

Coastal States Bank  
**HRA Employer Guide**

1/1/21 – 12/31/21





**Benefit Coordinators, Inc.**

Post Office Box 197  
Irmo, SC 29063

TEL 803 772 0110

FAX 803 772 0140

E-M [amilbourne@benefitcoordinators.com](mailto:amilbourne@benefitcoordinators.com)

WWW [benefitcoordinators.com](http://benefitcoordinators.com)

## **Welcome to Benefit Coordinators, Inc.!**

We are very excited that you have chosen Benefit Coordinators, Inc. (BCI) to be your HRA Administrator! We strive to provide the best customer service to our clients, so please feel free to contact us with any questions or concerns.

Our main goal is to make sure you and your employees understand the program and how to access information. This employer guide, along with the employee guide, should provide key information needed to utilize the plan.

Again, we are here to help, so if you have any questions, please don't hesitate to contact us!

Thanks,

Ashley Milbourne  
Benefit Coordinators, Inc.

## **HRA PLAN:**

### **If employee has a HSA:**

The insured is responsible for the first \$3,750 of expenses applied to the in-network medical deductible, then the HRA will pay the remaining \$2,000 of the \$5,750 deductible. There are two deductibles per family, so the maximum family reimbursement is \$4,000.

### **If employee does not have a HSA:**

The insured is responsible for the first \$3,450 of expenses applied to the in-network medical deductible, then the HRA will pay the remaining \$2,300 of the \$5,750 deductible. There are two deductibles per family, so the maximum family reimbursement is \$4,600.

### **Child (ren) HIA Credit:**

If the family is held responsible for more than the amounts listed above AND all covered adults completed both HIA credits, the HRA will reimburse up to \$1,250 per child of in-network deductible expenses (\$2,500 max per family).

\*This must be requested by the employee and submitted to BCI on a case by case basis\*

## **CLAIM SUBMISSION:**

We receive medical claims directly from the insurance carrier so employees don't need to file anything with us. Once claims are received and processed, the payments are issued directly to the provider.

## **PAYMENT PROCESSING:**

Payments are processed on Wednesdays, and BCI will pay providers via e-check or check. Once payments are processed, the payment detail will be available to you on the employer portal – [www.bci4hr.com](http://www.bci4hr.com). It is important that you review these reports.

You have chosen to have BCI process payments off of our account. The total amount on the Reimbursement Notification each week is the total for which BCI will draft your bank account. We will initiate the draft the day we process payments (Wednesday) and the amount should draft from your account the following business day.

**Please make sure to contact your bank and make sure any necessary authorizations are in place.**

## **ONLINE ACCESS:**

As an HR Administrator you have 24/7 access to claim and payment information for your group.

### **First time logging in:**

1. Go to [www.bci4hr.com](http://www.bci4hr.com).
2. Your username was assigned at setup. This should be your employee email address unless you were emailed otherwise.
3. Password: This was emailed to you during the setup process. If you don't have this, please let us know and we can generate a new temporary password.
4. The system will then prompt you to change your password.

If we weren't notified to give you access during setup, please contact us ASAP and we can add that for you or anyone else in your organization.

The payment detail report will be labeled Claims Reimbursement Notification and will be on the home screen when initially generated. Otherwise, you can click the Reports tab and find it there.

You also have access to view specific employee information or run account balance reports with real time data.

## **NEW PARTICIPANTS / TERMS / CHANGES:**

Please make sure to send us information for any new participants, terms and plan changes.

We need the following information:

Employee Name

SSN

Date of Birth

Date of Hire

Address

Coverage Effective Date

Coverage Level (ie. Employee Only, Employee + Spouse, etc)

If Dependents are covered, we need Name, relationship and date of birth.

## **QUESTIONS?**

Summer McDaniel

[smcdaniel@benefitcoordinators.com](mailto:smcdaniel@benefitcoordinators.com)

803-772-0110 x120