

Common Errors and Solutions

File is Accepted with Errors

Error

1095C-17-00000535| **11**

1095C-049

If Form 1095C checkbox 'CoveredIndividualInd' is not checked, then all entries in 'CoveredIndividualGrp' must not have a value

/Form109495CTransmittalUpstream/Form1094CUpstreamDetail/Form1095CUpstreamDetail/CoveredIndividualGrp

Solution

Go to **Utilities > ACA 1094/1095 Correction/Replacement > 1094-1095 - C tab**. Change the Payment Year to Current Year and click the Directory button. Click on the Directory to see the files you have created.

The screenshot shows the Human Resources system interface. At the top, there is a navigation bar with the following links: Tables, Maintenance, Payroll Processing, Inquiry, Next Year, Self-Service, Utilities, and Reports. Below the navigation bar, the breadcrumb trail reads: Utilities > ACA 1094/1095 Correction/Replacement. The session timer shows 59 min and 56 sec.

The main content area has two tabs: 1094/1095 - B and 1094/1095 - C. The 1094/1095 - C tab is selected.

Under the 1094/1095 - C tab, there are two sections. The first section contains the following fields and buttons:

- Payment Year: 2017
- File Name: [Text Box]
- Retrieve [Button]
- Directory [Button]
- Plan Start Month: [Text Box]
- Receipt ID: [Text Box]

The second section contains the following fields and buttons:

- File Name: [Text Box]
- File Type: [Text Box]
- Run User: [Text Box]
- Run Time: [Text Box]
- Run Year: [Text Box]
- Replacement [Button]
- 1094 Correction [Button]
- 1095 Corrections [Button]

Below these sections is a table titled "1095 Record Details". The table has the following columns: Select, 1095C Record Number, Emp Number, First Name, Middle Name, Last Name, Generation, SSN, DOB, and Num Covered Indivs. The table is currently empty, with the text "No Rows" displayed below the header.

Click on the top file to grab the most recent AIR file created.

Disclaimer: Screen shot may not represent current year; however, the process is the same.

File Name

Payment Year: File Name:

Run Type: C Original (O) ☒ Correction (C) ☒ Replacement (R) ☒

File Type	File Name	Run User	Run Time	Total 1095C
1094C	Request BBLP9 20170120T092305158Z.xml	MOBERLEY, AMANDA	2017-01-20 09:23:06.406	98
O	1094C Request BBLP9 20170118T074916012Z.xml	MOBERLEY, AMANDA	2017-01-18 07:49:16.416	98
O	1094C Request BBLP9 20170117T090011835Z.xml	MOBERLEY, AMANDA	2017-01-17 09:00:12.113	98
O	1094C Request BBLP9 20170117T085852334Z.xml	MOBERLEY, AMANDA	2017-01-17 08:58:52.716	98

This will list everyone included in the file. Next look at your error listing that you downloaded from the IRS website. It tells you the line number where the problem is (the last digits):

Accepted with Errors
1095C-17-00000535|1

1095C-17-00000535|11

1095C-049

If Form 1095C checkbox 'CoveredIndividualInd' is not checked, then all entries in 'CoveredIndividualGrp' must not have a value
/Form109495CTransmittalUpstream/Form1094CUpstreamDetail/Form1095CUpstreamDetail/CoveredIndividualGrp

Line 11 is Douglas Bennett. Go look at his 1095 data in **Maintenance > ACA 1095 YTD Data > 1095-C tab**. The error indicates a discrepancy in the months he was covered and the data about his plan. The info above shows you offered him coverage all months and that he was enrolled in coverage all months, but he boxes below show he was only covered January through August:

Maintenance > ACA 1095 YTD Data SessionTimer: 57 min and 35 sec

Calendar Year: 2016 Employee: 000099 : BENNETT, DOUGLAS M

1095-B 1095-C 1095-B Hist 1095-C Hist

	All	Jan	Feb	Sep	Oct	Nov	Dec
Offer of Coverage	1E - Off						
Employee Share	86.00	0.00	0.00	0.00	0.00	0.00	0.00
Safe Harbor	2C - Err						

Covered Individuals
If Employer provided self-insured coverage, check the box and enter the information for each covered individual. Self-Insured: ☐ Plan Start Month:

Delete	First Name	Middle Name	Last Name	Generation	SSN	DOB	All	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
<input type="checkbox"/>	DOUGLAS	M	BENNETT				<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

These boxes say he only had coverage Jan - Aug

I suspect he left at the end of last year so his form should look like this:

Calendar Year: 2016 Employee: 000099 : BENNETT, DOUGLAS M Retrieve Delete Directory

1095-B 1095-C 1095-B Hist 1095-C Hist

	All	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Offer of Coverage	1E - Off	1E - Off	1E - Off	1E - Off	1E - Off	1E - Off	1E - Off	1E - Off	1E - Off	1H - Nc	1H - Nc	1H - Nc	1H - Nc
Employee Share	0.00	86.00	86.00	86.00	86.00	86.00	86.00	86.00	86.00	0.00	0.00	0.00	0.00
Safe Harbor	2C - En	2C - En	2C - En	2C - En	2C - En	2C - En	2C - En	2C - En	2C - En	2A - En	2A - En	2A - En	2A - En

Covered Individuals
If Employer provided self-insured coverage, check the box and enter the information for each covered individual. Self-Insured: ☐ Plan Start Month:

Delete	First Name	Middle Name	Last Name	Generation	SSN	DOB	All	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
<input type="checkbox"/>	DOUGLAS	M	BENNETT				<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The All columns shouldn't have data.

- On Offer of Coverage: Use 1E in Jan - Aug, then 1H (No offer) for Sept - Dec.
- Change the Employee share to only show an amount Jan - Aug.
- On Safe Harbor: Use 2C in Jan - Aug, then 2A (Not employed) for Sept - Dec.

Save those changes. Then work your way through the others. Once you have corrected those, send a Correction File (not a whole new Original.) From **Utilities > ACA 1094/1095 Correction/Replacement > 1094-1095-C tab** check the boxes for the lines you corrected and create 1095 Corrections file:

Human Resources Version: 3.0.0000 Build: 0196

Tables Maintenance Payroll Processing Inquiry Next Year Self-Service Utilities Reports

Utilities > ACA 1094/1095 Correction/Replacement SessionTimer: 58 min and 19 sec

1094/1095 - B 1094/1095 - C

Payment Year: 2016 File Name: 1094C_Request_BBLP9_20170120T092305158Z.xml Retrieve Directory

Plan Start Month: Receipt ID:

File Name: 1094C_Request_BBLP9_20170120T092305158Z.xml File Type: Original Run User: AMANDA MOBERLEY Run Time: 2017-01-20 09:23:06.406 Run Year: 2016

Replacement 1094 Correction 1095 Corrections

1095 Record Details

Select	1095C Record Number	Emp Number	First Name	Middle Name	Last Name	Generation	SSN	DOB	Num Covered Indivs.
<input type="checkbox"/>	1	000389	JORDAN	KAYE	ALY		xxx-xx-2083		2
<input type="checkbox"/>	2	000083	MELANIE	H	ANDERSON		xxx-xx-7526		2
<input type="checkbox"/>	3	000209	ANGELA	KAY	ASKEW		xxx-xx-3173		3
<input type="checkbox"/>	4	000070	JENNIE	LYNN	BAILEY		xxx-xx-1316		1
<input type="checkbox"/>	5	000383	TORI	MOREACE	BAISCH		xxx-xx-3140		0
<input type="checkbox"/>	6	000142	JOSEPH	L	BAKER		xxx-xx-1106		0
<input type="checkbox"/>	7	000210	CANDY	RUFF	BALLIEW		xxx-xx-1206		1
<input type="checkbox"/>	8	000027	GINGER	L	BARTEE		xxx-xx-6480		1
<input type="checkbox"/>	9	000048	CHRISTOPHER	ALLEN	BEARD		xxx-xx-2814		0
<input type="checkbox"/>	10	000103	SUSAN	CHRISTINE	BEARD		xxx-xx-5921		5
<input checked="" type="checkbox"/>	11	000099	DOUGLAS	M	BENNETT		xxx-xx-0468		1
<input type="checkbox"/>	12	000222	JENNIFER	S	BOWMAN		xxx-xx-5696		1
<input type="checkbox"/>	13	000074	DEBRA	L	BOYETT		xxx-xx-3283		0
<input type="checkbox"/>	14	000182	INOCENCIO		BRIONES		xxx-xx-7309		1
<input type="checkbox"/>	15	000032	RODNEY	LEE	BRITTING		xxx-xx-3031		1
<input type="checkbox"/>	16	000236	HEATHER		BROWN		xxx-xx-3822		4
<input checked="" type="checkbox"/>	17	000283	KASEY		BROWN		xxx-xx-0720		1
<input type="checkbox"/>	18	000039	SUNNY	LEE	CLEVELAND		xxx-xx-7973		4
<input type="checkbox"/>	19	000213	MARY HELEN	L	CLEVINGER		xxx-xx-6700		1

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Error

1094C-19-000167971257

```
<TransmitterErrorDetailGrp>
  <UniqueRecordId>1094C-19-000167971257</UniqueRecordId>
  <ns2:ErrorMessageDetail>
    <ns2:ErrorMessageCd>1095C-010-01</ns2:ErrorMessageCd>
    <ns2:ErrorMessageTxt>Form 1095C 'OtherCompletePersonName' and 'SSN' in 'EmployeeInfoGrp' must match IRS database.</ns2:ErrorMessageTxt>
    <ns2:XpathContent>/Form109495CTransmittalUpstream/Form1094CUpstreamDetail/Form1095CUpstreamDetail/EmployeeInfoGrp/SSN</ns2:XpathContent>
  </ns2:ErrorMessageDetail>
</TransmitterErrorDetailGrp>
</ACATransmitterSubmissionDetail>
</ns3:FormBCTransmitterSubmissionDtl>
```

Solution

Indicates the information shown in the Covered Individual area does not match the Social Security Card.

Maintenance > ACA 1095 YTD Data SessionTimer: 52 min and 32 sec

Shows full middle name

Calendar Year: Employee:

1095-B | 1095-C | 1095-B Hist | 1095-C Hist

	All	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Offer of Coverage	1E - Off												
Employee Share	86.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Safe Harbor	2C - Err												

Covered Individuals
If Employer provided self-insured coverage, check the box and enter the information for each covered individual. Self-Insured: ☒ Plan Start Month:

Delete	First Name	Middle Name	Last Name	Generation	SSN	DOB	All	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
<input type="button" value="Delete"/>	BRIAN	R	COPE				<input checked="" type="checkbox"/>												
<input type="button" value="Delete"/>	HANNAH	R	RANKIN				<input checked="" type="checkbox"/>												
<input type="button" value="Delete"/>	PAMELA	R	COPE				<input checked="" type="checkbox"/>												
<input type="button" value="Delete"/>																			

Shows middle initial only

We are required to enter an employee's name as it appears on the Social Security Card when building them in TxEIS. In the above example, TxEIS shows the full middle name. However, in the Covered Individual area of the 1095-C, we have just the middle initial. You will need to change the Middle Name in the Covered Individuals area to match the Social Security Card then send a Correction File.

Error

<ns2:ErrorMessageTxt>If Form 1095C 'CorrectedUniqueRecordId' ('ReceiptId' | 'SubmissionId' | 'RecordId') has a value, then the Unique Submission ID portion ('ReceiptId' | 'SubmissionId') must match a Unique Submission ID from a Submission that was previously accepted by IRS</ns2:ErrorMessageTxt>

Solution

The district submitted their original AIR file. It was accepted with errors. The error indicated there was a mismatch on a social security number and name (an error addressed in the previous solution.) We corrected the mismatch and submitted a Correction file, but the file was Rejected. This was the error message for that rejection. The error indicates we haven't supplied a Receipt ID/Submission ID that matches a previous file Accepted by the IRS.

The screenshot shows the 'Human Resources' system interface. At the top, there's a navigation bar with links like 'Tables', 'Maintenance', 'Payroll Processing', 'Inquiry', 'Next Year', 'Self-Service', 'Utilities', and 'Reports'. Below this, a breadcrumb trail shows 'Utilities > ACA 1094/1095 Correction/Replacement'. The main content area has a tabbed interface with '1094/1095 - B' and '1094/1095 - C'. The '1094/1095 - C' tab is active, showing a form with fields for 'Payment Year' (2016), 'File Name' (1094C_Request_BBBQD_20170125T110010120Z.xml), 'Plan Start Month', and 'Receipt ID' (1095c-17-00003451). A red arrow points to the 'Receipt ID' field. Below the form, there's a table titled '1095 Record Details' with columns: Select, 1095C Record Number, Emp Number, First Name, Middle Name, Last Name, Generation, SSN, DOB, and Num Covered Indiv. The table contains one row of data.

Select	1095C Record Number	Emp Number	First Name	Middle Name	Last Name	Generation	SSN	DOB	Num Covered Indiv
	1	000001	KRYSTAL	CHRISTINA	ACQUINO		000000000	06-10-1997	1

Upon review, we found that we had supplied the correct Receipt ID, but had typed it with a lower case 'c.' It seems the Receipt ID is case sensitive, because we changed that and resent the Correction file and got it to process. Therefore, be aware that when creating Correction of Replacement files, the Receipt ID of the file you are correcting or replacing will need to be entered exactly as it is shown on your IRS Transmission Receipt.]