

Plattsburgh CSD - Platinum Plan 2 Q & A

What is an HRA?

First, HRA is short for Health Reimbursement Arrangement. This is an account that your School District has set up for you to supplement your new healthcare coverage.

What does this HRA cover?

This HRA will pay the “difference” between your old health plan **deductible** and **co-insurance**. The HRA **will not** pay for any out of pocket pharmacy expenses. However, the plan will cover your pharmacy copay amounts after you reach \$350 per individual or \$1,000 per family.

What does this HRA pay for?

Your old healthcare plan had a \$50 deductible and \$400 co-insurance for single coverage or had \$125 deductible and \$400 co-insurance for family coverage. Because your new coverage has higher deductible and co-insurance amounts, this plan will pay the remaining deductible and co-insurance amounts after you incur the charges equaling your old plan deductible and co-insurance thresholds. In practice, this plan is designed to “hold you harmless” for the “gap” between what your old healthcare plan covered and what your new healthcare plan now covers.

When does this plan take effect?

This Plan begins January 1, 2015. Your healthcare plan year starts and renews every July 1 even though the healthcare plan deductible, co-insurance and Rx copay renews on January 1 every year. All deductible, co-insurance and Rx copay maximums will be tracked from January 1 and will apply for the calendar year. This method follows the Excellus “benefit year” schedule.

I’m going to my medical provider next week, what do I have to do?

First, do not miss any appointments because you are unsure how the HRA plan will work. When you get to your medical provider’s office please make sure to inform them that you have a deductible health plan and will have to wait for the EOB, short for Explanation of Benefits, from your healthcare plan before you pay your provider. If you have a PG Plus™ Debit Card, do not charge your provider fee. This card is **not** tied to your HRA and will not be paid from this special HRA account if it is used. Keep your receipt from the provider and match it up with the bill that you will receive later and the EOB that you receive from your insurance carrier. You will be responsible to pay the bill once it becomes due, generally 30 days from receipt for your EOB.

I’ve received my EOB, now what do I do?

Now that you have your EOB, Preferred Group should have also received our notification from the insurance carrier of your EOB as well. Please log in to your web portal at www.My-PGP.com or use the smartphone app and make sure we have recorded your EOB correctly in our system. We will enter the amounts as indicated on your EOB and will send you a payment for the amount that the HRA will cover. If you have a Flexible Spending Plan please note a claim for your FSA funds will need to be submitted to the Preferred Group for reimbursement. Preferred Group will reimburse you for your true out of pocket expenses from the “patient responsibility” section of your EOB as long as you have FSA or employer contribution funds available. Please remember to always keep your receipts and EOBs in order to track your expenses and for IRS tax purposes.

Something’s wrong or I just don’t understand the payments that I have received?

Don’t panic, these plans take a little while to get used to. If there is anything that you think might be “out of place”, we want to hear from you sooner rather than later. Our number is (866) 989-8995 and our phone lines are open weekdays 8 AM to 5 PM. It is our intent to help you understand the plans that you have with us. Remember we cannot answer any question outside of the amounts indicated on your EOB as you will have to call your insurance provider for those answers, but we will be able to help you understand what these plans are paying for. If there is an actual issue, we would like to clear it up quickly for you.