

# Newport School Department - Retirees

Introduction to Your Health Reimbursement Arrangement (HRA)-Option #1

Plan Effective Date: June 1, 2015

### **IMPORTANT ITEMS TO REMEMBER**

#### **Medicare B Reimbursement:**

- 1) In order to receive reimbursement for your Medicare B premiums you must send in your annual 1099 or quarterly statement by April  $1^{\rm st}$  of each year.
- 2) Reimbursement for Medicare B premiums will be sent by London Health on the second Friday of every April.

#### **Medical Claim Reimbursement:**

1) In order to receive reimbursement for eligible medical expenses you may have your provider submit the claims to London Health via mail or fax. You may also submit the claims to London Health via mail, fax or email. Please see page 2 of this document for additional instructions.



#### **HRA Overview**

The Newport School Department has implemented a health provision that works in conjunction with the Medicare plan covering retirees. This provision is a "plan" within your Medicare insurance plan that pays portions of qualified medical expenses for eligible members. The plan is called a "health reimbursement arrangement" (HRA), which is administrated by London Health Administrators.



### **HRA Plan Design**

Service/Expense	Amount Reimbursed
Medicare B Premiums	Monthly Premium Plus Any Penalty
Podiatrist Office Visits (not routine foot care)	Pays 100% of Claim
One Routine Eye Exam Per Calendar Year	Pays 100% of One Routine Eye Exam Per Calendar Year
Care in a Skilled Nursing Facility	Pays 100% of Claim Beyond 100 days
Hearing Aid Coverage	Pays up to a Maximum of \$700 per ear, per 3-year period, per member
Chiropractic Services (for services not covered by Medicare/Plan 65	Pays 100% of Claim up to 12 visits per year
Nutritional counseling when prescribed by a physician and performed by a registered dietician/nutritionist	Pays 100% of Claim
Emergency Care Services Overseas	\$250 deductible and 20% not covered by Medicare and Plan 65 to the extent that it would have been covered under the previous plans
Prescription Drug Coverage	Rx Out of Pocket Expenses in Excess of \$300 per Individual and \$600 per Family Per Calendar Year
Immunizations	Co-pay for immunizations covered by Blue Medicare Rx Travel Immunizations to the Extent that they are covered under HealthMate Coast-to-Coast

Pg 1. (see next page for additional information)



# How to Have Your Provider Submit Unpaid Claims to London Health:

- 1) At the point of service show your Medicare ID Card, Plan 65 ID Card and your London Health
- 2) Your provider will send your HRA bill and Plan 65 Explanation of Benefits to London Health.
- 3) London Health will pay your provider the HRA eligible amount and your provider will send you a statement if you owe a portion of the claim.
- 4) After receiving the invoice from your provider, please pay the provider your responsibility.



# How You Can Submit Unpaid Invoices to London Health:

1) If you receive an invoice from your provider that is an HRA eligible expense, please send copies of the service bill and explanation of benefits from Plan 65 to London Health along with a completed Claim Reimbursement Form. You can send the paperwork to London Health via:

## Mail: London Health Admin. 40 Commercial Way East Providence, RI 02914

# Email: London Health Admin. dedicated@londonhealthusa.com

## Fax: London Health Admin. 401-435-3937

- 2) London Health will pay your provider the HRA eligible amount and your provider will send you a statement if you owe a portion of the claim.
- 3) After receiving the invoice from your provider, please pay the provider your responsibility.



# How You Can Submit Paid Invoices to London Health:

1) If you paid an HRA eligible expense with your personal funds, please send copies of the receipt of payment and explanation of benefits from Plan 65 to London Health along with a completed Claim Reimbursement Form. You can send the paperwork to London Health via:

#### Mail: London Health Admin. 40 Commercial Way East Providence, RI 02914 Attn: HRA Claims

### Email: London Health Admin. dedicated@londonhealthusa.com Subject: HRA Claims

Fax: 401-435-3937 Subject: HRA Claims

2) London will confirm the eligible expense and mail you a check for your eligible HRA amount.

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London Health Administrators. 40 Commercial Way, East Providence, RI 02914. P# 401-435-4700. F# 401-435-3937. Email: customerservice@londonhealthusa.com