

SISC Flex Plan (Participant FAQ)



General

How to register on the Participant Portal

Access our participant registration page by visiting <https://app.naviabenefits.com/app/#/signup>. To register, enter your employer code, first initial, last name, date of birth, email address, and choose a username. Answer security questions and once you have reviewed the terms and conditions, click submit. A temporary password will be emailed to you. After you have logged in with that temporary password, you will be asked to change your password. When your password has been changed, you will be fully registered on the participant portal and will have access to your full account information, plan documents, and the online claim submission tools.

Trouble registering?

If you're having trouble registering, the most common problem is that your benefit information is not yet set up in our system or that the information provided in our system by your employer does not match the information you entered.

Common mismatches can include a different email address (work email vs. personal email), slightly different last name (Smith vs. Smith Jr.), or birth date. To confirm your correct registration information and assistance registering, please contact Navia's customer service team at: (425)452-3500, toll free (800)669-3538, or customerservice@naviabenefits.com

Who do I call if I have questions?

If you have any questions regarding your Health Care, Limited Purpose Health Care, or Dependent Care Expense accounts, please contact Navia's customer service team at: (425)452-3500, toll free (800)669-3538 or customerservice@naviabenefits.com

Where is Navia Benefit Solutions located?

Navia Benefit Solutions is located in Bellevue, WA. 100% of Navia's employees work in the same office, no offsite call centers, no outsourcing.

Premium Only Plan (POP)

When do I complete a one-time enrollment election form to participate in the (POP) plan?

If your employer requires you to pay a share in the medical, dental, or vision group premiums you'd want to complete an enrollment form.

Health Care /Limited Purpose Health Care Expense Account

Can I cover my domestic partner under the accounts?

Generally, no. You can only cover your domestic partner under the accounts if your domestic partner is a taxable dependent of yours.

Whose expenses are eligible under my account?

The account covers you, your spouse and any eligible dependents. Even if your spouse and dependents are on a separate medical insurance plan, their expenses are still eligible under your account.

My spouse's employer also offers an IRC Section 125 Plan. How does this affect my enrollment in a SISC Flex Plan?

The Health Care and Limited Purpose Health Care Expense accounts are unaffected. Both you and your spouse could contribute the maximum to the plan and each expense account can cover both of your expenses. For example, if you both elected \$2,600.00 in each account, you would have a total of \$5,200.00 dollars available.

The Dependent Care Expense account is a \$5,000.00 calendar year household maximum allowing you to set aside funds based on the following guidelines:

- \$5,000 if you are married filing jointly,
- \$5,000 if you are single, or
- \$2,500 if you are married filing separately

If you each have a Dependent Care Expense account, be sure to follow the guidelines above and not exceed a \$5,000.00 election in a calendar year.

Can I change my Health Care or Limited Purpose Health Care Expense account election amount during the year?

You cannot change your election amount during the year unless you experience a qualifying event. Common qualifying events include the addition or subtraction of a dependent through marriage, birth, adoption, death, or divorce.

MyNavia Debit Card

Why do I have to submit documentation when I use the Navia Benefit Solutions card?

The IRS requires that all transactions through a Health Care or Limited Purpose Health Care Expense account are documented and verified to be eligible expenses. The Navia Benefits Card has the technology to identify certain expenses as eligible (such as Copays and Prescriptions). Card transactions for other types of expenses may require documentation to verify the expense as eligible.

Why was my card declined?

A card transaction can be denied at a merchant for several reasons:

- The card is suspended due to an unsubstantiated prior transaction.
- The card has not been activated.
- The card swipe is more than the available balance.
- The purchase is being made at a merchant that is not an approved vendor.
- The merchant entered incorrect card information.

If you need assistance with your card, please contact customer service at (425)452-3500, toll free (800)669-3539, or customerservice@naviabenefits.com

Dependent Care Expense Account

Can I make changes to my Dependent Care Expense account election amount?

You're unable to make any changes to your election unless you experience a qualifying event. However, in addition to the normal list of qualifying events, there are some special events exclusive to the Dependent Care Expense account:

- A change in your day care costs, such as a rate decrease or increase, or receiving free day care.
- Your dependent ceases to satisfy the eligibility requirements.

Health Care/Limited Purpose Health Care/Dependent Care Expense Accounts

Once I enroll, do I have to re-enroll each year?

Yes. Re-enrolling each year allows you to reassess your yearly expenditures and increase or decrease your election amount accordingly.

Can I set up direct deposit for reimbursements?

Yes. You can provide your banking information for direct deposit at any time through your participant account.

When will I receive a claim reimbursement?

Health Care and Limited Purpose Health Care Expense account reimbursements are usually processed weekly. Dependent Care Expense account reimbursements are usually processed monthly after the dependent has been cared for and contributions have been posted to your account.

What happens if I retire or terminate employment with the employer mid-year?

Under IRS regulations you would be able to submit claims for reimbursement of expenses incurred prior to your plan termination date. Expenses incurred after the termination date are not eligible for reimbursement.

What happens if I have money remaining in my account at the end of the plan year?

Your employer's plan has the Grace Period feature to help reduce your risk of loss. The Grace Period provides you with an additional 2.5 months to your plan year to continue to incur expenses against your account balance.

The Expense accounts are subject to the "Use-It or Lose-It" rule. This means that if you do not use all of your annual election within the plan year or grace period, the remaining funds are forfeited.