



Introducing a Health Plan Reimbursement Program as part of your benefits package.

The Health Plan Reimbursement Program offers employees who have access to alternate group medical and prescription drug coverage through their spouse, **100% coverage with \$0 out of pocket**. You will be reimbursed for ALL eligible co-pays, co-insurance and deductibles incurred through your alternate medical plan up to the maximum out of pocket limits under the Affordable Care Act (\$9,450/single and \$18,900/family per year).

No premium contribution will be deducted from your paycheck. There is no premium contribution for employees enrolled in the Health Plan Reimbursement Program.

Eligibility

- ▶ **Current employees:** must be enrolled in their employer's medical plan as of December 31, 2023
- ▶ **New employees** must satisfy your employer's benefit eligibility requirements
- ▶ **Qualifying event or newly eligible:** marriage, birth of child, part time to full time, etc.
- ▶ **Employees currently enrolled in the Health Plan Reimbursement Program:** If you are already enrolled in the Health Plan Reimbursement Program, you must submit a new Attestation form and updated premium contribution information for your alternate coverage each year.

Opportunities for Enrollment

- ▶ Your annual open enrollment window
- ▶ Qualifying event: marriage, spouse's change in employment status, birth of child, part time to full time, etc.
- ▶ Spouse's annual open enrollment window
- ▶ New employees: may enroll during their new hire enrollment period

Enrollment

- ▶ Enroll in alternate coverage and waive coverage on your employer's medical plan
- ▶ Complete the Health Plan Reimbursement Plan enrollment form
- ▶ Complete the Attestation form

IRS Rules

- ▶ You may be enrolled in an HRA or FSA. You **CANNOT** be reimbursed from both the Health Plan Reimbursement Program and your HRA or FSA.
- ▶ Employees are NOT eligible for the Health Plan reimbursement Program if their alternate coverage is:
 - A High Deductible Health Plan (HDHP) **with** active contributions to a health savings account (HSA); however, **it is acceptable alternate coverage** if contributions can be waived. A spouse who is not enrolled in the Health Plan Reimbursement Program may contribute to an HSA and use the HSA funds. The HSA funds **CANNOT** be used for medical expenses for members enrolled in the Health Plan reimbursement Program
 - Medicare, Tricare, VA health care or Medicaid
 - Healthcare Exchange Policy made available thru the Affordable Care Act
 - Individual policy or Limited Benefit Health Plan

Claims

- ▶ How do I use the Health Plan Reimbursement Program ID Card?
 - First, present your alternate coverage ID card.
 - Then, present your Health Plan reimbursement Program ID card. Let the provider know that the Health Plan reimbursement Program will pay the provider directly for eligible co-pays, co-insurance, and deductibles.
 - You pay nothing; your provider may file the claim with both your alternate coverage and with the Health Plan reimbursement Program.
- ▶ Electronic Claims:
 - To claim reimbursement under the plan electronically, go to portal.catilize.com
 - Here you will simply need to upload the required documentation:
 - Co-pay, co-insurance or deductible: Explanation of Benefits (EOB) from alternate coverage
 - Prescriptions: "Tab" from pharmacy that includes name of drug, date filled, patient's name and patient responsibility amount
- ▶ Paper Claims:
 - Send completed and signed claim form to Catilize Health with the required documentation

