Welcome to Ameriflex

We're excited to be your partner in health savings. We designed this guide to help you get the most out of your benefits and show you where to go if you need help or have questions. From tracking your account balance and spending, to using your card and understanding eligible expenses, you'll find everything you need to manage your account with ease.

To assist with your transition to Ameriflex, we have created this FAQ document to help answer frequently asked questions. If you need additional assistance, please contact our Participant Services Team.

Debit Cards

Q: When should I expect a new Ameriflex Debit Card? **A:** Debit cards will take 7-10 business days to be delivered once enrolled. Cards come in plain white envelopes, so be on the lookout.

Q: How many cards will be issued? **A:** One debit card per participant will be issued. If you need additional debit cards for your dependents, you will need to add your eligible dependents via the participant portal and then a new debit card will automatically be issued for any dependent over the age of 18.

Claims Submission

Q: What is the process for submitting claims and what is the anticipated turnaround time for the review and reimbursement? **A:** Claims can be submitted through our online participant portal, via the mobile app, via email, or by regular US postal mail. Once the claim is received, the expected turnaround time is 3-5 business days for the claim to be processed. After the claim is processed, please allow another 1-2 business days for the reimbursement to be issued via check or direct deposit.

Q: What are the methods for reimbursement? **A:** All participants are automatically set up for Check reimbursement. If you wish to change your reimbursement method to direct deposit, you can do so directly in the participant portal.

Q: Is there a minimum dollar amount for claim reimbursement if being paid via check? **A:** There is no minimum reimbursement amount.

Q: What is the process for a recurring expense claim? **A:** This is available on Dependent Care plans: you may submit a claim for your entire annual election along with a contract from your daycare provider, or the provider can manually sign your claim form. Once the claim is submitted and approved, our team will place the claim "On hold" and auto-reimburse amounts as you receive contributions into your account.

Ameriflex | New User FAQ

GREAT NEWS: Ameriflex offers a feature we call the Card Swipe Guarantee, where we work to auto-verify your transactions so you will not receive requests to submit documentation. As long as you use your debit card for eligible expenses at eligible providers' offices, we will do the rest of the work.

Register for Your Participant Portal

Q: When will I be able to log in and set up an account on the mobile app and/or the website or call the customer service line? **A:** As soon as you are enrolled, you will receive an email notification. Once you receive that notification, you will be able to set up your account via our online portal or mobile app.

Q: What can I do in the participant portal? **A:** You can check your balance, order replacement cards for yourself and your dependents, submit claims for reimbursement, update your reimbursement method, review account status and transaction history, and more.

Q: Does Ameriflex have Participant Service Assistance? **A:** We sure do. You can reach us via chat, email, and phone calls.

Help Center and Support

Your satisfaction is our top priority, and our team of experts are ready to help whenever you need it. The Help Center is the best place to go for quick answers to your questions and more information about your account.

You can access the Help Center at myameriflex.com/HelpCenter.

The Ameriflex Participant Services team is available Monday - Friday: 7:00 AM to 8:00 PM CST and Saturday: 9:00 AM to 1:00 PM CST.

Call: 888.868.3539
Email: service@myameriflex.com
Live Chat: myameriflex.com

Ameriflex

Flexible Spending Account Planning Worksheet

Medical	**Last Year**	**This Year**
Deductibles	$ $ $ $ $	$ $ $ $ $
Doctor's office visits	$ $ $ $	$ $ $ $
Well-baby care		
Pap smear		
Physicals		
Immunizations		
Prescription drugs		
Over-the-counter drugs		
Others		
Dental	**Dental**	**Dental**
Fillings	$ $ $ $	$ $ $ $
Bridges	$ $ $	$ $ $
Crowns		
Dentures		
Or thodontia		
Braces		
Exams		
Vision	**Vision**	**Vision**
Exams	$ $ $ $	$ $ $ $
Lenses	**Miscellaneous**	**Miscellaneous**
Frames	$ $	$ $
Contact Lenses		
Miscellaneous		
Total Eligible Medical Expenses	**$**	**$**

Please refer to Section 213(d) of the Internal Revenue Code for the definition of deductible medical expenses that are eligible for reimbursement.

Note: An expense is not eligible if it is for cosmetic reasons only. Also, insurance premiums and long term care expenses are not eligible for reimbursement.