COBRA IMPORT SYSTEM 1.0

File Integration Guide

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1. About the COBRA Import System

The COBRA Import System accepts and processes electronic data files containing QB events (COBRA events) and NPM (active employees enrolled in at least one COBRA-eligible plan). When a file is received it is taken through a process to evaluate the content of the data and identify any errors. This process checks for proper formatting as well as any issues with the data.
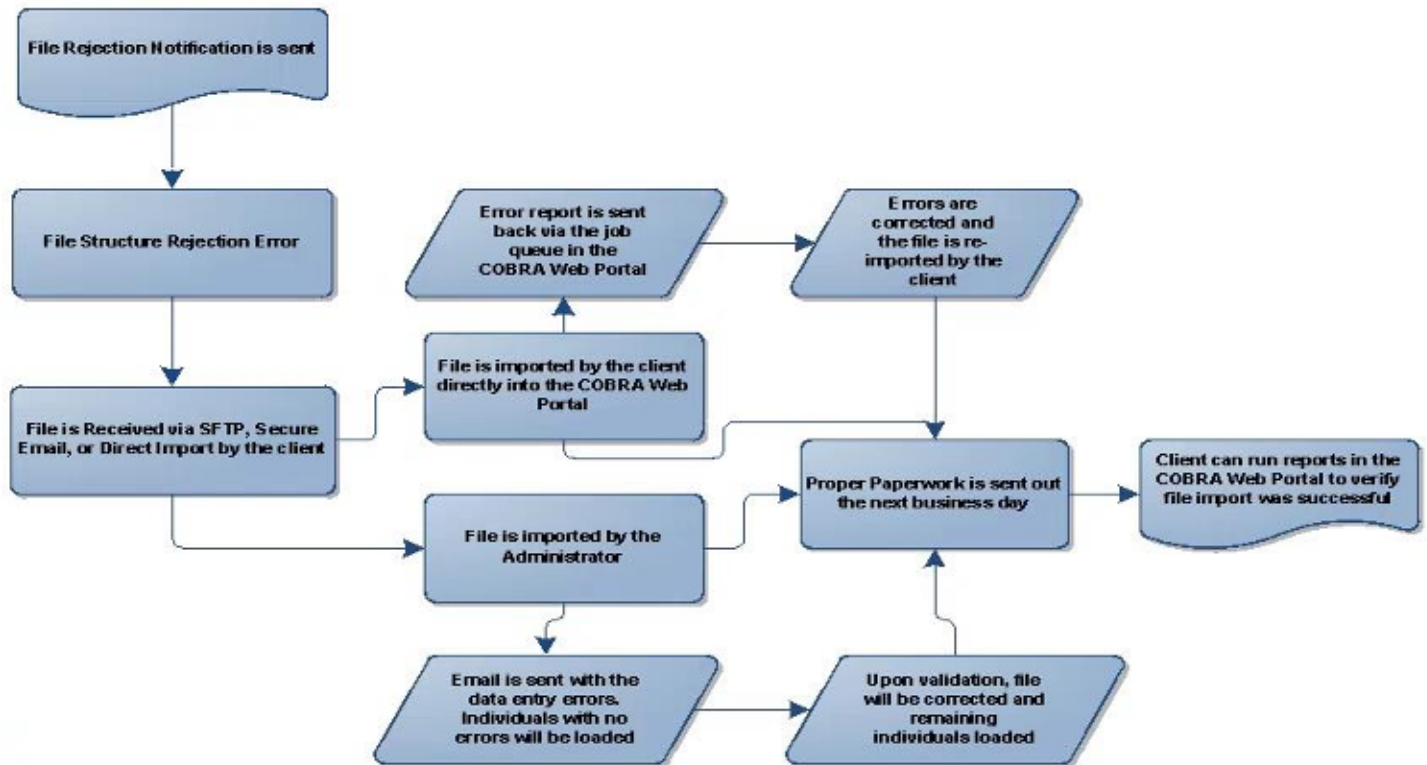
2. File Requirements

COBRA files are provided to the system via SFTP, or by the client directly importing the file into the COBRA Web Portal. Discovery Benefits provides the username and password for the SFTP drop location.

2.1 Formatting Rules

- The COBRA Import System utilizes a Comma Separated Values (CSV) text file to import information. A CSV file is a text file that contains values on each row that is separated by commas. The file must have the extension .TXT or .CSV.
- Files should contain changes only.
- Fields have specified maximum lengths as indicated in the specification. No zero padding or space padding is necessary unless specified.
- Dollar signs ($) are not supported for currency fields.
- "Valid Values" are the available values for the field. Only these values will be accepted for processing of the file.
- All required fields must be submitted with each file. If a record is sent with values for a required field missing, a file error will populate and that event will not be loaded. The file error will need to be reviewed in the LEAP™ portal.
- The file name is limited to 100 characters and should be sent in the following format.
    - <u>Test Data File Name</u>: _TEST_YYYYMMDD_GROUPNAME_QB_GPID.txt
    - <u>Live Data File Name</u>: YYYYMMDD__GROUPNAME_QB_GPID.txt
        - *Include 'QB' in the file name if the data on the file is qualified event data.*
        - *Include 'NPM' in the file name if the data on the file is new hire data.*
        - *Both record types can be included on the same file, or sent on separate files.*

2.2 Multiple-Client Files

Multiple clients can be included in a single file. The COBRA Import System will sort the file by employer for processing, saving time by eliminating the need to manually sort files.

To submit a file with records from multiple clients, the following process must be used:
- A unique file naming convention and SFTP log-in will be provided to the vendor/client. This naming convention will need to be used so that Discovery Benefits is aware a multi-client file has been received.
- If a client within the file and/or the entire file doesn't have an events to report, please submit an email to cobraemployerservices@discoverybenefits.com to communicate that the file will be blank.

3. Sending Files Using SFTP

The process for sending files using SFTP is as follows:
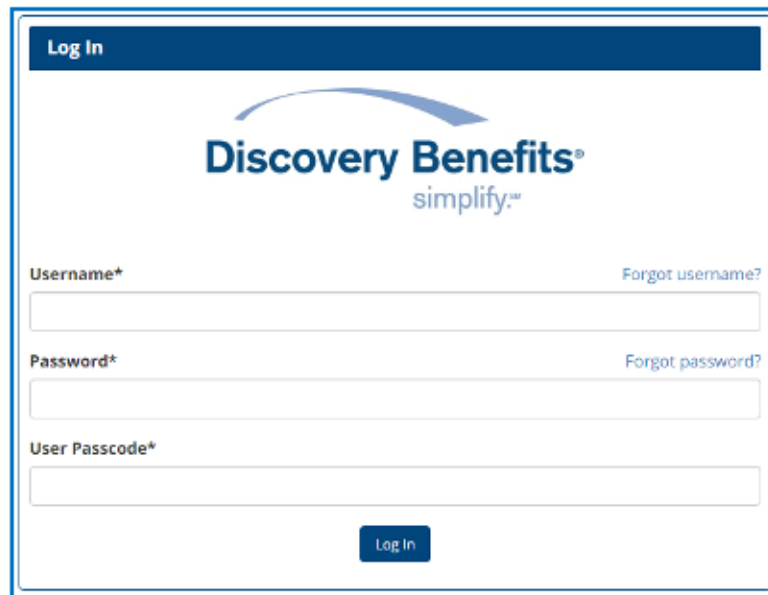
1. The file is sent to the SFTP site via an automated file transfer process or by manually logging into the SFTP site and uploading the file.

2. The system processes and loads the file upon receipt .

3. An email notification is generated (if configured) once the file has been received.

4. If the file fails initial validation due to an incorrect file format, an email is sent communicating the failure.

5. If the error was caused by a file issue, the file should be corrected and resubmitted to Discovery Benefits.

Note: If multiple files are sent (QB and NPM) please ensure the proper file naming convention is used.

4. Direct File Import into the COBRA Web Portal

The process for directly importing files into the COBRA Web Portal:

1. Go to LEAP ® at https://employer.discoverybenefits.com

2. Log in using your assigned username, password and passcode.

3. From the main menu, click on Administration, and then select COBRA.
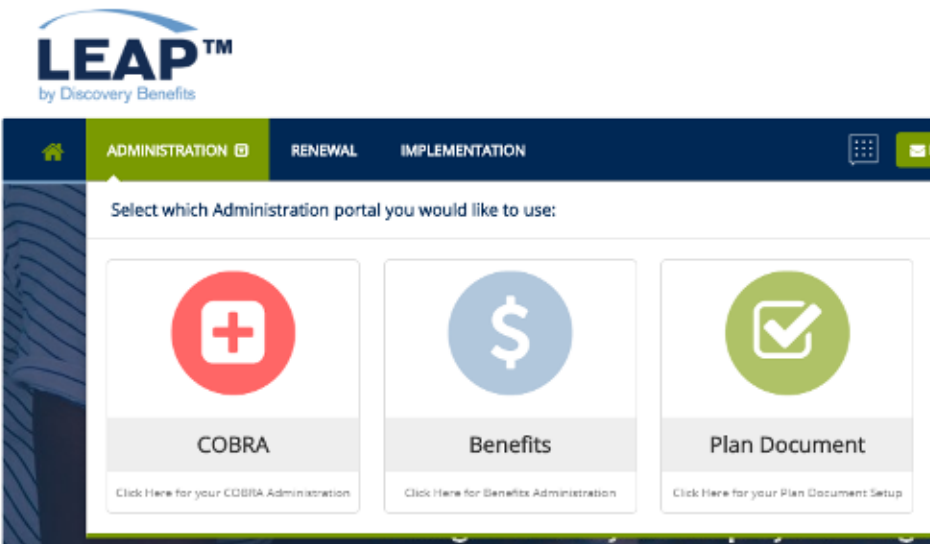
4. From the side navigation bar select Imports & Reports, then Imports.

5. Find the location of the saved file by choosing 'Select'

6. Can specify an email address to notify when the process is complete and schedule import options

7. Select 'Import File'

8. This will bring you into the job queue. Please review the report to verify a successful load or if there were any errors.

Below you will find a list of common errors you may receive during the direct import process.

- Additional commas in a field will cause the record to error out and not import. For example, commas listed in addresses.
- COBRA start date cannot be equal to or before first day of coverage:
    - Error line type: [QBPLAN]
    - Error language: QBPlan StartDate cannot be before FDOC.
- First day of active coverage prior to QE date:
    - Error line type: [QB]
    - Error language: Invalid Event Date/Enrollment Date.
- Plans are not listed on the file for the QB:
    - Error line type: [QB]
    - Error language: No [QBPLAN] or [QBPLANINITIAL] lines in QB definition (QBs must have at least one plan).
- Invalid coverage level listed on file:
    - Error line type: [QB]
    - Error language: No valid rates in force for coverage level for plan start date.
- Domestic partner relationship listed incorrectly. Must be listed as DOMESTICPARTNER:
    - Error line type: [QB]
    - Error language: Not a valid relationship DOMESTIC PARTNER.
- First day of active coverage missing:
    - Error line type: [QBEVENT]
    - Error language: Error adding row to import table [QBEVENT] – Column 'EnrollmentDate' does not allow nulls.
- Missing coverage level:
    - Error line type: [QBPLAN]
    - Error language: Error parsing import column [NumberOfUnits] for table [QBPLAN]. Input string was not in a correct format. RowData=PlanName=VSP Vision StartDate=7/1/2012 CoverageLevel=
- Duplicate plan type:
    - Error line type: [QB]
    - Error language: Violation of UNIQUE KEY constraint 'tblQBInsuranceTypePlan_UC1'. Cannot insert duplicate key in object 'dbo.tblQBInsuranceTypePlan'. The statement has been terminated.
- Participant is listed with FSA plan type but no rate is provided:
    - Error line type: [QB]
    - Error language: You cannot import a NORATE/MEMBERSPECIFICRATE plan without the corresponding [QBPLANMEMBERSPECIFICRATE] line, check that for each [QBPLAN] line that there exists a [QBPLANMEMBERSPECIFICRATE] for each [QBPLAN] line that has a NORATE rate type.

- Dependents are offered a different plan than QB:
    - Error line type: [QB]
    - Error language: Dependent: John,Doe. Failed to compare two elements in the array.
- Event date plans: The qualifying event date must directly proceed the first day of COBRA.
    - Error line type: [QB]
    - Error language: Plan start date of 06/01/2012 would create a break in coverage. This is not allowed.
- NPM hire date: The hire date field must be filled out for members re-hired with the company
    - Error line type: [NPM]
    - Error language: You must enter a Hire Date for this NPM

5. Version Record Layout

Each import file should include a [VERSION] section/tag that identifies what import version the import file is adhering to. If no [VERSION] record exists in the import file, then an error will be generated. QB and NPM files utilize version 1.1.

Example:

[VERSION], 1.1

Field Name	Version Record Description	Format	Maximum Field Length	Valid Value(s)	Required
Version	Version of the file format being used.	Alphanumeric	2	1.1	Y

6. QB (Qualified Beneficiary) Import File Layout

The first field of each line defines what type of information will follow for the fields contained in that line. For instance, a QB record will need a QB line that starts with a line identifier of "[QB]" and might appear something like this:

[QB], My Client Name, My Client Division Name, MR, Bob, L, Jones, 555555555, (etc.)

This QB will also need a line that defines the qualifying event information for the QB. This is accomplished with a line that begins with a line identifier of "[QBEVENT]" and the file might now appear something like this:

[QB], My Client Name, My Client Division Name, MR, Bob, L, Jones, 555555555, (etc.)
[QBEVENT], TERMINATION, 5/1/2008, 1/1/1999, , , (etc.)

All of the lines that follow the "[QB]" line are related to that QB. When a new "[QB]" line is encountered, the previous QB is validated and saved to the database and the new QB begins the import process.

Note: For each QB record there must be a [QB], [QBEVENT], and [QBPLAN] record.

6.1 [QB]

Example [QB] line:

[QB],My Client Name,My Client Division Name,MR,Bob,L,Jones,888888888,(etc.)

Field Name	Record Description	Format	Maximum Field Length	Valid Value(s)	Required
Client Name	Unique Client Name assigned by Discovery Benefits.	Alphanumeric	100		Y
Client Division Name	Unique Client Division Name(s) assigned by Discovery Benefits. If there are no Divisions, then use the ClientName without the five digit code.	Alphanumeric	50		Y
Salutation		Alphanumeric	35	MR, MRS, MS, MISS, DR	N
First Name	First name of the participant.	Alphanumeric	50		Y

Middle Initial	Middle initial of the participant.	Alphanumeric	1		N
Last Name	Last name of the participant.	Alphanumeric	50		Y
SSN	Social Security Number of the participant. **Note:** Can include dashes.	Numeric	11		Y
Individual ID	Optional, used to store Employee ID's or any other type of secondary identification.	Alphanumeric	20		N
Email	Email address for the participant that will be used for electronic communications to the participant.	Email	50		N
Phone	Primary phone number for the participant – must be formatted as 10 digits. Note: Can include dashes however no spaces between numbers	Phone	10		N
Phone 2	Secondary phone number - Must be formatted as 10 digits. Note: Can include dashes however no spaces between numbers	Phone	10		N
Address 1	Participant's Address Line 1. **Note:** Do not use commas.	Alphanumeric	50		Y
Address 2	Participant's Address Line 2. **Note:** Do not use commas.	Alphanumeric	50		N
City	Name of the city of the participant's address.	Alphanumeric	50		Y
State or Province	State or province code of the participant's address. *For US addresses only, State code should be 2 letters.	Alphanumeric	50*		Y
Postal Code	Postal code of the participant's address.	Alphanumeric	35		Y

Country	Leave blank if the QB resides in the USA. **Note:** Must be entered for non US residents.	Alphanumeric	50		N*
Premium Address Same As Primary	Set to True if the address to send premium notifications is the same as the QBs main address.	Alphanumeric	5	True	Y
Premium Address 1	Deprecated – any value will be ignored.	Alphanumeric	50		N
Premium Address 2	Deprecated – any value will be ignored.	Alphanumeric	50		N
Premium City	Deprecated – any value will be ignored.	Alphanumeric	50		N
Premium State Or Province	Deprecated – any value will be ignored.	Alphanumeric	50		N
Premium Postal Code	Deprecated – any value will be ignored.	Alphanumeric	35		N
Premium Country	Deprecated – any value will be ignored.	Alphanumeric	50		N
Sex	**Note:** If field is left blank, will default to U.	Alphanumeric	1	M, F, U	Y
DOB	Date of Birth.	Date	10	MM/DD/YYYY	Y
Tobacco Use	Identifies whether or not participant uses tobacco.	Alphanumeric	35	YES, NO, UNKNOWN	Y
Employee Type	Identifies employment status when participant was an active employee.	Alphanumeric	35	FTE, PTE, H1B, CONSULTANT, SABBATICAL, PROBATIONARY, CONTINGENT, TELECOMMUTING, INTERN, GROUPLEADER, ASSOCIATE, PARTNER, UNKNOWN	Y

Employee Payroll Type	Identifies payroll status when participant was an active employee.	Alphanumeric	35	EXECUTIVE, EXEMPT, HOURLY, NONEXEMPT, SALARY, UNKNOWN	Y
Years of Service	*Required if plans are broken out by years of service.	Numeric			N*
Premium Coupon Type	Identifies how participants will be notified of their premiums. **Note:** Used to override client level setting.	Alphanumeric	35	PREMIUMNOTICE, COUPONBOOK, NONE	Y
Uses HCTC	True if this QB uses the Health Care Tax Credit system. (defaults to FALSE)	Alphanumeric	5	TRUE, FALSE	N
Active	COBRA Status.	Alphanumeric	5	TRUE	Y
Allow Member SSO	DBI does not set up SSO for COBRA members. *Optional field and only required if used on the file*	Alphanumeric	5	FALSE	Y*
Benefit Group	*Optional customized field*	Alphanumeric	50		N*
Account Structure	*Optional customized field*	Alphanumeric	50		N*
Client Specific Data	*Optional customized field*	Alphanumeric	50		N*

6.2 [QBEVENT]

Record type used to identify QB's qualifying event information.

- EventType determines the Category of Event, either Employee or Dependent. Dependent EventTypes are: DIVORCELEGALSEPARATION, DEATH, INELIGIBLEDEPENDENT and MEDICARE. All other EventTypes are Employee.

Example [QBEVENT] line:

[QBEVENT],TERMINATION,5/1/2008,1/1/1999,888888888,,(etc.)

Field Name	Record Description	Format	Maximum Field Length	Valid Value(s)	Required
Event Type	Type of Qualifying Event. **Note:** Please refer to available coverage levels in QBPLAN records to determine coverage level that would apply to each QBEvent. Depending on the event the coverage level may change based on the new QB. Example: IneligibleDependent event would change coverage level to EE Only as the dependent is now the QB.	Alphanumeric	35	DIVORCELEGALSEPARATION DEATH INELIGIBLEDEPENDENT MEDICARE TERMINATION RETIREMENT REDUCTIONINHOURS-STATUSCHANGE REDUCTIONINFORCE BANKRUPTCY STATECONTINUATION LOSSOFELIGIBILITY REDUCTIONINHOURS-ENDOFLEAVE WORKSTOPPAGE USERRA-TERMINATION USERRA-REDUCTIONINHOURS INVOLUNTARYTERMINATION TERMINATIONWITHSEVERANCE RETIREEBANKRUPTCY	Y
Event Date	The date the Qualifying Event occurred. Do not adjust for plan benefit termination types. Please use the actual date of the event.	Date	10	MM/DD/YYYY	Y
Enrollment Date	Original date of hire or original date member enrolled in active coverage. **Note:** Can be any date prior to the event date.	Date	10	MM/DD/YYYY	Y
Employee SSN	The original Employee's SSN.	SSN	11		Y
Employee Name	The original employee's Name.	Alphanumeric	100		Y

Second Event Original FDOC	Deprecated – any value will be ignored.	Date	10	MM/DD/YYYY	N

6.3 [QBPLANINITIAL]

Simplified record used to enter the plan and coverage level tied to the QB. This record assumes that the QB is on the plan from FDOC (First Day of COBRA) and LDOC (Last Day of COBRA). Do not use this record if there are Bundles (Embedded Plans).

Example [QBPLANINITIAL] line:

[QBPLANINITIAL],Medical Plan,EE+FAMILY,

Field Name	Record Description	Format	Maximum Field Length	Valid Value(s)	Required
Plan Name	The unique Client plan Name	Alphanumeric	50		Y
Coverage Level	The coverage level for this plan	Alphanumeric	35	EE, EE+SPOUSE, EE+CHILD, EE+CHILDREN, EE+FAMILY, EE+1, EE+2, EE+3, EE+4, SPOUSEONLY, SPOUSE+CHILD, SPOUSE+CHILDREN, CHILDONLY, CHILDRENONLY, CHILDONLY18OROLDER, CHILDRENONLY18OROLDER EE+1Child, EE+2Children, EE+3Children, EE+4Children, EE+5orMoreChildren, EE+Spouse+1Child, EE+Spouse+2Children, EE+Spouse+3Children, EE+Spouse+4Children, EE+Spouse+5orMoreChildren, SPOUSE+1CHILD, SPOUSE+2CHILDREN, SPOUSE+3CHILDREN, SPOUSE+4CHILDREN, SPOUSE+5ORMORECHILDREN, EE+DOMESTICPARTNER, EE1UNDER19, EE+SPOUSE1UNDER19, EE+SPOUSE2UNDER19, EE+CHILDREN1UNDER19, EE+CHILDREN2UNDER19, EE+CHILDREN3UNDER19, EE+FAMILY1UNDER19, EE+FAMILY2UNDER19, EE+FAMILY3UNDER19	Y

Number Of Units	Sets the # of units for this plan. Required if plan is units based. (e.g. life) **Note:** Must have two decimal places	Numeric			N

6.4 [QBPLAN] – Must use with bundled (embedded) plans

Record used to enter the plan and coverage level tied to the QB. This record is used instead of the [QBPLANINITIAL] record when you need to specify the StartDate/EndDate of the plan, have multiple plans spanning rate periods, use bundles (embedded) plans, or any other scenario where you need to provide more detail during the file import to Discovery Benefits.

Example [QBPLAN] line:

[QBPLAN],Medical Plan,12/1/2011,,EE+FAMILY,,,,,,,,,,,

Field Name	Record Description	Format	Maximum Field Length	Valid Value(s)	Required
Plan Name	The unique Client plan Name	Alphanumeric	50		Y
Start Date	The start date that the QB will begin coverage on this plan. This should be set to the First Day of COBRA	Date	10	MM/DD/YYYY	Y
End Date	Optional, the end date the QB will cease coverage on this plan. (*leave this field blank*)	Date	10	MM/DD/YYYY	N

Coverage Level	The coverage level for this plan	Alphanumeric	35	EE, EE+SPOUSE, EE+CHILD, EE+CHILDREN, EE+FAMILY, EE+1, EE+2, SPOUSEONLY, SPOUSE+CHILD, CHILDONLY, CHILDRENONLY, EE+1Child, EE+2Children, EE+3Children, EE+4Children, EE+5orMoreChildren, EE+Spouse+1Child, EE+Spouse+2Children, EE+Spouse+3Children, EE+Spouse+4Children, EE+Spouse+5orMoreChildren, SPOUSE+1CHILD, SPOUSE+2CHILDREN, SPOUSE+3CHILDREN, SPOUSE+4CHILDREN, SPOUSE+5ORMORECHILDREN, EE+DOMESTICPARTNER, EE1UNDER19, EE+SPOUSE1UNDER19, EE+SPOUSE2UNDER19, EE+CHILDREN1UNDER19, EE+CHILDREN2UNDER19, EE+CHILDREN3UNDER19, EE+FAMILY1UNDER19, EE+FAMILY2UNDER19, EE+FAMILY3UNDER19	Y
First Day Of COBRA	Used to override the system calculated FDOC. If left blank, the system will determine FDOC based on the Event Date and plan benefit termination type	Date	10	MM/DD/YYYY	N
Last Day Of COBRA	(*leave this field blank*) The system will determine LDOC based on the FDOC and COBRA Duration Months	Date	10	MM/DD/YYYY	N
COBRA Duration Months	(*leave this field blank*) Number of COBRA eligible months. The system will determine the correct number of months based on Event Type.	Numeric	2		N

Days To Elect	(*leave this field blank*) Number of days the QB has available to elect coverage under COBRA. The system will determine the correct number of days.	Numeric	3		N
Days To Make 1st Payment	(*leave this field blank*) Number of days the QB has to make their 1st full payment under COBRA. The system will determine the correct number of days	Numeric	3		N
Days To Make Subsequent Payments	(*leave this field blank*) Number of days the QB has to make their next payments under COBRA.	Numeric	3		N
Election Postmark Date	(*leave this field blank*)	Date	10	MM/DD/YYYY	N
Last Date Rates Notified	(*leave this field blank*)	Date	10	MM/DD/YYYY	N
Number Of Units	Sets the # of units for this plan. Required if plan is units based. (e.g. life) **Note:** Must have two decimal places	Numeric			N
Send Plan Change Letter For Legacy	(*default to false*)	Alphanumeric	5	False	Y
Plan Bundle Name	*Required only for bundled (embedded) plans	Alphanumeric	50		N*

6.5 [QBDEPENDENT]

Example [QBDEPENDENT] record:

[QBDEPENDENT],888888888,SPOUSE,,Jane,M,Johnson,jjohnson@noemail.com,,,,(etc.)

Field Name	Record Description	Format	Maximum Field Length	Valid Value(s)	Required
SSN	Social Security Number of the dependent.	Numeric	11		Y
Relationship	Relationship to the QB (Use CHILD for adopted, disabled, or step children.	Alphanumeric	35	SPOUSE, CHILD, DOMESTICPARTNER	Y
Salutation		Alphanumeric	35	MR, MRS, MS, MISS, DR	N
First Name	First name of the dependent	Alphanumeric	50		Y
Middle Initial	Middle initial of the dependent.	Alphanumeric	1		N
Last Name	Last name of the dependent.	Aphanumeric	50		Y
Email	Email address for the dependent that will be used for electronic communications to the dependent.	Alphanumeric			N
Phone	Primary phone number for the dependent – must be formatted as 10 digits. Note: Can include dashes however no spaces between numbers	Phone	10		N

Phone 2	Secondary phone number - Must be formatted as 10 digits. Note: Can include dashes however no spaces between numbers	Numeric	10		N
Address Same As QB	Set to True if the Dependent's address is the same as the QB.	Alphanumeric	5	True, False	Y
Address 1	Dependent's Address Line 1. **Note:** Do not use commas.	Alphanumeric	50		N
Address 2	Dependent's Address Line 2. **Note:** Do not use commas.	Alphanumeric	50		N
City	Name of the city of the dependent's address.	Alphanumeric	50		N
State Or Province	State or province code of the dependent's address. *For US addresses only, State code should be 2 letters.	Alphanumeric	50*		N
Postal Code	Postal code of the dependent's address.	Alphanumeric	35		N
Country	Leave empty if the Dependent resides in the USA.	Alphanumeric			
Enrollment Date	(*leave this field blank*) The enrollment date from the QB will be used.	Date	10	MM/DD/YYYY	N
Sex	**Note:** If field is left blank, will default to U.	Alphanumeric	1	M, F, U	Y
DOB	Date of Birth	Date	10	MM/DD/YYYY	Y

Field Name	Record Description	Format	Maximum Field Length	Valid Value(s)	Required
Is QMCSO	True if the dependent is under a Qualified Medical Child Support Order.	Alphanumeric	5	True, False	Y

6.6   [QBDEPENDENTPLANINITIAL]

Simplified record used to enter the QB's dependent onto the applicable plan. This assumes the dependent is on the plan from the First Day of COBRA (FDOC) through the Last Day of COBRA (LDOC).

Example [QBDEPENDENTPLANINITIAL record:

[QBDEPENDENTPLANINITIAL],Medical Plan

Field Name	Record Description	Format	Maximum Field Length	Valid Value(s)	Required
Plan Name	The unique Client plan Name.	Alphanumeric	50		Y

6.7   [QBDEPENDENTPLAN]

Advanced record used to enter the QB's dependent onto the applicable plan assuming the dependent will go on or off the plan over time. Use [QBDEPENDENTPLANINITIAL] for dependents that will be on the plan for the entire period of coverage.

Example [QBDEPENDENTPLAN] record:

[QBDEPENDENTPLAN],Medical Plan,01/01/2015,,True

Field Name	Record Description	Format	Maximum Field Length	Valid Value(s)	Required
Plan Name	The unique Client plan Name.	Alphanumeric	50		Y
Start Date	The start date of the dependent on the plan. This should be set to the First Day of COBRA.	Date	10	MM/DD/YYYY	Y

Field Name	Record Description	Format	Maximum Field Length	Valid Value(s)	Required
End Date	The end date of the dependent on the plan. This should be set to the Last Day of COBRA unless the dependent will be ending the plan before LDOC.	Date	10	MM/DD/YYYY	N
Uses FDOC	Set to True if the dependent plan starts on the QB's FDOC.	Alphanumeric	5	True, False	Y

6.8 [QBSUBSIDYSCHEDULE]

Record used to enter an Employer Subsidy.

Example [QBSUBSIDYSCHEDULE] record:

[QBSUBSIDYSCHEDULE],MEDICAL,FLAT,01/01/2015,,50,EMPLOYER

Field Name	Record Description	Format	Maximum Field Length	Valid Value(s)	Required
Insurance Type	Type of Insurance this subsidy will be applied to. (Correlates to the plan the participant is enrolled in.)	Alphanumeric	35	MEDICAL, DENTAL, VISION, PHARMACY, FSA, HCRA, EAP, GAP, 401K, LIFE, MSA, PBA, HSA, NUOTHER1, NUOTHER2 GRPLIFE, VOLLIFE, CANCER, MERP, DEPLIFE1, DEPLIFE2, DEPLIFE3, LTD, AD&D, MEDSTURIDER1, MEDSTURIDER2, MEDSTURIDER3, NULIFE, NUGRPLIFE, NUVOLLIFE, NUDEPLIFE1, NUDEPLIFE2, NUDEPLIFE3, NUOTHER, CHIROPRACTIC, VEBA, CUSTOMBILLING, LTDNONUNITBASED, CRITICALILLNESS, ACCIDENTNONUNITBASED, ACCIDENTUNITBASED, VOLUNTARYOTHER, UOTHER1, UOTHER2, UOTHER3	Y
Subsidy Amount Type	Determines flat rate or percentage subsidy.	Alphanumeric	35	FLAT, PERCENTAGE	Y

Start Date	Start date of the subsidy.	Date	10	MM/DD/YYYY	Y
End Date	End date of the subsidy.	Date	10	MM/DD/YYYY	Y
Amount	Flat Rate – Enter flat amount. Must include two decimal places. Percentage – Enter percentage as "50" if it is a 50% subsidy.	Numeric			Y
Subsidy Type	Type of subsidy.	Alphanumeric	35	EMPLOYER	Y

6.9 [QBSTATEINSERTS]

Record used to indicate a state that requires state specific documents

Example [QBSTATEINSERTS] record:

[QBSTATEINSERTS],MN-LIFEINSERT

Field Name	Record Description	Format	Maximum Field Length	Valid Value(s)	Required
State Specific Document Name		Alphanumeric	35	CA-SRINSERT, CT-SRINSERT, MN-LIFEINSERT, MN-CONTINSERT, OR-SRINSERT, TX-SRINSERT, NY-SR INSERT, IL-SRINSERT, VEBA-SRINSERT, RI-SRINSERT, GA-SRINSERT, VA-SRINSERT	Y

6.10 [QBPLANMEMBERSPECIFICRATEINITIAL]

Simplified record used to enter a member specific rate for a plan. It assumes that the rate will be applied from FDOC through LDOC. Only use with [QBPLANINITIAL]. Does not work with [QBPLAN].

Example [QBPLANMEMBERSPECIFICRATEINITIAL] record:

[QBPLANMEMBERSPECIFICRATEINITIAL],Medical FSA,50.00

Field Name	Record Description	Format	Maximum Field Length	Valid Value(s)	Required
Plan Name	The unique Client plan name.	Alphanumeric	50		Y
Rate	The amount of the member specific rate. **Note:** Must include two decimal places.	Numeric			Y

6.11 [QBPLANMEMBERSPECIFICRATE]

Advanced record used to enter a member specific rate that changes over time for a plan. Only use with [QBPLAN].

Example [QBPLANMEMBERSPECIFICRATE] record:

[QBPLANMEMBERSPECIFICRATE],Medical FSA,01/01/2015,,50.00

Field Name	Record Description	Format	Maximum Field Length	Valid Value(s)	Required
Plan Name	The unique Client plan name.	Alphanumeric	50		Y
Start Date	The start date of the member specific rate. This should be set to First Day of COBRA.	Date	10	MM/DD/YYYY	Y

End Date	The end date of the member specific rate.	Date	10	MM/DD/YYYY	N
Rate	The amount of the member specific rate. **Note:** Must include two decimal places.	Numeric			Y

7. NPM (New Plan Member) Import File Layout

If you start to import an NPM record you will need an NPM line that starts with a line identifier of "[NPM]" and might appear something like this:

[NPM], 888888888,223,MyClientName,DivisionName,Bob,L,Jones,MR,bjones@test.com,,(etc.)

7.1 [NPM]

The purpose of this record is to gather active employee's demographic information to notify the participant of his/her rights under COBRA. If the employee's spouse is added to coverage mid-year, the NPM record should be sent with the spouse's demographic information.

Example [NPM] record:

[NPM],888888888,223,MyClientName,DivisionName,Bob,L,Jones,MR,bjones@test.com,,(etc.)

Field Name	Record Description	Format	Maximum Field Length	Valid Value(s)	Required
SSN	Social Security Number of the participant. **Note:** Can include dashes.	Numeric	11		Y
Individual Identifier	Optional, used to store Employee ID's or any other type of secondary identification.	Alphanumeric	50		N
Client Name	Unique Client Name assigned by Discovery Benefits.	Alphanumeric	100		Y
Client Division Name	Unique Client Division Name(s) assigned by Discovery Benefits. If there are no Divisions, then use the ClientName without the five digit code.	Alphanumeric	50		Y
First Name	First Name of the participant.	Alphanumeric	50		Y
Middle Initial	Middle initial of the participant.	Alphanumeric	1		N
Last Name	Last name of the participant.	Alphanumeric	50		Y

Salutation		Alphanumeric	35	MR, MRS, MS, MISS, DR	N
Email	Email address for the participant that will be used for electronic communications to the participant.	Email	50		N
Phone	Primary phone number for the participant – must be formatted as 10 digits. Note: Can include dashes however no spaces between numbers	Phone	10		N
Phone 2	Secondary phone number - Must be formatted as 10 digits. Note: Can include dashes however no spaces between numbers	Phone	10		N
Address 1	Participant's Address Line 1. **Note:** Do not use commas.	Alphanumeric	50		Y
Address 2	Participant's Address Line 2. **Note:** Do not use commas.	Alphanumeric	50		N
City	Name of the city of the participant's address.	Alphanumeric	50		Y
State Or Province	State or province code of the participant's address. *For US addresses only, State code should be 2 letters.	Alphanumeric	50*		Y
Postal Code	Postal code of the participant's address.	Alphanumeric	35		Y
Country	Leave blank if the QB resides in the USA. **Note:** Must be entered for non US residents.	Alphanumeric	50		N
Sex	**Note:** If field is left blank, will default to U.	Alphanumeric	1	M, F, U	Y
Uses Family In Address	Optional: Adds "and Family" to Address Labels.	Alphanumeric	5	True, False	N

Has Waived All Coverage	Optional: Defaults to False.	Alphanumeric	5	True, False	N
Send GR Notice	Defaults to True. Set to False if you wish for this NPM to NOT receive the General Rights Notice.	Alphanumeric	5	True, False	N
Hire Date	*Required if Client rehires participant and a new General Rights Notice should be sent.	Date	10	MM/DD/YYYY	N*