

Town of Lexington
Fiscal Year 2019 HRA 1 – Debit Card
HRA 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.

Important Timelines:

Your plan year runs from:
July 1 through June 30

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: The HRA will reimburse the following amounts – employees with Single coverage will have \$205 per plan year and employees with Family coverage will have \$670 per plan year on the *FlexExpress®* Card card for all IRS Code 213 expenses.

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

How am I reimbursed for eligible expenses?

Debit card, online reimbursement request or manually.

- The **FlexExpress® Card** is your benefits debit card. This card provides you with easy access to your HRA to pay your co-payments, prescriptions, dental and vision expenses directly at the point of service.
 - ***NOTE: IRS requires you to keep all documentation associated with the use of the debit card.***
- **Online Reimbursement Request** – Each participant in the plan will be issued personal login credentials to **www.benstrat.com**. You have the option to file your HRA claims online. The confirmation page and detailed documentation will need to be faxed or mailed to Benefit Strategies before receiving reimbursement. Please **do not email claims** with sensitive information to our offices 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 that outlines your deductible responsibility.

When can I expect reimbursement?

Properly completed claims received in our offices will be expedited for payment as quickly as 2-7 business days and take no longer than 7-10 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.

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.

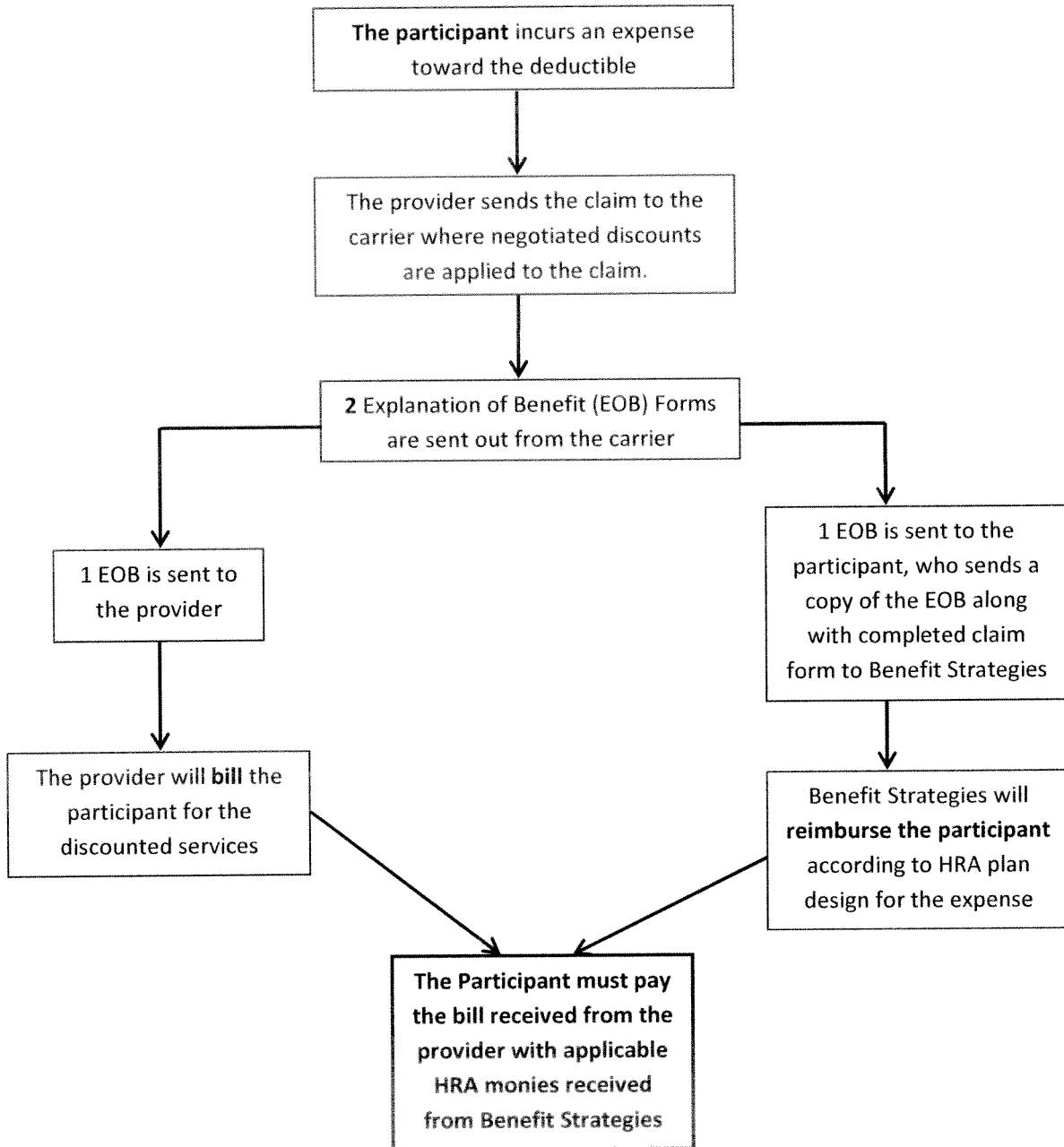
EOBs incurred during the above plan year must be submitted to Benefit Strategies within **90 days** after the plan year end date.

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 Customer Service Representatives are available Monday through Thursday from the hours of 8:00am to 6:00pm and on Friday from 8:00am to 5:00pm EST.

Claim Submission Process



**Town of Lexington, MA
Fiscal Year 2019 - HRA 2
HRA 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.

Important Timelines:

**Your plan year runs from:
July 1 through June 30**

What is considered eligible for reimbursement?

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

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

Plan Design: Employees with individual coverage are responsible for the first \$2,000 of out of pocket expenses per plan year and employees with family coverage are responsible for the first \$4,000 of out of pocket expenses per plan year.

Once the applicable out of pocket expense limit has been reached, the HRA2 will then begin to reimburse for any additional out of pocket expenses, for In-Network services from In-Network providers, up to \$3,000 for those on an individual plan and up to \$6,000 for those on a family plan. If an employee's out of pocket expenses exceed \$5,000 for the plan year for an individual plan or \$10,000 for a family plan, the HRA2 will no longer reimburse for out of pocket expenses.

How am I reimbursed for eligible expenses?

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

- **Online Reimbursement Request** – Each participant in the plan will be issued personal login credentials to www.benstrat.com. You have the option to file your HRA claims online. The confirmation page and detailed documentation will need to be faxed or mailed to Benefit Strategies before receiving reimbursement. Please do not email claims with sensitive information to our offices 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 that outlines your deductible responsibility.

When can I expect reimbursement?

Properly completed claims received in our offices will be expedited for payment as quickly as 2-7 business days and take no longer than 7-10 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.

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.

EOBs 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 8:00am to 6:00pm and on Friday from 8:00am to 5:00pm EST.

Claim Submission Process

