



Payment Solutions Enrollment Kit

FSAs-Health Care, Limited Health Care and Dependent Care

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ALERAPAY Website Login Instructions

24/7 Account Info

Report Lost or Stolen Cards / **Review** Claim Status & History **View** Account Balance / **File** Claims / **Request** Debit Cards

In your web browser, enter <u>aleraedge.aleragroup.com</u>

1-Click the PARTICIPANT LOG IN Tab



- 2-Select AleraPay from the drop-down menu
- 3-Then Login under New Plan Member and click "Get Started," and then verify your User ID (Name, Zipcode, Social Security #) and follow the prompts to create your Username/Password.
- **OR** if you already have login Username/Password under Existing User.



Prefer an APP?

Download the free **ALERA**PAY App from iTunes or Google Store.

Login is the same as the web.

Select Touch or Facial ID, from the Profile tab, if applicable.

Use the phone App OR the website noted above to access your account information: Check Balances, File Claims, Track Expenses, and Upload Receipts.

What is a Flexible Spending Account (FSA)?



FSAs are accounts, funded with an employee's elected payroll deductions, to reimburse/pay for qualified personal or family health care (medical/dental/vision) not covered by your health care plans OR dependent care expenses during a benefit plan year.

THE VALUE

- **1-**The FSA is funded with an employee's "pre-tax" income REDUCING your taxable income, meaning you don't pay taxes on this money.
- **2-**The Health Care FSA entire annual election is available on day one of the plan year, while the deposits are divided over annual payroll deductions are collected evenly over the pay periods in the plan year.
- 3-An FSA allows for budgeting of expected health and dependent care expenses.

WHAT's REQUIRED: START AN FSA FOLDER NOW!! Participants MUST maintain copies of FSA receipts submitted for reimbursement to demonstrate that all pre-tax expenses were valid, in the event of an IRS audit.

Health Care FSA (HC-FSA)

The Health Care FSA can only be used for eligible health care expenses under IRS Code § 213(d) such as: medications, doctor office visits, medical equipment, eligible over-the-counter items, dental expenses like cavity fillings and checkups, prescription contact lenses and eyeglasses and sunglasses, and more.

Limited Health Care FSA (Limited HC FSA)

If an employee's medical coverage is a High Deductible Health plan WITH a Health Savings Account eligible expenses reimbursed from an FSA are "LIMITED" to qualifying dental and vision expenses.

NOTE: *A Limited FSA is convertible to a full purpose Health Care FSA upon proof of meeting your medical deductible.

Dependent Care FSA (DC-FSA)

Simply, this account pays for dependent care expenses to allow you and your spouse to work. Dependent care funds can be used to pay for qualified daycare, before and after-school care and other qualified dependent care expenses for your children under age 13 and/or custodial care for your physically or mentally disabled dependent spouse/elders residing with you during the plan year.

Plan Ahead for your FSA

Once enrolled, an employee CANNOT CHANGE their annual election unless they experience a qualified status change (see full IRS FSA Rules & Regulations at www.irs.gov).

In general, funds in FSAs can only be used throughout a plan year. Funds cannot be transferred from one FSA to another or rolled into the next plan year. Unused funds are forfeited to the employer.

However, some employers provide either a carryover up to IRS maximum or a 2-1/2 months grace period.

HEALTH CARE FSA	Annual Expense
Deductibles	\$
Co-Payments	\$
Prescription drugs	\$
Eligible Over-the-Counter Items	\$
Medical Mileage	\$
Dental Expenses not covered by insurance	\$
Orthodontia	\$
Vision Expenses (Exams, Lens, Glasses)	\$
Hearing Expenses (Exams, Hearing Aids)	\$
Therapy (Physical, Speech, Chiropractor)	\$
Other eligible health care expenses	\$
Estimated Annual Health Care FSA Election	\$

DEPENDENT CARE FSA	Annual Expense
Payments to Dependent Care Facility	\$
Payments to Dependent Care Individual	\$
Payments to Adult Care Provider	\$
Estimated Annual Dependent Care Contribution	on \$



Quick Access to Your Health Care Accounts on the GO!!



1. Make payments with ease with the ALERAPAY debit card.* Payments are automatically withdrawn from your reimbursement account, so there are no out-of-pocket costs. The majority of your purchases are verified (or substantiated) at the point of purchase, minimizing the need to submit receipts manually. Reimbursements can be direct deposited to the account of your choice.

3

*Not all employers elect the debit card feature

2. Access your accounts anytime, anywhere

ALERAPAY's website and app provide the healthcare account information you need—fast.

- Quickly check available balances and account details for health care and dependent care FSA
- View charts summarizing account information
- Set account alerts and get notifications via text message. From the Message Center, select Update Notification Preferences.
- View claims requiring receipts
- Use your device of choice including iPhone®, iPad®, iPod touch® and Android™ smartphones and tablet devices



Get up and going quickly

Even if this is your first-time using benefits software, the experience is easyto-use; most importantly, you have 24/7 access to your benefit accounts. When you log in to your portal, you can:

- See your balances in real-time
- File claims
- Upload receipts, using your phone to snap a photo
- Visualize spending with charts and graphs
- Order a replacement debit card

Everything you need to manage your healthcare finances simply!

and more.

Prefer an App—You Got IT !!

Check your health care account balances and submit receipts from anywhere!

The ALERAPAY mobile app provides secure access your health benefit accounts with a touch of a finger.

The ALERAPAY mobile app is designed so you can quickly find what you need most

View balance information for your account(s) right away. Use the "I Want To" section to quickly File a Claim,

Scan for Eligible Expenses



DEBIT-But Don't Forget It!



#1
REASON Charges are NOT APPROVED due to incomplete or illegible documentation!

MAKE SURE YOUR CHARGE IS APPROVED USING THESE SIMPLE STEPS

1-REQUIRED DOCUMENTATION —Receipts MUST include these 5-items

WHO WHEN WHERE WHAT WHAT \$ Date of Received Provider, Service Cost of service or the service service or purchase or purchase purchase purchase

2-WHAT to SUBMIT for REQUIRED DOCUMENTATION

Insurance—Explanation of Benefits (EOB)

Especially if your insurance paid a portion of the expense

LEGIBLE DOCUMENTS

If we can't read it, We can't Pay it

3-Where to SUBMIT DOCUMENTATION for DEBIT CHARGES

- ■—Login to your **ALERA**PAY account through aleraedge.aleragroup.com / uploading receipts is simple.
- \Box —Use the free **ALERA**PAY App to take photos of receipts and upload.

AVOID the COUNTDOWN to SUSPENDED DEBIT CARD SERVICE

FIRST, confirm your email is updated in your **ALERA**PAY account through <u>aleraedge.aleragroup.com</u> (review your profile summary)—where timely notifications are sent regarding claims and card use.

TimeLine	Participant Communication	Message		
Day 1	Debit Transaction Received at ALERAPAY	Substantiation Process Begins Auto-Substantiation cannot approve charge		
Within 2-days	1st Email Request to participant for more info	Documentation is needed to verify eligible transaction.		
After 30-days	2 nd Email Request to participant for more info Deadline: 30-days	Documentation has not been received to verify eligible transaction.		
At 60-days	Overdue Notice email sent Debit card temporarily suspended	Documentation has not been received. Suspension effective as of the email notice.		
TimeLine is Altered when Participant sends documentation, but it does not meet IRS requirements.				
Date of Notice	Documentation sent but does not meet IRS requirements. Email request for more info. Deadline: 45-days	Insufficient documentation to verify eligible transaction. If not received, debit card use will temporarily be suspended.		
Date of Notice	Documentation received, confirmed the expense is ineligible or not approved. Deadline: 30-days	Participant must re-pay the plan or debit card use will temporarily be suspended.		

ALERAPAY follows IRS mandated debit card transaction substantiation and correction procedures.



Direct Deposit Set-Up on the APP

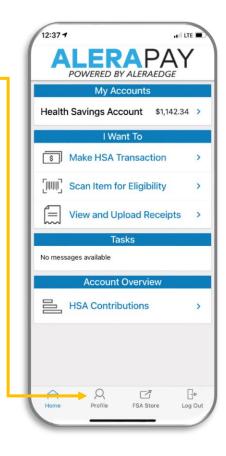


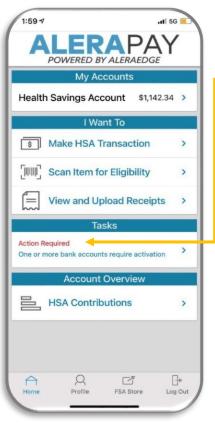
- 1. Login to the AleraPay App
- Click **Profile** tab, from the tabs across the bottom of the screen,
- 3. Then Click MANAGE BANK ACCOUNTS
- 4. Enter your Bank Account Information
 Routing and Account numbers

 (As shown across the bottom of your personal checks).
 Then enter the Account Type and Account Nickname

 (Ex: Jane's checking)
- 5. Click OK to Verify your Bank Account

NOTE: this action deposits a small amount (under \$1.00) in your bank account, in the next 1-3 business days. You MUST confirm the deposited amount to activate your account for Direct Deposit.





- 6. Log into your AleraPay App and click on the Tasks notification. (see Action Required)
- 7. Activate Bank Account by entering the Amount deposited in your bank account and click SUBMIT.



Direct Deposit Set-Up Instructions

Directions from your computer

From the <u>aleraedge.aleragroup.com</u> website select PARTICIPANT LOG IN, then from the drop-down menu, select **AleraPay** and then Log into your Account.

Participant Account ID | 0001881505 1. Hover over Your name at top of the screen to Username | Jsmith1 reveal the drop down list and Email Address | jsmith1@gmail.com click on **Banking Cards** from the dropdown list. Last Login | 4/1/2021 - Online **PROFILE** 2. Then click Add Bank Account. Banking/Cards Payment Method 3. Input your Bank Account Information Login Information **Bank Account Information** Your Bank Name and Bank Address should populate based on your Routing Number input. Routing Number * 0 Account Number * **Once complete, click Submit** Confirm Account Number **NOTE:** Direct Deposit may appear as an Alternate Account Type * Checking method, if your account has a Debit Card. Account Nickname * 0 **Bank Institution Information** What's next? Bank Name * **Micro Deposit Account Verification:** Bank Address * Address Line 1 A small deposit will be posted to your bank account and then immediately reversed. Select a state. Zip Code You MUST login to your AleraPay account to activate payment to the account by Activation Details Submit entering the deposit amount To activate this bank account you must verify the am two attempts before the account will be locked. Cancel JP MORGAN CHASE BANK Bank Name Activation will appear as Routing Number a **Task**, if not completed. x 9999 Account Number Tasks 1 Amount * Enter the amount deposited into your account. I One or more bank accounts require activation ALERAPAY | 800-622-6233 | AleraEdgePay@AleraGroup.com

FAQs-Flexible Spending Accounts

NOTE: Medical Expenses are not applicable to LIMITED HEALTH CARE FSAs

What is an eligible expense?

The Health Care FSA and Limited Health Care FSA can only be used for eligible expenses. Prior to reimbursement from your account, the following items must be satisfied:

- ✓ The expense must be for medical care under Code § 213(d) and must be primarily for a medical purpose.
- ✓ It must be directly or proximately related to the diagnosis, cure, mitigation, treatment, or prevention of disease or illness.
- ✓ It must not be for cosmetic uses (e.g., is it a toiletry)?
- ✓ The method of achieving the medical result must not be unreasonably expensive.
- If the expense is for a medicine or drug other than insulin, the medicine or drug must be prescribed.
- ✓ The expense must comply with the rules of the Health Care FSA Plan.



What is Claim Substantiation?

In practical terms, this means that to determine whether an expense is for medical care, **ALERA PAY** must receive documentation from

the provider of services that answers the five questions: Who, What, When, Where and What \$?

- 1. Who received the expense—The expense must be for the employee, their spouse, or an employee's eligible child.
- What is the expense—The expense was provided to maintain general good health and not for cosmetic purposes [i.e. fall within the legal definition of medical care as defined in Code § 213(d)].
- 3. When the expense occurred—The service must have occurred in the plan year; however, there is an exception to the "no pre-payment" rule for Orthodontic treatment please contact ALERAPAY for additional information concerning Orthodontia.
- Where the expense occurred—The provider, facility, or pharmacy.
- 5. What cost? The amount of the expense must be within the plan limits.

Should you participate in the Health Care FSA?

Your medical provider is required to provide the documentation noted above. If you fail to receive it, you will have issues with your FSA and the requirements under the IRS tax code. If you don't want to maintain documentation files, then a health care FSA probably isn't for you, regardless of the tax savings.

Why is a submitted expense not paid?

If an expense cannot be paid, an explanation letter is sent to you via US mail or email noting the reason for denial or requesting more information. Often an expense is eligible but the claim form and documentation but did not answer the five questions noted previously. An itemized invoice from the provider must include all five of the receipt requirements. Balance due statements or credit card receipts do not supply the necessary information for payment. You may request this documentation from the medical provider and resubmit the claim for reprocessing.

As long as the plan year has not ended, you have the option to resubmit your claim for payment. If the expense is not a valid Code § 213(d) expense, it cannot not be paid. If you have questions regarding the explanation letter, please contact **ALERAPAY** Customer Service at <u>1-800-622-6233</u>. The explanation letter outlines your appeal rights and procedures if you feel the rules of the plan permit payment and the denial is in error.

Can I use the Health Care or Limited Health Care FSA account to pay the dentist or vision care provider?

Yes, but there are many procedures performed by these providers that are not covered expenses under your plan. For example, most cosmetic procedures, toothpaste, electric toothbrushes, non-prescription sunglasses, glass cases and many other products are not covered expenses and the IRS requires your plan to only reimburse qualified expenses. When your group health insurance covers an expense, it is for care or treatment of a qualified medical condition. We need to see a valid receipt answering the five questions (Who, What, When, Where and What \$) or the medical or dental insurance Explanation of Benefits, to determine if the expense qualifies.

Do I have to pay the invoice for the service prior to requesting reimbursement?

No, but you need to have actually received the service before it will be reimbursed. Please do not submit pre-payments for reimbursements (see the orthodontia exception above).

What happens if I don't spend all of the funds elected in the Health Care FSA account?

The health care FSA is a form of self-insurance, so there are circumstances whereby if you don't use it, you could lose it. However, the IRS has added an optional *grace period* provision which may allow you to have more time to submit claims toward account balances so that you don't lose the contribution. Or, your employer may elect to offer the IRS approved *carryover* feature allowing you to rollover unused balances up to the IRS maximum into the next plan year. Either of these features lessens the risk of losing account balances. Your employer can offer the grace period or the carryover but not both options.

What happens if my expenses occur prior to the payroll deduction for that amount and spend all the funds elected in the Health Care FSA account?

The health care FSA is a form of self-insurance. If you have made your first deduction of the plan year, you can be reimbursed the entire amount of your election and deductions will continue to occur throughout the plan year per your payroll schedule.

MORE QUESTIONS—call 1-800-622-6233 or email: AleraEdgePay@AleraGroup.com

Eligible Expenses for a Health Care FSA*

*Limited Health Care FSA only reimburses for eligible dental & vision expenses.

Not sure if an expense is eligible? Call 1-800-622-6233 (ALERAPAY)

Eligible Items for Reimbursement

Acupuncture Flu shots

Alcoholism treatment Guide dog or other service

Ambulance fees animal
Artificial limbs Hearing aids
Artificial teeth (if medically necessary) Hospital services
Asthma treatments Immunizations
Bandages Incontinence supplies

Blood-pressure monitoring devices Insulin
Blood-sugar test kits Laborator

Blood-sugar test kits Laboratory fees
Body scans Laser eye surgery

Braille books & magazines Mastectomy-related special bras (cost over price of regular) Medical information plan charges

Breast pumps Medical records charges

Breast reconstruction surgery Obstetrical expenses

(following mastectomy) Organ donors

Chiropractors Orthodontia (requires contract)

Circumcision Oxygen

Co-insurance amounts Physical therapy

Contact lenses, materials & Prescribed drugs

equipment Preventive care screenings

Contraceptives Psychiatric care
Co-Payments Sterilization

Crutches Supplies to treat medical condition

Deductibles Telephone for hearing-impaired

Dental sealants Transplants

Dental treatment Transportation expenses

Diabetic supplies (including mileage) for a

Diagnostic items/services person to receive medical care

Drug addiction treatment Walkers
Eye examinations Wheelchair
Eye glasses X-ray fees

Eligible Over-the-Counter Health Care Items (reimbursed with receipts):

Acid controllers Digestive aids

Allergy & sinus Hemorrhoidal preps

Antibiotic products Feminine Anti-fungal/itch

Anti-diarrheas Laxatives

Anti-gas Menstrual Care Products
Anti-itch/insect bite Motion Sickness

Anti-parasitic treatments Pain relief

Baby rash ointment Respiratory treatments

Cold sore remedy Sleep aids & sedatives

Cough, cold, flu Stomach remedies

For a complete up-to-date list of FSA Eligible Products & Services, reference the FSAStore.com, under Tools, the <u>Eligibility List</u>.

Items that POTENTIALLY qualify for Reimbursement

Must be primarily for medical care and have note from a medical practitioner prescribing the item to treat a specific medical condition

Adaptive equipment Learning disability instructional

Air purifier fees

Allergy treatment products

Alternative healers

Books, health related

Lodging not at a hospital

Massage therapy

Meals at a hospital

Christian Science practitioners Mentally handicapped special

Classes, health related home

Compression hose Nursing services

Counseling Nutritionist's professional

 (Marriage counseling doesn't qualify)
 expenses

 Dietary supplements
 Occupational therapy

 DNA collection and storage
 Orthopedic shoes

 Ear Plugs
 Prenatal vitamins

 Egg donor fees
 Propecia

 Elevator
 Psychoanalysis

 Exercise equipment or programs
 Psychologist

 (only if required to treat an illness
 Schools and education,

 diagnosed by a doctor.
 residential & special

 Proof of Attendance required)
 Tobacco cessation programs

Fertility treatments Sun-protective clothing

Genetic testing Ultrasound, prenatal

Health Club costs

Varicose veins treatment

Holistic or natural healers Veterinary fees

Home care (related to service animals)

Hormone replacement therapy Vitamins (only with prescription)

Hypnosis Weight loss programs

 Infertility treatments
 (only if required to treat an illness

 Inclinator
 diagnosed by a doctor.

 Incontinence supplies
 Proof of Attendance required)

Lactation consultant Wig

Lamaze classes

Fiber supplements

What is Not Eligible for Health Care FSAs?

Any allowable exclusion defined by the Internal Revenue Code § 213 and Publication 502

Appearance improvements

(e.g. cosmetic procedures, teeth whitening, veneers, tanning, hair removal, hair products, hair transplant, ear piercing)

Babysitting/childcare/nursing services for a healthy baby, car seats, maternity clothes, diaper service

Controlled or illegal substances in violation of U.S. federal law

Duplicate reimbursement
(e.g. already reimbursed or available under

Funeral expenses Household help

Illegal operations & treatments

Tuition for special needs program

Insurance premium/costs for car/life/income protection/ accident insurance or Medicare Part A

Personal use items (e.g. toothpaste) Recreation equipment or lessons (e.g. bicycle, canoe, dance/

swim/martial art lessons)
Taxes, penalties or fines (e.g. Social Security tax

or Self Employment tax)
Vacations or travel expenses

Eligible Expenses for Dependent Care FSAs—Children must be under age 13 for charges to be considered unless disabled

Au pair or Nanny Services (amounts paid for the actual dependent care

Babysitter (in or out of the home)

Before and after school care Pre-school/Nursery School Expenses Extended day programs Summer day camp for qualifying children under age 13 Elder care for qualifying individuals Care for a disabled spouse and/or an IRA tax dependent disabled relative or household member