

# Your PayFlex® Account Guide

Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs) & Flexible Spending Accounts (FSAs)

Plan Year: January 1, 2024 – December 31, 2024

For the 2024 plan year, PayFlex® is your administrator for Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs) and Flexible Spending Accounts (FSAs). PayFlex is one of the largest account-based third-party administrators with over 25 years of experience. You can expect complete record keeping and account management for your PayFlex account as well as exceptional customer service support.

## Getting Started

Based upon the health plan you choose during your benefits enrollment period, you may be eligible to use an HSA, HRA or FSA for your eligible expenses. This guide includes important information about each account as well as how to manage your account during the plan year.

## Health Savings Account (HSA)

A Health Savings Account is an account that is funded with tax-free\* dollars from Broward County and by your own contributions if you're enrolled in one of the High Deductible Health Plans. You can use the funds to pay for eligible health care expenses for you, your spouse and your tax dependents, even if they are not enrolled in your employer's benefits.

## The benefits of having an HSA

- 2024 Broward County Contribution\*\* – In 2024 when you elect the High Deductible Health Plan (HDHP) and you and your enrolled spouse/domestic partner (if applicable) complete the County's 2024 Engagement Incentive requirement, Broward County will provide a one-time contribution as follows:

Coverage Tier	HDHP InNetwork -Annual	HDHP Out of Network - Annual
Employee	\$1,200	\$1,200
Employee + Dependents (Spouse/DP/Child(ren)/Family)	\$2,400	\$2,400

- Tax savings — Money you contribute to your HSA can reduce your taxable income.
- Tax-free\* earnings — Money kept in your HSA earns interest each month.
- HSA ownership — You decide how to spend or save your HSA funds. If you change jobs or health plans, you keep your funds. You can even name a beneficiary to inherit the funds in your account.
- You can only use the HSA for your domestic partner or child of a domestic partner if he/she is claimed as your tax dependent.



## The benefits of having an HSA continued

- No "use-it-or-lose-it" rule — If you don't use the money in your account by the end of the year, it continues to roll over into the next year.
- Less paperwork — You don't have to submit documentation each time you use your HSA for qualified health care expenses (but it's still important to save your receipts).
- Investment options — If you have at least \$1,000 in your HSA, you can choose to invest the funds in your account. For more information about your investment options, visit [payflex.com](https://payflex.com).

\*Please note that not all states provide favorable income tax treatment for savings and reimbursement accounts.

\*\* New hires/newly benefit-eligible employees will receive pro-rated County contributions based on their date of health care coverage eligibility.

## Questions?

Visit [payflex.com](https://payflex.com) and select faqs. Or call PayFlex at 1-844-729-3539.

Hours: Monday – Friday, 7 a.m. – 7 p.m. and Saturday, 9 a.m. – 2 p.m. CT



## Health Reimbursement Account(HRA)

Under certain circumstances, employees enrolled in one of the HDHP plans may be eligible to enroll in the HRA. The HDHP plans are typically paired with a Health Savings Account, but in some circumstances, employees are not eligible for the HSA so the County allows them to stay, or enroll, in the HRA. The County also allows employees currently enrolled in the HRA with balances to elect to remain in the HRA under the HDHP plans.

The HRA with a HDHP plan is only funded by Broward County if you and your enrolled spouse or domestic partner\* complete the annual Engagement Incentive. No additional deposits can be made to this account. You can use the funds to pay for eligible out-of-pocket health care expenses for you, and your eligible dependents covered under your health plan. Eligible expenses include medical and pharmacy deductibles and coinsurance, dental and vision expenses. All expenses, with the exception of prescriptions, require supporting, detailed, documentation such as an Explanation of Benefits.

\*You can only use the HRA for your domestic partner or children of a domestic partner if he/ she is claimed as your tax dependent.

## The benefits of having an HRA

- Tax-free\*\* money — You get to use tax-free, employer- provided dollars to pay for your health care expenses.
- Works with an FSA — You can have both a health care FSA and an HRA at the same time. This means more ways to save money!
- Vested accounts — The balance in your HRA rolls over from year to year as long as you remain enrolled in the HRA for consecutive years. The maximum account balance or rollover cap for the HRA is \$20,000, regardless of tier of coverage.
- Savings for retirement – Your balances are transferred to a Retirement Health Savings Plan (RHS) at MissionSquare approximately 180 days following your retirement or leaving County employment. See We've Got You Covered ebook at [broward.org/benefits](http://broward.org/benefits). RHS funds can be accessed for health care expense reimbursement starting at age 55.
- If you have an HRA and a health care FSA, your eligible expenses will be paid from your health care FSA first. Once you use your health care FSA funds, your eligible expenses will be paid from your HRA.

\*New hires/newly benefit-eligible employees will receive pro-rated County contributions based on their date of health care coverage eligibility.

\*\*Please note that not all states provide favorable income tax treatment for savings and reimbursement accounts.

## Flexible Spending Account (FSA)

A flexible spending account (FSA) lets you set aside money from your paycheck (on a pre-tax basis) to use for eligible out-of-pocket expenses. You can contribute to a health care FSA and/or a dependent care FSA through Broward County biweekly payroll deductions up to the annual maximums established by the IRS. You cannot roll over your FSA balance from year to year. FSAs have a "use-it-or-lose-it" rule. Any funds left in your account at the end of the plan year are forfeited.

## Health Care FSA

This account reimburses you for eligible health care expenses for you, your spouse and your eligible dependents. Eligible expenses include medical, prescription, dental, vision, and hearing expenses. You can also use the FSA funds to pay for copays, coinsurance and over-the-counter (OTC) items.\*\*

\*\*OTC items include bandages, contact lens solution, first-aid kits, hot and cold packs, and thermometers. You can also use your health care FSA for OTC drugs and medicines like pain relievers, cold and flu remedies, or allergy and sinus products.

## Dependent Care FSA

This account reimburses you for eligible child (under the age of 13) and adult care expenses. Such expenses include day care, before and after school care, nursery school, preschool and summer day camp, or care for an aging parent to enable you to work.

Contributions are paid biweekly through payroll deductions. Funds cannot be used until they have been accumulated and can only be reimbursed through completing a claim form and submitting it directly to PayFlex.

QUICK TIP: View a list of common eligible expense items at [payflex.com](http://payflex.com).

## The benefits of having an FSA

An FSA can help reduce your income taxes and increase your take home pay!

## FSA Savings Example

Let's say you have an annual salary of \$40,000 and you decide to contribute \$1,500 to a health care account and \$4,000 to a dependent care account. With an FSA, you could save approximately \$1,246.00. Here is how it works:





	With an FSA	Without an FSA
Annual Salary	\$40,000	\$40,000
Health Care FSA Contribution (pretax)	(\$1,500)	(\$0)
Dependent Care FSA Contribution (pretax)	(\$4,000)	(\$0)
Taxable income after contribution amount	\$34,500	\$40,000
Estimated Taxes Withheld (22.65%)*	(\$7,814)	(\$9,060)
Post-Tax Income	\$26,686	\$30,940
Money spent <u>after-tax</u> on health care and dependent care expenses	(\$0)	(\$5,500)
Take-Home Pay	\$26,686	\$25,440
Savings	\$1,246	\$0

\*Based on 7.65% FICA and 15% tax bracket

Note: Please be advised that this example is for illustrative purposes only. These projections are only estimates of tax information and should not be assumed to be tax advice. Be sure to consult a tax advisor to determine the appropriate tax advice for your situation.

### Making sense of HSAs, HRAs and FSAs

#### How much can I contribute to my account?

- HSA - The IRS maximum contribution amount is \$4,150 for individual coverage and \$8,300 for family coverage. Because Broward County will make a contribution to your HSA, if your Engagement Incentive requirements are completed, the amount you can contribute will be less than the limit.
- HRA – This account is funded only by Broward County, if the Engagement Incentive requirements are completed, for employees enrolled in one of the HDHP plans who are not eligible for a HSA or have a current HRA balance.
- Health Care FSA – The annual maximum contribution amount is \$3,200 per employee. If you and your spouse both participate in a health care FSA, you can each contribute up to \$3,200 to your own FSA.
- Dependent Care FSA – The annual maximum contribution amount depends on your tax filing status.
  - If you're married and filing jointly, your contribution limit is \$5,000.
  - If you're married and filing taxes separately, your contribution limit is \$2,500.
  - If you're single and head of household, your contribution limit is \$5,000.
  - If either you or your spouse earn less than \$5,000 a year, your contribution limit is equal to the lower of the two incomes.
  - If your spouse is a full-time student or incapable of self-care, your contribution limit is \$3,000 a year for one dependent and \$5,000 a year for two or more dependents.

	HDHP (OON) IN/Out of Network Plan with an HSA		HDHP (OON) IN/Out of Network Plan with an HRA		Health Care FSA	Dependent Care FSA
Eligibility	Employees enrolled in a HDHP Plan.		Employees not eligible for an HSA or Employee with HRA balances		Employees not enrolled in an HSA, coverage waived	All Benefit-eligible Employees
	Employee Only	Employee + Dependents	Employee Only	Employee + Dependents	N/A	N/A
IRS Contribution Limit	\$4,150	\$8,300	N/A		\$3,200	\$5,000
County Contribution	\$1,200	\$2,400	\$1,200	\$2,400	N/A	N/A
Your Maximum Contribution	\$2,950	\$5,900	N/A		\$3,200	\$5,000

NOTE: If you'll be age 55 or older this year, you'll be able to make an additional "catch-up" contribution of up to \$1,000 to your HSA.

NOTE: In 2024, employees switching from the CDH plan with a balance in their HRA, to a HDHP plan can elect to continue their HRA instead of enrolling in the HSA. The incentivized funding for the HDHP will be deposited into your HRA based on HDHP plan enrollment and tier of coverage.



## Frequently Asked Questions about HSAs, HRAs and FSAs

	HSA	HRA	FSA
What health plan can I have?	High Deductible Health Plan (HDHP) In/Out of Network	High Deductible Health Plan (HDHP) In/Out of Network under certain circumstances.	High Deductible Health Plan (HDHP) under certain circumstances
What are the eligibility requirements?	<ul style="list-style-type: none"> <li>You must be enrolled in the County's High Deductible Health Plans (HDHP) to contribute to an HSA.</li> <li>You cannot have a general-purpose health care FSA or an HRA in the same year. This is also true for your spouse.</li> <li>You cannot have other health coverage except what is allowed by the IRS. See IRS Publication 969 for a list of allowable insurance coverage.</li> <li>You cannot be enrolled in benefits under your spouse's medical plan or other plan that is not a high-deductible plan.</li> <li>You cannot be enrolled in Medicare, TRICARE, or have received Veterans Administration (VA) health benefits in the previous 3 months.</li> <li>You cannot be claimed as a dependent on another person's tax return.</li> </ul>	<p>You must be enrolled in the County's HDHP to receive County funding for an HRA and meet one of the special circumstances:</p> <ul style="list-style-type: none"> <li>If not eligible to participate in the HSA under the High Deductible Health Plan, or</li> <li>You have a balance in your HRA, you may elect to enroll in the HRA with the High Deductible Health Plan.</li> </ul>	<ul style="list-style-type: none"> <li>You cannot enroll in a health care FSA if you enroll the County's High Deductible Health Plan with an HSA.</li> <li>If you enroll in the dependent care FSA, your dependent care expenses must be for a qualifying person.</li> </ul> <p>This includes:</p> <ul style="list-style-type: none"> <li>your children under age 13, or</li> <li>a spouse or other dependent (such as a parent or a disabled child over age 13) who lives with you and is incapable of self-care.</li> </ul> <p><i>Note: They do not need to be covered under your employer's benefits.</i></p>
Who owns the account?	<p>You own the account. If you change employers or leave the workforce, you can take the HSA with you.</p>	<p>Broward County owns the account. If you leave County employment, you have two options for your HRA:</p> <ol style="list-style-type: none"> <li>Continue it at your own expense under COBRA;</li> <li>The County will transfer your HRA balance to a Retirement Health Savings Plan at MissionSquare approx. 180 days after you leave the County.</li> </ol> <p>If you retire, balance will be transferred to a Retirement Health Savings Account at MissionSquare approximately 180 days after retirement.</p> <p>Under all circumstances, the debit card will be shut off on the last day of the month in which you leave County employment. All expenses must then be submitted for reimbursement.</p>	<p>Broward County owns the account. If you leave County employment you have two options for the FSA Medical Expense Account:</p> <ol style="list-style-type: none"> <li>Continue at your own expense under COBRA. This allows you to continue using your FSA for the remainder of the year.</li> <li>If you do not elect to continue under COBRA, you can only be reimbursed for expenses incurred prior to your termination.</li> </ol> <p>FSA Dependent Day Care is not covered under COBRA and coverage ends on your last day of employment.</p> <p>All claims must be submitted by March 31 of the following year. You can only submit eligible dependent care expenses you incur through the end of the calendar year.</p> <p>Under all circumstances, the debit card will be shut off effective with your last day of the month in which you leave County employment. All expenses must then be submitted for reimbursement.</p>

	HSA	HRA	FSA
Who contributes to the account?	You and Broward County	Broward County	You
Can I change my contribution during the year?	<ul style="list-style-type: none"> <li>You can change your HSA payroll contributions throughout the year by completing an HSA Affidavit and Payroll Contribution Authorization Form and submitting it to Employee Benefit Services.</li> <li>You can also use the tools available on the PayFlex site to make a post-tax contribution, or to transfer funds from an IRA or from another HSA.</li> </ul>	Not applicable	<ul style="list-style-type: none"> <li>You can only change your contribution during the year if you have a qualified life event. (marriage, birth, adoption, death, etc.)</li> <li>Specific to a dependent care FSA, you can change your contribution if: <ul style="list-style-type: none"> <li>There is a change in your provider</li> <li>There is a change in the cost for a provider</li> <li>The requested change must be consistent with the event</li> </ul> </li> <li>You must apply for a change in your contribution by completing an Enrollment Change Form and submitting it with supporting documentation to Employee Benefit Services within 30 days after your qualified life event.</li> </ul>
What can I pay for with my account?	<ul style="list-style-type: none"> <li>Eligible health care expenses for you, your spouse and your tax dependents.</li> <li>You can only use the HSA for your domestic partner if he/she is claimed as your tax dependent.</li> </ul> <p>A list of common eligible and ineligible expenses items is available on payflex.com.</p> <p><i>Note: If you use HSA funds for ineligible expenses, you'll have to pay income taxes on that amount and you may be subject to a 20% penalty.</i></p>	<ul style="list-style-type: none"> <li>Eligible health care expenses for you, and the eligible dependents covered under your health insurance plan.</li> </ul> <p>You can only use the HRA for your domestic partner or children of a domestic partner if he/she is claimed as your tax dependent.</p>	<ul style="list-style-type: none"> <li>Health Care FSA - Eligible health care expenses for you, your spouse and your dependents. (including your child under age 27, even if not your tax dependent)</li> <li>Dependent Care FSA - Expenses to care for an eligible dependent so you can work. <ul style="list-style-type: none"> <li>If you're married, your spouse must either be working, looking for employment, be a full-time student or be incapable of self-care.</li> </ul> </li> <li>You can only use the FSA for your domestic partner if he/she is claimed as your tax dependent.</li> <li>A list of common eligible and ineligible expenses items is available on payflex.com.</li> </ul>

	HSA	HRA	FSA
<p>How do I access the funds?</p> <p>(See page 10 for how to use the online features.)</p>	<ul style="list-style-type: none"> <li>• Use the PayFlex Card, your account debit card.</li> <li>• Pay out of pocket and request reimbursement (this is known as a withdrawal). You can do this online or through the mobile app.</li> <li>• Use online bill payment to pay your provider directly from your HSA.</li> </ul>	<ul style="list-style-type: none"> <li>• Use the PayFlex Card, your account debit card.</li> <li>• Pay out of pocket and submit a claim for reimbursement. You can do this online, through the mobile app or fill out a paper claim and fax or mail it to PayFlex. Use online bill payment (“Pay Them”) to pay your provider directly from your HRA.</li> </ul> <p><i>Note: If you have a health care FSA and an HRA, the funds will come out of your FSA first. Once you use all the funds in your FSA, any other eligible health care, dental and vision expenses for the plan year will come out of your HRA. Under all circumstances, the debit card will be shut off on the last day of the month in which you leave County employment. All expenses must then be submitted for reimbursement.</i></p>	<ul style="list-style-type: none"> <li>• Use the PayFlex Card, your account debit card (For health care FSA only).</li> <li>• Pay out of pocket and submit a claim for reimbursement. You can do this online, through the mobile app or fill out a paper claim and fax or mail it to PayFlex.</li> <li>• Use online bill payment (“Pay Them”) to pay your provider directly from your FSA.</li> </ul> <p><i>Note: If you have a health care FSA and an HRA, the funds will come out of your FSA first. Once you use the funds in your FSA, any other eligible health care, dental and vision expenses incurred during the plan year will come out of your HRA. Under all circumstances, the debit card will be shut off on the last day of the month in which you leave County employment. All expenses must then be submitted for reimbursement.</i></p>
<p>When can I access the funds?</p>	<ul style="list-style-type: none"> <li>• You can access the funds as soon as they are deposited in to your account.</li> <li>• County contributions will typically be made in the pay period following verification of completion of the Engagement Incentive.</li> <li>• Employee contributions are available after the funds are deducted from your paycheck and deposited into the account or when you make a post-tax contribution.</li> <li>• New hires/newly benefit-eligible employees will receive pro-rated County Contributions in the pay period following benefits start date.</li> <li>• New hires/newly benefit-eligible employees are not required to complete the Engagement Incentive during the year they become benefit-eligible. Must complete for the following year.</li> </ul>	<ul style="list-style-type: none"> <li>• You can access the funds as soon as they are deposited in to your account.</li> <li>• County contributions will typically be made in the pay period following verification of completion of the Engagement Incentive.</li> <li>• New hires/newly benefit-eligible employees will receive pro-rated County Contributions in the pay period following benefits start date.</li> <li>• New hires/newly benefit-eligible employees are not required to complete the Engagement Incentive during the year they become benefit-eligible. Must complete for the following year.</li> </ul>	<ul style="list-style-type: none"> <li>• 100% of your health care FSA contribution is available January 1, or as soon as administratively possible following your eligibility date.</li> <li>• Dependent care FSA funds are available after funds are deducted from your paycheck and deposited.</li> </ul>
<p>When must eligible expenses be incurred*?</p> <p><i>*When you receive the service or purchase the product.</i></p>	<p>Eligible expenses must be incurred after the account has been established.</p>	<ul style="list-style-type: none"> <li>• If you're an active employee, the eligible expense must be incurred after the account is established and while you're covered under the plan and have funds in your HRA.</li> <li>• Eligible expenses incurred in the prior calendar year can be reimbursed if enrolled in the HRA during the prior year.</li> <li>• If you retire or separate from the County, the eligible expense must be incurred prior to the end of month in which you leave County employment.</li> </ul>	<ul style="list-style-type: none"> <li>• Eligible expenses must be incurred while you're covered under the plan and before the plan year ends.</li> <li>• If you retire or separate from the County during the year, health care FSA expenses must be incurred on or prior to the end of the month in which you leave County employment unless you participate through COBRA for the rest of the year.</li> <li>• FSA Dependent Day Care expenses must be incurred prior to December 31 of the plan year and submitted for reimbursement by March 31 of the following year.</li> </ul>

	HSA	HRA	FSA
Is documentation needed for reimbursement?	No. Documentation is not needed for reimbursement from an HSA. However, the IRS may request documentation at a later date; therefore, you should keep all receipts, statements and Explanations of Benefits (EOBs).	<ul style="list-style-type: none"> <li>You must submit an itemized statement, detailed receipt or Explanation of Benefits (EOB) when you submit a claim.</li> <li>You may also be asked to provide documentation to verify that your PayFlex Card* purchases are eligible.</li> <li>PayFlex will notify you if the documentation submitted does not meet IRS requirements. Failure to submit IRS approved documentation will result in an offset from a future claim, or becoming taxable income in a future year (2023 unsubstantiated expense will become taxable income in 2024).</li> </ul> <small>* you use the card to pay for copays or prescriptions, documentation is not generally requested by PayFlex.</small>	<ul style="list-style-type: none"> <li>You must submit an itemized statement, detailed receipt or Explanation of Benefits (EOB) when you submit a claim. You may also be asked to provide documentation to verify that your PayFlex Card purchases are eligible under the health care FSA.</li> <li>Failure to submit IRS approved documentation will result in an offset from a future claim, or becoming taxable income in a future year (2023 unsubstantiated expenses will become taxable income in 2024).</li> <li>For dependent care FSAs, you'll need to include a statement from your provider. If you don't have documentation to support your day care expense, you can have your provider sign a PayFlex claim form.</li> </ul>
Does the balance carry over?	Yes. Any unused funds will carry over to the next year.	Yes. Any unused funds will carry over to the next year.	No. Any amount left in the account after the end of the plan year will be forfeited. <ul style="list-style-type: none"> <li>The last day to use your FSA dollars is December 31. This means you must incur eligible expenses by this date.</li> <li>You can submit claims for reimbursement up until March 31 of the following year.</li> </ul>
Can I earn interest or invest the funds in my account?	Yes. The funds in your HSA earn interest. Once you have more than \$1,000 in your HSA, you can invest in a variety of mutual funds. There are no transfer or trading fees and no minimum investment amount.	No	No





## Additional Resources

In this section, you'll find FSA planning worksheets, important information on the PayFlex debit card, and a quick reference guide to help you manage your account(s) online and through the PayFlex Mobile® app.

## Planning Worksheets

Use the FSA worksheets below or our savings calculator at [payflex.com](https://payflex.com) to plan your contribution. Be conservative with your estimates. Any funds left in your account at the end of the plan year will be forfeited.

### Health Care FSA

Medical expenses not covered by insurance	Annual Estimate
Deductibles, copays, coinsurance	\$
Physician visits/routine exams	\$
Prescription drugs	\$
Insulin/syringes	\$
Annual physicals	\$
Chiropractic treatments	\$
Over-the-counter items	\$
Other:	\$
<i>Subtotal Medical Expenses:</i>	\$
Dental expenses not covered by insurance	Annual Estimate
Checkups/cleanings	\$
Fillings	\$
Root canals	\$
Crowns/bridges/dentures	\$
Oral surgery	\$
Orthodontia	\$
Other:	\$
<i>Subtotal Dental Expenses:</i>	\$
Vision/Hearing expenses not covered by insurance	Annual Estimate
Exams	\$
Eyeglasses	\$
Prescription sunglasses	\$
Contact lenses & cleaning solutions	\$
Corrective eye surgery (LASIK, cataract, etc.)	\$
Hearing exams/hearing aids & batteries	\$
Other:	\$
<i>Subtotal Vision/Hearing Expenses:</i>	\$
TOTAL MEDICAL EXPENSES	\$
2024 Contribution Amount (max = \$3,200)	\$
Number of paychecks you will have in 2024	÷
Per pay period deduction	\$

### Dependent Care FSA

Eligible dependent care expenses include day care, before and after school care, preschool, summer day camps, and adult/elder care.

Month	Amount
January	\$
February	\$
March	\$
April	\$
May	\$
June	\$
July	\$
August	\$
September	\$
October	\$
November	\$
December	\$
TOTAL DEPENDENT CARE EXPENSES	\$
2024 Contribution Amount (max=\$5,000)	\$
Number of paychecks you will have in 2024	÷
Per pay period deduction	\$



**Using the Pay FlexCard®, your account debit card** The PayFlex debit card makes it easy for you to spend the money in your PayFlex account. The card is available for the following accounts:

- Health Savings Account (HSA)
- Health Reimbursement Account (HRA)
- Health Care Flexible Spending Account (FSA) - MEDICAL ONLY

Note: If you have an HRA and a health care FSA, you'll use the same card for both accounts. Eligible expenses will be paid from your FSA first. Once you use the funds in your FSA, any future health care expenses will come out of your HRA.

#### **Where can I use my card?**

You can use your card to pay for eligible health care expenses at qualified merchants where MasterCard® is accepted. This includes doctor and dental offices, hospitals, pharmacies (including mail-order prescriptions), and hearing and vision care centers. You may also use your card at some discount and grocery stores. These stores must have a system that can process health care spending cards. For a list of common eligible and ineligible expense items, visit [payflex.com](http://payflex.com).

**Can I order a card for my spouse or dependent?** Yes. You can order an additional card for your spouse or dependent at no cost through [payflex.com](http://payflex.com). See page 11 for directions.

**IMPORTANT INFORMATION ABOUT YOUR PAYFLEX CARD** It's important to save your detailed receipts, itemized statements and Explanations of Benefits (EOBs). If you have a health care FSA or HRA, PayFlex may ask you to provide documentation to verify that you used your card for an eligible expense. The IRS requires us to do this. If you have an HSA, you won't be asked to provide documentation for your card transactions. However, we recommend that you still keep your documentation for tax records.

#### **How will I know if PayFlex needs documentation for my card purchases?**

If we do need documentation, we will post an alert message online or send you a Request for Documentation letter. We do this when we need to verify that you used your card to pay for an eligible item or service. If you do not respond to the request within 45 days, your card will be suspended. To stay up to date on your card transactions, we encourage you to sign up to receive debit card notifications through e-mail, web alert or both. Log in to [payflex.com](http://payflex.com) and click **Account Settings** from the top navigation. Then select **Account notifications**.



#### **How to respond to a Request for Documentation alert or letter**

If we need more information on a debit card purchase, send us the Explanation of Benefits (EOB) statement for the card purchase. You can upload your documentation to the PayFlex site, send it through the PayFlex app, or fax or mail it to us.\*

#### **If you don't have an EOB, you have three other options:**

1. Send us the itemized receipt for the card purchase.
2. Substitute another expense for the one in question.
3. Pay back your account for the amount in question. Send a personal check or money order directly to PayFlex.

Note: If you do not respond to the request within 45 days, your card will be suspended until you either send in the requested documentation or pay back the account. If your card is suspended, you can still pay for eligible expenses with another form of payment. Then submit a claim for reimbursement. Once we receive and process your documentation or repayment, your card will be active again.

\*If you choose to fax or mail documentation, include a copy of your Request for Documentation letter.

#### **What should I do if my card is lost or stolen?**

Call us right away at 1-844-729-3539 to report a lost or stolen card. Do not order another card online.



## Managing your PayFlex account online

When you have a PayFlex account, you can use the PayFlex member website ([payflex.com](https://payflex.com)) and the PayFlex Mobile® app to manage your account and stay up to date on your account activity. It's time to start taking advantage of all the online features and tools available to you.

### Get started

- Go to [payflex.com](https://payflex.com), your PayFlex member website.
- Click **Sign In**, located at the top right corner.
- Then, enter your username and password. If you're a new user, click **Create Your Profile** and complete the required fields.

### For Broward County HSA Members: Set up your

**HSA** You'll be prompted to follow a few simple steps:

1. Review your fees and agreements. Check the box to acknowledge the terms of use. Then, enter your initials.
2. Review and update your personal information.
3. Add a primary beneficiary. You can also add a contingent beneficiary.

## Take action on your account

Once you log in, you'll see your HSA listed. Within the **Account Actions** section, you have the following options to choose from:

- View account details
- View HSA statements
- Link a bank account
- Manage my beneficiaries
- Set up account notifications

## Manage your funds

At the top of the page, select your HSA from the **Your Accounts** drop-down menu. Within the **Manage Funds** section, you have the following options to choose from:

- Deposit funds
- Request funds

## Order an additional PayFlex Card®

You can order an additional PayFlex debit card for your spouse or dependent at no cost.

- After you log in, click **Account Settings** from the top navigation. Then select **PayFlex Card**.
- Select **Order A Dependent Debit Card**. Enter the first and last name of your spouse or dependent. Click **Submit**. Your card should arrive within 15 business days.
- If your card is lost or stolen, call us immediately at 1-844-729-3539. Do not order another card online.

### Sign up for electronic account updates

To help you stay up-to-date on your account, we encourage you to sign up to receive notifications through email, text, or online message. After you log in, click **Account Settings** from the top navigation. Then select **Account notifications**. Select a + sign to view your options. Choose the notifications you want to receive and how to receive them. Then click Save.

### HSA Feature: Validate your linked bank account

After you link a bank account to your HSA, we'll send a deposit of less than \$1.00 (and matching withdrawal) to your bank account. This process can take up to two business days, not including Saturdays, Sundays or holidays.

Once you see the deposit in your bank account, make note of the amount. Log back in to your HSA and follow these steps:

- Go to Account Settings. Select Bank accounts.
- Click on Complete Validation next to the bank account you wish to validate.
- Enter the amount PayFlex deposited into your account.
- Click Validate.

Once you validate your account, you can begin to transfer funds to and from your HSA.

### HSA Feature: Invest your HSA dollars (once your account balance is more than \$1,000)

- It's easy to open an investment account and manage your investments within the Manage Investments section of your online account.
- Keep in mind it can take up to 24 hours for us to set up your investment account.
- Any trades requested before your account is opened are pended and processed on the first available trade date after your account is setup.

### For Broward County Reimbursement Account Members: Set up your FSA/HRA

#### File a claim (pay yourself or your provider)

You can pay yourself back for an eligible out-of-pocket expense, or you can pay your provider directly from your PayFlex account (if offered). After logging in, click on File a claim on the homepage.

To pay yourself back, select Pay Me.

- Enter your claim details. To add additional eligible expenses, select Add Another Expense.
- Once you enter in all of your eligible expenses, click Next.
- Review and confirm all expense details. Click Next. To make changes, click Previous.
- Check the signature box to sign your claim and confirm your submission is for an eligible expense.
- Select Fax or Upload.
  - To "Fax," click on Create Coversheet. Print and sign the form. Fax it with your supporting documents to the number on the coversheet. When you sign the fax coversheet, you certify that your claim is for an eligible expense.
  - To "Upload," select Choose File. Select your supporting documents from your computer. To add additional documents, click on Add Additional Document. Then click Submit.

**IMPORTANT NOTE:** You can upload documents in JPG, PNG, GIF or PDF. The total size limit is 10MB. Your documents must show merchant/provider name, patient name, date of service, description of service and final amount you had to pay.

To pay your provider directly, select Pay Them.

- Select your payee from the drop-down menu and click Next. To add a new payee, click on the + symbol.
  - If you add a new payee, complete all the required fields. Click Save, then click Next.
- Enter your contact number, statement date and invoice number (if applicable), patient name, and any comments you may have. Click Next.
- Enter your claim details. To add additional eligible expenses, select Add Another Expense.
- Once you enter in all of your eligible expenses, click Next.
- Review and confirm all payment details. Click Next.
- Check the signature box to sign your claim and confirm your submission is for an eligible expense.
- Select Fax or Upload.
  - To "Fax," click on Create Coversheet. Print and sign the form. Fax it with your supporting documents to the number on the coversheet. When you sign the fax coversheet, you certify that your claim is an eligible expense.
  - To "Upload," select Choose File. Select your supporting documents from your computer. To add additional documents, click on Add Additional Document. Then click Submit.

**IMPORTANT NOTE:** You can upload documents in JPG, PNG, GIF or PDF. The total size limit is 10MB. Your documents must show merchant/provider name, patient name, date of service, description of service and final amount you had to pay.

### To get your money faster, link your bank account

- Once logged in, go to **Account Settings** and click **Bank accounts**.



### Stay connected with PayFlex Mobile®

You can also access your account virtually 24/7 through the PayFlex Mobile application. Available from most smartphones, this free\* app lets you:

- View your account balance, deposits and payments
- Submit FSA and HRA claims for reimbursement
- Make contributions to your HSA
- Withdraw funds from your HSA for eligible expenses
- Pay your health care provider or yourself directly from your account
- Receive important account alerts

Download PayFlex Mobile from your mobile app store. To log in to the app, enter the username and password you use for payflex.com.

\*Standard text messaging and other rates from your wireless carrier still apply.



## Questions?

Visit [payflex.com](https://payflex.com). Or call PayFlex at 1-844-729-3539.

We're here to help Monday – Friday, 7 a.m. – 7 p.m. and Saturday, 9 a.m. – 2 p.m. CT.

## For more information about FSAs, HRAs and HSAs

Download IRS Publication 502 from [payflex.com](https://payflex.com). This document includes important information about eligibility, eligible expenses and more!

There may be fees associated with a Health Savings Account ("HSA"). These are the same types of fees you may pay for checking account transactions. Please see the HSA fee schedule in your HSA enrollment materials for more information.

This material is for informational purposes only and is not an offer of coverage. It contains only a partial, general description of plan benefits or programs and does not constitute a contract. It does not contain legal or tax advice. You should contact your legal counsel if you have any questions or if you need additional information. In case of a conflict between your plan documents and the information in this material, the plan documents will govern. Eligible expenses may vary from employer to employer. Please refer to your employer's Summary Plan Description ("SPD") for more information about your covered benefits. Information is believed to be accurate as of the production date; however, it is subject to change. PayFlex cannot and shall not provide any payment or service in violation of any United States (US) economic or trade sanctions. For more information about PayFlex, go to [payflex.com](https://payflex.com).

Investment services are independently offered through a third party financial institution. By transferring funds into an HSA investment account you can potentially benefit from capital appreciation in the value of mutual fund holdings. However, you will also be exposed to a number of risks, including the loss of principal, and you should always read the prospectuses for the mutual funds you intend on purchasing to familiarize yourself with these risks.

The HSA investment account is an optional, self-directed service. We do not provide investment advice for HSA investment account participants. You are solely responsible for any investment account decisions you make. Mutual funds and brokerage investments are not FDIC-insured and are subject to investment risk, including fluctuations in value and the possible loss of the principal amount invested. The prospectus describes the funds' investment objectives and strategies, their fees and expenses, and the risks inherent to investing in each fund. Investors should always read the prospectus carefully before making any investment decision. System response and account access times may vary due to a variety of factors, including trading volumes, market conditions, system performance, and other factors.

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