

STATE OF DELAWARE
Consumer Directed Health (CDH) Gold Plan's
Health Reimbursement Account (HRA) Fund and Deductible

Proration of HRA Funds and Deductible

As an enhancement to the State of Delaware Group Health Insurance Program's CDH Gold Plan, the State provides funding to the HRA Fund upon member's enrollment. Typically, the State allocates funds to each member's HRA Fund effective at the beginning of each plan year, July 1. Each plan year begins on July 1 and ends on June 30. However, when a member enrolls or changes tier level (an example: from individual to family), the HRA Fund is prorated in accordance with the effective date of the enrollment or change in tier level. The chart below provides the time periods and level of proration.

Date of Enrollment or Tier Change	HRA Fund per Individual	HRA Fund per Family
July 1 – September 30	\$1,250	\$2,500
October 1 – December 31	\$937.50	\$1,875
January 1 – March 31	\$625	\$1,250
April 1 – June 30	\$312.50	\$625

The deductible remains the same regardless of date of enrollment or tier change. The chart below provides the deductible throughout the entire plan year.

Deductible Individual	\$1,500
Deductible Family	\$3,000

Highmark Blue Cross Blue Shield Delaware (Highmark Delaware) and Aetna administer the CDH Gold Plan for the State of Delaware's Group Health Insurance Program.

Members with concerns or questions should contact their plan's administrator at:
 Highmark Delaware's Customer Services at 1-800-633-2563
 Aetna's Customer Services at 1-877-542-3862