

Electronic Enrollment Files – FSA

Excel File

Member Detail Record

ASCII or Flat File

Column	Field Data	Format	Length	Width
A	Record Identifier - Same for all employee records	M01	001-003	3
B	Spending Account Group Number (Numeric)	XXXXXX	004-009	6
C	Employee's Social Security # (including dashes)	XXX-XX-XXXX	010-020	11
D	Employee's First Name		021-045	25
E	Employee's Middle Initial		046-046	1
F	Employee's Last Name		047-081	35
G	Filler- Blank		082-091	10
H	Employee's Home Address- Street Line 1		092-121	30
I	Employee's Home Address- Street Line 2		122-151	30
J	Employee's Home Address- City		152-181	30
K	Employee's Home Address- State		182-183	2
L	Employee's Home Address- Zip Code	XXXXXXXXXX	184-192	9
M	Filler- Blank		193-201	9
N	Spending Account Location Code (if applicable)		202-206	5
O	Department Code (optional)		207-211	5
P	Employee # (optional)		212-221	10
Q	Employee's Date of Birth	YYYYMMDD	222-229	8
R	Filler - Blank		230-231	2
S	Participant Gender (optional)	F or M	232-232	1
T	Participant Phone Number (optional)	XXX-XXX-XXXX	233-244	12
U	Filler		245-250	6

Account Detail Record

Column	Field Data	Format	Length	Width
A	Record Identifier - Same for all employee records	A01	001-003	3
B	Spending Account Group Number (Numeric)	XXXXXX	004-009	6
C	Employee's Social Security # (including dashes)	XXX-XX-XXXX	010-020	11
D	Plan Year Start Date	YYYYMMDD	021-028	8
E	Account Type	2=medical 3=dep care	029-029	1
F	Account Start Date	YYYYMMDD	030-037	8
G	Employee Termination Date or leave blank	YYYYMMDD	038-045	8
H	Employee Annual Plan Year Election	Numeric	046-057	12
I – J	Filler – Blank		058-081	24
K	Employer Plan Year Contribution Amount	Numeric	082-093	12
L-Q	Filler - Blank		094-142	49
R	Account Code		143-147	5
S	Filler – Blank		148-250	103

Frequently Asked Questions

Q:	I don't know our group number yet and or have formatting questions. How do I retrieve that information?														
A:	Please call our group leader line at 1-877-293-7041														
Q:	May I send all records on the same file?														
A:	Yes, the member detail record should precede the other records.														
Q:	When do I send a file?														
A:	Files should be sent anytime you have new additions or changes to your enrollment.														
Q:	How do I send my Enrollment Files?														
A:	Please call our group leader line for instructions for using our Secure Site or help with uploading the file directly on the Employer Portal.														
Q:	What happens if my files have discrepancies or do not load correctly?														
A:	Capital Blue Cross will contact you with further instructions.														
Q:	Do I need to enter location codes?														
A:	Location codes are required for groups who have chosen multiple locations with Further. If you have multiple locations but are unfamiliar with the codes, please call our group leader line.														
Q:	Do I need to enter account codes?														
A:	Account codes may be required. Account codes will be provided to you if required.														
Q:	Do I need to populate fields that are optional?														
A:	All optional columns may be used as filler columns and left blank filled.														
Q:	How do I put a lifestyle change on the enrollment file?														
A:	<p>When adding a lifestyle change to your file, you will need to include two account record lines. First line must include the original account start date with the original annual plan year election amount. Second line must include the lifestyle change effective date with the new annual plan year election amount.</p> <p>Example:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">A01</td> <td style="width: 10%;">100170</td> <td style="width: 15%;">123456789</td> <td style="width: 15%;">20210801</td> <td style="width: 5%;">2</td> <td style="width: 15%;">20210801</td> <td style="width: 10%;">1,000.00</td> </tr> <tr> <td>A01</td> <td>100170</td> <td>123456789</td> <td>20210801</td> <td>2</td> <td>20210801</td> <td>500.00</td> </tr> </table>	A01	100170	123456789	20210801	2	20210801	1,000.00	A01	100170	123456789	20210801	2	20210801	500.00
A01	100170	123456789	20210801	2	20210801	1,000.00									
A01	100170	123456789	20210801	2	20210801	500.00									
	<p>Tips for submitting lifestyle changes in an enrollment file</p> <ul style="list-style-type: none"> • Only put terminations in the file when the employee terminates employment • When lowering an election, it may only be lowered to the greater of either the paid in or paid out amount. For example: <ul style="list-style-type: none"> - If the employee elected \$5,000 to put into the dependent care FSA and in April they paid in a YTD total of \$1,000 and paid out \$500, the most they would only be able to lower the election to is \$1,000. - If the employee elected a medical FSA with \$2,000 and in April paid in a YTD total of \$335 but had already been paid out \$1,000, the most they would be able to lower their election to is \$1,000. 														