



BASIC FLEX USERS GUIDE



Online Account Access:

1. Go to the consumer portal website login (<https://basic.lh1ondemand.com/>). Please bookmark this webpage or add it to your favorites so you can quickly access it in the future. The online access page looks like the image to the right.



2. Login using the following:

User name:

Your username is created using the first letter of your first name, the first four* letters of your last name and the last four digits of your Social Security number. (i.e., John Wayne 123-56-6789 = jwayn6789)

*If your full last name is less than four letters, you will use your full last name. (i.e., Susan Lee 111-22-3333 = slee3333)

Password:

The first time you log into the system, use **BASIC123 (BASIC in all caps)** as your password. You will be prompted immediately to create a new, unique password before entering the participant portal.

ACCOUNTS: View up-to-date account information at any time.

- *Account Summary* to check the balance of any account(s).
 - Click on the Account Name for information on the plan rules such as effective date and claim filing rules.
- *Claims* to view your claims history.
- *Payments* to view your payment history.
- *Profile Summary* to review and/or update your personal and dependent information.
- *Banking/Cards* – report your BASIC benefits card lost/stolen or order replacement (additional) cards and review your current direct deposit information on file.
- *Login Information* – change username and/or password

MESSAGE CENTER: View all notifications and reminders generated to you such as monthly Account Statements, Receipt Reminders, Advise of Deposit, etc.

TOOLS & SUPPORT Access forms to download, such as the Direct Deposit Authorization, Mobile App Quick Start Guide, Reimbursement or Reimbursement/Verification Forms and more. The forms are in PDF format, requiring Adobe Acrobat Reader. You may download a free version of acrobat reader from the Adobe website:
<http://www.adobe.com/products/acrobat/readermain.html>

The difference between a reimbursement and verification:

A **reimbursement** is when you pay for a qualified expense and DO NOT use your BASIC Debit Card, but pay using check, cash or another credit or debit card. You are requesting a reimbursement from your BASIC Flex account for the money you paid out-of-pocket.

A **verification** is when you pay for a qualified expense with your BASIC Debit Card. You should keep a copy of all documentation for debit card purchases/payments in case you are required to submit them to BASIC as a verification of the expense and as you would for your income tax purposes. **BASIC advises debit card participants to only send verification documents for your debit card purchases when BASIC requests them to be submitted.** *Failure to submit required documentation will result in your debit card being suspended.*



There are two types of Flexible Spending Accounts, a General Purpose FSA and a Limited-Purpose FSA.



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- General Purpose FSA allows for the reimbursement of Medical, Dental and Vision services.
- Limited Purpose FSA is designed for individuals with a Health Savings Account (HSA). *Limited Purpose FSA allows for the reimbursement of Dental and Vision expense only.*

Reimbursement Submission Overview:

- You should keep a copy of all documentation as you would for your income taxes
- Reimbursements will be made directly to you
 - It is the employee's responsibility to pay the provider if payment was not made at the time of service
- Be sure to select the appropriate plan type and benefit year (if applicable) when submitting your claim online.
- Claim submission Run-Out Period
 - Your plan has a run out period to submit claims at the end of each plan year or after termination of coverage from the plan. Consult your Summary Plan Description or check with your HR Department to determine the length of time you have to submit claims after one of these events have occurred.
- Check your Claims Status online at <https://basic.lh1ondemand.com> or on the mobile app
- BASIC cannot accept emailed claims, so please submit your scanned documentation online through the Portal website (<https://basic.lh1ondemand.com/>) or through BASIC's Secure Claims Upload <https://claims.basiconline.com>.

How to submit a reimbursement:

Submit within the Online Portal Website:

1. Go to the Portal website (<https://basic.lh1ondemand.com/>) and login.
2. Click the File a Claim link listed on the home page.
3. Enter your claim information and submit the claim. Make sure you have valid documentation for your expenses, as you will need to submit them to BASIC. You can upload your scanned documentation or submit it separately after filing your claim. You will need to include a copy of your claim confirmation if submitting separately.
4. If you have more than one claim you'd like to file, you may click File New Claim to add to your claims basket.
5. Once all claims are entered, you must agree to the Terms & Conditions (click on appropriate box) and submit the claim(s) by clicking Submit.
6. **If the claim documentation was not uploaded during the online claim submission, PLEASE PRINT AND SEND THE ONLINE CLAIM CONFIRMATION WITH YOUR DOCUMENTATION!** The confirmation page verifies that all claims have been successfully submitted! You must print this page and Fax, mail or upload through BASIC's Secure Claim Upload along with your documentation. If the required documentation is not received, your claim(s) will not be paid. **Please remember your submission is not considered a claim until the required documentation is received. Claims need to be submitted prior to your plans final filing date (filing deadlines apply).**

Submit through the Android or iPhone OS Mobile Apps (note this applies to Medical expenses only):

1. Go to the mobile app and login.
2. Click File a Claim to enter your claim information and you will be prompted to optionally take a picture of your documentation.
3. **If the claim documentation was not uploaded during the claim submission, PLEASE SUBMIT DOCUMENTATION THROUGH THE MOBILE APP, ONLINE PORTAL, OR SEND BASIC YOUR DOCUMENTATION** via Fax, mail or upload through BASIC's Secure Claim Upload (*include the claim # and indicate that the claim has been filed online*). If the required documentation is not received, your claim(s) will not be paid. **Please remember your submission is not considered a claim until the required**



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documentation is received. Claims need to be submitted prior to your plans final filing date (filing deadlines apply).

Submit via BASIC's Online Secure Claim Upload:

- Go to BASIC's Secure Claims Upload: <https://claims.basiconline.com>
- An online claim form will be presented for you to fill in and you will upload/attach your scanned documentation (see the Necessary Documentation section below)

Submit via Mail or Fax:

- A reimbursement form is required with all submissions and you can find the form online (<https://basic.lh1ondemand.com>) in the Tools & Support section. Please use a separate line for each receipt and attach your documentation (see the Necessary Documentation section below).
- When faxing claims, please circle items on receipts or bills. Please don't use a highlighter because it often faxes too dark to read. If the original is light please make a darker copy prior to faxing.
- Fax claims to: 269-327-0716
- Mail claims to: BASIC, 9246 Portage Industrial Dr, Portage MI 49024

How to submit a verification:

*You should keep a copy of all documentation for debit card purchases/ payments in case you are required to submit them to BASIC as verification of the expense and for your income tax purposes. **Failure to submit required documentation will result in your debit card being suspended.***



IRS Regulations allow for certain debit card transactions to be automatically adjudicated/approved for pretax payment so that you do not need to send in documentation to verify the eligibility of the transaction(s). In the event that a debit card transaction does not meet the criteria of automatic adjudication/approval, BASIC will request that you provide documentation from your provider for our review. You will receive the request for documentation via mail or email (if applicable).

When documentation is requested, please submit one of these ways:

- Through online Portal website (<https://basic.lh1ondemand.com/>)
- Upload through the mobile app
- Submit your reimbursement/verification form or a copy of the documentation request notice with the required documentation (see the Necessary Documentation section below) to BASIC:
 - BASIC's Secure Claims Upload: <https://claims.basiconline.com>
 - Fax claims to: 269-327-0716
 - Mail claims to: BASIC, 9246 Portage Industrial Dr, Portage MI 49024
- Important Note: if you are using the verification form to submit your documentation (found online at <https://basic.lh1ondemand.com> in the Tool & Support section):
 - Use a separate line for each receipt you have
 - **Check the YES box to the left of the line you have entered the information**
 - It is important for you to check this box to insure you are not issued a reimbursement check. If a reimbursement is made, which results in paying for an item or service more than once, you will need to return the check or repay your employer
- Check your claim status online at <https://basic.lh1ondemand.com> or on the mobile app

Eligible Expenses:

IRS regulations govern the eligibility of claims. As your Flex Administrator, BASIC helps ensure that you and your employer stay within those regulations. For a list of common eligible expenses go to the Tools & Support menu of



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the consumer portal and select the BASIC Flex Eligible Expense Worksheet. & FSA Education. If you have a question regarding a specific item, please call a BASIC Flex Customer Service Representative at 1-269-327-1922 ext. 1 or 1-800-444-1922 ext. 1.

Necessary Documentation:

As a FSA Administrator, we are required to receive specific documentation showing that your purchase is an eligible expense according to the IRS regulations. Below are helpful hints to ensure you submit proper documentation that is necessary in order to avoid a delay or denial of your reimbursement request.

MEDICAL REIMBURSEMENTS

- **Explanation of Benefits (EOB)** - The best form of documentation for medical, dental & vision expenses is an EOB from your insurance carrier.
- **Itemized Statement** - An itemized statement from your provider is also acceptable but needs to include date of service, detailed description of the service provided, provider's name, address & charge for the service. This is true for verifications as well as reimbursement requests.
- **Prescriptions** - For prescriptions, please provide a cash register receipt that lists RX next to the item number and/or RX tag. Pharmacy print-outs are also acceptable.
- **Vision** - Send detailed vision bills from your provider which include date of service, detailed description of the service provided, provider name, address & charge for the service. Please note: Warranties and/or service plans are not eligible for reimbursement.
- **Orthodontics** - Send detailed documentation or payment coupons from your provider which indicate orthodontic treatment and also include date of service, provider name and description of service.
- **Letter of Medical Necessity (if needed)** - A letter of medical necessity needs to include a diagnosis, duration of treatment and description of treatment plan. Letters of Medical Necessity or Prescriptions from your provider expire one year after date written. A Letter of Medical necessity form can be found at: www.basiconline.com/employees/services/BASIC_Flex/Participant_Forms
- **Massage Therapy and Weight Loss Programs** - For massage therapy and weight loss programs, please submit a copy of the physician's statement/letter of medical necessity; including diagnosis with every reimbursement request.
- **OTC** - Over the Counter (OTC) drugs and medicines require a prescription (RX) or letter of medical necessity that is completed by a physician. This documentation needs to be submitted with each claim and renewed yearly. To check a specific item you may want to refer to www.fsastore.com where you can search for eligible items. If the item is an eligible expense, it will be designated as FSA eligible. You may also call a BASIC Flex Customer Service Representative for clarification. Please note: not all items appearing on these web sites as FSA eligible items qualify for reimbursement.

NOTE: If you have the BASIC Benefits Card the excluded items cannot be purchased with the card. These items will need to be purchased with another form of payment then submitted for reimbursement with your letter of medical necessity/RX and receipt for the product purchased.

DEPENDENT CARE

Dependent Care (Day Care) Facts:

- This is a pay-as-you-go account, meaning reimbursements are made when funds become available
- Child Care provider must claim payments as income
- Meals and transportation expenses are not eligible
- Child(ren) must be under the age of 13 and be a dependent for income tax purposes
- Child Care provider may not be a minor child or dependent of the tax payer
- Overnight camps are not eligible
- Education/schooling for Kindergarten and beyond is not eligible



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Dependent Care Necessary Documentation:

- Itemization of dates of service and charges:
 - Receipt from Day Care provider or
 - Day Care providers' signature on the reimbursement claim form

Debit Card Frequently Asked Questions:

What happens if I forget to submit verification?

- If we do not receive your documentation within 60 days of the purchase, your BASIC Benefits Card will be suspended.
- If your card is suspended, you can have it reactivated by submitting the requested documentation or refund the amount charged (see steps below under ineligible items).
- While your card is suspended you may still submit reimbursement requests for items or services for which you paid out of pocket (see above for instructions regarding reimbursements).
- You can prevent your card from being temporarily suspended by monitoring your transaction status via your online access.



What happens if I purchase an ineligible item(s)?

- You will receive an email or letter from BASIC requesting a refund.
 - Mail a check, payable to your employer, to BASIC at 9246 Portage Industrial Dr, Portage MI 49024.
 - Once this is received, your account will be credited and the check will be forwarded to your employer.

What if I do not have my BASIC Benefits Card and I need to purchase a qualified product or service?

- Pay your bill with your own cash, debit/credit card, or check
- Keep your itemized billing statements and Explanation of Benefits
- Submit a request for reimbursement (see above)

Why doesn't my card work at the pharmacy or retailer?

- The pharmacy or retailer may not be IIAS compliant
- You may have outstanding debit card transactions that need to be verified
- You may be trying to purchase an item that is not eligible under IRS Regulations