CARDINAL ACA Reconciliation Report Codes

Class Codes:

Group	Status Code	Type
State Employee Program	SF	Employee - Full-time Employee
State Employee Program	SP	Employee - Part-time Employee
State Employee Program	SQ	Employee - Quasi - Part-time Employee
State Employee Program	SW	Employee - Wage
State Employee Program	SE	Employee - Penalty
State Retiree Program	RC	COBRA Employee/Dependent
State Retiree Program	CD	COBRA Disability Employee/Dependent
State Retiree Program	RR	Retired Employee
State Retiree Program	RD	Retired Employee - LTD
State Retiree Program	RE	Retired Employee - Penalty
State Retiree Program	LS	Linked Spouse
State Retiree Program	LC	Linked Child
State Retiree Program	SS	Surviving Spouse
State Retiree Program	SC	Surviving Child
Local Choice Program	TF	TLC Employee - Full-time Employee
Local Choice Program	TP	TLC Employee - Part-time Employee
Local Choice Program	TE	TLC Employee - Penalty
Local Choice Program	TH	TLC COBRA Employee/Dependent
Local Choice Program	TI	TLC COBRA Disability Employee/Dependent
Local Choice Program	TG	TLC Retiree
Local Choice Program	TD	TLC Linked Spouse
Local Choice Program	TC	TLC Linked Child
Local Choice Program	TB	TLC Surviving Spouse
Local Choice Program	TA	TLC Surviving Child

Offer Codes:

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

CARDINAL ACA Reconciliation Report Samples

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

Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
SF/E	SF/E	SF/E	SF/E	SF/E	SF/E	-/-	-/-	-/-	-/-	-/-	-/-

Sample 2: Participant is new and full-time March 10; waiting period March and enrolled April.

Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
-/-	-/-	SF/WP	SF/E	-/-	-/-	-/-	-/-	-/-	-/-	-/-	-/-

Sample 3: Participant is new and full-time March 1; eligible for coverage and enrolled March – August.

Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
-/-	-/-	SF/E	SF/E	SF/E	SF/E	SF/E	SF/E	-/-	-/-	-/-	-/-

Sample 4: Participant is part-time and enrolled January – November.

Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
SP/E	SP/E	SP/E	SP/E	SP/E	SP/E	SP/E	SP/E	SP/E	SP/E	SP/E	-/-

Sample 5: Participant is full-time and waived January – August.

Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
SF/W	SF/W	SF/W	SF/W	SF/W	SF/W	SF/W	SF/W	-/-	-/-	-/-	-/-