

# FUNDING YOUR 2026 HRA

There are many ways to fund your Health Reimbursement Arrangement (HRA) in 2025 and avoid a higher deductible in 2026. Here's how you can earn HRA funding up to a maximum of **\$500 for employee-only coverage** and **\$1,000 for family coverage**.



**REMEMBER:**

If you have family coverage, both you and your spouse must complete the Health Profile and Health Related Actions to earn your maximum HRA funding.

## ANNUAL HEALTH PROFILE When available in the third quarter of 2025.

In order to receive the maximum amount of HRA funding for 2026, you must complete your annual Health Profile.

<b>CREATE YOUR HEALTH HISTORY</b>	<p><b>EARN UP TO \$300 WHEN YOU:</b></p> <ul style="list-style-type: none"> <li>Complete your Health Profile, update your contact information and select or confirm your Primary Care Physician in the third quarter of 2025, when notified by the Trust.</li> </ul>
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## HEALTH RELATED ACTIONS All actions must be completed between Jan. 1 and Dec. 31, 2025.

Complete your choice of the health related actions below to maximize your 2026 HRA funding.

<b>PREVENT ILLNESS</b>	<p><b>EARN \$200 - \$500 FOR GETTING THE FOLLOWING COVERED VACCINES:</b></p> <ul style="list-style-type: none"> <li>Get a Covered Flu Shot</li> <li>Get both doses (if applicable) of FDA approved COVID-19 Vaccine</li> <li>Get an FDA approved COVID-19 Vaccine Booster</li> </ul> <p style="text-align: right;"><i>Earn \$200 for the flu shot, \$200 for the COVID-19 vaccine and \$100 for the booster for a maximum of \$500.</i></p>
	<p><b>EARN \$100 FOR GETTING ONE OF THE FOLLOWING COVERED SERVICES:</b></p> <ul style="list-style-type: none"> <li>Well-Adult Annual Physical</li> <li>Preventive Mammogram, Pap smear, or Prostate exam</li> <li>Certain Adult Immunizations</li> <li>Biometric Screening</li> <li>Preventive Colon Cancer Screening</li> </ul>
<b>MAKE HEALTHY CHOICES</b>	<p><b>EARN \$150 - \$200 WHEN YOU JOIN:</b></p> <ul style="list-style-type: none"> <li>An approved Weight Loss Program** and participate for at least three consecutive months; or, if approved for the Wondr Health™ program, complete 9 of 10 weekly video sessions</li> <li>Quit For Life® tobacco cessation and complete five calls with your Quit Coach</li> </ul>
	<p><b>EARN \$50 - \$200 WHEN YOU:</b></p> <ul style="list-style-type: none"> <li>Participate in LiveWell Fit by choosing from a list of approved events</li> <li>Document your Active Gym Attendance and meet certain attendance criteria</li> <li>Track Your Activity by wearing your fitness or activity tracker and completing certain goals</li> </ul>
<b>GET INVOLVED</b>	<p><b>EARN \$100 WHEN YOU:</b></p> <ul style="list-style-type: none"> <li>Join the Wellness Volunteer Network and meet certain requirements</li> </ul>

Look for these icons throughout the year to see what counts towards HRA Funding.

Visit [www.soundhealthwellness.com](http://www.soundhealthwellness.com) for complete requirements and details and to download required forms.

To receive 2026 HRA funding you must be HRA eligible on Jan. 1, 2026. For a Health Related Action or the Health Profile to be counted, you must be covered by the Sound Health & Wellness Trust when the health action or Health Profile is completed.



# CREATE YOUR HRA FUNDING PLAN

You've got options. Along with your annual Health Profile, choose the Health Related Actions that work for you, and fill in the amounts on the worksheet to see how much you'll earn towards your maximum. **The maximum HRA funding you can earn each year is \$500 for employee-only coverage, and \$1,000 for family coverage.**

MY HRA FUNDING PLAN	Funding Amount	Amount Earned	
		Employee	Spouse
<input type="checkbox"/> <b>Complete the Health Profile, update your information and confirm your PCP when notified in the third quarter of 2025</b>	up to <b>\$300</b>		
<input type="checkbox"/> <b>Get a Covered Flu Shot and/or COVID-19 Vaccine in 2025*</b>	<b>\$200</b> for covered flu shot <b>\$200</b> for both doses (if applicable) of the COVID-19 vaccine <b>\$100</b> for COVID-19 vaccine booster		
<p><b>Earn up to \$200 towards your maximum amount by choosing from the following.</b>  <i>All Health Related Actions must be completed between Jan. 1 and Dec. 31, 2025</i></p>			
<input type="checkbox"/> <b>Choose one of these options:</b>	<p><b>\$100</b></p> <p><b>\$150</b> for a consecutive 3-month period <i>Add an additional \$50 for a consecutive 6-month period**</i></p> <p><b>\$150</b></p> <p><b>\$50, \$100 or \$150</b> depending on the event</p> <p><b>\$150</b> for a consecutive 3-month period <i>Add an additional \$50 for a consecutive 6-month period</i></p> <p><b>\$150</b> for a consecutive 3-month period <i>Add an additional \$50 for a consecutive 6-month period</i></p> <p><b>\$100</b></p>	<p>Not to exceed \$200</p>	
<ul style="list-style-type: none"> <li>Well-Adult Annual Physical</li> <li>Preventive Mammogram, Pap smear, or Prostate exam</li> <li>Certain Adult Immunizations</li> <li>Biometric Screening</li> <li>Preventive Colon Cancer Screening</li> </ul>			
<input type="checkbox"/> <b>Participate in a Weight Loss Program</b> Actively participate in an approved Weight Loss Program** and participate for at least three consecutive months; or, if approved for the Wondr Health™ program, complete 9 of 10 weekly video sessions.			
<input type="checkbox"/> <b>Join Quit For Life® Tobacco Cessation</b> Complete five calls with your Quit Coach.			
<input type="checkbox"/> <b>Participate in LiveWell Fit</b> Choose from a list of approved events.			
<input type="checkbox"/> <b>Have Active Gym Attendance</b> Have 20 or more visits within a consecutive 3-month period. Or 40 visits in a consecutive 6-month period.			
<input type="checkbox"/> <b>Track Your Fitness Activity</b> Wear your fitness or activity tracker and complete 10,000 steps per day or 5 miles of running/walking for 30 or more days in consecutive 3-month period. Or 60 or more days in a consecutive 6-month period.			
<input type="checkbox"/> <b>Join the Wellness Volunteer Network</b> Complete an orientation, meet with your Wellness Coordinator once annually, complete your Health Profile, and meet other participation requirements.			
		<b>MY TOTAL:</b>	
<p><i>*Earn \$200 for the flu shot and \$200 for the COVID-19 vaccine and \$100 for the booster for a maximum of \$500.</i></p> <p><i>**Applies to Weight Watchers®; Jenny Craig®; NutriSystem®; 3010 Weight Loss for Life®; or 2020 Lifestyles®; Membership or program fees are not paid for by the Trust.</i></p>			
<b>HRA funding not to exceed annually:</b>		<b>\$500</b>	<b>\$500</b>

## QUESTIONS?

Call the Trust at **(206) 282-4500** or **(800) 225-7620**.