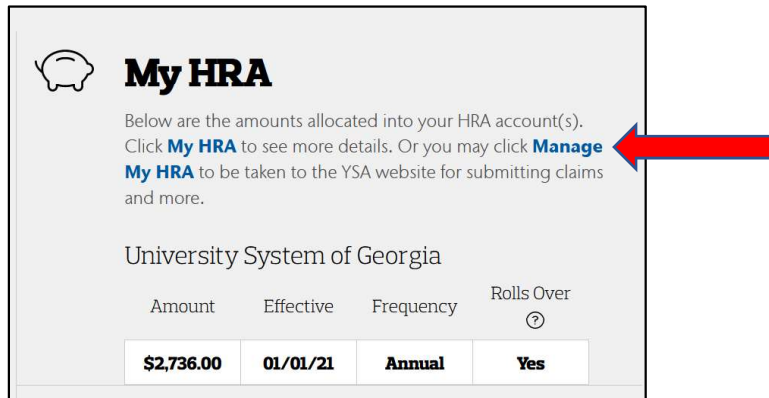


Checking Your Spending Account (YSA) Balance

- 1) Go to **retiree.aon.com/USG**.
- 2) Click on the **Log In** link located at the top right corner of your screen. (**Note:** If you do not have an account, follow the onscreen instructions to **Activate Your Account**.)
- 3) Enter your **Username** and **Password**. (**Note:** If you have forgotten or misplaced your login credentials, click on the **“I forgot my username”** or **“I forgot my password”** links and follow the onscreen retrieval instructions.)
- 4) Click on the **Log In** button.
- 5) If prompted to save your login credentials, select **Save** or **Don't Save**. (**Important:** We recommend that you select **Don't Save** and write down your login credentials to store in a safe place.
- 6) Click on the **Manage My HRA** link located under the **My HRA** section on the right side of the screen.



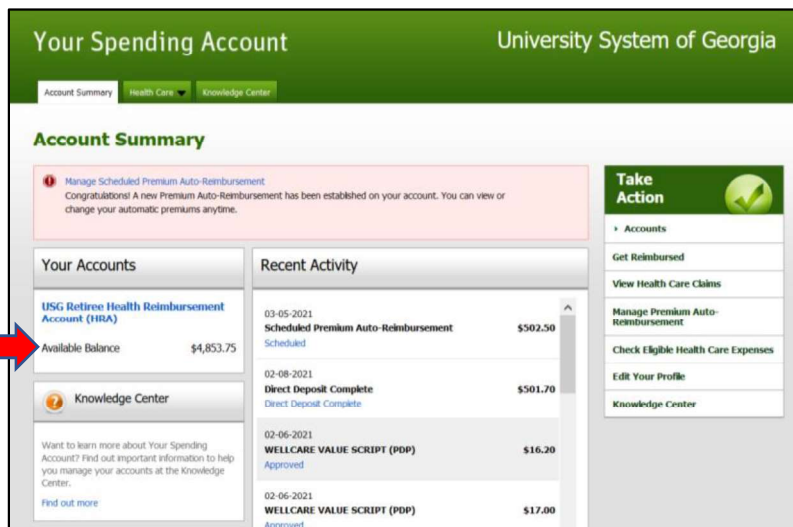
My HRA

Below are the amounts allocated into your HRA account(s). Click [My HRA](#) to see more details. Or you may click [Manage My HRA](#) to be taken to the YSA website for submitting claims and more.

University System of Georgia

Amount	Effective	Frequency	Rolls Over
\$2,736.00	01/01/21	Annual	Yes

- 7) Click on the **Continue to Site** button.
- 8) Your **Available Balance** will be displayed on the left side of the screen as shown in the example below. **Note:** If your spouse also receives an HRA from the University System, his/her balance will be included in the **Available Amount** displayed on the screen.



Your Spending Account University System of Georgia

Account Summary Health Care Knowledge Center

Account Summary

Manage Scheduled Premium Auto-Reimbursement
Congratulations! A new Premium Auto-Reimbursement has been established on your account. You can view or change your automatic premiums anytime.

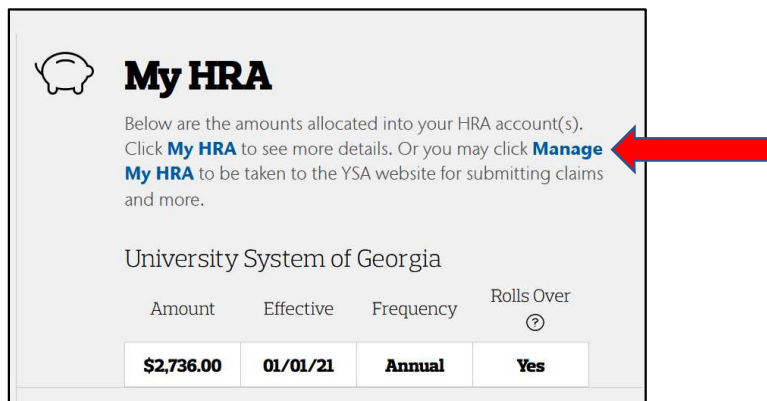
Your Accounts	Recent Activity
USG Retiree Health Reimbursement Account (HRA) Available Balance \$4,853.75	03-05-2021 Scheduled Premium Auto-Reimbursement \$502.50 Scheduled
Knowledge Center Want to learn more about Your Spending Account? Find out important information to help you manage your accounts at the Knowledge Center. Find out more	02-08-2021 Direct Deposit Complete \$501.70 Direct Deposit Complete
	02-06-2021 WELLCARE VALUE SCRIPT (PDP) \$16.20 Approved
	02-06-2021 WELLCARE VALUE SCRIPT (PDP) \$17.00 Approved

Take Action

- Accounts
- Get Reimbursed
- View Health Care Claims
- Manage Premium Auto-Reimbursement
- Check Eligible Health Care Expenses
- Edit Your Profile
- Knowledge Center

Adjusting Your Monthly Reimbursements

- 1) Go to **retiree.aon.com/USG**.
- 2) Click on the **Log In** link located at the top right corner of your screen. (**Note:** If you do not have an account, follow the onscreen instructions to **Activate Your Account**.)
- 3) Enter your **Username** and **Password**. (**Note:** If you have forgotten or misplaced your login credentials, click on the **“I forgot my username”** or **“I forgot my password”** links and follow the onscreen retrieval instructions.)
- 4) Click on the **Log In** button.
- 5) Click on the **Manage My HRA** link located under the **My HRA** section on the right side of the screen.



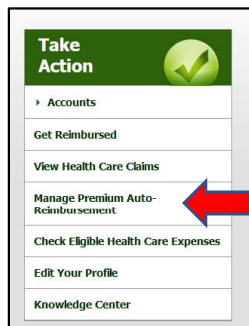
My HRA

Below are the amounts allocated into your HRA account(s).
Click [My HRA](#) to see more details. Or you may click [Manage My HRA](#) to be taken to the YSA website for submitting claims and more.

University System of Georgia

Amount	Effective	Frequency	Rolls Over
\$2,736.00	01/01/21	Annual	Yes

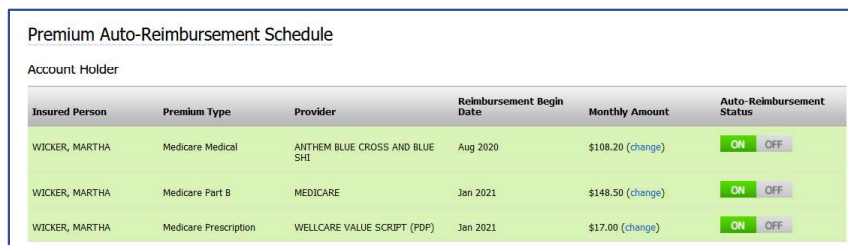
- 6) Click on the **Continue to Site** button.
- 7) Click on the **Manage Premium Auto-Reimbursement** link located on the **Take Action** menu.



Take Action

- Accounts
- Get Reimbursed
- View Health Care Claims
- Manage Premium Auto-Reimbursement**
- Check Eligible Health Care Expenses
- Edit Your Profile
- Knowledge Center

- 8) Scroll down the page to the section labeled **Premium Auto-Reimbursement Schedule**.



Premium Auto-Reimbursement Schedule

Account Holder

Insured Person	Premium Type	Provider	Reimbursement Begin Date	Monthly Amount	Auto-Reimbursement Status
WICKER, MARTHA	Medicare Medical	ANTHEM BLUE CROSS AND BLUE SHI	Aug 2020	\$108.20 (change)	<input checked="" type="checkbox"/> ON <input type="checkbox"/> OFF
WICKER, MARTHA	Medicare Part B	MEDICARE	Jan 2021	\$148.50 (change)	<input checked="" type="checkbox"/> ON <input type="checkbox"/> OFF
WICKER, MARTHA	Medicare Prescription	WELLCARE VALUE SCRIPT (PDP)	Jan 2021	\$17.00 (change)	<input checked="" type="checkbox"/> ON <input type="checkbox"/> OFF

- 9) To conserve funds, you may change the **Monthly Amount** reimbursed for each premium to a lesser amount or toggle the **Auto-Reimbursement Status** from **On** to **Off**. For example, if you anticipate running out of funds before the end of the year, you may click on the **Change** link adjacent to one or more premiums listed in the chart and reduce the monthly reimbursement. In the screenshot above, the total of monthly reimbursements is $\$108.20 + \$148.50 + \$17.00 = \273.70 . If you multiply the total $\$273.70 \times 12$ months, you would need $\$3,284.40$ in your YSA to be fully reimbursed. However, our annual allotment is only $\$2,736$, which means your requests for reimbursement would exceed that amount. In order to receive equal reimbursement amounts each month without running out of money, subtract your annual allotment of $\$2,736$ from your premium total ($\$3,284.40$ in this example). So, $\$3,284.40 - \$2,736 = \$548.40$, which corresponds to the overage. Now, divide the overage by 12 to determine the amount you need to reduce one of the monthly premiums by to avoid running out of funds before the end of the year. In this example, the overage of $\$548.40 / 12 = \45.70 . Therefore, we need to deduct $\$45.70$ from one of our monthly premiums. For this example, I will deduct $\$45.70$ from the Medicare Part B monthly reimbursement of $\$148.50$, which yields $\$148.50 - \$45.70 = \$102.80$. Click on the **Change** link adjacent to the **Monthly Amount** for your **Medicare Part B** premium. (**Note:** This example assumes you are changing the monthly amount before your January reimbursement. If you make the adjustment before your February reimbursement, you would divide the overage by 11 instead of 12 because there are only 11 reimbursements remaining for the year. Likewise, if you make the change before March, you would only divide by 10.)

Premium Auto-Reimbursement Schedule

Account Holder

Insured Person	Premium Type	Provider	Reimbursement Begin Date	Monthly Amount	Auto-Reimbursement Status
WICKER, MARTHA	Medicare Medical	ANTHEM BLUE CROSS AND BLUE SHI	Aug 2020	\$108.20 (change)	ON OFF
WICKER, MARTHA	Medicare Part B	MEDICARE	Jan 2021	\$148.50 (change)	ON OFF
WICKER, MARTHA	Medicare Prescription	WELLCARE VALUE SCRIPT (PDP)	Jan 2021	\$17.00 (change)	ON OFF

- 10) Enter the **New Amount** ($\$102.80$ in this example) for the premium reimbursement and click on the **Next** button.

Your Spending Account University System of Georgia

Account Summary Health Care Knowledge Center

Change Premium Amount

Change Premium Amount

Premium

Insured Person: WICKER, MARTHA

Type: Medicare Part B

Provider: MEDICARE

Begin Date: Jan 2021

Current Amount: \$148.50

New Amount: (\$1.00-\$148.50)

- 11) Click on the **Done** button. You will be returned to the **Premium Auto-Reimbursement Schedule** reflecting your reduced monthly reimbursement for your **Medicare Part B** premium.

Premium Auto-Reimbursement Schedule

Account Holder

Insured Person	Premium Type	Provider	Reimbursement Begin Date	Monthly Amount	Auto-Reimbursement Status
WICKER, MARTHA	Medicare Medical	ANTHEM BLUE CROSS AND BLUE SHI	Aug 2020	\$108.20 (change)	ON OFF
WICKER, MARTHA	Medicare Part B	MEDICARE	Jan 2021	\$102.80 (change)	ON OFF
WICKER, MARTHA	Medicare Prescription	WELLCARE VALUE SCRIPT (PDP)	Jan 2021	\$17.00 (change)	ON OFF

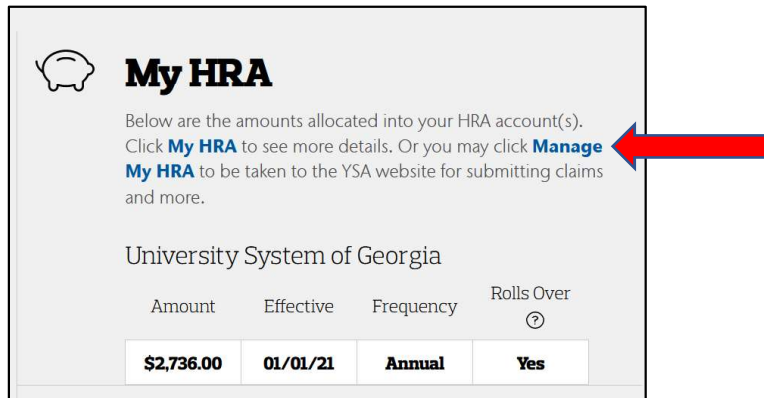
Submitting a New Claim for Monthly Premium Auto-Reimbursement

To submit a **NEW** claim for auto-reimbursement, you will need the letter that you received from your medical or pharmacy plan stating your monthly premium amount for 2021. You will have the option to either upload or fax/mail the letter from your carrier as documentation to support your claim. If you plan to upload the letter, you will first need to either scan it or take a picture of it with your phone before starting the steps below.

Important: If you did not change coverage (medical or pharmacy) from last year, you do **NOT** need to submit a new claim. Instead, just wait a couple of months and your carrier will send your new monthly premium amount to AON, and they will adjust your reimbursement accordingly.

Note: If you did not receive a letter or have misplaced it, contact the insurance carrier (e.g., Anthem, Aetna, etc.) directly to request documentation verifying your 2021 premium amount.

1. Log into the **Account Holder's** (USG retiree) account at **retiree.aon.com/USG**.
2. Click on the **Manage My HRA** hyperlink under the section labeled **My HRA**.



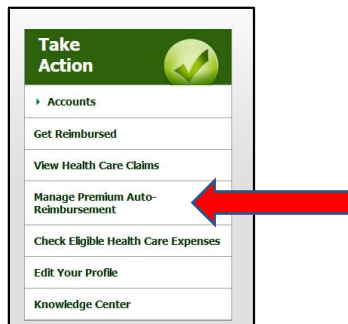
My HRA

Below are the amounts allocated into your HRA account(s).
Click [My HRA](#) to see more details. Or you may click [Manage My HRA](#) to be taken to the YSA website for submitting claims and more.

University System of Georgia

Amount	Effective	Frequency	Rolls Over
\$2,736.00	01/01/21	Annual	Yes

3. Click on the **Continue to Site** button.
4. Click on **Manage Premium Auto-Reimbursement** on the **Take Action** menu (right side of screen).



Take Action

- Accounts
- Get Reimbursed
- View Health Care Claims
- Manage Premium Auto-Reimbursement
- Check Eligible Health Care Expenses
- Edit Your Profile
- Knowledge Center

5. Click on the **Create New Claim** button.
6. Select the method for submitting your documentation (**Upload** or **Fax/Mail**).

7. Under **Expense 1**, select **Premium** for *Type of Service* and enter the name of your insurance carrier (e.g., Anthem BCBS) for *Insurance Provider*. Under **Premium**, choose the *Type* of premium (e.g., Medicare Medical), and enter the **Amount** of your monthly premium. Select **Monthly** for *Frequency*. If you get a popup window asking if you want to set up Premium Auto-Reimbursement, click the button labeled “**Yes, Set Up Premium Auto Reimbursement**”. When you return to the previous screen, verify that **Yes** is selected for *Set Up Premium Auto-Reimbursement*, and enter the **Begin Date** for your premium (e.g., January 1, 2020). Under **Insured Person**, enter the *Name*, *Date of Birth*, and *Relationship* of the insured person.

Note: (For *Type* of premium, you may select **Dental** for your dental premium, **Medicare Medical** for your medical premium, **Medicare Prescription** for your Part D prescription premium, or **Vision** for your vision premium). Medicare Part B is explained in a separate set of instructions.

8. If you are submitting more than one type of premium, click on the **Add New Expense** link and **repeat step 7**.
9. Click **Continue**.
10. Review the information; make changes if necessary.
11. Click **Continue**.
12. If you chose to upload your documentation, then upload the file(s) verifying your monthly premium amount(s). Otherwise, you will be instructed how to fax/mail the documents.
To upload a file, click on the **Browse** button and locate the file. Then, click on the **Upload** button. Repeat if you have more than one file to upload.
13. Click **Submit Claim**.

Note: The submitted claim for auto-reimbursement will appear as **Pending** on your **Account Summary** until it is approved.

Important: After your new claim is processed and approved, you should verify that previous auto-reimbursements are labeled as discontinued on the **Premium Auto-Reimbursement Schedule**, which is located under **HRA<Manage My HRA<Manage Auto-reimbursements** in your YSA account. If your previous auto-reimbursements are not labeled as discontinued, you should turn them **OFF**.

Submitting a Claim for Non-Premium Expenses

List of Eligible Expenses:

https://www.usg.edu/hr/assets/hr/benefits_docs/University_System_of_Georgia_HRA_Expense_List.pdf

To submit a claim for non-premium expenses (e.g., copays/deductibles, hearing aids, medical equipment, etc.), you will need a copy of your receipt. As you complete the steps below, one of your options will be to upload a digital copy of your receipt. If you choose to use this digital option, we recommend that you either scan the receipt or take a picture of it with your phone before you start the steps below.

1. Log into the **Account Holder's** (USG retiree) account at **retiree.aon.com/USG**.

2. Click on the **Manage My HRA** hyperlink under the section labeled **My HRA**.

Amount	Effective	Frequency	Rolls Over
\$2,736.00	01/01/21	Annual	Yes

3. Click on the **Continue to Site** button.
4. Click **Get Reimbursed** on the **Take Action** menu (right side of screen).

- Accounts
- Get Reimbursed
- View Health Care Claims
- Manage Premium Auto-Reimbursement
- Check Eligible Health Care Expenses
- Edit Your Profile
- Knowledge Center

5. Select the method for submitting your documentation (**Upload** or **Fax/Mail**).
6. Under **Expense 1**, select the *Type of Service* (e.g., Dental), and enter the *Date of Service*. Enter the name of the *Service Provider* (e.g., Cherokee Family Dentistry), name of *Patient*, and the *Requested Amount*.
7. If you are submitting more than one expense, click on the **Add New Expense** link and **repeat step 6**.
8. Click **Continue**.
9. Review the information; make changes if necessary.
10. Click **Continue**.
11. If you chose to upload your documentation, then upload the file(s) verifying your expenses. Otherwise, you will be instructed how to fax/mail the documents. To upload a file, click on the **Browse** button and locate the file. Then, click on the **Upload** button. Repeat if you have more than one file to upload.
12. Click **Submit Claim**.

Note: The submitted claim will appear as **Pending** on your **Account Summary** until it is approved.

Submitting a Claim for Medicare Part B Monthly Premium Auto-Reimbursement

To submit a claim for reimbursement, you need to show written documentation (evidence) of your Monthly Premium Expense. To do this, use the form the Social Security Administration sends you in either late November or early December that tells you how much social security you will get the following year. This letter specifies your monthly deduction for your Medicare Part B premium. If you have misplaced this letter from Social Security, you will need to call them (1-800-772-1213) or go online at www.ssa.gov to request another copy.

As you complete the steps below, one of your options will be to upload a digital copy of this letter. To avoid timing out if you choose to use this digital option, we recommend that you either scan this letter or take a picture of it with your phone before you start these steps.

1. Log into your (USG Retiree) **HRA** account at retiree.aon.com/USG.
2. Click on the **Manage My HRA** hyperlink under the section labeled **My HRA**. (Note: AON plans to move this link to the top of the screen to make it more visible.)
3. Click on the **Continue to Site** button.
4. Click on **Manage Premium Auto-Reimbursement** on the **Take Action** menu (right side of screen).
5. Click on the **Create New Claim** button.
6. Select the method for submitting your documentation (**Upload** or **Fax/Mail**).

7. Under **Expense 1**, select **Premium** for *Type of Service* and enter **Medicare** for *Insurance Provider*. Under **Premium**, choose **Medicare Part B** for *Type of premium*, and enter the **Amount** of your Medicare Part B monthly premium (see your SS letter). Select **Monthly** for *Frequency*, select **Yes** for *Set Up Premium Auto-Reimbursement* and enter the **Begin Date** (e.g., January 2021). Enter the **Name**, **Date of Birth**, and **Relationship** of the **Insured Person** (*Account Holder* or *Dependent*).

Note: You may get a pop-up window for *Premium Auto-Reimbursement*. If so, select **Yes**.

8. Click **Continue**.
9. Review the information; make changes if necessary.
10. Click **Continue**.
11. If you chose to upload your documentation, then upload the file containing the letter from Social Security. Otherwise, you will be instructed how to fax/mail the documents.
To upload a file, click on the **Browse** button and locate the file. Then, click on the **Upload** button.
12. Click **Submit Claim**.

Note: The submitted claim will appear as **Pending** on your Account Summary until it is approved. If your Medicare Part B monthly premium changes next year, you will need to turn off the auto-reimbursement for the previous year and submit a new auto-reimbursement claim.

Upload Fax or mail

1. Attach an electronic copy or photo of the documents.
2. Send attached documents on this site.

1. Create a cover sheet on this site.
2. Print and sign the cover sheet.
3. Send cover sheet and documents.

Enter Expenses
You can enter up to 8 expenses. Choose **Add New Expense** if you have more expenses to enter.

Expense 1

Type of Service: Premium
Insurance Provider: MEDICARE

Premium

Type: Medicare Part B
Amount: \$ 148.50
Frequency: Monthly
Set Up Premium Auto-Reimbursement: Yes No Advantage of Premium Auto-Reimbursement
Begin Date: 01-2021

Insured Person

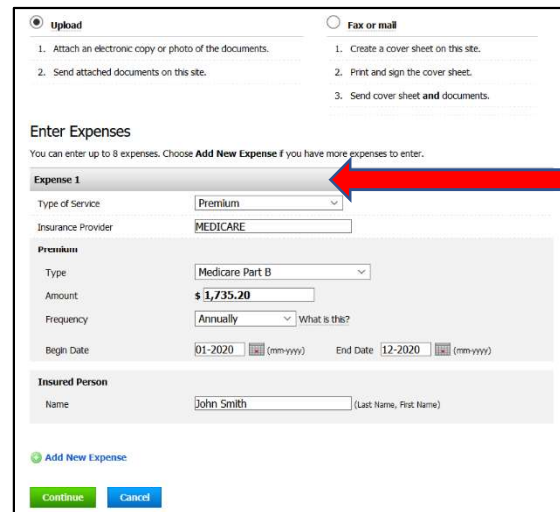
Name: John Smith
Date of Birth: 08-31-1955
Relationship: Account Holder

[Add New Expense](#)
[Continue](#) [Cancel](#)

Submitting a Claim for Medicare Part B Reimbursement for Previous Years

To submit a claim for reimbursement for Medicare Premiums paid in a previous year (prior to 2021), you will need your Social Security Benefit Statement--tax form SSA-1099, which is usually mailed to you in January to use in completing your federal income taxes. When you complete your taxes, you do not send this form with your taxes, so you probably saved it with your other tax documents for a particular year. If you have misplaced this form from Social Security, you will need to call them (1-800-772-1213) or go online at www.ssa.gov to request another copy for each of the years you intend to submit a claim for reimbursement from Your Spending Account.

1. Log into your (USG Retiree) **HRA** account at **retiree.aon.com/USG**.
2. Click on the **Manage My HRA** hyperlink under the section labeled **My HRA**. (Note: AON plans to move this link to the top of the screen to make it more visible.)
3. Click on the **Continue to Site** button.
4. Click on **Get Reimbursed** on the **Take Action** menu (right side of screen).
5. Select the method for submitting your documentation (**Upload** or **Fax/Mail**).
6. Under **Expense 1**, select **Premium** for *Type of Service* and enter **Medicare** for *Insurance Provider*. Under **Premium**, choose **Medicare Part B** for *Type of premium*, and enter the total annual **Amount** of your Medicare Part B premium (see your SS-1099 form). Select **Annually** for *Frequency* and enter the **Begin Date** (e.g., January 2020) and **End Date** (e.g., December 2020). Enter the **Name** of the **Insured Person**.
7. Click **Continue**.
8. Review the information; make changes if necessary.
9. Click **Continue**.
10. If you chose to upload your documentation, then upload the file containing the SS-1099 form from Social Security. Otherwise, you will be instructed how to fax/mail the document. To upload a file, click on the **Browse** button and locate the file. Then, click on the **Upload** button.
11. Click **Submit Claim**.



The screenshot shows a web form for submitting a claim. At the top, there are two radio buttons: 'Upload' (selected) and 'Fax or mail'. Below these are instructions for each method. The main section is titled 'Enter Expenses' and includes a note: 'You can enter up to 8 expenses. Choose **Add New Expense** if you have more expenses to enter.' The form is filled out for 'Expense 1'. The 'Type of Service' dropdown is set to 'Premium', and the 'Insurance Provider' is 'MEDICARE'. Under the 'Premium' section, the 'Type' is 'Medicare Part B', the 'Amount' is '\$ 1,735.20', and the 'Frequency' is 'Annually'. The 'Begin Date' is '01-2020' and the 'End Date' is '12-2020'. The 'Insured Person' name is 'John Smith'. At the bottom, there is a green 'Continue' button and a blue 'Cancel' button. A red arrow points to the 'Type of Service' dropdown menu.

Note: The submitted claim will appear as **Pending** on your Account Summary until it is approved.