



Eighth District Electrical Benefit Fund



February 2020

To: Participants of the Eighth District Electrical Benefit Fund

From: Board of Trustees, Eighth District Electrical Benefit Fund

Re: Personal Care Account

This notice is to clarify the rules and regulations regarding the use of your Personal Care Account (PCA).

How does your PCA work?

Your PCA is an employer provided medical reimbursement plan, as that term is defined in the Internal Revenue Code and under applicable IRS regulation. One of the benefits of this Plan is that employer contributions to the Plan are not treated as taxable income for participating employees. However, to qualify for this favored treatment, all expenses paid out of the Plan must be eligible expenses.

Most of the time you use your card, these expenses can be automatically verified as eligible expenses. However, there may be certain instances where the expense cannot be verified, and you may be asked to provide additional documentation to substantiate the claim as an eligible expense. The following information is meant to provide an overview of your PCA benefits, how to file a claim, and how to substantiate your claim as a qualified medical expense if required.

What expenses are covered under your PCA?

You can use your PCA for qualified medical expenses. Medical expenses are the costs of diagnosis, cure, mitigation, treatment, or prevention of disease, and for the purpose of affecting any part or function of the body. These expenses include payments for legal medical services rendered by physicians, surgeons, dentists, and other medical practitioners. They include the costs of equipment, supplies, and diagnostic devices needed for these purposes. Medical expenses also include the premiums you pay for insurance that covers the expenses of medical care, and the amounts you pay for transportation to get medical care.

The following is a list of some common medical expenses that may be covered. Please contact the Fund Office if you have any questions regarding what medical expenses are eligible for reimbursement. You may also review *IRS Publication 502. Medical and Dental Expenses*.

- Dental Services
- Medical Treatment
- Lab Exams / Tests
- Vision Services
- Medication
- Practitioners
- Medical Equipment
- Home Health Care

Physical Address: 4704 Harlan Street, Suite 104 • Denver, CO 80212

Physical Address: 5295 South Commerce Drive, Suite 220 • Murray, UT 84107

Mailing Address: P.O. Box 30751 • Salt Lake City, UT 84130

Toll Free: 844-989-2321

www.8thDistrictBenefits.org



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- Deductibles
- Coinsurance and copays

How to submit a claim:

You may make a claim simply by using your WEX BENEFIT CARD, or you may pay the expenses out of your own pocket and then submit a claim for reimbursement in one of the following ways:

- Mail – You can mail your claim to BeneSys, P.O. Box 30751, Salt Lake City, UT 84130
- Email – You can email your claim to flexclaims@benesys.com
- Fax – You can fax your claim to (248) 556-2597
- Upload – You can upload your claim on the participant portal

What is Substantiation?

Substantiation is the process of verifying claims were for eligible medical expenses. Some claims are able to be substantiated automatically. However, in some instances, you may receive a request to provide an itemized receipt or other documentation to verify the expense.

Information Required on Supporting Documentation:

All receipts or documentation must include the following information:

- Name of member for whom the charges relate
- Name of the provider
- Description of the service or items purchased (itemized bill)
- Date of services were provided
- Amount of the expense, service charge and/or out-of-pocket expense not paid by insurance

What we cannot accept as substantiation:

- Credit card or cash receipt
- Cancelled checks
- Balance forward billing statements (unless itemization of services is provided)

How can you minimize the hassle of substantiation?

It is recommended that you keep itemized receipts for all medical expense claims. Regardless of whether you are required to submit them for substantiation, you are responsible for retaining a copy of all medical expense receipts for three years for your records in the event you or the Plan is audited by the IRS. Saving a copy of these itemized receipts will also make the substantiation process easier in the event you receive a letter asking you to provide additional documentation.

Substantiation Letters:

If additional information is needed to substantiate your claim you will receive multiple notices:

- Request for more information
- First substantiation request

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- Second substantiation request
- Final substantiation request – At this time your card will be suspended and you may not be able to use it until you either, substantiate the claim with the appropriate information or refund the Plan for the amounts that were not substantiated.

What do I do if my WEX BENEFIT CARD is suspended?

If you fail to respond to a request for substantiation, your WEX BENEFIT CARD may be suspended. Your WEX BENEFIT CARD will be reinstated when you provide the documents needed to substantiate the claim. If you do not substantiate your claim, your WEX BENEFIT CARD will remain suspended, but you will still be able to submit a paper claim using one of the methods described above.

What happens if you use your WEX BENEFIT CARD for an ineligible expense under the PCA?

As determined by the Internal Revenue Code and/or Plan rules, if you use your WEX BENEFIT CARD for an ineligible expense, the IRS requires that you repay the Plan for the ineligible expense. Your WEX BENEFIT CARD will be credited for this amount as soon as your payment has been received and processed. In the event you do not repay the Plan for the ineligible expense, the Plan is required to treat the ineligible expense as taxable income to you, and you may receive a 1099-M.

How to contact BeneSys:

If you need additional information, please contact us.

- Phone Number: (844) 989-2321
- Email Address: staff@8thdistrictbenefits.org