

Form 1095-A

Understanding Form 1095-A

Is Form 1095-A Correct?

Scrutinize Form 1095-A to make sure it is consistent with when the taxpayer had coverage. Look for critical errors that will affect the PTC calculation, such as errors in premium, SLCSP, or APTC.

The taxpayer *should seek a corrected 1095-A if enrollment-related information is incorrect*. This includes:

- Policy issuer's name (Part I)
- Policy start or end date (Part I, Part II)
- Premium cost (Part III, Column A)
- APTC received (Part III, Column C)

Do not seek a correction for:

- Errors in demographic information, such as name, date of birth or social security number (Part I)
- Errors to the SLCSP (Part III)—use a Marketplace Tax Tool to figure out the correct amount and use that on Form 8962

Special Rules Related to Coverage Information (Part III)

Column A: This is the full premium, including the amount paid with APTC

- It excludes the value of certain "extra" benefits, such as adult dental.
- If the premium is -0- but there is an APTC, the person likely didn't pay their premium. If they pay it by the tax filing deadline, they can claim PTC for the month. If they do not, they must repay the APTC received for that month. (Enter as written on Form 1095-A.)
- If there are multiple rows with -0- and an APTC value, this is likely an error. Seek a corrected Form 1095-A.

Column B: This is the benchmark plan that helps establish the PTC amount. It's based on family size, age, and location.

You may need to look up the SLCSP if:

1. It is incorrect, perhaps because a change in family size was not reported.
2. It is missing. This happens when someone paid the full premium. (Other Marketplaces routinely leave this space blank and direct taxpayers to a look-up tool.)
3. There are multiple Forms 1095-A with conflicting information or the taxpayer otherwise thinks it's incorrect.

See healthcare.gov/tax-tool or your state's tax tool .

Column C: Advance payment of PTC

Form 1095-A				
Form 1095-A		Health Insurance Marketplace Statement		OMB No. 1545-2232
Department of the Treasury Internal Revenue Service		Information about Form 1095-A and its separate instructions is at www.irs.gov/form1095a .		2015
Part I Recipient Information				
1 Marketplace identifier	2 Marketplace-assigned policy number	3 Policy issuer's name		
4 Recipient's name		5 Recipient's SSN	6 Recipient's date of birth	
7 Recipient's spouse's name		8 Recipient's spouse's SSN	9 Recipient's spouse's date of birth	
10 Policy start date	11 Policy termination date	12 Street address (including apartment no.)		
13 City or town	14 State or province	15 Country and ZIP or foreign postal code		
Part II Covered Individuals				
A. Covered individual name	B. Covered individual SSN	C. Covered individual date of birth	D. Coverage start date	E. Coverage termination date
16				
17				
18				
19				
20				
Part III Coverage Information				
Month	A. Monthly enrollment premiums	B. Monthly second lowest cost silver plan (SLCSP) premium	C. Monthly advance payment of premium tax credit	
21 January				
22 February	Column A	Column B	Column C	
23 March				
24 April				
25 May				
26 June				
27 July				
28 August				
29 September				
30 October				
31 November				
32 December				
33 Annual Totals				

Remember: A person may be entitled to PTC even if no APTC was received. Do not assume someone is ineligible. If there is a premium amount in Column A for a month and no SLCSP or APTC and they appear eligible for the credit, enter the SLCSP to calculate the correct PTC.

Form 1095-A

Understanding Form 1095-A

Multiple Forms 1095-A

Some taxpayers will have multiple Forms 1095-A. This will happen if the taxpayer:

- Changed Marketplace plans during the year
- Updated their application with new information that resulted in a new enrollment
- Had family members enrolled in different Marketplace plans
- Had more than 5 family members in the same plan

Entering Multiple Forms 1095-A on One Form 8962

Make sure everyone on the Forms 1095-A is also on the tax return. If not, this may be a Shared Policy Allocation.

Column A: Add the premiums together.

Column B: If everyone in the coverage family enrolled in the same state, the SLCSP should be the same on all Forms 1095-A for a given month. Enter that amount. If the enrollees are in different states, add the SLCSPs. When in doubt, look it up in the Tax Tool for your Marketplace.

Column C (entered in Column F of Form 8962): Add the amounts together.

Form 1095-A					
Form 1095-A		Health Insurance Marketplace Statement		<input type="checkbox"/> VOID <input type="checkbox"/> CORRECTED	OMB No. 1545-2232
Department of the Treasury Internal Revenue Service		Information about Form 1095-A and its separate instructions is at www.irs.gov/form1095a .		2015	
Part I Recipient Information					
1 Marketplace identifier	2 Marketplace-assigned policy number	3 Policy issuer's name			
4 Recipient's name		5 Recipient's SSN	6 Recipient's date of birth		
7 Recipient's spouse's name		8 Recipient's spouse's SSN	9 Recipient's spouse's date of birth		
10 Policy start date	11 Policy termination date	12 Street address (including apartment no.)			
13 City or town	14 State or province	15 Country and ZIP or foreign postal code			
Part II Covered Individuals					
A. Covered individual name	B. Covered individual SSN	C. Covered individual date of birth	D. Coverage start date	E. Coverage termination date	
16					
17					
18					
19					
20					
Part III Coverage Information					
Month	A. Monthly enrollment premiums	B. Monthly second lowest cost silver plan (SLCSP) premium	C. Monthly advance payment of premium tax credit		
21 January	↓	↓	↓		
22 February	Column A	Column B	Column C		
23 March					
24 April					
25 May					
26 June					
27 July					
28 August					
29 September					
30 October					
31 November					
32 December					
33 Annual Totals					

Form 8962, Premium Tax Credit

Tips and Tricks for Complex Cases

Special Situations in Reconciliation (out of scope for VITA/TCE)

- Shared Policy Allocation:** Form 1095-A covers at least one person on the taxpayer's return and one person not on the return. This may happen when taxpayers divorce or separate, or when the taxpayer enrolls in coverage with a non-dependent, such as an older child who has a tax-filing requirement.
- Alternative Calculation for the Year of Marriage:** This may reduce repayment where the taxpayer got married during the tax year, someone on the tax return had APTC, and the normal PTC calculation results in a repayment of APTC. Unlike the Shared Policy Allocation, the taxpayer is not required to use this calculation. It is most useful if the spouses' incomes are different and the lower-income taxpayer received the APTC, and if the marriage occurred late in the year.

Is the Taxpayer Eligible for PTC at All?

PROBLEM: The taxpayer is Married Filing Separately

What you'll see: A filing status of Married Filing Separately on the 1040 and a Form 1095-A

What to do: In general, the taxpayer is ineligible for the PTC and must repay the APTC, up to the cap. However:

Does an exception apply? Check the box at the top of Form 8962 if the taxpayer is either a survivor of domestic abuse or has been abandoned by his or her spouse.

If no exception applies:

- Does Form 1095-A include someone in the taxpayer's family and someone on another tax return?** If so, it is a shared policy allocation.
- Does Form 1095-A include only people on the taxpayer's return?** The taxpayer is not eligible for PTC and must repay any APTC. On Form 8962, calculate Lines 1 - 5, skip Lines 6 - 8b. Complete lines 9 and 10. On Line 11 or Lines 12-23, only enter information in Column F. Do not enter the other columns of Form 1095-A.

PROBLEM: The taxpayer has income at or above 401% FPL

What you'll see: An FPL of 401% or higher on Line 5 of Form 8962

What to do: In general, the taxpayer is ineligible for the PTC and must repay all APTC, with no cap. However:

- Can household income be reduced to 400% FPL or below through income adjustments?** Consider the IRA or tuition and fees deductions.
- For joint filers, did you consider filing as Married Filing Separately?** While APTC must still be repaid, the repayment caps will apply. Factor in other effects of MFS, such as elimination of certain credits and the higher tax rate.

If none of these options are available and income remains at 401% FPL or above:

- If no APTC, stop. Do not complete the rest of Form 8962.
- If APTC, skip lines 7 and 8. Complete lines 9 and 10. On Line 11 or Lines 12-23, only enter information in Column F. Do not enter the other columns of Form 1095-A.

Form 8962

Form 8962

Department of the Treasury
Internal Revenue Service

Name shown on your return

Premium Tax Credit (PTC)

► Attach to Form 1040, 1040A, or 1040NR.

► Information about Form 8962 and its separate instructions is at www.irs.gov/form8962.

Your social security number

OMB No. 1545-0074

2015

Attachment
Sequence No. 73

You cannot claim the PTC if your filing status is married filing separately unless you are eligible for an exception (see instructions). If you qualify, check the box.

Part I Annual and Monthly Contribution Amount

1	Tax family size. Enter the number of exemptions from Form 1040 or Form 1040A, line 6d, or Form 1040NR, line 7d	1	
2a	Modified AGI. Enter your modified AGI (see instructions)	2a	2b Enter the total of your dependents' modified AGI (see instructions)
3	Household income. Add the amounts on lines 2a and 2b	3	
4	Federal poverty line. Enter the federal poverty line amount from Table 1-1, 1-2, or 1-3 (see instructions). Check the appropriate box for the federal poverty table used: <input type="checkbox"/> Alaska <input type="checkbox"/> Hawaii <input type="checkbox"/> Other 48 states and DC	4	
5	Did you enter 401% on line 5? (See instructions if you entered less than 100%.)	5	%
	<input type="checkbox"/> No. Continue to line 7. <input type="checkbox"/> Yes. You are not eligible to receive PTC. If advance payment of the PTC was made, see the instructions for how to report your excess advance PTC repayment amount.		
7	Applicable Figure. Using your line 5 percentage, locate your "applicable figure" on the table in the instructions	7	
8a	Annual contribution amount. Multiply line 3 by line 7	8a	8b Monthly contribution amount. Divide line 8a by line 12. Round to whole dollar amount

Part II Premium Tax Credit Claim and Reconciliation of Advance Payment of Premium Tax Credit

Yes. Skip to Part IV, Shared Policy Allocation, or Part V, Alternative Calculation for Year of Marriage. No. Continue to line 10.

Yes. Continue to line 11. Compute your annual PTC. Then skip lines 12-23. No. Continue to lines 12-23. Compute your monthly PTC and continue to line 24.

Annual Calculation	(a) Annual enrollment premiums (Form(s) 1095-A, line 33A)	(b) Annual applicable SLCSIP premium (Form(s) 1095-A, line 33B)	(c) Annual contribution amount (line 8a)	(d) Annual maximum premium assistance (subtract (c) from (b), if zero or less, enter -0-)	(e) Annual premium tax credit allowed (smaller of (a) or (d))	(f) Annual advance payment of PTC (Form(s) 1095-A, line 33C)
11 Annual Totals						
12 January						
13 February						
14 March						
15 April						
16 May						
17 June						
18 July						
19 August						
20 September						
21 October						
22 November						
23 December						
24	Total premium tax credit. Enter the amount from line 11(e) or add lines 12(e) through 23(e) and enter the total here					24
25	Advance payment of PTC. Enter the amount from line 11(f) or add lines 12(f) through 23(f) and enter the total here					25
26	Net premium tax credit. If line 24 is greater than line 25, subtract line 25 from line 24. Enter the difference here and on Form 1040, line 69; Form 1040A, line 45; or Form 1040NR, line 65. If you elected the alternative calculation for marriage, enter zero. If line 24 equals line 25, enter zero. Stop here. If line 25 is greater than line 24, leave this line blank and continue to line 27					26

Part III Repayment of Excess Advance Payment of the Premium Tax Credit

27	Excess advance payment of PTC. If line 25 is greater than line 24, subtract line 24 from line 25. Enter the difference here	27	
28	Repayment limitation (see instructions)	28	
29	Excess advance premium tax credit repayment. Enter the smaller of line 27 or line 28 here and on Form 1040, line 46; Form 1040A, line 29; or Form 1040NR, line 44	29	

TAX REFERENCE: PTC Reconciliation, Page 3

Form 8962, Premium Tax Credit

Tips and Tricks for Complex Cases

Is the Taxpayer Eligible for PTC for a Particular Month?

PROBLEM: The taxpayer stopped paying premiums

What you'll see: Numbers in Columns B and C but no premium in Column A (-0-) for a month on Form 1095-A, Part III

What to do:

- The taxpayer can only collect APTC if the premium is paid by the tax return due date (without extensions). If the APTC is high and covers most of the premium, can the taxpayer make the (late) premium payment? It may be more cost-effective to pay the premium than to repay the APTC! After the premium is paid, ask for a corrected Form 1095-A.
- If the premium payment has not and will not be made, enter the SLCSP and APTC and leave Column A blank. Note: There should never be consecutive months like this. If so, there is an error on Form 1095-A.
- Even if the taxpayer isn't eligible for PTC, he or she is still considered to have coverage for the month, despite nonpayment of premium.

Sample Form 1095-A: PART III			
Part III Coverage Information			
Month	A. Monthly enrollment premiums	B. Monthly second lowest cost silver plan (SLCSP) premium	C. Monthly advance payment of premium tax credit
21 January			
22 February	\$301	\$288	\$87
23 March	\$301	\$288	\$87
24 April	\$301	\$288	\$87
25 May	- 0 -	\$288	\$87
26 June			
27 July			
28 August			
29 September			
30 October			
31 November			
32 December			

PROBLEM: The taxpayer paid the full premium for one or more months but may be eligible for PTC

What you'll see: A premium in Column A but nothing in Columns B or C on Form 1095-A, Part III

What to do:

- The taxpayer might have paid the full premium because he or she was disputing an eligibility determination or reported a change in circumstances that adjusted the APTC to zero.
- **The taxpayer may still be eligible for a premium tax credit for that month!**
- First, ensure the person is otherwise eligible for the premium tax credit for the month (see Form 8962 Instructions, p.2). Then, enter the SLCSP in Column B, using the Tax Tool for your marketplace.

Sample Form 1095-A: PART III			
Part III Coverage Information			
Month	A. Monthly enrollment premiums	B. Monthly second lowest cost silver plan (SLCSP) premium	C. Monthly advance payment of premium tax credit
21 January	\$301		
22 February	\$301		
23 March	\$301		
24 April	\$301		
25 May	\$301		
26 June	\$301		
27 July	\$301		
28 August			
29 September			
30 October			
31 November			
32 December			

PROBLEM: The taxpayer has multiple Forms 1095-A for the same month

What you'll see: Multiple forms 1095-A with an overlapping month for at least one person in the tax household

What to do: This happens when the taxpayer updated their income or household members with the Marketplace or made a plan change. It's also possible that family members enrolled in different plans. See Form 8962 Instructions for Lines 12-23.

- In Columns A and C, add the monthly premiums and APTC from the Forms 1095-A.
- In Column B, if individuals in your coverage family enrolled in separate policies in the same state, you will receive a Form 1095-A for each policy. The SLCSP should be the same on both. If the enrollees are in different states, add the SLCSPs. When in doubt, look it up in the Tax Tool for your Marketplace.

PROBLEM: The taxpayer is enrolled in other (non-marketplace) coverage in the same month

What you'll see: A Form 1095-B or -C with coverage or eligibility months that overlap with Marketplace coverage on Form 1095-A

What to do: In general, PTC is allowed if the Marketplace previously approved APTC. See Form 1095-B or -C instructions, Form 8962 instructions, or Publication 974 for more information.