

INSTRUCTIONS

Please hover over blue links for a detailed explanation of that field.

- **Section A:** HRA Plan Design Options
- **Section B:** Enrollment Information
- **Section C:** Plan Document Preparation
- **Section D:** Client Signoff

SECTION A: HRA PLAN DESIGN OPTIONS

Plan Type	<input type="checkbox"/> New <input type="checkbox"/> Takeover If takeover, what is the effective date? / / If takeover, what is the last day current administrator will process claims? / /
If existing HRA Benefits are offered	Who is your current administrator? Total number of current participants in HRA: Which Vendor will be responsible for Claims Run out from current plan year? <input type="checkbox"/> Current Administrator <input type="checkbox"/> WageWorks (Cost to be quoted)
Plan Year	Begins: / / Ends: / / Is first plan year a short plan year? <input type="checkbox"/> Yes If yes, beginning: / / <input type="checkbox"/> No
Claims Runout Period for active participants	<input type="checkbox"/> 90 Days <input type="checkbox"/> Other. If other, provide number of days:
Claims Runout Period for terminated participants	<input type="checkbox"/> 30 Days <input type="checkbox"/> Other. If other, provide number of days:
Rollover Option	<input type="checkbox"/> Yes Maximum Rollover Amount \$ or % <input type="checkbox"/> No
HRA Type	<input type="checkbox"/> Integrated HRA. The HRA will be offered with a group sponsored health plan <input type="checkbox"/> QSEHRA (Qualified Small Employer HRA). Only an option for employers with less than 50 full-time employees. Employer cannot offer a group health plan to any of its employees.
Prorate HRA Funding	<input type="checkbox"/> Yes, prorate HRA funds based upon a participant's effective date in the plan. QSEHRAs must be prorated on a monthly basis based upon a participant's effective date in the plan <input type="checkbox"/> No, do not prorate HRA funds if a participant enters the plan after the plan year begins.

Funding Structure (select one)	Funds made available: <input type="checkbox"/> Annually <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> <u>Employer Pays First</u> Single \$ Two-Person \$ Family \$ OR <input type="checkbox"/> <u>Employee Pays First (HRA Deductible)</u> Amount paid by employee before accessing HRA funding (HRA deductible): Single \$ Two-Person \$ Family \$ Amount paid by HRA after employee pays above HRA Deductible: Single \$ Two-Person \$ Family \$ Note: QSEHRAs funding cannot exceed \$4,950 for single coverage and \$10,000 for family coverage per 12 month plan year, max benefit must be prorated by month for short plan years.
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Payment Method and Eligible Expense Options - Select one of the following options	
<input type="checkbox"/> Option 1 – Debit Card & <u>Pay Me Back</u>	Eligible Expenses (select all that apply) <input type="checkbox"/> Medical Expenses - includes Medical Deductible, Medical Copays, Medical Coinsurance, etc – does NOT include RX, select Prescriptions check box if RX is to be covered. <input type="checkbox"/> Prescriptions <input type="checkbox"/> Dental <input type="checkbox"/> Vision <input type="checkbox"/> All Section 213(d) Expenses (Medical, Rx, Dental, Vision, etc.) <input type="checkbox"/> Individual Insurance Premiums – Only an option for QSEHRAs. The debit card does not work for insurance premium payment.
<input type="checkbox"/> Option 2 - No Card <u>Pay Me Back</u> (Manual Claim Submission Only)	Eligible Expenses (select all that apply) to be reimbursed via manual claim submission only <input type="checkbox"/> Medical Expenses - includes Medical Deductible, Medical Copays, Medical Coinsurance, etc – does NOT include RX, select Prescriptions check box if RX is to be covered. <input type="checkbox"/> Medical Deductible Only - only includes Medical expenses applied to the health plan deductible, does not include RX. Select Prescriptions check box if RX is to be covered by the HRA. Participants must submit an EOB with the claim form to be reimbursed for deductible expenses. <input type="checkbox"/> Prescriptions <input type="checkbox"/> Dental <input type="checkbox"/> Vision <input type="checkbox"/> All Section 213(d) Expenses (Medical, Rx, Dental, Vision, etc.) <input type="checkbox"/> Individual Insurance Premiums – Only an option for QSEHRAs

SECTION B: ENROLLMENT INFORMATION	
Providing Enrollment Data to WageWorks	How will enrollment data be provided to WageWorks? <input type="checkbox"/> Completed Enrollment Form <input type="checkbox"/> Completed file utilizing take care [®] by WageWorks specifications (for clients with 100 or more participants)

SECTION C: PLAN DOCUMENT PREPARATION

Will WageWorks prepare plan documents?

- Yes, plan documents will be provided by WageWorks following the implementation process.
- No, the HRA already has existing plan documents or plan documents will be obtained elsewhere.

SECTION D: APPLICATION COMPLETED AND SIGNED OFF BY CLIENT

Document Completed By

Signoff Date