

# A Guide to Your Benny™ Prepaid Benefits Card

Information to help you understand how and where you can use your Benny™ Card.



## The Basics

The Benny™ Prepaid Benefits Card gives you an easy, automatic way to pay for qualified healthcare expenses not covered by your health insurance. Benny is actually a special stored-value debit card that draws on the value of your annual FSA or HRA election amount. No PIN (personal identification number) is needed, and there is no cash back option.

With Benny™ much of the paperwork related to claims has been simplified. You also have online access to account activity tracking and helpful planning tools.

## How Does the Benny™ Work?

Whenever you incur a qualified healthcare expense, simply swipe your Benny™ Card as you would a credit card. The amount of your qualified purchases will be deducted automatically and the pre-tax dollars are electronically transferred to the provider for immediate payment. It's that easy!

## Where Can I Use My Benny™ Card?

Benny is accepted at the following locations:

- ▷ Physician offices, including medical, dental, and vision care
- ▷ Medical facilities, such as hospitals and urgent care clinics
- ▷ Participating retail stores, supermarkets, and pharmacies.)

Keep reading for more details about using your card at these various locations.

## At Your Healthcare Provider—Some things to Keep in Mind:

- Copays: When paying for your healthcare services, the system will automatically approve services that match your copay or multiples of your copay (not coinsurance) from your benefit plan, and you won't have to submit supporting documentation for these services.
- Provider charges other than copays: only use your Benny™ to pay for services that have already been billed to your medical or dental plan, and have already been adjusted to match the plan's allowable costs.
- Any time your Benny™ purchase is not a qualified expense on your medical or dental plan, you will need to submit documentation to Manley Services.

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### Benny™ Tip: Who Should Sign

While both of the cards you received are printed with the participant's name, your spouse or dependent should sign their own name to the back of the card that they will use.

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## At Your Healthcare Provider *(continued from page 1)*

- When you pay for a service, have the provider charge only the exact amount that is shown as the "Patient Balance" on your insurance carrier's Explanation of Benefits (EOB).
- If you are paying for multiple office visits, ask the provider to run the card separately for the exact "patient balance" for each visit. If you pay multiple visits with one card swipe, the system may not be able to identify which visits were combined, and you will probably need to submit documentation.

## Using Benny™ at Pharmacies and Retail Stores

- Purchase your over-the-counter (OTC) items from participating pharmacies and general stores. These businesses can automatically identify IRS-eligible expenses at the register so you won't need to submit documentation. For the current list of participating businesses, visit [MyBenny.com](http://MyBenny.com). Please note that new IRS regulations effective January 2011 restrict eligibility of OTC items.
- If you are also purchasing noneligible items, the clerk will ask you for another form of payment for those items.
- If you are using the Benny™ to purchase both prescription and OTC items at a pharmacy that does not have the IIAS system, consider having the pharmacist swipe the card separately for both purchases. You will still need to submit documentation for the OTC items, but the prescribed drugs should be automatically authorized.



### ONLINE TOOLS

Login to MyFlex from **ManleyPlan.com** to view eligible expenses, see your current balance and transaction history, and even submit claims.

Visit **MyBenny.com** for the current list of participating businesses, and more.

### Further Questions?

Questions? You're always welcome to call our Customer Service Department at (541) 485-7488 or toll-free (800) 422-7038.



### BENNY™ TIP: SAVE YOUR RECEIPTS!

It is important to retain your paperwork, such as your insurance carrier's Explanation of Benefits (EOB) or your store receipt showing an item name or description. Often, we are not able to verify purchases automatically and will request documentation to confirm that the products or services are medically necessary.

## How to Maximize your Benefits and Avoid Claims Denials

- Remember that you can't use Benny™ at non-health related locations, such as restaurants, department stores, and gas stations.
- Date of service is important! The Benny™ assumes the date of service is the day the card is swiped. If you are paying for a prior service, only use your card if the service date is within your current plan year. Prior year services need to be submitted as a manual claim for reimbursement.
- If you make a purchase for more than your available balance, ask the store clerk to charge part (up to your available balance amount) to your Benny™, and then use another form of payment for the remainder of your purchase. If the merchant won't allow a partial payment, you will need to use another form of payment and then submit a Reimbursement Request form.
- Although Benny™ is a stored-value benefit card, you will need to select "credit" rather than "debit" when you use your card.

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**ManleyPlan.com**

PO Box 70168, Eugene, OR 97401  
541.485.7488 • 800.422.7038  
Fax 800.575.1109