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Petitioners Notice of Compliance with Court Order (Health Insurance & Health Savings Account access)

CASE DF-24-18010
IN THE MATTER OF THE MARRIAGE OF
GWENDOLYN ULIJASZ, Petitioner
AND
JASON McKEMIE, Respondent
IN THE 302nd JUDICIAL DISTRICT COURT
DALLAS COUNTY, TEXAS

PETITIONER'S NOTICE OF COMPLIANCE WITH COURT ORDER

Petitioner files this Notice to confirm compliance with the Court's order regarding reinstatement of health insurance coverage and delivery of the Health Savings Account (HSA) card.

Petitioner confirms that health insurance coverage has been reinstated as directed by the Court. Petitioner was alerted of the issue by the court order and escalated to senior HR leadership for faster research and resolution. Reinstatement was complete in a matter of days thereafter. In the email from her employer's HR that Petitioner read outloud to the Respondent and the Court confirmed this was an Employer mistake, that the coverage reinstatement was being expedited, that there would be no gap in coverage, and that the Respondent will lose his health insurance provided by the Petitioner's employer on February 24, 2026 in conjunction with a divorce ruling. Eligibility determinations and coverage status are controlled by the employer and plan administrator, not by Petitioner.

The insurance card and the prescriptions card and coverage remain the same.

With respect to the Health Savings Account ("HSA"), Petitioner confirms compliance with the Court's order. Access to the HSA card was addressed promptly upon discovery that she had no functioning card for either herself or Respondent. The account had not been used all year in anticipation that because this was community property it would be decided at trial. At that time replacement cards were requested for both Petitioner and Respondent on December 18, 2025, and those cards were issued and delivered to her on December 23, 2025. They were physically received by the Petitioner when she came home from holiday travel on December 28th.

A physical HSA card for Respondent, together with activation instructions, was then physically provided to Respondent in the presence of the Court on January 6, 2026.

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No separate HSA portal is available for dependents to the best of Petitioner's knowledge. A portal and a password is not required to utilize the physical HSA card for qualified expenses, whether in person or online.

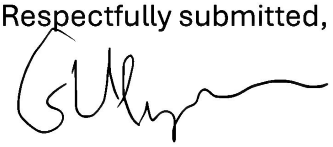
To ensure proper documentation and avoid tax and penalties, Respondent may submit receipts for qualified medical expenses by email to Petitioner, consistent with the process previously used by the parties but in a timely manner. Petitioner requests the Court's awareness that this has been an issue in the past resulting in tax and penalities.

Respondent repeatedly and incorrectly continues to assert that

- health insurance removal in 2025 was a result of the Petitioner's intentional actions,
- continued insinuations that insurance was not continuous and , that as a result ,$30,000 of Respondent's recent medical claims during what is now a non-existent gap period will not be paid;
- that Petitioner continues to restrict HSA access because he does not have her portal account password.

Petitioner attaches limited documentation solely to confirm compliance and avoid future confusion.

Respectfully submitted,



Gwendolyn Ulijasz
Petitioner, Pro Se
11703 Huebner Road, Ste106 PMB499
210-278-6377
GUlijasz@gmail.com

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Exhibit A1:

Accountability and clarification from Petitioner's HR (employer) Re: Respondent's Insurance issue

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Exhibit A: 1 Proof of Employer Insurance responsibility; no retro gap in coverage; and 2/24/26 Respondent coverage end.

Ulijasz, Gwen

From: Pott, Wynn E.
Sent: Friday, December 19, 2025 1:35 PM
To: Ulijasz, Gwen
Subject: Benefits Coverage

Hi Gwen.
As we discussed, your husband (Jason McKemie) was mistakenly dropped from coverage due to a misunderstanding at our Benefits Center. It appears they thought your husband was no longer eligible for coverage, so contrary to your wishes, they terminated coverage.

I have directed them to reinstate coverage, with no gap in care, and asked them to send urgent eligibility updates to our medical and pharmacy vendors. It may still take a couple of days to get through their internal systems, but will be much quicker than waiting to our next eligibility file.

Please note, that once you are divorced, your husband will no longer be eligible for Accenture coverage, but will be eligible for COBRA.

Please let me know if you have any questions, or need anything further.

Wynn

Wynn E. Pott
Accenture – North America Benefits Director
Phone: 727-897-4230
Email: wynn.e.pott@accenture.com

Please note our new Benefits administrators:
Health & Insurance – benefitscenter.accenture.com or 888 259 6059
401(k) – www.benefits.ml.com/login/accenture or 888 401 8258

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Exhibit A:

Proof Jason is on the HSA account

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View History Bookmarks Window Help Jan 10 2:46 PM

mybenefits.inspirafinancial.com

Apple Bing Google Yahoo

Login for Individuals | Inspira Financial

Dependents | Inspira Financial

Bank accounts

Account notifications

Health plan claims

Beneficiaries

Dependents

Inspira Card

Privacy

Online shopping preference

Health Saving Account (HSA) Dependents

This is the list of eligible dependents you think may use your Health Savings Account (HSA) funds. You can add, edit or remove your dependents at any time.

Adding dependents here can make it easier to track your HSA expenses. It will let you link your dependent to their expenses on the HSA Transaction pages. And when you request funds from your HSA, you can select who the expense is for.

Add a dependent

First name	Last name	Dependent type		
Jason	McKemie	Other	Edit	Remove

Feedback

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Exhibit B:

New cards were needed and ordered for both parties (12/18/25)

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Ulijasz, Gwen

From: Inspira <eNotify@inspirafinancial.com>
Sent: Thursday, December 18, 2025 10:20 PM
To: Ulijasz, Gwen
Subject: [External] Inspira Financial Confirmation: Your debit card

External email. Inspect before opening any links or attachments.

Dear GWENDOLYN,

This notice confirms we received your request for an Inspira debit card.

- If you made this request, you don't need to do anything else.
- If you didn't make this request, email us immediately at accountsecurity@inspirafinancial.com.

Sincerely,
Inspira Financial

Inspira Financial Health, Inc. does not provide legal, tax or financial advice. Please contact a professional for advice on eligibility, tax treatment, and other restrictions.

Inspira and Inspira Financial are trademarks of Inspira Financial Trust, LLC.

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Exhibit C: Proof no password or anything further needed from Petitioner to use the account funds

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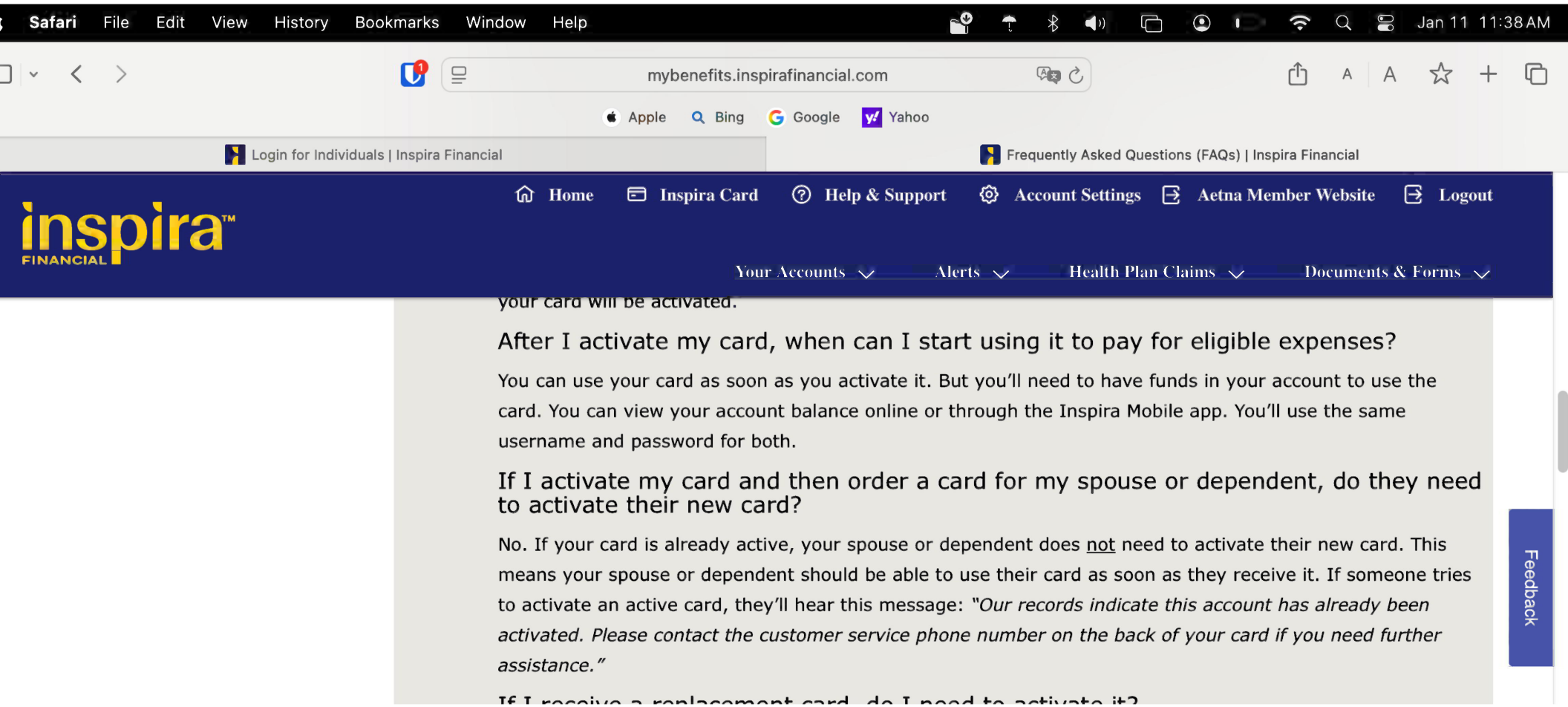

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Exhibit D:

Proof Jason has card use authorization

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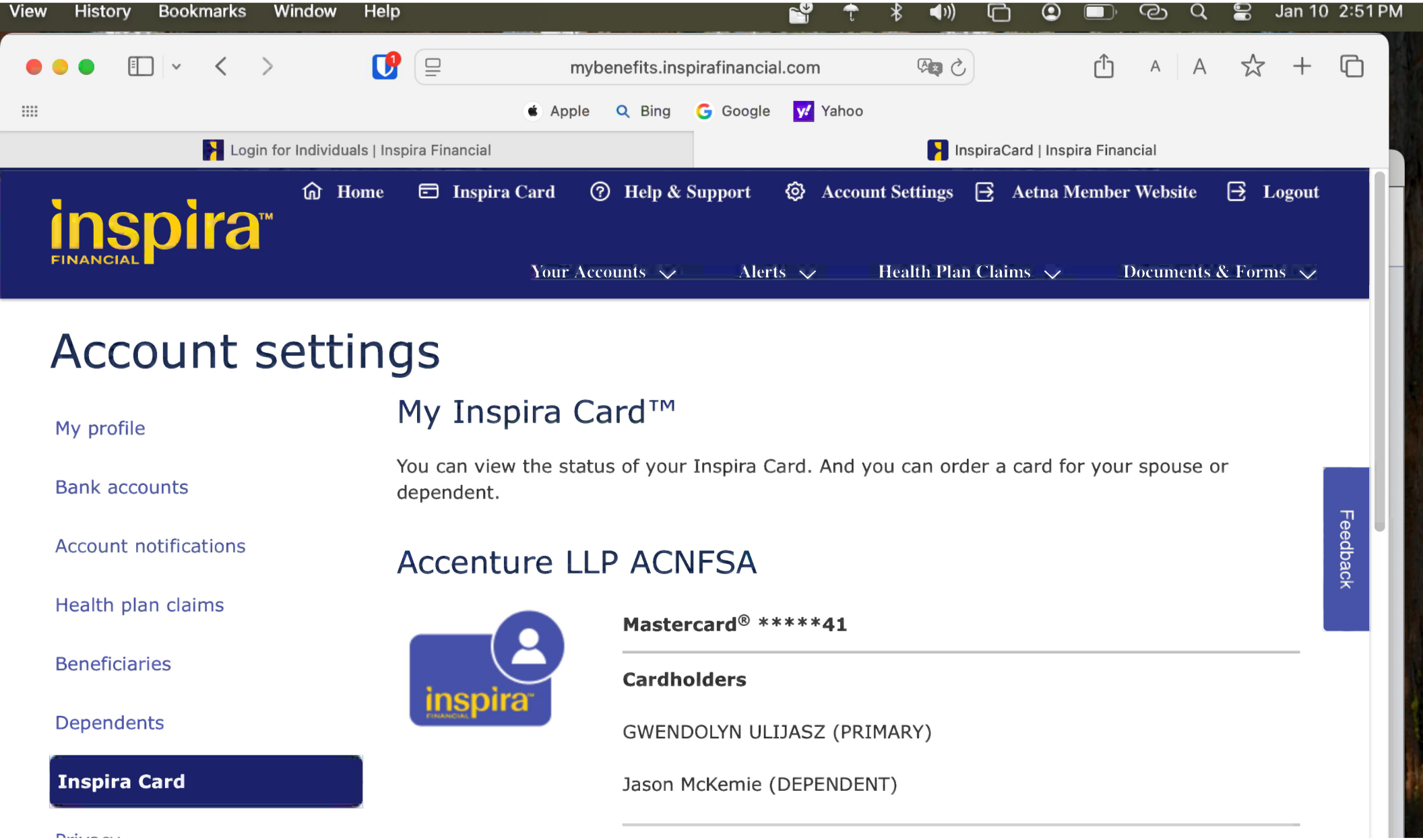

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Exhibit E:

Insurance Card copies and proof Jason has insurance (date stamp/name appears)

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Printed 1/10/2026

aetna

RXBIN:004336 CVS caremark
RXPCN: ADV
RXGRP: RX23EG

Choice POS II
DMO

ACCENTURE
MEDICAL - HEALTHFUND

ID W2903 70360

01 GWENDOLYN L ULIJASZ
PCD: NO ELECTION
PCP: NO ELECTION REQUIRED

02 JASON E MCKEMIE
PCD: NO ELECTION
PCP: NO ELECTION REQUIRED

Payer # 60054 0048
Med Grp#0867974-010-00004
Den Grp#0657455-055-00004

DOI-DENTAL CLAIMS ONLY

First Health Network Complementary

NAP

MEDICAL INDIVIDUAL	Tier 1	FAMILY	Tier 1
INN DED	$ 3600		$ 3600
INN OOP MAX	$ 4800		$ 9600
OON DED	$ 6000		$ 6000
OON OOP MAX	$ 9000		$18000

AETNA MEDICAL	1-855-240-0835
PROVIDERS CALL/PRECERT	1-888-632-3862
AETNA DMO DENTAL	1-877-238-6200
CVS CAREMARK	1-800-932-7515
TELADOC.COM/ACCENTURE	1-855-835-2362
MENTAL/BEHAVIORAL HEALTH	1-800-424-4047

Aetna Life Insurance Company(MED)
Aetna Dental Inc. - Texas(DEN)
Submit Claims To:PO BOX 981106
EL PASO TX 79998 1106

www.aetna.com

See your plan documents for all plan requirements, including precertification. In an emergency, seek care immediately or call 911. This card does not guarantee coverage.

Feedback

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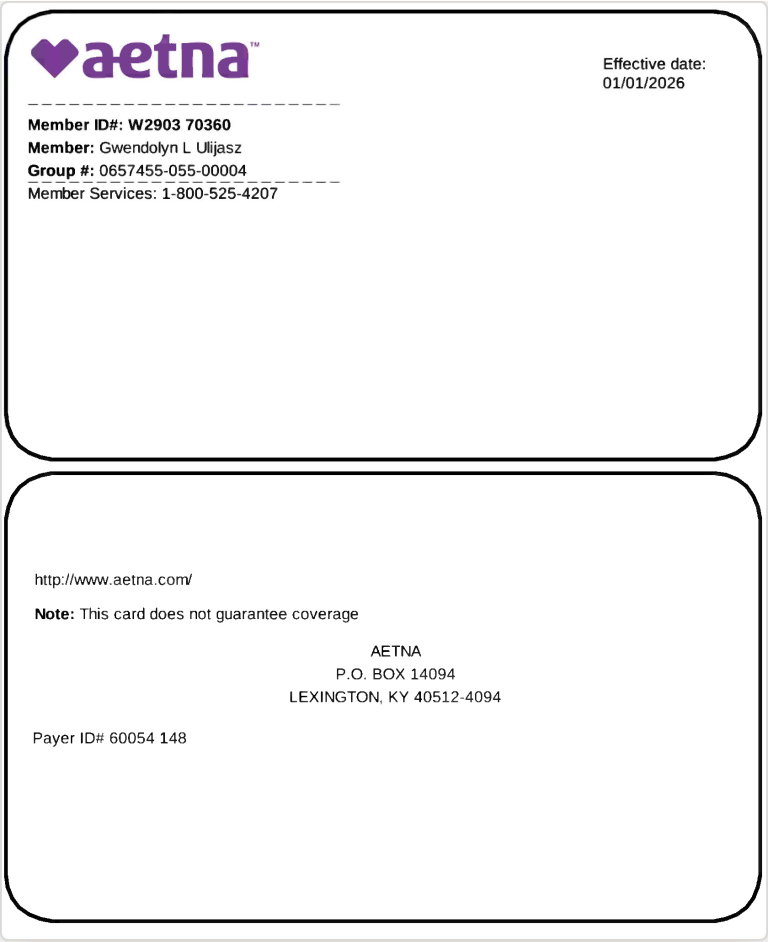

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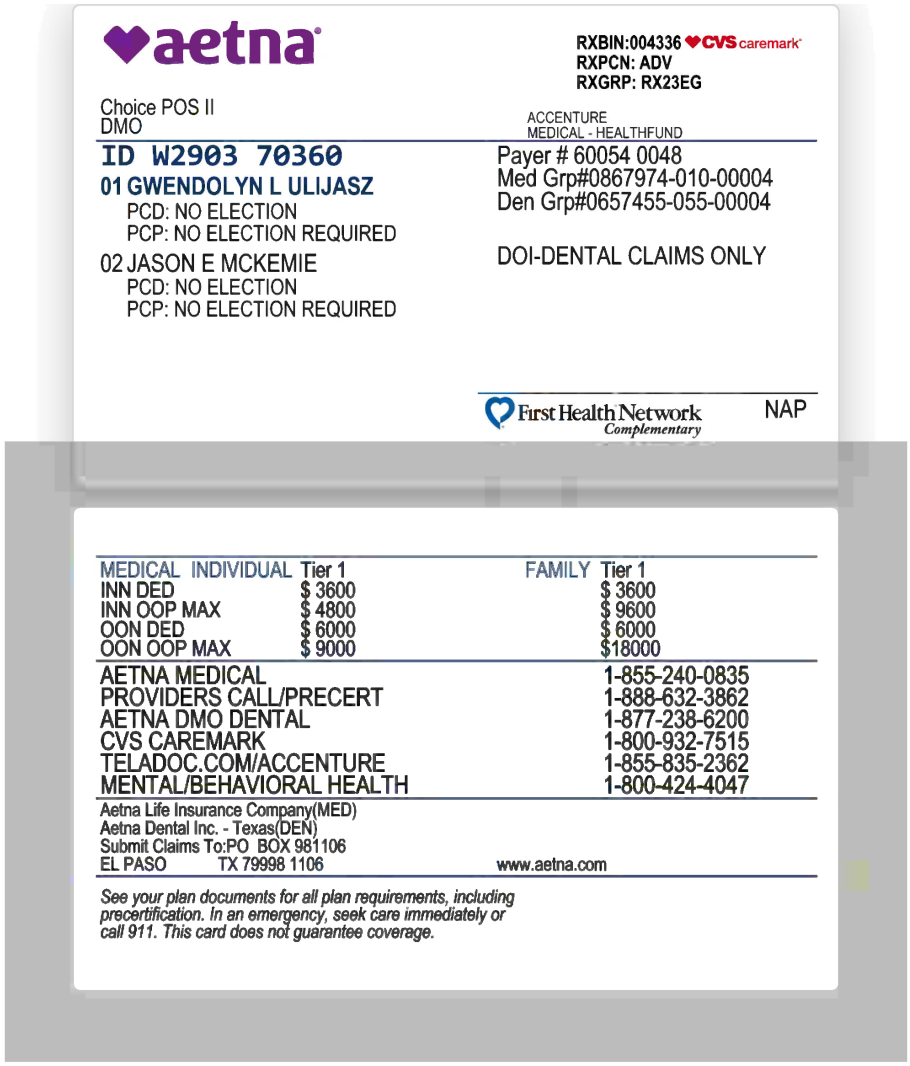

aetna

RXBIN:004336 CVS caremark
RXPCN: ADV
RXGRP: RX23EG

Choice POS II
DMO

ACCENTURE
MEDICAL - HEALTHFUND

ID W2903 70360

01 GWENDOLYN L ULIJASZ
PCD: NO ELECTION
PCP: NO ELECTION REQUIRED

02 JASON E MCKEMIE
PCD: NO ELECTION
PCP: NO ELECTION REQUIRED

Payer # 60054 0048
Med Grp#0867974-010-00004
Den Grp#0657455-055-00004

DOI-DENTAL CLAIMS ONLY

First Health Network Complementary

NAP

MEDICAL INDIVIDUAL	Tier 1	FAMILY	Tier 1
INN DED	$ 3600		$ 3600
INN OOP MAX	$ 4800		$ 9600
OON DED	$ 6000		$ 6000
OON OOP MAX	$ 9000		$18000

AETNA MEDICAL	1-855-240-0835
PROVIDERS CALL/PRECERT	1-888-632-3862
AETNA DMO DENTAL	1-877-238-6200
CVS CAREMARK	1-800-932-7515
TELADOC.COM/ACCENTURE	1-855-835-2362
MENTAL/BEHAVIORAL HEALTH	1-800-424-4047

Aetna Life Insurance Company(MED)
Aetna Dental Inc. - Texas(DEN)
Submit Claims To:PO BOX 981106
EL PASO TX 79998 1106

www.aetna.com

See your plan documents for all plan requirements, including precertification. In an emergency, seek care immediately or call 911. This card does not guarantee coverage.

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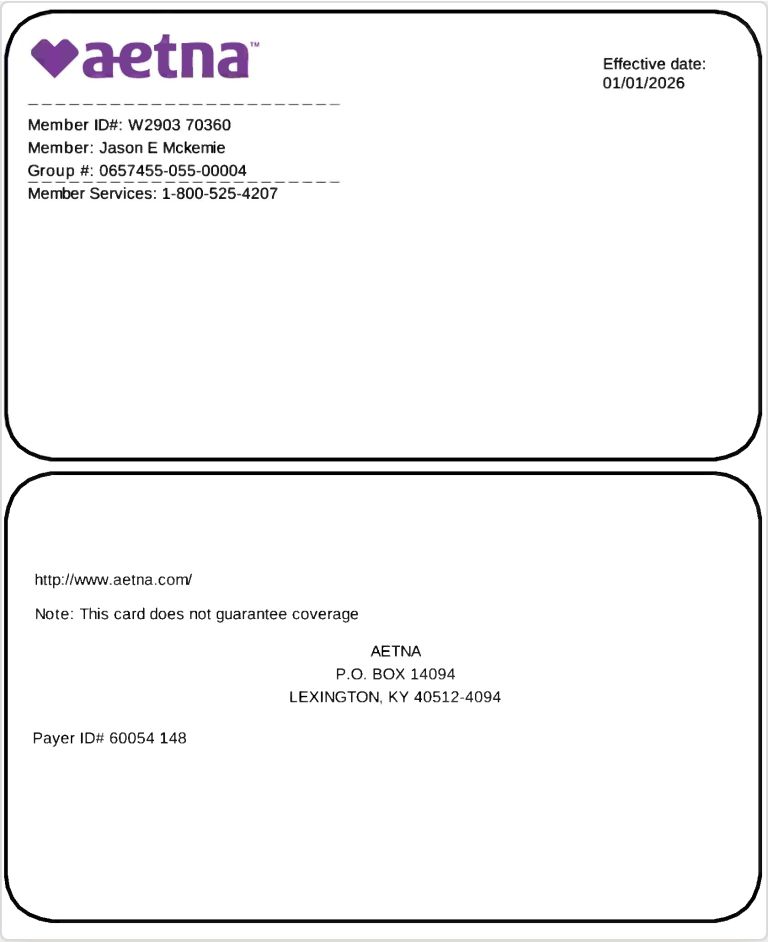

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Filing Code Description: Notice Of Filing
Filing Description: PETITIONER'S NOTICE OF COMPLIANCE WITH COURT ORDER
Status as of 1/15/2026 9:45 AM CST

Case Contacts

Name	BarNumber	Email	TimestampSubmitted	Status
Jason McKemie		jmckemie@mckemie.net	1/13/2026 9:33:24 PM	SENT
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Gwendolyn Ulijasz		gulijasz@gmail.com	1/13/2026 9:33:24 PM	SENT
JASON EMORYMCKEMIE		jason@callvital.com	1/13/2026 9:33:24 PM	SENT

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