



FLEXIBLE SPENDING DEBIT CARD USER GUIDELINES

The CONEXIS Benefit Debit Card is a convenient and effective way for plan participants to access their FSA dollars to pay for eligible unreimbursed health care expenses and/or over-the-counter (OTC) medicines. However, IRS established guidelines require CONEXIS to substantiate all flexible spending debit card transactions. Therefore, you may receive a letter from CONEXIS requesting substantiation of purchases made with your flexible spending debit card.

SAVE ALL RECEIPTS FOR PURCHASES MADE WITH YOUR FLEXIBLE SPENDING DEBIT CARD

Please remember to keep all receipts for purchases made with your flexible spending debit card. Per IRS regulations, CONEXIS is required to request an itemized receipt to substantiate the eligibility of purchases made with the card. Itemized receipts are those that clearly state the date of purchase, a description of the purchased service or product, the vendor, and the amount of the purchase.

- Always retain receipts and proofs of purchase made with your card for out-of-pocket, unreimbursed health care expenses and/or OTC medicines
- When you submit a receipt or proof of purchase, it must include, date of service, name of business, name of merchandise, i.e. “Nyquil” or “cold medicine”. The IRS will not accept any receipt that does not contain the detailed information described above
- Credit card receipts and cancelled checks are not acceptable per IRS guidelines
- If you do not have a requested receipt, most providers will print a detailed statement documenting FSA eligible purchases
- Examples of qualified FSA locations and providers include: hospitals, physician offices, dental offices, vision service providers, and pharmacies

Should you receive a letter or e-mail communication from CONEXIS requesting a receipt to substantiate a purchase made with your FSA debit card, you will have 30 days to provide proof of your purchase. If you do not respond, you will receive a second communication. If you fail to respond to this communication, you will receive a third communication advising you that your debit card will be deactivated until the purchase has been substantiated as an eligible health care expense.

The Following is an Example of the Debit Card Validation Process:

- 3/01/05 - User makes purchase with their flexible spending debit card (card swipe at vendor)
- 3/02/05 - Purchase flagged for validation - 1st letter/e-mail requesting receipt is generated*
- 4/01/05 - 2nd Letter/e-mail requesting a receipt
- 5/01/05 - 3rd Letter/e-mail requesting a receipt, notification that the card has been suspended

If your card is deactivated, the remaining balance in your FSA is still available to you, but you will need to fax or send a standard FSA claim form requesting reimbursement.

*This initial letter will go out within 10 days following the card purchase. The rest of the cycle would fall into place after this 1st letter is sent.

If You Use Your Health Care FSA to Purchase Over-The-Counter (OTC) Drugs

Please keep all of your receipts, and be aware that they must contain the following:

- Date of Purchase
- Name of Item, i.e. Nyquil or “Cold Medicine”
- Cost of the Item

If your receipt contains only an ID number or merchandise code for the OTC product(s) purchased, the receipt is not considered valid and will be rejected when submitted with your FSA claim form or “Request for Receipt” letter for purchases made with your flexible spending debit card.

Per IRS requirements, you may be required to obtain a doctor’s note on “dual-purpose” OTC drugs.

A partial list of OTC drugs is available on the CONEXIS Web site.

You Will Not Be Required to Submit a Receipt When:

- The expense amount is identical to a pre-defined co-payment amount under your employer’s medical, pharmacy or dental plans
- All reoccurring expenses will not result in a request for documentation as long as the transaction has the same amount and vendor. The transaction will be accepted without documentation after proof is provided for the initial transaction

Co-Pay and Over-The-Counter (OTC) Helpful Hints

- If you have two or more co-pay amounts at the same time (i.e., two \$20 prescriptions) we recommend you ask the pharmacy/provider to separate the purchases. Reason – only standard plan co-pays are allowed; therefore a \$40.00 co-pay amount will trigger a request for a receipt
- If you use the flexible spending debit card for non-prescription, OTC purchases, like Tylenol or cough medicine, you will always receive a receipt request per IRS rules. We suggest that you pay for your eligible OTC items separately from prescription(s)

Online Information

- Access the CONEXIS Web site www.conexis.org for account information or www.mbicard.com for account status