

Via Benefits Reimbursement Guide

How to use your CMS Energy Health Reimbursement Arrangement (HRA)

Welcome to Via Benefits!

Dear John Sample,

This guide introduces how to use and manage the Health Reimbursement Arrangement (HRA) provided by CMS Energy. Your HRA is an account you use to reimburse yourself for eligible expenses after you've paid for them. A contribution in the amount of \$1,000.00 has been made to your reimbursement account that is available 01/01/2019.

Managing your reimbursement account

Follow these steps for a smooth reimbursement experience:

- □ Use the Via Benefits Accounts mobile app or website to access your HRA. (Make sure to save your username and password.)
- □ Set up direct deposit.
- □ Select your communication preferences.
- □ Automate your premium reimbursement.
- □ Determine if you have a deadline to incur expenses or submit reimbursement requests.
- □ Authorize others to access your account. Call Via Benefits to add a representative to your account in the event you can't manage it.

*Extend Health, LLC administers Via Benefits reimbursement accounts.

Get Started!

To manage your account, you can go online and sign into Via Benefits or download the mobile app.

Use the website:

- 1. Sign into my.viabenefits.com/funds.
- 2. Select Visit the Reimbursement Center on the Funds and Reimbursements page.

Once in the Reimbursement Center, you can view your account balance, request reimbursements, and set up push notifications.

Or use the Via Benefits Accounts mobile app:

- 1. If you have already signed up with Via Benefits to enroll in a Medicare or Individual and Family plan, sign into the mobile app using the same username and password.
- 2. If you don't use Via Benefits to enroll in a Medicare or health plan, sign up at **viabenefitsaccounts.com**, or you can sign up through the Via Benefits mobile app.



Visit: my.viabenefits.com/funds

Setting Up Your HRA

Set up direct deposit

Direct deposit is the fastest, most secure way to receive your reimbursement payments directly to your bank account. Direct deposit payments take three business days to appear in your bank account after your reimbursement request is processed.

You can set up direct deposit in the mobile app or the **Via Benefits Accounts** website. Learn how at **help.viabenefits.com**; search for **set up direct deposit**.

Note: Your former employer may require direct deposit to receive reimbursement.

Set your communications preferences

Save paper and receive communications quickly by receiving information by text or email. Select your preferred communication methods on the mobile app or the website.

You can learn how to set up notifications for your reimbursements at help.viabenefits.com; search for Update Your Reimbursement Notification Settings.

Pro Tip: For faster reimbursement, set up direct deposit.



Additional ways to manage your HRA

Phone

In addition to the Via Benefits Accounts mobile app and website, you can use our voice-activated information center, available 24/7, to get information about your HRA balance and the amount, date, and status of your three most recent reimbursement requests.

You can also speak to a Via Benefits representative 8:00 a.m to 7:00 p.m. Eastern Time by calling 1-888-604-2921.

Mail

If you don't have access to a smartphone, tablet, or computer, reimbursement requests can be submitted by mail using a reimbursement request form. A reimbursement request submitted by mail can take up to 10 days longer to process than one submitted through the website or mobile app. You can request a form by calling Via Benefits

You can access our privacy policy at **my.viabenefits.com/about/privacy-policy**. If you have questions or concerns about our privacy policy, please contact us at **my.viabenefits.com/about/contact**.

How To Simplify Your Reimbursement

Set it and forget it! Automate your monthly eligible premium reimbursement.

Activate your premium reimbursement

Automatic Premium Reimbursement for Medicare plans

Via Benefits offers an **Automatic Premium Reimbursement** feature for most Medicare insurance plans when enrolled through Via Benefits. With this feature, you first pay your premium directly to the insurance carrier, which will then notify Via Benefits that your payment has been received. Your premium amount will be automatically deposited into your bank account if you've set up direct deposit.

Please allow up to four weeks to receive your first **Automatic Premium Reimbursement** after your plan's effective date. If you have not received your reimbursement after six weeks, reach out to Via Benefits so we can contact your insurance carrier on your behalf.

You can learn how to turn on Automatic Premium Reimbursement for your premiums at **help.viabenefits.com**; search for **Automatic Premium Reimbursement**.

If Automatic Premium Reimbursement is not available for your Medicare plan, you may be able to use Express or Recurring Premium Reimbursement.

Express Reimbursement

Express Reimbursement offers a simple way to request reimbursement for Medicare and Individual and Family plan enrollments completed through Via Benefits. Your plan information is automatically in your bank account, so you can request reimbursement through the mobile app or our website without providing additional documentation.

Express Reimbursement must be requested each plan year. Search **Express Reimbursement** for instructions on how to set up Express Reimbursement for your premiums at **help.viabenefits.com**.

Recurring premium reimbursement

If Automatic Premium Reimbursement or Express Reimbursement is not available for your plan, you can submit a **Recurring Premium Reimbursement** request to receive monthly premium reimbursements. When you request Recurring Premium Reimbursement, you must provide supporting documents, such as a premium bill or statement. You can submit a Recurring Premium Reimbursement and supporting documentation on the mobile app or our website, or mail a **Reimbursement Request Form** to Via Benefits.

Recurring Premium Reimbursement must be requested each plan year and whenever your premium amount changes. For step-by-step instructions and more information on supporting documents, go to **help.viabenefits.com**, and search for **Recurring Reimbursement**.

Reimbursement Request Forms

In limited situations, you may need to submit a paper reimbursement request by mail, which will require supporting documentation for validation of your request. Please note, it can take up to 10 days for your request to be processed by mail.

Required Supporting Documentation

For Recurring Premium Reimbursements and out-of-pocket expenses, Via Benefits is required to confirm eligibility of a submitted expense based on the rules governed by your former employer. In order to confirm eligibility, the following supporting documentation is required.

Premiums

When submitting supporting documentation for premium expenses, use monthly premium bills or statements, insurance coverage confirmation letters, or annual notices of premium amounts that confirm you've been accepted into the plan and have paid your initial premium.

Documentation needs to include the following information:

- Premium coverage period (e.g., 01/01/2025 12/31/2025)
- Premium type (e.g., Medical, Medicare Part B)
- Carrier (e.g., Humana, N/A for Medicare Part B)
- Individual serviced (e.g., John Doe)
- Monthly amount (e.g., \$200.00)

Social Security Benefit Verification Letter

If you are not eligible for Automatic Premium Reimbursement for Medicare Part B, you'll need to submit your annual **Social Security Benefit Verification Letter** as documentation. This letter is usually sent in October or November. It specifies the amount of your Social Security benefit for the coming year and deductible amounts. If you don't have your **Social Security Benefit Verification Letter**, call the Social Security Administration at 1-800-772-1213 and follow the prompts to request another copy. You might be able to retrieve this document online at ssa.gov.

Out-of-pocket costs

Reimbursement for premium expenses often exhausts your account balance. If you have a remaining balance, submit reimbursement for out-of-pocket expenses. When submitting supporting documentation for out-of-pocket expenses, you can use the following documents:

- Explanation of Benefits (EOB) from your insurance carrier
- Receipt from your provider or pharmacy

Documentation needs to include this information:

- Date of service (e.g., 01/01/2025)
- Expense type (e.g., Copay)
- Provider (e.g., Dr. Smith, CVS)
- Individual serviced (e.g., John Doe)
- Amount (e.g., \$100.00)

Common reasons reimbursement requests are not approved

- No documentation was provided with your reimbursement request.
- The documentation included does not include the required information.
- The request was for an ineligible person, time period, or expense.
- The request has already been reimbursed.

Reimbursement documentation can be uploaded on the mobile app or website.

- Images can be any of the following file types: PDF, GIF, JPG, TIF, or BMP up to 5 MB in size.
- An unlimited number of files can be uploaded.
- You can use your smartphone's or tablet's camera or desktop scanner to create documents to attach to your reimbursement request.

Reimbursement communications

Via Benefits will send communications notifying you of your reimbursement status. If you'd like to monitor the status of your reimbursement in real time, you'll need to **enable email, text, and mobile app notifications in your Profile and mobile app communication preferences**. Please note that some notifications are only sent electronically.

After your reimbursement request has been processed, an **Explanation of Payment (EOP)** or **Explanation of Unpaid Expenses (EOUE)** is created:

- If your reimbursement is approved, Via Benefits notifies you that an EOP is available online.
- If any part of your request is not approved, or is denied, an EOUE is created with instructions on actions you need to take to finalize your request.

NOTE: If you don't have a sufficient balance in your HRA, Via Benefits will reimburse you up to your available balance.

Eligible Expenses

Expenses that are eligible to be reimbursed through your HRA include:

Premium expenses

Apply the funds in your reimbursement program toward the Medical, Prescription Drug, Dental, Vision and Medicare Part A/B premium expenses incurred while you are eligible for your funding program. Generally, you'll pay your insurance premiums to the insurance carrier every month before requesting reimbursement.

Out-of-pocket expenses

Your reimbursement program allows you to be reimbursed for your eligible out-of-pocket health care expenses to the degree that funds are available. Eligible out-of-pocket expenses include copayments, deductibles, and coinsurance payments. Other eligible expenses include those incurred while paying for Medical, Pharmacy, Dental, Vision and Hearing services as described in Section 213 (d) of the Internal Revenue Code. services as described in Section 213(d) of the Internal Revenue Code. For more information, see the IRS publication 502 (available at **www.irs.gov/pub/irs-pdf/p502.pdf**), review the Summary Plan Description (SPD) provided by your former employer or benefits provider, or call Via Benefits.

Eligible expense categories

The list in this guide provides a sample of eligible expenses for reimbursement based on Internal Revenue Code Section 213(d). It's not a complete list and is subject to change without notice. For more information about eligible expenses covered by your plan, refer to your SPD, view eligible expenses online, or contact Via Benefits.

Premiums

- Medical
 - Medicare Supplement/Medigap
 - Medicare Advantage
 - Individual and Family Plans (Marketplace plans)
- Medicare Part A/B
- Prescription Drug
- Dental
- Vision

Out-of-Pocket Expenses

- Medical
 - Doctor
 - Chiropractor
 - Hospital bills
 - Diagnostic testing
 - Lab work
 - X-rays
 - Physical, occupational, or speech therapy
 - Oxygen and oxygen equipment
 - Medical equipment and repair
 - Wheelchair
 - Walker
 - Crutches
 - CPAP equipment and supplies
 - Vaccinations/immunizations

- Transportation expenses for medical care
 - Ambulance
 - Personal vehicle mileage
 - Transportation service
 - Bus, train, taxi, ride-share services, parking
- Over-the-counter
 - Diabetic supplies and testing equipment
 - First-aid supplies
- Adult incontinence supplies
- Pharmacy
 - Over-the-counter medicines
- Dental
 - Examination, cleaning, and X-rays
 - Treatment
 - Oral surgery
 - Dentures and implants
- Vision
 - Eye examinations
 - Eye glasses/contacts
- Hearing
 - Hearing aids
 - Hearing aid batteries and repairs

Non-Reimbursable Expense Examples

- Premiums for life insurance, critical illness, income protection, or disability insurance
- Premiums for cost-sharing insurance (Healthcare Sharing Ministries, Medishare)
- Premiums paid on a pre-tax basis before taxable wages are calculated, such as those paid for employer-provided group health insurance
- Cosmetic procedures
- Medical marijuana or CBD products
- Weight loss programs, food, and beverages
- Assisted living or long-term care expenses
 - Cost of medical care provided by the facility may be reimbursable
- Household help
- Gym membership*
- Dietary supplements*
- *Unless a documented medical necessity

We're here to assist you

Our **Help and Support** pages contains answers to frequently asked questions. You can access **Help and Support** at **help.viabenefits.com**. Contents © 2024 Extend Health, LLC. All Rights Reserved. All insurance products are offered through Via Benefits Insurance Services (known in New York as ViaBenefits Insurance Services, LLC and known in New Mexico as Extend Insurance Services, LLC). Utah Resident License No. 104741. California license number: 0F19729. Insurance rates for the insurance products and services offered by Via Benefits are subject to change. The insurance products and services offered by Via Benefits may not be available in all states. It is your responsibility to enroll for coverage during the applicable enrollment periods (such as the Healthcare Open Enrollment Period or any Special Enrollment Periods). Via Benefits receives compensation in the form of commissions from insurance companies from the sale of insurance products and services we offer. Some of the compensation that Via Benefits receives may be contingent and may vary depending on a number of factors, including the insurance contract and insurer you select. In some case, other factors such as the volume of business Via Benefits provides to the insurer or the profitability of the insurance policies that Via Benefits provides to the insurer also may affect our compensation. Via Benefits may accept this compensation in locations where it is legally permissible and meets standards and controls to address conflicts of interest. Whether or how much insurers may pay in such compensation does not play any role in the Via Benefits' insurance recommendations. Via Benefits also may receive other compensation from third parties, such as for selling or referring the sale of other products or services. Individual benefit advisors are compensated the same whether you pick a Medicare Advantage or Medicare Supplement plus PDP plan and regardless of which carrier you choose. For other kinds of products, the compensation they receive may vary based on the kind of product you purchase, but does not change based on carrier.





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