

A healthcare revolution – and you're invited.

LAITRAM SPOUSAL INCENTIVE HRA (“SIHRA®”) FREQUENTLY ASKED QUESTIONS

SECTION I - SIHRA® BENEFITS

1. **What is covered under the SIHRA®?** The SIHRA® reimburses eligible co-pays, deductibles, and coinsurance for qualified medical and prescription drug expenses.
2. **Is there a calendar year maximum?** Yes, the maximum amount the program will pay per calendar year for eligible co-pays, deductibles and co-insurance is \$10,600 for single coverage and \$21,200 for two or more. These maximums match the Affordable Care Act maximums that any individual or family unit can incur. The result is 100% reimbursement for qualified medical and prescription services with SIHRA®.
3. **Is there an employee premium contribution required for the SIHRA®?** No, there is no cost to participate in the SIHRA®. However, you are required to pay the premium for your alternate medical plan with potential premium reimbursement if your premiums exceed what you pay under Laitram's medical plan (see Premium Reimbursements below).
4. **What happens if the network on my alternate coverage does not include my current doctor? I've been with my doctor for a long time and don't want to change now.** The SIHRA® will reimburse you for eligible co-pays, co-insurance and deductibles **only** (up to the SIHRA® maximum limits) for services or benefits covered under your alternate plan. If your alternate plan does not include out-of-network services or benefits, they are not eligible for reimbursement under the SIHRA®. You should check the network access on your alternate plan to ensure that your providers will be covered.
5. **If my alternate group coverage does not cover a procedure or prescription, will that procedure be a covered expense under the SIHRA®?** No, if your alternate coverage does not cover the procedure, it is not a covered expense under the SIHRA® and will not be reimbursed.

SECTION II - ELIGIBILITY

6. **Am I (or my spouse/dependents) eligible to enroll into the SIHRA®?** If you are a **current employee**, you and your eligible spouse/dependents who are **currently enrolled** on Laitram's medical plan and who have access to alternate group health coverage, are eligible to enroll in Laitram's SIHRA®. If you are **newly hired** and you have alternate group coverage available, you and your eligible spouse/dependents are eligible for the SIHRA® upon satisfaction of Laitram's eligibility requirements.

A healthcare revolution – and you're invited.

7. **What is alternate group health coverage?** Alternate group health coverage includes:
 - other employer group health plans, such as one offered by your spouse or dependent's employer;
 - a retirement plan from a previous employer;
 - a parent's group health plan if you're under the age of 26;
 - or group coverage available from a second employer
8. **What does not qualify as alternate group health coverage?** Medicare, Tricare, VA health care, Medicaid, individual policies, and limited benefit health plans do not qualify as alternate group health coverage. If your alternate coverage is through a self-employed spouse, please call 877-872-4232 to confirm if you would be eligible for the plan.
9. **Am I eligible for the SIHRA® if my alternate coverage includes an HSA (Health Savings Account)?** Yes, you may be eligible depending on the following considerations. If these considerations are not met, your plan eligibility could be affected:
 - If the account holder of your alternate coverage is enrolled in the SIHRA®, then any employee and employer contributions to the HSA must be stopped.
 - If the account holder of the alternate coverage is not enrolled in the SIHRA®, they may continue to make and receive contributions to the HSA and use the HSA funds.
 - The HSA funds CANNOT be used by SIHRA® members for any SIHRA® eligible medical expenses. You cannot be reimbursed for the same expense twice.
10. **If I am enrolled in Laitram's medical plan, and my eligible dependents are enrolled in alternate coverage, is my entire family eligible for the SIHRA®?** No, to be eligible for the SIHRA® you must currently be enrolled in Laitram's medical plan. This applies to dependents as well. Only members who are enrolled in Laitram's medical plan and moved to the alternate group coverage are eligible to be covered under the SIHRA®. So, you would be eligible for the SIHRA® if you move to alternate coverage while your dependents would not be eligible as they are not moving from Laitram's medical plan.
11. **If my entire family is currently on Laitram's medical plan, and I enroll my entire family in alternate group health coverage, is my entire family eligible for the SIHRA®?** Yes, because the entire family is currently enrolled in Laitram's medical plan, the entire family would enroll into your alternate group medical plan and would all be covered under the SIHRA®.

A healthcare revolution – and you're invited.

12. **If I am age 65 or older and Medicare is my secondary coverage, am I eligible to enroll into the SIHRA®?** Yes, if Medicare is your secondary coverage, and you have qualified group health coverage then you are eligible to enroll into the SIHRA®. Reminder, if Medicare is your primary insurance, you are not eligible for SIHRA®.
13. **If my spouse and I both work for Laitram and our only coverage option is Laitram's medical plan, is either one of us eligible for the SIHRA®?** No, because neither one of you has access to alternate coverage.
14. **If my dependent child(ren) are currently enrolled on Laitram's health plan, are they eligible for the SIHRA®?** Yes, if they have access to alternate group coverage through their employer or a parent not on Laitram's medical plan.
15. **I recently got married and I am now eligible for alternate coverage. Can I enroll in the SIHRA®?** Yes. Marriage is a Qualifying Event and, if your newly married status allows you to enroll in alternate group coverage, you and your eligible dependents may enroll in the SIHRA® after you have enrolled in your alternate coverage.
16. **Can I enroll in the SIHRA® and a Healthcare Flexible Spending Account (FSA)?** Employees may enroll in both the SIHRA® and an FSA; however, employees may not be reimbursed for the same expenses under both plans. Employees enrolled in the SIHRA® may wish to enroll in an FSA to cover expenses that are not otherwise covered by the medical plan. This includes expenses such as dental care, contact lenses, and prescription drugs not covered by your group plan. Employees who elect to enroll in the SIHRA® and an FSA should carefully evaluate their expenses so that they do not contribute too much towards an FSA and risk forfeiting the unused FSA funds at year-end.
17. **What if I enroll in the SIHRA®, and then lose access to my alternate group coverage?** As long as you let Laitram know within their qualifying event time frame, you and your eligible dependents may enroll into Laitram's medical plan with no lapse in coverage.
18. **When can I cancel the SIHRA®?** You can change your election during open enrollment each year or during a Qualifying Event if you let Laitram know within the qualifying event time frame.
19. **How is my current dental and vision coverage affected?** You may remain enrolled in Laitram's dental and vision plans. Since the SIHRA® only reimburses eligible medical expenses, it has no effect on your dental and vision coverage.

A healthcare revolution – and you're invited.

SECTION III – ENROLLMENT

20. **How do I enroll into the SIHRA®?**

- i. Enroll into a qualified alternate group health plan. This must be a non-Laitram sponsored health plan.
- ii. Complete the SIHRA® Enrollment Form.
- iii. Complete the Attestation Form; This is a required form that states you have other qualified group health coverage. By signing this form, you are waiving Laitram's medical plan for you and/or your eligible dependents for the entire plan year.

21. **Will I receive enrollment confirmation?** You will receive a welcome letter from Catilize Health® in the mail, usually within 2-3 weeks. Your new SIHRA® ID cards will be shipped separately and arrive in the same time frame.

SECTION IV - CLAIMS

22. **How do I use the SIHRA® ID Card?**

- i. First, present your alternate coverage ID card.
- ii. Then, present your SIHRA® ID card. Let the provider know that the SIHRA® will pay the provider directly for eligible co-pays, deductibles and co-insurance.
- iii. You pay nothing; your provider may file the claim with both your alternate coverage and with the SIHRA®.

23. **Do all medical providers accept the SIHRA® ID Card?** Most providers accept the SIHRA® ID card and file claims. If the provider has questions about the coverage or claim submission process, the provider can call the toll-free number on the back of the SIHRA® ID card.

24. **Do all pharmacies accept the SIHRA® ID card?** Most pharmacies will process your claim when you present your SIHRA® ID card. If the provider has questions about the coverage or claim submission process, the provider can call the toll-free number on the back of the SIHRA® ID card. If they will not accept the SIHRA® ID card, you will need to pay your out-of-pocket expenses, and file a paper claim or submit the claim electronically to receive reimbursement. Keep in mind that many pharmacies will provide a report listing your prescriptions and co-pays.

25. **How do I submit a claim electronically?** To claim reimbursement under the plan electronically, go to portal.catilize.com and submit the required documentation: for co-pay, co-insurance or deductible, you will need to submit the Explanation of Benefits (EOB) from your alternate group health plan; and for prescriptions, submit the "tab" that includes the name of the drug, date filled, patient's name and co-pay.

A healthcare revolution – and you're invited.

Do not submit a cash register or credit card receipt; these alone are not acceptable as per IRS regulations.

26. **How do I submit a paper claim?** If you are filing a "paper" claim, using the claim form provided by Catilize Health®, you'll submit that form along with the required documentation listed in question #25.
27. **What is the deadline for submitting claims.** The deadline for member claims is 90 days after the end of the claim year or your termination from the plan. The deadline for provider claims is 1 year after the date of service.
28. **What if I receive an invoice from a provider for a claim that should have been reimbursed and paid to the provider?** Your first inquiry should be made to the provider to see if they have processed the claim through Catilize Health®.
29. **How is claim reimbursement obtained?** When you receive services from one of these providers, present the SIHRA® ID Card and the provider will file the claim. The provider will receive the payment for the out-of-pocket expenses. If you receive care from a provider who does not file SIHRA® claims, then you need to file a paper claim or submit the claim electronically. You will receive a check reimbursing you for your out-of-pocket expenses.
30. **I have not received my ID card yet and I have an appointment soon, will I get reimbursed for my out-of-pocket costs?** Yes, simply access your ID Card at portal.catilize.com. You may also file a paper claim or submit the claim electronically.

SECTION V – PREMIUM REIMBURSEMENTS

31. **What if the premium for an alternate plan is higher than Laitram's medical plan?** Laitram will reimburse you for the increase (difference) in premium that your household pays for the alternate coverage subject to the per month limits below:

\$200/single, \$400/employee + spouse, \$400/employee +child(ren), \$600/family

If the premium does not increase, then there is no eligible premium reimbursement under the SIHRA®.

32. **How is my premium reimbursement calculated?** A comparison is made between the premium of the alternate medical coverage to the premium of Laitram's medical coverage.
33. **What if the employer who provides my alternate group coverage charges a surcharge if I enroll in their plan?** Surcharges relating to alternate group coverage will be included in your premium reimbursement calculation. Tobacco-use and smoker surcharges will not be reimbursed. Please note that employers use a variety

A healthcare revolution – and you're invited.

of names, such as surcharge, penalty or incentive for these additional charges. If you have questions about whether a surcharge will be reimbursed, please contact Catilize Health®. Contact information is provided below.

34. **How are employee premium contributions reimbursed?** This amount will be reimbursed through Laitram's payroll if the premium contribution from your alternate coverage is deducted pre-tax. If your alternate group coverage has post-tax deductions, the payment will be reimbursed directly from Catilize Health® via check or direct deposit.
35. **What if there is a change to my premium contribution on the alternate group coverage?** You must inform Catilize Health® of premium changes as soon as possible, but not later than 1 month after an increase or decrease in premium contributions, so that your reimbursement may be appropriately adjusted. This information can be mailed, faxed or emailed securely.
36. **Am I eligible to receive a premium reimbursement if my alternate coverage is my parent's health coverage?** No.
37. **Am I eligible to receive a premium reimbursement if my eligible dependents move to my ex-spouse's medical plan?** No.

For more information, to file claims or ask questions:

Catilize Health®, Inc.
2605 Nicholson Road, Suite 1140
Sewickley, PA 15143
Toll Free Phone: 1-877-872-4232
Toll Free Fax: 1-877-599-3724
memberservices@catilizehealth.com
Hours 8:30am – 8:00pm EST
<https://britehr.app/Laitram>

