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Benefits Participant Guide



Discovery Benefits[®]

DiscoveryBenefits.com

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Refer to the Table of Contents for a full summary of the information contained within this guide. Click the section headings to be brought directly to that section of the guide. If you click a link in this document and would like to return to the section you were at previously, push Alt + Left Arrow. Please note, certain sections of this guide may not apply to your plan type or chosen plan design.

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1. GENERAL INFORMATION

The information in this guide is general and does not apply to all plans depending on specific plan rules. Please see your Summary Plan Description (SPD) for specific rules related to your plan. A copy of your SPD can be obtained through your Human Resource department.

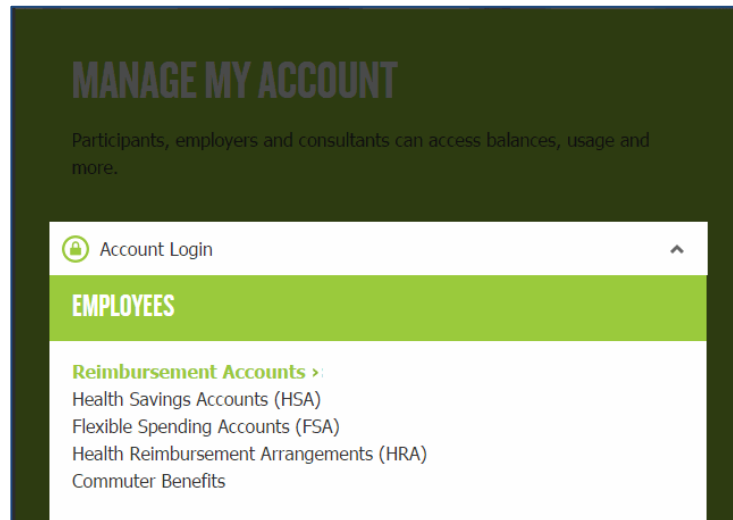
1.1 Contact Information

Participant Services is available to assist Monday through Friday from 6am to 9pm Central.

Phone: 1-866-451-3399
Fax: 1-866-451-3245
Email: customerservice@discoverybenefits.com
Website: www.discoverybenefits.com
Mail: Discovery Benefits
P.O. Box 2926
Fargo, ND 58108-2926

1.2 Logging In To Your Account

To create your account online go to www.discoverybenefits.com. Click the Account Login button and then select Reimbursement Account.



Select Create your new username and password and then complete the three steps.

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Step 1: Complete the required fields. **Note:** You can provide either your SSN **or** Employee ID Number. Select Next.

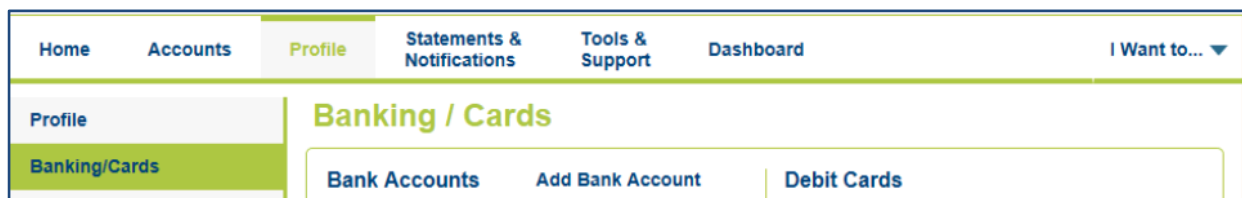
Step 2: Pick the security questions you would like to answer. **Note:** You will be prompted to answer security questions when completing certain functions within the portal. Select Next.

Step 3: A temporary username will auto-populate, double click on the auto-populated username to personalize it. **Note:** Keep record of your personalized username and password as we do not store this information. Select Submit.

1.3 Setting up a Bank Account (Direct Deposits, Repayments, Contributions)

By setting up a bank account (checking or savings) you can be reimbursed for claims via direct deposit, repay claims and contribute to a Health Savings Account. **Note:** No reimbursement limit applies to direct deposit. There is a \$25.00 reimbursement requirement for paper checks that are not issued directly to the provider. For check reimbursement not issued to the provider, claims will be held until they reach \$25.00 or until the end of the month.

Step 1: Select the Profile tab, then Banking/Cards.



Step 2: Select Add Bank Account.

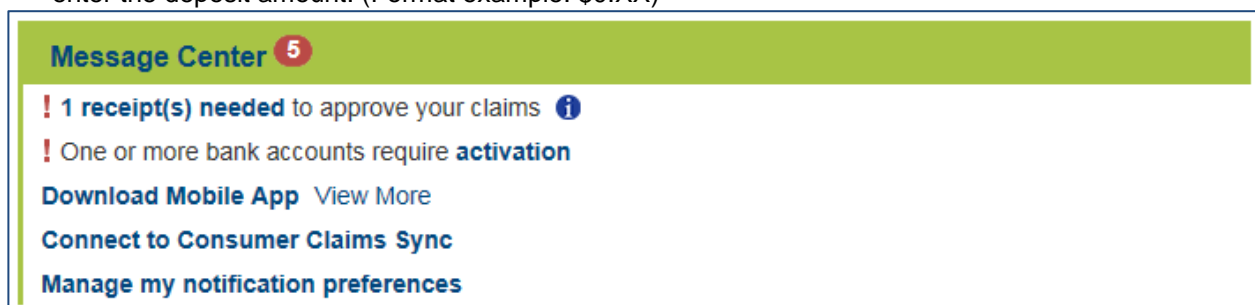
Step 3: Enter bank account (checking or savings) information into the required fields. The Routing Number will auto-populate the Bank Information when you tab to the next field. Select Submit.

Step 4: Answer the security question.

Step 5: Check mark the box for what plan years you would like set up with direct deposit. Then click the Continue button.

Step 6: Validate the bank account. **The direct deposit process will be in a hold status until the bank account is validated.**

- A deposit between (\$0.01 and \$0.99) followed by an immediate withdrawal will be made to the designated bank account **within 1-3 business days of direct deposit submission**.
- Once you see the deposit in your bank account, log in to your Discovery Benefits account at www.discoverybenefits.com. Click on the activation link in the Message Center section on the Home tab and enter the deposit amount. (Format example: \$0.XX)

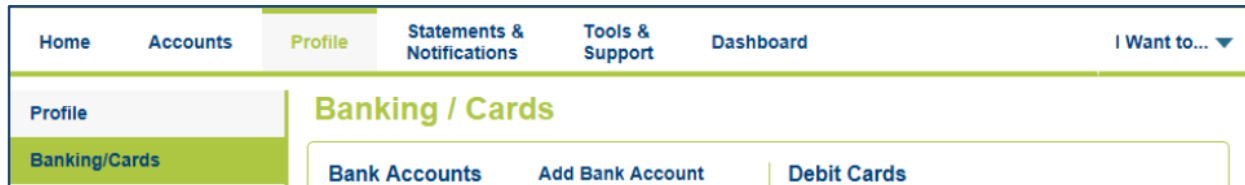


By completing the online steps for establishing direct deposit, you are certifying the information provided is accurate. Further, the completion and submission of this information authorizes Discovery Benefits to issue payment directly to the specified account unless notified to do otherwise. You understand and agree that Discovery Benefits reserves the right to reverse any ACH deposit where an error occurs, in accordance with banking regulations.

1.4 Ordering Debit Cards

If your plan offers the debit card as a reimbursement option, you may be able to order debit cards via your online account for yourself, spouse, and any dependent added to your plan that is over 18.

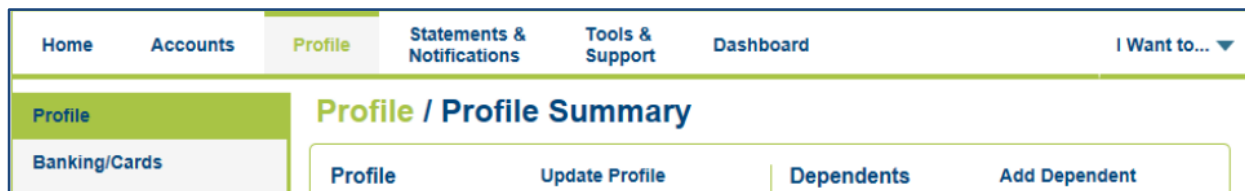
Step 1: Select the [Profile](#) tab, then [Banking/Cards](#). You will have the option to order a new card or a replacement card by clicking on [Debit Cards](#).



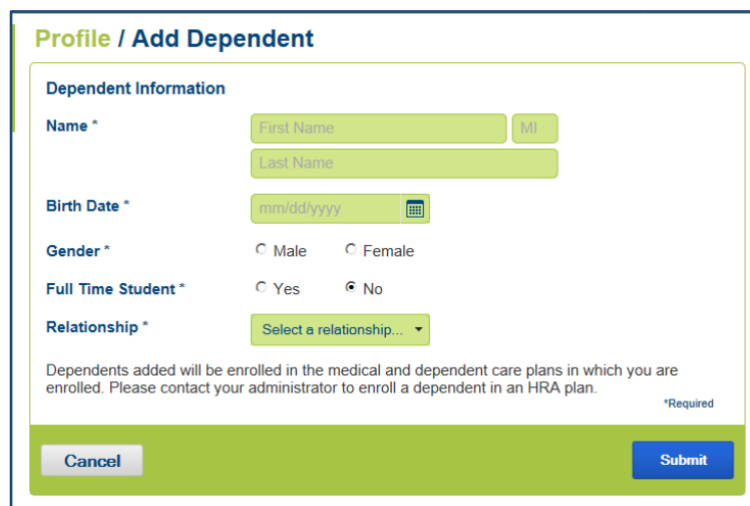
The debit card(s) will arrive to your designated shipping address within 10-14 days of placing the request. **Note:** You can set up a PIN for your debit card by calling 1-866-451-3399, Option 1, Option 1, then Option 3.

If you'd like to order a debit card in your spouse's name or dependent's name who is not listed on the account you would need to follow the below instructions.

Step 1: Select the [Profile](#) tab and then select [Add Dependent](#).



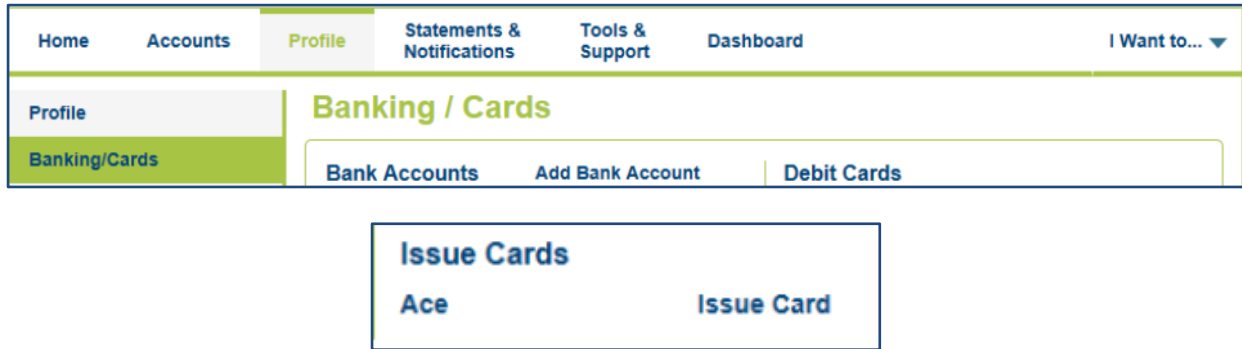
Step 2: Enter the dependent information and then hit [Submit](#).

A screenshot of a web form titled 'Profile / Add Dependent'. The form is enclosed in a light green border. It contains the following fields and options:

- Dependent Information**
- Name ***: Two input fields for 'First Name' and 'MI', and one input field for 'Last Name'.
- Birth Date ***: An input field with a date picker icon and the placeholder 'mm/dd/yyyy'.
- Gender ***: Two radio buttons labeled 'Male' and 'Female'.
- Full Time Student ***: Two radio buttons labeled 'Yes' and 'No'.
- Relationship ***: A dropdown menu with the text 'Select a relationship...'.

Below the form, there is a note: 'Dependents added will be enrolled in the medical and dependent care plans in which you are enrolled. Please contact your administrator to enroll a dependent in an HRA plan.' followed by a small asterisk and the word '*Required'. At the bottom of the form, there are two buttons: 'Cancel' and 'Submit'.

Step 3: Select the Profile tab and then select Banking/Cards. Below Debit Cards you will have the option now to select Issue Card next to your dependent's name.



Step 4: Verify the address and click Submit.

The form is titled 'Cards / Issue Card'. It contains the following fields:
Card Recipient
Name: Ace
Accounts Available: Health Savings Account
Your Mailing Address: Amanda
Update Your Mailing Address
A note at the bottom states: '* Cards will be shipped within 5-7 business days. Verify the primary cardholder's address before ordering the card. *Required'. There are 'Cancel' and 'Submit' buttons at the bottom.

Step 5: You will receive a confirmation once the card is ordered.



1.5 Eligible Expenses

A searchable list of eligible expenses can be found on our website at www.discoverybenefits.com/searcheligibleexpenses. Due to frequent updates to regulations governing FSAs, DCAs and HSAs, this list does not guarantee reimbursement, but instead is to be utilized as a guide. Additional resources can be found at www.discoverybenefits.com/extras.

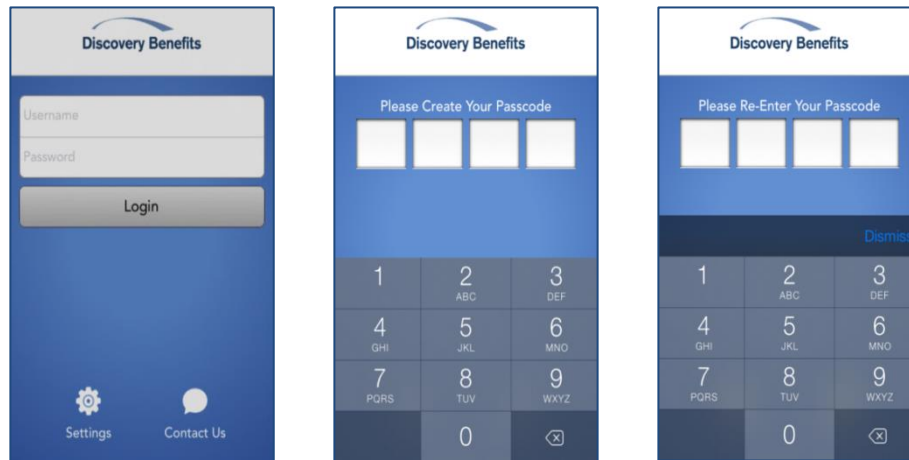
1.6 Mobile App

A FREE mobile app is available for iOS (Apple) and Android markets for Medical FSAs, DCAs, HSAs, HRAs and Commuter. The app can be used to file claims, view account balances, upload receipts, review plan details, view account activity, and view HSA investment detail. **Note:** Version 4.2 or later is required to file claims under a DCA, HRA, or

Commuter account. For more information or to download the app please visit <http://www.discoverybenefits.com/participants/participants-benefits-programs/participants-mobile-app>.

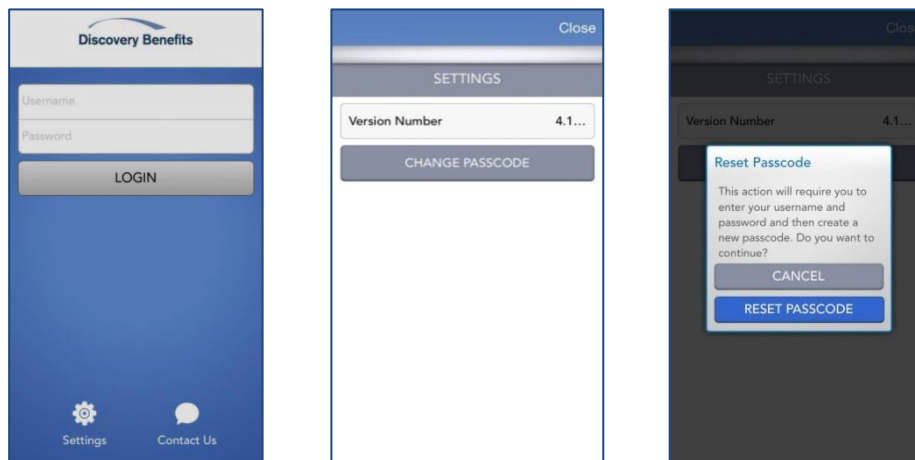
Step 1: Download the Discovery Benefits app on your mobile device.

Step 2: Enter your username and password (same as online account).



***Note:** The above example, as well as the other examples in this guide, are from an iOS (Apple) device; Android devices will look slightly different.

Step 3: Create a four digit passcode, then confirm the passcode (the passcode will be how you will log in from this point forward with the app). **Note:** Discovery Benefits does not have the ability to reset your four digit passcode once created. To do so, you will need to choose the 'Settings' option on the home screen. After this has been selected you will see a page where you can select the 'Change Passcode' option. When selected you will be prompted to confirm this is what you would like to do.

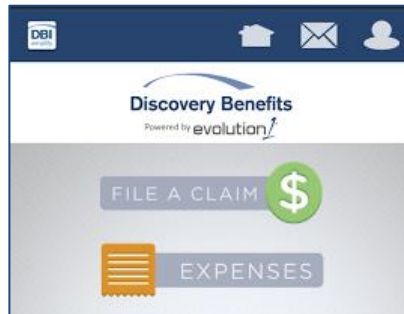


1.6.1 Expense Tracker

The Expense Tracker feature serves as an organizational tool to keep track of all expenses and documentation relating to those expenses. It can also tie to the process of filing a mobile app claim to be reimbursed for out-of-pocket expenses. This feature will only be available through the Mobile App.

Adding an Expense

Step 1: Select Expenses on the home screen.



Step 2: Select create new expense at the top of the Expense Tracker screen.

Step 3: Input your claim information under the Details section. Scroll to the bottom of the screen and select Upload Receipt. Your mobile device will then prompt you to take a picture with your camera.

Step 4: Take a picture of your receipt. Make sure you can clearly read the name of the provider, date(s) of service, the type of service or product, and dollar amount (after insurance, if applicable). Once you have a clear picture, save your image and select Add Expense to store your information. **Note:** You will be unable to submit your expense as a claim from the Mobile App Expense Tracker. You will need to submit your expense through the online portal if you want to be reimbursed for the expense through the Dashboard.

2. FLEXIBLE SPENDING ACCOUNT (FSA)

A Flexible Spending Account (FSA) falls under one of the following categories: Medical FSA, Dependent Care FSA, Combination FSA, Limited FSA or Health Reimbursement Arrangement (HRA). **Note:** A Health Reimbursement Arrangement (HRA) is an employer-funded account that covers designated medical expenses. Please see your Summary Plan Description (SPD) for specific rules related to your plan. A copy of your SPD can be obtained through your Human Resource department.

2.1 Documentation Requirements

Approvable documentation for medical expenses, which is required by the IRS, is a receipt/statement containing, all of the following: name of provider, date(s) of service within the plan year, an eligible type of service or product (see [Eligible Expenses](#)) and dollar amount (after insurance, if applicable). **Tip:** An Explanation of Benefits (EOB) from your insurance provider is ideal for substantiating claims.

Approvable documentation for dependent care expenses, which is required by the IRS, is a receipt/statement containing, all of the following: name of eligible provider, date(s) of service within the plan year, eligible types of service, and dollar amount. **Note:** To be reimbursed, services must already have been rendered. **Tip:** For a Dependent Care Account (DCAs), a signature on the Out-of-Pocket Reimbursement Request Form by the daycare provider will take the place of needing to submit supporting documentation for manual claims.

2.2 Debit Card

Advantages:

- Less out-of-pocket expenses at the time of service
- No waiting for a reimbursement
- Merchant is paid directly at the point of sale

2.2.1 Receipt Reminders

If documentation is required for a debit card transaction, you will receive an email notification to log in to your account to view a Receipt Reminder. The Receipt Reminder will display the documentation required and next steps. If you do not have an email address on file, a Receipt Reminder will be mailed. **Note:** Debit card use will be put on temporary hold if documentation is not received within the designated time period.

2.2.2 When/Why Documentation is Required

Due to IRS regulations, certain debit card transactions need to be substantiated. Substantiating means validating a transaction to ensure the debit card was used for IRS approved items/services within the allowed time frame.

When documentation is **not** needed:

- When co-payments are tied to the account holders health plan.
- When purchases are made at merchants using the Inventory Information Approval System (IIAS). These merchants will approve eligible expenses at the point of purchase. When using your debit card at these merchants, swipe your debit card for the entire purchase. The items that are eligible expenses will be approved, and the merchant will ask for a secondary form of payment for ineligible items. To find a full list of merchants utilizing IIAS, visit our website at www.discoverybenefits.com/extras or click the link Visit Our Website below.
- When recurring expenses match the same provider and dollar amount for previously substantiated transactions. **Example:** Jane goes to the doctor to get her allergy shot. Her treatment requires that she continue to receive these shots every two weeks. Because Jane's allergy shots are not provided at an IIAS merchant and it is not a standard co-pay amount, the first visit will need to be substantiated with an itemized receipt/statement or Explanation of Benefits (EOB). Any recurring visits to the same provider, for the same dollar amount, will be recognized as a recurring expense and will be processed without additional substantiation.

Have a Medical FSA balance and want to avoid submitting receipts?
Learn how to easily manage your account, spend down
your balance, and find a full list of merchants
that utilize IIAS at our website:

[Visit Our Website](#)



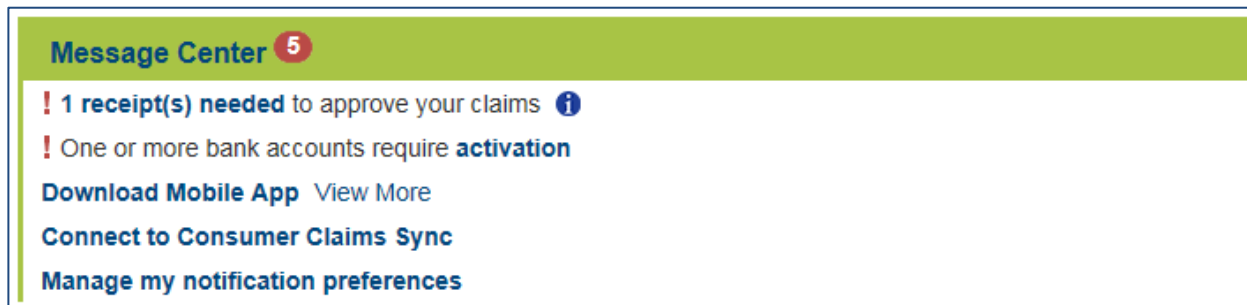
Note: Some items pictured above may require a prescription or doctor's note to be FSA eligible.

2.2.3 Submitting Documentation

There are several ways to submit documentation.

Online

Step 1: A Message Center will appear in the middle of your Home tab.



Step 2: Click on the receipt(s) needed option.

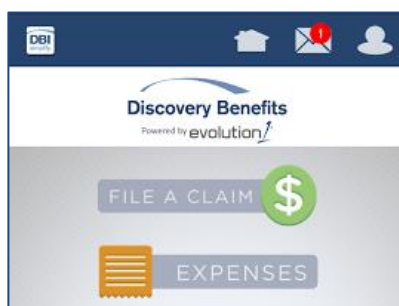
Step 3: Click on Upload Receipt beside the claim to which you would like to upload your documentation.

Step 4: You will be prompted to upload supporting documentation. Browse your documents and select the correct attachment. Once documentation is attached, select Upload.

Step 5: Once uploaded, you will receive confirmation and you will see a receipt status of Uploaded for that claim. This means your documentation has been submitted and will be processed within two business days. If further documentation is needed, you will be notified via email. If an email address is not on file, you will be notified via mail.

Mobile App

Step 1: Access the Message Center by selecting the envelope icon on the top of the mobile application.



Step 2: Click on the Claim.

Step 3: On the Claim screen, scroll to the bottom and select New Receipt. Your mobile device will then prompt you to take a picture with your camera.

Step 4: Take a picture of your receipt. Make sure you can clearly read the name of the provider, date(s) of service, the type of service or product, and dollar amount (after insurance, if applicable). Once you have a clear picture, save your image to submit the new receipt.

Fax or Mail

Submit the Receipt Reminder with documentation to Discovery Benefits via fax or mail.

Fax: 1-866-451-3245

Mail: Discovery Benefits, PO Box 2926, Fargo ND 58108-2926

2.2.4 Card on Hold

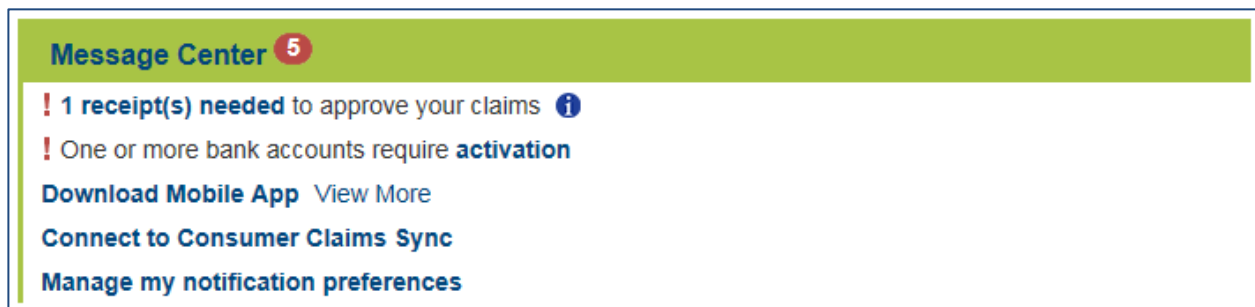
If documentation is not received and processed within the timeframe allowed, the debit card will be placed on a temporary hold. When approved documentation or repayment is received, debit card use will be resumed. **Note:** Only the debit card is on a temporary hold. Claims can still be filed for out-of-pocket expenses.

2.2.5 Offsetting Debit Card Transactions

Offsetting is using eligible out-of-pocket expenses to clear up a denied debit card transaction. Offsetting can be done on your online account or by fax or mail. To communicate your intent, simply write 'offset' on the documentation you are submitting and include the Receipt Reminder or Denial Notification.

Online

Step 1: Select the Home tab, then Receipt(s) Needed.



Step 2: Click on the receipt(s) needed option.

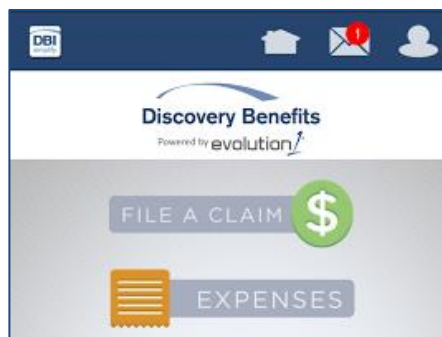
Step 3: Click on Upload Receipt beside the claim to which you would like to upload your documentation.

Step 4: You will be prompted to upload supporting documentation. Browse your documents and select the correct attachment. Once documentation is attached, select Upload.

Step 5: Once uploaded, you will receive confirmation and you will see a receipt status of Uploaded for that claim. This means your documentation has been submitted and will be processed within two business days. If further documentation is needed, you will be notified via email. If an email address is not on file, you will be notified via mail.

Mobile App

Step 1: Access the Message Center by selecting the envelope icon on the top of the mobile application.



Step 2: Click on the Claim you would like to offset.

Step 3: On the Claim screen, scroll to the bottom and select New Receipt. Your mobile device will then prompt you to take a picture with your camera.

Step 4: Take a picture of your receipt. Make sure you can clearly read the name of the provider, date(s) of service, the type of service or product, and dollar amount (after insurance, if applicable). Once you have a clear picture save your image to submit the new offset receipt.

Fax or Mail

Submit the offsetting documentation with the Receipt Reminder or Denial Notification via fax or mail.

Fax: 1-866-451-3245

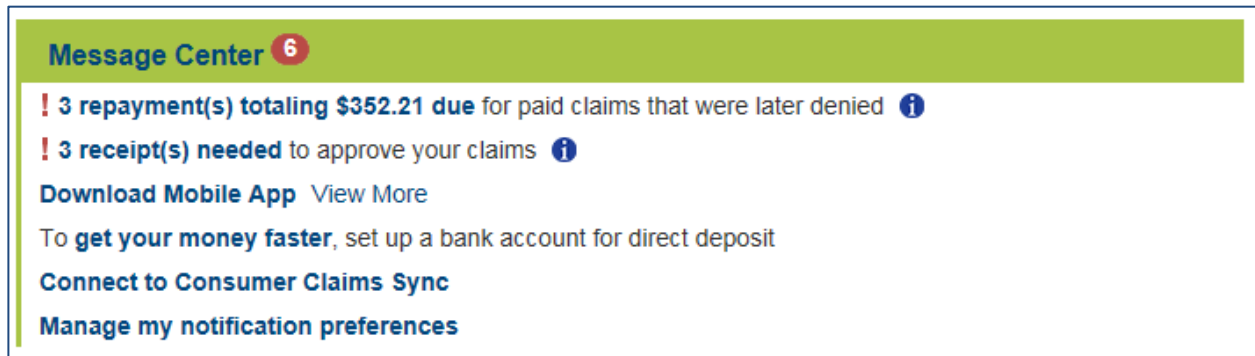
Mail: Discovery Benefits, PO Box 2926, Fargo ND 58108-2926

2.2.6 Repaying Debit Card Transactions

Repayments for denied debit card claims can be made on your online account or by mailing in a check or money order to Discovery Benefits. To ensure efficient processing, include the Denial Notification.

Online

To repay the portion of your claim that was not approved by using the direct deposit account you have on file, you can visit <https://dbi.navigatorsuite.com>. Once you have logged in to your account, select the repayment link in the Message Center on your homepage. Click the Repay link next to the claim you wish to repay and follow the remaining steps.



The screenshot shows a 'Message Center' notification with a red circle containing the number '6'. The notification text reads: '3 repayment(s) totaling \$352.21 due for paid claims that were later denied' followed by an information icon. Below this, it says '3 receipt(s) needed to approve your claims' followed by an information icon. There are four action links: 'Download Mobile App View More', 'To get your money faster, set up a bank account for direct deposit', 'Connect to Consumer Claims Sync', and 'Manage my notification preferences'.

Note: You need to have a validated bank account on file in order to repay the claim using this method. If you do not have a bank account on file or you have not yet validated your bank account, you must log in to your online account and complete the necessary steps for setting up and validating your bank account information. Please see the [Setting up a Bank Account](#) section 1.3 of this guide if you do not have a bank account set up.

Mail

Repayments can be made by sending a check or money order via mail. To ensure efficient processing, include the Denial Notification or Receipt Reminder with the check or money order. If this is not available, simply write the claim number in the memo line of your check. Send repayments to: Discovery Benefits, PO Box 2926, Fargo ND 58108-2926

2.3 Filing Claims

Claims for out-of-pocket expenses can be filed via mail, fax, online, or by using the mobile app. **Note:** Don't file a claim if you have already used your Flexible Spending Account debit card. This could result in duplicate claims.

Online

Step 1: Select [File A Claim](#) within the [I Want To...](#) section.

The screenshot shows a web dashboard with a top navigation bar containing the following tabs: Home, Accounts, Profile, Statements & Notifications, Tools & Support, and Dashboard. Below the navigation bar, on the left, is a green sidebar titled "I Want To..." with two buttons: "File A Claim" and "Manage My Expenses". Below these buttons is a section for "Available Balance" with an information icon. On the right side of the dashboard, there is a large white area with a green border. It features a "Welcome!" message, followed by "Congratulations on taking control of your healthcare expenses. View More".

Step 2: Create the reimbursement by choosing the [Pay From](#) and [Pay To](#) fields.

The screenshot shows the "Create Reimbursement" form. At the top, it says "Create Reimbursement" and provides instructions: "Online claim filing is a fast and easy way to file claims. Simply select the appropriate options from the dropdown menus below and start filing!". Below this is a "Please note:" section with details about receipt formats, processing time, and reimbursement schedules. The form has two dropdown menus: "Pay From *" with "Medical" selected, and "Pay To *" with "Me" selected. A callout box on the right explains that users can choose "Someone Else" to mail a paper check, which adds 10-14 days to the processing time. At the bottom of the form are "Cancel" and "Next" buttons.

Create Reimbursement

Online claim filing is a fast and easy way to file claims. Simply select the appropriate options from the dropdown menus below and start filing!

Please note:
Uploaded receipts must be in a .jpg, .pdf or .gif formats and file size cannot exceed 2MB.
Processing filed claims takes approximately two business days. If your employer has a unique reimbursement schedule your funds will not pay out until its scheduled reimbursement date.
If you are issuing payment to someone else, you are unable to request reimbursement for mileage.

Pay From * Medical

Pay To * ⓘ Me

Based on your selection, you will

Me
Select a Payee...
Me
Someone Else

You have the option to send payment to yourself or someone else. If you choose 'Someone Else' a paper check will be mailed to the designated payee. Please allow 10-14 days mailing time in addition to the processing time.

Cancel Next

Step 3: Upload your valid documentation:

Receipt / Documentation

Receipt(s) * ⓘ **Upload Valid Documentation**
Upload.gif Remove Receipt
View Receipt(s)

Note: A receipt must be uploaded to file a claim.

Summary

Pay From Medical
Pay To Me

* Required

Cancel Previous Next

Step 4: Add the claim details:

Claim Details

Start Date of Service * 01/01/2015

End Date of Service 1/1/2015

Amount * \$ 100

Provider * Dr. Smith

Category * ⓘ Dental

Type * Dental Copay

Description

If the category is 'Other' or 'Over-the-Counter Drugs', you must provide a description.

Recipient *
 Self
 Dependent 1
 Dependent 2

Add Dependent

Did You Drive To Receive This Product/Service? * ⓘ Yes No

Summary

Pay From Medical
Pay To Me
Documentation Uploaded Yes

* Required

Cancel Previous Next

Step 5: Agree to the [Claims Terms and Conditions](#) and [Submit](#) your claim.

Transaction Summary (1)

From	To	Expense	Amount	Approved Amount		
i						
Combination FSA Carryover 500 01/01/2015-12/31/2015	Me	Dental Copay	\$100.00	\$100.00	Remove	Update
Total Amount			\$100.00	\$100.00		

Claims Terms and Conditions ✔ Agreed ^

Cancel

Save for Later

Add Another

Submit

Step 6: You will receive a confirmation that your claim was submitted. It will be processed within two business days. If further documentation is needed, you will be notified via email if you have an email address on file or via mail if you do not.

Confirmation

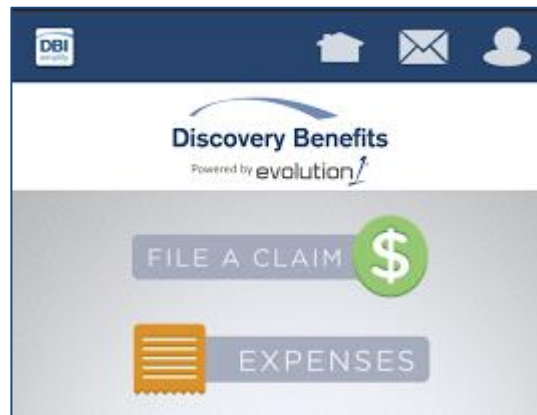
You are welcome to print this page for your records. Please note, you do not need to provide receipts as no further action is required.

Successfully Submitted

From	To	Amount	Approved Amount	Receipt Status
Combination FSA Carryover 500 01/01/2015-12/31/2015	Me	\$100.00	\$100.00	Uploaded(1) Upload another Receipt
Total Approved Amount			\$100.00	

Mobile App

Step 1: Select File A Claim on the home screen.



Step 2: Select the plan you would like to file a claim for.

Step 3: Input your claim information on the New Claim screen. Scroll to the bottom of the screen and select Upload Receipt. Your mobile device should then prompt you to take a picture with your camera.

Step 4: Take a picture of your receipt. Make sure you can clearly read the name of the provider, date(s) of service within the plan year, the type of service or product, and dollar amount (after insurance, if applicable). Once you have a clear picture save your image and select Add Claim to submit your claim.

Fax or Mail

Submit the [Out-of-Pocket Reimbursement Request Form](#) with documentation via fax or mail.

Fax: 1-866-451-3245

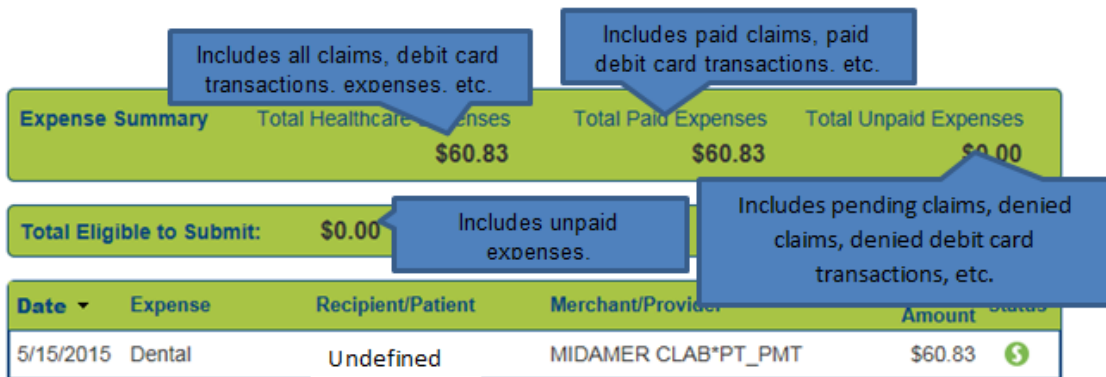
Mail: Discovery Benefits, PO Box 2926, Fargo ND 58108-2926

3. DASHBOARD

The Dashboard feature will provide a cumulative view of all claims, debit card transactions, distributions and track expenses. You can access this from the [Dashboard](#) tab.



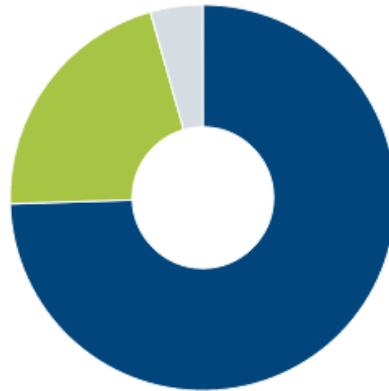
Once you have selected the Dashboard option, the above page will appear. You will be able to hover over each one of the dollar amounts to see the explanation of each field or item as listed in the below image. You can also click on each individual claim to see the detail of each expense.



You can also refer to the graphs on the Dashboard for a breakdown of where expenses have been applied:

[Reset Graph](#)

Expenses by Category



■ Medical
 ■ Vision
 ■ Dental

[View By Category](#)

[View By Status](#)

[View By Recipient](#)

[View By Merchant/Provider](#)

You may also click on each individual expense to view more detail regarding that specific claim or charge.

Recipient
All Recipients

Merchant/Provider
All Merchants/Providers

[Less Options](#)

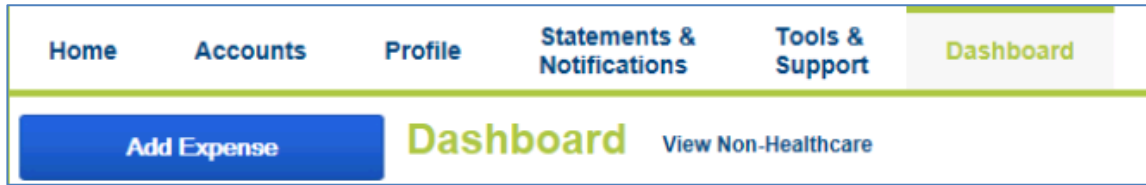
Expense Summary	Total Healthcare Expenses	Total Paid Expenses	Total Unpaid Expenses
	\$60.83	\$60.83	\$0.00

Total Eligible to Submit:		\$0.00
----------------------------------	--	---------------

Date	Expense	Recipient/Patient	Merchant/Provider	Submitted Amount	Status
5/15/2015	Dental	Undefined		\$60.83	\$

Date	Expense	Recipient/Patient	Merchant/Provider	Submitted Amount	Status
5/15/2015	Dental	Undefined		\$60.83	\$
Payment Details					
Date(s) of Service: 5/15/2015 - 5/15/2015		Claim Number: 23617150517D0012701			
Requested On: 5/17/2015		Account: Medical FSA 01/01/2015-12/31/2015			
Expense Category: Medical and Dental Laboratori...Paid: \$60.83					
Source: Debit Card			Receipt Status: Not Needed		
Upload Receipt(s)					

You may also click on [Add Expense](#) to track any expenses that you have:



You will then enter all of the expense information and click Add at the bottom of the window.

Expense Information

Expense Description* Co-Pay

Date of Service* 9/1/2014

Total Billed Amount \$ 500.00

Expense Amount* \$ 500.00

Provider Sanford
Add Provider Address

Expense Medical

Recipient/Patient Angie

Receipt Upload Receipt

Source Online

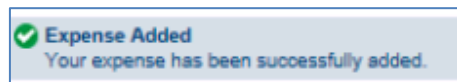
Date Received 9/26/2014

Notes

*Required

Cancel Add

You will receive a confirmation once your expense has been added:



If you want the expense to be paid out you will have to click on Pay and then select the plan you want it to be paid from.

Date	Expense	Recipient/Patient	Merchant/Provider	Submitted Amount	Status
09/01/2014	Medical	Angie	Sanford	\$500.00	Pay

4. HEALTH SAVINGS ACCOUNT (HSA)

4.1 Debit Card

Advantages:

- Less out-of-pocket expenses at the time of service
- No waiting for a distribution
- Merchant is paid directly at the point of sale
- Keep receipts for your own records. You aren't required to submit documentation of HSA transactions to Discovery Benefits.

Have a Medical FSA balance and want to avoid submitting receipts?
Learn how to easily manage your account, spend down
your balance, and find a full list of merchants
that utilize IAS at our website:

Visit Our Website



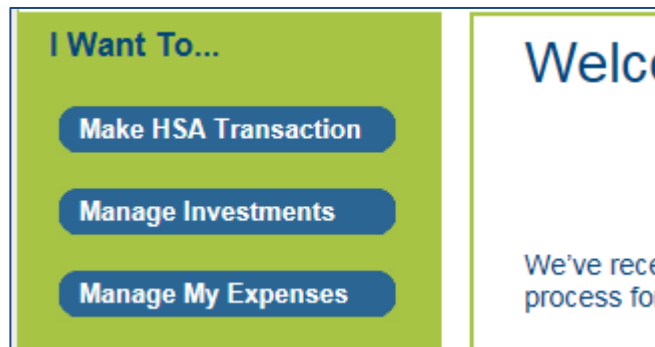
4.2 Distribution (Withdrawal)

A distribution is requesting funds from your HSA. You can request a distribution via your online account. If you need to request a distribution due to an excess contribution removal, prohibited transactions, rollover, transfer, divorce or disability please use the HSA Distribution Form. If you need to request a distribution due to death of the HSA account holder, please use the HSA Death Distribution Form. Both of these forms are located on our website at:

<http://www.discoverybenefits.com/participants/participants-forms>.

Online

Step 1: Select Make HSA Transaction within the I Want To... section.



Step 2: Complete the From and To fields:

Create Transaction

From * My HSA

To * Someone Else

Based on your selections, you will be requesting a distribution (withdrawal).

You have the option to send payment to yourself or someone else. If you choose 'Someone Else' a paper check will be mailed to the designated payee. Please allow 10-14 days for the payee to receive the check.

* Required

Cancel Next

Step 3: Choose if it is a One-time or Scheduled transaction:

Transaction Schedule

Frequency * One-time Schedule

Summary

From My HSA

To Someone Else

Cancel Previous Next

Step 4: Fill in transaction details:

Transaction Details

Tax Description ⓘ Normal Distribution

Amount * \$ 1

Expense ⓘ Medical

Recipient/Patient ⓘ
 Self
 Dependent 1
 Dependent 2

Notes

Summary

From My HSA

To Someone Else

Schedule One-time

* Required

[Cancel](#) [Previous](#) [Next](#)

Step 5: Fill in Transaction Details:

Payee Details

Payee Name * Dr. Smith
Enter who provided this service (this may be a physician, hospital, etc.)

For Check Up
When appropriate, provide the name of the person who received service.

Account Number * 123456789
Enter the account number that the payee uses to identify the service or recipient.

Payee Address * 1234 1st Street
Address Line 2
Address Line 3
Hometown
Minnesota 1111
Enter the address of physician, hospital, etc. who provided the service.
 Save new payee information

Summary

From My HSA

To Someone Else

[Cancel](#) [Previous](#) [Next](#)

Step 6: Agree to the [Claims Terms and Conditions](#), and the [Normal Distribution Disclaimer](#), and [Submit](#).

Fax or Mail

Submit the applicable HSA Distribution Form via fax or mail.

Fax: 1-866-451-3245

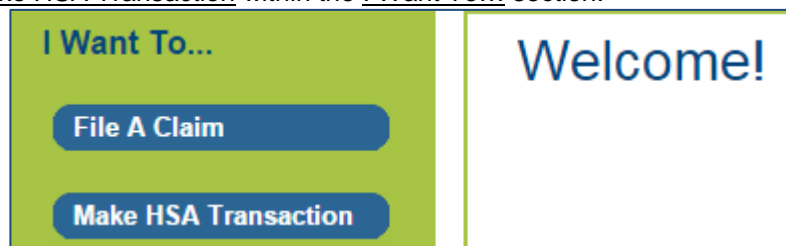
Mail: Discovery Benefits, PO Box 2926, Fargo ND 58108-2926

4.3 Contribution (Deposit)

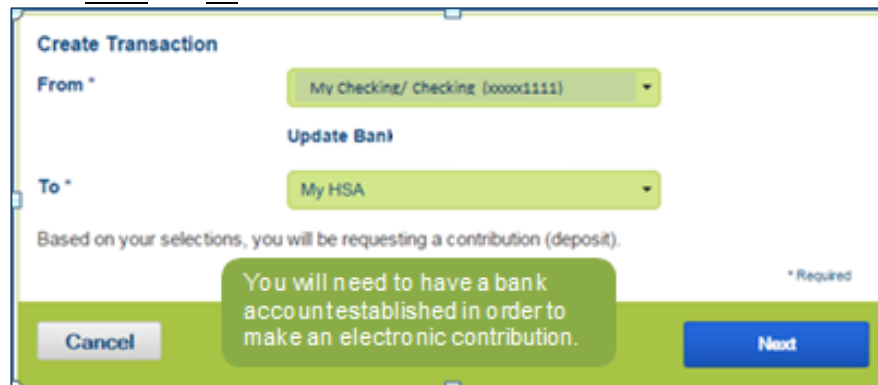
You can contribute funds into your HSA electronically through your online account or via mailing the HSA Contribution Form with a paper check or money order. Electronic contribution processing is quickest way to deposit funds. Use the [IRS Maximum Contribution Detail](#) to determine how much you can contribute for the applicable tax year. **Note:** Any contributions received will be deposited in a cash account. To have funds transferred from the cash account to investments, you must log in to your online account and 'opt in' to establish a specified threshold amount. See the [Investment](#) section on how to 'opt in'.

Online

Step 1: Select [Make HSA Transaction](#) within the [I Want To...](#) section.



Step 2: Complete the [From](#) and [To](#) Fields:

A screenshot of a "Create Transaction" form. The "From" field is a dropdown menu with "My Checking/ Checking (xxxx1111)" selected. Below it is a link "Update Bank". The "To" field is a dropdown menu with "My HSA" selected. Below the dropdowns, it says "Based on your selections, you will be requesting a contribution (deposit)." At the bottom, there is a green bar containing a "Cancel" button, a message box that says "You will need to have a bank account established in order to make an electronic contribution.", and a "Next" button. A small "* Required" text is visible to the right of the message box.

Step 3: Choose if it is a One-time or Scheduled transaction:

Transaction Schedule

Frequency * ⓘ One-time Schedule

Summary

From My Checking/ Checking [xxxxx1111]

To My HSA

Step 4: Enter the Amount and any Notes:

Transaction Details

Tax Year * ⓘ 2015

Amount * \$

Notes

IRS Maximum Contribution Amount ⓘ

Tax Year	IRS Maximum	Processed	Scheduled	Pending	Maximum Contribution Available
2015	\$3,350.00	\$1,145.96	\$0.00	\$0.00	\$2,204.04
2014	\$3,300.00	\$1,350.00	\$0.00	\$0.00	\$1,950.00

Summary

From My Checking/ Checking [xxxxx1111]

To My HSA

Schedule One-time

* Required

Step 5: Agree to the Contribution Disclaimer and Submit.

Mail

Submit the [Health Savings Account \(HSA\) Contribution Form](#) with a check or money order to:
Discovery Benefits, PO Box 2926, Fargo ND 58108-2926

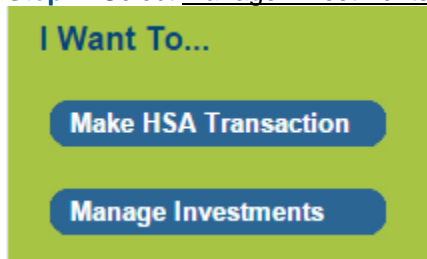
4.4 Investments

You have the ability to invest your HSA funds once you hit a minimum threshold and you also have the ability to view and manage your investment details.

4.4.1 Manage Investment Transfers

To set your threshold you must opt in to Manage Investment Transfers.

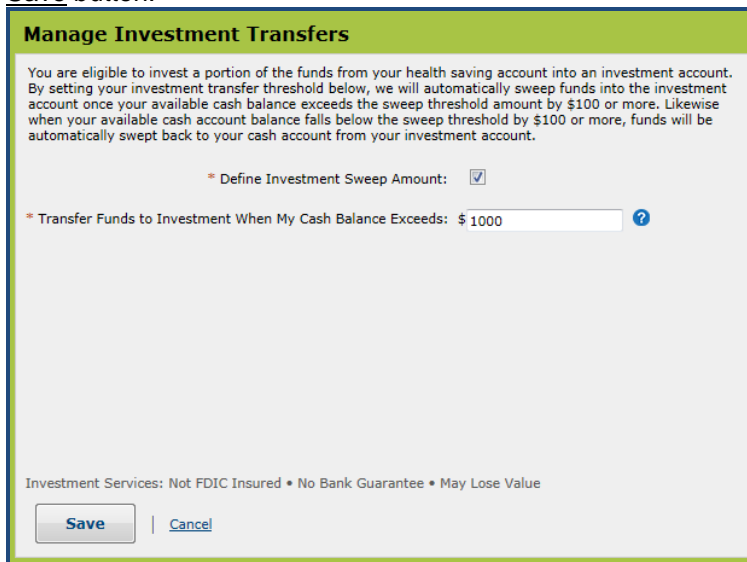
Step 1: Select Manage Investments under the I Want To... Section:



Step 2: Select Setup Investment Transfers:



Step 3: Check the box next to 'Define Investment Sweep Amount'. Set your threshold amount, then select the Save button:

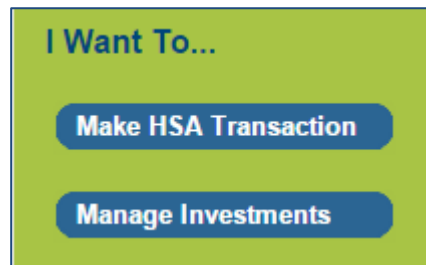
A screenshot of a web form titled "Manage Investment Transfers". The form contains a paragraph of text explaining the investment sweep process. Below the text is a checkbox labeled "* Define Investment Sweep Amount:" which is checked. Underneath is a text input field labeled "* Transfer Funds to Investment When My Cash Balance Exceeds:" with the value "\$ 1000" and a question mark icon. At the bottom of the form, there is a "Save" button and a "Cancel" link. A disclaimer at the bottom reads: "Investment Services: Not FDIC Insured • No Bank Guarantee • May Lose Value".

Your fund balances will be automatically reallocated, consistent with your investment elections, at the frequency you select. Even as market conditions change, your overall investment mix will stay on target with your diversification strategy. The investment sweeps will automatically replenish your cash account when it goes below your investment threshold. Keep in mind that it can take up to 14 business days for investments to be sold and this balance to post.

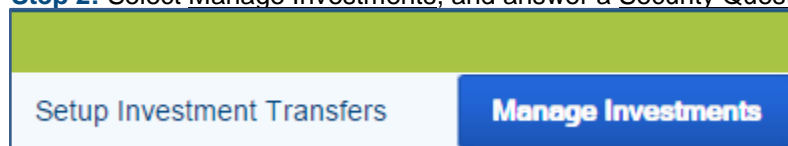
4.4.2 View Investment Details

To view and manage your investments.

Step 1: Select Manage Investments under the I Want To... Section:



Step 2: Select Manage Investments, and answer a Security Question:



Make sure that any pop-up blocker is turned off for this step.

In order to manage your investments, you must answer the following security question.

Security Question What is the middle name of your youngest sibling?

Answer *

Make sure to click Submit and not the 'Enter' key for this step.

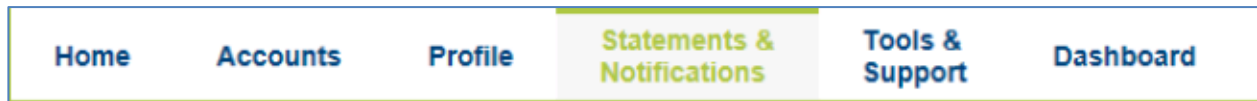
Step 3: Once you have answered the security question, you will be in the investment site. The toolbar on the left side of the investment site includes a FAQ section that will assist you through navigation.

Note: Trades initiated after 1:30 p.m. Central will be processed the next business day. Trades can take 3-6 business days to process.

4.5 Tax Documents

You will be provided with two HSA tax documents, the 1099-SA and 5498-SA. The 1099-SA is provided in January and reports distributions. The 5498-SA is provided in May and reports contributions. **Note:** You will only receive these documents if you had a distribution or contribution within the applicable tax year. These documents can be found in your online account.

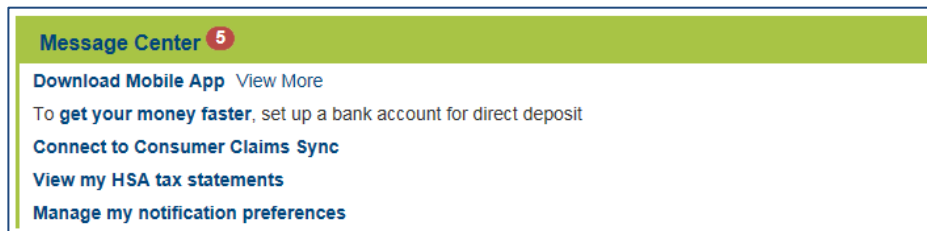
Step 1: Select the Statements & Notifications tab, then HSA Tax Statements.



Step 2: Click on the name of the document you need.



Note: Once the tax documents have generated, there will be a quick link on the Message Center to view your tax statements.



5. COMMUTER BENEFITS

5.1 Mass Transit/Parking/Bicycle

You can file online for parking, vanpooling and bicycle. Mass transit products should only be purchased with your Discovery Benefits debit card. If you tried your debit card and it was unable to be utilized, an online claim can be filed.

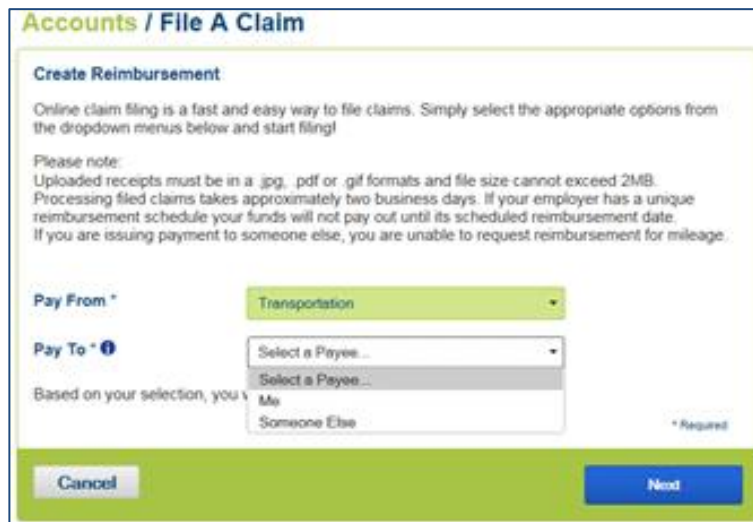
Note: You cannot file mass transit or parking expenses by fax, mail, or with the mobile app.

Online

Step 1: Select File A Claim within the I Want To... section.



Step 2: Create the reimbursement by choosing the Pay From and Pay To fields.

A screenshot of a web form titled "Accounts / File A Claim". The form has a section "Create Reimbursement" with instructions: "Online claim filing is a fast and easy way to file claims. Simply select the appropriate options from the dropdown menus below and start filing!" and a "Please note:" section. Below the notes are two dropdown menus: "Pay From *" with "Transportation" selected, and "Pay To * ⓘ" with "Select a Payee..." selected. Below these is a note: "Based on your selection, you will be able to select from the following options: Me, Someone Else". There are "Cancel" and "Next" buttons at the bottom.

Step 3: Complete the required (*) information. **Note:** You have the ability to reimburse yourself or the provider directly.

The screenshot shows a 'Claim Details' form with the following fields and values:

- Start Date of Service ***: 01/01/2015
- End Date of Service**: 1/1/2015
- Amount ***: \$ 100
- Provider ***: 1st Street Parking
- Category ***: Parking
- Type ***: Parking Pass
- Description**: (Empty text box)
- Recipient ***: Self, Dependent 1, Dependent 2
- Did You Drive To Receive This Product/Service? ***: Yes, No
- Summary**: Pay From: Medical, Pay To: Me, Documentation Uploaded: Yes

Buttons at the bottom: Cancel, Previous, Next. A small asterisk (*) indicates required fields.

Step 4 (if applicable): Upload an itemized receipt.

Step 5: Agree to the [Claims Terms and Conditions](#) and [Submit](#) your claim

Add a New Payee

To add a new payee, select the 'Add a New Payee' option and fill in the displayed fields. To save this payee for future use, check the 'Save a new payee' checkbox at the bottom. After you submit the reimbursement request, the newly added payee will be available in the saved payees list. If you don't want to save this payee, uncheck the 'Save a new payee' checkbox.

Select a Saved Payee

To use a previously saved payee, choose the 'Select a Saved Payee' option. Select a payee from the list under 'Payee Name'. The system will automatically populate the payee information with the saved payee information.

5.2 SmartCommute Program

Beginning in 2016, Discovery Benefits will be introducing its new SmartCommute Program, which will make it easier for Washington, D.C. area residents to use their Commuter Benefits. If your employer participates in the SmartCommute Program, you will be able to load pre-tax transit and/or parking funds onto your Metro SmarTrip® card from a commuter page on your consumer web portal starting December 1, 2015. The monthly deadline for orders is the 10th of the month prior to the month in which you're planning to use the funds. Example: If you want to use the funds starting January 1, 2016, you must place your order by December 10, 2015.

Step 1: Click on the SmartCommute button at the top left of the consumer web portal. **Note:** This may have a unique name based on your employer's needs.



Step 2: You will be automatically logged in to the SmartCommute page, where you can place your transit and/or parking order. Click on the "New Election" button in the bottom middle of the page.

Step 3: Click on "Transit Order" or "Parking Order."



Step 4: Set your desired monthly order amount. **Note:** Whatever order amount you have entered by the 10th of the month prior to the month you're going to use the benefits is the one we'll send to Metro. Example: You change your order a couple of times between December 1, 2015 and December 10, 2015. We'll notify Metro of the final order amount only.

1 Update Election Information
Select the amount and information tied to election

2 Election Complete
Please Verify Election Information to Continue

Select Desired Monthly Election Amount:*


\$ 100 .00

Next

Step 5: Confirm your order information is correct and click “Update Enrollment.”

Selected Transportation Authority: WMATA

Selected Monthly Election Amount: 100



TRANSIT ORDER

Update Enrollment

Step 6: Your order is complete. You can confirm your order went through successfully by going to the “History” tab. The most recent order for transit and/or parking will show at the top of the appropriate section.

Washington Metropolitan Area Transit Authority

Election Type	Election For M/Y	Election Amount	Created Date	Created Time
Transit	12/1/2015	\$ 100.00	10/30/2015	2:28 PM
	12/1/2015	\$ 100.00	10/30/2015	2:27 PM
	12/1/2015	\$ 100.00	10/30/2015	1:25 PM