Common monthly code combinations for Lines 14, 15, and 16

Use this as a quick reference when reviewing Form 1095-C. Use this guide alongside the IRS instructions for tax year 2025. Determine the employee's facts separately for each calendar month, then select the codes that describe the offer, required contribution, and applicable safe harbor or relief. The examples below cover common situations; they are not a substitute for the IRS instructions for the tax year being filed or a review of the employer's plan terms and records.

The three lines answer different questions

Form line	What it reports	Practical test
14 – Offer of Coverage	The type of coverage, if any, offered for the month	What coverage was actually offered, to whom, and would it have covered every day of the month?
15 – Employee Required Contribution	Generally, the employee's monthly cost for the lowest-cost self-only option that is minimum essential coverage (MEC) and provides minimum value (MV)	Is a Line 15 amount required for the Line 14 code? Use the required contribution amount, not necessarily the premium the employee chose to pay.
16 – Safe Harbor and Other Relief	A qualifying Section 4980H safe harbor or other relief code, if one applies	Does a specific Line 16 rule apply to this employee for this month? Enter no more than one Line 16 code for a month.

The employee's election does not determine Line 14. If coverage was offered, Line 14 describes the offer whether the employee enrolled, waived, or did not respond. There is no special Line 16 code for "waived."

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Common combinations

Situation	Line 14	Line 15	Line 16
Qualifying Offer: MEC providing MV to a full-time employee for a month in which a §4980H payment could apply; at least MEC offered to spouse and dependents, and the employee contribution meets the applicable Qualifying Offer affordability threshold.	**1A**	Blank	**Enrolled: 2C** if enrolled in offered MEC for every day of the month, subject to the exceptions below. **Waived / did not enroll: 2G** only if the ALE Member used the federal poverty line safe harbor for this employee/month. Otherwise, use another applicable Series 2 code or leave blank. With code 1A, an applicable Line 16 code is optional.
MEC providing MV is offered to the employee, spouse, and dependents; spouse offer is not conditional.	**1E**	Enter the employee required contribution for the lowest-cost self-only MEC/MV coverage.	**Enrolled: 2C** if enrolled in offered MEC every day, subject to exceptions below. **Not enrolled: 2F**, **2G**, or **2H** only if used and applicable; otherwise another applicable Series 2 code or blank.
MEC providing MV is offered to the employee only, or to the employee with a different spouse/dependent tier.	**1B**, **1C**, or **1D**, based on who is offered coverage.	Enter the employee required contribution for the lowest-cost self-only MEC/MV coverage.	**Enrolled: 2C** if enrolled in offered MEC every day, subject to exceptions below. **Not enrolled: 2F**, **2G**, or **2H** only if used and applicable; otherwise another applicable Series 2 code or blank.
MEC providing MV is offered to the employee, with a conditional offer to the spouse.	**1J** if dependents are not offered; **1K** if dependents are also offered.	Enter the employee required contribution for the lowest-cost self-only MEC/MV coverage.	**Enrolled: 2C** if enrolled in offered MEC every day, subject to exceptions below. **Not enrolled: 2F**, **2G**, or **2H** only if used and applicable; otherwise another applicable Series 2 code or blank.

Common combinations (continued)

Situation	Line 14	Line 15	Line 16
MEC that does not provide MV is offered.	**1F**	Blank	**Enrolled: 2C** if enrolled in offered MEC every day; the coverage need not provide MV. Apply **2C** exceptions below. **Not enrolled:** Use another applicable Line 16 code, if one applies; otherwise leave blank.
No MEC offer was made for the month; employee is full-time and employed during the month.	**1H**	Blank	Generally blank, unless a specific relief code applies.
No offer yet because the employee is in a Section 4980H(b) Limited Non-Assessment Period (for example, a qualifying initial measurement period).	**1H**	Blank	**2D**
Employee was not full-time for the month and did not enroll in MEC, if offered.	Use the Line 14 code that describes the actual offer; use **1H** if no offer was made.	Enter the employee required contribution if the Line 14 code requires it; otherwise blank.	**2B** unless a higher-priority code applies, such as 2D or 2E.

How to read the table: Line 14 describes the offer, not the employee's election. For Lines 14–16, assess each calendar month independently. The offer code and Line 15 amount depend on the actual plan design and eligibility tier; Line 16 depends on enrollment, employment/full-time status, any LNAP or other relief, and the affordability method actually used.

* **Affordability safe harbors:** 2F is the Form W-2 safe harbor, 2G is the Federal Poverty Line safe harbor, and 2H is the Rate of Pay safe harbor. Use only the safe harbor the employer actually applies for the employee and month. If 2F is used for an employee, it applies to all months of the year for which coverage is offered. Do not report 2F, 2G, or 2H for a month when the employer does not meet the applicable 95% offer condition.

Common combinations (continued)

Situation	Line 14	Line 15	Line 16
Employee was not employed on any day of the month.	**1H**	Blank	**2A**
Full-time employee terminates during the month; the offer or coverage ends before month-end solely because of termination and would otherwise have continued through month-end.	**1H**	Blank	**2B** when the termination rule applies.
Special self-insured coverage reporting for an individual who was not full-time in any month of the year (or was not an employee in any month) and enrolled for at least one month.	**1G** for all 12 months	Blank	Blank
ICHRA offer	The applicable code from **1L–1U**. Use the detailed ICHRA table below.	Required for applicable affordable ICHRA codes; generally blank for **1R** and **1S**.	**Enrolled: 2C** if enrolled in offered MEC every day, subject to exceptions below. **Not enrolled:** Use another applicable status code; **2F**, **2G**, or **2H** only if the safe harbor was used and applies; otherwise blank.

**** Blank Line 16:** IRS instructions say to leave Line 16 blank when no Series 2 code applies. With 1A, Line 16 is optional; under the Qualifying Offer reporting method, no Line 16 entry is required. Separately, some filing practitioners choose to report applicable enrollment or safe-harbor information to clarify a filing. That is a practice preference, not a general IRS requirement to enter an "enrolled" or "waived" code. Use 2C only when enrolled in offered MEC for every day of the month, subject to the exceptions described below. Use 2F, 2G, or 2H only when the corresponding safe harbor applies. Retain records of the offer and election.

COBRA situations

COBRA reporting depends on whether the person is a **former employee** or remains an **active employee** who lost eligibility, such as after a reduction in hours. Do not treat all COBRA offers the same way.

Situation	Line 14	Line 15	Line 16
Former employee is offered COBRA because employment ended; reporting months after the termination month	**1H**	Blank	**2A**, whether or not the former employee enrolls in COBRA
Month in which a full-time employee terminates and the offer or coverage ends before month-end solely because of termination	**1H**	Blank	**2B** if the employee was full-time and the offer or coverage ended before month-end solely because of termination, and would otherwise have continued through month-end.
Active employee loses eligibility after a reduction in hours and receives an offer of COBRA or similar continuation coverage	Use the Line 14 code that describes the actual coverage offer for that month and who receives it. For example, **1B** if only the employee is offered MEC/MV; use the appropriate broader-tier code if spouse/dependents are also offered coverage.	Enter the required contribution if the Line 14 code requires it.	**Enrolled: 2C** if enrolled in offered MEC every day; use **2E** instead if multiemployer relief applies. **Not enrolled:** Use the applicable status code (for example, **2D** for LNAP or **2B** if not full-time and not enrolled in MEC). **2F**, **2G**, or **2H** only if used and applicable; otherwise blank.
Former employee receives post-employment coverage that is not COBRA, such as retiree coverage beginning after termination	**1H**	Blank	**2A** for months the individual is not employed on any day

Part III reminder: If the employer's plan is self-insured, report actual enrollment in Part III when required, including COBRA enrollment. For months after employment ends, Line 14/16 treatment for a former employee may be 1H/2A even when COBRA coverage is reported in Part III. Do not use 2A for the month of termination; use 2B when the employee was full-time and the offer or coverage ended before month-end solely because of termination. Apply the current-year instructions to the exact event and dates.

Union and multiemployer plan situations

Being a union employee does not, by itself, change the 1095-C codes or remove the employee from reporting. First determine whether the coverage is offered under the employer's own plan or whether the employer may use the IRS multiemployer interim rule relief.

Situation	Line 14	Line 15	Line 16
Union employee is offered coverage under the employer's own health plan	Use the ordinary offer code based on the coverage actually offered (for example, **1E** for MEC/MV offered to employee, spouse, and dependents).	Enter the employee required contribution when the Line 14 code requires it.	**Enrolled: 2C** if enrolled in offered MEC every day, subject to exceptions below. **Not enrolled: 2F**, **2G**, or **2H** only if used and applicable; otherwise another applicable Line 16 code or blank.
For 2025, the employer is required by a collective bargaining or related participation agreement to contribute for the employee to a multiemployer plan that offers eligible individuals affordable MV coverage and dependent coverage.	**1H** under the 2025 reporting instructions	Blank	**2E** for each month the multiemployer interim rule relief applies; 2E takes precedence even if the employee enrolled.
Union employee is not covered by the multiemployer relief and no offer is made for a month	**1H**	Blank	Apply the employee's actual monthly status: **2D** for an applicable LNAP; **2B** if not full-time and not enrolled in MEC; **2A** if not employed on any day; otherwise blank if no Line 16 code applies.

The multiemployer relief has specific requirements; union status or a union health plan alone is not enough. The tax year 2025 instructions direct employers using the relief to report **1H/2E**. They also state that multiemployer reporting may differ for 2026 and later years, so confirm the instructions for the year being filed. The employer generally does not complete Part III of Form 1095-C for coverage under a multiemployer plan; confirm which entity is responsible for reporting enrollment.

Line 14: common offer codes

These codes describe the coverage offered. For codes that include spouse or dependent coverage, report who was eligible for the offer, not whether the employee actually had a spouse or dependents.

Code	Plain-language meaning
1A	Qualifying Offer: MEC providing MV to a full-time employee for a month in which a §4980H payment could apply, with at least MEC offered to spouse and dependents and the employee contribution at or below the applicable Qualifying Offer threshold.
1B	MEC providing MV offered to the employee only.
1C	MEC providing MV offered to the employee and at least MEC to dependents, but not spouse.
1D	MEC providing MV offered to the employee and at least MEC to spouse, but not dependents. Not for a conditional spousal offer.
1E	MEC providing MV offered to the employee and at least MEC to spouse and dependents. Not for a conditional spousal offer.
1F	Coverage offered that does not provide MV.
1G	Special all-year reporting code for certain individuals enrolled in self-insured coverage who were not full-time employees in any month of the year, or were not employees in any month. It applies for all 12 months or not at all.
1H	No offer of coverage, or an offer that is not MEC.
1J / 1K	MEC providing MV to employee with a conditional offer of MEC to spouse; **1K** also includes an offer of at least MEC to dependents.
1L–1U	ICHRA offer codes. See the code-by-code table below.

Line 14 ICHRA codes

Code	ICHRA offer and affordability basis
1L	Offered to employee only; affordability determined using the employee's primary residence ZIP code.
1M	Offered to employee and dependents, not spouse; affordability determined using the employee's primary residence ZIP code.
1N	Offered to employee, spouse, and dependents; affordability determined using the employee's primary residence ZIP code.
1O	Offered to employee only; affordability determined using the employee's primary employment-site ZIP code safe harbor.
1P	Offered to employee and dependents, not spouse; affordability determined using the employee's primary employment-site ZIP code safe harbor.
1Q	Offered to employee, spouse, and dependents; affordability determined using the employee's primary employment-site ZIP code safe harbor.
1R	An ICHRA that is **not affordable** was offered to the employee, with or without an offer to the spouse and/or dependents.
1S	An ICHRA was offered to an individual who was **not a full-time employee**.
1T	Offered to employee and spouse, not dependents; affordability determined using the employee's primary residence ZIP code.
1U	Offered to employee and spouse, not dependents; affordability determined using the employee's primary employment-site ZIP code safe harbor.

For codes 1L–1Q, 1T, and 1U, Line 15 generally reports the employee required contribution calculated under the applicable ICHRA affordability method and location basis. Line 17 reports the ZIP code used to identify the lowest-cost silver plan: the employee's residence ZIP code for 1L, 1M, 1N, or 1T, or the primary employment-site ZIP code for 1O, 1P, 1Q, or 1U. The required contribution may differ from the ICHRA allowance or amount reimbursed. Follow the 2025 instructions for the calculation.

Line 16: common safe harbor and relief codes

Code	Plain-language meaning
2A	Employee was not employed on any day of the month.
2B	Employee was not full-time for the month and did not enroll in MEC, if offered; also used for certain full-time employees whose offer/coverage ended midmonth solely because employment terminated.
2C	Employee enrolled in offered minimum essential coverage (MEC) for every day of the month. Generally takes precedence over other Line 16 codes, except multiemployer relief (2E) and terminated-employee COBRA or post-employment coverage (2A). Do not use 2C with code 1G or when enrollment is in coverage that is not MEC.
2D	Employee was in a Section 4980H(b) Limited Non-Assessment Period. For an initial measurement period, use 2D rather than 2B.
2E	Multiemployer interim rule relief applies for the employee and month. This code takes precedence when the relief applies.
2F	Employer used the Form W-2 affordability safe harbor for the employee. If used for an employee, it must be used for all months of the year in which coverage was offered.
2G	Employer used the Federal Poverty Line affordability safe harbor for the employee/month.
2H	Employer used the Rate of Pay affordability safe harbor for the employee/month.

If no Line 16 code applies, leave Line 16 blank. A blank is not automatically an error. Conversely, do not fill Line 16 with a code simply because the employee waived coverage.

Line 15 quick check

Under the tax year 2025 IRS instructions, Line 15 is completed for Line 14 codes **1B, 1C, 1D, 1E, 1J, 1K, and the applicable affordable ICHRA codes (1L–1Q, 1T, or 1U)**. The amount is generally the employee's share of the lowest-cost monthly self-only MEC option that provides MV. Enter **0.00** when the required contribution is zero. Line 15 is generally blank for **1A, 1F, 1G, 1H, 1R, and 1S**.

The amount may differ from the employee's actual deduction if the employee elected a more expensive option or if other arrangements affect the required contribution. Apply the current-year IRS instructions to determine the amount, including the treatment of opt-out payments, HRA contributions, wellness incentives, and non-calendar-year plan changes.

Important guardrails

- **Code by calendar month.** Line 14 must have a code for every month, even when the employee was not employed for part or all of the year. Line 15 and Line 16 depend on the facts and code rules for each month.
- **An offer generally must provide coverage for every day of the month to count as an offer for Line 14.** If employment ends midmonth and coverage would not continue through month-end, Line 14 is 1H; Line 16 may be 2B when the employee was full-time and the offer or coverage would have continued through month-end but for the termination. Midmonth hires and losses of eligibility can also affect the monthly code result.
- **Line 14 describes the offer, not enrollment.** Do not replace an offer code with 1H just because the employee waived coverage.
- 2C is not a general "covered sometime this month" code. It requires enrollment in offered MEC for every day of the month and is subject to these exceptions: use 2E when multiemployer interim relief applies; use 2A for COBRA or other post-employment coverage in months after termination; do not use 2C with 1G or for coverage that is not MEC. Do not use 2A for the month of termination; use 2B when the employee was full-time and the offer or coverage ended before month-end solely because of termination. Part III coverage reporting follows a different rule and can report coverage when the person was covered for at least one day in the month.
- **Affordability safe-harbor codes have a 95% offer condition.** Do not enter 2F, 2G, or 2H for a month when the ALE Member did not offer MEC to at least 95% of its full-time employees and their dependents, subject to the all-but-five rule for Form 1094-C, Part III, column (a). Under that rule, the ALE Member may report meeting the 95% threshold if it offered MEC to all but five full-time employees and their dependents, and five is greater than 5% of the ALE Member's full-time employee count. This reporting rule does not change employee-level Line 14 codes.
- **The 98% Offer Method is a separate Form 1094-C reporting method.** It is not a 1095-C code combination.
- **Self-insured enrollment is reported separately in Part III.** Do not use Part III enrollment months to infer the Line 14 offer or Line 16 code.
- **ICHRA offers use special Line 14 codes and may require Line 17 ZIP code reporting.** Do not use the standard group-plan combinations without checking ICHRA rules.
- **Use the instructions for the tax year being filed.** Form fields, indexed affordability percentages, and special reporting rules can change.

How to review a month

- Confirm the employee's ACA full-time status and whether an LNAP or other relief period applies.
- Confirm the actual offer, eligibility tier, effective dates, and whether it would cover every day of the month.
- Identify the plan's MEC and MV status, and determine the correct offer code from who was offered coverage.
- Calculate the Line 15 required contribution when the Line 14 code calls for it.
- Apply Line 16 precedence and safe harbor rules. If no code applies, leave the line blank.
- Compare the result with enrollment records and, for self-insured plans, complete Part III separately.

Official references

- IRS Instructions for Forms 1094-C and 1095-C (2025)
- IRS Questions and Answers about Information Reporting on Forms 1094-C and 1095-C
- IRS Questions and Answers on Employer Shared Responsibility Provisions

ACA 360 educational reference. This guide highlights common reporting patterns and does not determine an employer's filing result. Verify each employee-month against the applicable tax-year instructions, plan terms, payroll and eligibility records, and documented offer and enrollment evidence. For unusual situations, consult a qualified ACA reporting or tax professional.