

PAY1 Employer Group Medical Enrollment File: Data Layout and Dictionary (Version 23-1)

Data Layout

Field Number (Order)	Data Source	Field Name	Data Format	Length	Comment
1	PAY1	SSN (Subscriber)	character	9	
2	PAY1	SSN (Member)	character	9	
3	PAY1	For Coverage Year/Month	character	6	YYYYMM
4	PAY1	Agency/SubAgency	character	6	
5	PAY1	Member Type	character	1	
6	PAY1	Member First Name	character	15	
7	PAY1	Member Middle Name/Initial	character	15	
8	PAY1	Member Last Name	character	20	
9	PAY1	Member Suffix	character	4	
10	PAY1	Member Birthdate	character	8	YYYYMMDD
11	PAY1	Enrollment Indicator	character	1	
12	PAY1	Health Carrier	character	4	
13	PAY1	Eligibility Type	character	10	
14	PAY1	Coverage Offer Indicator	character	1	
15	PAY1	Medical Effective Date	character	8	YYYYMMDD
16	PAY1	Address Line 1	character	40	
17	PAY1	Address Line 2	character	40	
18	PAY1	City	character	30	
19	PAY1	State	character	2	
20	PAY1	ZIP Code	character	10	
21	PAY1	Originating SSN	character	9	
22	PAY1	Medicare	character	1	
23	PAY1	Split Account Indicator	character	1	
24	PAY1	In Coverage Year/Month	character	6	
25	PAY1	Country	character	2	
26	PAY1	Subscriber ID	character	9	
27	PAY1	Record Status	character	1	
28	PAY1	PEBB/SEBB Indicator	character	4	

File Type

Pipe-delimited .txt file. Note: Fields are padded with spaces.

Naming Convention:

Agency Code + Sub-agency Code + "EGPAY1DATA" + Year + Month + .txt

Sample Name:

600B06EGPAY1DATA202301.txt

Data Distribution Schedule:

On or after the 10th day of the month.

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Data Dictionary

Field Number (Order)	Field Name	Description & Data Values	Length
1	SSN (Subscriber)	Subscriber's social security number.	9
2	SSN (Member)	Member's social security number (subscriber, spouse, or dependent)	9
3	For Coverage Year/Month	Year and month subscriber was offered coverage.	6
4	Agency/SubAgency	For employees, this field is the employer agency/sub-agency assigned by either OFM or HCA. For COBRA/SelfPay, this is the last agency/sub-agency as an employee. For retirees, this is the agency from which the individual retired (PAY1 original agency code)	6
5	Member Type	Code used to identify type of PEB member. 1 - Employee (subscriber) 2 - Spouse 3 - Dependent	1
6	Member First Name	Member's first name.	15
7	Member Middle Name/Initial	Member's middle name or initial.	15
8	Member Last Name	Member's last name.	20
9	Member Suffix	Member's suffix (e.g., JR, SR).	4
10	Member Birthdate	Member's birthdate.	8
11	Enrollment Indicator	Indicates if member was enrolled in coverage. Y - Enrolled D - Waived N - Not Enrolled	1

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<p>12</p>	<p>Health Carrier (2022 Enrollment Data)</p> <p>Important Note: All Uniform Medical Plan (UMP) carrier codes that begin with a "U" or "V" are "self-insured" coverage.</p>	<p>Health Carrier Codes (2022 Enrollment Data)</p> <p>PEBB Coverage:</p> <p>C Kaiser Permanente WA Classic CW Kaiser Permanente WA Classic SmartHealth CV Kaiser Permanente WA Value CVW Kaiser Permanente WA Value SmartHealth CHSA Kaiser Permanente WA CDHP CHSW Kaiser Permanente WA CDHP SmartHealth C1 Kaiser Permanente WA SoundChoice C1W Kaiser Permanente WA SoundChoice SmartHealth CMED Kaiser Permanente WA Medicare D Kaiser Permanente NW Classic DW Kaiser Permanente NW Classic SmartHealth DHSA Kaiser Permanente NW CDHP DHSW Kaiser Permanente NW CDHP SmartHealth U UMP Classic UW UMP Classic SmartHealth US UMP Select USW UMP Select SmartHealth UHSA UMP CDHP UHSW UMP CDHP SmartHealth U1 UMP Plus - UW Medicine ACN U1W UMP Plus - UW Medicine ACN SmartHealth U2 UMP Plus - Puget Sound High Value Network U2W UMP Plus - Puget Sound High Value Network SmartHealth F Premera Blue Cross Medicare Supplement Plan F G Premera Blue Cross Medicare Supplement Plan G MB UnitedHealthcare PEBB Balance MC UnitedHealthcare PEBB Complete</p> <p>SEBB Coverage:</p> <p>KN1 Kaiser Permanente NW 1 KN2 Kaiser Permanente NW 2 KN3 Kaiser Permanente NW 3 KW1 Kaiser Permanente WA Core 1 KW2 Kaiser Permanente WA Core 2 KW3 Kaiser Permanente WA Core 3 KWS Kaiser Permanente WA SoundChoice KO1 Kaiser Permanente WA Options Access PPO 1 KO2 Kaiser Permanente WA Options Access PPO 2 KO3 Kaiser Permanente WA Options Access PPO 3 PH Premera High PPO PP Premera Peak Care EPO PS Premera Standard PPO V UMP Achieve 1 VA UMP Achieve 2 VHSA UMP High Deductible (CDHP) V1 UMP Plus - UW Medicine Accountable Care Network V2 UMP Plus - Puget Sound High Value Network</p>	<p>4</p>
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<p>12</p>	<p>Health Carrier (2019 Enrollment Data)</p> <p>Important Note: All Uniform Medical Plan (UMP) carrier codes that begin with a "U" are "self-insured" coverage.</p>	<p>Health Carrier Codes (2019 Enrollment Data)</p> <p>C Kaiser Permanente WA Classic CW Kaiser Permanente WA Classic SmartHealth CV Kaiser Permanente WA Value CVW Kaiser Permanente WA Value SmartHealth CHSA Kaiser Permanente WA CDHP CHSW Kaiser Permanente WA CDHP SmartHealth C1 Kaiser Permanente WA SoundChoice C1W Kaiser Permanente WA SoundChoice SmartHealth CMED Kaiser Permanente WA Medicare D Kaiser Permanente NW Classic DW Kaiser Permanente NW Classic SmartHealth DHSA Kaiser Permanente NW CDHP DHSW Kaiser Permanente NW CDHP SmartHealth U UMP Classic UW UMP Classic SmartHealth UHSA UMP CDHP UHSW UMP CDHP SmartHealth U1 UMP Plus - UW Medicine ACN U1W UMP Plus - UW Medicine ACN SmartHealth U2 UMP Plus - Puget Sound High Value Network U2W UMP Plus - Puget Sound High Value Network SmartHealth F Premera Blue Cross Medicare Supplement Plan F</p>	<p>4</p>
<p>12</p>	<p>Health Carrier (2018 Enrollment Data)</p> <p>Important Note: All Uniform Medical Plan (UMP) carrier codes that begin with a "U" are "self-insured" coverage.</p>	<p>Health Carrier Codes (2018 Enrollment Data)</p> <p>C Kaiser Permanente WA Classic CW Kaiser Permanente WA Classic SmartHealth CV Kaiser Permanente WA Value CVW Kaiser Permanente WA Value SmartHealth CHSA Kaiser Permanente WA CDHP CHSW Kaiser Permanente WA CDHP SmartHealth C1 Kaiser Permanente WA SoundChoice C1W Kaiser Permanente WA SoundChoice SmartHealth CMED Kaiser Permanente WA Medicare D Kaiser Permanente NW Classic DW Kaiser Permanente NW Classic SmartHealth DHSA Kaiser Permanente NW CDHP DHSW Kaiser Permanente NW CDHP SmartHealth U UMP Classic UW UMP Classic SmartHealth UHSA UMP CDHP UHSW UMP CDHP SmartHealth U1 UMP Plus - UW Medicine ACN U1W UMP Plus - UW Medicine ACN SmartHealth U2 UMP Plus - Puget Sound High Value Network U2W UMP Plus-Puget Sound High Value Network SmartHealth F Premera Blue Cross Medicare Supplement Plan F</p>	<p>4</p>

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12	<p>Health Carrier (2017 Enrollment Data)</p> <p>Important Note: All Uniform Medical Plan (UMP) carrier codes that begin with a "U" are "self-insured" coverage.</p>	<p>Health Carrier Codes (2017 Enrollment Data)</p> <p>C Kaiser Permanente WA Classic CW Kaiser Permanente WA Classic SmartHealth CV Kaiser Permanente WA Value CVW Kaiser Permanente WA Value SmartHealth CHSA Kaiser Permanente WA CDHP CHSW Kaiser Permanente WA CDHP SmartHealth C1 Kaiser Permanente WA SoundChoice C1W Kaiser Permanente WA SoundChoice SmartHealth CMED Kaiser Permanente WA Medicare D Kaiser Permanente NW Classic DW Kaiser Permanente NW Classic SmartHealth DHSA Kaiser Permanente NW CDHP DHSW Kaiser Permanente NW CDHP SmartHealth U UMP Classic UW UMP Classic SmartHealth UHSA UMP CDHP UHSW UMP CDHP SmartHealth U1 UMP Plus - UW Medicine ACN U1W UMP Plus - UW Medicine ACN SmartHealth U2 UMP Plus - Puget Sound High Value Network U2W UMP Plus - Puget Sound High Value Network SmartHealth F Premera Blue Cross Medicare Supplement Plan F</p>	4
12	<p>Health Carrier (2016 Enrollment Data)</p> <p>Important Note: All Uniform Medical Plan (UMP) carrier codes that begin with a "U" are "self-insured" coverage.</p>	<p>Health Carrier Codes (2016 Enrollment Data)</p> <p>C Group Health Classic CW Group Health Classic SmartHealth CV Group Health Value CVW Group Health Value SmartHealth CHSA Group Health CDHP CHSW Group Health CDHP SmartHealth C1 Group Health SoundChoice C1W Group Health SoundChoice SmartHealth CMED Group Health Medicare D Kaiser Permanente Classic DW Kaiser Permanente Classic SmartHealth DHSA Kaiser Permanente CDHP DHSW Kaiser Permanente CDHP SmartHealth U UMP Classic UW UMP Classic SmartHealth UHSA UMP CDHP UHSW UMP CDHP SmartHealth U1 UMP Plus - UW Medicine ACN U1W UMP Plus - UW Medicine ACN SmartHealth U2 UMP Plus - Puget Sound High Value Network U2W UMP Plus - Puget Sound High Value Network SmartHealth F Premera Blue Cross Medicare Supplement Plan F</p>	4
13	Eligibility Type	<p>Employee COBRA LWOP Retiree</p>	10
14	Coverage Offer Indicator	<p>Indicates if subscriber was offered coverage (either "Y" or "D" code in field 11) Y - Offered medical coverage</p> <p>Note: Ignore this code when value of "Record Status" code (Field 27) is "D".</p>	1
15	Medical Effective Date	Effective date of medical coverage (based on current eligibility type)	8
16	Address Line 1	The first line of the subscriber's street address.	40
17	Address Line 2	The second line of the subscriber's street address.	40

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18	City	Subscriber's city address.	30
19	State	Subscriber's state address.	2
20	ZIP Code	Subscriber's ZIP Code address.	10
21	Originating SSN	SSN of originating subscriber. When this SSN does not match the Employee's (Subscriber's) SSN listed in Field 1, it indicates one of the following scenarios: a. Surviving spouse is enrolled within the year of the subscriber's death. This is used to link the surviving spouse to the deceased subscriber for reporting purposes. b. COBRA subscriber is enrolled within the year of separation from the original subscriber's account. This is the link to the original subscriber for reporting purposes.	9
22	Medicare	0 - Non-Medicare 1 - Medicare Important Note: In some cases when a retroactive change was made to the member's enrollment data, a Medicare value of "1" may be <u>incorrectly</u> reported in the "full-year" or "amended" files (for a time period when the member was actually Non-Medicare "0").	1
23	Split Account Indicator	0 - Not a split account 1 - Split Account (subscriber is enrolled in Premera Blue Cross Medicare Supplement Plan F or Plan G; or, UnitedHealthcare PEBB Balance or PEBB Complete; and, at least one other member of the family is enrolled in Uniform Medical Plan).	1
24	In Coverage Year/Month	Year and month PEB coverage was reported to employer (or former employer).	6
25	Country	Subscriber's country address	2
26	Subscriber ID	PAY1 Internal System ID Number	9
27	Record Status	A - Active (When "A" add new record if none exists; or, change record if record already exists) D - Delete (When "D" remove existing record; or, do nothing if no record exists)	1
28	PEBB/SEBB Program Indicator	PEBB - Indicates enrolled medical coverage is Public Employees Benefits Board coverage. SEBB - Indicates enrolled medical coverage is School Employees Benefits Board coverage.	4