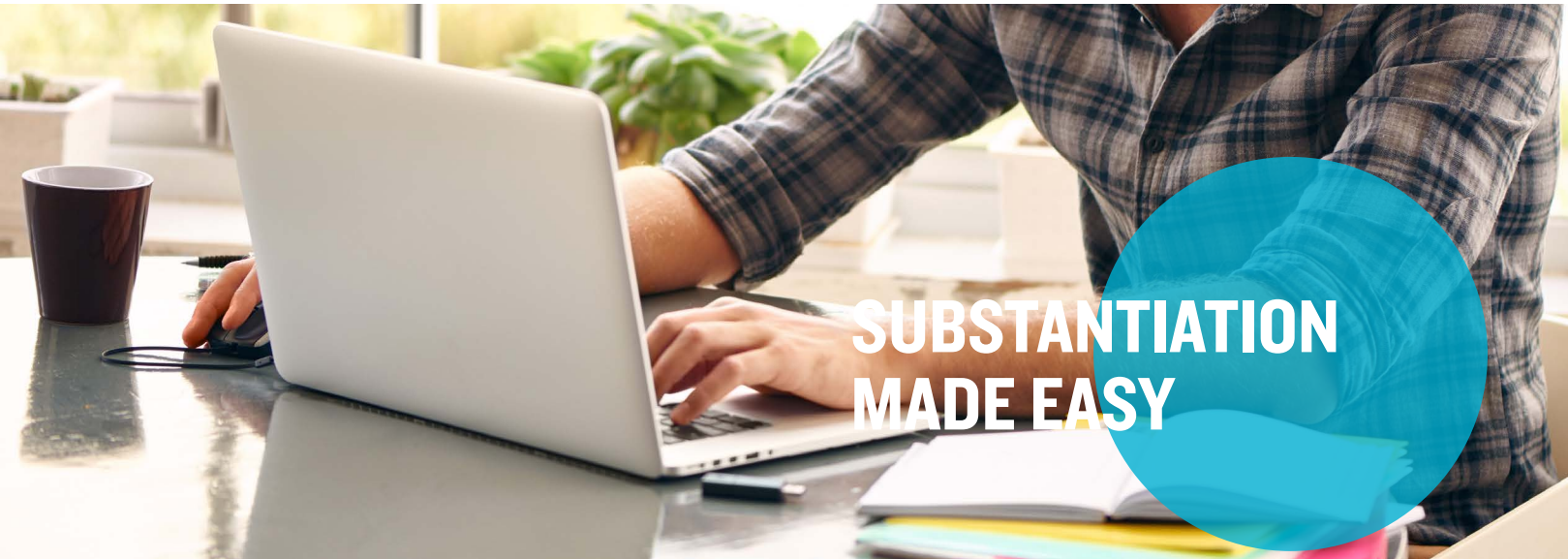


Debit Card Substantiation File FAQ — Participants



**SUBSTANTIATION
MADE EASY**

This FAQ provides an overview of the Debit Card Substantiation File process. Certain items may not apply to your employer's particular plan design. Please see your Human Resources representative for more information on plan details.

What is the Debit Card Substantiation File?

The Debit Card Substantiation File is the process of insurance carriers sending eligible insurance claim information to Aptia in order for Aptia to automatically substantiate debit card transactions that require documentation. Please note that Aptia does not pay out claims based on this file. It is purely for substantiation (receipts/documentation) purposes.

Why utilize the Debit Card Substantiation File?

The Debit Card Substantiation File allows Aptia to automatically substantiate debit card transactions, which decreases the number of claims that you need to substantiate.

Which plan types can utilize the Debit Card Substantiation File?

This depends on your employer's plan design. If your debit card works for the Flexible Spending Account (FSA) and the Health Reimbursement Account (HRA), the file will look at both plans when Aptia receives and processes the file.

Please note that Health Savings Account (HSA) claims do not require substantiation, so the file is not needed for an HSA.

How do I enroll in the Debit Card Substantiation File?

This is an employer-level decision, so if your employer opts in to the file feed, you are automatically enrolled. No forms are required.

How do I know if the claim will be on the file or if I need to provide substantiation?

Mercer Marketplace will monitor this for you. If the debit card transaction is not substantiated via the file, you will receive a receipt reminder within 62 days. Once you receive a receipt reminder, it becomes your responsibility to provide documentation for the claim; that claim is no longer eligible for a carrier match on the file. (See examples on the following page.)

What do I need to be aware of with the Debit Card Substantiation File?

- Keep in mind that once you receive a receipt reminder for a claim, that claim is no longer eligible for automatic substantiation via the file. It is now your responsibility to send in documentation for that claim.
- If the claim is not substantiated, the claim will be denied and the card will be put on a temporary hold.
 - To resume use of the card, you can send in documentation for that claim, repay the plan for the amount of the denied claim or you can offset the claim with another eligible expense.

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- How you use the card determines the success of the file (partial payments, payment plans, estimates, etc.)
 - Example I: Imagine you go to the doctor for knee surgery, and they ask for a down payment of \$500. You swipe your debit card for \$500 that day, and a few weeks later, after the claim has been processed by insurance, you find your total responsibility for the surgery is \$700. If you call your provider to pay the remaining \$200 with your debit card, that claim is going to come to Aptia on the file as one \$700 claim, not as two separate claims for \$500 and \$200. The amount on the file will not match the transactions in our system, so you will have to substantiate the claim by providing documentation to Aptia for the eligible expense.
- Only claims that are processed through insurance will be provided to Aptia on the file. All other eligible expenses need to be substantiated by you.
 - If Aptia is only receiving a file feed from your medical health insurance carrier, you are responsible for providing required documentation for your eligible vision and dental claims — you will receive a receipt reminder when you are responsible for providing documentation.
- Aptia cannot guarantee the timing of when insurance carriers process and send claim data to Aptia. If an eligible claim is not substantiated via the file after approximately 60 days, it becomes your responsibility to substantiate the claim, because it is no longer eligible for a carrier file match.

Example of the receipt reminder process for a claim that is not eligible for a carrier match on the file:

Your employer is offering the Debit Card Substantiation File with their medical carrier and you swipe your debit card at a dental office. The card will work as usual, but since the debit card transaction was not linked to the established carrier connection, the receipt reminder process will work as follows:

- You will receive a receipt reminder the day after the transaction settles.
- If the claim goes unsubstantiated, you will then get another receipt reminder 45 days later.
- If the claim still goes unsubstantiated, you will get another receipt reminder 60 days later.
- If the claim has not been substantiated 95 days later, the claim will be denied and your card will be put on a temporary hold.
- The next steps for you would include options to substantiate the claim, offset the claim, repay the plan, etc., which would ultimately lift the debit card hold status.

Example of the receipt reminder process for a claim with a potential carrier match on the file:

Your employer is offering the Debit Card Substantiation File with their medical carrier and you swipe your debit card at your medical office. The card will work as usual, and since the debit card transaction was linked to the established carrier connection, the receipt reminder process will work as follows:

- To ensure the carrier has enough time to receive and process the claim and send the substantiation file to Aptia for processing, you will not receive a receipt reminder until approximately 60 days after the transaction settles.
- If the claim has not been substantiated approximately 260 days later, the claim will be denied and your card will be put on a temporary hold.
- Please note that once you receive a receipt reminder, the claim status will have changed and the carrier file will no longer find a match for that claim in the Aptia system. Because of this, you will then be responsible for substantiating the claim.
- The next steps for you would include options to substantiate the claim, offset the claim, repay the plan, etc., which would ultimately lift the debit card hold status.