

A Quarterly Benefits Publication from the Administrative Office PENSION • HEALTH & WELFARE • VACATION • ANNUITY

THE WESTERN STATES CARPENTERS HRA



The Board of Trustees is pleased to announce the launch of the new Health Reimbursement Arrangement (HRA) benefit for eligible participants and their dependent(s). This benefit is available to Carpenters who are receiving HRA contributions from their employer as required by their Collective Bargaining Agreements (CBA). Contributions earmarked for the HRA began accumulating as early as June 2024 for an implementation date of **July 1, 2025**.

The HRA is a supplement to your health plan benefits under the Western States Carpenters Health and Welfare Plan. The HRA was established to assist Carpenters with eligible out-of-pocket expenses not covered by their medical, dental, prescription or vision plans. This benefit becomes available once a Participant establishes initial medical plan eligibility, as long as employer contributions are received for the HRA, in the amount required by the CBA and they are enrolled in the Active PPO, Bronze PPO, or Kaiser HMO plan. Your HRA balance is available for use while you're actively working, during periods when you lose medical plan eligibility due to shortage of hours worked, and during retirement.

Starting **July 1**, **2025**, eligible medical plan participants may use their accumulated HRA balance to pay for allowed expenses. These may be your expenses or the expenses of your enrolled dependents.

Although the Western States Carpenters Health and Welfare Plan provides comprehensive health coverage through their Active PPO, Bronze PPO, Kaiser, dental, vision, and prescription plans, there may be situations where the patient will have outof-pocket expenses. These expenses vary by each individual or family situation. This is where the HRA steps in to assist with those typically uncovered costs. Specifically, this HRA is designed to help participants with various healthcare expenses allowed under Internal Revenue Code Section 213(d), including, but not limited to:

- general healthcare costs
- coinsurance
- copays
- deductibles
- COBRA payments
- Self-Pay Hours Buyback cost
- insurance premiums: HRA Retirees Only (e.g. Medicare premiums)

This benefit can help you better meet your and your family's healthcare needs now or in retirement, as it allows you to utilize your HRA funds when needed.

After initially qualifying for the HRA, you will continue to have access to your account balance unless the funds are forfeited, which occurs after five continuous years of no HRA contributions. However, the balance can be



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about your CBA or your

contact your Local Union.

HRA contribution rate,

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HRA CONTINUED

unforfeited and reactivated if:

- 1. A Carpenter returns to work and an HRA employer contribution is received by the Administrative Office, or
- **2.** The Carpenter retires.

Introducing The Harrison Group



THE HARRISON GROUP, INC.

The Board of Trustees has contracted with **The Harrison Group (HG)**, to administer

this benefit and process claims for reimbursement of allowed expenses. HG will have representatives available beginning **June 1, 2025**, to answer your questions about how the HRA works, allowed expenses, and the status of a specific claim you submitted. More information will be mailed by the <u>Administrative Office</u> to Plan participants over the next two months explaining how to use the HRA, how to access the list of HRA eligible expenses, how to register on the HG website, and much more. Your Carpenter VISA debit cards will be mailed to you by HG in June.

Access to Your HRA Balance

As most employers began remitting HRA contributions effective with the June and July 2024 work months, many Carpenters have already accumulated a balance in their HRA account. Eligibility for the HRA and your ability to use your accumulated HRA balance begins when you first establish initial enrollment in one of the medical plans (Active PPO, Bronze PPO, or Kaiser HMO plan) offered under the Western States Carpenters Health and Welfare Plan. However, new participants will receive their debit cards after they establish initial enrollment in one of the medical plans offered. Once you are eligible for the HRA, you will have three ways in which to access your balance:

 Debit Card – The Harrison Group will mail two debit cards in the Carpenter's name in June 2025 to those who are eligible for the HRA. Participants can begin using their debit cards starting July 1, 2025 to pay for eligible healthcare expenses. The card can be used by you or an eligible dependent to pay for charges at the point of service. For example, if you have an office visit and you are asked to pay your copay, you can swipe your HRA debit card and access your available HRA funds to pay your copay. Or, if you are paying your balance

for new eyeglass frames and lenses, you can also pay using your debit card. These are just examples of the many ways you can use your debit card.



- 2. Claim Expense Reimbursement After HG activates your HRA account on July 1, 2025, you will be able to request reimbursement by submitting a claim form with itemized receipts showing expenses already paid out-of-pocket via HG's mobile app or website at <u>www.theharrisongrouponline.com</u>. You may also download a claim form from <u>carpenterssw.org</u>. When a reimbursement is needed, participants can receive payment through a check or direct deposit into their bank account.
- **3. Save your HRA for retirement -** You can also save your HRA for retirement to pay for out-of-pocket costs, including premiums for Medicare or Medigap plans.

Save Your Receipts!

Though most debit card transactions will be automated, <u>HG</u> will notify you if you need to submit itemized receipts to verify that your expenses meet the guidelines of the Plan and the IRS. Therefore, it is important to retain itemized receipts that list the reason for the charge and details of the items or services that were paid for. Your receipts can be uploaded to The Harrison Group through the website or mobile app.

Special Window for Claims Back to July 1, 2024.

Generally, HRA claims for the reimbursement of covered expenses <u>must be submitted within one year of the date of</u> <u>service or purchase</u>. However, a limited window has been approved to allow Participants to submit claims for expenses incurred between **July 1, 2024** and **June 30, 2025**, provided the expense was incurred after your initial medical plan eligibility was established.

Allowable Expenses

See the following page for a sample of commonly allowed healthcare expenses under **Internal Revenue Code Section 213(d)** or use the QR code for more details. Participants are not allowed to withdraw funds in advance to pay for healthcare



expenses or use the HRA debit card for anything other than healthcare expenses in accordance with IRS and the Plan rules.

Coming Soon

Further details regarding account balances, debit card usage, and claim submissions will be provided in the upcoming months. After **June 1, 2025**, you may call The Harrison Group at **(855) 972-4721** if you have general HRA inquiries. For general benefits questions, please contact the CSAC Administrative Office at **(213) 386-8590**.

HRA ELIGIBLE EXPENSES UNDER IRS CODE SECTION 213(d)

Your Health Reimbursement Arrangement (HRA) dollars can be used for a variety of out-of-pocket healthcare expenses that qualify for federal income tax deductions under **Section 213(d)** of the Internal Revenue Code. Here's a partial list of expenses and over-the-counter items which are currently eligible. Expenses marked with an asterisk (*) require a note of medical necessity from your health care provider.

VICES THERAPY
 Alcohol and Drug Addiction
ance Abuse • Counseling (not marital or career)
 Exercise Programs*
 Hypnosis*
 Massage*
Occupational
Physical
 Smoking Cessation Programs*
Speech
 Weight Loss Programs*
Reversal OVER-THE-COUNTER ITEMS
rgan donor) • Baby Electrolytes
Contraceptives
 Diabetes Testing & Aids
tion Supplies • Ear Care
Eye Care
Family Planning
 Feminine Hygiene Products
nents • First Aid Supplies
Foot Care Treatment
Home Health Care
Homeopathic Remedies
Incontinence Products
Nasal Care
Prenatal Vitamins
Reading Glasses
Smoking Deterrents
ist • Sunscreen

ROUTINE/PREVENTIVE MAMMOGRAMS IMPROVEMENT

The Western States Carpenters Health and Welfare Plan has enhanced its coverage for preventive mammogram screenings. While previously allowed once every two years, the PPO Plans will now cover **annual** preventive screening mammograms.

This enhancement is retroactive to January 1, 2023. Therefore, Participants who had their claims for a preventive mammogram denied due to exceeding the biannual limit will have their claims reprocessed under the new rule. Additional mammograms required for monitoring or when a diagnosis has been given are covered separately by the Plan based on medical necessity, not as preventive care.

Regular mammogram screenings are essential in the fight against breast cancer by detecting tumors that are too small to be discovered through a physical exam. With advancements in mammogram technology, annual screening has become more effective, accurate, and comfortable for patients.

If you are due for a mammogram or other preventive screening, please contact your healthcare provider to schedule your appointment and take advantage of the improved benefit.



DENTAL PLAN IMPROVEMENTS EFFECTIVE JUNE 1, 2025!

The Board of Trustees has approved an enhancement to the current Western States Carpenters Dental PPO Plan currently in place.

Effective June 1, 2025, the basic, major and orthodontic in-network dental plan benefits, administered by UnitedHealthcare (UHC), is increasing from 50% to 80%.

Diagnostic and preventive in-network services will continue to be covered at 100%. Basic, major and orthodontics in-network services will be covered at 80% of the contractual fees. Out-of-network services will continue to be paid at 50% of Usual, Customary and Reasonable (UCR) fees that dentists charge in the area in which those expenses are incurred.

Starting June 1st, the Plan will generally cover more for eligible dental procedures due to this benefit improvement. If your innetwork dental provider has already submitted a pre-estimate to UHC for procedures scheduled on or after June 1, 2025, we recommend informing your dentist about the dental plan enhancement to obtain a new estimate from UHC.

For questions regarding your dental coverage contact UHC at (844) 368-5837 or visit their website at www.whyuhc.com/ csac.

In-network coverage example:

• The dental office charges \$800 for a crown. The Plan's contracted rate is \$600, so the plan will pay \$480 which is 80% of the contracted fees. You will be responsible for \$120, which is 20% of the allowed charge.

Prior to the change, effective June 1, 2025, the Plan would pay \$300 which is 50% of the contractual fees.

This is only an example. Actual service rates may vary.

BRONZE PLAN IMPROVEMENT: VISION AND DENTAL ADDED

We are pleased to announce that, starting May 1, 2025, the Bronze Plan will include vision and dental benefits, the same as those offered with the Active Plan. This change is automatic for current Participants at no additional cost.



Participants eligible to choose between the Active Plan and the Bronze Plan per their contract can switch between plans if it has been at least one year since their last change. Changes will be effective on the first day of the third calendar month after your request is received.

The Bronze Plan is only available through select Collective Bargaining Agreements (CBA).



Remember to notify us if your address or dependents change.

Phone/Teléfono: (213) 386-8590 Toll Free/Sin costo: (800) 293-1370 Email/Correo electronico: info@carpenterssw.org

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Office Hours/Horas de oficina: M-F 8:00 a.m. to 5:00 p.m. PT lunes - viernes 8:00 a.m. a 5:00 p.m. PT Lobby Hours/Horas del pasillo:

M-F 8:00 a.m. to 4:45 p.m. PT lunes - viernes 8:00 a.m. a 4:45 p.m. PT

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Asegúrese de notificarnos si su dirección o sus dependientes cambian.