



Form FTB 3895 Quick Guide Certified Enrollers

Form FTB 3895 Overview

Covered California supplies an annual **Health Insurance Marketplace Statement**, also known as **Form FTB 3895**, to all consumers enrolled in a 2020 Covered California Plan and to the Franchise Tax Board for tax filing purposes.

The **FTB 3895** is an important state tax document that serves as proof of coverage for individuals to take State Subsidy tax credit, reconcile the credit on their returns with advance payments of the State Subsidy tax credit, and file an accurate tax return to avoid paying the state tax penalty for the 2020 tax year.

The **FTB 3895** is generated for each enrolled plan, regardless if **State Subsidy** was applied. The amounts displayed on the FTB 3895 reflect how much was paid to Covered California Health Insurance companies to help with the cost of a consumer's health coverage. An FTB 3895 helps ensure the amount of State Subsidy applied in 2020 is accurately reported and serves as proof of Minimum Essential Coverage.

Information displayed on FTB 3895

- All consumers enrolled in a Covered California health plan (except Minimum Coverage plans)
- All months an enrolled member had coverage through Covered California
- Monthly health plan premiums before State Subsidy was applied
- Monthly State Subsidy paid to the health plan insurance agency on the consumer's behalf
- Monthly premium for the second lowest-cost Silver plan in the consumer's rating region

Important Information to Help Consumers:

- Consumers should receive Form FTB 3895 from Covered California by January 31, if they have not received it already.
- If a consumer's communication preference is email, they will receive an email from Covered California with instructions to sign in their [CalHEERS account](#) and download their Form FTB 3895. They will not receive their Form FTB 3895 in the mail.
- If a consumer's communication preference is mail, they will receive their Form FTB 3895 in the mail.
- All consumers can access their Form FTB 3895 in their [CalHEERS account](#) "home page," or under "Documents & Correspondence," even if their preference is mail.

Consumer Didn't Receive FTB 3895?

- Consumers may log into their [CalHEERS account](#) to access their Secure Mailbox
 - If the consumer's account is currently terminated or they did not create an online account, they should call the Covered California Service Center (800-300-1506) for assistance.
 - A hard copy will be mailed by January 31, 2021.
- Consumers may also request another copy of the Form FTB 3895 by calling the Covered California Service Center (800-300-1506) for assistance.
- Consumers will not receive an FTB 3895 if they were enrolled in Medi-Cal, enrolled in a Minimum Coverage plan through Covered California or have employer-sponsored health coverage.

Updating Incorrect Information on FTB 3895

- Contact the Covered California Service Center (800-300-1506) to update:
 - Name
 - Date of birth
 - Social Security Number
 - Mailing Address



Form FTB 3895 Quick Guide Certified Enrollers

- Complete a required [FTB 3895 Dispute Form](#) or call the Covered California Service Center (800-300-1506) for assistance submitting the form to correct:
 - Coverage start or termination dates (or both) for listed members
 - Monthly health plan premiums
 - Monthly State Subsidy
 - Missing consumers enrolled on a Covered California health plan
 - Members listed that were not in a consumer's household
- If Covered California determines the updated information provided is correct, a new, **corrected FTB 3895** will be mailed to the consumer.

Updating Incorrect Information for Households with Medi-Cal Members/Mixed Households

- The following information on an FTB 3895 for any Medi-Cal Members/Mixed Households **MUST** be corrected by a County Eligibility Worker
 - Name
 - Date of birth
 - Social Security Number
 - Mailing Address

All other coverage information on **FTB 3895** may be corrected by completing a required [FTB 3895 Dispute Form](#). The dispute form is currently only available in English. For assistance in Spanish or any other language, please contact Covered California at 800-300-1506.

How To Assist Consumers

- Explain what the form is and what it means
- Explain the timing for receiving the Form, and that it is an important tax document
- Show consumers how to access the FTB 3895 in their online account
- Explain how to review Form FTB 3895 for accuracy
- Ensure consumers are aware of the implications of not providing the information on their taxes
- Help consumers understand their next steps in State Subsidy reconciliation
- Ensure consumers are aware that they may complete the [FTB 3895 Dispute Form](#)
- Contact our [Covered California service center](#) for further assistance