# Quarterly Health Enrollment - Zip Code Record Layout

**One (1) Record per Oregon Zip Code with Covered Lives 59 total fields**
Refer to Quarterly Health Enrollment Report Instructions, Sections A-E and H.  **There are no changes to zip code records for 2015.**

| Field Number | Field Name | Data Type (Length, Decimal) | Outline | Item Reference | Notes for Reporting Entities |
|---|---|---|---|---|---|
| 1 | Record Type | NUMBER (1) | | | Value "2" Identifies as zip code record |
| 2 | Business Type | Char(1) | | I = Insurer/Carrier | Use I, S or T |
| | | | | S = Oregon Public Entities | |
| | | | | T = Third Party Administrators | |
| 3 | Business ID | NUMBER (10) | | I = NAIC number | |
| | | | | S = Assigned by Insurance Division | |
| | | | | T = 10-digit TPA license number | TPAs use 10-digit license number |
| 4 | Year | NUMBER (4) | | | |
| 5 | Quarter | NUMBER (1) | | | Value 1,2,3, or 4 |
| 6 | 5-Digit Oregon Zip Code | NUMBER (5) | | | |
| *Enrollment through the Oregon Health Insurance Marketplace:* | | | | | |
| 7 | Individual Health Plan Totals | NUMBER (7) | | 1 | Total of fields 8 through 13 |
| 8 | a. Bronze | NUMBER (7) | | 1a | |
| 9 | b. Silver | NUMBER (7) | | 1b | |
| 10 | c. Gold | NUMBER (7) | | 1c | |
| 11 | d. Platinum | NUMBER (7) | | 1d | |
| 12 | e. Multistate Health Benefit Plan | NUMBER (7) | | 1e | |
| 13 | f. Catastrophic Health Plan | NUMBER (7) | | 1f | |
| 14 | Small Employer Group Health Plans Total | NUMBER (7) | Lives by Zip Code and Market & Data Files - Zip Code Record Template | 2 | Total of fields 15 through 19 |
| 15 | a. Bronze | NUMBER (7) | | 2a | |
| 16 | b. Silver | NUMBER (7) | | 2b | |
| 17 | c. Gold | NUMBER (7) | | 2c | |
| 18 | d. Platinum | NUMBER (7) | | 2d | |
| 19 | f. Multistate Health Benefit Plan | NUMBER (7) | | 2e | |
| 20 | Oregon Public Entities | NUMBER (7) | | 3 | Total of fields 21 through 24 |
| 21 | a. Bronze (Basic) | NUMBER (7) | | 3a | |
| 22 | b. Silver | NUMBER (7) | | 3b | |
| 23 | c. Gold | NUMBER (7) | | 3c | |
| 24 | d. Platinum | NUMBER (7) | | 3d | |
| 25 | Dental | NUMBER (7) | | 4 | |

| | | | | | | |
|---|---|---|---|---|---|---|
| **Enrollment Outside of the Oregon Health Insurance Marketplace:** | | | | | |
| 26 | Individual Health Plans Total | NUMBER (7) | | | 5 | Total of fields 27 through 31 |
| 27 | a. Bronze | NUMBER (7) | | | 5a | |
| 28 | b. Silver | NUMBER (7) | | | 5b | |
| 29 | c. Gold | NUMBER (7) | | | 5c | |
| 30 | d. Platinum | NUMBER (7) | | | 5d | |
| 31 | e. Grandfathered **and Transitional** Individual Health Plans | NUMBER (7) | | | 5e | |
| 32 | Small Employer Group Health Plans Total | NUMBER (7) | | | 6 | Total of fields 33 through 37 |
| 33 | a. Bronze | NUMBER (7) | | | 6a | |
| 34 | b. Silver | NUMBER (7) | | | 6b | |
| 35 | c. Gold | NUMBER (7) | | | 6c | |
| 36 | d. Platinum | NUMBER (7) | | | 6d | |
| 37 | e. Grandfathered **and Transitional** Small Group Health Plans | NUMBER (7) | | | 6e | |
| 38 | Associations, Trusts and MEWAs | NUMBER (7) | | | 7 | Total of fields 39 through 42 |
| 39 | a. Individual | NUMBER (7) | | | 7a | Associations, Trusts, and MEWAs should be reported based on method used for rate development. |
| 40 | b. Small Employer Group | NUMBER (7) | | | 7b | |
| 41 | c. Large Employer Group | NUMBER (7) | | | 7c | |
| 42 | d. ERISA Single Group | NUMBER (7) | | | 7d | |
| 43 | Large Group Total | NUMBER (7) | | | 8 | |
| 44 | a. Discretionary Groups | NUMBER (7) | | | 8a | 8a is a subcategory of 8 and is included in field 8. |
| 45 | Student Health Benefit Plans | NUMBER (7) | Lives by Zip Code and Market & Data Files - Zip Code Record Template | | 9 | College students residing outside of Oregon and covered by an out-of-state student health benefit plan should not be included. |
| 46 | Self Insured Total | NUMBER (7) | | | 10 | Third Party Administrators: include comment on services you provide if not all services are provided. |
| 47 | a. Self Insured with Stop Loss | NUMBER (7) | | | 10a | This category is reported by <u>insurers</u> providing both administrative services and stop loss coverage to a self insured employer group. Insurers also report self insured public entities (field 48) here when stop loss coverage is provided, but only include them once in field 46. |
| 48 | b. Self Insured Oregon Public Entities | NUMBER (7) | | | 10b | Insurers may also report these covered lives in field 47 when stop loss insurance is provided. However, they should be counted only once in field 46. |
| 49 | Stop Loss Only | NUMBER (7) | | | 11 | As a placeholder, use 99999 when the employer group is located outside of Oregon, and Oregon employee zip codes are not yet available. |
| 50 | a. Oregon Public Entities | NUMBER (7) | | | 11a | Includes Oregon cities, counties, school districts for which stop loss coverage is provided. |
| 51 | Tricare/Other Federal Insurance Programs | NUMBER (7) | | | 12 | |
| 52 | Short Term Medical | NUMBER (7) | | | 13 | |

| | | | | | | |
|---|---|---|---|---|---|---|
| 53 | Medicare Advantage | NUMBER (7) | | | 14 | Please report dual eligibles under the Medicare Advantage category. |
| 54 | Medicare HMO Cost | NUMBER (7) | | | 15 | |
| 55 | Medicare Supplement | NUMBER (7) | | | 16 | |
| 56 | Medicaid | NUMBER (7) | Lives by Zip Code and Market & Data Files - Zip Code Record Template | | 17 | These lives should represent only those covered under the insurer's certificate of authority.  Please report dual eligibles under the Medicare Advantage category. |
| 57 | Dental Only | NUMBER (7) | | | 18 | This category includes enrollees covered by standalone dental plans and dental coverage offered as a rider to a medical plan |
| 58 | Vision Only | NUMBER (7) | | | 19 | This category includes enrollees covered by standalone vision plans and vision coverage offered as a rider to a medical plan |
| 59 | Total Covered Medical Lives | NUMBER (7) | | | 20 | This represents the total of the following fields: 7+14+20+26+32+38+43+45+46+49+51+52+53+54+55+56. |

**All fields must be Pipe-delimited (|) whether or not information is reported.**

**All files will require one State Record in order to upload one or more Zip Code Record**

**Examples:**

**ZIP CODE RECORD (Record 2) - 59 fields:  CHANGES include differentiation of exchange / non-exchange enrollment, adds plan type, adds association type by rating method, separates student health benefit plans, short term medical and eliminates Medicare PACE.  Spaces included for ease of reading.**

Record Type| Business Type| Business ID| Year| Quarter| Zipcode| Exch-Individual Total| Exch-Ind Bronze| Exch-Ind Silver| Exch-Ind Gold |Exch-Ind Platinum | Exch-Ind Multistate | Exch-Ind Catastrophic | Exch- Small Group Total | Exch - SG Bronze | Exch - SG Silver| Exch - SG Gold | Exch - SG Platinum | Exch - SG Multistate | Exch - OR Public Entities Total | Exch - OR PE Bronze| Exch - OR PE Silver| Exch - OR PE Gold| Exch - OR PE Platinum| Exch Dental| Non-Exch Individual Total| Non-Exch Ind Bronze| Non-Exch Ind Silver| Non-Exch Ind Gold| Non-Exch Ind Platinum| Non-Exch Ind Grandfathered| Non-Exch Small Group Total| Non-Exch SG Bronze| Non-Exch SG Silver| Non-Exch SG Gold| Non-Exch SG Platinum| Non-Exch SG Grandfathered|Associations, Trusts & MEWAs Total|  AT&M - Ind | AT&M - SG | AT&M - LG| AT&M ERISA Single Group| Large Group Total| Large Discretionary Groups| Student Health Benefit Plan | Self Insured Total| Self Insured w/Stop Loss| Self Insured OR PE|  Stop Loss Only Total| Stop Loss Only - OR PE| Tricare| Short Term Medical| Medicare Advantage| Medicare HMO|  Medicare Supp| Medicaid| Dental Only| Vision Only| Total Medical

**Entities submitting a data file will ensure one State record is included, even if the entity has no individual or small group data to report for fields 6 through 56 of the State record. The State record must include data for the first five fields. One or more Zip Code records may follow the State record. Only one record per each Oregon zip code with enrollment.  Each Zip Code record must include 59 field delineations.**

Example Zip Code records:

2|I|12345|2014|1|97201|718|101|310|98|62||147|2243|654|1191|316|82||||||1425|6150|1427|2360|1211|840|312|9881|3215|4650|1301|450|265|2916|141|320|780|1675|32757|||11850|9550|812|||||3150||1632|47517|18322|71297

2|S|123|2014|1|97702||||||||||||||||||||||||||||||1652||1652|||||||||1652

2|T|1234567890|2014|1|97201|||||||||||||||||||||||||||||||6250||432|||||||||6250