



**Town of Ipswich**  
**Health Reimbursement Plan**  
**July 1, 2017 to June 30, 2018**

As a part of efforts to keep your medical benefit costs as affordable as possible, the Town of Ipswich is pleased to sponsor a Health Reimbursement Arrangement (HRA).

We are pleased to announce the addition of a second HRA Plan (HRA#2) that will be available until the budgeted funds are exhausted. The plan year runs from July 1, 2017 to June 30, 2018.

Eligible expenses must be incurred within the plan year. The Plan provides each eligible active employees participating in the Network Blue New England HMO or the Blue Care Elect PPO Plan Health Plans the opportunity to be reimbursed for the following expenses:

**HRA #1**

- **HOSPITAL ADMISSION / IN-STAY COPAY - \$300 or \$700**

**HRA #2**

- **AMBULATORY OUTPATIENT DAY SURGICAL COPAY - \$150**
- **EMERGENCY ROOM COPAY - \$100**
- **HIGH TECH IMAGING (MRI, PET, CT, Nuclear Cardiac Scans) COPAYS - \$100**
- **MENTAL HEALTH HOSPITAL & SUBSTANCE ABUSE FACILITY COPAY - \$200**

Once you have incurred an eligible expense, submit a copy of your Explanation of Benefits / Claim Summary from the insurance company and a completed claim form, to Cafeteria Plan Advisors, Inc. at the address below. All payments will be made directly to the participant. All expenses must be submitted no later than **30** days after plan year ends. However, it is recommended you submit expenses for the HRA#2 plan immediately since it is funded by a budget.

As the Administrator for this Plan, should you have any questions please contact us at:

*Cafeteria Plan Advisors, Inc.*  
420 Washington Street, Suite 100  
Braintree MA 02184