

## Reimbursement FAQ's

### 1 Who is eligible for the HRI Reimbursement Benefit?

A participant who terminates from employment and is vested in their HRI Postretirement Health Benefits Plan is eligible for reimbursement of qualified medical expenses (QMEs) incurred after their termination date. Qualified medical expenses incurred by the participant's spouse or other eligible dependents(s) after the participant's termination date (or date of death whichever comes first), may also be reimbursable from the Emeriti Health Account.

### 2 Who qualifies as an eligible Plan Dependent?

A medical expense incurred by an eligible participant's dependent may be reimbursable under the Emeriti Healthcare Savings Plan. A dependent usually includes a spouse and children under the age of 26. Expenses incurred by other dependents may also be reimbursable according to Internal Revenue Code requirements. See IRS Publication 502 for more detail regarding eligible reimbursable medical expenses and eligible dependents.

### 3 What expenses are reimbursable?

Eligible medical expenses are defined under Internal Revenue Code Section 213(d). Please refer to IRS Publication 502 to learn more regarding eligible medical expenses. The following is a list of common reimbursable eligible medical expenses:

1. Premiums for health insurance coverage, including COBRA and long term care but excluding coverage for active employees under an employer-sponsored group health plan
2. Medicare premiums, deductibles, and coinsurance
3. Out-of-pocket costs related to durable medical equipment, vision, dental and hearing aids
4. Out-of-pocket hospital and surgical expenses
5. Certain out-of-pocket costs associated with nursing or in-home healthcare services

## 4 What is considered adequate proof of payment and substantiation of my claim(s)?

An Explanation of Benefits (EOB) from your insurer or a receipt of payment for the medical expense (or insurance premium) will substantiate your claim. The EOB or receipt must show the Date of Service, the Patient's Name, the Service Provider's Name, a description of the Qualified Medical Expense, and the amount requested for reimbursement.

For prescribed, over-the-counter medicines and drugs, you must also include a copy of the doctor's prescription or a printed Rx number on the health expense receipt.

For personal protective gear used to prevent the spread of the coronavirus, or for menstrual products, and over-the-counter medications prescriptions are not required.

Canceled checks or credit card statements are not acceptable proofs of payment.

### Claims documentation must have the following:

- Patient Name
- Date of Service
- Provider Name
- Description of Service
- Amount

### Good examples of claims documentation:

- EOB
- Rx label
- Itemized provider bill
- Medicare Part B/D letter
- Insurance carrier premium bill

### Insurance Premium documentation must include:

- Insured's Name
- Insurer's name
- Coverage Period
- Type of Insurance
- Premium Amount

### Examples of documentation that is not acceptable:

- Credit card receipts
- Cancelled checks

## **5 How long do I have to submit a claim for reimbursement?**

Claims must be submitted for reimbursement within 12 months following the end of the calendar year in which the expense was incurred. For example, an expense incurred on November 1, 2022, must be submitted by December 31, 2023.

## **6 How do I submit a reimbursement request for health plan premiums in advance?**

You may be reimbursed for prepaying insurance premiums up to 12 months in advance. You will need to submit an insurance statement that specifies your contracted premium amount for the year or for the defined coverage period for which you are requesting reimbursement. Along with your insurance statement, you must submit proof that you have prepaid premiums to the insurance carrier.

## **7 Can I set up recurring reimbursements?**

Yes. You can send a one-time claim submission for your insurance premiums that will be used to reimburse you monthly. You will need to submit an insurance statement that specifies your contracted premium amount for the year or for the defined coverage period for which you are requesting reimbursement. Likewise, for reimbursement of Medicare Part B and/or Part D premiums, you will need to provide a copy of your annual Social Security statement that is mailed to you. You can also download your statement online at [medicare.gov](https://www.medicare.gov).

Recurring payments are released at the beginning of the month for the prior month's coverage period. (e.g. Payment released the first week of December for coverage period November 1st–November 30th).

## **8 Is there a limit to the amounts for which I can be reimbursed?**

No. A vested and terminated eligible participant may be reimbursed for qualified medical expenses up to the full balance in their Emeriti Health Account. Reimbursements are processed from the available account balance held in the TIAA-CREF Money Market Mutual Fund. If a claim exceeds the dollar amount held in your TIAA-CREF Money Market Mutual Fund you may need to transfer funds from your TIAA-CREF Life Cycle Mutual Fund to your TIAA-CREF Money Market Mutual Fund to ensure your reimbursement is processed. You may transfer funds online at [tiaa.org](https://www.tiaa.org) or by calling the Emeriti Service Center at 1-866-EMERITI (1-866-363-7484) and selecting option #3.

### **9 Are reimbursements tax-free?**

Yes. Reimbursements for eligible qualified medical expenses are tax-free.

### **10 How are reimbursement payments made?**

CBIZ, the claims administrator for the Emeriti RHSP, will process your claim request and send reimbursement to your address on record. You may also request to have reimbursements deposited directly into your checking or savings account by indicating this on the Emeriti RHSP Claim Form.

### **11 Why must I transfer money into the TIAA-CREF Money Market Mutual Fund to be reimbursed?**

All Emeriti Health Account claim reimbursement requests are processed from the available account balance held in your TIAA-CREF Money Market Mutual Fund. The TIAA-CREF Money Market Mutual Fund provides relative stability in your available account balance to ensure sufficient funds are maintained to process your reimbursement. Other investment products available within your Emeriti RHSP may be subject to significant market fluctuation daily.

### **12 How quickly do the Funds transfer across the available TIAA-CREF Lifecycle and Money Market Funds?**

Transfers between the TIAA-CREF Lifecycle Funds and the TIAA-CREF Money Market Mutual Fund are processed as of the close of business on the New York Stock Exchange (usually 4 PM ET Monday–Friday). Transfer requests received after the close of business on the New York Stock Exchange are processed as of the close on the next business day. You may transfer funds online at [tiaa.org](http://tiaa.org) or by contacting a TIAA representative at 1-866-EMERITI (1-866-363-7484) and pressing option “3” for assistance Monday through Friday, 9:00 AM to 5:30 PM Eastern Time.

### **13 How do I submit claims?**

You can submit reimbursement claims via mail, fax, and online at [MyEmeritiBenefits.org](http://MyEmeritiBenefits.org). You will be able to view all your reimbursement claim transactions at [MyEmeritiBenefits.org](http://MyEmeritiBenefits.org). It's easy to register with your email address and a password.

## **14** How do I check the status of my claims?

If your claim is denied, you will be informed by mail. You will be provided the reason for denial and an opportunity to appeal or resubmit your claim. If you have any questions about your reimbursement claim, call 1-866-EMERITI (1-866-363-7484) and press option #2, Monday through Friday, 9:00 AM to 5:30 PM Eastern Time. You may also visit our benefits website 24/7 at [MyEmeritiBenefits.org](http://MyEmeritiBenefits.org).

## **15** How do I get reimbursed for mail-order prescription drugs?

You may submit documentation of your order manually (by mail, fax, or online at [MyEmeritiBenefits.org](http://MyEmeritiBenefits.org)), or you may use your Rx Debit Card.

## **16** Do I have to provide my Social Security number to be reimbursed?

Yes. CBIZ, Emeriti's reimbursement claim administrator requires your Social Security (and that of your eligible dependents) to process your claim requests. You only need to provide the information once—either on the first claim form that you submit—or by calling the Emeriti Service Center at 1-866-EMERITI (1-866-363-7484) and pressing option #2 Monday through Friday, 9:00 AM to 5:30 PM Eastern Time.

## **17** What happens to my Emeriti Health Account assets when I die?

The remaining assets can be used by your spouse and any eligible dependents for Emeriti Health Insurance premiums and qualified medical expenses until they die or cease to be eligible dependents.

It is important to remember that this is a program designed specifically to pay for health expenses, and it receives very favorable tax treatment for this purpose. Therefore, federal law requires that when you and all your eligible dependents die (or cease to be eligible dependents), any unused funds in your RHSP will revert to your institution's Plan for use in providing benefits to other eligible participants.

## **18** Can I roll over the funds in my Emeriti Health Account to another plan?

No. Your Emeriti Health Account is not a qualified account and therefore not eligible for rollover or direct transfer to another administrator. Your vested Emeriti Health Account goes with you and you will have access to reimbursement for yourself and your eligible dependents until the account is depleted or after your death and the death of your last eligible dependent.

## 19 How do I update my contact information?

It's very important that you keep Emeriti informed, should you change your permanent residence. Please call 1-866-EMERITI (1-866-363-7484) and press option #3, Monday through Friday, 9:00 a.m. to 5:30 p.m. Eastern Time, to update your information.

### Emeriti Reimbursement Benefit Resources

**Emeriti Service Center**

**1-866-EMERITI (1-866-363-7484)**

Press option #2 to speak to a CBIZ representative  
Press option #3 to speak to a TIAA representative

**Mailing address**

**Emeriti Benefits Center**  
1845 Walnut St 10th Floor  
Philadelphia, PA 19103

**Online dashboard**

**MyEmeritiBenefits.org**  
Check the status of reimbursements and electronically submit claims

**Fax**

215-563-9943

**Check health account online**

**Log in to your account at tiaa.org**  
Check health account balance and make fund transfers



The full name of Emeriti Retirement Health Solutions is The Emeriti Consortium for Retirement Health Solutions, an Illinois Nonprofit Corporation. Emeriti Retirement Health Solutions is not an insurance company, insurance broker, or insurance provider.

The Emeriti program collaborates with Teachers Insurance and Annuity Association of America (TIAA) and CBIZ Benefits and Insurance Services, Inc. (CBIZ). Emeriti, TIAA, and CBIZ are independent corporations and are not legally affiliated.

TIAA is Emeriti's accumulation recordkeeper, trust services provider, and investment manager. TIAA may issue plan communications on behalf of the plan sponsor, in its capacity as an accumulation recordkeeper.

CBIZ is Emeriti's disbursement recordkeeper for Emeriti group insurance administration and Emeriti medical expense reimbursement processing.

Interests in any retiree healthcare plan discussed herein are offered solely by the employer. Investment, insurance, and annuity products are not FDIC insured, are not bank guaranteed, are not deposits, are not insured by any federal government agency, are not a condition to any banking service or activity, and may lose value.

This material is for informational or educational purposes only. It is not legal or tax advice. It does not constitute fiduciary investment advice under ERISA, a securities recommendation under all securities laws, or an insurance product recommendation under state insurance laws or regulations. This material does not consider any specific objectives or circumstances of any investor or suggest any course of action. Investors should make investment decisions based on investors' objectives and circumstances.

© Copyright 2022 Emeriti Retirement Health