Accessing a Consumer's Form 1095-A Job Aid Certified Enrollers

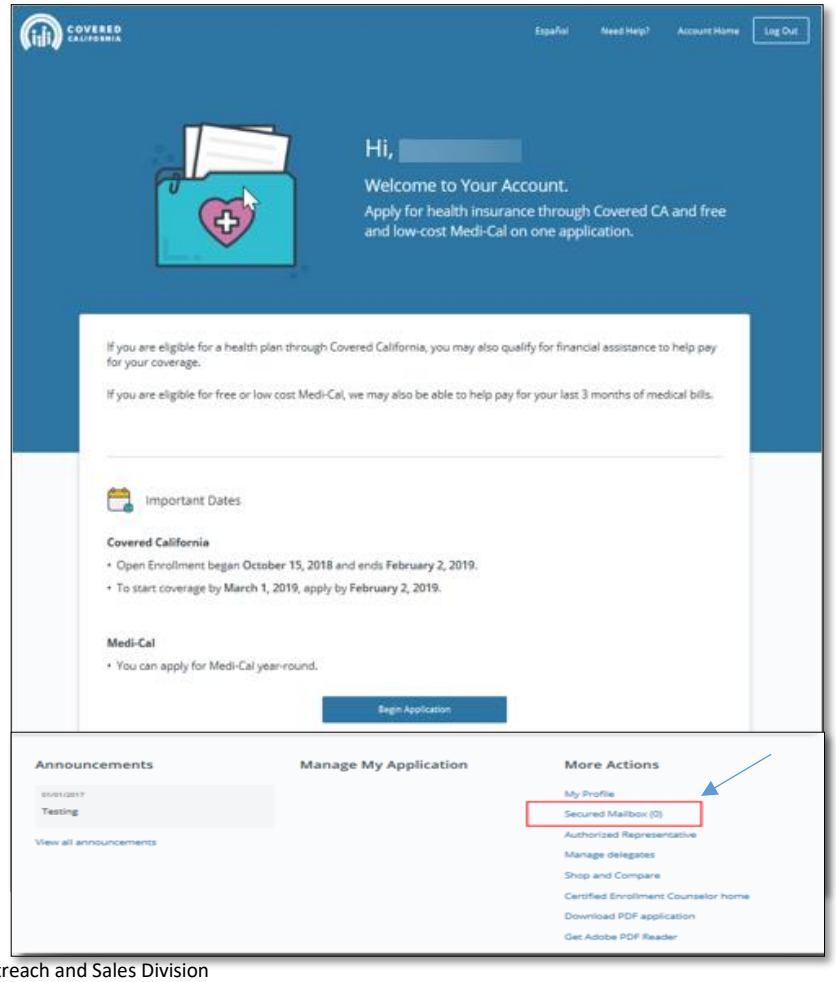
A cover letter and **IRS Form 1095-A** are generated for consumers as electronic documents that can be accessed via a consumer's **Secure Mailbox** account. These documents are displayed in the account as an official Covered California notice listed as **CalNOD62.**

- **CalNOD62A** is generated each calendar year and includes the IRS Form 1095-A and instructions
- **CalNOD62B**, is generated as a correction to the initial Form **1095-A**. It may take up to 60 days after corrections have been submitted to Covered California to generate in the account and an additional 14 days to be mailed as a paper copy
- Consumers, Agents, and Counselors have the ability to view and print these documents from their CalHEERS account once it has been generated

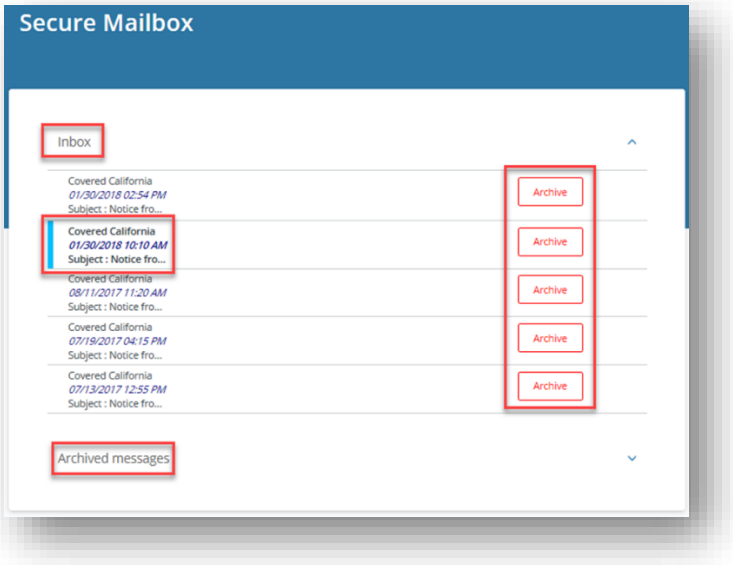
Consumers may access the documents from their Secure Mailbox

Covered California generates an electronic copy of the notice to the Secure Mailbox associated with the Consumer's account. To view the notification online, the Consumer must log into their Covered California account.

- Once the Consumer has logged in, clicking the "Secure Mailbox" link below in the "More Actions" column navigates the Consumer to their Inbox



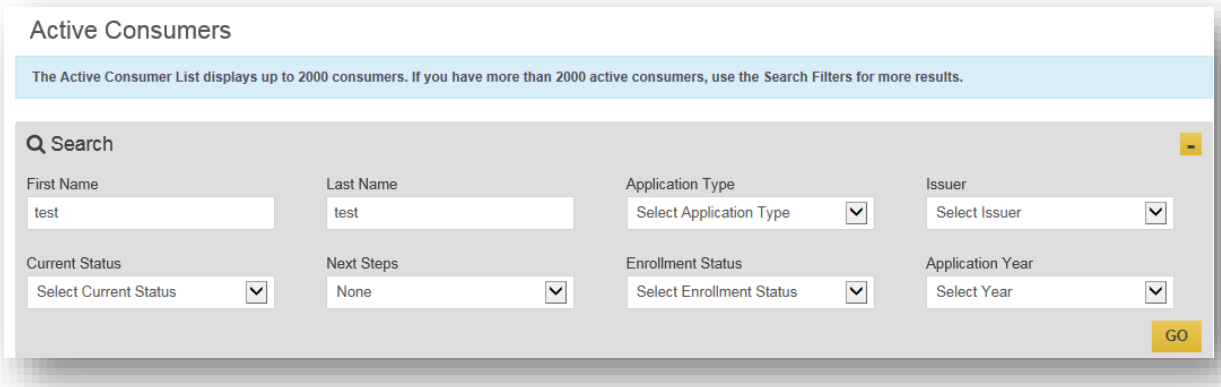
- Clicking on the Subject link allows the consumer to view, download, and print their **1095-A** and **CalNOD62** notice



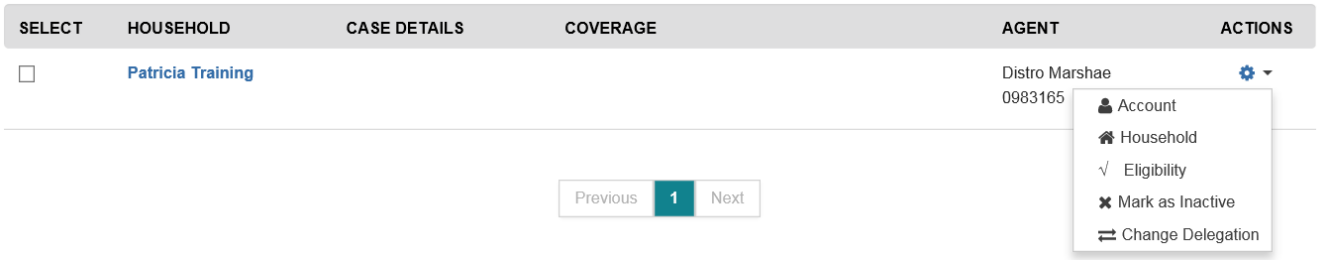
- If the consumer's account is currently terminated or they did not create an online account, they should call the Covered California Service Center (800-300-1506) for assistance
- **Please Note**: The Secure Mailbox link does not display for Agents or Counselor's when viewing a consumer's case

Agents and Counselors have access to the 1095-A and **CalNOD62** notice **from the Consumer's "Documents and Correspondence" page.**

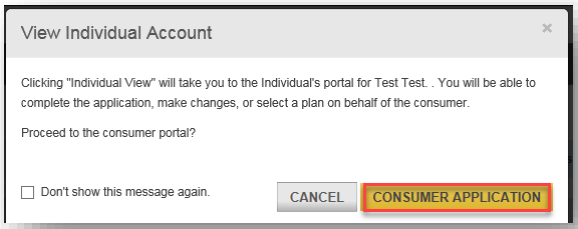
- To access the documents from the Consumer's account, click on the "Delegations" tab and select "Active Consumers" in the Agency or Agent Portal
- Search for the consumer under the "Active Consumers" to navigate to the Consumer's home page



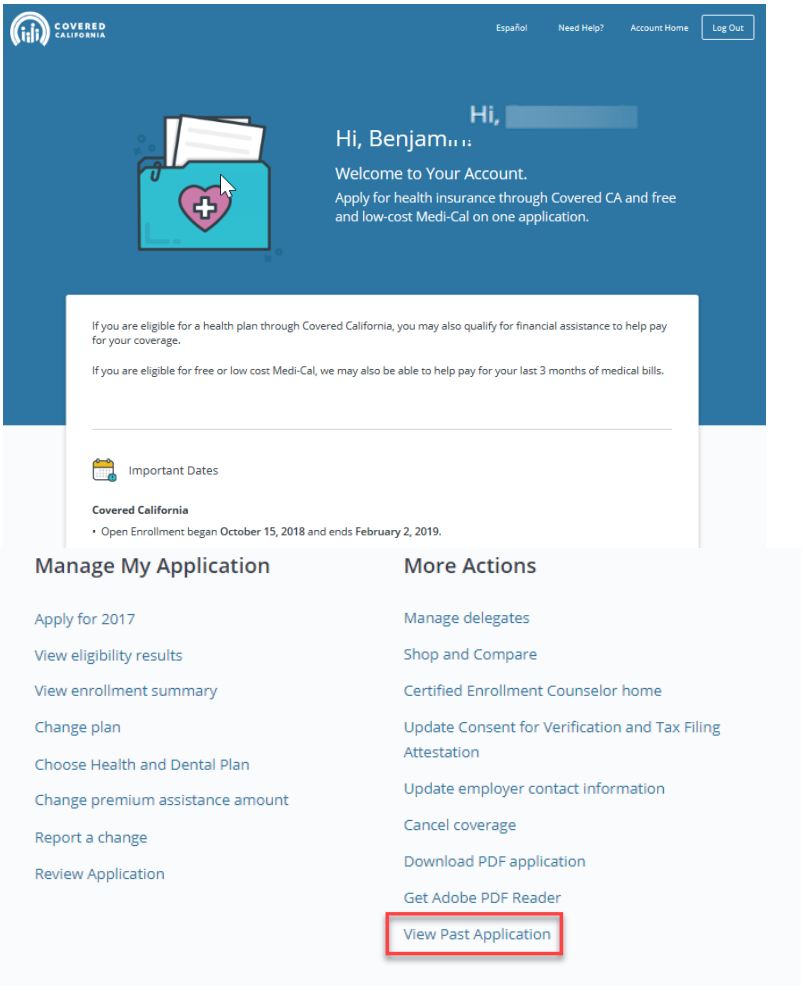
- Select the "Account" tab under "Actions" to procced to the "View Individual Account"



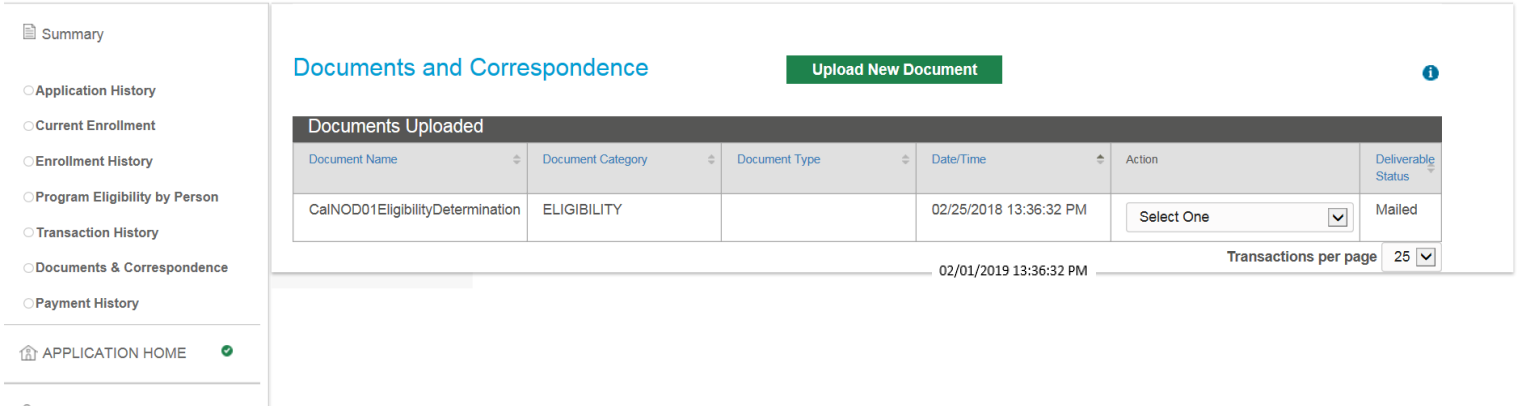
- Click on the "Consumer Application" tab to navigate to the Consumer Landing Page



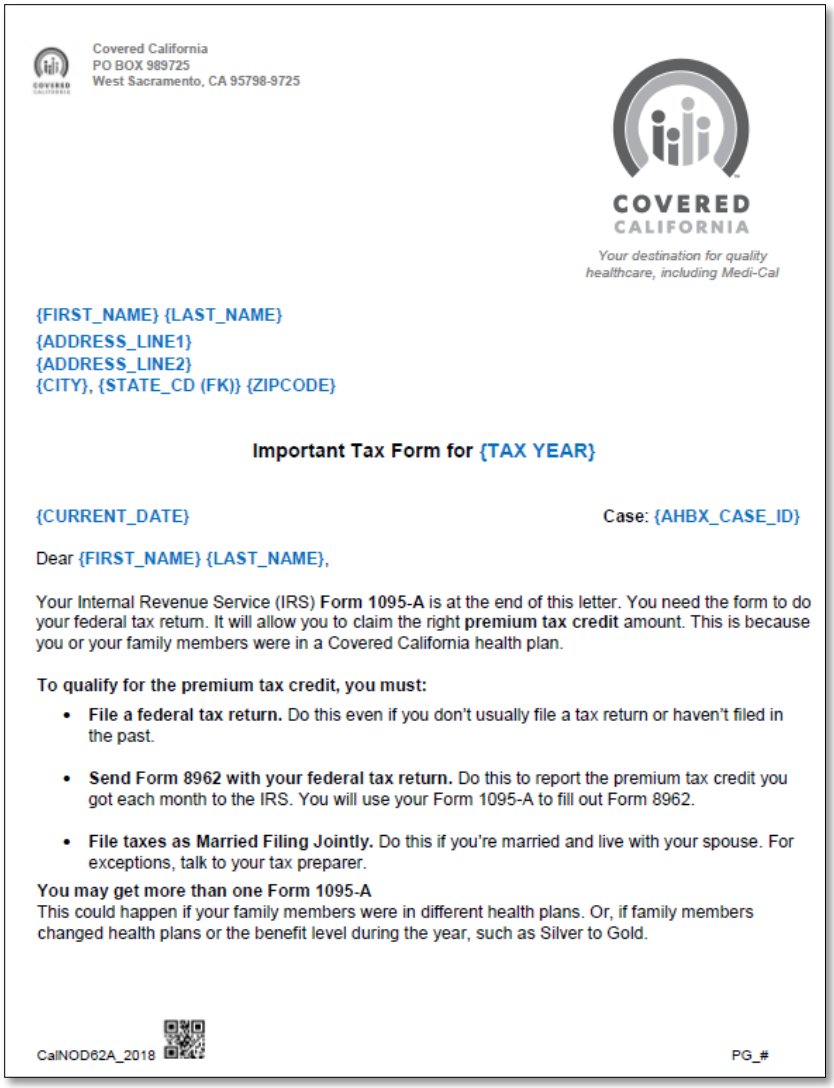
- From the consumer home page click on the "View Past Application" located in the footer to navigate to the "Document and Correspondence" section



- "Documents & Correspondence" is located on the left side of the page under "Summary" section. The documents are located under the "Documents Uploaded."



- For 2018, the year is appended to the Notice footer as NOD62A_2018



Covered California
PO BOX 989725
West Sacramento, CA 95798-9725

COVERED CALIFORNIA
Your destination for quality healthcare, including Medi-Cal

{FIRST_NAME} {LAST_NAME}
{ADDRESS_LINE1}
{ADDRESS_LINE2}
{CITY}, {STATE_CD (FK)} {ZIPCODE}

Important Tax Form for {TAX YEAR}

{CURRENT_DATE} **Case:** {AHBX_CASE_ID}

Dear {FIRST_NAME} {LAST_NAME},

Your Internal Revenue Service (IRS) **Form 1095-A** is at the end of this letter. You need the form to do your federal tax return. It will allow you to claim the right **premium tax credit** amount. This is because you or your family members were in a Covered California health plan.

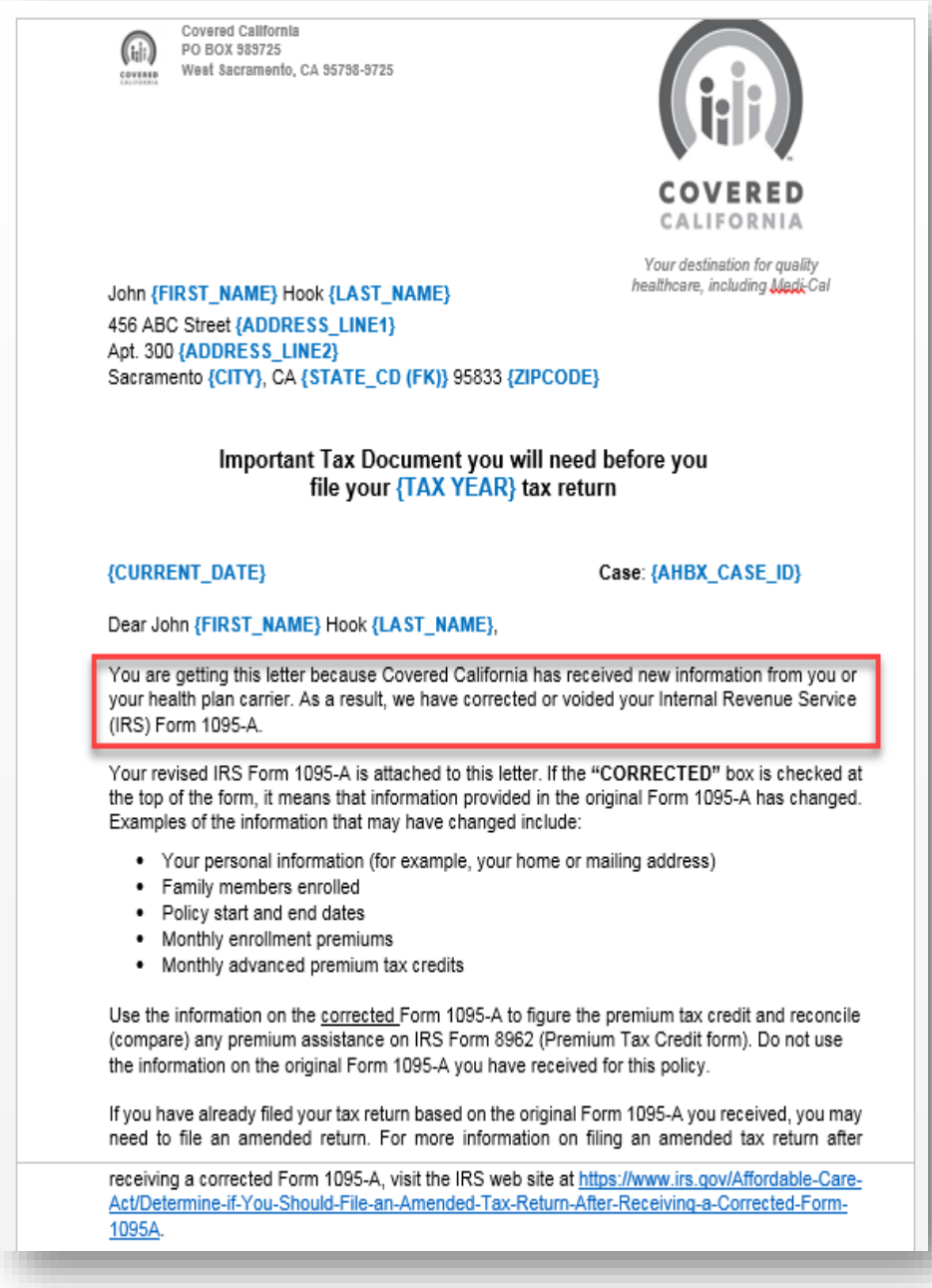
To qualify for the premium tax credit, you must:

- **File a federal tax return.** Do this even if you don't usually file a tax return or haven't filed in the past.
- **Send Form 8962 with your federal tax return.** Do this to report the premium tax credit you got each month to the IRS. You will use your Form 1095-A to fill out Form 8962.
- **File taxes as Married Filing Jointly.** Do this if you're married and live with your spouse. For exceptions, talk to your tax preparer.

You may get more than one Form 1095-A
This could happen if your family members were in different health plans. Or, if family members changed health plans or the benefit level during the year, such as Silver to Gold.

CalNOD62A_2018 PG_#

- A consumer may receive a CalNOD62B if corrections were made to their 1095-A. The notice explains the Consumer is receiving the Form because Covered California has received new information



Covered California
PO BOX 989725
West Sacramento, CA 95798-9725

COVERED CALIFORNIA

Your destination for quality healthcare, including Medi-Cal

John {FIRST_NAME} Hook {LAST_NAME}
456 ABC Street {ADDRESS_LINE1}
Apt. 300 {ADDRESS_LINE2}
Sacramento {CITY}, CA {STATE_CD (FK)} 95833 {ZIPCODE}

Important Tax Document you will need before you file your {TAX YEAR} tax return

{CURRENT_DATE} Case: {AHBX_CASE_ID}

Dear John {FIRST_NAME} Hook {LAST_NAME},

You are getting this letter because Covered California has received new information from you or your health plan carrier. As a result, we have corrected or voided your Internal Revenue Service (IRS) Form 1095-A.

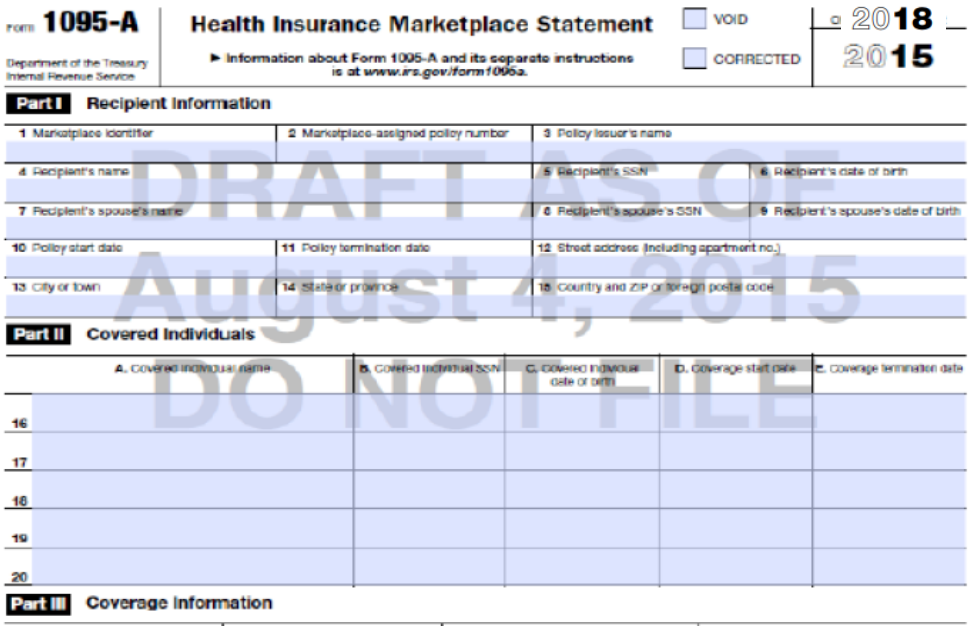
Your revised IRS Form 1095-A is attached to this letter. If the **"CORRECTED"** box is checked at the top of the form, it means that information provided in the original Form 1095-A has changed. Examples of the information that may have changed include:

- Your personal information (for example, your home or mailing address)
- Family members enrolled
- Policy start and end dates
- Monthly enrollment premiums
- Monthly advanced premium tax credits

Use the information on the corrected Form 1095-A to figure the premium tax credit and reconcile (compare) any premium assistance on IRS Form 8962 (Premium Tax Credit form). Do not use the information on the original Form 1095-A you have received for this policy.

If you have already filed your tax return based on the original Form 1095-A you received, you may need to file an amended return. For more information on filing an amended tax return after receiving a corrected Form 1095-A, visit the IRS web site at https://www.irs.gov/Affordable-Care-Act/Determine-if-You-Should-File-an-Amended-Tax-Return-After-Receiving-a-Corrected-Form-1095A.

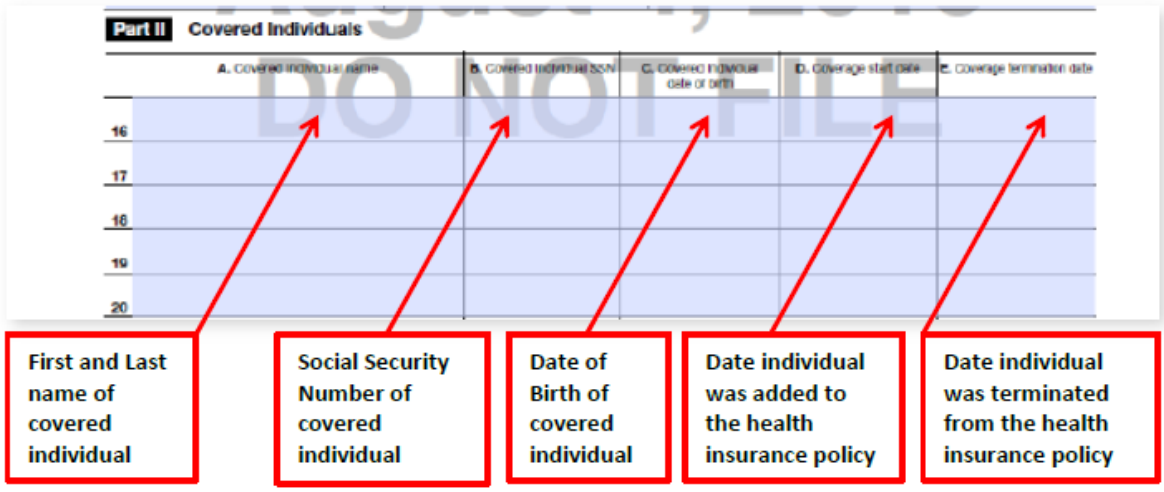
- The Form **1095-A** will display under the **CalNOD62** notice



Key Data Fields for Form 1095-A

- **Part I** - The **1095-A** is prepopulated with recipient and policy information. Note the term Recipient refers to the Tax Filer or Primary Contact. Only the last four digits of social security numbers of household members will display for security reasons

- **Part II** - The **1095-A** is prepopulated with information regarding members of the coverage household. If there are more than five family members in the coverage household, additional pages will be provided to continue this section



- **Part III** - The IRS **1095-A** is prepopulated with the Monthly Premium Amount, the Monthly Premium Amount of Second Lowest Cost Silver Plan (SLCSP) and the Monthly Advance Payment of the Premium Tax Credit (APTC), if any, for each month of the coverage year. If the household did not receive APTC for a month, the field will be blank
    - Consumers should be advised that Covered California has determined the Monthly Premium Amount of SLCSP which applies to the household member's coverage. The SLCSP was used to compute the amount of APTC and the premium tax credit. Keep in mind that the notice is generated regardless if premium assistance was received and that the Form 1095-A is populated with the SLCSP regardless if the household accepted APTC