



Participant Account

Navigation Guide

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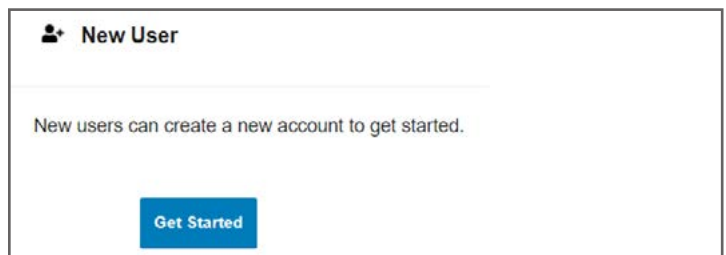


How to Set Up Your Benefits Online Account

Note: These instructions are subject to change, see full article [here](#). You'll need an email address or your debit card, if applicable, to move forward with the steps below.

To set up your account, complete the following steps:

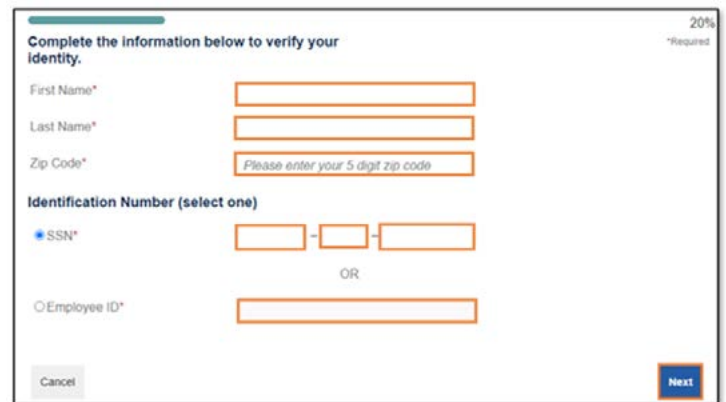
- 1 Once at the [Login](#) page, click "Get Started" in the New User section.



The screenshot shows a section titled "New User" with a person icon. Below the title, it says "New users can create a new account to get started." and there is a blue "Get Started" button.

- 2 Complete the required fields to verify your identity and click "Next" throughout the process to move to the next section.

Important: Your information must match what your employer provided to us. If you have more than one account with WEX, utilize your Employee ID as your Identification Number instead of your SSN. If you are unsure what your Employee ID is and/or are having issues creating an account, please contact Participant Services for assistance.



The screenshot shows a form titled "Complete the information below to verify your identity." with a progress indicator of 20% and a "Required" label. The form includes fields for "First Name*", "Last Name*", and "Zip Code*" (with a note "Please enter your 5 digit zip code"). Under "Identification Number (select one)", there are radio buttons for "SSN*" (selected) and "Employee ID*", each with a corresponding input field. There are "Cancel" and "Next" buttons at the bottom.

- 3 Request a one-time password via email or enter the last 6 digits of your benefits debit card, if applicable.

Note: We'll send the one-time password to the email address we have on file, if applicable.

4 Set up your security questions and click "Next."

Note: Your security answers aren't case-sensitive.

5 Change your username and set up your password, and then click "Submit."

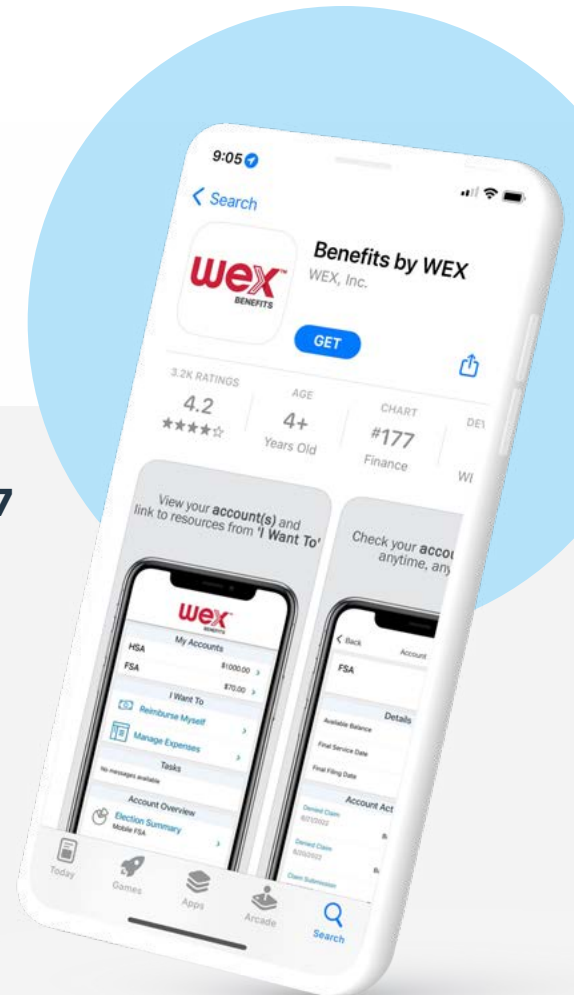
Important: If you don't want to change your username, keep track of the system-generated username provided to you.

6 Add a mobile number and any authorized representatives, if desired, and finalize your account setup.

Note: Authorized representatives aren't the same as dependents.

You have access to manage your benefits 24/7 through the online account and mobile app. Things you can do:

- Check your account balance
- Request reimbursement (file a claim)
- Order additional debit cards
- Upload documentation for your claims
- Set up direct deposit for quicker reimbursement

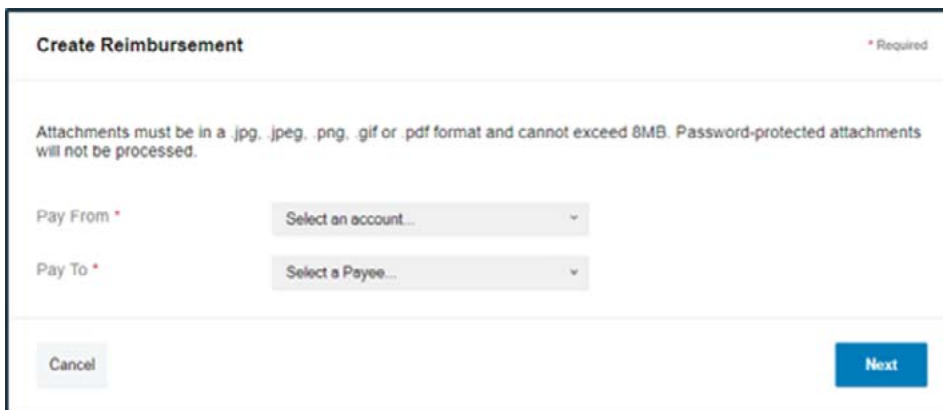


How to File a Claim in Your Online Account

Note: These instructions are subject to change.

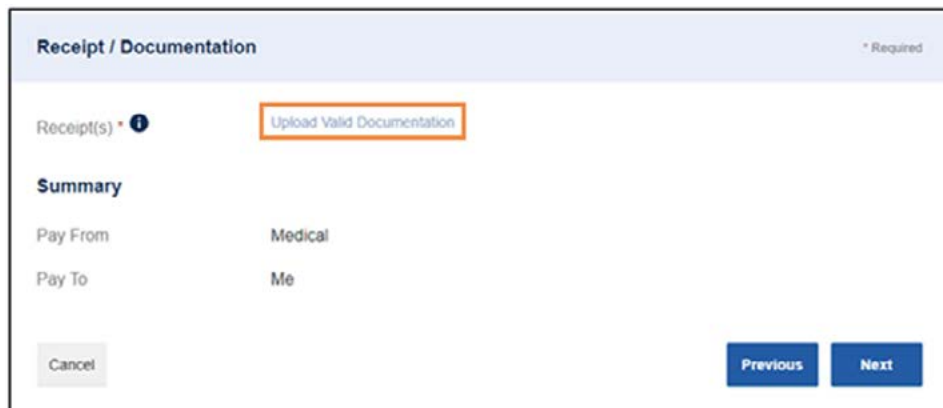
To file a claim in your online account, complete the following steps:

- 1** Log in to your online account.
- 2** Navigate to the Home tab and click the applicable option in the I Want To section.
- 3** Under Create Reimbursement, select the account to Pay from and the Payee. Then click “Next”.



The screenshot shows the 'Create Reimbursement' form. At the top right, it says '* Required'. Below the title, there is a note: 'Attachments must be in a .jpg, .jpeg, .png, .gif or .pdf format and cannot exceed 8MB. Password-protected attachments will not be processed.' There are two dropdown menus: 'Pay From *' with the text 'Select an account...' and 'Pay To *' with the text 'Select a Payee...'. At the bottom, there are two buttons: 'Cancel' on the left and 'Next' on the right.

- 4** Click “Upload Valid Documentation.”

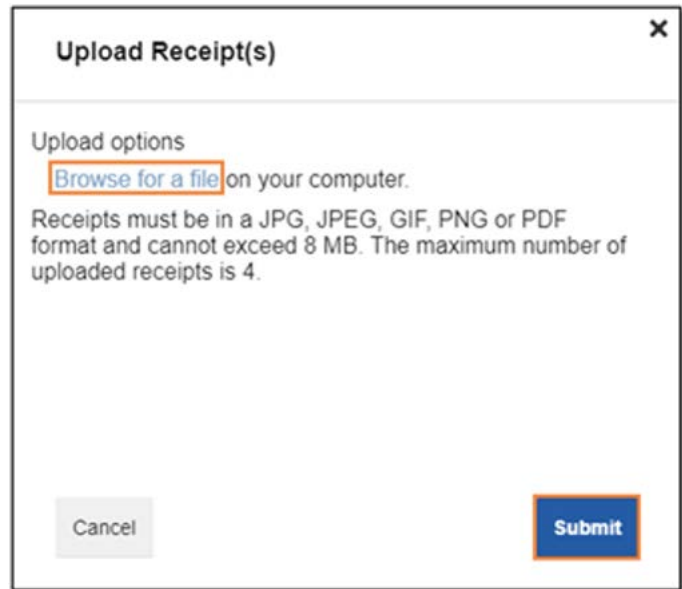


The screenshot shows the 'Receipt / Documentation' form. At the top right, it says '* Required'. Below the title, there is a field for 'Receipt(s) *' with an information icon and a button labeled 'Upload Valid Documentation' which is highlighted with an orange box. Below this is a 'Summary' section with two rows: 'Pay From' with the value 'Medical' and 'Pay To' with the value 'Me'. At the bottom, there are three buttons: 'Cancel' on the left, 'Previous' in the middle, and 'Next' on the right.

5

Click "Browse for a file," select the file containing your receipt, and click "Open" and then "Submit."

Note: Receipts must be in a JPG, JPEG, GIF, PNG, or PDF format and cannot exceed 8 MB.



6

Click "Next."

7

Complete the required fields and then click "Next."

8

Review your transaction summary. If changes are needed, click "Update." Then click "Submit."

Note:

You will receive a confirmation message that verifies the claim was successfully submitted.



How to File a Claim in the Mobile App

Note: These instructions are subject change, see full article [here](#).

To file a claim in the benefits mobile app, complete the following steps:

- 1** Tap “Reimburse Myself” or “Send Payment.”

Note: If you have multiple accounts, you will be asked to select the one from which you are requesting reimbursement.



- 2** Tap “Add New Payee” or tap an existing payee from the list.



- 3** Complete the required fields on the Claim Details screen.

- 4** Scroll down and then tap “Upload Receipt” to upload the documentation associated with your claim.

Note: The camera on your device will automatically activate to allow you to take a picture of your documentation, or you may upload a document from your storage files or a picture from your camera roll. If you have receipts saved in your receipt organizer, you can access them by clicking “Receipt Organizer.”

- 5** After the documentation is added to the claim, tap “Submit” to submit the claim for processing.

Manual Claim Form

Note: These instructions are subject to change. Access the Claim Form and see the full article [here](#).

Use the Claim Form to request reimbursement for any eligible out-of-pocket expenses not paid for with your WEX benefits card.

- 1** Complete the Claim Form.
- 2** Submit the completed form and your receipt(s)/documentation in one of the following ways:



FAX:

866-451-3245



Mail:

WEX
PO Box 2926
Fargo, ND 58108-2926



Email:

forms@wexhealth.com

How to Upload Documentation to an Existing Claim in Your Online Account

Note: These instructions are subject to change, see full article [here](#).

To upload documentation to an existing claim in your online account, complete the following steps:

- 1 Log in to your online account.
- 2 In the Tasks section of the Home tab, click “receipt(s) needed.”

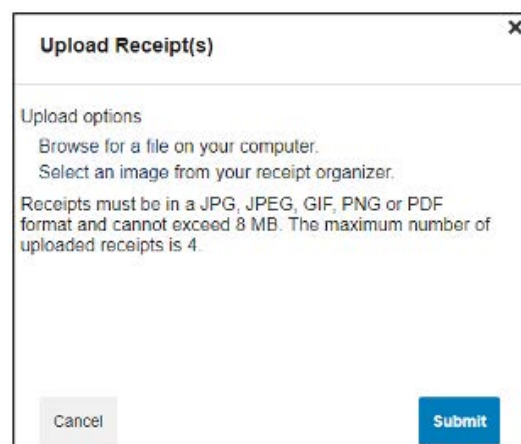


- 3 Click “Upload.”

DENIAL DATE	DATE OF SERVICE	ACCOUNT	MERCHANT / PROVIDER	RECIPIENT	CLAIM AMOUNT	RECEIPT STATUS	ACTIONS
7/13/2020	7/12/2020	Medical FSA 01...	Dr. Chiro	Pat Anderson	\$10.00	New Needed	Details Upload

- 4 Click “Browse for a file,” select the file containing your receipt, click “Open,” and then click “Submit.”

Note: If you have receipts saved in your receipt organizer in the Benefits Mobile App, you can access them by clicking “Browse for a file.” Receipts must be in a JPG, JPEG, GIF, PNG or PDF format and can’t exceed 8 MB.



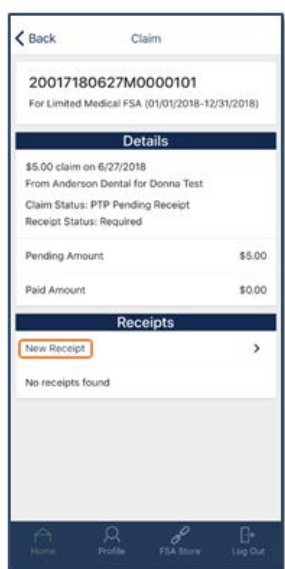
How to Upload Documentation to an Existing Claim in the WEX Benefits Mobile App

Note: These instructions are subject to change, see full article [here](#).

To upload documentation in the mobile app, follow these steps:

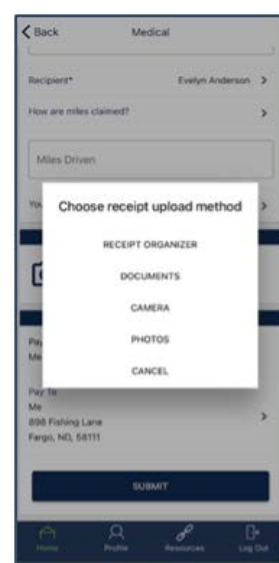
1 Navigate to the Tasks section on the home screen.

2 Tap the claim you want to upload a receipt to, and then tap “New Receipt.”



3 Select an existing document or picture from your phone’s library or use your camera to take a new picture.

Note: Receipts can’t exceed 8 MB.



4 Tap “Use Photo” to submit the receipt image for processing, or “Retake” to take a new picture.

Claims FAQ

What happens after my claim/documentation is submitted?

- Depending on the type of plan and reimbursement schedule set up for your employer, your claim will be processed within two business days, and if approved, will be paid out within 4-14 business days from approval. If you do not have direct deposit set up, a check will be issued and will follow the below timeframe.
- If the reimbursement amount is \$24.99 or less, your reimbursement will be issued after you submit additional claims to bring your total to at least \$25 or at the end of the month, whichever happens first.
- You will be notified if further documentation is needed. If you have an email address on file, you will be notified via email. Otherwise, you will be notified by mail.
- Once a claim has been filed, it cannot be canceled.

What documentation is needed for my claim?

The IRS requires you to provide documentation to make sure expenses are eligible for reimbursement from your plan. Your documentation needs the following details:

- Name of provider or merchant
- Date of service received or item purchased
- Description of service received or item purchased
- Dollar amount (after insurance, if applicable)

An itemized receipt or Explanation of Benefits (EOB) typically has all the required information. In some cases, a prescription or letter from your physician or a completed Medical Necessity Form may be required if the product or service is considered both a medical expense and a general use item.

Examples of unacceptable forms of documentation include the following:

- Provider statements that only indicate an amount paid, balance forward or previous balance
- Credit card receipts

You can review the full article with examples [here](#).

What documentation is needed for my Dependent Care Flexible Spending Account?

Your documentation needs the following details:

- Name of provider or merchant
- Date service received or item purchased
- Description of service received or item purchased
- Dollar amount (after insurance, if applicable)

Note: We will accept the provider's signature in place of an itemized receipt or statement.

You can eliminate the need to submit substantiation or file claims throughout the year for dependent care expenses by enrolling in Recurring Dependent Care. This process requires you to submit one form per year for each daycare provider used. You can learn more about the Recurring Dependent Care Request Form [here](#).

What are my claim reimbursement options?

Check: Please note a \$25 minimum is required for checks to be issued right away. Reimbursements that don't meet this minimum requirement will be issued after additional claims are submitted to bring the total to at least \$25 or at the end of the month, whichever happens first.

Direct Deposit: You can get your money faster by adding your bank account. There's no minimum reimbursement requirement for direct deposit. You'll need the following information to complete the direct deposit setup process:

- Routing number
- Account number
- Bank name
- Bank address

You can read the full article with complete steps to set up direct deposit [here](#).

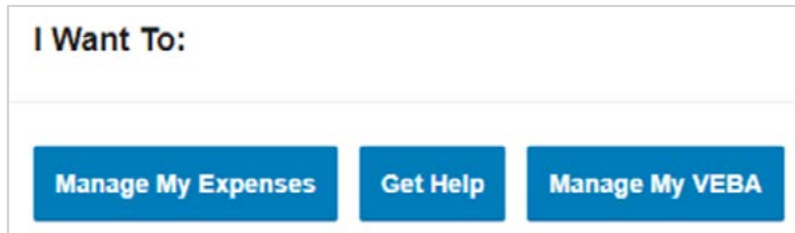
How do I know if an expense is eligible?

Access our [eligible expenses interactive chart](#) and search through the list of items you can purchase. You can also spend your funds online at [Health Shopper](#), the [HSA Store](#) or [FSA Store](#).

Note: Due to frequent updates to the regulations governing benefits guidelines, the interactive chart list doesn't guarantee reimbursement, but may be used as a guide.

Accessing Your VEBA Investment Portal

To access your VEBA investment portal, click “Manage My VEBA” under the I Want To menu on the home page of your online account.



Things you can do in your VEBA investment portal:



Update your investment elections



View investment statements and transaction history



Access Fact Sheets and Prospectus for various investment options



Add and update beneficiary information, if applicable to your plan