

#### ACA Data Entry Certification Overview

This Job Aid provides instructions on how to complete the ACA data entry certification in Cardinal. The ACA has provisions that are applicable depending on the size of the employer; this process certifies the number of employees and provides an opportunity to update tax data (such as the address). Contact the Office of Health Benefits (OHB) with any questions on how the Agency should use this page at <u>ohb@dhrm.virginia.gov</u>.

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## **Revision History**

Revision Date	Summary of Changes
3/1/2025	Updated the screenshots of the Search pages ( <u>Section 1</u> , after Step 1). Added reference information to the Overview of the Cardinal HCM Search Pages Job Aid.



#### **ACA Data Entry**

Step	Action
1.	Navigate to the ACA Data Entry page using the following path:
	NavBar > Menu > Benefits > Employer Information > ACA Data Entry

The ACA Data Entry Search page displays.

← Cardin	ACA Data Entry
ACA Dat Find an ∽ Search	ta Entry n Existing Value n Criteria
Enter any i	information you have and click Search. Leave fields blank for a list of all values.
	Applicable Large Employer begins with v Q Reporting Year begins with v
	Show fewer options     Include History Correct History      Search Clear
1	For more information pertaining to the Cardinal HCM Search pages, refer to the Job Aid titled "Overview of the Cardinal HCM Search Pages". This Job Aid is located on the Cardinal Website in <b>Job Aids</b> under <b>Learning</b> .
2.	Enter/select the applicable Agency in the <b>Applicable Large Employer</b> field and/or enter the applicable Reporting Year in the <b>Reporting Year</b> field.
	Applicable Large Employer begins with V
	Reporting Year begins with V
3.	Click the <b>Search</b> button.
	Search Clear



Step	Action
The ACA	Data Entry page displays.
	< Cardinal Homepage ACA Data Entry
-	ACA Data Entry
	Employer Reporting Year 2023     Federal EIN     Country USA   United States     Edit Address     Contact Employee ID     OE_JOHN   Contact Phone Number   555/555-5555     ACA Reporting Indicator:     In general, did you have 50 or more full-time equivalent employees during the prior calender year? Remember employer includes all groups using the FEIN above.   Yes:   No:
i	OHB runs a clone process to create a shell for each new Reporting Year for each Agency.
4.	Update the Agency address information using the Edit Address button as needed.
5.	Update the Agency Contact by clicking the <b>Contact Employee ID Look Up</b> icon as needed.
	Contact Employee ID
	The <b>Contact Name</b> and <b>Contact Phone Number</b> fields are read-only and will populate based on the Contact Employee ID entered/selected.
	Contact Name DOE, JOHN
	Contact Phone Number 555/555-5555
6.	Review the <b>ACA Reporting Indicator</b> checkbox option. This is set for the Agency by OHB and cannot be changed.



Step	Action
6.	Answer the "50 or more full-time equivalent employees" question by clicking the <b>Yes</b> or <b>No</b> checkbox option ( <b>Yes</b> checkbox option is selected by default).
	In general, did you have 50 or more full-time equivalent employees during the prior calender year? Remember employer includes all groups using the FEIN above.           Yes:         No:
7.	Scroll down on the page as needed.
Ente (by A i i i i i i i i i i i i i i i i i i i	the full-time employee count and the total employee count for this employer CA definition) for each month of the reporting year.
Certif Certif Sa	er Name cation Date ve Return to Search Previous in List Next in List Add Update/Display Include History
8.	Complete the <b>Total Full-Time</b> and <b>Total Employee Count</b> fields for each Month by entering in the applicable numeric value.
	Implicit       Implicit <th< td=""></th<>
9.	Once the counts are entered for the entire Reporting Year, read the Employer Certification Statement and then select the <b>I Agree</b> checkbox option.
	Employer Certification: We certify that the information provided here and the information in the Cardinal database for this employer are true, correct, and complete to the best of our knowledge, By checking the certification box below, we authorize DHRM to use this information to file ACA employer reports for IRS on our behalf.
10.	Click the <b>Save</b> button.           Save         Return to Search         Previous in List



Step	Action
	The <b>Certifier Name</b> and <b>Certification Date</b> fields will auto-populate with the certifier's information.
1	Employer Certification: We certify that the information provided here and the information in the Cardinal database for this employer are true, correct, and complete to the best of our knowledge, By checking the certification box below, we authorize DHRM to use this information to file ACA employer reports for IRS on our behalf. I Agree:
	Certification Date 2023-12-20