



<BENEFICIARY FULL NAME>
<ADDRESS>
<CITY STATE ZIP>

<file creation date>

Important [year] Tax Information: Keep this for your records Form 1095-B (Health Coverage)

Why am I getting a Form 1095-B (Health Coverage)?

Medicare is sending a Form 1095-B to people who:

- Are under the age of 65 and have Medicare Part A (Hospital Insurance);
- Enrolled in Medicare Part A for the first time in [year]; or
- Had Medicare Part A for part of [year].

The Affordable Care Act requires people to have health coverage that meets certain standards, also called qualifying health coverage or minimum essential coverage. **Medicare Part A coverage (including coverage through a Medicare Advantage Plan) is qualifying health coverage.**

Your Form 1095-B shows your Medicare Part A information, and can be used to verify that you had qualifying health coverage for all or part of [year]. You can use this information to complete your federal income tax return. We've also sent this information to the IRS.

What do I need to do now?

Keep this Form 1095-B, and any other 1095 forms you may receive, with your other tax information. You **don't** need to:

- Take any immediate action.
- Send this form to the IRS when you file your taxes.
- Send this form back to Medicare.



Does this affect my taxes?

- If you had Medicare Part A for all 12 months of [year], you'll just need to check a box on your Federal income tax return indicating you had qualifying health coverage.
- If you had health coverage other than Medicare Part A during [year], you should receive a separate Form 1095-B from that health coverage provider. If you have questions about that Form 1095-B, you should contact that health coverage provider, identified in Part III of the form, directly.
- If you didn't have Medicare Part A or other qualifying health coverage for all 12 months of [year], and you don't qualify for an exemption from the requirement to have coverage, you may have to pay a fee when you file your taxes.

Get help & more information.

For more information on your Form 1095-B, visit Medicare.gov or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

The Centers for Medicare & Medicaid Services doesn't discriminate in its programs and activities. To request this notice in an alternative format, call 1-800-MEDICARE or email AltFormatRequest@cms.hhs.gov.

Para obtener información en español, llame GRATIS al 1-800-MEDICARE (1-800-633-4227). Los usuarios de TTY deben llamar al 1-877-486-2048.

