

Employer-Provided Health Insurance Offer and Coverage Form 1095-C

This is a notice explaining how to request your Form 1095-C from Kent County for the 2024 benefits plan year. Here's a summary of the key information:

- **Form 1095-C is available upon request only.** It will not be automatically mailed.
- **You can request the form if you were:**
 - A full-time employee of Kent County at any time last year.
 - Enrolled in Kent County's self-insured health plan at any time last year.
- **The form is for informational purposes only.** You do *not* need to file it with your individual tax return.
- **The form contains information about:**
 - Your health insurance coverage provider.
 - Details about the lowest cost self-only coverage offered to you.
 - Which family members were covered and for which months.
- **To request a form:**
 - Email Kent County Human Resources at hr.benefits@kentcountymi.gov.
 - Specify whether you want to receive the form by mail or electronically (via email).
 - Allow up to 30 days for receipt.
- **Questions?** Call (616) 632-7440 and select Option 5.