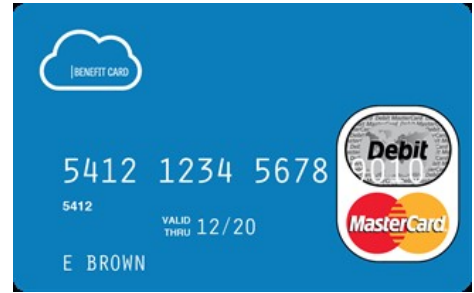


### What is the Prepaid Benefits Card?

The Prepaid Benefits Card is a special-purpose MasterCard® card that gives participants an easy, automatic way to pay for eligible health care/benefit expenses. The card lets participants electronically access the pre-tax amounts set aside in their respective employee benefits accounts such as Flexible Spending Accounts (FSAs), Health Reimbursement Accounts (HRAs) and Health Savings Accounts (HSAs).



### How does the Benefits Card work?

It works like a MasterCard® card, with the value of your account(s) contribution stored on it. When you have eligible expenses at a business that accepts MasterCard® debit cards, you simply use the card. The amount of the eligible purchase will be automatically deducted from your account and the pre-tax dollars will be electronically transferred to the provider/merchant for immediate payment.

### Does the Benefits Card change how the participant is reimbursed for expenses?

Before the Benefits Card became available, you had to pay for eligible expenses at the time of purchase, submit claim forms along with all receipts, and then wait for the reimbursement to be processed. Checks were issued and mailed to you. In theory, you paid twice – through payroll deduction and then at the point of sale – then you had to wait for reimbursement.

With the Benefits Card, you simply swipe your card and the funds are automatically deducted from your respective benefit account(s) for payment. The card eliminates most out-of-pocket cash outlays and paperwork, as well as the need to wait for reimbursement checks.

### Is the Benefits Card just like other MasterCard® cards?

No. The Benefits Card is a special-purpose MasterCard® card that can be used only for eligible health care/benefits expenses. It cannot be used, for instance, at gas stations or restaurants. There are no monthly bills and no interest.

### How many Benefits Cards will you receive?

You will receive two cards. If you would like additional cards for other family members, please contact isolved Benefit Services.

### Will you receive a new Benefits Card each year?

No, you will not receive a new card each year. If your card was used in the current benefit year and you will have a benefit associated with the card for the following plan year, simply keep using the same card the following year. The card will be loaded with the new annual election amount at the start of each plan year or incrementally with each pay period, based on the type of account(s) you have.

### What if the Benefits Card is lost or stolen?

You should call isolved Benefit Services to report a lost or stolen card as soon as you realize it is missing, so the card can be turned off and a replacement issued. There may be a fee for replacement cards.

## Getting Started and Activating Your Card

### How do I activate the Card?

You should call the toll-free number on the activation sticker on the front of the card or visit the website on the back of the card. You can use both cards once the first card is activated, you do not need to activate both. You should wait one business day after activation to use the card. Each card user should sign the card with their name.

### What dollar amount is on the Benefits Card when it is activated?

For Health Care FSAs, the dollar value on the card will be the annual amount that you elected to contribute to your respective employee benefit account(s) during benefits enrollment. Eligible expenses will be deducted from that total dollar amount as the card is used or manual claims are submitted.

Some other types of accounts, like Dependent Care FSAs, HRAs and transportation accounts, are funded incrementally at each pay period, so it is especially important to be aware of account balances in order to avoid card declines at the point of service.

## Using the Card

### Where can you use the Benefits Card?

IRS regulations allow you to use the Benefits Cards in participating pharmacies, mail-order pharmacies, discount stores, department stores and supermarkets that can identify FSA/HRA eligible items at checkout and accept MasterCard® prepaid cards. Eligible expenses are deducted from the account balance at the point of sale. Transactions are fully substantiated, and in most cases no paper follow-up is needed. You can find out which merchants are participating by visiting the website on the back of the card.

Some plan designs may also allow you to use the cards in pharmacies that have certified that 90% of the merchandise they sell is FSA/HRA eligible. However, since these pharmacies cannot identify the eligible items at the point of sale, another form of auto substantiation or paper follow-up will be required.

You may also use the card to pay a hospital, doctor, dentist or vision provider that accepts MasterCard®. In this case, auto-substantiation technology is used to electronically verify the transaction's eligibility according to IRS rules. If the transaction cannot be auto substantiated, follow-up will be required.

### Are there places the Benefits Card won't be accepted?

Yes. The card will not be accepted at locations that do not offer the eligible goods and services, such as hardware stores, restaurants, bookstores, gas stations and home improvement stores.

Cards will not be accepted at pharmacies, mail-order pharmacies, discount stores, department stores and supermarkets that **cannot** identify FSA/HRA eligible items at checkout. The card transaction may be declined. You can find out which merchants are participating by visiting the website on the back of the card.

## If asked, should you select *debit* or *credit*?

Your Benefits Card is actually a prepaid card. But, since there is no prepaid selection available, you should select credit. You do not need a PIN and cannot get cash with the prepaid Benefits Card.

## How does the card work in participating pharmacies, discount stores, department stores and supermarkets?

- a. Bring prescriptions, vision products, eligible OTC and other purchases to the register for checkout. (Please note: The list of eligible OTC items changed per the Patient Protection and Affordable Care Act of 2010.)
- b. Swipe the card for payment.
- c. If the card swipe transaction is approved (e.g., there are sufficient funds in the account and at least some of the products are FSA/HRA eligible), the amount of the FSA/HRA eligible purchase is deducted from the account balance and no receipt follow up is required. You will be asked for another form of payment for the non-FSA/HRA eligible items.
- d. If the card swipe transaction is declined, you will be asked for another form of payment for the total amount of the purchase.
- e. The receipt will identify the FSA/HRA eligible items and may also show a subtotal of the FSA/HRA eligible purchases.
- f. In most cases, you will not receive requests for receipts for FSA/HRA eligible purchases made in participating pharmacies, discount stores, department stores or supermarkets.

## Why do you need to save all of their itemized receipts?

You and your other eligible users should always save itemized receipts for FSA and HRA purchases made with the Benefits Card. You may be asked to submit receipts to verify that the expenses comply with IRS guidelines. Each receipt must show: the merchant or provider name, the service received or the item purchased, the date and the amount of the purchase. The IRS requires that every card transaction must be substantiated. This can occur through automated processing as outlined by the IRS (e.g., co-pay matching, etc.). If the automated processing is unable to substantiate a transaction, the IRS requires that itemized receipts must be submitted in order to validate expense eligibility.

## How long do you need to save their itemized receipts?

Participants should save itemized receipts for FSA and HRA until the end of the benefit year and/or grace period (if applicable). HSA participants should save receipts for three years to comply with IRS document retention rules.

## What if you lose receipts or accidentally swipe the card for something that's not eligible?

Usually the service provider can provide a replacement receipt. In the event that a receipt cannot be located, recreated or if the expense is ineligible for reimbursement, the participant can send a check or money order to isolved Benefit Services for the amount so it can be credited back to the FSA/HRA account.

## May you use the Benefits Card for prescriptions ordered prior to activating the card?

No. The card must be activated prior to the order and/or purchase date of prescriptions. In some cases, participants need to wait one business day after activating the card to make purchases. For example, if the card is activated on Tuesday, a prescription can be ordered and picked up on Wednesday.

### Can you use the Benefits Card if you receive a statement with a patient due balance for a medical service?

Yes. As long as you have money in your account for the balance due, the services were incurred during the current plan year and the provider accepts MasterCard® debit cards, you can simply write the card number on the statement and send it back to the provider.

### Sometimes you are asked for the CVV when paying the balance due or when placing an order by phone or online. What is this and where is it found?

CVV stands for Card Verification Value. It is a three-digit number that can be found on the back of the card to the right of the signature panel.

### How do you know how much is in your account?

You can visit your personal [Account Summary](#) page or the mobile app to view account activity and current balance. Participants should always know their account balance before making a purchase with the card.

### What if you have an expense that is more than the amount left in your account?

By checking the account balance often – either online or via the mobile app – you will have a good idea of how much is available. When incurring an expense that is greater than the amount remaining in your account, you may be able to split the cost at the register (check with the merchant). For example, participants may use the Benefits Card for the exact amount left in the account, and then pay the remaining balance separately. Alternatively, you may pay by another means and submit the eligible transaction via a claim form online or via the mobile app with the appropriate documentation.

### What are some reasons that the Benefits Card might not work at point of sale?

The most common reasons why a card may be declined at the point of sale are:

- a. The card has not been activated.
- b. The card has been used before the 24-hour period after activation is over.
- c. You have insufficient funds in your employee benefit account to cover the expense.
- d. Noneligible expenses have been included at the point of sale. (Retry the transaction with the eligible expense only.)
- e. The merchant is encountering problems (e.g. coding or swipe box issues).
- f. The pharmacy, discount store, department store or supermarket cannot identify FSA/HRA eligible items at checkout according to IRS rules.

### Are you responsible for charges on lost or stolen Benefits Cards?

If isolved Benefit Services is notified within two business days, you will not be responsible for any charges. If the notification is after two days, you may be responsible for the first \$50 or more. Replacement cards may be purchased.

### Whom do you call if they have questions about the Benefits Card?

Call isolved Benefit Services at the phone number shown on the back of the card.

### Can you use the Benefits Card to access last year's money left in the account this year?

The IRS allows for a grace period in the current year to use up funds carried over from the prior year. Contact isolved Benefit Services to find out how the grace period is handled for your specific program.

### How will you know to submit receipts to verify a charge?

You will receive a letter or notification from isolved Benefit Services if there is a need to submit a receipt. All receipts should be saved per the IRS regulations.

### What if you fail to submit receipts to verify a charge?

If receipts are not submitted as requested to verify a charge made with Benefits Card, then the card may be suspended until receipts are received. You may be required to repay the amount charged. isolved Benefit Services will advise you that the card has been suspended, if a receipt is not received. Submitting a receipt or repaying the amount in question will allow the card to become active again.