



**Dependent Reinstatement
Termination File Inbound Layout
RFP entitled:
“Dental Plan Services”**

File Layout for Inbound Reinstatement/Termination File

File layout is currently a “|” pipe delimited between fields.

Field Name	Length	Data Type	Field Description
National ID	9	Character	The national identification number (or SSN) for policy contract holder.
Effective Date	8	Date	Date the transaction would be effective. Formatted in YYYYMMDD.
First Name	30	Character	Dependents first name.
Middle Initial	1	Character	Dependents middle initial.
Last Name	30	Character	Dependents last name.
Birthdate	8	Date	Date of birth for the dependent. Formatted in YYYYMMDD.
Relationship	1	Character	Single character representation for the dependent's relationship (S = Son, D = Daughter, C = Child).
Dependent SSN	9	Character	The national identification number (or SSN) for the dependent.
Place Holder			Reserved for future use if needed.
Termination Date	8	Date	Termination date for Action's that are of type "T". Formatted in YYYYMMDD.
Dependent Beneficiary Number	2	Character	2 digit Numeric value (padded with 0 when less than 10) to associate dependent back to NYS benefits system. Values start with at minimum '02' for any dependent on a contract holders policy, since contact holder is already assigned 01.
Benefit Program	3	Character	3 character benefit program to associate union related benefit options from NYS benefits system.
Action	1	Character	Coverage election (R = Reinstatement, T = Termination).