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Important Details About Your HRA from PEBP and Via Benefits

You are receiving this notification because you have $7,000 or more in your HRA account.

How does this impact you?

Your HRA balance through Via Benefits is capped at $8,000 and on May 31st, any amount over $8,000 will be rescinded to reflect a $8,000 balance. For example, if you have $10,000 in your HRA on May 30th, on May 31st your HRA balance will be $8,000 and the $2,000 will revert to the state.

How Can I Avoid My HRA Funds Reverting to the State?

If your HRA balance is below $8,000 no action is required. If you have more than $8,000, it is highly recommended that you submit a request for reimbursement for any eligible expenses that you want to apply to your HRA balance *before* May 31st, 2022. It is your responsibility to ensure that all necessary supporting documentation is submitted with the initial claim to Via Benefits, not PEBP. It is highly recommended that reimbursement request be submitted before May 15th, 2022, to allow timing for receipt, review, and processing by May 30th. Claims that are denied or received after May 31st, will apply to the new balance in the HRA at the time it is approved. There is no retroactive application to the HRA balance before it was adjusted to $8,000.

Examples of Eligible Expenses for reimbursement include

- Premiums for Medicare Part B,
- Medicare Supplement (Medigap)
- Medicare Advantage, Part D (Rx),
- Dental, and Vision plans.

Please view the common IRS qualified Medical Expenses at

hsabank.com/hsabank/learning-center/irs-qualified-medical-expenses

What if my balance is Less Than $8,000 on May 31, 2022?

If you have less than $8,000 the balance in your account will not be affected.

Where Can I Find More Information About This Change?

On the back page of this letter there is more detailed information regarding the Medicare Exchange HRA plan design change from March 25, 2021. You can also view the Medicare Exchange Health Reimbursement Arrangement Summary Plan Description on pebp.state.nv.us under *Getting to Know Your Plan*. Please keep this letter for your records.

Please contact Via Benefits 1-888-598-7545 with any additional questions.

NEVADA PUBLIC EMPLOYEES' BENEFITS PROGRAM

VIA BENEFITS™

Medicare Exchange Plan Design Changes

IMPORTANT

Medicare Exchange HRA Carryover Limit

HRA balances more than $8,000 will be capped ***annually*** on May 31st. This means HRA funds may accumulate throughout the year; however, on May 31st of each year, any HRA balance which exceeds $8,000 will be returned to the Plan and will not be available for reimbursement. Once funding for balances over $8,000 are removed from the HRA they cannot be reinstated, even by means of an appeal.

Any eligible expenses that retirees want to apply to their HRA balance before May 31st should be submitted to Via Benefits, not PEBP by May 15th or earlier to allow time for the claim to be received, reviewed, and processed. It is the **retiree's responsibility** to ensure that all necessary supporting documentation is submitted with the initial claim.

Examples of HRA-Qualifying Medical Expenses

The Medicare Exchange HRA Plan is administered by Via Benefits for the purpose of reimbursing eligible retirees for HRA-Qualified Medical and Dental Expenses incurred by the retiree, the retiree's spouse, and eligible dependent(s) on a tax-free basis. IRS Tax Code 213(d) determines reimbursable expenses. View IRS Publication 502 (https://www.irs.gov/pub/irs-pdf/p502.pdf), for detailed information and descriptions of qualified medical expenses.

Below are reimbursement examples of what Via Benefits HRA funds may be used for, that are incurred by the retiree and qualifying IRS tax dependent(s). This is not a comprehensive list:

- Medical, dental, prescription drug, and vision plan premiums
- Medicare Part B and Part D premiums; and
- Out-of-pocket health care expenses such as physician visits and/or prescription copays, prescription eyeglasses, hearing aids, dental, etc.

How to Request and Submit Claim Forms

Specific documentation requirements are included on the reimbursement forms when you submit the request on Via Benefits website. Visit **myviabenefits.com/pebp** and search Reimbursement request and requirements explained to learn more. Online reimbursement request is the fastest, safest, and most secure way to have your reimbursements processed. Reimbursement request forms can also be requested by calling Via Benefits toll-free at 1-888-598-7545 Monday-Friday 5am – 6pm Pacific Time.

Per NRS 287.0475 Basic life insurance may not be reinstated and will be forfeited if a retired employee declines or disenrolls from a qualified medical plan through Via Benefits or does not pay their premiums for Medicare Part B. You will lose your basic life insurance, PEBP dental, and voluntary benefits if applicable, if you enroll in a plan outside of Via Benefits.

Sincerely,

Public Employees' Benefits Program