

## CompleteCare Benefits

- Co-pays, deductibles and co-insurance paid by CompleteCare up to \$7,350/single and \$14,700/family per year.
- No premium contribution deducted from employee's paycheck.
- The employee will be reimbursed for the premium contribution paid for the alternate coverage if it exceeds the premium contribution the REEP employee would have paid to remain on the REEP medical plan up to a monthly maximum of \$100/single, \$200/2-party and \$300/family. If the cost of alternate coverage is less than the employee would have paid for the REEP medical plan, premium contribution reimbursement is \$0.

## Eligibility

- Current employees must be enrolled in the REEP Medical Plan
- New employees: must satisfy eligibility requirements
- Qualifying event or newly eligible: marriage, birth of child, part time to full time, etc.

## Opportunities for Enrollment

- REEP open enrollment
- Qualifying event: marriage, spouse's change in employment status, birth of child, part time to full time, etc.
- Spouse's open enrollment

## IRS Rules

- You may be enrolled in an HRA or FSA. You CANNOT be reimbursed from both CompleteCare and your HRA or FSA.
- Employees are NOT eligible for CompleteCare if their alternate coverage:
  - has an active contribution to a Health Savings Account (HSA)
  - is Medicare, Tricare (retiree only)
  - is an Individual Policy
  - is a Limited Benefit Health Plan

## Enrollment

- Enroll in alternate coverage and waive coverage on REEP's medical plan
- Complete the CompleteCare enrollment form
- Complete Attestation form
- Provide proof of premium contribution paid by spouse



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## Premium Contribution Reimbursements Proof Required

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

## Claims

- CompleteCare ID Card:
  - Present alternate medical plan ID card
  - Present the CompleteCare ID card
  - Provider may bill J&K directly
  - Walgreens, CVS and mail order will not accept the CompleteCare ID card
- Paper Claims
  - Present alternate medical plan ID card
  - Complete the CompleteCare claim form and sign
  - Send completed and signed claim form to J&K 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 medical plan
    - Prescriptions: "Tab" from pharmacy that includes name of drug, date filled, patient's name and patient responsibility amount

**For more information, please contact your Keenan representative  
at 310.212.3344 or J&K Consultants at 877.872.4232.**



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