



## **HEALTH SPENDING ACCOUNT (HSA) CONTRACT FACULTY FREQUENTLY Asked QUESTIONS**

The following information is intended to answer some common questions you may have about your non-taxable Health Spending Account (HSA).

### **What is a Health Spending Account (HSA)?**

The HSA is an individual employee account which is funded by Mount Royal University. The major attraction of a spending account is that you can direct your allocated dollars, tax free to reimburse for health and dental expenses not covered by any other health care plan(s).

## **Eligibility**

### **Who is eligible for a HSA?**

Contract Faculty employees that are eligible for the Mount Royal University benefit plan as stipulated in the MRFA Collective Agreement, Article 13.8, but do not need to be participating in our Extended Health Care and/or Dental plans.

### **When am I eligible for the HSA?**

New Contract faculty employees will receive \$500 HSA credit dollars when they meet the benefit eligibility criteria as specified in the MRFA Collective Agreement – Article 13.8.1. This may be prorated.

### **Who can I cover through my HSA?**

You may cover expenses for yourself, your spouse, your children and any other dependants. Under the HSA plan only, eligible dependents are expanded to include a “dependent” of the individual for a particular taxation year if the following conditions are met:

- a) The person must be the child, grandchild, parent, grandparent, brother, sister, uncle, aunt, niece or nephew of the individual or of the individual’s spouse
- b) The person must be dependent on the individual for support at some time in the year; and,
- c) The person must be a resident of Canada at some time in the year. This residence requirement does not apply if the person is the child or grandchild of the individual or of the individual’s spouse

**What happens to my HSA if I lose eligibility of benefits because of decrease in instructional hours or terminate my employment or transfer to an employee category within Mount Royal University that does not have HSA as a benefit?**

If you lose benefit coverage eligibility or terminate your employment or transfer to another employee category within Mount Royal University that does not have HSA, you lose your credits upon loss of benefit coverage or termination or transfer.

All claims with a date of service prior to your termination date can be submitted for payment within 90 days of the date of termination of insurance.

**How does HSA work?**

Our HSA plan year is based on calendar year. At the beginning of our HSA plan year, January 1<sup>st</sup>, or upon eligibility of benefits, eligible employees will be allotted \$500 (until further notice) in HSA credit dollars. If starting in the fall semester your HSA dollars will be prorated to \$250. The credit dollars can be used to reimburse employees for the purchase of any eligible health care expenses that may not be covered or are limited under either you or your spouse/partner's employee group benefit plan (core plan).

HSA credit dollars must be used within a 24 month period, starting January 1<sup>st</sup> and ending December 31<sup>st</sup>, 12 months later. The service/purchase date of HSA expense must be within the period you have benefit coverage, i.e. fall semester, winter semester etc. Beyond the 24 months, any unspent HSA dollars will be forfeited. Any eligible expenses cannot be carried forward into the new HSA plan year.

**There is a 90 day grace period from January 1 – March 30<sup>th</sup> of each year in which any claims incurred on or prior to December 31<sup>st</sup> of that plan year can be submitted for reimbursement, unless your eligibility of benefits has ceased before December 31<sup>st</sup>, all claims with a date of service prior to your termination date must be submitted for payment within 90 days of the date of termination of insurance.**

**Expenses**

**What types of medical-related expenses are eligible through my HSA?**

Your HSA may be used only for eligible medical and dental expenses incurred during the plan year on your behalf or on behalf of an eligible family member.

Examples of commonly used HSA expenses include:

- Eye exams
- Eye glasses or contacts (prescribed)
- Laser eye surgery (performed by a medical practitioner)
- Amounts in excess of limits under your Extended Health and Dental plans
- Employee paid health and dental premiums (to the claim form/s attach a copy of every 15<sup>th</sup> of the month pay stub (from MyMRU) that you are trying to claim: highlight your name, pay date, Extended Health Care Plan and/or Dental Care Plan and the employee premium amounts – listed under Deductions)

For a more comprehensive HSA expense list, refer to "[Health Spending Account Eligible Expenses](#)", under MyMRU website: Employee Resources/Benefit Information and Claim Forms, scroll down to Frequently asked questions for Health Spending Account.

This list is an example of medical and dental expenses that would be eligible for deductions under the Income Tax Act as issued by Canada Customs & Revenue Agency.

**Are there certain types of expenses that would not be covered under my HSA?**

Yes. Any expenses not recognized as eligible as a deduction under the Income Tax Act are not accepted. Some examples are drugs purchased without a prescription from a doctor or dentist, fitness club membership, golf memberships and daycare.

**Will I be taxed on my HSA payments?**

No. The HSA is not a taxable benefit because the eligible expenses adhere to CRA's guidelines.

**How long do I have to use my credits?**

Your credits **must** be used within the calendar plan year, any credit remaining in your account at the end of the plan year (December 31st) are **forfeited**.

## Claims

**When should I submit HSA claims for reimbursement?**

You are required to submit your receipts for any expenses within 90 days of the end of the plan's year, which means that you must have your eligible claims received at Sun Life Financial by March 30<sup>th</sup> each year, unless your eligibility of benefits has ceased prior to December 31<sup>st</sup>, all claims with a date of service prior to your termination date must be submitted for payment within 90 days of the date of termination of insurance. *We strongly recommend sending in receipts immediately after you incur the expense to avoid forfeiture of credits.*

**Are the claim forms available on-line?**

Yes, HSA Extended Health Care and HSA Dental claim forms are available from MyMRU/ Employee Resources/Benefit Information and Claim Forms.

The same claim forms are used when claiming under your core plan and/or claiming under HSA.

On-line Claims Submission is also available through Sun Life Financial – Plan Member Secure site. See details under MyMRU-Benefits Information & Claim Forms.

**How do I claim for my HSA expenses? (If you coordinate benefits with another plan, see the next question).**

Before submitting any claims to your HSA, make sure all other plans have paid their share of any eligible expenses. If Sun Life Financial plan is the only coverage, complete a Sun Life HSA Extended Health or Dental claim form, complete with a check mark in the HSA option box, attach the paid original receipt(s) for the expense(s), mail to Sun Life Financial or submit by on-line claims submission.

**How do I claim for my expenses if I have coordination of benefits?**

HSA are designed to complement your core benefit plan, and therefore require that you access all other benefit plans before submitting expenses to them for payment. Once your claims have been processed by both plans, you attach your Explanation of Benefits statement from Sun Life Financial or the other insurance company and submit them with a HSA claims form (paper claim).

**If my health or dental claim isn't 100% covered, will you automatically pay the rest from my HSA?**

Sun Life can only pay a claim from your HSA if you authorize it by checking the appropriate box and signing the claim form. If you don't check this box, Sun Life can't automatically use your HSA.

**Can my pharmacist or dentist submit my HSA claim electronically?**

No. Pharmacists and dentists (or any healthcare providers) do not have the authority to access your HSA.

**Do I have a claiming deadline?**

You have **90 days** from the end of the HSA plan year (**December 31<sup>st</sup>**) or if your eligibility of benefits has ceased prior to December 31<sup>st</sup>, all claims with a date of service prior to your termination date must be submitted for payment within 90 days of the date of termination of insurance to submit HSA claims for expenses incurred during that plan year (January to December).

You should always submit your claims as soon as possible during the same HSA plan year in which you paid the expense.

**I have sent in my original receipts for payment through my standard core benefit plan. Are photocopies of receipts acceptable?**

Photocopies of receipts are not acceptable; only original receipts will be considered eligible for reimbursement. If you have coverage through another benefit carrier then the original receipts have likely been sent in and kept by that carrier. Sun Life then requires the Explanation of Benefits Statement that you received from the other carrier and a copy of the receipts.

**When I have an expense i.e. vision care, which I know is not covered through my core benefit plan(s), why do I still need to send these expenses to insurance companies for a rejection letter?**

Your HSA requires that all other core benefit plans be accessed prior to forwarding them to your HSA. Through this process, an Explanation of Benefits (EOB) statement declining the claim is produced. This ensures that all efforts have been taken to pay the expense through the core plan

**What if the receipt does not have my name on it? Will Sun Life accept it as proof of payment?**

Cash register receipts without your full name on them are not acceptable. Sun Life Financial is required to verify you are the recipient of the service or product.

### **How do I know how much money is left in my HSA?**

1. When you get your claim cheque and Explanation of Benefits (EOB), the EOB will show the balance in your HSA.
2. You may call Sun Life Financial Customer Service to check the balance of your account at **1.800.361.6212** toll free.
3. You can also check your account through the Sun Life Financial member secure site (if you have registered) at [www.mysunlife.ca](http://www.mysunlife.ca).

## **Customer Service**

### **Who do I call if I have questions or inquiries?**

Sun Life Financial can answer your HSA questions including ones specifically related to your account such as:

- How many credits do I have in my account?
- Is a certain expense covered?
- Why wasn't an expense I submitted paid?

You can contact Sun Life Financial Customer Service at: **1.800.361.6212** toll free

You will require Plan #100602 for Extended Health or #100602 for Dental and your Certificate No. (employee ID # available on your CampusCard). HSA Contract Number: 100602

If you require assistance related to your Health or Dental coverage, please call Cindy Hamonic, Benefits Administrator, at 403.440.5911 or e-mail at [chamonic@mtroyal.ca](mailto:chamonic@mtroyal.ca).