



A PacificSource Company

MyFlex: Online Claim Submission Instructions

1. Log on to **MyFlex** using your Manley ID number and password. If you are new to MyFlex, please contact our Customer Service Department to receive your temporary password.
2. The **My Account** tab allows you to view historical claims information, current election and claims summaries, and the option to submit claims online. Click on **New Claim** and read the disclaimer. (It is the same as the one you would agree to on our paper request for reimbursement form.)
3. Complete the fields as indicated below. Fields with an asterisk (*) are required.
 - **Plan* (required):** Using the drop down arrow, choose one of the plans available to you based on your personal enrollment. If you have both a Health Related Expense (FSA) and an HRA and are unsure which account to choose, you may refer to your Plan Information Sheet. Otherwise, choose the option you think is best. Our staff reviews the claims to confirm they are paid out of the correct account based on the order in your employer's plan setup.
 - Important: If you do not choose a plan, the claim will default to "Select One" and will not be saved.
 - **Provider:** Enter the name of your provider or the merchant where you purchased your item (e.g., pharmacy name or chiropractor's office).
 - **Claimant name:** Enter your name, even if the claim is for a dependent's expense.
 - **Description:** Briefly describe the expense (examples: dental cleaning or over-the-counter medication).
 - **Procedure Code:** Using the drop-down arrow, choose the code that best matches the service or item you are claiming.
 - **From:** Enter the date on which the service was performed or the item was purchased.
 - **To:** Enter the end date of the service or item. This may be the same as the "From" date if the expense was incurred on a single day, or a different date if the expense was incurred over a period of time (examples: monthly daycare or hospital stay).
 - **Requested Amount* (required):** Enter the exact dollar amount you are requesting. Include a decimal point, but no dollar sign (example: 30.95). This may be different than the amount of your total expense if you know you have less in your account than the entire expense. You may request the entire expense if you anticipate future deposits to your account and don't want to wait to submit your claim (examples: dependent care and some HRAs have accrual features).
 - **Notes:** Enter any information you think will be useful for us to know when processing the claim.
 - **Receipt(s)* (required):** Attach your documentation. Only one attachment is allowed per submission; however it may contain multiple receipts. Please note that we still require the same type of documentation we would require on a manual request for reimbursement. For guidelines, please see page 2 of our Request for Reimbursement form for details.
 - **Submit:** Click this when you have completed the form.
4. **Claim Confirmation Receipt:** A screen will appear indicating that your claim was successfully submitted. This is for your records only; please do not send any additional documentation at this time. Your claim will now appear as a pended claim in the Claims History tab.
5. Save your documentation: As with all claims, you will need to save your original documentation as per IRS guidelines.

Questions? Feel free to contact us at (541) 485-7488 or (800) 422-7038 or customerservice@manleyserv.com.