

Tax Year 2016 / Processing Year 2017

Predefined Scenario

Submission 6 Narratives – (Test Scenarios 6-0, 6-1)

Instructions: Prepare a transmission using the Tax Year 2016 1094-B and 1095-B Forms for an issuer of health coverage. In this scenario Parktestsix Medicaid is the issuer who will be reporting Medicaid coverage information for one responsible individual.

1094-B Submission Narrative Information

Scenario 6-0

Filer's Name: Parktestsix Medicaid

Employer Identification Number (EIN): 00-0000631

Name of person to contact: Elias Koop

Contact telephone number: 5554052543

Address: 65 Health Avenue

City: Austin

State of province: TX

Country and ZIP or foreign postal code: 78741

Total number of Forms 1095-B submitted with this transmittal: 1

Signature, title and date can be left blank, as there is no requirement for these elements within TY2016.

1095-B Record Narrative Information

Scenario 6-1 Responsible Individual #1

Part I Responsible Individual

Responsible Individual Name: Maria Nichols

Social Security Number (SSN): 000-00-0601

Date of Birth (if no SSN available): not applicable for this scenario

Address: 1724 Hurst Street

City: San Marco

State: TX

Country and ZIP or foreign postal code: 78666

Enter letter identifying Origin of the Health Coverage: C – Government-Sponsored Program

Part II Information about Certain Employer-Sponsored Coverage – no need to complete this section for this scenario

Part III Issuer or Other Coverage Provider

Filer's Name: Parktestsix Medicaid

Employer Identification Number (EIN): 00-0000631

Contact telephone number: 5554052543

Address: 65 Health Avenue

City: Austin

State of province: TX

Country and ZIP or foreign postal code: 78741

Part IV Covered Individuals

Maria and her spouse Max were covered under the policy for all 12 months from January 1st through December 31st (inclusive). Maria's dependent, Jane Nichols, was only covered under the policy for the months of November 1st to December 31st.

Responsible Individual: Maria Nichols 000-00-0601

Spouse: Max Nichols 000-00-0602

Dependent: Jane Nichols's SSN was not on file with Parktestsix Medicaid; However, her birthday is listed as 2016-11-05 (YYYY-MM-DD).

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 rather than entering data in each of the 12 monthly check boxes for Maria and Max.