

Checkboxes for Colorado Health Care Coverage

Colorado taxpayers can now share certain information from their tax return with Connect for Health Colorado (the Colorado Health Benefit Exchange) and the Colorado Department of Health Care Policy & Financing to find out if they qualify for free or reduced-cost health coverage (Colorado Law: 39-21-113(25) C.R.S). If you give your permission, the Department of Revenue will share **only** this information:

- Name and date of birth for you, your spouse, and everyone listed on your taxes as your dependent (your tax household).
- Social Security Number (optional) or Tax ID for you, your spouse, and everyone listed on your taxes as your dependent.
- Your address, phone number, and email address so we can contact you.
- Your income.

This information will only be used to check if you can enroll in health coverage and qualify for help paying for coverage. For more information about getting health coverage, visit Connect for Health Colorado at <https://connectforhealthco.com>.

To see if you or members of your household qualify for free or reduced-cost health coverage, check this box if:

- You are a Colorado resident and at least one person in your household does not have health coverage AND
- You give permission for the Colorado Department of Revenue to share the information on Form DR 0104EE with Connect for Health Colorado (the Colorado Benefit Exchange) and the Department of Health Care Policy & Financing.

To share your information, complete form DR 0104EE. If you are using software to complete your tax return, the software may autofill the form for you. Check it to make sure it is accurate and complete. If you are filing a paper return, complete the DR 0104EE and include it with your return.

Line by Line Instructions for the DR 0104EE

Check box:

Check this box to give permission to the Colorado Department of Revenue to share information from this tax form (DR 0104EE) with Connect for Health Colorado and the Department of Health Care Policy & Financing so they can check if you qualify for free or reduced-cost health coverage.

Section A: Household Contact Information

Complete this information so Connect for Health Colorado can contact you to help you enroll in health coverage. Make sure your name, phone number, email address, and mailing address are correct and complete.

Section B: Household Member and Income Information

Complete this information so Connect for Health Colorado can check if you or members of your household qualify for free or reduced-cost health coverage. Your household includes yourself, your spouse, and any person that you claim as a tax dependent on your federal income tax return. Dependents are usually children who live with you but may include other relatives you support financially.

Line 1: Enter your tax household size here. Include yourself, your spouse, and anyone you claim as a dependent on your federal income tax return.

Line 2: Enter your adjusted gross income here. Adjusted gross income is found on line 11 of your federal tax form 1040, 1040-SR, or 1040-NR.

Line 3: Enter information about yourself, your spouse, and any dependents you have for each member of your tax household to complete the table.