

## IMPORTANT TO NOTE

We hope your Benny Prepaid Benefits Card provides you with timesaving convenience for making all of your FSA purchases. Here are a few important reminders for optimal use of your Card:

- You could be charged an annual administrative fee for use of the Card. This fee, if applicable, will be deducted from your FSA in one lump sum amount during the first month of plan participation. Please check with your employer to verify if this is part of your FSA arrangement.
- As a participant, you will receive two Cards—one for yourself and one for an eligible dependent.
- The Cards may only be used for the purchase of qualifying healthcare and/or dependent care expenses incurred during the relevant plan year, exclusive of any grace period. For FSA purposes, an expense is incurred at the time a service is furnished—not when you are billed, charged or pay for the service.
- Using the Card to pay for anything other than qualifying expenses will result in permanent revocation of the Card. You will be responsible for repaying any ineligible expenses charged to your Card.
- The Card will be cancelled automatically upon your termination of employment or ineligibility for FSA benefits.
- Please notify us immediately if your Card is lost or stolen or someone has used it without your permission. A replacement Card fee may apply.

## WEBSITE MATERIALS

You can find helpful reimbursement account information at [www.nhlgc.org](http://www.nhlgc.org). Just click on the FSA - Enrollees link on the home page for linking to downloadable forms, a *List of Eligible/Ineligible Expenses* and more.

## ADDITIONAL INFORMATION

More information regarding the Benny Prepaid Benefits Card is provided on the *Flexible Spending Account Prepaid Benefits Card Frequently Asked Questions* handout, which is included in our FSA Welcome Kit. You can also download a copy of the handout by visiting [www.nhlgc.org](http://www.nhlgc.org) and clicking on the FSA - Enrollees link. For additional assistance, contact LGC by calling **800.527.5001** (toll-free) or emailing [fsa@nhlgc.org](mailto:fsa@nhlgc.org).

**NOTE:** This program is subject to change without notice.



**Local Government Center**

New Hampshire Municipal Association  
Property-Liability Trust  
HealthTrust

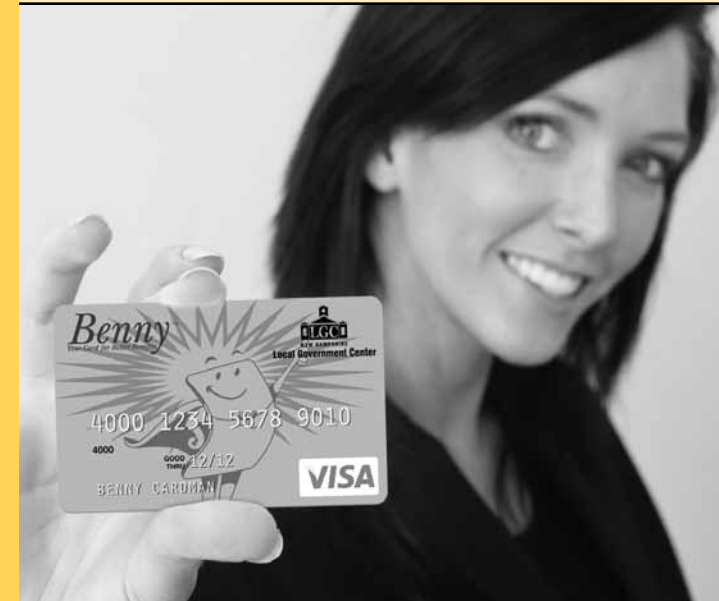
25 Triangle Park Drive • PO Box 617  
Concord, NH 03302-0617

[www.nhlgc.org](http://www.nhlgc.org)

## INTRODUCING

# THE BENNY™ Prepaid Visa® Card

*A convenient, Prepaid Benefits Card for  
purchasing qualified health and dependent care*



*A Flexible Spending Account offering from:*



**Local Government Center**

New Hampshire Municipal Association  
Property-Liability Trust  
HealthTrust

---

## The Benny Prepaid Benefits Card

is a debit card option that is part of the Healthcare Flexible Spending Account (FSA) or Dependent Care Reimbursement Account being administered by New Hampshire Local Government Center (LGC) on behalf of your employer. If you have selected this option, you will receive a Benny Prepaid Benefits Card by mail from Evolution Benefits—a leading employee benefits technology company and LGC’s partner for providing convenient, electronic payment solutions.

Benny is prepaid to provide you with a convenient way to purchase eligible health and dependent care expenses. With the Healthcare FSA, your total annual election is immediately available for purchases made with the Card. For the Dependent Care Reimbursement Account, the amount available for purchases is only equal to the account balance at the time of the transaction.



Please read the following guidelines to ensure you benefit the most from using the Benny Prepaid Benefits Card.

## DOCUMENTING CHARGES

All charges made to the Benny Prepaid Benefits Card are only *conditionally reimbursed* until related receipts are received and approved by LGC per Internal Revenue Service (IRS) regulations. Within **14 days** of using the Benny Prepaid Benefits Card to pay for an approved FSA expense, you will need to provide documentation of the expense\* to LGC. This can be in the form of a bill, receipt of payment (from provider or insurer), explanation of benefits or written statement from an independent, third party noting the service incurred and its expense amount.

\*Documentation is not required if the expense equals the copayment amount required by 1) your employer’s medical plan for a doctor’s office visit, or 2) your employer’s pharmacy plan for a prescription. Also, if a retail store uses an Inventory Information Approval System to verify if a purchased item is on the IRS list of eligible expenses (through the item’s SKU number), documentation of that purchase is not required.

## REQUIRED RECEIPTS

All receipts submitted to LGC should include the following IRS-required information:

- Name & address of service provider
- Date service & expense were incurred
- Name of person receiving the service
- Detailed description of service provided
- Amount charged for service

Receipts from Benny Prepaid Benefits Card transactions cannot be submitted as substantiation because

they typically do not include all of the information previously noted. Also, if your employer allows over-the-counter items to be covered under your FSA plan, receipts must include the item’s printed name; handwritten item names are not acceptable.

## CORRECTIVE MEASURES

Please know that if receipts are not submitted to document your Benny Prepaid Benefits Card charges—or the Card is used incorrectly—LGC and your employer are obligated by law to pursue one or more of the following corrective measures:

- Require you to reimburse LGC for the amount in question
- Deny reimbursement of subsequently submitted claims incurred during the same period of coverage until the payment amount is fully recovered
- Take other action deemed reasonably necessary to recover mistaken payments and ensure that they do not recur (e.g., by denying access to the Card use until payment is recovered or revoking the Card)

If none of these methods succeed in recovering a mistaken payment, your employer may either report the amount of the mistaken payment to you and the IRS as taxable income or treat the amount owed as it would any other business debt.

## SUBMITTING PAPERWORK

Please clearly mark each receipt as “Paper Substantiation for Debit Card Purchase” to ensure proper processing.

Your FSA receipts for documenting charges can be submitted to LGC one of the following ways:

**By fax:** 603.415.3099

**By mail:** NH Local Government Center  
FSA Debit Card Substantiation  
PO Box 617  
Concord, NH 03302-0617

**By email:** [fsa@nhlgc.org](mailto:fsa@nhlgc.org)