



STERLING
ADMINISTRATION

DEBIT CARD FAQs

Health FSAs, HRAs and Dependent Care Plans are all pre-tax benefits, and the IRS requires that charges reimbursed through these accounts are eligible under the law. If you are in a plan utilizing a debit card, Sterling has pre-programmed your card for specific categories of expenses, (provided there is a sufficient balance for the charge.)

For a Health Care FSA/HRA this includes most medical items (doctors, co-pays, hospital, chiropractor, dental, vision, RX, etc.) Check with your health plan administrator or employer for additional plan details.

USE YOUR DEBIT CARD FOR THE FOLLOWING CATEGORIES:

- **Anything that runs through the IIAS system.** What's that, you say? The IIAS is an inventory control system found at most of the larger pharmacies (Walgreen's, CVS, Rite-Aid, Costco, Target Pharmacy, etc). When you purchase prescriptions or eligible over the counter items, at these pharmacies, the card will automatically know what is eligible.
- **Pre-Programmed Co-Pays.** Sterling has programmed medical co-pays of even \$5.00 amounts to auto-adjudicate, (a technical term meaning to automatically approve) to a maximum of \$200. If your service falls outside of the \$5.00 increments you will receive an email, or postal letter, from us requesting additional documentation for the service. The card will still work, provided you have sufficient funds available on it, but you will have 45 days to submit the receipt to Sterling.
- **Recurring Services.** If you have a provider that you frequent and the service amount is the same each time you can send Sterling the first receipt so that we can make sure it is eligible and then we can set up a recurring adjudication (or approval) on your account for the remainder of the year to so that you will not have to continue to send in receipts. This is common with dependent care accounts. To set up a recurring auto-adjudication, simply call Sterling for further information.

Anything outside of the above categories triggers an email or letter requesting that you send in the receipt for Sterling to review. Receipts must include date of service, provider, what the service was and the patient responsibility. **Please remember that money in your current plan cannot be used to pay for prior plan year services.** If you are still in run out then those prior year claims would need to be sent to Sterling for reimbursement.

Sterling sends three (3) notifications:

1. The day after a service is identified as needing additional adjudication
2. Thirty (30) days later reminding you that if we do not receive the receipt your card will be temporarily suspended
3. Forty-five (45) days after the service stating the card is suspended

What happens if my service is determined to be ineligible?

- You can reimburse your plan by sending a check to Sterling for the claim or part of the claim that was not eligible. We will credit that back to your plan and credit back the employer.
- You can send us a claim that has not been reimbursed yet to use as an "offset" to the ineligible debit card claim.
- Ultimately, the unsubstantiated expense will either be withheld from pay or become taxable income.