

The University of San Francisco Retirement Healthcare Savings Plan.

Put your retirement healthcare savings account to work.

A step-by-step guide.



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You have a tax-efficient way to manage health expenses.

Healthcare expenses can be among the largest costs you'll face in retirement, potentially absorbing a significant portion of your budget. And Medicare may not cover everything you need.

Your employer established a Retirement Healthcare Plan (RHP), a highly tax-efficient way for you to manage health expenses in retirement.

Once you've separated from service and are vested, you can use the accumulation in your RHP to get reimbursed—tax-free—for qualified medical expenses (QMEs) you and your spouse and eligible dependents incur on an ongoing basis.



Your RHP offers a triple tax-free benefit.

- 1. Tax-free employer contributions: Contributions made by your employer while you were working are not taxed, which enhances your savings.
- **2.** Tax-free investment earnings: The money in your RHP can grow tax free, allowing you to potentially increase your savings over time without tax implications.
- **3.** Tax-free reimbursement: When you withdraw funds for QMEs, those withdrawals are also tax free, helping you manage healthcare costs effectively.

What qualifies for reimbursement under the RHP?

You can be reimbursed for a wide range of out-of-pocket health expenses and qualified medical expenses not paid by insurance, including reimbursement of already-paid premiums for Medicare and other health insurance (such as long-term care insurance). Examples of reimbursable expenses:

Insurance premiums	Other expenses
 Medicare Supplement or Medicare Advantage premiums Medicare Parts B and D premiums Prescription drug plans Dental and vision plans Long-term care plans Pre-65 retiree medical plans Other post-65 insurance premiums COBRA premiums 	 Office visit copays Prescription drug copays Medical cost shares (deductibles, copays, coinsurance) Dental, vision and hearing care Medical equipment not covered by insurance

Visit irs.gov/publications/p502 to see a complete list of QMEs.



Additional coverage for out-of-pocket expenses

There are deductibles, coinsurance and copayments that Medicare and Medicare Supplement don't cover.

The reimbursement benefit helps cover your out-of-pocket costs for QMEs both routine and unexpected.

When does my eligibility begin?

If you've separated from service with your employer who sponsors the RHP and have fulfilled the vesting requirements for the plan, you become entitled to benefits, and TIAA will send you an entitlement notification.



Claims activation

When you're ready to access and make use of the RHP account balance for reimbursement of QMEs, complete and submit a **Claims Activation Form**, available at **tiaa.org**. You may also request a printed copy of the form by calling **877-554-1004** and selecting option 1.

Within 7 to 10 business days of our receipt of the completed Claims Activation Form, you'll receive a package from the third-party claims administrator, Optum Financial. This package will include a healthcare payment card and instructions on how to file claims for reimbursement of QMEs.

Note: Only the vested account balance is eligible to be used for reimbursement.



Who can submit claims for the reimbursement benefit?

While you're alive, either the account holder or spouse may submit claims. An additional debit card for your spouse can be ordered.

After your death, your surviving spouse or eligible dependents may submit claims from your account.

The TIAA healthcare payment card provides easy access to your funds.

The TIAA healthcare payment card offers you a convenient way to pay for expenses and allows you immediate access to healthcare funds. Rather than paying out of pocket for eligible expenses, filing a claim and waiting for reimbursement, use the card to access funds directly and pay the provider at the point of purchase. While you still need to submit receipts to substantiate purchases, you won't have to wait for money to be reimbursed to you.

The healthcare payment card is issued by Optum Financial and programmed to work only at merchant locations designated as healthcare merchants based on their merchant category code (MCC). Examples of qualified merchants include doctors' offices, pharmacies and hospitals. The card should only be used to pay for eligible medical expenses, and always save your receipts. You won't be able to use your card at unapproved healthcare merchant locations, nor can the card be used to pay insurance premiums. An alternative to using the TIAA healthcare payment card is to pay out of pocket and submit a request for reimbursement.



Important to know

Before using the card, you must transfer assets into the Nuveen Money Market Fund.

If there's not enough funds, the transaction may be denied or partially approved, requiring you to pay the difference with another form of payment.

If you prefer not to use the TIAA healthcare payment card, you'll pay out of pocket then submit a request for reimbursement.

Move your money from your Nuveen Lifecycle Mutual Fund into the Nuveen

Money Market Fund.

2.

Submit your claim online, through the mobile app or by returning a paper claim form in the mail or by fax. 3.

Have your reimbursement deposited into your bank account or be sent a check.

How to submit claims for the reimbursement benefit.



Moving money to the Nuveen Money Market Fund

Contact a TIAA representative at **877-554-1004** and select option 1 to move money into the fund. Log in to the TIAA secure website at **tiaa.org** to review your account balance and transfer assets to the Nuveen Money Market Fund.

You can make fund transfers among investment options at any time in amounts of \$1,000 or more (or the full value of the account if less than \$1,000).

Note: Claims are paid only from assets invested in the Nuveen Money Market Fund. The Nuveen Money Market Fund provides relative stability in your available account balance to ensure sufficient funds are maintained throughout the reimbursement process.



Using the online portal or mobile application

Your online account provides everything you need to manage your funds:

- Go to **tiaa.org**. Log in to the secure site and find Retirement Healthcare under *My Accounts*.
- File a claim: Click on *Visit Claim Center* from the *Quick Links* drop-down and follow the screen prompts to file a claim.
- View account details: Enjoy the convenience of real-time online access to account balances and transaction history.

Note: In the online portal, please take a moment to review and update your email address, phone number, bank information and dependent information under Settings and Preferences. This helps us stay in touch and ensure smooth processing for your future transactions.

Three ways to submit reimbursement requests

- Log in to the secure site at tiaa.org
- Use the <u>Optum Financial mobile application</u> to manage your account anywhere, anytime
- Mail to Optum Financial, Attention: Claims service center, P.O. Box 622337,
 Orlando, FL 32862-2337 or fax to 443-681-4601

General FAQs

What is a Retirement Healthcare Plan (RHP)?

An RHP is an employer-sponsored, tax-exempt medical benefit plan that allows you to get reimbursed tax free for your eligible out-of-pocket medical or dental expenses (i.e., expenses not paid for by insurance or any other benefit plan). RHPs operate under specific provisions of the Internal Revenue Code (IRC) and reimburse for QMEs incurred by you, your spouse or domestic partner, and other eligible dependents.

How does the plan work?

While employed, eligible employees received ongoing contributions to the RHP on a pretax basis. Reimbursements for qualified medical expenses after retirement are also tax-free. As a defined contribution plan, the only funds available in the RHP are the contributions made while employed and any investment returns on those contributions. Once the funds in the RHP are exhausted, you'll no longer be reimbursed for eligible healthcare expenses.

When can I start using the funds in the RHP to reimburse my eligible medical expenses?

You may start using your RHP funds once you've retired or separated from service from your employer and met the plan's vesting requirement.

How will eligible medical expenses be reimbursed?

The RHP claims administration is provided by Optum Financial. Once your claims are eligible, they can be paid using a provided healthcare payment card, and any receipts can be submitted by mobile phone, fax, email or online.

How are the funds in the RHP invested?

Contributions made by your employer are invested in a Nuveen Lifecycle Mutual Fund that has a date closest to the year you turned (or will turn) age 65. You may also self-direct how your RHP account is invested by selecting your own portfolio based on the investment options available.

Is the RHP an annual "use it or lose it?"

No, your RHP account balance carries over year to year.

What if I die before using the balance in my RHP? Will my survivors be able to use the funds in the RHP account?

If you die with funds remaining in your RHP account, your surviving spouse or domestic partner and other eligible dependents may continue to use funds for eligible medical expenses. If you die and have no eligible survivors, the remaining funds would be forfeited. The executor of your estate may spend down any remaining funds for any unreimbursed medical claims incurred prior to your death.

General FAQs (cont.)

If I leave my employer, can I roll my RHP balance into another RHP or another qualified retirement plan?

No. The funds in your RHP account must remain in your employer's plan and are only accessible for reimbursement of QMEs after your meet the plan's claims eligibility requirements.

Can I submit a reimbursement request for health plan premiums in advance?

Yes. You can be reimbursed for prepaying insurance premiums up to 12 months in advance. You'll need to submit an insurance statement specifying your contracted premium amount for the year or for the defined coverage period for which you're requesting reimbursement. Along with your insurance statement, you must submit proof you have prepaid premiums to the insurance carrier.

Can I set up recurring reimbursements?

Yes. You can request recurring monthly reimbursements for insurance premiums through the claims portal, eliminating the need to submit reimbursement each month for the same expense. You must submit supporting documentation clearly displaying a start date and end date for the specific premium. Examples of acceptable supporting documentation for recurring claims include but are not limited to Medicare award letters and carrier enrollment confirmation statements. Premiums will automatically be reimbursed at the beginning of each month for the prior month's coverage.

Is there a limit to the amount I can be reimbursed?

Yes. You can be reimbursed for QMEs up to the full balance your account. Reimbursements are processed from the available account balance in the Nuveen Money Market Fund. If a claim exceeds that balance, you may need to transfer funds from your Nuveen Lifecycle Mutual Fund to the Nuveen Money Market Fund to ensure your reimbursement is processed. You can transfer funds online at **tiaa.org**, through the TIAA app or by calling **877-554-2004**, Monday to Friday, 8 a.m. to 10 p.m. (ET).

How long does it take for funds to transfer to the Nuveen Money Market Fund?

Transfers are processed as of the close of business on the New York Stock Exchange, which is usually 4 p.m. (ET) Monday to Friday. Transfer requests received after close of business are processed as of the close of the next business day.

Can I continue to use my account if I return to work?

It depends on where you return to work. An Affordable Care Act (ACA) mandate provides that active account holders and any eligible dependents can't use the reimbursement benefit while employed in any capacity at the institution sponsoring the plan. This includes retirees rehired on a part-time or by-appointment basis. If you're rehired, your benefit entitlement and claims access will be suspended. Only when you're not employed by the institution can you and your eligible dependents use the reimbursement benefit.

The ACA mandate only applies if you're rehired by the institution sponsoring this plan. You may work anywhere else and utilize all the benefits.

General FAQs (cont.)

Are reimbursement payments sent via check or directly deposited into my bank account?

Reimbursement payments are mailed to your address on record unless you've requested they be deposited directly into your checking or savings account. Direct deposit can be set up through Optum Financial's website and mobile app. Payment can only be mailed to a U.S. address or directly deposited into a U.S. bank account.

What if I incur a medical expense outside of the United States?

Claims for medical expenses incurred outside of the United States are eligible for reimbursement provided they're translated to English prior to submission and submitted in English.

Payment can only be mailed to a U.S. address or directly deposited into a U.S. bank account.





Log in to **tiaa.org** to access your account.



Utilize the mobile apps to log in to your account through the **TIAA** or **Optum Financial app**.



Call **877-554-1004**, Monday to Friday, 8 a.m. to 10 p.m. (ET).



Retirement Healthcare Program Claims Activation Form

This form is used to activate claim reimbursements for participants who have satisfied the eligibility provision of their employer's Retirement Healthcare Plan.

To begin reimbursement of qualified medical expenses, please complete and submit this form. Once your completed form has been processed, you will receive a welcome kit containing more information about claim reimbursement options, including your Healthcare Payment Card.

Important: Claim reimbursements can only be paid from the TIAA-CREF Money Market Mutual Fund. You may need to transfer funds to the Money Market Mutual Fund from other funds prior to submitting claims.

Your Retirement Healthcare Plan may be used to pay for qualified medical expenses for you and, if your plan permits, for your spouse and eligible dependents. Eligible expenses are defined by Section 213(d) of the Internal Revenue Code. Your employer's Retirement Healthcare Plan may limit reimbursement for certain medical expenses. You may contact your former employer for questions regarding your Retirement Healthcare Plan or for a copy of the Summary Plan Description, which contains details regarding the employer's plan rules.

Note: Please be aware that, in some circumstances, submitting your claims activation form may make you ineligible to contribute to a Health Savings Account (HSA) and/or ineligible for other programs that may help with the cost of health insurance premiums, such as government subsidies. Please consult your legal or tax advisor for guidance.

INSTRUCTIONS

- 1. Complete each section of this Claims Activation Form using black ink.
- 2. Sign and date the form.
- 3. Make a copy and retain it for your records.

OPTION 1: Use the TIAA mobile app to quickly upload your completed document(s). It's as simple as taking a picture. Haven't downloaded the TIAA mobile app? Get it today in the **App Store** or **Google Play**.

- Tap the "Profile" icon in the lower-right corner of your main screen.
- Tap "Upload Files" in the options presented and follow the step-by-step instructions.

OPTION 2: If you're using your personal computer, here's what you'll need to do to upload your completed document(s):

- Log in to your tiaa.org account and select the "Statements & Documents" tab.
- Choose "Upload document(s)" from the options presented.
- · Select "Upload Files" and follow the step-by-step instructions.

OPTION 3: If you prefer to fax or mail this form, use the information provided below:

FAX: STANDARD MAIL: OVERNIGHT DELIVERY:

800-914-8922 (within U.S.)

TIAA

P.O. Box 1259
Charlotte, NC 28201-1259
Charlotte, NC 28262

Please allow 7 to 10 days for processing your request for claims activation.

If you have any questions about your Retirement Healthcare Plan, please call 877-554-1004, select option 1, weekdays, 8 a.m. to 10 p.m. (ET).





Retirement Healthcare Program Claims Activation Form Page 1 of 2

1. ACCOUNT HOLDER (FORMER EMPLOYEE) INFORMATION Please print using black ink.								
Title	First Name		M.I.	Last Na	ame			Suffix
Taxpaye	Security Number/ er Identification Number				Marital Star	tus Married	Gender Male	Female
	t Telephone Number	Extension Email Add	ress					
	t Number	Employer Name						



Retirement Healthcare Program Claims Activation Form

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2. SPOUSE AND/OR ELIGIBLE DEPENDENTS

*Federal tax law limits reimbursement of qualified medical expenses incurred by the participant, spouse and eligible dependents. Medical expenses incurred by nondependent domestic partners may be eligible for reimbursement subject to the rules of the employer's Retirement Healthcare Plan (see the Summary Plan Description for more details).

1. First Name	M.I. Last Name	Suffix
Relationship* (Spouse, Domestic Partner, Dependent)	Date of Birth (mm/dd/yyyy)	
Social Security Number/ Taxpayer Identification Number Gender Male	Female	
2. First Name	M.I. Last Name	Suffix
Relationship* (Spouse, Domestic Partner, Dependent)	Date of Birth (mm/dd/yyyy)	
Social Security Number/ Taxpayer Identification Number Gender Male	Female	
3. SIGN AND DATE FORM		
Relationship to Participant: Self Spouse Eligible Dependent	Other	
Please sign your full legal name with suffix, if applied	cable, using black ink. Digital signatures are not accepted.	
Your Signature	Today's Date (mm/dd/yyyy)	
Name (please print)	Daytime Telephone Number	



Optum Financial®



How to Submit a Claim

We offer three easy ways for you to access your healthcare account funds. For fastest results, we encourage you to use your healthcare payment card (if applicable) or to submit your claim online.

Payment card

- 1. Use your healthcare payment card to directly pay for services at eligible healthcare locations such as doctor's offices, hospitals, and pharmacies.
- 2. **Save your receipts.** When you swipe the card, a claim is created for you and eliminates the need for you to fill out a claim form. However, documentation may still be required. If a receipt is needed, you will be notified by email or letter within two weeks of your payment card swipe. You can also review if your claim requires receipts online by logging into your online account and visiting the Claim Center.

Online claim submission

- 1. Go to <u>tiaa.org</u> and sign in with your username and password. Under Account Home, click on "Retirement Healthcare Savings Plan Claims Administrator".
- 2. Follow the onscreen instructions to enter a new claim. Enter the requested information about your claim and continue through the screens to confirm and submit the claim.

Paper claim submission

- 1. If you didn't use your payment card and are unable to access the internet, complete the Manual Claim Form.
- 2. Fax it with itemized receipts or other documentation to 1-443-681-4601. When you fax the Manual Claim Form and supporting documentation, there is no need to follow up with a hard copy in the mail. Remember to keep the original claim form and supporting documents for your records.
- 3. If you choose to mail your claim form and documentation instead of faxing, the address is:

Claims service center PO Box 1000 Allen Park MI 48101-9998

Claim form

Use this form to submit your claims for reimbursement of eligible expenses paid out of pocket that have not already been submitted.

- <u>Do not use this form</u> if expenses were already paid with your healthcare payment card.
- <u>Do not use this form</u> if you already submitted this claim online.
- Complete all entries on this submission form. Please print or type.
- Sign and date this form.
- Fax or mail it, along with the required documentation, to the claims department. (See submission instructions below.)

Personal info	vm otion						
Name of empl							
Employee name (last name, first name)				Social Security Number			
Documentation	on required						
You must subr date of service acceptable. Ex	mit documentation wi e and amount charge xamples of acceptabl	d. Cancelled checks, cr e documentation includ	edit card rece e a copy of th	lude the patient's name, de ipts or balance forward sta e Explanation of Benefits (I ed pharmacy receipt (if app	tements are not EOB) from your		
Claim Details							
Date of service	Patient's name	Relationship to employee	Name of provider	Description of service	Amount requested		
				Total	\$		
Documentation	on required for recu	rring claims					
You must inclu be a cancelled	ude a copy of your he I check, credit card re	ealth plan coverage lette eceipt, or bank statemer	er <u>and</u> proof o nt.	f your premium payment. P	ayment proof can		
Request for r	ecurring claims						
Payment date	Member's name	Relationship to employee/retiree	Name of carrier	Plan type	Amount requested		
		□ Self		☐ Medicare Suppleme	ent		
		□ Spouse		☐ Medicare Advantag			
		☐ Eligible dependent		☐ Prescription Drug P			
		- 0.16		☐ Other health insurar			
		□ Self		☐ Medicare Suppleme			
		☐ Spouse		☐ Medicare Advantag☐ Prescription Drug P			
		☐ Eligible dependent		☐ Other health insural			
		□ Self		☐ Medicare Suppleme			
		☐ Spouse		☐ Medicare Advantag			
		☐ Eligible dependent		□ Prescription Drug Plan			
				☐ Other health insura	nce		
		□ Self		☐ Medicare Suppleme			
	□ Spouse			☐ Medicare Advantag	e		

		☐ Eligible dependent		☐ Prescription Drug Plan☐ Other health insurance			
				Total			
All recurring c	laims will pay at the s	same payment frequency	. Use separate f	orms to set different paymen	t schedules.		
One time payment Monthly automatic recurring payments (Documentation does not need to be provided for future months, unless the premium amount changes.)							
If monthly automatic recurring, provide final reimbursement date. Date will default to the end of the current calendar year. You will need to submit a new claim for the new calendar year if you wish to continue reimbursements after 12/31.							
Authorization	Authorization and certification						
Read carefully: This claim will not be processed without your signature. I certify that these expenses have been incurred by me, my spouse or my eligible dependent. The expenses have not been reimbursed and are not reimbursable under any other plan, such as an individual policy or my spouse's or dependent's plan. I understand that any amount reimbursed may not be used to claim any federal income tax deduction or credit on my or my spouse's income tax return. I attest that this submission is not a reimbursement for health insurance premiums paid by pre-tax payroll deduction. Signature Date							
Submission instructions							
For fastest res	sults, fax to: 1-443-68	1-4601	Or mail to:	Claims service center PO Box 1000 Allen Park MI 48101-9998			
If you have any questions, please contact Customer service at 1-877-554-1004, option 2.							

Flexible spending accounts (FSAs), dependent care assistance programs (DCAPs), health reimbursement arrangements (HRAs), Commuter and Parking Benefits, Tuition Assistance Plans, Adoption Assistance Plans, Surrogacy Assistance Plans, Wellness Benefits, and Lifestyle Accounts (collectively, "Employer-Sponsored Plans") are administered on behalf of your plan sponsor by Optum Financial, Inc. or ConnectYourCare, LLC. Employer-Sponsored Plans are not individually owned and amounts available under the Employer-Sponsored Plan are not FDIC insured.



This material is for informational or educational purposes only and is not fiduciary investment advice, or a securities, investment strategy, or insurance product recommendation. This material does not consider an individual's own objectives or circumstances which should be the basis of any investment decision.

This material does not take into account any specific objectives or circumstances of any particular investor, or suggest any specific course of action. Investment decisions should be made based on the investor's own objectives and circumstances.

Interests in any retiree healthcare plan discussed herein are offered solely by the employer.

Teachers Insurance and Annuity Association of America (TIAA) will provide services to the plan and may issue plan communications on behalf of the plan sponsor, in its capacity as a plan recordkeeper.

As with all mutual funds, the principal value of a Lifecycle Fund isn't guaranteed at any time, including at the target date, and will fluctuate with market changes. The target date approximates when investors may plan to start making withdrawals. However, you are not required to withdraw the funds at that target date. After the target date has been reached, some of your money may be merged into a fund with a more stable asset allocation.

Lifecycle Funds share the risks associated with the types of securities held by each of the underlying funds in which they invest. In addition to the fees and expenses associated with the Lifecycle Funds, there is exposure to the fees and expenses associated with the underlying mutual funds.

You could lose money by investing in the Nuveen Money Market Fund. Although the Fund seeks to preserve the value of the shares at \$1.00 per share, it cannot guarantee it will do so. An investment in the Fund is not insured or guaranteed by the Federal Deposit Insurance Corporation or any other government agency. The Fund's sponsor has no legal obligation to provide support to the Fund, and you should not expect that the sponsor will provide financial support to the Fund at any time.

Investing may not be suitable for everyone. Before making any investments, you should carefully consider the investment objectives, risks, charges and expenses of any mutual fund before investing. A prospectus and, if available, a summary prospectus containing this and other important information can be obtained by visiting the fund sponsor's website. Please read the prospectus carefully before investing.

The TIAA group of companies does not provide legal or tax advice. Please consult your legal or tax advisor.

TIAA products may be subject to market and other risk factors. See the applicable product literature, or visit **tiaa.org** for details. Investment, insurance, and annuity products are not FDIC insured, are not bank guaranteed, are not deposits, are not insured by any federal government agency, are not a condition to any banking service or activity, and may lose value.

TIAA Trust, NA., provides investment management, custody and trust services.

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