**TaxSaver Plan Cobra Layout Qualified Event File**

All field types will be listed below. Those with special considerations (for example, can only contain certain values, like Event Type) will be listed separately.

This file should be created in xls / csv and uploaded to the TaxSaver Plan website at [www.taxsaverplan.com/employerreports/](http://www.taxsaverplan.com/employerreports/). Chose File Type: COBRA QE FILE

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Column** | **Heading** | **Type** | **Required** | **Notes** | **Mapping notes** |
| A | SSN | SSN | Y | Always should be the Employee | Eepssn |
| B | First Name | Text | Y | Always should be the Employee information | Eepnamefirst |
| C | Last Name | Text | Y | Always should be the Employee information | Eepnamelast |
| D | Sex | Char | Y | M / F - Always should be the Employee information | Eepgender |
| E | DOB | Date | Y | MM-DD-YYYY - Always should be the Employee information | Eepdateofbirth |
| F | Division | Text | Y | Division employee falls under, must be predefined | Leave blank |
| G | Event Type | Event | Y | Acceptable values outlined below DIVORCELEGALSEPARATION, DEATH, INELIGIBLEDEPENDENT, MEDICARE, TERMINATION, INVOLUNTARYTERMINATION, RETIREMENT, REDUCTIONINHOURS-STATUSCHANGE, REDUCTIONINFORCE, BANKRUPTCY, STATECONTINUATION, LOSSOFELIGIBLITY, REDUCTIONINHOURS-ENDOFLEAVE, USERRA-TERMINATION, USERRA-REDUCTIONINHOURS, TERMINATIONWITHSEVERANCE | Include all where BchIsCOBRAQualifiedEvent = Y  If edhChangeReason = 204 or LEVNT4 send DIVORCELEGALSEPARATION  If edhChangeReason = 210 or EecEmplStatus = T and EecTermReason  = 203 send DEATH  If edhChangeReason = 205 send MEDICARE  If edhChangeReason = 201 or LEVNT3 send INELIGIBLEDEPENDENT  If EecEmplStatus = T  and EecTermReason  <> 202 or 203 and eectermtype  = V send TERMINATION  If edhChangeReason = 208 or EecEmplStatus = T and EecTermReason = 202 send RETIREMENT  If edhChangeReason = 203 or 202 send  REDUCTIONINHOURS-STATUSCHANGE  If edhChangeReason = 206 REDUCTIONINHOURSENDOFLEAVE  If edhChangeReason = 207 or send USERRA-REDUCTIONINHOURS  If EecEmplStatus = T and eectermtype = I send INVOLUNTARYTERMINATION |
| H | Event Date | Date | Y | Date event in G took place MM-DD-YYYY | If edhChangeReason = 204, LEVNT4, 201 or LEVNT3 send ConCOBRAStatusDate else send eepDateOfCOBRAEvent |
| I | Original Enrollment Date | Date | Y | Date original enrollment in medical plan took place, required for HIPAA continuous coverage MM-DD-YYYY | Eedbenstartdate |
| J | AEI Eligible | Y/N | Y | Default to N or remove all together – not applicable | N |
| K | Uses HCTC | Y/N | Y | Uses Health Care Tax Credit, Default to N if unknown | N |
| L | Address 1 | Text | Y | Street Address only, no city state or zip | Eepaddressline1 |
| M | Address 2 | Text | N | For APT/Suite #, or spillover from L | Eepaddressline2 |
| N | City | Text | Y | Full city names please | Eepaddresscity |
| O | State or Province | Text | Y | Full state names or two letter postal abbr. for US | Eepaddressstate |
| P | Postal Code | Zip | Y | 5 digit or 9 digit US, with or without dashes, left open for foreign postal codes | Eepaddresszip |
| Q | Country | Text | N | If blank, USA is assumed, Otherwise full Country Name please | Leave blank |
| R | Medical Plan | Text | Y | Must match a plan on file for your company, or NONE | If eeddedcode = HDHP send HDHP Plan  If eeddedcode = PPO send PPO Plan |
| S | Medical Coverage | Cov | Y | See below for acceptable values, ignored if R is NONE  EE, EE+SPOUSE, EE+CHILD, EE+CHILDREN, EE+FAMILY | If eeddedcode = HDHP or PPO and eedbenoption = EE send EE  If eedbenoption = EES send EE+SPOUSE  If eedbenoption = EEC send EE+CHILDREN  If eedbenoption = EEF and send EE+ FAMILY  Else leave blank |
| T | Dental Plan | Text | Y | Must match a plan on file for your company, or NONE | If eeddedcode = DENHI send Dental High MAC Plan  If eeddedcode = DENLO send Dental Low MAC Plan  else send NONE |
| U | Dental Coverage | Cov | Y | See below for acceptable values, ignored if T is NONE  EE, EE+SPOUSE, EE+CHILD, EE+CHILDREN, EE+FAMILY | If eeddedcode = DENHI or DENLO and eedbenoption = EE send EE  If eedbenoption = EES send EE+SPOUSE  If eedbenoption = EEC send EE+CHILDREN  If eedbenoption = EEF and send EE+ FAMILY  Else leave blank |
| V | Vision Plan | Text | Y | Must match a plan on file for your company, or NONE | If eeddedcode = VIS send Vision Plan  else send NONE |
| W | Vision Coverage | Cov | Y | See below for acceptable values, ignored if V is NONE  EE, EE+SPOUSE, EE+CHILD, EE+CHILDREN, EE+FAMILY, | If eeddedcode = VIS and eedbenoption = EE send EE  If eedbenoption = EES send EE+SPOUSE  If eedbenoption = EEC send EE+CHILDREN  If eedbenoption = EEF and send EE+ FAMILY  Else leave blank |
| X | EAP Plan | Text | Y | Must match a plan on file for your company, or NONE | NONE |
| Y | EAP Coverage | Cov | Y | See below for acceptable values, typically defaults to ‘EE’ | leave blank |
| Z | FSA | Y/N | Y | If a Health FSA or Limited FSA offered. Default to Y if unknown and AA (below) is set, else default to N. | If eeddedcode = FSA send Y else send N |
| AA | FSA Contrib | Money | Y | Annual FSA Contribution, Ignored if Z is N | If eeddedcode = FSA send EedEEGoalAmt  Else leave blank |
| AB | Spouse First | Text | Y | First name of spouse | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = SPS send connamefirst |
| AC | Spouse Last | Text | Y | Last name of spouse | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = SPS send connamelast |
| AD | Spouse SSN | SSN | Y |  | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = SPS send conssn |
| AE | Spouse DOB | Date | Y | MM-DD-YYYY | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = SPS send condateofbirth |
| AF | CH1 First | Text | Y | First name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamefirst |
| AG | CH1 Last | Text | Y | Last name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamelast |
| AH | CH1 SSN | SSN | Y |  | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send conssn |
| AI | CH1 DOB | Date | Y | MM-DD-YYYY | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send condateofbirth |
| AJ | CH2 First | Text | Y | First name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamefirst |
| AK | CH2 Last | Text | Y | Last name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamelast |
| AL | CH2 SSN | SSN | Y |  | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send conssn |
| AM | CH2 DOB | Date | Y | MM-DD-YYYY | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send condateofbirth |
| AN | CH3 First | Text | Y | First name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamefirst |
| AO | CH3 Last | Text | Y | Last name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamelast |
| AP | CH3 SSN | SSN | Y |  | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send conssn |
| AQ | CH3 DOB | Date | Y | MM-DD-YYYY | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send condateofbirth |
| AR | CH4 First | Text | Y | First name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamefirst |
| AS | CH4 Last | Text | Y | Last name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamelast |
| AT | CH4 SSN | SSN | Y |  | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send conssn |
| AU | CH4 DOB | Date | Y | MM-DD-YYYY | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send condateofbirth |
| AV | CH5 First | Text | Y | First name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamefirst |
| AW | CH5 Last | Text | Y | Last name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamelast |
| AX | CH5 SSN | SSN | Y |  | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send conssn |
| AY | CH5 DOB | Date | Y | MM-DD-YYYY | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send condateofbirth |
| AZ | CH6 First | Text | Y | First name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamefirst |
| BA | CH6 Last | Text | Y | Last name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamelast |
| BB | CH6 SSN | SSN | Y |  | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send conssn |
| BC | CH6 DOB | Date | Y | MM-DD-YYYY | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send condateofbirth |
| BD | CH7 First | Text | Y | First name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamefirst |
| BE | CH7 Last | Text | Y | Last name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamelast |
| BF | CH7 SSN | SSN | Y |  | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send conssn |
| BG | CH7 DOB | Date | Y | MM-DD-YYYY | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send condateofbirth |
| BH | CH8 First | Text | Y | First name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamefirst |
| BI | CH8 Last | Text | Y | Last name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamelast |
| BJ | CH8 SSN | SSN | Y |  | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send conssn |
| BK | CH8 DOB | Date | Y | MM-DD-YYYY | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send condateofbirth |
| BL | CH9 First | Text | Y | First name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamefirst |
| BM | CH9 Last | Text | Y | Last name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamelast |
| BN | CH9 SSN | SSN | Y |  | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send conssn |
| BO | CH9 DOB | Date | Y | MM-DD-YYYY | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send condateofbirth |
| BP | CH10 First | Text | Y | First name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamefirst |
| BQ | CH10 Last | Text | Y | Last name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamelast |
| BR | CH10 SSN | SSN | Y |  | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send conssn |
| BS | CH10 DOB | Date | Y | MM-DD-YYYY | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send condateofbirth |
| BT | CH11 First | Text | Y | First name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamefirst |
| BU | CH11 Last | Text | Y | Last name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamelast |
| BV | CH11 SSN | SSN | Y |  | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send conssn |
| BW | CH11 DOB | Date | Y | MM-DD-YYYY | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send condateofbirth |
| BX | CH12 First | Text | Y | First name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamefirst |
| BY | CH12 Last | Text | Y | Last name of child | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send connamelast |
| BZ | CH12 SSN | SSN | Y |  | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send conssn |
| CA | CH12 DOB | Date | Y | MM-DD-YYYY | If eeddedcode = DENHI, DENLO, HDHP, PPO or VIS and conrelationship = CHL, DCH, DPC or STC send condateofbirth |
| CB | SSN | SSN | Y | The QB (Qualified Beneficiary)/Dependent affected – repeat columns CB-CF for each QB | Eepssn or conssn |
| CC | First Name | Text | Y | The QB (Qualified Beneficiary)/Dependent affected | eepnamefirst or connamefirst |
| CD | Last Name | Text | Y | The QB (Qualified Beneficiary)/Dependent affected | eepnamelast or connamelast |
| CE | Sex | Char | Y | M / F - The QB (Qualified Beneficiary)/Dependent affected | eepgender or congender |
| CF | DOB | Date | Y | MM-DD-YYYY - The QB (Qualified Beneficiary)/Dependent affected | eepdateofbirth or condateofbirth |

Fields -

Text - Alphanumeric characters accepted, maximum length 50 characters

Date - All dates must be in MM-DD-YYYY format

Char - Single character

SSN - SSN, accepts in both 9 number blocks and 3-2-4 format

Y/N - Single character, Y or N for yes or no

Int - Whole numbers, positive. Anything trailing a decimal will be truncated, not rounded.

Money - Accepts values that look like a monetary value, can accept dollar signs but will be truncated off the final value.

**Event** - A predefined code for the event that prompted this change, acceptable values are:

DIVORCELEGALSEPARATION,

DEATH,

INELIGIBLEDEPENDENT,

MEDICARE,

TERMINATION,

INVOLUNTARYTERMINATION,RETIREMENT,

REDUCTIONINHOURS-STATUSCHANGE,

REDUCTIONINFORCE,

BANKRUPTCY,

STATECONTINUATION,

LOSSOFELIGIBLITY,

REDUCTIONINHOURS-ENDOFLEAVE,

WORKSTOPPAGE,

USERRA-TERMINATION,

USERRA-REDUCTIONINHOURS,

TERMINATIONWITHSEVERANCE

**Cov(erage**) - A predefined code for Coverage Level, acceptable values are:

EE, EE+SPOUSE, EE+CHILD, EE+CHILDREN, EE+FAMILY