



## Troy School District

### Health Reimbursement Arrangement (HRA)

Administered by Peak One Administration

Plan Year: **January 1, 2023 – December 31, 2023**

#### **Health Reimbursement Arrangement (HRA)**

An HRA is a benefit plan set up by Troy School District to reimburse employees for qualified medical deductible expenses on a non-taxable basis. Qualified medical deductible expenses must be incurred while you are eligible and a participant in the HRA plan. Medical deductible expenses incurred by your spouse or dependent children may also be eligible for reimbursement.

#### **Who is Eligible for the Plan?**

All full-time employees who are enrolled in the company medical base insurance plan are eligible in the HRA plan.

#### **What Expenses are Eligible for Reimbursement?**

Expenses eligible for reimbursement are medical deductible items only.

#### **How do the Reimbursement Parameters Work?**

**Employees with Single Health Insurance Coverage:** The HRA plan is available to reimburse employees at 90% for medical deductible expenses after they have met a \$500.00 deductible. The maximum reimbursement for an individual is \$1350.00 per year.

**Employees with Family Health Insurance Coverage:** The HRA plan is available to reimburse employees and/or eligible dependents at 90% for medical deductible expenses after they have met a \$500.00 individual deductible or \$1000.00 family deductible. The maximum reimbursement for a family is \$2700.00 per plan year.

#### **How long do I have to submit Eligible Expenses for Reimbursement?**

Claims for expenses incurred during the plan year must be received by Peak One Administration no later than 90 days following the end of the calendar year.

This plan may only be used for amounts not paid under any other insurance plan that you maintain for yourself or your family. All attempts to recover monies from any insurance carrier(s) must be exhausted before you submit expenses eligible for reimbursement under this HRA plan.

#### **How Do I Get Reimbursed For My Eligible Expenses?**

Employees are responsible for submitting reimbursement requests directly to Peak One Administration. All reimbursement requests must include a completed fax cover sheet and your Explanation of Benefits (EOB). Fax Cover Sheets can be obtained by contacting Peak One at (866) 315-1777 or emailing [membercare@peakoneadmin.com](mailto:membercare@peakoneadmin.com). Peak One also provides online access to your account balance information, claims and reimbursement activity at [www.peakoneadmin.com](http://www.peakoneadmin.com).

Questions about the HRA Plan should be directed to: Peak One MemberCare Department  
Toll-Free Phone: (866) 315-1777  
Toll-Free Fax for Claims: (855) 495-3669  
Email: [membercare@peakoneadmin.com](mailto:membercare@peakoneadmin.com)

The Peak One WealthCare Portal can be accessed by navigating to the following URL:

<https://peak1.wealthcareportal.com>

Click on Register to complete the registration form. Choose a username and password. Enter the required demographic information.

Your Employee ID is your SSN without dashes

Your Registration Code (Employer ID) is PK10907.