

Town of Lexington
Fiscal Year 2015 - HRA 1 - Debit Card
Claims Process and
Frequently Asked Questions



Who is eligible for this benefit? Employees and non-Medicare retirees who are enrolled in the GIC Health Insurances through the Town of Lexington, MA

What is considered eligible for reimbursement?

The HRA will **ONLY** reimburse for all eligible IRS Code 213 expenses. See attached list of eligible expenses.

Plan Design: 40% of the medical deductible = \$100 Single / \$200 2-Person / \$300 Family will be placed on the debit card for all IRS Code 213 expenses.

Please Note: If you have a Flexible Spending Account, those funds will be used first and then the HRA funds will be used second.

How am I reimbursed for eligible expenses?

Benefit Card: The *FlexExpress*® Card may look like a typical credit card, but it is a special benefits card. This card provides you with easy access to your HRA to pay your medical expenses directly at the point of service. The card will only be accepted at specific healthcare providers such as physician offices, hospitals, outpatient services, and pharmacies.

- **NOTE:** IRS requires you to keep all documentation associated with the use of the debit card.

Manual Claims Submission: You may submit for reimbursement online, or via a paper reimbursement form:

- **Online Reimbursement Request** – Employees can log into their account on www.benstrat.com and you have the option to file your HRA claims online. Claims can be entered online and the documentation can be scanned and uploaded to the online claim or a confirmation page can be printed. The confirmation page and detailed documentation will need to be faxed or mailed to Benefit Strategies before receiving reimbursement. Please do not email claims unless you are using secure email.

- **Paper Reimbursement Request Form** – You may submit your paper reimbursement form via mail or fax. You will need to send in an HRA claim form along with your Explanation of Benefits (EOB) from your Medical Carrier or detailed provider statements that outlines your out of pocket responsibility.

When can I expect reimbursement?

Properly completed and documented claims received in our offices will be expedited for payment within 7-10 business days. Forms may be downloaded from Benefit Strategies' website, www.benstrat.com, or by calling customer service. Participants can choose to be reimbursed by check or direct deposit.

How do I log on to view my claims online?

Log in at www.benstrat.com, and click on the FSA/HRA Secure Account Login button in the upper right corner of the page. See the Employee/Participant Login in the yellow box on the left side of the page.

First time users: once you log in, you will see the options for "New user?" click the link below to create your new username and password.

Your 2015 plan year runs from July 1, 2014 - June 30, 2015. Claims incurred during the above plan year must be submitted to Benefit Strategies within **90 days** after the plan year end date.

What can I expect from Benefit Strategies?

Claims will be paid in a timely manner. Benefit Strategies representatives will be able to provide information regarding your HRA. We can explain how the plan works and how the design is coordinated with your medical insurance plan. However, for any questions regarding your medical insurance plan and what constitutes covered expenses, we would kindly refer you to your HR department and/or your Medical Insurance Carrier for an explanation of your medical plans. **Our Service Representatives are available Monday through Thursday from the hours of 8:00 am to 6:00 pm, and on Friday from 8:00 am to 5:00 pm EST by calling 1-888-401-3539.**

Town of Lexington
Fiscal Year 2015 - HRA 2
Claims Process and
Frequently Asked Questions



Who is eligible for this benefit? Employees and non-Medicare retirees who are enrolled in the GIC Health Insurances through the Town of Lexington, MA

What is considered eligible for reimbursement?

The HRA will **ONLY** reimburse for in-network out-of-pocket medical expenses.*

*Out-of-pocket Maximums: \$5,000 Single/\$10,000 Family

Plan Design: The HRA reimburses the second portion of out-of-pocket expenses at 100% of the costs for in-network services from in-network providers. Employees with Single coverage are responsible for the first \$2,000 before the HRA will reimburse up to a maximum of \$3,000 per plan year. Employees with Two-Person and Family coverage are responsible for the first \$4,000 before the HRA will reimburse up to a maximum of \$6,000 per plan year.

How am I reimbursed for eligible expenses?

Manual Claims Submission: You may submit for reimbursement by using a paper reimbursement form:

- **Online Reimbursement Request** – Employees can log into their account on www.benstrat.com and you have the option to file your HRA claims online. Claims can be entered online and the documentation can be scanned and uploaded to the online claim or a confirmation page can be printed. The confirmation page and detailed documentation will need to be faxed or mailed to Benefit Strategies before receiving reimbursement. Please do not email claims unless you are using secure email.
- **Paper Reimbursement Request Form** – You may submit your paper reimbursement form via mail or fax. You will need to send in your HRA claim form along with your Explanation of Benefits (EOB) from your Medical Carrier that outlines you have met your responsibility, as well as all related documentation showing the expenses you've incurred to reach your \$2,000/\$4,000 portion of required expenses.

When can I expect reimbursement?

Properly completed and documented claims received in our offices will be expedited for payment within 7-10 business days.

Forms may be downloaded from Benefit Strategies' website, www.benstrat.com, or upon by calling customer service. Participants can choose to be reimbursed by check or direct deposit.

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- Log in at www.benstrat.com, and click on the FSA/HRA Secure Account Login button in the upper right corner of the page. See the Employee/Participant Login in the yellow box on the left side of the page.
- **First time users:** once you log in, you will see the options for "New user?" click the link below to create your new username and password

Important Timelines:

Your 2015 plan year runs from:
July 1, 2014 – June 30, 2015

All claims and supporting documentation must be submitted to Benefit Strategies within **90 days** after the plan year end date.

What can I expect from Benefit Strategies?

Claims will be paid in a timely manner. Benefit Strategies representatives will be able to provide information regarding your HRA. We can explain how the plan works and how the design is coordinated with your medical insurance plan. However, for any questions regarding your medical insurance plan and what constitutes covered expenses, we would kindly refer you to your HR department and/or your Medical Insurance Carrier for an explanation of your medical plans. **Our Service Representatives are available Monday through Thursday from the hours of 8:00 am to 6:00 pm, and on Friday from 8:00 am to 5:00 pm EST by calling 1-888-401-3539.**

967 Elm Street • Manchester, NH 03101 • Tel: (888) 401-FLEX (3539) • Fax: (603) 647-4668
38 Church Street • Pawtucket, RI 02860 • Tel: (800) 371-7542 • Fax: (401) 457-7266
Visit us at www.benstrat.com



Claim Submission Process

The **participant** incurs an eligible medical expense AFTER they meet their portion. *Participant should send a year to date EOB with a claim form showing they have satisfied their deductible at the carrier, so Benefit Strategies can start releasing funds at the appropriate time for future eligible expenses.*



The provider will bill the participant for their responsibility. *The participant pays the provider for their services and remits receipts and claim forms to Benefit Strategies. The participant should aggregate their claims until they are close to reaching the \$2,000/\$4,000 portion they must meet prior to requesting a reimbursement.*



Once Benefit Strategies receives appropriate claim documentation, we will **reimburse the participant** in accordance with HRA plan design for the filed expenses by issuing either a check or a direct deposit.