American Benefits Council
Benefits Briefing

PPACA Information Reporting, Part II
Forms and Instructions
1095-B and 1094-B

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Overview

- **Brief Refresher** on Minimum Essential Coverage (Individual Mandate) Reporting Requirement
- **Walk-Through:** Forms 1094-B and 1095-B
- Exceptions to Reporting
- TIN Solicitation Rules
- Statements for Individuals
- Penalties

Tax Reporting Basics

Employer Mandate Reporting

- Provide individuals and the IRS with information about an employer's compliance with the employer mandate, minimum value, and affordability

Minimum Essential Coverage (MEC) Reporting

- Provide individuals and the IRS with information about minimum essential coverage and whether an individual satisfied the individual mandate for the preceding calendar year

6055 Reporting Basics

- Provide individuals and the IRS with information about minimum essential coverage and whether an individual satisfied the individual mandate for the preceding calendar year

- Generally, the plan sponsor is responsible for reporting for a self-insured group health plan. If an employer-sponsored group health plan is insured, the issuer will report

Self-Insured Group Health Coverage- Who Files?

Type of Plan	Who files?
Self-insured group health plan maintained by a single employer	The employer
Plan maintained by more than one employer that is not a multiemployer plan	Each participating employer (IRS employer aggregation rules do not apply)
Multiemployer plan	Board of Trustees (or other similar entity that establishes or maintains the plan)
Plan maintained by an employee organization	Employee organization
Any other plan	The plan sponsor as designated by plan terms. If no person is designated, each entity that maintains the plan

Controlled Group Reporting

- Permitted for:
  - Plan sponsors in a controlled group that is not an applicable large employer, and
  - Providers (such as issuers) that are not reporting as employers:
- May report as separate entities, or may have one entity report for the controlled group
  - But is use of one EIN for the whole controlled group permitted?

Know Your A, B, C Forms

- *For individuals enrolled in qualified health plans through Marketplaces:* Marketplaces will report on the "A" Form
  - To IRS and Recipients: 1095-A
- *Applicable Large Employers (ALEs) that sponsor self-funded medical:* Report on the "C" Forms
  - To IRS: 1094-C (transmittal) and 1095-C
  - To Covered Individuals: 1095-C
- *Everyone else (i.e., issuers reporting group health plan coverage, small employers that self fund): Report on the "B" Forms*
  - To IRS: 1094-B (transmittal) and 1095-B
  - To Covered Individuals: 1095-B

Know Your A, B, C Forms

Type of Entity	"B" Form Filing?	"C" Form Filing?
Small employer who self-funds group health coverage	Yes- to report MEC provided under group health plan	No- not an ALE, so not subject to 4980H, so not subject to 6056

Know Your A, B, C Forms

Type of Entity	"B" Form Filing?	"C" Form Filing?
Small employer who self-funds group health coverage	Yes- to report MEC provided under group health plan	No- not an ALE, so not subject to 4980H, so not subject to 6056
Small employer who sponsors insured coverage	No- the insurer will have the 6055 reporting requirement	No- not an ALE, so not subject to 4980H, so not subject to 6056

Know Your A, B, C Forms

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Small employer who sponsors insured coverage	No- the insurer will have the 6055 reporting requirement	No- not an ALE, so not subject to 4980H, so not subject to 6056
Large employer who sponsors insured coverage	No- the insurer will have the 6055 reporting requirement	Yes- an ALE, so subject to 4980H, so subject to 6056

Know Your A, B, C Forms

Type of Entity	"B" Form Filing?	"C" Form Filing?
Small employer who self-funds group health coverage	Yes- to report MEC provided under group health plan	No- not an ALE, so not subject to 4980H, so not subject to 6056
Small employer who sponsors insured coverage	No- the insurer will have the 6055 reporting requirement	No- not an ALE, so not subject to 4980H, so not subject to 6056
Large employer who sponsors insured coverage	No- the insurer will have the 6055 reporting requirement	Yes- an ALE, so subject to 4980H, so subject to 6056
Insurer of employer-sponsored group health coverage	Yes- the insurer will have the 6055 reporting requirement	No- insurers don't report for ALEs under 6056

Know Your A, B, C Forms

Type of Entity	"B" Form Filing?	"C" Form Filing?
Small employer who self-funds group health coverage	Yes- to report MEC provided under group health plan	No- not an ALE, so not subject to 4980H, so not subject to 6056
Small employer who sponsors insured coverage	No- the insurer will have the 6055 reporting requirement	No- not an ALE, so not subject to 4980H, so not subject to 6056
Large employer who sponsors insured coverage	No- the insurer will have the 6055 reporting requirement	Yes- an ALE, so subject to 4980H, so subject to 6056
Insurer of employer-sponsored group health coverage	Yes- the insurer will have the 6055 reporting requirement	No- insurers don't report for ALEs under 6056
Large employer who self-funds group health coverage (and provides coverage to certain non-employees)	Maybe- employer has option of reporting MEC provided to non-employees on either "B" or "C" Forms	Yes- subject to mandatory combined reporting so 6055 and 6056 reporting for employees and FTEs will be on "C" Forms

Know Your A, B, C Forms

Example:

- Acme Co. is subject to the employer mandate for 2015.
- Acme sponsors a self-funded plan for all of its employees.
- Acme also offers a fully-insured plan to employees in the NY/NJ/CT tri-state area. The insured plan is underwritten by Big Apple Insurance.
- Some employees (including full-time employees for purposes of the employer mandate rules) enroll in self-funded coverage and some enroll in the insured coverage

Know Your A, B, C Forms

Acme Co. Conclusion:

- Acme Co. is subject to mandatory combined reporting because it is an ALE
- Thus, Acme Co. will be using the "C" Forms for 6055 and 6056 reporting generally, with certain reporting to happen on the "B" Forms by Big Apple Insurance for employees enrolled in insured coverage

Know Your A, B, C Forms

Acme Co. Conclusion:

- Full-timers:
  - If enrolled in NO coverage, Acme Co. will complete Parts I and II of the Form 1095-C and leave blank Part III
  - If enrolled in self-funded coverage: Acme Co. will complete all of the Form 1095-C
  - If enrolled in insured coverage: Acme Co. will complete Parts I and II of the Form 1095-C; Big Apple Insurance will complete a Form 1095-B
- Non-full-timers:
  - If enrolled in NO coverage, then no reporting by Acme Co. or Big Apple Insurance
  - If enrolled in self-funded coverage, Acme Co. will complete Parts I and III of the Form 1095-C (with Part II code re: non-full-time status)
  - If enrolled in insured coverage, Acme Co. will complete no Form 1095-C; Big Apple Insurance will complete a Form 1095-B

"B" Forms- The Due Dates

- To Responsible Individuals by Jan 31 of the next year
- To the IRS
  - Filing electronically (required if ≥ 250 1095-Bs) – by March 31 of the next year
  - Filing paper (optional if < 250 1095-Bs) – by Feb 28 of the next year
- First filing in 2016 for 2015 information

IRS Form 1094-B
(Transmittal Form)

- "Final" Form released February 9, 2015

  [*available at: http://www.irs.gov/pub/irs-pdf/f1094b.pdf*]

- Instructions released same day

  [*available at: http://www.irs.gov/pub/irs-pdf/i109495b.pdf*]

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Form **1094-B**

Department of the Treasury
Internal Revenue Service

Transmittal of Health Coverage Information Returns

► Information about Form 1094-B and its separate instructions is at *www.irs.gov/form1094b.*

OMB No. 1545-2252

2014

1 Filer's name	2 Employer identification number (EIN)
3 Name of person to contact	4 Contact telephone number
5 Street address (including room or suite no.)	6 City or town
7 State or province	8 Country and ZIP or foreign postal code
9 Total number of Forms 1095-B submitted with this transmittal . . . . . ►	

For Official Use Only

Under penalties of perjury, I declare that I have examined this return and accompanying documents, and, to the best of my knowledge and belief, they are true, correct and complete.

► Signature _____ ► Title _____ ► Date _____

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions. Cat. No. 61570P Form **1094-B** (2014)

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1094-B

...ment of the Treasury
Internal Revenue Service

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Internal Revenue Service

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Form **1094-B**

Department of the Treasury
Internal Revenue Service

Transmittal of Health Coverage Information Returns

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(Return Form)

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  [available at: http://www.irs.gov/pub/irs-pdf/f1095b.pdf]

- Instructions released same day

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Form **1095-B**

Department of the Treasury
Internal Revenue Service

Health Coverage

► Information about Form 1095-B and its separate instructions is at *www.irs.gov/form1095b.*

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2014

Part I Responsible Individual (Policy Holder)

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 (If Line 8 is A or B, complete this part.)

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

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(s).)

	(a) Name of covered individual(s)	(b) SSN	(c) DOB (If SSN is not available)	(d) Covered all 12 months	(e) Months of coverage											
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For Privacy Act and Paperwork Reduction Act Notice, see separate instructions. Cat. No. 60704B Form **1095-B** (2014)

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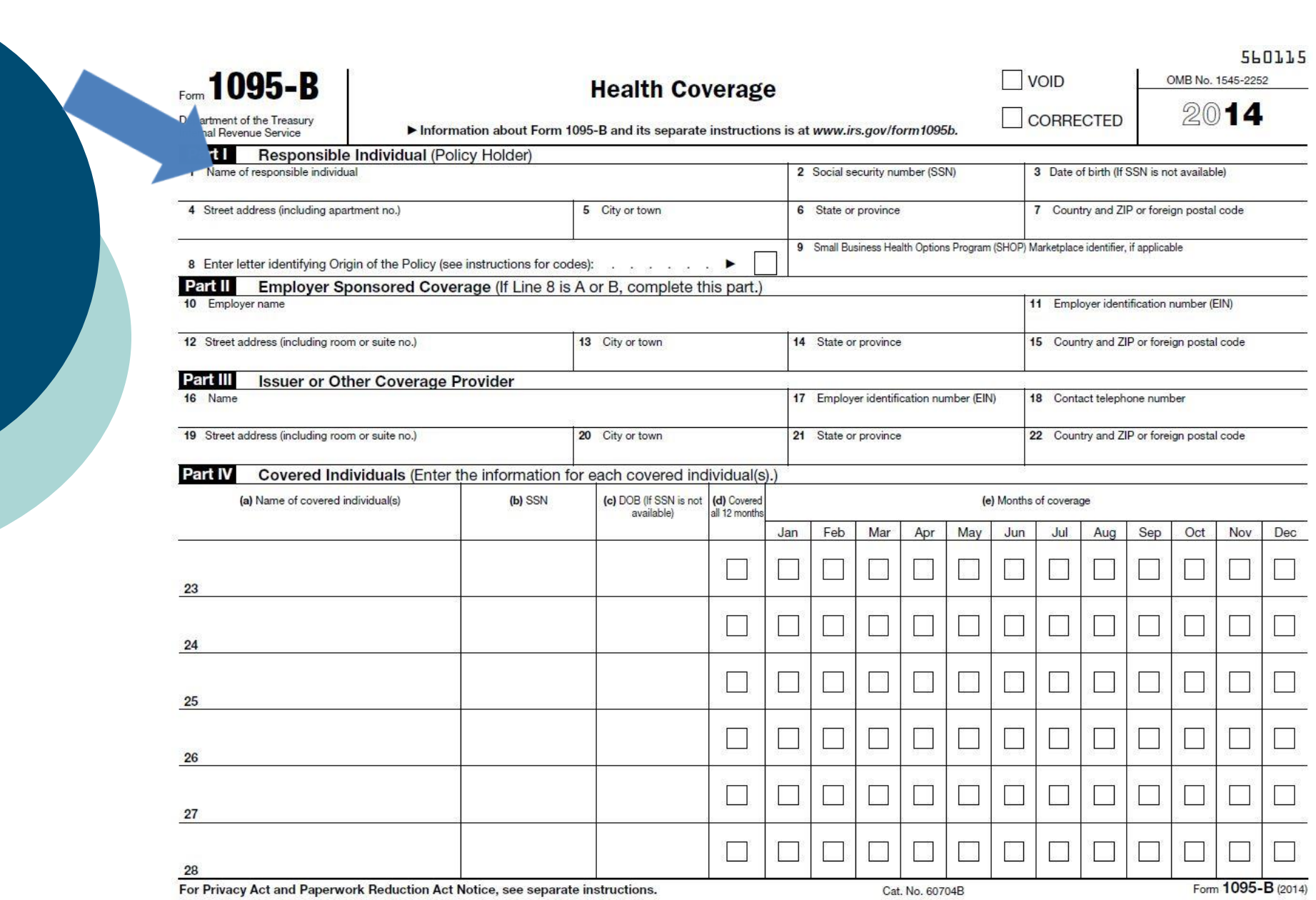

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Form **1095-B**

Department of the Treasury
Internal Revenue Service

Health Coverage

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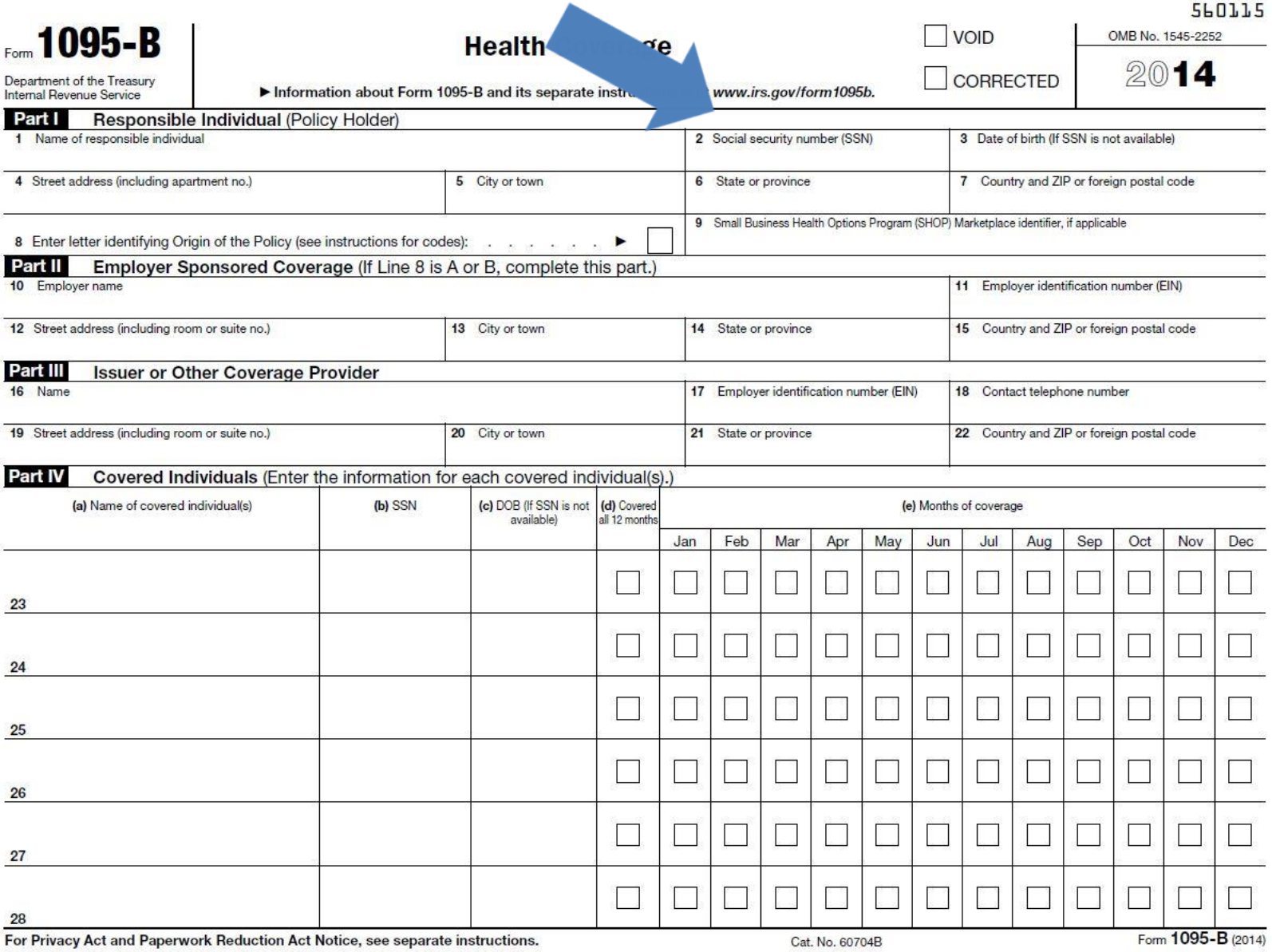
"Responsible Individual"

- May be a primary insured employee, former employee, parent, or other person enrolling individuals in coverage
- Do not enter the name of a business or business owner that is the policy holder for its employees
- No requirement to report TIN of a Responsible Individual not enrolled in the coverage



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Form **1095-B** — Health ...ge

Department of the Treasury
Internal Revenue Service

► Information about Form 1095-B and its separate instr... www.irs.gov/form1095b.

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OMB No. 1545-2252

2014

Part I **Responsible Individual** (Policy Holder)

1 Name of responsible individual		2 Social security number (SSN)	3 Date of birth (If SSN is not available)
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Part III **Issuer or Other Coverage Provider**

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Part IV **Covered Individuals** (Enter the information for each covered individual(s).)

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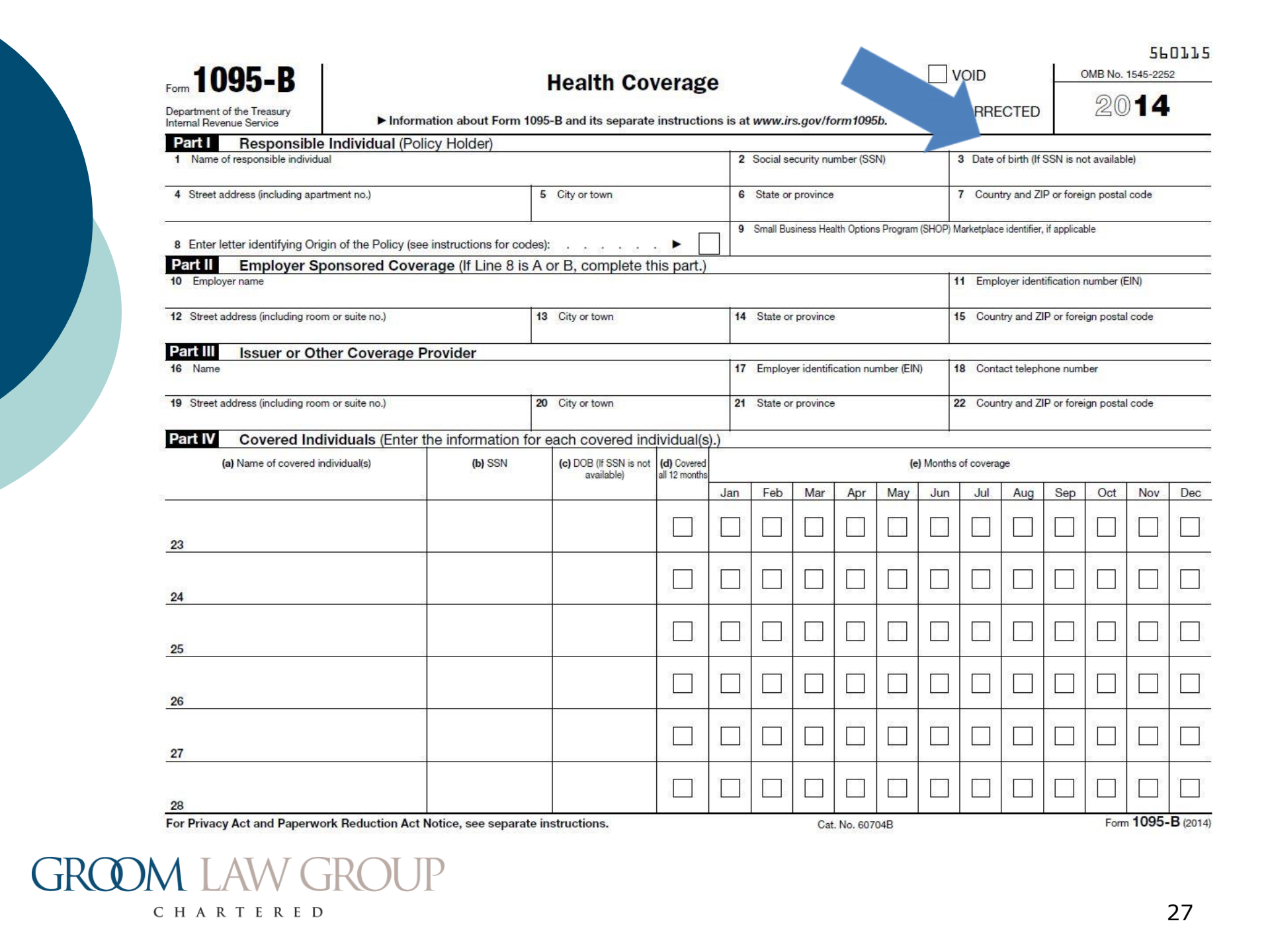

Form **1095-B**

Department of the Treasury
Internal Revenue Service

Health Coverage

► Information about Form 1095-B and its separate instructions is at *www.irs.gov/form1095b.*

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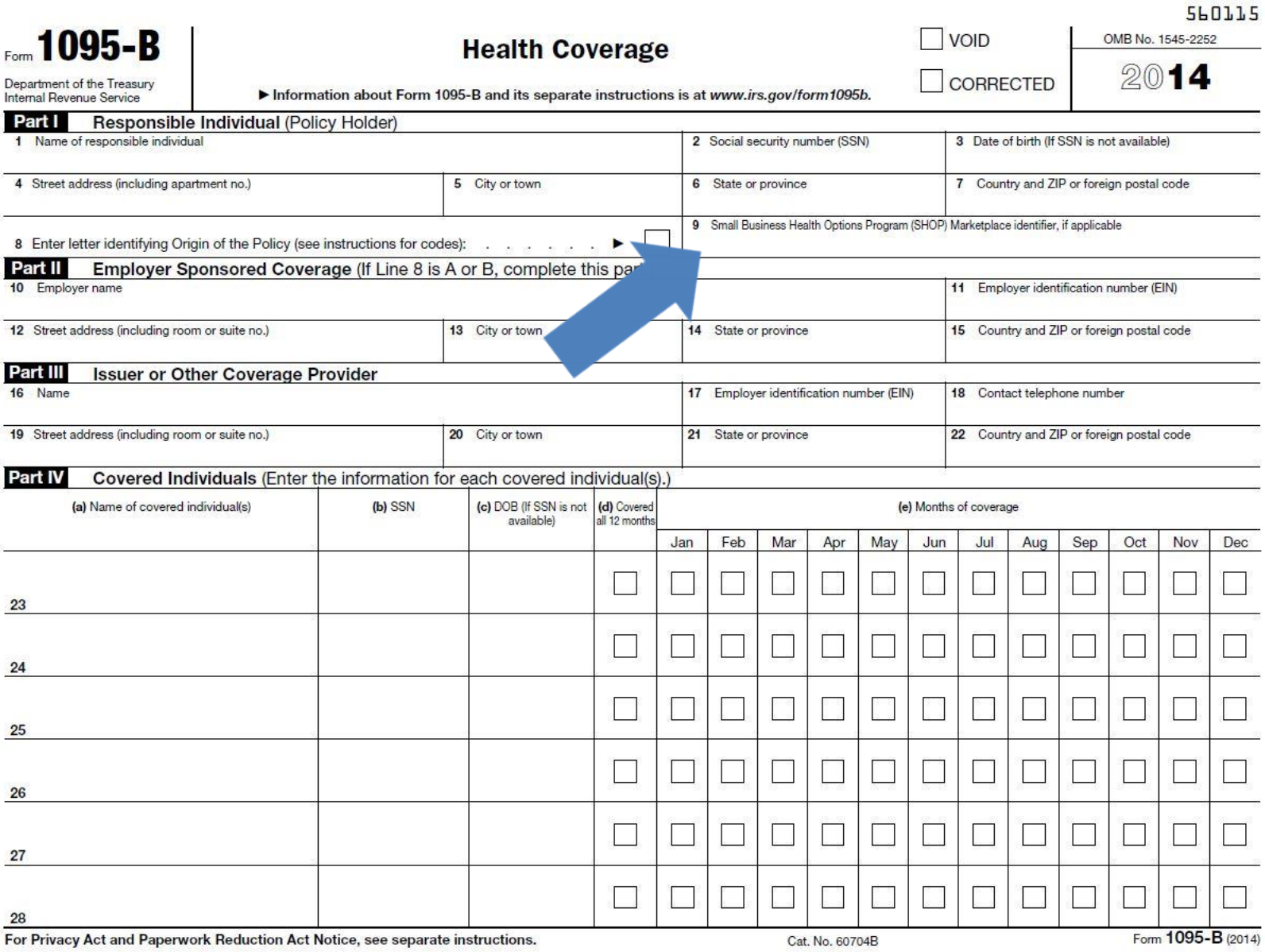
"Origins of the Policy"

- On Line 8, enter code identifying the origin of the policy:
  - A = SHOP
  - B = Employer-sponsored coverage
  - C = Government-sponsored program
  - D = Individual market insurance
  - E = Multiemployer plan
  - F = Miscellaneous minimum essential coverage



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Form **1095-B**

Department of the Treasury
Internal Revenue Service

Health Coverage

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☐ VOID
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OMB No. 1545-2252

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Part II **Employer Sponsored Coverage** (If Line 8 is A or B, complete this par

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Part III **Issuer or Other Coverage Provider**

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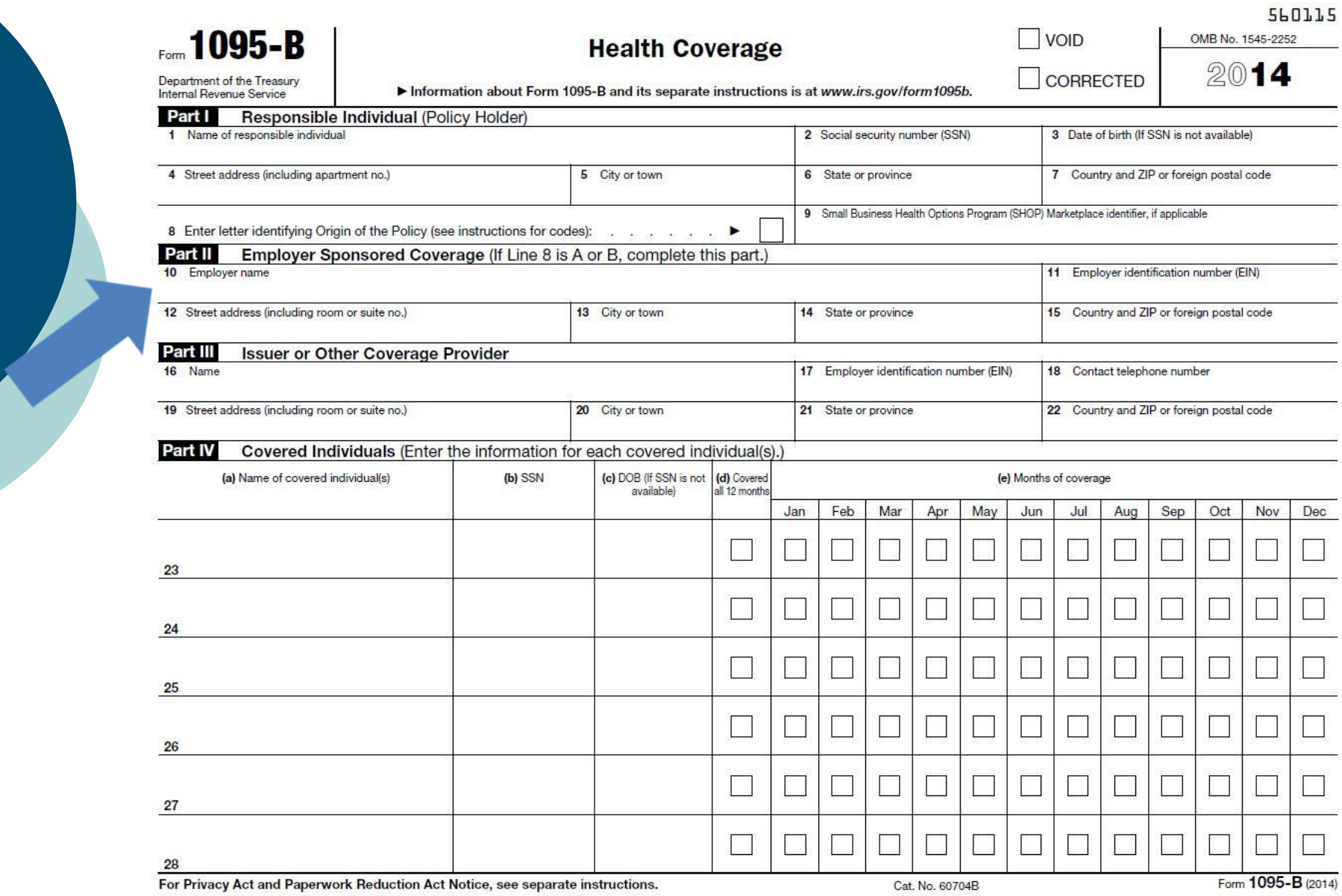

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Form **1095-B**

Department of the Treasury
Internal Revenue Service

Health Coverage

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OMB No. 1545-2252

2014

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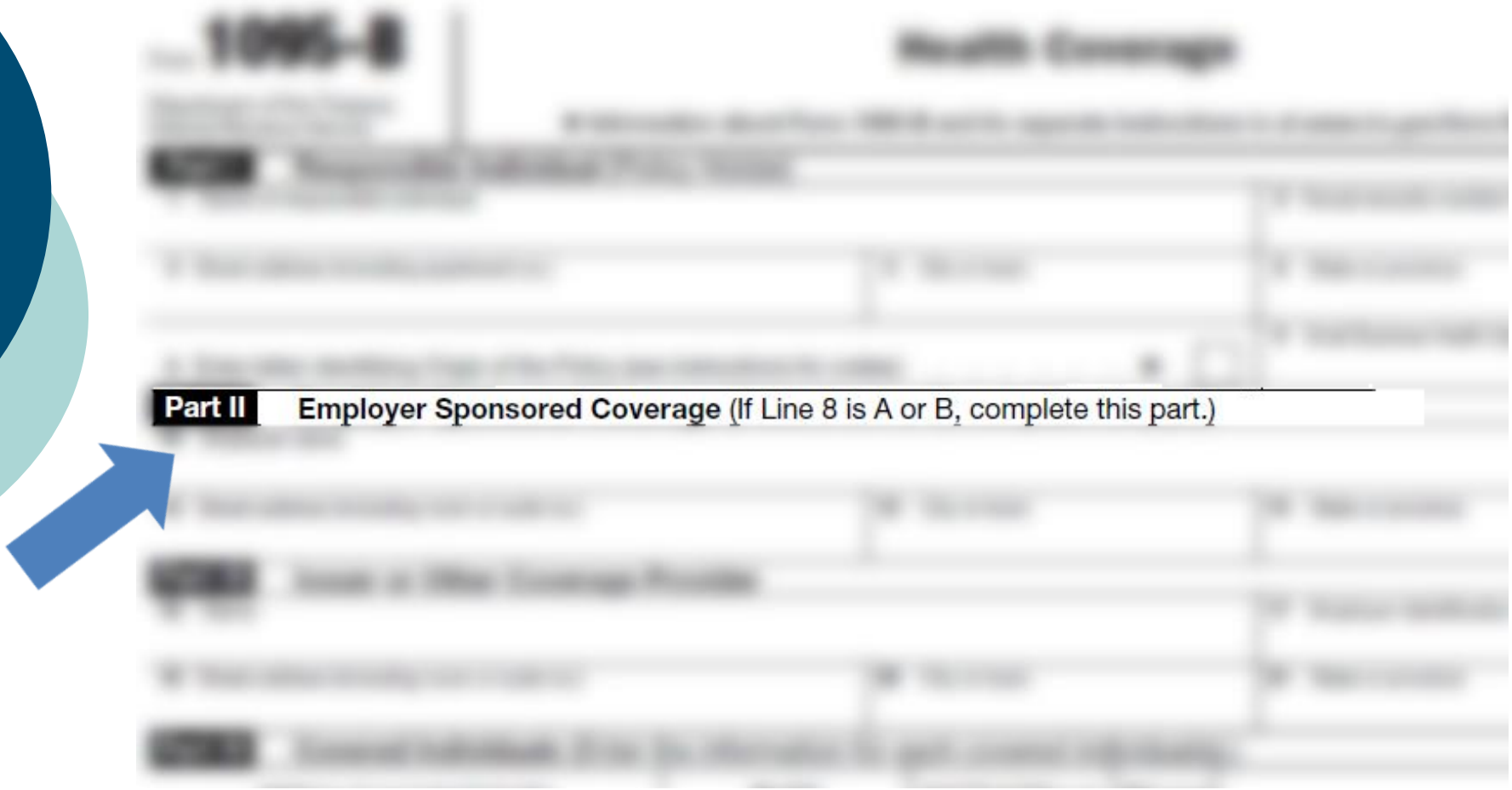

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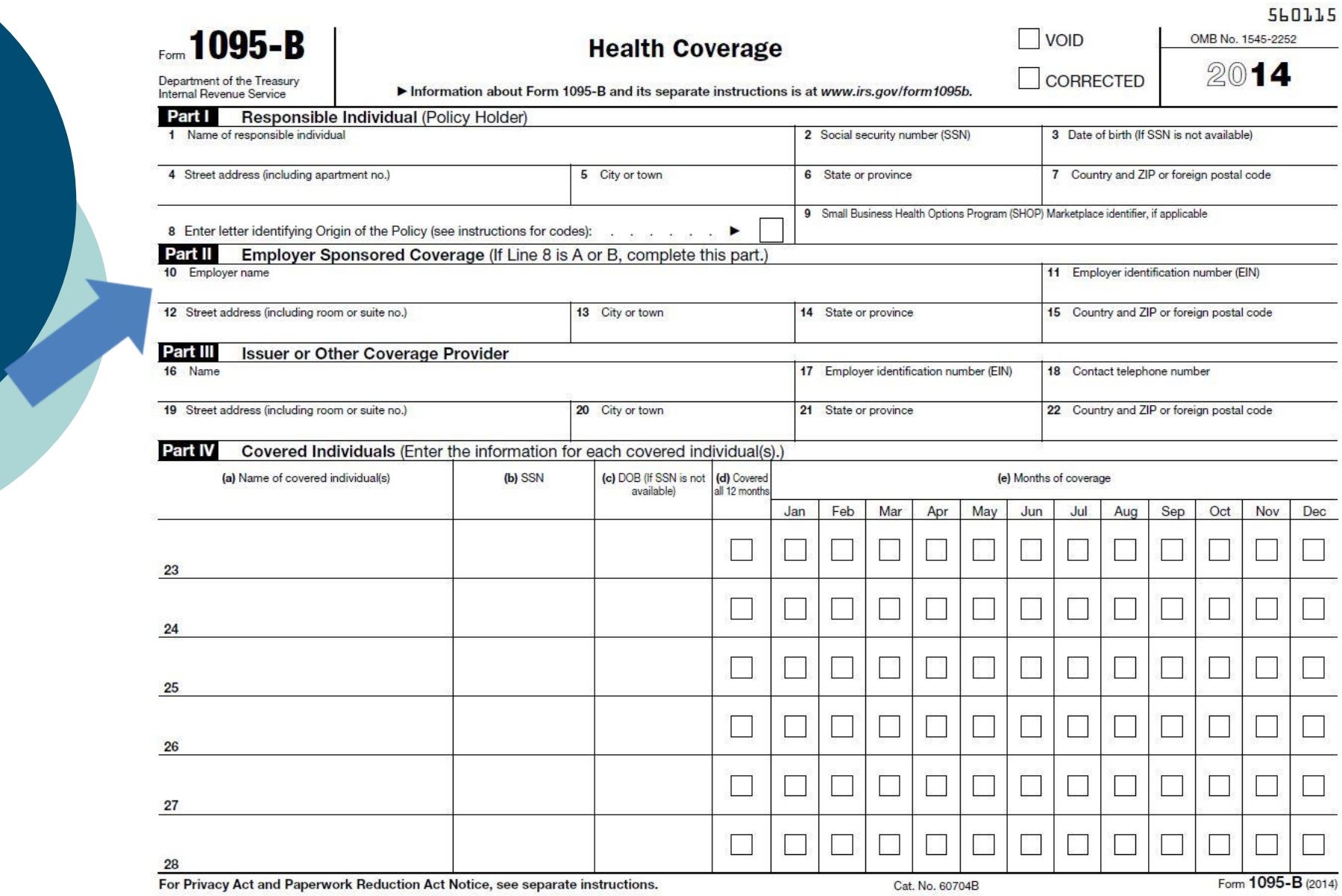

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Department of the Treasury
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Health Coverage

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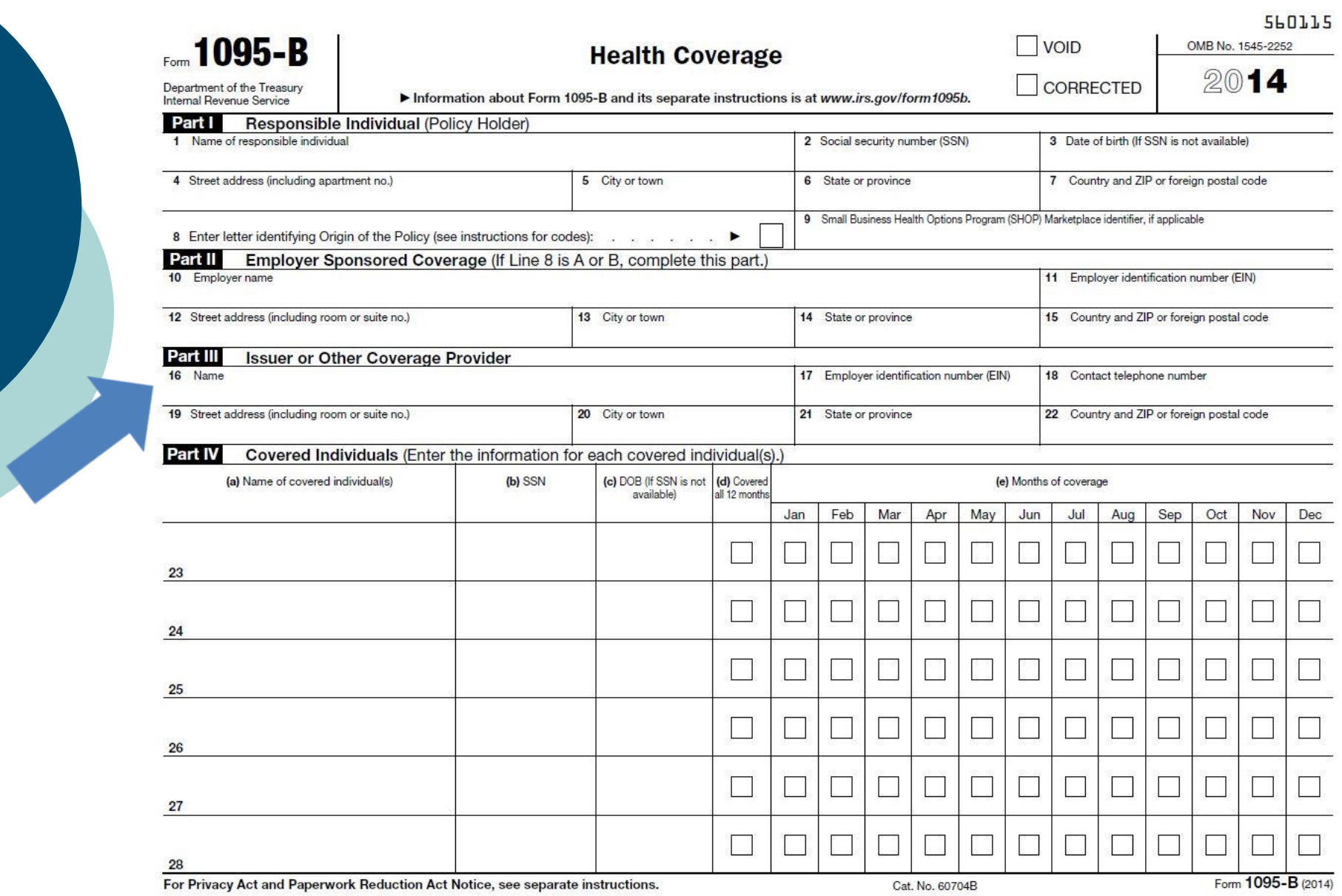

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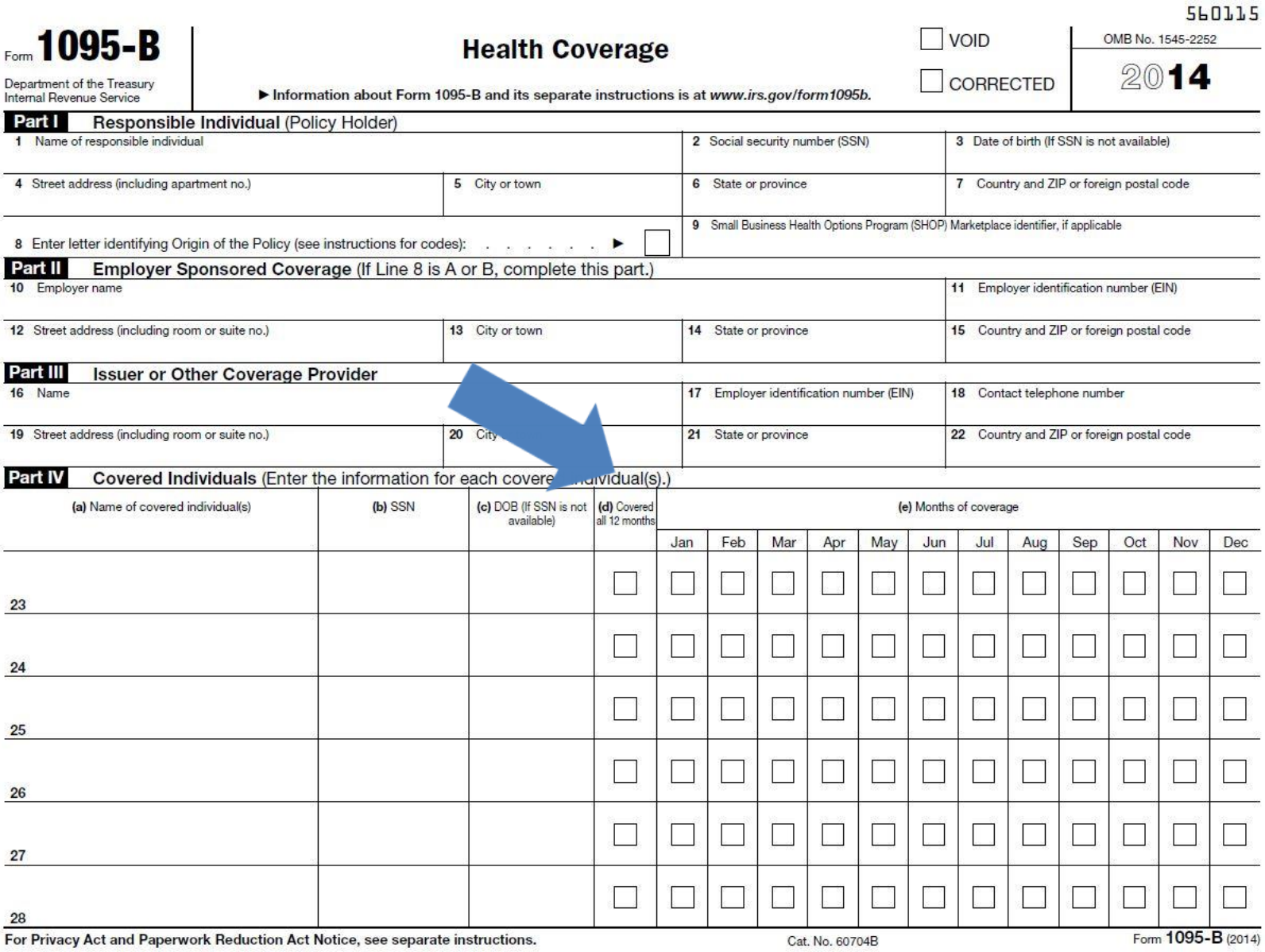

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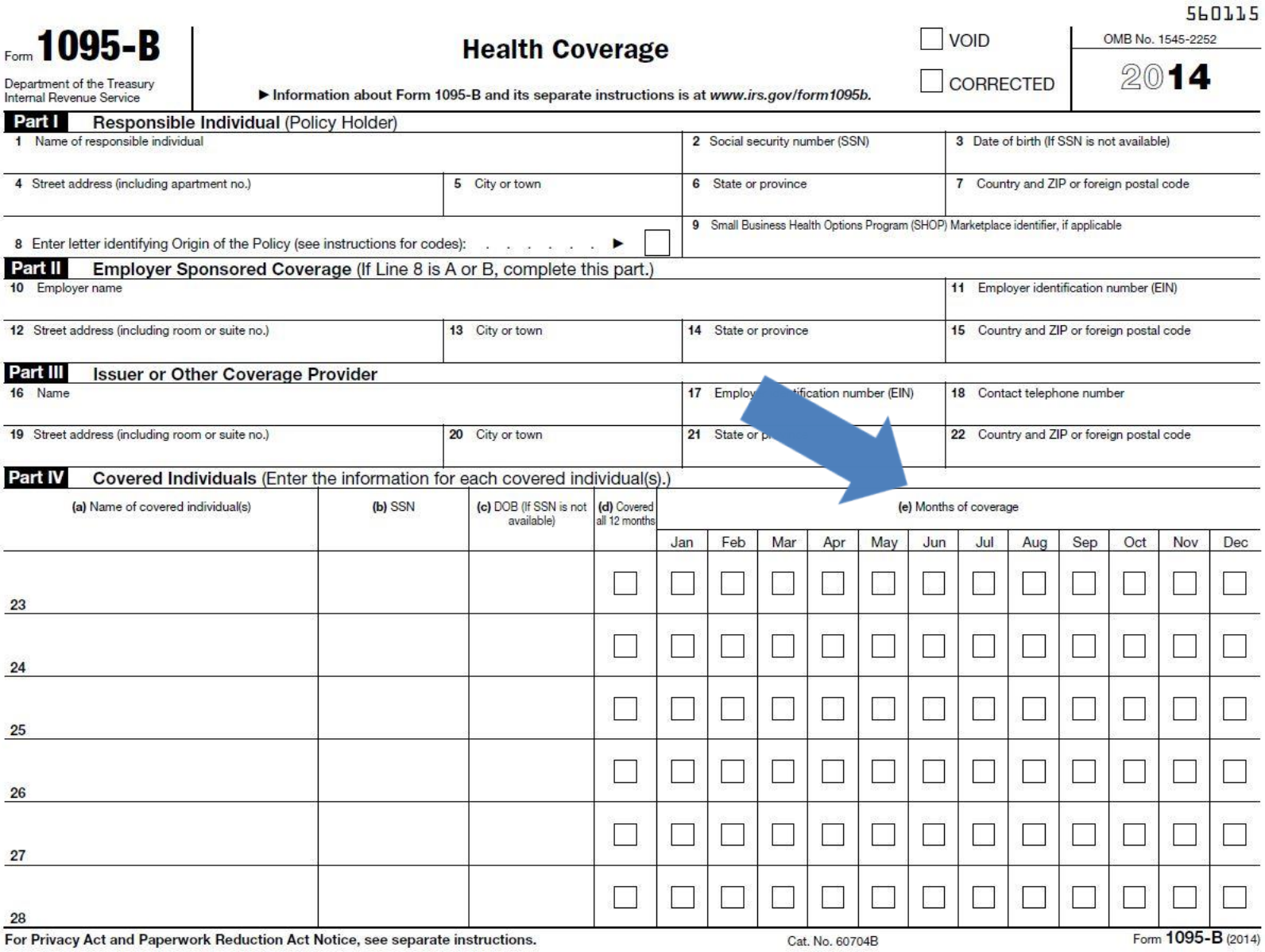

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Exceptions to 6055 Reporting

- **No reporting required** if not MEC (e.g. excepted benefits)
- **No reporting required** for health savings accounts ("HSAs") which are provided in conjunction with an insured high-deductible health plan ("HDHP")
- **No reporting required** for health reimbursement arrangements ("HRAs") that supplement MEC
- **No reporting required** for issuer providing health insurance coverage in connection with government-sponsored program (i.e. Medicaid, CHIP, Medicare Advantage)
- **No reporting required** for wellness programs that are an element of other MEC
- **No reporting required** for MEC that supplements a primary plan of *the same plan sponsor*, or that supplements government-sponsored coverage

TIN Solicitation

- Health issuers have moved away from collecting individuals' social security numbers
- Additionally, employers have been concerned about employees' privacy and potential identity theft, especially with paper delivery
- Many employers and issuers have not been collecting TINs for dependents

TIN Solicitation

- TIN reporting is mandatory for 6055 reporting, but reporting entity can use truncated TINs on individual statements
- Can use a date of birth only if TIN is not available after "reasonable efforts" to obtain it
  - Step 1: At least one initial solicitation "at the time the relationship is established"
  - Step 2: First annual solicitation by 12/31 of the year in which the relationship is established (1/31 of following year if relationship began in December
  - Step 3: Second annual solicitation by 12/31 of the following year
  - If no TIN provided after Steps 1, 2, and 3, no need to continue soliciting a TIN
- No need to report TINs for individuals not enrolled in the coverage

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Individual Statements

- Must provide statement to responsible individual; no requirement to provide statements to beneficiaries or dependents (such as spouses of covered adult children)
- Must include:
  - Policy number (if applicable)
  - Phone number of contact person
  - Same information that is sent to IRS on the return
  - May include truncated TIN
- Paper Delivery
  - Only need to send one copy to last known permanent address by first class mail
  - If statement is returned, no requirement to resend
- Electronic delivery is permitted in limited instances
  - Need affirmative participant consent
- Must furnish the statement by January 31st of each year (with respect to the prior calendar year coverage)
  - Same schedule that applies to Forms W-2 and 1099
  - If can show "good cause," can apply to the IRS for up to a 30 day extension

Penalties

- Penalties may apply if fail to make return to IRS or provide statement to individuals, fail to include all required information, or report incorrect information
- Very generally, penalties may be up to $100 per return, with a maximum of $1.5 million
- Waiver available where failure is due to reasonable cause and not due to willful neglect
- Penalties are reduced if corrected return filed within 30 days of required filing date
- Penalties are reduced (by a lesser amount) if corrected return filed by the following August 1
- Limited relief for returns and statements filed or furnished in 2016 (for 2015 coverage), if incorrect or incomplete information is reported (including TINs, DOBs) and entity made a good faith effort to comply
- No "cut-off" for correcting returns

6055 Reporting- Questions to Consider

- Who will perform the filing?
  - You? Your insurer? Related company? Third party service?
- Who will track the information necessary for filing?
- Do you have the necessary TINs, particularly for dependents? What is your plan for soliciting TINs?
- How will you deliver statements to employees? By mail, or electronically?

Questions?

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