

Health Reimbursement Arrangement (HRA)

Your Guide to Filing Claims (for employees enrolled in Kaiser)



When you enroll in the Kaiser medical plan, you are responsible to pay a copay or coinsurance for many services. The good news is that Nutanix provides money that you can use to pay yourself back for those costs: your HRA. You can use your HRA to reimburse Kaiser copay and coinsurance expenses that you have paid out-of-pocket, whether for yourself or for your covered family members.

Documentation Requirements

The IRS requires validation for all HRA reimbursements. When you submit a receipt or Explanation of Benefits (EOB), the following information must be included on the document:

- > Date of service or purchase
- > Description of service (copay or coinsurance)
- > Provider or merchant name
- > Patient name
- > Your cost

Where Can I Get My Kaiser EOB?

Go to kp.org or call Kaiser at 1-800-464-4000.

When filing a claim to reimburse a **medical** copay or coinsurance, you may provide an EOB, Demand Bill, or other documentation which includes the above listed details. When filing a **pharmacy (Rx)** claim, the Kaiser receipt you receive which indicates the above details is sufficient.

Please note that a credit card receipt alone is not sufficient information to substantiate an HRA claim.

Reimbursement Timing

Most claims are processed within two business days after they are received, and payments are sent shortly thereafter.

Set up Your Online HRA Account



- Go to www.healthequity.com/wageworks
- Click LOG IN/REGISTER
- Select Employee Registration
- Follow the on-screen instructions to enter your contact and bank information
- Set up a username, password and security question

Questions?

Call 1-877-924-3967 to speak with a HealthEquity representative or open a [People Portal ticket](#).

How to File a Claim

There are three ways you can file a claim to request reimbursement for eligible health care expenses. You can:

1. File a claim on the HealthEquity [website](#)
2. Use the EZ Receipts mobile app (requires web registration)
3. Submit a paper [claim form](#)

1. HealthEquity Website

1.	Log into your account at www.healthequity.com/wageworks
2.	Choose Submit Receipt or Claim button on the left
3.	Select Pay Me Back
4.	Enter Claim Item 1: Follow the steps below to enter information about your claim <ul style="list-style-type: none"> • Enter the Provider Name and Service Start Date • Click the Service End Date box (you do not need to enter a date) • Determine your type of claim <ul style="list-style-type: none"> > Medical Expense: Select from the Other Services dropdown menu and choose co-payment (medical, in network) or co-insurance (medical, in network) > Pharmacy (Rx) Expense: Select from the Common Service dropdown and choose Rx (prescription) • Enter the Amount of the expense • Select a Patient Name from the dropdown menu or add a new patient if not listed • Select the More button if you have multiple claim items on a single receipt that are being submitted together • Select the Next button if you have entered all information for your claim
5.	Review and Submit Claim: Check the claim information, read the Certification and Authorization and click the Submit Claim button
6.	Submit Receipt: Select one of the options below to upload a receipt <ul style="list-style-type: none"> • Submit Receipt Online NOW—recommended for faster payment • Submit Receipt Online LATER • Download Claim Form PDF—to print and send by fax or mail

2. EZ Receipts Mobile App

1.	Download the EZ Receipts app from the App Store or Play Store
2.	Log into your account within the app. Requires prior registration at www.healthequity.com/wageworks
3.	Select submit receipt or claim
4.	Enter the required claim information
5.	Upload or take a picture of the receipt to be submitted with your claim
6.	Submit Claim

3. Paper Claim Form

1.	Download a Healthcare Pay Me Back Claim Form here at www.healthequity.com/wageworks or access a fillable form here
2.	Fax or mail your completed form to HealthEquity to the fax number or address listed within the form