

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	Blue Access; Blue Advantage; Iowa Select; Program 3 Plus; Deductible 3 Plus	Alliance Select (SPOC only)	Blue Access; Blue Advantage; Iowa Select; Program 3 Plus; Deductible 3 Plus; Gold Preferred	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 Employment - Less than 30 hrs/wk (enrolled in health plan)			X		
Part-Time Employment - Less than 20 hrs/wk and seasonal, emergency or contract employee	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 808.

Please be advised:

- The State of Iowa will provide only **one** form for all the individual 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 qualified 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 Form 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.