

# Affordable Care Act (ACA) Guide 2025

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|                                                |          |
|------------------------------------------------|----------|
| Introduction                                   | 3        |
| <b>ACA Definitions</b>                         | <b>3</b> |
| Employee Classifications                       | 4        |
| Administrative Status                          | 4        |
| ACA Classification                             | 4        |
| Time Periods                                   | 4        |
| Measurement Period                             | 4        |
| Stability Period                               | 4        |
| Administrative Period                          | 5        |
| Examples                                       | 5        |
| Breaks in Service                              | 5        |
| Examples                                       | 6        |
| Eligibility Status                             | 6        |
| Special Consideration                          | 6        |
| Plan Definitions                               | 6        |
| <b>Preparing for ACA</b>                       | <b>7</b> |
| Designating a Measurement/Stability Period     | 7        |
| <b>Adapt's ACA Functionality</b>               | <b>8</b> |
| Initial Administration Setup                   | 8        |
| Healthcare Act (Corporation) Setup             | 8        |
| Combined Corporation Setup                     | 12       |
| Manage List Setup                              | 12       |
| PayBill Code Setup                             | 13       |
| Setting ACA Security                           | 14       |
| The Initial Look Back Process                  | 14       |
| The Initial Results                            | 14       |
| Checking the Employee Record                   | 14       |
| Checking the ACA Participation Widget          | 17       |
| Checking the ACA Eligibility & Activity Report | 20       |
| Initial Healthcare Activities                  | 21       |
| Healthcare Exchange Notification               | 22       |
| Healthcare Offer                               | 22       |
| Healthcare No Offer                            | 22       |
| Healthcare Accept                              | 22       |
| Healthcare Decline                             | 23       |

|                                                                 |           |
|-----------------------------------------------------------------|-----------|
| Healthcare Cancellation                                         | 23        |
| Ongoing Steps                                                   | 23        |
| Proofing and Posting Timecards                                  | 24        |
| Run the Update Process                                          | 25        |
| Run the ACA Eligibility & Activity Report                       | 26        |
| Change ACA Classification                                       | 26        |
| Perform Other Actions                                           | 27        |
| Notify Eligible Employees                                       | 27        |
| Add Healthcare Activities                                       | 27        |
| Set Up Employee Deductions                                      | 28        |
| <b>Cost Recapture</b>                                           | <b>28</b> |
| Fee Concepts                                                    | 28        |
| Fee Levels                                                      | 28        |
| Overriding and Reverting                                        | 28        |
| An Example in 4 Parts                                           | 29        |
| Setting Up Fee Applicable PayBill Codes                         | 30        |
| Setting Up PayBill Fee Codes                                    | 31        |
| Assigning Corporation-Wide Fee Codes to the Corporation Record  | 32        |
| Adding a Fee                                                    | 32        |
| Editing a Fee                                                   | 33        |
| Deleting a Fee                                                  | 33        |
| Adding, Overriding and Reverting Codes at Other Levels          | 33        |
| The Client Record                                               | 33        |
| The Job Order Record                                            | 35        |
| The Assignment Record                                           | 37        |
| A Final Note about Client, Job Order and Assignment Association | 39        |
| Posting Timecards                                               | 39        |
| <b>Year-End Reporting</b>                                       | <b>39</b> |
| Preparing for Year-End Reporting                                | 40        |
| Running the ACA Update                                          | 40        |
| Creating an ACA Export File                                     | 41        |
| Editing the 1095-C Spreadsheet                                  | 42        |
| Completing the Employees Worksheet                              | 42        |
| Determining Safe Harbor Codes                                   | 45        |
| Completing the CoveredIndividuals Worksheet                     | 47        |
| Completing the Aggregated ALE Group Members Worksheet           | 48        |
| Completing the Total Employee Group Worksheet                   | 49        |
| Completing the Full-Time Employee Count Worksheet               | 49        |
| Editing the 1095-B Spreadsheet                                  | 49        |
| Completing the 1095 B Forms Worksheet                           | 49        |
| Completing the Covered Individuals Worksheet                    | 51        |
| Submitting the ACA Spreadsheet to Greenshades                   | 52        |

## Introduction

The Affordable Care Act (ACA), officially called The Patient Protection and Affordable Care Act (PPACA), is a US law that reforms both the healthcare and health insurance industries in America. The Employer Shared Responsibility Act, or 4980H is the most relevant aspect of the ACA for staffing Companies.

Since the ACA has produced challenges specific to the staffing industry, this Guide is designed to assist you in meeting the requirements of the ACA and particularly, 4980H. It is divided into six parts:

- Part 1 defines terms that will be used throughout this guide.
- Part 2 details preparatory actions that should be taken prior to inputting data into your software.
- Part 3 provides specific step-by-step instructions for using Bullhorn's software to support ACA regulations.
- Part 4 provides instructions for recapturing the costs encountered while complying with the requirements of the ACA.
- Part 5 provides detailed instructions for year-end ACA reporting.
- Part 6 looks at some upcoming next phase of ACA functionality.

**NOTE:** The functionality in the Bullhorn product suite to support ACA is designed to assist with complying with applicable laws and governmental regulations, but clients using the Bullhorn software are responsible for (1) compliance with all laws, governmental regulations and requirements affecting its business and, (2) any use that client may make of the Bullhorn product (including reports in connection therewith) to assist in complying with such laws, governmental regulations and requirements. Clients should review records and reports for validity and accuracy and not rely solely on their use of the Bullhorn product in complying with any laws or governmental regulations.

## ACA Definitions

Before looking at some of the specific features of your software, it is important to define some of the terms used by the ACA. These are divided into the following:

- Employee Classifications
- Time Periods
- Breaks in Service
- Eligibility Status
- Plan Definitions

# Employee Classifications

There are two sets of classifications that help determine an employee's eligibility status.

- Administrative Status
- ACA Classification

## Administrative Status

- **New** employee is someone that has not been employed for a full measurement period OR has had a break-in-service during the measurement period.
- **Existing (Ongoing)** employee is someone that has been employed for a complete measurement period AND has not had a break-in service during the most recent measurement period.

## ACA Classification

- **Non-Variable** employee is someone you have reasonably determined will work at least an average of 30 hours a week for at least one measurement period and therefore, is eligible for health insurance.
- **Variable** employee is someone who may or may not be eligible based on the number of hours worked during the last measurement period.
- **Part-Time** employee is someone that you have reasonably determined will work less than an average of 30 hours per week.
- **Seasonal** employee is someone in a position for which the customary annual employment is six months or less. Employers are permitted to use the same measurement period rules to determine the full-time status of seasonal employees.

# Time Periods

There are three time periods used to determine the eligibility status of an Employee.

- Measurement Period
- Stability Period
- Administrative Period

## Measurement Period

Also called a 'look-back' period, this is a 3-12-month period of time used to calculate the employee's work hours and to determine healthcare insurance eligibility. You can choose both the duration and start month of the measurement period. However, the measurement period must be uniform for all employees in the same category.

## Stability Period

This is the period of time in which an employee is classified as either eligible or not eligible based on average hours of service during the measurement period AND/OR ACA Classification. For eligible employees, the stability period must be the same length as the measurement period (or longer) but no less than six months. For non-eligible employees, the stability period must be the same duration

as the measurement period (or shorter). The stability period must begin immediately after the end of the measurement period AND any optional administrative period (see below).

It is important to remember that a change in employment status (other than termination) during the stability period has no effect on the employee's eligibility status during that stability period. For example, if Employee A averages 40 hours a week during the measurement period and then reduces hours to 20 a week during the stability period, Employee A is still considered an eligible employee until the next stability period. This is also true if the opposite occurs. If Employee B averages 20 hours a week during the measurement period and then increases hours to 40 a week during the stability period, Employee B is still considered ineligible until the next stability period.

### Administrative Period

Optional period between the end of the measurement period and the beginning of the stability period in which an employer calculates hours, notifies employees of their eligibility status, enrolls/disenrolls employees and performs other administrative tasks. This can be no more than 90 days. Typically, the Administrative Period overlaps the end of the Stability Period to prevent gaps in coverage.

### Examples

Example 1: 12-month measurement period. 90-day administrative period. Insurance coverage continues from January 1 to December 31 each year.

- First Measurement Period = 10/1/13 to 9/30/14.
- First Administrative Period = 10/1/14 to 12/30/14.
- First Stability Period = 1/1/15 to 12/31/15.

Example 2: 6-month measurement period. 30-day administrative period.

- First Measurement Period: 6/1/14 to 11/30/14.
- First Administrative Period: 12/1/14 to 12/30/14.
- First Stability Period: 1/1/15 to 6/30/15.

## Breaks in Service

A Break in Service describes a period during which an employee is not credited with any hours of service. Keep in mind that Paid Time Off (PTO) is considered hours of service. Therefore, an employee who works for 6 weeks and then takes 2 weeks of paid time off has no break in service during that 8 week period.

There are two types of Breaks in Service applicable to the ACA:

- **Standard Break in Service:** A standard break in service must last at least 13 consecutive weeks.
- **Rule of Parity:** A Rule of Parity break in service must last at least 4 weeks and be greater than the number of consecutive weeks worked in the most recent period of employment.

In each case, if the break in service applies, the employee may be treated as a new hire (complete with new measurement period) upon return to work.

### Examples

- Existing (Ongoing) Employee A works for 2 consecutive weeks at 40 hours a week, but then is not employed for 3 weeks. After the 3 weeks, Employee A is put on a new assignment. In this case, the 3 weeks is lower than the 13 week standard break in service and less than the Rule of Parity weeks. Employee A is still considered an Existing (Ongoing) employee.
- Existing (Ongoing) Employee B works for 2 consecutive weeks at 40 hours a week, but then is not employed for 15 consecutive weeks. After the 15 weeks, Employee B is put on a new assignment. In this case, the 15 weeks is longer than the standard Break In Service. Employee B is considered a New employee.
- Existing (Ongoing) Employee C works for 6 consecutive weeks at 40 hours a week, but then is not employed for 4 weeks. After the 4 weeks, Employee C is put on a new assignment. Despite the fact that the 4 weeks meets the Rule of Parity criteria, the length of employment prior to the Rule of Parity break is longer. Employee C is still considered an Existing (Ongoing) employee.
- Existing (Ongoing) Employee D works for 2 consecutive weeks at 40 hours a week, but then is not employed for 4 weeks. After the 4 weeks, Employee D is put on a new assignment. Since the 4 weeks not worked is greater than the number of consecutive weeks worked before the break, the Rule of Parity applies. Employee D is considered a New employee.

## Eligibility Status

- **Eligible** employee is someone that has either worked an average of at least 30 hours a week during the measurement period OR has been classified as Non-Variable. This type of employee must be offered reasonable health insurance or penalties may apply.
- **Ineligible** employee is someone that has worked less than an average of 30 hours a week during the measurement period AND has not been classified as Non-Variable. You may offer or not offer this type of employee reasonable health insurance.

NOTE: Instead of checking the hours per week during a measurement period, the law also allows you to check whether the employee worked 130 hours during a calendar month. However, this may not be practical as it requires that variable employees be offered health insurance on a month-by-month basis.

NOTE: Keep in mind that paid time off (PTO) must be added to work hours to calculate whether an employee is eligible. For example, Employee A works 1500 hours during a 12 month measurement period and takes 60 hours of PTO. This calculates to 1560 hours worked divided by 52 weeks...or 30 hours a week. Employee A is eligible. However, if the 60 hours was unpaid time off, then the calculation is 1500 hours divided by 52...or 28.8 hours a week. In this case, Employee A is not eligible.

## Special Consideration

The ACA has special rules for unpaid, protected leave (e.g. family leave, military service, jury duty)...as well as seasonal employees. Handling these special circumstances is explained later in the document.

## Plan Definitions

The following definitions are used when describing health coverage plans:

- **Minimum Essential Coverage (MEC):** Basic health insurance that meets ACA standards. Large Employers must offer MEC to a percentage of their full-time employees. It may be a government sponsored plan (e.g. Medicaid), an employer-sponsored plan or an individual plan. If the plan does not meet MEC criteria, the A penalty of \$2000 per year for all eligible, full-time employees will be assessed.
- **Minimum Value:** A plan that pays at least 60% of the total allowed costs. If the plan does not meet the minimum value criteria, the B penalty of \$3000 per year will be assessed on a monthly basis for each employee that receives a federal subsidy.
- **Affordable:** Is your plan affordable? There are three safe harbors to ensure plans meet with the affordability requirement under the Employer's Shared Responsibility provisions in the ACA: the 9.5% Safe Harbor, the Rate of Pay Safe Harbor and the Federal Poverty Level Safe Harbor. If the plan is not deemed affordable, the B penalty of \$3000 per year will be assessed on a monthly basis for each employee that receives a federal subsidy.

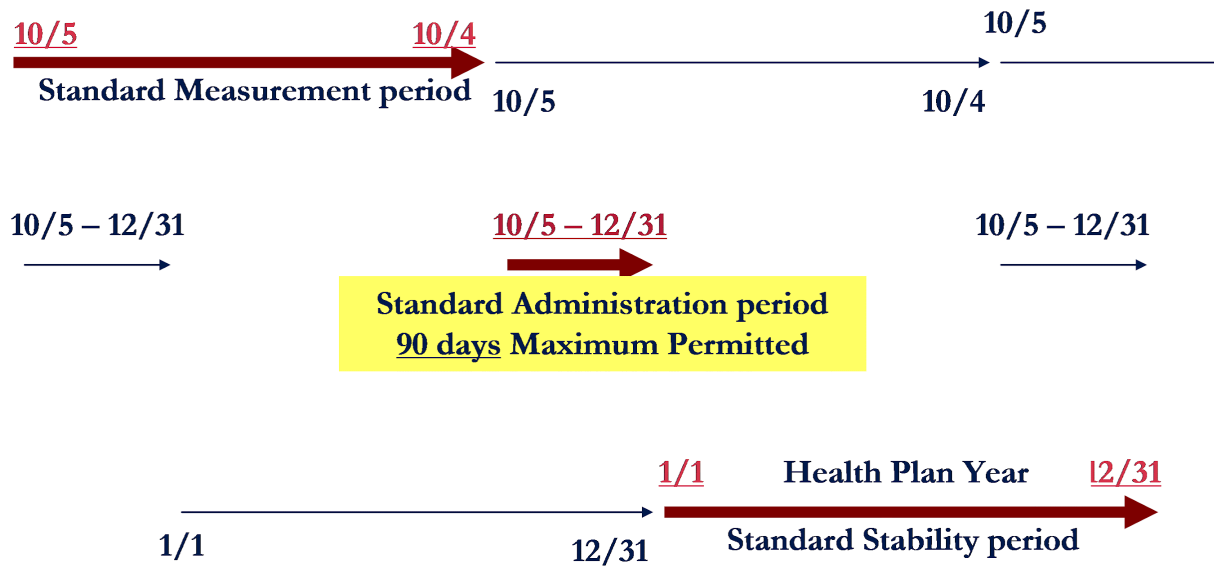
## Preparing for ACA

### Designating a Measurement/Stability Period

The following steps should allow you to determine a measurement and stability period for your staffing service:

- **Step 1: Choose a Measurement Period Length:** A 12-month measurement period typically requires less administrative overhead. It also allows more opportunity to reduce work hours toward the end of the measurement period if average weekly hours are too high. However, keep in mind that a 12 month measurement period requires a 12 month stability period. If you would rather minimize the time period in which employees are offered health insurance, you can select either a 3, 6 or 9 month measurement period.
- **Step 2: Choose a Stability Period:** Typically, your stability period will line up with your health insurance plan year.
- **Step 3: Determine Length of Administrative Period:** Most of you will select an administrative period of anywhere from 30 to 60 days...although you may go as high as 90 days. This period will typically coincide with your open enrollment period. However, keep in mind that the Administrative period is measured in days...not months. A 90 day administrative period does not equal 3 months (for example, October 1 to December 31 has 92 days).
- **Step 4: Calculate the Look Back Measurement Period.** This will follow from the choices made in the first three steps.
  - Example 1: 12 Month Measurement Period. 30 day Administrative Period. Insurance Plan Year runs from 7/1 to 6/30.
    - Measurement Period: 6/1/14 – 5/31/15
    - Administrative Period: 6/1/15 – 6/30/15
    - Stability Period: 7/1/15 – 6/30/16
  - Example 2: 6 Month Measurement Period. 30 day Administrative Period. Insurance Plan Year runs from 7/1 to 6/30.
    - Measurement Period: 12/1/14 – 5/30/15
    - Administrative Period: 6/1/15 – 6/30/15
    - Stability Period: 7/1/15 – 12/31/15
  - Example 3: 12 Month Measurement Period. 90 day Administrative Period. Insurance Plan Year runs from 1/1 to 12/31 (see graphic\* below).
    - Measurement Period: 10/5/13 – 10/4/14
    - Administrative Period: 10/5/14 – 12/31/14

Stability Period: 1/1/15 – 12/31/15



\* (from HBInsights, IRS Safe Harbors – Determining Full-Time Employees for Employer Pay or Play, April 3, 2013)

## Adapt's ACA Functionality

Adapt's ACA functionality allows you to define your healthcare act parameters, check eligibility, track healthcare activities and run reports for healthcare act reporting purposes. This section is divided as:

- Initial Administration Setup
- Initial Look Back Process
- Initial Results
- Initial Healthcare Activities
- Ongoing Steps

### Initial Administration Setup

The initial setup allows you to indicate your measurement, administrative and stability periods for each Corporation, as well as other rules. It also provides an opportunity for you to indicate which PayBill codes are ACA applicable. Finally, it allows you to set up ACA Security.

### Healthcare Act (Corporation) Setup

General information about your ACA options are entered via the Manage Healthcare Act option (Administration > Administration > Manage Healthcare Act). You should set up at least one healthcare maintenance record for each corporation from which you pay employees. You may set up more than one record per corporation (e.g. covering different years), but only one record can be active per corporation.

Due to the evolving nature of the ACA, most of the fields on the Healthcare Act Information page are editable. However, Bullhorn strongly recommends using the defaults associated with the Measurement Period length unless there is a specific change in the law.

To add a Healthcare Act Information record (if you are editing an existing record instead, skip to step 6):

1. Hover over the Administration menu option and then select **Administration**.
2. On the Administration page, select **Manage Healthcare Act**.
3. On the Manage Healthcare Act page, click the **Add** button.
4. The following screen displays. Enter the Calendar Year for which you are entering Healthcare information. In the Period Begin and Period End fields, enter the start and finish dates of the measurement period. The Description determines how the record is referred to by other areas of Adapt. Finally, select the Corporation using the drop list. When you are satisfied, click **Confirm**.

#### Healthcare Act Information

|                                                                              |                              |
|------------------------------------------------------------------------------|------------------------------|
| Calendar Year                                                                | <input type="text"/>         |
| Period Begin                                                                 | <input type="text"/> ◀ ⌚ ▶ 📅 |
| Period End                                                                   | <input type="text"/> ◀ ⌚ ▶ 📅 |
| Description                                                                  | <input type="text"/>         |
| Corporation                                                                  | --Select-- ▼                 |
| <input type="button" value="Confirm"/> <input type="button" value="Cancel"/> |                              |

5. If you have another healthcare record set up for the corporation, a message displays reminding you that only one record can be active for a corporation at any time. Click **OK** to add the record as an inactive healthcare record. The record is added to the Manage Healthcare Act grid.
6. Click on the **Description** link to open the Healthcare Act record.
7. The following window displays. Click the **Edit** button to change the information on the screen. When you are satisfied with your changes, click **Save**.

#### Healthcare Act Information

|                                                                           |                                     |
|---------------------------------------------------------------------------|-------------------------------------|
| <input type="button" value="Save"/> <input type="button" value="Cancel"/> |                                     |
| Active                                                                    | <input checked="" type="checkbox"/> |
| Corporation                                                               | Sandy Corp ▼                        |
| Description                                                               | San-HCA                             |
| Measurement Period Begin                                                  | <input type="text"/> ◀ ⌚ ▶ 📅        |
| Measurement Period End                                                    | <input type="text"/> ◀ ⌚ ▶ 📅        |
| Calendar Year                                                             | 2018                                |
| Measurement Period                                                        | 3 months 📄                          |
| Measurement Hours                                                         | 390                                 |
| Administrative Period New                                                 | 30 Day(s)                           |
| Administrative Period Ongoing                                             | 90 Day(s)                           |
| Stability Period                                                          | 6 months                            |
| ACA Strategy                                                              | Play 📄                              |
| Warning Threshold                                                         | 1400                                |
| Long Term Assignment Threshold                                            | 6 Month(s)                          |
| Default ACA Classification                                                | Variable 📄                          |
| Break in Service                                                          | 13 Week(s)                          |
| Rule of Parity                                                            | 4 Week(s)                           |
| Baseline Date                                                             | Actual 📄                            |
| Based Upon Date                                                           | Work week ending 📄                  |
| Lowest Cost Employee Premium Share                                        | <input type="text"/>                |
| Last Updated                                                              |                                     |

| Field                     | Description                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|---------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Active                    | Checking this box will make the record active. Only one record can be active per corporation. However, you can add records for future years and keep them inactive until needed.                                                                                                                                                                                                                                                             |
| Corporation               | The Corporation associated with this Healthcare Act record. The field defaults from the Corporation selected in step 4, but can be edited here.                                                                                                                                                                                                                                                                                              |
| Description               | Brief description of this healthcare record. It should be specific enough to differentiate it from other healthcare records. For example: Big State – Year 2025.                                                                                                                                                                                                                                                                             |
| Measurement Period Begin  | <p>This is the date that the look back period for this healthcare record begins. For example, if you wanted a 90 day administrative period and a 12 month measurement period, you could use the calendar control to select 10/5/2025.</p> <p>NOTE: This is the corporate measurement period. Individual employee measurement periods can be different based on Administrative Status.</p>                                                    |
| Measurement Period End    | <p>This is the date that the look back period for this healthcare record ends. For example, if you have a 12 month measurement period and the Begin date is 10/5/2025, then the End date would be 10/4/2026.</p> <p>NOTE: This is the corporate measurement period. Individual employee measurement periods can be different based on Administrative Status.</p>                                                                             |
| Calendar Year             | This is the calendar year for which this healthcare act information record applies. For example, if this record determines Administrative Status for January 2025, then use "2025". This is a helpful way to track the record, but does not impact the measurement period calculation. However, it may be used in future government reporting. NOTE: You may only have one healthcare record for each corporation/calendar year combination. |
| Measurement Period        | The Measurement Period is the amount of time you will "look back" to determine whether the employee is eligible for healthcare. Use the Code Selection icon to select either a 3, 6, 9 or 12 month measurement period. The default is 12 months.                                                                                                                                                                                             |
| Measurement Hours         | This field automatically defaults to 130 times the number of months in the measurement period, but can be changed. The default represents the 30 hour/week mark. Any Variable employee who has worked equal to or more than the number of hours listed in this field during the measurement period, will be calculated as Eligible for Health Insurance.                                                                                     |
| Administrative Period New | This Administrative Period represents the number of days the staffing service has to calculate eligibility, offer/remove health insurance and complete other administrative tasks. This field applies to Employees with an Administrative status of New AND an                                                                                                                                                                               |

|                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|--------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                | ACA Classification of Variable, Part Time or Seasonal. The default is 30.                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Administrative Period Ongoing  | This Administrative Period represents the number of days the staffing service has to calculate eligibility, offer/remove health insurance and complete other administrative tasks. This field applies to employees with an Administrative Status of Existing (Ongoing) OR that have an Administrative Status of New AND an ACA Classification of Non-Variable. The default is 90.                                                                                                                           |
| Stability Period               | This is the number of months following the Measurement and Administrative periods that the employee healthcare status cannot change. If an employee is deemed eligible (or not eligible) for healthcare, they remain eligible (or not eligible) for healthcare until the next stability period. The Stability Period is set to the same number of months as the Measurement Period, except for 3 month Measurement Periods wherein the Stability Period defaults to 6 months. This field cannot be changed. |
| ACA Strategy                   | Indicates whether your staffing service will Pay, Play or do Both for the calendar year and corporation. NOTE: Even if you plan to Pay, you should still follow the rest of the set-up steps in this document.                                                                                                                                                                                                                                                                                              |
| Warning Threshold              | This field defaults to 1400 and is used by the ACA Approaching Eligibility Report to remind you of employees approaching insurance eligibility. NOTE: 1400 is applicable for a 12 month measurement period. You may edit the field as needed for other Measurement Periods.                                                                                                                                                                                                                                 |
| Long Term Assignment Threshold | In addition to working an average of 30+ hours per week during the Measurement Period, an employee can also be designated as eligible for health insurance if the assignment they are on is considered "long term". This field indicates how many months the assignment must last to be designated as "long term". It defaults to 6 months but can be edited. NOTE: Adapt does not currently use this information to calculate eligibility. However, Bullhorn recommends retaining the default information. |
| Default ACA Classification     | Whenever new employees are created for a branch associated with this corporation, this is the initial classification to which the employee will default. You can change the classification on individual employees, if needed. This field defaults to Variable, but can be changed to Non-Variable, Part Time or Seasonal.                                                                                                                                                                                  |
| Break In Service               | If an employee does not work (nor earn paid time off) for the number of weeks listed here (or more) then the employee can be considered a New employee for the purposes of eligibility calculations when they are next sent on assignment. This defaults to 13, but can be changed if the law changes.                                                                                                                                                                                                      |
| Rule of Parity                 | If an employee does not work (nor earn paid time off) for the number of weeks listed here (or more) then the number of weeks off is compared to the consecutive number of weeks worked on the previous assignment. If the non-working weeks are equal to or greater than the weeks worked, the rule of parity applies and the                                                                                                                                                                               |

|                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                    | employee can be considered a New employee for the purposes of eligibility calculations when they are next sent on assignment. This defaults to 4, but can be changed if the law changes.                                                                                                                                                                                                                                                                                |
| Baseline Date                      | This field is used with the Based Upon Date field to determine when a specific employee's initial Measurement Period begins. It indicates whether, once the Based Upon Date is determined, the Measurement Period starts on that date (Actual Date) or on the first date of the following month (First of the Month following). The default is Actual Date. Note: No matter which is selected, the Stability Period start date always begins on the first of the month. |
| Based Upon Date                    | This field is used with the Baseline Date field to determine an employee's ACA Hire Date. It indicates whether the Hire/Rehire date is based upon the Work Week Ending Date of the timecard or the Assignment Start Date. The default is Work Week Ending.                                                                                                                                                                                                              |
| Lowest Cost Employee Premium Share | Stores the Employee Share of Lowest Cost Premium for Self Only Minimum Value Coverage. This is used by the ACA Data Export to populate Line 15 on the 1095-C. On the Export spreadsheet, it shows up in the EmployeeShareJan – EmployeeShareDec columns if the Offer Code for the month is 1B, 1C, 1D, 1E, 1J or 1K.                                                                                                                                                    |
| Last Updated                       | Indicates the most recent time an Update Employee ACA Details process was run for this Healthcare record.                                                                                                                                                                                                                                                                                                                                                               |

## Combined Corporation Setup

If you are combining multiple corporations when reporting ACA information (due to Common Ownership requirements), you can identify the "master" corporation via Manage Healthcare Act. The "master" Corporation is the corporation into which all other corporation data is combined. If you are not combining corporations, skip to the Manage List Setup section.

To set the "master" corporation:

1. Access **Administration > Administration > Manage Healthcare Act**.
2. Select **ACA Combined Corporation** from the right-side menu.
3. The ACA Combined Corporation window displays.
4. Use the drop list to select the "master" Corporation.
5. Click **Confirm**.

## Manage List Setup

The Manage Lists area has five lists used with related Healthcare Activities. To access a list, go to Administration > Administration > Manage Lists and then select the list in the *Select List for Maintenance* area.

The Lists you can edit are:

- **Healthcare Cancellation Reason:** Used to indicate why insurance was cancelled when using the Healthcare Cancellation workflow. In order to properly determine Safe Harbor codes during the ACA Export process, at least one code must indicate a cancellation resulting from employee termination. To do this, make sure at least one code has the character string "(Terminated)" (without the quotation marks) in the Code Description. This code should be used whenever performing a Healthcare Cancellation that is due to an employee being terminated.

- **Healthcare Decline Reason:** Used to indicate why insurance was declined when using the Healthcare Decline workflow.
- **Healthcare No Offer Reason:** Used to indicate why insurance was not offered when using the Healthcare No Offer workflow.
- **Healthcare Offer of Coverage:** List of IRS Offer Codes. These codes indicate coverage offered, not offered or cancelled when using the Healthcare Offer, Healthcare No Offer and Healthcare Cancellation workflows. These codes are used in Line 14 of Form 1095-C. NOTE: You should periodically check IRS publications and update this list to match the latest IRS codes.
- **Healthcare Plans:** Indicates the type of plan accepted when using the Healthcare Accept workflow. In order to properly determine Safe Harbor codes during the ACA Export process, codes representing plans that offer Minimum Essential Coverage (MEC) should have the character string "(MEC)" (without the quotation marks) in the Code Description. For example, a code with the description "Employee" indicates a plan that is NOT Minimum Essential Coverage. However, a code with the description "Employee (MEC)" indicates a plan that is Minimum Essential Coverage.

## PayBill Code Setup

In addition to setting up healthcare act records, you also need to identify which PayBill Codes are applicable to ACA calculations. For example, regular hours are typically ACA applicable, but Bonus pay is not. To make a PayBill Code applicable (or not-applicable) to ACA:

1. Hover over the Administration menu item and select **Administration**.
2. Select **Manage PayBill Codes**.
3. The Manage PayBill Code screen displays. Click the PayBill Code link to access the code for which you want to change the ACA setting.
4. The General Information segment displays. Click **Edit**. If you want the PayBill Code to be used in ACA calculations, make sure there is a check in the box beside **Employee ACA Hours**. If you do not want the PayBill Code used in ACA calculations, make sure the box is unchecked. Note: Clicking the box toggles it between checked and unchecked. When you are satisfied with your setting, click **Save**.

| General Information   |                                     | Edit                   |                                     |
|-----------------------|-------------------------------------|------------------------|-------------------------------------|
| PayBill Code          | Regular                             | Payroll Taxable        | <input checked="" type="checkbox"/> |
| Description           | Regular                             | Sales Taxable          | <input checked="" type="checkbox"/> |
| PayBill Type          | Regular                             | Supplemental Pay       |                                     |
| Measurement           | Hours                               | Allow Deductions       | <input checked="" type="checkbox"/> |
| Sort                  | 1                                   | Allow Discounts        | <input checked="" type="checkbox"/> |
| Other Wage Identifier |                                     | Include in Eligibility | <input checked="" type="checkbox"/> |
| Active                | <input checked="" type="checkbox"/> | Employee WC Hours      | <input checked="" type="checkbox"/> |
| Default               | <input checked="" type="checkbox"/> | Employee ACA Hours     | <input checked="" type="checkbox"/> |

NOTE: In instances where an employee does not work nor is paid, but is under job-protected leave (e.g. Family and Medical Leave Act, etc.), a special PayBill Code should be set up as Included in ACA Hours. This PayBill Code will then be added to timecards covering the hours credited to the Employee. The pay rate for the PayBill Code will be 0.00 (since the Employee is not paid), but the hours should reflect those normally credited to the Employee under the law.

## Setting ACA Security

There are two Security Profile options that control access to ACA information and workflows. Access is granted (or removed) via the Manage Security Profiles option in Administration. In each case, a “Yes” indicates the associated Profile has permission to perform the workflow or access the data. The options are:

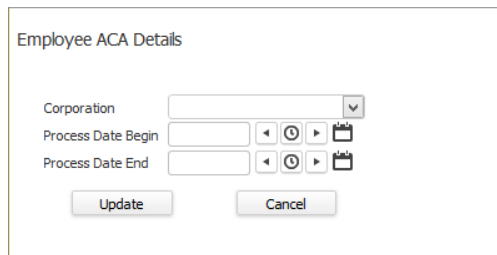
- **Manage ACA Activities:** This option controls whether users with the applicable permission initiate ACA Healthcare Activities (e.g. Offer, Accept, Reject, etc.).The ACA Update process updates Employee records to reflect current and trending information, number of ACA Hours worked, eligibility status, etc.
- **Manage ACA Administration:** This option controls whether users can add and edit Healthcare records in Administration. It also controls whether users can run the ACA Update process which updates Employee records to reflect current and trending information, number of ACA Hours worked, eligibility status, etc.

## The Initial Look Back Process

Now that System Administration has been set up, it is time to run the first look back to see which Employees are eligible based on the selected Measurement Period. Those who receive an eligible status are either those that work an average of 30+ hours per week during the Measurement Period OR have been designated as Non-Variable.

To run the Update process, follow these steps:

1. Access **Administration > Administration > Manage Healthcare Act**.
2. Click the **Update Employee ACA Details** option (right-hand side of screen).
3. The following window displays. Use the drop list to select the Corporation. If you are combining corporations (due to Common Ownership requirements), select **<Combined Corp>**. Use the date fields to select the Begin and End date of the Process. The Begin date should match the Measurement Begin Date from the associated Healthcare record for the corporation. In the End date, select the last date that timecards were posted (even if the date is past the Healthcare record’s Measurement End Date). When you are satisfied with your entries, click **Update**.



Employee ACA Details

Corporation: [Dropdown Menu]

Process Date Begin: [Date Picker]

Process Date End: [Date Picker]

[Update] [Cancel]

The system looks at all posted timecards with work week endings on or between the Process Begin and End Dates. It also looks for any employee that has a current (non-archived) ACA Hire/Rehire Date for the selected corporation. Due to the amount of data searched and the calculations performed, Bullhorn recommends using shorter date ranges, especially if you have a large Employee database.

## The Initial Results

There are three main options for checking process update results. The first is accessed via the Employee record. The second is accessed via Studios. The third is accessed via Reports.

## Checking the Employee Record

To access the Employee ACA Details:

1. Display the Employee record for which you want to check ACA information.
2. Select the **Personal Information** segment.
3. Scroll down to the ACA Summary area. The grid lists all corporations associated with the employee for which an ACA Update process has been run. If you have combined corporations, the word **Yes** will appear in the *Combined* column. Click the radio button beside the Corporation name and then click **View**.
4. The ACA Details screen displays. All fields are read-only. When you are finished looking at the information, click **Close**.

ACA Details

|                       |                    |                       |          |          |
|-----------------------|--------------------|-----------------------|----------|----------|
| Candidate Name        | Debra Parity       |                       | Current  | Trending |
| Process ID            | 412275             | Eligibility Status    | Eligible | Eligible |
| Corporation           | ChiRho Corporation | Eligible Hours        | 720.00   | 1,320.00 |
| ACA Classification    | Non-Variable       | Measurement Period    |          |          |
| Administrative Status | Existing Employee  | Begin                 | 10/1/13  | 10/1/13  |
| ACA Hire/Rehire Date  | 2/15/14            | End                   | 9/30/14  | 9/30/14  |
| Last Evaluation       | 5/31/14            | Administrative Period |          |          |
| Evaluation Due        | 12/31/14           | Begin                 | 3/3/14   | 10/3/14  |
| Updated Date          | 11/13/14           | End                   | 5/31/14  | 12/31/14 |
|                       |                    | Stability Period      |          |          |
|                       |                    | Begin                 | 6/1/14   | 1/1/15   |
|                       |                    | End                   | 5/31/15  | 12/31/15 |
|                       |                    | Coverage Status       | None     | None     |
|                       |                    | Begin                 |          |          |
|                       |                    | End                   |          |          |

Close

| Field                 | Description                                                                                                                                                                                                                                                                 |
|-----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Candidate Name        | The name of the Employee to which the ACA Details belong.                                                                                                                                                                                                                   |
| Process ID            | The number of the Queue process that contained the ACA Update.                                                                                                                                                                                                              |
| Corporation           | The Corporation associated with this ACA Detail record. If you combined Corporations, this field will display <b>Combined Corp.</b>                                                                                                                                         |
| ACA Classification    | Populated from the Employee's Personal Information segment, options are Variable, Non-Variable, Part Time and Seasonal.<br><br><i>Note: The ACA Classification may be edited on the Personal Information Segment with the 'Update Confidential information' permission.</i> |
| Administrative Status | Indicates whether this is an Existing Employee or a New Employee (see definitions on page ). This is a calculated field based on the Hire/Rehire Date, Measurement Period and Process End Date.                                                                             |
| ACA Hire/Rehire Date  | Indicates the date upon which the employee was considered hired (or rehired) for ACA purposes. This is a calculated field based on the first Assignment Start Date, modified by any Break in Service and adjusted by the Based Upon Date.                                   |

|                                  |                                                                                                                                                                                                                                                                                                                          |
|----------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Last Evaluation                  | Indicates the last time an evaluation occurred that moved an Employee's record from Trending to Current. Typically, it matches the Current Administrative Period End date.                                                                                                                                               |
| Evaluation Due                   | Indicates a future date when the next evaluation is due. This corresponds to the end of the Trending Administrative Period.                                                                                                                                                                                              |
| Updated Date                     | Indicates the most recent time that an ACA Update took place.                                                                                                                                                                                                                                                            |
| Eligibility Status (Current)     | Indicates the status of the employee during the current stability period. If Eligible, the employee should be offered insurance.                                                                                                                                                                                         |
| Eligibility Status (Trending)    | Indicates the likely status of the employee during the next stability period. This is calculated by looking at the employee's hours during the current Measurement Period and seeing if he/she is averaging 30 hours per week. If he/she is, the employee is Trending Eligible. If not, he/she is Trending Not Eligible. |
| Eligible Hours                   | Indicates the number of hours the employee worked for the listed Measurement Period (used to determine eligibility for the current Stability Period). This number is static and will not change.                                                                                                                         |
| Eligible Hours (Trending)        | This number will change each time that the ACA Update process is run. It indicates the number of hours the employee has worked for the listed (Trending) Measurement Period. This determines whether the employee is Trending Eligible or Not Eligible.                                                                  |
| Measurement Period (Current)     | This is the Measurement Period (Begin and End Date) for which the ACA Eligible Hours were calculated and that led to the Current Eligibility Status for the Stability Period.                                                                                                                                            |
| Measurement Period (Trending)    | This is the Measurement Period (Begin and End Date) currently being tracked to determine ACA Trending Eligibility Hours and, ultimately, whether the employee is Trending Eligible or Ineligible.                                                                                                                        |
| Administrative Period (Current)  | This is the Administrative Period (Begin and End Date) that led to the current Stability Period.                                                                                                                                                                                                                         |
| Administrative Period (Trending) | This is the upcoming Administrative Period (Begin and End Date) during which eligible employees should be offered insurance.                                                                                                                                                                                             |
| Stability Period (Current)       | This is the current Stability Period. Employee status (Eligible vs Not Eligible) cannot change during the Stability Period.                                                                                                                                                                                              |
| Stability Period (Trending)      | This indicates the upcoming Stability Period for the employee. Once you reach the Stability Period and run an ACA Update, any Trending records move to the Current area and all Current records are archived. The following ACA Update will gather information for new Trending records.                                 |

|                            |                                                                                                                                                                                                                                                                                                                                                                                       |
|----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Coverage Status (Current)  | This indicates the most recent Healthcare Activity (Offer, Accept, Decline or Cancel) during the Measurement and Administrative Periods listed in the Current column. If the activity is Accept, then the Coverage Begin date is listed. If the activity is Cancel, then the Coverage Begin date (for the original Acceptance) and the Coverage End date (from the Cancel) is listed. |
| Coverage Status (Trending) | This indicates the most recent Healthcare Activity during the Measurement and Administrative Periods listed in the Trending column. If the activity is Accept, then the Coverage Begin date is listed. If the activity is Cancel, then the Coverage Begin date (for the original Acceptance) and the Coverage End date (from the Cancel) is listed.                                   |

NOTE: It is possible for the Measurement, Administrative and Stability periods for an individual employee to be different than the Healthcare Act record for the corporation. This typically happens when you hire a New Variable employee as their Measurement Period begins on their Hire Date rather than the Healthcare record's Measurement Period start date.

NOTE: Use the **ACA Eligibility & Activity Report** to display the information on the ACA Detail screen along with the most recent dates of any related healthcare activities.

## Checking the ACA Participation Widget

The ACA Participation widget allows you to view employees and their relationship with the ACA by using various filters and search criteria. By default, it presents candidates that have a current status of Eligible and an ACA Classification of Variable with an ACA Hire/Rehire date within the current year for the selected Corporation. You can then select filtering criteria that allows you to individualize the widget to your needs.

To access the widget:

1. From the Main Navigation bar, select **adapt.studio**.
2. From the adapt.studio menu, select **My Studios**.
3. Select the **ACA Participation** widget. NOTE: Due to the wealth of filtering criteria and data displayed, Bullhorn recommends using the single widget layout.

**ACA Participation (6)**

Corporation: ACA Corp | Current | Trending | Candidate

Branch: All Branches | Eligibility Status: Eligible | Date Range Type: ACA Hire/Rehire

ACA Classification: Variable | Coverage Status: -- Select -- | 1/1/16 - 12/31/16

| First Name | Last Name | ACA Class | (C) Eligibility Status | (C) Coverage Status | Hire Date  |
|------------|-----------|-----------|------------------------|---------------------|------------|
| Blake      | Douglass  | Variable  |                        |                     | 09/14/2016 |
| Brian      | Douglass  | Variable  |                        |                     | 01/02/2016 |
| Fred       | Smith     | Variable  |                        |                     | 07/30/2016 |
| George     | Adams     | Variable  |                        |                     | 08/20/2016 |

**George Adams**

Summary | ACA Information | Journal

|                  |                        |                      |                   |
|------------------|------------------------|----------------------|-------------------|
| Name             | George Adams           | Status               | Employee          |
| Current Employer | Acme Technical Writers | Availability Status  | On Assignment     |
| Job Category     | Technical Writer       | City, State/Province | Marietta, Georgia |
| Emp ID           | 175774                 | Mobile Phone         |                   |
| Branch           | Godshall Staffing      | Email 1              |                   |
| Employee Type    | Employee               | Social Networking    |                   |
| Wage Type        | Hourly                 |                      |                   |

You can filter on the following (unless otherwise noted, all filtering options use AND logic). Results adjust automatically once a filtering option is changed:

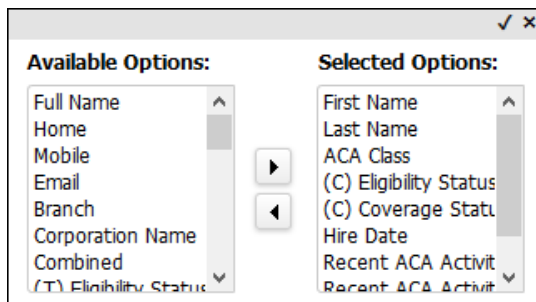
- Corporation: This defaults to the user's default corporation, but can be changed. The drop list displays all active corporations. If you want to search on all corporations, click on -- Select -- in the drop list. NOTE: If you do use the -- **Select** -- options and the employee is associated with multiple corporations, then the employee will be listed multiple times (once for each corporation).
- Current/Trending: Indicates whether you want to filter on current or trending information. For example, if you select Eligibility Status as Eligible and the Current radio button, then the system searches for Candidates with a current Eligibility Status of Eligible. This is Required and only 1 of the options can be selected.
- Candidate: If you want to filter by candidate name, type all or a portion of the first or last name and click . If you do not want to search for specific candidates, leave this field blank.
- Branch: The drop list contains all active branches to which the user has access. You may also choose All Branches from the list.
- Eligibility Status: Use the drop list to select whether you want to see only employees who are Eligible or those that are Not Eligible. If you do not want to filter by Eligibility Status, click -- Select -- in the drop list.
- ACA Classification: Allows you to filter by the employee's current ACA Classification (Variable, Non-Variable, Part Time or Seasonal). If you do not want to filter by Classification, click -- Select -- in the drop list.
- Coverage Status: Allows you to filter by the current coverage status of the employee (based on the most recent activity date). You can select from None, Offered, Accepted, Declined and Cancelled. If you do not want to filter on Coverage Status, click -- Select -- in the drop list.
- Date Range Type: The drop list allows you to indicate the type of date on which you want to search. Options are ACA Hire/Rehire, Admin Period Begin, Admin Period End, Measurement Period Begin, Measurement Period End, Stability Period Begin, Stability Period End, Offer Date, Coverage Begin Date and Coverage End Date. Once you have selected a type, the date fields below allow you to select a date range for searching. For example, if you select ACA Hire/Rehire Date as the type and 1/1/25 thru 12/31/25 as the dates, the system will search for all candidates (based on the other criteria) that have an ACA Hire/Rehire Date between January 1, 2025 and December 31, 2025.

The grid itself has the following columns:

- Full Name
- First Name: You can click this field to jump to the employee record.
- Last Name: You can click this field to jump to the employee record.
- Home: Home Phone
- Mobile: Mobile Phone
- Email
- Branch: Staffing branch associated with the employee.
- Corporation Name: Corporation associated with the employee's ACA record.
- Combined: Indicates whether Combined Corporations were used to calculate Employee eligibility.
- ACA Class: ACA Classification (Variable, Non-Variable, Part Time, Seasonal)
- (C) Eligibility Status: Current Eligibility Status (Eligible or Not Eligible)
- (C) Coverage Status: Current Coverage Status (None <blank>, Offered, Accepted, Declined, Cancelled)
- (T) Eligibility Status: Trending Eligibility Status (Eligible or Not Eligible)
- (T) Coverage Status: Trending Coverage Status (None <blank>, Offered, Accepted, Declined, Cancelled)

- Hire Date
- (C) Admin Begin: Current Administration Period Begin date.
- (C) Admin End: Current Administration Period End date.
- (T) Admin Begin: Trending Administration Period Begin date.
- (T) Admin End: Trending Administration Period End date.
- (C) Measure Begin: Current Measurement Period Begin date.
- (C) Measure End: Current Measurement Period End date.
- (T) Measure Begin: Trending Measurement Period Begin date.
- (T) Measure End: Trending Measurement Period End date.
- (C) Stability Begin: Current Stability Period Begin date.
- (C) Stability End: Current Stability Period End date.
- (T) Stability Begin: Trending Stability Period Begin date.
- (T) Stability End: Trending Stability Period End date.
- (C) Coverage Begin: Current Coverage Begin date.
- (C) Coverage End: Current Coverage End date.
- (T) Coverage Begin: Trending Coverage Begin date.
- (T) Coverage End: Trending Coverage End date.
- Offer Date: Offer Date from the most recent Healthcare Offer activity.
- Recent ACA Activity: Name of the most recent ACA Activity for the employee.
- Recent ACA Activity Dt: Date of the most recent ACA Activity for the employee.
- Updated Dt: Date the employee ACA information was last updated.

You can add or remove columns for the widget by clicking . This displays the following window:



You can display all columns by moving all column options to the Selected Options area. If only some columns are in the Selected Options area, those are the only options that will display in the widget. Columns display in the order in which they are listed in the Selected Options area. When the columns are in the places you want, click the small checkmark in the upper right corner (clicking the “x” closes the window without saving your column selections).

You can view a preview of the listed records on the widget by clicking  in the left column of the row of the record you want to preview. This causes an area at the bottom of the widget to display three tabs:

- Summary: Displays information from the Employee record (e.g. Name, Current Employer, Branch, Employee Type, Availability Status, etc.). Clicking on the Name takes you to the employee’s record. Clicking on the Current Employer takes you to the client record. Clicking on Email 1 creates an email with the employee’s address in the To: field. Clicking on the Social Networking takes you to the

employee's social networking page or opens the Update Social Networks window so you can add an address for the various social networks.

- ACA Information: Displays ACA information (e.g. Classification, Status, etc.) for each Corporation that there is ACA information concerning the employee.
- Journal: Displays information from the employee's journal.

## Checking the ACA Eligibility & Activity Report

The ACA Eligibility & Activity Report allows users to pull and view all employees that are on active assignments OR have an ACA Hire/Rehire date within the last 12 months. Using the parameters to filter and group data, users can utilize the report to determine employees that are eligible and who have not had a recent healthcare related activity.

To run the report:

1. Access **Reporting > Reports > ACA Eligibility & Activity Report** (Management Reports section).
2. The following window displays. Use the drop list to select the corporation. Use the Code Selection icon to select how you would like to group the report (options are ACA Classification, Coverage Status – Current, Coverage Status – Trending, Eligibility Status – Current, Eligibility Status – Trending). The other fields (Branch, Employee ID and ACA Classification) are optional but can be used to further filter the resulting data. Once you are satisfied with your selections, click **Confirm** to run the report or **Export to Excel** to send the results to Excel.

ACA Eligibility & Activity Report

The Eligibility & Activity Report allows customers to pull and view all employees that are on active assignments, OR have an ACA Hire/Rehire date within the last 12 months. With the parameters to filter by classification and/or group by many of the options available, customers can utilize this report to determine who is eligible that has not had a recent healthcare related activity.

Corporation: --Select--

Branch: --Select--

Employee ID: [Text Input]

ACA Classification: [Text Input]

The group by options identify how the transactions are to be grouped and totaled within the report.

Group by: ACA Classification

Confirm Cancel Export To Excel

The report contains the following information:

- The Title of the Report, Corporation and selected Group By criteria are displayed in the Header.
- The Report details are listed by Employee Name.
- For each employee, the following columns display data:
  - o Eligibility Status (Current)
  - o Eligible Hours (Current)
  - o Coverage Status (Current)
  - o Stability Period Begin (Current)
  - o Eligibility Status (Trending)
  - o Eligible Hours (Trending)

- o Admin Period End (Trending)
- o Coverage Status (Trending)
- o ACA Hire/Rehire Date (Trending)
- o ACA Classification (Trending)
- o Stability Period Begin (Trending)
- o Last ACA Activity
- o Last ACA Activity Date

By comparing the Trending Eligibility Status, the Coverage Status and the Trending Stability Period Begin date, you should be able to determine those employees who need to be offered insurance. Trending Eligibility Status will identify those employees who have averaged 30 or more hours in the current Trending Measurement Period. Trending Stability Period will identify those employees who are approaching their Stability Period. This is important...as the Trending Eligibility Status only indicates those employees who have averaged 30 hours per week whether they have worked 1 week or 39 weeks. The closer the employee is to their Stability Period, the more significant the Trending Eligibility Status. Finally, the Coverage Status will identify those employees that have already been offered, accepted, declined or were cancelled for health insurance.

## Initial Healthcare Activities

Once you have used the ACA Eligibility & Activity Report to identify those employees that are "Eligible" for ACA purposes, you begin the process of offering healthcare insurance (if you are Playing) and recording ACA activities. If you select to Pay instead, the report can be used to estimate the Penalty that will be assessed.

**IMPORTANT: You should record activities as they occur on a yearly basis. In other words, if an employee was offered insurance and accepted it in 2018 and was offered insurance (during open enrollment) and accepted it again in 2019, there should be 2 offer activities (one for 2018 and one for 2019) and 2 accept activities (one for 2018 and one for 2019) on the Employee record. Most ACA Export calculations are based on Healthcare Activities occurring during the year and therefore, in order to get accurate information, activities should be recorded as they occur.**

There are six Healthcare activities that allow you to record the steps taken to remain compliant with the requirements of the Affordable Care Act. They are available from three locations: By selecting Candidate Activities > Healthcare Activities on the Candidate record OR by selecting Batch > Healthcare Activities from a Candidate search OR by selecting  on the ACA Participation widget. The latter method allows you to add a healthcare activity to multiple employees at the same time. The activities are:

1. Healthcare Exchange Notification: Allows you to record that you provided an employee with the required Healthcare Exchange Notification letter.
2. Healthcare Offer: Allows you to record that you offered healthcare to an employee.
3. Healthcare No Offer: Allows you to record that you chose to not offer an employee healthcare.
4. Healthcare Accept: Allows you to record that the employee accepted your healthcare offer.
5. Healthcare Decline: Allows you to record that you offered an employee healthcare and they chose to decline the coverage.
6. Healthcare Cancellation: Allows you to record that you cancelled an employee's healthcare.

Below are detailed descriptions of the six available Healthcare Activities and the default values available.

NOTE: Values for the fields for each can be modified in Administration > Administration > Manage Lists.

## Healthcare Exchange Notification

Healthcare Exchange Notification allows you to record that you have provided the Employee with the required Healthcare Exchange Notification letter. The following instructions take you step-by-step through the REQUIRED fields necessary to complete this workflow.

1. The Healthcare Exchange Notification Activity window displays.
2. The Subject field defaults to "Healthcare Exchange Notification" but can be edited.
3. Use the drop list to select the Corporation.
4. Use the calendar control to select a Notification Date.
5. The remainder of the fields are optional.
6. When you are finished entering the information, click **Confirm**.

## Healthcare Offer

Healthcare Offer allows you to record that you have offered an Employee a healthcare plan. The following instructions take you step-by-step through the REQUIRED fields necessary to complete this workflow.

1. The Healthcare Offer Activity window displays.
2. The Subject field defaults to "Healthcare Offer" but can be edited.
3. Use the drop list to select the Corporation.
4. Use the calendar control to select the date on which insurance coverage would begin.
5. Use the Code Selection icon to choose the Offer of Coverage (IRS code used for end-of-year ACA reporting).
6. The remainder of the fields are optional.
7. When you are finished entering the information, click **Confirm**.

## Healthcare No Offer

Healthcare No Offer allows you to record that you decided not to offer the Employee a healthcare plan. The following instructions take you step-by-step through the REQUIRED fields necessary to complete this workflow.

1. The Healthcare No Offer Activity window displays.
2. The Subject field defaults to "Healthcare No Offer" but can be edited.
3. Use the drop list to select the Corporation.
4. Use the calendar control to select the date on which insurance coverage would have begun.
5. Use the Code Selection icon to select a No Offer Reason.
6. Use the Code Selection icon to choose the Offer of Coverage (IRS code used for end-of-year ACA reporting).
7. The remainder of the fields are optional.
8. When you are finished entering the information, click **Confirm**.

## Healthcare Accept

Healthcare Accept allows you to record that you have made a healthcare offer to an Employee and they have accepted. The following instructions take you step-by-step through the REQUIRED fields necessary to complete this workflow.

1. The Healthcare Accept Activity window displays.

2. The Subject field defaults to "Healthcare Accept" but can be edited.
3. Use the drop list to select the Corporation.
4. Use the calendar control to select an Accept Date (the date the employee accepted the insurance).
5. Use the calendar control to select a Coverage Begin Date.
6. Use the Code Selection icon to select a Healthcare Plan.
7. The remainder of the fields are optional.
8. When you are finished entering the information, click **Confirm**.

## Healthcare Decline

Healthcare Decline allows you to record that you have made a healthcare offer to the Employee and they have declined. The following instructions take you step-by-step through the REQUIRED fields necessary to complete this workflow.

1. The Healthcare Decline Activity window displays.
2. The Subject field defaults to "Healthcare Decline" but can be edited.
3. Use the drop list to select the Corporation.
4. Use the calendar control to select a Decline Date.
5. Use the Code Selection icon to select a Decline Reason.
6. The remainder of the fields are optional.
7. When you are finished entering the information, click **Confirm**.

## Healthcare Cancellation

Healthcare Cancellation allows you to record that you have cancelled healthcare coverage for the Employee. The following instructions take you step-by-step through the REQUIRED fields necessary to complete this workflow.

1. The Healthcare Cancellation Activity displays.
2. The Subject field defaults to "Healthcare Cancellation" but can be edited.
3. Use the drop list to select the Corporation.
4. Use the calendar control to select a Cancellation Date.
5. Use the calendar control to select a Coverage End Date
6. Use the Code Selection icon to select a Cancellation Reason. Remember to use the Cancellation Code with the character string "(Terminated)" (without the quotation marks) in the Code Description for any Cancellation that resulted from an employee termination.
7. Use the Code Selection icon to choose the Offer of Coverage (IRS code used for end-of-year ACA reporting).
8. The remainder of the fields are optional.
9. When you are finished entering the information, click **Confirm**.

## Ongoing Steps

Once you have made your initial decisions about healthcare insurance, the pattern of ACA Update > Report > Activities becomes cyclical.

- Proof and Post Timecards normally.
- On a timely basis (weekly, monthly, etc.), run the ACA Update process.
- Run ACA reports, as needed, to help prepare for your upcoming open enrollment period.
  - Run the ACA Eligibility & Activity Report to identify those employees that are eligible for healthcare and are approaching their Stability Period.
- Notify employees of your decision to offer or not offer healthcare insurance.
- Add ACA Healthcare activities to track offers, rejections, acceptance and so forth.
- Set up insurance deductions in Pay/Bill and apply them as recurring deductions on your eligible Employee records.

The last 5 steps can be visualized in the graphic on the next page:



### Proofing and Posting Timecards

The entering, proofing and posting (Back Office) or approving (Front Office) of timecards does not change under ACA except in the circumstance of unpaid, protected leave (e.g. family leave, military service, jury duty, etc.). In these circumstances, hours must be tracked for both eligibility and Administrative Status purposes.

In order to do this, you should create a special PayBill Code (or multiple codes) that represent the unpaid, protected leave. The PayBill Code should be set up to work with ACA (check the ACA option on the PayBill Code Add/Edit window). When your employee is on leave, create a timecard and add the code with a 0.00 rate. The number of hours entered should be based on the law that allows the leave (e.g. The Family Leave Act).

Some things to consider:

- While you do not need to enter a timecard each week, you should enter one at least every three weeks to ensure that the Rule of Parity does not apply to the Employee (as this will change the Employee's status to New...for ACA purposes).

- Be careful when a leave period overlaps a measurement period. If you wait too many weeks, the hours credited by the leave may not be counted in the measurement period in which it occurred.

## Run the Update Process

Administration > Administration > Manage Healthcare Act > Update Employee ACA Details.

The Update Process applies the Healthcare settings in Administration to Employee data and then uses ACA's complex rules to calculate eligibility. Basically, the Update Process:

- Selects Employees for ACA calculation purposes. This is based on two factors. If the answer to either question is Yes, the Employee is selected.
  - o Does the Employee have a posted timecard with a work week ending date within the Update Process begin and end date range?
  - o Does the Employee have a Current (non-archived) ACA Hire/Rehire date?
- Determines the selected Employee's ACA Hire Date based on the Assignment Start Date, any Breaks in Service and the Based Upon Date setting in the Healthcare record.
- Retrieves the ACA Classification from the Employee record (or if there is none, from the Corporation's default ACA Classification). If combining multiple corporations, this is the ACA Classification from the latest timecard week-ending date. If more than one corporation has the same timecard week-ending date, then the classification is grabbed from the timecard having the highest ID.
- Determines whether the Employee is "New" or "Existing" by examining the Hire/Rehire Date and comparing it to the Process End Date and the length of the Measurement Period.
- Determines the Trending Measurement Period Begin and End Dates based on a variety of data.
- Determines the Trending Stability Period Begin and End Date based on ACA calculation rules for each type of ACA Employee Classification.
- Determines the Trending Administrative Period.
- Sums the ACA valid PayBill Codes on Posted Timecards in the Employee's Measurement Period (up to the ACA Update Process end date) to get the Trending ACA Hours.
- Uses the Trending ACA Hours to determine if the Employee is Trending Eligible or Trending Not Eligible (Note: If the Employee is Non-Variable, they are always Trending Eligible).
- Determines the most recent Current and Trending ACA Healthcare Activity for the Employee.
- If this is the first Process Update run in the Employee's Stability Period, the system moves all Current Records to an archived area and moves all Trending Records to the Current area. It also changes any "New" Employee to an "Existing" Employee. Finally, it prepares the system to begin collecting data for the Trending area as future process updates are run.

NOTE: AFTER you run the Process Update for the first time during your Corporate Stability Period, you need to update the Corporation Healthcare Record.

- If you are using a 12 month Measurement Period, you should inactivate the existing Healthcare Record and activate (or add) a record for the new year. For example, if your active Healthcare Record has a measurement period of 10/1/13 to 9/30/14 (and assuming the Stability Period starts on 1/1/15), after running an ACA Update Process with an End Date after the Stability Period start date, you should inactivate the existing Healthcare Record and activate (or add) a record with a Measurement Period of 10/1/14 to 9/30/15.
- If you are using a period of less than 12 months (and you are not at the end of the year), you should edit the Measurement Period Begin and End Dates to match the new period. For example, if you are using a three month Measurement Period and the initial Begin and End Dates are 1/1 and 3/31 respectively, AFTER you

run the initial Process Update in the Stability Period, you should change the Begin and End Dates to 4/1 and 6/30 respectively.

## Run the ACA Eligibility & Activity Report

The ACA Eligibility & Activity Report allows users to pull and view all employees that are on active assignments OR have an ACA Hire/Rehire date within the last 12 months. Using the parameters to filter and group data, users can utilize the report to determine employees that are eligible and who have not had a recent healthcare related activity.

Please see [Checking the ACA Eligibility & Activity Report](#) for more information on the report.

There are three additional reports that can assist you in ACA compliance and reporting:

- **ACA Healthcare Activity Report:** This report details the healthcare activities that have taken place for the corporation. You select the Corporation (or Combined Corporation), Data Type (Coverage Begin Date, Coverage End Date, Create Date, Decline Date, No Offer Date, Notification Date or Offer Date) and a date range. Optionally, you can also select one or more Activity Types (e.g. Offer, Accept, etc.). The report lists each activity taken on each employee for the corporation and provides information such as the Explanation, Activity Create Date and Created By User. Finally, corporation totals for each type of activity are presented.
- **ACA Full Time Employee Report:** This report is designed to identify employees who have worked more than the threshold per week during a specified same measurement period timeframe. You select the Corporation (or Combined Corporation), Week Ending Date, Measurement Period and Hours Threshold. Optionally, you can also select an Employee Branch and ACA Classification. The report lists all employees that would be designated as "Full-Time" for ACA purposes based on the Measurement Period, Hours Threshold and Week Ending Date. The report totals the number of employees identified by Employee Branch and Corporation. This report does not determine eligibility, but can be used as a guide to view "what if" scenarios. To determine actual eligibility, the ACA Update Process should be used.
- **ACA Approaching Eligibility Report:** You select the Corporation (or Combined Corporation). Optionally, you can also select a Branch. The Warning Threshold defaults to the one set up in Administration for the selected Corporation and may not be changed. The report lists each employee that has worked enough hours to pass the warning threshold and therefore, is approaching ACA eligibility. The report is grouped by corporation and has totals by corporation and branch. The report is sorted by Employee. It displays ACA Hire/Rehire Date, Current Assignment, Estimated End Date of Current Assignment, Eligibility Status (Current and Trending), Coverage Status (Current and Trending), Eligibility Hours (Current and Trending) and Recruiter.

## Change ACA Classification

After reviewing the information from the update, you may find that some employees need to be classified differently. This is especially true if you make the decision to offer all employees insurance regardless of their eligibility. To do this, you would initially set the employee to "Non-Variable".

Using the ACA Participation widget, you can easily determine those employees who have worked less than a certain number of hours or weeks since their ACA Hire/Rehire Date. To do this:

1. Use the filters on the ACA Participation Widget to create a list of employees you want to filter. Using the above scenario, you would select the Corporation, the ACA Classification (Non-Variable), the Date Range Type (most likely, ACA Hire/Rehire) and the Date Range. If you are not working from the above scenario, select the filtering options that allow you to get the list you need.

2. Click .
3. The ACA Hire Search window displays. In the # Hours and/or # Weeks fields, enter the minimum number of hours and/or weeks an employee must have worked since their ACA Hire/Rehire Date to NOT appear on the filtered list. In other words, results will show those employees that do NOT meet the entered requirements. In the above scenario, these would be employees who have not worked the required hours or weeks to receive insurance.
4. Select the employees from the resulting list for which you want to change ACA Classification.
5. Click  and select **Change ACA Classification**.
6. The Change ACA Classification window displays. Use the Code Selection icon to select the new ACA Classification and click **Confirm**.

Note: Update Confidential information permission is required in order to Change ACA Classification.

### Perform Other Actions

You can also use the ACA Participation widget to perform other actions on a group of employees.

1. Use the filters to create a list of employees.
2. Select the employees on which you want to perform an action.
3. Click  and select either **Add a Note**, **Log a Call**, **Schedule a Task**, **Send Text Message** or **Send an Email** to perform the activity on the selected employees.
4. Complete all required fields and any optional fields needed.

### Notify Eligible Employees

After determining who is eligible, it is time to notify employees who are eligible that healthcare insurance is available (if you are Playing). Typically, this occurs during the Corporation Open Enrollment Period (Administrative Period), but can be different for new employees who have yet to work through a measurement period.

### Add Healthcare Activities

For the purposes of the ACA, it is extremely important to record all healthcare related activities on the employee's record. For auditing purposes, most of the Healthcare Activities allow you to differentiate the activity date from the "in effect" date. For example, an Acceptance activity allows you to record the date the employee accepted insurance AND the date that coverage began (which can be, and usually is, different).

It is also important to track those employees that decline coverage as these employees will not show up on your ACA Full Time Employees report until your next Plan Year or Measurement Period begins, assuming they are still eligible.

**IMPORTANT:** You should record activities as they occur on a yearly basis. In other words, if an employee was offered insurance and accepted it in 2018 and was offered insurance (during open enrollment) and accepted it again in 2019, there should be 2 offer activities (one for 2018 and one for 2019) and 2 accept activities (one for 2018 and one for 2019) on the Employee record. Most ACA Export calculations are based on Healthcare Activities occurring during the year and therefore, in order to get accurate information, activities should be recorded as they occur.

Look here for more information on ACA [Healthcare Activities](#).

## Set Up Employee Deductions

Once an employee accepts coverage, a deduction (typically, recurring) should be set up in both Administration and the employee record to account for the employee's contribution to the cost of insurance. This ensures that the cost is taken out of subsequent employee paychecks.

## Cost Recapture

Adapt allows you to add fees to invoices to help recapture the cost of doing business. There are two types of fees that can be added: ACA fees and Other fees.

## Fee Concepts

### Fee Levels

Fees are assigned on 4 levels (3 levels for Front Office Only systems) with each level having the option of using the fee information already existing at a higher level or overriding higher level fee information with information specific to that lower level. The levels (from highest to lowest) are:

- Corporation (not applicable to Front Office Only systems)
  - Client
    - Job Order
      - Assignment

When a fee is added at any level, it automatically populates all associated lower levels. For example, if you add a fee at the Client level, the fee is automatically added to the Job Order and Assignment level. Fees are not automatically added to higher levels. Therefore, a fee added at the Client level does NOT add that fee to the Corporation level.

### Overriding and Reverting

You can override inherited fees at any level. For example, a user might add a 2% fee at the Client level. This 2% fee gets automatically added to all associated Job Orders and Assignments. If you want a specific assignment to have a 2.5% fee instead, you can override the fee at the Assignment level without impacting the fee on other assignments, the job order or the client.

Further, you can revert an overridden fee so that it once again uses the fee information added at a higher level. For example, if you wanted the assignment above (which is currently overridden at 2.5%) to once again use the fee information set up at the Client level, it is as easy as simply telling the system to revert back to using the Client level fee. This automatically changes the Assignment fee back to 2%.

Inherited fees automatically change as the higher level fee changes. For example, if the Assignment inherits fee information from the Client and the Fee amount on the Client is changed from 2% to 3%, then the Assignment fee also changes from 2% to 3%...automatically.

Overridden fees, on the other hand, stay overridden despite any changes at a higher level. For example, if the Assignment fee normally inherits a 2% fee from the Client, but is currently overridden at the Assignment level to a 2.5% fee, then any change to the Client fee (even deleting it) does not change the Assignment fee.

## An Example in 4 Parts

**Part 1:** All of this allows great flexibility in the way you set up fees. For example, let's say that you have a corporate ACA fee of 2%, which is then inherited by the Client, Job Order and Assignment. You create 2 job orders for the client (Job Order A and Job Order B). Due to the type of Job Order, you want to assign a 3% ACA fee to Job Order B only and leave Job Order A to use the Corporation fee percentage. Meanwhile Job Order B is associated with 2 assignments (Assignment 1 and Assignment 2). Due to various factors, you want to assign a 4% ACA Fee to Assignment 2 while leaving Assignment 1 to inherit fee percentage from the Job Order.

Here is what you would do:

- Add an ACA Fee to the Corporation record at a 2% rate. At this point, all associated Client, Job Order and Assignment records have an ACA Fee of 2%.
  - Leave the Client to continue inheriting information from the Corporation record (2%).
    - Leave Job Order A to continue inheriting information from the Client (2%).
    - Override the ACA Fee on Job Order B to use a 3% rate.
      - Leave Assignment 1 to continue inheriting fee information from Job Order B (3%).
      - Override the ACA Fee on Assignment 2 to use a 4% rate.

**Part 2:** Now, let's say that Corporation policy changes and the ACA Fee will now be a 1.5% fee.

Here is what happens:

- Change the ACA Fee on the Corporation record to a 1.5% rate.
  - Since the Client inherits from the Corporation, the ACA fee rate on the Client automatically changes to 1.5%.
    - Since Job Order A inherits from the Client, the ACA fee rate on Job Order A automatically changes to 1.5%.
    - Since Job Order B is overridden and no longer inherits from the client, the ACA fee rate on Job Order B remains at 3%.
      - Since Assignment 1 inherits from Job Order B, the ACA fee rate on Assignment 1 remains at 3%.
      - Since Assignment 2 is overridden and no longer inherits from Job Order B, the ACA fee rate on Assignment 2 remains at 4%.

**Part 3:** Now, let's suppose you want to override the rate on the Client so that it uses a 5% fee.

Here is what happens:

- The ACA Fee on the Corporation record is not changed. It remains at a 1.5% rate.
  - The ACA Fee on the Client is overridden to use a 5% rate.
    - Since Job Order A inherits from the Client, the ACA fee rate on Job Order A automatically changes to 5%.
    - Since Job Order B is overridden and no longer inherits from the client, the ACA fee rate on Job Order B remains at 3%.
      - Since Assignment 1 inherits from Job Order B, the ACA fee rate on Assignment 1 remains at 3%.

- Since Assignment 2 is overridden and no longer inherits from Job Order B, the ACA fee rate on Assignment 2 remains at 4%.

**Part 4:** You decide that you no longer want to override Job Order B and instead want to revert it back so it uses the ACA fee rate set up on the Client.

Here is what happens:

- The ACA Fee on the Corporation is not changed. It remains at a 1.5% rate.
  - The ACA Fee on the client does not change. It is still overridden to use a 5% rate.
    - Job Order A continues to inherit from the Client and therefore, has an ACA fee rate of 5%.
    - Job Order B is reverted so that it is no longer overridden and now inherits from the Client. The ACA fee rate on Job Order B now matches the Client at 5%.
      - Since Assignment 1 inherits from Job Order B, the ACA fee rate on Assignment 1 changes to 5%.
      - Since Assignment 2 is overridden and does not inherit from Job Order B, the ACA fee rate on Assignment 2 remains at 4%.

## Setting Up Fee Applicable PayBill Codes

If a PayBill Code is fee applicable, a fee will be added to that code on the timecard when it is posted. This fee is then added to the invoice and billed to the Client.

1. Access **Administration > Administration > Manage PayBill Codes**.
2. Click on the PayBill Code column of the paybill you want to make the fee applicable (or you can click **Add** to create a new paybill code).
3. Click **Edit**.
4. The page goes into edit mode:

### General Information

|                       |                                     |                        |                                     |
|-----------------------|-------------------------------------|------------------------|-------------------------------------|
| PayBill Code          | Overtime                            | Payroll Taxable        | <input checked="" type="checkbox"/> |
| Description           | Overtime                            | Sales Taxable          | <input checked="" type="checkbox"/> |
| PayBill Type          | Overtime                            | Supplemental Pay       | <input type="checkbox"/>            |
| Measurement           | Hours                               | Allow Deductions       | <input checked="" type="checkbox"/> |
| Sort                  | 2                                   | Allow Discounts        | <input checked="" type="checkbox"/> |
| Other Wage Identifier |                                     | Include in Eligibility | <input checked="" type="checkbox"/> |
| Active                | <input checked="" type="checkbox"/> | Employee WC Hours      | <input checked="" type="checkbox"/> |
| Default               | <input checked="" type="checkbox"/> | Employee ACA Hours     | <input checked="" type="checkbox"/> |
|                       |                                     | ACA Fee                | <input type="checkbox"/>            |
|                       |                                     | Fee                    | <input type="checkbox"/>            |

5. If you want the system to calculate an ACA cost recapture fee whenever this PayBill Code is used on a Timecard, place a check in the **ACA Fee** checkbox. If you want the system to calculate another type of fee whenever this PayBill Code is used on a Timecard, place a check in the **Fee** checkbox (on the Add screen, this is called **Other Fee**).
6. When you are satisfied with your changes, click **Save** (or **Confirm** if adding a new code).

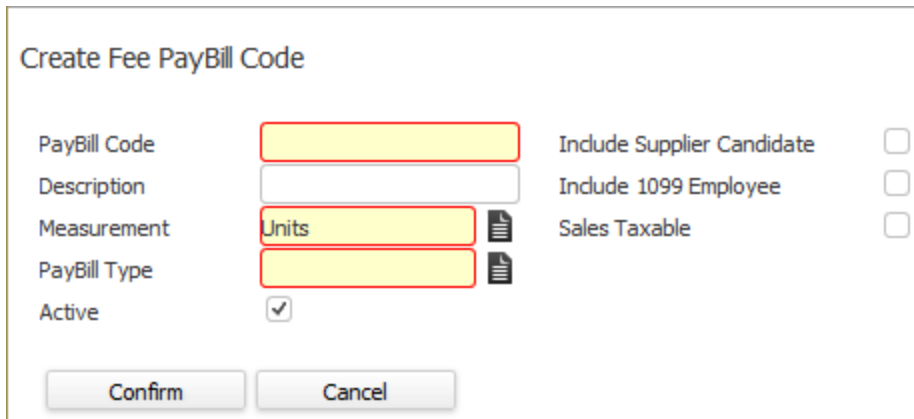
# Setting Up PayBill Fee Codes

A PayBill Fee Code is the code that is added to a timecard whenever it is determined that a code on the timecard is fee-applicable (see above). Therefore, it is a special type of code that can only be added automatically at the posting of the timecard.

PayBill Fee Codes can be based on a percentage of the billed amount of the fee-applicable code or a rate per hour/unit billed. Further, PayBill Fee Codes can be restricted so that they do not apply to Supplier Candidates, 1099 Employees or both. Finally, you can indicate whether the code is sales taxable or not.

These codes can be added to Corporation, Client, Job Order and Assignment records.

1. Access **Administration > Administration > Manage PayBill** Codes.
2. Click **Add Fee**.
3. The following window displays:



**Create Fee PayBill Code**

|              |                                                                                                                      |                            |                          |
|--------------|----------------------------------------------------------------------------------------------------------------------|----------------------------|--------------------------|
| PayBill Code | <input type="text"/>                                                                                                 | Include Supplier Candidate | <input type="checkbox"/> |
| Description  | <input type="text"/>                                                                                                 | Include 1099 Employee      | <input type="checkbox"/> |
| Measurement  | <input type="text" value="Units"/>  | Sales Taxable              | <input type="checkbox"/> |
| PayBill Type | <input type="text"/>                |                            |                          |
| Active       | <input checked="" type="checkbox"/>                                                                                  |                            |                          |

4. In the *PayBill Code* field, type the name by which the code will be referenced (REQUIRED).
5. In the *Description* field, type a description of the fee paybill code.
6. In the *Measurement* field, use the Code Selection icon to select between Hours and Units (REQUIRED).
7. In the *PayBill Type* field, use the Code Selection icon to select between ACA Fee and Other Fee. If this is an ACA cost recapture fee, select ACA Fee. If this is any other type of fee, select Other Fee (REQUIRED).
8. In the *Active* checkbox, place a check in the box if this is an active paybill code. Active fee paybill codes can be added at the corporation, client, job order and/or assignment level. Inactive codes do not show up as an option.
9. If you want this fee automatically applied to a timecard for a Supplier Candidate (if at least one of the codes on the timecard is fee-applicable), place a check in the *Include Supplier Candidate* checkbox. If this is not checked, the fee will never be applied if the timecard is associated with a Supplier Candidate.
10. If you want this fee automatically applied to a timecard for a 1099 Employee (if at least one of the codes on the timecard is fee applicable), place a check in the *Include 1099 Employee* checkbox. If this is not checked, this fee will never be applied if the timecard is associated with a 1099 Employee.
11. If you want this fee code to be sales taxable, place a check in the *Sales Taxable* checkbox.
12. Once you are satisfied with your selections, click **Confirm** to create the fee PayBill Code.

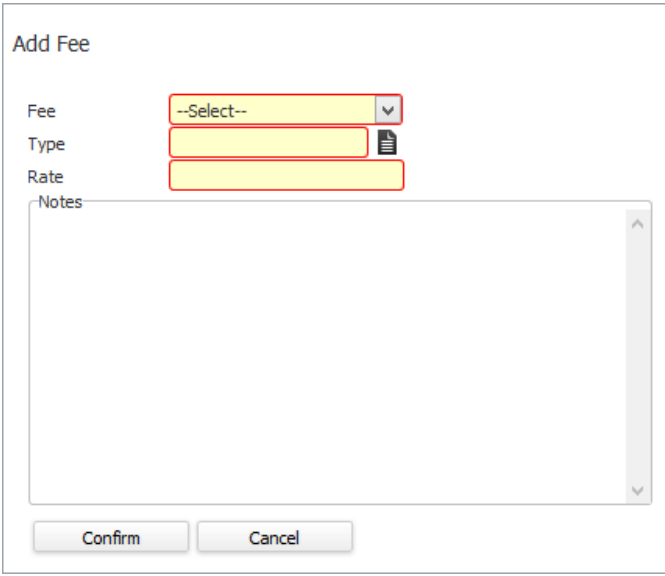
# Assigning Corporation-Wide Fee Codes to the Corporation Record

For users with a back office license, you can add PayBill Fee Codes to the Corporation record using the Fees segment. Any code added at the Corporation level automatically gets added to associated Clients, Job Orders and Assignments. Thus, fees added here should be those that apply to the corporation as a whole, rather than to a specific client, job order or assignment.

1. Access **Administration > Administration > Manage Corporation**.
2. From the Manage Corporation page, click on the Corporation Name link of the Corporation for which you want to add a fee code.
3. From the Corporation page, click the **Fees** segment.
4. The Fee page displays all fees associated with this corporation. You can click on the Fee name to jump directly to the paybill code record. You can also add new fees, edit existing fees or delete existing fees.

## Adding a Fee

To add a fee, click the **Add** button below the grid on the Fees page. The following window displays:

A dialog box titled "Add Fee" with a light gray border. It contains four input fields: "Fee" is a dropdown menu with "--Select--" and a downward arrow; "Type" is a text box with a document icon on the right; "Rate" is a text box; and "Notes" is a large text area with a vertical scrollbar on the right. At the bottom are two buttons: "Confirm" and "Cancel".

Add Fee

Fee --Select--

Type

Rate

Notes

Confirm Cancel

1. In the *Fee* field, use the drop list to select the fee paybill code you want to add to the corporation record. Any fee already added at the corporation level and any inactive fee will not show up on the list. You may add fees already applied at the client, job order or assignment level (REQUIRED).
2. In the *Type* field, use the Code Selection icon to select whether the rate will be a percentage of the billing amount (Percentage) or a rate per billed hour/unit (Rate). (REQUIRED)
3. In the *Rate* field, type the rate of the fee. The rate allows up to 3 decimal places. The way the rate is applied (e.g. as a percentage or amount per hour/unit) is determined by the Type field (REQUIRED).
4. In the *Notes* field, enter any other information you want to include about the fee. This is optional.
5. When you are satisfied with your selections, click **Confirm**.

## Editing a Fee

To edit a fee, select the radio button of the fee on the Fees page and click **Edit**.

The Edit page looks exactly like the Add page, except that the Fee Code is non-editable and Rate is not required. Make whatever changes are needed to the Type, Rate and/or Notes field and then click **Confirm** to save your changes.

## Deleting a Fee

To delete a fee, select the radio button of the fee on the Fees page and click **Delete**.

A confirmation message displays. Click **Confirm**. The fee is deleted.

NOTE: If the fee is also present at the client, job order and/or assignment level, deleting it at the Corporation level does NOT delete the fee at the other levels. However, it does change the Added From field to the next highest level where the fee is present. For example, if a Fee existed at the Corporation, Client and Job Order levels and you delete the Fee at the Corporation level, the Added From field on the Client record changes from Corporation to Client (since Client is the next highest level containing the fee).

## Adding, Overriding and Reverting Codes at Other Levels

PayBill Fee Codes added to a record also automatically add the code to the level(s) below it. The levels from highest to lowest are: Corporation (applicable only to back office systems), Client, Job Order and Assignment.

However, at any level, you can override the PayBill Fee rate and type so that the specific record has its own specific fee. For example, you can have a specific Job Order with a fee rate that is different from the Corporation or Client record and different from any other Job Order record.

Once a Fee rate is overridden, you can always revert back to inheriting the fee from a higher level. For example, you can revert the above Job Order to again use the fee rate set up on the Client record.

Finally, you can add fees at any level.

## The Client Record

The Fees grid on the Client record is located on the Policies and Billing segment and displays fee paybill codes existing at either the Corporation or Client level. Any fee displayed here automatically populates new Job Orders and Assignments associated with this Client record. Any fee added here automatically populates new and existing Job Orders and Assignments associated with the Client record.

The Fee Grid on the Client Policies and Billing segment displays the following information:

- **Fee:** Indicates the fee paybill code associated with this client. You can click on the link to go directly to the fee paybill code record.
- **Type:** Indicates whether the Rate is a percentage of the billing amount (Percentage) or an amount per billed unit/hour (Rate).
- **Rate:** The actual rate of the fee. This rate is either a percentage of the billing amount (if the Type is Percentage) or an amount per billed unit/hour (if the Type is Rate).
- **Added From:** This indicates where the fee paybill code populating the grid is coming from. If the paybill code exists on the Corporation record, this column will read "Corporation". If the paybill code exists on the Client record but not the Corporation record, this column will read "Client".
- **Override From:** If the fee paybill code's highest level is Corporation or Client, you can override the information at the Client level. For example, the Corporation might set up a 5% fee. The client can, if they choose, override that amount and make it a 3% fee for that client only. The 3% fee would then populate the

Job Order and Assignments associated with the Client. If the paybill fee has been overridden at some point, this column will display the lowest level at which the record was overridden.

- **Created Dt:** Indicates the date the fee PayBill Code was added to the Client record (whether as a result of being added directly at the client level or being inherited from the Corporation).
- **Updated Dt:** Indicates the date the fee PayBill Code was last edited.

To add a fee, click the Add button below the Fees grid.

1. In the *Fee* field, use the drop list to select the fee paybill code you want to add to the client record. Any fee already added at the corporation or client level OR any inactive fee will not show up on the list. You may add fees already applied at the job order or assignment level. (REQUIRED)
2. In the *Type* field, use the Code Selection icon to select whether the rate will be a percentage of the billing amount (Percentage) or a rate per billed hour/unit (Rate). (REQUIRED)
3. In the *Rate* field, type the rate of the fee. The rate allows up to three decimal places. The way the rate is applied (e.g. as a percentage or amount per hour/unit) is determined by the Type field. (REQUIRED)
4. In the *Notes* field, enter any other information you want to include about the fee. This is optional.
5. When you are satisfied with your selections, click **Confirm**.

You can either override a fee added from Corporation at the client level or you can revert an overridden fee to once again use the information from the Corporation level. If the Added From column reads "Client", use the Edit functionality instead.

NOTE: If you decide not to use a fee set up at the corporation level for this client (but want the fee to be available for other client records), override the fee and change the rate to 0.00. This ensures that the fee calculates to a 0.00 amount.

To override or revert a fee:

1. Select the fee you want to revert or override (by clicking on the radio button) and then click **Override/Revert**.
2. The next window that displays depends on the condition of the fee record.
  - a. If the fee is not currently overridden, the Override Fee window displays (see step 3).
  - b. If the fee is already overridden, a window displays giving you the choice of performing an override or a revert.
    - i. If you select Revert and click **Confirm**, the system displays a window asking you the higher level to which you want to revert. Since the only higher level for a client is Corporation that is the only option. Once you click **Confirm**, the override is removed and the Type and Rate from the Corporation record is used. Skip to Step 7.
    - ii. If you select Override and click **Confirm**, the Override Fee window displays (see Step 3).
3. In the *Type* field, use the Code Selection icon to select whether the Rate will be a percentage of the billing amount (Percentage) or a rate per billed hour/unit (Rate). (REQUIRED)
4. In the *Rate* field, type in the rate of the fee. The Type determines whether this rate is a percentage of the billing amount (Percentage) or a rate per billed hour/unit (Rate).
5. In the *Notes* field, type in any extra information about the override. This is optional.
6. When you are satisfied with your selections, click **Confirm**.

7. If you have selected to Override a fee added from Corporation, the Override From column on the Fees grid displays "Client". If you have reverted back to the Corporation fee information, the Override From column will be empty.

To edit a fee, select the radio button of the fee on the Fees grid and click Edit. The Edit page looks exactly like the Add page, except that the Fee Code is non-editable and the Rate is not required. You can, however, use the Jump icon to move to the fee paybill code record. Make whatever changes are needed to the Type, Rate and/or Notes field and then click Confirm to save your changes.

NOTE: You may only edit fees at the highest level at which the fee exists. Thus, if the fee exists at the Corporation level, you must edit the fee on the Corporation record.

To delete a fee, select the radio button of the fee on the Fees page and click Delete. A message displays asking if you are sure. Click Confirm. The fee is deleted.

NOTE: You may only delete fees at the highest level at which the fee exists. Thus, if the fee exists at the Corporation level, you must delete the fee on the Corporation record.

NOTE: If the fee is also present at the job order and/or assignment level and has not been overridden at the Job Order or Assignment, deleting it at the Client level also deletes it from the Job Order and Assignment. If the fee has been overridden at a lower level, it is not deleted at the lower level. However, it does change the Added From field to the next highest overwritten level. For example, if a Fee existed at the Client, but was overridden at the Job Order level and you delete the Fee at the Client level, the Added From field on the Job Order will change from Client to Job Order (since Job Order is the next highest level containing the overridden fee).

## The Job Order Record

The Fees grid on the Job Order record is located on the Fees segment and displays fee paybill codes existing at either the Corporation, Client or Job Order level. Any fee displayed here automatically populates new Assignments associated with this Job Order record. Any fee added here automatically populates new and existing Assignments associated with this Job Order record.

The Fee Grid on the Fees segment displays the following information:

- **Fee:** Indicates the fee paybill code associated with this Job Order. You can click on the link to go directly to the fee paybill code record.
- **Type:** Indicates whether the Rate is a percentage of the billing amount (Percentage) or an amount per billed unit/hour (Rate).
- **Rate:** The actual rate of the fee. This rate is either a percentage of the billing amount (if the Type is Percentage) or an amount per billed unit/hour (if the Type is Rate).
- **Added From:** This indicates where the fee paybill code populating the grid is coming from. If the paybill code exists on the Corporation record, this column will read "Corporation". If the paybill code exists on the Client record but not the Corporation record, this column will read "Client". If the code exists on the Job Order, but not the Corporation or Client, this column will read "Job Order".
- **Override From:** If the fee paybill code's Added From is Corporation, Client or Job Order, you can override the information at the Job Order level. For example, the Client might have a 5% set up. This can be overridden at the Job Order level so that this specific Job Order has a different percent fee (like 3%). The 3% fee would then populate the Assignments associated with the Job Order. If the paybill fee has been overridden at some point, this column will display the lowest level at which the record was overridden.
- **Created Dt:** Indicates the date the fee PayBill Code was added to the Job Order record (whether as a result of being added directly at the Job Order level or being inherited from a higher level).
- **Updated Dt:** Indicates the date the fee PayBill Code was last edited.

To add a fee, click the Add button below the Fees grid.

1. In the *Fee* field, use the drop list to select the fee paybill code you want to add to the client record. Any fee already added at the corporation, client or job order level OR any inactive fee will not show up on the list. You may add fees already applied at the assignment level. (REQUIRED)
2. In the *Type* field, use the Code Selection icon to select whether the rate will be a percentage of the billing amount (Percentage) or a rate per billed hour/unit (Rate). (REQUIRED)
3. In the *Rate* field, type the rate of the fee. The rate allows up to three decimal places. The way the rate is applied (e.g. as a percentage or amount per hour/unit) is determined by the Type field. (REQUIRED)
4. In the *Notes* field, enter any other information you want to include about the fee. This is optional.
5. When you are satisfied with your selections, click **Confirm**.

You can either override a fee added from Corporation or Client at the Job Order level or you can revert an overridden fee to once again use the information from the Corporation or Client level. If the Added From column reads "Job Order", use the **Edit** functionality instead.

NOTE: If you decide not to use a fee set up at the corporation or client level for this job order (but want the fee to be available for other job order records), override the fee and change the rate to 0.00. This ensures that the fee calculates to a 0.00 amount.

To override or revert a fee:

1. Select the fee you want to revert or override (by clicking on the radio button) and then click **Override/Revert**.
2. The next window that displays depends on the condition of the fee record.
  - a. If the fee is not currently overridden, the Override Fee window displays (see step 3).
  - b. If the fee is already overridden, a window displays giving you the choice of performing an override or a revert.
    - i. If you select Revert and click **Confirm**, the system displays a window asking you the higher level to which you want to revert. If the fee has never been overridden, you will have only one option. However, if it has been overridden, you can choose which level you want to revert (e.g. Corporation or Client). Once you click **Confirm**, the override is removed and the Type and Rate from the selected record is used. Skip to Step 7.
    - ii. If you select Override and click **Confirm**, the Override Fee window displays (see Step 3).
3. In the *Type* field, use the Code Selection icon to select whether the Rate will be a percentage of the billing amount (Percentage) or a rate per billed hour/unit (Rate). (REQUIRED)
4. In the *Rate* field, type in the rate of the fee. The Type determines whether this rate is a percentage of the billing amount (Percentage) or a rate per billed hour/unit (Rate).
5. In the *Notes* field, type in any extra information about the override. This is optional.
6. When you are satisfied with your selections, click **Confirm**.
7. If you have selected to Override a fee added from Corporation or Client, the Override From column on the Fees grid displays "Job Order". If you have reverted back to the Corporation or Client fee information, the Override From column will be empty.

To edit a fee, select the radio button of the fee on the Fees grid and click **Edit**.

The Edit page looks exactly like the Add page, except that the Fee Code is non-editable and the Rate is not required. You can, however, use the Jump icon to move to the fee paybill code record. Make whatever changes are needed to the Type, Rate and/or Notes field and then click **Confirm** to save your changes.

NOTE: You may only edit fees at the highest level at which the fee exists. Thus, if the fee exists at the Corporation level, you must edit the fee on the Corporation record. If the fee exists at the Client level but not the Corporation, you must edit the fee on the Client record.

To delete a fee, select the radio button of the fee on the Fees page and click **Delete**. A message displays asking if you are sure. Click **Confirm**. The fee is deleted.

NOTE: You may only delete fees at the highest level at which the fee exists. Thus, if the fee exists at the Corporation level, you must delete the fee on the Corporation record. If the fee exists at the Client level but not the Corporation, you must edit the fee on the Client record.

NOTE: If the fee is also present at the assignment level, but has not been overridden there, deleting it at the Job Order level also deletes the fee at the Assignment level. If the fee has been overridden at the Assignment level, then deleting at the Job Order level does NOT delete the fee at the Assignment level. However, it does change the Added From field to the next highest level where the overridden fee is present. For example, if a Fee existed at the Job Order but was overridden at the Assignment level and you delete the Fee at the Job Order level, the Added From field on the Assignment will change from Job Order to Assignment (since Assignment is the next highest level containing the overridden fee).

## The Assignment Record

The Fees grid on the Assignment record is located on the Fees segment and displays fee paybill codes existing at either the Corporation, Client, Job Order or Assignment level.

The Fee Grid on the Fees segment displays the following information:

- **Fee:** Indicates the fee paybill code associated with this Assignment. You can click on the link to go directly to the fee paybill code record.
- **Type:** Indicates whether the Rate is a percentage of the billing amount (Percentage) or an amount per billed unit/hour (Rate).
- **Rate:** The actual rate of the fee. This rate is either a percentage of the billing amount (if the Type is Percentage) or an amount per billed until/hour (if the Type is Rate).
- **Added From:** This indicates where the fee paybill code populating the grid is coming from. If the paybill code exists on the Corporation record, this column will read "Corporation". If the paybill code exists on the Client record but not the Corporation record, this column will read "Client". If the code exists on the Job Order, but not the Corporation or Client, this column will read "Job Order". If the code exists on the Assignment, but not the Corporation, Client or Job Order, this column will read "Assignment".
- **Override From:** If the fee paybill code's Added From is Corporation, Client, Job Order or Assignment, you can override the information at the Assignment level. For example, the Job Order might have a 5% fee set up. This can be overridden at the Assignment level so that this specific Assignment has a different percent fee (like 3%). If the paybill fee has been overridden at some point, this column will display the lowest level at which the record was overridden.
- **Created Dt:** Indicates the date the fee PayBill Code was added to the Assignment record (whether as a result of being added directly at the Assignment level or being inherited from a higher level).
- **Updated Dt:** Indicates the date the fee PayBill Code was last edited.

To add a fee, click the **Add** button below the Fees grid.

1. In the *Fee* field, use the drop list to select the fee paybill code you want to add to the client record. Any fee already added at the corporation, client job order or assignment level OR any inactive fee will not show up on the list. (REQUIRED)
2. In the *Type* field, use the Code Selection icon to select whether the rate will be a percentage of the billing amount (Percentage) or a rate per billed hour/unit (Rate). (REQUIRED)
3. In the *Rate* field, type the rate of the fee. The rate allows up to three decimal places. The way the rate is applied (e.g. as a percentage or amount per hour/unit) is determined by the Type field. (REQUIRED)
4. In the *Notes* field, enter any other information you want to include about the fee. This is optional.
5. When you are satisfied with your selections, click **Confirm**.

You can either override a fee added from Corporation, Client or Job Order at the Assignment level or you can revert an overridden fee to once again use the information from the Corporation, Client or Job Order level. If the Added From column reads "Assignment", use the **Edit** functionality instead.

NOTE: If you decide not to use a fee set up at the corporation, client or job order level for this assignment (but want the fee to be available for other assignment records), override the fee and change the rate to 0.00. This ensures that the fee calculates to a 0.00 amount.

To override or revert a fee:

1. Select the fee you want to revert or override (by clicking on the radio button) and then click **Override/Revert**.
2. The next window that displays depends on the condition of the fee record.
  - a. If the fee is not currently overridden, the Override Fee window displays (see step 3).
  - b. If the fee is already overridden, a window displays giving you the choice of performing an override or a revert.
    - i. If you select Revert and click **Confirm**, the system displays a window asking you the higher level to which you want to revert. If the fee has never been overridden, you will have only one option. However, if it has been overridden, you can choose which level you want to revert (e.g. Corporation, Client or Job Order). Once you click **Confirm**, the override is removed and the Type and Rate from the selected record is used. Skip to Step 7.
    - ii. If you select Override and click **Confirm**, the Override Fee window displays (see Step 3).
3. In the *Type* field, use the Code Selection icon to select whether the Rate will be a percentage of the billing amount (Percentage) or a rate per billed hour/unit (Rate). (REQUIRED)
4. In the *Rate* field, type in the rate of the fee. The Type determines whether this rate is a percentage of the billing amount (Percentage) or a rate per billed hour/unit (Rate).
5. In the *Notes* field, type in any extra information about the override. This is optional.
6. When you are satisfied with your selections, click **Confirm**.
7. If you have selected to Override a fee added from Corporation, Client or Job Order, the Override From column on the Fees grid displays "Assignment". If you have reverted back to the Corporation, Client or Job Order fee information, the Override From column will be empty.

To edit a fee, select the radio button of the fee on the Fees grid and click **Edit**. The Edit page looks exactly like the Add page, except that the Fee Code is non-editable and Rate is not required. You can, however, use the

Jump icon to move to the fee paybill code record. Make whatever changes are needed to the Type, Rate and/or Notes field and then click **Confirm** to save your changes.

NOTE: You may only edit fees at the highest level at which the fee exists. Thus, if the fee exists at the Corporation level, you must edit the fee on the Corporation record. If the fee exists at the Client level but not the Corporation, you must edit the fee on the Client record. If the fee exists at the Job Order level, but not the Corporation or Client level, you must edit the fee on the Job Order record.

To delete a fee, select the radio button of the fee on the Fees page and click **Delete**. A message displays asking if you are sure. Click **Confirm**. The fee is deleted.

NOTE: You may only delete fees at the highest level at which the fee exists. Thus, if the fee exists at the Corporation level, you must delete the fee on the Corporation record. If the fee exists at the Client level but not the Corporation, you must edit the fee on the Client record. If the fee exists at the Job Order level, but not the Corporation or Client level, you must delete the fee on the Job Order record.

### A Final Note about Client, Job Order and Assignment Association

Finally, keep in mind, a Client record gets its association to a Corporation based on the Branch associated with the Client. The Client's Corporation (for Fee purposes) is the default Corporation for the associated Branch.

A Job Order and an Assignment record get their Corporation associated from the Financials page.

Therefore, it is possible for a Job and/or Assignment associated with a Client to have a different Corporation (for Fee purposes) than the Client. If this is the case, PayBill Fee Codes added to the Corporation record associated with the Client will not update the Job Order or the Assignment.

If you find that levels are not updating as you would expect, make sure that the Corporation on each level is consistent.

## Posting Timecards

Once your fees are set up, Adapt takes over. If a timecard has a fee-applicable PayBill Code, then any associated fees on the assignment record are automatically added when the timecard is posted. For example, if a PayBill Code is ACA Fee applicable, then any ACA PayBill Fee Code set up on the Assignment record is automatically added to the timecard when it is posted. If a PayBill Code is Other Fee applicable, then any Other PayBill Fee Code set up on the Assignment record is automatically added to the timecard when it is posted.

When you print invoices from the timecard, the fees are listed as line items, just as any other paybill code is listed.

## Year-End Reporting

At the end of the year, employers are tasked with reporting ACA information to the government. To gather and report all necessary data, Adapt takes a five-step approach:

- Preparing for Year-End Reporting
- Running the ACA Update
- Creating an ACA Export File
- Editing the Export File
- Uploading the File to Greenshades or using the data to manually complete the 1095-C or 1095-B forms.

# Preparing for Year-End Reporting

In order to get the most out of ACA Year-End Reporting, you should ensure that the following are up-to-date and accurate.

- Administration > Manage Healthcare Act: Ensure the record for the year on which you are reporting is correct (see [here](#) for more details).
- Administration > Manage Lists > Healthcare Offer of Coverage: Make sure that all offer codes (e.g. 1A, 1B, 1C, etc.) match the list provided by the IRS and that the codes have been properly applied to Healthcare Offer, No Offer and Cancellation activities (see [here](#) for more details).
- Administration > Manage Lists > Healthcare Plans: Make sure that the Code Description for all plans that represent Minimum Essential Coverage have the character string “(MEC)” (without the quotation marks) somewhere in the description (see [here](#) for more details).
- Administration > Manage Lists > Healthcare Cancellation Reasons: Ensure that at least one code designates cancellations resulting from employee termination and that this code has been used on all Cancellation Activities that resulted from an employee being terminated (see [here](#) for more details).
- Candidate > Candidate Activities > Healthcare Activities: Make sure all healthcare activities have been added and that the information on each activity is correct. You can use various resources, including the Employee record, the ACA Participation Widget and existing ACA reports to help determine activities that should be added or updated. For more information on the Healthcare Activities, see [here](#). For more information on checking the Employee record, see [here](#). For more information on using the ACA Participation Widget, see [here](#). For more information on ACA reports, see [here](#).

## Running the ACA Update

NOTE: If you are planning to report all working employees (rather than only eligible employees), this section is not needed. However, you will need to review and edit the list of employees in the ACA Export File (e.g. remove those that were not eligible or were tracked using another software product).

NOTE: If you use Combined Corp, you must run the ACA Update Process for each tax group separately and then again for the Combined Corp.

In order to prepare your system for Year-End Processing, follow these steps:

1. In the first week of January 2026, run a final [ACA Update](#) through January 1, 2026. Since January is the Stability period for most staffing services, the system will archive the existing Current records and use the Trending records to create new Current records. This ensures that you capture any employees who become ACA eligible before the end of the year.
2. Create an ACA Export File (see [here](#)).
3. If you haven't already, create a new Healthcare Act Information (Administration > Manage Healthcare Act) record for the new year for each corporation from which you pay employees (see [here](#) for information on creating a Healthcare Act Information record). Inactivate the record from step 1 and activate the record from this step.
4. At some point afterward, run a normal ACA Update. This creates trending records for the new measurement period based on the Healthcare Act Information record from step 3.

# Creating an ACA Export File

The ACA Data Export functionality in Adapt prepares your data for reporting Affordable Care Act information to the government. The resulting output presents directly in Excel (as a multi-tab workbook).

NOTE: The ACA Data Export does not "save" any information in the system. Therefore, if, after your first data export, you need to update some Healthcare activities to ensure the correct code is selected, you may do so and then re-run the ACA Data Export. You can also simply edit the spreadsheet if only a few codes need to be changed.

To create an ACA Export File:

1. Access **Administration > Administration > Manage Healthcare Act**.
2. The Manage Healthcare Act page displays.
3. Select **ACA Data Export** (from the right-side menu).
4. The Create ACA Data Export window displays.
5. In the *Report Year* field, select the year for which you are reporting ACA information. This is Required.
6. In the *Corporation* field, use the drop list to select the corporation for which you are gathering ACA information. You can select from a list of active corporations. If you are combining corporations (due to Common Ownership requirements), select **<Combined Corp>**. This is Required.
7. In the *Employees* field, select whether you want to include all working employees, only Eligible Employees or both eligible employees and those that received an ACA Offer (whether Eligible or Not). Select **All Working Employees** to include all employees that had a timecard containing ACA applicable hours during the reporting year. This excludes contractors as well as employees that only received non-ACA wages. Select **Eligible** to include all employees calculated by the ACA Update Process to be Eligible. Select **Eligible + Offered** to include all employees normally selected by the Eligible options as well as employees that received an Offer of Coverage (whether Eligible or not). This is Required.
8. In the *Form Type* field, select whether you want data for the 1095-B or 1095-C form. This is Required.

You must complete the 1095-C Form if you have 50 or more full-time (or full-time equivalent) employees.

If you have less than 50 full-time (or full-time equivalent) employees, you must complete Form 1095-B if the following two conditions apply: 1) you offer health coverage and 2) you are "self-insured" (your company pays its medical bills rather than an insurance company).

If you have less than 50 full time employees AND do not offer health coverage OR you have less than 50 full-time employees AND you are not "self-insured", you do not need to complete either form.

Since requirements can change at any time, please check with your accountant and/or legal counsel to determine which Form, if any, needs to be completed.

9. In the *Line 16 Safe Harbor* field, select the Safe Harbor method (if any) that you plan to use. This option helps determine the contents of Line 16 on the 1095C form.

NOTE: Safe Harbors are not required under the Affordable Care Act.

The IRS offers three Safe Harbors under the Affordable Care Act: W2 Wages, Rate of Pay and Federal Poverty. W2 Wages is typically used by employers with full-time employees who regularly work 40 hours a week and whose compensation is unlikely to decrease during the year. Rate of Pay is typically used by employers with hourly employees. Federal Poverty is typically used by employers

with seasonal employees or that use a look-back measurement period to determine if variable/seasonal employees have full-time status.

To use the W2 Wages Safe Harbor, select **Form W-2**.

To use the Rate of Pay Safe Harbor, select **Rate of Pay**.

To use the Federal Poverty Safe Harbor, select **Federal Poverty Line**.

If you choose not to use or are not qualified to use Safe Harbors, select **None**.

NOTE: Please see [here](#) for an explanation of the way Safe Harbor Codes are determined. Codes 2A through 2D are calculated based on Healthcare Activities. Codes 2F through 2H are based on your selections above and are ONLY used if codes 2A, 2B, 2C and 2D do not apply.

10. The *1094-C Authoritative Transmittal* field is optional and reserved for future use. Placing a check in the box or leaving it blank does not make any difference in the resulting export file.
11. If you are part of an Aggregated ALE Group, place a check in the *Member of Aggregated ALE Group* checkbox.

An Aggregated ALE Group is a group of companies with common ownership whose information might need to be combined to determine if they are subject to the employer shared responsibility provisions of the ACAS and therefore, would need to file as Applicable Large Employers (ALE). The IRS requires employers to identify if they are part of an Aggregated ALE Group and if so, the names and EINs of other members of the group.

12. When you are satisfied with your selections, click **Process**. The system gathers data and outputs the information in an Excel spreadsheet.

## Editing the 1095-C Spreadsheet

NOTE: Do not change any labels, names or formulas in the template. In addition, do not add or delete any columns. However, you may change any data provided by the template. You may also add or delete rows of data.

The Spreadsheet defaults some data from your Adapt database. However, not all cells on the spreadsheet contain data and therefore, some must be manually completed by your staffing service.

Since regulations can change at any time, you are responsible, based on IRS instructions, for determining the information on the spreadsheet that is required by the IRS.

The spreadsheet has the following worksheets:

- Employees
- CoveredIndividuals
- Aggregated ALE Group Members
- Total Employee Count
- Full-Time Employee Count

### Completing the Employees Worksheet

The Employees worksheet contains one row for every employee on which you are reporting. The following table displays each column on the worksheet, where the data resides in Adapt (in [Segment Name] > [Field name] format), whether it is required by Greenshades and any additional comment about the column data.

NOTE: Anything not required can be left blank.

| Column                           | Defaults From                                                                                               | Required (by Greenshades) | Comment                                                    |
|----------------------------------|-------------------------------------------------------------------------------------------------------------|---------------------------|------------------------------------------------------------|
| <b>EmployeeID</b>                | Summary > Export ID                                                                                         | Yes                       |                                                            |
| <b>SSN</b>                       | Personal Information > SSN                                                                                  | Yes                       |                                                            |
| <b>LastName</b>                  | Summary > Last Name                                                                                         | Yes                       |                                                            |
| <b>FirstName</b>                 | Summary > First Name                                                                                        | Yes                       |                                                            |
| <b>MiddleName</b>                | Summary > Middle Name                                                                                       | No                        | You can also use a middle initial.                         |
| <b>Address1</b>                  | Personal Information > Tax Address 1                                                                        | Yes                       | If blank, use Personal Information > Home Address.         |
| <b>Address2</b>                  | Personal Information > Tax Address 2                                                                        | No                        | If blank, use Personal Information > Home Address.         |
| <b>City</b>                      | Personal Information > Tax Address > City                                                                   | Yes                       | If blank, use Personal Information > City.                 |
| <b>State</b>                     | Personal Information > Tax Address > State                                                                  | Yes                       | If blank, use Personal Information > State.                |
| <b>Zip</b>                       | Personal Information > Tax Address > Postal Code                                                            | Yes                       | If blank, use Personal Information > Postal Code.          |
| <b>ZipExtension</b>              | Leave Blank                                                                                                 | No                        |                                                            |
| <b>CountryCode</b>               | Defaults to US.                                                                                             | Yes                       |                                                            |
| <b>BirthDate</b>                 | Personal Information > Date of Birth                                                                        | No                        |                                                            |
| <b>HireDate</b>                  | Leave Blank                                                                                                 | No                        |                                                            |
| <b>Department</b>                | Leave Blank                                                                                                 | No                        |                                                            |
| <b>Location</b>                  | Leave Blank                                                                                                 | No                        |                                                            |
| <b>EmployeeEmail</b>             | Summary > Email 1.                                                                                          | No                        | If blank, use Summary > Email 2.                           |
| <b>HomePhone</b>                 | Leave Blank                                                                                                 | No                        | Alphanumeric format.                                       |
| <b>ElectronicConsent</b>         | Default to False                                                                                            | No                        |                                                            |
| <b>EmployeeAgeJan1</b>           |                                                                                                             | No                        | Reserved for Future Use.                                   |
| <b>PlanStartDate</b>             |                                                                                                             | Yes                       | Enter the date on which the health insurance plan started. |
| <b>OfferCodeAll12Months</b>      | Leave Blank                                                                                                 | No                        | Please see IRS rules for offer codes.                      |
| <b>OfferCodeJan-OfferCodeDec</b> | If a Candidate did not work in a month, the code is 1H. If the Candidate did work, but there is no Offer/No | Yes                       | Please see IRS rules for offer codes.                      |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                               |        |                                                                                                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Offer/Cancel activity during the prior 12 months, the code is 1H. If the Candidate did work and there is an activity during the prior 12 months, the most recent Offer/No Offer/Cancel code is used based on the Coverage Begin and End Date. |        |                                                                                                                                     |
| <p>Offer Codes are REQUIRED. If any cell in the OfferCode month columns (e.g. OfferCodeJan, OfferCodeFeb, etc.) is blank, you will need to manually enter an offer code using the list of indicator codes specified by the IRS (please see IRS documentation for a list of indicator codes). Greenshades will NOT accept a spreadsheet if any cell in any OfferCode month column is blank. NOTE: You may leave cells in the OfferCodeAll12Months column blank if you have all cells in the OfferCode month columns populated.</p> |                                                                                                                                                                                                                                               |        |                                                                                                                                     |
| <b>EmpReqContributionAll12Months</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                               | Yes/No |                                                                                                                                     |
| <b>EmpReqContributionJan-EmpReqContributionDec</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Administration > Healthcare Act Record > Lowest Cost Employee Premium Share.                                                                                                                                                                  | Yes/No | Filled in when the OfferCode<Month> is 1B, 1C, 1D, 1E, 1J or 1K.                                                                    |
| <b>SafeHarborCodeAll12Months</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ACA Data Export > Line 16 Safe Harbor field.<br><br>See the following subsection "Determining Safe Harbor Codes" for more details.                                                                                                            | Yes/No | Applicable Section 4980H Safe Harbor. It may or may not be required based on your reporting needs. See the IRS rules for more info. |
| <b>SafeHarborCodeJan-SafeHarborCodeDec</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ACA Data Export > Line 16 Safe Harbor field.<br><br>See the following subsection "Determining Safe Harbor Codes" for more details.                                                                                                            |        | Applicable Section 4980H Safe Harbor. It may or may not be required based on your reporting needs. See the IRS rules for more info. |
| <p>These columns are only required if your staffing service qualifies for specific Safe Harbor and/or Other Relief (please see the IRS instructions for completing the 1095-C to see if you qualify for relief). If you do not qualify, you can leave these cells blank.</p>                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                               |        |                                                                                                                                     |
| <b>ZipCodeAll12Months</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                               | No     | Reserved for future use.                                                                                                            |
| <b>ZipCodeJan-ZipCodeDec</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                               | No     | Reserved for future use.                                                                                                            |
| <b>SelfInsureCoverageEmployerProvided</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                               | Yes    | If you provided self-insured coverage for this employee, enter <b>True</b> . If you did not, enter <b>False</b> .                   |
| <b>Correction</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                               | No     |                                                                                                                                     |

## Determining Safe Harbor Codes

Determining Safe Harbor Codes is a complex, but logical process. The following provides a step-by-step look at how Safe Harbor Codes are determined by Adapt.

NOTE: Keep in mind that you may edit any Safe Harbor Code determined by Adapt on the Export spreadsheet.

1. System checks to see if the *Employee* field on the ACA Export has either “Eligible” or “Eligible + Offered” selected. If it is not, all cells in this area default to blank. If either “Eligible” or “Eligible + Offered” is selected, go to step 2.
2. System checks to see if any ACA applicable wages were paid to the employee at any time during the month. If no ACA applicable wages were paid during the month, the code “2A” is placed in the appropriate month’s cell. For example, if the employee was not paid any ACA applicable wages in October, the cell for the employee’s row in the SafeHarborCodeOct column would have “2A” as its contents. If the employee was paid ANY ACA applicable wages during the month, go to step 3.

NOTE: IRS requirements specify that if the employee was terminated during the month, the 2A code should not be used. Due to the rarity of the occurrence and to improve performance, Adapt does not make any specific check as to whether an employee was terminated. If the employee was not paid ACA applicable wages during the same month that they were terminated, then you should remove the 2A code from the cell and enter an applicable code (see the steps below to determine the applicable code). Again, this only applies if the employee received no ACA applicable wages during the SAME month that he/she was terminated.

3. System checks to see if the month has an associated Offer Code of “1G”. If it is 1G, go to step 7. If it is not 1G, go to step 4.
4. System checks the Coverage Begin Date of the most recent Healthcare – Accept activity. If it is on or before the first date of the month, go to step 5. If it is not, go to step 7.
5. System checks if the code used for the Healthcare – Accept activity has the character string “(MEC)” in the Code Description. If it does, go to step 6. If it does not, go to step 7.
6. System checks the Coverage End Date of the most recent Healthcare – Cancel activity (if any). If the End Date occurs after the Coverage Begin Date found by Step 4 AND occurs before the end of the current month, go to step 7. If either of the above conditions are not true (or if there is no Cancel activity), the code “2C” is placed in the appropriate month’s cell.

NOTE: The code “2C” basically specifies that the employee was covered by an MEC plan for the entirety of the month.

7. System checks to see if the month begin checked falls between the employee’s measurement period begin date and the administrative period end date. If it does, go to step 8. If it does not, go to step 9.
8. System checks to see if the employee’s administrative status (on their ACA record) is “New”. If it is, the code “2D” is placed in the appropriate month’s cell. If it is not, go to step 9.

NOTE: The code “2D” basically specifies that the employee was in his/her limited non-assessment period during the month.

9. System retrieves the most recent ACA record (Current or Archived) where the associated month is in the stability period. If one exists, go to step 10. If one does not exist, go to step 11.

10. System checks to see if the ACA record shows an Eligibility Status of "Not Eligible". If it does, go to step 11. If it does not, go to step 15.
11. System checks to see if the employee has a Healthcare – Accept or Healthcare – Cancel activity in the current reporting year or the previous calendar year. If the employee does have one of these activities, go to step 12. If the employee does not have one of these activities, the code "2B" is placed in the appropriate month's cell.
12. System checks the most recent Accept or Cancel activity for the associated month. If the most recent activity was Healthcare – Accept, go to step 13. If the most recent activity was NOT Healthcare – Accept, the code "2B" is placed in the appropriate month's cell.
13. System checks if the Coverage Begin Date associated with the most recent Healthcare – Accept activity is on or before the 1<sup>st</sup> of the associated month. If it is, go to step 14. If it is NOT, the code "2B" is placed in the appropriate month's cell.
14. System checks if the Healthcare – Accept Reasons code associated with the Accept activity found in Step 12 has the character string "(MEC)" in the Code Description. If it does, go to step 20. If it does not, the code "2B" is placed in the appropriate month's cell.
15. System checks if the Eligibility Status of the most recent healthcare record for the employee is "Eligible". If it is, go to step 16. If it is not, go to step 20.
16. System checks to see if the employee has a Healthcare – Accept or Healthcare – Cancel activity in the current reporting year or the previous calendar year. If the employee does have one of these activities, go to step 17. If the employee does not have one of these activities, go to step 20.
17. System checks the most recent Accept or Cancel activity for the associated month. If the most recent activity was Healthcare – Cancel, go to step 18. If the most recent activity was NOT Healthcare – Cancel, go to step 20.
18. System checks if the Coverage End Date of the most recent Cancel activity is in the associated month. If it is, go to step 19. If it is not, go to step 20.
19. System checks if the Healthcare – Cancel Reasons code used with the Cancel activity has the character string "(Terminated)" in the Code Description. If it does, the code "2B" is placed in the appropriate month's cell. If it does not, go to step 20.
20. System checks the ACA Export to see what, if anything, was selected in the Line 16 Safe Harbor field. If "Form W-2" was selected, go to step 21. If "Federal Poverty Line" or "Rate of Pay" was selected, go to step 25. If "None" was selected, cell content is left "as is" and safe harbor determination is complete.
21. System checks to see if the Safe Harbor Code for ALL months (January through December) is blank on the employee's row. If all cells are blank, go to step 22. If all cells are not blank, then cell content is left "as is" and safe harbor determination is complete.
22. System retrieves the most recent Accept, Offer or Decline activity from the previous calendar year. If the most recent activity is a Decline with a Decline Date before January 1<sup>st</sup> of the current reporting year, the code "2F" is entered in the SafeHarborCodeAll12Months column and safe harbor determination is complete. If this is not the case, go to step 23.

23. System checks to see if the most recent activity determined by step 22 is an Offer activity with a Coverage Begin Date before January 1<sup>st</sup> of the current reporting year. If it is, go to step 24. If it is not, then cell content is left "as is" and safe harbor determination is complete.
24. System checks to see if the employee has an Accept or Decline activity AFTER the last Offer activity AND before January 1<sup>st</sup> of the current reporting year. If an Accept or Decline activity meets this criteria, then cell content is left "as is" and safe harbor determination is complete. Otherwise, the code "2F" is entered in the SafeHarborCodeAll12Months column and safe harbor determination is complete.
25. System checks to see if the safe harbor code for the month is blank. If it is, go to step 26. If it is not, cell content is left "as is" and safe harbor determination is complete.
26. System retrieves the most recent Accept, Offer or Decline activity for the month being determined. If the most recent activity is a Decline with a Decline Date on or before the end of the month being determined, the code "2G" is used for the month being determined IF the option "Federal Poverty Line" was selected and code "2H" is used for the month being determined IF the option "Rate of Pay" was selected (safe harbor determination is complete). If this is not the case, go to step 27.
27. System checks to see if the most recent activity determined by step 26 is an Offer activity with a Coverage Begin Date before the 1<sup>st</sup> of the month being determined. If it is, go to step 28. If it is not, then cell content is left "as is" and safe harbor determination is complete.
28. System checks to see if the employee has an Accept or Decline activity AFTER the last Offer activity that is in effect for the month being determined. If an Accept or Decline activity meets this criteria, then cell content is left "as is" and safe harbor determination is complete. Otherwise, the code "2G" is used for the month being determined IF the option "Federal Poverty Line" was selected and code "2H" is used for the month being determined IF the option "Rate of Pay" was selected (safe harbor determination is complete).

### Completing the CoveredIndividuals Worksheet

This worksheet ONLY needs to be filled out if you are a Self-Insured Health Coverage Employer. There should be one row for every Covered Individual, including the employee. None of the information defaults from Adapt so you will need to manually enter all data required or copy in the information from your benefits provider. The following table displays each column on the worksheet, whether it is required by Greenshades and any additional comment about the column data.

NOTE: Anything not required can be left blank.

| Column                      | Required (by Greenshades) | Comment                                                                                             |
|-----------------------------|---------------------------|-----------------------------------------------------------------------------------------------------|
| EmployeeID                  | Yes                       | See the IRS for rules for Self-Insured Health Coverage Employers.                                   |
| CoveredIndividualLastName   | Yes                       | Comes from Summary > Last Name. See the IRS for rules for Self-Insured Health Coverage Employers.   |
| CoveredIndividualFirstName  | Yes                       | Comes from Summary > First Name. See the IRS for rules for Self-Insured Health Coverage Employers.  |
| CoveredIndividualMiddleName | No                        | Comes from Summary > Middle Name. See the IRS for rules for Self-Insured Health Coverage Employers. |

|                                |        |                                                                                                            |
|--------------------------------|--------|------------------------------------------------------------------------------------------------------------|
| <b>CoveredIndividualSSN</b>    | Yes    | If available. See the IRS for rules for Self-Insured Health Coverage Employers.                            |
| <b>CoveredIndividualDOB</b>    | Yes/No | Only required if SSN is not available. See the IRS for rules for Self-Insured Health Coverage Employers.   |
| <b>CoveredAll12Months</b>      | No     | Should display either "True" or "False". See the IRS for rules for Self-Insured Health Coverage Employers. |
| <b>CoveredJan - CoveredDec</b> | Yes    | Should display either "True" or "False". See the IRS for rules for Self-Insured Health Coverage Employers. |

### Completing the Aggregated ALE Group Members Worksheet

This worksheet must be completed ONLY if you are a member of an Aggregated ALE Group for any month of the calendar year. You need to add one row for every member of the Aggregated ALE Group in which you are a member.

However, if you selected "Member of Aggregated ALE Group", information defaults into this worksheet as indicated below.

| Column                                      | Defaults From                                                                                                                                                                                                                                                                | Required (by Greenshades) | Comment                                                                                        |
|---------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|------------------------------------------------------------------------------------------------|
| <b>Company/Member Name</b>                  | If "Member of Aggregated ALE Group" is selected, all other Corporations other than the one submitting the form is listed. Manage Corporation > Corporation Name. Up to 30 are listed. If a Combined Corporation has been designated, other Corporations are not listed here. | Yes                       |                                                                                                |
| <b>MemberEIN</b>                            | If "Member of Aggregated ALE Group" is selected, all other Corporation EINs other than the one submitting the form is listed. Manage Corporation > Federal EIN. Up to 30 are listed. If a Combined Corporation has been designated, other Corporations are not listed here.  | Yes                       |                                                                                                |
| <b>Avg Monthly Full-Time Employee Count</b> | "Full-time" employees are determined by counting the number of employees calculated as "Eligible" by the ACA process for any day of the month. The totals for each month are summed to get an annual total. This total is then divided by 12.                                | Yes                       | Entering this information allows proper sorting of the ALE member list on your 1094-C Part IV. |
| <b>Avg Monthly Total Employee Count</b>     | Adapt gets a monthly total based on timesheets with work week begin and end date ranges that                                                                                                                                                                                 | Yes                       | This is entered ONLY if you indicate and use the 98% Offer Method (since                       |

|  |                                                                                                                                 |  |                                                                                                                    |
|--|---------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------|
|  | include the first of the month. These monthly totals are summed to get an annual total. The annual total is then divided by 12. |  | Full-Time Employee Count is not required). It allows proper sorting of the ALE member list on your 1094-C Part IV. |
|--|---------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------|

### Completing the Total Employee Group Worksheet

This worksheet displays your total employee count (including Full-Time and non-Full-Time employees plus employees in a Limited Non-Assessment Period) for each calendar month. Adapt gets this count based on timesheets with work week begin and end date ranges that include the first of the month.

This information is required. If needed, you can edit this information in the spreadsheet or on the Greenshades Year-End Forms portal.

### Completing the Full-Time Employee Count Worksheet

This worksheet displays the number of full-time employees for each month in the “Full-Time Employee Count” column. “Full-time” employees are determined by counting the number of employees calculated as “Eligible” by the ACA process for any day of the month.

## Editing the 1095-B Spreadsheet

NOTE: Do not change any labels, names or formulas in the template. In addition, do not add or delete any columns. However, you may change any data provided by the template. You may also add or delete rows of data.

Since regulations can change at any time, you are responsible, based on IRS instructions, for determining the information on the spreadsheet that is required by the IRS.

The spreadsheet has the following worksheets:

- 1095 B Forms
- Covered Individuals

### Completing the 1095 B Forms Worksheet

This worksheet requires one row for every 1095 B form recipient. The following table displays each column on the worksheet, where the data resides in Adapt (in [Segment name] > [Field name] format), whether it is required by Greenshades and any additional comment about the column data.

NOTE: Anything not required can be left blank.

| Column               | Defaults From              | Required (by Greenshades) | Comment |
|----------------------|----------------------------|---------------------------|---------|
| <b>EmployeeID</b>    | Summary > Export ID #      | Yes                       |         |
| <b>ControlNumber</b> | Leave Blank                | No                        |         |
| <b>SSN</b>           | Personal Information > SSN | Yes                       |         |
| <b>LastName</b>      | Summary > Last Name        | Yes                       |         |
| <b>FirstName</b>     | Summary > First Name       | Yes                       |         |

|                                        |                                                  |        |                                                     |
|----------------------------------------|--------------------------------------------------|--------|-----------------------------------------------------|
| <b>MiddleName</b>                      | Summary > Middle Name                            | No     | You can also use a middle initial.                  |
| <b>Address1</b>                        | Personal Information > Tax Address 1             | Yes    | If blank, use Personal Information > Home Address.  |
| <b>Address2</b>                        | Personal Information > Tax Address 2             | No     | If blank, use Personal Information > Home Address.  |
| <b>City</b>                            | Personal Information > Tax Address > City        | Yes    | If blank, use Personal Information > City.          |
| <b>State</b>                           | Personal Information > Tax Address > State       | Yes    | If blank, use Personal Information > State.         |
| <b>CountryCode</b>                     | Defaults to US.                                  | Yes    |                                                     |
| <b>ZIP</b>                             | Personal Information > Tax Address > Postal Code | Yes    | If blank, use Personal Information > Postal Code.   |
| <b>ZIPExtension</b>                    | Leave Blank                                      | No     |                                                     |
| <b>EmployeeDateofBirth</b>             | Personal Information > Date of Birth             | No     |                                                     |
| <b>Hire Date</b>                       |                                                  | No     | Date format is mm/dd/yyyy.                          |
| <b>Department</b>                      |                                                  | No     | No data will be defaulted into this optional field. |
| <b>Location</b>                        |                                                  | No     | No data will be defaulted into this optional field. |
| <b>Email</b>                           |                                                  | No     | No data will be defaulted into this optional field. |
| <b>ElectronicConsent</b>               |                                                  | No     | No data will be defaulted into this optional field. |
| <b>OriginOfPolicyCode</b>              | Defaults to B.                                   | Yes    | Please see IRS regulations for a list of codes.     |
| <b>EmployerSponsorCoverageName</b>     | Corporation Main > Corporation Name              | Yes/No | Please see IRS regulations for more information.    |
| <b>EmployerSponsorCoverageEIN</b>      | Corporation Main > Federal EIN                   | Yes/No | Please see IRS regulations for more information.    |
| <b>EmployerSponsorCoverageAddress1</b> | Corporation Main > Address Line 1                | Yes/No | Please see IRS regulations for more information.    |
| <b>EmployerSponsorCoverageAddress2</b> | Corporation Main > Address Line 2                | Yes/No | Please see IRS regulations for more information.    |
| <b>EmployerSponsorCoverageCity</b>     | Corporation Main > City                          | Yes/No | Please see IRS regulations for more information.    |

|                                             |                          |        |                                                  |
|---------------------------------------------|--------------------------|--------|--------------------------------------------------|
| <b>EmployerSponsorCoverageState</b>         | Corporation Main > State | Yes/No | Please see IRS regulations for more information. |
| <b>EmployerSponsorCoverageZip</b>           | Corporation Main > Zip   | Yes/No | Please see IRS regulations for more information. |
| <b>EmployerSponsorCoverageZIP Extension</b> | Leave Blank              | No     |                                                  |
| <b>EmployerSponsorCoverageCountry</b>       | Defaults to US.          | Yes/No | Please see IRS regulations for more information. |
| <b>NeedsCorrection</b>                      |                          | No     | Leave Blank.                                     |

### Completing the Covered Individuals Worksheet

There should be one row for every Covered Individual, including the employee. None of the information defaults from Adapt so you will need to manually enter all data required or copy information received from your benefits provider. The following table displays each column on the worksheet, whether it is required by Greenshades and any additional comment about the column data.

NOTE: Anything not required can be left blank.

| Column                                 | Required (by Greenshades) | Comment                                                                                                    |
|----------------------------------------|---------------------------|------------------------------------------------------------------------------------------------------------|
| <b>Employee ID</b>                     | Yes                       | See the IRS for rules for Self-Insured Health Coverage Employers.                                          |
| <b>CoveredIndividualFirstName</b>      | Yes                       | See the IRS for rules for Self-Insured Health Coverage Employers.                                          |
| <b>CoveredIndividualMiddleName</b>     | No                        | See the IRS for rules for Self-Insured Health Coverage Employers.                                          |
| <b>CoveredIndividualLastName</b>       | Yes                       | See the IRS for rules for Self-Insured Health Coverage Employers.                                          |
| <b>CoveredIndividualSSN OrOtherTIN</b> | Yes                       | If available. See the IRS for rules for Self-Insured Health Coverage Employers.                            |
| <b>CoveredIndividualDateOfBirth</b>    | Yes/No                    | Only required if SSN is not available. See the IRS for rules for Self-Insured Health Coverage Employers.   |
| <b>CoveredAll12Months</b>              | No                        | Should display either "True" or "False". See the IRS for rules for Self-Insured Health Coverage Employers. |
| <b>CoveredJan - CoveredDec</b>         | Yes                       | Should display either "True" or "False". See the IRS for rules for Self-Insured Health Coverage Employers. |

# Submitting the ACA Spreadsheet to Greenshades

**IMPORTANT:** If you have an Offer Code of 1A for any month on the Employees worksheet of the 1095-C Spreadsheet AND a Safe Harbor code for the same month, you may receive a diagnostic message from Greenshades. This is due to an optional IRS regulation that specifies that any month in which an Offer Code of 1A exists (Code 1A in box 14 of the 1095-C form) should not have any Safe Harbor Code for that same month (Box 16 of the 1095-C form). As noted...this is an optional request from the IRS and therefore, you may safely ignore the diagnostic message or edit the ACA Spreadsheet to remove any Safe Harbor Code for months in which the Offer Code is 1A.

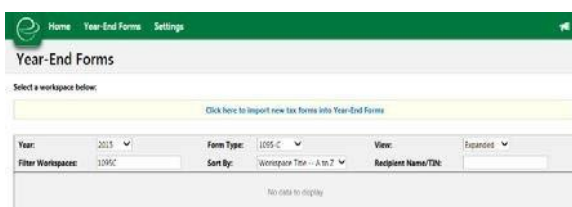
Once you have completed updating the Export File and have saved it to your local drive or a networked drive, it is time to submit it to Greenshades.

**NOTE:** As of the publication of this document, the latest Greenshades release had not been finalized and therefore, the instructions below may be slightly different than the actual Greenshades workflow.

1. Open a web browser and navigate to [www.DownloadMyForm.com](http://www.DownloadMyForm.com).
2. Greenshades' Online Account Login page displays.
3. If you already have login credentials, enter your email address and password and click **Login**.

If you do not have login credentials, click **First time here or need password help?** The Password Reset Request screen displays. Enter the email address with which you registered during the Bullhorn Greenshades sign up process. Click **Continue**. Greenshades will email you a new password. When you receive the email, click on the link contained in the email. You will be returned to the Account Login page where you can enter your new login credentials and click **Login**.

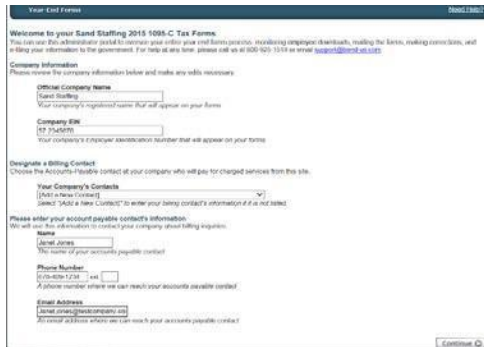
4. The Company Dashboard page displays. Upon first login, the dashboard will be blank. Click the **Year-End Forms** option at the top of the page.
5. The Year-End Forms page displays. Complete the Year and Form Type fields and select **Create New Formset**. For Year, select the year for which forms are being created. For Form Type, select either 1095-C or 1095-B.



6. The Import Forms Wizard > Upload page displays. Use the **Browse** button to access the Greenshades file created by the ACA Export File process. When you have selected the file, click **Next**.
7. The Import Forms Wizard > Company Info page displays. If you have already submitted your company information to Greenshades, you may select it using the drop-list immediately under the Company Info heading. This information may be edited if needed. Otherwise, select [Add New Company] then enter the requested information. Required fields are bolded. This information appears on your company's filing. When you are finished, click **Next**.
8. The Import Forms Wizard > Security page displays. A list of all registered Greenshades users for your company displays. Place a check in the box beside any user for which you want to give access to the new formset. When you are satisfied with your selections, click **Next**.
9. At this point, Greenshades will import your Greenshades file. Time can vary depending on the amount of data being uploaded and the number of users on the system at the time of upload. The page will

automatically refresh periodically. When the import is complete, the following message displays: "Your forms have finished importing." Click **Next**.

10. On the Year-End Forms page that displays, select the **View Forms** button.
11. When prompted to select a workspace, click the bolded line with your company name and the year and form type being imported.
12. The Welcome screen displays for your company and the form you are creating.

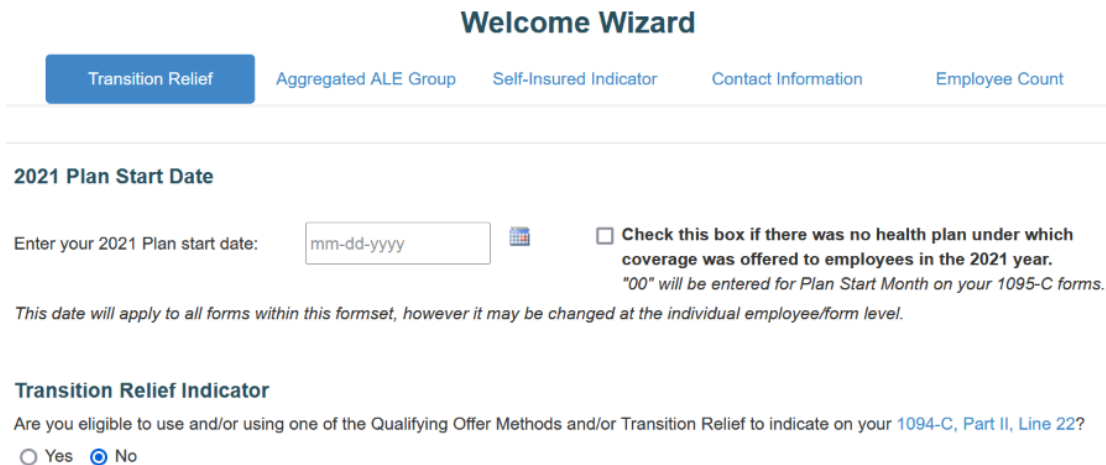


Confirm the *Official Company Name* and *Company EIN*.

Use the drop list on the Your Company's Contacts field to select a Billing Contact. If you would rather create a new contact, select **[Add a New Contact]** from the drop list.

Complete the Accounts Payable *Name*, *Phone Number* and *Email Address* fields. When you are satisfied with the information on the page, click **Next**.

13. The Welcome Wizard displays. Make sure the *Transition Relief* tab is selected. NOTE: The screen that displays will reflect the year for which forms are being processed.



Use the calendar control on the *Enter your 2025 Plan start date* field to select the initial start date of your plan. If this is not the beginning of the year (01-01-2025), select the **Yes** radio button in the *Non-Calendar Year Plans* section.

The other fields may or may not need editing depending on the needs of your staffing service. Please check with the IRS, your accountant and/or your legal representative if you are unsure whether the remaining fields should be completed. Please note, selecting additional options on this page may require additional fields to be completed on your export spreadsheet file.

When you are finished entering information on this page, click **Next**.

14. The Aggregated ALE Group tab displays. This information defaults from your export spreadsheet. You may edit the information and even add an ALE member by clicking the **Add ALE Member** button. When you are satisfied with the information entered for this tab, click **Next**.
15. The Self-Insured Indicator tab displays. If you are a “self-insured” employer, click the **Yes** radio button on the *Do you offer Self-Insured Health Coverage* field. Otherwise, leave the **No** radio button selected. When you are satisfied with your selection, click **Next**.
16. The Contact Information tab displays. Enter the *Contact Name* and *Phone Number* of the person at your business place that should be contacted if employees have questions. *MMREF PIN* is not required. When you are finished, click **Next**.
17. The Employee Count tab displays. This information defaults from the Export spreadsheet, but can be edited. Make sure **First Day of Each Month** is selected in the *Employee Count* drop list. When you are satisfied with the information on this page, click **Next**.
18. You are returned to the Welcome page. If you wish, Greenshades will archive your data for future reference. Make the appropriate selection then click **Next**.
19. The Checklist page displays. The checklist is a handy reminder of steps you can take prior to finalizing your forms. Not all steps are required and some steps carry external costs (although you can always exit out of a page before being charged). For example, *Employee Identity Verification* (number 3) is a service that verifies your employees against a social security number database. While this service is free, it is not required. The following steps focus on those steps you will need to complete to finalize your forms. However, feel free to click the other links to see what the option offers.

NOTE: If you log-out for any reason while working with the checklist, logging back in takes you to the initial Company Dashboard page. Clicking **Year-End Forms** will take you back to this checklist page allowing you to complete any remaining steps.

20. Select **Resolve Warnings With Your Forms** (Number 4). This option displays warnings concerning your forms. These warnings can result from a variety of circumstances (e.g. missing information, non-verified SSN, etc.). While Bullhorn suggests dealing with all of the warnings, you need to decide which ones to fix and which to leave as they are.

You can fix the warnings in two different ways. One is to click the **Edit** link and edit it directly within Greenshades. This is the quickest way. However, you will need to also make any relevant corrections within Adapt. For example, if you correct a missing SSN warning in Greenshades, you should also update the SSN field for the employee in Adapt.

The other way to fix the warning is to make the change in your Adapt software. After making the changes, you will need to return to the page and re-create the ACA Export file and then re-upload it to Greenshades.

21. Select **Verify Employer-Provided Insurance Information** (Number 5). The information displayed on this page comes from the steps you have completed thus far. However, it gives you a chance to re- confirm that the information presented is correct. You may edit the information, if needed.

NOTE: The Full-Time Employee Count column total calculates from the total number of 1095 forms created and therefore, might not match your actual count of full-time Employees.

When you are satisfied with the information displayed, place a check in the *I have reviewed the information and totals on this screen* checkbox and click **Finish**.

22. Select **Manage Employee Access** (Number 6). This allows you to designate whether employees should be able to view their 1095 forms online. Select the **Yes** or **No** radio button depending on your preference

and click **Continue**. The 1095-C Settings page displays. There is currently only one form available (Form 1095C). You can use the page to select whether an employee is allowed to edit his/her name, address or SSN when viewing the form online. If you elect to allow employees to edit their information, you can also designate who should receive a notification email about the change.

23. Select **Email Employees with Links to 1095-C Forms** (Number 7). This step is only required if you select Yes to Number 6 to allow employees to view their 1095 forms online. In this step, select the employees to whom to send an email with login information for viewing their 1095 forms online.
24. On Number 8, **Distribute any remaining 1095-Cs to your Employees**, you can select to have Greenshades print and mail your 1095-C forms (**Ask us to Mail Remaining 1095-Cs**) or download the forms and print/mail/deliver them yourself (**Distribute Remaining 1095-Cs Yourself**).

If you select the first option, you are taken to a page where you can place the order for Greenshades to print and mail the forms. NOTE: There is an external charge for doing this (see your checklist for the most current price).

If you select the second option, you are taken to a page that allows you to download and print the 1095-C forms for mailing/delivery.

25. Number 9, **E-File State 1095-C Returns**, allows you to file your form with certain states who require ACA reporting.
26. Number 10, **E-File US 1095-C Return**, allows you to file your form with the IRS. In actuality, this is your 1094 form (despite the reference to the 1095 form). Simply click the **File New** link to file your form. NOTE: Bullhorn strongly recommends correcting any high priority warnings before filing your form.

## Additional Notes

While this release provides great flexibility and power in terms of ACA compliance, some ACA Management areas will continue to be expanded...both over the short and long-term. For example:

- Termination handling (e.g. updating employee eligibility)
- Process result history and visibility by employee
- Electronic filing for government reporting

Finally, due to the complex nature of the business world, there may be situations or unique circumstances that have not been incorporated as of this release. If you use an alternate method of calculation or tracking, the system may not reflect the same information for government reporting purposes. If you have questions regarding special circumstances or would like to submit a change request, please contact Bullhorn support for additional information. Examples:

- Administration simplification (multiple period setup per plan year)
- Modified measurement period for protected groups under ACA
- One day/month rule (looking at eligibility when an employee has not worked at least one day in a given month)
- 1200 hour rule.