



**KAISER PERMANENTE®**

SAMPLE LETTER FOR INFORMATIONAL PURPOSES ONLY.

Kaiser Foundation Health Plan, Inc.  
P.O. Box 629028  
EL Dorado Hills, CA 95762-9028

<<First\_Name><<MI>><<Last\_Name>>  
<<Add\_1>>  
<<Add\_2>>  
<<City>>, <<State>><<Zip>><<Zip\_4>>

**Your IRS 1095-B  
Health Coverage Statement  
for 2015**

<Month XX, 20XX>

Dear <<First\_Name><<MI>><<Last\_Name>>,

The Affordable Care Act (ACA) requires taxpayers to prove they had health coverage in 2015 when they file their taxes for 2015. The enclosed IRS Form 1095-B reports proof of coverage. We are required to send you this form because you have a health plan with Kaiser Permanente.

**What this form does and how you can use it:**

This form serves to report proof that you and anyone you enrolled as a dependent on your Kaiser Permanente plan had a basic level of health coverage for the specific dates in 2015. This form only relates to health coverage you have through Kaiser Permanente. The 1095-B form lists individuals in your family who were enrolled in your coverage and shows their months of coverage. Use this information to help complete your tax return. You do not need to attach these forms to your tax return. For specific questions about your tax situation, please talk to your tax preparer.

**Questions?**

If you believe there's an error on your form or if you have any questions, please call us at **1-844-477-0450** (TTY **711** for the deaf, hard of hearing, or speech impaired), Monday through Friday, from 8 a.m. to 6 p.m., and Saturday and Sunday (Pacific time), from 7 a.m. to 3 p.m. Or you can go to **kp.org/proofofcoverage** for more information. We're here to help you.

Sincerely,  
**Kaiser Permanente**

This is important information from Kaiser Permanente. If you need help understanding this information, please call **1-800-464-4000** and ask for language assistance. Esta es información importante de Kaiser Permanente. Si necesita ayuda para comprender esta información, llame al **1-800-788-0616** y solicite asistencia de idiomas.

這是來自 **Kaiser Permanente** 的重要資訊。如果您在理解此資訊方面需要協助，請撥打電話到 **1-800-757-7585** 並要求語言協助。

Services covered under your Kaiser Permanente health plan are provided and/or arranged by Kaiser Permanente health plans: Kaiser Foundation Health Plan, Inc., in Northern and Southern California and Hawaii • Kaiser Foundation Health Plan of Colorado • Kaiser Foundation Health Plan of Georgia, Inc., Nine Piedmont Center, 3495 Piedmont Road NE, Atlanta, GA 30305, 404-364-7000 • Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc., in Maryland, Virginia, and Washington, D.C., 2101 E. Jefferson St., Rockville, MD 20852 • Kaiser Foundation Health Plan of the Northwest, 500 NE Multnomah St., Suite 100, Portland, OR 97232.

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