

Employee Status	STATE OF IOWA 1095-C (Self-funded plans)	STATE OF IOWA 1095-C (Parts I & II)	STATE OF IOWA 1095-B (Self-funded plans)	Wellmark 1095-B (Fully-Insured Plans)	Previous Employer 1095-C
Contract (AFSCME, IUP, PPME) & Non-Contract in Executive, Legislative, & Judicial Branches	Iowa Choice; National Choice	Alliance Select (SPOC only)	Iowa Choice; National Choice	Alliance Select (SPOC only)	
Permanent Full-Time Employment - 30+ hrs/wk (offered health insurance)	X				
Retired/COBRA covered during reporting year (self funded plan)	X				
Retired all year/Began reporting year as COBRA-covered (self-funded plan)			X		
New Hire - Permanent FT EE (Partial Year)	X				X
State Police Officers' Council (SPOC)					
Permanent Full-Time Employment (Dependent information reflected on 1095-B)		X		X	
Retired/COBRA covered during reporting year		X		X	
Retired all year/began reporting year as COBRA covered				X	
New Hire - Permanent FT EE (Partial Year)	X (DPS Peace Officer Candidates*)	X		X	X
Other					
Permanent Part-time - less than 30 hrs/wk (enrolled in health plan)			X		
Part-time - less than 20 hrs/week and seasonal, emergency, or contract employees	N/A	N/A	N/A	N/A	N/A
Retirees on Program N & F**	N/A	N/A	N/A	N/A	N/A

* DPS peace officer candidates are non-contract employees during the 20-week basic academy and cannot be sworn until completion of basic academy pursuant to Iowa Code section 80.15 and Chapter 80B.

Please be advised:

- The State of Iowa will provide only **one** form for all the individuals covered by your plan. You may need to make copies for your spouse or dependents.
- Form 1095 may also list the lowest monthly premium available for the self-only health insurance offered to you.
The State is required to reflect the non-wellness contribution rate for reporting purposes, so if you qualify for a wellness incentive, the amount shown may not be the actual premium amount you pay.
- If you were not covered by a State of Iowa health insurance plan during the reporting year because you declined coverage, you will still receive Form 1095-C indicating coverage was offered.
- If you were enrolled in an insurance plan(s) not offered through the State during the reporting year, you should receive Forms 1095-C or 1095-B from other employers or insurance carriers.
- If you were covered as a dependent on another health insurance plan, you should be included on a Form 1095 issued by the providing employer or insurance carrier

** No 1095 is sent from Wellmark or the state: the reason is that Medicare Supplement plans don't qualify as ACA Minimum Essential Coverage (MEC) on their own per the law

obamacarefacts.com/health-insurance/supplemental-health-insurance

Note that for these members that their Medicare part A coverage will qualify as MEC

Affordable-Care-Act/Individuals-and-Families/ACA-Individual-Shared-Responsibility-Provision-Minimum-Essential-Coverage

Retirees on program N & F should get a 1095 B form from Medicare by the beginning of March. If they need a replacement IRS Form 1095-B, they can call 1-800-MEDICARE.