

Guide to using your prepaid **HEALTH DEBIT CARD** with your **Flexible Spending Account**



Group Plan Solutions
Benefit Administration

2505 Court Street • Pekin, Illinois 61558

When you enroll in your employer's health flexible spending account (FSA), you will receive an FSA debit card also known as a Health Debit Card. When you receive your card, it is programmed with the full amount that you elected for your health FSA plan year.

WHAT DO I DO WHEN I RECEIVE MY FSA HEALTH DEBIT CARD?

- Sign the back of the card and have another eligible user sign the other card if you have dependents.
- You have full access to your FSA health care amount on your plan effective date.
- Don't throw your cards away at the end of the plan year. Your card will be reloaded with your new plan year election information.

HOW MANY HEALTH DEBIT CARDS WILL I RECEIVE?

You will receive two cards.

THE CARD IS ONLY IN MY NAME. CAN I USE IT FOR MY DEPENDENTS?

Cards are only issued in the name of the Employee enrolled in the plan; however, you can use your card for eligible expenses for your spouse and/or dependents.

WHAT IF MY CARD IS LOST OR STOLEN?

Contact Group Plan Solutions by phone at 888-301-0747 or by email at flexspendhelp@groupplansolutions.com to report a lost or stolen card as soon as you realize it is missing. We will reissue replacement cards. Replacement fees may apply.

I'VE BEEN ASKED FOR THE CVV; WHAT IS THIS?

CVV stands for "Card Verification Value." It is a 3-digit number that can be found on the back of the card to the right of the signature panel.

CAN I ACCESS FUNDS FROM MY ACCOUNT FROM AN ATM?

No. Your card can only be processed as "credit" at eligible providers.

WILL I BENEFIT FROM USING THE HEALTH DEBIT CARD?

Yes, if you have out-of-pocket costs for prescription drugs, doctor or dentist visits, or hospital charges. You can use your debit card to pay for your co-pays at the time of service, instead of paying upfront, submitting a claim, and waiting for reimbursement. Additionally, while you will have to submit claims in many instances, using the FSA debit card allows you to utilize the funds from your pre-tax account, as opposed to paying with your personal debit or credit card. The card is provided by your employer to increase convenience, but please don't forget that using the card doesn't mean you won't have to submit any claims for your FSA.

WHERE DOES THE HEALTH DEBIT CARD WORK?

FSA debit cards are coded to only work at: 1) merchants that are set with a Merchant Category Code (MCC) defining that purchase/service as a medical good or service, or 2) stores that have an IRS-approved Inventory Control System in place that confirms at the point-of-sale that any items that have been purchased are eligible for the health flexible spending account (FSA) program.

There is not a way to tell prior to using the card whether the provider's machine is set as a medical provider. We have generally found that the card does work at most doctors, dentists, optometrists, and hospitals. In most, if not all cases, the card will not work at grocery or general retail stores (even at the pharmacy counter) unless the store has implemented an IRS-approved Inventory Control System. If you use your Health Debit Card at a store with an IRS-approved Inventory Control System, you usually will not have to submit Proof of Purchase.

WHAT ABOUT USING MY HEALTH DEBIT CARD AT THE PHARMACY FOR PRESCRIPTION DRUGS?

You can also use your card to purchase your prescription medications.

The IRS says that use of the FSA debit card is ok if it is at a grocery store or general retail outlet that confirms at the point-of-sale that any item that is purchased with the card is eligible for reimbursement.

For example, if you attempt to purchase a prescription drug and a candy bar with the same transaction at a store that has the Inventory Control System, the Health Debit Card will pay for the prescription drug and then ask you for a separate form of payment for the candy bar. You should keep your receipts for all purchases made with the Health Debit Card, but you should not have to submit a receipt for purchases made at these locations with your Health Debit Card.

SHOULD I USE MY HEALTH DEBIT CARD AT THE DOCTOR'S OFFICE?

We recommend that you do not use your Health Debit Card until the charges are processed through your insurance other than for the Office Visit Copay amount. Once insurance processing has occurred, you may use your Health Debit Card at the provider's office to pay any remaining patient responsibility. If you use your card at the time of service, the amount charged on the Health Debit Card could be more than what is due after your insurance pays. You will then be required to reimburse your Health Debit Card account.

WHEN I USE MY CARD, WILL I ALSO NEED TO SUBMIT A CLAIM FOR PROOF OF PURCHASE?

IRS guidelines require verification of the eligibility of FSA debit card transactions. When you use your Health Debit Card, you will have to provide receipts to verify the eligibility of most purchases.

When you use your Health Debit Card to pay for your employer's health plan prescription and office visit copays, most likely you will not need to provide us with Proof of Purchase.

Group Plan Solutions (GPS) will let you know if you need to submit a claim form, so keep all receipts for debit card purchases. Please do not submit documentation until you receive a notice asking for it, since some items don't require follow-up documentation. You will need to send this notice with supporting documentation.

When using your card for other eligible expense, you will need to provide us with a copy of your insurance EOB (explanation of benefits). For expenses which are not covered by insurance, you will need to submit Proof of Purchase.

You can view any pending transactions as well as upload the necessary Proof of Purchase documentation at www.groupplansolutions.com. Choose the Member option, and go to the Flex Account section. From there, you will see an option to log in to the Flex portal.

WHAT IS A PROOF OF PURCHASE?

Most often, it is a copy of your insurance EOB (explanation of benefits). If not covered by insurance, it is an itemized receipt that includes the name of the provider, date of purchase, service received or item purchased, and the amount of the expense. Cancelled checks, handwritten receipts, balance due statements, or cash register receipts cannot be used to verify an expense.

WHERE SHOULD VERIFICATION INFORMATION BE SENT?

Submit Proof of Purchase (i.e., EOBs and itemized receipts for services rendered) to:

Fax: 855-545-7165

Email: flexspendhelp@groupplansolutions.com

Mail: GPS, PO Box 1587, Pekin, IL 61558

Mobile: The GPS Mobile App is available from the app store on your device.

Online: www.groupplansolutions.com
Choose the Member option, and go to the Flex Account section. From there, you will see an option to log in to the Flex portal.

WHAT HAPPENS IF THE SUPPORTING DOCUMENTATION FOR MY CARD PURCHASE IS NOT APPROVED?

If the debit card is used for an expense that is ineligible, you will have two options for resolving this matter:

- You can submit a claim for an eligible expense that you paid for out of pocket to compensate for the ineligible payment.
- Or you can send a check or money order payable to your employer in the amount of the ineligible payment.

WHAT HAPPENS IF THE AMOUNT PROCESSED UNDER MY HEALTH DEBIT CARD IS MORE THAN THE BALANCE DUE ON A BILL AFTER INSURANCE?

You will have to reimburse the Health Debit Card account for any amount processed under the card that exceeds the balance due after insurance pays.

BY MISTAKE, I PAID FOR A NON-COVERED EXPENSE. WHAT HAPPENS NOW?

If we determine a card transaction was made for a non-covered expense, we will contact you and request that you repay the account for the amount not covered.

WHAT HAPPENS IF I DON'T REPAY THE ACCOUNT FOR REQUESTED AMOUNTS?

If the repayment is not made after two notices have been sent to you, your use of the Health Debit Card will be suspended until the account is repaid.

WHY WOULD MY HEALTH DEBIT CARD BE DECLINED?

- You do not have enough funds in your flexible spending account to cover the cost of the transaction.
- You selected "debit" after you swiped your card in the credit card machine and tried to enter a PIN number. Even though it's a debit card, always choose the "credit" option.

- The card was used for a nonqualified expense, such as an over-the-counter medicine or product.
- The card was used at a non-qualifying location, such as a gas station.
- You received care or treatments from a provider whose Merchant Category Code (MCC) is a non-medical provider type. This could include grocery stores, general merchandise stores, and wholesale clubs (including most pharmacies located in these stores).
- Your card has been temporarily inactivated because you have past due un-substantiated charges or you need to reimburse your account.

Contact Group Plan Solutions for more information or to resolve the reason for the decline by phone at (888) 301-0747 or by email at flexspendhelp@groupplansolutions.com.



IMPORTANT NOTE:

Your Health Debit Card is NOT your insurance card for proof of insurance. It is simply a payment method for eligible expenses under your flexible spending account.



2505 Court Street • Pekin, Illinois 61558

Home | Life | Auto | Business

