

A Series 1 code **must** be entered in line 14 to indicate the type of coverage offered (or no coverage offered) to the employee and family. Enter a code for each month, or enter one code in the “all 12 months” box if the same code applies for the entire calendar year.

“Spouse” means the employee’s spouse. “Dependents” means children of the employee.

Code	What Does the Code Mean?	Additional Notes
<b>1A</b>	Qualifying Offer: Minimum essential coverage (MEC) providing minimum value (MV) offered to full-time employee with Employee Required Contribution equal to or less than 9.56% (2015 plan year) or 9.66% (2016 plan year) of mainland single federal poverty line. At least MEC also offered to spouse + dependent(s).	Do not use code 1A if employee required contribution exceeded the allowed percentage of mainland single federal poverty line (e.g., appx. \$93/month for self-only coverage).
<b>1B</b>	Minimum essential coverage providing minimum value offered to <b>employee only</b> .	Examples of using code 1B: <ul style="list-style-type: none"> <li>No coverage offered to spouse or dependents.</li> <li>COBRA offered to employee after losing coverage (e.g., changing from full-time to part-time status); no COBRA offer to dependents because none had been covered.</li> </ul>
<b>1C</b>	Minimum essential coverage providing minimum value offered to employee and at least minimum essential coverage offered to dependent(s) (not spouse).	
<b>1D</b>	Minimum essential coverage providing minimum value offered to employee and at least minimum essential coverage offered to spouse (not dependent(s)).	If coverage for the spouse was offered conditionally (e.g., offer was conditioned on spouse not being eligible for coverage under Medicare or another employer’s plan), do not use code 1D. Instead use code 1J.
<b>1E</b>	Minimum essential coverage providing minimum value offered to employee and at least minimum essential coverage offered to dependent(s) and spouse.	If coverage for the spouse was offered conditionally (e.g., offer was conditioned on spouse not being eligible for coverage under Medicare or another employer’s plan), do not use code 1E. Instead use code 1K.
<b>1F</b>	Minimum essential coverage NOT providing minimum value offered to employee; employee + spouse or dependent(s); or employee, spouse and dependents.	
<b>1G</b>	Offer of coverage for at least one month of the calendar year to an individual who was not an employee for any month of the calendar year (or to an employee who was not a full-time employee for any month of the calendar year, which may include one or more months in which the individual was not an employee) <u>and</u> who enrolled in self-insured coverage for one or more months of the calendar year.	Not applicable for an ALE member that does not self-insure the coverage.  Code 1G applies for the entire year or not at all. Therefore, if code 1G applies, the ALE Member must enter code 1G on line 14 in the “All 12 Months” column or in each separate monthly box (for all 12 months).
<b>1H</b>	No offer of coverage (i.e., employee not offered any health coverage or employee offered coverage that is not minimum essential coverage, which may include one or more months in which the individual was not an employee).	Code 1H also applies in following cases: <ul style="list-style-type: none"> <li>Multiemployer interim rule relief (e.g., union trust)</li> <li>COBRA offer made to former employee (or spouse or dependents) due to termination of employment.</li> </ul>
<b>1I</b>	Reserved.	Do not use.
<b>1J</b>	Minimum essential coverage providing minimum value offered to employee and at least minimum essential coverage conditionally offered to spouse; minimum essential coverage not offered to dependent(s).	Use only if coverage for the spouse was offered conditionally (e.g., conditioned on spouse not being eligible for other coverage under Medicare or another employer’s plan).
<b>1K</b>	Minimum essential coverage providing minimum value offered to employee; at least minimum essential coverage offered to dependents; and at least minimum essential coverage conditionally offered to spouse.	Use only if coverage for the spouse was offered conditionally (e.g., conditioned on spouse not being eligible for other coverage under Medicare or another employer’s plan).

Enter a Series 2 code for one or more months in line 16 to indicate a § 4980H safe harbor or other penalty relief (e.g. individual was not employed or was not full-time employee; employee enrolled in minimum essential coverage; employee was in a waiting period or other limited non-assessment period).

A different Series 2 code, or no code, may be entered for each month. If no Series 2 codes apply, leave line 16 blank.

Code	What Does the Code Mean?	Additional Notes
2A	<p><i>Code 2A generally means not employed or not a full time employee.</i> Enter code 2A if the employee was not employed on any day of the calendar month. Do not use code 2A for a month if the individual was an employee of the ALE Member on any day of the calendar month.</p>	<p>Employee not employed during the month.</p> <p>Do not use code 2A for the month during which an employee terminates employment with the ALE Member.</p>
2B	<p><i>Code 2B generally means not a full-time employee.</i> Enter code 2B if:</p> <ul style="list-style-type: none"> <li>The employee was not a full-time employee for the month and did not enroll in minimum essential coverage (if offered); OR</li> <li>The employee was a full-time employee for the month and whose offer of coverage (or coverage if the employee was enrolled) ended before the last day of the month solely because the employee terminated employment during the month (so that the offer of coverage or coverage would have continued if the employee had not terminated employment during the month).</li> </ul>	<p>Do not enter code 2B for any month that employee was in an initial measurement period (i.e., did not yet meet definition of full-time employee). In that case, use code 2D.</p> <p>Do enter 2B for the month in which full-time employee terminates employment mid-month (then enter 2A for subsequent months).</p>
2C	<p><i>Code 2C generally means enrolled in coverage.</i> Employee enrolled in health coverage offered. Enter code 2C for any month in which the employee enrolled for each day of the month in health coverage offered by the ALE Member, regardless of whether any other code in Code Series 2 might also apply (e.g., the code for a section 4980H affordability safe harbor), but see Additional Notes.</p>	<p>Do not enter code 2C in line 16:</p> <ul style="list-style-type: none"> <li>For any month in which the multiemployer interim rule relief applies (enter code 2E).</li> <li>If code 1G is entered in line 14.</li> <li>For any month in which a terminated employee is enrolled in COBRA or other post-employment coverage (enter code 2A).</li> <li>For any month in which the employee enrolled in coverage that was not minimum essential coverage.</li> </ul>
2D	<p><i>Code 2D generally means a Limited Non-Assessment Period.</i> Enter code 2D for any month during which an employee is in a section 4980H(b) Limited Non-Assessment Period. If an employee is in an initial measurement period, enter code 2D for the month, and not code 2B.</p>	<p>If the employee is in a Limited Non-Assessment Period but the ALE is also eligible for the multiemployer interim relief for the month, use code 2E (see below) and not code 2D.</p>
2E	<p><i>Code 2E generally means multiemployer interim rule relief (e.g., union trust).</i> Enter code 2E for any month for which the multiemployer arrangement interim guidance applies for that employee, regardless of whether any other code in Code Series 2 (including code 2C) might also apply.</p>	<p>An ALE Member eligible to use code 2E and also eligible to use codes 2F, 2G, or 2H (affordability safe harbor codes) should use code 2E instead of codes 2F, 2G, or 2H.</p>
2F	<p>Enter code 2F if the ALE Member used the section 4980H <b>Form W-2 safe harbor</b> to determine affordability for purposes of section 4980H(b) for this employee for the year. See Important Note below.</p>	<p>If an ALE Member uses this safe harbor for an employee, it must be used for <b>all months of the calendar year</b> for which the employee is offered health coverage.</p> <p>If code 2E also applies, use code 2E instead.</p>
2G	<p>Enter code 2G if the ALE Member used the section 4980H <b>federal poverty line safe harbor</b> to determine affordability for purposes of section 4980H(b) for this employee for any month(s). See Important Note below.</p>	<p>If code 2E also applies, use code 2E instead.</p>

<b>2H</b>	Enter code 2H if the ALE Member used the section 4980H <b>rate of pay safe harbor</b> to determine affordability for purposes of section 4980H(b) for this employee for any month(s). See Important Note below.	If code 2E also applies, use code 2E instead.
<b>2I</b>	Reserved.	Do not use.

**Important Note:** Code 2F, 2G or 2H cannot be entered on line 16 for any month that the ALE member did not offer minimum essential coverage to at least 95% of its full-time employees and their dependents (i.e., any month for which the ALE member checked the “No” box on Form 1094-C, Part III, column (a)). For more information, see the instructions for Form 1094-C, Part III, column (a).