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

# We can help you!



#### Community Service Society



## Free Help is Available



- Get additional help picking your Second Lowest Cost Silver Plan,or get general information about the Form 1095-A or Premium Tax Credit by calling 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 <u>www.irs.gov</u>.

#### More information can be found at:

- <u>http://info.nystateofhealth.ny.gov/TaxCredits</u>
- IRS at <u>www.irs.gov</u>
- Tax Preparers

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.

#### 12/20

### Important Information for 2020

Starting in 2019, there is no Individual Mandate penalty in effect. This change was made at the federal level as part of the Tax Cuts and Jobs Act enacted in December 2017.

But, there are many financial and health reasons for enrolling in a health plan.

#### Failure to Reconcile Tax Credits

You must use the 1095-A to complete form 8962 when you file your taxes. You may not receive financial assistance (APTC) next year if you do not.

There are two steps you can take if you are not getting APTC even though you filed form 8962:

- (1) Submit a transcript from the IRS proving that you filed form 8962, or
- (2) Call the NY State of Health and provide this information over the phone.

# Learn about your health insurance options for 2021.

- NY State of Health: Online at <u>nystateofhealth.ny.gov</u> By phone 1-855-355-5777
- Community Service Society for free in-person assistance 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 2020.\*

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

Use this form to complete your taxes.

Department of the Treasury	Do not attach	to your tax retu	rn. Keep fo	e Statement		RECTED	OMB No. 1545-2232
Part   Recipient Infor	-		luctions an				
1 Marketplace identifier	place-assigned pr	blicy number	3 Policy issuer's na	ne			
4 Recipient's name			5 Recipient's SSN		6 Recipient's date of birth		
7 Recipient's spouse's name		8 Recipient's spous	e's SSN	9 Recip	ient's spouse's date of bir		
10 Policy start date 11 Policy		termination date		12 Street address (including apartme		ant no.)	
13 City or town 14 St		State or province		15 Country and ZIP or foreign postal code			
Part I Covered Individ	duals						
A. Covered individual name		B. Covered individual SSN		C. Covered individual D. Covere date of birth		start date	E. Coverage termination d
16							
17 BL 18	<u>4</u> A	K		SAP		2	EE-
20 Part III Coverage Infor Month	mation A. Monthly enrolli	nent premiums	B. Monthly	second lowest cost	ilver C.	Monthly	advance payment of
WORDT			pla	(SLCSP) premium		premium tax credit	
21 January							
22 February							
23 March							
24 April							
25 May							
26 June							
27 July							
28 August							
29 September	1						
29 September 30 October							
30 October							

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



#### S. Did you pay full cost for your plan for one or more months? If your actual income is less than or equations.

months?

If your actual income is less than or equal to 400% FPL (\$49,960 for an individual, \$103,000 for a family of four) you may be eligible 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.

Did you use APTC for one or more

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.

#### 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 <u>http://www.info.nystateofhealth.ny.gov/TaxCredits</u>

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.** 

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