



Benefit Plans

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2022-2023 HRA – BCBSMA HMO BLUE NE – D

BENEFIT PLAN SUMMARY

Plan Start Date
07/01/2022

Plan End Date
06/30/2023

Plan ID
1000257601

Election Schedule
Annually

Employee Minimum Contribution

Employee Maximum Contribution

Plan Description
An employer-funded, pre-tax account for qualifying out-of-pocket Healthcare expenses.

Election Proration
None

DEDUCTIBLE

Plan Deductible Yes

Apply Deductible To Each Person Group

Each Person	\$500.00
Single	\$500.00
Single +1	\$1,000.00
Single +2	\$1,000.00
Family	\$1,000.00

COVERAGE TIER

Apply payout to Both Person and Group

Payout tiers

Each Person

Total accumulated	\$1,000.00
Tier payout	\$1,000.00
Percentage payout	100%

Maximum Payout

Each Person	\$1,000.00
Single	\$1,000.00
Single +1	\$2,000.00
Single +2	\$2,000.00
Family	\$2,000.00

CLASSES ELIGIBLE

Class

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