

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