

HEALTH BENEFITS E-NEWS EXTRA

Department of Human Resource Management
Office of Health Benefits

February 22, 2016

Final Affordable Care Act (ACA) Employer Certification Forms Due by March 3, 2016

The information on the Employer Certification for ACA Employer Reporting is important and required to complete the 1094-C form that will be submitted on your behalf to IRS if you signed a Reporting Agreement. The original due date for this form was February 8. Because many of the forms cannot be used as submitted, the deadline has been extended to March 3, 2016. **Missing the March 3rd due date will delay your ACA Employer Reporting and may subject your agency to a late-filing IRS penalty.**

The form submitted on February 8th included your current employees (full-time, Q status, part-time, and wage).

- If you:
 - submitted the Certification Form appropriately, as noted below, AND
 - have no corrections to make, AND
 - have no contingent workers (deemed to be common law employees) to add to the counts, no additional report is required. We have the required information and will report to the IRS based on that data.

- If, however, you:
 - submitted the Certification Form as a faxed or scanned document, AND/OR
 - need to make corrections to the form submitted on February 8th, AND/OR
 - must add contingent workers identified as COMMON LAW EMPLOYEES to the counts originally submitted on Feb. 8th (*Please consult with your Human Resource Director as additional instructions will follow*), you must submit a REVISED Certification Form.

The Certification Form is an interactive fillable form and must be returned using the instructions below. We cannot use a faxed or scanned form.

Instructions for Completing the Form

1. This form works best with Nitro Reader. It is free and may be downloaded from this link: <http://www.gonitro.com/pdf-reader/download>.
 - The form is also compatible with Adobe Reader XI Standard. It is not compatible with any other Adobe Reader version.
 - If you have trouble with the download, contact your agency's IT support.

2. Click on the [interactive fillable form \(http://www.dhrm.virginia.gov/docs/default-source/benefitsdocuments/ohb/employer-certification-for-affordable-care-act-aca-employer-reporting.pdf\)](http://www.dhrm.virginia.gov/docs/default-source/benefitsdocuments/ohb/employer-certification-for-affordable-care-act-aca-employer-reporting.pdf) and save the blank form to your computer. Next, open the saved blank form in Nitro Reader (or Adobe Reader XI Standard) and fill in the required fields.
 - Enter the 3-digit Agency Code and leave the Group Code and Subdivision Code blank.
 - The counts in #6 are employment counts, not health insurance counts. Please refer to the definitions of 'employee' and 'full-time employee' on Page 13 of this IRS publication, <https://www.irs.gov/pub/irs-pdf/i109495c.pdf> to determine your employment counts.
 - A signature is not required in #7.

3. Save the form after you have completed it using your agency name in the file name.

4. Create a new email and insert/attach the completed form to it.

- If you are revising a previously submitted form, **please include the word 'REVISED'** in the email's subject line.
5. Open the email attachment to be sure it is usable. If asked to open in full screen mode, click "No". Your form is usable if the fields are filled and highlighted.
- If the file is usable, send the email with your attached pdf form to OHB@dhrm.virginia.gov as soon as possible and no later than March 3, 2016.
 - If the file is not usable, contact Brenda.Farrish@dhrm.virginia.gov for alternative instructions on submitting your form.

Please do not reply to this e-mail. You may send inquiries to the Office of Health Benefits mailbox at ohb@dhrm.virginia.gov.