



Client Administrator Guide

Tools, Processes, and Resources



▶ Hi. We're glad you're here.

Click on any of the topics below to see how we're solving for YOU.

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Meet Your Team



Rae Shanahan | CEO, Innovation Works & Chief Strategy Officer, Businessolver

Rae has overall responsibility for MyChoice Accounts, informing our business excellence, training, client engagement, and product development efforts. As a leader for both Businessolver and our MyChoice Accounts team, Rae has ensured we have the rock-solid foundation and strong ethic necessary to continue to deliver on our promises – both to the market and to our employees. She is passionate about creating a culture and focus on excellence, and she works tirelessly to refine and improve both. Ask her what she likes best – she will say she gets to live her personal mission every day: “Living with energy – creating it, sharing it wherever I go.” Rae joined Businessolver in 2000, after more than a decade in HR, both on the client side and the delivery side.

Strategic | Command | Input | Relator | Achiever



Kent Rausch | Head of Product and Innovation

You want to meet someone who has been around the block a time or two? Meet Kent. With over 20 years of experience in the benefits industry and consumer accounts, Kent has led product strategy and development departments at many organizations. These include Prudential Service Bureau, Sykes Health Plan Services, Evolution Benefits, SHPS, ADP and now Businessolver. At Businessolver, Kent was instrumental in building MyChoice Accounts with a focus on card and financial processing, and benefits and wellness enterprise systems. He thrives on product and market disruption, innovation and complex problem simplification. Kent earned his degree in computer and information sciences while serving in the United States Air Force.

Strategic | Relator | Futuristic | Ideation | Responsibility



Brandon Willis | VP of Consumer Accounts

Brandon leads our Louisville team, the Solvers working behind the scenes to ensure files go out, claims are processed, and cards are delivered. Brandon joined Businessolver in 2019 to lead our Consumer Account Operations team and has been involved in many of the major shifts within the industry. In 18 years with ADP and SHPS, Brandon experienced firsthand the evolution of spending accounts from flexible spending accounts and dependent care accounts to include health reimbursement accounts, health savings accounts, as well as the introduction of debit cards. Brandon earned his MBA from Indiana University and enjoys travelling and spending time with his family.

Achiever | Strategic | Relator | Learner | Analytical



Hannah Webb | Director of Consumer Accounts

Hannah has a long history of client management and has been at Businessolver since 2014. She has performed multiple roles here, learning the system inside and out as a client operations lead, NAE, system relationship manager, and architect. Prior to leading the consumer accounts team, Hannah was a tech lead. Currently, she oversees day-to-day operations for MCA clients and process improvement. Hannah holds a B.A. and an MBA with concentration in HR. She loves to find ways to challenge her team to become better each day. Her perfect day would include sitting on a beach somewhere tropical with a book.

Achiever | Belief | Futuristic | Activator | Positivity

Meet Your Team



Rebecca Williams | Director of Product Management

As Product Manager for Consumer-Directed Health Care Plans, Rebecca is responsible for serving the alphabet soup of MyChoice Accounts to seasoned perfection! She is a certified HSA Expert who manages our feature and functionality design for MyChoice Accounts' FSA, HRA, HSA, Transit and Parking plans, and to date has reconciled more than 1.6 million records to ensure data and financial integrity. She brings more than 30 years of financial and consumer-accounts experience to her role, including 17 years at WageWorks. Rebecca loves mixing the salty with the sweet of life, which is probably why her favorite food is salted caramel ice cream and says her favorite thing about her role is that no two days are ever the same.

Responsibility | Arranger | Relator | Learner | Belief



Barry Robinson | Director of Account Management

Barry leads our Account Management team. He has earned a reputation for building environments that foster teamwork and inclusion. That cohesiveness is exemplified in the service-oriented approach demonstrated by Barry's team. Barry joined Businessolver in 2024 and has been in leadership roles for nearly 20 years. Most recently he led Spending Accounts teams at ADP, WageWorks, and HealthEquity through the last decade of change.

Barry earned his Master of Science degree in Management from Georgia State University's J. Mack Robinson School of Business. He enjoys spending time with his family and traveling.

Strategic | Ideation | Relator | Intellection | Learner



Anne Luckow | Account Manager

Meet Anne Luckow, your go-to MCA Account Manager at Businessolver, a seasoned professional with a knack for navigating the intricate world of employee benefits. Anne joined Businessolver in March 2024 and has a solid decade of experience under her belt including time at WEX Health and Discovery Benefits. Anne brings a wealth of expertise as a subject matter expert in FSA, HSA, HRA, Commuter, and LSA plans.

Anne's academic foundation in communication, earned through her bachelor's degree, serves as a cornerstone for her success. It's not just about understanding the plans; it's about effectively communicating their intricacies to clients and colleagues to fostering strong and lasting relationships along the way. Anne enjoys traveling with her family and spending time outdoors hiking, kayaking, and ice skating.

Achiever | Intellection | Arranger | Input | Responsibility

Admin Login Steps

Explore Your Company Dashboard

1

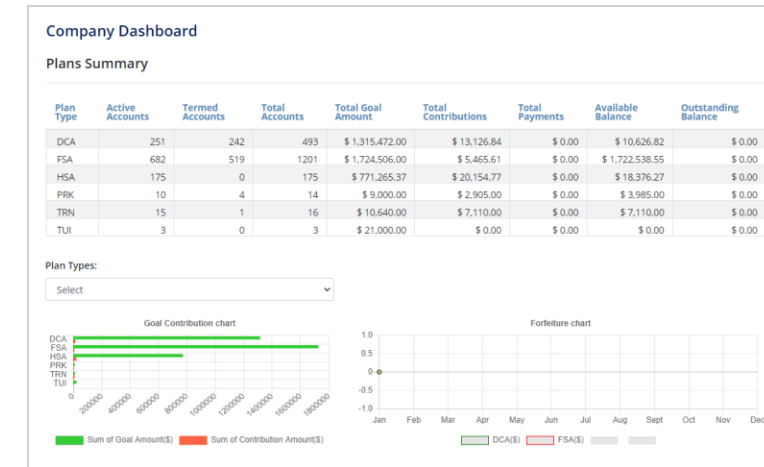
Go to **Benefitsolver.com** and enter your current Administrator User Name and Password. Click **Login**.

2

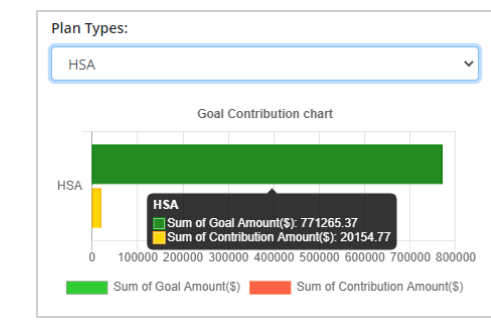
On your Admin Home page, click **MyChoice Accounts Admin SSO**. The location of this button on your layout may differ from the one shown here.

The **Company Dashboard** tracks each of your MyChoice Accounts-administered plans, offering a snapshot of data in nine main categories.

1. Plan Type (for example, FSA, HSA, LFSA, etc.). Use the Goal Contribution chart on the bottom of the page to generate graphical analytics for all accounts or get more granulated to show stats at the individual account level.
2. Active Accounts
3. Termed Accounts
4. Total Accounts
5. Total Goal Amount (also known as Total Election Amount)
6. Total Contributions (the \$ value of all payroll contributions deposited to date into the account – not all account types will have a value for this, for example, Adoption).
7. Total Payments (the \$ value of payments made to date)
8. Available Balance, and
9. Outstanding Balance (the \$ value that needs to be collected)



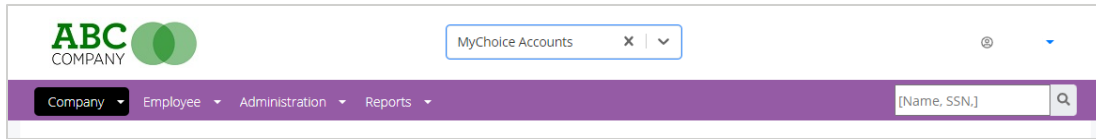
As the year progresses, the Forfeiture chart will populate showing funding changes resulting from employee turnover.



Goal calculation analytics for a specific account (in this example, the HSA account).

Get Familiar with Your Go-To Tools

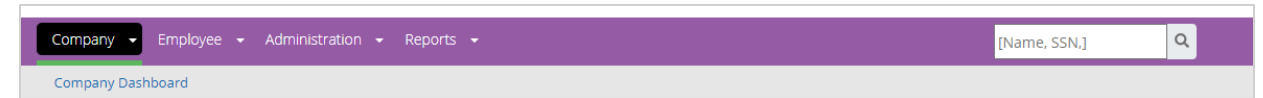
Member Quick Search



The member search field is always available on the navigation toolbar. Just like you do in Benefitsolver, **use it to search on someone's last name (or the last four-digits of a SSN) and click the magnifying glass.**

The action will return Member Search Results for all members who match. From the list, go directly to specific information about the member in the Member Dashboard. Simply click the edit icon in the Actions menu.

Company Dashboard (Company > Company Dashboard)



The primary tool you'll access from **Company** is the **Company Dashboard**. **This is the landing page when you first SSO into the platform from Benefitsolver page. It offers a snapshot status of all accounts for your organization.**

Other links in Company are available to you, but generally you won't access these to conduct day-to-day business activities. They include Company Branding and Company Profile. Company Branding houses all branding information that controls how your version of MyChoice Accounts looks. You won't need to do anything with this section because the information is imported from Benefitsolver. At this time, Company Profile is mostly geared for use by Businessolver.

Member Dashboard (Employee > Manage Employees > Search)



The Employee link will be your work horse to look up employee and account data. It's where you'll go to pull information about employees with MyChoice Accounts.

You can search at a macro level on all employees: click Employee > Manage Employees > Search. The action will take you to the **Member Dashboard**. Once on the dashboard, a listing of all employees will display. To find a specific employee, scroll through the list or search using the Filter tool. For more instructions on finding data for a specific employee, see the next page.

Member Dashboard Instructions

How to Access an Employee

To access the Member Dashboard, filter on a specific member or find the member using the search field located on the main navigation.

Employee Search

First Name:

Last Name:

SSN:

Employee ID:

Company:

Division:

Sub Division:

Source Ref ID:

Member Num:

Actions	Last Name	First Name	SSN	Employee ID	Company Name	Division Name	Sub Division Name
<input checked="" type="checkbox"/>	Devine	Kami	5531	10303	Product Marketing - DEMO		
<input checked="" type="checkbox"/>	Devine	Matthew	7901		Product Marketing - DEMO		

If you know the specific member you want to view, use the general Search Field and type their last name (or last 4 digits of their SS#). Then click the magnifying glass, which will take you directly to the Member Dashboard, Member tab, with the member's specific information.

Company | Employee | Administration | Reports |

Quick Tip!
The search field is always available on the interface, regardless of the subpage you might be working in.



To select a member from among a listing of all members or use a search filter, use the Search within the Employee > Manage Employees > Search.

Company | Employee | Administration | Reports |

A. In the **Actions** column, click the pencil icon for the member you want to view; or

Actions	Last Name	First Name	SSN	Employee ID	Company Name	Division Name	Sub Division Name
<input checked="" type="checkbox"/>	Devine	Kami	5531	10303	Product Marketing - DEMO		
<input checked="" type="checkbox"/>	Devine	Matthew	7901		Product Marketing - DEMO		

B. If you need a list of members to choose from, activate an Employee Search form:

- i. Select your company or division and then APPLY for a full list of employees.
- ii. You may then sort by any column by clicking on it, or;

Employee Search

First Name:

Last Name:

SSN:

Employee ID:

Company:

Division:

Sub Division:

Source Ref ID:

Member Num:

ii. Enter applicable member information into the form fields.

iii. Click **Apply**. The system will return the member(s) that match on your search criteria. Then click the pencil icon as described in step 2A.

Employee Search

First Name:

Last Name:

SSN:

Employee ID:

Company:

Division:

Sub Division:

Source Ref ID:

Member Num:

Actions	Last Name	First Name	SSN	Employee ID	Company Name	Division Name	Sub Division Name
<input checked="" type="checkbox"/>	Devine	Kami	5531	10303	Product Marketing - DEMO		
<input checked="" type="checkbox"/>	Devine	Matthew	7901		Product Marketing - DEMO		

Member Dashboard Instructions

What's included in the Dashboard

The Member Dashboard has specific information about a member's account. Some information is view only, while other information, such as card data, can be edited.

Tab	What You'll Find	View	Editable	Link to more detail
Member	Demographic (name, address, email, hire date, etc.), Quick links, as well as a link to view a summary of the account (account overview, critical information about the plan, account activity).	✓		<ul style="list-style-type: none"> View Quick Links Activity Filter Account Activity
Dependents	Dependents listed on the account (if any are recorded in the Benefitsolver system). The page includes basic demographic information. Only those dependents listed can be issued their own card.	✓		
Contributions	Contribution details including effective date, goal amount, total contributions, available balance.	✓		Add a contribution (+)
Manage Cards	Cards tab shows who has been issued a card with options to order additional cards or update the status of a card. Details include the card name, status, and any important dates such as when requested, issued, activated, or activity date. For a card verification summary, go to Administration > Processing Admin > Card Verification Dashboard.	✓	✓ *	<ul style="list-style-type: none"> Order Card Update Card Status
Leave of Absence	Details about any scheduled leaves and the ability to schedule a leave. This tab lists any activity related to the employee taking leave including the dates and the reasons for the leave. You can also add a new leave (+Add Leave Absence) or edit an existing one (click in the Actions column on the pencil icon).	✓		Add Leave of Absence
Bank Accounts	Shows bank accounts set up by the member (i.e. direct deposit reimbursement for any claims). The dashboard includes account name, last four digits of the account number, effective date, term date, whether or not the account is primary, and verified day of the account. Account verification is mandatory for a bank account established for an HSA. Information is for viewing only and is NOT editable because the bank account is owned by the employee.	✓		

for lost/stolen cards, **members will need to initiate the new card request online, via the mobile app, or via member services, due to security procedures from our issuing bank.*

Member Dashboard Specifics

Member Tab > Activity

The Activity section provides line-item detail about the employee (displays just after the quick links section).

Action	Request Id	Activity Name	Activity Type	Activity Description	Amount	Activity Date	Processed Date
	5215251	Contribution Adj	Employer		\$ 46.25	05/07/2021	05/07/2021
	5215252	Contribution Adj	Employee Pre-tax		\$ 105.26	05/07/2021	05/07/2021
	5215254	Contribution Adj	Employee Pre-tax		\$ 294.11	05/07/2021	05/07/2021
	5215256	Contribution Adj	Employee Pre-tax		\$ 111.11	05/07/2021	05/07/2021
	5215249	Contribution Adj	Employee Pre-tax		\$ 105.26	04/30/2021	05/07/2021
	5215250	Contribution Adj	Employer		\$ 46.15	04/30/2021	05/07/2021
	5215253	Contribution Adj	Employee Pre-tax		\$ 294.11	04/30/2021	05/07/2021
	5215255	Contribution Adj	Employee Pre-tax		\$ 111.11	04/30/2021	05/07/2021

Dependents Tab

The dependents tab list all dependents covered by a member's account. The data populated here is imported nightly from dependent data in Benefitsolver. Only those Dependents displayed (and those age 16 and older) are eligible for a card. Any updates to dependent information should be managed in Benefitsolver and not in MyChoice Accounts.

Member Dashboard

Actions	First Name	Last Name	SSN	Date of Birth	Relationship	Gender	Status
	First name	Brown	7777	10/23/2003	child	M	Active
	First name	Brown	2222	06/04/2000	child	F	Active

Contributions Tab

The Contributions tab includes a member's contribution options. Select **Account/Plan Type** option to filter to a specific plan type. Without the filter, a list of all accounts will display.

Actions	Name	Effective Date	Term Date	Goal	Total Contributions	Available Balance
+ ⓘ	HSA	01/01/2021		\$ 3,200.00	\$ 302.92	\$ 302.92
+ ⓘ	DCA 2021	01/01/2021	12/31/2021	\$ 5,000.00	\$ 588.22	\$ 588.22
+ ⓘ	FSA 2021	01/01/2021	12/31/2021	\$ 2,000.00	\$ 222.22	\$ 2,000.00
+ ⓘ	Tuition	01/01/2021		\$ 5,250.00	\$ 0.00	\$ 0.00

Total Posted Contributions: \$ 1,113.36 Total Pending Contributions: \$ 0.00

Manage Cards Tab

The Manage Cards tab offers information about cards issued, requested, and activated. Activity Date represents the last known date the card was used. While it's a simple process for a member to order a card on their own behalf, if they need assistance, Admins can request for them. Typically, after requesting a card in MyChoice Accounts, the card will arrive within 7-10 days (the industry standard). For more detailed card management instructions, please see the [Card Management Document](#).

Member Card Account		
Member Card Account Num: 857120	Card Account Token: xxxxxxxxxxxx0573	Effective Date: 9/29/2023
Term Date:	Multiple Like: No	Card Account Status: Complete

**for lost/stolen cards, members will need to initiate the lock their card online or via member services and report the activity, due to security procedures from our issuing bank.*

Member Dashboard Specifics

Manage Cards Tab > Issue Card

Only dependents at least 16 years old can have a card.

Select the **issue card** button if:

- The member has an **active account** with an available balance; (or incoming elections) and,
 - A member's card has been damaged but is still in their possession.
 - They need an additional card for an eligible dependent (spouse or tax dependent/child 16+ years old)
-
- Review more details about admin and member card ordering [here](#).

Member Dashboard

Member Card Account

Member Card Account Num: 857320 Card Account Token: xxxxxxxxxxxxxx0573 Effective Date: 9/29/2023

Term Date: Multiple Like: Yes

Card Holders

Actions	First Name	Last Name	Suffix	Role	Member Sequence Number	Effective Date	Term Date	Plastic Count	Last Card	Card Status
Select	Test	Account		Additional	5	10/18/2023		1	2654	Issued
Select	Scott	E						1		Issued
Select	Scott	Spouse						1		
Select	Scott	Partner						1		
Select	Adam	Scott						1		

Issue Card

Member currently has purple card (old)

Reminder that ordering a new card could disable their current, purple card. Members can pay out of pocket and request reimbursements until the new card arrives within 7 - 10 business days.

Member Dashboard

Issue Cards

Select Card Program *

Healthcare Card

Who Will Use This Card? *

Adam Scott

Ordering a card will permanently deactivate all cards for all cardholders. New cards will be sent to the address for all cardholders. Member can expect to receive card(s) within 7 - 10 days.

Member Name: Adam Scott

Member Address:

1025 Ashworth Rd
West Des Moines
IA
50319

Cancel Save

Member Dashboard

Issue Cards

Select Card Program *

Healthcare Card

Who Will Use This Card? *

Adam Scott

Member can expect to receive your card within 7 - 10 days.

Member Name: Adam Scott

Member Address:

1025 Ashworth Rd
West Des Moines
IA
50319

Cancel Save

Member Dashboard Specifics

Member Tab

Member Dashboard

The Member Dashboard includes a navigation bar with tabs: Member, Dependents, Contributions, Adjustment, Manage Cards, Events, Leave of Absence, Bank Accounts, Transfers, Providers, and Notes. The Member Profile section displays personal information for Member Num 654190, including SSN, Name, Address, and Hire Date. The Account Summary section lists four accounts: FSA 2021, HSA, DCA 2021, and Tuition, with columns for Actions, Name, Description, Effective, Termed, Available Balance, and Status. A 'Manage Account' button is highlighted in the Account Summary section.

Manage Account has year-to-date account details for each account including:

- Account Overview
- Balance
- Account Status

Member tab>Manage Account

The Manage Account page features a 'Back To Dashboard' button and a '+ Add Account' button. Below these is a table with the following data:

Action	Account Name	Effective Date	Term Date	Available Balance	Outstanding Balance	Is Restricted	Account Status	Purse Status	CIP Status
	FSA 2021	01/01/2021	12/31/2021	\$ 2,000.00	\$ 0.00	Y	Active	N/A	N/A
	HSA	01/01/2021		\$ 302.92	\$ 0.00	N	Active	N/A	N/A
	DCA 2021	01/01/2021	12/31/2021	\$ 588.22	\$ 0.00	N	Active	N/A	N/A
	Tuition	01/01/2021		\$ 0.00	\$ 0.00	N	Active	N/A	N/A

Member Tab>Quick Links

Quick Links has frequently asked questions by members. Click on a question for more details about the topic.

The Quick Links section contains the following questions:

- When will my deposit be posted?
- Can I order another card?
- I Lost My Card?
- Why was my card suspended?
- When will you process my request?
- Did You Receive My Request?
- Why is my request not approved
- How can I resolve my outstanding balance
- Why isn't my card working?

- If information is not available, a message will display indicating **No Record Exists**. To return to the Member tab, click **Back To Dashboard**.
- If a page displays (for example for how to order a card)and you want to return to the frequently asked questions, click the **Member** tab.

Member Dashboard Specifics

Bank Accounts Tab

The Bank Accounts tab displays general information about a member's bank account such as account name, last four digits of account number, which account is the primary account, and account verification date (required for an HSA). As part of verification, a banking regulation requires HSA verification via two small micro trial deposits into the member's account. Information about a member's bank account is view only; Admins are not permitted to modify this section.

Bank Name	Account Name	Account Last 4	Effective Date	Term Date	Is Primary	Verified Date
	Checking	5555	02/17/2021		Y	02/17/2021

Transfers Tab

Individuals who have transferred funds from another HSA vendor would have records here.

Event Name	Event Type	Event Category	Event Date	Event Status
No Records Exists				

Providers Tab

Individuals who have paid providers through their account will have providers listed here.

Action	Provider Name	Provider Tax Id	Account Number	City	State	Active
	Binson's			Center Line	MI	Y
	Trinity Health Epic - PP			Cleveland	OH	Y
	Trinity Health Epic - PP			Cleveland	OH	Y
	Instant Imaging			Boston	MA	Y
	EPMG of Michigan, PC			Oklahoma City	OK	Y
	Lakes Urgent Care			West Bloomfield	MI	Y
	Huron Valley Radiology			Cleveland	Oh	Y
	Levan Internists PC			Livonia	MI	Y
	GLPS Staffing SOL LLC			Detroit	MI	Y

Events Tab

View alerts and notices. Sort by any category for more information.

Event Name	Event Type	Event Category	Event Date	Event Status
Needs Documentation	Alert	Account Activity	09/13/2021	Posted
Needs Documentation	Alert	Account Activity	09/13/2021	Posted
Needs Documentation	Alert	Account Activity	09/13/2021	Posted
Request Paid	Notice	Account Activity	05/12/2021	Posted
Needs Documentation	Alert	Account Activity	05/11/2021	Posted
Request Approved	Notice	Account Activity	05/11/2021	Posted
Request Paid	Notice	Account Activity	05/10/2021	Posted
Request Approved	Notice	Account Activity	05/07/2021	Posted
Request Paid	Notice	Account Activity	05/07/2021	Posted

Finance Admin Specifics

Financial Dashboard

The screenshot displays the Finance Admin Dashboard interface. At the top, there is a navigation bar with dropdown menus for Company, Benefits, Employee, Administration (highlighted), Reports, and Global Administration. A search bar on the right contains the text "[Name, SSN,]". Below the navigation bar, there are several menu items: Data Administration >, Event Admin >, Financial Admin > (highlighted), and Onboarding Admin >. A secondary row includes Payroll Admin >, Plan Admin >, and Recon Admin >. A "Close Menu" button is located at the bottom left of the navigation area.

The main content area is titled "Finance Dashboard" and contains five key metrics:

- Unpaid Funds Request:** A chart showing the distribution of funds requests by age. The "Funds Request Balance" is \$ 0.00. A "Details" button is present.
- Account Balance:** The current balance is \$ 0.00. A "Details" button is present.
- Uncashed Checks:** A table showing the count and amount of uncashed checks by age.
- ACH Returns:** Shows 0 member counts and a total of \$ 0.00.
- Outstanding Balance:** Shows 0 member counts and a total of \$ 0.00.

Days	Count	Amount
0-150 days old	0	\$ 0.00
150-180 days old	0	\$ 0.00
180+ days old	0	\$ 0.00
Total	0	\$ 0.00

Finance Admin Specifics

Fund Request Ledger

- Review all funds requests made at client level
- YTD/MTD collective view

Company ▾ Benefits ▾ Employee ▾ **Administration** ▾ Reports ▾ Global Administration ▾ [Name, SSN,] 🔍

Fund Request Ledger

Company * ABC Company x ▾ | **Funding Profile** Select... ▾ | **Funding Account** Select... ▾ | **Date View** MTD ▾

Start Date | **End Date** | **Funds Request Number** Funds Request Number | **Unpaid Funds Request**

Apply **Reset**

Fund Request Ledger

Company * ABC Company x ▾ | **Funding Profile** ABC Company x ▾ | **Funding Account** ABC Company x ▾ | **Date View** YTD ▾

Start Date | **End Date** | **Funds Request Number** Funds Request Number | **Unpaid Funds Request**

Apply **Reset** **Export**

Actions	Date ↑↓	Client ↑↓	Transaction Type ↑↓	Funds Request Id ↑↓	Due Date ↑↓	Funding Account ↑↓	Amount ↑↓
	11/30/2021	ABC Company	Deposit	19608	12/01/2021	ABC Company – ACH Debit	\$ -21,137.26
📄 ⬇	11/30/2021	ABC Company	Funds Request	19608	12/01/2021	ABC Company – ACH Debit	\$ 21,137.26
	11/23/2021	ABC Company	Deposit	19366	11/24/2021	ABC Company – ACH Debit	\$ -24,808.85
📄 ⬇	11/23/2021	ABC Company	Funds Request	19366	11/24/2021	ABC Company – ACH Debit	\$ 24,808.85
	11/16/2021	ABC Company	Deposit	19028	11/17/2021	ABC Company – ACH Debit	\$ -23,210.54

Reports Available

Summary reports

- Account Summary Report
- Card Status Report
- Card Verification Report
- Invoice Detail Summary Report
- Invoice Summary Report
- Member Card Report
- Member Deposit Detail
- Member Payment Report

Detail Reports

- Account Detail Report
- CIP Status Report
- Member Deposit Report
- Payroll Reimbursement Report
- Outstanding Balance Report

[Access Report "cheat sheet"](#)
Breakdown of Common Reports

Funding Reports

- Funds Request Detail Summary Report
- Funds Request Summary Report

Additional Health Savings Account Reports Provided Monthly by UMB

- Health Savings Account Summary
- Health Savings Account Summary Trends

The screenshot displays the 'mychoice Accounts' interface. The top navigation bar includes 'Company', 'Employee', 'Administration', and 'Reports' menus. A search bar is located on the right. The main content area is titled 'Reports' and features a 'Report Type' dropdown menu with a list of options: Account Summary Report, Card Status Report (selected), Card Verification Report, Member Card Report, Member Deposit Detail, Member Payment Report, and Request Activity Report. Below this is the 'Report Parameters' section with fields for Company (Optimum - DEMO), Division (Select), Sub Division (Select), Starting Date, and Ending Date. There are 'Submit' and 'Reset' buttons. At the bottom, there is a 'Reports Queued' section with a 'Refresh' button and a table header with columns: Actions, Report Status, Report Name, Filter Criteria, and Date Requested.

Reports Available

Navigate to Reports

- Select Standard Reports
- Use the drop-down menu to generate either summary or detail report type
- Use the secondary drop-down menu to generate the specific report needed.
- Fill in the report parameters to filter your information as needed.
- Select submit.

mychoice Accounts

Optimum - DEMO x | v

svidoni

Company Employee Administration Reports [Name, SSN,]

Reports

Report Type *
Summary
Description: Card Status Report

Select
Account Summary Report
✓ Card Status Report
Card Verification Report
Member Card Report
Member Deposit Detail
Member Payment Report
Request Activity Report

Report Parameters

Company: Optimum - DEMO
Division: Select
Sub Division: Select
Starting Date:
Ending Date:

Submit Reset

Reports Queued

Refresh

Actions	Report Status ↑↓	Report Name ↑↓	Filter Criteria ↑↓	Date Requested ↑↓
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Billing Overview

Standard PEPM Billing

MCA billing starts with the counts of active accounts for the period.

Right now, billing is completed in the month, for the month. This means that an account must exist on the first day of the month in which it is being billed. Accounts that are added after the first of the month are not counted until the following month. The script controls this by looking at both the account effective date and the creation date from the audit table.

Custom Term Logic

For clients that have custom term logic, the script looks at the `plan.termeeclaimdays` field and determines what the logical term date is. For example, if a member terminates a plan on 6/10 and the custom term rules state the member has 30 days to submit claims before forfeiting their balance, then the logical term date would be 6/10 + 30 days = 7/10. The member would be billed for July, but not after.

The script attempts to ignore clients with activity-based billing plans (tuition only, for example).

The script attempts to ignore invalid plans by excluding accounts with effective dates prior to the plan effective date (2023 accounts in 2023 plan), and invalid accounts with an effective date after the term date (2/1 effective and 1/31 term). The script also separates the RMA and non-RMA plans.

Once the accounts are pulled, data is evaluated against the client billing tiers. Our system identifies the plans within each tier and the tier billing amount. A member should only be counted for PEPM once per tier. For example, FSA is tier 1, HSA is tier 2, Commuter is tier 3. A member with LFSA, DCA, HSA, PRK, TRN would be billed once in tier 1 (LFSA & DCA), once in tier 2 (HSA), and once in tier 3 (PRK & TRN).

After the members are counted into tiers by client, a summary and detail are produced for the accounting team to produce bills from.

Cards Issued

For clients who pay a fee for cards issued each month, we produce both a detail and summary report for the identified clients.

ACH Payments

For clients who pay a fee for each ACH payment issued each month, we produce both a detail and summary report for the identified clients.

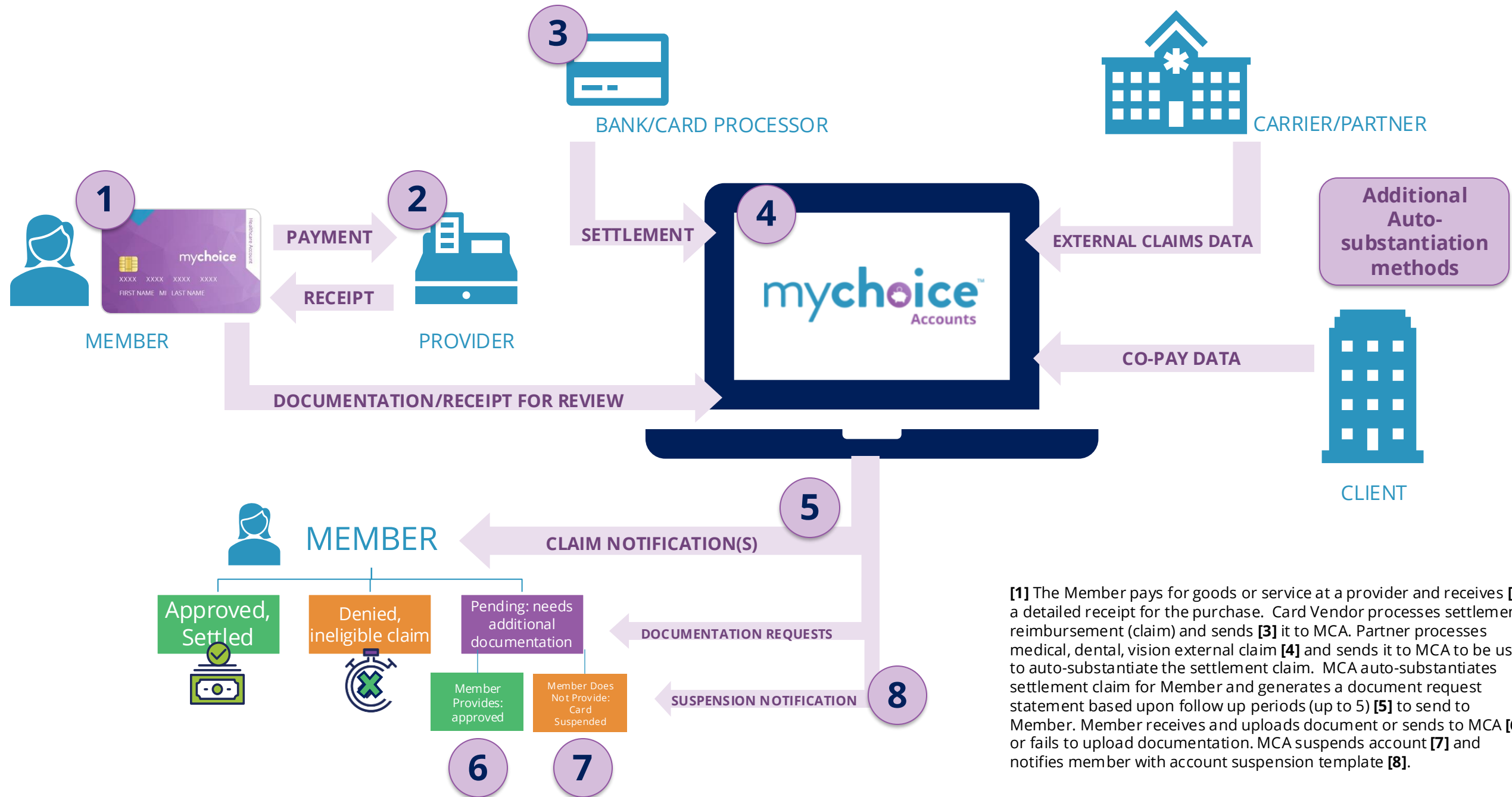
Adoption Claims

The clients that have adoption plans have activity-based billing for the prior month.

Tuition Billing

The clients that have tuition plans are billed monthly and the counts grow as members adopt into the plan. Once a member has participated in the plan, they are billed through the plan year.

Card Substantiation Process



[1] The Member pays for goods or service at a provider and receives [2] a detailed receipt for the purchase. Card Vendor processes settlement reimbursement (claim) and sends [3] it to MCA. Partner processes medical, dental, vision external claim [4] and sends it to MCA to be used to auto-substantiate the settlement claim. MCA auto-substantiates settlement claim for Member and generates a document request statement based upon follow up periods (up to 5) [5] to send to Member. Member receives and uploads document or sends to MCA [6] or fails to upload documentation. MCA suspends account [7] and notifies member with account suspension template [8].

Card Substantiation Methods

Card swipe is auto-substantiated at the POS with inventory information approval system (IIAS)

IIAS

Retailers can provide transaction feeds for a client's members. Most drug stores follow the 90% matching. Substantiation performed at POS.

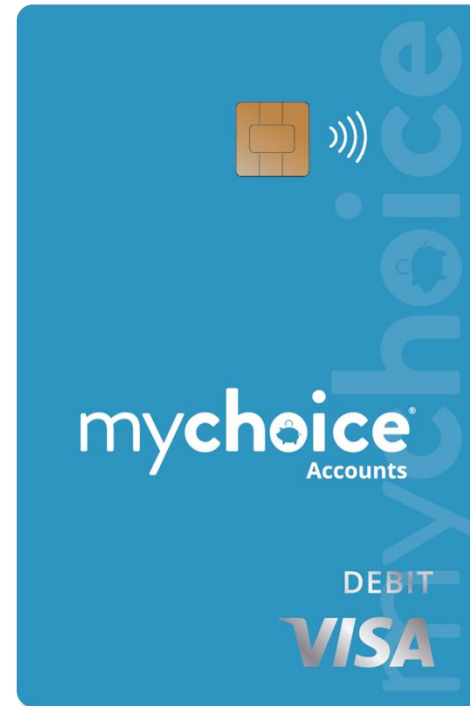
**90%
Trusted
Merchant**

Card request that matches a previously substantiated request, amount, service type within a given plan period.

**Recurring
Expense**

Carrier claims files are matched to card requests for single or multiple claims for swipe amount and service type.

**Carrier
match**



Some methods listed have additional client-level requirements for the plan design, such as carrier feeds, configuration rules, and plan types.

**Copay
match**

Match by service type and copay amount for health, dental and/or vision. Match for copay amount or multiples of copay amount.

**Merchant
Partner**

Merchant Partners such as 1-800-Contacts, VisionDirect.com, Drugstore.com, and Walgreen's contracted to sell only eligible products for specific accounts and service types.

**Summary/
Service
Type**

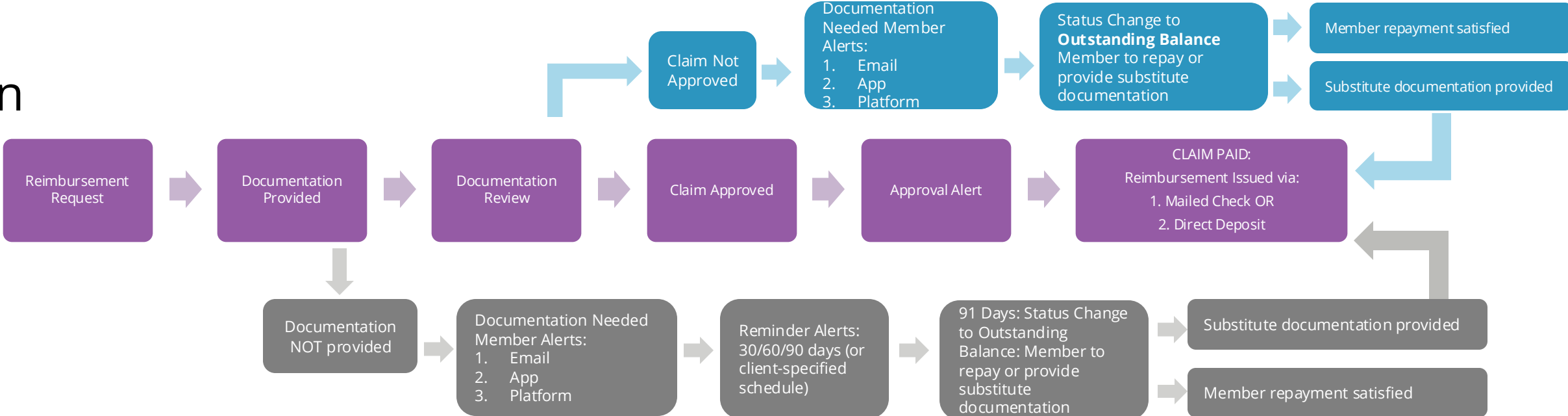
Logic for the sum of all carrier claims determines if the total amount of carrier claims exceeds the total amount of requests for a given service type.

**Whole
Dollar Tier
Threshold**

Clients may set up whole dollar tiers that automatically match to card requests
**Offered for fully funded plans, like HRAs or Lifestyle Spending Accounts.*

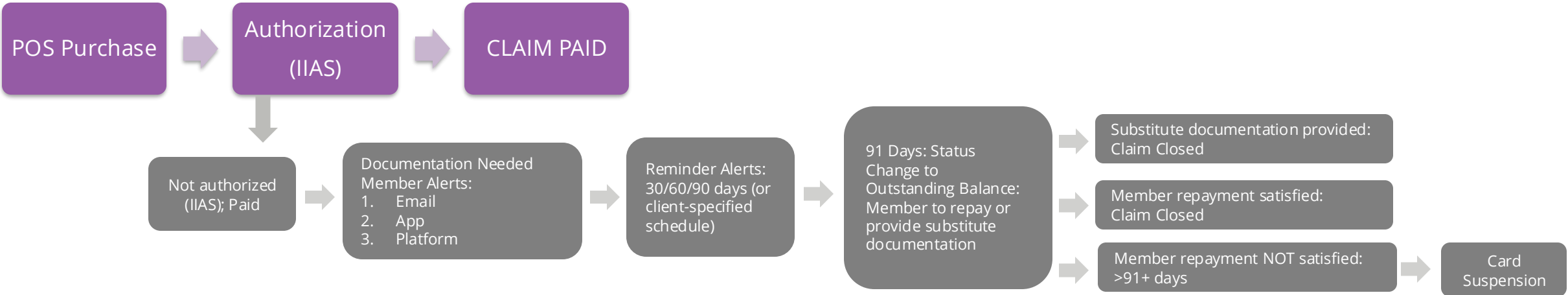
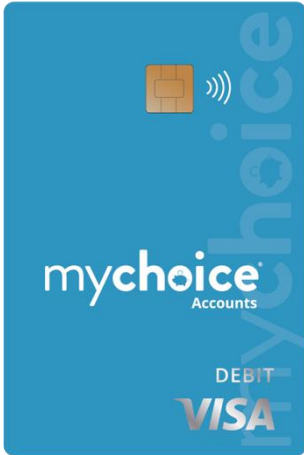
Claims Flow Process: Notional Accounts

Online Submission



Claims Flow Process: Notional Accounts

Card Swipe

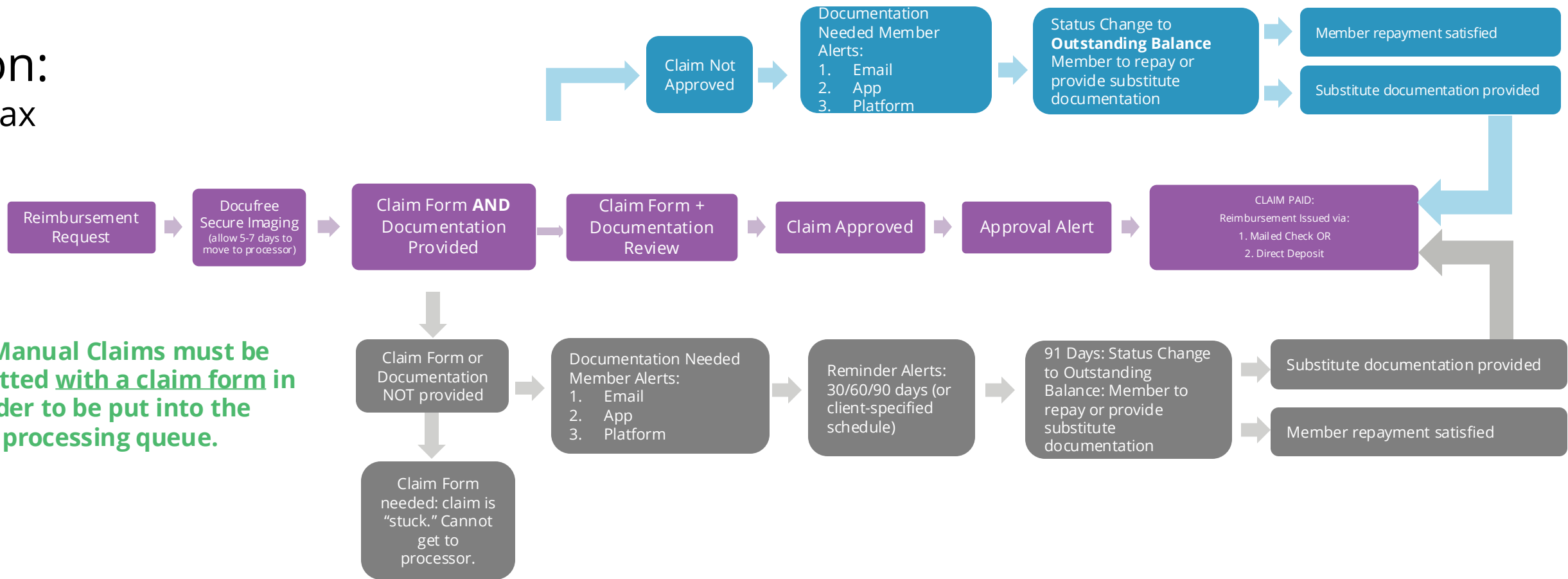


Claims Flow Process: Notional Accounts

Manual Submission:
Email, Mail, Fax



All Manual Claims must be submitted with a claim form in order to be put into the processing queue.



Claims Appeals Process

Employees have the right to appeal any denial that involves their Health Care FSA, Limited Health Care FSA, or Dependent Care FSA. Common reasons for appealing a claim include:

- A claim or request for reimbursement was not paid in full.
- A product or service that you believe is an eligible expense was denied.
- A request to change an election due to a qualifying life event was not approved.

1

STEP 1: INFORMAL APPEAL

(30 days from denial)

If an employee disagrees with our decision or needs additional information about their claim denial, employees can contact a Consumer Accounts Member Service representative within 30 calendar days from the date of the decision to request a more detailed explanation. Employees can contact us toll-free at 855-883-8541, Monday through Friday from 7 a.m. until 7 p.m., Central Time.

2

STEP 2: FORM APPEAL – FIRST-LEVEL WRITTEN

(60 days from denial)

If employees are not satisfied with the outcome of the informal appeal, they may request a formal appeal by following these steps:

Employees can submit their appeal request in writing to Consumer Accounts for reconsideration. Employees must send Businessolver Consumer Accounts their written request within 60 calendar days of the initial decision. Employees must sign their submission for it to be considered.

They must include the following along with your written appeal request:

1. **An explanation why they disagree with the denial.** They must base their appeal on specific provisions outlined in the Consumer Accounts eligible expense guide, Frequently Asked Questions (FAQs), or IRS regulations that govern all pre-tax benefit programs.
2. **Copies of documents that support employees claim**, such as a physician's letter of medical necessity, Explanation of Benefit (EOB) from your insurance plan, and/or detailed statements from your provider. If you choose, you may also submit information such as operative reports, medical records, or other medical details that support your claim.

Employees can email, fax or mail their appeal request and any necessary documentation to:

1. **Email:** Claims@MyChoiceAccounts.com
2. **Toll-free Fax:** 1-978-552-0168
3. **Mail:** Businessolver / MSC – 163940 / P.O. Box 105168 / Atlanta, GA 30348-5168

Businessolver has 30 calendar days from the date we receive an employee's request to do one of the following:

- Approve employees appeal and process your claim.
- Provide written communication that we have upheld the denial.

We will send employees a notification of the outcome of your appeal. Employee will receive an email if they have an email address noted in their online account; if not, they will receive a letter in the mail. The email will also let them know that they have the right to file a second-written final appeal with Businessolver Consumer Accounts within 90 calendar days from the date of the original denial.

Appeals Process

3

STEP 3: FORMAL APPEAL SECOND-LEVEL WRITTEN

(90 days from denial)

If employee doesn't agree with Businessolver Consumer Accounts decision to uphold the formal first level appeal denial, employee has an additional 30 calendar days from the date of the first-level appeal to file Formal Second-level and final appeal for reconsideration. Employees will submit the appeal for reconsideration in writing and sign it prior to sending it to Businessolver Consumer Accounts. Upon receipt of the second appeal, the Consumer Accounts Appeals Committee will meet to review and ensure that your appeal has been handled properly.

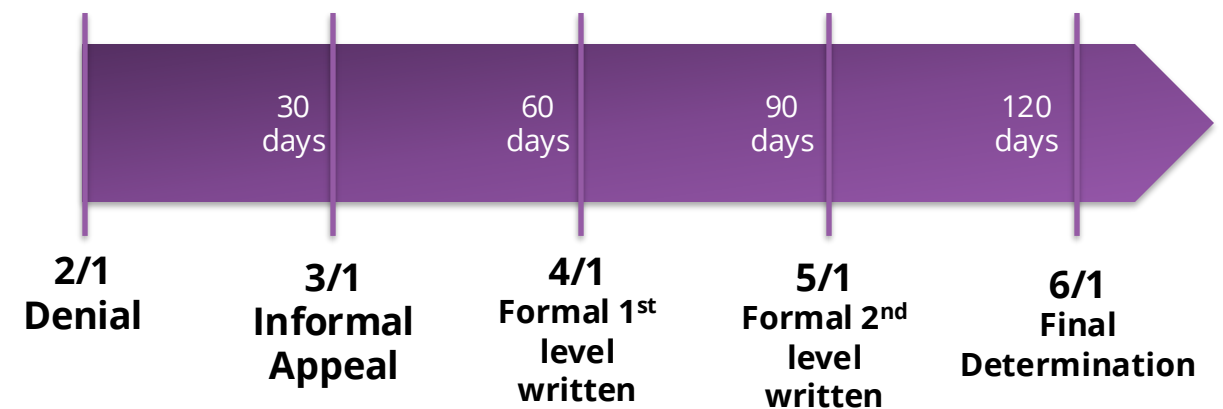
This procedure includes a claims processing review and consideration of any new documentation that employees may have submitted. Businessolver Consumer Accounts will decide on employees second-level appeal within 30 calendar days from the date we receive employee's request.

- If the Consumer Accounts Appeals Committee upholds the original informal and formal first-appeal denial, we will send email to employer providing them the summary of the denial, reasons for denial along with supporting documentation telling them why employees claim does not meet IRS or Plan guidelines for reimbursement.

Employer will notify Consumer Accounts how to process the final appeal.

- If Consumer Accounts reverses the denial, we will pay employees claims
- If Employer and Consumer accounts determine the denial can't be reversed Consumer Accounts will send employee a final notification of the outcome of their appeal. Employee will receive an email if they have an email address noted in their online account; if not, they will receive a letter in the mail. The email will also let them know the final decision is binding and cannot be appealed further by employee, employer, or Businessolver Consumer Accounts

Appeals Sample Timeline



CIP Overview (HSA only)

Due to the USA Patriot Act, under section 326 financial institutions need to verify the identity of individuals wishing to conduct financial transactions with them. Any bank where you will be opening an HSA account is required by federal regulation to provide Customer Identification Programs (CIPs) to prevent financing of terrorist operations and money laundering.

Businessolver HSA Administration takes appropriate steps to ensure our banking partners follow the appropriate regulations, so that your employee's HSA accounts are compliant. Unfortunately, CIP can bring some administrative frustrations to both employees and employers when individuals accounts pend or do not pass the CIP process.

Required CIP Data

Information required to be verified within our Customer Identification Program (CIP):

- **Full Legal Name** (First Name, Last Name, Middle Initial)
 - Don't use marriage name if legal change hasn't been made
 - Don't use Americanized version of legal name
 - Don't use nicknames
 - Don't use different spelling of name
- **Residential Address**
 - PO Box or Non-U.S. Address are not allowed
- **Date of Birth**
 - Must be at least 18 years old
- **Social Security Number**
- **Home or Business Phone**

The custodian bank uses this information to verify the accountholder's identity and Businessolver will send it securely to the bank to validate against its CIP verification system.

[Click here for the full CIP Process document.](#)

CIP Verification Process Results

The information above is used to validate the accountholder's identity and will be sent securely to custodian bank to validate against CIP verification system. The verification process will result in 3 potential accountholder's statuses:

- **Pass** – Accountholder's information is verified, and the account is opened
- **Fail** – Accountholder's information fails verification. This occurs after typically after 30 days to collect and retry.

The following is a list of common scenarios which may prevent an individual from passing the CIP process*

- Name matches Office of Foreign Assets Control (OFAC) registry listing
- SSN was issued prior to date of birth
- SSN registered as deceased
- Day, year or month of birth does not coincide with SSN
- SSN does not coincide with name and address
- State of Nevada does not provide SSN listings for credit/ID verifications
- Credit "freeze" in place by the member (typically via credit reporting agency)

**This list provides you examples of the types of possible challenges or failing types but isn't all inclusive.*

Documentation for CIP passage should be sent to UMB, not to Businessolver. Here are the two methods to send:

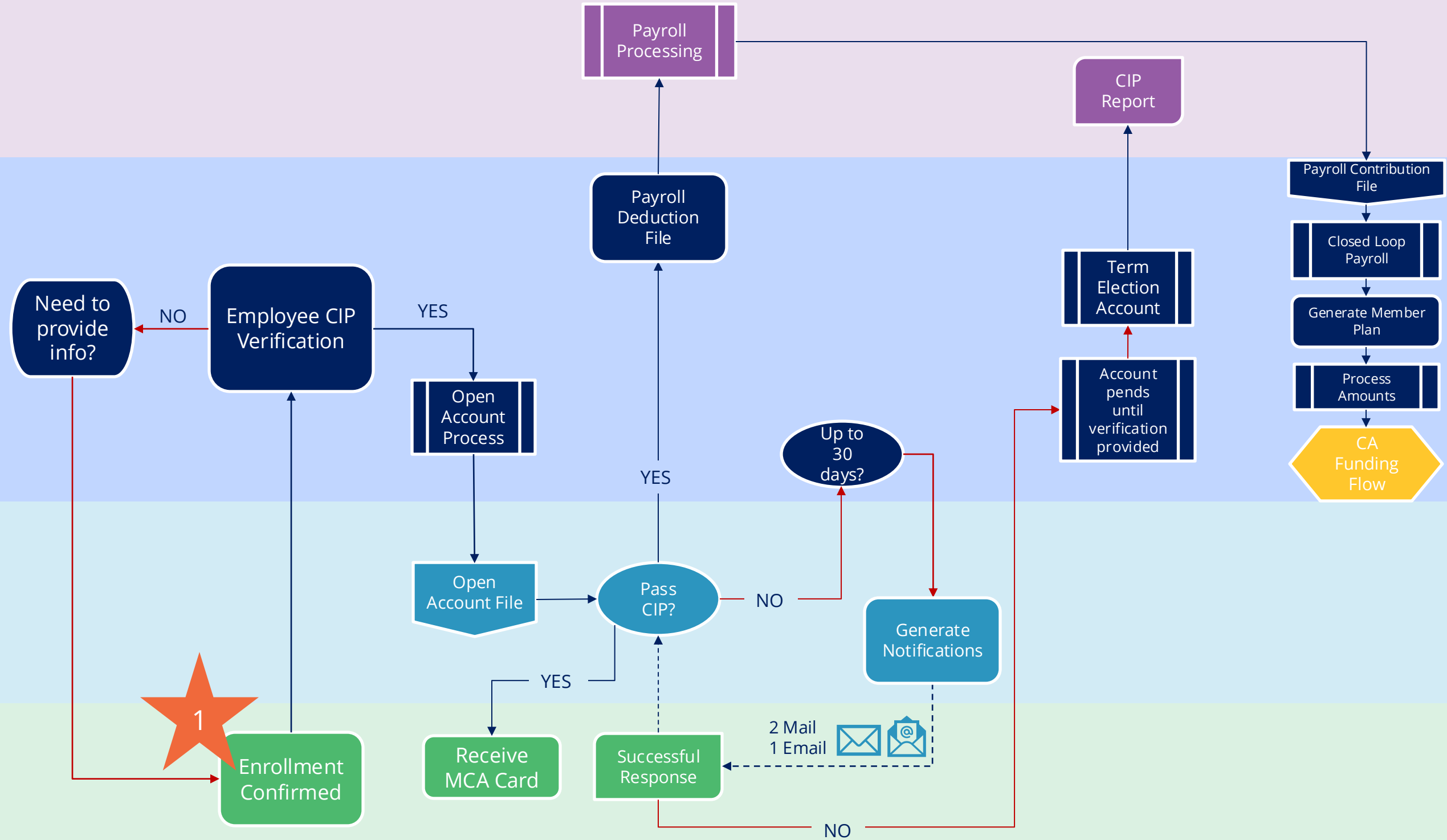
- Via email to HSA.CIPsupport@UMB.com. Send an email to this email address requesting a secure email to transmit the documents.
- Mail to: UMB Healthcare Services PO Box 419226
ATTN: CIP UPDATE (MS: 10020502)
Kansas City MO 64141-6226.

CIP Process Flow Chart

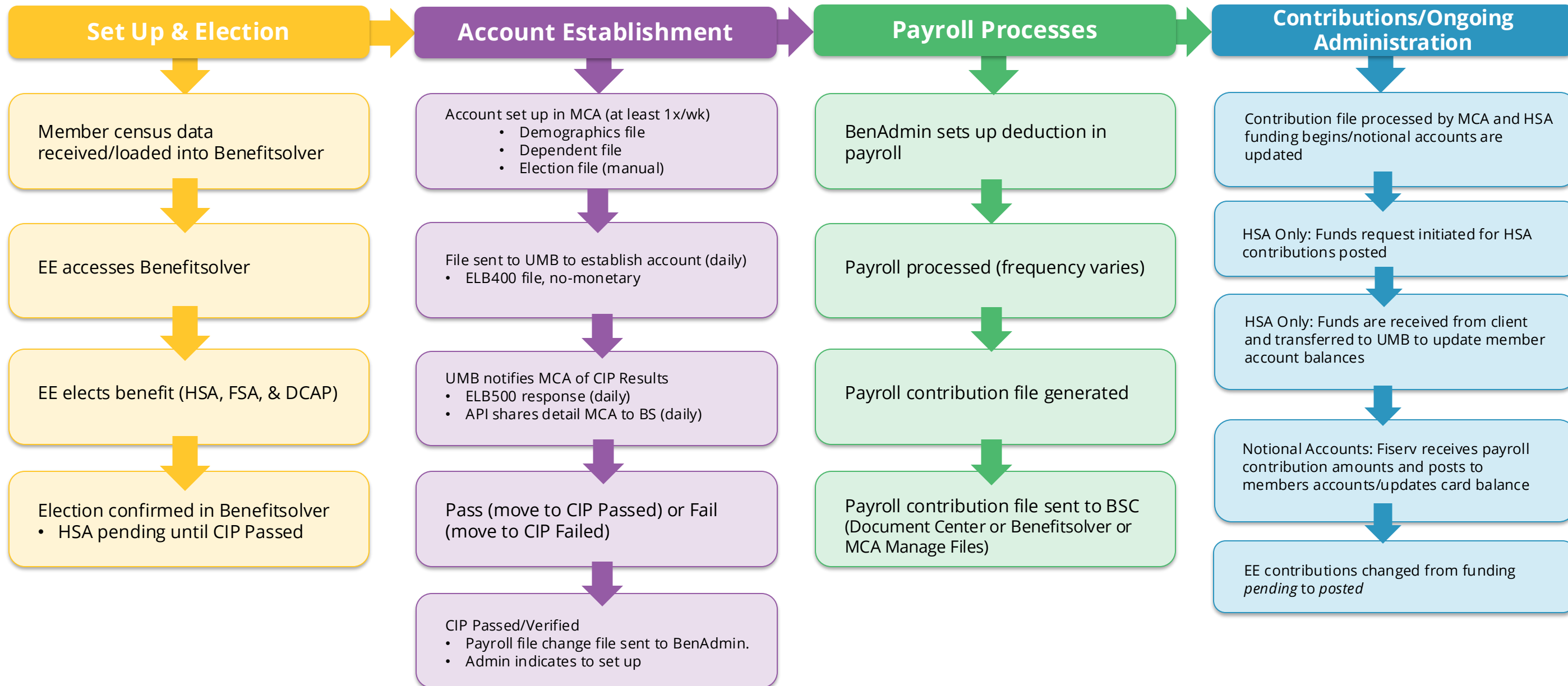
CLIENT

BENEFITSOLVER

MEMBER CUSTODIAN BANK

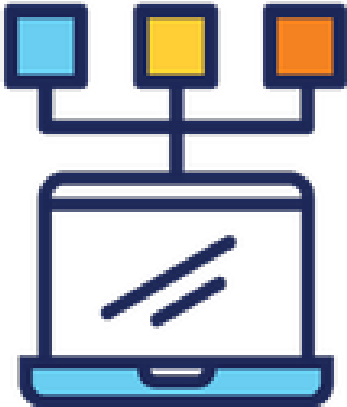


Consumer Accounts Processing



Daily indicates business days

General Timing and Transitions



Enrollment and Account Data

Enrollment API from BSC to MCA	400 File	500 File	160 File	162 File
<p>Weekly for most clients <i>(some clients are multiple times per week)</i></p> <ul style="list-style-type: none"> Demographic and Dependent data auto run and sweep into MCA Election auto-run but manually reviewed Thursday and loaded and visible in system Friday AM 	<ul style="list-style-type: none"> MCA to UMB and establishes and updates the UMB account(s) Creates new notional accounts Initiates the CIP process for new HSA accounts Also sends over demographic changes Processes every day at 2 PM EST (cannot run file more than once per day; can put on hold but cannot add additional runs) Triggers 500 file 	<ul style="list-style-type: none"> UMB to MCA and updates MCA (CIP Status, DDA account number (HSA), changes status of primary/new card status from requested to sent - changes file from UMB) Processes each night (between 10 PM - 11 PM) EST 	<ul style="list-style-type: none"> HSA exclusive File to UMB with account balances (cash adjustments) Twice per day 8 AM and 11 AM EST UMB - 9 AM, 2 PM, 4:30 PM and 6 PM (EST) 	<ul style="list-style-type: none"> Notional accounts (FSA/COM/HRA) Goes from general account to individual employee account (UMB pass through to First Data) Three times per day 8 AM and 11 AM, 4PM EST UMB - Throughout the day once per hour

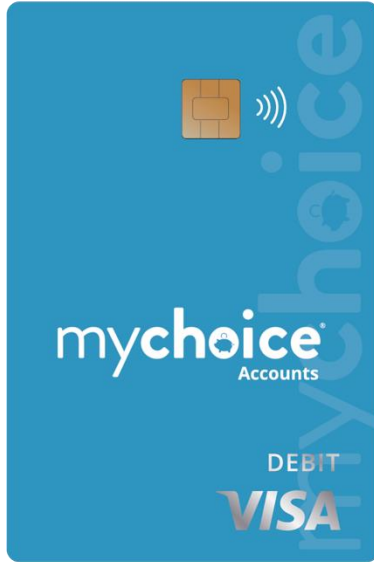
General Timing and Transitions



Payment-Related Data		
Payment Files	NACHA File	Check Payments
<ul style="list-style-type: none"> Processor processes request, goes through the system to identify how to settle the balance Payment job runs (sums all up into one payment) for either check or ACH This must run BEFORE the Nacha File 	<ul style="list-style-type: none"> A NACHA file is a payment instruction file that gets sent or uploaded to a bank portal in order to execute a mass payment batch. •Sent to UMB at 3 PM EST •UMB runs at night to issue all the ACH 	<ul style="list-style-type: none"> Issued weekly on Fridays for the prior week

Funding
<ul style="list-style-type: none"> HSA Funding: <ul style="list-style-type: none"> Client remits pay actual/closed loop payroll file MCA team loads deductions into MCA, which generates a funds request to the client MCA sends funds request to clients every day by 10 AM EST <ul style="list-style-type: none"> If ACH Debit – We will debit their bank account same day or by next business day If ACH Credit – We wait for them to remit funds back to us Once funds are received, MCA transmits to UMB for deposit and allocation into individual bank accounts

General Timing and Transitions



Card-Related Data

MDF (Monetary Detail File) Settlement File (from UMB)

- Settlements on the cards
- Confirmation of manual claims payment
- Contributions applied to HSA, DC FSA, COM (TRN/PRK)
- **Nightly (after midnight sometime) every day except Saturday (unless it's the first of the month)**
 - **Official bank/treasury holidays the file is not run**

NonMon File

- Fiserv (Card status/issued file/who cards were issued for)
- Lost/stolen information
- This is where we update the card status for cards requested through the API for established accounts
- **Nightly**

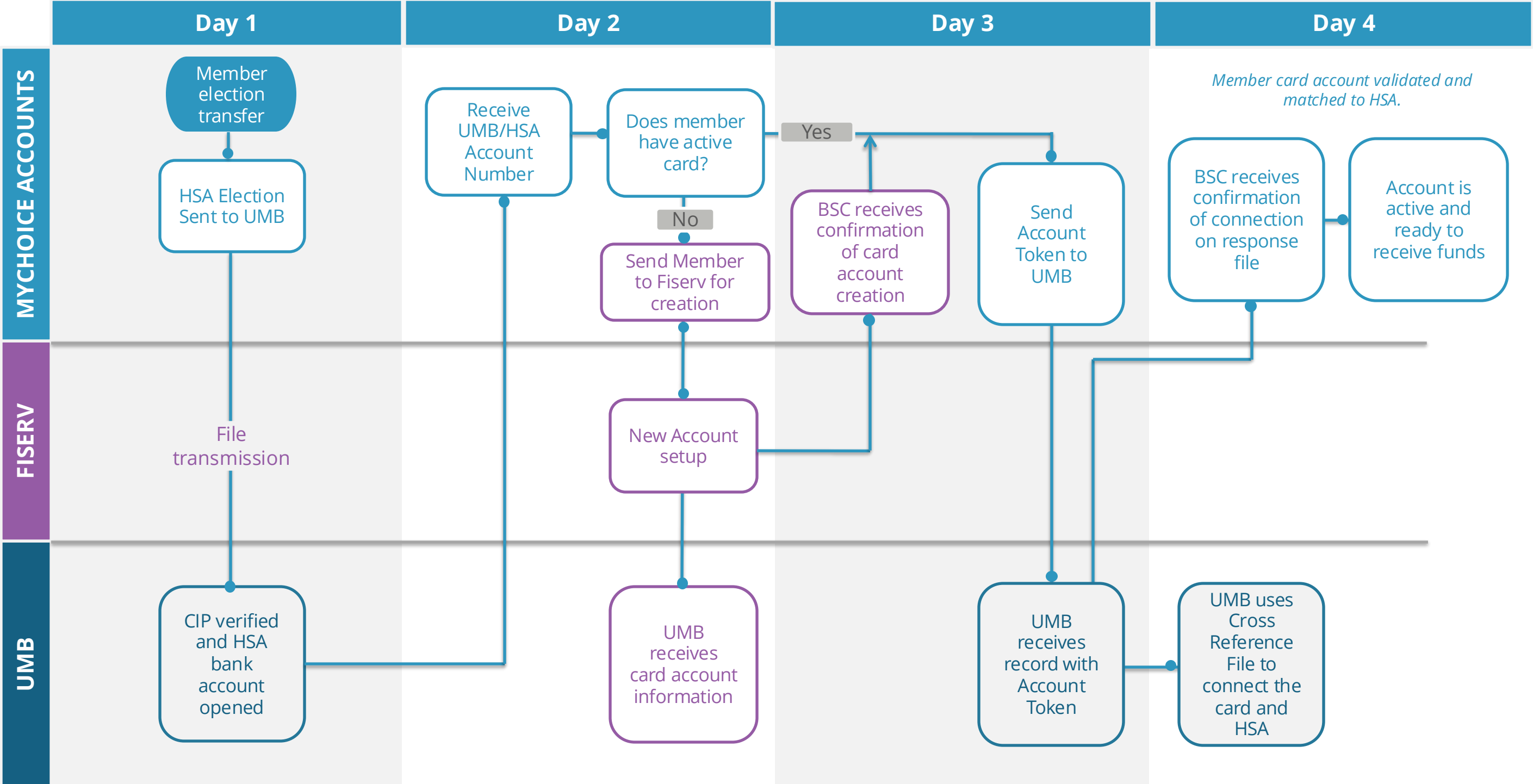
Card Swipes

- Authorizations loaded into MCA
- **Runs every 15 minutes to update the card balance**
- **Also nightly file for authorizations for the day (fill in gaps)**

Card Creations

- FSA – Sent to Fiserv the **following business day**
- UMB receives the 400 file
- HSA – Sent to Fiserv the **same day employee passes CIP**

Businesssolver/Fiserv/UMB HSA Account Set-Up



How to Help Your Members

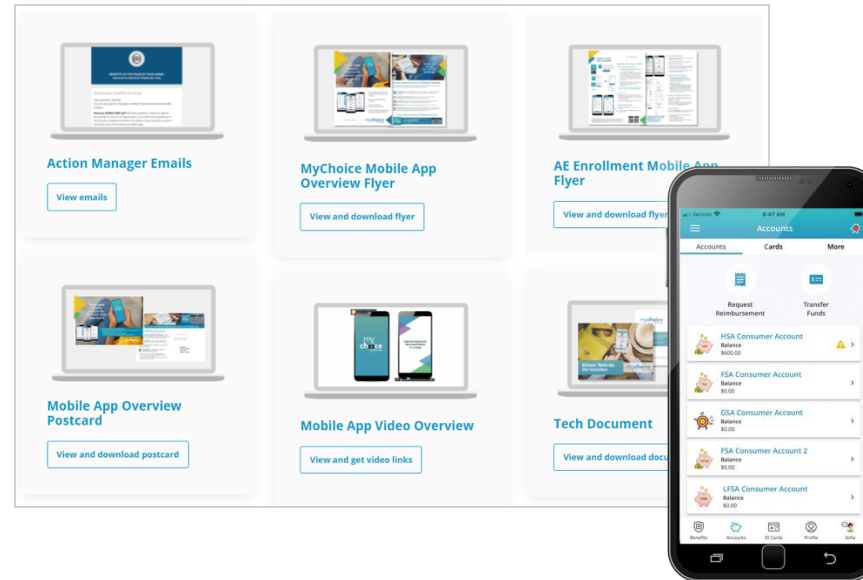


User Guide

with screen shots and account instructions.
Select a link to download the guide.

Use the link in your reference center to keep the most up-to-date version.

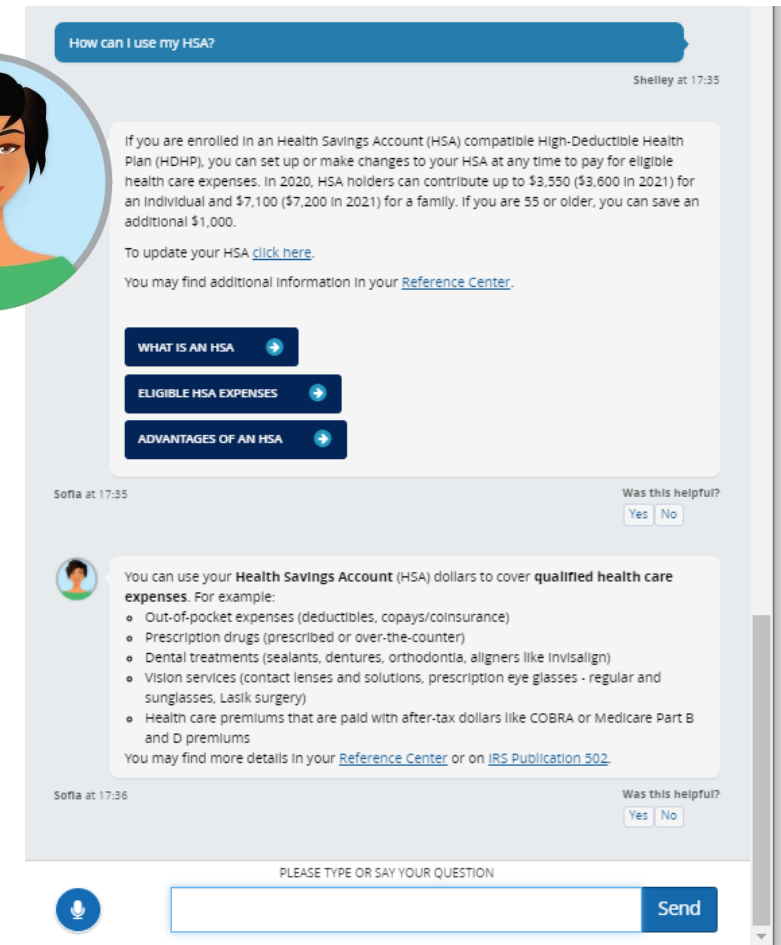
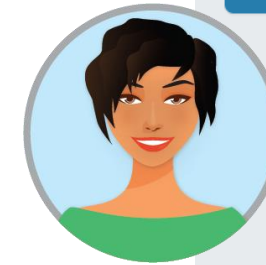
- [Users without HSAs](#) (all other accounts)
- [Users with HSAs](#) (and all other accounts)



Mobile App toolkit

Help members keep up with their accounts on the go by using the MyChoice Mobile App.

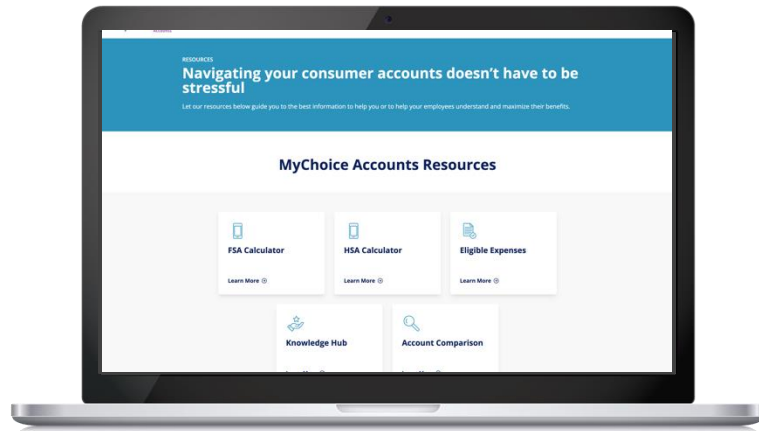
Here are [some resources](#).



Ask Sofia

Sofia answers thousands of MyChoice Accounts questions every year. Encourage employees to ask online or on the mobile app.

How to Help Your Members



Website:

MyChoiceAccounts.com

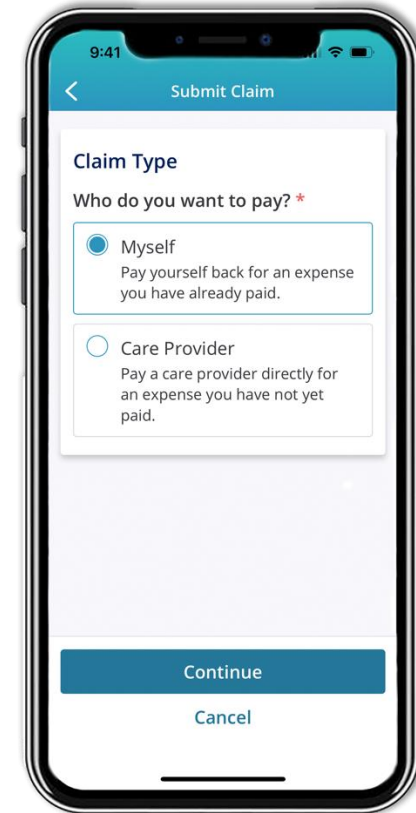
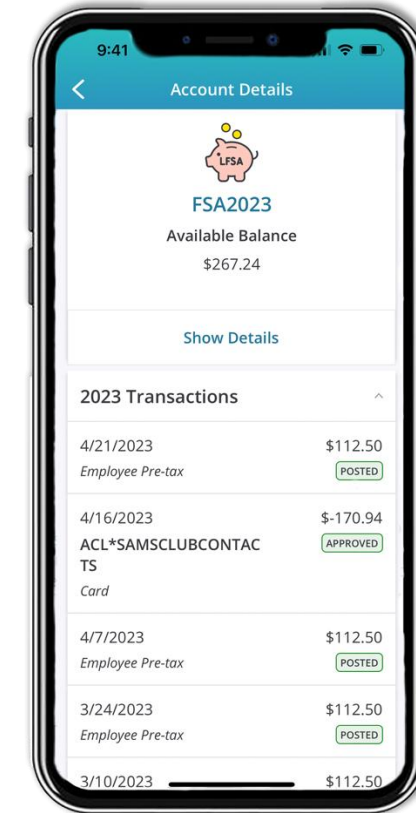
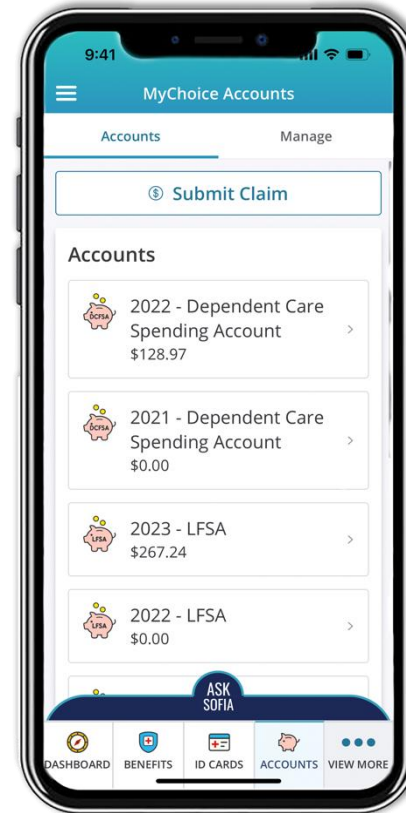
FAQ, videos, and more on [our website](https://mychoiceaccounts.com).



Live Member Services

Standard Hours: 7 a.m. – 7 p.m. CST, M-F

Designated toll-free numbers vary by client



Claims Submission

- The fastest and easiest way to submit is with the **MyChoice Mobile App**. If documentation is needed, just take a photo with the device and upload with our easy submission interface.
- Online submission available through Benefitsolver login
- Manual submission forms available online at mychoiceaccounts.com/forms

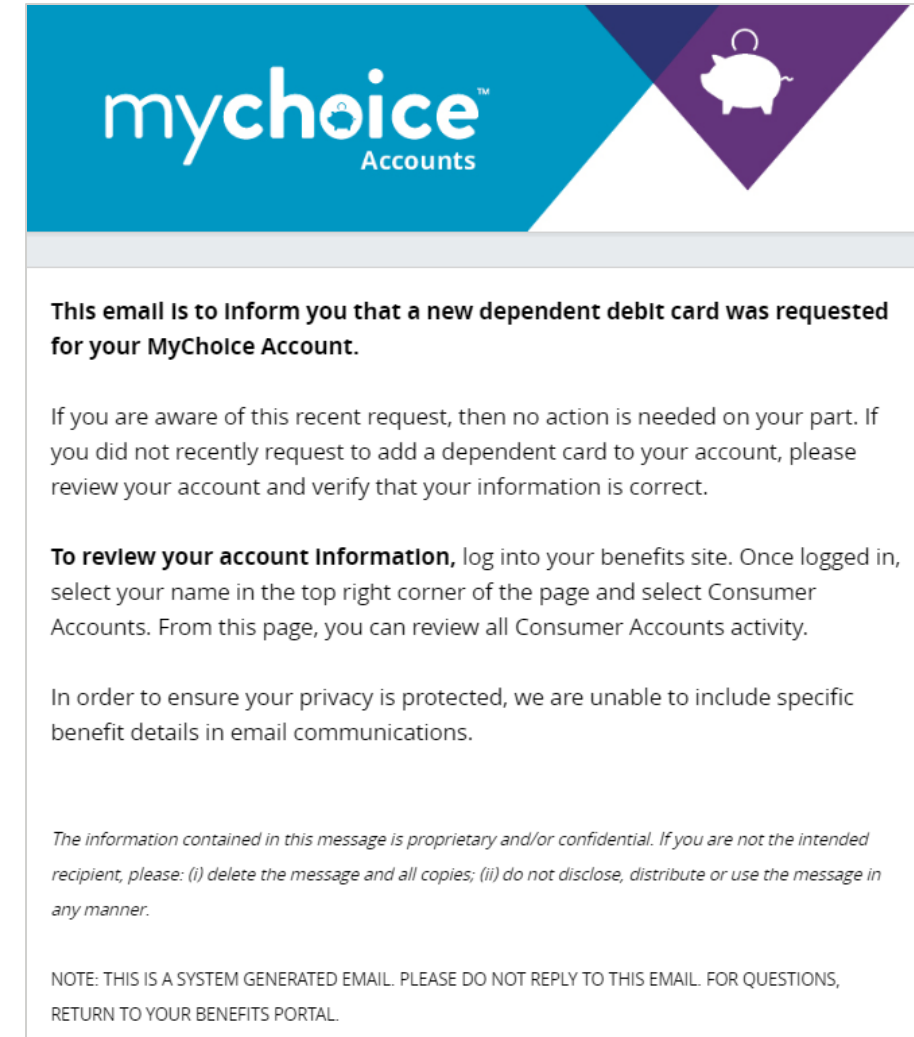
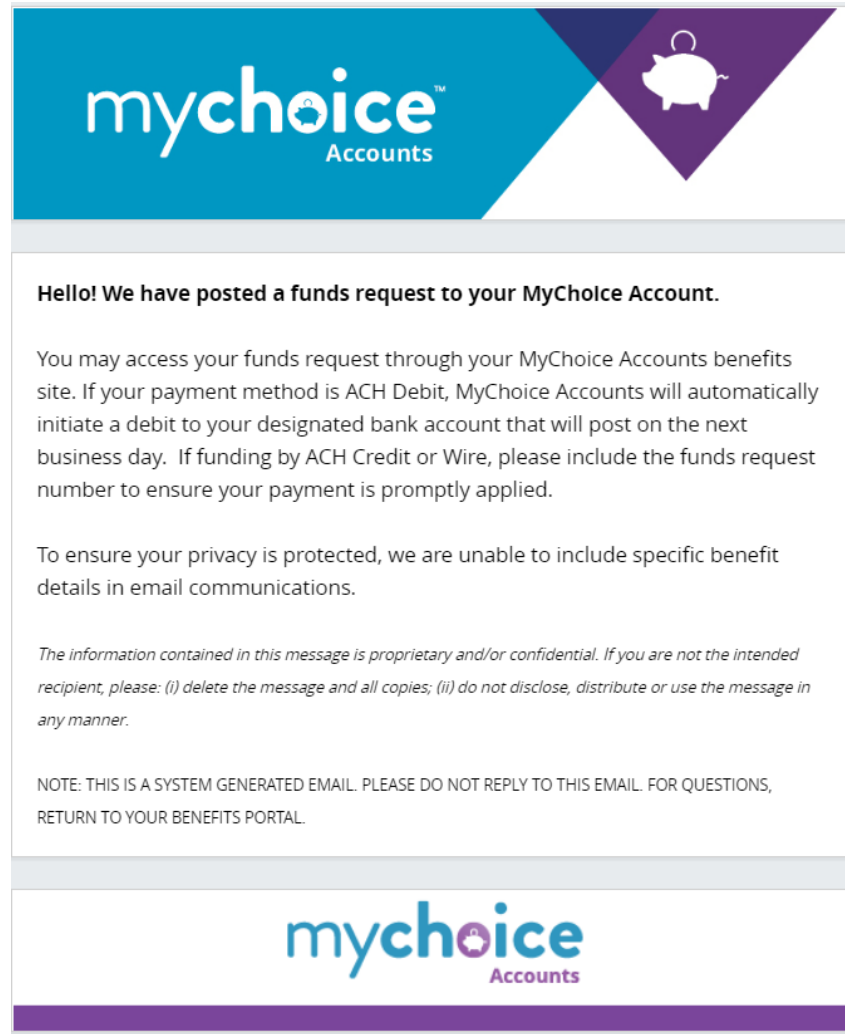
Automated Member Communications

Members trigger automated communications based on account activity, such as a claim or payment request, card decline, card request, CIP passage, etc.

These communications are emailed to the preferred email address provided during enrollment.

At this time, these communications are not customizable at the client level. These are deployed through Action Manager in Benefitsolver based on member actions.

To review these communications samples, [click here](#). See the synopsis of each communication on the next page.

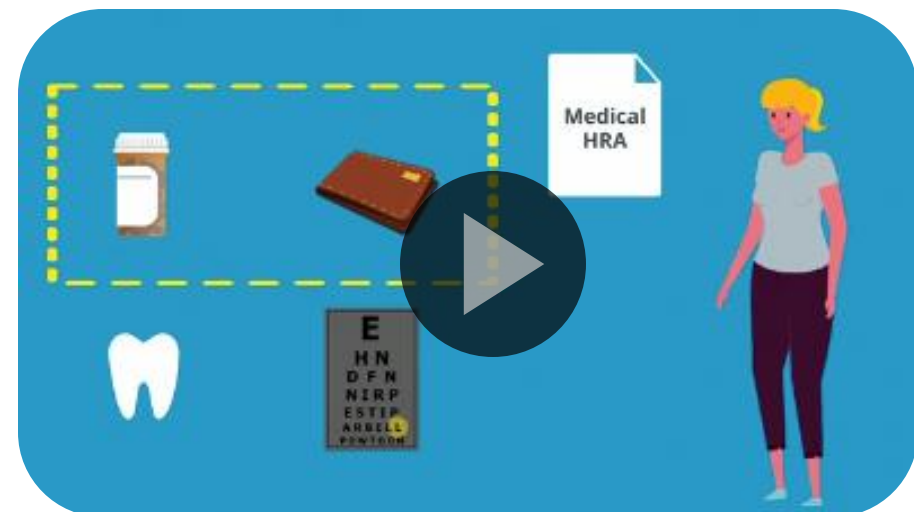
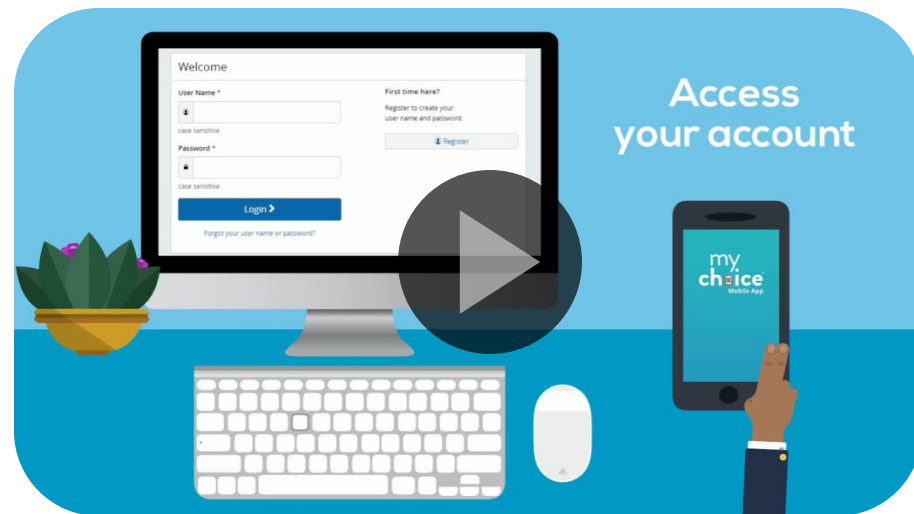


Automated Member Communications

Timing	Email	Description
~One week of enrollment files rec'd	CIP Approval Notice	We have successfully opened your Health Savings Account (HSA): no action needed.
~One week of enrollment files rec'd	CIP Failure Notice	We need additional information to verify your identity in order to open your Health Savings Account. Action steps outlined.
Member-initiated	Funds request notice	Claim or funds request has been submitted and received. No action required.
December/January	Welcome notice	How to access account, use MyChoice Mobile App, set up direct deposit.
Member-initiated	New bank account notice	Security alert: new bank account added to your account.
Member-initiated	Bank account change	Security alert: the bank account information on file has been changed. No action required if member is aware.
Member-initiated	Bank account removal	Security alert: a current bank account has been deleted from your account. No action required if member is aware.
According to plan design (typically 90 days after claim)	FSA only: Account suspended— Debit card deactivated	Outstanding transactions need documentation with instructions.
Upon substantiation of outstanding claim	FSA only: Account unsuspended— Debit card reactivated	Outstanding transactions have been verified, and the debit card is reactivated.
Member-initiated	Debit card lock alert	Security alert: we received your request to lock your debit card.
Member-initiated	Debit card lost/stolen	Security alert: debit card was reported lost/stolen. How to review transactions.
Member-initiated	New card request/alert	A new debit card has been requested on your account. No action required if member is aware.
Member-initiated	Dependent card request	A new dependent debit card has been requested on your account. No action required if member is aware.
Following unsubstantiated card swipe	Transaction needs documentation	We require additional information to verify your recent card swipe (info about which claim). What we need, and how to submit it.
Following card decline	Card swipe declined	Card transaction declined. Possible reasons why and what to do next.
Following funds request	Payment request received	Confirmation: Member has submitted a claim/funds request, and it has been received by MyChoice Accounts.
Following claim payment	Payment sent	Confirmation that the claim payment has been made via check or direct deposit.
Following claim approval	Request for payment	Confirmation: Claim/funds request has been approved.
Following claim determination	Payment partially approved	Possible reasons for partial approval (account balance, ineligible items/services) and next steps.
Following claim determination	Payment denied	Claim/request not approved. Next steps, and appeal process.

Additional Member Resources

[Video Library](#) for account explainer videos, Accessing Your Account, and Managing Your Account.



Online Member Enrollment Support

- [FSA Calculator](#)
- [HSA Calculator](#)



Annual Enrollment Support
Need PDFs? User Guide? Posters? FAQ?

Find the latest [AE Resources](#)
[HERE.](#)

Additional Client Resources

[Client Hub](#) – for documents and details regarding MyChoice Accounts administration

[Product Updates](#) – for details and FAQs regarding upcoming changes to the product and processes

[Tech with Heart Series](#) – live quarterly product updates

Businessolver Blog

You can filter by [Consumer Accounts](#) to get the latest updates and info.



Client Updates

- Ensure you're subscribed to [The Wire](#), our bi-weekly client newsletter, chock full of compliance updates and product news. To subscribe to Wire, contact your CSL.
- Wire subscribers will also receive timely compliance updates when there is news from the IRS or other HR legislation that impacts both MCA and Benefitsolver members.

Additional Client Resources

Decoding Consumer Accounts

Chart of all consumer accounts, current limits and plan designs. Available [online here](#).

Decoding Consumer Accounts		mychoice Accounts				
	Healthcare Flexible Spending Account HC FSA	Limited Purpose Flexible Spending Account LP FSA	Health Savings Account HSA	Dependent Care Flexible Spending Account DC FSA	Integrated/Medical HRA	
Can be used to reimburse	Eligible medical, dental, vision and Rx expenses	Eligible vision and dental expenses	Eligible healthcare expenses, COBRA premiums, LTC premiums, retiree healthcare premiums	Eligible dependent care costs	Eligible out-of-pocket medical expenses	
Plan considerations	Can't be used when enrolled in HSA	Can be used in addition to an HSA account	Only offered in conjunction with a High Deductible Health Plan (HDHP). Participation in any disqualifying plans will make a participant ineligible. Example of disqualifying plans: Healthcare FSA (including if your spouse participates in a Healthcare FSA through their employer), a traditional PPO or HMO plan, any part of Medicare.	Dependents include children under age 13 and/or a spouse and adult dependent unable to care for themselves.	Must be offered with group health coverage that meets the ACA's health plan requirements.	
Funded by	Generally, the employee, although employers can contribute following certain rules and limitations.	Generally, the employee, although employers can contribute following certain rules and limitations.	Employee, employer or both	Generally, the employee, although employers can contribute following certain rules and limitations.	Employer	
Funding limits	2024 annual limit: \$3,200	2024 annual limit: \$3,200	2023 annual limits: \$3,850 for employees only; \$7,750 for family coverage. Additional \$1,000 catch up contribution if 55 or older. 2024 annual limits: \$4,150 for employee only; \$8,300 for family coverage. Additional \$1,000 catch up contribution if 55 or older.	2023 annual household limit: \$5,000 for married filing jointly or a single parent; \$2,500 per parent if filing separately	None	
Funds are available	Full annual amount available from day one of the plan year.	Full annual amount available from day one of the plan year.	Up to amount deposited	Up to amount deposited	HRA funds are not typically deposited. The amounts are made available at the time of claims.	
Carryover rules	Up to \$610 carryover of unused funds to the next year, if allowed by employer. ¹	Up to \$ 610 carryover of unused funds to the next year, if allowed by employer. ¹	Full balance carries over each year	There are typically no carryover rules, but DC FSA plans can have the grace period provision which extends the period of time to incur claims. ¹	Allowed, but not common. Determined by employer when designing plan.	
Portability rules	None. Any underspent account balances may be subject to COBRA.	None. Any underspent account balances may be subject to COBRA.	Yes. Balances carry over from year to year. Employee owns all balances in the account, regardless of employment status.	None	None	

Decoding HRAs

There are so many types of HRAs. Stay up to date with this chart. Available [online here](#).

Decoding Health Reimbursement Arrangements (HRAs)		mychoice Accounts					
	Individual Coverage HRA	Excepted Benefit HRA	Qualified Small Employer HRA (QSEHRA)	Retiree HRA	Limited Purpose HRA	Integrated HRA	
Can be used to reimburse	Premiums for individual coverage, eligible medical expenses.	Certain eligible expenses under a group health plan, COBRA coverage and excepted benefits coverage.	Premiums for individual coverage, eligible medical expenses.	Premiums for coverage through the ACA market or a retiree health exchange. Can also reimburse for other qualified health expenses.	Eligible vision and dental expenses only.	Eligible out-of-pocket medical expenses.	
Plan limitations	Can't be used with group health coverage.	Must be offered with group health coverage.	Only for employers with 50 or fewer full-time equivalents. Can't be used with group health coverage.	Must be for retirees only.	Must be offered with group health coverage.	Must be offered with group health coverage that meets the ACA's health plan requirements.	
Funded by	Employer	Employer	Employer	Employer	Employer	Employer	
Funding limits	No minimum or maximum. Employer can offer different amounts to different types of employees, but if age-based, cannot offer older employees more than 3 times amount for younger employees.	For 2020, up to \$1,800 annually.	2020 annual limits: \$5,250 for employee only; \$10,600 for family coverage.	None	None	None	
Funds are available	Up to amount deposited. HRA funds are not typically deposited. The amounts are made available at the time of claims.	HRA funds are not typically deposited. The amounts are made available at the time of claims.	HRA funds are not typically deposited. The amounts are made available at the time of claims.	HRA funds are not typically deposited. The amounts are made available at the time of claims.	HRA funds are not typically deposited. The amounts are made available at the time of claims.	HRA funds are not typically deposited. The amounts are made available at the time of claims.	
Carryover rules	Allowed, but not common. Determined by employer when designing plan.	Allowed, but not common. Determined by employer when designing plan.	Allowed, but not common. Determined by employer when designing plan.	Allowed, but not common. Determined by employer when designing plan.	Allowed, but not common. Determined by employer when designing plan.	Allowed, but not common. Determined by employer when designing plan.	
Portability rules	None	None	None	None	None	None	

Revision History	Date – BSC user
Document creation	12.13.21 – sgjones
Updated Reports listing	06.07.22 – sgjones
Updated claims flow, substantiation methods, card	06.29.22 – sgjones
Updated card sub methods and added AE resources	08.26.22 – sgjones
Updated links/resources/substantiation methods	05.24.23 – sgjones
Updated card images, client hub links	10.23.23 – sgjones
Update card management details/screen shots	12.06.23 – sgjones
General updates	05.20.24 – sgjones
Consumer Accounts Processing updates	06.10.24 – sgjones
Font and staffing updates	07.31.24 – sgjones
Added HSA account opening flow/update auto-sub	09.04.24 - sgjones

