

[First Name Last Name of Tax Filer]
[Address]
[City, State Zip]

[Date of notice]

2020 Application ID: [Application ID]

ACT NOW: YOU'RE AT RISK OF LOSING FINANCIAL ASSISTANCE STARTING JANUARY 1, 2021.

IRS records show that you haven't filed a 2019 tax return with a Form 8962 to reconcile advance payments of the premium tax credit. If you want to continue to receive financial assistance to help pay for Marketplace health coverage in 2021, you must file and reconcile as soon as possible.

Dear Taxpayer:

Why we're sending you this letter

In 2019, advance payments of the premium tax credit were made to your (or someone in your tax household's) health insurance company to reduce your health insurance premium costs. This financial assistance is also being paid for your 2020 coverage.

You're required to file a federal tax return along with Form 8962, *Premium Tax Credit (PTC)*, to reconcile these advance payments of the premium tax credit. If you don't file and reconcile, you and anyone in your tax household who wants to enroll in health coverage through the Marketplace won't be eligible for financial assistance for 2021 coverage, including advance payments of the premium tax credit and any cost-sharing reductions.

If you have already filed a 2019 tax return with Form 8962, you don't need to take any action and can disregard this notice.

What you need to do

If you haven't yet filed your 2019 tax return, you need to file your 2019 tax return with Form 8962 as soon as you can, even if you have an extension. If you have already filed your 2019 tax return, you must file a Form 1040X, Amended U.S. Individual Income Tax Return, with a Form 8962. You should have received a Form 1095-A

from the Marketplace for the 2019 coverage year. This form provides the information you will need to complete Form 8962 to reconcile advance payments of the premium tax credit. If you need a copy of your Form 1095-A, log in to your Marketplace account at [HealthCare.gov](https://www.healthcare.gov) or call the Marketplace call center at 1-800-318-2596. For more information on filing a 2019 tax return or an amended 2019 tax return with Form 8962, visit [IRS.gov/aca](https://www.irs.gov/aca) or call 1-866-682-7451, ext. 569.

After you file a 2019 federal tax return with Form 8962, update your 2021 Marketplace application before December 15, 2020. Be sure to check the box telling us you filed a tax return and reconciled your past premium tax credits.

What you should do if the Marketplace ends your financial assistance

If the Marketplace notifies you or the household contact for your Marketplace account that you or members of your household have been determined ineligible for financial assistance to help pay for Marketplace coverage in 2021 and you disagree with this decision, you can file an appeal with the Marketplace. A separate eligibility notice from the Marketplace will tell you how to file an appeal.

- Visit www.healthcare.gov/marketplace-appeals/appeal-forms/ to get the Appeal Request form for your state and follow the directions provided.
- You can ask to keep your eligibility during your appeal. If you were previously eligible for Marketplace coverage or financial assistance and no longer are, you can appeal this change. In this case, you can keep your previous eligibility during your appeal.
- You will have 90 days from the date of the separate eligibility notice to appeal the determination that you or members of your household aren't eligible for financial assistance.

Sincerely,

The Health Insurance Marketplace

This letter is not a final eligibility determination. The Marketplace will make a final determination of eligibility for you or your family member(s) with respect to financial assistance for 2021. The information in this letter is based on 45 CFR §155.305(f)(4). The Marketplace's final eligibility determination will be based on the eligibility standards in 45 CFR part 155, subpart D, including 45 CFR §155.305(f)(4).

Privacy Disclosure: The Health Insurance Marketplace protects the privacy and security of the personally identifiable information (PII) that you have provided (see [Healthcare.gov/privacy/](https://www.healthcare.gov/privacy/)). This notice was generated by the Marketplace based on 45 CFR 155.230, and other provisions of 45 CFR part 155, subpart D. The PII used to create this notice was collected from information you provided to the Health Insurance Marketplace.

The Marketplace may have used data from other federal or state agencies or a consumer reporting agency to determine eligibility for the individuals on your application. If you have questions about this data, contact the Marketplace at 1-800-318-2596 (TTY: 1-855-889-4325). You can also call to get information from this notice in your language, or in an accessible format, like large print, Braille, or audio.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1207.

Nondiscrimination: The Health Insurance Marketplace doesn't exclude, deny benefits to, or otherwise discriminate against any person on the basis of race, color, national origin, disability, sex, or age. If you think you've been discriminated against or treated unfairly for any of these reasons, you can file a complaint with the Department of Health and Human Services, Office for Civil Rights by calling 1-800-368-1019 (TTY: 1-800-537-7697), visiting [hhs.gov/ocr/civilrights/complaints](https://www.hhs.gov/ocr/civilrights/complaints), or writing to the Office for Civil Rights/ U.S. Department of Health and Human Services/200 Independence Avenue, SW/ Room 509F, HHH Building/ Washington, D.C. 20201.

