PayFlex® Flexible Spending Account

Paying for eligible dental expenses

When using your Flexible Spending Account (FSA) funds to pay for eligible dental expenses, it's important to know your payment options. Review the following chart and information, along with the Frequently Asked Questions (FAQs).

Payment Options	Benefits of this option	Things to consider
Option 1: (Preferred method) Once you receive an Explanation of Benefits (EOB) from your insurance provider, pay for your dental service using the PayFlex Card®, your account debit card.	 Expense is automatically deducted from your health care FSA Ensures you only pay for what you owe Helps keep your card active Eliminates claim filing 	 You may be required to provide the Explanation of Benefits (EOB) to confirm your expense was eligible. To confirm an expense is eligible, IRS regulations require proof of the date of service, description of service or product and the amount you owe.
Option 2: (Next best method) Once you receive dental treatment, pay for the bill with cash, check or personal credit card. Then submit a claim to pay yourself back.	Quick reimbursement Helps keep your card active	Wait to submit your claim until you receive your EOB from your insurance provider.
Option 3: (Choose this option only if your dentist requires you to pay before insurance pays.) Once you receive dental treatment, pay the bill with the PayFlex Card®, your account debit card.	Expense is automatically deducted from your health care FSA Eliminates claim filing	 If your dentist charges you for an estimated amount OR an amount that is greater than the amount you owe, your FSA is placed into overpayment* status and action will be required. To resolve your overpayment* status, submit payment to PayFlex or submit a claim for a previously unreimbursed eligible expense to repay your FSA. If you or your dentist receives reimbursement from any other coverage, such as insurance, ask your dental provider to credit any amount over what you owe back to the PayFlex Card. If that's not possible, you're responsible for reimbursing the plan for the amount overpaid.

Questions?

Log in to your PayFlex member website and click **Contact Us**. We're here to help Monday – Friday, 7 a.m. – 7 p.m. CT, and Saturday, 9 a.m. – 2 p.m. CT.

Frequently Asked Questions (FAQs)

I used my PayFlex Card to pay for a dental expense and my dentist overcharged me. Who's responsible for fixing this issue?

- You're responsible for getting reimbursement for the amount you were overcharged. In order to keep your PayFlex debit card active, you must do one of the following:
 - Mail a check to PayFlex for the amount you were overcharged to repay your account.



- Submit a claim for another eligible expense to cover the overcharged amount.
- Have your dentist credit the amount back to your PayFlex debit card.

I received a bill from my dentist for an estimated amount and I used my PayFlex debit card to pay the bill. Why did I receive an Explanation of Benefits notice from PayFlex that states my account is in overpayment*?

- In this situation, your account is in overpayment* status because the amount you owe is unknown. Once your insurance provider has paid their portion, the amount you owe is confirmed.
- To keep your card ACTIVE and avoid overpayment*, it's best not to use the PayFlex Card until insurance has processed the claim and provided you with an Explanation of Benefits (EOB) showing the amount you owe.

I used my PayFlex debit card at the dentist and it was approved. Why am I receiving a Request for Documentation letter for my dental expenses?

- According to IRS guidelines, PayFlex is required to verify that all purchases made with the PayFlex Card are eligible expenses.
- Usually, you'll receive a letter if the merchant's description doesn't clarify the date of service, description of service, or the amount you owe.
- To help keep your card ACTIVE, the documentation must include:
 - date of purchase or service
 - amount of purchase or service
 - description of item or service
 - name of merchant or service provider
 - name of patient

What's the difference between an Explanation of Payment (EOP) from PayFlex and an Explanation of Benefits (EOB) from my dental insurance provider?

- An EOP from PayFlex is a document telling you what claims have been approved for reimbursement, denied, or whether your account is in overpayment* status.
- An EOB from a dental insurance provider is a statement that details what services were paid by the insurance plan and what's owed to the dentist by the insured individual.

PayFlex Systems USA, Inc.

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Financial Sanctions Exclusions. If benefits provided by any agreement violate or will violate any economic or trade sanctions, benefits are immediately considered invalid. PayFlex cannot make payments for claims or services if it violates a financial sanction regulation. This includes sanctions related to a blocked person or a country under sanction by the United States, unless permitted under a written Office of Foreign Asset Control (OFAC) license. For more information, visit http://www.treasury.gov/resource-center/sanctions/Pages/default.aspx.

 $\label{payFlex} \mbox{PayFlex Mobile} \mbox{\mathbb{R} is a registered trademark of PayFlex Systems USA, Inc.}$

payflex.com



^{*}Overpayment status occurs when you have been reimbursed for an expense that has been denied. When your account is placed in overpayment status, the PayFlex Card will be temporarily suspended until PayFlex receives/processes the required documentation or payment.