

Katie Beckett: Health Reimbursement Account (HRA)

Inspira HRA Debit Card, Online Portal and Mobile App

What services are included in the HRA Benefit?

- Copays and deductibles
- Therapies to include: Speech, Occupational, Physical, ABA, and Non-Traditional Therapies (music, aquatic, etc.)
- Medical Equipment and Supplies
- Orthotics
- Vision, Dental, Orthodontics
- Respite
- Prescriptions
- Post-tax Health Insurance Premium Assistance Reimbursement (Cost of child only)

Setting up your HRA Benefit

Your HRA card will arrive in a plain white envelope in the parent's name and contain instructions on how to set up the account. You will log into the Inspira online portal at www.inspirafinancial.com or download the Inspira mobile app to review your HRA balance, submit claims and check claims status.

- **Your ID number** – Your **child's social security number**.
- **Name**- The name of the parent.
- **Date of Birth**- The **parent's date of birth**.
- **If your account includes an Inspira Card®**, be sure to have it nearby. You'll need to enter the last 8 digits of your card number after this page.

Additional information regarding the Inspira online portal are located at [Inspira Reimbursement Quick Reference Guide](#). For information on the Inspira mobile app, go here: [Inspira Mobile Application Flyer](#).

*The HRA services **do not cover services** that were received before the service was authorized. You can **find out the date when your HRA service was approved** by asking your DDA/agency Case Manager.*

How to use the HRA Benefit

The Inspira card can be used at medical offices such as hospitals, doctors' offices, therapy offices, vision providers, and dental offices. When using the card, it's important to **run it as**

credit, not debit.

If you can't use the Inspira card, you can use your personal debit/credit card and submit for reimbursement. Receipts must be submitted to **validate all card purchases (on the Inspira Card and your personal reimbursement)**, and some purchases require a Letter of Medical Necessity (LOMN) from a doctor to be an eligible expense.

Letter of Medical Necessity

Inspira requires a [Letter of Medical Necessity \(LOMN\) Form](#) from the healthcare provider to confirm the expenses needed to treat a specific diagnosis. You must take this form to your child's physician or therapist, such as: pediatricians, specialists, medical doctors, physician's assistants, licensed/registered nurse practitioners, or occupational/physical/speech therapists. Multiple expenses can be itemized on one form. If the form is not available or your doctor needs more room, a statement on letterhead from the medical provider detailing each diagnosis and expense can also be submitted. The letterhead should include the following information:

- Employer Name: State of Tennessee Katie Beckett HRA
- Member Number: last 4 digits of child's social security number
- Duration of approval: Length of time that child is in the Katie Beckett program
- Child's medical diagnosis AND
- What is the medical need AND
- **How does this item treat the medical need.**

Ensure that the letter includes HOW the item will TREAT the child's medical condition. Be specific about the item especially if it is nontraditional.

Example: Puzzles will help my child's Autism by providing an outlet for stimming behaviors. (Puzzles are not typically medically necessary but they are in this case.)

Reimbursement Claims MUST include the following information:

- Provider or Merchant Name
- Type of Expense (Medical)
- Date of Service (**cannot be a future expense**)
- Child's Name
- Child's Date of Birth
- Last 4 digits of child's social security number
- Description of service (must be itemized to show WHAT this charge was for)

- Explanation of Benefits (EOB) or a statement stating there is no EOB (parent's can write this on the receipt/claim or type a letter to attach)
- The "final" amount you owe (after insurance has been applied)
- Letter of Medical Necessity
 - **TIP:** Use a highlighter (edit in PDF) to highlight the date, item title/description, price with tax, etc. You can also edit your LOMN to highlight the matching item/justification. This will make it easier for the Payflex/Inspira reviewer to find the information and less likely to deny the claim based on "insufficient information".

Frequently Asked Questions (FAQs):

- The HRA funds left over from one calendar year **do NOT carry over** into a new year.
- There is a **daily spending limit of \$2,650** for the Inspira card. (However, you can call Inspira to get an increase in your daily spending limit if you need to purchase something beyond the \$2,650 cost.)
- There is **NO LIMIT** on the amount of respite you can use or the hourly amount that you can pay someone. (Example: You could spend all \$10,000 on respite).
 - The easiest way to get reimbursed for respite is to fill out the following form and submit it to Payflex under the **Medical** category. If you submit this form, you **DO NOT** have to submit proof of payment such as a copy of the receipt, check, Venmo screenshot. You just need to submit this form in its entirety.
 - The respite form: [KB Blank Respite Form \(2\).docx](#)
 - Ensure the document is filled out completely
 - Respite provider name: person who is providing the childcare
 - Respite provider signature: person who is providing the childcare must sign
 - Fill in the dates of service, start/end time, # of hours, hourly rate and amount paid
 - Add the total number of hours at the bottom
 - Add the total cost of those hours underneath in "total invoice"
 - Print and sign your name
 - Date
 - Submit to Inspira under the "**medical**" category
- You can receive reimbursement for mileage related to medical appointments.
 - You will need to submit the following information:
 - Mileage Log ([found here](#))
 - Medical visit itemized receipt
 - This could be a visit summary form or discharge paperwork. It needs to show the **child was in attendance for that appointment at that time and place.**
 - Insurance Explanation of Benefits (EOB) for the appointment