



IRS 1095-B Reporting

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Minimum Essential Coverage (MEC) Reporting

- The ACA individual shared responsibility provision requires minimum essential coverage (MEC) providers to report coverage information to the IRS.
- The categories of MEC providers include:
 - Health insurance issuers and carriers,
 - Plan sponsors of self-insured group health plans, government departments/agencies,
 - Medicare, **Medicaid/CHIP** agencies, and
 - other MEC providers

MEC Mandate

Beginning with CY 2014, each individual must have basic health coverage (“minimum essential coverage”) for each month, qualify for an exemption, or pay a fee when filing a federal income tax return.

	 per adult	 per child	 per family	<i>% of family income above tax filing threshold</i>
2014	\$95	\$47.50	\$285 max	1% family income
2015	\$325	\$162.50	\$975 max	2% family income
2016 and beyond	\$695	\$347.50	\$2085 max	2.5% family income

whichever is greater

Size of penalty is pro-rated based on number of months without coverage

MEC Reporting on Federal Tax Return

- For CY 2014, consumers self reported their MEC status when filing their federal income taxes
- Beginning January 2016, State Medicaid programs are required:
 - to furnish a statement to consumers for tax year 2015 using IRS Form 1095-B, and
 - to submit reports to the IRS for all covered enrollees who received MEC
- For 2016 consumers will have to attest to having health coverage if they file taxes. Consumers should check all the information on their form 1095-B for accuracy; if everything is correct, they need to store form 1095-B with other important tax documents. Consumers can expect their form to be postmarked by January 31, 2016.
- For government sponsored coverage, such as Medicaid & CHIP, the government department or agency is responsible for reporting to the IRS; not the issuer of benefits.

Form 1095-B

- Provides data on the months the consumer had Medicaid or CHIP which meets MEC coverage.
- Copies will be sent to consumers' address as listed in MMIS.
- Forms are based on household composition, but the form will be sent to the person identified as **head of household (HOH)**.
- DHMH will only report coverage that meets MEC standard, therefore the following coverages **will not** be reported:
 - Coverage for family planning services
 - Coverage for medical emergency services
 - Coverage of medically-needy individuals
 - Coverage for partial dual eligibles (Medicare + partial Medicaid)

Form **1095-B** Health Coverage
 Department of the Treasury
 Internal Revenue Service
 OMB No. 1545-2722
 560115

Information about Form 1095-B and its separate instructions is at www.irs.gov/form1095b.
 VOID CORRECTED 2015

Part I Responsible Individual
 1 Name of responsible individual
 2 Social Security number (SSN)
 3 Date of birth (if SSN is not available)
 4 Street address (including apartment no.)
 5 City or town
 6 State or province
 7 Country and ZIP or foreign postal code
 8 Enter letter identifying Origin of the Policy (see instructions for codes)
 9 Small Business Health Options Program (SHOP) Marketplace identifier, if applicable

Part II Employer Sponsored Coverage (see instructions)
 10 Employer name
 11 Employee identification number (EIN)
 12 Street address (including room or suite no.)
 13 City or town
 14 State or province
 15 Country and ZIP or foreign postal code

Part III Issuer or Other Coverage Provider (see instructions)
 16 Name
 17 Employee identification number (EIN)
 18 Contact telephone number
 19 Street address (including room or suite no.)
 20 City or town
 21 State or province
 22 Country and ZIP or foreign postal code

Part IV Covered Individuals (Enter the information for each covered individual(s).)
 (a) Name of covered individual(s)
 (b) SSN (or 000 if SSN is not available)
 (c) Covered for 12 months
 (d) Months of coverage

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
23	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.
 Cat. No. 407048 Form **1095-B** 0715

1095-B Implementation Plan



DHMH will provide CY 2015 coverage data from MMIS to Deloitte; Deloitte will populate forms and transmit to IRS



DHMH/MHBE will develop resources to respond to consumer questions, such as FAQs



DHMH, in collaboration with MHBE and DHR, will develop 1095-B correction process

1095-B Implementation Status

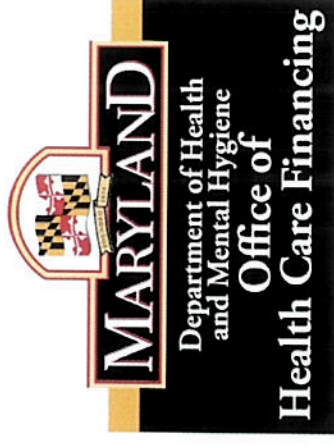
Technical

- DHMH has sent 2 test files to Deloitte
- Deloitte will begin testing with IRS in late November 2015

Operational

- Planned outreach and consumer assistance materials:
 - Cover letter to accompany 1095-B forms to consumers
 - Call script for MHC call center, where calls will be directed
 - FAQs and brochures to be posted on DHMH's and Maryland Health Connection websites
 - Links to resources for help with tax preparation
- Collaborating with MHBE and DHR to define corrections process

CONSUMER ASSISTANCE AND RESOURCES



Internal Revenue Service Q&A:

<https://www.irs.gov/Affordable-Care-Act/Individuals-and-Families/Questions-and-Answers-on-the-Individual-Shared-Responsibility-Provision>

Maryland Health Connection 1095-A and tax info:

<https://www.marylandhealthconnection.gov/taxes/>

Free tax return preparation resources:

irs.gov/vita



QUESTIONS?