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OVERVIEW

Welcome to NetBenefits, Fidelity's robust site where you can view and manage your reimbursement account(s). This one-stop guide for the site will help you find the information you need to manage your account(s).

Within the NetBenefits Reimbursement Accounts site you can:

- View account balances
- · Reimburse yourself via direct deposit to a personal bank account or via check; or pay your provider
- Access online, monthly account statements
- Upload requested claim documentation
- Use the Expense Tab to organize, manage and track expenses
- And much more!

If you have questions about your account(s), contact Fidelity Reimbursement Accounts Services:

Phone: 833-299-5089 (Monday-Friday, 8 AM-8 PM EST)

Fax: 855-810-8223

Email: Fidelity@service.healthaccountservices.com

Mail: Fidelity Reimbursement Accounts Services

PO Box 2703 Fargo, ND 58108

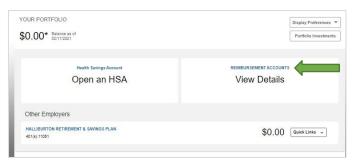


Log in to View Your Account

- **Step 1:** Visit NetBenefits.com to access your account.
 - -If you already have a NetBenefits account, use your credentials to log in.
 - -If you're new to NetBenefits, select "Register as a new user" and follow the on-screen instructions to create your username and password. Note: You will be asked if you would like to use your Social Security Number for login or if you wish to establish a username. It is recommended that you establish a unique username.

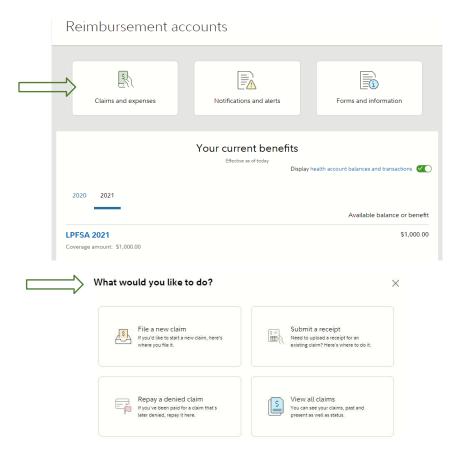
Step 2: Once logged in, if your display preferences are in tile view select the REIMBURSEMENT ACCOUNTS tile, or if in list view select the Benefits tab then select REIMBURSEMENT ACCOUNTS.

Tile view: List view:





Step 3: Once on your Reimbursement Accounts page you can select the benefit to view balances and manage account details.





Step 4: Use NetBenefits to order additional cards for dependents and set up your bank account for convenient reimbursement options.

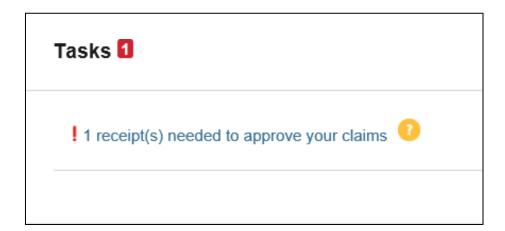
Home

The **Home Page** provides tabs for easy navigation. On the Home Page, you can view quick graphs, as well as see your available balances for your accounts and recent transactions.

On the home page, there is an I Want To section where you can select one of the following options:

- File a Claim
- Manage your Expenses

The **Tasks** section towards the bottom of the page will show notifications if action is required. As an example, if you submitted a claim and still need to upload a receipt you will get a notification in this section.





Accounts

The Accounts tab at the top of the page makes managing your finances easy. Within the tab are multiple ways to keep track of your expenses and accounts. Below are a few options you may find within the Accounts tab.

Account Summary – The information displayed on this page will vary depending upon your specific benefits. The Accounts Tab allows you to view the status of all your accounts, including available balance, and pending amounts.

Click on the name of the account, for example "Limited Purpose FSA" in the picture below, to see filing rules, debit card rules, and a claim summary.

⊕ Limited Purpose FSA \$0.00 \$260.20 \$250.20 \$0.00 \$10.00 \$1,74	ACCOUNT	ELIGIBLE AMOUNT	SUBMITTED CLAIMS	PAID	PENDING	DENIED	AVAILABLE BALANCE
① Dependent Care \$5,000.00 \$5,000.00 \$4,166.70 \$833.30 \$0.00 (\$833)	⊕ Limited Purpose FSA			\$250.20	\$0.00	\$10.00	\$1,749.80
	Dependent Care	\$5,000.00	\$5,000.00	\$4,166.70	\$833.30	\$0.00	(\$833.30)

Each account will include the following:

- Eligible Amount is the amount you can access to spend for the year.
- Submitted Claims will show you what claims have been submitted to be processed.
- Paid will show you the dollar amount of the claims that have been paid to you or a provider.
- Pending will show you the amount that currently waiting to be processed or is pending payment.
- Denied will let you know if your claim has been denied and for what amount.
- Available Balance will reflect the balance that is currently available for spending.

At the bottom of the Account Summary page is a link to **Change Payment Method** which will route you to the Profile tab where you can update how you prefer to receive payments. You can choose between either Direct Deposit or Check; once your selection has been completed, select Submit.

Under the Account tab, in the account section you will find the following additional links:

Account Activity – View your pending and processed transactions. You can also export your transactions if you wish to access your transactions in a spreadsheet. **Note**: This cannot be partnered with QuickBooks

Expenses – View, add, or export expenses

Claims – Shows a list of the claims that have been filed. Claims can be filtered by Date, Account, Merchant/Provider, Claim Status, and Amount. For additional information, please view the 'File a Claim' Section.



Payments – View a list of all transactions for your accounts. Payments can be filtered by Date, Transaction Number, Method of Payment, Status, and Amount.

Statements – View your account statements, receipt reminders, and denial letters.

Notification Preferences

You can update your contact information and communication preferences by navigating to the **Message Center** tab and select the **Update Notification Preferences** icon. In this section you can update your contact information including mobile number, mobile carrier, time zone, and email address. You can also update your notification preferences and can select **Email/Text** for Claims and Payment notifications.



DEBIT CARDS:

NetBenefits AccessCard®

Advantages of the debit card:

- Pay directly from your account(s) at the point-of-sale for qualified expenses
- Charges are paid directly to the provider/retailer
- No waiting for reimbursement

Eligible expenses:



The IRS determines what expenses you can pay for. For general medical expense information, see IRS Publication 502 at http://www.irs.gov/pub/irs-pdf/p502.pdf. For child and dependent care expenses, see IRS Publication 503 at https://www.irs.gov/pub/irs-pdf/p503.pdf.

Using the card:

To activate your blue NetBenefits AccessCard® call the number on the back of the card and follow the activation instructions.



Some accounts may not require you to submit documentation for purchases made at retailers that use an inventory information approval system (IIAS). These merchants will approve eligible expenses at the point of purchase. We encourage you to save your receipts. For a complete list of IIAS merchants, visit https://www.sig-is.org/. When using your card at these merchants, you can use your card for the entire purchase amount. Eligible expenses will be charged to your debit card. You'll need to use another form of payment for any ineligible items. Documentation may be required if eligible items are not verified at the point of sale. You will receive an email or mailed notification if documentation is required.

Note: Debit card usage for FSA without a grace period will only be for the current calendar year. Claims that need to be filed outside of the current calendar year will need to be done manually.

NetBenefits CommuterCard®

If participating in a Commuter benefit you will have a separate Commuter specific card. To activate your silver NetBenefits CommuterCard®, call the activation line at: 866-898-9795.



Debit Card Documentation Requirements

You may be required to submit documentation for a debit card transaction on your NetBenefits AccessCard® or NetBenefits CommuterCard®. All claims submitted via paper form or submitted through NetBenefits will require documentation. For more information on how to submit a claim, please view the 'File a Claim' section.

Your documentation will need to contain the following:

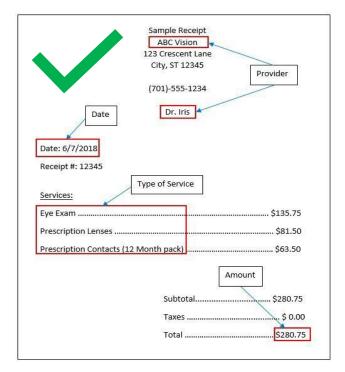
- Date(s) of service
- Type(s) of service
- Cost of service(s)
- Merchant name/information

An Explanation of Benefits (EOB) will contain all of these if you are unable to obtain a receipt with these fields.

An example of incorrect documentation would include a summary receipt that doesn't include all the needed information listed above.



Documentation may be needed for debit card transactions due to IRS regulations.





- When you make a purchase that requires you to provide documentation, we will send you automated receipt reminders via mail or email. Once we receive your documentation, you will no longer receive reminders. To receive reminders by email, see the <u>Notification Preferences</u> section.
- If we do not receive and process documentation within **100 days** after your card transaction, your account will be inactivated and placed in a temporary hold status. You will be asked to send us appropriate documentation or reimburse your account. Your account will be reactivated within one business day of processing your documentation or repayment (for instructions on making repayments please see <u>'Submit a Repayment'</u>).
- The claim number must be included if you are sending in documentation for a debit card transaction.

Lost or Stolen Debit Cards

NetBenefits AccessCard®

To report your blue NetBenefits AccessCard® as lost or stolen, contact 833-811-7432.

NetBenefits CommuterCard®

You may report your silver NetBenefits CommuterCard* lost or stolen on the NetBenefits website. Select the **Profile** tab, then **Banking/Cards**. Your debit card information will display on the right side of the screen. Select **Report Lost/Stolen**. Your debit card(s) will immediately be inactivated and your new one will be mailed to the address on file within 7-10 business days. You may also contact Fidelity Reimbursement Accounts Services at 833-299-5089.

Note: Please review your recent debit card transactions under your account activity. If you do not recognize transactions on your NetBenefits AccessCard® contact 833-811-7432. If you do not recognize transactions our your NetBenefits CommuterCard® contact 833-299-5089 to request the **Commuter Card Transaction Dispute Form**.



CLAIM MANAGEMENT

FILE A CLAIM

When filing a claim, ensure the expense has been paid out of pocket. You can submit the claim directly on NetBenefits or via the Reimbursement Request Form found in the **Tools & Support** tab on NetBenefits. Once the claim has been approved, funds will be issued directly to you via check or direct deposit depending on your linked accounts and preferences. Should your claim be denied, you will receive a communication in the **Message Center** tab advising what further information is needed.

To submit a claim directly on NetBenefits:

- 1. Click on the Accounts tab from the top navigation and select under File a Claim under the I Want To section. You will be brought to a new page where you will select an account and a payee.
- 2. To file a claim and request payment, select the plan you choose to Pay From. Choose whether you want to Pay To yourself as a reimbursement via direct deposit or check, or Pay To someone else and directly pay your provider via check. Click Next.
- 3. Upload a receipt that contains the following information to validate your claim:

(Note: Receipts must be in a JPG, JPEG, GIF, PNG or PDF and cannot exceed 8MB. There can also only be 4 documents uploaded at one time.)

- Date(s) of service
- Types(s) of service
- Cost of service(s)
- Merchant name/information

Note: If the transaction is a co-pay, this will need to be noted on the receipt by the provider's office.

Provide the claim details to reimburse yourself or directly pay your provider.

You will be asked to provide:

- Start date of the service
- End date of the service
- Amount
- Provider
- Category
- Type of service
- Recipient
- Answer yes or no to whether you drove to receive your product/service
 - o If yes, enter how many miles you drove

If directly paying your provider, you will also be asked to provide:

- Payee name
- Account number
- Payee Address
- Provider



- 5. Review the transaction summary to make sure that all information was entered correctly.
 - Add Another allows you to file multiple claims together without having to submit each one individually.
- 6. Once you've confirmed your transaction summary is correct, review and agree to the Terms and Conditions and click **Submit** to submit your claim. You will be given the option to print the confirmation page for your records.

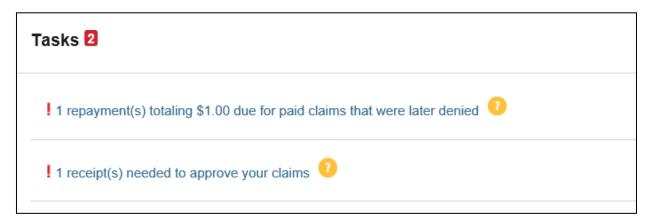
SUBMIT A REPAYMENT

We will request repayment from you for any paid claims for which we have not received sufficient documentation. You will see a message under **Message Center** tab or in the **Tasks** section on the home page if you need to submit a repayment.

To repay a claim you can utilize either of the two options below:

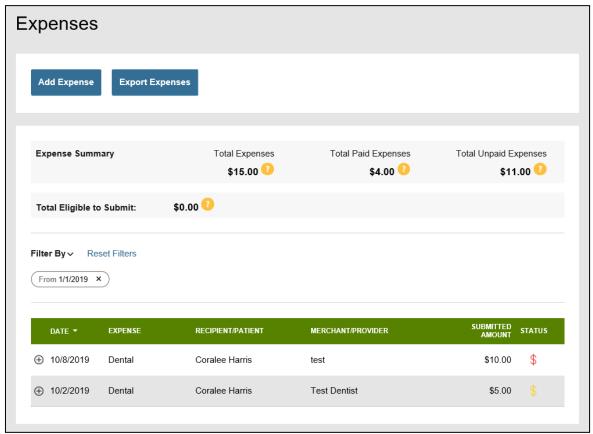
- 1. Click Repay to repay the claim(s) via a transaction directly from your personal bank account you have on file. See 'Add bank account' for instructions if you need to add or update your linked bank account. This is the fastest way to submit your repayment.
- 2. Print the **Denial Letter with Repayment** and mail it along with a personal check to the mailing address listed at the bottom of the notification.

Note: If you have sufficient documentation for the claim that has been denied and is pending repayment, you can select the **Upload Receipt** option if it's available instead of repaying the claim.





MANAGE EXPENSES



Expenses can be accessed by clicking on the **Accounts** tab and then **Expenses**. Here you can add an expense, export expenses, and find detailed reports of your medical expenses.

To add an expense, click the **Add Expense** button in the top left corner.

There are 3 required fields:

- Expense Description
- Date of Service
- Expense Amount

Optional fields for your records include:

- Total billed amount (total amount billed before insurance and provider discount deductions)
- Provider
- Expense type (medical/vision/dental/pharmacy etc.)
- Recipient/patient (in case the expense is related to an account dependent)
- Upload a receipt for recordkeeping (must be a JPG, JPEG, GIF, PNG, or PDF and cannot exceed 8 MB)
- Leave notes for future reference



You can elect to **Pay Expense Now** or **Save for Later**. By clicking **Pay Expense Now** you will be prompted with additional questions about your submitted expense as well as how to initiate money movement. By selecting **Save for Later**, the expense will be added to the expense page and can be paid later by clicking on the **Pay** button by a specific expense.

Note: Any expense added will not initiate any money movement.

The Export Expense button will export a detailed list of all your expenses into an excel spreadsheet.

On the Expenses page, you may view your expense details by date, expense, patient, provider, amount, or status. The table can be filtered down further by selecting **Filter By** at the top of the page. Should you want to go back to the main display, simply select **Reset Filters** in the top left corner.



The bottom of the expense page shows options for each individual expense. Click on an individual expense to upload a receipt, add a note about the expense, mark an expense as paid if you paid the expense from an outside source, remove the expense, or update an expense.

A payment can be made by:

- 1. Clicking on the Pay button by an expense in the listed chart
- 2. Select an account to Pay From and an account to Pay To
- 3. Continue through the standard claim filing steps. See the File a Claim section for details



MESSAGE CENTER

In the Message Center tab you may receive notifications for receipt reminders, requests for more information, denial letters, and more.

When there are new notifications in the Message Center, you will see a red box with a number inside indicating how many new notifications have accrued.

For each message, you will be able to see the following:

- The date and time the message was sent
- Who the message is from
 - o For notifications, this will be listed as 'Auto-generated'
- The subject of the message
- Message attachments

When a new message appears, it will be bolded. After a message has been read, it will appear in normal font and you will have the option to archive the message(s). On the main page, you will have the option to see both Current Messages and the option to view Archived Messages. If archived messages are open, you have the option to hide them by clicking Hide Archived Messages. When archiving a message, you can select them individually or multiple at a time. If you select a message that is bolded and hasn't been read yet, it will automatically be marked as 'read' and will not be bolded anymore. Messages will be stored for a period of 3 years.

Note: Once a message has been moved to the archive section, it cannot be moved back or be permanently deleted.

Message Center 8



ACCOUNT UPDATES

Update Your Profile

To update your phone number or email address select your name at the top of the page, then click **Profile Summary** in the drop down.

Note: Any profile information provided by your employer will not be available to update within your online account.

Update the information as applicable and select **Submit**.

Add Dependent

You can add a dependent to your account by following the steps below.

Select your name at the top of the page, then click **Profile Summary** in the drop down. In the profile summary page you can add a dependent by clicking **Add Dependent**.

You will be required to submit the following information for the dependent:

- Full Name
- Birthday
- Gender
- Student Information
- Relationship to account holder

Once all required fields are completed, select **Submit**.

You can order an additional NetBenefits AccessCard® for your spouse or eligible dependent on NetBenefits. Scroll down to the "Need more help?" section on your Reimbursement Accounts page on NetBenefits to request an additional card.



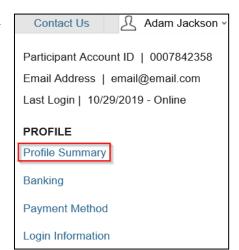
Request an additional NetBenefits AccessCardSM

Add a Bank Account

You can link your personal bank account to your Fidelity Reimbursement Accounts Services account(s) by selecting **Banking/Cards** under the **Accounts** tab and selecting **Add Bank Account**. You may link your account in order to quickly reimburse yourself for eligible Health Care, Dependent Care, or HRA expenses paid out of pocket.

Complete the required fields and select **Submit**.

Review the pop-up message and click Submit.





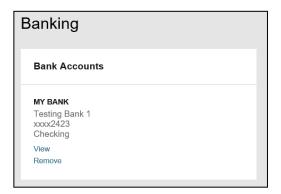
For security purposes, a micro- deposit ranging from \$0.01 - \$0.99 will be made to your personal bank account in the next 1-3 business days. You can confirm the deposited amount on NetBenefits. Once logged in, click on the link in the task section on the Home page. The notification will read "One or more bank accounts require activation."

Click on Activation. Enter the amount that was deposited in your personal bank account and click Submit.

REMOVE A BANK ACCOUNT

To remove a bank account, select **Banking/Cards** under the **Accounts** tab to view your linked account(s). Underneath the account will be the option to View, Activate, or Remove. Select Remove to eliminate the selected bank account.

Note: The 'Remove' button will only be visible when bank account updates are allowed and if there are no pending electronic transactions.





FORMS

Visit the **Tools & Support** tab to view documents and forms relevant to your benefits. The table below details which forms may be visible to you based on your benefits availability.

Form Name	Account Type	Description
Authorized Representative/HIPAA Form	All	Used to document the designation of an Authorized Representative. This form authorizes the release of medical information to the named representative(s). Only valid for one year after submission for Health Care FSA (HCFSA)/ Health Reimbursement Arrangement (HRA)/ Dependent Care Account (DCA). Please note that with this form it allows information to be provided to the authorized representative but does not allow them to make any changes.
Automatic Orthodontia Request Form	FSA/HRA	You can complete this form if you would like to receive automatic reimbursement for orthodontia expenses. A new form must be submitted at the start of each new plan year.
Claims Terms and Condition	FSA/HRA/DCA	The terms and conditions of a reimbursement request
Medical Necessity Form	FSA/HRA	This form is to be completed when submitting "dual- purpose" expenses. Dual-purpose expenses are expenses that are only eligible with a Medical Necessity letter or signed doctor's note (i.e. massage therapy, etc.).
Power of Attorney Form	All	This form is used to legitimize someone else as an authorized user on your account. This form is valid for the lifetime of the account holder. By selecting a power of attorney, you are agreeing that the power of attorney can make decisions for you.
Recurring Dependent Care Request Form	DCA	This form is to be completed each plan year and as changes occur when you want to receive recurring reimbursement of dependent care expenses. A new form must be submitted each year.
Reimbursement Request Form	FSA/HRA	This form is used to submit any out-of-pocket expenses for reimbursement.
Commuter Card Transaction Dispute Form	All	This form is used when you wish to dispute a transaction in the case of suspected fraudulent debit card activity.
Deductible Verification Form	PDFSA	This form is to be completed if you are enrolled in a Limited Purpose FSA and have met the IRS minimum annual deductible. You will then be enrolled in a Post Deductible FSA and can receive reimbursements for general medical expenses (medical and prescription as well as vision or dental). To view IRS minimum annual deductibles, please visit this website: https://www.irs.gov/publications/p969.



FAQs

How do I change my FSA/DCA payroll deduction amount?

HCFSA/DCA plans only allow changes to your election (that would in turn update your payroll amount) with a qualifying life event such as the addition or loss of a qualifying dependent. Contact your employer for more information.

What do I do if a provider or my health insurance refunds me for an expense I paid for with my benefit account or I requested funds in error?

For a HCFSAFSA/HRA this can be submitted via check along with the claim number to the standard PO Box on claim notifications, or you may contact our call center to have the corresponding claim denied so that you can repay the claim within NetBenefits. If the provider refunds your debit card the account will be repaid, but you may need to contact the call center if the corresponding claim is still asking you to take action and we can have the refund applied to that claim.

Once I file a claim, how long does it take for my funds to be available?

Claim review occurs within 2 business days. Once your claim is approved, if you have a bank account added to your account this can take as little as 3 business days. However, a check can take up to 7 business days to arrive.

What do I do if my debit card declines or doesn't work?

Ensure you have activated the card, and have logged into NetBenefits to accept your terms and conditions. Within your profile, confirm you have the correct and most recent card by verifying the last four digits. Check your balance and verify via your activity that there are no pending transactions you have not accounted for. If using the card at the retail pharmacy ensure the item is coded as HSA/HCFSA eligible. If you are still unable to determine the cause, call the number on the back of your card for the department who can verify the cause and best solution.

How can I grant my spouse access to my account?

You may submit a Power of Attorney Form or an Authorized Representative Form. These forms can be found via NetBenefits.

Screenshots are for illustrative purposes only.

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Can I use my account to pay for medical expenses for a spouse or eligible dependent?

Yes, you may use your funds without penalty to pay for qualified medical expenses for yourself, spouse or eligible dependent even if they are covered under another health plan. Consult a qualified tax advisor for advice.

Can I enroll in both an HSA and an HCFSA?

If you enroll in both an HSA and an FSA or HRA, you cannot make deductible contributions to the HSA for that coverage period if the HCFSA or HRA are "general purpose" arrangements that pay or reimburse for qualified medical expenses. However, you still may be able to make deductible contributions to an HSA even if you are also covered under an HCFSA or HRA if those arrangements are "limited purpose" HCFSAs or HRAs that restrict reimbursements to certain "permitted benefits" such as vision, dental or preventive care benefits. Other permissible combinations include "suspended HRAs" and "post-deductible" HCFSAs or HRAs. Contract your legal or tax adviser to review these situations.

