



## MEMORANDUM

### TAX INFORMATION IMPORTANT HEALTH COVERAGE TAX DOCUMENTS

**To:** All Employees

**From:** Hope Rhodes

**Date:** 9/18/2025

**Subject:** Important Health Coverage Tax Document Request

Dear Team,

Pursuant to the Paperwork Burden Reduction Act (H.R. 3797) enacted on December 23, 2024, your 1095 Form will no longer be automatically mailed or hand delivered to you. Instead, this Form will be available to Responsible Individuals through our HUB portal. Simply log in and go to your File Cabinet to download the 1095 Form.

If you are unable to download the Form, please reach out to request the Form. You have several options to request this Form.

**Via Portal:** <https://web.mybenefitshub.com/barbershillisd>

**Via Phone:** Call DISTRICT Benefits office at 281.576.2221 ext.1284

**Via Email-** be sure to include the last four of your SSN and last name:  
[hope.rhodes@bhisd.net](mailto:hope.rhodes@bhisd.net)

**Via Regular Mail:** BHISD, Attention: Benefits Coordinator, P.O. Box 1108 Mont Belvieu, TX 77580

If you choose to contact us directly, you will receive your 1095 Form within 30 days of the request ASSUMING the Forms have been prepared (in accordance with ACA Deadlines).

This form is significant as it indicates whether the plan offered to you and your dependents met the IRS "Minimum Value" standard and if the employee-only coverage was considered "Affordable" under IRS guidelines. The IRS continues to use this information to determine household eligibility for premium assistance in the marketplace.