

AFFORDABLE CARE ACT

Tax Forms 1095



BlueCross BlueShield of South Carolina and BlueChoice® HealthPlan of South Carolina

The Affordable Care Act requires insurance companies and certain employers to send Forms 1095 to individuals who had “minimum essential” health insurance coverage during the previous year. These forms provide the following information:

- Proof of health insurance;
- Amount of any Advanced Premium Tax Credits (APTC) received;
- Eligibility for any APTC for coverage purchased from the Health Insurance Marketplace.

There are different versions of Form 1095.

- Form **1095-A** is sent by the **Health Insurance Marketplace** to individuals who purchased coverage through the Marketplace.
- Form **1095-B** is sent by an **insurance company** to those who purchased individual coverage from the insurer or got their coverage from the insurer through their fully insured, employer-sponsored health plan. This form is also sent by **self-funded small group employers** (those with 50 or fewer employees) to their covered employees. This form includes details about the member’s/employee’s coverage and lists covered individuals (spouse and dependents) in the household.
- Form **1095-C** is sent by a **large employer** (those with 50 or more full-time equivalent employees) to employees covered under the employer’s sponsored health plan. Fully insured employers only have to report what coverage was made available to the employee. Self-insured employers must also include a list of all covered individuals (spouses and dependents) in the employee’s household.

People may receive multiple 1095 forms:

- If they had coverage under a fully-insured, large group employer-sponsored plan, they will receive a 1095-C from their employer, as well as a 1095-B from the insurance company. (Note: People who had coverage under self-funded employer-sponsored plans will only receive the appropriate 1095 from their employer.)
- If they switched health plans during the year, they will receive the appropriate 1095 forms from each insurer and/or employer.

BlueCross BlueShield of South Carolina and BlueChoice HealthPlan will mail 1095-B Forms to fully insured, covered individuals by the deadline set by law.



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IMPORTANT NOTICE

This communication is provided for informational purposes only and does not constitute legal advice or legal opinions.

The information contained herein contains summaries of various portions of legislation addressing health care reform legislation and is subject to change without notice. This information is not a substitute for legal advice from your lawyers.

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