**User Guide**

**2020 Form 5500 Group Health Plans Research File**

**October 2022**

Department of Labor

Employee Benefits Security Administration

Office of Policy and Research

Prepared by Actuarial Research Corporation (ARC) under Contract GS-00F-090CA

**Table of Contents**

[I. Introduction 2](#_Toc104900442)

[II. Selection of Plans for the Form 5500 Group Health Plans Research File 4](#_Toc104900443)

[III. Determining the Method of Plan Funding 7](#_Toc104900444)

[IV. Weighting 11](#_Toc104900445)

[V. Editing 13](#_Toc104900446)

[VI. Generated Variables 17](#_Toc104900447)

[VII. Codebook 25](#_Toc104900448)

[VIII. Contents of the 2020 Form 5500 Group Health Plans Research File Package 43](#_Toc104900449)

# I. Introduction

The Employee Retirement Income Security Act of 1974, as amended (“ERISA”), and the Internal Revenue Code of 1986, as amended (“the Code”), establish certain reporting and disclosure requirements for private sector employee benefit plans. In 1975, the Department of Labor (the “Department”), the Internal Revenue Service, and the Pension Benefit Guaranty Corporation jointly developed the Form 5500 Series to allow employers who sponsor an employee benefit plan for their employees to satisfy the annual reporting requirements under Title I and Title IV of ERISA and under the Code. Today, filing the Form 5500 together with any required Schedules and Attachments (the “Form 5500”) generally satisfies these annual reporting requirements.[[1]](#footnote-2)

The Form 5500 Annual Return/Report is an important source of information on ERISA-covered, private sector employer-sponsored benefit plans and their operation, funding, assets, and investments. The majority of Form 5500 Annual Return/Reports are filed for employee pension benefit plans. Welfare benefit plans (which include plans providing benefits such as medical, dental, life insurance, severance pay, disability, etc.) are required to file a Form 5500, with certain exceptions tied to plans’ size, funding arrangement, and sector. These exceptions are listed below:[[2]](#footnote-3)

* Welfare plans with fewer than 100 participants as of the beginning of the plan year (“small” plans) that are unfunded, fully insured, or a combination of insured and unfunded;[[3]](#footnote-4)
* Welfare plans maintained outside the U.S. that serve mostly nonresident aliens;
* Governmental plans;
* Unfunded or insured welfare plans maintained for a select group of management or highly compensated employees only;
* Plans maintained to comply with workers’ compensation, unemployment compensation, or disability insurance laws only;
* Welfare benefit plans that participate in a group insurance arrangement that files a Form 5500 on behalf of the participating plans;
* Apprenticeship or training plans meeting certain conditions;
* Certain unfunded welfare benefit plans financed by dues;
* Church plans;
* A welfare benefit plan maintained solely for (1) an individual or an individual and his or her spouse, who wholly own a trade or business, whether incorporated or unincorporated, or (2) partners or the partners and partners’ spouses in a partnership.

A small welfare plan that receives employee (or former employee) contributions during the plan year and does not use the contributions to pay insurance premiums or uses a trust or separately maintained fund to hold plan assets or act as a conduit for the transfer of plan assets during the year is required to file. An exception to this rule is a small plan associated with a cafeteria plan under Internal Revenue Code section 125 with employee contributions that are used to pay benefits instead of insurance premiums. This type of plan may be treated for annual reporting purposes as an unfunded welfare plan if it meets certain Department requirements.[[4]](#footnote-5)

The *Form 5500 Group Health Plans Research File* (GHP Research File) is an edited dataset consisting of all employer-sponsored private sector welfare plans that are required to file a Form 5500 Annual Return/Report and offered a health benefit to the covered participants.[[5]](#footnote-6) Each year, the Department’s Employee Benefits Security Administration’s (EBSA) Office of Policy and Research (OPR) creates this dataset in order to analyze the group health plans market. Most importantly, the *GHP Research File* underlies the *Group Health Plans Report* (GHP Report), which analyzes aggregate statistics on the plan, participant, and financial characteristics of private sector employer-sponsored group health plans published by EBSA. EBSA also publishes a zipped file that contains the *GHP Report,* the SAS Version 9 *GHP Research File* data files, accompanying SAS tabulation programs, a SAS formats program, and documentation. This package of zipped files is available at

<https://www.dol.gov/agencies/ebsa/researchers/data/group-health-plan-data>.

# II. Selection of Plans for the Form 5500 Group Health Plans Research File

Prior to January 1, 2010, filings received on paper were scanned; each month these electronic images were loaded into an Oracle relational database called the EFAST Master File (EMF). The EMF consists of all information from the Form 5500 Series, as well as some generated summary information, for each plan year. EBSA received a subset of the EMF that primarily included the Form 5500 Annual Return/Report, schedules and attachments for retirement plans, welfare plans, and direct filing entities[[6]](#footnote-7) (DFEs). This subset of tables, known as the Electronic Disclosure System (EDS), was the source of unedited data for the *GHP Research File*. The subset excluded such items as Form 5500-EZ filings and IRS entity information.

Beginning January 1, 2010, DOL moved to a new filing system called EFAST2, under which all filings are required to be submitted electronically. Filers can prepare and submit the Form 5500 Annual Return/Report using EFAST2-approved third-party software or using IFILE, a free limited-function web application. As a result, all Series data is now directly available as tables under the EFAST2 system. Any additional attachments, such as the report of auditors, are available only as PDF images.

The plan filings making up the *GHP Research File* all have indicated that the plan offers a health benefit. The following plan types were excluded from this file:

* “Voluntary” filing plans (plans which are not required to file the Form 5500),
* Plans that report zero participants as of the beginning and the end of the year,
* Plans that report health benefit features on Part II, Line 8b of the Form 5500 or Part VI, Line 9b of the Form 5500-SF but appear not to actually provide health benefits based on plan and sponsor name,
* DFEs other than group insurance arrangements (plans that check the box for “This return/report is for a DFE” on Part I, Line A of Form 5500 and specify type as M, C, P, or E), and
* Duplicate filings or filings that were subsequently amended (only the “best” filing is retained).

## Voluntary filing plans

“Voluntary” filing plans are those health plans that have filed a Form 5500 and have fewer than 100 participants at the beginning of the year and do not provide any financial information (indication of a trust). Lack of financial information is determined when neither the Schedule H nor I is filed, or key financial fields on the Schedule H, I, or Form 5500-SF are blank. These plans fall in the insured or unfunded category as outlined in the Instructions for Form 5500. The same logic is used for filers of the Form 5500-SF.

## Plans that report health benefit features on Part II, Line 8b of the Form 5500 or Part VI, Line 9b of the Form 5500-SF but appear not to actually provide health benefits based on plan and sponsor name

For the purposes of the *GHP* *Research* File, plans that report health benefit features are determined not to actually provide health benefits if all of the following criteria are met:

* Plan name does *not* contain “HEALTH” or “MEDICAL” or “HOSPITAL” or “CRITICAL ILLNESS” or “INDEMNITY” or “SURGICAL” or “WELFARE”
* Plan name contains any of the following:
  + “DISABILITY” or “DISAB”
  + “LIFE INSURANCE” or “LIFE INS” or “GROUP LIFE”
  + “AD&D” or “AD & D” or “AD AND D” or “ACCIDENT”
  + “TRAVEL”
* Plan name (but *not* the sponsor name) contains any of the following:
  + “DISABILITY” or “DISAB”
  + “LIFE INSURANCE” or “LIFE INS” or “GROUP LIFE”
  + “TRAVEL”

## Group Insurance Arrangements (GIAs)

For Form 5500 reporting purposes, a “group insurance arrangement” (GIA) is a type of multiple-employer welfare arrangement that provides benefits to the employees of two or more unaffiliated employers (not in connection with a multiemployer plan or a collectively bargained multiple-employer plan), fully insures one or more welfare plans of each participating employer, uses a trust or other entity as the holder of the insurance contracts, uses a trust as the conduit for payment of premiums to the insurance company, and files a Form 5500 on behalf of the arrangement. If the arrangement meets all of these conditions, each welfare benefit plan that is part of a GIA is exempt from the requirement to file a Form 5500. (See 29 CFR 2520.104-43.)

GIAs often exist for the provision of health benefits; however, they are not technically group health plans. For this reason, the *GHP Research File* package also includes a data set consisting of all group insurance arrangements that filed a Form 5500 Annual Return/Report and offered a health benefit[[7]](#footnote-8) to the covered participants. Since GIAs are not themselves group health plans, statistics for GIAs are not included in the tables for group health plans in Sections A and B of the *GHP Report*. Instead, an appendix presents selected statistics for GIAs that filed the Form 5500 and indicated providing health benefits.

Selected data for GIAs that filed a Form 5500 with plan year ending in 2020 and indicated providing health benefits are also available as a supplemental data set accompanying the *2020 GHP Report*. Complete data for GIAs filing a Form 5500 in prior years can be accessed from Form 5500 Datasets made available on DOL's website:

<https://www.dol.gov/agencies/ebsa/about-ebsa/our-activities/public-disclosure/foia/form-5500-datasets>.

Summarized data shown in Table 1 of Appendix A2 to the *2020 GHP Report* may differ from results obtained through full Form 5500 Datasets. This may be due to amended or late filings in the full Form 5500 Datasets or adjustments made to the supplemental data set.

# III. Determining the Method of Plan Funding

A major characteristic of group health plans is the method the plan uses to pay for the benefits offered. Information from the 2020 Form 5500 on the plans’ funding arrangements is used, together with information from Schedule A “Insurance Information,” Schedule H “Financial Information,” and Schedule I “Financial Information – Small Plan” to categorize the plans as being either fully insured, self-insured, or a mixture of the two (mixed-insured).

## Identifying Form 5500 filings for health benefit plans that contain information on the method of plan funding:

1. Select all unique Form 5500 filings from 2020 EFAST2 database that have a plan year ending date in 2020.
2. Select all Form 5500 filings that indicate the plan contains a health benefit; i.e., the filing lists “4A” on Part II, Line 8b of the Form 5500 or Part VI, Line 9b of the Form 5500-SF.

## Characterize Form 5500 filings as self-insured, mixed-insured, or fully insured

For purposes of this report, Form 5500 health plans are categorized as being self-insured, fully insured, or mixed-insured. The Department used information from the 2020 Form 5500 on plans’ funding arrangements, together with information from Schedule A “Insurance Information,” Schedule H “Financial Information,” and Schedule I “Financial Information - Small Plan” to categorize the funding mechanism of plans. In some cases, data reported by plans are incomplete or internally inconsistent, which leads to ambiguity in determining the plan funding mechanism. Given these limitations, the classification used in this report is only meant to be used for statistical purposes and should not be interpreted as a legal definition.

The algorithm for classifying plans by funding mechanism relies heavily on two concepts: evidence of an external health insurance policy or contract (on a Schedule A) and evidence of a plan trust (on a Schedule H or I).

1. *Evidence of Health Insurance.* Schedules A filed as part of the Form 5500 that specify “Health (other than dental or vision)” benefits or reflect an “HMO contract,” “PPO contract,” or “Indemnity contract” are considered evidence of health insurance. For classification purposes, Schedule A insurance contracts are not considered health insurance policies or contracts if the per capita annualized premium amount reported is less than 30% of the average cost of single health coverage in the United States, as documented by Kaiser Family Foundation’s 2020 Employer Health Benefits Annual Survey.[[8]](#footnote-9) In 2020, the average cost for single coverage was $7,470, so the algorithm requires annualized premiums to be at least 30% x $7,470 = $2,241 per covered person.[[9]](#footnote-10)
2. *Evidence of a Trust*. Information on a plan’s trust, if any, should be reported on a Schedule H or Schedule I. In addition to assets and liabilities, the Schedule H/I lists contributions and expenses (such as benefit payments directly to participants and payments to insurance carriers). For classification purposes, Schedules H or I filed as part of a Form 5500 that included at least some information on assets, liabilities, income, or expenses are considered evidence of a trust. A Schedule H or I that is blank (not common since the introduction of electronic filing) or reported on compliance issues only is not considered evidence of a trust.

Based on these concepts, plans are classified as self-insured, fully insured, or mixed-insured by the following logic:

### Evidence of a trust and no evidence of health insurance

All plan filings with evidence of a trust and no evidence of health insurance are classified as self-insured.

### Evidence of health insurance and no evidence of a trust

All plan filings with evidence of health insurance but no evidence of a trust are classified as fully insured unless the plan appears to cover some participants through a self-insured plan component, namely from general assets or through a trust (for which no information is provided). These plan filings are assumed to be mixed-insured if both of the following are true:

* The funding or benefit arrangement described on the Form 5500 is through a trust or general assets of the sponsor, and
* The number of individuals covered under insurance contracts as reported on Schedule A is less than half of the total number of participants as of the end of the plan year.

All other filings in this group are classified as fully insured.

For any Schedule A contract that reports covering zero participants (or left the coverage field blank), the contract is assumed to cover all participants reported on the main Form 5500.

### No evidence of a trust and no evidence of health insurance

All plan filings with neither evidence of a trust nor evidence of health insurance are categorized as either self-insured or fully insured. These plan filings are assumed to be self-insured in the following cases:

* Form 5500-SF filers that reported fewer than 100 participants at the beginning of the year
* Form 5500-SF filers that reported 100 or more participants at the beginning of the year and reported nonzero total assets, liabilities, or net assets
* The filing attached a Schedule A that indicates stop-loss coverage or payments to a third-party administrator (TPA)

All other filings in this group are classified as fully insured.

Stop-loss coverage for health insurance contracts is determined when stop-loss coverage is indicated in addition to health on Part III, Line 8 of the Schedule A through checking the box for i – Stop loss (large deductible), or through checking the box for m – Other (specify) in combination with an explanation that appears to be stop-loss.

Payments to a TPA are similarly determined by looking at Part III, Line 8 of the Schedule A. If m – Other (specify) is checked with text indicating a TPA, a TPA is assumed. In addition, the organization code 5 in Part I, Line 3(e) of the Schedule A also indicates a TPA.

### Evidence of a trust and evidence of health insurance

Plan filings with both evidence of a trust *and* evidence of health insurance may be categorized as either self-insured, fully insured, or mixed-insured. For these filings, it is possible that the plan is using a trust to provide health benefits directly to participants, pass premium payments through to insurance carriers, or both. The algorithm uses information on insurance payments from Schedule H or Schedule I and from insurance contracts reported on Schedule A to inform the determination of the primary funding mechanism of these filings.

Specifically, the following logic is used:

* If trust payments to insurance carriers on Schedule H are within 20% of *total premiums* for all insurance contracts as reported on Schedule A, then
  + If payments directly to participants are large enough to plausibly reflect health benefits,[[10]](#footnote-11) the plan filing is classified as mixed-insured.
  + Otherwise, the plan filing is classified as fully insured.
* If trust payments to insurance carriers on Schedule H differ by more than 20% of *total premiums* for all insurance contracts as reported on Schedule A, then
  + The plan is classified as self-insured if either of the following are true:
    - Payments directly to participants on Schedule H are within 50% of *total payments* for all insurance contracts as reported on Schedule A, or
    - Schedule A that was considered evidence of health insurance indicates experience-rated charges but no premiums.
  + If the plan filing is not classified as self-insured based on the above criteria but payments directly to participants are large enough to plausibly reflect health benefits,[[11]](#footnote-12) then the plan filing is classified as mixed-insured.
  + Any plan filing not classified as self-insured or mixed-insured based on the above criteria is classified as fully insured.

As stated later in this document, the premium for any insurance contract is calculated as the sum of the following Schedule A line items:

* Part I, Line 2a – total amount of commissions paid,
* Part I, Line 2b – total amount of fees paid,
* Part II, Line 6b – premiums paid to carrier,
* Part III, Line 10a – total premiums or subscription charges paid to carrier, and
* Maximum of[[12]](#footnote-13)
  + Part III, Line 9a(4) – earned premium,
  + Part III, Line 9b(3) – incurred claims, and
  + Part III, Line 9b(4) – claims charged

# IV. Weighting

Beginning with the *2013 GHP Research File*, a weight variable was added to the file, called DUP\_WGT. This weight is either 1 or 0 for any individual record and is used to distinguish between two valid filings in a single year.

Take for instance a plan with plan year ending date of June 30, 2020 that wants to change the plan year ending date to December 31, 2020. The appropriate way to file the Form 5500 is to file once for July 1, 2019 to June 30, 2020, and then to file again for July 1, 2020 to December 31, 2020. Given our criteria for selecting Form 5500 filings for the *GHP* *Research File*, both filings would be kept since both have a plan year ending date in 2020.

In order to tabulate counts of plans, participants, and any other stock amounts, the weight DUP\_WGT should be used. To tabulate flow items like income and expenses, the weight should not be used, as accounting for cash flows across both filings for a given plan can be appropriate.

### Algorithm for Developing DUP\_WGT

The following definitions are used to describe SPONS\_DFE\_EIN/SPONS\_DFE\_PN pairs:

* Directly-Consecutive – The ending date of the first of a pair of filings is one day prior to the beginning date of the second filing
* Participants-Consecutive – The end-of-year participation of the first of a pair of filings is equal to the beginning-of-year participation of the second filing.
* Same-Effective-Date – both filings have the same plan effective date
* Same-Benefit-Code – both filings have the same welfare benefit code
* Number-End-Dates – number of unique FORM\_TAX\_PRD in each pair
* Number-Plan-Names – number of unique PLAN\_NAME in each pair
* Earlier-Filing – first plan year ending date of pair
* Later-Filing – second plan year ending date of pair

Next, the following methodology is used to determine the weight:

* IF Number-Plan-Names = 1 AND Number-End-Dates = 2 AND Directly-Consecutive
  + THEN DUP\_WGT = 1 for Later-Filing and DUP\_WGT = 0 for Earlier-Filing
* IF Number-Plan-Names > 1 AND Number-End-Dates = 2 AND Directly-Consecutive AND Participants-Consecutive AND Same-Effective-Date
  + THEN DUP\_WGT = 1 for Later-Filing and DUP\_WGT = 0 for Earlier-Filing
* IF Number-Plan-Names = 1 AND Number-End-Dates = 2 AND NOT Directly-Consecutive AND Participants-Consecutive AND Same-Effective-Date
  + THEN DUP\_WGT = 1 for Later-Filing and DUP\_WGT = 0 for Earlier-Filing
* IF Number-Plan-Names > 1 AND Number-End-Dates = 2 AND NOT Directly-Consecutive AND Participants-Consecutive AND Same-Effective-Date AND Same-Benefit-Code
  + THEN DUP\_WGT=1 for Later-Filing and DUP\_WGT=0 for Earlier-Filing

In addition to the algorithm described above, the SPONS\_DFE\_EIN/ SPONS\_DFE\_PN pairs that do not meet the criteria above are manually reviewed. The results of this review inform decisions to either weight the two records or to delete one as a duplicate.

# V. Editing

Final Form 5500 filings selected for inclusion in the *GHP Research File* are edited to improve the accuracy of the generated plan statistics. In general, the edits rely on information provided elsewhere on the Form 5500 or in Attachments to the Form 5500 to determine logical error corrections.

## Edited variables

Beginning with the *2010* *GHP Research File*, all original variables drawn from EDS and EFAST2 have remained unchanged. New variables have been created whose values are set equal to the edited values for the corresponding original variables. These variables should be used to produce aggregate statistics from the *2020* *GHP Research File*. The edited variables are equal to the original variable when no edits are made. They can be found in the Codebook in [Section VII](#_VII._Codebook) of this document.

## Participation edits

There are numerous instances when participation counts can be implausible or are clearly entered on the wrong line of the Form 5500. The following methodology is applied to correct these issues:

1. Health plans should not report deceased participants on Line 6e of the Form 5500.[[13]](#footnote-14) Therefore, the total number of participants should be included on Line 6d. However, occasionally, health plans only fill in total participants on Line 6f. In the event that Line 6d is blank or zero and Line 6f is not, Line 6d is assumed to be equal to Line 6f.
2. In the event that a plan reports zero participants on both Lines 6d and 6f, a nonzero amount on Line 5 (beginning-of-year participants), and does not indicate termination by either checking “the final return/report” in Part I, Line B of the Form 5500, indicating a resolution to terminate on Schedule H or I, or indicating that all assets were distributed to beneficiaries on Schedule H or I, the end-of-year participation is assumed to be equal to the beginning-of-year participation. All of the participants are then assumed to be active.

## Plan entity type edits

Form 5500 and Form 5500-SF filers identify the type of plan entity for which they are submitting information from checkboxes on Part I, Line A of either form. Form 5500 filers select from the following options: “a multiemployer plan,” “a single-employer plan,” “a multiple-employer plan,” and “a DFE.” Because multiemployer plans and DFEs cannot use the Form 5500-SF to satisfy annual reporting obligations, Form 5500-SF filers identify plan entity type as either “a single-employer plan” or “a multiple-employer plan.”[[14]](#footnote-15)

Prior to the *2017 GHP Research File,* all DFEs were excluded, and all other plans were classified as either single employer or multiemployer. Filers that indicated being a multiple-employer plan on Part I, Line A were classified as either single employer or, in the case of collectively bargained plans, multiemployer. Additionally, data for GIAs was excluded along with all other DFE filings.

Beginning with the *2017 GHP Research File*, multiple-employer plans are no longer assigned an edited plan entity type of single employer or multiemployer based on collective bargaining. Instead, multiple-employer plans are now recognized as a distinct plan entity type category.

Additionally, GIAs are no longer excluded entirely from the *GHP Research File.* Instead, the *GHP Research File* includes an additional data set consisting of all GIAs that offered a health benefit[[15]](#footnote-16) to the covered participants.

## Plan entity type edits: discrepancies in reporting of multiemployer plans

EBSA has historically seen discrepancies in the reporting of multiemployer plans.[[16]](#footnote-17) Therefore, each plan filing in the *GHP Research File* that identifies as a multiemployer plan is subjected to the following logic:

First, the following flags are created:

* **INC** – All plans with INC., INC, INCORPORATED, COMPANY, CORP., CORPORATION, CO., LLC, or LTD in the **plan** name *or* **sponsor** name are flagged.
* **BOARD** – All plans with BOARD, TRUSTEES, or COUNCIL in the **sponsor** name are flagged.

Next, the following specific edits are made based on the flags and other information provided in the filings:

* Plans that identify as multiemployer are reclassified as single employer if the plan is flagged as INC but is not flagged as BOARD.
* Plans that identify as multiemployer are reclassified as multiple-employer[[17]](#footnote-18) if the business code reported corresponds to any of the following:
  + Offices of physicians or dentists (621111, 621210)
  + Real estate (531000 – 531999)
  + Legal services (541000 – 541199)

After making these entity edits, all multiemployer plans are changed to show collective bargaining.

## Edits of funding and benefit arrangements: Form 5500 Part II, Lines 9a and 9b

The funding and benefit arrangements values are not adjusted.[[18]](#footnote-19) The values possible for funding and benefit arrangements are as follows: (1) Insurance, (2) Code Section 412(e)(3) Insurance Contracts, (3) Trust, and (4) General Assets of the Sponsor.

## Removal of duplicate filings

To eliminate duplicate filings, groups of filings that have the same end-of-year assets, beginning-of-year assets, and total contributions are reviewed and obvious duplicates are removed. Groups of filings with the same SPONS\_DFE\_EIN and SPONS\_DFE\_PN are also reviewed to see if any of the filings are duplicates. Most often, the two filings are both required. See the discussion of the DUP\_WGT variable in [Section IV](#_IV._Weighting) of this document for more information.

## Participation and the Form 5500-SF

Since the introduction of the Form 5500-SF, the participation reported on the Form 5500 and the Form 5500-SF have not been identical. The Form 5500 instructs welfare plans to report the following subtypes of participants:

* active,
* retired or separated receiving benefits, and
* retired or separated entitled to future benefits.[[19]](#footnote-20)

Prior to the 2014 Form 5500-SF, plans filing the Form 5500-SF were not required to report the number of active participants at either the beginning or end of year. The fields required were the total number of participants at the beginning and end of year in addition to the number of participants with account balances at the end of the year. The 2009-2013 *GHP Research Files* employed a simplifying assumption that all participants reported by Form 5500-SF filers were active participants.

Two new fields were added to the 2014 Form 5500-SF to capture the number of active participants at the beginning and end of year. Therefore, the difference between the number of total participants and the number of active participants should fall into one of the following two categories, based on the options provided in the Form 5500:

* retired or separated receiving benefits, or
* retired or separated entitled to future benefits.

Participants reported by Form 5500-SF filers are no longer all assumed to be active. Instead*,* the number of retired or separated participants receiving benefits and the number of retired or separated participants entitled to future benefits are imputed for Form 5500-SF filers. The imputation is based on the ratio of participants in each group among Form 5500 filers with fewer than 100 participants in 2020 and is performed separately for self-insured, mixed-insured, and fully insured plans.

For Form 5500-SF filers categorized as self-insured, the number of retired or separated participants receiving benefits is set equal to 95.6% of the difference between the number of total participants and the number of active participants. The number of retired or separated participants entitled to future benefits is set equal to 4.4% of the difference.

For Form 5500-SF filers categorized as mixed-insured, the number of retired or separated participants receiving benefits is set equal to 97.6% of the difference between the number of total participants and the number of active participants. The number of retired or separated participants entitled to future benefits is set equal to 2.4% of the difference.

For Form 5500-SF filers categorized as fully insured, the number of retired or separated participants receiving benefits is set equal to 86.0% of the difference between the number of total participants and the number of active participants. The number of retired or separated participants entitled to future benefits is set equal to 14.0% of the difference.

# VI. Generated Variables

A number of variables are generated for the *GHP Research File* that are not present in the original Form 5500 data sources. Some of these variables are simply recodes of existing variables that are used to produce the *GHP Report*. Other variables provide enhanced information for research by synthesizing information collected on the Form 5500, Form 5500-SF, Schedules, and Attachments. Many of these additional variables are assigned a custom display format in SAS (see the “Insurance Formats.sas” program that accompanies the *GHP Research File*).

### ENT3

ENT3 is the recode of the edited Form 5500 and Form 5500-SF Part I, Line A plan entity type variable, TYPE\_PLAN\_ENTITY\_CD, and is used in the *GHP Report* for tabulations by plan entity type.

|  |  |
| --- | --- |
| Value | ENT3 Description |
| 1 | Single Employer plans |
| 2 | Multiemployer plans |
| 3 | Multiple-Employer plans |

### BIZCODE

BIZCODE is the edited Form 5500 and Form 5500-SF Part II, Line 2d business code variable, BUSINESS\_CODE, converted from character to numerical format.

### PYB and PYE Dates

From Form 5500 and Form 5500-SF Part I, PYE is the plan year ending date (variable FORM\_TAX\_PRD) and PYB is the plan year beginning data (variable FORM\_PLAN\_YEAR\_BEGIN\_DATE); both are in the date format MM/DD/YYYY.

### FILER\_TYPE

FILER\_TYPE is an indicator of whether the filing represents a group health plan or a group insurance arrangement.

|  |  |
| --- | --- |
| Value | FILER\_TYPE Description |
| GHP | Group Health Plan |
| GIA | Group Insurance Arrangement |

## Plan Type and Features

### HEALTH\_TYPE and HEALTH\_ONLY

HEALTH\_TYPE defines the types of welfare benefits provided by the plan.

|  |  |
| --- | --- |
| Value | HEALTH\_TYPE Description |
| 1 | Health and Dental |
| 2 | Health and Vision |
| 3 | Health and Non-Health |
| 4 | Health, Dental, and Vision |
| 5 | Health, Dental, and Non-Health |
| 6 | Health, Vision, and Non-Health |
| 7 | Health, Dental, Vision, and Non-Health |

HEALTH\_ONLY describes whether or not the plan provides only health benefits or health benefits along with other benefit types. When HEALTH\_ONLY is 1, the plan offers only health benefits. When HEALTH\_ONLY is 2, the plan offers health and other types of benefits. Both of these variables are determined based on the TYPE\_WELFARE\_BNFT\_CODE entered on Part II, Line 8b of Form 5500 or Part IV, Line 9b of Form 5500-SF.

|  |  |
| --- | --- |
| Value | TYPE\_WELFARE\_BNFT\_CODE Description |
| 4A | Health (other than vision or dental) |
| 4B | Life Insurance |
| 4C | Supplemental Unemployment |
| 4D | Dental |
| 4E | Vision |
| 4F | Temporary Disability (accident and sickness) |
| 4G | Prepaid Legal |
| 4H | Long-term Disability |
| 4I | Severance Pay |
| 4J | Apprenticeship and Training |
| 4K | Scholarship (funded) |
| 4L | Death Benefits (include travel accident but not life insurance) |
| 4P | Taft-Hartley Financial Assistance for Employee Housing Expenses |
| 4Q | Other |

As the above table shows, “4A” indicates health insurance, “4D” indicates dental insurance, “4E” indicates vision insurance, and all the other codes are classified as “non-health” benefits for the HEALTH\_TYPE and HEALTH\_ONLY variables.

### INSURANCE\_TYPE and CONTRACT\_NUM\_HEALTH

INSURANCE\_TYPE categorizes the types of Schedule A contracts reported by each plan. In Part III of Schedule A, line 7, plans check all boxes that apply to the particular contract being reported. The options are:

|  |  |
| --- | --- |
| Value | Benefit and contract type |
| A | Health (other than dental or vision) |
| B | Dental |
| C | Vision |
| D | Life Insurance |
| E | Temporary Disability (accident and sickness) |
| F | Long-term Disability |
| G | Supplemental Unemployment |
| H | Prescription Drug |
| I | Stop-Loss (large deductible) |
| J | HMO Contract |
| K | PPO Contract |
| L | Indemnity Contract |
| M | Other |

For INSURANCE\_TYPE, eight options are defined using the “Benefit and contract type” indicators described above. Values A, J, K, and L correspond to health contracts for purposes of creating INSURANCE\_TYPE.

|  |  |
| --- | --- |
| Value | INSURANCE TYPE Description |
| 1 | No Insurance |
| 2 | Health Only |
| 3 | Stop-Loss Only |
| 4 | Other |
| 5 | Health and Stop-Loss |
| 6 | Health and Other |
| 7 | Stop-Loss and Other |
| 8 | Health, Stop-Loss, and Other |

CONTRACT\_NUM\_HEALTH counts the number of different health insurance contracts reported by the plan on Schedule A. Contracts are counted as health insurance if the plan checks the “Benefit and contract type” box on Schedule A for at least one of A, J, K, and/or L. For plans that are determined to be mixed- or fully insured that report no Schedule A health contracts, this value is set to 1 to represent the presumably missing Schedule A.

### HEALTH\_ONLY\_PREM, STOPLOSS\_ONLY\_PREM, OTHER\_ONLY\_PREM, HEALTH\_STOPLOSS\_PREM, HEALTH\_OTHER\_PREM, STOPLOSS\_OTHER\_PREM, HEALTH\_STOPLOSS\_OTHER\_PREM

Each of these variables is a summation of various Schedule A filings. Premiums for each contract are placed into one of the following seven categories:

1. Health Only
2. Stop-Loss Only
3. Other Only
4. Health and Stop-Loss
5. Health and Other
6. Stop-Loss and Other
7. Health, Stop-Loss, and Other

The premium for any insurance contract is calculated as the sum of the following Schedule A line items:

* Part I, Line 2a – total amount of commissions paid,
* Part I, Line 2b – total amount of fees paid,
* Part II, Line 6b – premiums paid to carrier,
* Part III, Line 10a – total premiums or subscription charges paid to carrier, and
* Maximum of[[20]](#footnote-21)
  + Part III, Line 9a(4) – earned premium,
  + Part III, Line 9b(3) – incurred claims, and
  + Part III, Line 9b(4) – claims charged

The sum of all premiums for each contract type corresponds to the seven premium variables on the *GHP Research File*.

### INS3

INS3 indicates the insurance status of the plan as self-insured, mixed-insured, or fully insured as discussed above.

|  |  |
| --- | --- |
| Value | INS3 Description |
| 0 | Self-insured |
| 1 | Mixed-insured |
| 2 | Fully insured |

## Participants

### TOT\_ACT\_PARTCP\_CNT

### RTD\_SEP\_PARTCP\_RCVG\_CNT

### RTD\_SEP\_PARTCP\_FUT\_CNT

### SUBTL\_ACT\_RTD\_SEP\_CNT

### PART8

### LARGE

TOT\_ACT\_PARTCP\_CNT corresponds to the number of active participants reported on the Form 5500; RTD\_SEP\_PARTCP\_RCVG\_CNT corresponds to the number of retired or separated participants receiving benefits; RTD\_SEP\_PARTCP\_FUT\_CNT corresponds to the number of other retired or separated participants entitled to future benefits; and SUBTL\_ACT\_RTD\_SEP\_CNT corresponds to the total of these three items. Edited versions of these variables also exist, each with the suffix CNE instead of CNT.

PART8 corresponds to SUBTL\_ACT\_RTD\_SEP\_CNE and is formatted as follows:

|  |
| --- |
| PART8 Value |
| None or not reported |
| 1-49 |
| 50-99 |
| 100-249 |
| 250-499 |
| 500-999 |
| 1000-4999 |
| 5000+ |

The variable LARGE is 1 if the plan has SUBTL\_ACT\_RTD\_SEP\_CNE ≥ 100 and 0 otherwise.

### FILINGSIZE AND FILINGSIZE2

These variables are created to place plans into size categories. The participation portion is based on beginning-of-year participation. They are defined as follows:

|  |  |
| --- | --- |
| Value | FILINGSIZE Description |
| 1 | Plans with 100 or more Participants & Trusts |
| 2 | Plans with 100 or more Participants & No Trusts |
| 3 | Plans with less than 100 Participants & Trusts |
| Value | FILINGSIZE2 Description |
| 1 | Plans with Trusts |
| 2 | Plans with No Trusts |

## Financials

### AST21

AST21 is set equal to total end-of-year assets (TOT\_ASSETS\_EOY\_AMT) and assigned a format which displays output in ranges, e.g., “$1-24K,” “25-49K,”…“2.5B or more.”

### FUNDING\_ARRANGE and BENEFIT

FUNDING\_ARRANGE is developed from the variables FUNDING\_INSURANCE\_IND, FUNDING\_SEC412\_IND, FUNDING\_TRUST\_IND, and FUNDING\_GEN\_ASSET\_IND which correspond to each option listed under Part II, Line 9a of the Form 5500. Form 5500-SF filers do not report this information. In the descriptions below, options Insurance and Code section 412(e)(3) insurance contracts are considered insurance.

|  |  |
| --- | --- |
| Value | FUNDING\_ARRANGE Description |
| 1 | Insurance |
| 2 | Trust |
| 3 | Trust and Insurance |
| 4 | General Assets of the Sponsor |
| 5 | General Assets of the Sponsor and Insurance |
| 6 | Trust and General Assets of the Sponsor |
| 7 | Trust, General Assets of the Sponsor, and Insurance |
| X | Not Reported |

The variable BENEFIT is created in the same fashion and with the same results, only using the variables BENEFIT\_INSURANCE\_IND, BENEFIT\_SEC412\_IND, BENEFIT\_TRUST\_IND, and BENEFIT\_GEN\_ASSET\_IND which correspond to each option listed under Part II, Line 9b of the Form 5500.

### BS\_SOURCE

### UNSPEC\_INVEST\_EOY\_AME

### UNSPEC\_DIST\_BNFT\_AME

BS\_SOURCE indicates the source of balance sheet information: “H” if Schedule H, “I” if Schedule I, and “N” if neither (or none). For plans filing Schedule I, Schedule I variables (with prefix “SMALL\_”) are copied and given the variable names of their Schedule H counterparts (e.g., JOINT\_VENTURE\_EOY\_AMT = SMALL\_JOINT\_VENTURE\_ EOY\_AMT). In the process, the variables “Unspecified Investments” (UNSPEC\_INVEST\_EOY\_AME) and “Unspecified Benefits Paid” (UNSPEC\_ DIST\_BNFT\_AME) are created. Unspecified Investments is the small plan total assets amount, less the sum of the small plan assets line items (partnership/joint venture, employer real property, real estate, employer securities, participant loans, and loans other than to participants). Note that “Tangible personal property” (SMALL\_PERSONAL\_ PROP\_EOY\_AMT) is **not** subtracted from total assets; it has no Schedule H analogue and is thus included in “unspecified investments” for the *GHP Research File*. Unspecified Benefits is the small plan Benefits Paid (Line 2e) — Schedule I does not specify any benefit payment detail.

## Imputed Variables

Imputed variables largely serve the function of ensuring that line items add up to the totals on the *GHP Report* tables.

### IB\_NINC

Imputed Net Income, equal to total income (TOT\_INCOME\_AMT) less total expenses (TOT\_EXPENSES\_AMT).

### IOB\_\*

IOB\_\* variables are “imputed other” amounts to be used when tabulating data from both Schedule H and Schedule I filers. They are computed by subtracting the sum of line items common to both the Schedule H and I for a particular category from the reported total for that category. For example, IOB\_ASST (imputed other assets) equals total assets (TOT\_ASSETS\_EOY\_AMT) less the sum of assets in partnerships/joint ventures, employer property, real estate, employer securities, participant loans, and loans other than to participants. Note that these six asset line items are the only items found on both Schedule H and Schedule I.

### IOH\_\*

IOH\_\* variables are “imputed other” amounts to be used when tabulating data from only Schedule H filers. They are computed by subtracting the sum of line items on Schedule H for a particular category from the reported total for that category. For example, IOH\_INT (imputed other interest earnings) equals total interest (TOTAL\_INTEREST\_AMT) less the sum of interest earnings from interest-bearing cash, U.S. Government securities, corporate debt instruments, loans (other than to participants), and participant loans. Note that these five interest earnings items are found only on Schedule H.

### ITB\_LIAB

Imputed Total Liabilities, equal to total assets (TOT\_ASSETS\_EOY\_AMT) less net assets (NET\_ASSETS\_EOY\_AMT).

### IOH\_CONT\_C12

IOH\_CONT\_C12 is the variable underlying “Other or unspecified contributions.” It is the reported total contributions less the sum of employer contributions and participant contributions. In other words, it is an imputed “other contributions” variable that also includes noncash contributions.

### IOH\_INC\_C12

IOH\_INC\_C12 is the variable underlying “Other or unspecified income.” It is the reported Total Income less the sum of the following “income” line items on Schedule H:

* Total contributions (TOT\_CONTRIB\_AMT)
* Total interest earnings (TOTAL\_INTEREST\_AMT)
* Total dividends (TOTAL\_DIVIDENDS\_AMT)
* Gain (loss) on sale of assets (TOT\_GAIN\_LOSS\_SALE\_AST\_AMT)
* Unrealized appreciation (depreciation) of assets (TOT\_UNREALZD\_APPRCTN\_AMT)
* Net investment gain (loss) from common/collective trusts (GAIN\_LOSS\_COM\_TRUST\_AMT)
* Net investment gain (loss) from pooled separate accounts (GAIN\_LOSS\_POOL\_SEP\_AMT)
* Net investment gain (loss) from master trust investment accounts (GAIN\_LOSS\_MASTER\_TR\_AMT)
* Net investment gain (loss) from 103-12 investment entities (GAIN\_LOSS\_103\_12\_INVST\_AMT)
* Net investment gain (loss) from registered investment companies (GAIN\_LOSS\_REG\_INVST\_AMT)

In other words, IOH\_INC\_C12 is an imputed “other income” variable that also includes earnings from rents (Schedule H Line 2b(3), TOTAL\_RENTS\_AMT).

### SRDB\_\*

SRDB\_\* variables are “sum of reported detail” variables to be used when tabulating data from both Schedule H and Schedule I plans. They are computed by summing the reported line items common to both Schedules H and I for a particular category, plus the “Other” line item (if any) for that category. For example, SRDB\_ASST (sum of reported assets detail) is the sum of assets in partnerships/joint ventures, employer property, real estate, employer securities, participant loans, loans other than to participants, and tangible personal property (SMALL\_PERSONAL\_PROP\_EOY\_AMT). Note that personal property, an asset line item on Schedule I but not on Schedule H, is considered an “other” asset.

### SRDH\_\*

SRDH\_\* variables are “sum of reported detail” variables to be used when tabulating Schedule H plans. They are computed by summing the reported line items on Schedule H for a particular category, plus the “Other” line item (if any) for that category. For example, SRDH\_EXP (sum of reported expenses detail) is the sum of total benefit payments (TOT\_DISTRIB\_BNFT\_AMT), corrective distributions (TOT\_CORRECTIVE\_DISTRIB\_AMT), deemed distributions of participant loans (TOT\_DM\_DISTRIB\_PTCP\_LNS\_A), interest expense (TOT\_INT\_EXPENSE\_AMT), and total administrative expenses (TOT\_ADMIN\_EXPENSES\_AMT). There is no “Other expenses” line on Schedule H.

# VII. Codebook

The table that follows describes each of the variables included in the *GHP Research File.* There are five pieces of information included for each variable:

* *SAS Variable Name:* The name of the variable.
* *Type of Variable:* Each variable is one of five types:
  + Original – Raw field from a single source.
  + Combined Original – Raw field from one of multiple possible sources, depending on the type of filer. The types of filers are as follows:
    - Form 5500 and Schedule H (and Schedule A if plan has insurance contracts),
    - Form 5500 and Schedule I (and Schedule A if plan has insurance contracts), or
    - Form 5500-SF.
  + Edited – Edited field from a single source.
  + Combined Edited – Edited field from one of multiple possible sources.
  + OPR Generated – Field generated for the purposes of classifying data in the *GHP Research File*. Multiple fields may have been used to generate the value.
* *Source:* The source of each variable is a specific Form 5500, Form 5500-SF, Schedule H, or Schedule I item number. Variables that originate from Schedule A data are also noted. For both Combined Original and Combined Edited fields, there will be more than one source.
* *Variable Description:* A description of the variable.
* *Values:* For categorical OPR Generated fields, all values for the field are listed.

| **SAS Variable Name** | **Type of Variable** | **Source** | **Variable Description** | **Values** |
| --- | --- | --- | --- | --- |
| ACK\_ID | Original | EFAST2 | 30-digit filing identifying number in use for data taken from EFAST2 system. First eight digits indicate the date the filing was uploaded. |  |
| ACQUIS\_INDBT\_EOY\_AMT | Original | Schedule H Part I, 1i | Acquisition indebtedness, end-of-year (EOY) amount |  |
| ACQUIS\_INDBT\_EOY\_AME | Edited | Schedule H Part I, 1i | Acquisition indebtedness, EOY amount |  |
| AGGREGATE\_COSTS\_AMT | Original | Schedule H Part II, 2b(4)(B) | Aggregate carrying amount |  |
| AGGREGATE\_COSTS\_AME | Edited | Schedule H Part II, 2b(4)(B) | Aggregate carrying amount |  |
| AGGREGATE\_PROCEEDS\_AMT | Original | Schedule H Part II, 2b(4)(A) | Aggregate proceeds on sale of assets |  |
| AGGREGATE\_PROCEEDS\_AME | Edited | Schedule H Part II, 2b(4)(A) | Aggregate proceeds on sale of assets |  |
| ALL\_PLAN\_AST\_DISTRIB\_IND | Original | Schedule H Part IV, 4k | Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? | 1 = yes |
| AMENDED\_IND | Combined Original | Form 5500 Part I, B or Form 5500-SF, Part I, B | This return/report is an amended return/report | 1 = yes |
| [AST21](#_AST21) | OPR Generated |  | Total assets, EOY, formatted with commas |  |
| BENEF\_RCVG\_BNFT\_CNT | Original | Form 5500 Part II, 6e | Number of deceased participants whose beneficiaries are receiving or are entitled to receive benefits |  |
| BENEF\_RCVG\_BNFT\_CNE | Edited | Form 5500 Part II, 6e | Number of deceased participants whose beneficiaries are receiving or are entitled to receive benefits |  |
| [BENEFIT](#_FUNDING_ARRANGE_and_BENEFIT) | OPR Generated |  | Funding arrangement for distribution of benefits | 1 = Insurance,  2 = Trust,  3 = Trust and Insurance,  4 = General Assets of the Sponsor,  5 = General Assets of the Sponsor and Insurance,  6 = Trust and General Assets of the Sponsor,  7 = Trust, General Assets of the Sponsor, and Insurance  X = Not Reported |
| BENEFIT\_GEN\_ASSET\_IND | Original | Form 5500 Part I, 9(b)(4) | Plan benefit arrangement – General assets of the sponsor | 1 = yes, “ ” = no |
| BENEFIT\_INSURANCE\_IND | Original | Form 5500 Part I, 9(b)(1) | Plan benefit arrangement – Insurance | 1 = yes, “ ” = no |
| BENEFIT\_SEC412\_IND | Original | Form 5500 Part I, 9(b)(2) | Plan benefit arrangement – Section 412(e)(3) insurance contracts | 1 = yes, “ ” = no |
| BENEFIT\_TRUST\_IND | Original | Form 5500 Part I, 9(b)(3) | Plan benefit arrangement – Trust | 1 = yes, “ ” = no |
| [BIZCODE](#_BIZCODE) | OPR Generated |  | Business code |  |
| BLDGS\_USED\_EOY\_AMT | Original | Schedule H Part I, 1e | Buildings and other property used in plan operation, EOY |  |
| BLDGS\_USED\_EOY\_AME | Edited | Schedule H Part I, 1e | Buildings and other property used in plan operation, EOY |  |
| BNFTS\_PAYABLE\_EOY\_AMT | Original | Schedule H Part I, 1g | Benefit claims payable, EOY |  |
| BNFTS\_PAYABLE\_EOY\_AME | Edited | Schedule H Part I, 1g | Benefit claims payable, EOY |  |
| [BS\_SOURCE](#_BS_SOURCE) | OPR Generated |  | Source of balance sheet items (replaces 1999 variable FORM) | H = Schedule H,  I = Schedule I,  S = Form 5500-SF,  N = None |
| BUSINESS\_CODE | Combined Original | Form 5500 Part II, 2d or Form 5500-SF Part II, 2d | Business code |  |
| BUSINESS\_CODE\_E | Combined Edited | Form 5500 Part II, 2d or Form 5500-SF Part II, 2d | Business code |  |
| CAST\_AST | OPR Generated |  | Sum of interest- and non-interest-bearing cash reported on Schedule H |  |
| COLLECTIVE\_BARGAIN\_IND | Original | Form 5500 Part I, C | Plan is a collectively bargained plan | 1 = yes |
| COLLECTIVE\_BARGAIN\_IND\_E | Edited | Form 5500 Part I, C | Plan is a collectively bargained plan | 1 = yes |
| COMMON\_STOCK\_EOY\_AMT | Original | Schedule H Part I, 1c(4)(B) | Corporate stocks - Common, EOY |  |
| COMMON\_STOCK\_EOY\_AME | Edited | Schedule H Part I, 1c(4)(B) | Corporate stocks - Common, EOY |  |
| CONTRACT\_ADMIN\_FEES\_AMT | Original | Schedule H Part II, 2i(2) | Administrative expenses - Contract administrator fees |  |
| CONTRACT\_ADMIN\_FEES\_AME | Edited | Schedule H Part II, 2i(2) | Administrative expenses - Contract administrator fees |  |
| [CONTRACT\_NUM\_HEALTH](#_INSURANCE_TYPE_and_CONTRACT_NUM_HEA) | OPR Generated | Schedule A | Number of Schedule A contracts reported |  |
| CORP\_DEBT\_OTHER\_EOY\_AMT | Original | Schedule H Part I, 1c(3)(B) | Corporate debt instruments - All other, EOY |  |
| CORP\_DEBT\_OTHER\_EOY\_AME | Edited | Schedule H Part I, 1c(3)(B) | Corporate debt instruments - All other, EOY |  |
| CORP\_DEBT\_PREFERRED\_EOY\_AMT | Original | Schedule H Part I, 1c(3)(A) | Corporate debt instruments - Preferred, EOY |  |
| CORP\_DEBT\_PREFERRED\_EOY\_AME | Edited | Schedule H Part I, 1c(3)(A) | Corporate debt instruments - Preferred, EOY |  |
| DEBT\_INST\_AST | OPR Generated |  | Sum of preferred corporate debt and other corporate debt on Schedule H |  |
| DFE\_AST | OPR Generated |  | Sum of interest in common trusts, master trusts, 103-12 investment entities (103-12 IEs), and pooled separate accounts on Schedule H |  |
| DISTRIB\_DRT\_PARTCP\_AMT | Original | Schedule H Part II, 2e(1) | Benefit payments directly to participants or beneficiaries, including direct rollovers |  |
| DISTRIB\_DRT\_PARTCP\_AME | Edited | Schedule H Part II, 2e(1) | Benefit payments directly to participants or beneficiaries, including direct rollovers |  |
| DIVND\_COMMON\_STOCK\_AMT | Original | Schedule H Part II, 2b(2)(B) | Dividends - Common stock |  |
| DIVND\_COMMON\_STOCK\_AME | Edited | Schedule H Part II, 2b(2)(B) | Dividends - Common stock |  |
| DIVND\_PREF\_STOCK\_AMT | Original | Schedule H Part II, 2b(2)(A) | Dividends - Preferred stock |  |
| DIVND\_PREF\_STOCK\_AME | Edited | Schedule H Part II, 2b(2)(A) | Dividends - Preferred stock |  |
| [DUP\_WGT](#_IV._Weighting) | OPR Generated |  | Weight to account for multiple filings under same SPONS\_DFE\_EIN SPONS\_DFE\_PN grouping | 1 = Last filing for the plan (used for stock amounts: plans, participants, etc.),  0 = Not last filing for the plan (used for flow amounts, income, expenses, transfers, etc.) |
| EFFYR | OPR Generated |  | Effective year of plan |  |
| EINPN | OPR Generated |  | Concatenation of SPONS\_DFE\_EIN and SPONS\_DFE\_PN |  |
| EMPLR\_CONTRIB\_EOY\_AMT | Original | Schedule H Part I, 1b(1) | Receivables - Employer contributions, EOY |  |
| EMPLR\_CONTRIB\_EOY\_AME | Edited | Schedule H Part I, 1b(1) | Receivables - Employer contributions, EOY |  |
| EMPLR\_CONTRIB\_INCOME\_AMT | Original | Schedule H Part II, 2a(1)(A) | Contributions - Received or receivable in cash from employers |  |
| EMPLR\_CONTRIB\_INCOME\_AME | Combined Edited | Schedule H Part II, 2a(1)(A) or Schedule I Part I, 2a(1)  or Form 5500-SF Part III, 8a(1) | Contributions - Received or receivable in cash from employers |  |
| EMPLR\_PROP\_EOY\_AMT | Original | Schedule H Part I, 1d(2) | Employer real property, EOY |  |
| EMPLR\_PROP\_EOY\_AME | Combined Edited | Schedule H Part I, 1d(2) or Schedule I Part I, 3b | Employer real property, EOY |  |
| EMPLR\_SEC\_EOY\_AMT | Original | Schedule H Part I, 1d(1) | Employer securities, EOY |  |
| EMPLR\_SEC\_EOY\_AME | Combined Edited | Schedule H Part I, 1d(1) or Schedule I Part I, 3d | Employer securities, EOY |  |
| [ENT3](#_ENT3) | OPR Generated |  | Plan entity type | 1 = Single Employer, 2 = Multiemployer,  3 = Multiple-Employer |
| [FILER\_TYPE](#_FILER_TYPE) | OPR Generated |  | Indication of whether filer is a Group Health Plan or a Group Insurance Arrangement | GHP = Group Health Plan,  GIA = Group Insurance Arrangement |
| [FILINGSIZE](#_FILINGSIZE_AND_FILINGSIZE2) | OPR Generated |  | Categorizes plans by size and presence of a trust | 1 = Plans with 100 or more participants & trusts,  2 = Plans with 100 or more participants & no trusts,  3 = Plans with less than 100 participants & trusts |
| [FILINGSIZE2](#_FILINGSIZE_AND_FILINGSIZE2) | OPR Generated |  | Categorizes plans by presence of a trust | 1 = Plans with trusts, 2 = Plans with no trusts |
| FINAL\_FILING\_IND | Combined Original | Form 5500 Part I, B or Form 5500-SF, Part I, B | This return/report is the final return/report | 1 = yes, “ ” = no |
| FORM\_PLAN\_YEAR\_BEGIN\_DATE | Combined Original | Form 5500 Part I or Form 5500-SF Part I | Calendar plan year of fiscal plan year beginning date |  |
| FORM\_TAX\_PRD | Combined Original | Form 5500 Part I or Form 5500-SF Part I | Calendar plan year of fiscal plan year ending date |  |
| FSOURCE | OPR Generated |  | Source of filing (replaces 1999 variable SOURCE) | F = Form 5500,  S = Form 5500-SF |
| [FUNDING\_ARRANGE](#_FUNDING_ARRANGE_and_BENEFIT) | OPR Generated |  | Funding arrangement for investment of assets | 1 = Insurance,  2 = Trust,  3 = Trust and Insurance,  4 = General Assets of the Sponsor,  5 = General Assets of the Sponsor and Insurance,  6 = Trust and General Assets of the Sponsor,  7 = Trust, General Assets of the Sponsor, and Insurance,  X = Not Reported |
| FUNDING\_GEN\_ASSET\_IND | Original | Form 5500 Part I, 9(a)(4) | Plan funding arrangement – General assets of the sponsor | 1 = yes, “ ” = no |
| FUNDING\_INSURANCE\_IND | Original | Form 5500 Part I, 9(a)(1) | Plan funding arrangement – Insurance | 1 = yes, “ ” = no |
| FUNDING\_SEC412\_IND | Original | Form 5500 Part I, 9(a)(2) | Plan funding arrangement – Section 412(e)(3) insurance contracts | 1 = yes, “ ” = no |
| FUNDING\_TRUST\_IND | Original | Form 5500 Part I, 9(a)(3) | Plan funding arrangement – Trust | 1 = yes, “ ” = no |
| GAIN\_LOSS\_103\_12\_INVST\_AMT | Original | Schedule H Part II, 2b(9) | Net gain from 103-IEs |  |
| GAIN\_LOSS\_103\_12\_INVST\_AME | Edited | Schedule H Part II, 2b(9) | Net gain from 103-IEs |  |
| GAIN\_LOSS\_COM\_TRUST\_AMT | Original | Schedule H Part II, 2b(6) | Net gain from common/collective trusts (CCTs) |  |
| GAIN\_LOSS\_COM\_TRUST\_AME | Edited | Schedule H Part II, 2b(6) | Net gain from CCTs |  |
| GAIN\_LOSS\_MASTER\_TR\_AMT | Original | Schedule H Part II, 2b(8) | Net gain from master trust investment accounts (MTIAs) |  |
| GAIN\_LOSS\_MASTER\_TR\_AME | Edited | Schedule H Part II, 2b(8) | Net gain from MTIAs |  |
| GAIN\_LOSS\_POOL\_SEP\_AMT | Original | Schedule H Part II, 2b(7) | Net gain from pooled separate accounts (PSAs) |  |
| GAIN\_LOSS\_POOL\_SEP\_AME | Edited | Schedule H Part II, 2b(7) | Net gain from PSAs |  |
| GAIN\_LOSS\_REG\_INVST\_AMT | Original | Schedule H Part II, 2b(10) | Net gain from registered investment companies |  |
| GAIN\_LOSS\_REG\_INVST\_AME | Edited | Schedule H Part II, 2b(10) | Net gain from registered investment companies |  |
| GOVT\_SEC\_AST | OPR Generated |  | U.S. Government securities, EOY from Schedule H |  |
| GOVT\_SEC\_EOY\_AMT | Original | Schedule H Part I, 1c(2) | U.S. Government securities, EOY |  |
| GOVT\_SEC\_EOY\_AME | Edited | Schedule H Part I, 1c(2) | U.S. Government securities, EOY |  |
| [HEALTH\_ONLY](#_HEALTH_TYPE_and_HEALTH_ONLY) | OPR Generated |  | Notes whether plan provides only health benefits or health and other benefits | 1 = Health Benefits Only, 2 = Health and Other Benefits |
| [HEALTH\_ONLY\_PREM](#_HEALTH_ONLY_PREM,_HEALTH_STOPLOSS_P) | OPR Generated | Schedule A | Counts premium paid for health insurance contracts that cover no other benefit types |  |
| [HEALTH\_OTHER\_PREM](#_HEALTH_ONLY_PREM,_HEALTH_STOPLOSS_P) | OPR Generated | Schedule A | Counts premium paid for health insurance contracts that also cover other benefits (except stop-loss) |  |
| [HEALTH\_STOPLOSS\_OTHER\_PREM](#_HEALTH_ONLY_PREM,_HEALTH_STOPLOSS_P) | OPR Generated | Schedule A | Counts premium paid for health insurance contracts that also cover stop-loss and some other benefit type |  |
| [HEALTH\_STOPLOSS\_PREM](#_HEALTH_ONLY_PREM,_HEALTH_STOPLOSS_P) | OPR Generated | Schedule A | Counts premium paid for health insurance contracts that also cover stop-loss |  |
| [HEALTH\_TYPE](#_HEALTH_TYPE_and_HEALTH_ONLY) | OPR Generated |  | Notes the types of health and other welfare benefits offered by the plan | 0 = Health Only,  1 = Health and Dental,  2 = Health and Vision,  3 = Health and Non-Health,  4 = Health, Dental, and Vision,  5 = Health, Dental, and Non-Health,  6 = Health, Vision, and Non-Health,  7 = Health, Dental, Vision, and Non-Health |
| [IB\_NINC](#_IB_NINC) | OPR Generated |  | Net income (Sch. H and I) |  |
| INITIAL\_FILING\_IND | Combined Original | Form 5500 Part I, B or Form 5500-SF Part I, B | This return/report is the first return/report | 1 = yes, “ ” = no |
| INS\_CARRIER\_BNFTS\_AMT | Original | Schedule H Part II, 2e(2) | Payments to insurance carriers for provision of benefits |  |
| INS\_CARRIER\_BNFTS\_AME | Edited | Schedule H Part II, 2e(2) | Payments to insurance carriers for provision of benefits |  |
| INS\_CO\_GEN\_AST | OPR Generated |  | Value of funds in insurance company general account (unallocated contracts), EOY from Schedule H |  |
| INS\_CO\_GEN\_ACCT\_EOY\_AMT | Original | Schedule H Part I, 1c(14) | Value of funds in insurance company general account (unallocated contracts), EOY |  |
| INS\_CO\_GEN\_ACCT\_EOY\_AME | Edited | Schedule H Part I, 1c(14) | Value of funds in insurance company general account (unallocated contracts), EOY |  |
| [INS3](#_INS3) | OPR Generated |  | Notes insurance funding mechanism of plan | 0 = Self-insured, 1 = Mixed-insured, 2 = Fully insured |
| [INSURANCE\_TYPE](#_INSURANCE_TYPE_and_CONTRACT_NUM_HEA) | OPR Generated | Schedule A | Notes types of insurance contracts reported by the plan on Schedule A | 1 = No Insurance,  2 = Health,  3 = Stop-Loss,  4 = Other,  5 = Health and Stop-Loss,  6 = Health and Other, 7 = Stop-Loss and Other,  8 = Health, Stop-Loss, and Other |
| INT\_103\_12\_INVST\_EOY\_AMT | Original | Schedule H Part I, 1c(12) | Value of interest in 103-12 IEs, EOY |  |
| INT\_103\_12\_INVST\_EOY\_AME | Edited | Schedule H Part I, 1c(12) | Value of interest in 103-12 IEs, EOY |  |
| INT\_BEAR\_CASH\_AMT | Original | Schedule H Part II, 2b(1)(A) | Interest earnings on interest-bearing cash |  |
| INT\_BEAR\_CASH\_AME | Edited | Schedule H Part II, 2b(1)(A) | Interest earnings on interest-bearing cash |  |
| INT\_BEAR\_CASH\_EOY\_AMT | Original | Schedule H Part I, 1c(1) | Interest bearing cash, EOY |  |
| INT\_BEAR\_CASH\_EOY\_AME | Edited | Schedule H Part I, 1c(1) | Interest bearing cash, EOY |  |
| INT\_COMMON\_TR\_EOY\_AMT | Original | Schedule H Part I, 1c(9) | Value of interest in CCTs, EOY |  |
| INT\_COMMON\_TR\_EOY\_AME | Edited | Schedule H Part I, 1c(9) | Value of interest in CCTs, EOY |  |
| INT\_MASTER\_TR\_EOY\_AMT | Original | Schedule H Part I, 1c(11) | Value of interest in MTIAs, EOY |  |
| INT\_MASTER\_TR\_EOY\_AME | Edited | Schedule H Part I, 1c(11) | Value of interest in MTIAs, EOY |  |
| INT\_ON\_CORP\_DEBT\_AMT | Original | Schedule H Part II, 2b(1)(C) | Interest Earnings - Corporate debt instruments |  |
| INT\_ON\_CORP\_DEBT\_AME | Edited | Schedule H Part II, 2b(1)(C) | Interest Earnings - Corporate debt instruments |  |
| INT\_ON\_GOVT\_SEC\_AMT | Original | Schedule H Part II, 2b(1)(B) | Interest Earnings - U.S. Govt securities |  |
| INT\_ON\_GOVT\_SEC\_AME | Edited | Schedule H Part II, 2b(1)(B) | Interest Earnings - U.S. Govt securities |  |
| INT\_ON\_OTH\_INVST\_AMT | Original | Schedule H Part II, 2b(1)(F) | Interest Earnings - Other |  |
| INT\_ON\_OTH\_INVST\_AME | Edited | Schedule H Part II, 2b(1)(F) | Interest Earnings - Other |  |
| INT\_ON\_OTH\_LOANS\_AMT | Original | Schedule H Part II, 2b(1)(D) | Interest Earnings - Loans (other than to participants) |  |
| INT\_ON\_OTH\_LOANS\_AME | Edited | Schedule H Part II, 2b(1)(D) | Interest Earnings - Loans (other than to participants) |  |
| INT\_ON\_PARTCP\_LOANS\_AMT | Original | Schedule H Part II, 2b(1)(E) | Interest Earnings - Participant loans |  |
| INT\_ON\_PARTCP\_LOANS\_AME | Edited | Schedule H Part II, 2b(1)(E) | Interest Earnings - Participant loans |  |
| INT\_POOL\_SEP\_ACCT\_EOY\_AMT | Original | Schedule H Part I, 1c(10) | Value of interest in PSAs, EOY |  |
| INT\_POOL\_SEP\_ACCT\_EOY\_AME | Edited | Schedule H Part I, 1c(10) | Value of interest in PSAs, EOY |  |
| INT\_REG\_INVST\_CO\_EOY\_AMT | Original | Schedule H Part I, 1c(13) | Value of interest in registered investment companies (e.g., mutual funds), EOY |  |
| INT\_REG\_INVST\_CO\_EOY\_AME | Edited | Schedule H Part I, 1c(13) | Value of interest in registered investment companies (e.g., mutual funds), EOY |  |
| INVST\_MGMT\_FEES\_AMT | Original | Schedule H Part II, 2i(3) | Administrative expenses – Investment advisory and management fees |  |
| INVST\_MGMT\_FEES\_AME | Edited | Schedule H Part II, 2i(3) | Administrative expenses – Investment advisory and management fees |  |
| [IOB\_ASST](#_IOB_*) | OPR Generated |  | Other or unspecified assets (Sch. H and I) |  |
| [IOB\_EXP](#_IOB_*) | OPR Generated |  | Other or unspecified expenses (Sch. H and I) |  |
| [IOB\_INC](#_IOB_*) | OPR Generated |  | Other or unspecified income (Sch. H and I) |  |
| [IOH\_AEXP](#_IOH_*) | OPR Generated |  | Other or unspecified administrative expenses (Sch. H only) |  |
| [IOH\_ADMIN](#_IOH_*) | OPR Generated |  | Other or unspecified administrative expenses (Sch. H, Sch. I, and Form 5500-SF) |  |
| [IOH\_APP](#_IOH_*) | OPR Generated |  | Unspecified appreciation (Sch. H only) |  |
| [IOH\_ASST](#_IOH_*) | OPR Generated |  | Other or unspecified assets (Sch. H only) |  |
| [IOH\_ASST\_C7](#_IOH_*) | OPR Generated |  | Other or unspecified assets (Sch. H only) |  |
| [IOH\_BEN](#_IOH_*) | OPR Generated |  | Other or unspecified benefits (Sch. H only) |  |
| [IOH\_CONT](#_IOH_*) | OPR Generated |  | Unspecified contributions (Sch. H only) |  |
| [IOH\_CONT\_C12](#_IOH_CONT_C12) | OPR Generated |  | Unspecified contributions (Sch. H only) |  |
| [IOH\_CONTRIB](#_IOH_*) | OPR Generated |  | Unspecified contributions (Sch. H, Sch. I, and Form 5500-SF) |  |
| [IOH\_DISTRIB](#_IOH_*) | OPR Generated |  | Unspecified distributions (Sch. H, Sch. I, and Form 5500-SF) |  |
| [IOH\_DIV](#_IOH_*) | OPR Generated |  | Unspecified dividends (Sch. H only) |  |
| [IOH\_EXP](#_IOH_*) | OPR Generated |  | Unspecified expenses (Sch. H only) |  |
| [IOH\_INC](#_IOH_*) | OPR Generated |  | Other or unspecified income (Sch. H only) |  |
| [IOH\_INC\_C12](#_IOH_INC_C12) | OPR Generated |  | Other or unspecified income (Sch. H only) |  |
| [IOH\_INT](#_IOH_*) | OPR Generated |  | Other or unspecified interest (Sch. H only) |  |
| [IOH\_LIAB](#_IOH_*) | OPR Generated |  | Other liabilities (Sch. H only) |  |
| [ITB\_LIAB](#_ITB_LIAB) | OPR Generated |  | Total liabilities (Sch. H and I) |  |
| JOINT\_VENTURE\_EOY\_AMT | Original | Schedule H Part I, 1c(5) | Partnership/joint venture interests, EOY |  |
| JOINT\_VENTURE\_EOY\_AME | Combined Edited | Schedule H Part I, 1c(5) or Schedule I Part I, 3a | Partnership/joint venture interests, EOY |  |
| [LARGE](#_LARGE) | OPR Generated |  | Plan is a "large" plan, i.e., 100 or more total participants | 1 = yes, 0 = no |
| LAST\_RPT\_PLAN\_NUM | Combined Original | Form 5500 Part II, 4c or  Form 5500-SF Part II, 4c | Last reported plan number of the plan |  |
| LAST\_RPT\_SPONS\_EIN | Combined Original | Form 5500 Part II, 4b or Form 5500-SF Part II, 4b | Last reported EIN of the sponsor |  |
| LAST\_RPT\_SPONS\_NAME | Combined Original | Form 5500 Part II, 4a or Form 5500-SF Part II, 4a | Last reported name of the sponsor |  |
| LOANS\_AST | OPR Generated | Schedule H Part I, 1l or Schedule I Part I, 1c or Form 5500-SF Part III, 7c | Sum of other loans and participant loans on Schedule H or Schedule I |  |
| NET\_ASSETS\_EOY\_AMT | Original | Schedule H Part I, 1l | Net assets, EOY |  |
| NET\_ASSETS\_EOY\_AME | Combined Edited | Schedule H Part I, 1l or Schedule I Part I, 1c or Form 5500-SF Part III, 7c | Net assets, EOY |  |
| NET\_INCOME\_AMT | Original | Schedule H Part II, 2k | Net income |  |
| NET\_INCOME\_AME | Combined Edited | Schedule H Part II, 2k or Schedule I Part I, 2k or Form 5500-SF Part III, 8i | Net income |  |
| NON\_CASH\_CONTRIB\_BS\_AMT | Original | Schedule H Part II, 2a(2) | Noncash contributions |  |
| NON\_CASH\_CONTRIB\_BS\_AME | Combined Edited | Schedule H Part II, 2a(2) or Schedule I Part I, 2b | Noncash contributions |  |
| NON\_INT\_BEAR\_CASH\_EOY\_AMT | Original | Schedule H Part I, 1a | Total noninterest bearing cash, EOY |  |
| NON\_INT\_BEAR\_CASH\_EOY\_AME | Edited | Schedule H Part I, 1a | Total noninterest bearing cash, EOY |  |
| OPRTNG\_PAYABLE\_EOY\_AMT | Original | Schedule H Part I, 1h | Operating payables, EOY |  |
| OPRTNG\_PAYABLE\_EOY\_AME | Edited | Schedule H Part I, 1h | Operating payables, EOY |  |
| OTH\_BNFT\_PAYMENT\_AMT | Original | Schedule H Part II, 2e(3) | Other benefit payments |  |
| OTH\_BNFT\_PAYMENT\_AME | Edited | Schedule H Part II, 2e(3) | Other benefit payments |  |
| OTH\_CONTRIB\_RCVD\_AMT | Original | Schedule H Part II, 2a(1)(c) | Other cash contributions |  |
| OTH\_CONTRIB\_RCVD\_AME | Combined Edited | Schedule H Part II, 2a(1)(c) or Schedule I Part I, 2a(3) or Form 5500-SF Part III, 8a(3) | Other cash contributions |  |
| OTH\_INVST\_EOY\_AMT | Original | Schedule H Part I, 1c(15) | Other general investments, EOY |  |
| OTH\_INVST\_EOY\_AME | Edited | Schedule H Part I, 1c(15) | Other general investments, EOY |  |
| OTHER\_ADMIN\_FEES\_AMT | Original | Schedule H Part II, 2i(4) | Administrative expenses - Other |  |
| OTHER\_ADMIN\_FEES\_AME | Edited | Schedule H Part II, 2i(4) | Administrative expenses – Other |  |
| OTHER\_AST | OPR Generated |  | Sum of other investments, employer securities, employer property, and buildings used from Schedule H or Schedule I |  |
| OTHER\_EXPENSES\_AME | Combined Edited | Schedule I Part I, 2i or Form 5500-SF 8g | Other expenses |  |
| OTHER\_INCOME\_AMT | Original | Schedule H Part II, 2c | Other income |  |
| OTHER\_INCOME\_AME | Combined Edited | Schedule H Part II, 2c or Schedule I Part I, 2c or Form 5500-SF Part III, 8b | Other income |  |
| OTHER\_LIAB\_EOY\_AMT | Original | Schedule H Part I, 1j | Other liabilities, EOY |  |
| OTHER\_LIAB\_EOY\_AME | Combined Edited | Schedule H Part I, 1j or Schedule I Part I, 1b or (Form 5500-SF Part I, 1a) - (Form 5500-SF Part I, 1c) | Other liabilities, EOY |  |
| OTHER\_LOANS\_EOY\_AMT | Original | Schedule H Part I, 1c(7) | Loans (other than to participants), EOY |  |
| OTHER\_LOANS\_EOY\_AME | Combined Edited | Schedule H Part I, 1c(7) or Schedule I Part I, 3f | Loans (other than to participants), EOY |  |
| [OTHER\_ONLY\_PREM](#_HEALTH_ONLY_PREM,_HEALTH_STOPLOSS_P) | Original | Schedule A | Premium paid for non-health, non-stop-loss contracts |  |
| OTHER\_RECEIVABLES\_EOY\_AMT | Original | Schedule H Part I, 1b(3) | Receivables - other receivables, EOY |  |
| OTHER\_RECEIVABLES\_EOY\_AME | Edited | Schedule H Part I, 1b(3) | Receivables - other receivables, EOY |  |
| [PART8](#_PART8) | OPR Generated |  | Total participants, formatted |  |
| PART13 | OPR Generated |  | Total participants, formatted |  |
| PART14 | OPR Generated |  | Total participants, formatted |  |
| PARTCP\_ACCOUNT\_BAL\_CNT | Combined Original | Form 5500 Part II, 6g or Form 5500-SF Part II, 5c | Number of participants with account balances as of the end of the year (defined contribution plans only) |  |
| PARTCP\_ACCOUNT\_BAL\_CNE | Combined Edited | Form 5500 Part II, 6g or Form 5500-SF Part II, 5c | Number of participants with account balances as of the end of the year (defined contribution plans only) |  |
| PARTCP\_CONTRIB\_EOY\_AMT | Original | Schedule H Part I, 1b(2) | Receivables - participant contributions, EOY |  |
| PARTCP\_CONTRIB\_EOY\_AME | Edited | Schedule H Part I, 1b(2) | Receivables - participant contributions, EOY |  |
| PARTCP\_LOANS\_EOY\_AMT | Original | Schedule H Part I, 1c(8) | Participant loans, EOY |  |
| PARTCP\_LOANS\_EOY\_AME | Combined Edited | Schedule H Part I, 1c(8) or Schedule I Part I, 3e | Participant loans, EOY |  |
| PARTICIPANT\_CONTRIB\_AMT | Original | Schedule H Part II, 2a(1)(B) | Cash contributions from participants |  |
| PARTICIPANT\_CONTRIB\_AME | Combined Edited | Schedule H Part II, 2a(1)(B)  or Schedule I Part I, 2a(2) or Form 5500-SF Part III, 8a(2) | Cash contributions from participants |  |
| PART\_JOINT\_INT\_AST | OPR Generated |  | Equals partnership/joint venture interests, EOY from Schedule H or Schedule I |  |
| PLAN\_NAME | Combined Original | Form 5500 Part II, 1a or Form 5500-SF Part II, 1a | Name of plan |  |
| PLAN\_NAME\_E | Combined Edited | Form 5500 Part II, 1a or Form 5500-SF Part II, 1a | Name of plan |  |
| PREF\_STOCK\_EOY\_AMT | Original | Schedule H Part I, 1c(4)(A) | Corporate stocks - Preferred, EOY |  |
| PREF\_STOCK\_EOY\_AME | Edited | Schedule H Part I, 1c(4)(A) | Corporate stocks - Preferred, EOY |  |
| PROFESSIONAL\_FEES\_AMT | Original | Schedule H Part II, 2i(1) | Administrative expenses - Professional fees |  |
| PROFESSIONAL\_FEES\_AME | Edited | Schedule H Part II, 2i(1) | Administrative expenses - Professional fees |  |
| [PYB](#_PYB_and_PYE) | OPR Generated |  | Plan year begin date |  |
| [PYE](#_PYB_and_PYE) | OPR Generated |  | Plan year end date |  |
| REAL\_ESTATE\_AST | OPR Generated |  | Equals real estate investments from Schedule H or Schedule I. |  |
| REAL\_ESTATE\_EOY\_AMT | Original | Schedule H Part I, 1c(6) | Real estate (other than employer real property), EOY |  |
| REAL\_ESTATE\_EOY\_AME | Combined Edited | Schedule H Part I, 1c(6)  or  Schedule I Part I, 3c | Real estate (other than employer real property), EOY |  |
| RECEIVABLES\_AST | OPR Generated |  | Sum of employer contributions, participant contributions, and other receivables from the Schedule H balance sheet |  |
| REG\_INVST\_CO\_AST | OPR Generated |  | Value of interest in registered investment companies (e.g. mutual funds), EOY from Schedule H |  |
| REGISTERED\_INVST\_AMT | Original | Schedule H Part II, 2(2)(c) | Dividends from registered investment company shares |  |
| REGISTERED\_INVST\_AME | Edited | Schedule H Part II, 2(2)(c) | Dividends from registered investment company shares |  |
| RES\_TERM\_PLAN\_ADPT\_IND | Combined Original | Schedule H Part II, 5a or Schedule I Part II, 5a or Form 5500-SF Part VII, 13a | Was a resolution to terminate the plan adopted? | 1 = yes |
| [RTD\_SEP\_PARTCP\_FUT\_CNT](#_RTD_SEP_PARTCP_FUT_CNT) | Original | Form 5500 Part II, 6c | Number of other retired or separated participants entitled to future benefits |  |
| RTD\_SEP\_PARTCP\_FUT\_CNE | Edited | Form 5500 Part II, 6c | Number of other retired or separated participants entitled to future benefits |  |
| [RTD\_SEP\_PARTCP\_RCVG\_CNT](#_RTD_SEP_PARTCP_RCVG_CNT) | Original | Form 5500 Part II, 6b | Number of retired or separated participants receiving benefits |  |
| RTD\_SEP\_PARTCP\_RCVG\_CNE | Edited | Form 5500 Part II, 6b | Number of retired or separated participants receiving benefits |  |
| SEP\_PARTCP\_PARTL\_VSTD\_CNT | Original | Form 5500 Part II, 6h | Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested |  |
| SEP\_PARTCP\_PARTL\_VSTD\_CNE | Edited | Form 5500 Part II, 6h | Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested |  |
| SF\_ADMIN\_SRVC\_PROVIDERS\_AMT | Original | Form 5500-SF Part III, 8f | Expenses paid to administrative service providers |  |
| SF\_ADMIN\_SRVC\_PROVIDERS\_AME | Edited | Form 5500-SF Part III, 8f | Expenses paid to administrative service providers |  |
| SF\_ALL\_PLAN\_AST\_DISTRIB\_IND | Original | Form 5500-SF, Part VII, 13b | Were all the plan assets distributed to participants or beneficiaries, transferred to another plan, or brought under control of the PBGC? | 1 = yes |
| SF\_CORRECTIVE\_DEEMED\_DISTR\_AMT | Original | Form 5500-SF Part III, 8e | Certain deemed and/or corrective distributions |  |
| SF\_CORRECTIVE\_DEEMED\_DISTR\_AME | Edited | Form 5500-SF Part III, 8e | Certain deemed and/or corrective distributions |  |
| SF\_EMPLR\_CONTRIB\_INCOME\_AMT | Original | Form 5500-SF Part III, 8a(1) | Employer contributions |  |
| SF\_EMPLR\_CONTRIB\_INCOME\_AME | Edited | Form 5500-SF Part III, 8a(1) | Employer contributions |  |
| SF\_NET\_ASSETS\_EOY\_AMT | Original | Form 5500-SF Part III, 7c | Net assets as of the end of the plan year |  |
| SF\_NET\_ASSETS\_EOY\_AME | Edited | Form 5500-SF Part III, 7c | Net assets as of the end of the plan year |  |
| SF\_NET\_INCOME\_AMT | Original | Form 5500-SF Part III, 8i | Net income |  |
| SF\_NET\_INCOME\_AME | Edited | Form 5500-SF Part III, 8i | Net income |  |
| SF\_OTH\_CONTRIB\_RCVD\_AMT | Original | Form 5500-SF Part III, 8a(3) | Other contributions |  |
| SF\_OTH\_CONTRIB\_RCVD\_AME | Edited | Form 5500-SF Part III, 8a(3) | Other contributions |  |
| SF\_OTH\_EXPENSES\_AMT | Original | Form 5500-SF 8g | Other expenses |  |
| SF\_OTH\_EXPENSES\_AME | Edited | Form 5500-SF 8g | Other expenses |  |
| SF\_OTHER\_INCOME\_AMT | Original | Form 5500-SF Part III, 8b | Other income |  |
| SF\_OTHER\_INCOME\_AME | Edited | Form 5500-SF Part III, 8b | Other income |  |
| SF\_PARTICIP\_CONTRIB\_INCOME\_AMT | Original | Form 5500-SF Part III, 8a(2) | Participant contributions |  |
| SF\_PARTICIP\_CONTRIB\_INCOME\_AME | Edited | Form 5500-SF Part III, 8a(2) | Participant contributions |  |
| SF\_RES\_TERM\_PLAN\_ADPT\_IND | Original | Form 5500-SF Part VII, 13a | Was a resolution to terminate the plan adopted? | 1 = yes |
| SF\_TOT\_ASSETS\_EOY\_AMT | Original | Form 5500-SF Part III, 7c | Total assets as of the end of the plan year |  |
| SF\_TOT\_ASSETS\_EOY\_AME | Edited | Form 5500-SF Part III, 7c | Total assets as of the end of the plan year |  |
| SF\_TOT\_DISTRIB\_BNFT\_AMT | Original | Form 5500-SF Part III, 8d | Benefits paid |  |
| SF\_TOT\_DISTRIB\_BNFT\_AME | Edited | Form 5500-SF Part III, 8d | Benefits paid |  |
| SF\_TOT\_EXPENSES\_AMT | Original | Form 5500-SF Part III, 8h | Total expenses |  |
| SF\_TOT\_EXPENSES\_AME | Edited | Form 5500-SF Part III, 8h | Total expenses |  |
| SF\_TOT\_INCOME\_AMT | Original | Form 5500-SF Part III, 8c | Total income |  |
| SF\_TOT\_INCOME\_AME | Edited | Form 5500-SF Part III, 8c | Total income |  |
| SF\_TOT\_LIABILITIES\_EOY\_AMT | Original | Form 5500-SF Part III, 7b | Total liabilities as of the end of the plan year |  |
| SF\_TOT\_LIABILITIES\_EOY\_AME | Edited | Form 5500-SF Part III, 7b | Total liabilities as of the end of the plan year |  |
| SHORT\_PLAN\_YR\_IND | Combined Original | Form 5500 Part I, B or Form 5500-SF Part I, B | This return/report is a short plan year return/report (fewer than 12 months) |  |
| SMALL\_ADMIN\_SRVC\_PROVIDERS\_AMT | Original | Schedule I Part I, 2h | Administrative service providers (salaries, fees, and commissions) |  |
| SMALL\_ADMIN\_SRVC\_PROVIDERS\_AME | Edited | Schedule I Part I, 2h | Administrative service providers (salaries, fees, and commissions) |  |
| SMALL\_ALL\_PLAN\_AST\_DISTRIB\_IND | Original | Schedule I Part II, 4j | Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? | 1 = yes |
| SMALL\_CORRECTIVE\_DISTRIB\_AMT | Original | Schedule I Part I, 2f | Corrective distributions |  |
| SMALL\_CORRECTIVE\_DISTRIB\_AME | Edited | Schedule I Part I, 2f | Corrective distributions |  |
| SMALL\_DEEM\_DSTRB\_PARTCP\_LN\_AMT | Original | Schedule I Part I, 2g | Certain deemed distributions of participant loans |  |
| SMALL\_DEEM\_DSTRB\_PARTCP\_LN\_AME | Edited | Schedule I Part I, 2g | Certain deemed distributions of participant loans |  |
| SMALL\_EMPLR\_CONTRIB\_INCOME\_AMT | Original | Schedule I Part I, 2a(1) | Employer contributions |  |
| SMALL\_EMPLR\_CONTRIB\_INCOME\_AME | Edited | Schedule I Part I, 2a(1) | Employer contributions |  |
| SMALL\_EMPLR\_PROP\_EOY\_AMT | Original | Schedule I Part I, 3b | Employer property |  |
| SMALL\_EMPLR\_PROP\_EOY\_AME | Edited | Schedule I Part I, 3b | Employer property |  |
| SMALL\_EMPLR\_SEC\_EOY\_AMT | Original | Schedule I Part I, 3d | Employer securities |  |
| SMALL\_EMPLR\_SEC\_EOY\_AME | Edited | Schedule I Part I, 3d | Employer securities |  |
| SMALL\_INV\_REAL\_ESTATE\_EOY\_AMT | Original | Schedule I Part I, 3c | Real estate investments |  |
| SMALL\_INV\_REAL\_ESTATE\_EOY\_AME | Edited | Schedule I Part I, 3c | Real estate investments |  |
| SMALL\_JOINT\_VENTURE\_EOY\_AMT | Original | Schedule I Part I, 3a | Joint ventures / partnerships |  |
| SMALL\_JOINT\_VENTURE\_EOY\_AME | Edited | Schedule I Part I, 3a | Joint ventures / partnerships |  |
| SMALL\_MORTG\_PARTCP\_EOY\_AMT | Original | Schedule I Part I, 3e | Participant loans |  |
| SMALL\_MORTG\_PARTCP\_EOY\_AME | Edited | Schedule I Part I, 3e | Participant loans |  |
| SMALL\_NET\_ASSETS\_EOY\_AMT | Original | Schedule I Part I, 1c | Net Assets |  |
| SMALL\_NET\_ASSETS\_EOY\_AME | Edited | Schedule I Part I, 1c | Net Assets |  |
| SMALL\_NET\_INCOME\_AMT | Original | Schedule I Part I, 2k | Net Income |  |
| SMALL\_NET\_INCOME\_AME | Edited | Schedule I Part I, 2k | Net Income |  |
| SMALL\_NON\_CASH\_CONTRIB\_BS\_AMT | Original | Schedule I Part I, 2b | Non-cash contributions |  |
| SMALL\_NON\_CASH\_CONTRIB\_BS\_AME | Edited | Schedule I Part I, 2b | Non-cash contributions |  |
| SMALL\_OTH\_CONTRIB\_RCVD\_AMT | Original | Schedule I Part I, 2a(3) | Other contributions received/receivable |  |
| SMALL\_OTH\_CONTRIB\_RCVD\_AME | Edited | Schedule I Part I, 2a(3) | Other contributions received/receivable |  |
| SMALL\_OTH\_EXPENSES\_AMT | Original | Schedule I Part I, 2i | Other expenses |  |
| SMALL\_OTH\_EXPENSES\_AME | Edited | Schedule I Part I, 2i | Other expenses |  |
| SMALL\_OTH\_LNS\_PARTCP\_EOY\_AMT | Original | Schedule I Part I, 3f | Loans (other than to participants) |  |
| SMALL\_OTH\_LNS\_PARTCP\_EOY\_AME | Edited | Schedule I Part I, 3f | Loans (other than to participants) |  |
| SMALL\_OTHER\_INCOME\_AMT | Original | Schedule I Part I, 2c | Other Income |  |
| SMALL\_OTHER\_INCOME\_AME | Edited | Schedule I Part I, 2c | Other Income |  |
| SMALL\_PARTICIPANT\_CONTRIB\_AMT | Original | Schedule I Part I, 2a(2) | Participant contributions |  |
| SMALL\_PARTICIPANT\_CONTRIB\_AME | Edited | Schedule I Part I, 2a(2) | Participant contributions |  |
| SMALL\_PERSONAL\_PROP\_EOY\_AMT | Original | Schedule I Part I, 3g | Personal property |  |
| SMALL\_PERSONAL\_PROP\_EOY\_AME | Edited | Schedule I Part I, 3g | Personal property |  |
| SMALL\_RES\_TERM\_PLAN\_ADPT\_IND | Original | Schedule I Part II, 5a | Was a resolution to terminate the plan adopted? | 1 = yes |
| SMALL\_TOT\_ASSETS\_EOY\_AMT | Original | Schedule I Part I, 1a | Total assets |  |
| SMALL\_TOT\_ASSETS\_EOY\_AME | Edited | Schedule I Part I, 1a | Total assets |  |
| SMALL\_TOT\_DISTRIB\_BNFT\_AMT | Original | Schedule I Part I, 2e | Total benefits paid |  |
| SMALL\_TOT\_DISTRIB\_BNFT\_AME | Edited | Schedule I Part I, 2e | Total benefits paid |  |
| SMALL\_TOT\_EXPENSES\_AMT | Original | Schedule I Part I, 2j | Total expenses |  |
| SMALL\_TOT\_EXPENSES\_AME | Edited | Schedule I Part I, 2j | Total expenses |  |
| SMALL\_TOT\_INCOME\_AMT | Original | Schedule I Part I, 2d | Total income |  |
| SMALL\_TOT\_INCOME\_AME | Edited | Schedule I Part I, 2d | Total income |  |
| SMALL\_TOT\_LIABILITIES\_EOY\_AMT | Original | Schedule I Part I, 1b | Total liabilities |  |
| SMALL\_TOT\_LIABILITIES\_EOY\_AME | Edited | Schedule I Part I, 1b | Total liabilities |  |
| SPONS\_DFE\_EIN | Combined Original | Form 5500 Part II, 2b or Form 5500-SF Part II, 2b | Sponsor EIN |  |
| SPONS\_DFE\_PN | Combined Original | Form 5500 Part II, 1b or Form 5500-SF Part II, 1b | Plan Number |  |
| SPONS\_DFE\_MAIL\_US\_CITY | Original | Form 5500 Part II, 2a | Sponsor city |  |
| SPONS\_DFE\_MAIL\_US\_STATE | Combined Original | Form 5500 Part II, 2a | Sponsor state |  |
| SPONS\_DFE\_MAIL\_US\_ZIP | Combined Original | Form 5500 Part II, 2a | Sponsor zip code |  |
| SPONSOR\_DFE\_NAME | Combined Original | Form 5500 Part II, 2a or Form 5500-SF Part II, 2a | Sponsor name |  |
| [SRDB\_ASST](#_SRDB_*) | OPR Generated |  | Sum of reported detail: Assets (Sch. H and I) |  |
| [SRDB\_EXP](#_SRDB_*) | OPR Generated |  | Sum of reported detail: Expenses (Sch. H and I) |  |
| [SRDB\_INC](#_SRDB_*) | OPR Generated |  | Sum of reported detail: Income (Sch. H and I) |  |
| [SRDH\_AEXP](#_SRDH_*) | OPR Generated |  | Sum of reported detail: Admin. Expense (Sch. H) |  |
| [SRDH\_APP](#_SRDH_*) | OPR Generated |  | Sum of reported detail: Appreciation (Sch. H) |  |
| [SRDH\_ASST](#_SRDH_*) | OPR Generated |  | Sum of reported detail: Assets (Sch. H) |  |
| [SRDH\_ASST\_C7](#_SRDH_*) | OPR Generated |  | Sum of reported detail: Assets (Sch. H), Table C7 |  |
| [SRDH\_BEN](#_SRDH_*) | OPR Generated |  | Sum of reported detail: Benefits (Sch. H) |  |
| [SRDH\_CASH](#_SRDH_*) | OPR Generated |  | Sum of reported detail: Cash (Sch. H) |  |
| [SRDH\_CONT](#_SRDH_*) | OPR Generated |  | Sum of reported detail: Contributions (Sch. H) |  |
| [SRDH\_CONT\_C12](#_SRDH_*) | OPR Generated |  | Sum of reported detail: Contributions (Sch. H) |  |
| [SRDH\_DIV](#_SRDH_*) | OPR Generated |  | Sum of reported detail: Dividends (Sch. H) |  |
| [SRDH\_EXP](#_SRDH_*) | OPR Generated |  | Sum of reported detail: Expenses (Sch. H) |  |
| [SRDH\_INC](#_SRDH_*) | OPR Generated |  | Sum of reported detail: Income (Sch. H) |  |
| [SRDH\_INC\_C12](#_SRDH_*) | OPR Generated |  | Sum of reported detail: Income (Sch. H) |  |
| [SRDH\_INT](#_SRDH_*) | OPR Generated |  | Sum of reported detail: Interest (Sch. H) |  |
| [SRDH\_LIAB](#_SRDH_*) | OPR Generated |  | Sum of reported detail: Liabilities (Sch. H) |  |
| [SRDH\_LOANS](#_SRDH_*) | OPR Generated |  | Sum of reported detail: Loans (Sch. H) |  |
| [SRDH\_REC](#_SRDH_*) | OPR Generated |  | Sum of reported detail: Receivables (Sch. H) |  |
| [SRDH\_STOCK](#_SRDH_*) | OPR Generated |  | Sum of reported detail: Stock (Sch. H) |  |
| STOCK\_AST | OPR Generated |  | Sum of preferred and common stock from Schedule H |  |
| [STOPLOSS\_ONLY\_PREM](#_HEALTH_ONLY_PREM,_HEALTH_STOPLOSS_P) | OPR Generated | Schedule A | Counts premium paid for stop-loss contracts that cover no other benefits |  |
| [STOPLOSS\_OTHER\_PREM](#_HEALTH_ONLY_PREM,_HEALTH_STOPLOSS_P) | OPR Generated | Schedule A | Counts premium paid for stop-loss contracts that cover benefits other than health |  |
| [SUBTL\_ACT\_RTD\_SEP\_CNT](#_SUBTL_ACT_RTD_SEP_CNT) | Combined Original | Form 5500 Part II, 6d or Form 5500-SF Part II, 5b | Subtotal of active, retired, and separated participants, EOY |  |
| SUBTL\_ACT\_RTD\_SEP\_CNE | Combined Edited | Form 5500 Part II, 6d or Form 5500-SF Part II, 5b | Subtotal of active, retired, and separated participants, EOY |  |
| TOT\_ACT\_RTD\_SEP\_BENEF\_CNT | Combined Original | Form 5500 Part II, 6f  or Form 5500-SF Part II, 5b | Number of active, retired, separated, and beneficiaries of deceased participants, EOY |  |
| TOT\_ACT\_RTD\_SEP\_BENEF\_CNE | Combined Edited | Form 5500 Part II, 6f  or Form 5500-SF Part II, 5b | Number of active, retired, separated, and beneficiaries of deceased participants, EOY |  |
| [TOT\_ACTIVE\_PARTCP\_CNT](#_TOT_ACT_PARTCP_CNT) | Combined Original | Form 5500 Part II, 6a(1) or Form 5500-SF Part II, 5c | Number of active participants, EOY |  |
| TOT\_ACTIVE\_PARTCP\_CNE | Combined Edited | Form 5500 Part II, 6a(1) or Form 5500-SF Part II, 5c | Number of active participants, EOY |  |
| TOT\_ADMIN\_EXPENSES\_AMT | Original | Schedule H Part II, 2i(5) | Administrative expenses – Total |  |
| TOT\_ADMIN\_EXPENSES\_AME | Combined Edited | Schedule H Part II, 2i(5) or Schedule I Part I, 2h or Form 5500-SF Part III, 8f | Administrative expenses – Total |  |
| TOT\_ASSETS\_EOY\_AMT | Original | Schedule H Part I, 1f | Total assets, EOY |  |
| TOT\_ASSETS\_EOY\_AME | Combined Edited | Schedule H Part I, 1f  or Schedule I Part I, 1a  or Form 5500-SF Part III, 7c | Total assets, EOY |  |
| TOT\_CONTRIB\_AMT | Original | Schedule H Part II, 2a(3) | Total contributions |  |
| TOT\_CONTRIB\_AME | Combined Edited | Schedule H Part II, 2a(3) or Sum of Schedule I Part I, 2a(1), 2a(2), 2a(3), and 2b or Sum of Form 5500-SF Part III, 8a(1), 8a(2), 8a(3) | Total contributions |  |
| TOT\_CORRECTIVE\_DISTRIB\_AMT | Original | Schedule H Part II, 2f | Corrective distributions |  |
| TOT\_CORRECTIVE\_DISTRIB\_AME | Combined Edited | Schedule H Part II, 2f  or Schedule I Part I, 2f  or Form 5500-SF Part III, 8e | Corrective distributions |  |
| TOT\_DISTRIB\_BNFT\_AMT | Original | Schedule H Part II, 2e(4) | Total benefit payments |  |
| TOT\_DISTRIB\_BNFT\_AME | Combined Edited | Schedule H Part II, 2e(4)  or Schedule I Part I, 2e  or Form 5500-SF Part III, 8d | Total benefit payments |  |
| TOT\_DEEMED\_DISTR\_PART\_LNS\_AMT | Original | Schedule H Part II, 2g | Certain deemed distributions of participant loans |  |
| TOT\_DM\_DISTRIB\_PTCP\_LNS\_E | Edited | Schedule H Part II, 2g or Schedule I Part I, 2g | Certain deemed distributions of participant loans |  |
| TOT\_EXPENSES\_AMT | Original | Schedule H Part II, 2j | Total expenses |  |
| TOT\_EXPENSES\_AME | Combined Edited | Schedule H Part II, 2j  or Schedule I Part I, 2j  or Form 5500-SF Part III, 8h | Total expenses |  |
| TOT\_GAIN\_LOSS\_SALE\_AST\_AMT | Original | Schedule H Part II, 2b(4)(C) | Net gain on sale of assets |  |
| TOT\_GAIN\_LOSS\_SALE\_AST\_AME | Edited | Schedule H Part II, 2b(4)(C) | Net gain on sale of assets |  |
| TOT\_INCOME\_AMT | Original | Schedule H Part II, 2d | Total income |  |
| TOT\_INCOME\_AME | Combined Edited | Schedule H Part II, 2d  or Schedule I Part I, 2d  or Form 5500-SF Part III, 8c | Total income |  |
| TOT\_INT\_EXPENSE\_AMT | Original | Schedule H Part II, 2h | Interest expense |  |
| TOT\_INT\_EXPENSE\_AME | Edited | Schedule H Part II, 2h | Interest expense |  |
| TOT\_INVESTMENT\_INCOME\_AME | Combined Edited | Schedule H Part II, 2b or Schedule I Part I, 2c or Form 5500-SF Part III, 8b | Sum of all earnings on investments |  |
| TOT\_LIABILITIES\_EOY\_AMT | Original | Schedule H Part I, 1k | Total liabilities, EOY |  |
| TOT\_LIABILITIES\_EOY\_AME | Combined Edited | Schedule H Part I, 1k  or Schedule I Part I, 1b  or Form 5500-SF Part III, 7b | Total liabilities, EOY |  |
| TOT\_PARTCP\_BOY\_CNT | Combined Original | Form 5500 Part II, 5 or Form 5500-SF Part II, 5a | Total participants, beginning-of-year |  |
| TOT\_PARTCP\_BOY\_CNE | Combined Edited | Form 5500 Part II, 5 or Form 5500-SF Part II, 5a | Total participants, beginning-of-year |  |
| TOT\_PREM | OPR Generated | Schedule A | Sum of premiums paid for all insurance contracts |  |
| TOT\_UNREALZD\_APPRCTN\_AMT | Original | Schedule H Part II, 2b(5)(C) | Unrealized appreciation - Total |  |
| TOT\_UNREALZD\_APPRCTN\_AME | Edited | Schedule H Part II, 2b(5)(C) | Unrealized appreciation - Total |  |
| TOTAL\_DIVIDENDS\_AMT | Original | Schedule H Part II, 2b(2)(D) | Dividends - Total |  |
| TOTAL\_DIVIDENDS\_AME | Edited | Schedule H Part II, 2b(2)(D) | Dividends - Total |  |
| TOTAL\_INTEREST\_AMT | Original | Schedule H Part II, 2b(1)(G) | Interest Earnings - Total |  |
| TOTAL\_INTEREST\_AME | Edited | Schedule H Part II, 2b(1)(G) | Interest Earnings - Total |  |
| TOTAL\_RENTS\_AMT | Original | Schedule H Part II, 2b(3) | Rents - Total |  |
| TOTAL\_RENTS\_AME | Edited | Schedule H Part II, 2b(3) | Rents - Total |  |
| TPART | OPR Generated |  | Total participants. Equal to SUBTL\_ACT\_RTD\_SEP\_CNE | Total participants. Equal to SUBTL\_ACT\_RTD\_SEP\_CNE |
| TYPE\_PLAN\_ENTITY\_CD | Combined Original | Form 5500 Part I, A or Form 5500-SF Part I, A | Type of plan entity | 1= multiemployer plan, 2 = single employer plan, 3 = multiple-employer plan, 4 = DFE |
| TYPE\_PLAN\_ENTITY\_CD\_E | Combined Edited | Form 5500 Part I, A or Form 5500-SF Part I, A | Type of plan entity | 1= multiemployer plan, 2 = single employer plan, 3 = multiple-employer plan, 4 = DFE |
| TYPE\_WELFARE\_BNFT\_CODE | Combined Original | Form 5500 Part I, 8b or Form 5500-SF Part IV, 9b | Welfare characteristics code |  |
| TYPE\_WELFARE\_BNFT\_CODE\_E | Combined Edited | Form 5500 Part I, 8b or Form 5500-SF Part IV, 9b | Welfare characteristics code |  |
| UNREALZD\_APPRCTN\_OTH\_AMT | Original | Schedule H Part II, 2b(5)(B) | Unrealized appreciation - Other |  |
| UNREALZD\_APPRCTN\_OTH\_AME | Edited | Schedule H Part II, 2b(5)(B) | Unrealized appreciation - Other |  |
| UNREALZD\_APPRCTN\_RE\_AMT | Original | Schedule H Part II, 2b(5)(A) | Unrealized appreciation - Real estate |  |
| UNREALZD\_APPRCTN\_RE\_AME | Edited | Schedule H Part II, 2b(5)(A) | Unrealized appreciation - Real estate |  |
| [UNSPEC\_DIST\_BNFT\_AME](#_UNSPEC_DIST_BNFT_AME) | OPR Generated |  | Unspecified benefits distributed. |  |
| [UNSPEC\_INVEST\_EOY\_AME](#_UNSPEC_INVEST_EOY_AME) | OPR Generated |  | Unspecified investments |  |

# VIII. Contents of the 2020 Form 5500 Group Health Plans Research File Package

|  |  |  |
| --- | --- | --- |
| **File name** | **Type** | **Contents** |
| GHPB20.sas7bdat | SAS data set | The *2020 GHP Research File*. SAS Version 9 data set used to create the *Group Health Plans Report: Abstract of 2020 Form 5500 Annual Reports*. Variables are from Form 5500, Form 5500-SF, Schedule A, Schedule H, and Schedule I. |
| GIA20.sas7bdat | SAS data set | A supplementary data set that includes group insurance arrangements that provided health benefits. The structure of the file is identical to that of the *2020 GHP Research File*. |
| 2020 Group Health Plans Bulletin [FINAL].pdf | Adobe PDF | *Group Health Plans Report: Abstract of 2020 Form 5500 Annual Reports* |
| SIGHPB GHP Excel Tables.xlsx | MS Excel | Microsoft Excel tables corresponding to the tables found in the *Group Health Plans Report: Abstract of 2020 Form 5500 Annual Reports.* |
| SIGHPB XML Tables.xml | XML | XML tables corresponding to the tables found in the *Group Health Plans Report: Abstract of 2020 Form 5500 Annual Reports.* |
| SIGHPB GIA Excel Tables.xlsx | MS Excel | Microsoft Excel tables corresponding to the tables found in Appendix A2 of the *Group Health Plans Report: Abstract of 2020 Form 5500 Annual Reports.* |
| SIGHPB GIA XML Tables.xml | XML | XML tables corresponding to the tables found in Appendix A2 of the *Group Health Plans Report: Abstract of 2020 Form 5500 Annual Reports.* |
| A1.sas | SAS program | Creates *GHP Report* table A1. More examples of PROC Tabulate code available upon request. Run ‘Insurance Formats.sas’ before running this program. |
| A2, A3, B1, B2, etc. | SAS program | More examples of PROC TABULATE code used to create bulletin tables. |
| Insurance Formats.sas | SAS program | Creates the format library that must exist before any SAS programs can be run on the SAS data set above. |
| 2020 Form 5500 Group Health Plans Research File User Guide.pdf | Adobe PDF | This document. |
| Name-Filled Forms | Adobe PDF | Shows variable names and where they are found on the Form 5500, Form 5500-SF, and Schedules A, H, and I. |
| README.txt | TXT | General description of contents of downloadable *GHP* *Research Files* package. |

1. *See* ERISA Section 101 *et seq.*, 29 U.S.C. 1021 *et seq*., and accompanying regulations. The data used for this report were taken from the Form 5500 data for plan year 2020. For plan years beginning on or after January 1, 2009, certain eligible small plans are able to file the Form 5500-SF “Short Form Annual Return/Report of Small Employee Benefit Plan.” Small plans using the Form 5500-SF include information about total fees and commissions paid with respect to the purchase of insurance. [↑](#footnote-ref-2)
2. 29 C.F.R. 2520.104-1 *et seq*. [↑](#footnote-ref-3)
3. An unfunded welfare benefit plan has its benefits paid as needed directly from the general assets of the employer or employee organization that sponsors the plan. A combination unfunded/insured welfare benefit plan has its benefits partially as an unfunded plan and partially as a fully insured plan. An example of such a plan is a welfare benefit plan that provides unfunded medical benefits and life insurance benefits. [↑](#footnote-ref-4)
4. *See* DOL Technical Release 92-01, 57 Fed. Reg. 23272 (June 2, 1992) and 58 Fed. Reg. 45359 (Aug. 27, 1993). [↑](#footnote-ref-5)
5. An additional dataset is also provided that consists of all group insurance arrangements that filed a Form 5500 Annual Return/Report and offered a health benefit to the covered participants. Note, however, that these entities are not group health plans. [↑](#footnote-ref-6)
6. Some retirement benefit plans participate in investment arrangements that either are required to file a Form 5500 or can choose to do so. In these instances, the participating plans receive certain relief in financial reporting. These investment arrangement entities are referred to as Direct Filing Entities. [↑](#footnote-ref-7)
7. For the purposes of the *GHP* *Research File,* a GIA is determined to provide health benefits if the filing lists “4A” on Part II, Line 8b of the Form 5500 or Part VI, Line 9b of the Form 5500-SF. In certain instances, the Department may determine that a filing was filed with “4A” in error. In these cases, the GIA will not be included and a footnote will be included in the *GHP Report* noting the details of the exclusion. [↑](#footnote-ref-8)
8. *Employer Health Benefits, 2020 Annual Survey.* Kaiser Family Foundation and Health Research & Educational Trust. Available at http://kff.org/health-costs/report/2020-employer-health-benefits-survey. [↑](#footnote-ref-9)
9. Although Schedule A health insurance contracts reporting a per capita premium below this level are not considered evidence of health insurance for the purpose of determining plan funding mechanism, they are ultimately counted as health insurance contracts in the event that the plan is deemed fully insured. [↑](#footnote-ref-10)
10. The same per-participant threshold applies as is used to accept a Schedule A as evidence of health insurance. Specifically, per-participant payments must be at least 30% of the average cost of single health coverage in the United States, as documented by the annual KFF/HRET Survey. [↑](#footnote-ref-11)
11. *Ibid.* [↑](#footnote-ref-12)
12. If Part III, Line 9a(4) is blank or zero, then this bullet instead uses Part III, Line 9e – dividends of retroactive rate refunds due. [↑](#footnote-ref-13)
13. The Form 5500 instructs welfare plans to complete only Lines 6a(1), 6a(2), 6b, 6c, and 6d. [↑](#footnote-ref-14)
14. Part I, Line A of the Form 5500-SF also includes checkboxes for “a one-participant plan” and “a foreign plan.” However, these plans are not required to file a report under title I of ERISA. Instead, these plans may elect to file a Form 5500-SF rather than filing a Form 5500-EZ to meet reporting requirements for the Internal Revenue Service. These plans are excluded from the *GHP Research File.* [↑](#footnote-ref-15)
15. For the purposes of the *GHP* *Research File,* a GIA is determined to provide health benefits if the filing lists “4A” on Part II, Line 8b of the Form 5500 or Part VI, Line 9b of the Form 5500-SF. [↑](#footnote-ref-16)
16. These discrepancies were much more substantial prior to the adoption of electronic filing through EFAST2 in 2010. Since then, less than 1% of plans have been reclassified due to these edits each year. [↑](#footnote-ref-17)
17. Prior to the *2017 GHP Research File*, these plans were reclassified as single employer due to the fact that multiple-employer plans were not separated out as a distinct entity type group. [↑](#footnote-ref-18)
18. The *Private Pension Plan Research File* does edit these items; however, for the *GHP Research File,* OPR relies funding and benefit arrangements as submitted by plans, because these values are used to characterize plans as self-insured, fully insured, or mixed-insured. [↑](#footnote-ref-19)
19. Form 5500 Instructions direct welfare plans *not* to complete the field for “decreased participants whose beneficiaries are receiving or are entitled to benefits” (Part II, Line 6e). [↑](#footnote-ref-20)
20. If Part III, Line 9a(4) is blank or zero, then this bullet instead uses Part III, Line 9e – dividends of retroactive rate refunds due. [↑](#footnote-ref-21)