



Return address

[customer name]  
[address]  
[city, state, zip]

Dear [customer first name],

We've enclosed a copy of your 1095-B tax form for the [2015] calendar year. We've also sent a copy to the IRS, as required by law.

Under the Patient Protection and Affordable Care Act, most people in the U.S. must have “minimum essential coverage” (MEC) or pay a tax penalty. This requirement is called the “individual mandate.” This form shows which month(s) during [2015] you and, if it applies, your dependents\* were enrolled in minimum essential coverage through Cigna and, thus, met the requirements of the individual mandate. This form does not show any non-Cigna coverage you or your dependents may have had this year.

The IRS uses this form for purposes of administering the individual mandate. Please consult a tax professional if you have questions about how this form applies to you.

*\*If your covered dependents file taxes separately, please share this form with them for tax preparation.*

#### **Your data, your choice**

Starting in March, 2016 you can view and print your 1095-B, and change your e-mail on myCigna.com:

- **View and print your 1095-B**—Follow these steps:
  - Log in to myCigna or make a new account.
  - From the main menu click **Review My Coverage**.
  - Click **Understanding My Coverage** in the dropdown menu.
  - Under **Related Links** choose **1095-B Tax Forms**.
- **Change your email**—Follow these steps:
  - Log in to myCigna or make a new account.
  - Click **Profile** to change your profile.
  - Under **Email & Document Delivery Preferences**, click **Change**.
  - Under **Contact Information**, click **Change** to change your email.

#### **Questions or concerns?**

We're here to help. Our Customer Service number is [Phone Number].

Sincerely,  
Cigna