



Eric Holcomb, Governor
State of Indiana

Indiana Family and Social Services Administration
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INDIANAPOLIS, IN 46207-7083

1095-B Tax Forms: Division of Family Resources Local Offices

If a client comes in and requests a copy of their 1095-B tax form that was supplied to them for receiving Medicaid or CHIP services in 2016 refer to the steps below to assist them.

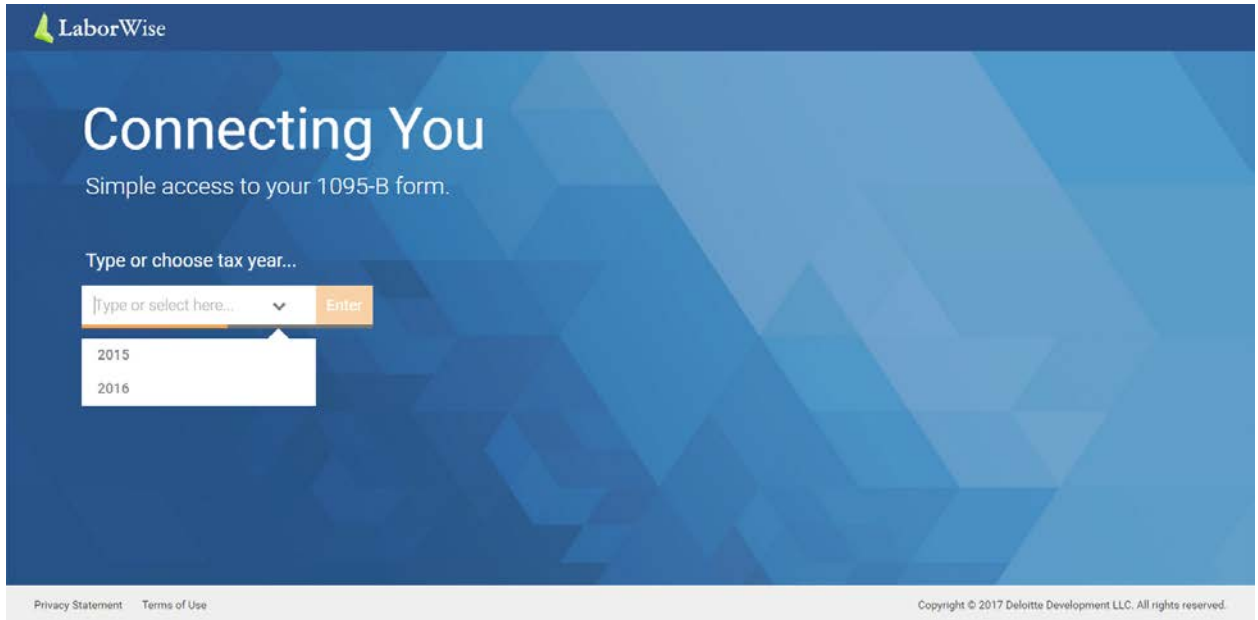
Please assist them by showing them the kiosks located in the local office and walk them through the following steps:

1. Select the icon on the kiosk desktop called 'Get My 1095-B'
2. From the drop-down list 'Type or choose your state'. Select 'Indiana' and click the 'Orange Arrow' button

The screenshot shows a kiosk interface with a blue background. At the top left is the 'LaborWise' logo. The main heading is 'Connecting You' with the subtext 'Simple access to your 1095-B form.' Below this is a section titled 'Type or choose your state' which contains a dropdown menu. The dropdown menu is open, showing 'Arkansas' and 'Indiana' as options. At the bottom of the screen, there are links for 'Privacy Statement' and 'Terms of Use' on the left, and a copyright notice 'Copyright © 2017 Deloitte Development LLC. All rights reserved.' on the right.

3. From the drop-down list 'Type or select here...'. Select the year of the form you are looking for and hit 'Enter' button





4. They will be required to enter in the following information: Last Name, SSN, Date of Birth (MM/DD/YYYY), City, State, and Zip Code. Check a box consenting to view document through portal. Check the 'I'm not a robot' box to pass an reCAPTCHA security checkpoint. Follow the instructions of the question asked and select verify. If passed you now can select the 'Sign In' button.

Please Identify Yourself

First Name (Optional)

SSN TIN

Last Name

Date of Birth

Address 1 (Optional)

City

State

Zip Code

By checking this box, I consent to have my 1095-B form delivered by mail or electronically through this portal and agree to the Terms of Use and Privacy Statement associated with this site.

Security Check

I'm not a robot

reCAPTCHA
Privacy - Terms

- a. This is the demographic information they last reported to IN FSSA while they were on benefits.

5. Click 'Sign In' button
6. If successfully logged in they will see:

View/Print 1095-B Form

Print Form View Form

Name	DOB	SSN/TIN	Year
			2016

Address	City, State	Zipcode	Generated Date
	INDIANAPOLIS, IN	46208	02/01/2017

Please check the data on the 1095-B form if it requires updates, please call 1-855-673-0145

7. Click the 'View Form' or 'Print Form' on the top right of the screen.
 - a. Selecting 'View Form' they will see in their browser:

View/Print 1095-B Form

Back Print Form

- b. Selecting 'Print Form' they will see the Printer Properties box. Select the desired printer.
8. Retrieve the form from the networked printer and hand over to the client.