April 7, 2015

Ms. Jennifer Essary
Contracting Authority for Montague County
PO Box 56
Montague, TX 76251-0056

Dear Ms. Essary,

This information was previously sent via email to Montague County's HEBP contacts. We are sending this copy via postal mail for your convenience. Participation in this program is OPTIONAL.

The Affordable Care Act (ACA) requires reporting pursuant to Internal Revenue Code Sections 6055 and 6056 beginning in January 2016 for calendar year 2015. All employers with 50 or more full-time equivalent employees are affected. This reporting will consist of forms which must be provided both to employees and the IRS. The information provided will be used to determine: 1) whether individuals are subject to fines under the ACA individual mandate; 2) whether individuals are eligible for a federal premium subsidy or tax credit; and 3) whether employers are subject to penalties under the ACA employer mandate.

The Texas Association of Counties Health and Employee Benefits Pool (TAC HEBP) is offering the Affordable Care Act Reporting and Tracking Service (ARTS) which will enable you to produce your section 6055/6056 forms. ARTS will also provide measurement period tracking for 2016 and beyond, as well as affordability testing for groups who require employee contributions toward the cost of their own health coverage.

TAC will need to receive employee, payroll, and unpaid leave of absence files from you in order to provide this service. Please note that we have been in contact with several payroll software providers regarding these files. They have agreed to provide the files needed by ARTS, but have also indicated that their systems will be able to produce the required forms next January, as they are currently working on the necessary program updates. If you use a payroll system from one of these companies, you may not need ARTS – it is a service being offered by TAC and is completely optional to each of our groups. File specifications are enclosed, and we will be providing a spreadsheet template for those of you whose payroll software won't produce the files or does not provide an export function.

Enclosed is the ARTS Program Agreement, which you will need to provide in order for Montague County to participate. If so, please review, execute, and return this document to your Employee Benefits Consultant by April 30, 2015. TAC HEBP will send a revised interlocal agreement for the county to sign at a later date.

If you have any questions, do not hesitate to contact me.

Sincerely,

Lisa McCaig
Employee Benefits Consultant
(800) 456-5974
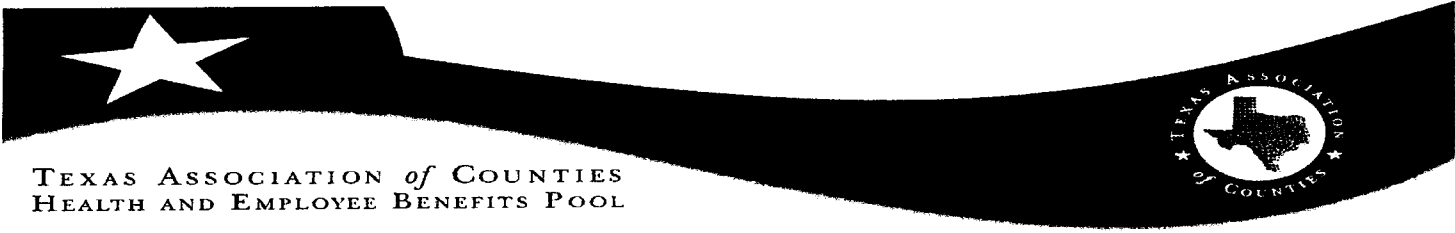
ACA Reporting and Tracking Service (ARTS)
Program Agreement
HEBP Member (Fully Insured or ASO)

Program Services

The ARTS program includes the following services:

- *Measurement, Administrative, and Stability Period tracking beginning January 1, 2015 and notification of eligibility for part-time / variable / seasonal employees (can provide tracking back to beginning of Measurement Period if historical data is provided by county/district);*
- *Reporting for your county/district regarding the status of potential benefits-eligible employees;*
- *Production of a data file to produce your county/district's 1094C and 1095C forms (optional direct mail service);*
- *Production of a data file to produce your county/district's 1094B and 1095B forms (applies to self-insured groups only)*
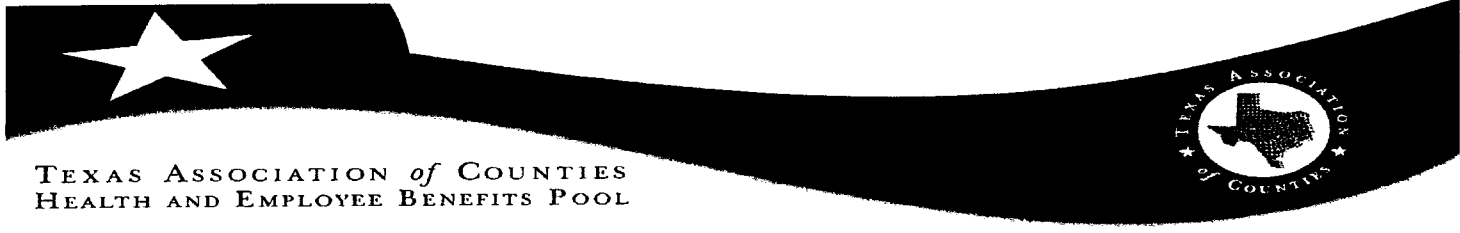
Program Requirements

53) Participants must provide employer, payroll, employee and unpaid leave of absence related to the group's Health Benefits Plan in the format designated by TAC HEBP, as described on Attachment A: "ARTS File Specifications". This data must be provided at each payroll cycle.

54) Group agrees to pay program fees as described in the ARTS Fee Schedule.

Enrollment and Data Submission Deadlines

- Groups who wish to participate in the ARTS program must return the signed executed documents to TAC HEBP no later than April 30, 2015 in order to participate.

- Data file transmission to TAC HEBP must begin no later than June 30, 2015 to avoid late fees.

*ʊʰ*_____ Initials

ACA Reporting and Tracking Service (ARTS)
HEBP Member (Fully Insured or ASO)
Fee Schedule

1	☑	ARTS Annual Subscription Fee	*$4.05 / form	Waived
2	☐	Optional Forms Distribution (group chooses to have TAC mail employee forms)	$ 1.40 / form	Will be billed in January 2016 when forms are produced
3	☑	One time Activation Service Fee (based on number of employees, non-refundable)	$7.50 /employee	Waived
4	☐	Late fee for service election form (after 4/30/2015)	$1,500	
5	☐	Late fee for data submission (after 6/30/2015)	$2,500	
6	☐	Cancellation Fee (7/1 through 12/31/2015)	$4,000	
		Total Amount Due: (if zero, enter 0.00)	$ _____	

Per 1094/1095C form and 1094/1095 B form if applicable

Fees subject to change annually beginning in 2016

_ᴊʟ____ Initials

ACA Reporting and Tracking Service (ARTS)
Contact Designation Form

Contracting Authority:_____(Group Name) hereby designates and appoints, as indicated in the space provided below, a Contracting Authority of department head rank or above and agrees that any notice to, or agreement by, a Group's Contracting Authority, with respect to service or claims hereunder, shall be binding on the Group. Each Group reserves the right to change its Contracting Authority from time to time by giving written notice to HEBP.

Name: _____

Title: _____

Address: _____

_____

Phone: _____

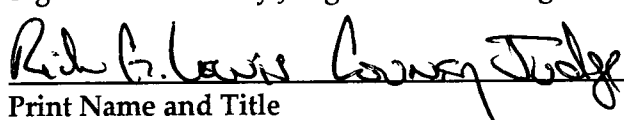Fax: _____

Email: _____

Primary Contact: Main contact for data file and reporting matters pertaining to the ARTS program.

Name: _____

Title: _____

Address: _____

_____

Phone: _____

Fax: _____

Email: _____

HIPAA Secured FAX number: _____

_____
Signature of County Judge or Contracting Authority

_____
Print Name and Title

_____
Date

TAC HEBP - ARTS Program Agreement 2015

TAC HEBP	ATTACHMENT A: ARTS FILE SPECIFICATIONS

File Specification General Info and Requirements

Please take time to review this document thoroughly. This document will serve as the Data Specifications Requirements for your participation in the ARTS program. Below are required data elements and field formats. Data elements are separated into 3 separate files: Employee Information, Payroll Details, and Leave of Absence. Each file should be provided in CSV (comma-separated variable) format if at all possible.

Please note that file specifications can change due to modifications in Affordable Care Act legislation and / or enhancements or other changes to the ARTS program.

GENERAL FILE SPECIFICATIONS

Files should be in CSV format with the ARTS Field Name in the top row, with no additional header or footer rows. Use only commas (,) for delimeters. If it is not possible to send the files in CSV format, please contact your Employee Benefits Specialist for assistance.

Files must contain every field/column. Data is REQUIRED in fields/columns highlighted in yellow. Data is OPTIONAL in fields/columns highlighted in green.

A placeholder is required for all unused fields (Column is highlighted in green). For CSV files, each of these will be identified by adding a comma (delimeter) e.g. the data for a group of fields consisting of Employee SSN, Last Name, Middle Name, First Name, Gender, and Date of Birth would look like this: 999999999,"Smith",,"John",,11251979

String values should be enclosed in double-quote characters (not Microsoft fancy-quotes) e.g. "John Brown, Jr" or "123 Main Street"

Literal double-quotes should be avoided. It is advised to either a) remove them from the data fields or b) change them to single quotes.

Numbers (including currency amounts) should contain no formatting except for a period (.) as a decimal-place indicator, e.g. 123456.78 NOT $123,456.78

The data types used for each of the columns follow the following conventions:
ALPHANUM(X) = Alphanumeric of the fixed length of x
ALPHANUM(X-Y) = Alphanumeric and can be any length between x and y
ALPHA(X) = Alphabet only of the fixed length of x
ALPHA(X-Y) = Alphabet only and can be any length between x and y
DATE(MM/DD/YYYY) = Date format of MM/DD/YYYY
NUMERIC(X) = Any whole number with x digits
NUMERIC(X-Y) = Any whole number between x and y digits
DECIMAL = Any whole or rational number up to two decimal places. For monetary related fields, do NOT include commas or dollar symbols (e.g., 123456.78, NOT $123,456.78).

FILE 1 - Employee Information

ARTS Field Name	Description	Format	Values
COCODE	Assigned group identifier code	ALPHANUM(1-10)	TAC will provide you with the value for this field
DataSource		ALPHANUM(1)	(blank)
County or District FEIN	Federal Employment Identification Number	ALPHANUM(9)	String with leading zeros and no other formatting such as hyphens
Employee SSN	Social Security Number	NUMERIC(9)	Federally provided SSN with leading zeros and no other formatting such as hyphens
isPrimary Assignment		NUMERIC(1)	(blank)
BillingCode		ALPHANUM(1)	(blank)
AssignmentID		ALPHANUM(1)	(blank)
EmployeeID	Identifier for employees within user's payroll system	ALPHANUM(1-10)	(blank) / any value from your system
Current Status	Indicates if the employee is active, on leave, terminated, retired, etc.	ALPHANUM(1)	Valid values (send only the codes): A = Active, G = Terminated, I = Inactive, R = Retired
Original Hire Date	Earliest Date of Hire for an employee	MM/DD/YYYY	
Most Recent Hire Date	Most recent date of hire. Except for rehires, this value will be the same value as original hire date.	MM/DD/YYYY	
Most Recent Start Date	The first date that the employee earned hours based on their most recent hire date. If this is not available, then populate with the same value as the most recent hire date field.	MM/DD/YYYY	Note: For most counties, this will be the same as the Most Recent Hire Date, as it is unlikely that their payroll system stores this as a separate value.
Termination Date	Most recent termination date if applicable	MM/DD/YYYY	
First Name		ALPHANUM(1-25)	
Last Name		ALPHANUM(1-25)	
MiddleName		ALPHANUM(1-25)	(blank) / any value from your system
PayRate	Current rate of pay for the employee, as related to the Pay Type	DECIMAL	No currency symbols or commas. E.g. 10.50, 65000
PayType	Scale for pay rate.	ALPHA(2)	Valid values (send only the codes): HY = per Hour MY = per month HM= per half month TW = per two weeks DY = per Day YY = per Year WY = per week SH = per shift

Field	Description	Format	Valid values / Notes
PayCycleFrequency	How often is the employee currently paid.	ALPHA(2)	Valid values (send only the codes): W/Y = Weekly BW = Bi-weekly SM = Semi-monthly MY = Monthly
Home Address Line 1		ALPHANUM(1-45)	
Home Address Line 2		ALPHANUM(1-45)	[blank], any value from your system
Home Address City		ALPHANUM(1-25)	
Home Address State		ALPHANUM(2)	2-letter abbreviation
Home Address ZIP		ALPHANUM(5-9)	5 or more characters
Notification Email	Use only well-formatted email addresses	ALPHANUM(1-45)	May be used for notifications
HomeAddressCountry		ALPHANUM(1)	[blank]
Date Of Birth	Date of Birth	MM/DD/YYYY	
Gender		ALPHA(1)	[blank], F for "F"
UnionAffiliation		ALPHANUM(1)	[blank]
EmployeeClassCode		ALPHANUM(1-5)	[blank]
EmployeeClassLabel		ALPHANUM(1)	[blank]
ACAEmployeeDesignationCode	This is the legislative definition of an employee designation	ALPHA(1-2)	Valid values (send only the codes): FT = Full Time, PT = Part Time, S = Seasonal, V = Variable
ACAEmployeeCategoryCode		ALPHANUM(1-2)	Same value as above ACA Employee Designation Code
ACAPayTypeClassification	Used for affordability, this distinguishes between hourly and salaried employees	ALPHA(1)	Only the following values are valid: H for Hourly or S for Salaried
Job Title	The specific title of the employee.	ALPHANUM(1-45)	example: Deputy, Clerk, Commissioner, Assistant Auditor
JobClassCode		ALPHANUM(1)	[blank]
JobClassLabel		ALPHANUM(1)	[blank]
WorkLocation		ALPHANUM(1)	[blank]
Region		ALPHANUM(1)	[blank]
Division		ALPHANUM(1)	[blank]
Department		ALPHANUM(1-5)	[blank], any value from your system

File 1 - Employee Information, continued

Field	Type	
WorkAddressLine1	ALPHANUM(1)	(blank)
WorkAddressLine2	ALPHANUM(1)	(blank)
WorkAddressCity	ALPHANUM(1)	(blank)
WorkAddressState	ALPHANUM(1)	(blank)
WorkAddressZip	ALPHANUM(1)	(blank)
WorkAddressCountry	ALPHANUM(1)	(blank)
ACASecurityKey	ALPHANUM(1)	(blank)
WorkNumberUserID	ALPHANUM(1)	(blank)
AdjustedHireDate	NUMERIC(12)	(blank)
YearsOfService	NUMERIC(12)	(blank)
MonthsOfService	ALPHANUM(1)	(blank)
WorkNumberDivision	ALPHANUM(1)	(blank)
WorkNumberDefaultPIN	ALPHANUM(1)	(blank)

File 2 - Payroll Details

Payroll details are to be sent upon each payroll run. 'Hours Worked' are the total hours for which the employee was compensated regardless of reason. For instance, if John works Monday 12:00-6:00, Wednesday 12:00-6:00, and uses 3 hours of vacation on Friday, the total hours should be 15.0 for that pay record. When multiple pay rates are applied, please provide the base pay rate and do not adjust or average based on overtime or other different pay rate.

If adjustments to a prior pay period are being submitted: Regardless of the pay date, or when the data is sent, it is critical to properly set the pay period start and end dates to associate the hours with the correct dates. For example, if a payroll adjustment is made in December for the Pay Period of Nov 15-Nov 22, The Pay Date may well be December 25, but the Pay Period Start Date and Pay Period End Date should be Nov 15 and Nov 22 respectively.

File name should be your County/District name, then an underscore followed by "PRFile" followed by a date in the format of YYYYMMDD. e.g.: "Aransas_PRFile_20150415"

ARTS Field Name	Description	Format	Values
COCODE	Assigned group identifier code	ALPHANUM(1-10)	TAC will provide you with the value for this field
DataSource		ALPHANUM(1)	(blank)
PayrollSystemID		ALPHANUM(1)	(blank)
PayDate	Check / Direct Deposit Date	MM/DD/YYYY	
PayPeriodStartDate	First date within Pay Period (inclusive of the date provided)	MM/DD/YYYY	
PayPeriodEndDate	Last date within Pay Period (inclusive of the date provided)	MM/DD/YYYY	
County or District FEIN	Federal Employment Identification Number	ALPHANUM(9)	String with leading zeros and no other formatting such as hyphens
Employee SSN	Social Security Number	NUMERIC(9)	Federally provided SSN with leading zeros and no other formatting such as hyphens
EmployeeID	Identifier for employee within user's payroll system	ALPHANUM(1-10)	(blank) any value from your system
AssignmentID		ALPHANUM(1)	(blank)
AssignmentID		ALPHANUM(1)	(blank)
BillingCode		ALPHANUM(1)	(blank)
CompensationType		ALPHANUM(1)	(blank)
AdjustmentKey		ALPHANUM(1)	(blank)
AdjustmentKey		ALPHANUM(1)	(blank)
PayRate	Rate of pay at the time of this pay cycle, as related to the Pay Type.	DECIMAL	No currency symbols or commas. E.g. 10.50, 65000
PayType	Scale for pay rate.	ALPHA(2)	Valid values (send only the codes): HY = per Hour, MY = per month, HM = per half month, TW = per two weeks, WY = per week, DY = per Day, YY = per Year, SH = per shift
PayCycleFrequency	The frequency of this specific pay cycle	ALPHA(2)	Valid values (send only the codes): WY = Weekly, BW = Bi-weekly, SM = Semi-monthly, MY = Monthly

File 2 - Payroll Details, continued

Hours Worked	Number of hours the employee worked within the Pay Period	DECIMAL	Fill as 40.0 for full-time salaried employees. Hours must be reported for all employees
Gross Pay	Employee Gross Pay for Pay Period including base, overtime, paid leave, etc.	DECIMAL	No currency symbols or commas. E.g. 100.25, 2300.00
W2Box1Deductions	Sum total of all W-2 Box 1 deductions to be applied. For example an employee contributes $75 for Retirement, $25 for Flexible Spending Account, and $150 for dependent health insurance, enter 250.00 as the amount	DECIMAL	This value is only needed if your county/district requires employees to pay for a portion of their own health coverage. No currency symbols or commas. Eg. 100.25, 2300.00
ACASecurityKey		ALPHANUM(1)	(blank)

File 3 - Unpaid Leave of Absence (only sent when applicable)

Unpaid leave of absence information is necessary for the ACA hours calculation as well as determination of contiguous service. Each "unpaid leave" is to be provided on a separate line. For instance, if John Doe is away for military service from July 1 to July 28, 2015, returning to work on July 29, 2015, a single row of data will contain John's SSN, the FEIN for which John is primarily employed, a reason code and label (for readability purposes only), an LOAStart Date of '07/01/2015', and an LOAEndDate of '07/28/2015'.

Include all unpaid, protected leaves that are not represented with compensation or hours worked in the payroll data. EXAMPLES: If an employee had one day of jury service, but the payroll reflected that she was paid full rate that day, DO NOT include the employee here. If the employee had 2 months of Family Medical leave, and was compensated only by a third-party provider, or not compensated, DO include the information here.

File name should be your County/District name, then an underscore followed by "LOAFile", followed by a date in the format of YYYYMMDD; e.g. Aransas_LOAFile_20150415

Field	Description	Format	Notes
COCODE	Assigned group identifier code	ALPHANUM(1-10)	TAC will provide you with the value for this field
County or District FEIN	Federal Employment Identification Number	ALPHANUM(9)	String with leading zeros and no other formatting such as hyphens
Employee SSN	Social Security Number	NUMERIC(9)	Federally provided SSN with leading zeros and no other formatting such as hyphens
LOA Reason Code	Indicates the reason for the leave. The system will consider all leave provided to be protected, so the recommendation is to provide only protected leaves such as FMLA, Military Duty, Jury Duty etc.	ALPHANUM(1-25)	Examples: "JURY", "FMLA"
LOAReasonLabel		ALPHANUM(1-)	(blank)
LOA Start Date	The first date the employee is considered to be on UNPAID leave - NOT the last day worked. If the employee is on paid vacation for the first two weeks, then the LOA Start Date should be after the paid vacation ends.	MM/DD/YYYY	
LOA End Date	This value may be provided for future dates if the employee leave date is known in advance. If the return date is not known leave this field blank.	MM/DD/YYYY	Value can be blank if not applicable
LOA Hours	This field is used for partial day leaves ONLY. The LOAStart and end dates must be the same for partial day leaves. Enter the amount of hours used to partial day leave, which will be credited to the employee as if the employee retained hours.	DECIMAL	Value can be blank if not applicable
EmployeeID	Identifier for employee within house payroll system	ALPHANUM(1-10)	(blank) any value from your system
AssignmentID		ALPHANUM(1-)	(blank)
BillingCode		ALPHANUM(1-)	(blank)
DataSource		ALPHANUM(1-)	(blank)
ACASecurityKey		ALPHANUM(1-)	(blank)