



## Benefits Debit Card Request – **Please Read Carefully!**

The benefit debit card is a convenience card. It allows you to pay for eligible medical expenses at the point of purchase.

Safeguard your debit card and do not give out debit card information over the telephone! Debit cards can be the target of fraud. If it is lost or stolen, let us know immediately. It can be replaced, however there may be a nominal charge for replacement. Do not throw the debit card away at the end of a plan year. **The debit card is valid for a three year period.**

If you are using the debit card for purchases from your *Health Savings Account*, most purchases will be automatically approved. **Save your receipts – you may need them if you are ever audited by the IRS.**

If you are using your debit card for purchases from your *Flex Spending Account*, please remember - **not all debit card purchases are automatically approved.** The IRS requires us to review itemized receipts for many types of purchases in order to verify the eligibility of the expenses.

If you use your debit card, monitor your e-mail. If you are notified that we need a receipt for your purchase, you will only have a certain period of time to submit the requested receipts to keep your debit card active. You may fax, e-mail, mail or upload your receipt to Region I. The submitted receipt(s) should contain the following information:

- Date of service
- Type of service
- How much was paid by insurance for the service (if applicable)
- Amount you owe for the service

**NOTE:** Payment receipts, such as a credit card receipt or receipts marked R.O.A, are not proper forms of verification.

### Other important guidelines to remember:

- If you are using your debit card for *Flex Spending Account* purchases, only use the debit card for eligible expenses within the plan year dates.
- Do not use your debit card to pay balances or expenses that have already been claimed or reimbursed from your *Flex Spending Account*. This will result in duplicate claims/payments.
- Do not file a *Flex Spending Account* claim for any debit card charges. This will result in duplicate claims/payments.

Have questions? Contact our Employee Benefits department at (800) 450-2990, or by e-mail at [support@r1benefitstoday.org](mailto:support@r1benefitstoday.org).

For additional information regarding your benefit accounts and the benefit debit card, we strongly urge you to register on our Participant Portal at <https://www.mywealthcareonline.com/r1benefitstoday/>, and visit our website at [www.r1benefitstoday.org](http://www.r1benefitstoday.org).

**I have read and understand the information explained above, and agree that I am responsible for the proper use of the benefits debit card by myself and my dependents.**

\_\_\_\_\_  
Account Holder Signature

\_\_\_\_\_  
Account Holder Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Group Name

\_\_\_\_\_  
Employee ID

\_\_\_\_\_  
E-mail Address (required)

\_\_\_\_\_  
Dependent/Spouse (Circle one) Name

\_\_\_\_\_  
Dependent / Spouse Signature

\_\_\_\_\_  
Dependent / Spouse Birthdate

E-mail the completed form to [support@r1benefitstoday.org](mailto:support@r1benefitstoday.org), or fax the form to 218-236-2368.