

Summary of Benefits and Coverage: What this Plan Covers

Coverage for: Single, Family | Plan Type: HRA



This is a general summary of HRA Plan Benefits. This summary can be used to explain the general benefits and coverage associated with an employer sponsored Health Reimbursement Arrangement (HRA) plan administered by MVP. For specific details about your employer's HRA plan, including reimbursement amounts and plan effective dates, please reference your member welcome letter provided by your employer.

Important Questions	Answers	Why this Matters:
What is an HRA plan?	A Health Reimbursement Arrangement (HRA) plan is an Internal Revenue Service (IRS)-sanctioned program sponsored by your employer that allows them to set aside funds to reimburse certain medical expenses paid by participating employees.	Almost every American incurs some medical expenses throughout the year that are not covered by insurance. An HRA plan is designed to reimburse employees for some of these expenses. The HRA plan is totally funded by the employer, often through an administrator.
What does the HRA plan cover?	Your HRA plan covers amounts for eligible expenses determined by your employer.	Your HRA will pay for your eligible expenses as long as there are funds available.
What do I do when I see a provider?	Always present your MVP Member ID card when accessing services. Your health care provider should bill MVP for any services. Please note that some providers require payment at the time of service. If you are required to pay and it exceeds the MVP allowable charge, your provider will be required to reimburse you directly. The provider will send the claim directly to MVP Health Care and MVP will process the claim to determine the allowable charge and apply it to your deductible. Your provider will bill you for your patient responsibility, which you can use your CareFund debit card to pay for.	You will be able to use your CareFund card to pay for eligible services from your HRA.

What are my HRA plan year effective dates?	HRA plan year effective dates typically mirror your health plan start and end dates.	Claims incurred during your HRA plan year are reimbursable at any time during the HRA plan year and though the runout period after the end of the HRA plan year.
What do I do when I go to a pharmacy?	Be sure to present your MVP Member ID card, as proof of coverage, AND pay with your MVP CareFund debit card for allowed expenses at the pharmacy. When you present your MVP CareFund debit card, any eligible prescription will be automatically withdrawn from your HRA.	You will receive the MVP negotiated discount and allow MVP to track expenses applied to your health plan.
How does coverage work?	You may use your HRA to pay for eligible services you incur.	Your HRA is available for use at the start of the plan year, without having to meet a member responsibility first.
What happens if I leave my employer?	HRA plans are subject to the same COBRA continuation of coverage rules as other employer sponsored group health plans. HRA COBRA premium will be communicated at the time of the qualifying event.	Employees have a right to choose to continue their HRA benefit on COBRA when coverage is lost due to a qualifying event. Coverage is extended only to those individuals covered at the time of termination and may only continue the same of coverage that was in effect prior to termination. Because the IRS considers an HRA plan an employer sponsored health plan, it is subject to COBRA. Your HRA plan is considered a bundled or integrated HRA plan, meaning it must be offered in conjunction with an approved health insurance plan and can't be offered as a standalone plan. This means that a former covered employee or dependent can only enroll in HRA COBRA if they elect health COBRA coverage. Premiums for HRA COBRA coverage are based on the employers cost of providing coverage.