IRS 1095-B Tax Form (Health Coverage)

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IRS 1095-B Tax Form Overview

IRS Form 1095-B reports the months a person had qualifying minimum health coverage to the IRS. Currently the VA mails this form out to Veterans at the beginning of the year (between December and March). The process is costly, and many are returned to due inaccurate address. In order to ensure delivery to Veterans and to decrease some of the costs associated with mailing this form, we have now made the 1095-B available for online access via digital download of a pdf from their records on Va.gov.

Changes to the Affordable Care Act have reduced the federal tax penalty for not having health coverage to \$0; so, in most cases the 1095-B will simply be a document to keep for one's records. As of March 2022, six states—Massachusetts, New Jersey, Vermont, California, Rhode Island and District of Columbia (Washington D.C.)—still have individual coverage mandates that may result in penalties for not being insured and so Veterans should refer to any local IRS instructions, as applicable, for retaining this form and filing their state taxes.

Target launch date: August 2022 for MVP

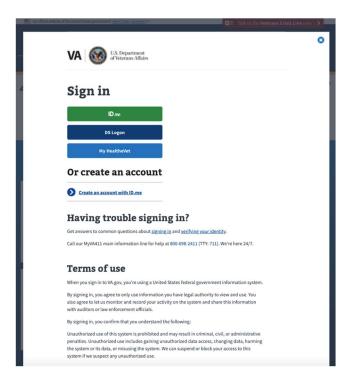
User Access

Who can access this form?

Veterans enrolled in VA health benefits with a VA.gov account.

How can users access this form?

Users can log in using their DS Logon Premium, MHV Premium, or ID.me accounts.

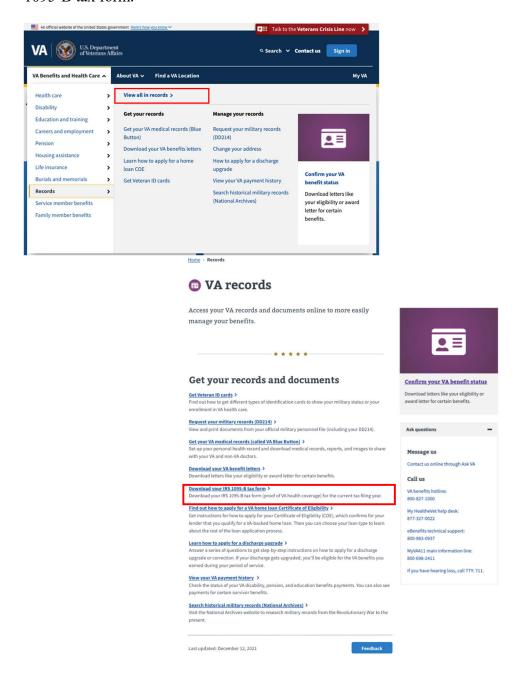


Navigation

Direct url: https://www.va.gov/records/download-your-irs-1095-b

Or the link to download the IRS 1095-B tax form can be found by way of the VA Benefits and Health Care dropdown menu (top navigation) on the Records Hub Page: https://www.va.gov/records/

By clicking "view all in records," the Veteran can then find the link labeled "Download your IRS 1095-B tax form."

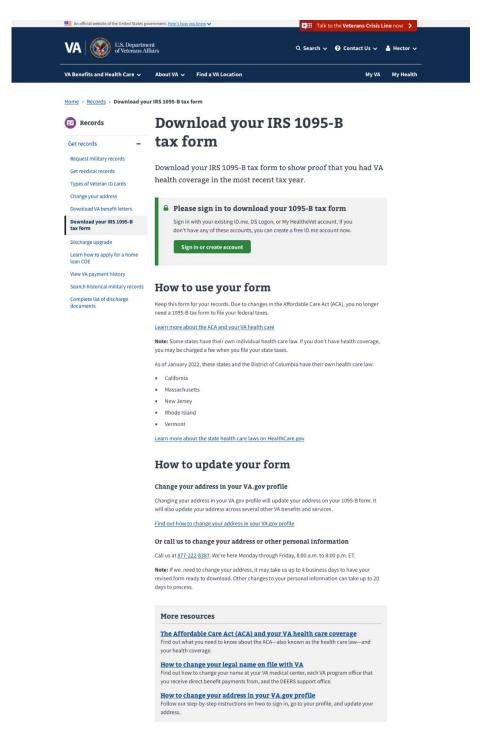


1095-B Download Functionality

Part 1: Access the form

(If not signed in)

If the Veteran navigates to the form while not logged in, they will be prompted to do so on the page.

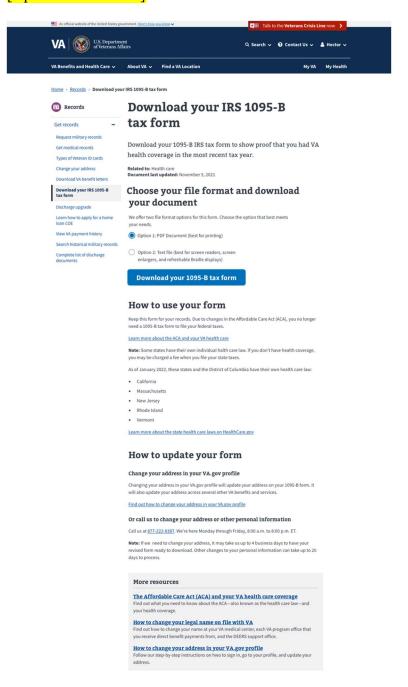


(If already signed in)

Once the Veteran is on the page, they will have an option to choose the format of their document download. Options are provided for PDF or Text file. PDF is a common document format that mimics the look of the paper form and is easily printable. Text is an approved IRS alternate document format that works well for those who may be using a screen reader or other assistive technology.

After the Veteran has selected the radio button for their desired document format, they can click the blue primary action button, "Download your 1095-B tax form."

[Updated Screenshot]



Part 2: The 1095-B Health Coverage Form

The 1095-B is pre-populated with all of the Veteran's information: name, social security number, address and months of coverage. Provided are examples of the PDF version (option 1, best for printing) of the document and Text file (option 2, best for screen readers, screen enlargers, and refreshable Braille displays) respectively.

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Form 1095-B		Health Coverage									/OID		<u> </u>	OMB No. 1545-2252			
Department of the Treasury											OTED	2021					
internal Revenue Service Go to www.irs.gov/Form1095B for instructions and the												CORRECTED ZUZ1					
Part I Responsi	ble Individual																
	vidual-First name, middle	dual-First name, middle name, last name					2 Social security number (SSN) or other TIN 3 Date of birth (if SSN or other TIN is not available.										
Hello	World					123-12-1234					7 Country and ZIP or foreign postal code						
4 Street address (including apartment no.) 5 City or town					6 State or province												
8 Enter letter identifying	Origin of the Health Co	overage (see instruction	ons for codes):	. • [9	Reserve	d										
Part II Information 10 Employer name	on About Certain	Employer-Spon	sored Coverage (s	see instru	ictions	5)				1	I1 Empl	oyer iden	tification	number (EIN)		
										_							
12 Street address (including	luding room or suite no.) 13 City or town				14	State o	r province	,		1	15 Country and ZIP or foreign postal code						
Part III Issuer or	Other Coverage	Provider (see inst	tructions)														
16 Name					17	Employ	er identif	ication nu	mber (EII	N) 1	18 Conta	act teleph	one num	ber			
19 Street address (including room or suite no.) 20 City or town			21	21 State or province 22 Country and ZIP or foreign postal code													
Part IV Covered I																	
(a) Name of covere	-	(b) SSN or other TIN	or each covered inc						le	A Monthe	of covera	00					
First name, middle		(b) 3314 or other th	TIN is not available)	all 12 months					,,,	, wortens	Oi covera	90					
				-	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
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23 Dependent	One																
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Department of the Treasury
                         Internal Revenue Service
                         OMB No. 1545-2252
                         560118
                         Form 1095-B
                         Health Coverage
                         -- VOID
                          -- CORRECTED
                          Do not attach to your tax return. Keep for your records.
                          Go to www.irs.gov/Form1095B for instructions and the latest information.
                         Part I Responsible Individual
                         1 Name of responsible individual-First name, middle name, last name ----
                         2 Social security number (SSN) or other TIN ----
                         3 Date of birth (if SSN or other TIN 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 Health Coverage (see instructions for codes): ----
                         9 Reserved shaded
                         Part II Information About Certain Employer-Sponsored Coverage (see instructions)
                         10 Employer name ----
                         11 Employer 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 Employer 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.)
                         (a) Name of covered individual(s) First name, middle initial, last name ----
                          (b) SSN or other TIN ---
                         (c) DOB (if SSN or other TIN is not available) ----
                          (d) Covered all 12 months --
                         (e) Months of coverage
[New Screenshot] Zan
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Paperless Delivery

In order to reduce paper waste and costs associated with mailing the 1095-B, an option for paperless delivery only is being made available to Veterans. On the 1095-B landing page, below the download button inside of a gray information box is a callout for "Sign up for paperless delivery." A Veteran may select the linked action button here to be redirected to their VA.gov profile where they can choose how they would like to receive their 1095-B—in the mail or digital. They can also complete this task by navigating to their profile directly via the top navigation. Once a Veteran has opted-in for paperless delivery only, they will no longer receive the 1095-B in the mail until this setting is changed again.

Sign up for paperless delivery

We mail you a paper copy of your 1095-B form each year. If you want to stop getting paper forms, you can choose paperless delivery. We'll email or text you once a year when your new form is ready to download.



Go to your VA.gov profile to choose 1095-B paperless delivery

Escalation Path

If a Veteran notices an incorrect address on their 1095-B, they can update this information in their VA.gov profile and download a new form —a link to how to do this is included on the landing page, under the section, "How to update your form." Veterans can also call the Health Benefits Hotline at 1-877-222-8387 to update their address and/or fix any additional errors noticed on the form. Once a representative answers the phone, the Veteran should tell them that there is an error on their 1095-B form. The representative will ask for the correct information and update it in the enrollment system.

[New Screenshot]



Download your IRS 1095-B

Discharge upgrade

Learn how to apply for a home loan COE

View VA payment history

Search historical military records

Complete list of discharge documents

Download your IRS 1095-B tax form

Download your 1095-B IRS tax form to show proof that you had VA health coverage in the most recent tax year.

Related to: Health care

Document last updated: November 5, 2021

Choose your file format and download your document

We offer two file format options for this form. Choose the option that best meets your needs.

Option 1: PDF Document (best for printing)

Option 2: Text file (best for screen readers, screen enlargers, and refreshable Braille displays)

Download your 1095-B tax form

How to use your form

Keep this form for your records. Due to changes in the Affordable Care Act (ACA), you no longer need a 1095-B tax form to file your federal taxes.

Learn more about the ACA and your VA health care

Note: Some states have their own individual halth care law. If you don't have health coverage, you may be charged a fee when you file your state taxes.

As of January 2022, these states and the District of Columbia have their own health care law:

- California
- Massachusetts
- New Jersey
- Rhode Island
- Vermont

Learn more about the state health care laws on HealthCare.gov

How to update your form

Change your address in your VA.gov profile

Changing your address in your VA.gov profile will update your address on your 1095-B form. It will also update your address across several other VA benefits and services.

Find out how to change your address in your VA.gov profile

Or call us to change your address or other personal information

Call us at $\underline{877\text{-}222\text{-}8387}$. We're here Monday through Friday, 8:00 a.m. to 8:00 p.m. ET.

 $\label{Note:} If we need to change your address, it may take us up to 4 business days to have your revised form ready to download. Other changes to your personal information can take up to 20 days to process.$

More resources

The Affordable Care Act (ACA) and your VA health care coverage

Find out what you need to know about the ACA—also known as the health care law—and your health coverage.

How to change your legal name on file with VA

Find out how to change your name at your VA medical center, each VA program office that you receive direct benefit payments from, and the DEERS support office.

How to change your address in your VA.gov profile

Follow our step-by-step instructions on hwo to sign in, go to your profile, and update your address.

Veterans should refer to the "Document last updated" date above the 1095-B download link to make sure that they are downloading the most recent version of the form. Changes to a Veteran's address may take up to 4 business days to process and generate a new version of 1095-B online. Changes to other personal information outside of mailing address, such as corrections to date of birth or social security number take additional processing time and may take up to 20 business days for the Veteran to receive an updated copy of their 1095-B.

Errors & Notifications

In most cases, after clicking the download button Veterans will know that they have successfully downloaded the 1095-B by a change in state—the text above the box will now read "Download complete."

Download completeYou successfully downloaded your 1095-B tax form. Please check your files. 4/1/2022 6:35 p.m.

However, in certain cases the Veteran may not be able to download their 1095-B as expected. If they have just registered for health care with the VA and do not have data on file for the previous year, they will receive the following message:

You don't have a 1095-B tax form available right now

If you recently enrolled in VA health care, you may not have a 1095-B form yet. We process 1095-B forms in early January each year, based on your enrollment in VA health care during the past year.

If you think you should have a 1095-B form, call us at 1-877-222-8387 (TTY: 711). We're here Monday through Friday, 8:00 a.m. to 8:00 p.m. ET.

If there is a technical error on the site and the form is not able to be generated, the Veteran will receive this message:

▲ We couldn't download your form

We're sorry. Something went wrong when we tried to download your form. Please try again. If your form still doesn't download, call us at 800-698-2411 (TTY: 711). We're here 24/7.