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VEBA HRA Enrollment Guide



Congratulations on Opening a VEBA

Voluntary Employees' Beneficiary Association

The VEBA is a great benefit! Your employer deposits funds into a VEBA account, which is a tax-exempt irrevocable trust arrangement. It's paired with a Health Reimbursement Arrangement (HRA) which allows you to use the VEBA funds for current or future out-of-pocket health-related expenses. The VEBA HRA doesn't replace your group health insurance plan; **it works with your plan to provide additional coverage options.**



Did you know that VEBA assets are protected from creditors?



Active Employees

Use money in your VEBA HRA to pay health plan deductibles, co-pays and coinsurance as well as prescription drugs and certain insurance premiums. Don't worry. If you don't spend all of the funds in your VEBA HRA by the end of the year, your balance will simply roll into the next year. You'll accumulate funds over time which means you'll have money to pay for health expenses when you retire.



Post-retirement

Your employer can contribute funds to help you, your spouse and eligible dependents pay for medical expenses even after your retirement. That's pretty generous! Use your post-retirement VEBA funds to pay for certain medical premiums and long-term care premiums. Your employer can choose to make contributions throughout your working life or convert accumulated unused sick time, vacation, severance money, or other longevity-based benefits.



Tax Advantages

VEBA is a tax-advantaged account so you aren't taxed on your employer's contributions to it. Plus, your VEBA accrues interest that grows on a tax-free basis. Since VEBAs have to be used for eligible medical expenses, your distributions are tax free, too. **Money goes in tax free, is invested tax free, and comes out tax free.**



Full Coverage

All medical expenses defined under IRS Code Section 213(d) are eligible under your VEBA HRA including:

- Co-pays, prescriptions, and deductibles
- Dental, medical, and vision services
- Medicare Part B and D
- Medical supplies and equipment

	No VEBA	VEBA
Initial Deposit	+\$25,000	+\$25,000
Federal Income Tax (appx. 25%)	-\$6,250	-\$0
FICA Tax (appx. 7.65%)	-\$1,912	\$0
Amount you get	\$16,838	\$25,000

A Few Guidelines

- VEBA is an acronym for Voluntary Employees' Beneficiary Association. It is a type of trust used to hold plan assets for the purpose of providing employee benefits. VEBAs are authorized by Internal Revenue Code § 501(c)(9).
- A VEBA may only be funded with employer dollars; employees may not contribute.
- You may use funds in the VEBA HRA to pay for eligible medical expenses now or in retirement.
- Unused funds roll over from year to year.
- You have the option to invest all or a portion of your unused funds in the market which is a great way to save for retirement.
- Funds in the accounts continue to grow until claims are processed and funds are withdrawn.
- You may submit claims for reimbursements one of four ways: Online, Mobile App, Fax, or US Mail. You may also access your funds with the Benefit Card which works just like a credit or debit card.
- You'll need to submit an insurance Explanation of Benefits (EOB) or itemized statement with a claim form to get reimbursed for eligible expenses. You may also opt in to the BPAS ClaimFinder to connect your insurance accounts and auto-substantiate your claims electronically.
- To ensure IRS compliance, 100% of claim requests are substantiated.

- We issue payments to you for eligible expenses either through direct deposit or with a manual check.
- The IRS requires the VEBA HRA to be integrated with a group health plan. It may not be offered to employees, or spouses and/or dependents without group health coverage. To comply with this IRS rule, you'll need to verify that your spouse and/or eligible dependents are covered under an employer-sponsored health plan before submitting claims on their behalf. Their employer-sponsored health plan may be with your employer or with their employer.

Throughout this guide, you'll find information about some of the key services and features to help maximize the benefits of your VEBA HRA. Feel free to reach out to us anytime you have questions or concerns. We're here to help.

We Have Your Back

Your VEBA HRA is administered by BPAS, a national provider of retirement plan and fund administration, transfer agency, collective investment fund, and other institutional trust services. We specialize in VEBA HRAs. With our breadth of services, depth of creative talent, and financial resources, we are well positioned to help solve your benefit plan challenges without the need to engage multiple providers. **One company. One call.** We're delighted to have you as a customer. We'll do everything we can to provide you with the best service in the industry and help ensure your experience with us is always positive.



Online Services

With BPAS, you'll find all of the tools to manage your account with the simple click of a mouse, like:

- Account balance
- Investment elections/ reallocate account balance
- Interactive banner messaging
- Fund fact sheets and prospectuses
- Online statements with statement on-demand capabilities
- Online claim submission
- Claims status and history
- Plan documents
- Pertinent forms
- Educational materials
- Legislative information
- More

The Benefit Card

Because you're enrolled in the VEBA HRA, you'll receive the BPAS Benefit Card at no cost. **It's a quick and easy way to access your VEBA HRA funds.**

It works just like a credit or debit card. When you use it at the doctor's office or pharmacy, funds are automatically pulled from your VEBA HRA and paid directly to the healthcare provider. No more writing checks or paying cash.

Use your Benefit Card for qualified health-care expenses, like:

- Prescription drug co-pays
- Health plan deductibles
- Office visit co-pays
- Coinsurance
- Lasik surgery
- Eyeglasses/contact lenses
- Dental and vision services

Pay off your health care bills with the card too. Simply write the Benefit Card number on your statement for services you received in the plan year and send it to your health care provider. Then, send us a copy of the itemized bill from your provider or insurance carrier. (Sorry, it's an IRS requirement.)



A Few Details and Tips

- **It's in the mail.** About two weeks after enrollment, you'll receive two Benefit Cards in a white envelope marked "do not throw away." If a family member throws away the cards mistaking them for a credit card solicitation, we will have to charge a **\$5 VISA replacement fee** for new cards.
- **Available Balance.** VEBA's are subject to fluctuations in market investments. You may spend up to 90% of your balance with the Benefit Card so you don't risk overdrawing the account. If an expense is more than your remaining balance, the card will be declined. If you need to access more than 90% of your VEBA, just complete a claim form and submit it to us online, through our free mobile app, fax, or mail. Visit bpas.com for more details on filing claims.
- **Making a Purchase.** Check your account balance before making a purchase so you can split the cost if you'll be short. Use the card for the exact amount in your account, then pay the remaining amount separately.
- **Three Words: Keep Your Receipts.** The IRS requires you to use the card only for eligible expenses under the VEBA HRA. The card is "merchant coded" so it won't work at gas stations or restaurants. There may be times we'll need to see a receipt to verify an expense. If you receive a receipt request, be sure to submit it as soon as possible to avoid having your card suspended.



What's an itemized receipt? According to IRS rules, an itemized receipt must include the merchant or provider name, description of services received or item purchased, date of service, and amount charged. Canceled checks, handwritten receipts, card transaction receipts, or previous balance statements aren't considered itemized receipts.

The Benefit Card Makes VEBA HRAs So Easy!

- It's **automatic**—funds are automatically sent from your VEBA HRA to the provider.
- It's **instant**. One swipe and you're done!
- It's **easy**. Most expenses auto-approve so you don't need to follow up with documentation. (Keep your receipts because there may be expenses the IRS will require us to document.)
- It **saves you money!** No need to pay cash at the time of purchase or wait for reimbursement checks.
- It's in **real time** so you'll always know your balance. Check your balance often at bpas.com or on your smart phone or tablet.



What's Covered

Maximize the Value of Your Reimbursement Account - Your VEBA HRA dollars can be used for a variety of out-of-pocket health care expenses. Please note: premiums for individual health insurance premiums are not covered expenses under the VEBA HRA. The following list is based on eligible and ineligible expenses used by Federal employees.

Eligible Expenses

BABY/CHILD TO AGE 13

- Lactation Consultant*
- Lead-Based Paint Removal
- Special Formula*
- Tuition: Special School/Teacher for Disability or Learning Disability*
- Well Baby /Well Child Care
- Baby Electrolytes and Dehydration
- Pedialyte, Enfalyte

DENTAL

- Dental X-Rays
- Dentures and Bridges
- Exams and Teeth Cleaning
- Extractions and Fillings
- Oral Surgery
- Orthodontia
- Periodontal Services

EYES

- Eye Exams
- Eyeglasses and Contact Lenses
- Laser Eye Surgeries
- Prescription Sunglasses
- Radial Keratotomy

HEARING

- Hearing Aids and Batteries
- Hearing Exams

LAB EXAMS/TESTS

- Blood Tests and Metabolism Tests
- Body Scans
- Cardiograms
- Laboratory Fees
- X-Rays

MEDICAL EQUIPMENT/SUPPLIES

- Air Purification Equipment*
- Arches and Orthotic Inserts
- Contraceptive Devices
- Crutches, Walkers, Wheel Chairs
- Exercise Equipment*
- Hospital Beds*
- Mattresses*
- Medic-Alert Bracelet or Necklace
- Nebulizers
- Orthopedic Shoes*
- Oxygen*
- Post-Mastectomy Clothing
- Prosthetics
- Syringes
- Wigs*

MEDICAL PROCEDURES/SERVICES

- Acupuncture
- Alcohol and Drug/Substance Abuse
(inpatient and outpatient care)
- Ambulance
- Fertility Enhancement and Treatment
- Hair Loss Treatment*
- Hospital Services
- Immunization
- In Vitro Fertilization
- Physical Examination *(not employment related)*
- Reconstructive Surgery *(due to a congenital defect, accident, or medical treatment)*
- Service Animals
- Sterilization/Sterilization Reversal
- Transplants *(including organ donor transportation)**

MEDICATIONS

- Insulin
- Prescription Drugs

OBSTETRICS

- Breast Pumps and Lactation Supplies
- Lamaze Class
- OB/GYN Exams
- OB/GYN Prepaid Maternity Fees
(reimbursable after date of birth)
- Pre- and Post-natal Treatments

PRACTITIONERS

- Allergist
- Chiropractor
- Christian-Science Practitioner
- Dermatologist
- Homeopath
- Naturopath*
- Optometrist
- Osteopath
- Physician
- Psychiatrist or Psychologist

THERAPY

- Alcohol and Drug Addiction
- Counseling *(not marital or career)*
- Exercise Programs*
- Hypnosis
- Massage*
- Occupational
- Physical
- Smoking Cessation Programs*
- Speech
- Weight Loss Programs*

Ineligible Expenses

- Contact Lens or Eyeglass Insurance
- Cosmetic Surgery/Procedures
- Marriage or Career Counseling
- Lotions and Creams
- Electrolysis
- Personal Trainers

The IRS does not allow Over-the-Counter (OTC) medicines or drugs to be purchased under your VEBA HRA unless accompanied by a prescription and the prescription is filled by a pharmacist.

Note: This list is not all-inclusive; other expenses not specifically mentioned may also qualify. Also, expenses marked with an asterisk () are "potentially eligible expenses" that require a Note of Medical Necessity from your health care provider to qualify for reimbursement. Please visit [irs.gov/publications/p502/](https://www.irs.gov/publications/p502/) for a full list of eligible and ineligible expenses. Publication 502 should be used as a reference guide only.*

Online Account Access

With your VEBA HRA, you'll have access to online investment information and claims information at the click of a mouse. To get started with your online services, follow the easy steps below.

1. At **bpas.com**, choose the **Participants** tab.
2. Under the **Sign into Your Account** box, choose **VEBA** for your account type.
3. Enter your User ID which is your Social Security Number (SSN) without dashes.
4. Enter your temporary password which is your date of birth (mmddyyyy).
5. Click Login. Once you login, the system will prompt you to create a new Username, Password, and a security question/answer for verification.

The screenshot shows the BPAS website interface. At the top, there are navigation links for "Who We Are", "Careers", and "Español". Below that, there are tabs for "PARTICIPANTS", "EMPLOYERS / SPONSORS", and "FINANCIAL PARTNERS". A search bar is also present. The main content area features a large "PARTICIPANTS" heading and a "Sign In to Your Account" box with a "Select Account Type" dropdown and a "LOGIN" button. Below this is a "Participant Login" form with fields for "User ID" (containing "splayman") and "Password" (containing "*****"). A "Forgot Username/Password?" link is also visible. The bottom of the page includes sections for "Tools & Resources for Participants", "Benefit Plan Education", and "BPAS Mobile Apps".



Easy Online Investment Elections and Allocations

After logging into your account, select **Fund Election Change** from the Transactions tab. You'll see a list of investment options offered within your Plan. Simply enter your new desired percentage(s) next to each fund and click the Change Elections button. Be sure the total adds up to 100%. It's that easy!

Want to change the way your existing balance is allocated to match your new investment elections? Just select **Rebalance** from the **Transactions** tab and check the option for "Rebalance to match your current investment election percentages for future contributions."

The screenshot shows the BPAS online account dashboard. At the top, there are navigation tabs for "Account Summary", "Transactions", "Account History", "Fund Information", "Personal Information", "Resource Center", and "Account Maintenance". The main content area displays the "Account Summary" tab, showing a "Total Invested Balance" of \$8,102.74 and a "Total HRA Balance" of \$5,492.46. Below this are sections for "Your Current Balance Mix" and "Your Current Investment Elections". The "Your Current Balance Mix" section shows a pie chart and a table with columns for "Balanced/Target", "Fixed/Value", "Equity", and "Bonds". The "Your Current Investment Elections" section shows a pie chart and a table with columns for "Balanced/Target", "Fixed/Value", "Equity", and "Bonds". Other sections include "Account Breakdown", "Balance History Chart", "Rate of Return", "Participant Education Center", "Calculators", and "Fund Research Library". At the bottom, there is a "Market Dashboard" showing a "Nasdaq Composite" index of 4262.14, down 146.41 (-3.25%).

Accessing Online Balance Information

The home page displays your current account balance. The Total Account Balance is the balance of your VEBA investment account. (The HRA Amount Available is 90% of your VEBA balance less any pending debit card authorizations and is the amount immediately available for reimbursement on your debit card.) You may also view your account balance by choosing the following options from the Account Summary tab:

- Fund Totals. Your account balance is displayed by investment fund.
- Source Totals. Your account balance is displayed by money source.
- Fund Detail. Your account balance is displayed by investment fund and money source within each fund.
- Source Detail. Your account balance is displayed by money source and investment fund within each money source.

From here, you'll find everything you need to view your account balance, update your personal information, and more.

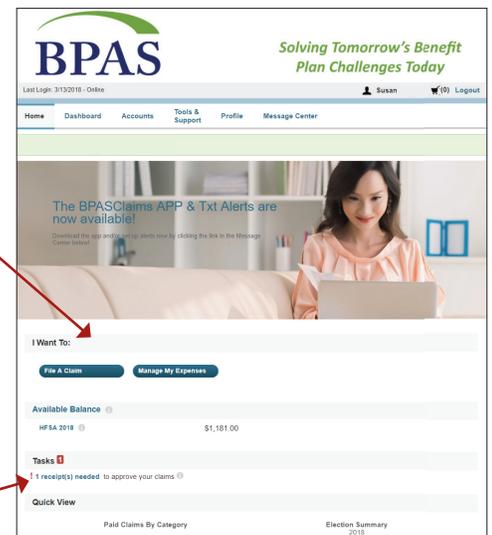
Remember to update your email address! It's the fastest, easiest way to keep your account secure. We'll notify you immediately via email of any account activity. Don't worry, we don't send any solicitation emails.

Fast and Easy Online Claims

After logging into your account, select the **Account Summary** tab and choose BPASClaims from the drop down menu.

- On the Claims Home Page, simply select the **“I Want To... File a Claim”** button.
- Follow along with the Reimbursement Request Wizard, then upload documentation.
- Repeat this process until all claims have been added. Read and agree to the Terms & Conditions and click **Submit**.
- The **Transaction Confirmation** page will display. You may print the claim confirmation page as a record of your submission.

NOTE: If you see a **Receipts Needed** link in the **Tasks** section of your Home Page, click on it to see a listing of any claims that require receipts or documentation.



Add Dependents

IRS guidelines prevent us from paying for services to dependents not listed in your profile. To add/remove dependents:

- Select BPASClaims from the Account Summary tab on the Home page
- Select Access Reimbursement Account
- Select the profile link. You'll be able to edit dependent data by clicking the view/update link under the dependent name or select Add Dependent to enter a new dependent to your plan. (You'll need a Social Security Number for each dependent to request reimbursements under your VEBA.)



Did you know you can set up recurring claims?

File a claim just once and get reimbursements all year long! Just check the box for “Set up a recurring claim for this expense” when completing your claim form.

BPAS Mobile App Anywhere. Anytime.



Check your account balance, file claims, and even upload receipts using the camera on your phone. Download the free BPAS mobile app by searching BPASClaims from the app store or marketplace.

To activate the app, you'll need a unique username and password.

- Your username is your first initial, last name, and last 4 digits of your Social Security Number (SSN).
- Your temporary password is your first name, the 2-letter abbreviation for the state you live in, and the last 5 digits of your SSN.

You'll then be prompted to create a new password and 4-digit PIN. The 4-digit PIN is all you'll need going forward.



BPAS ClaimFinder. Get reimbursed faster, without paperwork!

BPAS ClaimFinder automatically collects receipts (substantiation) for your HRA claims. Just connect your insurance accounts with BPAS ClaimFinder and we'll autosubstantiate your claims. No need to upload receipts—we'll do it for you! We'll send you an email with a link to setup BPAS ClaimFinder after you complete your enrollment. Fast and easy.

A Few Common Questions

How do I view my claims history and status?

On the Home Page of the BPASClaims portal, click on **Available Balance** and then select the claim amount in the **Submitted Claims** column for the applicable account for which you would like to view claims history.



How do I view my payment (reimbursement) history?

1. On the Home Page of the BPASClaims portal under the Accounts tab, click **Payments**. From the menu of options on the left, you will see reimbursement payments made to date, including debit card transactions.
2. Click anywhere on the claim to see claim details.

How do I report a debit card missing and/or request a new card?

1. On the Home Page of the BPASClaims portal, under the Profile tab, click Debit Cards on the drop-down menu.
2. Under the Actions column on the Debit Cards form, click Report Lost/Stolen or Order Replacement.

How do I get my reimbursement quickly?

The fastest way to get your money is to sign up for direct deposit to your personal checking account. To sign up online:

1. On the Home Page of the BPASClaims portal, click on the **Accounts** tab, then choose **Change Payment Method** from the menu on the left.
2. Under the Current Payment Method, select **Update**. Then simply add or update your bank account information and click Submit. You may also access/update your banking information under the Banking/Cards menu item on the left.
3. The Payment Method Changed confirmation displays.

How do I obtain information on the plan's fund options?

The participant website has a wealth of information about the investments available in your Plan. From the **Fund Information** tab, select:

- **Fund Links.** Each investment option is displayed with the ability to view:
 - Historical prices
 - Fund fact sheets
 - Prospectus
 - Additional research
- **Fund Performance.** This option provides the performance for each fund offering in the plan. You may view each **fund's prospectus by clicking the P next to the fund name**. You may view an **online chart by clicking the C next to the fund name**. Anytime you see a fund name **underlined in blue** text, you can click on it to view performance information, expense ratios, and links to the fund fact sheet and prospectus.



What does it mean if funds in the plan have trading restrictions?

Many mutual fund companies have introduced trading restrictions to discourage short-term trading. When requesting a change to the allocation of your current account balance, the website will indicate which funds impose a trading restriction. If you have recently submitted a transfer or rebalance request that resulted in a trading restriction, the fund that is temporarily restricted from future transfers will appear in red, reflecting the number of days remaining before a subsequent trade (or opposite way transfer request) can be made. If you have a pending trading restriction in one or more funds, you may still transfer other portions of your account by using the Fund-to-Fund Transfer option.

How do I change the way my account balance is invested?

The Transaction tab contains two methods for you to change the investment of your current account balance:

- **Fund-to-Fund Transfers.** This option allows you to transfer money from one investment option to another. Click the arrow next to the transfer option you desire (transferring out a dollar amount or a percentage). Select the fund from the drop-down menu that you wish to transfer money out of, and then indicate the percent or dollar amount you want to transfer. Now, enter the percentage(s) among the new funds(s) for which you wish to transfer; total must add up to 100%. Click Submit Transfer to verify your request, and Confirm. Please Note: This change will only affect the way your current account balance is invested; it will not change how future contributions are invested in your account.
- **Rebalance** allows you to a) Provide specific percentages for each asset; or b) Rebalance to match your current investment election percentages for future contributions.

Click the radio dial next to the rebalancing method you choose. If you elect to rebalance by providing specific percentages for each asset, enter your new desired percentages next to each fund in the table below. The total must add up to 100%.

If you choose to rebalance to match your current investment election percentages, those percentages will automatically be entered into the "Change To" column in the table.

If you'd like your existing account balance to be automatically rebalanced to these percentages, scroll down and click the box next to Automatically Rebalance My Account. Then click the radio dial next to the frequency in which you would like your account to be automatically rebalanced and click Submit Automated Rebalance to confirm your request. Note: Using the account rebalancing option will trigger a new set of trading restrictions initially, and whenever your account is rebalanced. As a result, some participants choose to use annual rebalancing rather than quarterly.

How do I receive copies of prior participant statements?

Statements will be mailed to your home address quarterly. To get a copy, select the Resource Center tab. Statements are organized by plan year under the Quarterly Benefit Statements section.

Can I choose to get my statements and notices electronically?

Yes, in fact we encourage it! To “Go Green,” choose the **Account Maintenance** tab, then choose **Preferences**. You may then choose your Go Green options.

How do I reach the BPAS for additional assistance?

Call our highly-trained US-based Customer Service team at 1-866-401-5272 anytime Monday through Friday from 8 am to 8 pm ET. You may also access the automated voice response line 24 hours a day, 7 days a week. Just dial 1-800-530-1272. When prompted, enter your Social Security Number and Personal Identification Number (PIN). Initially, your PIN is the last 4 digits of your Social Security Number. We strongly urge you to change the assigned PIN as soon as possible.

What if I forget my PIN?

You may request a new PIN through the system. Call 1-800-530-1272 and enter your Social Security Number. The system will ask you if you have lost or forgotten your PIN. Your new assigned PIN will be sent to you in a confidential letter. You won't be able to access the system until you receive your new PIN (approximately 5 business days). If you don't enter a correct PIN within 4 tries, your account will be locked.

Why do I need receipts for things I buy with the Benefit Card?

There will be times when we'll require a receipt to comply with the IRS guidelines. It's best to send an itemized statement or Explanation of Benefits (EOB) from your insurance carrier so we can verify the service you received complies with IRS rules.

Sometimes the bill from your doctor or dentist doesn't provide enough information to show that the services are eligible for reimbursement. In such cases, we'll need to see an itemized receipt. For example, if you use the benefit card at the dentist, was it for a cleaning, which is eligible; or for teeth whitening, which is ineligible? If it's unclear, we'll send you a receipt request. We'll send out three notices asking for receipts. If we don't receive the receipt/documentation, we'll have to temporarily deactivate your Benefit Card until we receive the information required by the IRS.

Why do I need to sign a release for you to speak with my spouse or family member?

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) was created to protect your health information and safeguard individually identifiable information, called protected health information or PHI. Under HIPAA, we can only discuss PHI with the individual patient and/or primary plan member unless you authorize us in writing to share the information with someone else, like your spouse. So, even if you tell us it's OK to share PHI with your spouse, we can't legally discuss any information with him/her unless you sign the authorization. For your convenience, you may find an authorization in this enrollment kit and at bpas.com.

How do I setup BPAS ClaimFinder?

Your data is encrypted with BPAS ClaimFinder allowing your information to remain secure, unalterable, and completely confidential. Watch your inbox for an email from Easy-Enroll. To get started:

1. Have your insurance company credentials at your fingertips (user ID, password).
2. Open the email from Easy-Enrollment and complete the registration using the on-screen instructions
3. We'll take care of the rest--every time a carrier issues an EOB, we'll retrieve the information automatically for you.



Have other questions? Give us a call. 1-866-401-5272



Information Release Authorization

When completed, mail or fax this form to BPAS at:
820 Gessner, Suite 1250, Houston, Texas 77024
Fax: (866) 254-2942 | bpas.com



This form allows BPAS to release information related to your reimbursement account to the specific person(s) designated on this form (such as a spouse, family member, someone else closely involved in your medical care or an unrelated third party). Completion of this form will allow BPAS to communicate with such individual(s) who may contact us on your behalf. Related information includes account balance, payment amounts, date paid, and information specific to receipts received. The designated person(s) will be required to provide specific identifying information and should indicate there is a signed authorization form on file.

Questions? Call us toll free at 1-866-401-5272

1. PARTICIPANT INFORMATION

LAST NAME	FIRST NAME	MI	Participant Social Security No. (SSN) or Secondary ID # (REQUIRED)	
MAILING ADDRESS	<input type="checkbox"/> Check here if new address	CITY	STATE	ZIP
DATE OF BIRTH	E-MAIL ADDRESS (home or personal recommended) <input type="checkbox"/> Check here if new email address	AREA CODE and PHONE #		
EMPLOYER NAME				

2. DESIGNEE INFORMATION

FIRST DESIGNEE: LAST NAME	FIRST NAME	MI		
MAILING ADDRESS		CITY	STATE	ZIP
DATE OF BIRTH	Relationship	AREA CODE and PHONE #		
SECOND DESIGNEE: LAST NAME	FIRST NAME	MI		
MAILING ADDRESS		CITY	STATE	ZIP
DATE OF BIRTH	RELATIONSHIP	AREA CODE and PHONE NUMBER		

3. SIGNATURE

I understand that this voluntary authorization will stay on file and will not expire until I send a written request to revoke this authorization to the address or fax number above. I understand that I may revoke this authorization at any time by notifying BPAS in writing. BPAS may take action in reliance on this authorization prior to receipt of my written revocation of this authorization. Therefore, I understand that changes will not be considered applicable before BPAS receives the revocation.

Participant Signature

Date



VEBA Health Reimbursement Arrangement (HRA) Request for Reimbursement

Mail, fax or upload completed form and receipts to BPAS at: 820 Gessner Road, Suite 1250, Houston, Texas 77024 Fax: (866) 254-2942 | www.bpas.com



Did you know you can skip the paperwork and request reimbursement online? Just login to your account at bpas.com. **It's fast and easy!**

Need help? Call us toll free at 1-866-401-5272

1. PARTICIPANT INFORMATION

LAST NAME	FIRST NAME	MI	Participant Social Security No. (SSN) or Secondary ID # (REQUIRED)	
MAILING ADDRESS	<input type="checkbox"/> Check here if new address	CITY	STATE	ZIP
DATE OF BIRTH	E-MAIL ADDRESS (home or personal recommended)	<input type="checkbox"/> Check here if new email address	AREA CODE and PHONE #	
EMPLOYER NAME				

2. PATIENT (COVERED INDIVIDUAL) INFORMATION (REQUIRED)

NOTE: Section 111 of the Medicare, Medicaid and SCHIP Extension Act of 2007 (MMSEA) requires HRA and MERP Plans to report specific information about Medicare beneficiaries covered under these types of plans. Your claim will be automatically denied if you do not fully complete this section.

A. This claim is for:

- Myself Spouse Qualifying Child
 Qualifying Relative Other: _____

C. Are you separated or retired from the employer that made, or is making contributions to this account?

- No
 Yes, my date of separation or retirement was: _____

B. Complete this section if claim is for a covered individual other than yourself:

First Name	MI	Last Name
Date of Birth (mm/dd/yyyy)	Gender	SSN

D. Is the covered individual for this claim currently, or have they ever been enrolled in Medicare Part A or Part B? No Yes (complete the following)

Name (exactly as it appears on SSN or Medicare Card)	Medicare Claim No. (HCIN)
Medicare Part A Effective Date (if applicable)	Medicare Part B Effective Date (if applicable)

3. EXPENSES

The expense(s) listed below are for: Reimbursement Debit Card Substantiation Only

Date(s) Service Received	Services Provided By	Description of Service(s) Received (e.g., deductible, co-pay, out-of-pocket, prescription (RX), dental/ortho, vision, insurance premium, etc.)	Recurring Expense	Amount
			<input type="checkbox"/> No <input type="checkbox"/> Yes	\$
			<input type="checkbox"/> No <input type="checkbox"/> Yes	\$
			<input type="checkbox"/> No <input type="checkbox"/> Yes	\$
TOTAL for this covered individual				\$

4. PARTICIPANT SIGNATURE

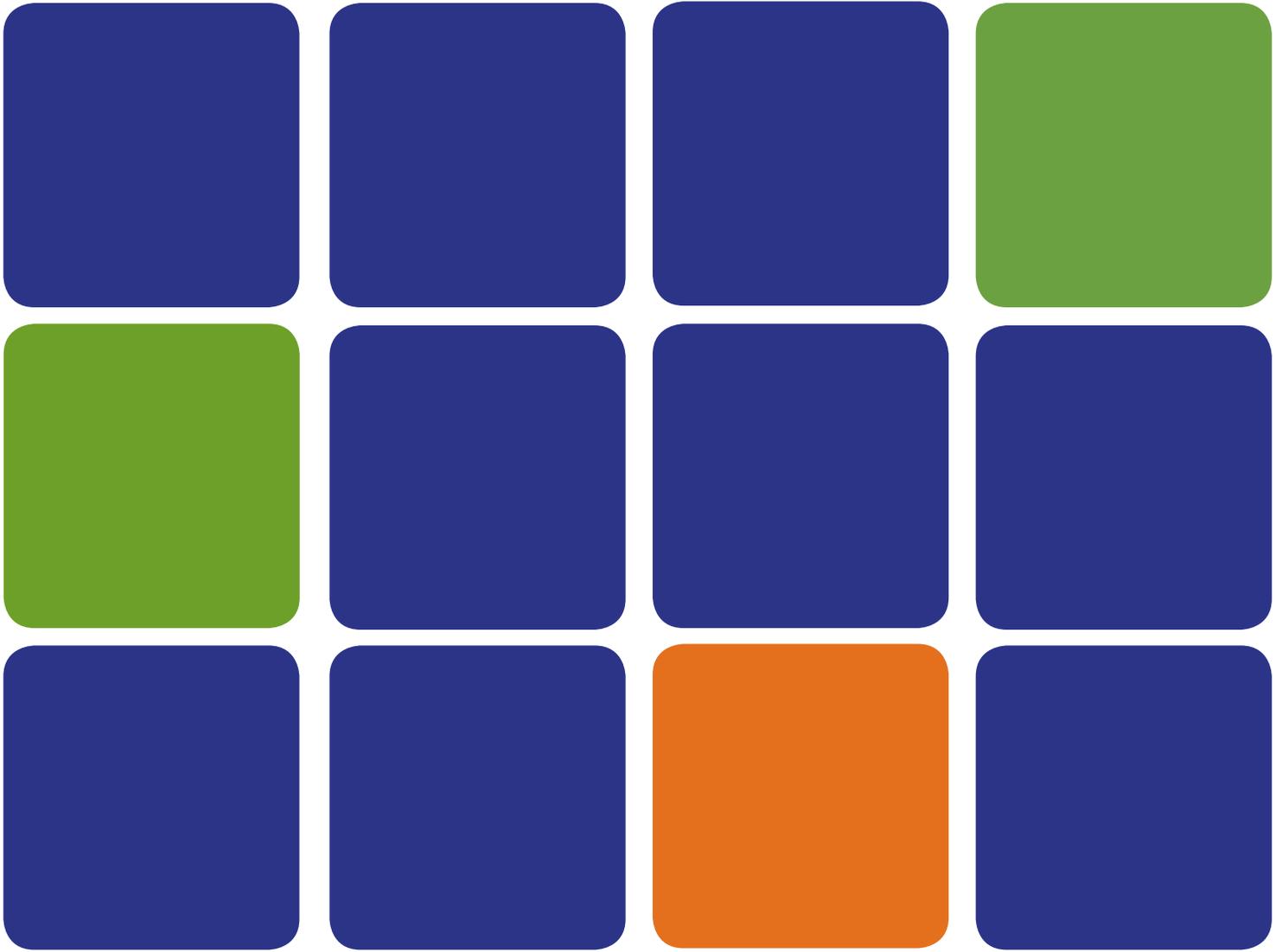
I hereby certify that the information provided in this claim request is true and correct and the submitted claim is not reimbursable from any other source. Spouse/Dependent(s) must be covered under a group health policy in compliance with the ACA Reform in order to be claims eligible.



REMEMBER: You must include an itemized receipt for each expense! If your plan permits for reimbursement of Individual Premium expenses and this claim is for a recurring reimbursement of such expense, you must include a copy of the schedule/declaration page from your insurance company with this form.

X _____
Participant Signature

Date



Questions? Let's Talk.

 866-401-5272

 bpas.com

