



NECA-IBEW Benefits

HRA Terms & Conditions

for

claims submitted for reimbursement through the

HRA Participant Portal, NECA-IBEW Benefits Mobile App, or HRA Claim Form

By submitting this claim, you agree to the following terms and conditions:

- 1. This claim is for an HRA-eligible expense**
- 2. All applicable insurance has been applied to this claim**
- 3. This claim is for reimbursement of a paid expense (which was not paid for with your HRA Benny Card)**
- 4. This claim has not been previously reimbursed**
- 5. This is not a duplicate of a claim which has already been submitted/reimbursed**
- 6. This claim meets the timely filing criteria**
- 7. This claim will be reimbursed as funds are available in your HRA account**

If it is determined that reimbursement has been made for an ineligible claim, the reimbursement amount will be reported on a 1099 form. Alternatively, repayment can be made to the HRA account.

You also agree to the conditions outlined in the NECA-IBEW Welfare Trust Fund Summary Plan Description 2103 edition booklet, pp. 57-65, titled Health Reimbursement Arrangement (HRA).