





## What Do I Need to Know About

# Filing a Claim?

The OneBridge **YourWay** Flexible Spending Account (FSA) is a tax-free benefit, and because of this, the IRS requires us to verify that all reimbursement requests are for qualified medical care expenses, which means we need you to submit proper supporting documentation when submitting your requests.

### What expenses are eligible for reimbursement from my YourWay Health FSA account?

Eligible expenses are generally those that allow you to work. If you are married, your spouse must be employed, looking for work, or a full-time student. You can use your Dependent Care FSA to pay for a variety of child and eldercare services such as before and after school care, daycare, preschool, day camps and eldercare. The IRS requires that expenses are incurred for a dependent that lives with you and is younger than 13 years of age. A dependent that is older than 13 may be eligible if they cannot physically or mentally care for themselves and require care while you are working. Refer to our Dependent Care FSA Expense Table for a detailed listing of eligible expenses

### What information is required as proper supporting documentation?

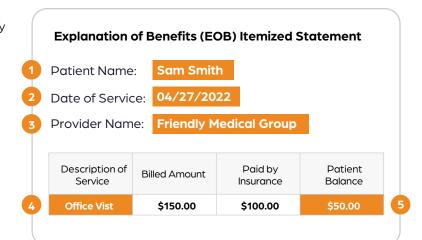
Proper supporting documentation contains the following five pieces of information:

- 1. Name of covered individual or policyholder (you, spouse, dependent)
- 2. Date item was purchased, service provided, or policy period for insurance premiums
- 3. Description of item purchased, service provided, or coverage for insurance premiums
- 4. Name of merchant or provider (pharmacy/store, doctor, hospital, insurance carrier, etc.
- 5. Amount of expense

### What documentation is best to provide for other Qualified Medical Care Expenses?

### The explanation of benefits (EOB)

from your insurance company usually works best as it has all **FIVE pieces of information** required (highlighted to the right). If you don't have an EOB, try to get an **itemized statement** or **detailed receipt** from your provider or merchant.



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### Can I use my health FSA and HRA to reimburse medical care expenses?

You can use your health FSA and your HRA to reimburse qualified medical care expenses for you and your Covered Dependents, but ordering rules apply. The YourWay HRA plan you're enrolled in requires you to exhaust the balance in your health FSA before you are eligible to use the YourWay HRA Benefits Account to reimburse qualified medical care expenses. Also, if you are enrolled in the YourWay FSA and you use the YourWay Benefits Card to pay for any qualified medical care service or product, the Benefits Card will automatically apply the expense first toward the available card balance allocated to your YourWay FSA until the balance is exhausted, before applying the expense toward the available card balance for your YourWay HRA.

Please also note that a partial payment will be made to you when you submit a valid reimbursement request (claim) using the portal, mobile or paper application for an amount that is greater than the available balance in your FSA account at the time. Should this happen, you will receive a notification of this, and will then have the opportunity to submit a new claim for the remaining amount from your HRA account.

## What expenses are eligible for reimbursement from my YourWay Dependent Care FSA account?

The IRS requires the Plan to verify that all expenses reimbursed or paid from a YourWay Health FSA account are for qualified expenses. Section 213(d) of the Internal Revenue Code defines qualified expenses, in part, as "medical care" amounts paid "for the diagnosis, cure, mitigation, treatment, or prevention of disease, or for the purpose of affecting any structure or function of the body."

Expenses that are merely beneficial to your general health and do not serve a specific medical purpose are not qualified medical care expenses. In addition, expenses solely for cosmetic reasons are not usually considered expenses for medical care. For a detailed listing of eligible expenses, refer to our **YourWay Health FSA Expense Table** located on the participant portal at **portal.yourwaybenefits.com**.

### What information is needed to get a Dependent Care claim approved?

IRS rules require that you include proper proof of each qualified dependent care expense. Missing, incomplete, or illegible forms of documentation are the most common reasons claims are denied. You can help avoid denied claims by making sure the supporting documentation you submit is legible and contains all the following:

- Name of dependent
- Age or DOB of dependent
- Date(s) of service (must fall within the plan year)
- **Type of service** provided (ex: after school care, summer day camp, preschool, etc.)
- Name of the service provider (ex: childcare center)
- Provider tax ID or SSN
- Cost of service provided

Itemized bills or invoices from childcare providers are usually sufficient forms of documentation. You do not need to show proof of payment. If your childcare provider is an individual or does not give you an itemized bill/invoice showing the above requirements, please complete the **Dependent Care FSA Reimbursement Form** to serve as your documentation.

Continued on the next page.

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#### How do I file a claim?

There are multiple ways for you to request a reimbursement for a qualified medical or dependent care expense. These include:

- 1. Via your portal account: sign in to your portal account at **portal.yourwaybenefits.com**, click **Claims**, then **Submit a Claim**
- 2. Via our **Mobile app** sign in to your account on our **HRAgo**® app, touch **Claims**, then **Submit a Claim** (you can download the app on the App and Play Stores)
- 3. Via **Mail** sign in to your portal account at **portal.yourwaybenefits.com**, click **Resources**, then download the **Claim Form** and mail to the address listed

You can also use your Benefits Card to pay for qualified medical expenses directly from your Benefits Account without having to pay out-of-pocket and wait to get reimbursed. Refer to the **Benefits Card FAQ** for more information, which is available on the **Resources** page at **portal.yourwaybenefits.com.** 

### How will I know when my request has been processed?

We'll send you an email as soon as we process your reimbursement request letting you know whether your claim was paid in full, partially, or not at all. You may also log in to your Portal Account at portal.yourwaybenefits.com or via our HRAgo® mobile app and click on Claims to view the real-time status of your claim.

### How long will it take to process my request and get my reimbursement?

We process claims daily, and you should get your reimbursement within **five to seven business days** from the day we receive your request.

To get your money back faster, submit your claim online. Also, sign up for direct deposit. It's faster and more convenient than waiting to receive paper checks in the mail.

You can always check the status of your claim online at any time by logging in at **portal.yourwaybenefits.com** and clicking **Claims**.

### What happens if my claim for reimbursement is denied or paid in error?

If your claim for reimbursement of expenses is denied, then you have the right to be notified of the denial and to appeal the denial, both within certain time limits. However, if you have a question or complaint about how one of your claims was processed, you should first call the YourWay Customer Care Center at **1–888–865–1628**. The Customer Care Center will likely be able to resolve the issue and address your concerns without further action on your part. In the event we are unable to resolve your claims issue, we will provide you details regarding how to file an appeal.

Also note, if after receiving a reimbursement it is later determined that you or a Covered Dependent received a payment in error, federal regulations require that you repay the overpayment or erroneous reimbursement back to your Benefits Account.

### Questions?

Please call us at 1-888-865-1628 and one of our friendly representatives will be happy to assist.