**Employer Guide** 

### **Table of Contents**

First-Time Login	4
Employee Account Setup	5
Manual Entry (Option 1)	5
Employee Account Changes and Terminations (manual updating through portal)	9
Enrollments	10
Contributions	11
Claims and Payments	11
File Import (Option 2)	11
New Import – Uploading Files	12
Demographic/Enrollment File	13
Demographic File	15
Dependent File	16
Troubleshooting Errors	17
Enrollment Changes and Terminations (by file update)	22
FSA/HRA Employer Funding	22
Contributions	22
Claim Funding Process	22
HSA Employer Funding	23
Submitting HSA Contributions	23
HSA Funding Process	
Review Notifications	29
Review Reports	
Answer Employee Questions	32
Employee Data	
Resources	
Plans	34
Health Savings Accounts –Identity Verification (IDV)	34
Annual Plan Renewal	34
Plan Year Closing	36
Employee FAQs	





**Welcome to the Medica ONESource Employer Portal!** The Employer Portal is a powerful, yet easy-to-use self-service solution that gives you the tools to understand and manage the activity for your company's benefit plans. Simply log into the portal and you will be able to:





Answer your employee's questions

If you have questions about information on the Employer portal, please contact the Medica ONESource Employer Services team between 7am and 7pm, Central Time.

Phone: (800) 918-6158

Email: MedicaONESource@healthaccountservices.com

Employer Guide Terminology:

- HSA Health Savings Account
- Notional Account all non HSA groups
- FSA Flexible Spending Account/ Medical Flexible Spending Account
- LPFSA Limited Purpose FSA
- DCA Dependent Care FSA
- HRA Health Reimbursement Arrangement



### **First-Time Login**

During the implementation of your employer plan setup, you should have received an email with your login information. If you did not receive this email or have forgotten your username, please reach out to the employer services via the information listed above.

- 1. Visit our website at http://www.medica.com/ONESourceEmployerLogin
- 2. Enter the username provided in the email referenced above. Your temporary password was sent to you in a separate email, if it has expired use the I forgot my password link.
- 3. Select Login.
- 4. The temporary password will need to be entered in the 'Current Password' dialogue box.
- 5. You will then be prompted to then select a security question and provide an answer to the question. The security question will be used if you need to reset your password or have forgotten your password. Select **Submit.** Finally, you will

change your temporary password. Enter your new password, re-enter your new password to confirm you have typed it correctly.

Select security questions from the enter the answers in boxes below	e dropdowns and	New Password	Q
Select question	•	The password must: · Have a mir characters · Not be one of your la Contain upper and lowercase let least one number · Contain a spe	nimum of 8 ast 5 passwords ters · Contain at ecial character
Answer		Confirm new password	Q
<b>Cubmit</b>			

- 6. Select Change Password.
- 7. You have successfully created your new password and logged in the Employer Portal for the first time! You now have access to:
  - Imports used to upload excel files for adding employee demographics, enrollments, contributions and view the results
  - Reports reports associated with your plan offerings, and managing your accounts
  - Employees used to add employees manually and view their account details
  - Tools access to portal links, list of plans offered and resources available to your employees

Username		
Password	•	0
got your password?		
got your password?		



### **Employee Account Setup**

Employee account setup is a two-part process. First adding employee's demographic information then, their enrollment into their chosen plan(s). Once they are setup, the funding of the plan can take place. Funding of plans is covered later in this guide; HRA and FSA plan type funding are covered on page 23, HSA plan funding is covered on pages 28-29.



**Manual Entry Option 1** – This option guides you through how to enter your employee's information manually. First you will enter the demographic information then you will add their plan enrollment. You will also find additional information about how to access and update your employee's information.

**File Import Option 2** - This section of the guide will provide the required file process to successfully add, and enroll your employees through the Medica ONESource Employer website. This is a multi-file process:

- Demographic/ Enrollment file- contains employee demographic details as well as payroll information and indicates the plans your employees have selected.
- Dependent File HRA plans only

### Manual Entry (Option 1)

Employee setup is a two-step process; first you need to add the employee's demographic information, then you need to add their enrollments into their chosen plan(s).

1. The first step is to add the employee demographic information, Click on the Employees Icon on the left hand side of the screen. Next click on New Employee.

ŵ	Home	Employees	+ New employee
Ð	Imports	Name or ID	
-	Reports	Name of 10	Cast slakshatirally (a to a)
121	Employees		Sort alphabetically (a to z)
*	Tools		

- 2. Fill in the all the required employee demographic information, all items outlined in blue in the below screenshot.
  - a. First/Last Name if your employee has medical coverage by Medica, please be sure the names match in the system.

Medica.

- b. DOB
- c. SSN
- d. Email Address
- e. Address<sup>1</sup>: Country, Address Line 1, City, State, Zip Code

<sup>&</sup>lt;sup>1</sup> Must be a physical address if they are enrolling in a Health Savings Account. Medica OneSource | Employer Guide | 5

#### Add employee

First name	MI	Last name	
Birth date	<b></b>	Gender	
SSN		Marital Status	
Email address		Home phone	
Work phone	Ext		
Work phone Address Country	Ext *		

- 3. Fill in the Employment Information section and hit Add Employee once finished
  - a. Employee Number can be a payroll number or other number you use to identify your employee
  - b. Employer Employee ID Regardless of enrollment method, the "Employer Employee ID" field <u>must</u> be submitted for all employees in the following format: [00 (two zeros) + SSN + 9 characters of Last Name].
  - c. Hire Date Original Date of Hire
  - d. Hours worked per week

#### **Employment information**

Employee number	Employer employee ID
Hire date	Hours worked per week
Cancel	Add employee

Once your employee demographic information has been successfully added you will be brought to this screen. The next step in the employee setup is to add the enrollments into their chosen plan.

1. Click on Enrollments to bring up the employee enrollments screen. Next Click on New Enrollment



			Medica Test	0	View profile
Medica Te	st 🛛	View profile	• Status: Active >		
• Status: Active >			Summary	Enrollments	Contributions
Summary	Enrollments	Contributions		(	+ New enrollment

2. Chose the plan year you are enrolling your employee in. Please note if you are offering HSA only you will only see that option. If you are offering any of the notional<sup>2</sup> plans you will also see a plan name that is calendar dates. (ex. 01/01/2021 – 12/31/2021). If the employee is enrolling in both plan years you will need to do this process again. Once you have selected the plan year click Next at the bottom of your screen.

New enrollment		New enrollment	
Plan year (2) Plans (3) Payment	ent method 🔕 Plan details	1 Plan year 2	Plans 🗿 Payment method 🚺 Plan details
Select plan year			Select plan year
Health Savings Account	S		Health Savings Account
01/01/2021-12/31/ (3) Jan 1. 2021 - Dec 31. 2021			01/01/2021-12/31/ (g) Jan 1, 2021 - Dec 31, 2021
Cancel	Next	Cancel	Next

3. Next click on the plan (s) your employee would like to enroll in, then click next at the bottom of the screen.



4. Then you will choose the payment method your employee will use to access their plan funds. It will default to Debit Card<sup>3</sup> as the primary method, each employee will receive 2 cards when they are enrolled in the plan. The alternate payment method is how the employee will get their reimbursement if they are not able to use their debit card as payment. To use the direct deposit method the employee will need to add their banking information on the member portal. Click on Next at the bottom of the screen.

**Medica** 

<sup>2</sup> FSA, LPFSA, DCA, HRA plans

<sup>3</sup> If a debit card is being offered.



#### New enrollment

Now oprollmont

Plan year	Plans	3 Payment method	4 Plan details
	Select primary	payment method	
	\$ ==	\$	
	Check	Direct Deposit Employee will need to setup a bank account	
Cancel			Back

- 5. Finally, you will add the plan details once complete click Submit at the bottom of the page.
  - a. All Plans Effective date of the enrollment the date the employee is eligible for benefits.
  - b. HSA Only Plans
    - i. HDHP coverage level: choose Individual or Family depending on who is covered by their HDHP insurance
  - c. Notional Plans Only
    - i. Employee elections- enter the total annual election the employee wants to contribute to the plan.
    - ii. Allow health plans to send claims Set to Yes for HRA plans that are Pay as Plan Pays, where HRA eligible expenses match the medical plan. If the HRA will use the 213 (d) Expense List, select No.
    - iii. Employer contributions<sup>4</sup> this will be filled in automatically based on the information provided on the setup paperwork.

	Select plan d	etails		
Health Reimbursement Arra	ngement 01/01/2	022-12/31/20	22	
Effective date	iii C	ntribution level dividual		-
Allow health plans to send claims Yes				
Employer contributions	Frequency	Pe	r contribution amount	
Employer contributions	Frequency Monthly	Pe \$0	r contribution amount	
Employer contributions	Frequency Monthly	Pe \$C	r contribution amount	

**Note:** Once enrollment has successfully processed, a welcome email will be generated and sent to the email address on file. Should an email address not be provided, the employee will not receive a Welcome Email. Debit cards (if applicable) will be mailed to your employees within 7 to 10 business days from the date the enrollment was added.

<sup>&</sup>lt;sup>4</sup> This only applies to FSA and DCA plans, HSA plans will be funded through separate contributions. Medica OneSource | Employer Guide | 8



# Employee Account Changes and Terminations (manual updating through portal)

To access your employee's specific information from the Home page type in their name in the employee search bar at the top; it will pull in employee names as you type. Once you have found your employee, click on their name to bring up their summary page. From here you can choose to look at their profile information, enrollments, contributions, or activity by clicking on the corresponding tab.

	Home		< Back to Employee	s			
•	nome	Employee Search	Medica Test 👩				View profile
Ð	Imports	Name or ID Med	• Status: Active >				
	Set up Contributions	Medica Test	Summary	Balances	Claims + Payments	Enrollments	Contributions

#### **View Profile**

#### < Back to Medica Test

#### Medica Test's Profile 📵

Status: Active >

( Personal )	Employment	Dependents

- Personal Complete your edits and hit Save changes at the bottom once complete
  - o address changes, email changes; these can also be completed by the employee on their portal
- Employment Complete your edits and hit Update employee at the bottom once complete
  - o Employee number and Employer Employee Id
  - Hire Date only update if this was entered incorrectly initially.
  - Hours worked per week
  - Payroll Frequency and Effective date of change<sup>5</sup>
- Dependents you can add new dependents or view dependents they have added.

#### **Employee Employment Status change:**

When an employee leaves your company, you will need to update their employment status on the portal. You can do this by clicking on their current Status, this can be found opening the employee's profile page.

< Back to Medica Test				
Medica Test's Profil	e 🛛			
Personal	Employment	Dependents		

• Status --enter in new status (see list below), effective date and

<sup>&</sup>lt;sup>5</sup> This will only appear if you have more than one set of payroll dates on the system. These are only required if you are offering a notional plan. Medica OneSource | Employer Guide | 9



- Leave of Absence (LOA): Limited use of account, payroll deductions may be recorded as 0.00, access to portal remains with ability to file claim<sup>6</sup> and view account information and history
  - Changes to Effective date, Continue payroll deductions, Allow services to be incurred while on LOA
- Terminated, Retired and Laid off: Limited use of the consumer portal, payroll deductions and employer contributions stop<sup>7</sup>, enrollment stops, and outstanding claims with pending amounts will be processed.<sup>8</sup>

#### **Employee HSA Status**

As of that date, the employee's debit card will remain active if they are enrolled in an HSA, their notional plans will no longer be connected to the debit card.

The close reason will be shown in the Employee's **Profile** section of the Employer Portal as shown in the example below. You need to hover over the i next to their name.

- Closure reasons:
  - Agreements Non-Acceptance
  - o CIP/Identity Verification Failure
  - Consumer Request
  - Deceased
  - o Escheatment
  - o Internal Transfer
  - o Opened in Error
- < Back to Employees

• Status: Active >	Test 📵	Account Details Employee #. Medica1		View profile
Summary	Balances	Claims + Payments	Enrollments	Contributions

### Enrollments

Click on Enrollments to open this screen; view their Annual election, Employer contributions, Employee contributions to date, Payroll deduction amount.

Medica T • Status: Active >	est			View profile
Summary	Balances	Claims + Payments	Enrollments	Contributions
Active: 01/1/ Payment method: Che	2 <b>021 - 12/31/</b> <sup>Ick</sup> FSA	2021	+ Nev	v enrollment
* \$2,700.00 a	nnual election			Active
JAN 1, 202	1			
Annual election \$2,700.00		Employee contributions \$0.00 of \$2,700.00	Payroll deduction \$51.92/Weekly	
	View	contributions View	v deductions Edit e	enrollment

Medica OneSource | Employer Guide | 10

<sup>&</sup>lt;sup>6</sup> Some restrictions may apply depending on if you as the employer will allow them to incur services while they are on LOA.

<sup>&</sup>lt;sup>7</sup> You will enter the last payroll deduction as part of this status update, choose their last payroll date from the drop down.

<sup>&</sup>lt;sup>8</sup> Employees enrolled in a notional plan will have limited time to finish filing claims based off their plan design. HSA enrolled employees will automatically be moved to an individual HSA account and will be responsible for HSA service fees for their Health Savings Account.



- Edit enrollment:
  - o HSA Plan:
    - Edit HDHP coverage change the coverage level for the year
    - Edit Enrollment employee has had a qualifying life event; add new effective date and coverage level
  - Notional Plans:
    - Make enrollment edits: information was entered incorrectly and needs to be corrected
    - Add New Election: employee has had a qualifying life event; add new effective date and annual election
- View deductions Notional plans only, the list of expected payroll deductions for the employee
- View contributions
  - HSA Plan the contributions that have posted to the employee's HSA plan
  - o Notional Plans any employer contributions that have posted to the plan if applicable

### Contributions

Click on Contributions to open this screen; view the contributions that are scheduled or posted to your employees' account. You can filter it by Account type, Account, Contribution Type and Contribution

< Back to Employees			
Medica Test 🛛	)		View profile
Status: Active >			
Summary Balan	ces Claims + Payments	Enrollments	Contributions

Account type Non-HSA	Ŧ
Account	Ŧ
Contribution type All	Ŧ
Contribution status	÷

### **Claims and Payments**

Click on Claims and Payments to view the account activity for your employee. This is helpful when an employee has a question about a claim they filed but haven't yet received payment for. You can also view when a payment has been issued to an employee along with how it was sent. You will be able to see only the basics of the claim; date filed, account it was filed against, status and method in which it was filed.

		FILTERS
		Claim status All
< Back to Employees		Account All
Medica Test 👩	View profile	File date All
• Status: Active >		Method filed All
Summary Balances Claims + Payments Enrollments	Contributions	

### File Import (Option 2)

Employee setup is a two-step process; first you need to add the employee's demographic information, then you need to add their enrollments into their chosen plan(s). *With this option you will be using Imports on the employer portal to access the templates you need to complete for each file, importing the files and viewing the import queue.* 

**Note:** The demographic file needs to be submitted and successfully processed before the enrollment file is submitted. Please make sure any demographic errors are corrected before submitting an enrollment file.

\*Important – It is your responsibility as the file originator to ensure that all errors and exceptions are reviewed and corrected. Medica ONESource does not monitor individual file imports.



٦	Home	Imports	+ New import	
	Imports	During high     Files are proces	volume periods, files may take several hours to complete sed on a first in - first out basis and will complete processing in full within 24 hours from the date	FILTERS
200	Reports	received.		Received from 5/25/2021
, [].	Tools	Pending		Received to 9/21/2021
			Newly added imports awaiting processing will display here	Coard hufle came
		Processing		Search by the name
			Processing imports will display here	Filter
		Completed		
			Completed imports will display here	

### **New Import – Uploading Files**

- 1. The first step in the file process is to start a New import
- Next choose the type of file you want to import New import

	Import type		
	Select the template you would li	ke to imp	ort.
Contribution Submit employee payroll deductions or employer contributions.	Demographic Add employees or update existin employees.	>	Demographic/Enrollment > Add or update employees, enroll employees in plans or change employee elections.
	Dependent Adding or updating dependent information.	>	

<u>Demographic/Enrollment</u> – First file you import to set up an employee and the employee account <u>Dependent</u> – only available if you are offering an HRA <u>Contribution</u> – File you use to make contributions to an employee's HSA account

3. Download the chosen file template (this is an excel file), see file types listed above. They are also linked to the section of the guide that provides the specifications of each type. Once you have the template downloaded follow the specifications outlined later in the guide to complete the file for uploading. Save your file with a name you easy to distinguish as to what it is.



New Demographic import		New Demographic import		
Import type 2 Download template	3 Upload	Import type	Download template	3 Upload
Download Demographic templa if you need a formatted template you can downlo up to the second	ste aad it here.	Certain fields must mat	Upload Demographic file ch information setup by your administrator. If you need help review the file setup requirements. View file setup requirements File ready for upload MDC Demographic Enrollment TempL_0 Show advanced settings	setting up your file, please
Cancel	Back	Cancel		Back

4. Finally once you have completed your file you can can go in and upload the file to be imported into the system. Once the file is uploaded it will show in the import queue, this can be seen on the home page as well as by clicking on the Imports tab. Click on the file to view the results and make any necessary updates.

Imports + New import		
▲ During high volume periods, files may take several hours to complete Files are processed on a first in -first out basis and will complete processing in full within 24 hours from the date received.	FILTERS Received from 9/20/2021	<i>Pending</i> – will be in here a short time once the file has been imported.
Pending	Received to	<i>Processing</i> – will sit in here while the data on the file is being put in the
MDC Demographic Enrollment Template (3) Test.xls     9/22/2021 10:34 AM     Pending	9/22/2021	system; how long it sits in here depends on the amount of data that is
Processing	Search by file	being processed.
Processing imports will display here	Filter	Completed – once the data on the file has finished processing it will end
Completed		here. <sup>9</sup>
Completed imports will display here		

### **Demographic/Enrollment File**

#### \*Denotes a required field

**Note:** The Demographic/ Enrollment file should be completed for all employees that are eligible to enroll in your company's Medica ONESource Medical Flexible Spending Account (FSA), Dependent Care Account (DCA), Health Reimbursement Arrangement (HRA) or Health Savings Account (HSA).

File	Notes	Format	Example(s)
Employeeldentifier*	Social Security Number	123456789	123456789
LastName*	Last Name of the member	Alphanumeric up to 30 characters. The following special characters are valid: apostrophe (') or dash (-)	Johnson
FirstName*	First Name of the member	Alphanumeric up to 30 characters. The following special characters are valid: apostrophe (') or dash (-)	Jane
DateOfBirth*	Member's date of birth	Date in format MMDDCCYY	01011980

<sup>&</sup>lt;sup>9</sup> Look for Completed with errors on the file to see if it processed successfully or not. If there are errors go to <u>Troubleshooting errors</u> for guidance. Medica OneSource | Employer Guide | 13



AddressLine1*	Member's address	Alphanumeric string up to 50 characters.	123 Baker Street
AddressLine2	Member's additional address line	Alphanumeric string up to 50 characters.	Apt 130
City*	Member's City	Alphanumeric string up to 30 characters	Minneapolis
State*	Member's State	Valid 2 character state code	MN
ZipCode*	Member's Zip Code	5 digit or 9 digit ZIP code.	12345
Country	Leave Blank. System default to US.		
EmailAddress	If provided, members will receive communications electronically.	Alphanumeric string up to 125 characters.	sample@email.com
HomePhone	Member's home phone number	Numeric string of 10 characters.	5016546541
EmployeeNumber*	Employee number assigned by employer.	Alphanumeric string up to 15 characters	1324
EmployerEmployeeID*	Must be submitted for all members in the format required. <b>Note:</b> completing this field ensures that your link between MyMedica.com and OneSource will work.	Alphanumeric String up to 20 characters. Format must be (two zeros) 00 + Social Security Number + first 9 characters of Last Name	00123456789johnson 00456771234smith-joh
SSN*	Social Security Number	Numeric string of 9 digits. Dashes will be automatically removed.	123456789
Division	Not required		
Class	Not required		
Payroll	Not required unless offering more than one payroll cycle.	<u>Valid Values:</u> Weekly (W), BiWeekly (B24), BiWeekly (B26), Monthly(M)	Weekly (W) BiWeekly (B24), BiWeekly (B26) Monthly(M)
PayrollEffectiveDate	Date the payroll cycle is effective for the member. Not required. If left blank Hire Date will be used.	Date in format MMDDCCYY	01011980
EmploymentStatus	Employment status of the member. Not required. If left blank, system will default to Active.	<u>Valid Values:</u> Active, COBRA, LOA Terminated	Active COBRA, LOA Terminated
StatusEffectiveDate	Date the status is effective. Not required. If left blank system will default to Hire Date.	Date in format MMDDCCYY	01011980
Hire Date	Not required. If left blank system will default to date of birth+1.	Date in format MMDDCCYY	01011980
ElectionAmount	Flexible Spending Account: The annual amount the employee is contributing themselves via payroll deductions. Health Reimbursement Arrangement: Must leave blank Health Savings Account: Must leave blank.	Currency format 99999.99 with maximum of 8 characters. FSA: 1500.00 HRA: Blank HSA: Blank	1500.00
PlanName*	The plan name for which the record is being loaded. This name must match was indicated on the Benefits Design Guide. Optional, if only 1 plan is setup.	Valid Values: Medical FSA Limited Purpose FSA Dependent Care FSA Health Savings Account Health Reimbursement Arrangement	Medical FSA Limited Purpose FSA Dependent Care FSA Health Savings Account Health Reimbursement Arrangement



EnrollmentEffectiveDate*	This is the date the individual starts the plan. Mid-year hires would need to pass the effective date of their enrollment. If this field is left blank, the individual will be loaded effective the first date of the plan year.	Date in format MMDDCCYY.	01012017
EmployerContributionLevel	Required for HRA plans only. Note: if left blank, level will default to Individual.	Select Ind, IndSpouse, IndChild, or Family. Used to enter the employer contribution amount associated with the plan level setup.	Family
EmployerContribution*	HRA Only-Required: The amount of annual contribution the employer will be making to the plan. <b>**If the enrollment is</b> mid-year the prorated amount must be entered if applicable.	Currency format 99999.99 with maximum of 8 characters.	1500.00
EnrollmentTermDate	For FSA and HRA only utilized when terminating an enrollment in the benefit but the employee is still employed by your company.	Date in format MMDDCCYY.	01012017
PrimaryReimbursement	Leave Blank.		
ElectionAmountIndicator	HSA Only-Required: Populate with a value of PlanYear.		
HDHPCoverageLevel	Required for Health Savings Accounts	Select either Single or Family.	Single
EnrolledInClaimsExchange	Required to be set to "Y" for HRA plans that are Pay as Plan Pays, if not select "N"	Select either Y or N.	Υ
HSATermsFlag	Not required		

### **Demographic File**

#### \*Denotes a required field

**Note**: The Demographic file should be completed for all employees that are eligible to enroll in your company's Medica ONESource Medical Flexible Spending Account (FSA), Limited Purpose Flexible Spending Account (LFSA), Health Savings Account (HSA), Dependent Care Account (DCA), or Health Reimbursement Arrangement (HRA). **Please note: for more information about demographic file fields please reference the following: Imports Tab>Import Data>Select Enrollment>Step 3 'View Setup Data'** 

File	Notes	Format	Example(s)
EmployeeIdentifier*	Social Security Number or Employee Number	123456789	123456789
LastName*	Last Name of the member	Alphanumeric up to 30 characters. The following special characters are valid: apostrophe (') or dash (-)	Johnson
FirstName*	First Name of the member	Alphanumeric up to 30 characters. The following special characters are valid: apostrophe (') or dash (-)	Jane
DateOfBirth*	Member's date of birth	Date in format MMDDCCYY	01011980
AddressLine1*	Member's address	Alphanumeric string up to 50 characters.	123 Baker Street
AddressLine2	Member's additional address line	Alphanumeric string up to 50 characters.	Apt 130
City*	Member's City	Alphanumeric string up to 30 characters	Minneapolis



Medica OneSource | Employer Guide | 15

## 

State*	Member's State	Valid 2-character state code	MN
ZipCode*	Member's Zip Code	5-digit or 9-digit ZIP code.	12345
Country	Leave Blank. System default to US.		
Username	Leave Blank		
Password	Leave Blank		
EmailAddress	If provided, members will receive communications electronically.	Alphanumeric string up to 125 characters.	sample@email.com
HomePhone	Member's home phone number	Numeric string of 10 characters.	5016546541
EmployeeNumber*	Employee number assigned by employer.	Alphanumeric string up to 15 characters	1324
EmployerEmployeeID	Employee number assigned by employer.	Alphanumeric string up to 20 characters	00123456789johnson 00456771234smith-joh
SSN*	Social Security Number	Numeric string of 9 digits	123456789
Division	Not required		
Class	Not required		
Payroll	Not required unless offering more than one payroll cycle.	<u>Valid Values:</u> Weekly (W), BiWeekly (B24), BiWeekly (B26), Monthly(M)	Weekly (W), BiWeekly (B24), BiWeekly (B26), Monthly(M)
PayrollEffectiveDate	Date the payroll cycle is effective for the member. Not required. If left blank Hire Date will be used.	Date in format MMDDCCYY	01011980
EmploymentStatus*	Employment status of the member. If left blank, system will default to Active.	<u>Valid Values:</u> Active, COBRA, LOA Terminated	Active, COBRA, LOA, Terminated
StatusEffectiveDate*	Date the status is effective. If left blank will default to Hire Date.	Date in format MMDDCCYY	01011980
Hire Date*	If left blank will default to DOB+1.	Date in format MMDDCCYY	01011980

### **Dependent File**

#### \*Denotes a required field

Note: Dependent information is only required for HRA plans that require an individual within a family to meet their own deductible or for Dependent Care FSA plans. Individuals enrolled on a Dependent Care FSA plan may enroll their own dependents via the Member Portal. For MSP reporting, all eligible dependents under the HRA must be reported for any HRA with a benefit greater than \$5,000. Please note for more information about dependent file fields please reference the following: Imports Tab>Import Data>Select Contribution>Step 3 'View Setup Data'

File Field Name	Notes	Format	Example(s)
EmployeeIdentifier*	Social Security Number of Employee or Employee number	123456789	123456789
DependentIdentifier*	Use dependent social security number. You <i>must</i> also complete the Social Security Number column.	Alphanumeric up to 20 characters.	789561234
LastName*	Last name of the dependent	Alphanumeric up to 30 characters. The following special characters are valid: apostrophe (') or dash (-)	Smith
FirstName*	First name of the dependent	Alphanumeric up to 30 characters.	Ann
MiddleInitial	Middle initial of the dependent	Alphanumeric up to 1 letter.	L
DateOfBirth*	Dependent's date of birth	Date in format MMDDCCYY	01011980
Relationship*	The relationship of the dependent to the employee.	Alphanumeric, up to 9 characters.	Spouse or Dependent
Medica OneSource   Employer G	uide   16	⊗M	edica.

RelationshipType	Required only if reporting to CMS for MSP. Used to further define 'Dependent'.	Alphanumeric Valid entries are 'child', 'domestic partner' and 'other'.	child
Gender	Gender of the dependent.	Alpha, 'M' or 'F' are valid responses	F
SSN*	Required if using SSN as DependentIdentifier in Column B: Social security number of Dependent.	123456789	123456789
MedicareBeneficiary	Required only if reporting to CMS for MSP. Indicates whether or not the dependent is covered by Medicare and should be included in MSP reporting.	Alpha, 'Y' or 'N' are valid responses	Y
MedicareID	Required only if reporting to CMS for MSP. Personal identifier for those covered by Medicare	Alphanumeric, up to 12 characters	
Status	Leave blank		
Student	Leave blank		
IssueCard	Leave blank		
HRAEnrollmentEffective Date	If blank, date used will match the employees' effective date, or you may use another effective date. (Date of birth for a newborn, for example)	Date in format MMDDCCYY	01011980
HRAEnrollmentTerminat ionDate		Date in format MMDDCCYY	01011980
ExternalDependentID*	Required if using an assigned number as DependentIdentifier in Column B.	Alphanumeric up to 20 characters.	789561234

### **Troubleshooting Errors**

\*\*Important – It is your responsibility as the file originator to ensure that all errors and exceptions are reviewed and corrected. Medica ONESource does not monitor individual file imports.

After submitting your files, you can track the status of the file import via the Employer Portal's **Imports** found on the left side of the page. Exceptions occur when the file data you have provided does not fit within the criteria required for successful uploading. This capability allows you to quickly review and correct errors for prompt enrollment of your employees. If there are errors on your file it will have a note of *Completed with errors* under the file name. To review those errors click on Review, you will be given the option to download an exception report or manually review and fix the errors.

raphic Enr	ollment Te	mplate (3) T	est.xls		9/23/2021 12:34 PM
PM	Date pro 9/23/2	cessed 021 12:34 PI	М		
Added	Errored	Pending	Unchanged	Updated	Total Records
0	1	0	0	0	1
0	1	0	0	0	1
0	2	0	0	0	2
F	PM Added 0 0 0	Paphic Enrollment Tenerrors       Date pro- 9/23/2       Added     Errored       0     1       0     1       0     2	Added Errored Pending 0 11 0 0 2 0 2 0	Added     Pending     Unchanged       0     1     0     0       0     1     0     0       0     2     0     0	Added     Pending     Unchanged       Added     Errored     Pending     Unchanged     Updated       0     1     0     0     0       0     1     0     0     0       0     2     0     0     0



#### Review MDC Demographic Enrollment Template (3) Test.xls

Completed with errors	Version 1
9/23/2021 12:34:24 PM 🚯	
Part of your file has uploaded successfully, but there were some errors and/or warnings that have occurred. You can ignore these or option below.	<sup>-</sup> choose an
Download exception report	
Show more	
Actions       Resubmit file     Review & fix	

An "Exception Report" is available to explain why the record(s) have errored. To view this excel spreadsheet click on Download exception report, each tab of the spreadsheet corresponds to a different file type.

		Consumer	Data Exchange Excep	tion Report: Demograp	hic		
Employer C	ode:	Test12					
Date Receiv	ved:	1/19/2021 9:44:	18 PM				
Date Proces	ssed:	1/19/2021 9:44:0	00 PM				
File Name:		Employer Demo	graphic 1.xls				
	Row	Employee					
Severity	Number	Identifier	First Name	Last Name	Field Name	Error	Error Data
Error	2	000123456	Think	Pad	ZipCode	The Zip Code specified is not a valid postal code	5649878
						for the country 'US'.	

When an error has occurred, it will need to be corrected on the file and resubmitted to be processed successfully. This would be noted as "Error" under the Severity column on the Exception Report. There are a couple options when it comes to troubleshooting errors.

#### **Option 1: Exception Report**

An Exception Report can be run to determine where errors occurred in the submitted files. The errored fields can be corrected, and the file can be re-uploaded into the portal. The exception report breaks down the error in separate sheets, here are the most common ones.

- Demographic Errors- Sheet 1
- Enrollment Errors- Sheet 2
- Contribution Errors- Sheet 3
- Dependent Errors- Sheet 5

	А	В	C	D	E	F	G	Н
1			Consumer	Data Exchange Except	tion Report: Demograp	hic		
2	Employer C	ode:	Test12					
3	Date Receiv	/ed:	1/19/2021 9:44:1	18 PM				
4	Date Proces	ssed:	1/19/2021 9:44:0	00 PM				
5	File Name:		Employer Demo	graphic 1.xls				
		Row	Employee					
6	Severity	Number	Identifier	First Name	Last Name	Field Name	Error	Error Data
	Error	2	000123456	Think	Pad	ZipCode	The Zip Code specified is not a valid postal code	5649878
7							for the country 'US'.	
8	Error	2	000123456	Think	Pad	Username	Username is a required field.	
9								
10								
	$\leftarrow \rightarrow$	Sheet1	Sheet2 She	et3 Sheet4 Sheet5	5 Sheet6 Sheet7	Sheet8 Sheet9 Sheet10	Shee 🕂 🗄 🖣	



#### **Option 2: View Errors Action**

\*Corrections cannot be made with this method for files submitted through an SFTP site. Changes will need to be submitted on a

- new file. This method is not recommended for more than a few errors, or to correct contribution errors.
  - 1. When an error occurs, click on Review & fix to view a list of the errors.
  - 2. Once you have this open you will be able to fix your errors by clicking on Fix all. Review MDC Demographic Enrollment Template (3) Test.xls

ompleted with errors	Version
23/2021 12:34:24 PM 🚯	
rt of your file has uploaded successfully, but there were some errors and/or warnings that have occurred. You can ignore the tion below.	se or choose a
ownload exception report	
iow more	

Review MDC Demographic Enrollment Template (	Resubmit file
Completed with errors	Version 1
9/23/2021 12:34:24 PM 🚺	
Part of your file has uploaded successfully, but there were some errors and/or warnings that have or ignore these or choose an option below.	occurred. You can
Download exception report	
Show more	
Demographic 999259999 (Jill Doe) Record line 2 Payroll frequency is a required field.	Fix all
Enrollment 999259999, Health Savings Account Record line 3	Fix all
Participant file import ID     ParticipantId with Id 999259999 cannot be found.	

3. This will bring up a list of only the fields that errored correct the errors and click Queue record to fix the error.



#### Review file MDC Demographic Enrollment Template (3) Test.xls

Fix errors in po	rtal
Update the following	errors
Record type: Demographic	Show all fields
Participant file import ID (Employee identifier) 999259999	
De unil forenzare (Reveril)	
Payroli frequency (Payroli)	

4. Once you have queued the record you will need to resubmit the file for processing; click on Resubmit File to reprocess your file with the errors corrected. The corrected file will process through the import queue again. Upon successful upload you will see the file under the Completed section with no notes<sup>10</sup> under the file name.



#### **File Error Examples**

If column A<sup>11</sup> on your exception report has Error, you need to correct these to have the record process successfully. The following provides examples of error messages from these file types (demographic, enrollment, and contribution) and how to correct them.

	Α	В	С		D		E			F		G	Н
1			Consu	mer Data	a Exchange	Except	ion Report: [	)emograp	hic				
2	Employer C	ode:	Test12										
3	Date Receiv	ved:	1/19/2021 9	):44:18 PI	N								
4	Date Proce	ssed:	1/19/2021 9:44:00 PM										
5_	File Name: Employer Demographic 1.xls												
		Row	Employee									_	
6	Severity	Number	Identifier	Firs	t Name		Last Name		Field Nam	е		Error	Error Data
	Error	2	000123456	Thin	k		Pad		ZipCode			The Zip Code specified is not a valid postal code	5649878
7												for the country 'US'.	
8	Error	2	000123456	Thin	k		Pad		Username			Username is a required field.	
9													
10													
	< • •	Sheet1	Sheet2	Sheet3	Sheet4	Sheet5	Sheet6	Sheet7	Sheet8	Sheet9	Sheet10	She: (+) : (	

<sup>&</sup>lt;sup>10</sup> If there is a note of completed with warnings and additional information the record uploaded but there is additional information you may want to view about the record.

<sup>11</sup> Warnings and information messages are for the purpose to inform and will not prevent records from being processed. Medica OneSource | Employer Guide | 20

Note: Warnings and information messages are for the purpose to inform and will not prevent records from being processed.

File Type	Field Name	Error Message(s)	Action
	ClassEffectiveDate	Class Effective Date must be greater than or equal to the member's hire date.	Make sure the Class Effective Date is equal to or after the employee's hire date.
	PayrollFrequency	Cannot update Payroll Frequency if Participant Status is Terminated, Retired, COBRA, or Laid Off and Participant Status Effective Date in the past.	Make sure employee's status is active.
Demographic	StatusEffectiveDate	Status Effective Date must be greater than current Effective Date. The Status Effective Date must be on or before the member's enrollment effective date. Status Effective Date may not precede Hire Date for Active Status.	Make sure the Status Effective Date is after the current effective date, on or before the enrollment effective date, and does not precede the employees hire date.
	HireDate	Hire Date must precede Status Effective Date for LOA status.	Make sure the employee's hire date is before the effective date of the LOA status.
	ElectionAmount	Election Amount (\$\$.\$\$) is less than posted or confirmed deductions to date (\$\$.\$\$)	Make sure the employee's deductions to date do not exceed their election amount.
Enrollment	Election Amount/ EmployerContribution Amount	Election Amount plus Employer Contribution Amount is less than paid claims to date (\$\$.\$\$)	Make sure the sum of the election amount and contribution amount is greater than the paid claims to date amount.
	EnrollmentEffectiveDate	Enrollment Effective Date cannot be prior to a confirmed or posted payroll date.	Make sure the Enrollment Effective Date does not precede a posted payroll date.
	ParticipantID	Enrollment Data may not be changed when the participant has a status of Terminated	Make sure all members whose enrollment data is being changed are set to active status.
	ContributionDate	Contributions for a member with HSA status of "closed" cannot be processed.	Make sure the date does not include forward slashes
Contributions	Contribution Amount	Contribution Amount is negative for participant (negative deduction not possible for HSA)	Please alter the contribution amount to have a positive value for HSA. Posted HSA Contributions cannot be removed via file.
	Plan Name	Plan Name Health Savings Account not found.	Make sure the plan name is spelled correctly. This field is case sensitive.
Dependent	Dependent File Import ID	Dependent file Import ID does not match key field SSN. Participant ID with ID "###########" cannot be found	Please leave this field blank

### **Enrollment Changes and Terminations (by file update)**

Employers can manage employee enrollment and demographic information by manually making changes within the employer portal or they may make changes by uploading new files. To make changes by uploading files, the following rules apply:

- If an employee leaves the company: the demographic file should be updated, changing the employee's status to "terminated" and adding the status effective date.
- For FSA or HRA, if an employee is changing plans or adding or dropping a product due to a life event: the enrollment file should be updated. You will enter your employees' original effective date in the enrollment effective date field, and the enrollment termination date should be entered as the date following the last date of coverage. Ex: If the employee has coverage until 7/31/15, the date entered should be 8/1/15.
- For HSA, if an employee is no longer participating in the HSA plan but is still employed, the employer simply stops sending contributions on the contribution file. The account will continue to be associated with the employer account. If you are paying the administration fees for your employees, it is your decision if you would like to continue paying the fees for the employee no longer participating in plan. If you choose to stop paying fees for an employee that is no longer participating but is still employed, a Terminated employment status will need to be entered on the account.

### FSA/HRA Employer Funding

### Contributions

Contributions from payroll deductions and employer contributions for HRA and FSA plans will auto-post based on the payroll frequency you provided. Money movement will not occur for these transactions. The contribution totals will update and be added to the available balance, when applicable.

### **Claim Funding Process**

Claims paid to members for claims reimbursements and debit card transactions will be deducted from your bank account daily.

The daily total of claim reimbursements made to your employees in the form of checks and direct deposits will be pulled from your bank account as one transaction. From the employer portal, the **Claim Reimbursement Notification** can be used to reconcile this transaction in your bank account.

If you are offering the debit card, a second debit will take place for the total of settled debit card transactions from your employees. The **Enhanced Debit Card Settlement Notification** from the employer portal can be used to reconcile to your bank account.



If a member makes a repayment for a denied claim, the amount will be credited back to your bank account. The **Repayments Report** available on the portal will list all repayment activity.



Note: Any transactions posting for debit card claims or refunds will include 'DEBCARDTX/BANCORP' in the description.

### **HSA Employer Funding**

### **Submitting HSA Contributions**

Funds can be contributed to an HSA account via the following methods:

### **Contribution File**

#### \*Denotes a required field

The Contribution file only needs to be completed for employees that are enrolled in your company's Medica ONESource Health Savings Account (HSA) and are contributing to the plan.

**Note:** Contribution files are not normally required for notional accounts due to the system populating contributions automatically. **Please note for more information about contribution file fields please reference the following: Imports Tab>Import Data>Select contributions>Step 3 'View Setup Data'** 

File	Notes	Format	Example(s)
EmployeeIdentifier*	Social Security Number or Employee Number	123456789	123456789
ContributionDate*	Enter a date a minimum of two business days before funds should be available. The file should be loaded no later than the date entered here to ensure funds are made available.	Date in format MMDDCCYY.	04152013
ContributionDescription*	Labels the contribution as an Employer or Payroll Deduction (to discern funds deducted from payroll from those contributed by the employer group)	<mark>Valid Values:</mark> Payroll Employer	Payroll
ContributionAmount*	The amount of the contribution	Currency format 99999.99 with maximum of 8 characters.	1500.00
PlanName*	Identifies the plan to which funds are being loaded. For HSAs, funds will be debited from the employer bank	Valid Values:	

⊗ Medica.



	account. For other products, a credit to the accountholder's account is made, though funds are not debited from the employer until a claim is paid.	Health Savings Account Note: Plan name needs to be entered in exactly as it appears in View Setup Data (Imports Tab>Import Data>Select Contribution>Step 3 'View Setup Data')	Health Savings Account
PriorTaxYear	For HSA Only – Should be used when entering contributions for a prior tax year. If intending the contributions to be for the prior tax year the 'ContributionDate' should be left at the current date, then prior is entered in the 'PriorTaxYear' field. Will default to Current if not supplied. <b>Note:</b> Prior year HSA contributions cannot be made after tax-day of the current year.	<u>Valid Values:</u> Current Prior	Current

For additional information on submitting a file or trouble-shooting errors reference the **Uploading Files** and **Troubleshooting Errors** sections of the employer guide.

#### Setting Up a One Time Contribution

On the left hand side of the home page on the dashboard select "Set up Contributions".



- 1. Select the One-Time Contribution Option
- **2.** Select the desired plan the contribution(s) should be made to in the plan year drop down.
- **3.** Chose a contribution method

Medica OneSource | Employer Guide | 24





a. Select the Enter Manually option if you wish to enter the contribution manually. Refer to the Manual Entry section for more detailed information.

b. Select the Import a File option if you wish to add the contribution via a file. Browse for the file you wish to upload and save the contributions.

Schedule a new contribution • Health Savings Account

Schedule type	2 Import method	3 Details	— 4 Enter contributions
	Import	method	
	Enter manually Enter contributions in portal	Import a file Upload a file with contributions	
Cancel			Back

#### Setting Up a Recurring Contribution Schedule

One-time     Recurring			Import	method
One-time         Recurring         Enter manually the with contributions in contributions         Import a mile with contributions	<u>چ</u>		Enter manually	
Create a one-time Create an automated schedule	One-time Create a one-time contribution		Enter contributions in portal	Upload a file with contributions

**Medica** 

- 1. Select the **Recurring** contribution option.
- 2. Select the desired plan the contributions should be made to.

Medica OneSource | Employer Guide | 25



3. Chose a contribution method:

- a. Select the Enter Manually option if you wish to enter the contribution manually. Refer to the Manual Selection section for more detailed information.
- b. Select the Import a File option if you wish to add the contribution via a file. Browse for the file you wish to upload and save the contributions.

#### **Recurring Monthly**

When setting up a monthly recurring contribution the employer will be able to decide how often and on what day of the week the contributions will occur. The employer can choose to have no end date or select the End By provide an end date for their contributions. There are 3 tabs to select from that will give you several different options on how to set up monthly contributions.

The "Monthly" Tab will allow the employer to make contributions based on the frequency, day of the month and monthly frequency.

The "Daily" Tab will allow the employer to make contributions based on a specific date of the # of months the employer choses.

- 1. Enter Start date (Start date must be on or after current date) and End date. If there is no end date, please select "No End Date".
- 2. Next select the Frequency, Day of the Month and Monthly Frequency.
  - a. Frequency: First-Last
  - b. Day of the Month: Day, Weekday, Weekend day, Sunday, Monday, Tuesday, Wednesday, Thursday, Friday, and Saturday
  - c. Monthly Frequency: Every 1 month- 24 months
- 3. To have the contribution pull every month 1<sup>st</sup> of the month you will select:
  - a. Frequency: First
  - b. Day of the Month: Day
  - c. Monthly Frequency: Every 1 month
- 4. To have a contribution pull on a specific date (15<sup>th</sup>) of every month you will want to go to the "Daily" tab then you will select:
  - a. Day: 15<sup>th</sup>
  - b. Monthly Frequency: Every 1 months

Schedule a new contribution • Health Savings Account	
--	--

chedule a new contribution • Health Sav	ings Account		Contribution details	
Schedule type Import method 3 Details	Enter contributions		End by	No end date
Contribution details		Start date 1/1/2021	End date 12/31/2021	
End by	No end date			
Start date 1/1/2021	<b>iii</b>		Monthly Weekly Daily	)
Monthly Weekly Daily		Day 15	Monthly frequency     every 1 month	•
Frequency  First  Day of the month Day	•			
Monthly frequency every 1 month				
Cancel	Back Next Ca	ancel		Back

5. You will then be prompted to enter the contribution amounts based on payroll or employer contribution. Please skip forward to Manual Entry for Contribution section below.





#### Weekly Recurring

When setting up weekly recurring contributions the employer will be able to decide how often and on what day of the week the contributions will occur. The employer can choose to have no end date or select the End By provide an end date for their contributions. In the example above, the recurring contributions will occur on every other Friday, and the contributions will end on December 31<sup>st,</sup> 2021.

	Contributi	on details	
		End by O No er	nd date
Start date 1/1/2021		End date 12/31/2021	
	Monthly W	eekly Daily	
	Frequency every 2 weeks	•	
	Sunday	Monday	
	□ Tuesday	Wednesday	
	Thursday	🔽 Friday	
	Saturday		
Cancel			Back

#### **Manual Entry for Contribution**

If you selected to enter the contribution manually once you have finished the contribution frequency. You will be prompted to enter the contributions manually.

1. Enter the respective amounts in the Payroll Deduction and Employer Contribution field if applicable.

Medica Test					
itatus: Active (12/25/2015)					
Identifier					
Payroll deduction \$0.00	Employer contribution \$0.00				

2. Once the respective amount is entered, scroll down, and review the total amount of the contribution for the payroll deductions and employer contributions. Once you have verified the total amount is correct submit.

Medica OneSource   Employer Guide   27	<b>⊘Medica</b> .
Cancel	Back Submit
Total employer contributions	\$300.00
Total payroll deductions	\$50.00

Note: Employers are responsible to stop contributions once an employee becomes ineligible or is no longer contributing to the plan.

After saving the contribution the message below will appear. All other scheduled contributions will be shown here as well. Contributions can be updated or deleted by selecting the edit or delete links in the actions tab.

Set up contribution	schedules	+ New schedule
Individual contributions for emp	loyees can be found in the	e Employees section
Active schedules		
Health Savings Account Next posting date: 9/23/2021		Recurring
Accounts Health Savings Account	Effective date 9/23/2021	Schedule Every week on Thursday Delete Edit

#### SFTP (Secure File Transfer Protocol) File

The final option of submitting contributions for HSA accounts is for them to be sent via a text file through an SFTP (Secure File Transfer Protocol) site. For more information on the SFTP contribution method please contact Medica ONESource Employer Services at 800-918-6158.

### **HSA Funding Process**

Payroll deductions and employer contributions submitted into your employee's Health Savings Accounts will be withdrawn from your bank account and posted to your employee's individual HSAs. The total amount of the daily contributions and deductions will be taken from your bank account.

The HSA Funding Collection Notification will be available on your employer portal one day prior to the transaction to withdraw the funds from your bank account. The notification will provide detail of the amount to be withdrawn and detail to reconcile the transaction to your bank account.



Below is a day-by-day breakdown of the HSA funding process.



**Note:** The above timeframe can vary due to holidays and weekends. Timing can also vary if the contribution date submitted on the contribution file is in the future.

### **Review Notifications**

You may receive the following notifications. An email will be sent notifying you when a report is available to view. All reports are available for you to access on the employer portal at any time. We have provided samples of common reports below. These reports will be sent to the primary contacts. However, if you would like to receive any of these reports, please contact Medica ONESource Employer Services at 800-918-6158.

Report	Plan Type	Description
Claim Reimbursement	Notional	This notification alerts the Employer of the total number of claims processed for
Notification		reimbursement. The notification generates when reimbursements post.
Employer Contribution	Notional	This notification alerts the Employer of the upcoming scheduled employer contribution. This
Notification		notification details the employer contributions that are scheduled to be made on an upcoming date.
Enhanced Debit Card	Notional	This notification will be sent to the employer containing information on transactions the
Settlement Notification		employer must fund directly with the debit card BIN sponsor.
Fee Funding	All	This notification automatically sends an alert to the employer with information on fees to
Notification		be funded. This notification generates on business days only and does not generate on days
		when the employer does not have any applied employer-paid fee transactions.
HSA Funding Collection	HSA	This notification alerts the employer the total amount of posted scheduled employer
Notification		contribution and payroll deductions that will be funded from the employer's bank account.



Payroll Deduction	Notional	This notification can be sent to the employer prior to each scheduled payroll date. The email
Notification		notification alerts the Employer of a payroll deduction before the deduction occurs and
		contains information on what deductions are scheduled to be made for an upcoming payroll
		date.

### **Review Reports**

Click the **Reports** tab within the portal dashboard to view your available reports. Most recently generated reports will also appear on the home screen.

٦	Home	Reports	+ New repo	ort
Ð	Imports	Account Balance Detail	Last run Oct 1, 2021	>
÷		View plan balance summaries and consumer account balance detail as of specified dat		
:::	Set up Contributions	ACH Based Employer Funding View all transactions that were debited or credited from employer account(s).	Last run Oct 4, 2021	>
	Reports	Claim History View all claims submitted during a specified time period including claim status.	Last run Oct 1, 2021	>
<u>60</u>	Employees	Claims Reimbursement Notification View all claims scheduled to be reimbursed on a specific date.	Last run Oct 4, 2021	>
×	Tools	Employer Contributions View employer contributions in applicable plans as of specific contribution date.	Last run Sep 24, 2021	>
		Employer Fee Funding Notification View all fees to be funded on a specific date.	Last run Sep 13, 2021	>
		<b>Enrollment</b> View participant enrollment in applicable plans as of a specified date.	Last run Oct 1, 2021	>
		HSA Account Detail View an overview of each consumer's HSA along with individual payroll deduction and	Last run Oct 1, 2021	>
		HSA Funding Collection Notification View HSA funding notifications sent to the employer containing the payroll deductio	Last run Sep 26, 2021	>
		Payment History View all reimbursements/payments during a specified time period.	Last run Oct 2, 2021	>
		Payroll Deduction Notification View participant deductions in applicable plans as of a specific payroll date.	Last run Sep 30, 2021	>
		Reconciliation by Batched EFTs View all transactions into/out of specified employer bank account(s).	Last run Oct 1, 2021	>

The chart below outlines the various reports available and the frequency at which they generate.

You can also generate a new report by clicking **+ New Report** in the **Reports** tab. You will be able to pick which report you want to generate OnDemand. You have the option to select the file type, the date range, what plan you want the report, grouping, and the amount of detail for any new report you are creating. You may need to wait a few minutes for the report to be available to view. If you would like an email when the report is available, check the box before you click the **Request** button.



Report	Plan Type	Frequency	Description
ACH Based Employer Funding	All	Daily, Weekly, or Monthly	This report contains all transactions with the same payment effective date.
Account Balance Detail Report	Notional	Scheduled Monthly & OnDemand	This report encompasses each employee's contributions, claims paid, deposits, and available balance.
Claim History Report	Notional	OnDemand	Provides information about claims for an employer group for a specified time frame.
Enrollment Report	Notional	Scheduled Monthly & OnDemand	This report includes data regarding employee's enrollment status and expected annual employer contribution amounts.
HSA Account Detail Report	HSA	Scheduled Monthly & OnDemand	Detailed Version: Shows itemized payroll deductions and employer contributions made for each employee by date. Summary Version: This report provides data regarding an employee's HSA activity. The report includes account status, contribution details and tax year contribution summaries.
HSA Employer Summary Report	HSA	Scheduled Monthly	Provides aggregate monthly HSA statistics, including average account balance, distributions, and contributions.
Payment History Report	Notional	Scheduled Monthly & OnDemand	Provides information about reimbursements made for an employer group.
Reconciliation by Batched EFTs Report	All	Scheduled Monthly	Reflects all debits and credits initiated with our Employer Portal that have posted to your bank account(s) for a specified period of time.
Reimbursement Detail Report	Notional	OnDemand	Provides information about claims that have been reimbursed.
Repayments Report	Notional	Scheduled Monthly & OnDemand	Provides an overall summary and details consumer repayments for a specific period of time.



### **Answer Employee Questions**

### **Employee Data**

You have access to view real-time data at an employee level to facilitate your ability to support your employees' questions. To view employee data, select the **Employees** tab. You can search for employees using last name, first name, employee number, employee status or can select an employee from a list of all employees.

Note: When searching for a terminated employee be sure that employee status is set to "All."

### Resources

Simply access the Employer Portal to download and print any forms or educational materials your employees may need. Forms can be found by selecting **Resources** from the dashboard. Below is a chart outlining the various forms available online.

Employee or Employer	Form Name	Description
	Authorized Representative HIPAA Form	Used to document the designation of an Authorized Representative for a member. This form authorizes the release of medical information to the named representative(s).
	Automatic Orthodontia Request Form	This form is to be completed for any member that wants to receive automatic reimbursement for orthodontia expenses
	Claims Terms and Conditions	The terms and conditions of a reimbursement request.
	HSA Blocked Account Documentation Guide	This guide can be referenced to identify the types of the documentation that can be submitted to verify the identity of a member that has failed the identity verification process.
	HSA Contribution Form	This form can be used by the member to submit post-tax contributions via mail.
Employee	HSA Death Beneficiary Form	Used to add or replace death beneficiaries to a member's account. It can also be used to update current beneficiaries appointed.
	HSA Death Distribution Form	Used to request funds be distributed to the beneficiary(ies) or the estate of the deceased account holder.
	HSA Distribution Request/ Account Closure Form	Used to request a distribution from the accountholder's HSA, or to close the HSA and transfer the entire account balance. This form may be used for Normal Distributions, Prohibited Transactions, Rollovers, Disability, Transfer, Divorce (form must include Divorce Decree), and Excess Contribution removals.
	HSA Transfer Form	This form is used by the member to request their <b>previous</b> trustee/custodian to transfer all or a portion of assets from another HSA into their Medica ONESource HSA.
	Medical Necessity Form	This form is to be completed when a member is submitting "dual-purpose" expenses. Dual-purpose expense would be any eligible expenses that has been



		recommended by a medical practitioner as they have both a personal, cosmetic, or general health purpose. A few examples of dual-purpose expenses could include a massage, ergonomic devices, and collagen injections.
	Power of Attorney Form	This form is used by the member to legitimize someone else as an authorized user on their account. A power of attorney gives authorization for someone to act on behalf of the member. Please note that this form needs to be notarized to be redeemed as valid. This form may not be available for all members.
	Recurring Dependent Care Request Form	This form is to be completed each plan year and as changes occur when the member wants to receive recurring reimbursement of dependent care expenses. This form must be signed by the provider.
	Reimbursement Request Form	This form is used for the member to submit any out-of-pocket expenses for reimbursement.
	Transaction Dispute Form	This form is used when members wish to dispute a transaction in the case of suspected fraudulent activity. A provisional credit will be applied to the member's account within 10 business days from the request and the disputed transaction will be completed within 45-60 calendar days. A member only has a limited amount of time (110 days) from the date of the original transaction to dispute the charge.
	Company Change Form	This form is used to make updates to your company's name, address, Tax ID, or the HSA fee allocation.
Employer	Employer Contact Change Form	This form is to document the designation, update and/or removal of an Authorized contact for an employer.
	IDV FAQs	Informational document answering common questions that are asked about the Identity Verification process for HSA accounts.

The chart below outlines additional forms that are not available online. Contact Medica ONESource Employer Services at (800) 918-6158 or MedicaONESource@healthaccountservices.com to request the forms be sent to you. Employees may contact Medica ONESource Member Services at (800) 918-6152 or MedicaONESource4me@healthaccountservices.com to request the forms be sent to them.

Employee or Employer	Form name	Description
Employee	Claim Appeal Form	This form is used by a member to appeal a decision made regarding their claim for benefits.
	External Claim Appeal Form	This form is to be used if the member is requesting an external review with an Independent Review Organization (IRO) because they do not agree with the decision made regarding their internal claim appeal.
	HSA Blocked Account Verification Form	This form is used to validate a member's identity in the situation of a blocked account.



Employer	ACH Form	This form is used for employers to allow Medica ONESource to initiate debit/credit entries to the account for Manual/Online Claims, HSA Funding, Fee Funding, and/or update financial institution information.

### Plans

You can view the same plan information as your employees, which enables you to easily answer employee's questions.

### Health Savings Accounts – Identity Verification (IDV)

Below is a list of Identity Verification FAQs to help answer frequent questions about identity verification.

#### 1. What is Identity Verification (IDV) and how does this apply to a Health Savings Account?

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. As Health Savings Accounts (HSAs) are federal tax-benefited accounts that are regulated by the IRS, we have to keep in compliance with this standard. The process used to accomplish this is called Identity Verification (IDV).

#### 2. What information is used to verify my employee's identity?

The demographic information used for IDV includes Name, Address, Date of Birth, and Social Security Number. This information is then compared to a Federal Database to verify an employee's identity.

#### 3. What happens if my employee fails IDV?

Your employee's HSA will have a block on the account. This block will prevent distribution transactions, including debit card transactions.

#### 4. What does my employee need to do if they fail IDV?

Within 60 days of the block being placed on the HSA, the employee needs to complete and submit the HSA Blocked Account Verification form along with supporting documentation. Common forms of supporting documentation include, but are not limited to, a Social Security Card, Driver's License, and a Birth Certificate. A list of all acceptable documentation is outlined on the HSA Blocked Account Verification form or the HSA Blocked Account Verification Guide.

For more information on Identity Verification reference the IDV FAQ document located in the Resources tab in the employer portal.

### **Annual Plan Renewal**

The Medica Account Management team will begin reaching out to you prior to the end of the plan year. They will walk you through the renewal process in detail and request the information required to renew the plan. Renewal is not required for Health Savings Accounts. Please note: if there is no response to any of the renewal reminders your plan will not be renewed.

Once your renewal information has been processed (which takes approximately 5 business days), you will receive a Renewal Confirmation email from Medica ONESource Employer Services. Medica ONESource Employer Services will send an acknowledgement email to you stating that your renewal information has been processed, and a new plan year has been set up. You may select on your Benefit Renewal Guide to have existing HRA enrollments in the ONESource portal for the prior plan year rolled into the new plan year, 10 days prior to that start of the plan year, or when the plan setup is completed if less than 10 days. You must verify the accuracy of the enrollees and make any changes prior to the start of the new plan year. FSA enrollments must be sent each year.



Your Medica Account Manager will notify you if additional files are needed based on plan design(s) changes that you may have requested. Please contact Medica ONESource Employer Services at 800-918-6158 or email MedicaONESource@healthaccountservices.com for assistance with your files.

#### Generating an Enrollment Report

From the Reports Tab, select 'Run New Report' for the Enrollment Report.

۲ ۲	Home	Reports	+ New report
	iniporta	Employer Contributions View employer contributions in applicable plans as of specific contribution date.	Last run Sep 1, 2021 🔉
	Set up Contributions	HSA Account Detail View an overview of each consumer's HSA along with individual payroll deduction and	Last run Sep 2, 2021 🔉
	Reports	HSA Employer Summary View aggregate monthly HSA statistics and balances.	Last run Sep 2, 2021 💙
ŝ	Employees	HSA Funding Collection Notification View HSA funding notifications sent to the employer containing the payroll deductio	Last run Aug 6, 2021 🔉
>>	Tools	Payroll Deduction Notification View participant deductions in applicable plans as of a specific payroll date.	Last run Sep 22, 2021 🖒

When requesting the Enrollment Report, ensure to select the options that will provide you with the information you will need to confirm the accuracy of the enrollments in the new plan year.

r Enrollment		
Report File type	: details	• Select the Report Format, suggested to use Excel to sort data if needed.
Time		• The 'As Of' date should be equal to the first day of your plan year
Ax of 9/22/2021		• Select the date range of you plan year
Plan Plan year		• If you have divisions, make sure to include 'All'
01/01/2021-12/31/2021		• Select the Detail Level
Group Group by Do not Group	Divisions included	Click Yes to Include Additional Information
Lawis included Reporting Hierarchy		Click Yes to Include Coverage Level
Type Provide at level Detail Provide at level Provide at	Summary level	• Click Yes to Include Dependent Information if applicable to your HRA benefit.
Options		• If the box for Email me when the report is available is checked, and
Email me when the report is available     Include coverage level	Include additional information     Include dependent information	email will be sent to your email address on file once the report has generated. The report will be available under the Reports tab, then click
Cancel	Request	Enrollment Report.

Review the Enrollment Report for accuracy. If any updates need to be made, such as coverage level changes, New additions to the benefit, or a member should not be enrolled in the new plan, make prompt changes before the plan year begins. All changes can be made through the Medica ONESource Employer Portal. If you make updates to your employees, we suggest generating a new Enrollment Report once complete.

Medica OneSource | Employer Guide | 35





Refer to the previous section, <u>Employee Account Changes and Terminations</u> and <u>Enrollment Changes and Terminations</u>, if any updates need to be made to member's accounts. If you have questions about this process, please contact the Medica ONESource Employer Services team at 800-918-6158 or via email at MedicaONESource@healthaccountservices.com.

### **Plan Year Closing**

Following the end of your FSA or HRA plan years, you will receive an email with confirmation that your benefit plan has completed closure for the prior plan year. The email will refer you to the Employer Portal where you will find a Plan Year Closure Notification Report under the Reports tab. This report will provide you with the final account balance detail and a list of those employees with taxable items. The timing of this email is based on the completion of the plans run out period and the generation of the closing report.

All of the taxable items on this report are considered ineligible as the necessary follow up was not provided. The plan year is now closed; options available to resolve the outstanding amounts are as follows:

- Option 1- Deduct the amount through payroll as a taxable income to the employee. In this situation, the employee retains the funds as taxable income in addition to their normal wages. This results in an adjusted W-2. The IRS has stated that the W-2 can be issued in the current year, even if the ineligible transaction(s) was from the previous plan year. The W-2 can be issued for active and/or terminated employees.
- Option 2- Deduct the amount from the employee's wages on an after-tax basis, thereby repaying the plan for the ineligible expense. If selected, the money is retained by the employer as forfeited funds.

An employer can choose to use one or both options listed, depending if circumstances warrant. (i.e. a W-2 for a terminated employee and make an after-tax deduction for an active employee). Please see a tax advisor to discuss which option fits your plan best.

If there are no taxable items, you may disregard the suggested options above as there is no further action required.

*Note:* Plan year closing emails do not apply to HSA plans.

### **Employee FAQs**

#### Can a transaction be moved from an HSA to a different benefit account such as a Limited FSA?

No, the funds will need to be contributed back to the HSA using the HSA Contribution Form indicating a "Mistaken Distribution". The employee may then file a claim against the appropriate account. This way funds are placed back in the HSA and removed from the correct account.

#### Can my employee move their HSA to their spouse's HSA and Vice Versa?

No. As HSAs are linked to each individual, HSA account holders are unable to move their HSA funds to another individual's HSA, per IRS regulations.

#### How do dependents and beneficiaries get added to my employee's account?

Dependents and Beneficiaries can both be added by the employee via the member portal. Employees may also submit the Beneficiary Form to add a beneficiary to their account as well. Employers can add dependents via file. Please note that beneficiary details can only be provided to the account holder.



#### How do my employees add a spouse or another individual as an authorized contact on their account?

The employee may submit the Authorized Representative Form allowing the authorized individual to receive information about the account, but they will not be able to make any changes to the account. This form will be eligible for one year before it needs to be renewed for notional accounts while it will last the lifetime of the account holder for an HSA. The Power of Attorney form allows the authorized individual the same powers as the account holder.

#### How does my employee report an unauthorized debit card transaction?

The employee may submit the Transaction Dispute Form stating they did not engage in the transaction. Submitting the Transaction Dispute Form will trigger a provisional credit of the funds while the case is reviewed. If the transaction is confirmed fraudulent, the provisional credit will be reversed, and a permanent credit will be applied to the account.

#### What Investment options are available and how do they get updated?

Investment options can be accessed from the Investment section which is found in the member portal. To find more information about investments, please access the Medica ONESource member guide. Investments are only available for HSA accounts.

#### What happens if an employee loses their debit card?

The employees may report the card lost or stolen on the member portal or via the mobile app. They may also contact Member Services at (800) 918-6152 to report the card lost/stolen. Employees will also want to make sure they are checking their account to ensure there are no fraudulent charges and then following the appropriate steps to report these. An employer is unable to request a new debit card be issued for their employee.

#### What happens to an employee's account upon termination?

HSA Accounts will transition automatically to an individual HSA upon a status change to Terminated. Employees will receive a new debit card that is associated with the individual HSA. Additionally, employees will be responsible for any fees that were previously paid by the employer. For notional accounts, employees will be able to file claims based on your company's grace period and loss of eligibility rules.

#### What notification will my employees receive about remaining funds at the end of the plan year?

Employees enrolled in a notional plan (FSA and DCA) will receive a notice of the final filing date for their plan as well as a remaining balance notification. This notice will be generated and sent 30 days before the final filing date.

#### How long will my employee's transactions take to process?

Debit Card transactions for both HSAs and Notional accounts are usually processed within 2-3 business days. However, the merchant's card processing system can delay the approval resulting in transactions taking up to 10 business days to be processed from the employee's account.

For transactions through the online portal, transaction length will vary between HSA and Notional accounts. For HSA transactions, checks should arrive with the recipient within 7-10 business days. If a bank account is linked to the online portal the funds should post within 2-3 business days. Transactions for notional accounts may take longer to process if claims need to be approved. *\*Please note if the employee fails to provide the proper documentation when required their debit card will be suspended.* Once the employee's claim is received it will take up to 2 business days to process. If the claim is approved then the same 7-10 business days for checks in the mail, and 2-3 business days for direct deposit will apply after the approval.



### *If an employee has multiple enrollments, how does the debit card work to pull funds from the correct account?*

Your employee's Medica ONESource debit card is set up to pull funds from the most applicable account for each individual transaction. For example, if a member has both an LPFSA and an HSA and has an optical visit, the debit card will pull from the LPFSA until the funds are used and then move onto the HSA. If the Member has a DCA and an HSA, the card will use the merchant coding to determine which account to pull from. If the merchant is coded as a daycare, the debit card will pull from the DCA until all funds are removed. If funds for a DCA expense are pulled from an HSA, those funds used would need to be reimbursed back to the HSA.

## If an employee has multiple enrollments, which account will the debit card pull from during a run-out or grace period?

#### Grace Period:

Employee transactions made with their debit card during the grace period will pull from the previous year's balance when funds are available. For example, if an employee uses their debit card for an approved expense on or before 3/15 and still has funds in the previous year's FSA, it will pull funds from the previous year's FSA before moving onto the current year's. **Run-out Period:** 

Debit card transactions are not compatible with run-out periods. During the run-out period, employees can only submit documentation or file claims for services incurred prior to termination or the plan year end date. Debit cards assume the date of service of a claim is the swipe date.

#### How much can spouses contribute individually and together?

Please see publication 969 on the IRS.gov website for further information about contribution limitations.

