**BES ACA Reconciliation Report Codes**

Class Codes:FT Full-time

PT Part-time

R Retiree

X COBRA Qualified Beneficiary

XD COBRA Qualified Beneficiary-Disability

SS Surviving Spouse

SC Surviving Child

LS Spouse in Split Medicare Contract

LC Child in Split Medicare Contract

Offer Codes: Hyphen (-) Not in this group

Asterisk (\*) Not in this group

WP New full-time participant not yet eligible for coverage in this group Note: New full-time participants should have a WP for the month in which they are hired. The WP changes to W when the participant becomes eligible for coverage. See samples.

W Participant is eligible for coverage but chose to waive enrollment

Note: New full-time and part-time participants should have a W for the month in which they become eligible for coverage. The W changes to E when the participant enrolls in coverage. See samples.

E Participant is enrolled in coverage

Note: The E changes to a hyphen or an asterisk when the participant is no longer eligible for coverage in this group.

F Employer failed to offer coverage to ACA-eligible participant

**BES ACA Reconciliation Report Samples**

Sample 1: Participant is full-time and enrolled January – September.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| <JAN> | <FEB> | <MAR> | <APR> | <MAY> | <JUN> | <JUL> | <AUG> | <SEP> |
| Class / Offer | Class / Offer | Class / Offer | Class / Offer | Class / Offer | Class / Offer | Class / Offer | Class / Offer | Class / Offer |
| FT / E | FT / E | FT / E | FT / E | FT / E | FT / E | FT / E | FT / E | FT / E |

Sample 2: Participant is new and full-time February 9; full-time, eligible for coverage, and waived in March; full-time and enrolled July – August; no longer eligible in September.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| <JAN> | <FEB> | <MAR> | <APR> | <MAY> | <JUN> | <JUL> | <AUG> | <SEP> |
| Class / Offer | Class / Offer | Class / Offer | Class / Offer | Class / Offer | Class / Offer | Class / Offer | Class / Offer | Class / Offer |
| - / - | F / WP | FT / W | FT / W | FT / W | FT / W | FT / E | FT / E | - / - |

Sample 3: Participant is new and full-time April 1, eligible for coverage and enrolled April – September.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| <JAN> | <FEB> | <MAR> | <APR> | <MAY> | <JUN> | <JUL> | <AUG> | <SEP> |
| Class / Offer | Class / Offer | Class / Offer | Class / Offer | Class / Offer | Class / Offer | Class / Offer | Class / Offer | Class / Offer |
| - / - | - / - | - / - | FT / E | FT / E | FT / E | FT / E | FT / E | FT / E |

Sample 4: Participant is part-time and enrolled January – April; full-time and enrolled May – June; no longer eligible in July.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| <JAN> | <FEB> | <MAR> | <APR> | <MAY> | <JUN> | <JUL> | <AUG> | <SEP> |
| Class / Offer | Class / Offer | Class / Offer | Class / Offer | Class / Offer | Class / Offer | Class / Offer | Class / Offer | Class / Offer |
| PT / E | PT / E | PT / E | PT / E | FT / E | FT / E | - / - | - / - | - / - |