



SOLANO AND NAPA COUNTIES  
**ELECTRICAL WORKERS BENEFIT FUNDS**



January 2024

IMPORTANT HEALTH COVERAGE TAX DOCUMENTS

**NOTICE OF RIGHT TO REQUEST TAX NOTIFICATION FORM 1095-B**

It is no longer necessary to file a 1095 form with your federal tax return, but you might need the form 1095-B form to comply with state reporting requirements. Participants and beneficiaries may request a copy of their Form 1095-B by:

**Email to:** [1095Bhelp@benesys.com](mailto:1095Bhelp@benesys.com)

**Calling:** (925) 208-9980 between 8:00 AM and 4:30 PM PST  
Please select Option 3 - Eligibility from the Phone Menu

**Mail to:**  
**Solano and Napa Counties Electrical Workers Local 180 Health & Welfare Plan**  
**P.O. Box 1306**  
**San Ramon, CA 94583**  
**ATTN: Eligibility- 1095-B Requests**

Your request MUST include: (1) your Plan's name, (2) the member's name, (3) your name if you are not the primary member, (4) the address you would like the form sent to and (5) the phone number we can call if we have any questions.

Please call (888) 512-5863 or (925) 208-9996 with any questions about Form 1095-B. Please select Option 3-Eligibility from the Phone Menu.