



NueSynergy

CUSTOMER FOCUSED & TECHNOLOGY DRIVEN



PARTICIPANT PORTAL

EMPLOYEE USER GUIDE





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The Participant Portal can be accessed by navigating to the following URL: www.NueSynergy.com.

Registration

Step 1. If this is your first time accessing Participant Portal, simply click the register button atop the right corner of the home screen.

Step 2. After clicking the register button, complete the registration form (as shown in the lower right below). Choose a username and password. Enter the required demographic information. You can obtain your employee ID and employer ID from your account welcome kit or by calling NueSynergy.

If you already have a benefit debit card, the card number can be used in place of the Employer ID in the registration ID field.

Before clicking register, be sure to view and accept the terms of use.

Step 3. After successfully completing the registration form, click register. The process may take several seconds. Do not click your browser's back button or refresh the page.

Secure authentication

The next part of the registration process involves setting up your secure authentication. This important step helps ensure your account is secure and private.

After the registration form is successfully completed, you're prompted to complete the secure authentication setup process.

Step 1. Select security questions.

You must select four security questions and provide your secret answers. These questions are asked at random while attempt to login to the WealthCare Portal. The questions help provide an additional layer of security and help ensure only you are able access your account.

Once complete, click next.

Step 2. Verify your email address.



On the next page, you're prompted to verify your email address. Once complete, click next.

Register - Secure Authentication

STEP 1 STEP 2 STEP 3 STEP 4

First Name John

Last Name Test

Confirm Email* jcollins@nuesynergy.com

The email address entered is used for security encryption only. It is not used for solicitation purposes.

NEXT CANCEL

Step 3. Submit setup information.

On the next page, you're asked to verify all of the information you've entered during the secure authentication process. After you've reviewed and confirmed the accuracy of the information, please click submit setup information.

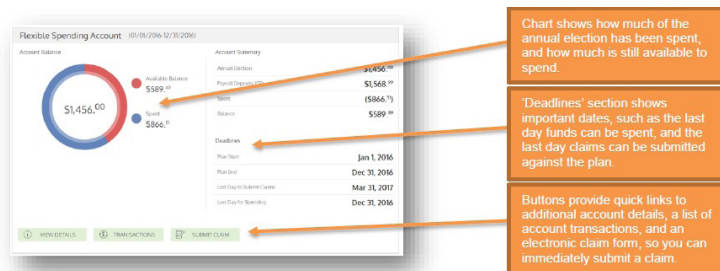
A confirmation page displays, showing the registration process is now complete.

Your first login

After registering, for all subsequent logins you can enter your username and click the sign in button on the home page. You are prompted to answer two of your four security questions, and then enter your password.

Checking your account balances

To access a quick view of your account balances, navigate to the benefit account summary page. Each account displays in a separate tile, and provides at-a-glance details such as balance, amount spent, and important dates surrounding your account's plan year.



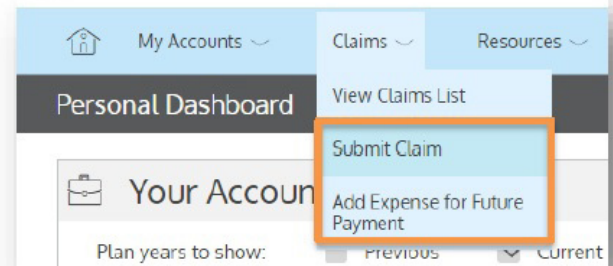


Submitting an expense or a claim

Participant Portal allows you to enter new claims and expenses, as well as view and edit pending ones. If you have a receipt to substantiate your claim, you can easily attach it to a claim or expense to expedite the reimbursement process.

To clarify for the purposes of this guide:

- Claims are simply reimbursement requests submitted for costs incurred when receiving eligible services.
- Expenses are used to track and manage your medical, dental, vision, prescription, and other potentially eligible expenses. Depending on your administrator's configuration, these expense items can be entered by you, or automatically populated and matched to your profile via an electronic feed from your carrier. Once entered, eligible expenses can be submitted for reimbursement, similar to claims. They can be submitted now, or at a later date of your choosing.



Submitting a claim

To enter a claim and request reimbursement, open the submit claim page and complete the form. Be sure to upload a receipt if you have one. You can click browse to navigate to the receipt file, or drag & drop. Click 'submit' to send the request to your administrator for processing.



Pay provider? *

✓ Yes ✕ No

Provider Name * Lahey Clinic

Send payment to your service provider

When entering a claim, you can choose to have reimbursed funds sent to you, or you can have payment sent directly to your provider on your behalf.

Provider Name * Dr. Smith

Address 1 * 123 Main St.

Address 2 Suite #2

City * Orlando

State * Florida

ZIP * 32801

Phone 444-555-6666

✓ SUBMIT ✕ CANCEL

Adding an expense for future payment

Similar to submitting a claim, to enter an expense, open the store an expense for future payment page and complete the form. Be sure to include a receipt if you have one.

Service Start Date * Feb 24, 2017

Service End Date * Feb 24, 2017

Claimant * NewApp Two

Provider Dr. Smith

Description flu shot

Billed Amount * \$ 200.00

Insurance Allowed Amount * \$ 175.00

Insurance Paid Amount * \$ 100.00

Paid Non-Reimbursable \$ 15.00

My Responsibility \$ 75.00

Reimbursed from My Accounts \$ 0.00

My Remaining Responsibility \$ 50.00

Comments

Upload Receipt BROWSE

DRAG & DROP your receipts here

Receipt.PNG

✓ SUBMIT ✕ CANCEL

- **Billed amount:** The full amount billed for the services provided.
- **Insurance allowed amount:** The maximum amount your health insurance plan will pay for the services provided (sometimes called the 'negotiated rate').
- **Insurance paid amount:** The amount covered by your health insurance plan.
- **Paid non-reimbursable:** The cost included in the insurance allowed amount that are for ineligible items or services.
- **My responsibility:** Any part of the insurance allowed amount that is not covered by your health insurance plan (calculated automatically).
- **Reimbursed from my accounts:** The amount reimbursed from your benefit accounts (calculated automatically, but when entering a new expense, this amount will always be \$0.00).
- **My remaining responsibility:** This is the remaining amount that you can submit for reimbursement.





Viewing claims and expenses

Once entered, claims and expenses can be viewed on the claims list page. From here, you can view claim statuses, attach receipts, and request reimbursement for eligible expenses.

Action Needed		
\$100.00	Eligible for Reimbursement	Claim: Date of Service: Oct 26, 2016 REQUEST REIMBURSEMENT
Approved/Paid/Submitted		
(\$32.99)	Paid	Claim: Date of Service: Nov 4, 2016 Date of Transaction: Nov 9, 2016
(\$43.99)	Paid	Claim: Date of Service: Nov 3, 2016 Date of Transaction: Nov 9, 2016
(\$54.00)	Paid	Claim: Date of Service: Nov 9, 2016 Date of Transaction: Nov 9, 2016
(\$8.00)	Paid	Claim: Date of Service: Nov 7, 2016 Date of Transaction: Nov 9, 2016
\$100.00	Submitted	Claim: Date of Service: Oct 26, 2016 ADD RECEIPT
Page 1 of 1		
Denied		
\$34.00	Denied	Claim: Date of Service: Nov 9, 2016 Date of Transaction: Nov 9, 2016

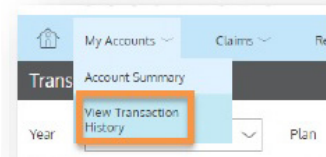
Resolving pending debit card transactions

If you swipe your benefit debit card for eligible products or services, you may be required to submit a receipt or other supporting documentation before the card transaction can be approved. To aid in resolving pending debit card transactions, you can take the following action:

Step 1. Navigate to the transactions page in the Participant Portal.

Step 2. Locate the pending transaction (using the search filters at the top of the page, if necessary).

Step 3. Click to expand the transaction, and click 'add receipt' to attach your supporting documentation to the transaction.



Your administrator will review the document you've submitted and will update the transaction accordingly.



Year: 2017 Plan: Dependent Care FSA (Curr) Type: ALL

Which transactions do you want to see? Select here

☒ Approved/Posted ☒ Pending/Processing ☒ Denied

SEARCH FOR TRANSACTIONS

(\$40.00)	FSA Pending	Card	Feb 27, 2017
Date Of Service	Feb 27, 2017	RECEIPTS	
Description	DR. SMITH	No receipts to display.	
Claimant	NewApp Two		
Account Type	DCA		
Plan Start Date	Jan 1, 2017		
Plan End Date	Dec 31, 2017		
Merchant Name	DR. SMITH		


ADD RECEIPT PRINT

Viewing and making updates to your user profile

To access and edit your user profile, click the username hyperlink on the right side of the navigation bar. From this page, you can:

1. Update your phone number and address
2. Change your password
3. Update your reimbursement method
4. Add a new dependent
5. Update an existing dependent

The image below shows where each item in the list above is located.



NewApp Two

Date of Birth
Jan 1, 1950

Employee ID
*****P002

Marital Status
None

Gender
None

Phone
555-444-1234

Email Address [edit](#) [delete](#)
hjones@alegeus.com

Address
1 Main Street
Beverly
MA, 00000
US

Alternate Address
40 Elm St
Orlando
FL, 32801
US

[EDIT PROFILE](#) **1**

[change password](#) **2**

[edit](#) **3**

Employer
New Mobile App One

SSN
XXX-XX-5678

Employee Status
New

Reimbursement Method
Direct Deposit

Eastern Bank

Account Number
****2356

Routing Number
***1798

Checking





Managing messages and alerts

The envelope icon in the navigation bar alerts you to any unread messages awaiting your review. Depending on your communication preferences and your group's setup, these messages could be anything from confirmation of an email address or password change, to notification that a claim you submitted has been received, to an alert that a card transaction was denied, to a wide variety of other messages.



Alerts				
<input checked="" type="checkbox"/> SMS	<input checked="" type="checkbox"/> Email	<input type="text" value="SEARCH FOR ALERTS"/>		<input type="checkbox"/>
	Feb 14, 2017	Password Change	Your password has changed	<input type="checkbox"/>
	Feb 14, 2017	EmployeeEmailAddressChangePartnerAlert	Email Address Changed	<input type="checkbox"/>
	Feb 14, 2017	DepositReceivedPartnerAlert	Contribution Received	<input type="checkbox"/>
Page 18 of 18 show all				

Click on an individual message to see the full text:

Alert Details

Feb 14, 2017 1:31 pm
noreply@yourtpa.com

Your password has changed

Administrator Name: Consumer Funding Solutions

Administrator Address: 10 Main Street
Beverly, MA 01915

Employer Name: Sample Group

Participant Name: John Tester

Password Changed

You have successfully updated your password information for accessing the Wealth Care Portal.

If you have any questions or concerns, please contact us at:
888-888-8989

Thank you,
WealthCare Demo Administrator

PRINT

CLOSE





Changing your message preferences

You can change whether or not you receive certain message types, as well as how you receive them from the communication settings page. This page can be accessed by clicking the sprocket symbol in the navigation bar.



You may choose, for each alert type, whether you receive it via mobile, email, both, or neither. Click 'save' when you are done editing your preferences. You can also use this page to update your email address, and to register your mobile phone for SMS text alerts

i The notifications below are available to you. Please define the delivery method for these notifications. If mobile number and/or email is not an available delivery method, please **make sure you have an active email address and registered mobile number** listed on the right.

	mobile	email	both	none
Account Balance Alert	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Account Deductible Met	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Billing Address Change	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Card Mailed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Card Transaction Approved	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
Card Transaction Denied	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Completed HSA Payment Notice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Deposit Received	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enrollee Welcome Email	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Failed HSA Payment Notice	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Manual Claim Entered	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Password Change	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Year End Reminder	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

SAVE

Phone Registration Status

11234567891

Pending

i You will receive a text to the number shown above asking you to complete the registration process. Once registered, your phone's status will show as Registered instead of Pending. If your number remains in Pending status or if you never receive the registration text, please contact support for assistance in resolving the issue. Once registered, text BAL to 97487 to receive your current year account balances. You can opt-out at anytime by texting STOP. For help with text commands, please text HELP to 97487.

