



Springbrook – Affordable Care Act Processing

Agenda

Resources

Batch Setup and overview

Data Extraction and preparation

Edit Employees entry

Edit Employer entry

Filing

Resources

- Springbrook Community – Affordable Care Act Playbook

<https://enterprisehelp.springbrooksoftware.com/a/1348282-aca-processing>

- Community website – <https://success.springbrooksoftware.com>

- IRS.gov – 1095 instructions

<https://www.irs.gov/pub/irs-pdf/i109495c.pdf>

- Affordable Care Act Information Returns (AIR) Program page

<https://www.irs.gov/e-file-providers/air/affordable-care-act-information-return-air-program>

Dates For Reference

- Due date for furnishing statements to employees - March 1, 2024.
- Due date for filing on paper (if less than 10 forms) – February 28, 2024.
- Due date for filing electronically – March 31, 2024.
- Provision date for on-premise Springbrook, KVS or SoftRight clients – email was sent on December 20, 2023. Email was sent by amber.elstad@sprbrk.com.
- Software ID has been updated in our system, you can file now if you wish.

What's New: The electronic-filing threshold for information returns has been decreased to 10 or more returns.

Electronic Filing



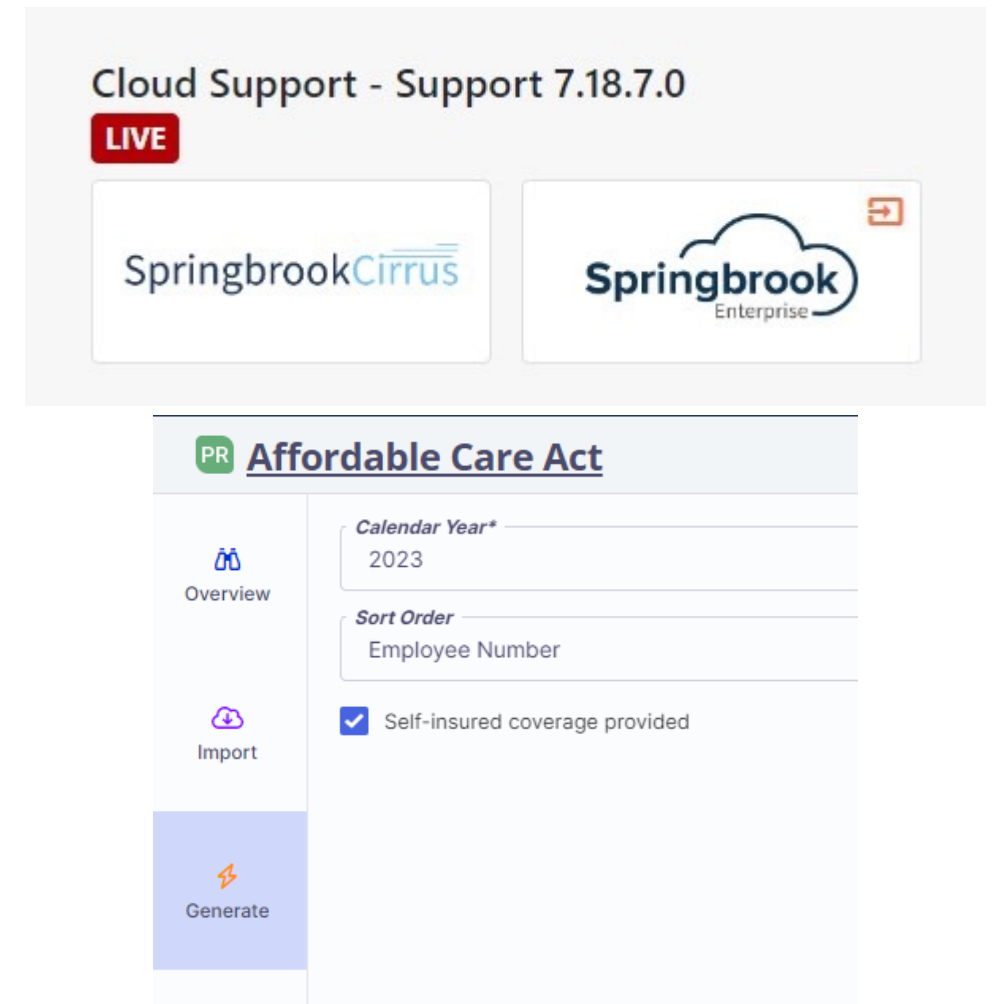
If you are required to file 10 or more information returns during the year, you must file the forms electronically. The

10-or-more requirement applies in the aggregate to certain information returns that are original or corrected returns. Accordingly, a filer may be required to file fewer than 10 Forms 1094-C and 1095-C, but still have an electronic filing obligation based on other kinds of information returns filed. The electronic filing requirement does not apply if you request and receive a hardship waiver. The IRS encourages you to file electronically even though you are filing fewer than 10 returns.

Waiver. To receive a waiver from the required filing of information returns electronically, submit Form 8508. You are encouraged to file Form 8508 at least 45 days before the due date of the returns, but no later than the due date of the return. The IRS does not process waiver requests until January 1 of the calendar year the returns are due. You cannot apply for a waiver for more than 1 tax year at a time. If you need a waiver for more than 1 tax year, you must reapply at the appropriate time each year. If a waiver for original returns is approved, any corrections for the same types of returns will be covered under the waiver. However, if you submit original returns electronically but you want to submit your corrections on paper, a waiver must be approved for the corrections if you must file 10 or more corrections. If you receive an approved waiver, do not send a copy of it to the service center where you file your paper returns. Keep the waiver for your records only.

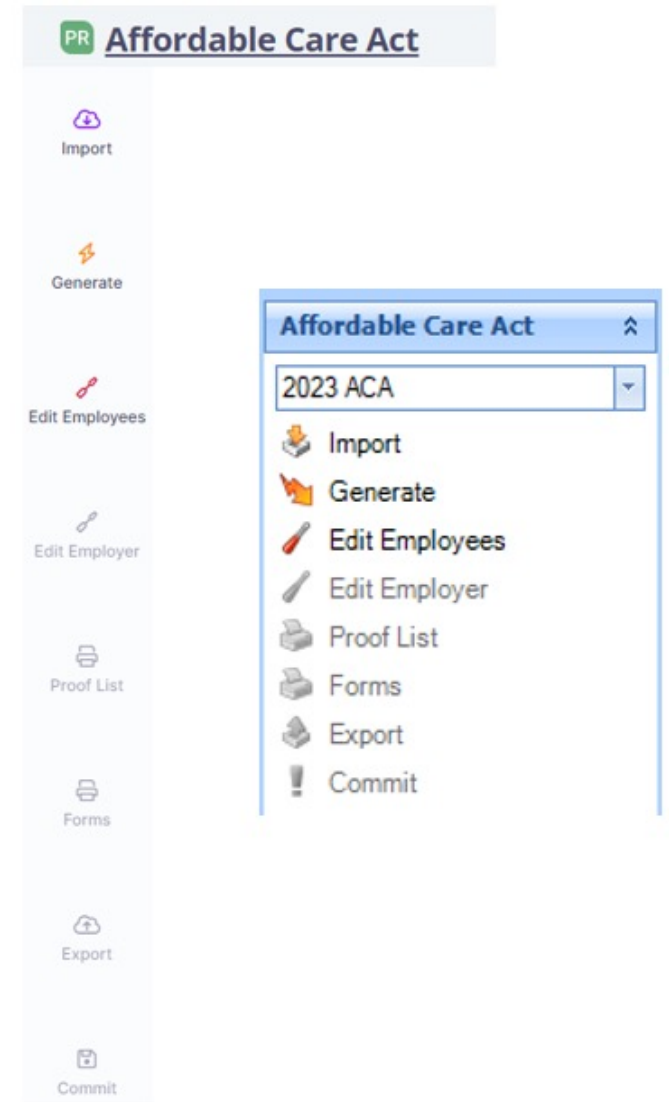
Cirrus platform is available for all users

- Cirrus is now ready to use for processing your ACA batch if you choose to use this platform instead of Springbrook Enterprise. Both options are included in our solution.
- You can work in Cirrus and then switch to Enterprise and all your saved work will be there. It is your choice which platform you use.
- Cirrus has some enhancements to the ACA batch process
- Cirrus is fully browser based and can be used from all modern browsers (Safari, Chrome, Mozilla, Edge, etc.).



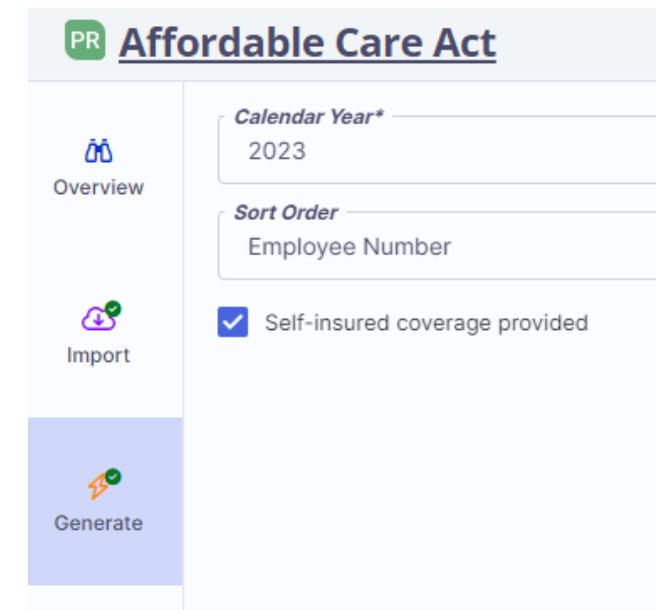
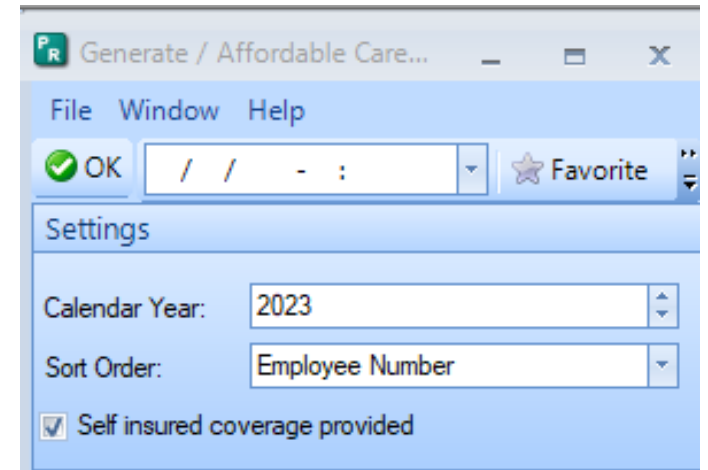
Affordable Care Act batch process

- Import or Generate
- Edit Employees
- Edit Employer
- Proof List
- Forms
- Export
- Commit – never needed just deletes information.



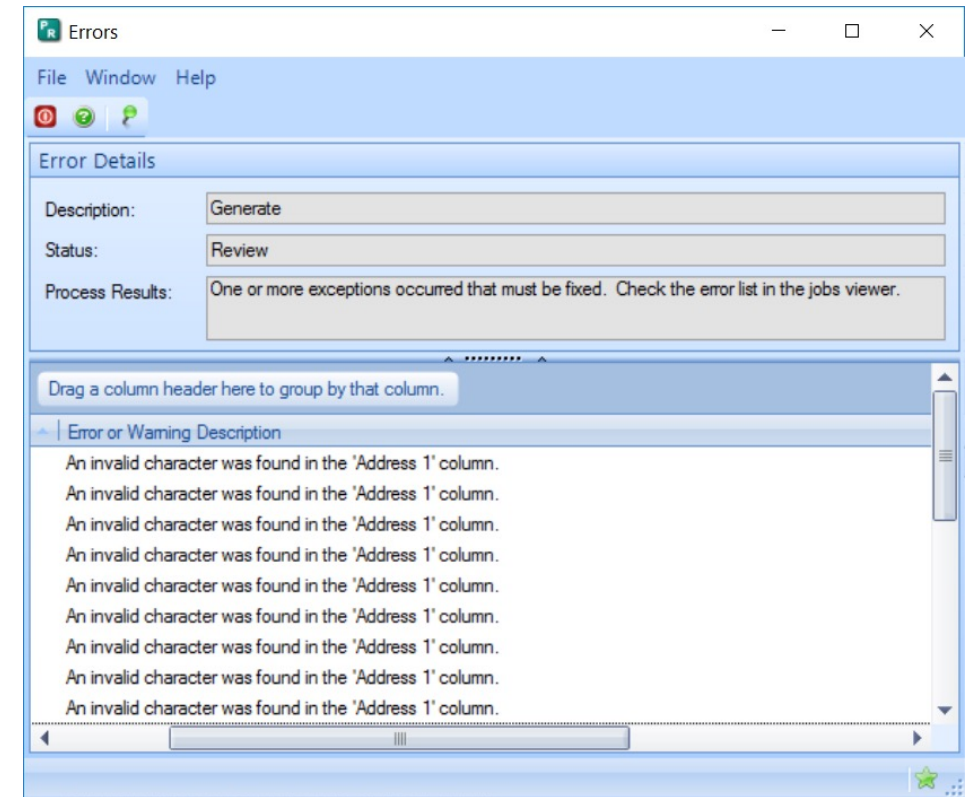
Generate – Only Available for Existing Cloud Payroll clients

- Check Security if you do not have it on your menu.
- Select reporting year – Will default to the current fiscal year. You are reporting for 2023. The system will only bring in employees that are active in 2023.
- Sort Order – This will determine the order the forms are printed. Will be helpful if you want to match up forms to W2's to mail.
- Mark Self-Insured coverage if you need to report dependents.
 - Cirrus only: The generate will bring in dependents in HR if selected and will not if this toggle is not marked.
 - If self-insured reporting is needed you can import dependents from a file if they are not in your HR system.



Generate – Existing Cloud Payroll clients only for Enterprise and Cirrus

- We corrected an issue that could cause an error for review if an employee name or address includes a disallowed character. You will still get this review message now, but the disallowed characters will be removed for you. You will not need to go in and remove the disallowed from the Edit Employees step.
- You can keep the review list and modify your employee records to remove disallowed characters.

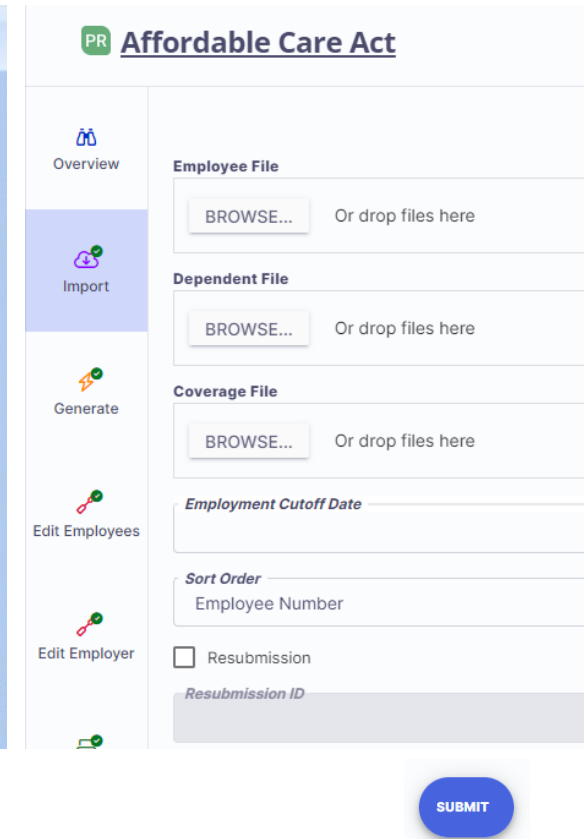
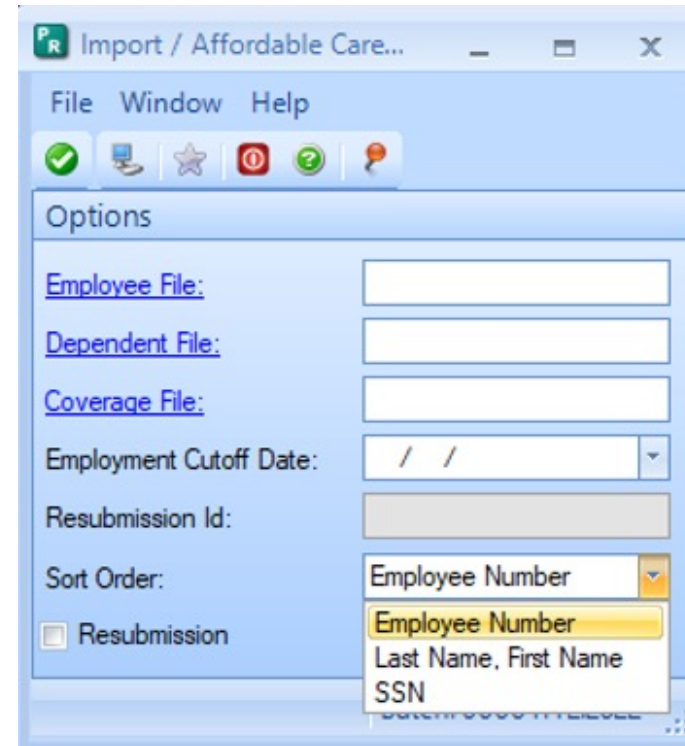


Data extraction

- Springbrook data extraction will export employees and dependents only.
- Employee file – Review for disallowed characters and double spaces.
- Dependent file - If you are not reporting as “self insured” you will not need the dependent file. If you need the file make sure to review it for disallowed characters (except / from birth dates).
- Remember opening CSV files in Excel will remove all leading zeros. Critical for zip codes and Social Security numbers.

Import Files

- Open Import step in the batch. This can be done after employees are generated.
- Select the employee file (dependent and coverages if also importing).
- Select the sort order you want the forms printed in.
 - Important if matching to W2's to mail.
- Click Check mark or Submit button to import.
- NOTE: If you import employees after the Generate step was run the new file will replace all employees currently in the batch.

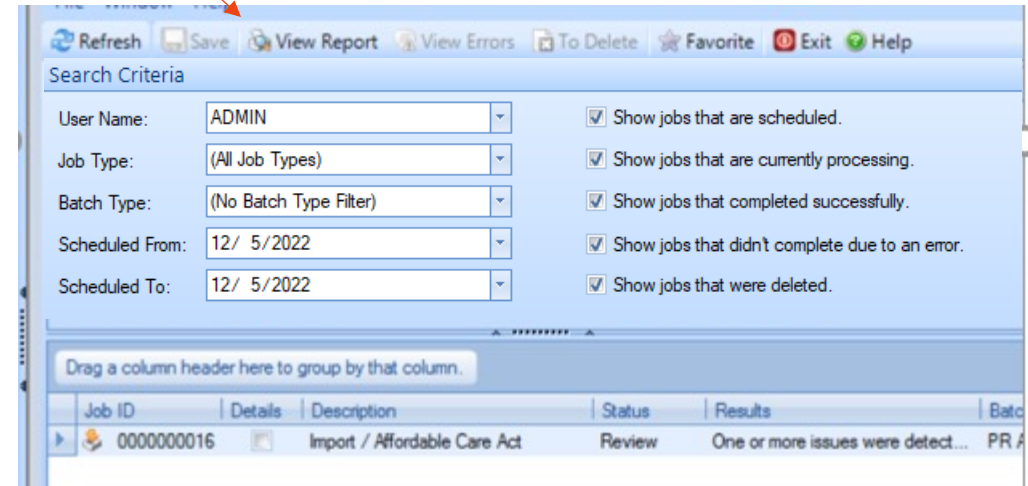


Tips for Dependent and Coverage Import

- Consider importing only Employees to start.
- Dependent and Coverage files can be imported after Employees are imported. If Employees are already imported/in the batch then the system will more easily match the Related Employee Number up from the Dependent and Coverage files to the correct Employee.
- You cannot import additional employees without deleting ALL employees and information in the batch.

Review/Errors

- If the status is “Review” there are errors in the files so the import did not include all information.
- Click on the View Report icon at the top or double click on the item below. The errors will display.



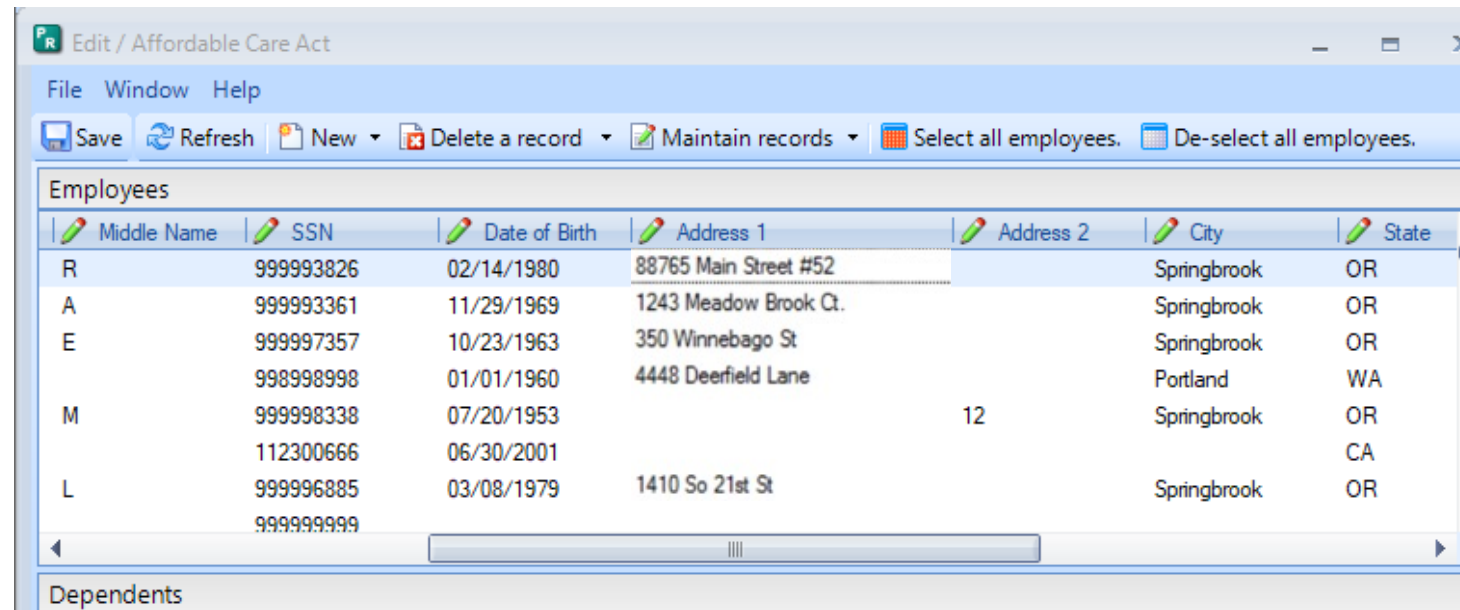
The screenshot shows an 'Import Errors' window with a table of error details. The table has columns: Index, Error Description, and Layout Info. The first row is highlighted and contains: Index: 2, Error Description: An invalid character was found for employee in the 'Address 1' column., and Layout Info: 10000,Able,Zena,Ann,899997654,88765... The following rows contain similar error messages for various employees.

Index	Error Description	Layout Info
2 1	An invalid character was found for employee in the 'Address 1' column.	10000,Able,Zena,Ann,899997654,88765...
4 2	A social security number is required for each employee.	23232323,Moore,Marti,.....FALSE
5 3	An invalid character was found for employee in the 'Address 1' column.	30157,Palmer,Carol,A,999995634,10 SE ...
24 4	An invalid character was found for employee in the 'Address 1' column.	31137,Muench,Derek,R,999995275,192...
28 5	An invalid character was found for employee in the 'Address 1' column.	31155,Meyer,Lee*M,R,999995468,2717 ...
38 6	An invalid character was found for employee in the 'Address 1' column.	31178,Denis,John,A,999999404,1441 Da...
40 7	An invalid character was found for employee in the 'Address 1' column.	31180,Kumbalek,Debora,J,999999879,1...
43 8	An invalid character was found for employee in the 'Address 1' column.	31198,Frieder,Thomas,M,999995544,190...
57 9	An invalid character was found for employee in the 'Address 1' column.	31228,Hermann,Ann,M,999998664,701 ...
61 10	An invalid character was found for employee in the 'Address 1' column.	31242,Sorenson,Roger*F,C,999997637,2...
71 11	An invalid character was found for employee in the 'Address 1' column.	31291,Staudinger,Bernard,J,999999863,...
76 12	An invalid character was found for employee in the 'Middle Name' column.	31297,Ladwig,Richard,J.,999992382,462...
91 13	An invalid character was found for employee in the 'Address 1' column.	31337,Brey,Robert,W,999990950,1411 S...
94 14	An invalid character was found for employee in the 'Address 1' column.	31341,Lacroix,Paul,A,999991296,1526 S...

Review/Errors

In almost every case the employee has been imported into the batch with the invalid data.

NOTE: If you import additional employee files, ALL employees in the batch will be deleted. Not the case if you import dependents or coverages.

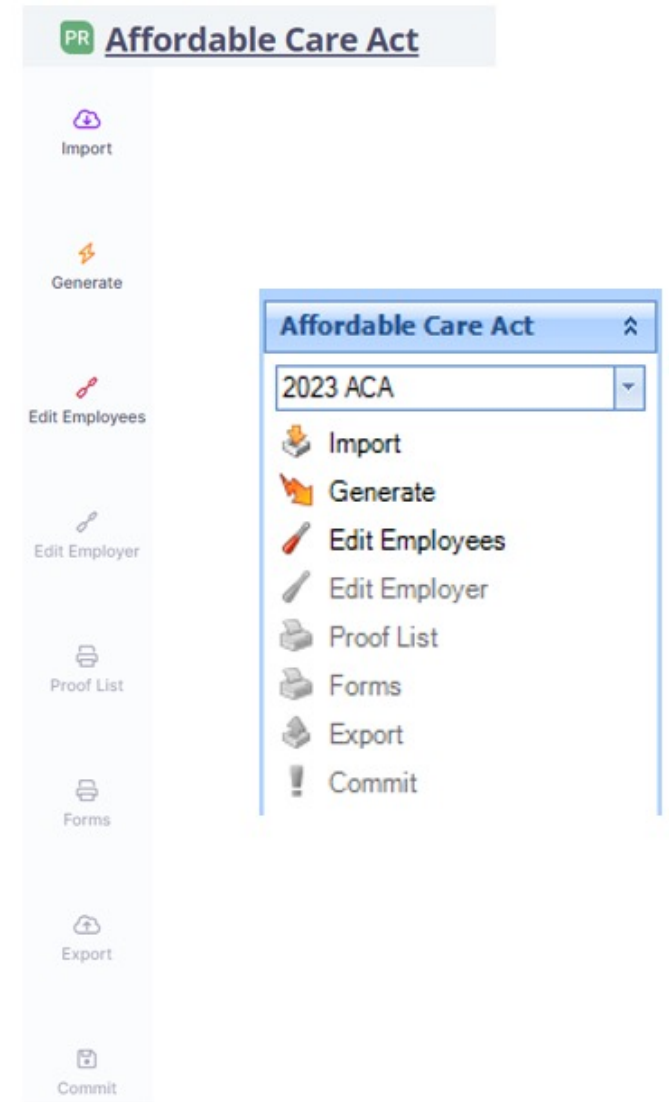


The screenshot shows a software application window titled "Edit / Affordable Care Act". The window has a menu bar with "File", "Window", and "Help". Below the menu bar is a toolbar with buttons for "Save", "Refresh", "New", "Delete a record", "Maintain records", "Select all employees", and "De-select all employees". The main area of the window displays a table with the following columns: Middle Name, SSN, Date of Birth, Address 1, Address 2, City, and State. The table contains several rows of employee data.

Middle Name	SSN	Date of Birth	Address 1	Address 2	City	State
R	999993826	02/14/1980	88765 Main Street #52		Springbrook	OR
A	999993361	11/29/1969	1243 Meadow Brook Ct.		Springbrook	OR
E	999997357	10/23/1963	350 Winnebago St		Springbrook	OR
	998998998	01/01/1960	4448 Deerfield Lane		Portland	WA
M	999998338	07/20/1953		12	Springbrook	OR
	112300666	06/30/2001				CA
L	999996885	03/08/1979	1410 So 21st St		Springbrook	OR
	999999999					

Affordable Care Act batch process

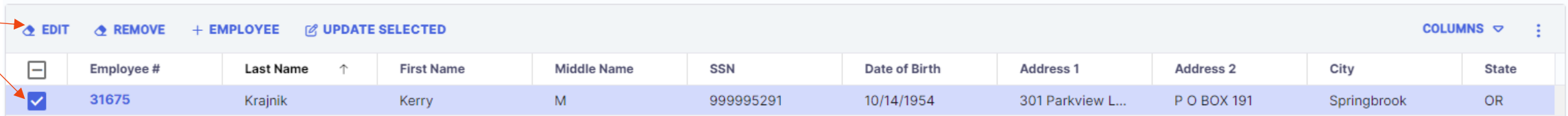
- Import or Generate
- Edit Employees
- Edit Employer
- Proof List
- Forms
- Export
- Commit – never needed just deletes information.



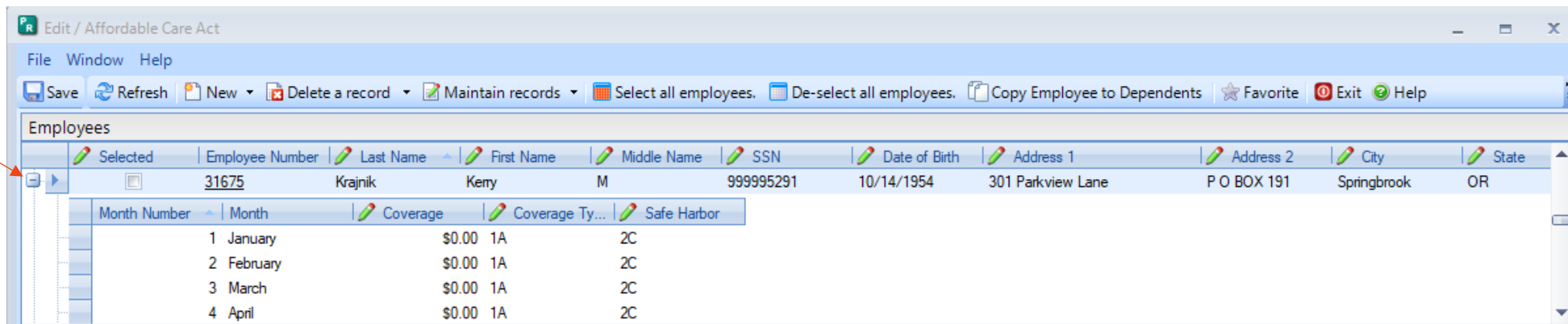
Edit Employees

- This window contains all the employee reporting information.
- In Enterprise, the + in the left margin will open each employee monthly information. Clicking it again will close the employee information.
- In Cirrus, select the employee and click the Edit to view information.

Tip: It works well to go through your batch and delete any employees that you do not need to report before doing anything else.



	Employee #	Last Name	First Name	Middle Name	SSN	Date of Birth	Address 1	Address 2	City	State
<input checked="" type="checkbox"/>	31675	Krajnik	Kerry	M	999995291	10/14/1954	301 Parkview L...	P O BOX 191	Springbrook	OR



Selected	Employee Number	Last Name	First Name	Middle Name	SSN	Date of Birth	Address 1	Address 2	City	State
<input checked="" type="checkbox"/>	31675	Krajnik	Kerry	M	999995291	10/14/1954	301 Parkview Lane	P O BOX 191	Springbrook	OR

Month Number	Month	Coverage	Coverage Ty...	Safe Harbor
1	January	\$0.00	1A	2C
2	February	\$0.00	1A	2C
3	March	\$0.00	1A	2C
4	April	\$0.00	1A	2C

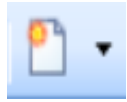
Enterprise - Edit Employee Functions



Save – Will enable when changes are keyed.



Refresh - Not often used, will restore information on the window.



New – Use drop-down arrow to choose if you add a new employee or dependent.



Delete a record – Use drop-down to delete an employee or a dependent.









Maintain records – Select Coverage record or Plan Period record to maintain all selected.



Select all employees – Will mark the selected box for all employees. Works with the Maintain records, Copy and delete functions.

Enterprise - Edit Employee Functions (cont.)

-  De-select all employees – Removed the selected toggles for all employees.
-  Copy Employee to Dependents – Copies each employee to dependents. ONLY used if Self Insured is toggled. (Enterprise ONLY)
-  Favorites (only used if you are using dashboard)
-  Exit – Will close the window without saving any entries
-  Help – Will open Springbrook help.
-  Dock in MDI/Undock – Will enclose the window in the MDI and make it smaller.

Cirrus – Edit Employee Functions

PR Affordable Care Act 2022 ACA ▾

Overview COLUMNS ▾

[+ EMPLOYEE](#) [EDIT](#) [REMOVE](#) [UPDATE SELECTED](#)

<input type="checkbox"/>	Employee #	Last Name	First Name	Middle Name	SSN	Date of Birth	Address 1	Address 2	City	State
<input checked="" type="checkbox"/>	31274	Erickson	Jill	M	999993298	09/11/1970	1512 Ahrens St		Springbrook	OR
<input type="checkbox"/>	32194	Roehrig	David*M	H	999998082	03/30/1955	2318 Herman Rd		Springbrook	OR
<input type="checkbox"/>	32801	Pfeffer	Chad	P	999998057	03/22/1986	4413 Knuell Ct		Springbrook	OR
<input type="checkbox"/>	31756	Trainor	Michael	S	999993450	11/27/1962	1301 Manila Str...		Springbrook	OR

CANCEL SAVE

Edit Employee ACA

Employee

Employee #* 31274 Middle Name M Address 1 1512 Ahrens St State OR Self Insured

Last Name Erickson SSN* 999-99-3298 Address 2 Zip 99999-____

First Name Jill Date Of Birth 9/11/1970 City Springbrook Plan Start Month

COVERAGE **DEPENDENTS (1)**

[UPDATE SELECTED](#)

Month	Coverage Amount	Coverage Type	Safe Harbor	Month	Coverage Amount	Coverage Type	Safe Harbor
<input checked="" type="checkbox"/> January	0.00		<input type="checkbox"/> Safe Harbor	<input checked="" type="checkbox"/> July	0.00		<input type="checkbox"/> Safe Harbor
<input checked="" type="checkbox"/> February	0.00		<input type="checkbox"/> Safe Harbor	<input checked="" type="checkbox"/> August	0.00		<input type="checkbox"/> Safe Harbor
<input checked="" type="checkbox"/> March	0.00		<input type="checkbox"/> Safe Harbor	<input checked="" type="checkbox"/> September	0.00		<input type="checkbox"/> Safe Harbor
<input checked="" type="checkbox"/> April	0.00		<input type="checkbox"/> Safe Harbor	<input checked="" type="checkbox"/> October	0.00		<input type="checkbox"/> Safe Harbor
<input checked="" type="checkbox"/> May	0.00		<input type="checkbox"/> Safe Harbor	<input checked="" type="checkbox"/> November	0.00		<input type="checkbox"/> Safe Harbor
<input checked="" type="checkbox"/> June	0.00		<input type="checkbox"/> Safe Harbor	<input checked="" type="checkbox"/> December	0.00		<input type="checkbox"/> Safe Harbor

[+ EMPLOYEE](#) [EDIT](#) [REMOVE](#) [UPDATE SELECTED](#)

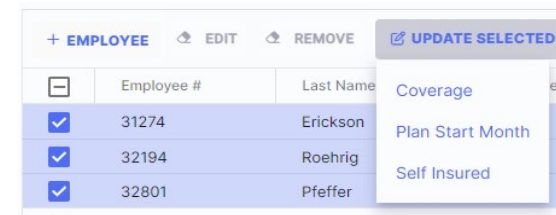
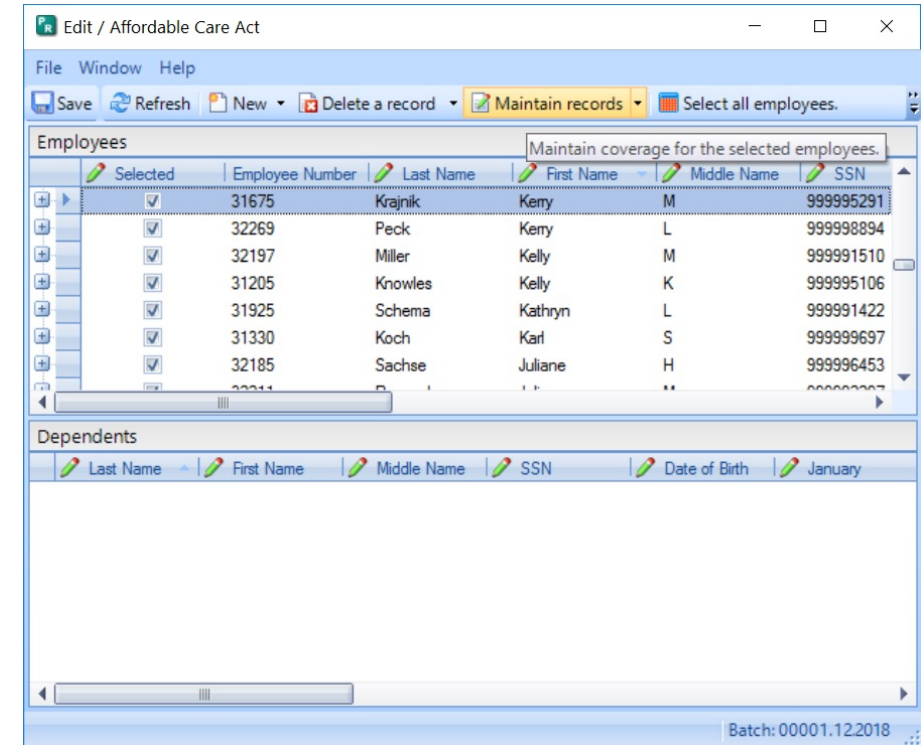
<input type="checkbox"/>	Employee #	Last Name	First Name	Middle Name	SSN	Date of Birth	Address 1	Address 2	City	State
<input checked="" type="checkbox"/>	31274	Erickson	Jill	M	999993298	09/11/1970	1512 Ahrens St		Springbrook	OR
<input checked="" type="checkbox"/>	32194	Roehrig	David*M	H	999998082	03/30/1955	2318 Herman Rd		Springbrook	OR
<input checked="" type="checkbox"/>	32801	Pfeffer	Chad	P	999998057	03/22/1986	4413 Knuell Ct		Springbrook	OR

- Coverage
- Plan Start Month
- Self Insured

- Grid views on Edit Employee step are formatted to allow users to edit an employee's information, coverage, and dependents all from one window.
- You also can update multiple/bulk employees at once, like Enterprise, using the Update Selected option.

Edit Employees – Recommended process

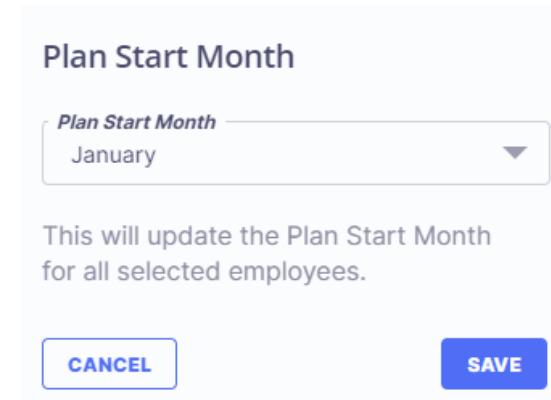
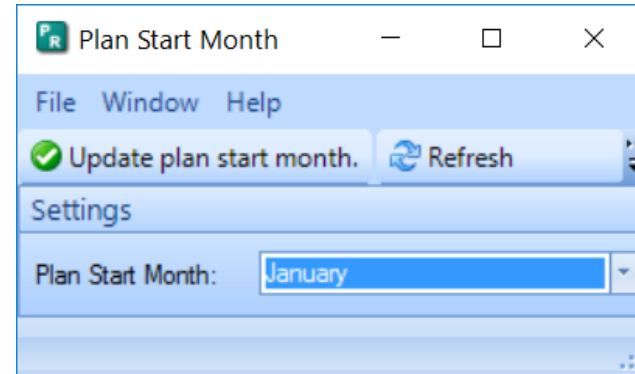
- If doing entry within Springbrook the quickest way to process the batch is to change all employees to the most common values, then modify the ones that are different (such as employees that did not work the full year).
- Click the Select all employees button – This will mark all employees selected. If you want, you can remove any employees desired by clicking in the selected box manually.



Edit Employees – Recommended Process

Use Maintain Records > Plan Period Maintenance (Update Selected > Plan Start Month in Cirrus) – Adds the plan start month to each employee. This is the month your agency plan starts, not the employee specific information.

- Often this is the same for all employees.
- This is **required** by the IRS for 2023 reporting.
- Will display the month number.



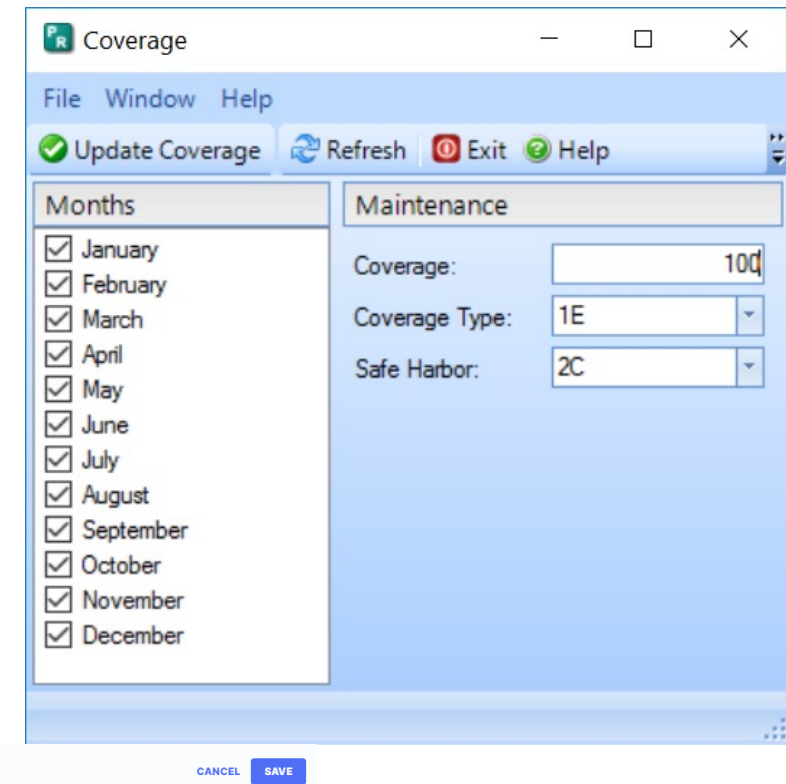
Zip	Plan Start Month	Self Insured
99	01	<input type="checkbox"/>
99	01	<input type="checkbox"/>
99	01	<input type="checkbox"/>
99	01	<input type="checkbox"/>

Edit Employees – Update Coverage

- Use the Maintain records > Coverage maintenance (Update Selected > Coverage in Cirrus) – Adds the coverage and safe harbor codes to months specified.

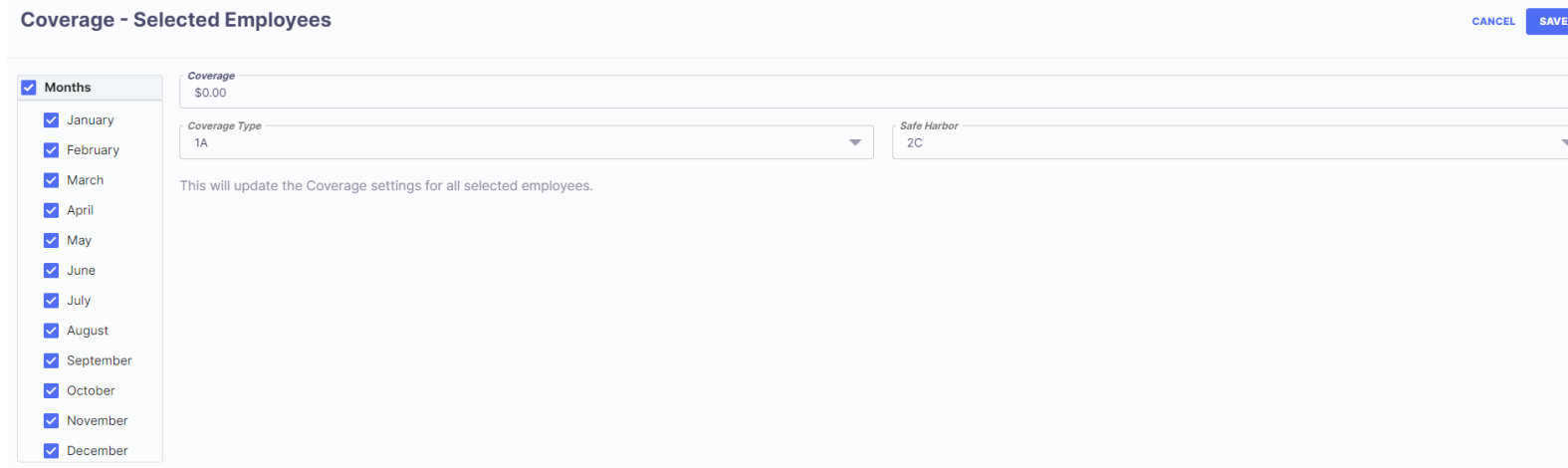
Tip: Click on January and use the Ctrl+A to highlight all months. Once highlighted you can use the space bar to check all the months. Cirrus has a select all toggle.

Type in the Coverage dollars, coverage type and safe harbor codes. Refer 1094/95 instructions for code help. Springbrook does not give advice on the codes to use.



The screenshot shows a window titled "Coverage" with a menu bar (File, Window, Help) and a toolbar (Update Coverage, Refresh, Exit, Help). The main area is split into two panes: "Months" and "Maintenance".

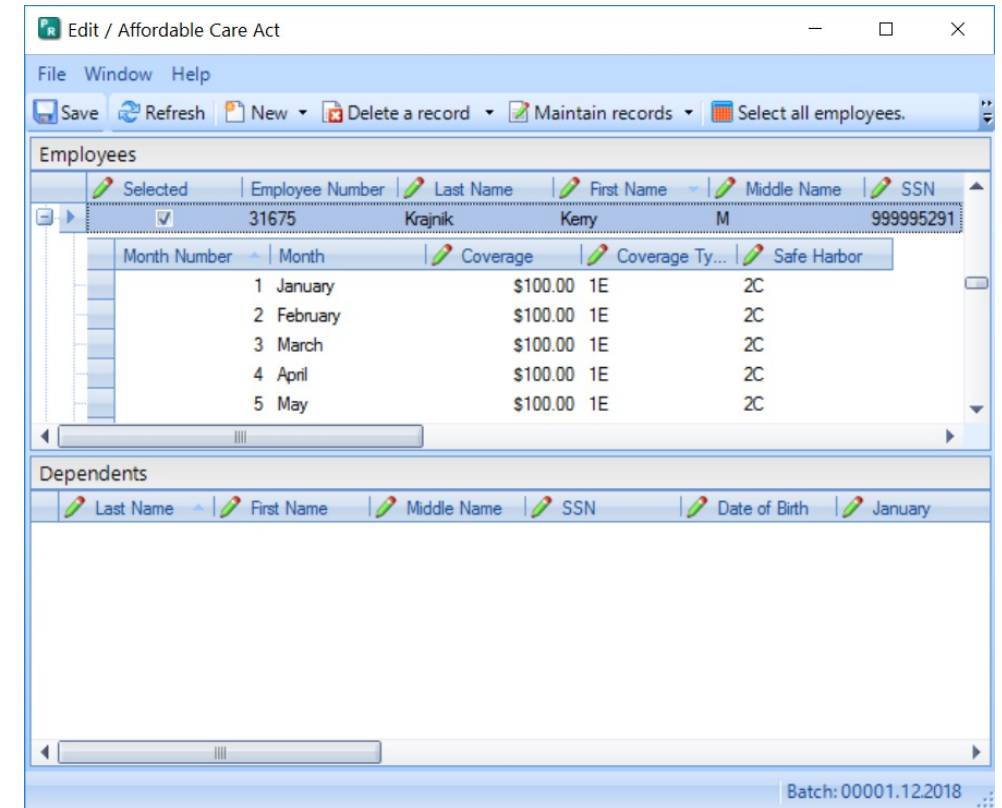
Months	Maintenance
<input checked="" type="checkbox"/> January	Coverage: <input type="text" value="100"/>
<input checked="" type="checkbox"/> February	Coverage Type: <input type="text" value="1E"/>
<input checked="" type="checkbox"/> March	Safe Harbor: <input type="text" value="2C"/>
<input checked="" type="checkbox"/> April	
<input checked="" type="checkbox"/> May	
<input checked="" type="checkbox"/> June	
<input checked="" type="checkbox"/> July	
<input checked="" type="checkbox"/> August	
<input checked="" type="checkbox"/> September	
<input checked="" type="checkbox"/> October	
<input checked="" type="checkbox"/> November	
<input checked="" type="checkbox"/> December	



The screenshot shows a web interface titled "Coverage - Selected Employees". It features a "Months" list with all months checked, a "Coverage" field set to "\$0.00", a "Coverage Type" dropdown set to "1A", and a "Safe Harbor" dropdown set to "2C". A message at the bottom states: "This will update the Coverage settings for all selected employees." There are "CANCEL" and "SAVE" buttons at the bottom right.

Edit Employees – Update Coverage

- Each selected employee will now show the coverage updated.
- The save button will also enable in Enterprise. Save often.
- Recommend saving at this point.
- The window may take a while to save, please be patient.
- You will need to reopen the Edit Employees window after saving in Enterprise.



Edit Employees – Save errors

- If the window does not close or save in a minute or so, check for errors.
- The system will identify errors with red font.
- If you are missing an SSN, it will not be allowed to save and must be fixed.

Edit Employee ACA

Employee

Employee #* 321Test2

Middle Name

Last Name T

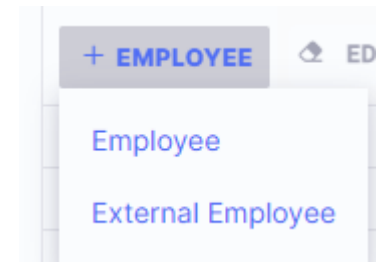
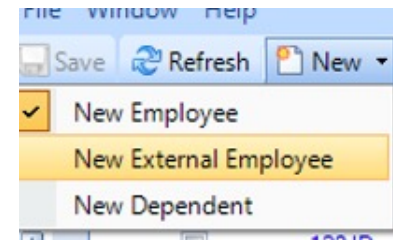
SSN*

The employee's SSN must be entered.

Selected	Employee Number	Last Name	First Name	Middle Name	SSN	Date of Birth	Address 1	Address 2	City	State	
<input type="checkbox"/>	32559	Geigel	Raymond	T	999990024	07/24/1964	4017 Delta St		Springbrook	OR	999
<input type="checkbox"/>	999test	George	Bob		999999999						
<input type="checkbox"/>	31530	Glaeser	Kevin	D	999998605	07/01/1957	15 S Cth S		Springbrook	WA	984
<input type="checkbox"/>	31485	Goertz	Gregory	P	!	03/10/1957			Springbrook	OR	999
<input type="checkbox"/>	32562	Graunke	Dean	W	999997842	03/16/1949	4626 Calumet Ave		Springbrook	OR	999
<input type="checkbox"/>	33017	Groelle	Dean	A	999922674	03/14/1974	1804 Lincoln St		Springbrook	OR	974
<input type="checkbox"/>	GULZOW2	Gulzow	Ben		665778899	10/08/1980					
<input type="checkbox"/>	GULZOW	Gulzow	Charles	A	998887771	04/11/1977	555 Springbrook Ave		Springbrook	OR	999
<input type="checkbox"/>	32036	Gunzel	Tari	A	999991353	10/23/1964	3703 So 26th St		Springbrook	OR	999

Edit Employees – Existing Payroll Cloud clients only

- Non-employees can be added to the batch through New > New External Employee (+Employee > External Employee in Cirrus) to add a non-employee (typically for retirees).
- This is not true for On-prem, KVS or SoftRight clients: Import your non-employees instead with your employee file during the import process.
- When selected, a new blank line will be added to the grid in Enterprise and a new employee window opens in Cirrus. All information can be added.
 - Employee numbers cannot be duplicated or changed after saving.



Edit Employees – Entry tips

NEVER have more than one User working in the Edit Employees window at the same time. One person working will lose their work as soon as the other Saves.

The provision databases for On-Prem, KVS and SoftRight clients are single user databases. Login information can be shared and used by multiple users.

Items to Edit and Check

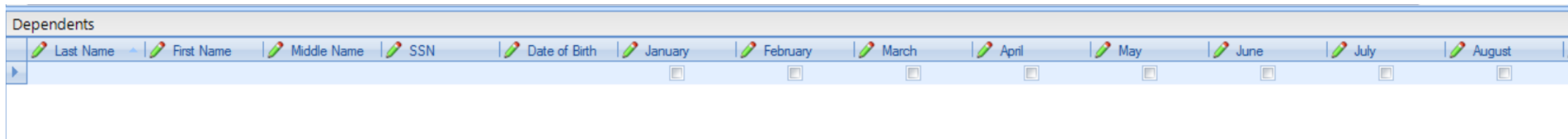
Sort by the following columns to make sure there are no blanks that will fail when uploading to the IRS AIR system.

- First & Last Name – no spaces at the beginning.
- SSN – review to make sure all appear to be 9 digits.
- Address & City – no spaces at the beginning.
- Zip – must be either 5 or 9 digits. Anything else will fail.

cted	Employee Number	Last Name	First Name	Middle Name	SSN	Date of Birth	Address 1	Address 2	City	State	Zip
<input type="checkbox"/>	31019	Hablewitz	Robert	L	999997028	02/21/1952	4235 Rock Court		Springbrook	OR	99999
<input type="checkbox"/>	31179	Hagenow	Lee*M	A	999999575	10/06/1953	1617 Atlanta Court		Springbrook	OR	99999
<input type="checkbox"/>	32647	Halle	Tammy	J	99990093	10/15/1970	3326 Cty Rd Y		Springbrook	OR	99999
<input type="checkbox"/>	31672	Hanson	James	L	999999104	09/30/1954	1302 Orchard Dr		Springbrook	OR	99999
<input type="checkbox"/>	32288	Hassen	Fred	A	999992348	02/14/1959	328 Kent St		Springbrook	OR	999990
<input type="checkbox"/>	32743	Helmingier	Brian	M	999990474	07/06/1971	2430b 14 Sycamore Dr		Springbrook	OR	99999
<input type="checkbox"/>	Helms	Helms	Jaki		999887777	04/22/1985	3104 SW Springbrook Street		Springbrook	OR	999222222
<input type="checkbox"/>	32919	Hennessey	Luke	R	999992880	10/26/1979	1107 So 8th St		Springbrook	OR	99999
<input type="checkbox"/>	31228	Hermann	Ann	M	999998664	06/27/1955	701 So 19th Street		Springbrook	OR	97455

Add Dependents - Enterprise

- Dependents can be either keyed or imported.
- Dependents are ONLY included if you need to report as self-insured. You can get that information from your insurance carrier.
- If manually adding dependents, click on the employee and use the New Dependent option.
- A dependent line will open in the Dependents field.
- Be certain to check all the months the dependent was covered.
- Enterprise interface only: Use the Copy Employee to dependents to copy employee information to the dependent field.
- **TIP: Do not add dependents (even employee) if the employee waived coverage. It will throw errors in the transmission to AIR.**



The screenshot shows a web-based form titled "Dependents". The form has a header row with the following fields: Last Name, First Name, Middle Name, SSN, Date of Birth, and a series of checkboxes for the months of the year: January, February, March, April, May, June, July, and August. Each field has a small red pencil icon next to it, indicating it is an edit field. The form is currently empty, with no data entered.

Add Dependents - Cirrus

- Dependents can be either keyed or imported.
- Dependents are ONLY included if you need to report as self-insured. You can get that information from your insurance carrier.
- If manually adding dependents, click on the Dependents tab
- A dependent line will open in the Dependents field.
- Be certain to check all the months the dependent was covered.
- Cirrus interface only: the employee will auto populate in the Dependent field when checking Self-Insured toggle for the employee.
- **TIP: Do not add dependents (even employee) if the employee waived coverage. It will throw errors in the transmission to AIR.**

COVERAGES DEPENDENTS (1)

[X CANCEL](#) [+ CREATE DEPENDENT](#) [🗑 DELETE](#) COLUMNS ▾ ⋮

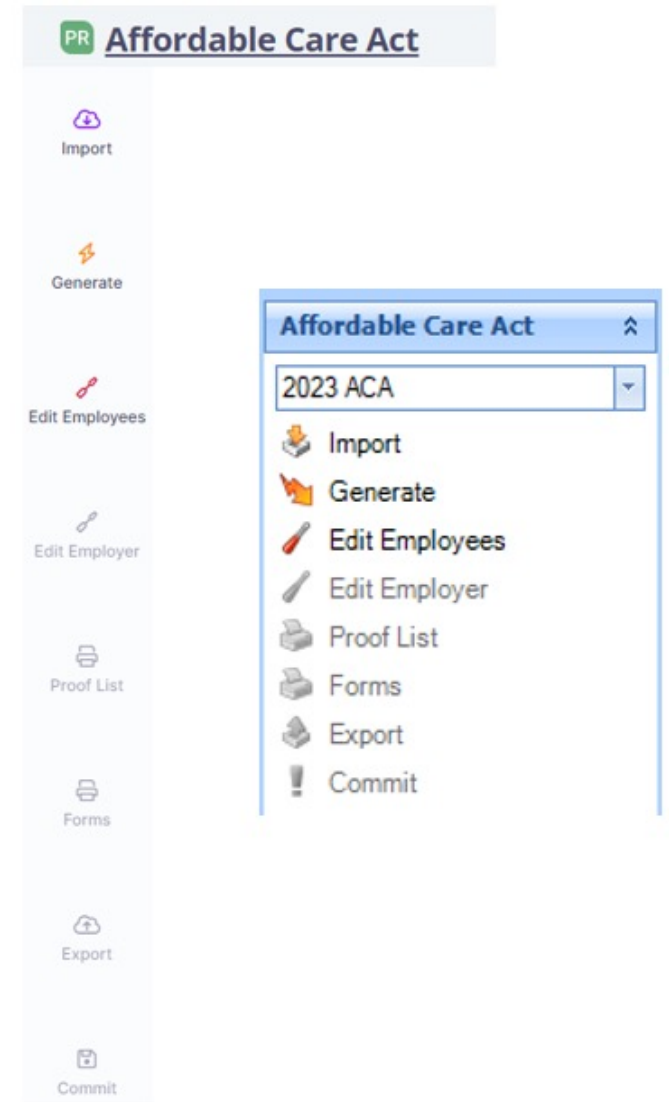
Last Name	First Name	Middle Name	SSN	Date of Birth	January	February	March	April	May
Tore	Bob		000000000		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Saving tips

- Save often as you are manually updating Affordable Care Act records. It takes time but will help you if you make a mistake. You can exit without saving and only have some edits to do again.
- If window doesn't close in a couple minutes max, scroll through the employees to see if there is an error.
- Errors will be indicated by red font (and exclamation mark in Enterprise).

Affordable Care Act batch process

- Import or Generate
- Edit Employees
- Edit Employer
- Proof List
- Forms
- Export
- Commit – never needed just deletes information.



Edit Employer

Edit Employer information is **CRITICAL** if you are going to file electronically. If you are filing on paper (unlikely), you can simply fill out the Contact tab information.

- Some fields not required for 2023. Cirrus enhancement has these unnecessary options removed.
 - Signature PIN
 - Person Title
 - Signature Date

PR Edit / Affordable Care Act

File Window Help

Save Refresh Favorite Exit Help Dock in MDI

Employer Contact

Signature PIN: Aggregated group

Person Title: Qualifying offer

Signature Date: / / Qualifying offer transition relief

Request Type: Section 4980H transition relief

Authoritative 98% offer method

PR Affordable Care Act 2023 ACA SAVE

Overview EMPLOYER CONTACT

Request Type Aggregated group Qualifying offer

Authoritative 98% offer method

Monthly Employer Data

Month	Total Employee Count	Eligible FTE Count	Min Essential Coverage	Transition Relief	Aggregated Group
January	0	0		<input type="checkbox"/>	<input type="checkbox"/>
February	0	0		<input type="checkbox"/>	<input type="checkbox"/>
March	0	0		<input type="checkbox"/>	<input type="checkbox"/>
April	0	0		<input type="checkbox"/>	<input type="checkbox"/>

Employer tab

- Request Type – Generally Business TIN. Must be indicated.
- Authoritative – Must check unless part of an Aggregated group.
- Aggregate group - must not toggle unless you are part of an Aggregated group.
- Qualifying offer – Most clients check this.
- 98% offer method

The screenshot shows the 'Employer' tab with the following fields and options:

Signature PIN:	<input type="text"/>	<input type="checkbox"/> Aggregated group
Person Title:	<input type="text"/>	<input checked="" type="checkbox"/> Qualifying offer
Signature Date:	<input type="text" value="/ /"/>	<input type="checkbox"/> Qualifying offer transition relief
Request Type:	<input type="text" value="BUSINESS_TIN"/>	<input type="checkbox"/> Section 4980H transition relief
<input checked="" type="checkbox"/> Authoritative		<input type="checkbox"/> 98% offer method

The screenshot shows the 'EMPLOYER' tab with the following fields and options:

Request Type	<input type="checkbox"/> Aggregated group	<input checked="" type="checkbox"/> Qualifying offer
BUSINESS_TIN	<input checked="" type="checkbox"/> Authoritative	<input type="checkbox"/> 98% offer method

Applicable Large Employer/Monthly Employer Data

This information must be included if filing electronically as Authoritative for the ALE member.

- Total Employee Count – This is for the total number of employees per month.
- Eligible FTE Count – Number of employees eligible for insurance. **MUST BE LESS THAN OR EQUAL TO THE TOTAL EMPLOYEE COUNT FOR THE MONTH.**
- Min Essential Coverage – Yes – must answer for each month.
- Transition Relief – Not used for 2023.
- Aggregate Group – If applicable.

Applicable Large Employer					
Month	Total Employee Count	Eligible FTE Count	Min Essential Coverage	Transition Relief	Aggregated Group
January	300	250	Yes		<input type="checkbox"/>
February	300	250	Yes		<input type="checkbox"/>
March	300	250	Yes		<input type="checkbox"/>
April	300	250	Yes		<input type="checkbox"/>
May	300	250	Yes		<input type="checkbox"/>
June	300	250	Yes		<input type="checkbox"/>
July	300	250	Yes		<input type="checkbox"/>
August	300	250	Yes		<input type="checkbox"/>
September	300	250	Yes		<input type="checkbox"/>
October	300	250	Yes		<input type="checkbox"/>
November	300	250	Yes		<input type="checkbox"/>
December	300	250	Yes		<input type="checkbox"/>

Monthly Employer Data

Month	Total Employee Count	Eligible FTE Count	Min Essential Coverage
January	300	250	Yes
February	300	250	Yes
March	300	250	Yes
April	300	250	Yes
May	300	250	Yes
June	300	250	Yes
July	300	250	Yes
August	300	250	Yes
September	300	250	Yes
October	300	250	Yes
November	300	250	Yes
December	300	250	Yes

Contact tab

- Complete the First Name, Middle Name, Last Name, Suffix (if applicable) and Phone for the person with the TCC number. This is the person responsible for answering any questions from the IRS. (see page 7 of IRS instructions)
- NOTE: Make sure there are no spaces after the typed information to avoid filing errors with the AIR system.

PR Edit / Affordable Care Act

File Window Help

Employer **Contact**

First Name: Mary

Middle Name:

Last Name: Smith

Suffix:

Phone: (503) 999-9999

EMPLOYER CONTACT

First Name: Mary

Middle Name:

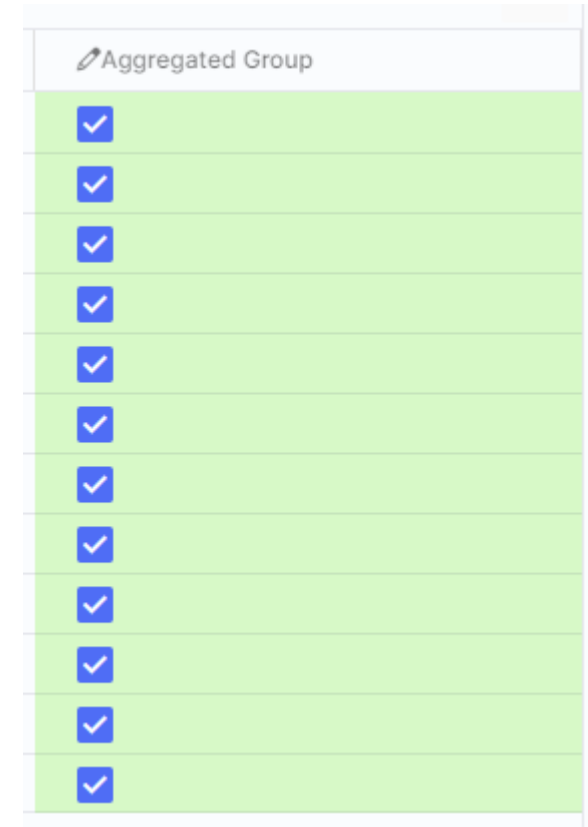
Last Name: Smith

Suffix:

Phone: (503) 999-9999

Aggregated Group - Uncommon

- If Aggregated Group is toggled on the General tab two additional tabs will appear.
- You will know if you are part of an Aggregated Group based on how you file W2 information.
- If you don't know you are likely not part of an Aggregated Group.
- If checked, two additional tabs will display.
- Cirrus interface only: if checked, the column in Monthly Employer data will auto check also.



Government Entity tab

- ONLY used if the organization is part of an aggregate group. Will only display if Aggregated group is checked on the Employer tab.
- Enter complete address and DGE information. See page 7 of the IRS instructions.

The screenshot shows a software window titled "Edit / Affordable Care Act" with standard window controls (minimize, maximize, close). The application has a menu bar with "File", "Window", and "Help". Below the menu bar is a toolbar with icons for "Save", "Refresh", "Favorite", "Exit", "Help", and "Dock in MDI". The main interface features four tabs: "Employer", "Contact", "Government Entity" (which is currently selected), and "Aggregate Entities". The "Government Entity" tab contains two columns of input fields. The left column includes fields for "Name:", "EIN:", "Address:", "City/State:" (with a dropdown menu for the state), and "Zip:". The right column includes fields for "First Name:", "Middle Name:", "Last Name:", "Suffix:", and "Phone:" (with a format indicator "() -").

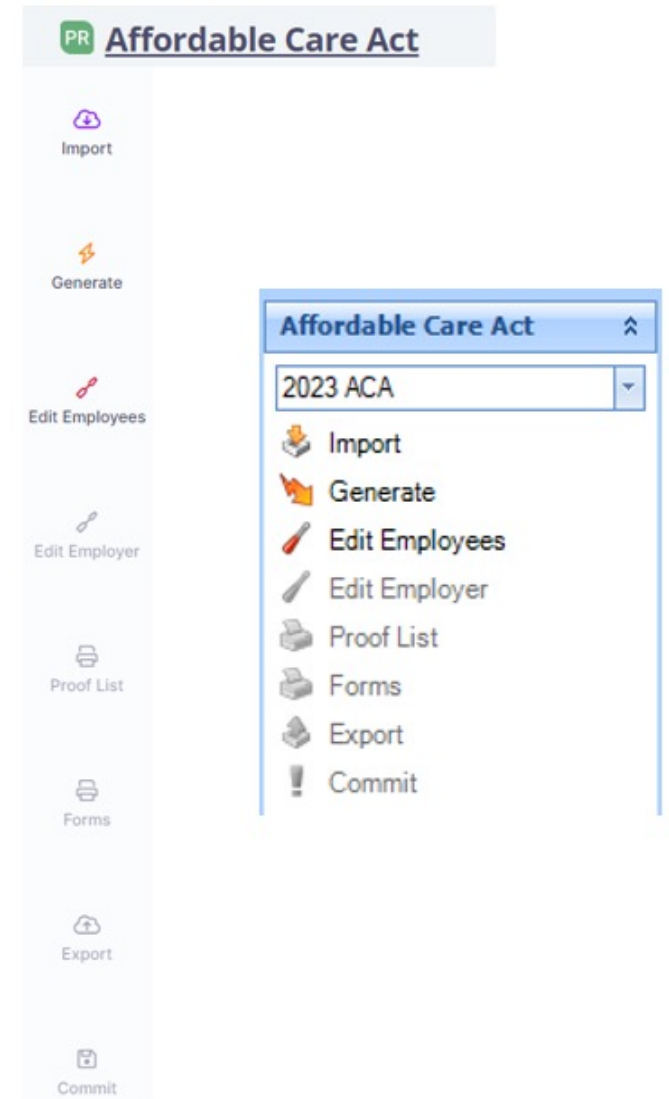
Aggregated Entities tab

- ONLY used if your agency is a part of an aggregate entity.
- This window should include each entity that is included with your reporting and the EIN number. The entities listed here will be filing non-authoritative returns.
- NOTE – The EIN names and numbers must match tax filings and are often the same as the Government entity.

The screenshot shows a software window titled "Edit / Affordable Care Act" with standard window controls (minimize, maximize, close). The application has a menu bar with "File", "Window", and "Help". Below the menu bar is a toolbar with icons for "Save", "Refresh", "Favorite", "Exit", "Help", and "Dock in MDI". The main interface features a tabbed view with four tabs: "Employer", "Contact", "Government Entity", and "Aggregate Entities". The "Aggregate Entities" tab is active and displays a form with five rows. Each row contains two input fields: "Entity 1:" through "Entity 5:" on the left, and "EIN 1:" through "EIN 5:" on the right. All input fields are currently empty.

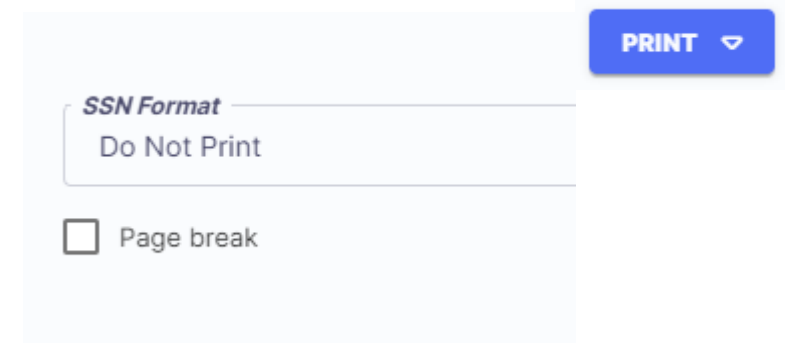
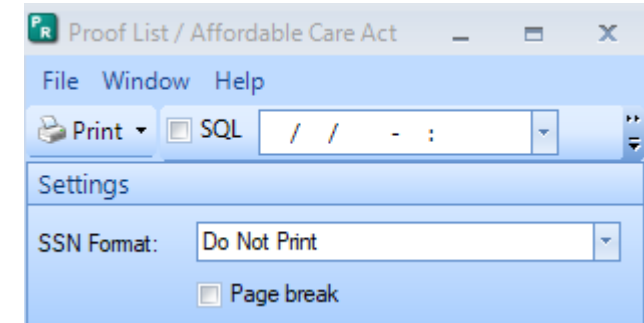
Affordable Care Act batch process

- Import or Generate
- Edit Employees
- Edit Employer
- Proof List
- Forms
- Export
- Commit – never needed just deletes information.



Proof List

- Run the Proof List – This is a required step but you don't have to use the report. We have added the employee count to the last page of the report to give you the information for your Export step.
- Page break will print one employee to a page.
- Forms to Print on the last page will give you the number to report in the export step.

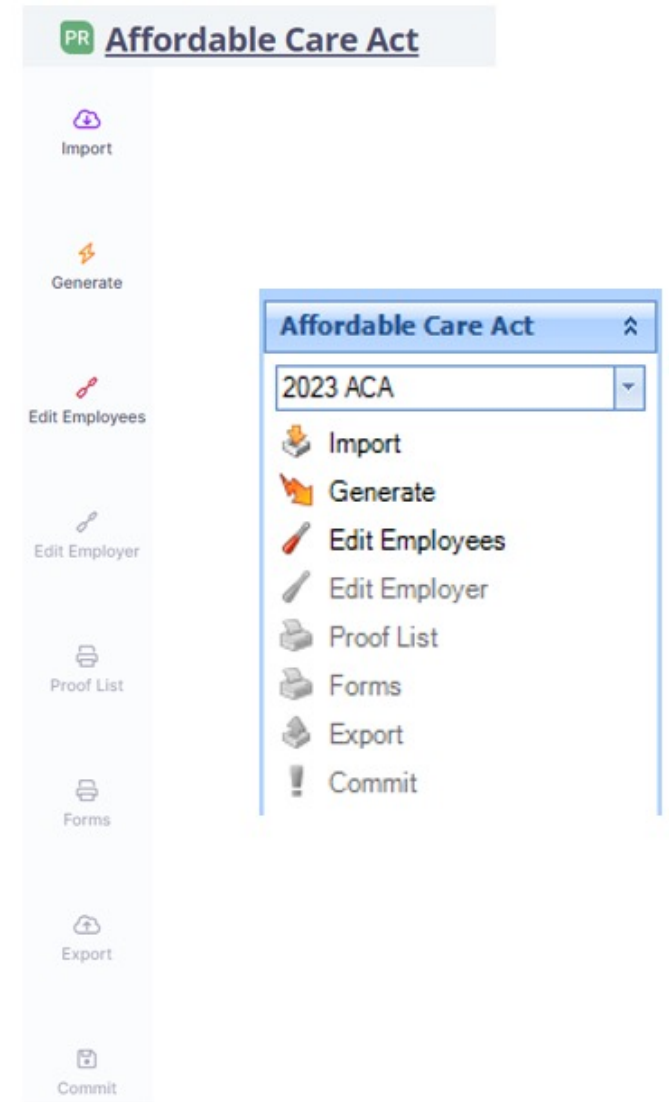


Name

Forms to Print: 489

Affordable Care Act batch process

- Import or Generate
- Edit Employees
- Edit Employer
- Proof List
- Forms
- Export
- Commit – never needed just deletes information.



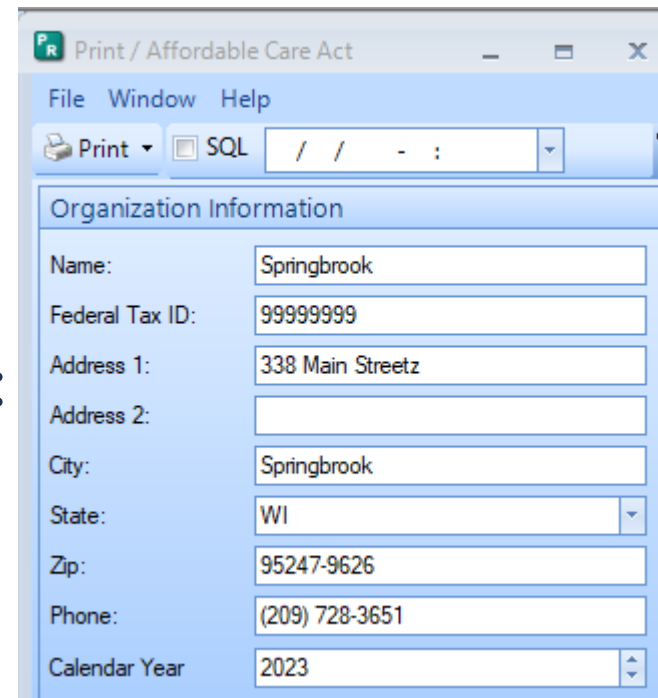
Forms

Many users find review of the information is easier by reviewing the Forms rather than the Proof List.

- Forms will print in the order selected during the Import or Generate process.
- We have also added an additional page to print for employees that have more dependents than can fit on the standard form. This will only be important for clients that are considered self-insured and report dependents.

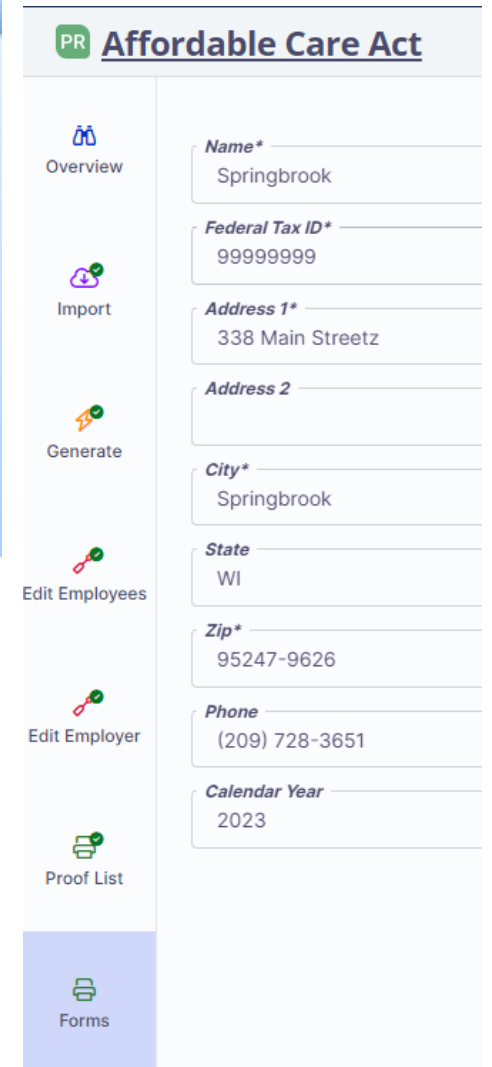
Forms

- This step is where you print your employee forms.
- Be sure to keep the following in mind:
 - Federal Tax ID – no dashes
 - Address – no characters
- Select the Calendar (reporting) Year. Should be 2023. Cloud Payroll clients will default to fiscal year of the system and may need to be changed.
- Forms will print in the order selected on the import or generate step.



The screenshot shows a window titled "Print / Affordable Care Act" with a menu bar (File, Window, Help) and a toolbar (Print, SQL). The main content area is titled "Organization Information" and contains the following fields:

Name:	Springbrook
Federal Tax ID:	99999999
Address 1:	338 Main Streetz
Address 2:	
City:	Springbrook
State:	WI
Zip:	95247-9626
Phone:	(209) 728-3651
Calendar Year:	2023



The screenshot shows the "Affordable Care Act" dashboard. The top navigation bar includes "PR Affordable Care Act". The left sidebar contains navigation options: Overview, Import, Generate, Edit Employees, Edit Employer, Proof List, and Forms. The main content area displays the organization information from the previous screenshot in a form-like layout:

Name*	Springbrook
Federal Tax ID*	99999999
Address 1*	338 Main Streetz
Address 2	
City*	Springbrook
State	WI
Zip*	95247-9626
Phone	(209) 728-3651
Calendar Year	2023

Forms print – Use a duplex printer

• Page 1

Page 1 - Backside

600223

Page 2

Form **1095-C** **Employer-Provided Health Insurance Offer and Coverage** VOID CORRECTED 600223
OMB No 1545-2251
2023

Department of the Treasury Internal Revenue Service Do not attach to your tax return. Keep for your records.
Go to www.irs.gov/Form1095C for instructions and the latest information.

Part I Employee **Applicable Large Employer Member (Employer)**

1 Name of employee (first name, middle initial, last name) Earl R Abbet 2 Social security number (SSN) 999-99-3826 7 Name of employer Springbrook 8 Employer identification number (EIN) 99-999991

3 Street address (including apartment no.) 730 So 21st St 9 Street address (including room or suite no.) 338 Main Peacock Streetz 10 Contact telephone number (209) 728-3651

4 City or town Springbrook 5 State or province OR 6 Country and ZIP or foreign postal code 97541- 11 City or town Springbrook 12 State or province WI 13 Country and ZIP or foreign postal code 95247-9626

Part II Employee Offer of Coverage **Employee's Age on January 1** 42 **Plan Start Month (Enter 2-digit number):** 01

14 Offer of Coverage (enter required code)	All 12 Months											
	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
15 Employee Required Contribution (see instructions)	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
16 Section 4980H Safe Harbor and Other Relief (enter code, if applicable)	2C											

17 ZIP Code

Form 1095-C (2023)

Instructions for Recipient

You are receiving this Form 1095-C because your employer is an Applicable Large Employer subject to the employer shared responsibility provisions in the Affordable Care Act. This Form 1095-C includes information about the health insurance coverage offered to you by your employer. Form 1095-C, Part I, includes information about the coverage, if any, your employer offered to you and your spouse and dependent(s). If you purchased health insurance coverage through the Health Insurance Marketplace and wish to claim the premium tax credit, this information will assist you in determining whether you are eligible. For more information about the premium tax credit, see Pub. 974, Premium Tax Credit (PTC). You may receive multiple Forms 1095-C if you had multiple employers during the year that were Applicable Large Employers (for example, you left employment with one Applicable Large Employer and began a new position of employment with another Applicable Large Employer). In that situation, each Form 1095-C would have information only about the health insurance coverage offered to you by the employer identified on the form. If your employer is not an Applicable Large Employer, it is not required to furnish you a Form 1095-C providing information about the health coverage it offered. In addition, if you, or any other individual who is offered health coverage because of their relationship to you (referred to here as family members), enrolled in your employer's health plan and that plan is a type of plan referred to as a "self-insured" plan, Form 1095-C, Part II, provides information about you and your family members who had certain health coverage (referred to as "minimum essential coverage") for some or all months during the year. If you or your family members are eligible for certain types of minimum essential coverage, you may not be eligible for the premium tax credit. If your employer provided you or a family member health coverage through an insured health plan or in another manner, you may receive information about the coverage separately on Form 1095-B, Health Coverage. Similarly, if you or a family member obtained minimum essential coverage from another source, such as a government-sponsored program, an individual market plan, or miscellaneous coverage designated by the Department of Health and Human Services, you may receive information about that coverage on Form 1095-A, Health Insurance Marketplace Statement.



TIP Employers are required to furnish Form 1095-C only to the employee. As the recipient of this Form 1095-C, you should provide a copy to any family members covered under a self-insured employer-sponsored plan listed in Part III if they request it for their records.

Additional information. For additional information about the tax provisions of the Affordable Care Act (ACA), including the individual shared responsibility provisions, the premium tax credit, and the employer shared responsibility provisions, visit www.irs.gov/ACA or call the IRS Healthcare Hotline for ACA questions (800-919-0452).

Part I. Employee

Lines 1-4. Part I, lines 1-4, reports information about you, the employee.
Line 2. This is your social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, the employer is required to report your complete SSN to the IRS.

Part I. Applicable Large Employer Member (Employer)

Lines 7-13. Part I, lines 7-13, reports information about your employer.
Line 8. This line includes a telephone number for the person whom you may call if you have questions about the information reported on the form or to report errors in the information on the form and ask that they be corrected.

Part II. Employer Offer and Coverage, Lines 14-16

Line 14. The codes listed below for line 14 describe the coverage that your employer offered to you and your spouse and dependent(s), if any. (If you received an offer of coverage through a multiemployer plan due to your membership in a union, that offer may not be shown on line 14.) The information on line 14 relates to eligibility for coverage subsidized by the premium tax credit for you, your spouse, and dependent(s). For more information about the premium tax credit, see Pub. 974.

- 1A. Minimum essential coverage providing minimum value offered to you with an employee required contribution for self-only coverage equal to or less than 5.5% (as adjusted) of the 48 contiguous states single federal poverty line and minimum essential coverage offered to your spouse and dependent(s) (referred to here as a Qualifying Offer). This code may be used to report for specific months for which a Qualifying Offer was made, even if you did not receive a Qualifying Offer for all 12 months of the calendar year. For information on the adjustment of the 9.5%, visit irs.gov.
- 1B. Minimum essential coverage providing minimum value offered to you and minimum essential coverage NOT offered to your spouse or dependent(s).
- 1C. Minimum essential coverage providing minimum value offered to you and minimum essential coverage offered to your dependent(s) but NOT your spouse.
- 1D. Minimum essential coverage providing minimum value offered to you and minimum essential coverage offered to your spouse but NOT your dependent(s).
- 1E. Minimum essential coverage providing minimum value offered to you and minimum essential coverage offered to your dependent(s) and spouse.
- 1F. Minimum essential coverage NOT providing minimum value offered to you, or you and your spouse or dependent(s), or you, your spouse, and dependent(s).
- 1G. You were NOT a full-time employee for any month of the calendar year but were enrolled in self-insured employer-sponsored coverage for one or more months of the calendar year. This code will be entered in the All 12 Months box or in the separate monthly boxes for all 12 calendar months on line 14.
- 1H. No offer of coverage (you were NOT offered any health coverage or you were offered coverage that is NOT minimum essential coverage).
- 1I. Reserved for future use.
- 1J. Minimum essential coverage providing minimum value offered to you; minimum essential coverage conditionally offered to your spouse; and minimum essential coverage NOT offered to your dependent(s).
- 1K. Minimum essential coverage providing minimum value offered to you; minimum essential coverage conditionally offered to your spouse; and minimum essential coverage offered to your dependent(s).
- 1L. Individual coverage health reimbursement arrangement (HRA) offered to you only with affordability determined by using employee's primary residence location ZIP code.
- 1M. Individual coverage HRA offered to you and dependent(s) (not spouse) with affordability determined by using employee's primary residence location ZIP code.
- 1N. Individual coverage HRA offered to you, spouse and dependent(s) with affordability determined by using employee's primary residence location ZIP code.
- 1O. Individual coverage HRA offered to you only using the employee's primary employment site ZIP code affordability safe harbor.
- 1P. Individual coverage HRA offered to you and dependent(s) (not spouse) using the employee's primary employment site ZIP code affordability safe harbor.
- 1Q. Individual coverage HRA offered to you, spouse and dependent(s) using the employee's primary employment site ZIP code affordability safe harbor.
- 1R. Individual coverage HRA that is NOT affordable offered to you; employee and spouse or dependent(s); or employee, spouse, and dependents.
- 1S. Individual coverage HRA offered to an individual who was not a full-time employee.
- 1T. Individual coverage HRA offered to employee and spouse (no dependents) with affordability determined using employee's primary residence ZIP code.
- 1U. Individual coverage HRA offered to employee and spouse (no dependents) using employee's primary employment site ZIP code affordability safe harbor.
- 1V. Reserved for future use.
- 1W. Reserved for future use.
- 1X. Reserved for future use.
- 1Y. Reserved for future use.
- 1Z. Reserved for future use.



Forms print – Use a duplex printer

• Page 2

Page 2 - Backside

Form 1095-C (2023) 600223
Page 3

Part III Covered Individuals
If Employer provided self-insured coverage, check the box and enter the information for each individual enrolled in coverage, including the employee.

	(a) Name of covered individual(s) First name, middle initial, last name		(b) SSN or other TIN	(c) DOB (if SSN or other TIN is not available)	(d) Covered all 12 months	(e) Months of Coverage												
						Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	
18	Depend	Depender	443-22-3234		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19	Liam	Moriarty	999-99-3826		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20	Earl	R Abbet	999-99-3826	2/14/1980	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Form 1095-C (2023) 600223
Page 4

Instructions for Recipient (continued)

Line 15. This line reports the employee required contribution, which is the monthly cost to you for the lowest-cost self-only minimum essential coverage providing minimum value that your employer offered you. For an individual coverage HRA, the employee required contribution is the excess of the monthly premium based on the employee's applicable age for the applicable lowest cost silver plan over the monthly individual coverage HRA amount (generally, the annual individual coverage HRA amount divided by 12). See the instructions for Forms 1094-C and 1095-C for more details. The amount reported on line 15 may not be the amount you paid for coverage if, for example, you chose to enroll in more expensive coverage such as family coverage. Line 15 will show an amount only if code 1B, 1C, 1D, 1E, 1J, 1K, 1L, 1M, 1N, 1O, 1P, 1Q, 1T, or 1U is entered on line 14. If you were offered coverage but there is no cost to you for the coverage, this line will report "0.00" for the amount. For more information, including on how your eligibility for other healthcare arrangements might affect the amount reported on line 15, visit IRS.gov.

Line 16. This code provides the IRS information to administer the employer shared responsibility provisions. Other than a code 2C, which reflects your enrollment in your employer's coverage, none of this information affects your eligibility for the premium tax credit. For more information about the employer shared responsibility provisions, visit IRS.gov.

Line 17. This line reports the applicable ZIP code your employer used for determining affordability if you were offered an individual coverage HRA. If code 1L, 1M, 1N, or 1T was used on line 14, this will be your primary residence location. If code 1O, 1P, 1Q, or 1U was used on line 14, this will be your primary work location. For more information about individual coverage HRAs, visit IRS.gov.

Part III. Covered Individuals, Lines 18-30
Part III reports the name, SSN (or TIN for covered individuals other than the employee listed in Part I), and coverage information about each individual (including any full-time employee and non-full-time employee, and any employee's family members) covered under the employer's health plan, if the plan is "self-insured." A date of birth will be entered in column (c) only if an SSN (or TIN for covered individuals other than the employee listed in Part I) is not entered in column (b). Column (d) will be checked if the individual was covered for at least one day in every month of the year. For individuals who were covered for some but not all months, information will be entered in column (e) indicating the months for which those individuals were covered.

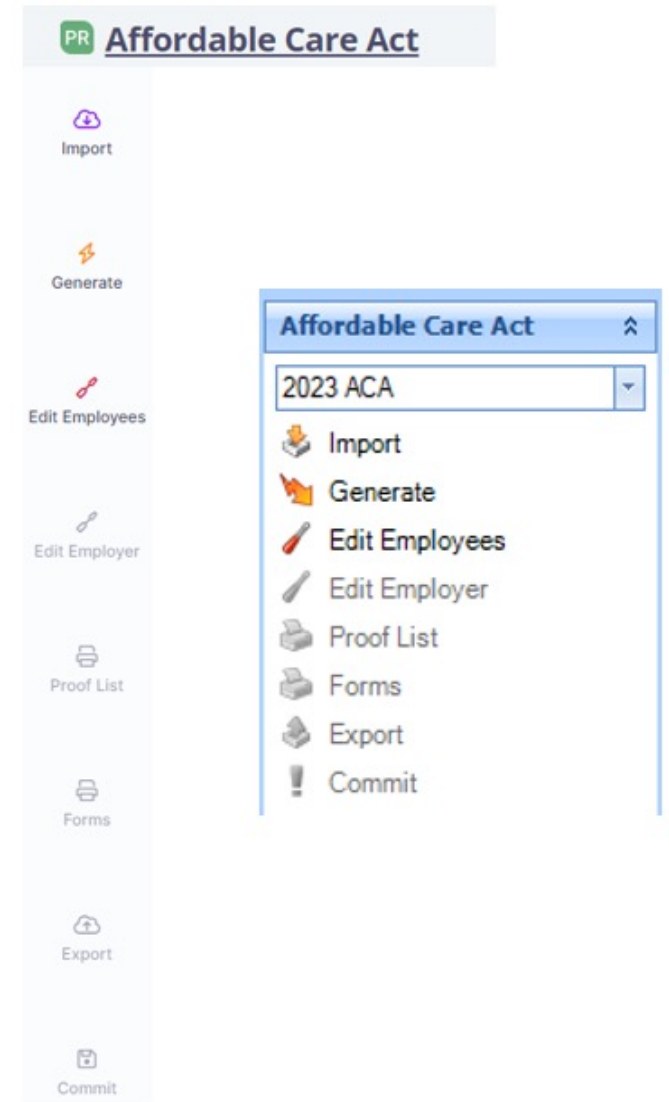
If you report Self-Insured (dependents are included) additional pages may be printed if dependents cannot fit on the page provided.

IRS Filing on Paper

- If you have fewer than 10 forms, you are allowed to file on paper to the IRS.
- Complete the 1094C transmittal form from the IRS website.
 - Contains the same information as the Edit Employer window does in the ACA process.
<https://www.irs.gov/pub/irs-pdf/f1094c.pdf>
- Copy BOTH sides of the 1095C forms to submit.
 - IRS could send back if both sides are not included.
- Mail forms to the IRS.

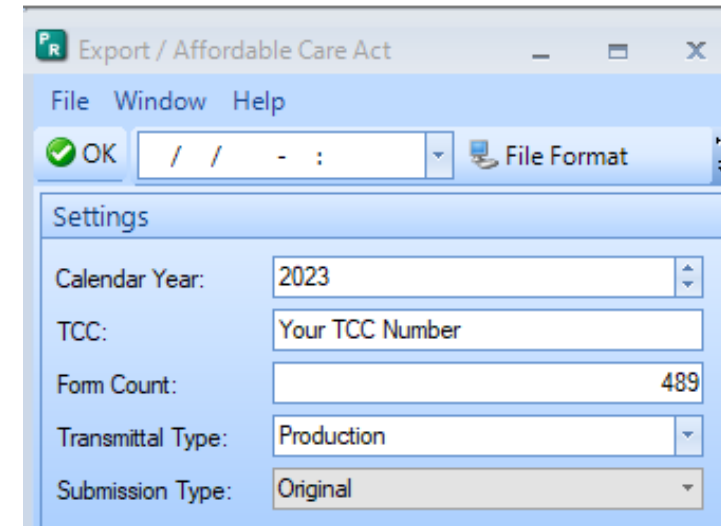
Affordable Care Act batch process

- Import or Generate
- Edit Employees
- Edit Employer
- Proof List
- Forms
- Export
- Commit – never needed just deletes information.



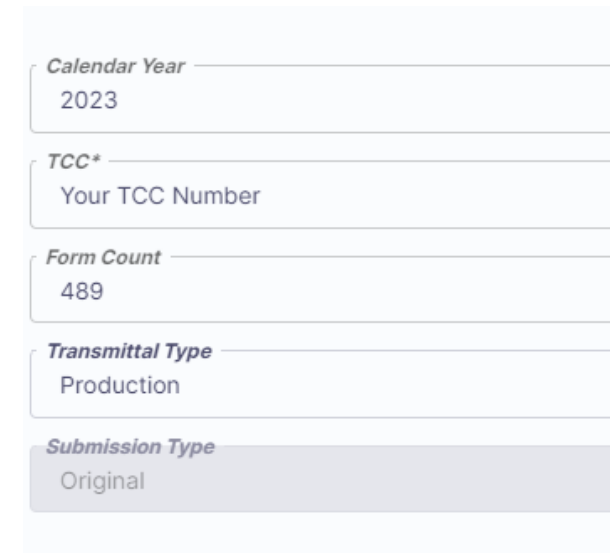
Export

- Creates an Export file to upload to the IRS AIR system.
- Calendar Year – Year being reported.
- TCC – Your agencies Transmittal Control Code (not the same as 1099).
- Form Count – Number of forms
- Transmittal Type
 - Production – Normal selection
 - Test – Only used to test TCC numbers
- Submission Type
 - Will only be available if the Import Step was marked as a Resubmission.
 - Resubmission (uncommon)
 - Correction – Used to correct data if you received “Accepted with Errors” letter



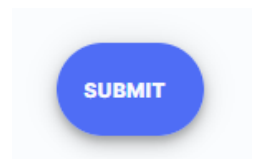
The screenshot shows a software window titled "Export / Affordable Care Act" with a menu bar (File, Window, Help) and a toolbar with an "OK" button and a "File Format" dropdown. Below the toolbar is a "Settings" section with the following fields:

Calendar Year:	2023
TCC:	Your TCC Number
Form Count:	489
Transmittal Type:	Production
Submission Type:	Original



The form preview displays the same settings as the screenshot above, with each field in a separate box:

- Calendar Year: 2023
- TCC*: Your TCC Number
- Form Count: 489
- Transmittal Type: Production
- Submission Type: Original



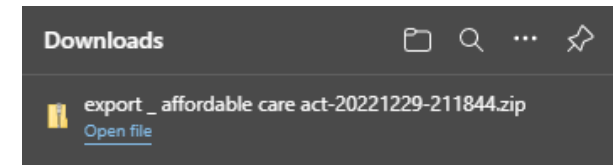
Export

- Find your Export files in the Jobs Viewer, and double click to open.

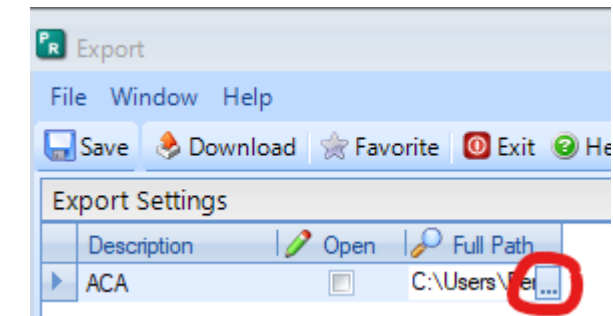
Job ID	Details	Description	Status	Results
0000410771	<input type="checkbox"/>	Export / Affordable Care Act	Complete	Process completed successfully.

Job ID	Details	Description	Status	Results
0000410771		Export / Affordable ...	Complete	Process completed successfully.

- In Cirrus, it will automatically download a zip file. “Extract All” to save in a folder you have assigned for keeping your files organized.



- In Enterprise, you will need to click on the ‘...’ to choose where to save your files. Click Save.



- Login to the IRS AIR system and transmit your 1094C and Manifest files.
- You do NOT need to Commit your batch. Recommend leaving it there in the event you need to go back and Edit again.

Questions?





Thank you!