

HRA with Claims Crossover



Health Reimbursement Arrangement (HRA) with Claims Crossover provides the fastest possible claims payment to employee participants without having to first file a claim or pay an eligible expense.

Here's how it works. After processing the group's medical claims, the insurance carrier compiles Explanation of Benefits (EOB) information into an electronic data interchange (EDI) file which is then shared with your benefits administrator. We use that information to automatically file an HRA claim in response to each eligible EOB. Often, an employee participant will receive the HRA claims payment at the same time, or even earlier, than they receive the carrier's EOB in the mail.

Advantages of Enabling Claims Crossover for Your HRA Plan

- Faster payment to employee participants with no need to submit HRA claims
- Automatic HRA claims filing based solely on EOB information
- Streamlined processing with increased accuracy
- HIPAA secure process
- 24/7 claims review via online HR and employee portals
- Can opt out per employee participant

Link Our Healthcare Debit Card for Pharmacy Purchases

Make it possible for your employee participants to access needed healthcare without worrying about either claims paperwork or out-of-pocket expenses. Couple your high deductible health plan (HDHP) with both a claims crossover enabled HRA and our proprietary healthcare debit card, restricted to cover only prescription copays.

Ask your benefits administrator for more information.



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