California Department of Health Care Access and Information (HCAI)

Office of Health Care Affordability (OHCA)

Nonsupervisory Organized Labor Adjustment (NOLA) Request File Specifications Document

Version 1.0

September 2026

Table of Contents

Version History 2
1 Introduction 3
1.1 Contact Information 3
1.2 Request Submission Deadlines 3
1.3 Changes to this Guide 4
2 Account Creation 5
3 File Layout and Field Specifications 6
3.1 NOLA Request File 6
4 Additional Required Information and Supporting Documents 8
5 Attestation and Submission 8
5.1 Associated Party Requestors 8

Version History

Version	Date	Summary of Changes
1.0	September 2026	

1 Introduction

This file specifications document is intended for use by providers[1] 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 97448(c).

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 documents 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 will accept requests for spending target adjustment from providers, FIDS, and/or associated parties on behalf of providers or FIDS beginning in September two years preceding the year for which an adjustment is requested. In 2026, requestors may make

[1] As used in this document, "provider" includes the entities listed in 22 CCR 97448(a)(1)(A)-(F).

requests by no later than November 16. In succeeding years, OHCA must receive requests by the last business day of October.

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/mailing-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 File Layout and Field Specifications

Data shall be submitted in a text (.txt) file that is pipe ("|") delimited with one row per record. Alternatively, required information may be entered directly into the portal. Requests must include two rows of data: expenses for the current calendar year ("Requesting Year"), and projected expenses for the next calendar year ("Requesting Year +1"). Only standard ASCII characters are allowed in each file. Any numeric field not applicable to the requestor must be reported as zero.

3.1 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	DBA Name	Text	50	If applicable, enter the doing business as name associated with the requesting organization.
3	NOLA003	Submitting Organization	Text	50	Enter the name of the organization submitting the request if different from the requesting organization (*e.g.*, associated party).
4	NOLA004	Requestor Type	Integer	1	Type of requesting organization: 1 = Hospital[2] 2 = Physician organization 3 = Fully integrated delivery system
5	NOLA005	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.
6	NOLA006	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 Office of Health Care Affordability: Attribution Addendum, incorporated in Title 22, section 97445(u), if available. If not available, enter 0. Fully integrated delivery systems shall enter 0.

[2] As used in this document, "hospital" includes the entities listed in 22 CCR 97448(a)(1)(A)-(E).

Col. #	Field ID	Field Name	Type	Max	Description
7	NOLA007	Requested Spending Growth Target Adjustment Year	Integer	4	Year for which adjustment is being requested ("Performance Year") in YYYY format.
8	NOLA008	Expense Year	Integer	4	Calendar year for which expense data is provided in fields NOLA009 – NOLA013 in YYYY format.
9	NOLA009	Organized Nonsupervisory Labor Expenses	Float	12	Report the total organized nonsupervisory labor expenses for the Expense Year (NOLA008) including, but not limited to, salaries and wages, employee benefits, physician professional fees, and other professional fees.
10	NOLA010	Total Organized Labor Expenses	Float	12	Report the total organized labor expenses, including any amount reported in Organized Nonsupervisory Labor Expenses (NOLA009), for the Expense Year (NOLA008). Labor expenses include, but are not limited to, salaries and wages, employee benefits, physician professional fees, and other professional fees.
11	NOLA011	Nonorganized Nonsupervisory Labor Expenses	Float	12	Report the total nonorganized nonsupervisory labor expenses for the Expense Year (NOLA008) including, but not limited to, salaries and wages, employee benefits, physician professional fees, and other professional fees.
12	NOLA012	Total Nonorganized Labor Expenses	Float	12	Report the total nonorganized labor expenses, including any amount reported in Nonorganized Nonsupervisory Labor Expenses (NOLA011), for the Expense Year (NOLA008). Labor expenses include, but are not limited to, salaries and wages, employee benefits, physician professional fees, and other professional fees.
13	NOLA013	Total Operating Expenses	Float	12	Report the total operating expenses for the Expense Year (NOLA008). 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.

4 Additional Required Information and Supporting Documents

After providing the information described in File Layout and Field Specifications, the requestor shall also provide a comprehensive description of the methodology used to calculate current and projected expenses. The methodology description must contain sufficient detail to allow OHCA to understand and validate the basis for the projections, including any assumptions, inputs, or analytical approaches used. The methodology must also include a list of all documents the requestor used to support the current and projected labor costs reported in fields NOLA009 – NOLA012 in the NOLA Request File.

Requestors shall also upload documents to support the request for an adjustment to the spending target. Supporting documents shall include an executed labor agreement supporting the request for a nonsupervisory organized labor cost adjustment. If an executed labor agreement is not available, requestors may submit a draft labor agreement to support a request for the adjustment. However, OHCA may request a final executed agreement when evaluating the requestor's spending performance or during progressive enforcement and requestors must produce the executed agreement pursuant to OHCA's request.

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

Requestors may provide additional parties with access to the information provided 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. Invited additional parties will have access to view all data and supporting documents.

5 Attestation and Submission

Before submitting a request to OHCA, the provider or FIDS shall certify under penalty of perjury under the laws of the State of California that the information and supporting 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.

5.1 Associated Party Requestors

Associated parties providing information on behalf of a requesting organization shall provide contact information for the provider or FIDS by entering a first and last name and email address. The provider or FIDS shall then have access to view the information provided by the associated party and attest to the validity as described in Attestation and Submission.