

# 2024-2025 Kaiser HRA Plan Summary Huneeus Vintners

# **Plan Effective Dates**

August 1, 2024 – July 31, 2025. Health Reimbursement Arrangement (HRA) funding is refreshed annually on January 1 in accordance with accumulation period of the Kaiser group medical plan.

#### **Benefits Provided**

Your Health Reimbursement Arrangement (HRA) is a benefit account established and funded by Huneeus Vintners. Your HRA will reimburse you for services covered by your Kaiser group medical plan.

# **Excluded Services**

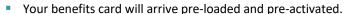
Your HRA plan specifically excludes coverage for any services not covered by the existing Kaiser group medical plan. Dental services, chiropractic services and over-the-counter medications are not reimbursable by your HRA plan. While your Kaiser group medical plan covers routine eye exams with a Kaiser plan optometrist at no cost, additional vision benefits, such as frames, lenses, contact lenses/fittings, and other optical services are not reimbursable by your HRA plan. Prescription drugs must be filled through a Kaiser approved pharmacy to be eligible for reimbursement from your HRA plan.

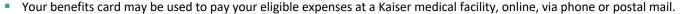
## **Maximum Calendar Year HRA Benefit**

Employee Only \$3,090 Family \$8,240

## Marin Benefits HRA Benefit Card

You will receive a benefits debit card linked to your HRA. You may use this card to pay for qualified Kaiser group medical plan expenses incurred by you or your eligible dependents. Please note the following for your benefit card:





- Your benefits card may be used at the Kaiser pharmacy for eligible prescription drug expenses and/or to pay for your eligible Kaiser mail order prescriptions. Over-the-counter medications are not a covered benefit even when prescribed by a physician.
- Your benefits card does not have a PIN and should be used just like a credit card. Select the credit option to sign your purchase receipt at the sales terminal. If you are prompted to provide a billing zipcode please use your home zipcode.
- Always save your receipts as Marin Benefits may contact you to substantiate debit card charges.
- Please save your benefit card for use next year. HRA funding will be refreshed on your existing card annually.

## **Online Member Portal**

Please visit <u>marinbenefits.com</u> for secure online resources to help you take an active role in managing your HRA Plan. Please click "Register" and follow the prompts using the following credentials:

Employer ID MBIHV

**Employee ID** Nine-digit employee Social Security Number with no spaces or dashes [e.g., 123456789]

## **How to Submit an HRA Claim**

If for any reason you do not use your benefits card, you may submit a claim to be reimbursed from your HRA. Claims may be submitted securely online in the Member Portal or by submitting an HRA Claim Reimbursement Form. Get your HRA reimbursement faster when you enroll for Direct Deposit in the Member Portal or by submitting a Direct Deposit Form with your claim. All forms and instructions are available at <a href="mainbenefits.com/forms">marinbenefits.com/forms</a>. Claims must be filed within ninety (90) days of the end of the calendar year in which services are incurred to be eligible for reimbursement.

#### **HRA Refunds**

If you have used your HRA or benefits card to pay for an expense that is later reimbursed or refunded by your provider, IRS regulations require you to pay the amount back to your HRA. Please contact Marin Benefits with any questions about how to return provider refunds back to your HRA.

# **Questions?**

Please contact Marin Benefits at 415-526-1401 or <a href="mailto:support@marinbenefits.com">support@marinbenefits.com</a> for questions regarding your HRA benefits.

## **Marin Benefits Administrators**

Mailing Address: 6366 Commerce Blvd #293, Rohnert Park, CA 94928

Email Support: support@marinbenefits.com

Customer Service: 415-526-1401 Website: marinbenefits.com

