



**INSIDE THIS ISSUE...**

|  |   |
|--|---|
| ICUBA Visa Debit Card and<br>Discovery Benefits App.....   | 1 |
| Documentation Required for Your<br>Spending Accounts ..... | 1 |
| Colonoscopy Claims.....                                    | 2 |
| Dependents Turning 26 Years<br>Old.....                    | 2 |

# BenefitsWise

## "Better Benefits Through Collaboration"

### ICUBA Visa Debit Card and Discovery Benefits App

The ICUBA Visa Debit Card has a new look. The original card was blue/green/white with the Discovery Benefits logo and the ICUBA logo. The new card, effective November 2020, is silver and has the ICUBA logo, and is now called the "WEX" benefits card. Discovery Benefits is a WEX company; a known leader in the US of payment processing and information management. **The good news is this change is only cosmetic and either card will work.**



The ICUBA Visa Debit Card is the fastest, most convenient way to access your funds and pay for eligible expenses. One benefit of using the card is regarding recurring payments. If you use your debit card for a payment that requires documentation (see article to the right), once the claim has been approved and you make the same purchase for the same dollar amount at that merchant, the recurring claim will be automatically approved.

**For more information or to order a new ICUBA Visa Debit Card for yourself or eligible dependent, please visit the Discovery Benefits portal though the Single Sign-On (SSO) at [ICUBAbenefits.org](http://ICUBAbenefits.org)**

#### Access your benefits 24/7 with the Discovery Benefits Mobile App

- Get instant updates on the status of your claims
- File a claim and upload documentation in seconds using your phone
- Scan an item's bar code to determine if it is an eligible expense
- Report a card lost or stolen, which cancels card and ships a new one
- Log in through face recognition or fingerprint (based on your phone)
- Check your balance and review account activity
- Reset login credentials

**Download the app for free on Apple and Android smartphones and tablets**



### Documentation Required for Your Spending Accounts!

The IRS requires you to provide documentation to make sure expenses are eligible for reimbursement from your spending account. This documentation is also known as substantiation. More than 90% of transactions can be approved electronically, without requiring any substantiation from you, to validate that an expense is reimbursable using your ICUBA Visa Debit Card. For example:

- Many healthcare merchants (e.g., drug stores, Amazon, grocery stores) use software that automatically substantiates the expense you incur at the point of sale.
- The expense you submit exactly matches the copay you are required to pay under an ICUBA sponsored Benefit Plan (medical, dental or vision).
- The expense you submit exactly matches data received on a file feed from an ICUBA sponsored Benefit Plan.
- After a transaction has been substantiated once, transactions for the same amount in the same setting do not require another review for the next 12 months.

If a transaction made with your ICUBA Visa Debit Card can't be auto-approved, you'll receive one or more receipt reminders letting you know documentation is required. If you provide documentation but it's not sufficient to substantiate the claim, you'll receive a request for more information. The first debit card receipt reminder will occur 60 days after the transaction. The second receipt reminder will occur 45 days after that.

You are required to substantiate:

- Date service received, or item purchased
- Name of provider or merchant
- Dollar amount
- Description of service received or item
- In some cases, the plan may require the Explanation of Benefits (EOB) from your insurance carrier is provided as substantiation for your expense (this is to also confirm that your reimbursement request is for expenses that you actually paid for out of your own pocket).
- The plan may also require the individual who received the product/service is listed on the substantiating documentation.

You can submit your documentation by uploading claim information online, uploading claim information via the Benefits Mobile App or download, print and send the receipt via mail or fax.



### Remember to visit our website—<http://ICUBAbenefits.org>

This user friendly site is your one stop shop for all things benefits! Visit our single sign-on section located below the scrolling banner and gain access to ICUBA's Brand Partners including BCBS MyHealthToolkit and Rally, OptumRx Prescription Drug Portal, Resources for Living EAP, SurgeryPlus+ and Aetna Navigator and of course, the ICUBA Visa Debit Card!

## ICUBA Benefit: Colonoscopy Claims are Covered at 100% What You Should Know Before You Go!

**Challenge:** *There are several claims that come in from different providers when you have a colonoscopy:*

1. Surgical center claim (for the procedure itself)
2. Surgeon (provider claim)
3. Anesthesia claim
4. Pathology claim (if a polyp is removed)

**How colonoscopy claims are paid most of the time:**

These claims are often billed separately by different providers. Most often the surgical center claim will be received and processed at 100% by the insurance company, prior to receiving the ancillary claims. When the ancillary claim is received (anesthesia for example), the system automatically kicks off a claim sweep, looking for a colonoscopy claim that was billed on the same date of service, for the same member. If one is found, the system will associate the ancillary claim with the colonoscopy claim and pay the ancillary claim in full.

**Why am I receiving a bill for my colonoscopy?**

Sometimes, the ancillary claims (pathology or anesthesia, for example) are received prior to the surgical center claim. When this happens, there is not anyway for the system to identify these specific claims are part of a 100% covered colonoscopy procedure. The system will process the separate claims at deductible and coinsurance. The member then receives an Explanation of Benefits (EOB) notifying you of how these claims were paid.

**What can I do if my claim is paid in the wrong order?**

ICUBA Members should wait until you receive your EOB from BCBS before you pay any anesthesia or pathology claim which is part of a colonoscopy procedure. The EOB will indicate whether or not these ancillary claims have already been identified as being part of a colonoscopy and reprocessed at 100%. If the EOB shows these claims were processed subject to deductible and coinsurance, please call the BCBS Customer Service phone number on the back of your ID card and alert the Care Connected team member these claims are part of your colonoscopy service. The BCBS Care Connected representative will make certain your ancillary claims are linked to your colonoscopy and are reprocessed at 100%. A new EOB will be sent to you for your records.

### **Important Reminder:**

## **Over Age Dependent Coverage Terminations Occur at the End of the Calendar Year**



Under the Patient Protection and Affordable Care Act (PPACA), a dependent child(ren), regardless of financial, academic, residential, marital or employment status is eligible for benefits under your medical plan. Under the ICUBA Medical Plan, coverage for an overage dependent terminates on the last day of the calendar year in which your child turns 26 years of age. If your dependent turned 26 during the 2020 calendar year, he/she will be terminated from the ICUBA plan effective December 31, 2020. Your child(ren) will be given the option to elect COBRA (for up to 36 months) or they may look for a replacement exchange policy at <http://GetInsured.com/ICUBA>.

**Please note:** Disabled dependent child(ren) may be eligible for coverage after age 26 with appropriate documentation.

If you have additional questions, please contact your HR department. You may also contact ICUBA Benefits Administration at 1-866-377-5102 or email us at [benefitsadministration@icuba.org](mailto:benefitsadministration@icuba.org).