



Spousal Reimbursement Program FAQ

Eligibility & Coverage

Q: Am I eligible for spousal reimbursements after retirement? A: Yes. If both you and your spouse have completed at least 15 years of service in the district, you may continue to receive spousal reimbursements until age 65.

Q: What happens if my spouse retires while I remain employed? A: If your retired spouse has completed at least 15 years of service in the district, coverage will transfer to the active employees' plan. Reimbursements will continue to be processed, with payments issued to the active employee.

Q: Does relocation to another state affect my eligibility? A: While eligibility itself is not location-dependent, you must remain enrolled in a RUSD medical plan to receive reimbursements. Please note that out-of-state medical plans often have higher premiums and costs, which may deplete your available reimbursement funds more quickly. Reimbursements are only provided if funds remain in your account.

Q: When do spousal reimbursements terminate? A: Spousal reimbursements terminate when either employee reaches age 65.

Q: How much can an employee receive in reimbursements? A: The reimbursement amount depends on the plan premium you select. The maximum available reimbursement is calculated as: District contribution minus (dental, vision, and life insurance costs \times 10 monthly payments). Your available reimbursement funds are directly affected by your selected medical plan premium.

Reimbursement Process

Q: What is the processing timeline for reimbursements? A: Reimbursements are processed during the first week of each month, with exceptions during Winter Break and Spring Break periods.

Q: How do I submit reimbursement requests? A: Submit reimbursement requests through our online portal: <https://airtable.com/appSm39lmeMxHlSwa/pagcjTiFjHiOyu6SZ/form>

This link can also be found on the Risk and Benefits Department webpage under "Employee Health & Welfare Benefits."

Q: Is there a deadline for submitting receipts? A: Yes. Receipts should be submitted within 30 days of incurring the expense.

Q: Can I submit multiple receipts simultaneously? A: No. Please submit receipts individually. This practice ensures that if one submission requires additional documentation, your other reimbursements can still be processed without delay.

Q: Do unused reimbursement funds roll over to the next academic year? A: No. This benefit does not carry forward from year to year.

Eligible Expenses

Q: What qualifies as a reimbursable medical expense? A: A reimbursable medical expense is any service or product ordered by a physician for the employee's health.

Q: Which specific expenses are eligible for reimbursement? A: Eligible expenses include:

- Doctor's office visit co-pays
- Physician-prescribed medications (excluding over-the-counter products)
- Medically necessary services, including therapeutic massage (with physician's prescription)
- Co-pays for chiropractic visits (co-pays only)
- Licensed therapist counseling services

Q: Are dental and vision expenses reimbursable? A: No. Receipts for dental and vision services are not eligible for reimbursement.

Documentation Requirements

Q: What documentation is required for reimbursement? A: All receipts must include:

- Date of service
- Provider name
- Services rendered
- Patient name (family member receiving service)

Q: What documentation is required for prescription reimbursements? A: Prescription claims must include:

- Payment receipt
- Date of service
- Patient name

Q: Are credit card receipts acceptable documentation? A: No. Credit card receipts alone are not accepted as documentation.

Q: If my receipt is for a medically necessary massage, what additional documentation is required? A: A physician's prescription must accompany each massage therapy reimbursement request, even for recurring treatments.

Troubleshooting

Q: Why might my reimbursement request be denied? A: Common reasons for denial include:

- Insufficient information (missing date, provider, service details, or patient name)
- Prescription receipts lacking required details
- Missing payment verification
- Lack of service description

Q: What happens if my receipt is questioned? A: The reimbursement will be marked as "pending" and you will receive an email requesting additional documentation. Please respond promptly to ensure processing within the current month's cycle. Email corrections directly to Carianne in Risk Management rather than uploading to the submission portal.

Q: What if I've lost my receipt? A: While receipts are required, we may accept bank statement screenshots showing the payment on a case-by-case basis.

Administrative Details

Q: Why must I provide my email address when submitting receipts? A: Email addresses are required for communication regarding questions about submissions, monthly submission updates, and account balance notifications. The primary insured employee's email is required, though you may add alternate email addresses for non-primary spouses who handle submissions.

Q: Can reimbursement payments be issued to my spouse? A: No. Reimbursements are issued exclusively to the primary employee who carries the benefits.

Q: What file formats are acceptable for receipt submission? A: Please submit clear, complete images of receipts in standard picture formats or PDF. HEIC files cannot be processed, and partial receipt images are not acceptable.

Questions

For questions, please visit the Risk and Management Department website by clicking on the QR code below or please feel free to call or email us.



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