The benefits debit card lets you easily access all of your benefits.

Participants in tax-advantaged benefit accounts can pay for eligible products and services with their benefits debit card. Payments are automatically withdrawn from your benefit account, so there are no out-of-pocket costs and many purchases won’t require receipt submission. One card can access all of your benefit accounts:

- Healthcare flexible spending account
- Dependent care account
- Health savings account
- Limited healthcare flexible spending account
- Health reimbursement arrangement
- Transit and parking accounts

Real-time access to your benefit account funds – real world convenience!

Your benefits debit card provides immediate access to your benefit funds to pay for qualified expenses without having to pay anything out-of-pocket. Most major pharmacy chains have a point-of-sale system in place that auto-substantiates eligible items at the register. Swipe your benefits debit card to subtract the eligible items from your total, then offer a second form of payment for any ineligible items that remain. Though the need for documentation is infrequent, you should save your receipts in the rare instance documentation is requested by your administrator.

Advantages of the Card

- No out-of-pocket expenses
- No waiting for reimbursement
- Convenient access to funds reduces end-of-year forfeitures
- Single card for multiple accounts

Debit Card Documentation

In some cases as described below we are required to request receipts for your card expenses.

Documentation will not be requested for the following card transactions:

- Medical Co-pay amounts that match the Co-pay amounts in your plan.
- Recurring Expense – card transactions after the submission where you notify us that this will recur. Future transactions must match the exact provider and dollar amount.
- IIAS – Merchants such as Target, Walgreens, Walmart and other retailers have complied with IRS debit card software requirements that verifies which expenses are eligible expenses. Non-eligible items will require payment through another form.

Documentation is needed for the following card transactions:

- Dental expenses
- Vision expenses
- Medical procedures where coinsurance and/or medical deductibles apply
- Medical Supplies
- Dependent Care Account Transactions
Acceptable documentation
▶ An itemized statement from the provider showing the date of service, service rendered, and amount charged
▶ Explanation of Benefits (provided by your medical, vision or dental insurance)

Unacceptable documentation
▶ Credit card receipt
▶ Bank or Credit Card statement
▶ Estimated Explanation of Benefits and/or Estimated Insurance on your statement
▶ Statement with a Balance Forward
▶ A payment receipt without date, type of service or amount on it

Transaction status
On the HR Simplified website, in your Wealthcare personal portal, you will see several claim statuses:
▶ Approved – No further documentation needed.
▶ Insufficient documentation - an itemized statement/Explanation of Benefits is required
▶ Ineligible – Expenses from prior year or ineligible expense.
To resolve this transaction status you must do one of the following:
1. Provide the missing documentation
2. Reimburse the plan for the expenses by submitting a check payable to your employer and mailing it to HR Simplified
3. Manually submit other unreimbursed claims to offset the transaction amount in question

Where to submit your documentation:
Portal: Go to www.mypretax.com and log in to your account, click on “Upload Receipts.”
Email: FSA@hrsimplified.com
Fax: 1-877-723-0146
Mailing address: HR Simplified, Inc., Attn: FSA, 5320 West 23rd Street, Suite 350, Minneapolis, MN 55416

Online & Mobile Access
Get account information from our easy-to-use online portal and mobile application. See your account balance in real time, file a claim for reimbursement by snapping a photo of the receipt, and check on a claim status. You may also submit documentation via the mobile application. Click on “Claims”, take a picture of the document and upload.