# Get Your HRA Details Online

Log in to *My Plan* to access your Health Reimbursement Arrangement (HRA) account details in one secure location.

**1** Go to **hpiTPA.com** or visit the website listed on the back of your member ID card (it will be at the top)

2 Log into My Plan

Click View My HRA under My Health Reimbursement Account

### Your HRA account details:

View your account summary	Display the account details for the selected Plan Year:						
	Group Number: 006AV2	2					
Displays your annual election amount, your	Transactions may take u	p to three (3) business da	ys to appear in your online as	count.			
year-to-date contributions, year-to-date				Account(s) Summary	Contributions	Payments Claims	
payments and your current available balance.	Account(s) Summ	ary		2	u		
	Plan Type	Election Amt	YTD Contribution	Paid Amt	Available Bala	ince	
	FSA Medical	\$750.00	\$317.35	\$333.35	\$416.65		
Track contributions	S/						
Tracks contribution dates and amounts.						19-11-00-00	
	Log out						

#### **Review Payments**

Here's how:

Displays the claim payments made from your account including details on the payment date and method. You can view additional details for each claim in the Payment Details box by selecting the claim line in the grid.

#### View Claims –

Displays claims paid from the account. It also displays the date of service and if any balance is remaining on the claim.

#### Export Contributions, Payments and Claims

Download details on your yearly contributions, payments and claims.

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an Year 2020	): July 1, 2020 - Jur	ne 30, 2021				
oun Numbe	r: 006AV2					
		10) have been been been been been been been be	P			
insactions m	hay take up to three	e (3) business days to app	ear in your online acco	ount.		
						Export Claims to Exc
			[	Account(s) Summary	Contributions	Payments Claim
Claims					н	······································
Plan Type	Prov	rider	Service Date	Claim Amt	Reimb Amt	Claim Balance
	dical SHA	WS OSCO 0629	07/05/20-07/05/20	\$26.12	\$26.12	\$0.00
⊞ FSA Me	dical SHA	W5 OSCO 0629	07/31/20-07/31/20	\$26.49	\$26.49	\$0.00
⊞ FSA Me	dical SHA	WS OSCO 0629	08/08/20-08/08/20	\$16.02	\$16.02	\$0.00
⊞ FSA Me	dical SHA	WS OSCO 0629	08/25/20-08/25/20	\$40.72	\$40.72	\$0.00
⊕ FSA Me	dical SHA	WS OSCO 0629	08/31/20-08/31/20	\$11.12	\$11.12	\$0.00
	dical SHA	WS OSCO 0629	09/03/20-09/03/20	\$30.00	\$30.00	\$0.00
⊞ FSA Me	dical SHA	WS OSCO 0629	09/21/20-09/21/20	\$70.00	\$70.00	\$0.00
⊕ FSA Me	dical SHA	WS OSCO 0629	10/05/20-10/05/20	\$30.70	\$30.70	\$0.00
E ESA Me	dical SHA	W5 O5CO 0629	10/28/20-10/28/20	\$33.34	\$33.34	\$0.00
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## Submit claims for reimbursement:

1 Go back to the FSA/HRA	Account Page	
Home Members Access	Health Spending Accounts FSA/HRA Account FSA/HRA	Detail
2 Click Enter HRA claims		
<b>3</b> Enter the following deta	ils, then review, confirm, and sub	omit
	Home > Members > Access Health Spending Accounts > FSA/HRAAccount > FS	A/HRA Enter Claim
Enter plan and account details •	Claim Detail * Required Fields Plan Year': 2020	Account Type*: FSA Medical
Enter information about your	Patient First Name*       Date of Service       From: (MM/DD/YYYY)*:	Patient Last Name* Through: (MM/DD/YYYY)*:
<ul> <li>Date of service</li> <li>Total amount</li> <li>Provider name</li> <li>Description of service</li> </ul>	Amount* Description*: Acupuncture Services	Provider* Please upload your supporting documentation here. If you are unable to do so at this time, please know that your request will be pending until we receive supporting documentation.
Upload supporting documents. Valid ,	Special Instructions:	Valid file formats: jpeg, tif, pdf. File size should not exceed 2MB.
Enter any special instructions or <b>notes about the request</b> .	Review and Confirm Save Current Claim& Add New Claim(s)	*
Click to review, confirm and submit	Cancel Claim > For Health Plans' Internal Use: Form #:	
	Log out >	



Have questions? Call the HPI FSA/HRA team at 877-734-7004 or visit hpiTPA.com and click Contact.

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