**CHANGE LOG**

This record shall be maintained throughout the life of the document. Each change and published update shall be recorded. Started tracking changes on 12/6/2018.

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<th>DATE</th>
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<th>DESCRIPTION OF CHANGE</th>
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<td>12/06/2018</td>
<td>Pages 20, 28, 29, 38, 40, 41, 44 and 45</td>
<td>Updates to the keying and use of ACAS Codes 2A and 2B.</td>
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AFFORDABLE CARE ACT (ACA) INFORMATION

Background

The Federal Patient Protection and Affordable Care Act (ACA) was enacted in March 2010 to ensure individuals have access to quality and affordable health care. The ACA Employer Shared Responsibility provisions, effective January 2015, mandate that large employers file annual reports with the Internal Revenue Service (IRS). The annual reports must identify the offer and acceptance or decline of health coverage to full-time employees and their eligible dependents. The California Department of Human Resources (CalHR), State Controller’s Office (SCO), and California Public Employees’ Retirement System (CalPERS) continue to lead the effort to ensure the State’s compliance with these provisions.

AFFORDABLE CARE ACT SYSTEM (ACAS) DATABASE

Introduction

In order to implement the ACA Employer Shared Responsibility provisions, the SCO deployed the Affordable Care Act System (ACAS) in January 2015. The ACAS serves as the official tracking and reporting repository of ACA required information for Civil Service, California State University (CSU), and Judicial Council (JUD) employees. The system provides a single centralized source of current and historical health benefit status data for employees. It is maintained via on-line real-time updating of individual ACA health benefit status code transactions, as well as batch processing, which links the ACAS to employee data in the SCO Employment History (EH) system.

The intent of the ACAS User Guide is to explain the procedures, transactions and codes used to update the ACAS database. This User Guide does not address how to administer health benefits, nor how to process health benefit enrollment related forms. Rather, this User Guide defines the purpose of the ACAS database and how it should be updated when an employee’s health benefit status changes.

It is important to note that the ACA does not change existing business processes related to administering health benefits for state employees. However, compliance with the Employer Shared Responsibility provisions does require other business process changes to both departmental/campus human resources offices and the SCO, mostly in the area of tracking and reporting each employee’s health benefit status.

The ACAS database was initially populated using information contained in the EH system (e.g., social security, name, position number) and Payroll (PR) system records. Any required updates to the ACAS after the initial load are the responsibility of the Human Resources staff who administer benefits.

As stated above, EH and PR information was used to populate ACAS records at implementation, including the employee’s health benefit status, which was populated based on information in EH
as of December 31, 2014 and/or PR as of December 2014 Master Payroll. This health benefit status information is reflected in the ACAS in a field called ACA Status. On a daily basis, if EH updates are key entered, specific data in the employee’s ACAS record will be updated, e.g., name, social security number, position number, and new employees will be added to the ACAS database. This happens via a nightly batch process.

The most critical piece of ACAS data – ACA Status – is not captured in EH, thus **the employing department/campus must update an employee’s ACA Status in ACAS whenever a health benefit (HB) related event impacts the employee’s HB status in one of the following ways.** The employee:

- Is newly hired to a HB eligible position and must serve an administrative waiting period pending an offer of HB coverage
- Is a Permanent Intermittent employee who must work a qualifying number of hours in a control period prior to being offered or not offered HB coverage
- Is offered or not offered HB coverage
- Has accepted or declined the HB coverage that was offered
- Has had their HB canceled or suspended
- Is offered COBRA coverage
- 18-month COBRA eligibility period has ended
- Permanently separates from their position

The SCO utilizes ACAS information to produce the mandatory annual IRS report(s) on behalf of the State of California. Since the federal ACA regulations require employer compliance, expensive federal penalties can be imposed if the employer’s information does not reflect an acceptable level of compliance. As such, it is critical for employing departments/campuses to correctly maintain their employees’ records in ACAS.

**System Access Authorization**

Access to ACAS is requested via the same procedure(s) used for other SCO Personnel & Payroll Services Division (PPSD) systems, e.g., PIMS, HIST, PIP, CLAS, etc. The departmental/campus Human Resources staff, through their Security Coordinator, must complete and submit an updated **Current Security Authorization (PSD125A)** form and, if applicable, the **Statement of Understanding (PSD 108)** with justification to the SCO PPSD Decentralized Security Administrator.
Security Roles

Department/campus security roles are defined below:

**Department/Campus – Inquiry:** Human Resources staff who have authority to view ACAS records that belong to their department/campus, for their specific position sequence number. Similar to PIMS, the ACAS only allows you to view records for employees currently employed with your department/campus or last employed with your department/campus and;

**Department/Campus – Inquiry/Update:** Human Resources staff who have authority to view and update ACAS records that belong to their department/campus, for their specific position sequence number. Similar to PIMS, the ACAS only allows you to view or update records for employees currently employed with your department/campus or last employed with your department/campus.

**NOTE:** Entities without access to EHDB or payroll will update ACAS data via a file transfer process (FTP). They will not enter transactions directly into the ACAS database. Please refer to the District Agricultural Association (DAA) Data Submission Guide for further directions.

System Availability

Online ACAS keying is available Monday – Friday, 7:00 AM – 6:00 PM.

Employment History (EH) Impact on ACAS Data

As mentioned above, the initial ACAS implementation used EH employee data as of December 31, 2014. Effective January 2, 2015, daily batch processes were implemented to sync ACAS data with the EH database (EHDB). This daily batch process runs nightly, processing EH data key entered that day. Therefore, a one day lag exists between updating information in EH and updating information in the ACAS.

Much of the information stored in the ACAS is updated via the EHDB and the daily batch process. Only a few key pieces of ACA required data must be entered on ACAS. The table below shows the primary ACAS database information and how it is updated.
<table>
<thead>
<tr>
<th>ACAS Information</th>
<th>Updated via EH</th>
<th>Key Entered on ACAS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Name</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Employee Social Security Number</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Employee Street Address, State, Zip Code</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>ACA Suffix Code</td>
<td><strong>Yes:</strong> Translated via Class Type and Position Number on EH record.</td>
<td>No</td>
</tr>
<tr>
<td>Denotes whether employee is:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Civil Service – CS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CSU – CSU</td>
<td></td>
<td></td>
</tr>
<tr>
<td>JUD - Judicial Council</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CCC - Calif. Conservation Corps</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CE - Cal Expo</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DAA - District Agricultural Associations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pos. Seq. – Position Sequence Number</td>
<td><strong>Yes:</strong> If employee is on EHDB, (Pos. Seq. is 01 – 20 on ACAS).</td>
<td>No</td>
</tr>
<tr>
<td>Associated with a specific position number for an</td>
<td><strong>No:</strong> If ACAS record is for an employee whose record is not on EHDB, e.g., DAA or Cal Expo temporary worker (Pos. Seq. is 50-99 on ACAS).</td>
<td></td>
</tr>
<tr>
<td>employee - if the employee holds or held concurrent</td>
<td></td>
<td></td>
</tr>
<tr>
<td>employment with the State.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Position Number</td>
<td><strong>Yes:</strong> If employee is on EHDB.</td>
<td>No</td>
</tr>
<tr>
<td>Status – Denotes whether employee is Active,</td>
<td><strong>Yes:</strong> If employee is on EHDB.</td>
<td>No</td>
</tr>
<tr>
<td>Temporarily Separated or Separated for each Position</td>
<td><strong>Exception:</strong> Updated via Monthly batch Excel File, for DAA or Cal Expo employee whose record is not on EHDB.</td>
<td></td>
</tr>
<tr>
<td>Sequence.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Appointment Tenure</td>
<td><strong>Yes:</strong> If employee is on EHDB.</td>
<td>No</td>
</tr>
<tr>
<td><strong>Exception:</strong> Updated via Monthly batch Excel File,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>for DAA or Cal Expo employee whose record is not on</td>
<td></td>
<td></td>
</tr>
<tr>
<td>EHDB.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time Base</td>
<td><strong>Yes:</strong> If employee is on EHDB.</td>
<td>No</td>
</tr>
<tr>
<td><strong>Exception:</strong> Updated via Monthly batch Excel File,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>for DAA or Cal Expo employee whose record is not on</td>
<td></td>
<td></td>
</tr>
<tr>
<td>EHDB.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ACA Transaction Effective Date – Indicates the</td>
<td><strong>Yes:</strong> Transaction Effective Date for ACA Status Code 6A will be updated by the auto population program when a separation transaction is keyed in EH. ACA Transaction Effective Dates must be keyed for all other ACA Status Codes.</td>
<td>Yes: Refer to the User Guide section on ACA Transactions – Keying Instructions</td>
</tr>
<tr>
<td>effective date for each ACA transaction key entered</td>
<td><strong>Exception:</strong> The 6A auto population program will reject if there is no ACA Status Code or if the current ACA Status Code is 5D or 6A. This will cause an out of sequence transaction.</td>
<td></td>
</tr>
<tr>
<td>on the ACAS.</td>
<td><strong>Exception:</strong> Updated via Monthly batch Excel File, for DAA or Cal Expo employee whose record is not on EHDB.</td>
<td></td>
</tr>
<tr>
<td>ACAS Information</td>
<td>Updated via EH</td>
<td>Key Entered on ACAS</td>
</tr>
<tr>
<td>------------------</td>
<td>---------------</td>
<td>---------------------</td>
</tr>
<tr>
<td>ACA Status Code – Denotes the employee’s most recent HB status.</td>
<td>Yes: ACA Status Code 6A will be updated by the auto population program when a separation transaction is keyed in EH. All other ACA Status Codes must be manually keyed. <strong>Exception</strong>: The 6A auto population program will reject if there is no ACA Status Code or if the current ACA Status Code is 5D or 6A. This will cause an out of sequence transaction. <strong>Exception</strong>: Updated via Monthly batch Excel File, for DAA or Cal Expo employee whose record is not on EHDB.</td>
<td>Yes: Refer to the User Guide section on ACA Status Codes for code definitions. <strong>Exception – ACAS Converted Records</strong>: At the time of ACAS implementation, an employee’s ACA Status Code was translated using a combination of data from the EH &amp; PR systems (e.g., tenure, time base, active/separation status, and whether or not HB or Flex Elect deductions existed in recent payrolls).</td>
</tr>
<tr>
<td>ACA Void Indicator – “V” if an ACA transaction is incorrect and must be voided. (Note: an incorrect transaction is one that was posted in error. If the transaction was posted correctly at the time, but the employee’s status has since changed, that transaction should remain in history. It should not be voided.)</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Health Coverage Notice Date – Date that the department/campus notifies a newly hired employee of their health coverage options via the legally required <em>Health Insurance Marketplace Coverage Options Notice.</em></td>
<td>No</td>
<td><strong>Exception – ACAS Converted Records</strong>: At the time of ACAS implementation, for all employees whose records are on EHDB, EH &amp; PR record information was translated to update this field with “12/31/2014” where deemed applicable on converted records.</td>
</tr>
</tbody>
</table>
ACAS Logon

1. ACAS is accessed from SCOPROD. Since SCOPROD contains other applications, e.g., PIMS, HIST, PIP, CLAS, etc., users can easily move from one application to another.

2. How to log into ACAS:
   a. As with other SCO online applications, begin with entering “P” on the OTECH screen.

   ![OTECH Screen Image]

   Unauthorized access to any State of California computing system containing US government or state of California information is a criminal violation of Penal Code Section 502 and/or applicable federal law and is subject to civil and criminal sanctions. Accessing any system while exceeding one's authorization or in ways not intended by the State of California shall be subject to disciplinary action, prosecution, or both. Users shall have no expectation of privacy.

   Enter “P” and press enter to proceed

   ![Entering P]

   b. At the SCOPROD screen, enter your User ID and Password.

   ![SCOPROD Screen Image]
c. When the blank screen appears, type ACAS in the top left corner and press ENTER. The ACAS Main Menu will appear.

3. Users are locked out after 30 minutes of inactivity. When this happens, the user has the option to clear the screen and:
   a. Log back into ACAS by re-entering ACAS in the top left corner. At this point, they will return to the same ACAS screen they were on before being locked out; or
   b. Access another SCO online application by entering the acronym for that system in the top left corner; or
   c. Logoff of SCOPROD by entering LOGOFF
ACAS ONLINE KEYING AND PROCESSING

Screens

The ACAS contains four screens – the Main Menu, Employee Position Numbers, Key ACA Transaction/Health Coverage Notice Date and the View ACA Transaction History screens. A picture of each of these screens is displayed directly below, followed by individual sections that describe how to use each of them.

Main Menu

![Main Menu Screen]

Employee Position Numbers

![Employee Position Numbers Screen]
Key ACA Transaction/Health Coverage Notice Date

View ACA Transaction History

Function Keys (F Keys)

Not every screen displays all of these function keys, but the keys always perform the same function wherever they appear.

- F2/Pause Break - Exit ACAS to SCOPROD
- F3/Pause Break - Return to the previous screen in the ACAS
- F4 - Refresh Data and remain on same screen
- F7 - View Previous Page, if applicable
- F8 - View Next Page, if applicable
Main Menu Screen

This is the first screen that appears when the user logs onto ACAS. At this screen, the user chooses whether they want to key an ACA transaction or view an employee’s ACAS history.

Keying Instructions

- Enter SSN
- Select the desired action by placing an ‘X” next to one of the following options:
  - Key ACA Transaction/Health Coverage Notice Date
  - View ACA Transaction History

1. If the employee has only one position sequence number, the user will be directed to their selected menu option - Key ACA Transaction/Health Coverage Notice Date or View ACA Transaction History.

2. If the employee has multiple position sequence numbers (has or once had concurrent employment with the State), the user will be redirected to the Employee Position Numbers screen. Refer to the Employee Position Numbers Screen section below.

Main Menu – Potential Errors

The system displays warning/error messages when one of the following events occurs:

- Invalid SSN
- Corrections to SSN
- Unauthorized User
- EH Out-of-Service
- Invalid Key Entry
- Invalid Function Key Entry

For a detailed list of error messages, including a description of the condition creating the error, see the ERROR MESSAGE/Main Menu Screen section.

Employee Position Numbers Screen

Once an SSN is entered and a selection is made on the Main Menu, the user is directed automatically to the Employee Position Numbers Screen if the employee has multiple position sequence numbers.
1. This screen displays all position sequences for the employee and each position sequence number identifies:

- ACA Suffix Code – identifies whether the position is Civil Service, CSU, etc.
- Position Sequence Number
- Position Number
- Status (e.g., Active, Separated, Temporarily Separated)
- Tenure
- Time Base

**Keying Instructions**

- The user must identify the position sequence number that relates to the employee’s current employment with their department/campus and key enter the corresponding Position Sequence Number where prompted to do so, i.e., “Please Type Position Sequence Number (POS SEQ): __”
- Press enter to continue

2. After entering the position sequence number, the user is redirected to the Key ACA Transaction/Health Coverage Notice Date or View ACA Transaction History screen, depending on the user selection from the Main Menu. Refer to Key ACA Transaction / Health Coverage Notice Date Screen and View ACA Transaction History Screen sections below.

**Employee Position Numbers Screen – Potential Errors**

The system displays warning/error messages when one of the following events occurs:

- Unauthorized User for Position Sequence Number Requested
- Invalid Key Entry
- Invalid Function Key Entry

For a detailed list of Employee Position Numbers screen error messages, including a description of the condition creating the error, see the ERROR MESSAGE/Employee Position Numbers Screen section.
Key ACA Transaction/Health Coverage Notice Date Screen

The Key ACA Transaction/Health Coverage Notice Date screen is used to enter ACA transactions. The employing department/campus must update an employee’s ACA Status in ACAS whenever a HB related event impacts the employee’s HB status in one of the following ways. The employee:

- Is newly hired to a HB eligible position and must serve an administrative waiting period pending an offer of HB coverage
- Is a Permanent Intermittent employee who must work a qualifying number of hours in a control period prior to being offered or not offered HB coverage
- Is offered or not offered HB coverage
- Has accepted or declined the HB coverage that was offered
- Has had their HB canceled or suspended
- Is offered COBRA coverage
- 18-month COBRA eligibility period has ended
- Permanently separates from their position

Effective January 1, 2015, per federal ACA requirements, all employees’ health benefit status must be accounted for in ACAS from the date of hire through the date of separation. Health benefit status information was pre-loaded to the ACAS database for anyone who was active and/or temporarily separated as of December 31, 2014. Effective January 1, 2015, departments/campuses are responsible for key entering health benefit status information for any newly hired employees who were not active on the EHDB as of December 31, 2014, as well as all health benefit status changes for existing employees.

ACA Transactions – Keying Instructions

1. **Effective Date**: the date of the HB status event. Effective date can be keyed up to 45 days in advance. If an employee has a HB status change that is effective prior to 01/01/2015, enter 01/01/2015.

2. **ACA Status Code**: refer to the [ACA Status Code section](#) for information and methods of processing.

3. **Void Indicator**: if applicable, a V (void) can be entered to void an incorrect ACA transaction – if that transaction is the most recent transaction posted for the position sequence. (Note: an incorrect transaction is one that was posted in error. If the transaction was posted correctly at the time, but the employee’s status has since changed, that transaction should remain in history. It should not be voided.)
NOTE: A user cannot:

a. Key a void for any transaction that is not the most recent transaction. Refer to Out-of-Sequence Transaction Section for processing a void in history.
b. Void an initial load transaction (12/31/14 effective date).

Auto Population of ACA Status Code 6A

Effective November 20, 2017, the auto population program runs nightly. When a permanent separation is entered into EH, an ACA Status Code 6A will be automatically populated into the employee’s corresponding position in ACAS. The effective date will be the first calendar day of the month following the month of separation and the transaction will display “SCO AUTO GEN” in the UPDATED BY column. Departments/Campuses must ensure that all ACA Status Codes are accurate at the time of an employee’s separation. A record will reject for any of the following reasons:

- Records with no existing ACA Status Code
- Current ACA Status Code is 5D
- Current ACA Status Code is 6A
- Out of sequence transaction

If the auto population program is unable to enter an ACA Status Code 6A, Human Resources staff must manually enter the ACA Status Code 6A.

Health Coverage Notice Date (Optional) – Keying Instructions

Health Coverage Notice Date is the date on which any new employee is provided the Health Insurance Marketplace Coverage Options Notice, regardless of their health plan enrollment or eligibility status. This date is normally the same as the employee’s date of hire, but can be within 14 days of that date.

(Reference CalHR’s Human Resources Manual, section 1402: Affordable Care Act.)

Example: An employee is hired 01/01/15. The Health Coverage Notice Date must be equal to or sooner than 01/14/2015.

The Health Coverage Notice Date is a stand-alone field.

- Record of the offer of benefits, documented on the ACA Notification Checklist, must be kept in the employee’s file, though the entry of this field into the ACAS is optional.
- It can be left blank if the information is not known or is not changing when key entering an ACA Transaction.
- It can be entered by itself, using the Key ACA Transaction/Health Coverage Notice Screen. It does not require entry of Effective Date or ACA Status Code.
It can also be entered when keying an ACA Transaction with ACA Status Code information.

1. **To Add the Health Coverage Notice Date:** enter date as MM/DD/YYYY.
   - Add Health Coverage Notice Date is used when entering the health coverage notice date for:
     - A new employee on the database
     - An employee that never had a date entered upon initial employment
     - An employee who has transferred to a new department/campus and no date was originally entered

2. **To Change the Health Coverage Notice Date:** enter the new date over the original date as MM/DD/YYYY.
   - Change Health Coverage Notice Date is used when changing the health coverage notice date for an employee who has:
     - An *older* health coverage notice date than what is reflected in the system. (This should be substantiated with written documentation).
     - Transferred to a new department/campus and there is an *older* date documented than what was originally entered.

   - **DO NOT CHANGE the Health Coverage Notice Date for employees with a date of 12/31/2014.** This date indicates that they were part of the initial implementation of the ACAS.

4. **To Delete the Health Coverage Notice Date:** enter an asterisk (*) on the first position in the date field.
   - Deletion of the Health Coverage Notice Date is used when a health coverage notice date was entered in error.

   **Example:**
   - Current record has Health Coverage Notice date of 01/01/2014.
   - To delete the Health Coverage Notice Date key “*” in the first position, which would look like this: *01/01/2014.

**Out-of-Sequence Transactions**

Do not key out-of-sequence. Contact SCO ACAS Online Support for out-of-sequence processing. SCO ACAS Support can be reached at ACASupport@sco.ca.gov or 916-322-3770.
Key ACA Transaction/Health Coverage Notice Date Screen – Potential Errors

The system displays warning/error messages when one of the following events occurs:

- Effective Date before January 1, 2015
- Transaction Effective Dates more than 45 days in the future
- Invalid Effective Date
- Invalid ACA Status Code (refer to the Status Codes and Error Messages sections below)
- Duplicate Entry
- Void – NOT the most recent and valid transaction posted
- Invalid Key Entry
- Invalid Function Key Entry

Possible errors specific to Health Coverage Notice Date include:

- Future Date
- Invalid Key Entry
- Invalid Function Key Entry

For a detailed list of Key ACA Transaction/Health Coverage Notice Date Screen Error Messages, including a list of conditions creating the error, see the ERROR MESSAGE/Key ACA Transaction/Health Coverage Notice Date Screen section.

Additional Information

- The ACAS generates a message that the ACA and/or Health Coverage Notice Date transaction(s) processed successfully, including Void ACA transaction, and Delete Health Coverage Notice Date.

- If an employee has multiple position sequence numbers, the Health Coverage Notice Dates may vary under each position sequence number – the ACAS will update successfully.
VIEW ACA TRANSACTION HISTORY SCREEN

This screen displays the history of ACA transactions, including the Health Coverage Notice Date, for each position sequence for an employee. This is a “display only” screen.

- ACA transaction records are displayed in descending order based on:
  - Year
  - Effective Date

- Other information displayed for each historical transaction includes:
  - Transaction Code (e.g., ACA, ACAV)
  - ACA Status Code
  - Entry Date: date the transaction was entered in ACAS. If ACAV, this is the date the void was entered.
  - SCO Use Only/Updated By: method by which ACA transaction(s) originated:
    - SCO Auth
    - SCO Mass Upd
    - SCO Auto Gen
    - Departments/Campuses by Agency Code (e.g., CS 111)
    - Departments/Campuses who submitted batch files that were loaded into ACAS (e.g., CSU 456 File)
  - Position Number: displays “SEE PIMS,” refers HR staff to EH for employee position number information

- “NO ACTIVITY” is indicated for year(s) where no ACA transaction activity was present - beginning with the employee’s first recorded year of activity up to their latest recorded year of activity.
- When there are previous, older ACA transaction records, the system displays messages indicating additional records are available in a previous page and/or subsequent page.

View ACA Transaction History Screen – Potential Errors

The system displays a warning/error message when the following event occurs:

- Invalid Function Key Entry
ACA STATUS CODES

ACA Status Codes identify an employee’s HB status so the State of California can report accurate data to the Internal Revenue Service (IRS). See below for a list of ACA Status Codes. For a detailed list of ACA Status Codes and descriptions, see Appendix B.

Please note ACA Status Codes must be keyed into ACAS in the correct order according to the State’s normal Health Benefits administration practices, i.e.:

1) Newly hired employee to a HB eligible position and must serve an administrative waiting period pending an offer of HB coverage,
2) Offer of HB coverage is made to the employee,
3) Employee accepts or declines the HB coverage that was offered,
4) Employee or administrative cancellations of HB coverage,
5) Offer of COBRA coverage to an active employee (and their spouse and dependents),
6) Employee permanently separates from their position

The following table offers an “at a glance” look at the appropriate code order, definitions for the codes, and guidance for effective dates.
<table>
<thead>
<tr>
<th>Status Order</th>
<th>Code</th>
<th>Scenario</th>
<th>Effective Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) HEALTH BENEFITS NOT OFFERED</td>
<td>2A</td>
<td>a) Employee is not eligible for HB due to the tenure/time base. For example: temporary or limited term intermittent employees, Seasonal Clerks, Student Assistants, Retired Annuitants, Youth Aides and employees whose time base is less than ½ time.</td>
<td>a) Date employee is hired to a HB ineligible tenure/time base.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b) 1) A previously HB eligible employee who is later appointed to a position that is not HB eligible and was not enrolled in HB at the time of the HB ineligible appointment.</td>
<td>b) 1) Date employee is hired to a HB ineligible tenure/time base.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2) A previously HB eligible employee who is later appointed to a position that is not HB eligible and was enrolled in HB at the time of the HB ineligible appointment.</td>
<td>2) First day of the month following the cancellation of HB due to the loss of eligibility.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>c) For employees in multiple positions, if the employee is HB eligible, all employers must agree upon which one will administer HB from which position. Status Code 2A should be used for any position from which HB are not administered – if the employee is HB eligible.</td>
<td>c) Date employee is hired to the additional position from which HB are not administered.</td>
</tr>
<tr>
<td>Status Order</td>
<td>Code</td>
<td>Scenario</td>
<td>Effective Date</td>
</tr>
<tr>
<td>--------------</td>
<td>------</td>
<td>----------</td>
<td>----------------</td>
</tr>
<tr>
<td></td>
<td>2B</td>
<td>a) Permanent intermittent employee must work a qualifying number of hours in a control period before becoming HB eligible.</td>
<td>a) Date employee is hired to permanent intermittent position.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-OR-</td>
<td>-OR-</td>
</tr>
<tr>
<td></td>
<td>b)</td>
<td>1) A previously HB eligible employee loses HB eligibility. For example: Permanent intermittent employee does not work a qualifying number of hours in his/her last control period.</td>
<td>b) 1) First day of the month following the end of the 6-month eligibility period. For example: February 1st or August 1st.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2) A previously HB eligible non-permanent intermittent employee who is later appointed to a permanent intermittent position and was not enrolled in HB at the time of the permanent intermittent appointment.</td>
<td>2) Date employee is hired to a permanent intermittent position.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3) A previously HB eligible non-permanent intermittent employee who is later appointed to a permanent intermittent position and was enrolled in HB at the time of the permanent intermittent appointment.</td>
<td>3) First day of the month following the cancellation of HB due to the loss of eligibility.</td>
</tr>
<tr>
<td>Status Order</td>
<td>Code</td>
<td>Scenario</td>
<td>Effective Date</td>
</tr>
<tr>
<td>--------------</td>
<td>------</td>
<td>----------</td>
<td>----------------</td>
</tr>
</tbody>
</table>
|              | 2D   | **Employee is newly eligible for HB & must serve an Administrative Waiting Period** – either as:  
 |              |      | a) A new hire to a tenure/time base that is eligible for HB;  
 |              |      | b) A time base change to a HB eligible time base; or  
 |              |      | c) A permanent intermittent employee who worked a qualifying number of hours a control period.  
 |              |      | In all cases, the 2D ACA Status Code accounts for the time between the employee’s permitting event date and the earliest date he/she can enroll in HB coverage.  
 |              |      | The earliest date the employee is considered HB eligible & date HB Administrative Waiting Period begins:  
 |              |      | a) Date of new employee’s hire; or  
 |              |      | b) Date of employee’s time base/tenure change; or  
 |              |      | c) First day of the month following the control period in which a permanent intermittent employee worked a qualifying number of hours.  
| 2) HEALTH BENEFITS OFFERED | 1A   | **Health Benefits Offered to HB Eligible Employee**:  
 |              |      | For ACA purposes, HB are officially “offered” on the earliest date that employees can enroll in health coverage, as outlined in the state’s health benefit eligibility rules. All HB eligible employees must have a 1A ACA Status Code keyed with an effective date that reflects the official offer date.  
<p>|              |      | First calendar day of the month following a newly eligible employee’s permitting event date. |</p>
<table>
<thead>
<tr>
<th>Status Order</th>
<th>Code</th>
<th>Scenario</th>
<th>Effective Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1B</td>
<td><strong>COBRA Benefits Offered to an Active Employee Only:</strong></td>
<td>First calendar day of the month following the appropriate canceled status transaction. (The earliest effective date that can be used for a 1B status transaction is 01/01/16)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>ACA Status Code 1B is used to indicate that COBRA coverage was offered to an active (not permanently separated) employee, whose health coverage was canceled due to a COBRA qualifying event. The 1B ACA Status Code should be posted to ACAS after the appropriate transactions are posted to indicate the employee’s cancellation of health coverage (ACA Status Code 5A or 5C, if COBRA offer is applicable and loss of eligibility ACA Status Code 2A or 2B). Note: For information regarding COBRA rules, please refer to CalHR’s Benefits Administration Manual (BAM) - <a href="http://www.calhr.ca.gov/state-hr-professionals/Pages/benefits-administration-manual.aspx">http://www.calhr.ca.gov/state-hr-professionals/Pages/benefits-administration-manual.aspx</a></td>
<td></td>
</tr>
</tbody>
</table>

---

1 Note: Prior to 09/01/2018, the only available COBRA code was 1C, which was intended to capture all offers of COBRA. Effective 09/01/2018, codes 1B, 1D, and 1E were implemented to provide accurate reporting of COBRA offers, and can be keyed with an effective date from 01/01/2016 – present.
<table>
<thead>
<tr>
<th>Status Order</th>
<th>Code</th>
<th>Scenario</th>
<th>Effective Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1C</td>
<td>COBRA Benefits Offered to an Active Employee and their Dependent(s): ACA Status Code 1C is used to indicate that COBRA coverage was offered to an active (not permanently separated) employee and their dependent(s) (not spouse) whose health coverage was canceled due to a COBRA qualifying event. The 1C ACA Status Code should be posted to ACAS after the appropriate transactions are posted to indicate the employee's cancellation of health coverage (ACA Status Code 5A or 5C, if COBRA offer is applicable and loss of eligibility ACA Status Code 2A or 2B). Note: For information regarding COBRA rules, please refer to CalHR’s Benefits Administration Manual (BAM) - <a href="http://www.calhr.ca.gov/state-hr-professionals/Pages/benefits-administration-manual.aspx">http://www.calhr.ca.gov/state-hr-professionals/Pages/benefits-administration-manual.aspx</a></td>
<td>First calendar day of the month following the appropriate canceled status transaction. (The earliest effective date that can be used for a 1C status transaction is 01/01/16)</td>
</tr>
</tbody>
</table>

2 Note: Prior to 09/01/2018, the only available COBRA code was 1C, which was intended to capture all offers of COBRA. Effective 09/01/2018, codes 1B, 1D, and 1E were implemented to provide accurate reporting of COBRA offers, and can be keyed with an effective date from 01/01/2016 – present.
<table>
<thead>
<tr>
<th>Status Order</th>
<th>Code</th>
<th>Scenario</th>
<th>Effective Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1D</td>
<td><strong>COBRA Benefits Offered to an Active Employee and their Spouse:</strong></td>
<td>First calendar day of the month following the appropriate canceled status transaction. (The earliest effective date that can be used for a 1D status transaction is 01/01/16)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>ACA Status Code 1D is used to indicate that COBRA coverage was offered to an active (not permanently separated) employee and their spouse (not dependents) whose health coverage was canceled due to a COBRA qualifying event⁴. The 1D ACA Status Code should be posted to ACAS after the appropriate transactions are posted to indicate the employee’s cancellation of health coverage (ACA Status Code 5A or 5C, if COBRA offer is applicable and loss of eligibility ACA Status Code 2A or 2B). Note: For information regarding COBRA rules, please refer to CalHR’s Benefits Administration Manual (BAM) - <a href="http://www.calhr.ca.gov/state-hr-professionals/Pages/benefits-administration-manual.aspx">http://www.calhr.ca.gov/state-hr-professionals/Pages/benefits-administration-manual.aspx</a></td>
<td></td>
</tr>
</tbody>
</table>

⁴ Note: Prior to 09/01/2018, the only available COBRA code was 1C, which was intended to capture all offers of COBRA. Effective 09/01/2018, codes 1B, 1D, and 1E were implemented to provide accurate reporting of COBRA offers, and can be keyed with an effective date from 01/01/2016 – present.
<table>
<thead>
<tr>
<th>Status Order</th>
<th>Code</th>
<th>Scenario</th>
<th>Effective Date</th>
</tr>
</thead>
</table>
|              | 1E   | COBRA Benefits Offered to an Active Employee, their Spouse and Dependent(s): ACA Status Code 1E is used to indicate that COBRA coverage was offered to an active (not permanently separated) employee, their spouse and dependent(s) whose health coverage was canceled due to a COBRA qualifying event. The 1E ACA Status Code should be posted to ACAS after the appropriate transactions are posted to indicate the employee’s cancellation of health coverage (ACA Status Code 5A or 5C, if COBRA offer is applicable and loss of eligibility ACA Status Code 2A or 2B).

Note: For information regarding COBRA rules, please refer to CalHR’s Benefits Administration Manual (BAM) - [http://www.calhr.ca.gov/state-hr-professionals/Pages/benefits-administration-manual.aspx](http://www.calhr.ca.gov/state-hr-professionals/Pages/benefits-administration-manual.aspx).

First calendar day of the month following the appropriate canceled status transaction. (The earliest effective date that can be used for a 1E status transaction is 01/01/16) |

| 3) | HEALTH BENEFITS ACCEPTED/DECLINED | 3A | Health Benefits Accepted (Timely): Employee accepts the offer of HB & returns his/her enrollment forms within 60 calendar days of the permitting event.

Note: 60 days begins with the effective date of the permitting event. |

First calendar day of the month following the date employee returns the HB forms to the Human Resource Office. |

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4 Note: Prior to 09/01/2018, the only available COBRA code was 1C, which was intended to capture all offers of COBRA. Effective 09/01/2018, codes 1B, 1D, and 1E were implemented to provide accurate reporting of COBRA offers, and can be keyed with an effective date from 01/01/2016 – present.
<table>
<thead>
<tr>
<th>Status Order</th>
<th>Code</th>
<th>Scenario</th>
<th>Effective Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>3B</td>
<td>Health Benefits Accepted (Late):</td>
<td>First calendar day of the month following the 90-day waiting period.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Late acceptance – Employee accepts the offer of HB, but does not return his/her enrollment forms within 60 calendar days of the permitting event. Employee must now serve a 90 calendar day HIPAA waiting period.</td>
<td>Note: 90 days begins on the date the employee submits their late enrollment form, accepting health benefits.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Note: 60 days begins with the effective date of the permitting event.</td>
<td>Note: See ACA Status Code 4B (Admin Decline) below that must be processed before the 3B transaction.</td>
</tr>
<tr>
<td></td>
<td>4A</td>
<td>Health Benefits Declined by Employee:</td>
<td>The earliest date that health coverage could be effective, as outlined in state’s health benefit eligibility rules.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Employee declines HB within 60 calendar days of the event that makes them eligible.</td>
<td>Note: The effective date of 1A and 4A will always be the same.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Note: Used only when employee actually returns his/her forms declining his/her benefits within 60 days of the permitting event.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4B</td>
<td>Health Benefits Administratively Declined:</td>
<td>The 61st calendar day after the event, that makes the employee HB eligible.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>The employee fails to return his/her enrollment forms within 60 calendar days of the permitting event. The Human Resource Office must key an Administrative Decline in ACAS.</td>
<td>Note: When an employee returns his/her enrollment forms late &amp; accepts HB, the employee’s ACAS record should be updated to reflect a 4B and 3B with appropriate effective dates.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Note: 60 days begins with the effective date of the permitting event.</td>
<td></td>
</tr>
<tr>
<td>Status Order</td>
<td>Code</td>
<td>Scenario</td>
<td>Effective Date</td>
</tr>
<tr>
<td>--------------</td>
<td>------</td>
<td>----------</td>
<td>----------------</td>
</tr>
<tr>
<td>4) HEALTH BENEFITS CANCELED/TEMPORARILY SUSPENDED</td>
<td>5A</td>
<td>Health Benefits Administratively Canceled: The employee’s HB were canceled due to loss of eligibility. Example: Employee’s tenure or time base is changed to one that is not eligible for HB, or a permanent intermittent employee worked an insufficient number of hours in a control period. (Note: The appropriate “loss of eligibility” status code (2A or 2B) should be keyed following ACA Status Code 5A. The “loss of eligibility” ACA Status Code (2A or 2B) should be followed by a COBRA offer).</td>
<td>The last calendar day of the month that the employee’s HB coverage was effective.</td>
</tr>
<tr>
<td></td>
<td>5B</td>
<td>Health Benefits Voluntarily Canceled: Employee Voluntarily Cancels his/her HB.</td>
<td>The last calendar day of the month that the employee’s HB coverage was effective.</td>
</tr>
<tr>
<td></td>
<td>5C</td>
<td>Health Benefits Temporarily Suspended: Temporary suspension of an employee’s HB when the employee is temporarily separated or placed on some type of unpaid status. Employee is offered Direct Pay to continue their HB while on leave or unpaid status.</td>
<td>The last calendar day of the month that the employee’s HB coverage was effective through a payroll deduction.</td>
</tr>
<tr>
<td>5) PERMANENTLY SEPARATED</td>
<td>6A</td>
<td>Employee No Longer Employed When an employee permanently separates from a position, ACA Status Code 6A will be entered into the employee’s corresponding position in ACAS.</td>
<td>The first calendar day of the month following the month of the employee’s separation.</td>
</tr>
</tbody>
</table>

Note: ACA Status Code 5D (Health Benefit Canceled) discontinued 11/20/2017
SPECIAL CONSIDERATIONS

Concurrent Employees

When an employee has more than one position sequence number, each employing department/campus must key a HB status code for each active position. The department/campus, which is not providing HB for the employee, must use an ACA Status Code of ineligible (2A) because the employee already has HB in another State of California position.

REPORTS

A number of compliance reports have been developed to help departments/campuses meet their ACA requirements. Each report identifies ACAS records that may have been missed or keyed incorrectly by a department/campus. The title of each report identifies the specific exception condition that requires the department/campus’ attention.

These compliance reports are created and published each month, after the close of business month. They are only generated for departments/campuses that have employees who meet the report’s criteria and they do not include employees who are on a leave of absence or temporary separation.

Departments/campuses should use these reports to research their employees’ ACAS records and enter missing ACAS data as indicated on the report, if they have not already updated that information.

For more information on the ACA Compliance Program, refer to the California Department of Human Resources (CalHR) Policy Statement #1402: Affordable Care Act at http://hrmanual.calhr.ca.gov/Home/ManualItem/1/1402

The following ACA Compliance Reports are published and accessible on ViewDirect. For information on accessing and printing ViewDirect information, refer to the ViewDirect User Manual at http://www.sco.ca.gov/Files-PPSD/viewdirect_user_manual.pdf.

<table>
<thead>
<tr>
<th>Report ID</th>
<th>Report Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>PDA2050B</td>
<td>(PPS) EE PERM SEP WITHOUT A 5D OR 6A STATUS CODE</td>
</tr>
<tr>
<td>PDA2050C</td>
<td>(PPS) EE WITHOUT ACA STATUS CODE</td>
</tr>
<tr>
<td>PDA2050D</td>
<td>(PPS) EE WITH 2D WITHOUT HEALTH BENEFIT OFFER</td>
</tr>
<tr>
<td>PDA2050E</td>
<td>(PPS) EE WITH HEALTH BENEFIT OFFER W/O ACCEPT OR DECLINE</td>
</tr>
<tr>
<td>PDA2050F</td>
<td>(PPS) EMPLOYEE WITHOUT APPROPRIATE ADDRESS</td>
</tr>
<tr>
<td>PDA2050H</td>
<td>(PPS) EMPLOYEE WITH ACTIVE COBRA CODE LONGER THAN 18 MONTHS</td>
</tr>
<tr>
<td>PDA2060A</td>
<td>(PPS) TEMP INTERMITTENT EE WITH CODE OTHER THAN 2A, 6A, OR COBRA</td>
</tr>
<tr>
<td>PDA2060B</td>
<td>(PPS) NON PI EMPLOYEE WITH AN ACA STATUS CODE OF 2B</td>
</tr>
<tr>
<td>PDA2065</td>
<td>(PPS) PI EE REFLECTED AS NOT ELIGIBLE</td>
</tr>
</tbody>
</table>

Note: Report PDA2050A, ((PPS) EE WITHOUT HEALTH COVERAGE NOTICE DATE) discontinued as of 01/01/2018
JOB AIDS

The following job aids exist to provide assistance and training regarding the ACAS database:

- **ACAS Database** – Employee Benefit Transaction Worksheet – [http://www.calhr.ca.gov/state-hr-professionals/Pages/ACA-Training-Tool-Kit.aspx](http://www.calhr.ca.gov/state-hr-professionals/Pages/ACA-Training-Tool-Kit.aspx)

- **ACAS Database Training Module** – [https://www.sco.ca.gov/ppsd_elearning.html](https://www.sco.ca.gov/ppsd_elearning.html)

- **ACA Training Tool Kit** – [http://www.calhr.ca.gov/state-hr-professionals/Pages/ACA-Training-Tool-Kit.aspx](http://www.calhr.ca.gov/state-hr-professionals/Pages/ACA-Training-Tool-Kit.aspx)

- **ACAS Emulator** – [https://eservices.calhr.ca.gov/aca/emulator.html](https://eservices.calhr.ca.gov/aca/emulator.html)

- **ACA Overview Video** – [http://www.calhr.ca.gov/state-hr-professionals/Pages/Affordable-Care-Act-Training.aspx](http://www.calhr.ca.gov/state-hr-professionals/Pages/Affordable-Care-Act-Training.aspx)

- **ACAS Job Aid** – [https://www.sco.ca.gov/FilesPPSD/ACAS_Scenario_Specific_Job_Aid.pdf](https://www.sco.ca.gov/FilesPPSD/ACAS_Scenario_Specific_Job_Aid.pdf)

- **Benefits Administration Manual (BAM)** – [http://www.calhr.ca.gov/state-hr-professionals/Pages/benefits-administration-manual.aspx](http://www.calhr.ca.gov/state-hr-professionals/Pages/benefits-administration-manual.aspx)
ACAS SUPPORT - CONTACT INFORMATION

How to Contact Appropriate ACAS Support Resources

Questions regarding ACAS can be directed to the SCO ACAS Online Support Group. However, questions specific to HB (plan info, cost, eligibility, enrollment, etc.) or policy (HB or ACA), should be directed to the appropriate resource. The following information provides guidance for contacting the appropriate ACA, Health Benefits or ACAS related resource.

<table>
<thead>
<tr>
<th>Who to Contact:</th>
<th>How to Contact:</th>
<th>Why Contact:</th>
</tr>
</thead>
<tbody>
<tr>
<td>SCO ACAS Online Application Support Group</td>
<td>916-322-3770</td>
<td>Civil Service ACAS Key Entry Support RE:</td>
</tr>
<tr>
<td></td>
<td>Or</td>
<td>• ACA (Health Benefit) Status Codes</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:ACASupport@sco.ca.gov">ACASupport@sco.ca.gov</a></td>
<td>• Health Coverage Notice (Notice of Exchange) Date</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Voiding an incorrect transaction</td>
</tr>
<tr>
<td></td>
<td></td>
<td>CSU &amp; Civil Service ACAS Inquiry Support for:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Navigating the Transaction History screen</td>
</tr>
<tr>
<td>SCO Customer Service Center</td>
<td>916-372-7200</td>
<td>Inquiries RE:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• A HB document submitted to SCO for processing</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Deduction information</td>
</tr>
<tr>
<td>CalHR</td>
<td><a href="http://www.calhr.ca.gov">www.calhr.ca.gov</a></td>
<td>General health benefit inquiries RE:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Eligibility</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Enrollment</td>
</tr>
<tr>
<td>CalHR</td>
<td><a href="mailto:aca.policy@calhr.ca.gov">aca.policy@calhr.ca.gov</a></td>
<td>Inquiries specific to:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• ACA policy</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• ACA compliance</td>
</tr>
<tr>
<td>SCO</td>
<td><a href="mailto:ACASupport@sco.ca.gov">ACASupport@sco.ca.gov</a></td>
<td>Inquiries specific to:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• ACA Database Training Module</td>
</tr>
</tbody>
</table>
What is the ACAS Online Application Support Group?

The ACA Online Application Support Group was established to assist departments/campuses with keying inquiries and technical assistance with ACAS. The support group is considered second level support while first level support exists in the department/campus via the use of the online ACAS Scenario Specific Job Aid.

In the event the user is unable to resolve an issue via the Scenario Guide, the support group will assist with:

- Navigating the ACAS User Guide
- Logging onto ACAS, via SCOPROD
- Key entering information specific to health benefit ACA Status Codes, including appropriate effective dates
- Key entering Health Coverage Notice Date information specific to an employee being given the “Notice of Health Benefit Exchange”
- Voiding an entry made in error
- Viewing Transaction History
- How to submit documentation should an out of sequence transaction/correction be necessary

When is the ACAS Online Application Support Group Available?

The ACAS Online Application Support Group is available between 8:30 am and 4:00 pm, Monday through Friday, with the exception of State holidays.

If a call is received and all support representatives are busy, the call will forward to voicemail.

If a request for assistance is made via messaging (voicemail or email), a support representative will reply within 24 hours, Monday through Friday, with the exception of State holidays.
APPENDIX A

ERROR MESSAGES

Main Menu Screen

1. ERROR MESSAGE: INVALID SSN ENTERED
   CONDITIONS:
   a. SSN entry not containing nine (9) numbers
   b. SSN field is left blank

2. ERROR MESSAGE: SSN NOT FOUND IN DATABASE
   CONDITION: SSN is invalid

3. ERROR MESSAGE: NOT AUTHORIZED USER
   CONDITION: User is not authorized to view the requested record

4. ERROR MESSAGE: SSN HAS BEEN CORRECTED TO 999-99-9999
   CONDITION: SSN has been changed

5. ERROR MESSAGE: EH OUT-OF-SERVICE, ACCESS IS AVAILABLE WHEN BACK IN SERVICE
   CONDITION: EH record is out-of-service

6. ERROR MESSAGE: INVALID CHARACTER KEYED, MUST ENTER “X”
   CONDITION: Any entry other than “X” next to the menu selection field

7. ERROR MESSAGE: ONE SELECTION MUST BE ENTERED
   CONDITION: Not entering a menu selection

8. ERROR MESSAGE: ONLY ONE MENU OPTION CAN BE SELECTED
   CONDITION: Entering more than one menu selection

Employee Position Numbers Screen

1. ERROR MESSAGE: INVALID POSITION SEQUENCE
   CONDITION: Position sequence number not found in the database

2. ERROR MESSAGE: NOT AUTHORIZED USER
   CONDITION: Unauthorized user entering a position sequence number for a specific department/campus

3. ERROR MESSAGE: ENTER A POSITION SEQUENCE
   CONDITION: Position sequence number field is blank
ACA Transaction Screen

Key ACA Transaction/Health Coverage Notice Date Error Messages

1. ERROR MESSAGE: INVALID EFFECTIVE DATE
   CONDITION: Effective date that is not a valid date
   *Note – Use date format: MM/DD/YYYY

2. ERROR MESSAGE: EFFECTIVE DATE CANNOT BE GREATER THAN TODAY’S DATE
   CONDITION: Effective date greater than the system date (today’s date)

3. ERROR MESSAGE: EFFECTIVE DATE CANNOT BE PRIOR TO 01/01/2015
   CONDITION: Effective date that occurs before 01/01/2015

4. ERROR MESSAGE: OUT OF SEQUENCE KEYING NOT ALLOWED
   CONDITION: Effective date that occurs before the last valid transaction date
   (See example and ACA Status Code Matrix below)
   * Note – Voided transactions are not valid

5. ERROR MESSAGE: INVALID ACA STATUS CODE
   CONDITION: ACA status code that does not exist
   *Note – Refer to the Status Codes section

6. ERROR MESSAGE: INVALID VOID INDICATOR, MUST ENTER “V” OR SPACE
   CONDITION: Void indicator not equal to a “V” or a blank

7. ERROR MESSAGE: ACA TRANSACTION ALREADY EXISTS
   CONDITIONS:
   a. Effective date and ACA status code matches a record in the database
   b. Effective date, ACA status code, and void indicator value matches a record in the database

8. ERROR MESSAGE: TRANSACTION YOU ARE VOIDING DOES NOT MATCH MOST RECENT TRANSACTION
   CONDITION: Effective date and ACA status code do not match the most recent valid transaction in the database

9. ERROR MESSAGE: HEALTH COVERAGE NOTICE DATE CANNOT BE GREATER THAN TODAY’S DATE
   CONDITION: Health coverage notice date greater than the system date (Today’s date)

10. ERROR MESSAGE: INVALID HEALTH COVERAGE NOTICE DATE
CONDITION: Health coverage notice date that is not a valid date
*Note – Use date format: MM/DD/YYYY

11. ERROR MESSAGE: THE FIRST TRANSACTION MUST BE A “DID NOT OFFER”

CONDITION: ACA status code is “Not Offered” (2A, 2B, 2D) and there is no transaction posted in the VIEW ACA TRANSACTION HISTORY screen.

Error Message #4 (Out of Sequence Keying) Example and ACA Status Code Matrix

ACAS displays warning/error messages when an ACA Status Code is keyed out of sequence. An example of a potential error is displayed in the screen below:

For Example: Since a 3A status code cannot be keyed following a 2A status code the ACAS error message will display.
Please use the following matrix when determining the proper sequence of ACA Status Codes to avoid an ACA Status Code transaction error messages.

<table>
<thead>
<tr>
<th>Subsequent Code</th>
<th>1A</th>
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<th>1D</th>
<th>1E</th>
<th>2A</th>
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<th>3A</th>
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<th>4A</th>
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<th>6A</th>
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</table>


To use the ACA Status Code Matrix:

1. Find the employee’s current ACA Status Code on the top row of the Matrix.
2. Locate the subsequent ACA Status Code on the left column of the Matrix.
3. Find where the row and column meet on the Matrix.
   a. If the subsequent ACA Status Code is allowable, the cell where they meet will be blank.
   b. If the subsequent ACA Status Code is not allowable, the cell where they meet will be greyed out.

Using the example from above, locate the 2A on the top row and the 3A on the left column. Where they meet, you get a greyed out box, indicating that a 3A cannot be keyed on top of a 2A, as it is considered out-of-sequence.

| Current Code | 1A | 1B | 1C | 1D | 1E | 2A | 2B | 2D | 3A | 3B | 4A | 4B | 5A | 5B | 5C | 6A | BLANK |
|--------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|     |
| 1A           |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| 1B           |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| 1C           |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| 1D           |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| 1E           |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| 2A           |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| 2B           |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| 2D           |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| 3A           |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| 3B           |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| 4A           |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| 4B           |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| 5A           |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| 5B           |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| 5C           |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| 6A           |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
APPENDIX B

ACA (HEALTH BENEFIT) STATUS CODE DESCRIPTIONS

Health Benefits Not Offered

- If the employee is not eligible for HB or
- If the employee is newly eligible for HB and must serve an Administrative Waiting Period before he/she can enroll in HB coverage, a “Health Benefits Not Offered” status is processed using the following code(s):

➤ 2A — Health Benefits Not Offered is used in one of four situations:

- **Health Benefits Not Offered (because the employee does not meet the HB eligibility criteria):** Enter the date that corresponds with the employee’s hire in a class/tenure/time base that does not meet the HB eligibility requirements. Appointments that are not eligible for HB include:
  - Temporary or Limited-Term Intermittent
  - Seasonal Clerk
  - Student Assistant
  - Retired Annuitant
  - Youth Aid
  - Temporary Appointment (TAU) Limited Term 6 months or less, or
  - Time Base is less than Halftime.

- **Health Benefits Not Offered (Previously HB eligible employee who is later appointed to a position that is not HB eligible):** This situation occurs when a previously HB eligible employee gets appointed to a position that is not HB eligible and was not enrolled in HB at the time of the HB ineligible appointment. The 2A effective date corresponds with the date of hire to the HB ineligible appointment.

- **Health Benefits Not Offered (Previously HB eligible employee who is later appointed to a position that is not HB eligible):** This situation occurs when a previously HB eligible employee gets appointed to a position that is not HB eligible and was enrolled in HB at the time of the HB ineligible appointment. The 2A effective date is first day of the month following the cancellation of HB due to the loss of eligibility.

- **Health Benefits Not Offered (the employee is in multiple positions and HB are being administered in another position):** If an employee is in multiple positions and is eligible for HB, all employing departments/campuses must decide which department/campus will administer HB from which single position. All other
positions must be updated with the 2A Status Code. Enter the date that corresponds with the employee's date of hire in the “2A” position.

➢ **2B — Health Benefits Not Offered (Permanent intermittent employees only),** is used in one of four situations:

1. **Health Benefits Not Offered (newly hired permanent intermittent employee):** because the employee must first work a qualifying number of hours during a control period to be eligible for HB. The 2B effective date corresponds with the date of hire to the permanent intermittent appointment.

2. **Health Benefits Not Offered (Permanent intermittent employee who loses HB eligibility by not working a qualifying number of hours in a control period):** this situation occurs when a permanent intermittent employee was previously HB eligible, and then worked a non-qualifying control period. The effective date corresponds with the first day of the month following the end of the 6-month eligibility period. Note: control periods run from January through June and from July through December.

   For example:
   - If an employee does not work a sufficient amount of hours during a January through June control period, the 2B effective date is August 1.
   - If an employee does not work a sufficient amount of hours during a July through December control period, the 2B effective date is February 1.

3. **Health Benefits Not Offered (previously HB eligible non-permanent intermittent employee who is later appointed to a permanent intermittent position):** This situation occurs when a previously HB eligible Full Time employee gets appointed to a permanent intermittent position and was not enrolled in HB at the time of the permanent intermittent appointment. The 2B effective date corresponds with the date of hire to the permanent intermittent appointment.

4. **Health Benefits Not Offered (previously HB eligible non-permanent intermittent employee who is later appointed to a permanent intermittent position):** This situation occurs when a previously HB eligible Full Time employee is appointed to a permanent intermittent position and was enrolled in HB at the time of the permanent intermittent appointment. The 2B effective date is the first day of the month following the cancellation of HB due to the loss of eligibility.

Note: When a permanent intermittent employee completes a control period, the employee’s ACA Status only changes if their HB eligibility is changed by the number of hours worked in that control period; i.e., if the employee was previously ineligible but is now eligible or the employee
was previously eligible and is now ineligible. If the employee’s HB eligibility remains the same upon completion of the control period, no ACA Status Code change is required.

- **2D — Health Benefits Not Offered (Newly HB eligible employee; the employee’s HB Administrative Waiting Period begins):** This code is used in one of two situations:

  o **Example #1:** An employee is newly hired to a position that is HB eligible. An Administrative Waiting Period exists from the date the employee becomes newly eligible until he/she is eligible to enroll in HB coverage. For employees appointed to a HB eligible tenure/time base, the department/campus must enter a “2D” transaction effective the date of hire. The 2D status remains in effect through the duration of the HB Administrative Waiting Period. (See ACA Status Code 1A for information about the timing of a HB offer, which is processed when the employee is eligible to enroll in HB coverage)

    Note: Employees who are newly hired to a HB eligible appointment, should always have a “2D” transaction documented from their appointment date to the earliest date the employee is eligible to enroll in HB coverage.

  o **Example #2:** A Permanent Intermittent employee becomes newly eligible for HB if he/she works a qualifying number of hours during a Control Period. For Permanent Intermittent employees who work a qualifying number of hours in a control period, the department/campus must process a “2D” transaction to indicate the Administrative Waiting Period that the employee must serve before he/she can enroll in HB coverage. The effective date of the 2D transaction is the first day of the month following the completed control period. Note: control periods run from January through June and from July through December.

    - If an employee works a qualifying number of hours during a January through June control period, the 2D effective date is July 1.
    - If an employee works a qualifying number of hours during a July through December control period, the 2D effective date is January 1.

    Note: When a permanent intermittent employee completes a control period, the employee’s ACA Status only changes if their HB eligibility is changed by the number of hours worked in that control period; i.e., if the employee was previously ineligible but is now eligible; or the employee was previously eligible and is now ineligible. If the employee’s HB eligibility remains the same upon completion of the control period, no ACA Status Code change is required.

**Health Benefits Offered**

Five “Health Benefits Offered” status codes exist for two unique situations:

- Code 1A for employees who are HB eligible and are offered HB coverage; and
• Codes, 1B, 1C, 1D and 1E for active (not permanently separated) employees whose health coverage was canceled due to loss of HB eligibility and are offered continuation of group coverage under the COBRA statute.

➢ 1A – Health Benefits Offered (to a newly eligible employee): Enter the earliest date the employee is eligible to enroll in HB coverage. This is the first calendar day of the month following the event that made the employee eligible to enroll in HB; it is also the first day of the month following the employee’s Administrative Waiting Period.

  - For a newly hired HB eligible employee, HB are offered on the first day of the month following the month in which the employee was hired. Example:
    - 03/10/XX - the HB eligible employee is hired.
    - 03/10/XX – ACA Status Code 2D – HB Not Offered & Administrative Waiting Period begins.
    - 03/31/XX – the Administrative Waiting Period ends.
    - 04/01/XX – ACA Status Code 1A - HB are offered.

  - For a permanent intermittent employee who worked a qualifying number of hours in a control period, HB are offered once the Administrative Waiting Period is completed:
    - 06/30/XX COB – Employee worked a qualifying number of hours in a control period.
    - 07/01/XX – ACA Status Code 2D – HB Not Offered & Administrative Waiting Period begins.
    - 07/31/XX – the Administrative Waiting Period ends.
    - 08/01/XX – ACA Status Code 1A – HB are offered.

➢ 1B – COBRA Health Benefits Offered (to an active employee only whose HB coverage was canceled due to loss of HB eligibility): Effective 01/01/16, the 1B Status Code is used to indicate that COBRA coverage was offered to an active (not permanently separated) employee only whose HB coverage was canceled due to loss of HB eligibility. The 1B Code should be posted to ACAS after the appropriate transactions are posted to indicate the employee’s cancellation of health coverage (ACA Status Code 5A, or 5C if COBRA offer is applicable and loss of eligibility for state-sponsored health coverage ACA Status Codes 2A or 2B.)

➢ 1C – COBRA Health Benefits Offered (to an active employee only whose HB coverage was canceled due to loss of HB eligibility): Effective 01/01/16, the 1C Status Code is used to indicate that COBRA coverage was offered to an active (not permanently separated) employee and dependent(s) (not spouse) whose HB coverage was canceled due to loss of HB eligibility. The 1C Code should be posted to ACAS after the appropriate transactions are posted to indicate the employee and dependent’s cancellation of health coverage (ACA Status Code 5A, or 5C if COBRA offer is applicable and loss of eligibility for state-sponsored health coverage ACA Status Codes 2A or 2B.)
1D – COBRA Health Benefits Offered (to an active employee only whose HB coverage was canceled due to loss of HB eligibility): Effective 01/01/16, the 1D Status Code is used to indicate that COBRA coverage was offered to an active (not permanently separated) employee and spouse (not dependents) whose HB coverage was canceled due to loss of HB eligibility. The 1D Code should be posted to ACAS after the appropriate transactions are posted to indicate the employee’s cancellation of health coverage (ACA Status Code 5A, or 5C if COBRA offer is applicable and loss of eligibility for state-sponsored health coverage ACA Status Codes 2A or 2B.)

1E – COBRA Health Benefits Offered (to an active employee only whose HB coverage was canceled due to loss of HB eligibility): Effective 01/01/16, the 1E Status Code is used to indicate that COBRA coverage was offered to an active (not permanently separated) employee, spouse and dependent(s) whose HB coverage was canceled due to loss of HB eligibility. The 1E Code should be posted to ACAS after the appropriate transactions are posted to indicate the employee’s cancellation of health coverage (ACA Status Code 5A, or 5C if COBRA offer is applicable and loss of eligibility for state-sponsored health coverage ACA Status Codes 2A or 2B.)

Note: For information regarding COBRA rules, please refer to CalHR’s Benefits Administration Manual (BAM) - http://www.calhr.ca.gov/state-hr-professionals/Pages/benefits-administration-manual.aspx

Note: Prior to 09/01/2018, the only available COBRA code was 1C, which was intended to capture all offers of COBRA. Effective 09/01/2018, codes 1B, 1D, and 1E were implemented to provide accurate reporting of COBRA offers, and can be keyed with an effective date from 01/01/2016 – present.
**Health Benefits Accepted**
If the employee accepts the offer of health coverage, the accepted status is processed using one of the following code(s):

- **3A — Health Benefits Accepted (timely):** This code is used when an employee returns their enrollment forms within 60 days of the permitting event date, (e.g., date of new HB eligible hire or completion of the qualifying number of hours in a control period for permanent intermittent employees, open enrollment). This code is also used to reinstate coverage following a temporary suspension of HB – refer to “5C.” Enter the date the employee’s HB coverage is effective. This should be the first calendar day of the month following the day/month that the employee submitted their enrollment forms.

- **3B — Health Benefits Accepted (late) – Employee must serve a 90-day HIPAA waiting period.** This code is used when the employee submits their enrollment forms later than 60 days after the permitting event date (e.g., date of new HB eligible hire or completion of the qualifying number of hours in a control period for permanent intermittent employee, open enrollment). When enrollment forms are not received within the 60 days, the employee must serve a 90 day HIPAA waiting period before HB coverage can begin. Enter the date the employee’s HB coverage is effective, which is the first of the month following the 90-day HIPAA waiting period.

**Health Benefits Declined**
HB offers are declined in one of two ways, using one of the following codes:

- **4A — Health Benefits Declined (timely):** This code is used when the employee submits their enrollment forms in a timely manner (within 60 days of the permitting event) and declines HB coverage. The effective date is the earliest date the employee is eligible to enroll in HB coverage.

  Note: the effective date of the “4A” transaction will always be equal to the date of the “1A” transaction.

- **4B — Health Benefits Administratively Declined (the employee did not return HB documents in a timely manner):** If the employee does not return their enrollment forms within 60 days of the permitting event, the department/campus must process an administrative decline transaction. The effective date is the 61st calendar day following the event that qualified the employee for HB.
Health Benefits Canceled or Temporarily Suspended
HB are canceled or suspended for a variety of reasons using one of the following codes:

- **5A — Health Benefits Administratively Canceled (due to loss of eligibility):** The effective date is the last calendar day of the month in which the employee is covered by HB.

  (Note: The appropriate “loss of eligibility” status code (2A or 2B) should be keyed following ACA Status Code 5A. The “loss of eligibility” ACA Status Code (2A or 2B) should be followed by a COBRA offer).

- **5B — Health Benefits Voluntarily Canceled (by the employee):** The effective date is the last calendar day of the month in which the employee is covered by HB.

- **5C — Health Benefits Temporarily Suspended (due to unpaid temporary separation or some other unpaid status):** The effective date is the last calendar day of the month in which the employee is covered by HB through a payroll deduction. Refer to “3A” to reinstate coverage following a temporary suspension of HB. (e.g., employee was offered Direct Pay to continue their HB coverage while on leave or unpaid status).

**Note:** 5D — Health Benefits Canceled (due to permanent separation, disability retirement, service retirement, voluntary resignation, involuntary resignation or lay-off) was discontinued effective 11/20/2017. When in use, the effective date is the last calendar day of the month in which the employee is covered by HB.

**Permanent Separation** — When an employee permanently separates, regardless of their HB status, use the following code:

- **6A — Employee Permanently Separated (employee is no longer employed):** The effective date is the first calendar day of the month following the month of the employee’s separation.