

## **Submission 8 Narratives – (Test Scenarios 8-0, 8-1, 8-2)**

Instructions: Prepare a submission for Patttsteight Medicare who is providing Medicare coverage to two Responsible Individuals. The information to be included in this submission is provided in the following narrative.

### **Submission Narrative**

Patttsteight Medicare (Employer Identification Number (EIN) 000000810), 65 Willow Lane, Baltimore, MD 21244 is a provider of Medicare.

Elizabeth Santanova is the point of contact for Patttsteight Medicare and may be contacted at 5556332273.

Signature, Title and Date on the signature line should be blank.

### **General Information for Forms 1095-B**

Covered individuals should be listed alphabetically by their first name. Note: This constraint applies only to the AATS test environment.

### **Scenario 8-1 Responsible Individual 1: Kathy Noble Jones**

Kathy Noble Jones (Social Security Number (SSN) 000000821) was covered by Medicare for the entire year.

**Note:** While it is understood that there are two correct ways to complete Part IV, in this AATS Scenario, please select the “Covered all 12 months” check box when applicable rather than entering data in each of the 12 monthly check boxes.

Kathy Noble Jones resides at 1724 Hurst Street, San Marcos, TX 78666.

### **Scenario 8-2 Responsible Individual 2: Sarah Jonezin**

Sarah Jonezin (SSN 000000829) was covered by Medicare from March 1<sup>st</sup> through December 31<sup>st</sup> inclusive.

Sarah Jonezin resides at 1963 Hardin Avenue, Wagoner, OK 74467.