



## Via Benefits Reimbursement Guide

<<Plan Name>>

<<Health Reimbursement Arrangement>>

<<HRA>>

# Greetings From Via Benefits

Dear <<FirsName>> <<LastName>>,

Congratulations! You have qualified for a <<Health Reimbursement Arrangement>> (<<HRA>>) provided by <<Employer Name>>. A contribution in the amount of \$<<amount>> has been made to your reimbursement account. Your reimbursement account will be available <<MM/DD/YYYY>>. For more information, refer to the documents provided by <<Employer Name>>. This guide contains instructions for managing your reimbursement account and explains how to be reimbursed for your eligible expenses. Via Benefits reimbursement accounts are administered by Extend Health, LLC. You will submit your reimbursement requests to Via Benefits and be reimbursed from your available funds.

## Faster. Safter. More Convenient

Download the Via Benefits Accounts mobile app to easily view your available balance, upload receipts, and view the statuses of your expenses. Download the app or sign into [my.viabenefits.com/funds](https://my.viabenefits.com/funds).

Access our privacy policy at [my.viabenefits.com/about/privacy-policy](https://my.viabenefits.com/about/privacy-policy). If you have questions or concerns, please contact us.

# Resources



## By Mobile App

Search for Via Benefits Accounts where you download apps



## Online

[my.viabenefits.com/funds](https://my.viabenefits.com/funds)



## By Phone

<<VB Client phone number>>

Monday through Friday

<<8:00 a.m. to 9:00 p.m. Eastern Time>>



## By Mail

<<Address>>

<<City, State ZIP Code>>



## By Fax

<<VB Client fax number>>



# Guide Contents

This guide has important information on how to manage your reimbursement account. We cover using our mobile app, how to set up an online account, and what paper forms you may need.

## Inside this guide you will find information on:

- Managing your reimbursement account
- <<Automating your premium reimbursement>>
- Setting up direct deposit
- How to request reimbursement
- Setting up an authorized representative
- Information on Via Benefits EOP and EOUE
- Helping reminders for submitting a reimbursement request
- Documents you should save
- Eligible expenses
- <<Individual And Family Plans>>
- Frequently asked questions

## Included with this reimbursement guide are the following forms and inserts:

- <<Reimbursement Request Form>>
- <<Recurring Medicare Part B Reimbursement Request Form>>
- <<Catastrophic Coverage Insert>>
- <<Special Payment Benefit Insert>>
- <<Special Payment Benefit Form>>
- <<Recurring Premium Reimbursement Request Form>>
- <<Via Benefits Accounts Mobile App Insert>>



## We're Here To Assist You

If you still have questions after reading this guide, go online and visit our **Help & Support** section containing answers to frequently asked questions. You may also call Via Benefits at <<VB Client Phone Number>>.

# Managing Your Reimbursement Account

The fastest and easiest way to manage your reimbursement account is to use our mobile app or website. Using our app or website reduces the amount of time spent on the phone and shortens the time you wait for reimbursements to arrive.

## Sign up for the mobile app

1. Download the Via Benefits Accounts mobile app
2. Select **Sign Up**
3. Follow the instructions to set up your account

## Sign up for an online account

1. Go to [my.viabenefits.com/funds](https://my.viabenefits.com/funds)
2. Select **Sign Up**
3. Follow online instructions to set up your account



Information appearing in your online account about you or the plans you have selected was collected during your enrollment process.

# Automating Your Premium Reimbursement

Automating your premium payment and premium reimbursement will save you time each month, and direct deposit is the most secure way to get the money into your bank account.

## Automate your premium payment and reimbursement

### 1. How to automate your premium payment

This can be set up by contacting your insurance carrier. Most insurance carriers offer an automatic premium payment option where they draft your monthly premium payments from your bank account.

### 2. How to automate your premium reimbursement

Via Benefits offers an Automatic Premium Reimbursement feature for most insurance policies. When enabled, this allows your insurance carrier to notify Via Benefits you've paid your monthly premium, and you'll automatically be reimbursed from your account without needing to mail or fax a form.

Once your reimbursement account has been activated, and you have made your premium payment to the insurance carrier, please allow up to six weeks to receive your first Automatic Premium Reimbursement. If it has been more than eight weeks, feel free to reach out to Via Benefits so we may contact your insurance carrier on your behalf.

Once Automatic Premium Reimbursement is established, you should get multiple months of reimbursement with the first payment, in accordance with the time it took to set up the service.

## Set up direct deposit using the mobile app

1. If you have not already done so, download the Via Benefits Accounts mobile app
2. If you have not already done so, create a **Username** and **Password**
3. Under **Alerts**, go to **Complete Direct Deposit for Claim Payment**
4. Enter your information for direct deposit to have your reimbursements sent directly to your bank account, the fastest, safest way to receive your funds

## Set up direct deposit online

1. Go to **my.viabenefits.com/funds**
2. Sign into your Via Benefits online account
3. Select **Funds & Reimbursement**
4. Select **Reimbursement Center**
5. Select your name and then **Banking Information**

Direct deposit can also be set up by calling Via Benefits at <<**VB Client Phone Number**>> and requesting a *Direct Deposit Form*. Forms are also available online. Sign into your account and select the **Funds & Reimbursements** tab. Select the desired account if you have more than one account, then **Personalized Forms**.

# How To Request Reimbursement

## 1. Pay for your health care expenses

The first step toward reimbursement is for you to pay your health care expenses. You will make your payments directly to your insurance carrier or health care provider.

Retain your receipts and supporting documentation for reimbursement requests.

## 2. Submit a reimbursement request

After you have paid for your health care expenses, there are several ways to submit a reimbursement request. Submitting reimbursements online or via the the mobile app are the fastest and easiest ways to be reimbursed. You can also submit by mail or by fax. Be sure to include all supporting documentation (e.g. Explanation of Benefits, itemized receipts, etc.). For detailed instructions for submitting reimbursement requests, go to the **Help & Support** section of our website and enter the term “reimbursement request” into the search bar. You can also read and follow the steps on the paper form included with this guide.

## 3. Via Benefits approves your request and provides reimbursement

Via Benefits will process your reimbursement request through any method submitted, and once approved, reimburse you from your available funds. You may receive your reimbursement by direct deposit or check, along with your Via Benefits Explanation of Payment (EOP) statement.

# Setting Up An Authorized Representative On Your Account

Via Benefits recommends having an authorized representative on your account. Should the need arise, it is beneficial to have someone who can act on your behalf. You can designate an authorized representative on the phone, or you can submit an *Authorization to Release Protected Information (ARPI) Form*, allowing someone access to your account. Your authorized representative can submit reimbursement requests and check on their status on your behalf.

You may cancel this or change a representative at any time by calling or in writing.



Do not mail original receipts or documents; provide copies for ARPI authorization or reimbursements.



# Information On Explanation of Payment (EOP) and Explanation of Unpaid Expenses (EOUE) Documents

Explanations of Payment (EOPs) and Explanations of Unpaid Expenses (EOUEs) provide details about expenses that have been paid, not approved, or denied. The information in these letters is available electronically when you sign into your online account, or you can choose to receive these documents in the mail. You may change your delivery method by calling Via Benefits or signing up for email notifications.

- If a reimbursement request is denied or not approved, the EOP or EOUE will list the reason. You may need to take action, such as providing additional supporting documentation.
- If you don't have a sufficient balance in your reimbursement account, Via Benefits will reimburse as many expenses as possible. The remaining expenses will be paid when your reimbursement account balance is sufficient.

## What to do with a denied expense

If an expense has been denied, a denial reason will be listed on the EOP or EOUE with instructions on how to take action.



# Helpful Reminders For Submitting A Reimbursement Request

Instructions for submitting your reimbursement requests are on the mobile app, online, and printed on the back of each form.

- Check off each step as you fill out the form.
- Via Benefits will verify these items:
  - Date of service (e.g., 01/15/2019)
  - Expense type (e.g., Medical or service provided)
  - Provider (e.g., Dr. Smith) or carrier (e.g., AARP)
  - Individual serviced (e.g., John Doe)
  - Amount (e.g., reimbursement amount requested)
  - Proof of Payment (e.g., cleared check, receipt) or Proof of Premium (e.g., AARP)



Via Benefits recommends submitting your expenses through the mobile app or online. These are the fastest methods to be reimbursed, and you can follow the reimbursement process from start to finish.

Via Benefits does not look for a specific document but looks for the specific information required to verify the expense in the request.

- More than one document may need to be provided to show all five pieces of information.
- The most common things to send include:
  - Insurance carrier Explanation of Benefits
  - Itemized receipt
  - Premium statement
  - Bank statement
  - Cleared check

**Via Benefits does not return documents. Do not mail original receipts or documents; provide copies for reimbursements.**

Refer to the instructions on the *Reimbursement Request Form* or call Via Benefits for assistance.

### International reimbursement request

For international reimbursement requests, please contact Via Benefits to receive special instructions for reimbursable eligible expenses incurred outside of the United States.



# Documents You Should Save

Below is a list of important documents to watch for and save once they arrive. It is a good practice to keep these documents until you are sure they are no longer needed.

## **From your insurance carrier: Premium Payment Statements**

Your insurance carrier will prepare a policy statement or a monthly premium statement containing your monthly premium amount and your payment schedule.

Save all policy statements, premium statements, invoices, premium coupons, and receipts you receive from your insurance carrier for use as supporting documentation when submitting your reimbursement requests.

If you have not received or are unable to locate an invoice or statement, you may call your insurance carrier.

## **Explanation of Benefits (EOB) Statements**

Your insurance carrier will provide an EOB stating the amount of the expense covered by the plan, the remaining account balance, and the amount of your responsibility. Keep these EOBs as documentation of your health care expenses.

If you have not received or are unable to locate an EOB, contact your insurance carrier.

## Monthly Prescription Drug Plan Summaries

Each statement summarizes important information related to your prescriptions covered that month and may be needed to support your reimbursement request. If you do not enroll in a prescription drug plan, you will not receive these documents.

### From the Social Security Administration:

#### ***Social Security Benefit Award/Proof of Income Letter***

The Social Security Administration issues an annual *Social Security Benefit Award Letter/Proof of Income Letter* usually during October or November. This letter specifies the amount of your Social Security benefit for the coming year and any deductible amounts. This letter should be saved and will be required for supporting documentation.

If you are missing your Benefit Award/Proof of Income Letter, you may call the Social Security Administration at 1-800-772-1213 and follow the prompts to request another Benefit Award/Proof of Income Letter.





# Eligible Expenses

This is an overview of eligible expenses allowed for your reimbursement program.

## Premium expenses

<<The funds provided in your reimbursement program can be applied toward the medical, prescription drug, dental, vision, Medicare Part B, and long term care premium expenses incurred while you are eligible for your funding program. ... premiums are not included.>> <<Generally, you will pay your insurance premiums to the insurance carrier on a monthly basis before requesting a 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 are defined as those incurred while paying for medical, pharmacy, dental, and vision services as described in Section 213 (d) of the Internal Revenue Code. ... Out-of-pocket expenses are not included.>> <<For more information see the IRS publication 502 (available at [www.irs.gov/pub/irs-pdf/p502.pdf](http://www.irs.gov/pub/irs-pdf/p502.pdf)), the Summary Plan Description (SPD) provided by your former employer or benefits provider, or call Via Benefits.>>

## Sample list of eligible out-of-pocket expenses

<<The list on the next page is a sample of eligible expenses for reimbursement based on IRS Code Section 213(d). It is not a complete list and is subject to change without notice. The list includes some common out-of-pocket health care expenses that may not be eligible for reimbursement under your specific funding program. For more information on eligible expenses covered by your specific program refer to your SPD or contact Via Benefits.>>



## Medical

- Abdominal supports
- Ambulance
- Anesthetist
- Blood tests
- Blood transfusions
- Cardiographs
- Chiropractor
- Convalescent home (for medical treatment only)
- Crutches
- Dermatologist
- Diagnostic fees
- Gynecologist
- Hospital bills
- Hydrotherapy
- Insulin treatment
- Lab tests
- Nursing (including board and meals)
- Operating room costs
- Organ transplant (including donor's expenses)
- Orthopedic shoes
- Orthopedist
- Osteopath
- Oxygen and oxygen equipment
- Physician
- Physical therapy
- Podiatrist
- Practical nurse for medical services
- Psychiatrist
- Psychoanalyst
- Psychologist
- Psychotherapy
- Registered nurse
- Spinal fluid test
- Surgeon
- Vaccines
- Wheelchair
- X-rays



## Pharmacy

- Prescription medicines
- Rx drugs (prescription)



## Dental

- Dental treatment
- Dental X-rays
- Dentures
- Fluoridation unit
- Gum treatment



## Vision

- Contact lenses
- Eyeglasses
- Ophthalmologist
- Optician
- Optometrist



## Hearing

- Hearing aids and batteries

# Individual And Family Plan Participants

## Individual and Family Plans (IFP)

If you are not yet Medicare-eligible and are enrolled in an Individual or Family Plan, you are an IFP participant.

## The Individual or Family Plan Payee

Individual or Family Plans may have more than the primary account holder on the insurance policy, such as a spouse and/or dependents. For these policies, reimbursements will be in the primary account holder's name. If you are in an IFP and cover only yourself, you are the primary account holder.

## Recurring Premium Reimbursement

Individual and Family Plans do not offer Automatic Premium Reimbursement. To be reimbursed for your plan premiums regularly, Via Benefits offers a feature called Recurring Premium Reimbursement. This feature provides a simple way to be reimbursed monthly for insurance premiums. Premiums must be a fixed monthly amount for a set period of time. Recurring Premium Reimbursement requests must be resubmitted each calendar year.

You pay your premiums to the insurance carrier, and as long as you stay eligible for your funding program and have funds available, you may be reimbursed for those premium payments each month by setting up Recurring Premium Reimbursement. If there is a change in the premium amount, you can make the changes online, or notify Via Benefits by completing another *Recurring Premium Reimbursement Request Form* and mark in the Action column "Change." Via Benefits will update your file and reimburse you the new amount.

## How Recurring Premium Reimbursement works

Instructions for submitting your reimbursement requests are on the mobile app, online, and printed on the back of each form.

1. Pay your premium to your insurance carrier
2. Submit the request for the Recurring Premium Reimbursement with supporting documentation either using the mobile app, online, or by mail or fax using a *Recurring Premium Reimbursement Request Form*
3. Complete the request by providing supporting documentation
4. You'll receive a monthly reimbursement for your premium — automatically if you set up direct deposit or by a check in the mail

### IMPORTANT!

For faster reimbursements, submit your requests using our mobile app or your online account.



# Frequently Asked Questions

Via Benefits has helped hundreds of thousands of retirees access and manage their reimbursement account. We understand many people have similar concerns. Below are answers to some of our most frequently asked questions.

## Which health care expenses are eligible?

A sample list of eligible expenses is included in this guide. To view a more complete list, visit your Via Benefits online account and select the **Reimbursement Center** button. The only way to verify if an expense is eligible is to submit for reimbursement. Please call Via Benefits with any questions regarding eligible expenses.

## Why was my reimbursement request denied?

A reimbursement request can be denied for a number of reasons, including an incorrect or incomplete document or an ineligible expense. If a reimbursement you submit is denied, you can learn why on your Explanation of Payment (EOP) or Explanation of Unpaid Expense (EOUE). Follow the Action Required on the EOP or EOUE to resubmit your reimbursement request.

## When should I receive my reimbursement?

Direct deposit is the recommended method for reimbursement. It takes three (3) business days for the payment to appear in your bank account after the reimbursement request is processed. This eliminates the need for a check, that can take up to 10 business days after the reimbursement request is processed.

## Who do I contact if I have questions?

Via Benefits' trained representatives are always happy to hear from you. Our representatives are available Monday through Friday, <<from 8:00 a.m. to 9:00 p.m. Eastern Time>>. Call us using the toll-free phone number printed at the front of this guide or at the bottom of the page.

To verify your identity, you may be asked a few questions before you are connected to a representative. Please be prepared to provide your ZIP Code and the last four digits of your Social Security Number.



## Notes



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Extend Insurance Services, LLC\* is Extend Health, LLC's licensed insurance agency. Extend Insurance Services, LLC is a Utah resident insurance agency (Utah License No. 104741) and licensed as a nonresident insurance agency or otherwise authorized to transact business as an insurance agency in all states and the District of Columbia. Extend Insurance Services, LLC represents and receives payment of commissions from the insurance companies for which Extend Insurance Services, LLC is an agent and sells insurance products and services, and may receive other performance-based compensation for its sale of the insurance products and services provided to you. Insurance rates for the insurance products and services offered by Extend Insurance Services, LLC are subject to change. All insurance products and services offered by Extend Insurance Services, LLC may not be available in all states. It is your responsibility to enroll for coverage during the annual Medicare Open Enrollment period.

\*Extend Insurance Services, LLC is changing its d/b/a from Towers Watson's OneExchange to Via Benefits Insurance



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|--|-----------------|--|
|  | <<CLIENT LOGO>> | <<First Name>> <<Last Name>><br><<Address Line 1>><br><<Address Line 2>><br><<City>>, <<State>> <<ZIP CODE>> |
|--|-----------------|--|