



# Benefit Advantage

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## Get the most out of your FSA...

The money you put in your Healthcare or Dependent Care Account is there for your use when you have an approved expense. Remember, your entire Healthcare balance may be used any time; Dependent Care claims must have available funds in the account at the time they are submitted.

### SUBMITTING A REQUEST FOR REIMBURSEMENT:



- ✓ Make purchase/service and keep your receipt
- ✓ Complete a claim form, available at [www.benefitadvantage.com](http://www.benefitadvantage.com)
- ✓ Copy the claim form and send with a copy of the receipts:

Fax: **920-339-0038**      Email: [claims@benadvan.com](mailto:claims@benadvan.com)

Mail: **FSA Dept, PO BOX 5546, DePere WI 54115**

*Please allow 24-48 hours for claim processing.*

### CLAIM SUBMISSION INQUIRY:

**You are able to view your account balance and claim status at any time by visiting us online at [www.benefitadvantage.com](http://www.benefitadvantage.com)**

- ✓ Enter your username and password.  
Initial username is your SS#; Password is the last 4 digits of the SS#.
- ✓ Select Account Access (Employee) from the drop down menu.  
Click Sign In.
- ✓ You may be prompted to update your personal information. Updating your email address will change your username to your email address.
- ✓ Click on Unreimbursed Medical under "Plan Info.", for summary or detail balance information, payment status, etc.
- ✓ Once you log into your account, you will be automatically enrolled into our system to receive emails regarding payment status or denial claim status.

If you have given us your email address, you will receive a confirmation by email when we enter your request for reimbursement and again when payment is deposited into your personal bank account.

### Dependent Care Participant TIPS:

If your Dependent Care claim remains *exactly* the same from week to week, we suggest that instead of submitting claims, you submit *the Dependent Care Recurring Expense form*, available at: [www.benefitadvantage.com](http://www.benefitadvantage.com)

This form need only be submitted once for the entire plan year unless you change providers or the charge for your Dependent Care varies. Please have your Dependent Care provider sign the bottom of the form or submit a receipt/bill when submitting this form for approval.

We must have your email address for electronic notification of processed, paid and/or denied claims. If you change your email, log-in to your account and enter your new email on the Benefit Advantage website or send your email address to:

[claims@benadvan.com](mailto:claims@benadvan.com) .

You may also contact our customer service dept. at: (800) 686-6829 ext.4 and we will update it for you.



**DON'T  
FORGET!**

To be eligible for reimbursement, all receipts/bills must include:

- ✓ name of covered person
- ✓ date of service
- ✓ type of service
- ✓ provider's name
- ✓ cost

Your claim is then approved or denied. If your claim is approved you will receive reimbursement. If denied you will receive both an explanation and instructions for getting the claim approved.

# Frequently Asked Questions:

**Q1- Once I file an eligible medical, dental, or dependent care expense, how long do I have to wait until Benefit Advantage reimburses me?**

A1- Benefit Advantage sends out reimbursements on a daily basis and guarantees a 5 business-day turnaround on claims. Once your claim has been processed you will receive an automated response via e-mail. You may also review your claim status on our website at [www.benefitadvantage.com](http://www.benefitadvantage.com).

**Q2- If I terminate employment, what happens to the money I have allocated to the Plan?**

A2- You will have a run off period following your termination date to submit claims for reimbursement of expenses **incurred on or prior to your termination date**. Any unused amounts left after the run off period will be forfeited if you terminate with a positive balance. You may be eligible to elect to continue your participation in the Health FSA via COBRA continuation.

**Q3- Will I receive a report showing how much money I have used from the Plan?**

A3- You may view your account status at anytime at [www.benefitadvantage.com](http://www.benefitadvantage.com). On our website you can review your claim history, payment history and current balance. Benefit Advantage also sends an e-mail notification on a monthly basis to all plan participants who still have money in their accounts. This notice is a reminder to use your money so you do not forfeit any left over funds.

**Q4- Can I change my amount or get into the plan after the beginning of the plan year?**

A4- You may change your election during the plan year **only** if you have a change in family status, such as marriage, divorce, death, birth, or adoption. Otherwise, you will have to wait until the next enrollment period. The change you make **must be consistent** with the qualifying event. If you have any of the above qualifying events, you must contact your Human Resource Department within 30 days of the event.

**Q5- I've been deducting medical and dental expenses on my income taxes. Can this continue if I enroll in the Flexible Benefit Plan?**

A5- Currently you can deduct on your income tax return only the portion of your expenses that exceeds 7-1/2% of your household income. The Flexible Benefit Plan gives you immediate first dollar savings on Federal, State (except in PA and NJ) and FICA taxes. You may not claim expenses reimbursed from your flexible spending plan on your tax return.

## Eligible Expenses (partial list):

Acupuncture  
Alcoholism treatment  
Ambulance  
Artificial limbs  
Artificial teeth  
Birth control pills  
Braille books and magazines  
Breast reconstruction surgery after mastectomy  
Chiropractors  
Coinsurance amounts and deductibles  
Contact lenses, solutions and cleaners  
Crutches  
Dental treatment  
Dermatologists  
Eyeglasses/sunglasses (prescription)  
Vision exams  
Hearing devices and batteries  
Hospital services  
Immunizations  
Infertility treatments  
Insulin  
Laboratory/diagnostic fees  
Language training for disabled/dyslexia child  
Laser eye surgery  
Learning disability  
Lodging (\$50 per night; medical reasons)  
Massage therapy (medical necessity)  
Norplant insertion or removal  
Nursing services  
Nutritionist's expenses (medical necessity)  
Occlusal teeth guard  
Orthodontia  
Oxygen  
Pap smears  
Physical therapy  
Pregnancy test—over-the-counter  
Prescription drugs  
Prosthesis  
Psychiatric care  
Psychologist  
Radial keratotomy  
Seeing-eye dog  
Smoking cessation programs  
Sterilization  
TMJ related treatments  
Transplants  
Travel expenses for medical care  
Viagra  
Wheelchair  
Wigs (medical reasons only)  
X-ray fees