRS
Minimum essential coverage:	MEC	means any employer-sponsored group health plan with medical benefits. Excepted benefits (e.g., most types of dental and vision plans, flexible spending accounts (FSAs), employee assistance programs (EAPs), and fixed indemnity plans) are not MEC.
Minimum value coverage:	MV	means that the minimum essential coverage plan’s share of total allowed cost of benefits is at least 60 percent of such costs

Term	Acronym	Definition
Affordable:		means that the employee's required contribution for self-only coverage does not exceed 9.66 percent of the employee's income from the employer.
Form 1095-C:		Employer-Provided Health Insurance Offer and Coverage Insurance, provides you with information about the health coverage offered by your employer. In some cases, it may also provide information about whether you enrolled in this coverage
Form 1095-B:		is a health insurance tax form which reports the type of coverage you have, dependents covered by your insurance policy, and the period of coverage for the prior year. This form is used to verify on your tax return that you and your dependents have at least minimum qualifying health insurance coverage.