

# Decoding Form 1095-C: Part II

## QUESTION 1: WAS COVERAGE OFFERED TO THE EMPLOYEE THIS MONTH?

YES

NO

Employee's lowest cost  $\leq$  \$93.18

Employee's lowest cost  $>$  \$93.18

LINE  
14

Use Code 1A

Use Code 1E

Use Code 1H

LINE  
15

Leave Blank

Enter Ee's  
Lowest Cost

Leave Blank

**QUESTION 2: DID EMPLOYEE  
ENROLL THIS MONTH?**  
YES NO

**QUESTION 2: DID EMPLOYEE  
ENROLL THIS MONTH?**  
YES NO

Use Code 2A  
or one of the  
codes shown  
below

LINE  
16

Code 2C

Code 2G

Code 2C

CODE 2B, 2D, 2F, 2H or Leave Blank