

# Introducing the Medical Expense Reimbursement Plan ("MERP") as part of your benefits package.

The MERP offers associates who have access to alternate group medical and prescription drug coverage through their spouse, **100% coverage with \$0 out of pocket**. You will be reimbursed for ALL eligible co-pays, co-insurance and deductibles incurred through your alternate medical plan up to the maximum out of pocket limits under the Affordable Care Act (\$9,450/single and \$18,900/family per year).

No premium contribution will be deducted from your paycheck.

PLUS, your employer will reimburse you for the premium contribution paid for the alternate coverage if it exceeds the premium contribution, you would have paid to remain on your employer's medical plan up to a maximum of \$300/single and \$600/associate + children. If your spouse is currently enrolled in his/her medical plan, you will be reimbursed for any increase in premium to add you and/or your dependents up to the above monthly maximums. If the cost of alternate coverage is less than what the associate would have paid for your Employer medical plan, premium contribution reimbursement is \$0.

### **Eligibility**

- ► Current associates: must be enrolled in their employer's medical plan to join MERP at open enrollment or a qualifying life event.
- ▶ New associates must satisfy your employer's benefit eligibility requirements.
- Qualifying event or newly eligible: marriage, birth of child, part time to full time, etc.
- Associates currently enrolled in the MERP: If you are already enrolled in the MERP, you must submit a new Attestation form and updated premium contribution information for your alternate coverage each year.

# **Opportunities for Enrollment**

- Your annual open enrollment window
- Qualifying event: marriage, spouse's change in employment status, birth of child, part time to full time, etc.
- Spouse's annual open enrollment window
- New associates: may enroll during their new hire enrollment period.

#### **Enrollment**

- ▶ Enroll in alternate coverage and waive coverage on your employer's medical plan.
- Complete the MERP enrollment form.
- Complete the Attestation form.
- Provide proof of premium contribution paid for alternate coverage.





## **IRS Rules**

- You may be enrolled in an HRA or FSA. You CANNOT be reimbursed from both the MERP and your HRA or FSA.
- Associates are NOT eligible for the MERP if their alternate coverage is:
  - A High Deductible Health Plan (HDHP) with active contributions to a health savings account (HSA); however, it is acceptable alternate coverage if contributions can be waived. A spouse who is not enrolled in the MERP may contribute to an HSA and use the HSA funds. The HSA funds CANNOT be used for medical expenses for members enrolled in the MERP.
  - Medicare, Tricare, VA health care or Medicaid
  - Healthcare Exchange Policy made available thru the Affordable Care Act
  - Individual policy or Limited Benefit Health Plan

## **Premium Contribution Reimbursements Proof Required**

- Paystub showing premium contribution amount, pre-tax or post-tax, frequency (other pay information may be blacked out)
- ▶ If the entire family is not enrolling in the MERP, then you must provide the tiers of coverage indicating the cost for each tier.

#### **Claims**

- How do I use the MERP ID Card?
  - First, present your alternate coverage ID card.
  - Then, present your MERP ID card. Let the provider know that the MERP will pay the provider directly for eligible co-pays, co-insurance, and deductibles.
  - You pay nothing; your provider may file the claim with both your alternate coverage and with the MERP.
- ▶ Electronic Claims:
  - To claim reimbursement under the plan electronically, go to portal.catilize.com
  - Here you will simply need to upload the required documentation:
    - Co-pay, co-insurance or deductible: Explanation of Benefits (EOB) from alternate coverage
    - Prescriptions: "Tab" from pharmacy that includes name of drug, date filled, patient's name and patient responsibility amount
- Paper Claims:
  - Send completed and signed claim form to Catilize Health with the required documentation



