



JOINT INDUSTRY BOARD OF THE ELECTRICAL INDUSTRY

158-11 HARRY VAN ARSDALE JR. AVENUE • FLUSHING, N.Y. 11365
TEL: (718) 591-2000 • FAX: (718) 380-7741 • www.jibe.org

December 2024

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Dear Participant:

The Joint Industry Board of the Electrical Industry ("JIB") has established a Health Reimbursement Account Plan ("HRA Plan"). Please read below for details.

All eligible participants will be able to utilize a debit card to pay allowable expenses under the Plan's provisions. Examples include co-payments at the doctor's office, pharmacy and other facilities that accept debit cards. In addition, participants will have the ability to submit claims either electronically or in paper format to the third-party provider, Optum Financial, for reimbursement of benefits in lieu of using the debit card. See attachment for additional details.

Important HRA Plan Details

- **Convenient Payment Card and Required Documentation** - The payment card is a VISA debit card and allows you to easily access your HRA Plan funds. At many retailers, your eligible health care expenses will be verified at the time of purchase reducing the need to submit receipts. **Though the need to submit receipts will be minimized with Optum Financial, claims still must be reviewed to ensure they comply with IRS regulations, and receipts will be required in some instances.** Be sure to keep your itemized receipts in case they are required to confirm a purchase or for tax purposes.

The debit card will be mailed by Optum Financial in January 2025 and **must be activated prior to use.**

- **Funding** – For the 2025 year, all eligible employees will receive a contribution to their account balance of \$1,000 for individual coverage or \$2,000 for family coverage. JIB will fund the contribution amounts in three equal installments during the months of January, February, and March 2025, respectively.
- **HRA Balances** - You will have online and phone access to account balances, claims and account information.

Once you receive the debit card, you can begin using it. You will be able to submit claims online or use the Optum Financial mobile app. In addition, you can submit paper claims to Optum Financial. Claims can be submitted to the Optum Financial website: optumfinancial.com, mailed to: Optum Financial Claims Department, P.O. Box 622317, Orlando, FL 32862 or faxed to: (443)681-4602. See attachments for additional detail.

Finally, you can receive reimbursement of approved claims by check or through direct deposit. Direct deposit for claims reimbursement is available once you enroll your information with Optum Financial beginning in January 2025.

- **Summary Plan Description-** JIB will post a summary plan description to the Intranet during January 2025 and mail a copy to all eligible employees.
- **Questions -** For questions about the Plan's new coverage, contact the Health Reimbursement Account Department at (718) 969-4040. Starting January 2025, contact Optum Financial at (844) 286-8472 with any questions regarding your account. Optum Financial is available 24 hours a day, 7 days a week.

Sincerely,

Trustees of the Joint Industry Board of the
Electrical Industry
Health Reimbursement Account Plan

Save on dental crowns to ultrasounds

Pay for hundreds of eligible medical expenses



You can use your health reimbursement account (HRA) to pay for eligible medical expenses for yourself, your spouse and your eligible dependents.

Examples of eligible expenses

The following list includes common examples of HRA eligible expenses. This list is not all-inclusive. Go to optumfinancial.com/QualifiedExpenses for an easily searchable list of everything you can buy from A to Z.

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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none">• Acupuncture• Ambulance• Blood sugar test kits for diabetics• Chiropractor• Dental treatments including X-rays, cleanings, fillings, sealants, braces and tooth removals | <ul style="list-style-type: none">• Doctor's office visits and copays• Drug prescriptions• Eyeglasses (Rx and reading)*• Laboratory fees• Laser eye surgery*• Orthodontics | <ul style="list-style-type: none">• Physical therapy• Special education services for learning disabilities (recommended by a doctor)• Speech therapy | <ul style="list-style-type: none">• Surgery, excluding cosmetic surgery• Vaccines• Vision exam*• Wheelchair |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|

*The debit card is not accepted at vision or optical service providers except Jena Optical located in the JIB Shopping Center, 70-23 Parsons Blvd., Flushing, NY 11365. Payment card transactions at Jena Optical will be verified automatically. Reimbursement for purchases made at other vision or optical merchants can be requested by submitting a manual claim online at <http://jib.retirepru.com/>, through the Optum Financial mobile app, or by mailing a manual claim form to: Optum Claims Department, P.O. Box 622317, Orlando, FL, 32862-2317. You will be asked to submit receipts to verify your purchase, so always save your documentation.



Manual Claim Form

Use this form to submit your claims for reimbursement of eligible expenses paid out of pocket that have not already been submitted.

- Do not use this form if expenses were already paid with your health care payment card.
- Do not use this form if you already submitted this claim using the mobile app or online.
- Complete all entries on this submission form. Please print or type.
- Sign and date this form.
- Fax or mail it, along with the required documentation, to the claims department. (See submission instructions below.)

Personal Information	
Name of Employer: _____	
Employee Name: _____ (last name, first name)	Last 4 Digits of Social Security Number: _____

Documentation Required

You must submit documentation with this form. Documentation must include the patient's name, description of service, date of service and amount charged. Cancelled checks, credit card documentation or balance forward statements are not acceptable. Examples of acceptable documentation include a copy of the Explanation of Benefits (EOB) from your insurance company, an itemized statement from a provider, or an itemized pharmacy receipt (if applicable to your plan).

Claim Details					
Date of Service	Patient's Name*	Relationship to Employee	Name of Provider	Description of Service	Amount Requested
Total					\$

Authorization and Certification		
<p>Read carefully: This claim will not be processed without your signature.</p> <p>I certify that these expenses have been incurred by me or by my eligible spouse or dependent* as defined by my Plan and relevant IRS guidelines. The expenses have not been reimbursed and are not reimbursable under any other plan, such as a group medical plan, individual policy, or spouse's or dependent's plan. I understand that any amount reimbursed may not be used to claim any federal income tax deduction or credit on my or my spouse's or my dependent's income tax return. I understand that it is my responsibility to determine whether distributions are for qualified expenses and for any tax consequences that may occur. *If I am participating in an HRA, I certify that any medical expenses have been incurred by me or by my eligible spouse or dependent covered by my medical plan.</p>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;"> _____ Signature </td> <td style="width: 40%; border: none;"> _____ Date </td> </tr> </table>	_____ Signature	_____ Date
_____ Signature	_____ Date	

Submission Instructions		
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; padding: 5px;">For fastest results, fax to: (443) 681-4602</td> <td style="width: 50%; padding: 5px;"> Or mail to: Claims Department P.O. Box 622317 Orlando, FL 32862-2317 </td> </tr> </table>	For fastest results, fax to: (443) 681-4602	Or mail to: Claims Department P.O. Box 622317 Orlando, FL 32862-2317
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If you have any questions, please contact Customer Service at (844) 286-8472

* Patient/dependent must be eligible for reimbursement under your plan and relevant IRS guidelines.
 FSAs and HRAs are administered by Optum Financial.
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How to Submit a Claim

We offer four easy ways for you to access your health care account funds. **For fastest results, we encourage you to submit your claim using the Optum Financial mobile app or payment card.**

Payment Card

1. If your account includes a payment card, you can use it to directly pay for services directly at eligible health care and locations such as doctor's offices, hospitals, and pharmacies.
2. **Save your documentation!** When you swipe the card, a claim is created for you and eliminates the need for you to fill out a claim form. However, documentation may still be required. If a receipt is needed, you will be notified by email or letter within two weeks of your payment card swipe. You can also review if your claim requires documentation by signing in to your online account.

Mobile App Claim Submission

1. Download the **Optum Financial mobile app** from your app store. Sign in using your existing Optum Financial website username and password.
2. Click "Make a payment" from the main screen. Enter the requested information about your claim and continue through the screens to take a picture of and upload your documentation. Once documentation is uploaded to your claim, click confirm and then submit.

Online Claim Submission

1. Sign in to optumfinancial.com.
2. Follow the instructions on the main page to enter a new claim. Enter the requested information about your claim and continue through the screens to submit the claim and required documentation.

Paper Claim Submission

1. If you didn't use your payment card and are unable to access the Internet, complete the Manual Claim Form.
2. Fax the form along with copies of all required documentation to (443) 681-4602. When you fax the Manual Claim Form and copies of your supporting documentation, there is no need to follow up by sending a hard copy in the mail. Remember to keep the original claim form and supporting documents for your records.
3. If you choose to mail your claim form and documentation instead of faxing, the address is:
Claims Department
P.O. Box 622317
Orlando, FL 32862-2317