



California Department of Health Care Access and Information (HCAI)
Office of Health Care Affordability (OHCA)

Nonsupervisory Organized Labor Adjustment (NOLA) Request File Specifications Document

DRAFT Version 1.0

September 2026

Table of Contents

Version History	2
1 Introduction	3
1.1 Contact Information	3
1.2 Request Submission Deadlines	4
1.3 Changes to this Guide	4
2 Account Creation	5
3 Required Information	5
3.1 Supporting Documentation	5
4 File Layout and Field Specifications	6
4.1 NOLA Request File	6
5 Request Submission	9

Version History

Version	Date	Summary of Changes
1.0	September 2026	

1 Introduction

This file specifications document is intended for use by providers and fully integrated delivery systems (FIDS), and/or associated parties (“requestors”) when submitting requests for spending target adjustments based on nonsupervisory organized labor costs to the Office of Health Care Affordability (OHCA). This document provides technical specifications, file layouts, reporting schedules, and other instructions to ensure the submission of requests in a standardized format. This document is incorporated by reference at Title 22, section 97451(d).

The requestor interactions described in this document will occur in the secure Nonsupervisory Organized Labor Adjustment Portal (NOLA Portal), which is the platform for submitting requests and supporting documentation to OHCA. The NOLA Portal may be accessed at <https://hcai.ca.gov/login/>.

OHCA actively maintains a website (<https://hcai.ca.gov/ohca/>) with information about OHCA’s mission, including background, links to state statutes and regulations, a link to this document, the NOLA Portal, contact information, and other resources for requestors.

1.1 Contact Information

OHCA staff are available to answer questions regarding the process and mechanics of data submission and technical issues regarding the contents of data files and elements and reporting timeframes.

For program questions about OHCA, contact ohca@hcai.ca.gov or visit <https://hcai.ca.gov/ohca>.

1.2 Request Submission Deadlines

OHCA must receive requests for spending target adjustment from providers, FIDS, and/or associated parties on behalf of providers or FIDS by the last business day of October two years preceding the year for which an adjustment is requested.

Figure 1. Spending Target Adjustment Timeline



1.3 Changes to this Guide

Consistent with Health and Safety Code section 127501.4(k), prior to making substantive changes to this document, OHCA will engage with relevant stakeholders, hold a public meeting to solicit input, and provide a response to input received.

For notice of potential regulatory actions or public meetings, subscribe to OHCA's email listservs at <https://hcai.ca.gov/mailling-list/>.

2 Account Creation

Requestors must have an account to access HCAI systems. To create an account, requestors must enter a valid e-mail address and a system-generated verification code. Requestors must then provide a first and last name, display name, and create a password. Alternatively, requestors may use an existing media account from Microsoft or Google to access the portal.

After creating an account, requestors must provide additional information on their profile including title, organization name, street address, and telephone number.

3 Required Information

To request an adjustment to the spending target, requestors shall first enter the name of Requesting Organization.

Next, requestors shall enter the name(s) of the organized labor group(s) with which the requestor holds a labor agreement and contract effective dates. Requestors requesting an adjustment because of a labor agreement with nonsupervisory employee organized labor must input data for all labor agreements with nonsupervisory organized labor employees (*i.e.*, agreements for labor being utilized in the baseline and performance year for which a target adjustment is being requested). For each labor agreement, requestors shall enter the following information:

1. Organized Labor Group Name
2. Bargaining Unit(s) Representing Nonsupervisory Employees
3. Labor Agreement Effective Dates (MM/DD/YYYY – MM/DD/YYYY)
4. List of all documents requestor utilized to support current and projected labor costs reported in fields NOLA013 – NOLA026 in the [NOLA Request File](#).

Requestors may provide additional parties with access to their information by entering a first and last name and email address. To access the NOLA Portal, additional parties must also create an account as described in [Account Creation](#).

3.1 Supporting Documentation

Requestors shall upload documentation to support the request for an adjustment to the spending target. Supporting documentation shall include draft or executed labor agreement(s) supporting the request for a nonsupervisory employee organized labor cost adjustment.

OHCA may additionally request the documents listed in item 4 in Section 3, *supra*.

Supporting documentation must be submitted in machine-readable portable document format (.pdf).

4 File Layout and Field Specifications

Data shall be submitted in a text (.txt) file that is pipe (“|”) delimited with one row per record. Fields may be left blank if not applicable; however, failure to provide sufficient information may prevent completion of the request. Only standard ASCII characters are allowed in each file.

4.1 NOLA Request File

Col. #	Field ID	Field Name	Type	Max	Description
1	NOLA001	Requesting Organization	Text	50	Use this field to report the full legal name of the entity requesting an adjustment to the spending target.
2	NOLA002	Requestor Type	Integer	1	Type of requesting organization: 1 = Hospital 2 = Physician organization 3 = Fully integrated delivery system
3	NOLA003	Organization Identifier	Integer	9	Hospitals shall enter the HCAI Facility # as reported on Hospital Financial Disclosure Report. Physician organizations and fully integrated delivery systems shall enter the Taxpayer Identification Number (TIN). Do not include a hyphen.
4	NOLA004	Secondary Identifier	Integer	20	Hospitals shall enter the Facility License Number issued by the California Department of Public Health. Physician organizations shall enter the four-digit Organization Code listed on the OHCA Attribution Addendum , if available. Fully integrated delivery systems shall leave this field blank.
5	NOLA005	Requesting Year	Integer	4	Use this field to report the year in which the request is submitted in YYYY format.
6	NOLA006	Requested Spending Growth Target Adjustment Year	Integer	4	Year for which adjustment is being requested ("Performance Year") in YYYY format.
7	NOLA007	Contract Effective Start Date	Date	8	Labor union contract effective start date in YYYYMMDD format.
8	NOLA008	Contract Effective End Date	Date	8	Labor union contract effective end date in YYYYMMDD format.
9	NOLA009	Name of Organized Labor Group	Text	50	Use this field to report the represented organized labor groups for nonsupervisory labor.

Col. #	Field ID	Field Name	Type	Max	Description
10	NOLA010	Bargaining Unit	Text	10	Use this field to report the bargaining unit identifier applicable to the labor group. Enter the code exactly as defined by the employer or labor organization (e.g., 01, 12, 12A).
11	NOLA011	Classification Description	Integer	1	Occupation classification description: 1 = Technical and Specialist 2 = Registered Nurse 3 = Licensed Vocational Nurses 4 = Aides and Orderlies 5 = Clerical and Other Administrative 6 = Environmental and Food Service 7 = Physicians (salaried) 8 = Non-Physician Medical Practitioners 9 = Other Hospitals shall enter the occupation classification description as reported in page 21 of Hospital Annual Financial Disclosure Report (HAFDR) forms (Chapter 2000 #2440).
12	NOLA012	Classification Description (Other)	Text	50	List the occupation classification description. This field is required when Classification Description (NOLA011) is 9 (Other).
13	NOLA013	Current Average Hourly Rate	Float	12	Current Average Hourly Rate (\$) - before contract effective date
14	NOLA014	Projected Average Hourly Rate	Float	12	Projected Average Hourly Rate (\$) - after contract effective date
15	NOLA015	Current Total Productive Hours	Integer	12	Current Total hours of nonsupervisory employees in the contract (#)
16	NOLA016	Projected Total Productive Hours	Integer	12	Projected Total hours of nonsupervisory employees in the contract (#)
17	NOLA017	Current Total Payroll Expenses	Float	12	Current Total payroll expenses (\$)
18	NOLA018	Projected Total Payroll Expenses	Float	12	Projected Total payroll expenses (\$)
19	NOLA019	Current Total Employee Benefits	Float	12	Current Total Employee Benefits (\$)

Col. #	Field ID	Field Name	Type	Max	Description
20	NOLA020	Projected Total Employee Benefits	Float	12	Projected Total Employee Benefits (\$)
21	NOLA021	Current Total Professional Development Costs	Float	12	Current Total professional development costs (\$)
22	NOLA022	Projected Total Professional Development Costs	Float	12	Projected professional development costs (\$)
23	NOLA023	Current Total Other Costs	Float	12	Current Total Other Costs (\$)
24	NOLA024	Projected Total Other Costs	Float	12	Projected Total Other Costs (\$)
25	NOLA025	Current Total Operating Expenses	Float	12	<p>Current total operating expenses. This includes total costs incurred by revenue-producing and non-revenue producing cost centers for providing patient care. Excludes non-operating expenses, provisions for income taxes, and provisions for bad debt.</p> <p>Hospitals shall enter the total operating expenses as reported in the most recent HAFDR.</p>
26	NOLA026	Projected Total Operating Expenses	Float	12	<p>Projected total operating expenses. This includes total costs that will be incurred by revenue-producing and non-revenue producing cost centers for providing patient care. Excludes non-operating expenses, provisions for income taxes, and provisions for bad debt.</p>

5 Request Submission

After completing all required fields and uploading a data file and supporting documentation, the provider or FIDS shall certify under penalty of perjury under the laws of the State of California that the information and documents provided in the request are true and correct to the best of their knowledge. The requestor shall then submit the request for spending target adjustment based on nonsupervisory organized labor costs to OHCA.

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