

A plan designed to help you save money:

MERP

MEDICAL EXPENSE REIMBURSEMENT PLAN



A great opportunity to SAVE FOR YOU & YOUR ELIGIBLE DEPENDENT CHILDREN

- Co-pays, deductibles and co-insurance reimbursement
- No premium contribution deducted from your paycheck.

Getting Started

DO YOU QUALIFY?

The MERP medical plan has a few requirements in order to be eligible to enroll.

Continue reading below only if you meet the requirements.

You must answer 'YES' to the following to qualify

Does your spouse have access to a group medical plan?

Are you currently enrolled in your employer's group medical plan?

*If at any point an employee loses access to their alternate group medical plan -a Qualifying Event - you will be able to enroll in the Famous Supply medical plan

How it works...

First, **ENROLL**

- 1. Enroll in your spouse's employer's or other alternate group medical plan.
- 2. Complete the MERP Enrollment Form.
- 3. Complete the Attestation Form (annual requirement).
- 4. Waive Famous Supply medical coverage.
- 5. Return the Enrollment and Attestation form to Famous Supply.

Then, FILE CLAIM

- Present your alternate medical plan ID card.
- Next, present your MERP ID card for co-pays, deductibles and out-ofpocket eligible expenses.

Most providers will file claims with your alternate medical plan and the MERP. (Walgreens, CVS and mail order will not accept the MERP ID card and will require you to file a paper claim).

Finally, **GET PAID**

Most claims will be paid directly to the provider through use of the ID card. If you pay an out-of-pocket eligible expense, you may submit a paper claim for reimbursement. You will receive a check mailed to your home.

Premium reimbursements will be issued to you through your paycheck. If your premium contributions are after tax, a check will be mailed to your home.

Overview & More Details

WHAT IS A MERP

The Medical Expense Reimbursement Plan (MERP) reimburses you (the employee) and your eligible dependent children for eligible health care expenses (co-pays, deductibles and co-insurance) incurred under alternate group medical coverage.

MERP BENEFITS

- Co-pays, deductibles and co-insurance paid by MERP.
- Premium contributions paid by MERP.
- No premium deducted from Employee's paycheck.
- The Employee will be reimbursed for the premium paid for the alternate coverage if it exceeds the premium, the Famous Supply Employee would have paid to remain on the medical plan. If cost of alternate coverage is less than Employee would have paid for the Famous Supply Medical Plan, premium reimbursement is \$0.

OPPORTUNITIES FOR ENROLLMENT

- Famous Supply open enrollment
- Qualifying event: marriage, birth of child, part time to full time, etc.
- Spouse's open enrollment

IRS RULES

- You may be enrolled in a HRA or FSA. You CANNOT be reimbursed from both the MERP and your HRA or FSA
- You are NOT eligible for the MERP if your alternate coverage is:
 - a high deductible health plan (HDHP) with active contributions to a Health Savings Account (HSA);
 - Medicare, Medicaid, Tricare (Retiree only)
 - Healthcare Exchange Policy made available thru the Affordable Care Act
 - an Individual Policy
 - Limited Benefit Health Plan

PREMIUM CONTRIBUTION REIMBURSEMENTS

- Proof required for reimbursements
- Paystub showing premium contribution amount, pre-tax or post-tax, frequency (other pay information may be removed)
- If employee does not have a pay stub at time of enrollment, they may submit a letter on employer's letterhead or a Benefit Confirmation outlining information, but must submit a paystub once it becomes available.
- If the entire family is not enrolling in the MERP, then the employee must provide the tiers of coverage indicating the cost for each tier.

Making Claims

MERP ID CARD:

- Present alternate medical plan ID card
- Present MERP ID card
- Provider may bill Catilize directly
- Walgreens, CVS and mail order will not accept MERP ID card

PAPER CLAIMS:

- Present alternate medical plan ID card
- Complete MERP claim form and sign
- Send completed and signed claim form to Catilize with the following:
 - Office visit co-pay: receipt from provider stating copay amount, provider's name, patient's name and date of service
 - Co-insurance or deductible: Explanation of Benefits (EOB) from alternate group health plan
 - Prescriptions: "Tab" from pharmacy that includes name of drug, date filled, patient's name and patient responsibility amount



Have a question? For more information, please contact Catilize Health at (877) 872-4232



