

# Do You Have Questions About Your 1095-A Form ?

We can help you!



## Free Help is Available



- For more information about Form 1095-A, the Premium Tax Credit, or identifying the correct second lowest cost silver plan (SLCSP), call **Community Health Advocates: 1-888-614-5400**.
- Get a corrected form or replacement form by calling NY State of Health: **1-855-766-7860**.
- For tax questions, please consult your tax advisor, or contact the **IRS** at [www.irs.gov](http://www.irs.gov).

More information can be found at:

- <http://info.nystateofhealth.ny.gov/TaxCredits>
- IRS at [www.irs.gov](http://www.irs.gov)
- Tax Preparers
- <https://irs.treasury.gov/freetaxprep/>

NY State of Health complies with applicable Federal civil rights laws and state laws and does not discriminate on the basis of race, color, national origin, creed/religion, sex, age, marital/family status, disability, arrest record, criminal conviction(s), gender identity, sexual orientation, predisposing genetic characteristics, military status, domestic violence victim status and/or retaliation.

**Our services are free.  
We speak different languages.**

## Important Information for 2024

Under the American Rescue Plan enacted in March of 2021, existing New York State of Health enrollees received larger tax credits and higher income New Yorkers became eligible for APTC for the first time ever.

The Inflation Reduction Act, enacted in August 2022, extends this enhanced financial assistance through the end of 2025.

If you received APTC to lower your QHP premiums this year, in order to continue receiving APTC for lower QHP premiums next year, you must:

1. File your federal tax return
2. File Form 8962 with your federal tax return

*\*To help prevent interruptions in APTC, it is important to file your federal tax return accurately, and on time..*

### Learn about your health insurance options for 2025

- NY State of Health:  
Online at [nystateofhealth.ny.gov](http://nystateofhealth.ny.gov)  
By phone: 1-855-355-5777
- Community Service Society for free assistance by phone or in person. Call 1-888-614-5400.

# Understanding How to Use the IRS Form 1095-A

This form will come in the mail and will be posted in your NY State of Health account if you enrolled in a Marketplace plan in 2024.\*

Keep this form and read the instructions that come with it.

Use this form to complete your taxes.

Form **1095-A** Health Insurance Marketplace Statement  VOID  CORRECTED **2024**  
Department of the Treasury Internal Revenue Service **2024**  
 Do not attach to your tax return. Keep for your records. Go to [www.irs.gov/Form1095A](http://www.irs.gov/Form1095A) for instructions and the latest information.

**Part I Recipient Information**

1. Marketplace identifier	2. Marketplace assigned policy number	3. Policy issuer's name
4. Recipient's name	5. Recipient's SSN	6. Recipient's date of birth
7. Recipient's spouse's name	8. Recipient's spouse's SSN	9. Recipient's spouse's date of birth
10. Policy start date	11. Policy termination date	12. Street address (including apartment no.)
13. City or town	14. State or province	15. Country and ZIP or foreign postal code

**Part II Covered Individuals**

A. Covered individual name	B. Covered individual SSN	C. Covered individual date of birth	D. Coverage start date	E. Coverage termination date
16.				
17.				
18.				
19.				
20.				

**Part III Coverage Information**

Month	A. Monthly enrollment premiums	B. Monthly second lowest cost silver plan (SLCSP) premium	C. Monthly advance payment of premium tax credit
21. January			
22. February			
23. March			
24. April			
25. May			
26. June			
27. July			
28. August			
29. September			
30. October			
31. November			
32. December			

33. Annual totals  
 For Privacy Act and Paperwork Reduction Act Notice, see separate instructions. Cat No. 681002 Form 1095-A (2024)

\*Note: People with catastrophic plans will not receive this form.

# How to Use Your Form 1095-A from NY State of Health

## Did you use APTC for one or more months?

If so, the amount you used was based on your estimated income. You are required to reconcile the amount of tax credits you used with the amount you are eligible for based on your actual income.

## Did you pay full cost for your plan for one or more months?

If your actual income is less than your estimated income, you may be able to claim the Premium Tax Credit, even if you did not apply, did not use, or were not eligible for financial help when you were enrolled.

## How to reconcile/claim Premium Tax Credits

Step 1: NY State of Health will send you the Form 1095-A.

Step 2: Use Form 1095-A to complete IRS Form 8962. If you had APTC each month you were enrolled, your Form 1095-A was fully completed for you. If you were enrolled without tax credits, you need to identify your Second Lowest Cost Silver Plan (SLCSP) premium each month you were enrolled without tax credits.

Step 3: File your federal tax return, using the appropriate form from the 1040 Series and the Form 8962.

## Need Help?

Resources are available in **several languages** at <http://www.info.nystateofhealth.ny.gov/TaxCredits>

Get general information about the Form 1095-A or Premium Tax Credit by calling **Community Health Advocates** at **1-888-614-5400**.

Get a corrected form or a replacement form by calling **NY State of Health** at **1-855-766-7860**.