

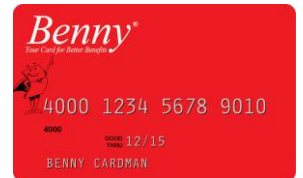
Frequently Asked Questions about your Prepaid Benefits Debit Card

Benefits
Debit
Card

General Questions on your Prepaid Benefits Card

1. What is the Benny Prepaid Benefits Card?

The Benny Prepaid Benefits Card is a special-purpose Visa® Card that gives participants an easy, automatic way to pay for eligible health care/benefit expenses. The Card lets participants electronically access the amounts set aside in their respective employee benefits Health Reimbursement Accounts (HRAs).



2. How does the Prepaid Benefits Card work?

It is a Visa® Card, with the value of the participant's account(s) contribution stored on it. When participants have eligible expenses at a business that accepts Visa debit cards, participants simply swipe their Cards and the funds are automatically deducted from their respective benefit account(s) for payment to the business or merchant.

3. Is the Prepaid Benefits Card just like other Visa® Cards?

No. The Prepaid Benefits Card is a special-purpose Visa® Card that can be used only for eligible health care/benefits expenses. It cannot be used, for instance, at gas stations or restaurants. There are no monthly bills and no interest.

4. How many Prepaid Benefits Cards will the participant receive?

The participant will receive two Cards. If participants would like additional Cards for other family members, cards can be ordered from Zenith American Solutions (Plan Administrator) by calling 1-800-757-0071 Opt 2 or via the Participant online web portal at any time.

5. Will participants receive a new Prepaid Benefits Card each year?

No, participants will not receive a new Card each year. The participant will simply keep using the same Card. HRA contributions are added monthly to participant accounts based on eligibility rules and hours worked as reported and maintained by the Sprinkler Fitters Local 483 Trust fund.

6. What if the Prepaid Benefits Card is lost or stolen?

Participants should call Zenith American Solutions at 1-800-757-0071, Opt 2, to report a Card lost or stolen as soon as they realize it is missing to turn off their current Card(s) and issue replacement Card(s). Participants may also report lost cards via the online participant web portal at any time.

Using the Card

1. Where may participants use the Prepaid Benefits Card?

IRS regulations allow participants to use their Prepaid Benefits Cards in participating pharmacies, mail-order pharmacies, discount stores, department stores, and supermarkets that can identify HRA-eligible items at checkout and accept Visa® prepaid cards. Eligible expenses are deducted from the account balance at the point of sale. Transactions are fully substantiated, and in most cases, no paper follow-up is needed. Participants can find out which merchants are participating by visiting the web site on the back of the Card.

Participants may also use the Card to pay a hospital, doctor, dentist, or vision provider that accepts Visa® payments. Sophisticated auto-substantiation technology will electronically verify the transaction's eligibility according to IRS rules, however if the transaction cannot be auto-substantiated, paper follow-up will be required and you will receive a notification and receipt reminder from the Plan Administrator.

2. Are there places the Prepaid Benefits Card won't be accepted?

Yes. The Card will not be accepted at locations that do not offer the eligible goods and services, such as hardware stores, restaurants, bookstores, gas stations and home improvement stores.

Cards will not be accepted at pharmacies, mail-order pharmacies, discount stores, department stores, and supermarkets that **cannot** identify FSA/HRA-eligible items at checkout and the Card transaction may be declined. Participants can find out which merchants are participating by visiting the web site on the back of the Card or consulting their Plan Administrator.

3. If asked, should participants select "Debit" or "Credit"?

Your Prepaid Benefits Card is actually a prepaid card. But, since there is no "prepaid" selection available, participants should select "Credit." Participants do not need PIN and cannot get cash with the Prepaid Benefits Card.

4. How does the Card work in participating pharmacies, discount stores, department stores, and supermarkets?

- a. Bring prescriptions, vision products, eligible Over the Counter (OTC) items and other purchases to the register at checkout to let the clerk ring them up.
- b. Present the Card and swipe it for payment.
- c. If the Card swipe transaction is approved (e.g., there are sufficient funds in the account and at least some of the products are HRA-eligible), the amount of the HRA-eligible purchases is deducted from the participants account balance and no receipt follow up is required. The clerk will then ask for another form of payment for the non-HRA-eligible items.
- d. If the Card swipe transaction is declined, the clerk will ask for another form of payment for the total amount of the purchase.
- e. Your receipt will identify the HRA-eligible items and may also show a subtotal of the HRA-eligible purchases.
- f. In most cases, the participant will not receive requests for receipts for HRA-eligible purchases made in participating pharmacies, discount stores, department stores, or supermarkets.

5. Why do participants need to save all of their itemized receipts?

Participants and their other eligible users should always save itemized receipts for HRA purchases made with the Prepaid Benefits Card. They may be asked to submit receipts to verify that their expenses comply with IRS guidelines. Each receipt must show: the merchant or provider name, the date service was received, a description of the item purchased, and the out of pocket (net of insurance) purchase amount. The IRS requires that every card transaction must be substantiated. This can occur through automated processing as outlined by the IRS (e.g. copay matching, or prescriptions purchases at qualified retailers, etc.). If the automated processing is unable to substantiate a transaction, the IRS requires that itemized receipts must be submitted in order to validate expense eligibility.

6. How long do participants need to save their itemized receipts?

Participants should save itemized receipts for HRA purchases for three years to comply with IRS document retention rules.

7. What if participants lose their receipts or accidentally swipe the Card for something that's not eligible?

Usually the service provider can recreate an account history and provide a replacement receipt. In the event that a receipt cannot be located, recreated, or if the expense is ineligible for reimbursement, the participant will need to send a check to the Plan Administrator for the ineligible amount so it can be credited back to the participant's HRA balance. The plan complies with the specific IRS collection rules for ineligible expenses paid with Prepaid Benefit Cards.

8. May participants use the Prepaid Benefits Card if they receive a statement with a Patient Due Balance for a medical service?

Yes. As long as they have money in their account for the balance due, and the services were incurred during the current plan year, and the provider accepts Visa® debit cards, participants can simply write the Card number on their statement and send it back to the provider. You will then be able to submit your receipt for this transaction online or directly to the Plan Administrator as documentation to substantiate balance due charges.

9. Sometimes the participant is asked for the CVV when paying the balance due or when placing an order by phone or online. What is this and where is it found?

CVV stands for "Card Verification Value." It is a 3-digit number that can be found on the back of the card to the right of the signature panel.

10. How do participants know how much is in their account?

Easy access to detail HRA account information is available online at [www. https://zenith-americansea.lh1ondemand.com/Logon](https://zenith-americansea.lh1ondemand.com/Logon) or participants can call 1-800-747-0071, Opt 2 to ask the Plan Administrator about balance information and account activity. Participants should always know their account balance before making a purchase with the Card.

11. What if participants have an expense that is more than the amount left in their account?

By checking their account balance often – either online or by calling their Plan Administrator at the phone number shown on the back of the Card – participants will have a good idea of how much is available. When incurring an expense that is greater than the amount remaining in their account,

participants may be able to split the cost at the register. (Check with the merchant.) For example, participants may tell the clerk to use the Prepaid Benefits Card for the exact amount left in the account, and then pay the remaining balance separately. Alternatively, participants may pay by another means and submit the eligible transaction manually via a claim form with the appropriate documentation.

12. What are some reasons that the Prepaid Benefits Card might not work at point of sale?

The most common reasons why a Card may be declined at the point of sale are:

- a. The participant has insufficient funds in his or her HRA benefit account to cover the expense.
- b. Non-eligible expenses have been included at the point-of-sale. (Retry the transaction with the eligible expense only.)
- c. The merchant is encountering problems (e.g. coding or swipe box issues).
- d. The pharmacy, discount store, department store, or supermarket cannot identify HRA-eligible items at checkout according to IRS rules.
- e. The participant card has been suspended by the Administrator.

13. Is the participant responsible for charges on lost or stolen Prepaid Benefits Cards?

If the Plan Administrator and the issuing bank are notified within 2 business days, the participant will not be responsible for any charges. If the notification is after 2 days, the participant may be responsible for the first \$50 or more. Replacement Cards may be purchased.

14. Whom do participants call if they have questions about the Prepaid Benefits Card?

Call Zenith American Solutions at the phone number shown on the back of the Card.

15. How will a participant know to submit receipts to verify a charge?

The participant will receive a letter or notification from the Zenith American Solutions if there is a need to submit a receipt. All receipts should be saved per the IRS regulations.

16. What if a participant fails to submit receipts to verify a charge?

If receipts are not submitted when requested to verify a charge made with Prepaid Benefits Card, the Card may be suspended until receipts are received and a participant may be required to repay any ineligible amounts charged. Submitting a receipt or repaying the amount in question will allow the Card to become active again.