

Participant Welcome Packet

Welcome

Dear Participant,

Welcome to National Benefit Services!

Your employer has provided information to NBS to enroll you in your employer-sponsored Cafeteria Plan.

Once enrolled in our system, you will receive a welcome email with a link to register your account on the NBS Web Portal.

Please note: As a first-time NBS participant, you must create and register your online account at mynbsbenefits.com. This step is essential for you to see and manage your benefits and allows you to connect to the NBS mobile app.

For additional questions, see the FAQ in this packet.

If you have any other questions about your benefit account, please email the NBS Service Center at service@nbsbenefits.com or call 855-399-3035.

Sincerely,
National Benefit Services, LLC

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Benefit Summary

Your employer is offering the following benefits to their eligible employees. If you have any questions regarding the benefits, please reach out to your HR department.

Health Flexible Spending Account (FSA)

A health flexible spending account (FSA) is a type of benefit account that provides the account holder with specific tax advantages. An FSA is sponsored by an employer for an employee. The account allows employees to contribute a portion of their regular earnings pretax to pay for qualified medical, vision, and dental expenses.

Special Considerations

Full election amounts for the FSA are available as of the plan start date. FSAs are "use-it-or-lose-it" plans. All the money set aside in an FSA must be used by the end of the plan year. However, under IRS guidelines, an employer can offer the following as part of their plan specifications:

- Runout Period: Employers can offer a runout period after the plan year to allow participants to submit claims dated prior to the end of the plan year. A runout period can be combined with a grace period or carry over as noted below.

One of the following two options: (See your Summary Plan Description (SPD) for plan specifications)

- Grace Period: Employers can offer a grace period after the plan year ends of up to two and a half months (75 days) to allow participants to continue spending their available balance. Any unused amounts after the grace period and the runout period (if offered) are forfeited.

-OR-

- Carry Over: The employer may allow a Carry Over amount up to the current IRS guidelines of unused dollars remaining at the end of the plan year that can be moved to the new plan year after the runout period has ended. Any unused amounts above the carryover amount are forfeited. Allowing carryover on the benefit does not impact the annual election amount allowed for your employees during open enrollment.

DCAP (Dependent Care Assistance Program)

Dependent care benefits are sponsored by an Employer. Participants authorize their employers to withhold a specified amount from their paychecks each pay period to use towards dependent care expenses. The participant pays their dependent care costs out-of-pocket and then applies for reimbursement by submitting a claim either online or over the mobile app, or they can request a continual reimbursement of reoccurring charges. Proof of payment is required with the claim submission. Dependent Care benefit funds are not available up front, a contribution report will be required for each payroll. This will be explained during the kickoff call.

Special Considerations

- Under IRS guidelines, an employer can offer a grace period after the plan year ends of up to two-and-a-half months (75 days) to allow participants to continue spending their available balance. This can be combined with a runout period that is equal to or more than the allowed number of grace period days. (See your Summary Plan Description (SPD) for plan specifications)
- Terminated participants may be allowed to submit claims for expenses incurred prior to their termination date. The Employer may allow a runout period to start on the day of termination or at the end of the plan year.
- Before setting up a dependent care FSA, compare its potential tax benefits with the child and dependent care tax credits.

NBS Tools

NBS encourages you to understand and manage your benefits. This packet provides materials and online tools to help you achieve this goal.

(SPD) Summary Plan Description
The SPD is a summary of the Employer's plan. It is built for you and is a less complicated explanation of the employer benefits. Your Employer must provide you with a copy of the SPD within 90 days of the plan start date, either directly or by other means outlined by the Employer.

NBS Web Portal:
When you enroll in benefits with NBS, you receive a welcome email. This email provides instructions on registering your account on the NBS Web Portal. There are many advantages to completing this step.

- Access to your balances.
- Adding dependents.
- Issuing additional cards for your spouse and dependents (if applicable).
- Managing and submitting claims.
- Locating medical providers.
- If you have an HSA benefit, you can add a bank account to make contributions outside of payroll.
- Adding a direct deposit account for reimbursement of manual claims.
- Access to the NBS Mobile App.

NBS Mobile App
After registering your account on the NBS Web Portal, you can download the NBS Mobile App. This tool is effective for those who are on the go—the mobile app Shares user authentication with the NBS portal. Registered users can download the app and log in immediately to gain access to their benefit account.

NBS Smart Card (if offered)
Our convenient NBS Smart Card allows you to avoid out-of-pocket expenses, cumbersome claim forms, and reimbursement delays. You may also utilize our web portal's "pay a provider" option.

NBS Service Center
NBS offers a dedicated service center to help with your individual needs, including accessing your account or requesting new debit cards.

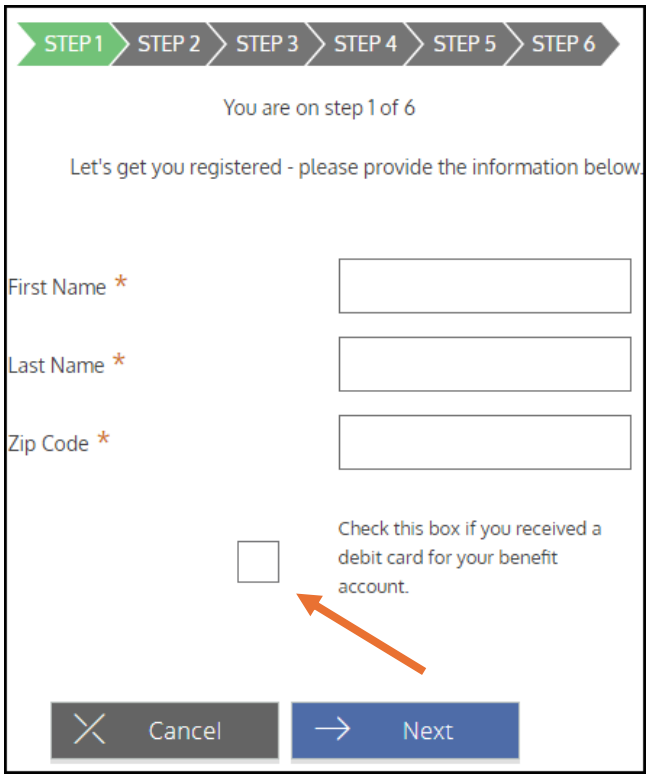
FSA Store/HSA Store:
You have access to an online store with the largest selection of guaranteed FSA-eligible products, with zero guesswork. www.fsastore.com/nbs .

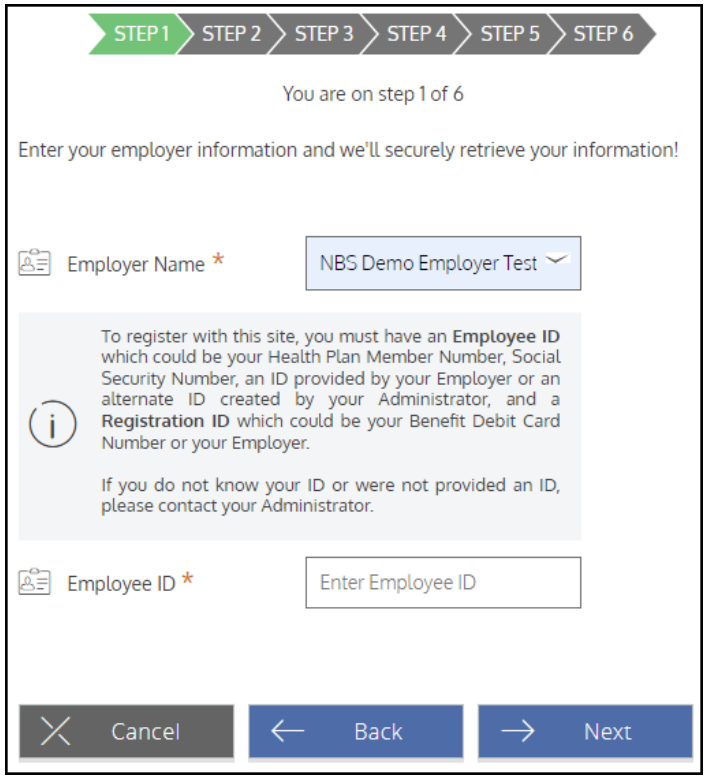
NBS Web Portal Instructions

- Go to www.mynbsbenefits.com and select *register* in the upper right corner.



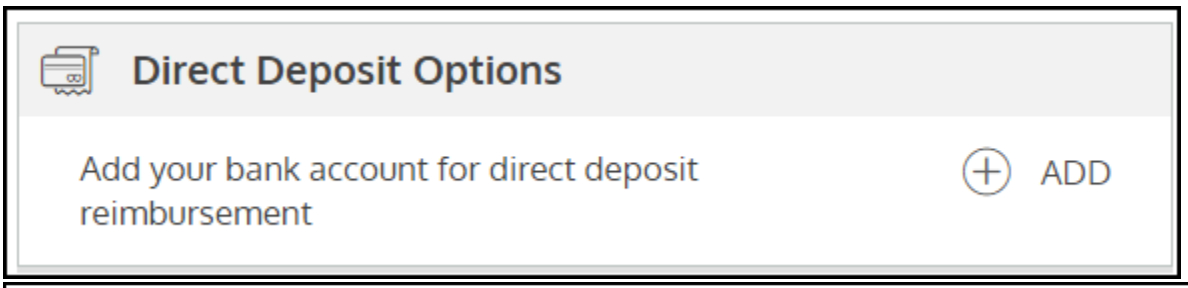
- Step 1: Complete the required fields on the registration form.
  - Enter first name, last name, and zip code.
  - If you have not received an NBS Smart Card (debit card), you do not need to check the box.
  - If you have received a debit card, check the box and enter your debit card number in the box.
  - On the following prompt, enter your employer's name and select the correct employer from the drop-down menu. Then, enter your employee ID.
- Step 2-6: You must verify your account with a code sent via email or text. Then, create a user profile and security preferences.

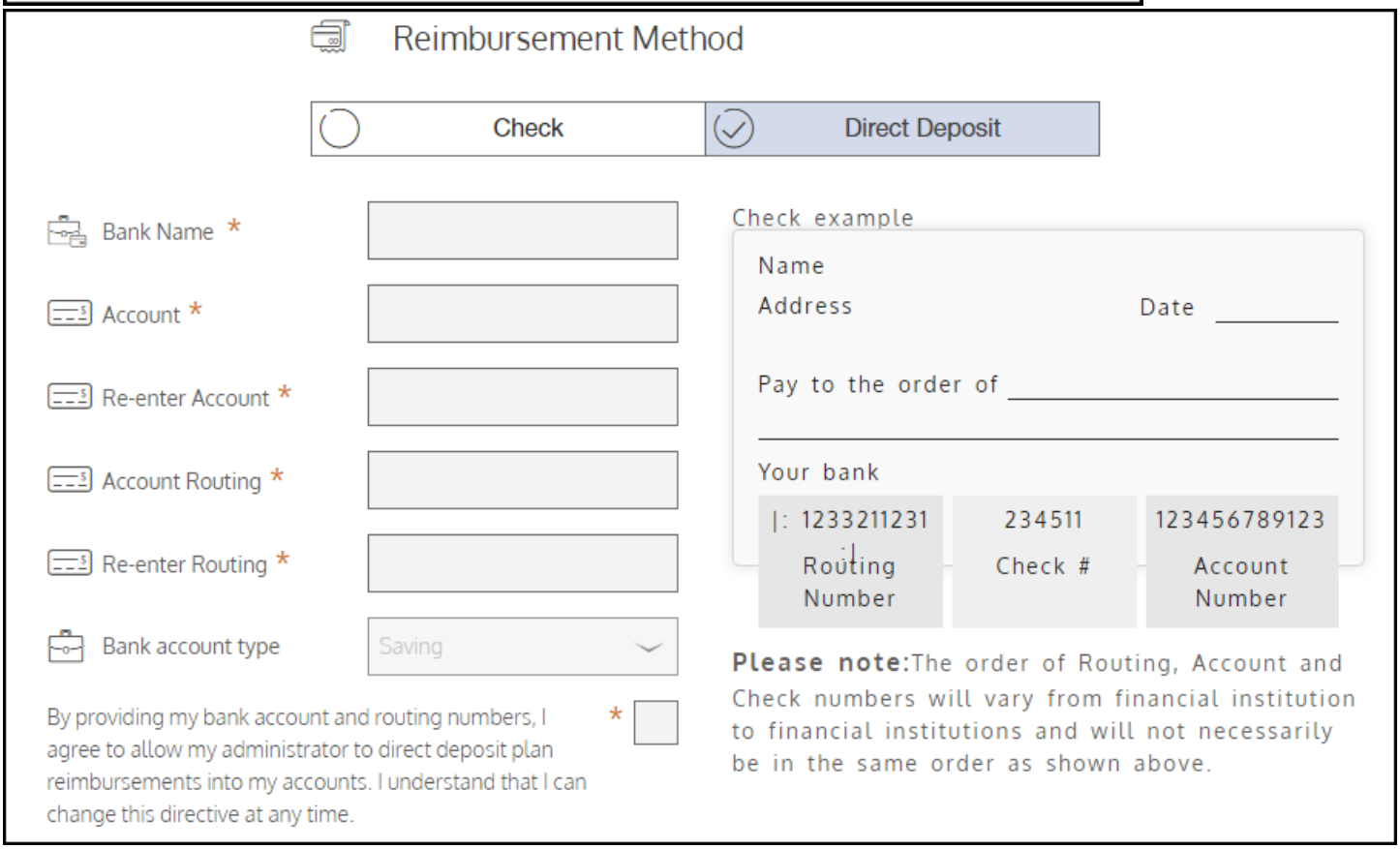




Setting up Direct Deposit

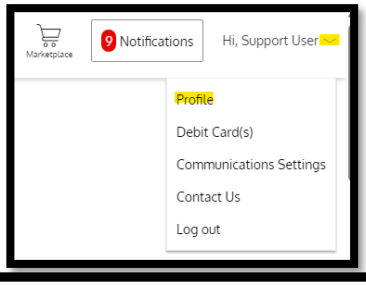
- Select *Add* under Direct Deposit Options on the Personal Dashboard, then fill in your banking information and hit *Save*.

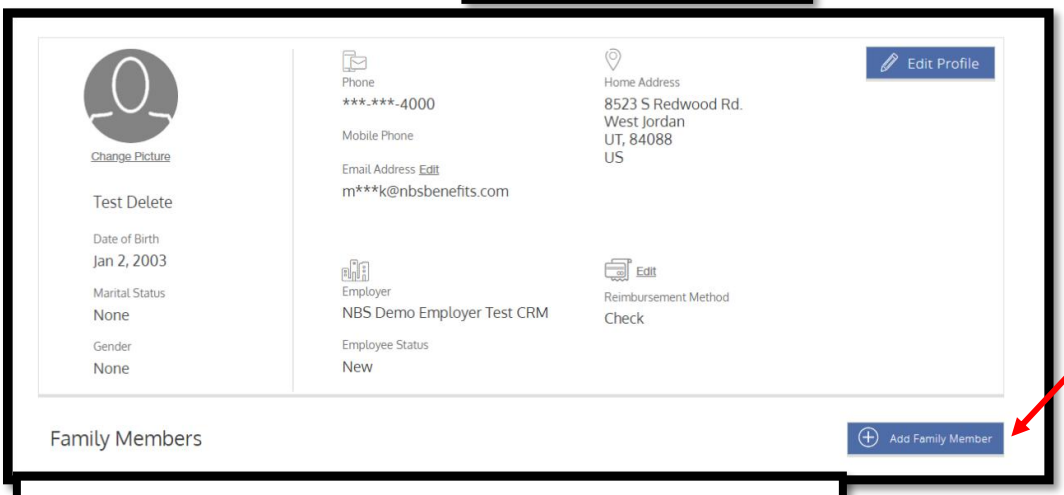




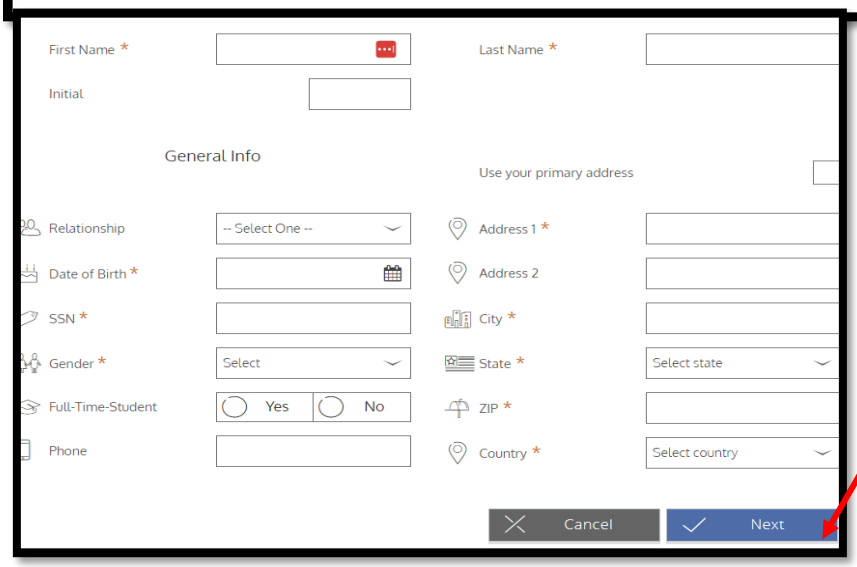
Add Dependents

While on your NBS Web Portal, open your Profile page.

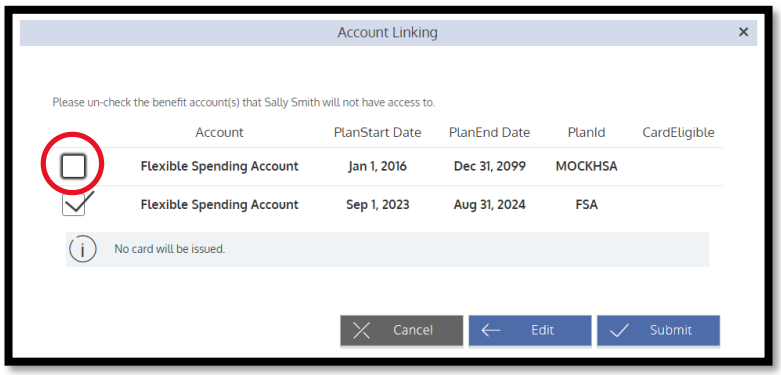




On the bottom of your profile page, click on *Add Family Member*.



Complete all required fields and click *Next*.

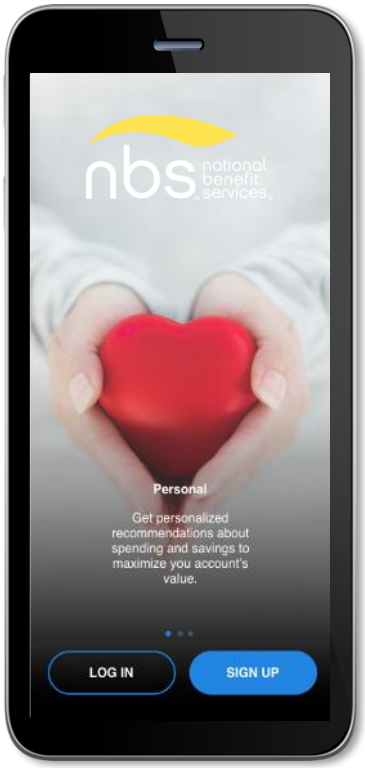


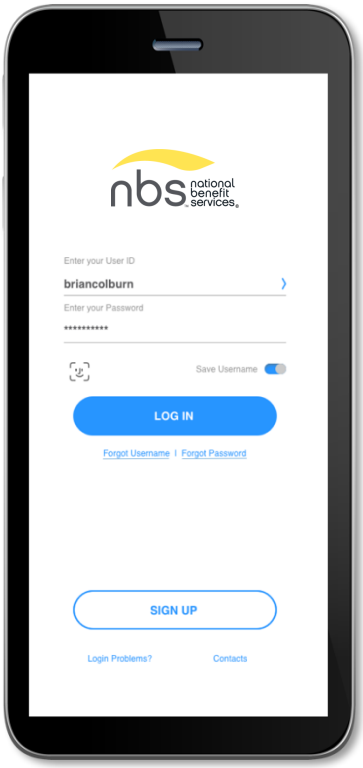
Uncheck any benefits your Dependent should **NOT** have access to and click *Submit*.

NBS Mobile App

Getting Started

- Your login credentials for mynbsbenefits.com and NBS Mobile App are the same. After downloading the application, you will see a landing page with options for *LOG IN* and *SIGN UP* as shown in image to left.
- If you already have a mynbsbenefits.com or NBS Mobile App user ID, you can enter it and tap log in. You may be asked some security questions and then be prompted to enter your password.
- If needed, you can retrieve a forgotten user ID from the sign-in screen and reset a forgotten password from the password entry screen.
- If this is your first time logging into both mynbsbenefits.com and NBS Mobile App, you must register before you can access the application.
- After tapping the ***SIGN UP*** button on the home screen, you will be guided through the registration steps.
- For more information, refer to our *Smart Account User Guide*.





Sample List of Eligible Items

These are specific to HSA/FSA benefits, and Limited FSA for Vision and Dental expenses, (some HRAs and Lifestyle accounts may be applicable)

Medical Expenses

- Acupuncture
- Addiction programs
- Adoption (medical expenses for baby birth)
- Alternative healer fees
- Ambulance
- Body scans
- Breast pumps
- Care for mentally handicapped
- Chiropractor
- Copayments
- Crutches
- Diabetes (insulin, glucose monitor)
- Eye patches
- Fertility treatment
- First aid (e.g., bandages, gauze)
- Hearing aids & batteries
- Hypnosis (for treatment of illness)
- Incontinence products (e.g., Depends, Serene)
- Joint support bandages and hosiery
- Lab fees
- Menstrual Products
- Monitoring device (blood pressure, cholesterol)
- Physical exams
- Wheelchair
- Non-prescription medicines or drugs (vitamins/supplements without a prescription are not eligible)
- Pregnancy tests
- Prescription medicines or drugs
- Psychiatrist/psychologist (for mental illness)
- Physical therapy
- Speech therapy
- Vaccinations
- Vaporizers or humidifiers
- Weight loss program fees (if prescribed by physician)

Dental Expenses

- Artificial teeth
- Copayments
- Deductible
- Dental work
- Dentures
- Orthodontia expenses
- Preventative care at dentist office
- Bridges, crown, etc.

Vision Expenses

- Braille - books & magazines
- Contact lenses
- Contact lens solutions
- Eye exams
- Eyeglasses
- Laser surgery
- Office fees
- Guide dog and upkeep/ other animal aid

Items that generally do not qualify for reimbursement

- Personal hygiene (e.g., deodorant, soap, body powder, sanitary products. Does not include menstrual products)
- Addiction products**
- Cosmetic surgery**
- Cosmetics (e.g., makeup, lipstick, cotton swabs, cotton balls, baby oil)
- Counseling (e.g., marriage/family)
- Dental care - routine (e.g., toothpaste, toothbrushes, dental floss, anti-bacterial mouthwashes, fluoride rinses, teeth whitening/bleaching)**
- Exercise equipment**
- Haircare (e.g., hair color, shampoo, conditioner, brushes, hair loss products)
- Health club or fitness program fees**
- Homeopathic supplement or herbs**
- Household or domestic help
- Laser hair removal
- Massage therapy**
- Nutritional and dietary supplements (e.g., bars, milkshakes, power drinks, Pedialyte)**
- Skin care (e.g., moisturizing lotion, lip balm)
- Sleep aids (e.g., snoring strips)**
- Vitamins**
- Weight reduction aids (e.g., Slimfast, appetite suppressant)**

***Portions of these expenses may be eligible for reimbursement if they are recommended by a licensed medical professional as medically necessary for treatment of a specific medical condition.*

Manual Claim Submission Guide

With your NBS benefit, paying out of pocket for your qualified medical expenses does not have to be inconvenient. Our simple processes and fast claims adjudication mean you can file within seconds and may receive your reimbursement in as little as 3 business days.

Methods of Filing

- NBS Web Portal – Log into your NBS Benefits account, where you can file the claim online.
- Your Mobile App—Once you have established an account through the NBS Web Portal, the same username and password grants you access to our mobile app. Filing a manual claim is as easy as taking a picture of your EOB or receipt, filling in a few transaction details, and submitting the claim.
- Email – you may complete and sign a manual claim form, then email it to us atservice@nbsbenefits.com.
- Fax—You may complete and sign a manual claim form and fax it to us at (844) 438-1496.
- Postal Service: You may complete and sign a manual claim form and send it to us at NBS Claims, P.O. Box 219393, Kansas City, MO 64121-9393.

Manual forms must be completed according to the instructions at the top. They must be itemized, signed, and accompanied by the appropriate supporting documentation. If manual claim forms are received incompletely or without proper documentation, we will contact you to request the necessary items, and your reimbursement will be delayed.

Claim reimbursements are processed daily and completed within two business days of receipt. Please allow 5-7 business days to receive your reimbursement check. Sign up for direct deposit through your online account to receive your funds faster.

If you have questions regarding your Benefit or claim reimbursement, please get in touch with our Service Center to speak with a Customer Representative.

Service Center

Our phone systems have recently been updated to better support all our participants nationwide. Below is an overview of what to expect when contacting NBS at 855-399-3035.To ensure your security, we take every step to protect your account. Please have the following information ready when you call:

- Social Security Number (SSN)
- Date of Birth (DOB)
- Zip Code

You may be asked for additional information during your call for further identity verification. This is done to safeguard your personal details and protect your account. When you call into our service center, you will hear the following information: *All calls are recorded for quality assurance and security purposes. If you know your party's extension, enter it now.*

Main Menu:

- Flexible Benefits – Press 2
- 401k ERISA – Press 3
- COBRA – Press 4
- 403b/457 Non-ERISA – Press 5
- Employer Invoices – Press 6

Flexible Benefits Menu Options

- For Spanish: Press 9
- For English: Stay on the line
    - Information needed: SSN or Card Number, DOB, and Zip Code (numerical form)
    - Your account balance will be provided automatically
- To get further details, choose from the following:
    - Repeat balance – Press 1
    - Claims – Press 2
    - Card transactions – Press 3
    - Report a Lost or Stolen card – Press 5
    - Card PIN Information – Press 6
    - Speak to a representative – Press 0

401k ERISA Menu Options

- For Active 401k Employer information: Press 3
- For Participant related questions: Press 4
- To Set up a new plan: Press 5

COBRA Menu Options

- For COBRA Questions: Press 2
    - For English: Press 1
    - For Spanish: Press 2

403b/457 Non-ERISA Menu Options

- If you are an Agent or Advisor, please visit our website.
- To speak with an agent: Press 2

Employer Invoices Menu Options

- For Accounting Department inquiries: Press 2
- Retirement: Press 2
- Welfare: Press 3
- Cafeteria Claims Paid Billing: Press 4

Additional Tips

Please note that wait times may fluctuate based on seasonal factors and call volume.
We appreciate your understanding and cooperation as we work to provide you with the best service possible. Thank you for calling, and we look forward to assisting you!

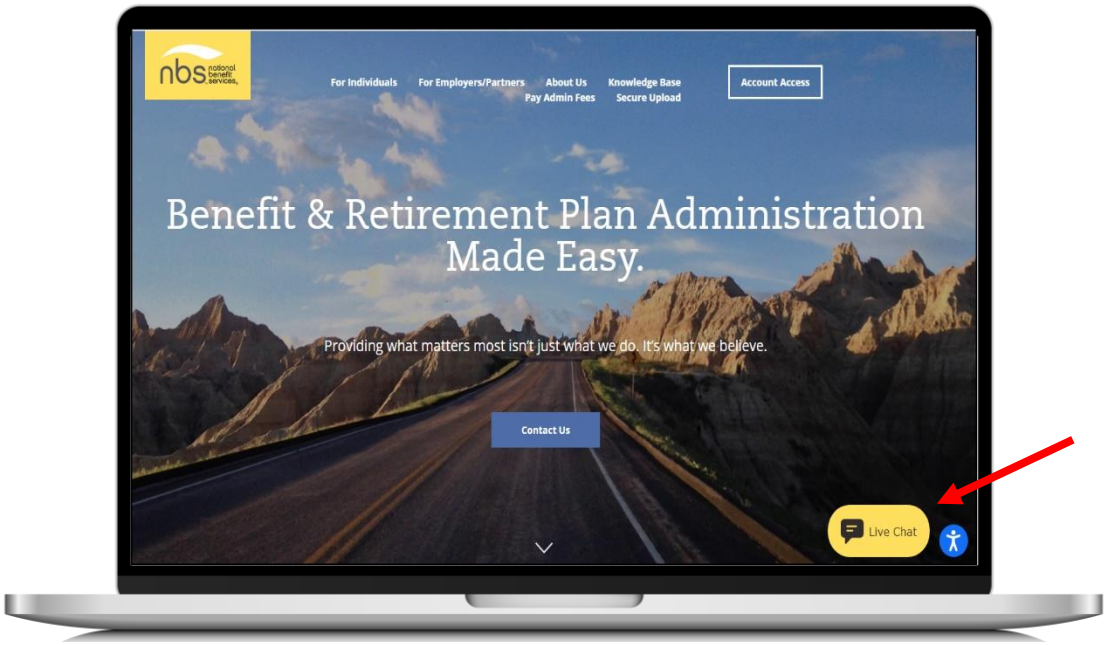
NBS Website Chat Feature

For those who prefer, we also offer an alternative option to engage with a live agent through the chat feature on our website: https://www.nbsbenefits.com/

Identity Verification

To ensure your security, we take every step to protect your account. Please have the following information ready when you connect:

- Full Name
- Social Security Number (SSN)
- Name of Employer (of account)



FAQ

General Questions:

- What is the Summary Plan Description (SPD)? The purpose of the SPD is to briefly describe the expenses that qualify for reimbursement and provide an outline of other important information concerning the Plan, such as the rules you must satisfy before you can elect the FSA and the laws that protect your rights. This SPD describes the basic features of the FSA, how the FSA operates, and how you can get the maximum advantage from the FSA.
    - Where can I obtain one? Your Employer provides the SPD. If you do not receive one, contact your HR department.

- What happens if I terminate my employment?
    - Terminated Employees, including retirees, shall cease being a participant. Based on the plan specifications, you may have a predetermined number of days after termination to request reimbursement for expenses incurred up to your termination date unless you enroll in COBRA. (Only FSA and some HRA benefit plans are eligible for COBRA).

- What is the FSA/HSA Store? Health-E Commerce is a consumer health and wellness online retailer comprised of four brands: FSA Store, HSA Store, WellDeserved Health, and Caring Mill. You can use the FSA/HSA Store to identify eligible items and purchase them at a discounted price. The store can be accessed through the Mobile App.

- What is the Mobile App, and how do I use it? (see NBS Tools and included Flyer for information)

NBS Web Portal Questions:

- I can't register my online account.
    - Please make sure you follow the instructions provided in the welcome email and use the correct login credentials.
    - If you receive an error message, contact the NBS Service Center. Also, verify that your demographic information is correct.

- I can't log in to my online account.
    - Reset password option—Use this if you are not entirely locked out. This process should have been set up when you registered your NBS Web Portal Account. Authorization is required using a cell phone rather than a landline.
    - If locked out, contact the NBS Service Center. (See Service Center Information)

- How do I add a dependent to my online account? (See Add a Dependent Instructions section)
- How do I add a direct deposit to my online account? (See Add Direct Deposit Instructions section)
- Can I change or update my demographics in the NBS Web Portal? If the Employer allows, you can update your demographics in your online portal. You should also notify your HR department of any changes.

NBS Smart Card Questions:

- What do I do if I don't receive my NBS Smart Card? You can order a replacement card if you have registered your account in the NBS Web Portal. If not, please contact the NBS Service Center. (See Service Center Information)
- Do I get a new card every year? No. The NBS Smart Card has an expiration date. A new card is issued 30 days before that date

- Can I get a card for my spouse and dependents? Yes, If the benefit allows cards and you have registered your NBS Web Portal, they can order additional cards as needed.
- What do I do if my card is lost or stolen? If you have registered your account in the NBS Web Portal, you can report your card as stolen and order a replacement. If not, please contact the NBS Service Center. (See Service Center Information)
- What if I have more than one benefit that uses a card? The NBS Smart Card allows employees to carry a single card to manage all your pretax reimbursement accounts, including FSA, LPFSA, HSA, HRA, and Commuter plans. The cards associate the correct benefit with the claim and the You.
- What if my card is denied? See FAQs on Claims

Benefit Questions:

- Where can I use my funds? Depending on the type of benefit, you may use your funds at any approved merchant or Service Provider (such as a medical office) for eligible expenses.
- Can I change my benefit(s) during the plan year? Changes to elected benefits require a qualifying event to meet IRS regulations. A qualifying event would include a change in marital status, adoption or birth of a child, change in employment status, or death. The Employer must approve all changes to justify eligibility.
- What happens if I enroll in the wrong benefit? As the responsible party for your benefits, it is imperative that you are aware of your elections. If there are errors, you must notify your Employer immediately. Your Employer will also need to notify NBS to correct the information in our system.
- What is the difference between an HSA and an FSA benefit? The Health Savings Account (HSA) is often compared with the Flexible Savings Account (FSA). While both accounts can be used for medical expenses, some key differences exist between them. For example:
    - While HSA funds are owned by the participant, FSA funds are "use it or lose it." Barring grace or carryover, unused FSA funds are forfeited once the year ends.
    - Participants enrolled in an HSA can change their contribution amount anytime during the plan year. If enrolled in an FSA, you elect an amount up to the IRS maximum, which can only be changed at the beginning of the following plan year or if a qualifying event takes place.

FSA/DCAP

- When can I start using my FSA funds? FSA funds are available on the plan start date (See your SPD for your specific plan start date.)
- What is a Runout Period? The Runout Period is the time allotted after the Plan Year end date for you to continue submitting claims on expenses incurred during the Plan Year. (See your See your Summary Plan Description (SPD) for the specific amount of time allotted by your employer.)
- How does carryover work? As an Employer, you may allow carryover up to the IRS Maximum on an FSA or LFSA benefit. (See benefit section for more details). An employer cannot offer Grace and carryover at the same time. The IRS may adjust the carryover limit annually for cost of living. (See your Summary Plan Description (SPD) for the specific Carryover amount allotted by your employer.)
- How does a Grace Period work? As an Employer, you may offer a grace period of up to 75 days for an FSA, LFSA or Dependent Care benefit. A Grace Period is a pre-determined number of days after the end of the plan year where you can continue to incur expenses towards the available balance from the prior year. All remaining balances are forfeited after the Grace Period and Runout Period

have expired. (See the benefits section in this packet or your Summary Plan Description (SPD) for the specific amount of time allotted by your Employer.)

- Why is my rollover not in my account right after the plan year ends? If your Employer elects to allow Carry Over (also known as Roll Over), your balance after all claims have been processed will be "rolled" into the new plan year after the runout period has expired.
- Why can't I use my Dependent Care or Commuter funds? Dependent Care and Commuter funds are based on your contributions. Employers submit a contribution report to NBS for each payroll. Once the report has been received, the funds will be posted to the benefit account within 24 hours. Contact your HR department if your funds are unavailable after that time frame.
- Why can't I use my Flex Card for my Dependent Care expenses? Due to the type of eligible expenses and the fact that most daycare providers or adult care providers need the correct merchant codes in your system, Flex Benefit Cards will not work. All Dependent Care Claims require manual submission. You can submit claims through the Mobile App or the NBS Web Portal Online.

Claims Questions:

- How do I submit a manual claim? (see Manual Claim Submission Guide)
    - Manual option: Through your online account.
    - Mobile option-(see included flyer)
    - Dependent Care Continual Reimbursement. Completing this form will allow you to set up automatic reimbursements each month during the calendar year for your dependent care expenses. If you are interested in Continual Reimbursement, contact your HR department.
- What is Claim Substantiation or Supporting Documentation?
    - Substantiation is the act of showing something to be true, or of supporting a claim with facts.
        - Substantiation includes the date of service, description, and cost of the item,
        - Some claims require an Explanation of Benefits (EOB) from the insurance carrier.
    - Why am I asked to provide it? The IRS requires claim substantiation to approve claim payment.
        - It is recommended that you save your receipts for all claims, even those from Flex Card charges.
    - What if I do not have it? Without substantiation, your claim may be denied.