

Health Reimbursement Account (HRA)



Only those enrolled in the Cigna Medical Plan are eligible for the HRA

We strive to provide you a competitive benefits package. It's no secret health care costs continue to increase and the cost to provide health care coverage continues to escalate. Like many companies, we need to control these costs to stay competitive. At the same time, we want to be sure our health benefits do what they are intended to do, which is to help you and your family achieve and maintain your health potential.

For 2025, we will continue to offer a Health Reimbursement Arrangement (HRA). An HRA is an account that helps to cover your health care expenses incurred by you, your spouse, and your dependents. It comes with our Health Plan and helps to offset your deductible.

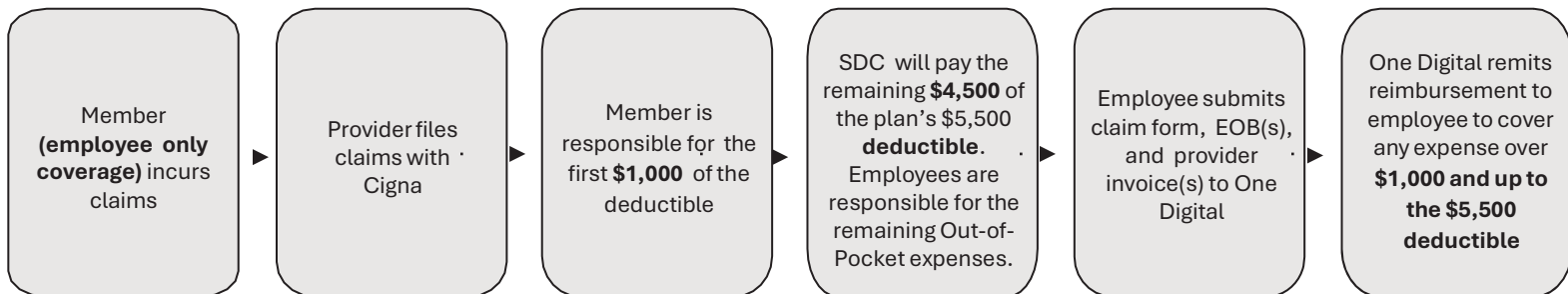
Note: The HRA only covers eligible in-network medical deductible expenses. Copays and coinsurance do not apply towards the deductible and are therefore not reimbursable through the HRA. The HRA does not cover any claims incurred under the dental or vision plans.

HRA's offer you the following advantages:

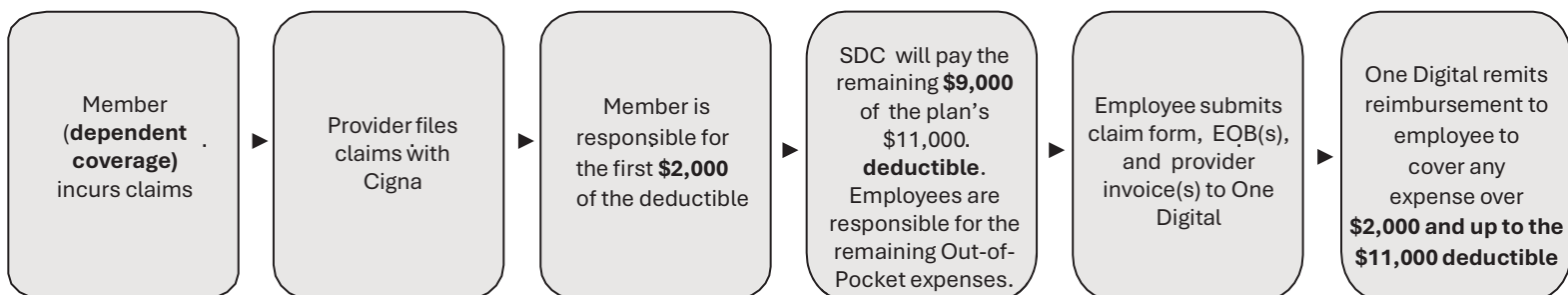
• **100% Company funded.** HRA's are paid solely with employer dollars. [SDC Nutrition's](#) deductible funding amounts for 2025 are as follows:

EE Only: \$4,500 EE + Spouse: \$9,000 EE + Child(ren): \$9,000 Family: \$9,000

• **Favorable tax treatment.** Coverage under an HRA and expenses reimbursed through the HRA are excludable from your gross income.

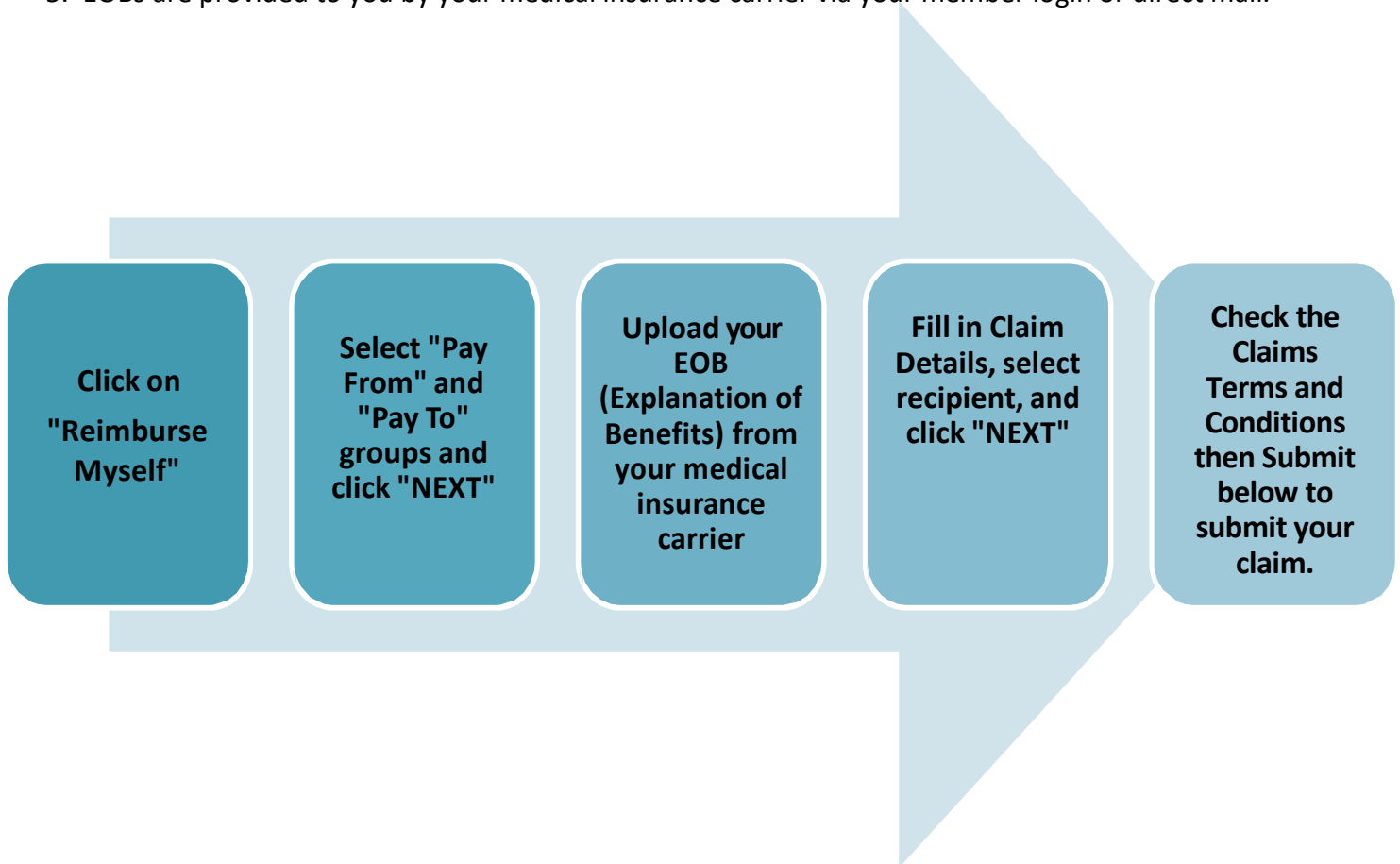


Or...



HRA ONLINE REIMBURSEMENT SUBMISSION INSTRUCTIONS

1. Please go to: <http://www.onedigital.com/pgh-claims>
2. If you are a first-time user, please use the initial login credentials below, otherwise, use your current login information.
3. Follow the steps below to upload your HRA claim for reimbursement.
4. For any medical service please have your **EOB (Explanation of Benefits)** as documentation to submit. This is required with your HRA claim submission to be reimbursed.
5. EOBs are provided to you by your medical insurance carrier via your member login or direct mail.



Initial Login Credentials

Username: first name initial, last name, last 4 of SSN (Example: jdoe1234)
Password: 6 digit date of birth **DDMMYY**, #, last 5 of SSN (Example: 150780#01234)

PLEASE NOTE: The above password DOB structure is **DDMMYY**

Initial Login Credentials expire after 6 months of no login activity – email below for a reset password

Trouble logging in for any reason? Please contact: pgh-claims@onedigital.com

Or by phone: **(724)-935-2310 x 3**