

Federally-Facilitated Marketplace (FFM) Enrollment Pre-Audit File Specification

Applies to All Plan Years

Version 5.11

July 25, 2019

Revision History

Version Number	Date Published	Version Notes
5.11	7/25/2019	Added new values to Table 9, Cancellation and Termination Reason Codes
5.1	4/23/2019	- Updated effective date of changes added in v5.0 to July 2019 - Updated potential values for Date of Birth Cleanup Indicator and New Policy ID Indicator - Updated Table 9 with clarifying information
5.0	2/28/2019	- Repurposed field 88 for Cancellation Reason, field 90 for Termination Reason, and field 100 for New Policy ID Indicator - Added Table 9, Cancellation and Termination Reason Codes - Minor revisions to text for Field 101, Date of Birth Cleanup Indicator
4.2	12/31/2018	- Updated potential values for field 89 (Overlap Indicator) to include 3 and 4 - Repurposed field 101 for Date of Birth Cleanup Indicator - Added values 33 and 34 to Table 1 Relationship Code Mapping
4.1	10/2/2018	- Added '18 – Appeals' to Table 6, Application Origin Code - Repurposed field 69 for Marketplace Policy Segment ID
4.0.2	9/28/2017	Corrected the field length and description for the Enrollment Action Date in Table 8
4.0.1	8/10/2017	Corrected field length and description for Rating Area

Version Number	Date Published	Version Notes
4.0	5/19/2017	• Repurposed field 89 for Overlap Indicator; field 97 for Agent/Broker Suffix; field 102 for Missing Outbound 834 Indicator; field 103 for Retransmitted Outbound 834 Indicator; and field 104 for Outbound 834 Transaction History • Added Table 8 with definition and format for the Outbound 834 Transaction History • Specified that currently unused fields are “Reserved for Future Use” and will be blank and removed “Notes” for previously-implemented changes on fields 11, 17, 86, 87, and 98 • Clarified to reflect that Issuer-assigned Subscriber and Member IDs do not need to be sent only with effectuation • Updated format of Individual Relationship Code to remove unpopulated trailing nodes • Clarified purpose of IPAs and added hyperlink to Enrollment Reconciliation Education Suite with file descriptions. • Populated existing field length requirements in fields 22, 23, 32, 33, 48, 55, 62, 65 • Deleted leading zero in field 17 example to align with current specifications
3.6	10/12/2016	• Updated Transaction Type Code description to indicate that CMS will continue to populate value 4 on terminated spans until initiating the Pre-Audit process for Plan Year 2017 in November 2016 • Added Table 7 with values for the Cancellation Source and Termination Source fields; updated description of both fields to reference Table 7
3.5	8/4/2016	• Updated definition of Individual Relationship Code to reflect that values will only be conveyed from the policy going forward, rather than the policy and application • Updated to reflect that Fields 97 and 98 will no longer be populated as the Duplicate Flag and Duplicate Link Key • Updated Transaction Type Code potential values to indicate value 4 will no longer be sent for terminated coverage spans
3.4	5/25/2016	• Updated to reflect that cancellations will be sent with end dates aligned to start dates, rather than blank
3.31	5/6/2016	• Minor revisions to finalize updates in draft Version 3.11
3.11	4/19/2016	• Draft version for Issuer review and comment • Repurposed unused fields to add End of Year Termination Indicator, Cancellation Source, and Termination Source • Removed any references to SHOP-specific data elements • Updated description to indicate inclusion of cancelled enrollment records in the standard Pre-Audit File
2.22	11/12/2015	• Repurposed field 67 as the Confirmation Indicator, effective December 12, 2015 • Updated formatting and description of the specification

Introduction

This document provides the specifications for the Federally-Facilitated Marketplace (FFM) Enrollment Pre-Audit Files. These files are used to convey the complete set of Individual Market (On-Exchange) enrollment records for a specific Plan Year to Issuers.

These files are aggregated by Trading Partner ID, per the mapping specified in the Issuer's EDI Registration Form, and transmitted to Issuers via Secure EFT. The files are delivered to the same folder in which Issuers receive daily EDI 834 files.

Enrollment Pre-Audit Files are pipe-delimited flat files; these files can be imported into Excel for manual review, or the Issuer may create an automated process by which to compare Pre-Audit data to the Issuer's enrollment data. This comparison is vital to ensure all enrollment records on the FFM are accounted for in the Issuer's system.

Cancelled enrollments – whether cancelled on the FFM or by the Issuer – are included in the Pre-Audit File for full visibility. These cancelled enrollment records can be identified by a value of '3' in the Transaction Type Code field. These records will also have the Benefit End Date and all financial end dates aligned to the Benefit Start Date and financial start dates.

Issuer Incremental Pre-Audit (IPA) Files will use the same file format as the full Pre-Audit File, but will be limited to only enrollment records related to a specific scenario or impacted by a specific activity on the FFM. The purpose and contents of any regularly distributed IPA file are detailed in the Standard Issuer Enrollment Data Files document, available on zONE at <https://zone.cms.gov/document/enrollment-data-reconciliation>.

The contents of any ad hoc IPA File will be detailed in an e-mail from CMS Issuer Communications upon distribution of the file.

Pre-Audit File Layout

Field	Data Element	Description	Data Type	Length
1	Trading Partner ID	Trading Partner ID associated with the enrollment transaction, as designated by the Issuer on the EDI Registration Form	String (Alphanumeric)	5-10
2	SPOE ID	Secure Point of Entry ID; this field is intentionally left blank in the current Pre-Audit process	n/a	
3	Tenant ID	Consists of the two-character state abbreviation and a “0” character	String (Alphanumeric)	3
4	HIOS ID	Identifier for the Issuer as assigned via the Health Insurance Oversight System; corresponds to the first 5 characters of the QHP ID	String (Numeric)	5
5	QHP ID Lookup Key	First ten characters of the QHP ID associated with the enrollment record; used to map the QHP to a Trading Partner ID on the EDI Registration Form	String (Alphanumeric)	10
6	Application Extract Date	Date the enrollment record was extracted from the FFM	Date (YYYYMMDD)	8
7	Application Extract Time	Time of day the enrollment was extracted from the FFM	Time (HHMMSSmmm)	9
8	Policy Last Maintenance Date	Date the enrollment record was last updated in the FFM	Date (YYYYMMDD)	8
9	Policy Last Maintenance Time	Time of day the enrollment record was last updated in the FFM	Time (HHMMSSmmm)	9
10	Application ID	FFM-assigned identifier for the application created by the consumer associated with the enrollment record	String (Numeric)	1-15
11	Transaction Type Code	Status of the policy on the FFM, to be used in conjunction with field 67 – Confirmation Indicator to determine the full status: 1 – Active or Terminated Coverage 3 – Cancelled	Integer	1

Field	Data Element	Description	Data Type	Length
Agent/Broker Information				
12	Agent/Broker First Name	First name of the agent/broker associated with the enrollment; will be a single blank space if unavailable	String	1-50
13	Agent/Broker Middle Name	Middle name of the agent/broker associated with the enrollment; will be a single blank space if unavailable	String	1-50
14	Agent/Broker Last Name	Last name of the agent/broker associated with the enrollment; will be a single blank space if unavailable	String	1-50
15	Agent/Broker NPN	The National Producer Number of the agent/broker; will be a single blank space if unavailable	String (Numeric)	1-10
16	Assistor Type Code	Indicates the type of assistor associated with the enrollment record; see Table 2 for the list of possible values	Integer	1
Member Information				
17	Individual Relationship Code	Indicates the member's relationship to the subscriber for the enrollment group; see Table 1 for the mapping of internal FFM Relationship Codes to ASC X12 values WW:XX WW – Relationship Code from FFM Policy XX – X12 Relationship Code Corresponding to Code from FFM Policy Example – “1:18”	String	4-5
18	Subscriber Indicator	Indicates whether the member is the subscriber of the enrollment group: Y – Subscriber N – Dependent Member	String	1
19	Reserved for Future Use	This field will be blank	n/a	

Field	Data Element	Description	Data Type	Length
20	Exchange-Assigned Subscriber ID	Exchange-Assigned identifier for the subscriber of the enrollment group; if the member in the record is the subscriber, this will be the same as the Exchange-Assigned Member ID	String (Numeric)	10
21	Exchange-Assigned Member ID	Exchange-Assigned identifier for the member	String (Numeric)	10
22	Issuer-Assigned Member ID	Identifier for the member assigned by the Issuer; only present if provided by the Issuer	String (Alphanumeric)	1-50
23	Issuer-Assigned Subscriber ID	Identifier for the subscriber of the enrollment group assigned by the Issuer; only present if provided by the Issuer	String (Alphanumeric)	1-50
24	QI Last Name	Last name of the qualified individual (member)	String	
25	QI First Name	First name of the qualified individual (member)	String	
26	QI Middle Name	Middle name of the qualified individual (member)	String	
27	QI Marital Status	Marital status of the member; only included if the Subscriber Indicator value is 'Y' 1 – Unmarried 2 – Married	Integer	1
28	Residential Address Line 1	Residential street address of the member (Line 1)	String	
29	Residential Address Line 2	Residential street address of the member (Line 2)	String	
30	Residential City Name	Residential city of the member	String	
31	Residential State Code	State abbreviation for the residential state of the member	String	2
32	Residential ZIP Code	Residential ZIP Code of the member	String	5-9

Field	Data Element	Description	Data Type	Length
33	Residential County Code	Residential County (Federal Information Processing Standard – FIPS) Code of the member	String	5
34	Phone Number	Member’s primary phone number as provided on the application	String (Numeric)	10
35	Social Security Number (SSN)	Social Security Number of the member	String	9
36	QI Birth Date	Birthdate of the qualified individual (member)	Date (YYYYMMDD)	8
37	QI Gender	Gender of the qualified individual; values are “Male” or “Female”	String	4-6
38	Tobacco Use Code	Specifies whether the member has indicated tobacco use in the past six months: 1 – Tobacco Use 2 – No Tobacco Use	Integer	1
39	Race Type	Member’s race as provided on the application (if available); See Table 3 for possible values	Integer	1-2
40	Ethnicity	Member’s ethnicity as provided on the application (if available); See Table 4 for possible values	Integer	1
41	Language Code – Spoken	Member’s primary spoken language, as provided on the application; See Table 5 for possible values	Integer	1-2
42	Language Code – Written	Member’s primary written language, as provided on the application; See Table 5 for possible values	Integer	1-2
43	Email Address	Member’s e-mail address as provided on the application	String	
Mailing Address Information (if different from Residential Address, otherwise these fields are blank)				
44	Mailing Address Line 1	Mailing street address of the member (Line 1)	String	

Field	Data Element	Description	Data Type	Length
45	Mailing Address Line 2	Mailing street address of the member (Line 2)	String	
46	Mailing Address City	Mailing city of the member	String	
47	Mailing Address State Code	State abbreviation for the mailing state of the member	String	2
48	Mailing Address ZIP Code	Mailing ZIP Code of the member	String	5-9
Custodial Parent Information (if the Custodial Parent of a minor member is other than the Subscriber of the enrollment group, otherwise these fields are blank)				
49	Custodial Parent Last Name	Last name of the custodial parent	String	
50	Custodial Parent First Name	First name of the custodial parent	String	
51	Custodial Parent Mailing Address Line 1	Mailing street address of the custodial parent (Line 1)	String	
52	Custodial Parent Mailing Address Line 2	Mailing street address of the custodial parent (Line 2)	String	
53	Custodial Parent Mailing Address City	Mailing address city of the custodial parent	String	
54	Custodial Parent State Code	State abbreviation for the mailing address state of the custodial parent	String	2
55	Custodial Parent ZIP Code	Mailing address ZIP Code of the custodial parent	String	5-9
Responsible Person Information (if applicable, otherwise these fields are blank)				
56	Responsible Person Last Name	Last name of the responsible person	String	
57	Responsible Person First Name	First name of the responsible person	String	

Field	Data Element	Description	Data Type	Length
58	Responsible Person Mailing Address Line 1	Mailing street address of the responsible person (Line 1)	String	
59	Responsible Person Mailing Address Line 2	Mailing street address of the responsible person (Line 2)	String	
60	Responsible Person Mailing Address City	Mailing address city of the responsible person	String	
61	Responsible Person State Code	State abbreviation for the mailing address state of the responsible person	String	2
62	Responsible Person ZIP Code	Mailing address ZIP Code of the responsible person	String	5-9
Health Coverage Information				
63	Benefit Start Date	Effective date of benefit coverage associated with this enrollment record	Date (YYYYMMDD)	8
64	Benefit End Date	Last date of benefit coverage associated with this enrollment record; if the enrollment record is cancelled, this will be equal to the Benefit Start Date	Date (YYYYMMDD)	8
65	Issuer-Assigned Policy Number	Policy number for the benefit coverage as assigned by the Issuer	String (Alphanumeric)	1-50
66	QHP Identifier	Full 16-character Qualified Health Plan (QHP) identifier, including CSR variant	String (Alphanumeric)	16
67	Confirmation Indicator	Indicates if the enrollment record is in effectuated status on the FFM; 'Y' indicates effectuated, 'N' indicates uneffectuated	String (Alphabetical)	1
68	Exchange-Assigned Policy Number	Identifier for this enrollment policy document, generated by the FFM; this value is required for proper IC834 processing	String (Numeric)	1 - 15

Field	Data Element	Description	Data Type	Length
Financial Information				
69	Marketplace Policy Segment ID	Identifier for the specific coverage span within an enrollment policy document	String (Numeric)	1 - 15
70	Applied APTC Amount	Amount of Advance Premium Tax Credit <i>applied to the premium monthly</i> , based on the subscriber's election during enrollment; only applies to subscriber records, otherwise blank	Dollars and Cents	
71	Applied APTC Effective Date	Effective date of the monthly applied APTC amount; only applies to subscriber records with a positive Applied APTC Amount, otherwise blank	Date (YYYYMMDD)	8
72	Applied APTC End Date	End date of the monthly applied APTC amount; only applies to subscriber records with a positive Applied APTC Amount, otherwise blank	Date (YYYYMMDD)	8
73	CSR Amount	Monthly Cost Sharing Reduction amount based on plan selection and member eligibility; only applies to subscriber records, otherwise blank	Dollars and Cents	
74	CSR Effective Date	Effective date of the monthly CSR amount; only applies to subscriber records with a positive CSR Amount, otherwise blank	Date (YYYYMMDD)	8
75	CSR End Date	End date of the monthly CSR amount; only applies to subscriber records with a positive CSR Amount, otherwise blank	Date (YYYYMMDD)	8
76	Total Premium Amount	Total monthly premium amount for the enrollment group; only applies to subscriber records, otherwise blank	Dollars and Cents	
77	Total Premium Effective Date	Effective date of the monthly total premium amount; only applies to subscriber records, otherwise blank	Date (YYYYMMDD)	8

Field	Data Element	Description	Data Type	Length
78	Total Premium End Date	End date of the monthly total premium amount; only applies to subscriber records, otherwise blank	Date (YYYYMMDD)	8
79	Individual Premium Amount	Monthly premium amount associated with the individual member; sent for both subscriber and dependent member records	Dollars and Cents	
80	Individual Premium Effective Date	Effective date of the monthly individual premium amount; sent for both subscriber and dependent member records	Date (YYYYMMDD)	8
81	Individual Premium End Date	End date of the monthly individual premium amount; sent for subscriber and dependent member records	Date (YYYYMMDD)	8
82	Total Responsibility Amount	Total amount for which the enrollment group is responsible on a monthly basis (total premium less applied APTC); only applies to subscriber records, otherwise blank	Dollars and Cents	
83	Total Responsibility Amount Effective Date	Effective date for the monthly total responsibility amount; only applies to subscriber records, otherwise blank	Date (YYYYMMDD)	8
84	Total Responsibility Amount End Date	End date for the monthly total responsibility amount; only applies to subscriber records, otherwise blank	Date (YYYYMMDD)	8
85	End of Year Termination Indicator	Indicates if the enrollment record will be terminated effective December 31 st of the given plan year and should not be enrolled for the next plan year via the Batch Auto-Renewal process; 'Y' indicates terminated, 'N' indicates not terminated Note: This field only applies to enrollment records with an end date of December 31 st of the given plan year	String (Alphabetical)	1

Field	Data Element	Description	Data Type	Length
86	Cancellation Source	Conveys whether a cancellation was initiated on the FFM or by the Issuer; see Table 7 for potential values If the enrollment record is not cancelled, this field will be blank	String (Numeric)	1
87	Termination Source	Conveys whether a termination was initiated on the FFM or by the Issuer; see Table 7 for potential values If the enrollment record is not terminated, this field will be blank	String (Numeric)	1
88	Cancellation Reason	Conveys the reason for cancellation of the policy, whether initiated on the FFM or by the Issuer; see Table 9 for potential values If the enrollment record is not cancelled (or a cancellation reason has not been provided), this field will be blank Note: This value will be populated on Enrollment Pre-Audit Files starting in July 2019	String (numeric)	1-2
89	Overlap Indicator	Conveys that the policy was cancelled or terminated, or had an adjustment to start date, in the prior month as part of the FFM process to eliminate overlapping coverage for the same individual across multiple enrollments; only included if the Subscriber Indicator value is 'Y' 1 – Within-HIOS overlap eliminated 2 – Across-HIOS overlap eliminated 3 – Within-HIOS overlap eliminated with one or more members losing coverage 4 – Across-HIOS overlap eliminated with one or more members losing coverage Field will be a single blank space if no modification to eliminate an overlap was applied in the prior month	String (numeric)	1

Field	Data Element	Description	Data Type	Length
90	Termination Reason	Conveys the reason for termination of the policy, whether initiated on the FFM or by the Issuer; see Table 9 for potential values If the enrollment record is not terminated, this field will be blank Note: This value will be populated on Enrollment Pre-Audit Files starting in July 2019	String (numeric)	1-2
91	Rating Area	Rating area of the enrollment, based on residential address	String	7
92	Paid Through Date	Date through which the member has made payment for benefit coverage (as provided by the Issuer); only applies to subscriber records, otherwise blank	Date (YYYYMMDD)	8
93	Payment Transaction ID	Payment transaction identifier generated by the FFM to associate the enrollment to payment made via the Issuer's payment portal; only applies to subscriber records, otherwise blank	String (Numeric)	13
Administrative Information				
94	Insurance Application Origin Type	Indicates the origin of the member's enrollment; only applies to subscriber records, otherwise blank – see Table 6 for possible values	Integer	1-2
95	Insurance Line of Business	Indicates whether health ("HLT") or dental ("DEN") coverage is represented by the enrollment record	String	3
96	CIC Correlation Key	Identifier generated by the FFM to associate two or more enrollment records linked by a Change in Circumstances (CIC) transaction; records with the same CIC Correlation Key represent the two sides (before and after) of the CIC transaction	String	36
97	Agent/Broker Suffix	Suffix of the agent/broker associated with the enrollment; will be a single blank space if unavailable	String	2-3

Field	Data Element	Description	Data Type	Length
98	Reserved for Future Use	This field will be blank	n/a	
99	Reserved for Future Use	This field will be blank	n/a	
100	New Policy ID Indicator	Conveys that the Exchange-Assigned Policy ID and/or Marketplace Policy Segment ID associated with the enrollment record was newly created by a manual or cleanup process in the prior month that did not result in the generation of an EDI 834; this may occur when a gap in coverage is created or other enrollment action applied that necessitates the creation of a new Exchange-Assigned Policy ID and/or Marketplace Policy Segment ID per established business rules 1 – New Policy ID and new Segment ID generated 2 – New Segment ID only generated Field will be a single blank space if there was no creation of a new Exchange-Assigned Policy ID or Marketplace Policy Segment ID for this enrollment in the prior month Note: This value will be populated on Enrollment Pre-Audit Files starting in July 2019	String (numeric)	1

Field	Data Element	Description	Data Type	Length
101	Date of Birth Cleanup Indicator	Conveys if the policy was updated by the monthly Date of Birth (DOB) Cleanup process; this process rolls back changes made to a member's Date of Birth to prior policies and policy segments on the same application Please note, if a consumer date of birth adjustment results in a change to age rating, there may be changes applied to the Total Premium Amount and the Applied APTC Amount as well 1 – Change to DOB only for one or more members of enrollment group 2 – Change to DOB and rerating for one or more members of enrollment group 3 – Change to DOB only for one or more members of enrollment group applied retroactively by collapsing segments Field will be a single blank space if the policy was not updated by the DOB cleanup in the prior month Note: This value will be populated on Enrollment Pre-Audit Files starting in July 2019	String (numeric)	1
102	Missing Outbound 834 Indicator	Conveys whether at least one outbound 834 from the FFM was not successfully conveyed for the enrollment span in the prior month; only included if the Subscriber Indicator value is 'Y' 1 – Missing Outbound 834 Field will be a blank space if no outbound 834s failed to convey in the prior month	String (numeric)	1

Field	Data Element	Description	Data Type	Length
103	Outbound 834 Retransmission Indicator	Conveys whether at least one outbound 834 for the enrollment span was successfully retransmitted to the Issuer in the prior month via an I834RT file; only included if the Subscriber Indicator value is 'Y' 1 – Retransmitted Outbound 834 Field will be a single blank if no outbound 834s were retransmitted in the prior month	String (numeric)	1
104	Outbound 834 Transaction History	Conveys past month history of outbound 834 transactions to the Issuer for a policy if at least one outbound 834 failed to successfully convey or was retransmitted in the prior month; only included if the Subscriber Indicator value is 'Y' See Table 8 for potential values	String	

Table 1 – Relationship Code Mapping From FFM Policy and FFM Application to ASC X12 Format

FFM Internal Value	Description	ASC X12 Value
1	Self	18
2	Spouse	01
3	Parent	03
4	Son/Daughter	19
5	Stepson/Stepdaughter	17
6	Grandchild	05
7	Sibling	14
8	Domestic Partner	53
9	Child of Domestic Partner	19
10	Unrelated	G8
11	Other Relative	G9
12	Step-parent	16
13	Aunt/Uncle	06
14	Nephew/Niece	07
15	Grandparent	04
16	First Cousin	08
17	Parent's Domestic Partner	G8
18	Tax Filer	G8
19	Tax Dependent	G8
20	Other	G8

FFM Internal Value	Description	ASC X12 Value
21	Adopted Child	09
22	Annuitant	60
23	Brother-in-law/Sister-in-law	12
24	Collateral Dependent	38
25	Court-Appointed Guardian	31
26	Daughter-in-law/Son-in-law	11
27	Former Spouse	25
28	Foster Child	10
29	Guardian	26
30	Mother-in-law/Father-in-law	13
31	Trustee	D2
32	Ward	15
33	Sponsored Dependent	23
34	Dependent of a Minor Dependent	24

Table 2 – Assistor Type Code

Reference Code	Value
0	Navigator
1	Certified Application Counselor
2	In-person Assistance Personnel
3	Agent or Broker
4	“None”

Table 3 – Race Code

Reference Code	Value	X12 834 Code
1	American Indian or Alaska Native	1002-5
2	Asian Indian	2029-7
3	Black or African American	2054-5
4	Chinese	2034-7
5	Filipino	2036-2
6	Guamanian or Chamorro	2086-7
7	Japanese	2039-6
8	Korean	2040-4
9	Native Hawaiian	2079-2
10	Other Asian	2028-9
11	Other Pacific Islander	2500-7
12	Samoan	2080-0
13	Vietnamese	2047-9

Reference Code	Value	X12 834 Code
14	White	2106-3

Table 4 – Ethnicity Code

Reference Code	Value	X12 834 Code
1	Cuban	2182-4
2	Mexican, Mexican-American, or Chicano/a	2148-5
3	Puerto Rican	2180-8
4	Other	No Code, No Default
5	n/a	No Code, No Default
6	Hispanic	2135-2
7	Not Hispanic	2186-5

Table 5 – Language Code

Reference Code	Value
1	English
2	Spanish
3	Vietnamese
4	Tagalog
5	Russian
6	Portuguese
7	Arabic
8	Chinese

Reference Code	Value
9	French
10	French Creole
11	German
12	Gujarati
13	Hindi
14	Korean
15	Polish
16	Urdu
17	Other

Table 6 – Application Origin Code

Reference Code	Value
1	FFM Online
2	Direct Enrollment (Consumer)
3	Agent/Broker – Issuer Agent
4	Enrollment Support Desk (ESD) Worker
5	Call Center Worker
6	Inbound Account Transfer
7	Inbound Issuer Termination
8	Auto Termination
9	Paper Application
10	Appeal System Worker
11	Batch Auto-Renewal
12	Agent/Broker – Web Broker
18	Appeals

Table 7 – Cancellation or Termination Source Code

Reference Code	Value
1	Online/Voluntary Withdrawal
2	Inbound 834
3	NLE
4	Reconciliation
5	FFM Cleanup Activity (i.e. Overlaps, Carry-Forward Cancel, etc.)

Table 8 – Outbound 834 Transaction History Specification

Delimited string with six elements – Enrollment Action Date:Enrollment Action Time:Type of Transaction:Successful Conveyance:AMRC:SEP Code
Each element will be separated by “.”; each outbound 834 transaction will be separated by “^”

Element	Definition and Format
Enrollment Action Date	Date on which enrollment activity occurred that caused change in the FFM Format: YYYYMMDD
Enrollment Action Time	Time at which enrollment activity occurred that caused change in the FFM Format: HHMMSSmmm
Type of Transaction	Format: INITIAL, TERMINATE, CANCEL, MAINTENANCE
Successful Conveyance	Indicates whether the outbound 834 transaction was successfully conveyed: Y – successfully conveyed; N – missing outbound 834; R – retransmitted 834 Format: Y, N, or R
Additional Maintenance Reason Code (AMRC)	See CMS 834 Companion Guide for full list of possible AMRCs, available here on CMS Zone: https://zone.cms.gov/document/asc-x12-005010-834-companion-guide Will be “NA” if not available
SEP Code	See CMS 834 Companion Guide for full list of possible AMRCs, available here on CMS Zone: https://zone.cms.gov/document/asc-x12-005010-834-companion-guide Will be “NA” if not available

Table 9 – Cancellation or Termination Reason Code

Includes mapping to Additional Maintenance Reason Code (AMRC) values used in EDI 834 transactions

Reference Code	Description	Inbound/ Outbound	Cancel AMRC	Termination AMRC
1	Voluntary Withdrawal	Outbound	CANCEL	TERM
2	No Longer Eligible (NLE) Due to Unresolved Data Matching Issue (DMI)	Outbound	CANCEL-NLE	TERM-NLE
3	Change in Circumstance (CIC)	Outbound	CANCEL-CIC	TERM-CIC
4	Stop QHP Due to Other Coverage	Outbound	n/a	TERM-OTH-COVERAGE
5	BAR Carry-Forward Cancel	Outbound	CANCEL-CARRYFORWARD	n/a
6	Non-Payment	Inbound	CANCEL	TERM
7	Free Look Cancel	Inbound	CANCEL-FLC	n/a
8	HICS	Inbound	CANCEL-HICS	TERM-HICS
9	Fraud	Inbound	CANCEL-FRD	TERM-FRD
10	Anti-Duplication	Inbound	CANCEL-ANTIDUPLICATION	TERM-ANTIDUPLICATION
11	Out of Area	Inbound	CANCEL-OUT-OF-AREA	n/a
12	Other	Inbound	CANCEL-OTH	TERM-OTH
13	Death	Outbound	CANCEL-PDM	TERM-PDM
14	Rescind Coverage	Inbound	CANCEL-RESCIND	n/a

Note: “Outbound” indicates the reason code is used on transactions from the FFM to the Issuer; “Inbound” indicates the Issuer has initiated the cancellation or termination.