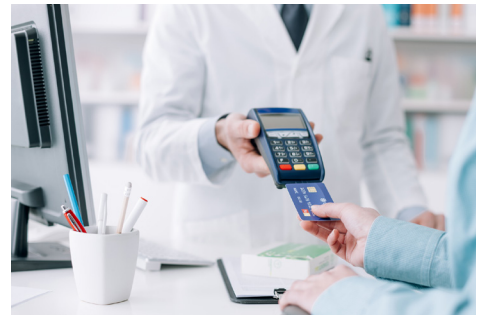


HELPFUL HINTS

FOR USING YOUR BENEFITS CARD WITH YOUR FLEXIBLE SPENDING ACCOUNT



If you are enrolled in the Aptia Health Care Flexible Spending Account (FSA), you can use the Benefits Card Mastercard® to access your account funds at the point of sale. While this allows instant access to your account, the IRS requirements state that you must be able to prove the transaction was for an eligible expense under the Plan. The IRS, not your employer or Aptia, specifies which transactions require backup documentation and your employer's FSA plan must abide by IRS rules to maintain its qualified status. Aptia's systems are configured to automatically approve transactions that are within IRS regulations to reduce the number of transactions that require documentation.

Benefits Card transactions break down into three types:

■ **Transactions that can be “auto-approved”** — a majority of Benefits Card transactions can be automatically approved and do not require backup documentation, including:

- Transactions that match one of the copays linked to your employer's health plans
- Transactions that are processed through merchants using technology that recognizes product SKU numbers as FSA-eligible items
- Recurring transactions that you have already substantiated with a receipt followed by another transaction at the same merchant, for the same dollar amount, within the same plan year

■ **Transactions where the Benefits Card is accepted but additional documentation is required** — the merchant is valid, but the system cannot detect enough information from the transaction to approve it automatically. Examples include:

- Medical office transactions for coinsurance amounts.
- Copays linked to another employer's health plan
- Dental provider transactions, because dentists provide some cosmetic services such as teeth bleaching, veneers or bonding that are not FSA-eligible
- Vision care transactions, because vision care providers dispense some items such as non-prescription sunglasses and non-prescription colored contact lenses that are not FSA-eligible



- Transactions from drugstores that are not set up with an IRS-compliant inventory control system; these types of transactions will trigger a documentation request

■ **Transactions that are denied** — transactions are denied if the merchant is not an eligible provider or because you do not have enough money in your account to cover the transaction. Examples include:

- You cannot use your card at the gas station or a restaurant.
- Some denials occur due to the merchant code. For example, some university hospitals use a merchant code of “university” rather than “hospital,” so the transaction may be denied.
- If in doubt about why your card swipe was denied, contact Aptia Participant Services for further information.

About Benefits Card Documentation Requests

- You do not need to submit documentation unless Aptia requests it. You will typically receive notifications via email. If we do not have an email address on file for you, the request will be sent by mail to the address on file with your employer.
- If you have access to a scanner, you may upload your receipt(s) through your account on the Aptia participant portal www.yourflexbenefits.aptia365.com. Benefits Card transactions that require receipts will be viewable in your claims activity detail.
- iPhone, iPad, and Android users may use the “Your Flex Benefits” mobile app to view their card transactions for information about substantiation requirements. If a transaction shows needing receipts, just take a picture of your detailed receipt and upload it via the mobile app.
- If you do not have access to a scanner or the mobile app, simply attach a clean copy of your detailed receipt (retain the original for your records) to the request and fax it in to the toll-free fax number provided on the request, or mail it to Aptia.
- The documentation required to substantiate a claim is exactly the same as what you would be asked to provide if you were filing a paper claim for reimbursement. Receipts must include the following information per the IRS:

- Provider name

- Person for whom the expense was incurred
- Date of service (not the date you were billed)
- Description of services provided
- Amount

- If you do not provide your documentation timely, your card is subject to deactivation and you may incur taxes on the reimbursement amount.
- Any claims you submit for expenses paid out-of-pocket after your card deactivates will automatically be used to offset outstanding amounts.

The Benefits Card gives you the convenience of having instant access to your account balance, and reduces the need to complete the claim submission process. Simply keep your receipt and provide it promptly if Aptia requests it.

Don't like dealing with receipt requests?

Using the Benefits Card is not a requirement of the FSA plan. You may choose to use

your Flexible Spending Account the traditional way by paying your providers out-of-pocket and then submitting claims for reimbursement. Aptia processes claims within two business days of receipt and reimbursements are processed daily.

You may sign up via the online portal for direct deposit reimbursement to have your payment electronically transferred to your bank account, or you can receive a check in the mail.

Tips for Using your Aptia Benefits Card.

1. Manage your Benefits Card. You can order replacement and additional Benefits Cards for your eligible dependents by using the Aptia participant portal.
2. You can report your card lost or stolen by using the Aptia participant portal or the “Your Flex Benefits” mobile app. You can also report your card lost or stolen by contacting Aptia Participant Services from 8 am to 9 pm ET at (866) 268-0142.



CONTACT INFORMATION

Aptia Participant Services representatives are available Monday through Friday 8 am to 9 pm ET.

Phone: (866) 268-0142

Fax: (844) 791-8319

Web: www.yourflexbenefits.aptia365.com



The information contained herein is considered to be general in nature. In the event that anything on this flyer differs from the information contained in your company's plan provisions as set forth in the Summary Plan Description and/or Plan document, those documents shall prevail.