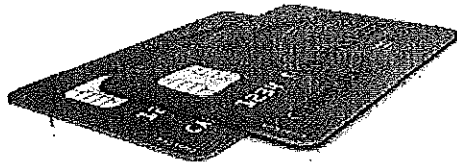


## Benefit Express FSA Debit Card F.A.Q.



*Q: What is the Benefit Express Benefits Card?*

A: The Benefit Express Benefits Card is a debit card that can simplify the process of paying for eligible FSA expenses. You can use the card at qualifying merchant locations, pharmacies, and doctors' offices that accept the debit card.

*Q: How does the card work?*

A: Your FSA Debit Card can be used to pay for qualified expenses anywhere debit cards are accepted, just as you would use a credit card. It is your responsibility, however, to ensure that your FSA Debit Card is used only for qualified medical expenses.

Once activated, the card is loaded with the amount you have elected to contribute to your benefit program. As you use the card to pay for items eligible for reimbursement, corresponding deductions will be made from the card balance. Special arrangements with merchants such as Walgreens and Walmart allow you to make eligible purchases that are automatically approved. In most cases, this means that you will not be required to submit receipts for substantiation, although we always recommend that you keep your receipts

in case a situation arises in which a transaction is questioned. In other transactions outside of Walgreens and Walmart, you will be asked to provide copies of the documentation. We recommend that you keep all receipts for the entire plan year in the event that supporting documentation is requested.

You are responsible for periodically checking your account balances to make sure you have sufficient funds available for future use.

*Q: What are "qualified" medical expenses?*

A: Qualified expenses are expenses for medical services not covered by your health insurance including:

- Prescription and physician co-pays.
- Eligible over-the-counter medications such as aspirin and cold and allergy medications with a physician's prescription.
- Vision, dental, chiropractic, and acupuncture services.

*Q: What are non-qualified medical expenses?*

A: Typical examples of non-qualified medical expenses include:

- Cosmetic treatments (teeth whitening, hair growth or removal products, and facial treatments).
- Over-the-counter items purchased for general health and wellness (vitamins and supplements, moisturizing lotions).
- Payments against an existing medical balance from a prior plan year (e.g. dental service balances carried over into a new plan year).

- Pre-treatment or advance payments for medical or dental services that have not yet started.
- Some items require a physician's note in order to be reimbursed, such as massage treatments for back pain or a vitamin supplement recommended by a doctor to treat a deficiency.

*Q: Who verifies that purchases have been made for qualified expenses?*

A: As the plan administrator we work to ensure all purchases made using your FSA debit card are eligible under IRS guidelines. Therefore, as with any FSA plan, it is important that you retain copies of all medical receipts. If a purchase made with your FSA debit card needs to be verified, a letter or email will be sent directly to you requesting a copy of the supporting documentation for the pending debit card transaction. This documentation can be mailed or faxed directly to our office, along with a copy of the email or letter request so that we can adjudicate the pending transaction.

*Q: Do all FSA Debit Card transactions require this verification process?*

A: No. Common co-pay amounts for both prescriptions and medical visits (\$5, \$10, \$15, \$20, etc.) will automatically adjudicate. Eligible over-the-counter medical expenses purchased at places like Walgreens and Walmart will also automatically adjudicate.

*Q: What is the advantage of using an FSA Debit Card if I still have to follow-up with receipts in some instances?*

A: The card allows you to pay for eligible expenses at the point of service. Additional benefits include:

- Immediate access to your FSA account – you avoid paying with cash or check.
- Immediate payment of the expense – you avoid waiting for the reimbursement check.
- The ease of use at the point of sale, reduced burden of having to pay money out-of-pocket, and eliminating the wait for a reimbursement have proven to be extremely convenient for plan participants.

*Q: What if my provider does not accept the debit card?*

A: Paper claims can always be submitted as an alternative. If your provider does not accept debit cards, you can pay by cash or check at the time of service and submit the receipt with a completed claim form for reimbursement. You have the option of receiving reimbursements by check or setting up reimbursements to be directly deposited into your banking account.

*Q: What happens if I use the card for an ineligible expense or non-qualifying expense?*

A: Before using the card, you should become familiar with eligible and ineligible expenses. Be sure to have merchants ring up qualifying expenses separate from other items so you can use the card. **In the event that you use the card for non-qualifying expenses, you will be required to pay back the plan via a personal check.**

*Q: What happens if I do not reply to the letter requesting additional information?*

A: In the event that the request for additional information is ignored, a second letter is generated giving you additional time to respond. If there is no reply to the second request, collection procedures will begin. The card will be deactivated and you will be required to repay the ineligible amount back to the plan.

*Q: Is there any limitation on the usage of the FSA Debit Card?*

A: Aside from using the card for only qualifying expenses, there are no limitations and no transaction fees associated with using the card.

*Q: What are some reasons the Benefits Card might not work at a location that normally accepts debit cards?*

A: Reasons may include:

- Card has been inactivated - if you used the card for non-qualifying expenses and have not repaid the plan.
- Insufficient Funds – trying to use the card for more than the remaining balance in your plan.
- Merchant Problem – The merchant may be experiencing problems with the coding in their own terminal (this is rare).

*Q: May I use the Benefits Card for expenses incurred in the prior plan year?*

A: No. Expenses must have a date of service that falls within the current plan year.

*Q: Must I use the debit card for all expenses incurred during the plan year?*

A: No, supporting documentation with a completed claim form can be mailed or faxed to us for reimbursement.

*Q: What happens if I have a \$1,000.00 limit on my FSA debit card but I have a \$1,500.00 transaction?*

A: You can use your card to pay for the \$1,000.00 portion and pay for the remainder with cash or check. If you try and pay for a purchase that exceeds your limit, the transaction will be rejected.

*Q: If I terminate employment, can I use the card?*

A: No. Upon termination your card will be deactivated. If you still have qualifying expenses that occurred before your date of termination you can submit them via mail or fax with a completed claim form and the supporting documentation.

*Q: Will I be required to enter a PIN number when using my debit card?*

A: You may be required to enter a PIN Number when making purchases using your FSA Debit Card. Your PIN number will be mailed to you shortly after you receive your debit card. You can also access your PIN number through the participant portal.

# FSA Health Care Eligible & Ineligible Expense Items

## FSA ELIGIBLE HEALTH CARE EXPENSES

- Acupuncture
- Alcoholism treatment
- Ambulance
- Artificial limb
- Autoette/wheelchair
- Bandages
- Braille books and magazines
- Breast pump, shields, gel pads
- Chiropractor
- Christian Science Practitioner (for medical care)
- Coinsurance
- Deductibles
- Diagnostic services
- Disabled dependent medical care
- Drug/alcohol addiction treatment (including lodging and meals, if necessary for treatment)
- Drugs and medicines (prescribed by a physician)
- Durable medical equipment
- Guide dog
- Hearing aids and hearing exams
- Home care
- Hospital services
- Inpatient care for treatment of mental or physical handicap
- Laboratory fees
- Lead based paint removal (to prevent a child who has, or has had, lead poisoning from eating the paint would qualify)
- Learning disability counseling (if prescribed by a physician)
- Lodging essential to medical care (e.g. out of town hotel stay to see a specialist to treat a medical condition)
- Maternity care and related services
- Medical services (physician, surgeon, specialists)
- Medicine prescribed by a physician
- Mentally disabled, special home for nursing services (in home if recommended by physician)
- Operations
- Organ donor's medical expense and transportation
- Osteopath
- Oxygen
- Prosthesis
- Psychiatric care
- Psychoanalysis
- Psychologist
- Routine physical exam-wellness visit, well woman exam
- Special education (with physician's recommendation)
- Special medical equipment such as wheelchairs, crutches, and orthopedic shoes
- Sterilization
- Smoking assist programs
- Surgery
- Telephone/television for the hearing impaired
- Therapy
- Transplants

- Transportation essential to medical care (e.g. taxi, bus, train fare to physician's office)
- Vasectomy
- Weight-loss program prescribed by a physician as part of a treatment program
- Wig (to replace hair loss to disease)
- X-rays

#### **ELIGIBLE DENTAL EXPENSES**

- Crowns
- Dentures
- Orthodontics (braces, etc.)
- Preventative and basic procedures (e.g. teeth cleaning, exam)
- Root canals
- Tooth extractions

#### **ELIGIBLE EYE CARE EXPENSES**

*Optometric services and medical expenses for eyeglasses and contact lenses needed for medical reasons are reimbursable. Eye exams and expenses for contact lens solutions are also reimbursable. However, premiums for contact lens replacement insurance are not reimbursable. Other vision services that are covered are:*

- Contact lens cases
- Corrective swim goggles
- Eye charts
- Eyeglass cases

- Eyeglass cleaning supplies such as cleaning cloths
- Reading glasses
- Eyeglass repair or repair kits
- LASIK corrective eye surgery
- Safety glasses when the lenses correct visual acuity
- Sunglasses or sunglass clips when the lenses correct visual acuity
- Vision shaping

#### **ELIGIBLE OVER-THE-COUNTER ITEMS THAT REQUIRE A PHYSICIAN'S NOTE**

*Section 9003 of the Affordable Care Act established new uniform standards for medical expenses. Distributions from health FSAs and HRAs are allowed to reimburse the cost of over-the-counter medicines or drugs only if they are purchased with a prescription.*

*Eligible expenses that will require a physician's prescription for reimbursement include, but are not limited to:*

- Acetaminophen
- Acne products
- Allergy products
- Antacid remedies
- Antibiotic creams/ointments
- Anti-fungal foot sprays/creams
- Aspirin
- Baby care products
- Cold remedies, (including shower vapor tabs and vapor units)

## FSA Health Care Eligible & Ineligible Expense Items (Continued)

- Cough syrups and drops
- Eye drops
- Ibuprofen
- Laxatives
- Migraine remedies
- Motion sickness remedies
- Nasal sprays
- Pain relievers
- Sleep aids
- Topical creams for itching, stinging, burning, pain relief, sore healing or insect bites

### **ELIGIBLE OVER-THE-COUNTER MEDICATION EXPENSES**

*Items eligible without a physician's prescription after January 1, 2011 include (but are not limited to):*

- Band aids
- Bandages and wraps
- Braces and supports
- Catheters
- Contact lens solutions and supplies
- Contraceptives and family planning items
- Denture adhesives
- Insulin and diabetic supplies
- Diagnostic tests and monitors and first aid supplies, peroxide and rubbing alcohol

### **ITEMS NOT ELIGIBLE FOR FSA REIMBURSEMENT**

- Adoption — The cost of the adoption itself is not covered, however health-related expenses such as physicals for the adoptive parents and pre-adoption counseling may be covered
- Age management systems (Cenegenics)
- Annual medical contract fees for exclusive provider care
- Clothing
- Cosmetic procedures
- Cushions
- Dental bleaching or any other teeth whitening
- Dental enamel micro-abrasion
- Domestic help fees (for services of a non-medical nature)
- Driving lessons
- Electric toothbrush replacement brushes
- Electrolysis or hair removal
- Facial tissues, antiviral
- Finance charges
- Fluoride — expenses paid for over-the-counter fluorides such as toothpaste with fluoride, or fluoride mouth wash or rinse
- Glucerin shakes
- Hair loss treatments (non-prescription) such as over-the-counter medications are not covered. However, prescription medications prescribed by a physician to treat a medical condition are covered
- Hair transplant

- Health club dues/memberships, for general well-being unless part of a medically prescribed regimen to treat a specific condition - Physician's diagnosis letter required
- Insurance premiums of any kind (see exceptions for HRA and HSA)
- Interest
- Lactation consultation
- Laetrile, even if prescribed by a physician
- Late charges
- Late payment interest
- Lens replacement insurance
- Marijuana, even if prescribed for medicinal purposes
- Massage therapy for general well-being, unless accompanied by a physician's diagnosis letter
- Medicine flavorings
- Missed appointment fees
- Over-the-counter items which are items not categorized as a medicine or drug and may include, but are not limited to nail clippers, pumice stones, feminine hygiene products, etc., are not reimbursable, unless accompanied by a physician's diagnosis letter. Over-the-counter toiletries or personal hygiene items which may include, but are not limited to shampoo, toothpaste, conditioners, hand creams, deodorant, shaving cream, razors, dental floss, body powders, hair gels/sprays, make up, nail polish accessories, soap, mouthwash, etc., are not reimbursable
- Pastoral counseling
- Personal trainer
- Physical therapy treatments for general well-being
- Pill bags
- Postage
- Pre-seed moisturizers
- Saddle soap
- Savings club
- Shampoo that is non-medicated
- Spider vein therapy such as with sclerosing agent injections are considered cosmetic. However, if the therapy is for other than a diagnosis of spider vein therapy the charges are reimbursable when accompanied by a physician's diagnosis letter
- Supplements taken for general well-being
- Tanning lotions without sun protection
- Tips paid for taxi fares, etc.
- Ultrasound — 4D/Elective
- Union dues
- Vitamins taken for general well-being
- Warranties
- Weight loss program food or convenience items such as water bottles
- Weight loss machines

# **Benefit Express**

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877.837.5017  
[www.MyFSAExpress.com](http://www.MyFSAExpress.com)

This brochure provides a general overview of the FSA Accounts available to you. Please see your Plan Document for more specific information. If any conflict arises between this brochure and your Plan Documents, the terms of the Plan Document will apply.

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