

## Employee Notice Regarding Form 1095-C, Employer-Provided Health Insurance Offer and Coverage

This notice provides important information about Form 1095-C, Employer-Provided Health Insurance Offer and Coverage, and Form 1095-B, Health Coverage. Please note that Employing agencies are not required to list dependents on Form 1095-C. If you were enrolled in a FEHB plan that provided family member health coverage, the health insurance carrier providing the coverage will furnish you a Form 1095-B, which will list your covered family members.

### **Background:**

The Affordable Care Act requires certain employers to offer health insurance coverage to full-time employees and their dependents. These employers must provide an annual statement to all employees eligible for coverage describing the insurance that is available to the employees. The Internal Revenue Service (IRS) created Form 1095-C to serve as that statement.

### **What You Will Receive:**

If you are eligible for the Federal Employees Health Benefits (FEHB) Program coverage, you will receive a Form 1095-C even if you declined to participate in a FEHB plan. Form 1095-C will only show that health insurance coverage was made available to you. **If you have any covered dependents, they will not be listed on this form.** If you have not received a hard copy of your Form 1095-C in the mail, it is now available for you to download in Employee Express by visiting [www.employeeexpress.gov](http://www.employeeexpress.gov).

Additionally, Form 1095-B reflects the details about actual insurance plan coverage, **including the list of covered family members.** Form 1095-B will be sent out by the health insurance carriers to their enrollees. If you were enrolled in a FEHB plan, your health insurance carrier will supply Form 1095-B.

For questions concerning this notice, contact:  
**NASA Shared Services Center (NSSC) Customer Contact Center**  
1-877-677-2123 (1-877-NSSC123) or [nssc-contactcenter@nasa.gov](mailto:nssc-contactcenter@nasa.gov)