Reconciliation of the Cost-Sharing Reduction Component of Advance Payments - Data File Error Code List (For Benefit Year 2017 and Benefit Year 2016 Restatements)			
Error Code Identifier	Error Code Description	Does Error Cause File Rejection?	Detailed Error Code Description
CSRIFIL01	Field count is not 28 or 17	Y	This is a file format issue. The data file will be rejected if this error is triggered. If you are unable to resolve this error, please email csrreconquestions@cms.hhs.gov with the subject: "[HIOSID_ErrorCode] [Message Description]", for example, "[12345_CSRIFIL01] File Format Matching still throwing error".
CSRIFIL02	File does not start with 01 or 02 or 03	Y	This is a file format issue. The data file will be rejected if this error is triggered. If you are unable to resolve this error, please email csrreconquestions@cms.hhs.gov with the subject: "[HIOSID_ErrorCode] [Message Description]".
CSRIFIL03	No 01 Records in the file	Y	This is a file format issue. The data file will be rejected if this error is triggered. If you are unable to resolve this error, please email csrreconquestions@cms.hhs.gov with the subject: "[HIOSID_ErrorCode] [Message Description]".
CSRIFIL05	No 03 Records in the file	Y	This is a file format issue. The data file will be rejected if this error is triggered. If you are unable to resolve this error, please email csrreconquestions@cms.hhs.gov with the subject: "[HIOSID_ErrorCode] [Message Description]".
CSRIFIL06	01 - Trading Partner ID does not meet format requirements	Y	The data element does not meet the format requirements. The data element is a text field that must be a minimum of 5 characters and a maximum of 10 characters. CMS will reject the file if this error is triggered. If you are unable to resolve this error, please email csrreconquestions@cms.hhs.gov with the subject: "[HIOSID_ErrorCode] [Message Description]".
CSRIFIL07	01 - TPID and HIOSID not valid combination	Y	CMS validates the TPID and HIOS ID combination using reference data. CMS will reject the file if this error is triggered. If you are unable to resolve this error, please email csrreconquestions@cms.hhs.gov with the subject: "[HIOSID_ErrorCode] [Message Description]".
CSRIFIL08	01 - Issuer State Code does not meet format requirements	N	The data element does not meet the format requirements. The data element is a text field that must be 2 characters in length. CMS will accept and process the file, and send an error in the error report, if this error is triggered.
CSRIFIL09	01 - Invalid HIOS ID	Y	CMS validates the existence of the HIOS ID in reference data based on the benefit year. CMS will reject the file is if this error is triggered. If you are unable to resolve this error, please email csrreconquestions@cms.hhs.gov with the subject: "[HIOSID_ErrorCode] [Message Description]".
CSRIFIL10	01 - HIOS ID does not meet format requirements	Y	The data element does not meet the format requirements. The data element is a numeric field that must be 5 digits in length. The data file will be rejected if this error is triggered. CMS will reject the file if this error is triggered. If you are unable to resolve this error, please email csrreconquestions@cms.hhs.gov with the subject: "[HIOSID_ErrorCode] [Message Description]".
CSRIFIL13	01 - Invalid Benefit Year	Y	Benefit Year should be 2016 or 2017. CMS will reject the file if this error is triggered.
CSRIFIL14	01 - Total Actual CSR Amount does not meet format requirements	Y	The data element does not meet the format requirements. The data element is a numeric field that must be a minimum of 4 and a maximum of 12 digits. The precision is restricted to 2 decimal places

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			("0.00"). CMS will reject the file if this error is triggered. Note: Treatment of Negative amounts are allowable.
CSRIFIL17	01 - Invalid Reconciliation Methodology	Y	The methodologies that are accepted are STANDARD, SIMPLIFIED, SIMPLIFIED AV. This field is case insensitive. Issuers that used the simplified methodology for the 2016 benefit year may continue to use the simplified methodology if the issuer is restating benefit year 2016. Once an issuer uses the standard methodology for a benefit year, they cannot switch methodologies (except in the case of mergers/acquisitions). Issuers must use the standard methodology for reconciliation of benefit year 2017 and beyond. Refer to the Manual for Reconciliation of the Cost-Sharing Reduction Component of Advance Payments for Benefit Year 2017, available on the CCIIO website, if you have any questions. CMS will reject the file if this error is triggered.
CSRIFIL18	01 - Invalid Acquisition	N	The accepted values for this field are Y or N. This field is case insensitive. CMS validates again CMS records of acquisitions that have occurred during the benefit year. CMS will accept and process the file, and send an error in the error report, if this error is triggered.
CSRIFIL19	01 - Acquisition Effective Dates does not meet format requirements	N	The data element does not meet the format requirements. The data element is a numeric field with a minimum of 0 and maximum of 8 digits, for example in the MMDDYYYY format. CMS will accept and process the file, and send an error in the error report, if this error is triggered.
CSRIFIL20	01 - Acquired or Acquiring Issuers does not meet format requirements	N	The data element does not meet the format requirements. The issuer should enter the HIOS ID of the acquired or acquiring issuer. The data element is a text field with a minimum of 0 and maximum of 5 characters. CMS will accept and process the file, and send an error in the error report, if this error is triggered.
CSRIFIL21	01 - Invalid Merger	N	The accepted values for this field are Y or N. This field is case insensitive. CMS validates against CMS records of mergers that have occurred during the benefit year. CMS will accept and process the file, and send an error in the error report, if this error is triggered.
CSRIFIL22	01 - Merger Issuer does not meet format requirements	N	The data element does not meet the format requirements. The issuer should enter the HIOS ID of the other issuer involved in the merger. The data element is a text field with a minimum of 0 and a maximum of 5 characters. CMS will accept and process the file, and send an error in the error report, if this error is triggered.
CSRIFIL23	01 - Merger Effective Dates does not meet format requirements	N	The data element does not meet the format requirements. The data element is a numeric field with a minimum of 0 and maximum of 8 digits, in the format of MMDDYYYY. CMS will accept and process the file, and send an error in the error report, if this error is triggered.
CSRIFIL24	01 - Total Number Of CSR Variant Plans Per HIOS ID does not meet format requirements	Y	The data element does not meet the format requirements. The data element must be an integer with a minimum of 1 and maximum of 100 digits. CMS will reject the file if this error is triggered.

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CSRIFIL69	01 - Total Number of Exchange Subscriber IDs does not equal number of Policy Detail (03) Records	Y	The number of Exchange Subscriber IDs in CSR variant plans for this HIOS ID must equal the number of Policy detail (03) records. The data element is an integer with a minimum of 1 and a maximum of 100 digits. CMS will reject the file if this error is triggered.
CSRIFIL68	01 - Not Matching the Total CSR Amount in the Issuer Summary (01) with CSR amounts in the policy detail level (03)	N	The sum of the CSR Provided in the Policy Detail (03) records does not match the Total Actual CSR Amount at the Issuer (01) record level. The sum of the CSR Provided in the Policy Detail (03) records should equal the Total Actual CSR Amount at the Issuer (01) record level. CMS will accept and process the file but send an error in the error report, if this error is triggered.
CSRIFIL70	01 - Total Number of CSR variant plans Per HIOS ID must match the count of unique CSR variant plans in Policy Detail (03) records	Y	The count of plans must match the number of CSR variant plans in Policy Detail (03) records for the HIOS ID.
CSRIFIL50*	03 - Invalid Exchange Assigned Subscriber ID Lookup (FEPS)	Y*	CMS validates against the FEPS enrollment data for Federally-Facilitated Marketplace plans only (include leading zeroes if applicable). CMS will accept and process the file but send an error in the error report, if this error is triggered for less than 50% of the Policy Detail (03) records in the file. If 50% or more of the Policy Detail (03) records in the file have an invalid Exchange Assigned Subscriber ID, CMS will reject the file.
CSRIFIL54*	03 - Invalid Self Only Other than self only; The values entered were not S or O.	Y*	Input is required if the issuer elected Simplified method or Simplified AV as their Reconciliation Methodology (applicable only for benefit year 2016 restatements). The values entered must be S or O. This field is case insensitive. CMS will accept and process the file but send an error in the error report, if this error is triggered for less than 5% of the Policy Detail (03) records in the file. If 5% or more of the Policy Detail (03) records in the file have an invalid Exchange Assigned Subscriber ID, CMS will reject the file.
CSRIFIL55*	03 - Invalid Annual Limitation On Cost Sharing For The Standard Plan	Y*	Input is required if the issuer elected the Simplified or Simplified Actuarial Value AV method as their Reconciliation Methodology (applicable only for benefit year 2016 restatements). The data element is a numeric field with a minimum of 4 and maximum of 12 digits. The precision is restricted to 2 decimal points (0.00). If less than 50% of the Policy Detail (03) records fail this validation, CMS will accept and process the file but send an error in the error report. If 50% or more of Policy Detail (03) records fail this validation, CMS will reject the file.
CSRIFIL56*	03 - Invalid Actuarial Value of the Standard Plan	Y*	Input is required if the issuer elected Simplified AV method as their Reconciliation Methodology (applicable only for benefit year 2016 restatements). The data element is a numeric field with a minimum of 4 and maximum of 12 digits. The precision is restricted to 2 decimal points (0.00). If less than 50% of Policy Detail (03) records fail this validation, CMS will accept and process the file

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			but send an error in the error report. If 50% or more of Policy Detail (03) records fail this validation, CMS will reject the file.
CSRIFIL57*	03 - Invalid Value in Total Allowed Costs For EHB	Y*	The data element does not meet the format requirements. The data element is a numeric field with a minimum of 4 and maximum of 12 digits. The precision is restricted to 2 decimal points (0.00). If less than 50% of Policy Detail (03) records fail this validation, CMS will accept and process the file but send an error in the error report. If 50% or more of Policy Detail (03) records fail this validation, CMS will reject the file.
CSRIFIL59*	03 - Invalid Value in Amount the Issuer Paid	Y*	The data element does not meet the format requirements. The data element is a numeric field with a minimum of 4 and maximum of 12 digits. The precision is restricted to 2 decimal points 0.00. If less than 20% of Policy Detail (03) records fail this validation, CMS will accept and process the file but send an error in the error report. If 20% or more of Policy Detail (03) records fail this validation, CMS will reject the file.
CSRIFIL61*	03 - Invalid Value in Amount the Enrollee(s) Paid	Y*	The data element does not meet the format requirements. The data element is a numeric field with a minimum of 4 and maximum of 12 digits. The precision is restricted to 2 decimal points 0.00. If less than 20% of Policy Detail (03) records fail this validation, CMS will accept and process the file but send an error in the error report. If 20% or more of Policy Detail (03) records fail this validation, CMS will reject the file.
CSRIFIL63*	03 - Invalid Value in Amount the enrollee(s) would have paid under the standard plan.	Y*	The data element does not meet the format requirements. The data element is a numeric field with a minimum of 4 and maximum of 12 digits. The precision is restricted to 2 decimal points 0.00. If less than 20% of Policy Detail (03) records fail this validation, CMS will accept and process the file but send an error in the error report. If 20% or more of Policy Detail (03) records fail this validation, CMS will reject the file.
CSRIFIL64*	03 - Invalid Value in CSR provided	Y*	The data element does not meet the format requirements. The data element must be in the format 0.00. Negative amounts are permitted. If less than 5% of Policy Detail (03) records fail this validation, CMS will accept and process the file but send an error in the error report. If 5% or more of Policy Detail (03) records fail this validation, CMS will reject the file.
CSRIFIL67*	03 - Invalid QHPID, plan identifier provided by the issuer for a specific coverage year.	Y*	QHP ID must be a valid plan identifier provided by the issuer for a specific coverage year. CMS only recognizes QHP IDs that had enrollments for the applicable benefit year. If less than 20% of Policy Detail (03) records fail this validation, CMS will accept and process the file but send an error in the error report. If 20% or more of Policy Detail (03) records fail this validation, CMS will reject the file.
CSRIFIL71	03 - Exchange-assigned Policy Start Date does not meet format requirements	N	The data element does not meet the format requirements. The data element is a numeric field that must be 8 digits in length, for example, in the format of MMDDYYYY. CMS will accept and process the file, and send an error in the error report, if this error is triggered.

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	03 - Exchange-assigned Policy End Date does not meet format requirements		The data element does not meet the format requirements. The data element is a numeric field that must be 8 digits in length, for example, in the format of MMDDYYYY. CMS will accept and process the file, and send an error in the error report, if this error is triggered.
NOTES			
1. "Y" = CMS will reject the entire file if the validation fails.			

^{*} These error codes trigger a file rejection if a percentage of records over a certain threshold fail the validation criteria, as described in column D.

^{2. &}quot;N" = CMS will not reject the entire file if the validation fails, rather CMS will accept and process the issuer's submission. The error code is a warning to the issuer about potential discrepancies in the data submitted.

^{3.} Error codes CSRIFIL50 and CSRIFIL67 will only cause a file rejection if a percentage of Policy Detail (03) records over a certain threshold (described above) within the file fail the validation. Regardless of whether CMS rejects the file, CMS will not count CSR Provided for Policy Detail (03) records that have an invalid Exchange Assigned Subscriber ID and/or invalid QHP ID.