

**DIVISION 1181 A.T.U. – NEW YORK WELFARE FUND**

**Notice Regarding 2021 1095-B Health Coverage Information Forms**

The Form 1095-B is an annual report that identifies which months you and your dependents were enrolled in “minimum essential coverage”. In the past, the Division 1181 A.T.U. – New York Welfare Fund provided you a copy of this Form in order to confirm that Fund coverage meets the requirement of minimum essential coverage set by the Affordable Care Act. The Internal Revenue Service (IRS) announced that for the 2021 coverage year (as it did last year for the 2020 coverage year) funds do not have to mail the Form 1095-B because there is no longer a penalty associated with not having minimum essential coverage under federal law. However, the Fund will provide one to you if you request it. A copy of this form will be provided to you within 30 days of your request.

Please send your request to:

Division 1181 A.T.U. New York Welfare Fund  
20 North Central Avenue  
Valley Stream, NY 11580

Or contact the Fund Office via:

Email:  
Phone: (718) 845-5800

If you have any other questions regarding the Form 1095-B, please direct them to the contact information above.