

Dear Flexible Benefit Plan Participant:

Welcome to your Workterra Flexible Spending Accounts! Enclosed you will find important information to help you manage your accounts.

HOW TO LEARN MORE ABOUT YOUR ACCOUNTS:

WORKTERRA CONSUMER PORTAL: You can access all of your applicable account information on the WORKTERRA Benefit Accounts Consumer Portal at <https://WORKTERRA.lh1ondemand.com>. This one-stop portal gives you 24/7 access to view information and manage your accounts. It enables you to:

- File claims online, upload receipts and track expenses
- View up-to-the-minute account balances
- View your account activity, claims history and payment (reimbursement) history
- Report a lost/stolen Card and request a new one
- Apply for/Update your direct deposit information to receive reimbursements faster
- Change your login ID and/or password
- Download plan information, forms and notifications

WORKTERRA MEMBER CENTER (www.WORKTERRA.com -> member center): Provides additional resources for your applicable Flexible Spending Accounts:

- Claim Forms with instructions (for submission via mail or fax)
- Direct Deposit Form (to initiate, change or cancel your direct deposit via mail or fax).
- Eligible Expenses (generic list). Frequently Asked Questions
- FSA Savings Calculator
- Information Release Document
- Creating and Viewing your Account Online
- Instructions for Creating/Accessing your Account

HOW TO USE THE FUNDS IN YOUR ACCOUNTS:

DEBIT CARD: You may access funds in your Flexible Spending Accounts by using your VISA Stored Value Benefits Card. You will receive this card in the mail separately from this letter in a standard size 10 envelope.

- All Flexible Spending Accounts on One Card! Your VISA Card is loaded with all of your flexible spending account balances managed by Workterra. You do not need to direct payments to specific plans – it is done automatically at the point of sale based on merchant type and your benefit plan rules.
- Using your Card helps you keep cash in your wallet and makes accessing your FSA funds easy. The Card can be used, instead of cash, to conveniently and securely pay for qualified expenses. When you use the card, payments are automatically withdrawn from your account(s); and most of the time you won't have to submit receipts for reimbursement.
- VISA Card uses its auto-substantiation technology to electronically verify the transaction's eligibility according to the IRS rules. Over 85% of swipes will not require follow up. Just swipe the card and go. It's that easy! Please note: IRS requires 100% of card transactions be substantiated; some transactions do not qualify to be auto substantiated according to the IRS rules and you may be required to provide documentation to adjudicate some of the transactions made with the VISA Card.

CLAIMS via CONSUMER PORTAL: You may submit your claims for reimbursement online by logging in to your consumer portal and clicking "File a Claim"

To access your account online, go to <https://WORKTERRA.lh1ondemand.com>. Your user name is the first initial of your first name, full last name and last four of your social. Your initial password is your full social (you will be prompted to change this upon initial login). You do not need to enter a Code.

The screenshot shows a web interface with two main sections. The left section is titled "Login" and contains a sub-header "Existing User?". Below this, it says "Login to your account". There are input fields for "Username" and "Password", followed by a green "Login" button and a link for "Forgot Password?". The right section is titled "Setting up a New Account?". It has a "Code" input field and a green "Get Started" button.

CLAIMS via MAIL or FAX: You may also mail or fax us your completed claim forms accompanied by the required receipts/EOBs to the address/fax number below. Claim forms with instructions are available for download on our website at www.Workterra.com -> member center.

We are committed to providing you with superior service. Should you have any questions or concerns about your FSA benefits, please call Workterra Customer Service at 888.327.2770 and a representative will assist you. You may also email us at custserv@workterra.com.

Sincerely,

Workterra Customer Service
Workterra, PO Box 11657, Pleasanton, CA 94588
PH: 888.327.2770 | FAX: 925.460.3929

Claim Form for Medical/Dependent Care Expenses

1. Instructions (incomplete claim forms will not be processed)

- Please see a full list of instructions on the following page.

2. Employer/Employee Information ☐ Is this a new address? Check the box if yes.

Employer Name _____

Employee Name _____ SSN _____

Street Address _____

City / State / Zip Code _____ Daytime Phone _____

3. List of Eligible Expenses

For receipts/EOBs to substantiate Visa Card Transaction(s), please mark "yes" in the Visa Card field.

Family Member	Relationship to Employee	Date of Service	Description of Expenses	Visa Card (Yes/No)	Amount Requested
Jane Doe	Spouse	1/1/23	Prescription	No	\$15.00
Enter the total amount requested for reimbursement and attach receipts before sending.					

4. Employee Authorization

I certify that I (and/or my eligible dependents) have incurred expenses for which reimbursement is sought under my FSA or /HRA plan and that these expenses have been incurred during the plan year. Furthermore, I declare that I am requesting payment only for expenses that have not and will not be paid under any other benefit plan or program and that I am solely responsible for the accuracy of all information relating to this claim. I authorize the Employer to reimburse the amount requested from my FSA plan.

Employee Signature _____ Date _____

Claim Form for Medical/Dependent Care Expenses

Completed claim forms should be faxed or mailed to the following address:

Workterra, P.O. Box 11657, Pleasanton, CA 94588 Fax: 925.460.3929

You can also email your claim to claims@workterra.com.

Instructions

- Complete the Employee / Employer Information requested under Section 2.
- Fully complete all fields in Section 3. **Claim forms with incomplete information will be rejected.** Please list each receipt and itemize each expense. Additional pages may be attached. Receipts with a description of service(s) rendered or an Explanation of Benefits from your insurance provider are required for reimbursement. Credit card receipts or cashed checks are not acceptable documentation.
- Under Section 4, read the Employee Authorization carefully and sign noting your agreement.
- **Keep complete copies of all receipts and forms submitted to Workterra for audit purposes.** Workterra is not responsible for providing copies to participants.
- Be sure to include your employer's name on the form along with the last four of your social.
- Be sure to note if there has been an address change. There is a circle to check on the claim form to indicate that the address listed is new.
- Attach all receipts to the claim form before sending it to Workterra. Receipts **MUST** include the following information:
 - Name of the patient (you, your spouse, or dependent) unless the expense is an OTC purchase;
 - The date the service was provided or the date the item was purchased;
 - The name of the service provider or the merchant;
 - Description of the service or item purchased;
 - The amount/cost of the item or service provided.
- Be sure all expenses were incurred during the plan year or period of active plan participation before submitting your claim.
- Verify that your expenses were not previously submitted or paid through your Visa card.
- If your claim is rejected, you will be notified in writing explaining the reason and requesting the necessary information needed to process your claim.

Top Two Reasons Claims Are Denied:

1. Cancelled checks and credit card receipts are provided as proof of an incurred expense/ purchase
2. The statement from the provider lists only payments made (does not list a description of the services rendered or does not list the dates of the services/purchases).

Per the IRS, receipts must show both a description of services/purchases and the date of the services/purchases.