



State of New Jersey • Department of the Treasury

**DIVISION OF PENSIONS & BENEFITS — STATE HEALTH BENEFITS
PROGRAM (SHBP) — LOCAL GOVERNMENT**

P.O. Box 299, Trenton, NJ 08625-0299

**HEALTH REIMBURSEMENT ACCOUNT/ARRANGEMENT
(HRA) RENEWAL**

This form may only be used to renew existing HRA approvals when there are no changes or when the only change is the yearly contribution amount.

Employer Name _____ Health Benefits Employer ID Number _____ - _____

HRA for the upcoming plan year, indicate renewal plan year _____

HRA base plan(s) _____ , _____

HRA contribution amount for the upcoming plan year _____

Employer contact _____

Employer contact phone number _____ Email _____

Broker contact (if applicable) _____

If you are making any changes to the HRA agreement other than yearly contribution amount, including a change in the base plans, you must submit the documents listed on page 2.

By my signature, I attest there are no changes to the HRA arrangement, including any changes to the base plan, and that I have answered the questions on the *Health Reimbursement Account/Arrangement (HRA) Renewal Form* truthfully, to the best of my knowledge, information, and belief. Further, I understand that any person who knowingly and willfully makes any false statement, misrepresentation, concealment of fact, or any other act of fraud in submitting this *HRA Renewal Form* is subject to penalty under perjury and punishment inclusive of civil and/or administrative remedies, as well as criminal prosecution to which may provide for punishment of a fine or imprisonment.

Signature

_____/_____/_____
Date

Please email completed renewal form or documents to: HRA@treas.nj.gov

Documents required for any changes other than the contribution amount (this includes any changes to the base plan, including the “26” version of the current HRA base plan)

- Client Application and financial exhibits
- Account Service Agreement
- Business Associate Agreement
- 1 page summary of benefits
- Summary Plan Description
- HRA Plan Document
- Appendix A
- Memorandums Of Agreement/Understanding (MOA/MOU) for all unions
- Resolution to offer HRA